



## FCS SAFETY, HEALTH AND ENVIRONMENTAL MANAGEMENT PLAN

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# TABLE OF CONTENT

**P.02**

INTRODUCTION

**P.08**

GENERAL OH&S PROVISIONS

**P.04**

SCOPE

**P.12**

OPERATIONAL CONTROL

**P.04**

LEGAL REQUIREMENTS

**P.18**

PROTECTING THE ENVIRONMENT

**P.05**

STRUCTURE & RESPONSIBILITY  
FOR OCCUPATIONAL HEALTH &  
SAFETY

**P.19**

ANNEXURES



# 1. INTRODUCTION

## POLICY ON HEALTH, SAFETY AND ENVIRONMENT

*Refer to Annexure 2.*

### 1.1. Aims and Principles

FCS subscribes to the following core aims:

- That its employees are its most valuable resource and aims to prevent or minimize work related injuries and health impairment of all our employees and subcontractors.'
- FCS Management will prevent or minimise adverse impacts on the environment that arise from its operations.
- Respect people's culture and heritage in any location in which we operate.
- Promote good relationships with the local communities in which we work and live.

It is a requirement that the following principles be adhered to:

- Hold management and line management responsible and accountable for matters relating to Health, Safety and Environment.
- Identify and assess the risks associated with all of our activities.
- As a minimum, meet all legal requirements (OCCUPATIONAL HEALTH AND SAFETY ACT AND REGULATION ACT NO 83 OF 1993), Employer and Customer requirements and set objectives and targets and where appropriate apply international best practice.
- Ensure workforce competence by educating, training and promoting awareness in all aspects of Health, Safety and the Environment in order to meet our set objectives and targets.
- Embark on a continuous review and improvement process and report to executives on progress made towards the achievement of our objectives, targets and aims.
- All stakeholders need to be committed and to share the responsibilities to successfully give effect to this policy.

### 1.2. STATEMENT ON THE HEALTH, SAFETY AND ENVIRONMENT POLICY

It is the policy of Management that work is to be carried out in a safe manner, and that Health, Safety and the Environment is to be regarded as a prerequisite in all operations.

FCS attaches great importance to the principle that successful Health, Safety and Environment management contributes to successful business management.

To ensure that this policy is effectively enforced Management will be responsible for the formulation of comprehensive policies in respect of Health, Safety and Environment at work, appropriate to their activities, and for detailing individual and collective responsibilities throughout the management structure. It is committed to the progressive improvement of Health, Safety and Environment performance and of the management system.

The responsibility for Health, Safety and Environment planning rests with Management. The effective implementation and operation of these policies will be kept under continual review by management, who will receive information from the staff and SHE Manager concerning accidents, incidents and overall safety performance.

A vital part of this process is the reporting, analysis and corrective measures resulting from reported accident, incidents or “near misses”. There is a direct correlation between the number of near misses, accidents, incidents, and fatalities. Consequently, in order to effectively manage the Health, Safety and Environmental programs, data at all levels must be collected, collated and analysed.

Within the framework provided by the Health, Safety and Environment policies and procedures, all employees have a part to play in maintaining the highest standards of Health, Safety and Environmental Management, and in achieving full compliance with legal requirements, which will be regarded as minimum standards. The basic principle is for every employee to take care of him or herself, his or her colleagues and any members of the general public who may be affected by our activities.

A key element in Health, Safety and Environment is to empower individual employees to work safely. In order to achieve this, it is imperative that those:

- Know what to do, and to that end, should be properly trained.
- Have the correct tools and resources for the work at hand.
- Are able to measure what they are doing.
- Are in a position to take corrective action where deviations from their targets occur.

There will be joint consultation on Health, Safety and Environmental matters with the employee representatives through the Health, Safety and Environmental Committee's.

Management is responsible for the development / training of people as a key resource and for ensuring that all employees receive the necessary training, to carry out their duties in a safe and healthy manner and that staff are charged with particular responsibilities for Health, Safety and Environment.

A Competent SHE Manager shall be deployed, however the ultimate legal responsibility for Health Safety and the Environment lies with the employer and the operational responsibility for Health, Safety and Environment lies with each employee.

The SHE Policy will be brought to the attention of all employees on a regular basis and shall be placed on notice boards.

### **1.3. General**

The Management Team recognises the importance of planning Health, Safety and Environment at the earliest possible stage if injuries, ill health and damage to the environment or property.

This Health, Safety and Environmental Management Plan describes how the works shall be managed and controlled in order to protect the Safety, Health and welfare of all personnel engaged at FCS facilities as well as to manage our impact on the environment and others who may be affected by the operations. It also addresses all Client and other Health, Safety and Environmental Management requirements.

For the Health, Safety and Environmental Management Plan to be effective, it is essential that the management and supervisory staff are familiar with, and implement, the relevant requirements of the plan. All management and supervisory personnel shall therefore be in possession of a copy of the plan and all subsequent revisions.

FCS shall actively seek the support of all the operatives engaged on the facilities to look after the Health, Safety and Environment of themselves and their colleagues by working within the spirit of Zero Harm “Health, Safety and Environmental Management Plan”.

Any person found to be disregarding the requirements of the plan, shall be subject to disciplinary action, which may result in their dismissal from the company.

#### **1.4. Facility Health and Safety Mission Statement**

All employees working at the FCS facilities are equally important. Every individual has the right to a Safe and Healthy working place and the right to return from work every day unharmed.

FCS is committed to this common goal of Zero Harm, and believes that it can be achieved by a dedicated joint effort between the Employer, Employees and its customers.

As an Employer, we undertake to provide a healthy, safe working environment and appropriate tools. We also acknowledge that Health, Safety and Environment take precedence over the facility and cost. The consequence of injuries is financial loss to the individual and Company.

We will conduct our activities in an environmentally sound manner and mitigate any (positive and/or negative) impacts we may have on the environment with a comprehensive environmental management programme.

As responsible employees, we undertake to act and work in a safe manner at all times.

As an individual, everyone has the right and obligation to stop and correct any sub-standard act or condition.

## **2. SCOPE**

The day-to-day activities by each employee to do and manage tasks required by the employer.

## **3. LEGAL REQUIREMENTS**

### **Statutory Obligations**

FCS recognises its responsibility to comply with all relevant statutory Health, Safety and Environmental requirements of the Republic of South Africa and shall observe such requirements as listed, but not limited to in (Annexure 3). The Management Team shall be responsible for the formulation of a Health, Safety and Environment Policy. (Annexure 2) It shall establish and maintain a range of safety management techniques designed to ensure compliance, such as preparation of safety plans, risk assessments, method statement, safety inspections / audits, regular health and safety meetings, written safe work procedures and adequate communication systems.

### **Contractual Obligations**

FCS recognises its obligations to ensure that the on-going safety of the public and all employees, during the execution of its responsibilities, is given priority. The Health, Safety and Environmental Management Plan describes how it is intended to satisfy these obligations and to manage and co-ordinate all operations accordingly. Every employee will be required to co-operate on all relevant Health, Safety and Environment matters.

## 4. STRUCTURE & RESPONSIBILITY FOR OCCUPATIONAL HEALTH & SAFETY

### 4.1. General

The overall responsibility to effectively manage and or control risks to the Health, Safety and Environment of all employees engaged, who may be affected by their responsibilities is recognised. This section describes the organisational structure for Health, Safety and Environment at the facilities and outlines the duties of key personnel who are responsible for the planning, implementing and monitoring of the operations as required by the "Health, Safety and Environmental Management Plan".

