



Anglo Occupational Health Way

Management System Standards



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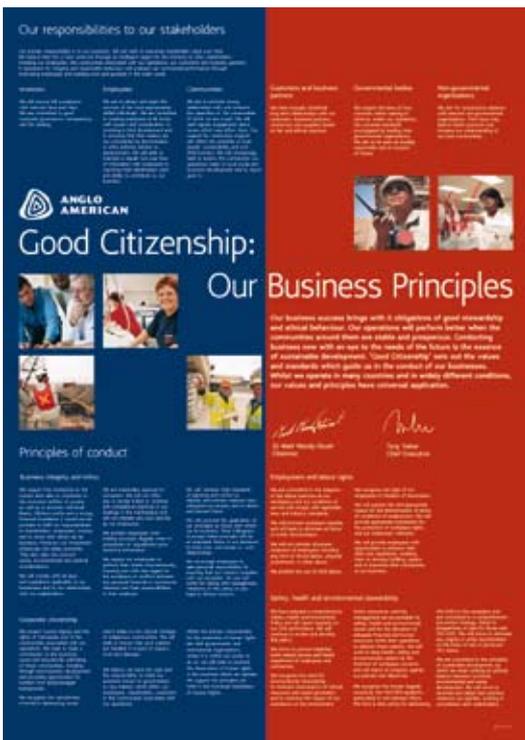
INTRODUCTION

Anglo American plc owns and operates a diverse range of businesses which, by virtue of their size, diversity of operations and geographical locations, pose significant health, safety and environmental challenges.

Our divisions and managed operations are committed to Anglo American’s “Good Citizenship: Our Business Principles”, the Vision of Zero Harm and to our Occupational Health Policy.

To help us meet our commitments to occupational health, Anglo American has developed the **Anglo Occupational Health Principles**, the **Anglo Occupational Health Framework**¹ and the **Anglo Occupational Health Way** Management System Standards². These have been developed through a process of internal and external consultation and collaboration and support the existing Anglo American Occupational Health Management Guidelines.

Our Chief Executive’s commitment to the Anglo Occupational Health Way has been clearly articulated and the Anglo American Executive Committee³ has endorsed and committed to the implementation of the Occupational Health Standards. The Anglo American Board of directors seeks assurance of compliance to the Anglo Occupational Health Way through regular self-assessments, peer reviews and third party audits.



¹ Referred to hereafter as the Occupational Health Framework.

² Referred to hereafter as the Occupational Health Standards.

³ Referred to hereafter as the Executive Committee.

OCCUPATIONAL HEALTH IN ANGLO AMERICAN

OUR VISION

Our vision is to achieve Zero Harm and a healthy and productive workforce through the effective management of occupational health risks in all our managed operations.

We believe our people are our key asset and we do not accept that it is necessary for people to be made ill whilst working for us. All employees should be able to return home fit and well at the end of each shift.

