

QUEENSLAND MINING INDUSTRY HEALTH AND SAFETY CONFERENCE

HEALTH REPORTING IN A MULTINATIONAL RESOURCES COMPANY DR. P SHANAHAN VICE PRESIDENT HEALTH BHP BILLITON

BHP Billiton is the world's largest diversified resources company with more than 35,000 employees and operations on every continent. The scope of business apart from significant mining operations includes petroleum, with offshore facilities and onshore gas production, and a range of refinery and smelting operations for aluminium, chrome, manganese and nickel. Mining operations are focused on coal, iron ore, copper, chrome, bauxite, manganese, nickel, mineral sands and diamonds. Consequently a vast range of potential adverse health exposures exist throughout the company with operations situated in regulatory environments that vary considerably.

Corporate reporting for health was significantly upgraded for BHP Billiton during the full year 2003. A primary purpose for corporate reporting is to track performance towards targets for health. Health targets for BHP Billiton are strongly focused on lead indicators of exposure with secondary targets for lag indicators of occupational illness prevalence and incidence. Therefore, to assist meaningful corporate reporting on health indices it was necessary to develop and implement standardised occupational exposure limits. These standards also include direction on sampling and analysis processes to ensure validation of data.

The integration of health reporting was aligned with existing HSEC processes. Monthly reporting occurs for safety performance throughout the company and for higher level incidents relating to health, environment and community. The process of reporting has been set up on a company wide internet based program known as First Priority Enterprise. It was determined that health reporting should be conducted on a six monthly basis. At this level it would be possible to capture evolving issues in health during the reporting year, particularly in relation to shorter latency conditions. In terms of data required there will be a transitional period of building a higher level of detail and sophistication over a two year period, particularly in relation to occupational hygiene data. This will allow sites to adequately capture and organise data into a more formalised structure across the company. The aim is for all operations to collect occupational hygiene data through homogeneous exposure groups.

The data being collected is aligned to the company health targets. Currently these targets are:

- All sites to complete a baseline survey on occupational exposure hazards and establish an associated monitoring and health surveillance program by 30 June 2003
- Reduction of occupational exposures below internationally accepted limits by 30 June 2004 and a 20% reduction in incidence of occupational disease by 30 June 2007

Reporting for year 2003 has therefore focused on performance to the initial target of completion of the baseline exposure survey and medical surveillance program and also included the collection of baseline data on occupational exposure and occupational illness. Occupational exposure data will be aligned to occupational exposure limits derived from leading authorities. Significant exposures existing in the company will be further investigated through company position statements which will lead to the development of a final exposure limit based on thorough review of available literature from global authorities. Reporting of occupational exposures is more heavily weighted toward leading indicators as follows:

- Status of baseline exposure survey
- Medicals required / completed
- Employees potentially exposed > 85 dBA TWA
- Employees potentially exposed at 50 – 100% of the occupational exposure limit / up to three significant exposures involved
- Employees potentially exposed at > 100% of the occupational exposure limit / up to three significant exposures involved
- PPE compliance % / Existence of a formal PPE audit program

Reporting of occupational illness data is focused on the major categories of illness pertaining to our operations. OSHA criteria are used as the definition for occupational illnesses. Illness data is a lag indicator. Categories reported are as follows:

- Prevalence of the specific occupational illness (Total active cases on site)
- Incidence of the specific occupational illness (New cases diagnosed during the reporting period)
- Retirements due to occupational illness

As a consequence of data received several initiatives have been set in place. This includes direct attention to operations with specific occupational illness incidence of concern, development of a standard PPE compliance auditing guideline for use globally and work with specific operations through provision of guidance and resources to progress the baseline exposure survey.

In summary the development of meaningful corporate reporting requires a strong link for this data to defined health targets that operate throughout the company and are linked to relevant management KPI's. The data should be strongly focused on lead indicators that in particular measure exposure indices. Data must be linked to standardised measures and definitions that are used by all operations and supported by appropriate Corporate based guidelines when required. Reporting processes should be linked to systems available for other components of HSEC and periods of reporting allowing timely capture of data to initiate actions.