The attached organogram depicts the main SHE appointments (Annexure 4).

### 4.2. Management Committee

The Management Committee has overall responsibility for the implementation of the Health, Safety and Environment policy and the Health, Safety and Environmental Management Plan and Programme.

### 4.3. Employee Representatives

4.3.1. Is accountable to the Management Committee for both the corporate and operational planning.

4.3.2. Is to ensure that the Health, Safety and Environmental Management Plan is fully implemented and shall monitor Health, Safety and Environment throughout.

4.3.3. Is responsible for ensuring that the Health, Safety and Environmental Management Plan is reviewed when any significant changes in the operation take place.

4.3.4. Is to establish and maintain a direct line of communication with the SHE Manager.

4.3.5. In conjunction with the SHE manager, is responsible for any "Notifications" to the Department of Labour as required by legislation.

4.3.6. Is to familiarise himself/herself with all the relevant Health, Safety and Environment legislation.

4.3.7. Is to ensure that all staff is conversant with the relevant requirements of current legislation and the Health, Safety and Environmental Management Plan and that all are assigned appropriate duties and responsibilities to assist in its effective implementation.

4.3.8. Is to ensure that at all stages, any significant hazards are identified by using the "Task Identification" list and shall nominate staff to carry out risk assessments and written safe work procedures for those activities.

4.3.9. Is to ensure that where significant risks are identified suitable procedures are developed to control them.

4.3.10. Is to ensure that suitable arrangements are put into place to control any and all employee activities so that they are in accordance with the Health, Safety and Environmental Management Plan and Employer requirements / standards.

4.3.11. Is to ensure that appropriate Health, Safety and Environment training is given to all employees.

4.3.12. Is to ensure that adequate resources are made for the planning and implementation of the "Health, Safety and Environmental Management Plan".

4.3.13. Is to nominate senior employees to carry out safety VSL and to participate in investigation of serious accidents / incidents.

4.3.14. Is to attend the management Health, Safety and Environment audits opening and closing meetings as a minimum.

4.3.15. Is to ensure that all certificates, records and registers are produced and made available as required under the applicable Legislation.

4.3.16 Is to lead the investigation of serious incidents at the facilities, or appoint a representative from the management team to do so on his/her behalf, which nominee shall not be an SHE practitioner.

#### **4.4. Facility Management**

4.4.1. Is accountable to the employee Representative and is responsible for the operational planning and also the implementation of the "Health, Safety and Environmental Management Plan".

4.4.2. Is to familiarise him/herself with all relevant Health, Safety and Environment Legislation.

4.4.3. Is to ensure that all staff accountable to him/her is conversant with the relevant requirements of current legislation and the "Health, Safety and Environmental Management Plan".

4.4.4. Is to ensure that all employees have adequate resources to carry out their duties and responsibilities in accordance with the "Health, Safety and Environmental Management Plan".

4.4.5. Is to establish and maintain a direct line of communication with the SHE Manager, and/or SHE Practitioner(s).

4.4.6. Is to assume responsibility as Emergency Co-ordinator with in accordance with listed duties.

4.4.7. Is to monitor facility operations to ensure they are conducted in accordance with the Health, Safety and Environmental Management Plan and take urgent and appropriate action to prevent unsafe working practices or other infringements of statutory requirements.

4.4.8. Is to attend the management Health, Safety and Environment audits.

4.4.9. Is to ensure that all employees comply with the requirements of the Health, Safety and Environmental Management Plan and Employer requirements and / or Standards.

4.4.10. Is to ensure that all necessary safe work procedures, method statements and work instructions are prepared and issued for safe operation at the facilities.

#### **4.5. Admin Clerks**

4.5.1 Is to ensure that all employee documentation includes the relevant Health, Safety and Environment information and details of Contract Health, Safety and Environmental requirements are met.



4.5.2 Is to ensure that prospective employees are made aware of and sign the requirements of the "Health, Safety and Environmental Management Plan."

#### **4.6. Health, Safety and Environmental Representatives**

4.6.1. Shall be responsible to their immediate section supervisor / manager and also to the facility SHE Coordinator, Environmental Coordinator and/or Safety Practitioners

4.6.2 Shall assist with the promotion of Health, Safety and Environment on site.

4.6.3 Shall carry out daily inspections and review findings with their manager and record all findings, both positive and negative.

4.6.4 Shall attend and participate in the Health, Safety and Environmental Committee.

#### **4.7. All Personnel**

4.7.1. Every person employed at the facility has a statutory duty to take reasonable care for the Health, Safety and Environment of themselves and others who may be affected by their actions or omissions at work.

4.7.2. With regard to the statutory duties imposed on their employer, they must co-operate with their employer to enable him/her to comply with the relevant statutory provisions.

4.7.3. No person shall intentionally or recklessly interfere with or misuse anything or equipment provided for Safety, Health, Environment or Welfare under the relevant statutory provisions.

4.7.4. All employees shall wear the appropriate personal protective equipment and use the applicable equipment issued to them where required.

4.7.5. All employees shall familiarise themselves with the relevant requirements of the Safety, Health and Environmental Management Plan, Employer requirements / standards and any other appropriate requirements.

4.7.6. All employees shall report all near misses, any accidents / incidents, damage to property or equipment, environmental incidents etc. to their immediate supervisor, irrespective of whether persons are injured or not and irrespective if damage to the environment was caused or not.

4.7.7. All personnel are encouraged to make suggestions to improve any aspect regarding Health, Safety and Environment to their supervisor and/or the SHE Manager, and Safety Practitioners.

#### **4.8. Nominated Persons with Safety Duties**

##### Emergency Coordinator

4.8.1. The employer Representative shall nominate and appoint in writing the Emergency Coordinator and deputies. The facility SHE Manager, SHE Coordinators and/or SHE Practitioners shall ensure that the names of the responsible persons are clearly posted on the SHE Notice Board and in other appropriate locations.

4.8.2. The Emergency Co-ordinator is responsible for co-ordination and directing the operations of emergency crews both during emergency and rescue operations specific to his/her training.



4.8.3. The Emergency Co-ordinator is responsible for ensuring that emergency teams are trained and equipped for all emergency and rescue operations as identified according to the applicable risks.

4.8.4. The Emergency Co-ordinator is responsible for liaising with the facility SHE Manager, SHE Coordinator and Safety Practitioners to ensure all emergency authorities are notified in the event of an emergency situation.

4.8.5. Following an emergency, he/she shall submit an initial report to the facility Manager within 24 hours, followed by a detailed report within 72 hours.

#### Further Duties for SHE Coordinator

4.8.6. A competent SHE Coordinator and or Accident Prevention Officer shall be appointed in writing to maintain safety and protection against accidents;

4.8.7. Implement a safe system of work with the available information gathered and which shall include the appropriate PPE to be worn.

#### Competent Persons

4.8.8. A register shall be kept by the facility Manager of all Competent Persons which shall include but not be the minimum:

- Health and Safety Representatives.
- First Aiders etc.