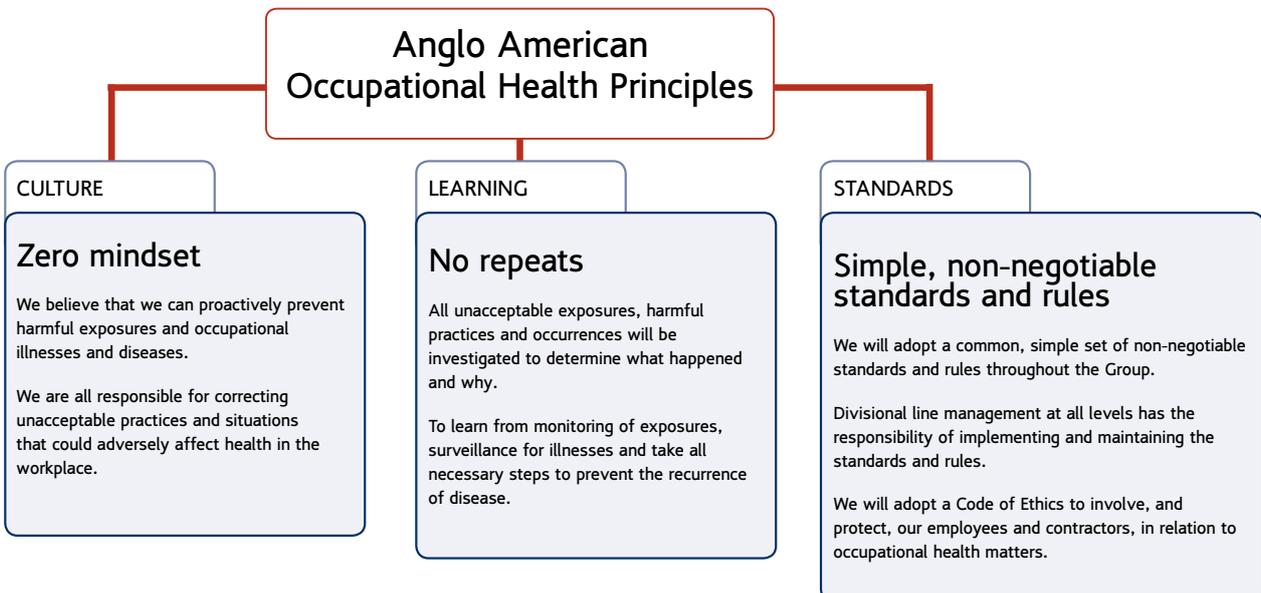
OUR PRINCIPLES

Underpinning the Vision are three fundamental *Principles of Occupational Health*

- All occupational illnesses are preventable
- Learning from our monitoring of exposure and surveillance of disease incidence and using this information to prevent the occurrence of occupational disease
- Consistent application of common, simple and non-negotiable occupational health standards throughout the Group

OUR POLICY

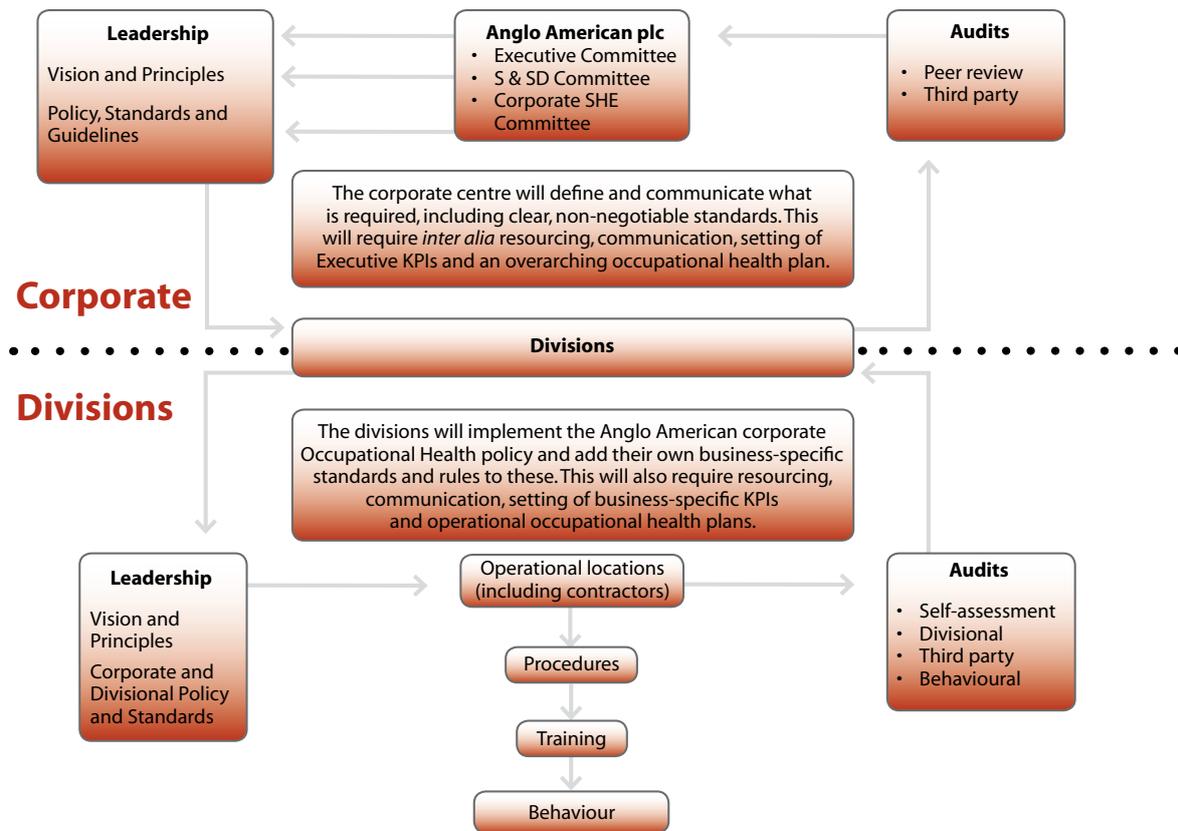
- Line management is responsible and will be held accountable for the implementation of this policy and we expect all employees and contractors to contribute to maintaining a working environment that is without significant risk to health
- We commit to the reduction of exposure at source through good engineering practice and application of the ALARP⁴ principle; compliance with the law will always be the minimum standard
- We will provide appropriate resources, systems and training to protect, maintain and promote the health and working capacity of our people
- We commit to open and transparent communication on occupational health with all stakeholders
- We will set appropriate objectives and monitor progress against these to ensure continual improvement towards our goal
- This policy will be reviewed at appropriate intervals and revised where necessary to keep it current



