

APPENDIX C – PRO-FORMA REQUEST FOR COSTING AN ELECTION COMMITMENT¹

Name of policy	National Dust Diseases Register
Person requesting costing (Prime Minister/Leader of the Opposition/Leader of a minority party):	Prime Minister
Date of public release of policy:	30 April 2019
Date of request to cost the policy:	9 May 2019
Summary of policy (please attach copies of relevant policy documents):	The Coalition will invest \$1.6 million over two years to establish a National Dust Diseases Register
Intention of policy:	The register would contribute to a national approach for the prevention, early identification, control and management of dust diseases in Australia.
Certification that this, or a substantially similar costing request, has not been submitted to the Parliamentary Budget Office	This, or a substantially similar costing request, has not been submitted to the Parliamentary Budget Office
Description of policy (please note that, where the request to cost a proposal differs from the announced policy, the costing will be on the basis of information provided in the costing request)	
What are the key assumptions that have been made in the policy including:	
Is the policy part of a package? If yes, list and outline components and interactions with proposed or existing policies.	No
Where relevant, is funding for the policy to be demand driven or a capped amount?	Capped
Will third parties (for instance the States/Territories) have a role in funding or delivering the policy? If yes, is the Australian Government contribution capped, with additional costs to be met by third parties, or is another funding formula envisaged?	No
Are there associated savings, offsets or expenses? If yes, please provide details.	No

¹ An electronic version of this pro-forma can be found at www.electioncostings.gov.au/templates.

Description of policy (please note that, where the request to cost a proposal differs from the announced policy, the costing will be on the basis of information provided in the costing request)

What are the key assumptions that have been made in the policy including: (continued)

Does the policy relate to a previous budget measure? If yes, which measure?	No
If the proposal would change an existing measure, are savings expected from the departmental costs of implementing the program? Will funding/cost require indexation? If yes, list factors used.	Not applicable
What are the estimated costs each year? Are these provided on a cash or fiscal basis?	\$0.8 million in 2019-20 \$0.8 million in 2020-21
Are the revenue and/or expense costs likely to be significantly different beyond the forward estimates period? If yes, why?	No
What assumptions have been made in deriving the expected financial impact in the party costing (please provide information on the data sources used to develop the policy)?	Not applicable
Has the policy been costed by a third party? If yes, can you provide a copy of this costing and its assumptions?	No
What is the expected community impact of the policy? How many people or businesses will be affected by the policy? What is the likely take up? What is the basis for these impact assessments/assumptions?	The policy is expected to have a positive impact on the community to address the emerging trend of new cases of accelerated silicosis, a preventable occupational lung disease occurring in workers as a result of exposure to silica dust in parts of Australia. This can occur in various industries, but the recent spike in cases is related to the manufacture and installation of artificial stone bench tops.
NOTE: it will be up to the professional judgment of the relevant Secretary as to whether these assumptions are adopted in a Treasury or Finance costing of the policy.	

Administration of policy	
Who will administer the policy (for example, Australian Government entity, the States, non-government organisation, etc.)?	Department of Health
Should departmental expenses associated with this policy be included in this costing? If no, will the Australian Government Entity be expected to absorb expenses associated with this policy? If yes, please specify the key assumptions, including whether departmental costs are expected with respect to program management (by policy agencies) and additional transactions/processing (by service delivery agencies).	No Department of Health to absorb any associated operating or capital expenses. This includes \$400,000 for the commissioning of a prevalence assessment and national review of safe exposure standards.
Intended date of implementation.	The taskforce will commence in July 2019
Are there transitional arrangements associated with policy implementation?	No
Will the policy be ongoing or terminating*?	Terminating
If terminating: What is the intended date of termination? Are there any transitional arrangements associated with the conclusion of the policy?	The taskforce will provide a final report by 31 December 2020
List major data sources utilised to develop policy (for example, ABS cat. no. 3201.0).	Not applicable
Are there any other assumptions that need to be considered?	No

* Ongoing policies continue indefinitely (until a decision is made to cease or alter the program). Terminating measures end on a date set out in the initial policy and a further decision is required to continue the program beyond this date.