4.8.9. The register of the competent Persons shall be kept within the facility Managers SHE management filing system

## **5. GENERAL OH&S PROVISIONS**

### **5.1. Risk Assessment**

#### 5.1.1. Instruction and Supervision

Management and supervisors shall give clear instruction of the work in hand to personnel for whom they are responsible, to ensure that all operations are undertaken safely and without risk to health and without unmitigated impacts on the environment.

The instruction shall normally include, but not necessarily be limited to a description of the objective, the sequence of operations, the associated foreseeable hazards and any precautions, which must be taken. In many cases the instructions shall be based on the assessments of risk and shall, where considered necessary, be subject to a Risk Assessment, Written Safe Working Procedure, Method Statement or Work Instruction.

### **5.2. Administrative Controls & OH&S File**

#### 5.2.1. Health, Safety and Environment Management Procedures

Health, Safety and Environment Management Method Statements or Work Instruction shall be issued to detail how Health, Safety and Environment will be organised and managed on the Facilities to cover, but not limited to:

- Risk Assessment.
- Written Safe Work Procedures.
- Facility Health, Safety and Environment Inspections, Audits and Tours.
- Health, Safety and Environment Training and Information.
- Facility Health, Safety and Environmental Meetings.
- Accidents / Incidents.
- Accident / Incident Statistics and Reporting.
- First Aid.
- Fire Prevention.
- Emergency Planning, Preparedness and Response.
- Housekeeping.
- Waste Management
- Identification of Hazards and Risks / Aspects and Impacts
- Noise and Dust Control.
- Environmental controls.
- Personal Protective Equipment.

#### 5.2.2. Written Safe Work Procedures

While carrying out the preparation of designs, safety plans and risk assessments, certain activities will be identified for which detailed Written Safe Work Procedures are required to ensure that the activity is properly controlled and executed safely and without risks to health.

All written safe work procedures and where appropriate, method statements, shall clearly identify the objective, the sequence of operations, foreseeable hazards, precautionary and protective measures required and shall easily be understood by the personnel who are to carry out the work.

Written Safe Work Procedures / Risk Assessments shall include but not be limited to:

- Use of Personal Protective Equipment.
- Operation of forklifts and Other Lifting Devices if any.
- Substances Hazardous to Health.
- Use of Portable Electrical Tools if applicable.

#### 5.2.3. Facility Health, Safety and Environment Reports

Monthly Health, Safety and Environment Reports shall be prepared by the SHE Coordinators and submitted to the facility SHE Manager who will then combine and forward them to the facility Managers.

### 5.3. **SHE Goals & Objectives**

The employer shall determine and set objectives for the facility in respect of Health, Safety and Environmental performance.

*Refer to ANNEXURE 6 SHE OBJECTIVES*

### 5.4. **Training, Awareness & Competence**

The employer recognises that the provision of adequate SHE information for all levels of personnel makes a vital contribution towards an efficient accident / incident prevention programme and will therefore ensure that a suitably structured schedule of information and training is adopted by all parties throughout the facility.

## 5.5. Consultation & Communication

The importance of establishing effective communication procedures on Health, Safety and Environment throughout the organisational structure of the facility is acknowledged.

To facilitate the reporting of emergency situations the facility SHE Manager, shall arrange for the following emergency telephone numbers to be displayed at the facility Safety Notice Board/s and updated as required:

- Facility Representative.
- Facility Safety Manager.
- Hospital and / or doctor.
- Fire Brigade.
- Ambulance service.
- Police station.
- Relevant local Labour Authorities/Inspectors.

### Health, Safety and Environmental Committee Meetings

The meetings shall amongst other:

- Monitor the implementation of the Health, Safety and Environmental Management Plan.
- Monitor implementation of policy through the planning process of hazard identification and risk assessment.
- Monitor arrangements for communication of the Health, Safety and Environment policy and relevant information.
- Monitor arrangements for training of all employees.
- Monitor the allocation of resources for Health, Safety and Environment.
- Monitor results of site inspections and accident / incident reports.
- Monitor the inspection and audit procedures.

The Health, Safety and Environmental Committee shall be made up of:

- Facility SHE Manager, and/or SHE Practitioners.
- SHE Representatives.
- Management Members.

The committee shall appoint a chair for the meetings as well as duration of appointment. Meeting minutes must be distributed within 7 working days from the meeting. The chairperson shall guide the meeting as not to labour discussions unnecessarily and keep to time limits for agenda discussions.

The meetings shall follow (though not be limited to) an agenda as detailed below:

- Present.
- Apologies.
- Absent without permission.
- Confirmation of minutes of the previous meeting.
- Matters arising from previous minutes.
- Accident / Incident reports, Investigations.
- Health and Safety Representative Reports.
- Training:
  - i. Employee competence.
  - ii. Induction training.

- iii. Certified skills.
- iv. Emergency procedures.
- v. Any specific training needs.
- General issues:
  - i. First Aid.
  - ii. Fire precautions.
  - iii. Welfare, etc.

Minutes of the meetings shall detail the actions arising from the meeting, actioned by, completion dates, be copied to all attendees and to be displayed on the safety notice board(s) for the information of all the employees, and signed by the chairman of the committee.

## **5.6. Checking, Reporting & Corrective Action**

### **5.6.1. Active Monitoring**

All management and supervisory personnel are required to carry out continual Health, Safety and Environment surveillance and take immediate steps to remedy any sub-standard acts and / or conditions observed.

Formal facility Health, Safety and Environment inspections designed to identify defects, sub-standard acts and conditions, and breaches of statutory facility Health, Safety and Environmental Management Plan requirements shall be carried out regularly by the facility SHE Manager, and Safety Practitioners.

A reward scheme for Health, Safety and Environment performance may be considered and organised by the facility Management.

### **5.6.2. Reactive Monitoring**

Reactive Monitoring comprising accident / incident reporting, investigation, and collation of safety statistics shall be carried out in accordance with current and relevant legislation.

### **5.6.3. Health, Safety and Environment Audits**

In addition to carrying out regular facility inspections, the SHE Manager/ SHE Coordinators or Professional shall establish and maintain an integral SHE audits programme designed to provide an in-depth examination of all operations and activities of the facility.

The SHE Manager/Professional shall carry out monthly audits of all operations.

The audits shall include assessment of at least the following elements of the Health, Safety and Environment Management System:

- The intent, scope and adequacy of the policy.
- The organisation for ensuring SHE control.
- The organisation for ensuring SHE cooperation.
- The organisation for ensuring SHE communication.
- The management organisation to ensure that employees receive appropriate training.
- Long-term improvement in SHE performance.
- The adequacy and relevance of the measuring systems.
- Review of the system and feedback to obtain improvements.

- Assurance to meet Employer's SHE requirements

## 5.7. Incident Reporting

The procedures for reporting and recording injuries and dangerous occurrences are issued under the Health, Safety and Environment Management Procedures and are designed to satisfy all obligations and will also apply to all employees.

One first aider per facility shall be readily available during working hours.

First aid boxes shall be provided and maintained within the works area for the use of all first aiders.

Detailed procedures for first aid and the provision of first aid boxes are included in the Health, Safety and Environment Management Procedures.

## 5.8. Accident/ Incident Investigation

Facility incident / Accident investigation shall be conducted by using the *SHE/3/21 – SHE Incident Notification & Investigation Template*. The investigation shall be conducted as soon as is reasonably practical and before the incident/accident scene is disturbed. Photographs shall be taken at the scene for reference and information. Statements shall be taken in writing from all persons involved in or witnessing the incident as soon as is reasonably practical but not later than the end of the shift in which the incident occurred.