⁴ As low as reasonably practicable.

THE ANGLO OCCUPATIONAL HEALTH FRAMEWORK

The Occupational Health Framework defines the roles and responsibilities of the corporate centre and divisional organisations on the journey towards Zero Harm. The corporate centre defines and communicates requirements in relation to the Vision, Leadership, Principles, Policy and Standards for occupational health. The divisional organisations implement and incorporate the corporate requirements into business-specific programmes.



CORPORATE PEER REVIEW PROGRAMME

The Peer Review Programme (PRP) has been developed as a means of assurance that fundamentally sound, risk-based management systems are in place at all operations. Furthermore, the PRP assists in building core competence and acts as a catalyst for learning and sharing across the Anglo American group.

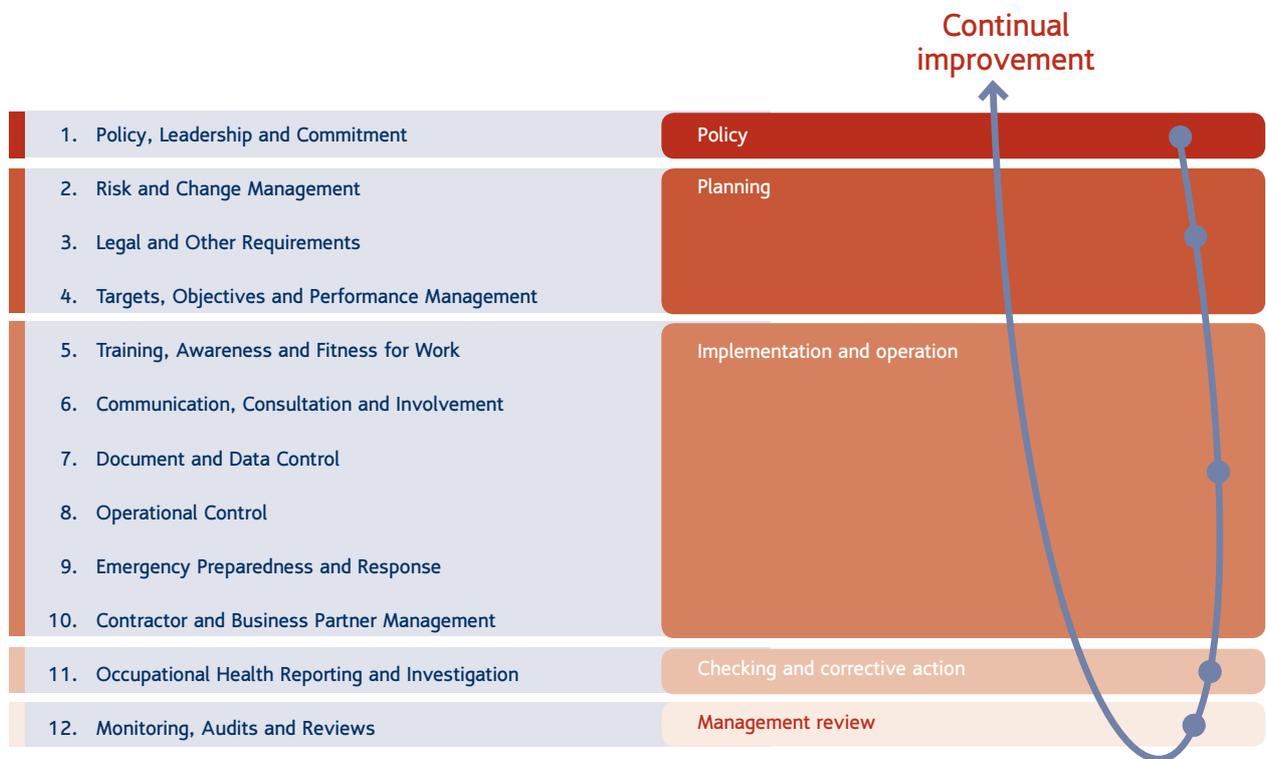
VISIBLE LEADERSHIP

Executives and senior management must lead by example, adopt a Zero mindset and demonstrate the desired leadership behaviours that will drive continual improvement in occupational health performance. Management must set non-negotiable, high standards for occupational health, actively engage with the workforce and correct wrong behaviours or situations. Particular emphasis is needed to ensure that lessons are learned from incidents and that all necessary actions are taken to prevent repeats.

Management at all levels in the organisation has a responsibility to abide by these Principles. They must be embraced and embedded into the organisation and, as leaders, management must demonstrate the Occupational Health Way and relentlessly pursue the development of an occupational health culture which reflects our Vision and Occupational Health Principles.

BACKGROUND

The Standards form the basis for the development, enhancement and application of comprehensive, integrated occupational health management systems throughout our operations. The Occupational Health Standards have been developed from existing Anglo American standards, industry best practice and from internationally recognised occupational health and safety management system standards, such as OHSAS 18001.



Each of the Occupational Health Standards maps to the elements of OHSAS 18001, which is internationally recognised as the best-practice model for the management of occupational health and safety.

OBJECTIVES

The objectives of the Occupational Health Standards are to:

- Support the realisation of the Occupational Health Vision, the implementation of the Occupational Health Principles and the Occupational Health Policy.
- Provide (or support) a framework for a risk-based occupational health management system which will align with Anglo American's Integrated Risk Management Process. Furthermore, they will support the safety management system
- Set out and formalise the expectations for progressive development and implementation of more specific and detailed occupational health management systems at all levels of Anglo American
- Provide clear, auditable criteria against which occupational health management systems can be assessed across all Anglo American operations
- Align performance with Anglo American's Business Principles
- Provide a basis from which to drive continual improvement towards leading industry practice

APPLICATION

These Occupational Health Standards have been endorsed by the Executive Committee. They are mandatory and apply to all activities in Anglo American managed operations.

The Occupational Health Standards shall be applied to mergers and acquisitions to assist in the identification of potential occupational health risks and liabilities associated with businesses prior to them becoming part of Anglo American. They will apply to all operations, regardless of whether they are being prepared for disposal.

Where no formal occupational health management system exists, these Occupational Health Standards shall provide a framework for the development and implementation of a suitable management system. Where formal occupational health management systems do exist, the Occupational Health Standards shall be used as a benchmark to assess the suitability of the existing management system. Where the latter is deficient, the Occupational Health Standards shall be applied. These Occupational Health Standards shall be made available to independently managed operations, via our representatives on the relevant Boards, and to joint ventures, to encourage their application and improvement in occupational health management.