# 6. OPERATIONAL CONTROL

## 6.1. Forklift & Lifting Equipment

6.1.1. Where forklifts are to be operated on site, the following apply:

- A forklift register is to be available.
- A valid copy of operator's competency certificate (FCS License) required.
- Copy of medical certificate indicating the Operator to be "Physically and psychologically" fit to operate a forklift.
- All deviations to be recorded and reported for rectification.

## 6.2. Delivery Vehicles

6.2.1. Delivery Trucks

Other than normal conditions as required by the Road and Traffic Act for motorway travel the following facility conditions apply to all vehicles moving on site:

- Operator to be properly trained and competent to operate the said equipment.
- Copy of driver's licence.
- Certified Copy of Identity Document.
- Equipment to be in a roadworthy and sound condition.
- All deviations to be recorded and reported for rectification. No vehicle to be used where deviations relating to safe operation are noted.

6.2.2. LDV and other vehicles

All Light Delivery Vehicles, etc. must have a fire extinguisher.

LDV and other vehicles to be:

- maintained in good working order
- used in accordance with their design and intention for which they were designed
- Operated/driven by trained, competent and authorised operators/drivers.
- inspected daily before start-up by the driver/operator/user and the findings recorded in a Register/log book.

### **6.3. Emergency Preparedness, Contingency Planning & Response**

#### **6.3.1. Emergency Planning, Preparedness and Response Procedures**

The Emergency Coordinator, Facility SHE Manager shall prepare suitable procedures and drills for emergency situations, including rescue operations. This will include environmental incident control and spill response.

#### **6.3.2. Emergency and Rescue Operations**

In order to ensure an appropriate response to an emergency situation, an adequate number of suitably trained facility personnel, who are competent in the use of firefighting equipment and provision of first aid shall be appointed.

The facility SHE Manager shall liaise with the Employer and the Employer's representatives, local Fire Department, Fire Protection Association (FPA), Police, Hospitals, Ambulance Services and other authorities to ensure that emergency procedures are in place for action to safeguard all employees, and the public in the event of an emergency situation.

### **6.4. First Aid**

Each facility shall have a First Aider who will then be in possession of the First Aid Box. The boxes must be available and accessible at all time and shall be equipped with minimum contents as per "Minimum contents of first aid box."

The Contingency Plan of the facility shall include the arrangements for speedily and timeously transporting injured/ill person/s to a medical facility or of getting emergency medical aid to person/s that may require it.

The specific arrangements are:

- Contact has been made by the first aider with all local hospitals and personnel
- Contact has been made with relevant Ambulance Services to assist in case of emergencies
- A vehicle will always be available in case of emergencies

#### **Minimum contents of first aid-box:**

#### **General Safety Regulation**

- Wound cleaner antiseptic (100 ml)
- Swabs for cleaning wounds
- Cotton wool for padding (100 g)
- Sterile gauze (minimum quantity 10)
- 1 pair of forceps (for splinters)
- 1 pair of scissors (minimum size 100 mm)

- 1 set of safety pins
- Tri-angular bandages
- Roller bandages (75 mm x 5 m)
- Roller bandages (100 mm x 5 m)
- 1 roll elastic adhesive (25 mm x 3 m)
- 1 roll non-allergenic adhesive strip (25 mm x 3 m)
- 1 packet adhesive dressing strips (minimum quantity 10 assort. sizes)
- First-Aid dressings (75 mm x 100 mm)
- pair large disposable Latex gloves
- These first aid boxes shall be on site well marked with signage as first aid stations,

## 6.5. Fire Prevention & Protection

The importance of fire protection and precautionary measures is recognized and a Fire Management Plan shall be implemented in accordance with facility Specific Code of Practice Prevention and Management of Fires to ensure that adequate procedures are adopted to prevent risk of injury or damage from fire. Emergency Coordinator will be responsible to ensure that:

- The risk of fire is avoided
- Sufficient & suitable storage of flammables is provided
- Sources of ignition are obviated wherever flammable or highly combustible material is present
- notices prohibiting smoking is displayed and enforced
- A sufficient number of employees are appointed and trained to act as Emergency Team to deal with fires and other emergencies
- Employees are informed re. emergency evacuation procedures and escape routes
- Emergency escape routes are kept clear at all times
- After evacuation assembly points are demarcated
- Evacuation is practiced to ensure that all is evacuated timeously
- Roll call is held after evacuation to account for all personnel and ensure that no-one has been left behind.

## 6.6. Housekeeping

All work areas shall be kept clean and / orderly. Domestic waste and any type of waste, debris, waste and useless materials constitute a fire hazard as well as a potential hazard on the job, and must be removed from the work areas as fast as they accumulate. Areas for temporary accumulation of debris must be provided and shall be well protected and properly kept. Detailed Procedures for Housekeeping shall be included in the Health, Safety and Environment Management Procedures.

- Housekeeping is continuously implemented
- Materials & equipment is properly stored
- Scrap, waste & debris is removed regularly
- Materials placed for use are placed safely and not allowed to accumulate or cause obstruction to free flow of pedestrian and vehicular traffic
- An unimpeded work space is maintained for every employee
- Every workplace is kept clean, orderly and free of tools etc.

## 6.7. Security

Arrangements designed to prevent access for any unauthorised persons and to secure the Health and Safety of any authorised visitors shall be implemented.



No un-authorized persons shall be allowed on the facility.

## 6.8. H.I.V. Aids

### BLOODBORNE PATHOGENS

Facility management will ensure that training is given in the effects of HIV Aids and that the following information is disseminated to all employees and a monitoring system will be employed by the medical officer

All employees shall be trained on the risk of blood borne pathogens and the proper handling of blood and other bodily guide.

Blood borne pathogens are microorganisms carried by human blood (and other body fluids) and cannot be seen with the naked eye. They can be spread through contact with infected blood. If they get into the bloodstream, an individual may become infected and sick.

Most personnel cannot reasonably anticipate coming into contact with blood during their day-to-day work duties, that's why it's imperative that all personnel understand the danger of exposure to blood borne pathogens and ways to minimize their risk.

Blood borne pathogens may be present in blood and other materials, such as:

- Body fluids containing visible blood.
- Semen and vaginal secretions.
- Torn or loose skin.

Blood borne pathogens can cause infection by entering the body through:

- Open cuts and nicks
- Skin abrasions
- Dermatitis and acne
- Mucous membranes of the mouth, eyes or nose

### WORKPLACE TRANSMISSION

The most common blood borne pathogens are **HIV, Hepatitis B**, and **Hepatitis C**: (Hepatitis is a general term used to describe inflammation (swelling) of the liver. Alcohol, certain chemicals or drugs, and viruses such as hepatitis A, B, C, D, E and G may cause hepatitis.)

#### HIV

HIV (AIDS), the human immune-deficiency virus, attacks the body's immune system causing it to weaken and become vulnerable to infections that can lead to a diagnosis of acquired immune deficiency syndrome or AIDS. HIV is transmitted mainly through sexual contact and sharing contaminated needles, but also may be spread by contact with infected blood and body fluids. HIV is NOT transmitted indirectly by touching or working around people who are HIV-positive. Employees can prevent getting HIV by stopping the passage of the virus from a person who has HIV to them. In many instances, the employee has control over the activities that can transmit HIV. Since HIV is most frequently transmitted by sharing needles or through sexual intercourse, employees can stop transmission by refusing to engage in these behaviours.