SCOPE

The scope of these Occupational Health Standards covers all operational aspects and activities that have the potential to affect the occupational health of employees and contractors. These Occupational Health Standards cover the entire life cycle of operations, from exploration and planning through to operation, closure and post-closure activities (decommissioning, remediation and rehabilitation).

MANAGEMENT REVIEW

These Occupational Health Standards will be reviewed periodically to ensure that they remain current and valid.

MANAGEMENT STANDARDS

1 POLICY, LEADERSHIP AND COMMITMENT

Management shall demonstrate leadership and commitment to occupational health in line with Anglo American's Vision of Zero Harm.

PERFORMANCE REQUIREMENTS

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| <p>1.1 Anglo American shall maintain an occupational health policy that is appropriate to the nature, health risks and scale of its activities. The Anglo American Executive Board endorses the Occupational Health Policy and will review it regularly to ensure it remains current and relevant. The Occupational Health Policy shall be available to all relevant stakeholders.</p> | <p>1.6 Executives and management shall be ultimately accountable for occupational health within their operations. In keeping with the Vision of Zero Harm they shall have a clear responsibility to set priorities for occupational health and demonstrate a commitment to continual improvement within their operations.</p> |
| <p>1.2 Senior management shall be accountable for establishing and maintaining a local occupational health policy and an occupational health management system that, as a minimum, shall reflect the vision and principles contained in the Anglo American Occupational Health Policy. Occupational Health Management Systems, policies and practice shall also be consistent with the requirements of international management systems such as OHSAS 18001, local legislative requirements and the International Commission on Occupational Health (ICOH) Code of Ethics.</p> | <p>1.7 Performance contracts shall formally define the responsibility and accountability of senior executives and managers for occupational health.</p> |
| <p>1.3 All Anglo American operations shall have clearly defined roles, responsibilities and accountability at all levels and functions within the operation to ensure the effective implementation of the occupational health management system. These shall be defined, documented and communicated to all appropriate personnel.</p> | <p>1.8 All operations shall ensure that processes are in place to ensure continual improvement in occupational health performance.</p> |
| <p>1.4 All operations shall have a member of management with specific responsibility for ensuring the effective implementation of the occupational health policy and the occupational health management system.</p> | <p>1.9 Executives, management, employees and contractors shall demonstrate a clear understanding of the need to comply with corporate and site-specific occupational health standards and of the consequences of non-compliance. This shall include their commitment to Zero Harm and the Occupational Health Principles by preventing and/or correcting harmful behaviours or work conditions.</p> |
| <p>1.5 Adequate resources (human, technical and financial) shall be made available to ensure the effective implementation and maintenance of the occupational health management system. This shall include the use of appropriate, competent occupational health advice.⁵</p> | <p>1.10 Executives, management and first-line supervisors shall visibly demonstrate their commitment to occupational health by participating in occupational health programmes, audits and reviews to ensure that the corporate and site-specific occupational health standards are embedded in workforce behaviours. This shall include engaging with employees and contractors, leading by example, the use of behavioural observation techniques and the demonstration of Visible Felt Leadership.</p> |
| | <p>1.11 Executives and managers shall adopt formal processes that recognise, reinforce and reward desired occupational health outcomes.</p> |

⁵ Occupational Health encompasses the disciplines of occupational hygiene and occupational medicine. From here on the Anglo American Vision of Zero Harm, the Anglo American Occupational Health Policy, the Anglo American Occupational Health Principles, local relevant legislation, the Anglo American Occupational Health Management Guidelines and these Occupational Health Management Standards will be collectively referred to as the Anglo American Occupational Health Rules.

1 POLICY, LEADERSHIP AND COMMITMENT (continued)

- 1.12 All operations shall ensure that processes are in place to ensure the effective review of their occupational health policy and associated systems on a periodic basis to ensure that they remain relevant and appropriate to the nature and extent of the associated risks.
- 1.13 Executives, managers, employees and contractors shall demonstrate their understanding of their responsibility to refuse to allow work to be undertaken or continued where conflict exists between occupational health and other business priorities.