#### Hepatitis B

Hepatitis is a general term used to describe inflammation (swelling) of the liver. Alcohol, certain chemicals or drugs, and viruses such as hepatitis A, B, C, D, E and G may cause hepatitis. Hepatitis B is a serious, sometimes fatal disease, caused by a virus that infects and attacks the liver. The virus is transmitted through direct contact with infected blood, semen, or vaginal fluid. It is primarily spread through sexual contact. In studies that examine transmission following injections into the skin, HBV is 100 times more contagious than HIV. HBV can also be transfixed indirectly because it can survive on surfaces dried and at room temperature

for at least a week! That's why contaminated surfaces are a major factor in the spread of HBV. Each year there are up to 200,000 new infections and 5,000 Hepatitis B related deaths in the U.S, (compared to 40,000 new HIV infections per year). One in approximately 20 persons now has, or will one day have, Hepatitis B.

Transmission of hepatitis B is preventable:

- Use latex condoms during sex.
- Do not share needles.
- Use universal precautions in the workplace
- Get the hepatitis B vaccination.

## Hepatitis C

Hepatitis C is a serious, often fatal disease, caused by a virus that infects and attacks the liver. HCV is more common than hepatitis B and ranks slightly below alcoholism as a cause of liver disease; However, HCV is not as infectious as HBV because there are generally lower levels of the hepatitis C virus in the blood than of the hepatitis B virus. HCV is primarily transmitted through blood-to-blood contact -- most commonly through shared needles, the risk of transmitting HCV through sexual contact appears to be low, but precautions should be taken anyway. HCV cannot be transmitted by casual contact such as shaking hands or sharing bathroom facilities. Up to 180,000 people may become infected with HCV.

Transmission of hepatitis C is preventable:

- Use latex condoms during sex.
- Do not share needles.
- Use universal precautions in the workplace.
- HOWEVER, unlike hepatitis B, currently there is NO VACCINE for hepatitis C. And also, unlike HBV there is no drug to prevent HCV infection after an exposure,

## Guidelines for Handling Blood and Other Bodily Fluids

Many personnel are concerned that HIV may be spread through contact with blood and other body fluids when an accident occurs at work, HIV, as noted earlier, has been found in significant concentrations in blood, semen, vaginal secretions, and breast milk. Other body fluids, such as faeces, urine, vomit; nasal secretions, tears, sputum, sweat, and saliva do not transmit HIV unless they contain visible blood.

However, these body fluids do contain potentially infectious germs from diseases other than AIDS, if an individual has contact with any of these body fluids, they are at risk of infection from these germs. It should be remembered that the risk of transmission of these germs depends on many factors, including the type of fluid contacted, the type of contact made, and the duration of the contact, very simply, it is good hygiene policy to treat all spills of body fluids as Infectious in order to protect personnel from becoming infected with any germs and viruses, the procedures outlined below offer protection from all types of infection, and should be followed routinely.

## How Should Blood and Body Fluid Spills be handled?

Whenever possible, employees shall wear disposable, waterproof gloves when they expect to come into direct hand contact with body fluids (when treating bloody noses, handling clothes soiled by incontinence, or cleaning small spills by hand), Gloves used for this purpose shall be put in a plastic bag or lined trash can, secured, and disposed of daily. Hands should always be washed after gloves are removed, even if the gloves appear to be intact. If an employee has unexpected contact with body fluids or if gloves are not available (for example, applying pressure to a bleeding wound), the employee shall wash their hands and other affected skin for at least 30 seconds with soap and water after the direct contact has ended. This precaution is recommended to prevent exposure to other pathogens, not just HIV.

As has been discussed, blood, semen, vaginal secretions, and blood-contaminated body fluids transmit HIV, wiping a runny nose, saliva, or vomit does not pose a risk for HIV transmission.

### **Hand washing**

Proper hand washing requires the use of soap and warm water and vigorous washing under a stream of running water for at least 30 seconds. If hands remain visibly soiled, more washing is required. Scrubbing hands with soap will suspend easily removable soil and microorganisms, allowing them to be washed off, running water is necessary to carry away dirt and debris, rinse your hands under running water and dry them thoroughly with paper towels or a blow dryer. When hand-washing facilities are not available, use a waterless antiseptic cleanser, following the manufacturer's directions for use,

### **Disinfectants**

An EPA approved germicide or a solution of 99 parts water to 1 part household bleach (or 14 cup bleach to one gallon of water) will inactivate HIV, and should be used to clean all body fluid spills, Higher concentrations of bleach can be corrosive, and are unnecessary. Surfaces should be cleaned thoroughly prior to disinfections,

### **Disinfecting Hard Surfaces and Caring for Equipment**

Although hard surfaces have not been found to be a means of transmitting HIV, it is good hygiene policy to clean any soiled hard surfaces thoroughly, to do this, scrub the surface to remove any soil and apply a germicide (like the bleach/water solution described above) to the equipment used. Mops should be soaked in this solution after use and rinsed thoroughly with warm water. The solution should be promptly disposed of down a drainpipe, remove gloves and discard them in appropriate receptacles, and wash hands as described above,

### **Laundry Instructions for Clothing Soiled with Body Fluids**

It is important to remember that laundry has never been implicated in the transmission of HIV, to ensure safety from transmission of other germs, contaminated clothes must be laundered with soap and water to eliminate potentially infectious agents. The addition of bleach will further reduce the number of potentially infectious agents. Clothing soaked with body fluids may be washed separately from other items. Pre-soaking may be required for heavily soiled clothing, Otherwise, wash and dry as usual, following the directions provided by the manufacturer of the laundry detergent, If the material can be bleached, add 1A cup of household bleach to the wash cycle. If the material is not colourfast, add 1/2 cup of non-chlorine bleach to the wash cycle, it is good hygiene to treat all bodily fluids as infectious.

## **6.9. Environmental Factors**

### **• Lighting**

Workplace to be illuminated in accordance with the activity undertaken and as specified in the schedule to this regulation.

Employees shall ensure that;

Average illuminance at floor level within 5 meters from the task shall not be less than one fifth of the average illuminance on the task.

Glare must be reduced in order not to impair vision

Lighting to be clean and defective units to be replaced or renewed

### **• Heat**

Where the WBGT index exceeds 30 over a period of 1 hour the employer must take steps to reduce this index. Where he cannot reduce this index; have employees been certified fit by a medical practitioner or a registered nurse to work in such an environment on an annual basis. Ensure employees are acclimatized prior to working in this environment. Must inform the employee to drink at least 600ml of water every hour; Train employees in the precautions to be taken against heat stroke; Provide first aid facilities for the treatment of heat stroke. Comment; All employees subject to this risk should be advised of the symptoms of heat fatigue.

#### • Ventilation

shall be provided so that;

- i. Air breathed by employees does not endanger their safety.
- ii. Average concentration of carbon dioxide over an 8-hour period does not exceed ½% by volume of air.
- iii. Prescribed exposure limits for airborne substances are not exceeded.
- iv. Explosive gas, vapour or dust concentrations do not exceed the lower explosion limit.