2 RISK AND CHANGE MANAGEMENT

Occupational health hazards shall be identified proactively, the risks shall be assessed and these shall be managed appropriately on an ongoing basis. Where changes occur in operations, processes, activities, occupations or personnel, these shall be managed effectively through the risk assessment process.

PERFORMANCE REQUIREMENTS

Risk Assessment and Management

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| <p>2.1 All operations shall establish and maintain formal systems and processes for the ongoing identification and assessment of health hazards and risks.</p> <p>2.2 Health risk assessment shall include baseline hazard identification, issue-based risk assessment and ongoing monitoring where necessary. The risk assessment process shall consider, as a minimum, routine and non-routine activities, products, procedures and services, planned or unplanned changes, all personnel, contractors, business partners, suppliers and visitors, and all equipment and facilities. Moreover, it shall consider the design, commissioning and operation of the workplace, processes, installations, machinery, operating procedures, purchase of equipment and chemicals and the organisation of work.</p> <p>2.3 All operations shall implement appropriate control measures to ensure that occupational health risks are managed effectively through the use of the hierarchy of controls⁶.</p> <p>2.4 All operations shall ensure that an appropriate occupational hygiene programme for the ongoing identification, assessment, prioritisation and monitoring of occupational health risks is developed in consultation with an occupational hygienist.</p> <p>2.5 All operations shall ensure that an appropriate, risk-based medical surveillance programme is developed and implemented in consultation with an occupational health practitioner.</p> | <p>2.6 The risk assessment processes shall be documented and consistent with the requirements of internationally recognised occupational health and safety management system standards such as OHSAS 18001.</p> <p>2.7 Occupational hygiene sampling methodologies shall be formally developed, documented, implemented and maintained by competent persons. The methodologies shall be consistent with the requirements of internationally recognised standards and codes of practice (or Anglo American Standards as defined from time to time) and the ISO standards relating to specific sampling and analytical techniques. All analyses shall be carried out by accredited laboratories.</p> <p>2.8 All processes and equipment shall be formally identified and assessed using appropriate methodologies (qualitative or quantitative). Control measures shall be reviewed regularly to ensure that they remain appropriate to the nature and extent of the risks.</p> <p>2.9 All operations shall have formal systems in place to ensure that health risk assessments are undertaken, reviewed and signed off by competent persons prior to work activities commencing.</p> <p>2.10 All operations shall ensure that the results of the health risk assessment processes are fully communicated to all relevant personnel and considered when establishing training, awareness and competency requirements.</p> |
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⁶ The hierarchy of controls is as follows: eliminating the risk, controlling the risk at source, minimising the risk and, to the extent that the risk remains, providing personal protective equipment.

2 RISK AND CHANGE MANAGEMENT (continued)

Management of Change

- 2.11 All operations shall ensure that a formal change management programme is developed, implemented and maintained by competent personnel to manage health risks associated with planned or unplanned changes including permanent, temporary or incremental change. The content of the programme shall be appropriate to the nature and extent of the associated health risks and the programme shall, as a minimum, consider changes in duration, personnel, organisation, processes, facilities, equipment, procedures, laws, standards, materials, products systems and services.
- 2.12 All operations shall have formal systems in place to ensure that the change management programme is used proactively, monitored and communicated. Where appropriate this shall involve appropriate consultation with an occupational hygienist or occupational health practitioner. Management shall ensure that competent personnel evaluate and formally authorise all changes.

- 2.13 Formal systems shall be in place to ensure that the consequences of any changes are effectively communicated and understood by all relevant personnel and to ensure the effective tracking of all changes, including updating of all appropriate documentation and health risk assessments.

Systems Review and Risk Register

- 2.14 Processes shall be in place to ensure the effective review of the occupational health systems and to ensure that they remain relevant and appropriate to the nature and extent of the associated risks.
- 2.15 Sites shall maintain an up-to-date health risk register which contains the significant health risks for the site. The health risk register shall be maintained, updated and reviewed at least annually or when circumstances or events change the health risk profile of the business.

3 LEGAL AND OTHER REQUIREMENTS

All operations shall ensure that applicable legal, regulatory and other occupational health requirements⁷ are identified, documented, maintained, accessible, communicated, understood and complied with.

PERFORMANCE REQUIREMENTS

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| <p>3.1 All operations shall have a formal system for accessing the most current relevant legal, regulatory and other occupational health requirements.</p> <p>3.2 All operations shall have, or have access to, competent people for the interpretation and application of all relevant legal, regulatory and other occupational health requirements.</p> <p>3.3 All operations shall have formal systems in place to ensure that relevant information is effectively and proactively communicated to all applicable personnel to ensure that the legal, regulatory and other occupational health requirements are understood.</p> | <p>3.4 All operations shall maintain a formal register of their key legal, regulatory and other requirements relating to occupational health which shall be reviewed at least annually and kept up to date.</p> <p>3.5 Where local legal and regulatory requirements do not require an appropriate level of performance all activities shall be conducted in a manner consistent with the Anglo American Occupational Health Rules.</p> |
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⁷ Other occupational health requirements may include practices and guidelines from academic institutions or societies, International Labour Organisation conventions, World Health Organisation, recommendations etc.

4 TARGETS, OBJECTIVES AND PERFORMANCE MANAGEMENT

Targets and objectives for occupational health shall be integrated into the overall business planning process and deployed throughout the organisation for the purpose of continuous improvement.

PERFORMANCE REQUIREMENTS

- 4.1 All operations shall establish formal, measurable and, where appropriate, quantified occupational health performance targets and objectives at all levels and functions throughout the operation. These shall be consistent with the principle of Zero Harm and the Anglo American Occupational Health Rules.
- 4.2 Targets and objectives shall reflect applicable legal, regulatory and other occupational health requirements and be consistent with the nature of the health hazards and risks associated with the operations.
- 4.3 All operations shall ensure specifically that, when establishing targets and objectives, the results of the health risk assessment processes and the effectiveness of the control measures is considered.
- 4.4 All operations shall have formal systems in place to ensure that targets and objectives are assigned, communicated and understood by all appropriate personnel, including senior management, line management, employees and contractors.
- 4.5 All operations shall ensure that adequate resources (human, technical and financial) are made available and deployed to ensure that the occupational health targets and objectives are met.
- 4.6 All operations shall ensure that occupational health targets and objectives are reflected in the personal performance agreements of all relevant employees and are integrated into contractor management systems. These obligations shall include:
 - 4.6.1 abiding by the occupational health requirements established by the operation;
 - 4.6.2 the culture of vigilance and support of colleagues to ensure that they abide by the occupational health requirements; and
 - 4.6.3 reporting of harmful practices, conditions, procedures and policies to appropriate management.
- 4.7 All operations shall ensure that there are formal processes in place to allow effective two-way communication and consultation on establishing occupational health targets and objectives.
- 4.8 All operations shall ensure that management has a clear and defined responsibility to monitor progress towards meeting the occupational health targets and objectives.
- 4.9 Health and safety shall be a priority for management and the first Key Performance Area (KPA) in performance contracts.
- 4.10 All operations shall ensure that there are formal processes in place to monitor and review the occupational health targets and objectives to ensure that they remain relevant, on track for completion within defined timeframes, and contribute to continual improvement in performance. As a minimum, the review process shall be undertaken on an annual basis.

5 TRAINING, AWARENESS AND FITNESS FOR WORK

All employees and contractors shall be fit⁸ to perform their activities.