#### • Fire precautions and Means of Egress

In order to evacuate a workplace in the event of a fire an employer shall ensure that;

- i. Every staircase/step used as a means of exit shall be kept clear and capable of being opened.
- ii. Staircases and steps shall be provided with substantial handrails.
- iii. Steps intended as fire escape shall be constructed of non- combustible material and clear of material/ obstructions.
- iv. At least two means of escape must be provided as far apart as practical.
- v. Adequate firefighting equipment, maintained in good condition shall be provided at strategic locations.

## 7. Protecting the Environment

### POLICY ON ENVIRONMENTAL MANAGEMENT

#### 7.1. Environmental Mission Statement

Our mission is to achieve our declared business objectives whilst recognising of our responsibilities towards customers, investors, management and employees, the community and the environment.

Facility management will respect the environment and act to prevent environmental degradation or damage in all activities, not only through adherence to Employer/Client requirements and legislated regulatory requirements as listed in, but in a wider frame of participation and cooperation with environment conservation organisations, and in practical terms with specific reference to:

- Preservation of flora and fauna in and around the facility site.
- Declaration and demarcation of environmentally sensitive areas.
- Cleanliness of the facility at all times.
- Protection of material, plant and equipment for avoidance of dust and fumes, both in storage and facility use.
- Control of pollution caused by our activities.
- Consideration of noise levels.
- Control of and management of potential water pollutants.
- Protection of animal and plant life

#### 7.2. General

Every effort will be made to lessen the impact of our operations on the environment, and to educate our employees on the reasons for such a policy. All employees shall be trained in respect of environment awareness and protection as part of the induction process. Facility Management shall plan activities so as to avoid environmental damage. Environmentally sensitive areas within the actual facility areas will be sign posted and treated as “no go” areas.

### 7.3. Toilets

Suitable sanitary arrangements at facilities shall be provided.

Toilets shall be easily accessible. All toilets and ablution facilities shall be connected to an approved municipal sewer connection.

Sanitary arrangements will be to the satisfaction of the Facility Management, local authorities and the legal requirements. Sanitary arrangements shall be hygienically managed at all times. Adequate water shall be provided for all sanitary arrangement requirements, including hand washing.

## 8. ANNEXURES

See attached annexures

### ANNEXURE 1: DEFINITIONS

#### Accident

An incident which has given rise to injury, ill health or fatality (OHSAS18001)

#### Basic cause

The most basic cause of an incident that can reasonably be identified, over which management has control and which management can rectify and for which effective corrective actions for preventing a recurrence can be generated, for example, fundamental weakness of design, quality of workmanship or operation and defects.

#### Direct cause

The causes of an incident that can be detected by our senses (i.e., they can be seen, heard, smelled, touched and sometimes tasted.) These causes are readily apparent or evident and immediately precede the contact.

#### Disabling injury

A work injury, including any occupational disease/illness or fatality which renders the injured employee unable to perform his/her regular/normal work on one or more full days or shifts (other than the day or shift on which the injury occurred)

A disabling injury should be verified by a medical practitioner.

This also includes, but is not limited to:

- Amputation or permanent loss of the use of a limb or part thereof, are classified as disabling injuries;
- All bone fractures are classified as disabling injuries even if no time was lost;
- Any occupational disease/illness certified by an occupational medical practitioner or a specialist in the medical field, depending on the case (e.g., NIHL, an ENT or Audiologist; lung diseases confirmed by a specialist by means of diagnostic evaluation/examination), is also classified as a disabling injury, whether time was lost or not;
- Light or restricted duty.
- The following incidents will not be regarded as disabling injuries:
- In the event of a hairline fracture no disabling injury must be recorded if the attending physician certifies that the injured person may continue to perform his/her regular/normal work and no time was lost; and
- A person losing a shift due to being hospitalized for 48 hours or less for purposes of observation (no medication is administered or treatment is provided) will not be regarded as suffering a disabling injury.

### Disabling injury frequency rate (DIFR)

A proportional representation of disabling injuries which is used as an indicator of health and safety performance

$$\text{DIFR} = \frac{\text{Total number of disabling injuries} \times 200000}{\text{Total man-hours of exposure}}$$

The figure 200000 refers to the average number of hours worked by 100 employees in one year. The DIFR reflects a rough estimate of the percentage of the workforce that suffered a disabling injury.

### Employee

A person who has entered into or works under a contract of service, apprenticeship or learner ship with an employer, whether the contract is express or implied, oral or in writing, whether the remuneration is calculated by time or work done and paid for in cash or in kind, or tacitly (by tacit agreement) and includes where such a person is under the control, instruction and supervision of his/her employer, namely:

- a. Permanent employee, which includes:
  - i. A full-time employee,
  - ii. A part-time employee;
  - iii. A shift worker; and
  - iv. A permanent learner;
- b. Non-permanent employee, which includes:
  - i. A temporary employee;
  - ii. A casual employee employed for the purpose of the employer's business;
  - iii. An occasional employee/vacation student; and
  - iv. A non-permanent learner;
- c. A bursar whilst under the supervision of an employer, and/or
- d. An unattached learner.

Note 1: An employee only has one employer at any time. The employer is the person with whom he / she is in contractual relationship of employment, even when he / she performs his/her contractual obligations for another person.

### Compensable Injury Frequency rate

A lagging indicator of SHE performance calculated as the number of Injuries reported to FEMA X 200000/ Hours worked

### Fatality

A fatality is an incident occurring at work or arising out of or in connection with the activities of persons at work, or in connection with the use of plant or machinery, in which, or in consequence of which any person (i.e., employee, contractor or member of the public) dies regardless of the time intervention between the injury and/or exposure to the cause and death. This excludes the death of any person by natural causes while at the workplace or on duty.

### First aid case

Minor work-related injuries for which first aid treatment was provided. Such treatment is considered to be first-aid even if administered or supervised by a medical practitioner.

First aid includes any hands-on treatment given by a first-aider (e.g., Band-Aid, washing, cleansing, pain, relief).



The following procedures are generally considered first aid treatment:

- Application of Antiseptics.
- Application of Butterfly adhesive dressing or sterile strips for cuts and lacerations.
- Treatment for first degree burns.
- Application of bandages during any visit to medical personnel.
- Removal of foreign bodies not embedded in the eye if only irrigation is required.
- Removal of foreign bodies from a wound if procedure is uncomplicated, for example by tweezers or other simple technique.
- Use of non-prescription medications and administration of single dose of prescription medication on first visit for any minor injury or discomfort.
- Application of ointments to abrasions to prevent drying or cracking.
- Negative X-Ray diagnosis.
- Administration of tetanus shot(s) or booster(s). However, these shots are often given in conjunction with more serious injuries, consequently injuries requiring these shots may be recordable for other reasons.
- Inhalation of toxic or corrosive gas, limited to the removal of the employee to fresh air or the one-time administration of oxygen for several minutes

### **Immediate cause**

Refer to definition of direct cause.

### **Incident**

Work related event(s) in which an injury or ill health or fatality occurred, or could have occurred.

An incident where no injury, ill health or fatality occurs may also be referred to as a near miss, near hit, close call or dangerous occurrence.

### **Light duty**

Injured employee or contractor is not booked off but cannot perform all or any part of his/her duties as per specified job outputs.

### **Medical treatment case**

Work related injuries for which medical treatment was provided.

The following procedures are generally considered medical treatment:

- Treatment of infection.
- Treatment for second- or third-degree burns.
- Application of sutures (stitches).
- Removal of foreign bodies embedded in the eye.
- Removal of foreign bodies from the wound by a physician due to the depth of embedment, size or shape of object or the location wound.
- Use of prescription medications (except a single dose administered on first visit for minor injury or discomfort.)
- Cutting away dead skin (surgical debridement).
- Positive X-Ray diagnosis (fractures, broken bones etc.).
- Loss of consciousness due to an injury or exposure in the work environment.
- Reaction to a preventative shot administered because of an occupational injury.
- Sprains and strains - series (more than one) of hot and cold soaks, use of whirlpools, diathermy treatment or other professional treatment



**No go area**

An area identified and or demarcated by the Employer of being of environmental, historical or cultural value to which access by persons or vehicles is prohibited.

**Number of days lost**

The total number of full calendar days an injured person is unable to perform his/her regular/normal duties as a result of a single incident. The total does not include the day on which the injury occurred or the day on which the injured person returned to work; it does, however, include intervening Saturdays, Sundays, public holidays or plant-shutdown days.

**Occupational disease/illness**

Any confirmed disease/illness arising out of and in the course of an employee's employment and which is listed in schedule 3 of the COID Act. Confirmation must be done by a medical practitioner or, depending on the disease/illness, a specialist (i.e., Ear Nose and Throat, Audiologist, Pathologist, etc.).

**Primary cause**

Refer to definition of direct cause.

**Repeat incident**

An incident can be classified as a repeat incident, if in a similar type of incident:

- One or more of the causal factors (immediate and/or root causes) that were identified in previous incidents, were once again identified as a causal factor of a subsequent incident that occurred in the same business unit for the same type of incident; or
- One or more of the corrective actions that were identified in previous incidents, were not adequately communicated, addressed, or implemented and were once again identified as a corrective action of a subsequent incident that occurred in the same business unit.

**Restricted duty**

Refer to definition of light duty.

**Root cause**

Refer to definition of basic cause.

**Total man-hours of exposure**

The total hours of exposure including regular/normal working hours and overtime

This shall be calculated as Number of persons employed X 220 hours = Total man hours per month

**Vehicle incident**

A work-related incident in which an FCS insured self-propelled vehicle sustains damage.

This excludes incidents of windscreen chips.

**Vehicle incident rate (VIR)**

Represents the number of vehicle incidents per 200,000 kilometres travelled.

$$\text{VIR} = \frac{\text{Total number of vehicle incidents} \times 200000}{\text{Total kilometres driven}}$$

**Work injury**

Injury to FCS employees and/or contract employees, arising out of and in the course of employment

## ANNEXURE 2: SHE POLICY STATEMENT

[www.fcsholdings.co.za](http://www.fcsholdings.co.za)

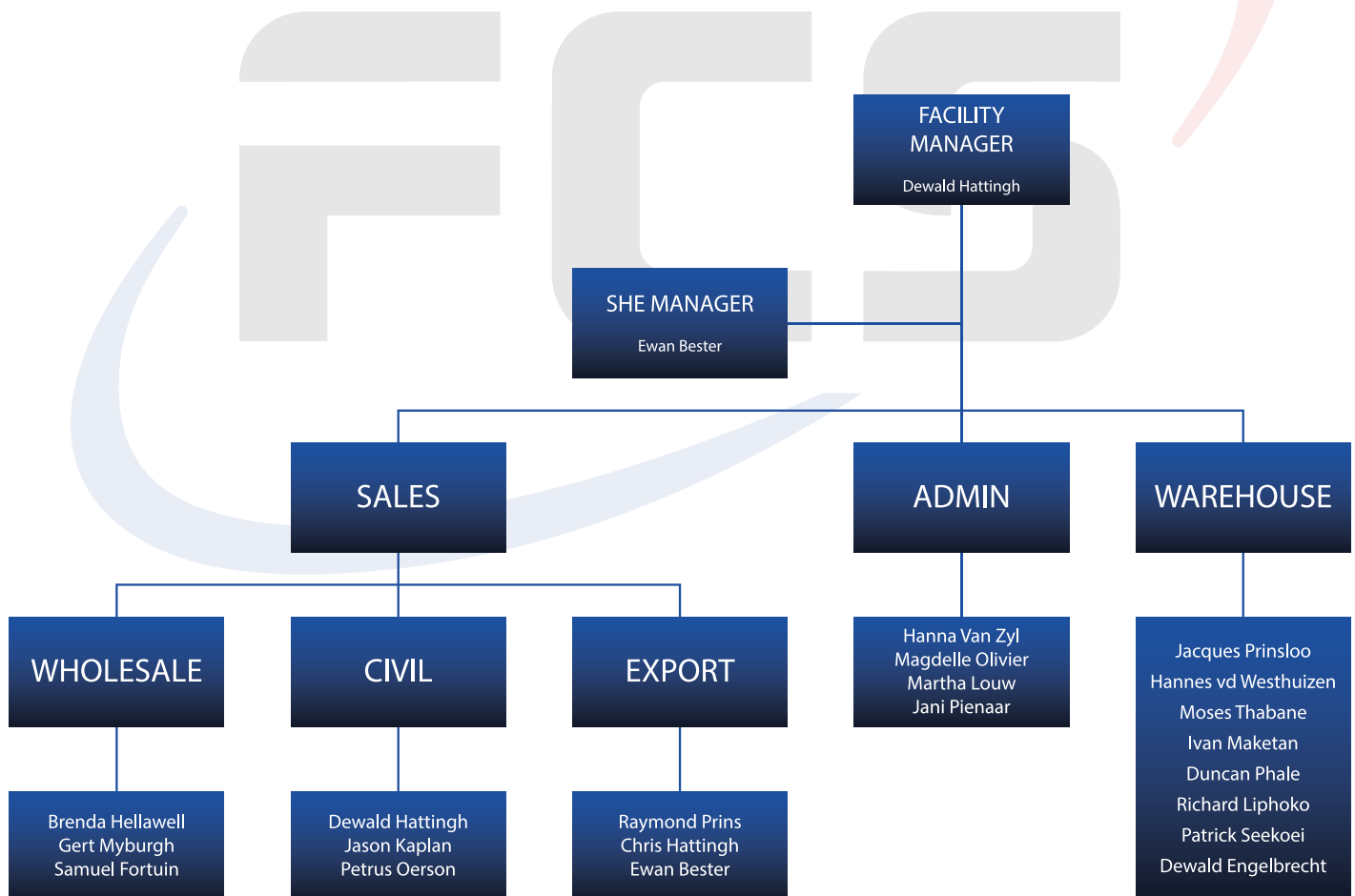
### FCS SHEQ Policy

- FCS is a leading, multi-disciplinary South African construction material supply company which operates across the African.
- FCS management is committed to implementing and upholding a Safety, Health, Environmental & Quality Management (SHEQ) System in order to:
- Move towards entrenching a pro-active SHEQ culture across the business where Home Without Harm – Everyone Every Day is core value, thus promoting commitment to work Safely, promote Health and Wellbeing, protect the natural Environment and deliver a product that conforms to all Quality requirements the first time, every time.
- Manage Behavioral Risk as part of a World Class Strategy for Sustainable SHEQ performance that focusses on people, the Workplace and Behaviors.
- Regularly monitor and report compliance with recognized national and local legal requirements as well as client specific SHEQ practices.
- Train and enhancement of skills and knowledge amongst FCS employees to ensure personal development, to prevent fatalities, injury and ill health as well as avoid negative environmental impact or re-work and to ensure business continuity.
- Continuously communicate openly and effectively with our employees, clients, regulators, shareholders, service providers and competitors to facilitate the development of a construction material supply industry wide culture that reflects the intent of this policy.
- Uphold SHEQ Management Systems that are compliant to the OHSAS 18001, ISO 14001 and ISO 9001 standards and are subject to a process of continual review and improvement.
- Support the FCS Group's sustainable development approach by balancing economic, social and environmental aspects of our business within a transparent and ethical corporate governance framework as per the FCS DNA.

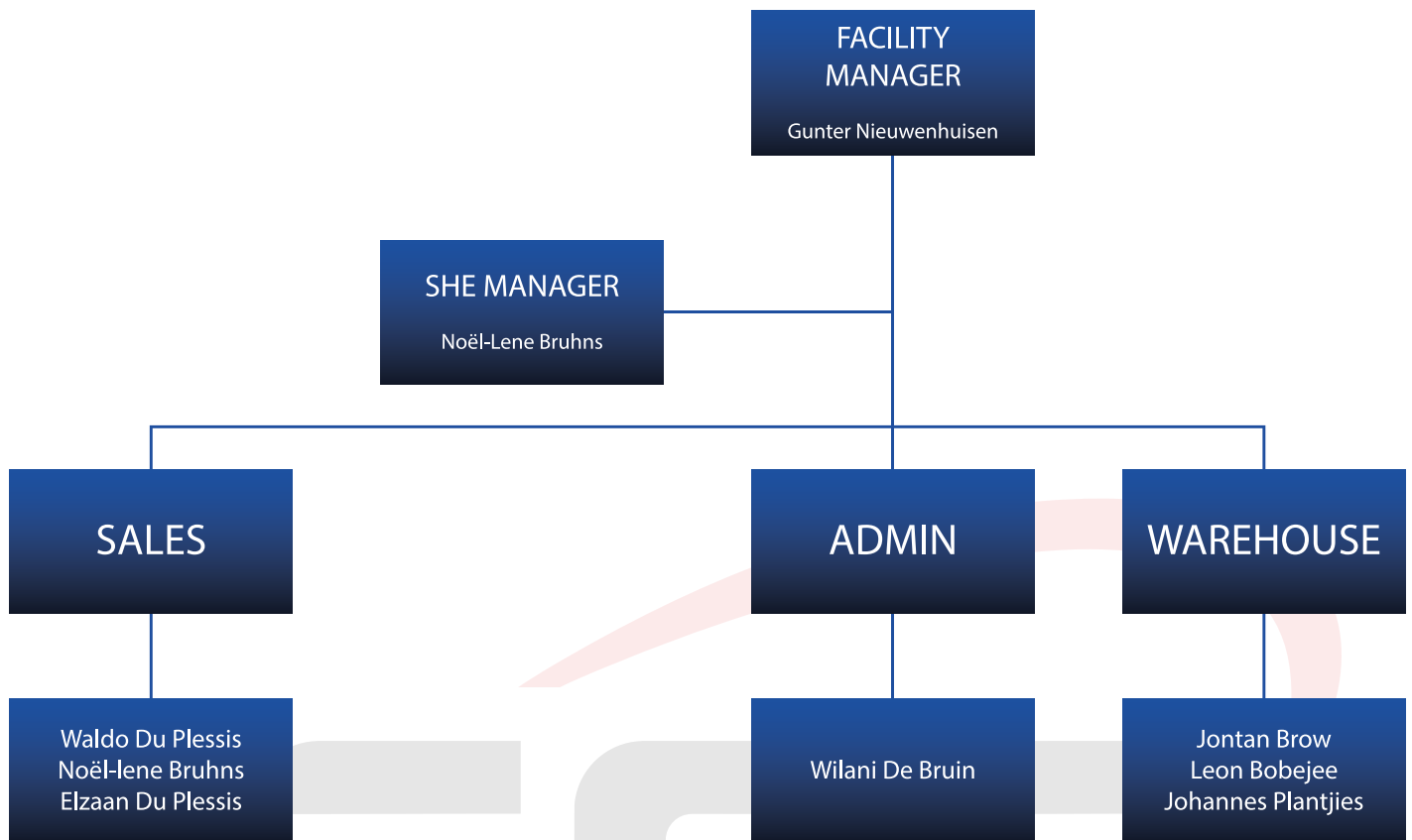
## ANNEXURE 3: APPLICABLE DOCUMENTATION

- 1) Republic of South Africa, Occupational Health and Safety Act, Act 85 of 1993 and regulations
- 2) SABS Specifications (As applicable)
- 3) Republic of South Africa, Basic Conditions of Employment Act, Act 75 of 1997
- 4) Republic of South Africa Labour Relations Act, Act 66 of 1995
- 5) Republic of South Africa Environmental Conservation Act, Act 73 of 1989
- 6) Republic of South Africa Compensation for Occupational Injuries and Diseases Act, Act 130 of 1990
- 7) Republic of South Africa Disaster Management Act, Act 57 of 2002
- 8) Republic of South Africa National Health Act, Act 61 of 2003
- 9) Republic of South Africa Road Transport Act, Act 74 of 1977
- 10) Republic of South Africa National Environmental Management Act, Act 107 of 1998
- 11) Republic of South Africa NEM: Integrated Waste Management Act 59 of 2008
- 12) ISO 14001:2004
- 13) OHSAS 18001:2007

## ANNEXURE 4: ORGANOGRAM - BLOEMFONTEIN



## ANNEXURE 4A: ORGANOGRAM - UPINGTON



## ANNEXURE 5: ACRONYMS

Fire Protection Association	FPA
Working On Fire	WOF
Fall Protection Plan	FPP
Light Delivery Vehicles	LDV
Lock out tag out	LOTO
Environmental Control Officer	ECO
Social Officer	SO
Code of Practice	COP
Disabling injury frequency rate	DIFR
Vehicle incident rate	VIR
Best Practical Environmental Options	BPEO
Non-conformance	NCR
Site Improvement Notice	SIN
Business Unit	BU
Personal Protective Equipment	PPE
South African Bureau of Standards	SABS
Occupational Health and Safety	OH&S
Health, Safety and Environmental	SHE
Compensation of Occupational Injuries and Diseases Act	COIDA
South African National Standards	SANS
Republic of South Africa	RSA
Hazardous Chemical Substances	HCS
➤ Occupational Health and Safety Act	➤ OHASA
➤ South African Police Services	➤ SAPS
➤ Environmental Officer	➤ EO
➤ Environmental Management Plan	➤ EMP

## ANNEXURE 6: FCS FACILITY SHE GOALS AND OBJECTIVES

- No Fatalities
- Develop a single FCS SHE Management System, Compliant to OHS 18001 and ISO 14001
- Implement structured safety campaigns which target high consequence operations and tasks
- Implement the FCS Health and Wellness framework
- Performance reviews of Management and supervisor to include safety and health performance.
- Improve the company waste management culture.
- Design and introduce operational-specific Environmental Awareness Campaigns.
- Effectively measure and monitor water and energy consumption.