PERFORMANCE REQUIREMENTS

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| <p>5.1 All operations shall have formal systems in place to ensure that all personnel and contractors are medically fit to perform their activities when engaged at Anglo American operations or where they are acting on behalf of Anglo American operations. This shall include ensuring that prior to any work commencing relevant personnel have been certified medically fit to perform their activities based on fitness criteria that are inherent to the requirements of the task or job.</p> | <p>5.6 Additional general and specific training needs, including refresher training, shall be identified, prioritised and delivered to ensure that employees and contractors are competent and fit for work before activities are undertaken. Training records for employees, contractors and visitors shall be documented, readily accessible and maintained in a suitable medium</p> |
| <p>5.2 Management shall be accountable for developing and implementing formal training, awareness and fitness for work programmes, which are applicable to all relevant levels and functions within the operation.</p> | <p>5.7 Training shall take into consideration all changes to the operations and personnel that may have an effect on occupational health. Specifically, fitness for work shall be considered on return from absence or where roles are changed.</p> |
| <p>5.3 All operations shall ensure that management, employees and all other relevant personnel receive regular training and coaching in health hazard identification, risk assessment and control of all hazards (including the correct use and maintenance of PPE) in their workplace or areas of responsibility. Line managers shall be accountable for the development, implementation and monitoring of the effectiveness of this training.</p> | <p>5.8 Training programmes shall consider the results of the risk assessment and change management programmes.</p> |
| <p>5.4 All operations shall ensure that training is designed and delivered to ensure that every person in the organisation understands their role with regard to occupational health. Training shall also ensure an understanding of the associated measurement and reward systems.</p> | <p>5.9 All operations shall ensure that their recruitment and selection policies specifically consider the occupational health training, awareness and competencies of all relevant personnel prior to employment.</p> |
| <p>5.5 All operations shall ensure that all organisational roles, positions and job functions have the required occupational health competencies formally defined in terms of appropriate education, training, fitness and experience.</p> | <p>5.10 All operations shall ensure that training programmes take into consideration the cultural and educational diversity of the workforce and the varying levels of responsibility, ability, and workplace risk. Where appropriate, the programmes shall be adapted to account for these considerations and reviewed for effectiveness. Training shall be delivered in an effective and appropriate medium.</p> |

⁸ Fitness, in the context of occupational health, includes mentally and physically fit. Technical (training) competence is dealt with in the Anglo Safety Way.

5 TRAINING, AWARENESS AND FITNESS FOR WORK (continued)

- 5.11 All operations shall ensure that management are trained in effective leadership techniques that reinforce desired behaviours and correct at-risk behaviours in the workplace.
- 5.12 All operations shall ensure that the formal induction programme for employees, contractors and visitors includes aspects relating to occupational health hazards, risks and control measures. This shall be appropriate to the nature and scale of the hazards and risks associated with the operations and site-specific requirements. An evaluation of the understanding of the induction programme shall be undertaken.
- 5.13 Management shall be accountable for ensuring that appropriately qualified occupational health personnel are in place to carry out medical surveillance and occupational health programmes and that the roles, responsibilities and accountabilities of these personnel are established and clearly communicated.
- 5.14 All operations shall ensure that employees, contractors and visitors have access to occupational health services, as appropriate.
- 5.15 Processes shall be in place to ensure the effective review of the occupational health systems as well as processes to ensure that they remain relevant and appropriate to the nature and extent of the associated risks.

6 COMMUNICATION, CONSULTATION AND INVOLVEMENT

All operations shall proactively communicate and consult with all appropriate employees and contractors to ensure that they participate in matters of occupational health.

PERFORMANCE REQUIREMENTS

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| <p>6.1 All operations shall develop and implement formal processes to ensure effective consultation, participation and communication of matters relating to occupational health at all levels and functions within the operation. The consultation and participation processes shall be interactive, allowing for two-way dialogue.</p> | <p>6.5 All operations shall establish systems which provide personnel with access to information regarding results of assessments of potential health risk exposures, occupational hygiene measurement results and their personal medical information.</p> |
| <p>6.2 All operations shall establish and maintain effective and appropriate forums throughout the operation for the regular consultation and communication of occupational health matters. These shall involve all relevant personnel and shall be used as a mechanism to track, monitor and report on the effectiveness of current occupational health systems and performance.</p> | <p>6.6 Information regarding medical surveillance shall be treated in accordance with medical ethics.</p> |
| <p>6.3 The consultation and participation processes shall formally define and communicate to appropriate personnel the arrangements for employee occupational health and safety representation.</p> | <p>6.7 All operations shall develop and implement formal processes to allow the flow of information on matters relating to occupational health within the operation. The processes shall include sharing of lessons learned, good practices and opportunities for improvement. The processes shall also include the sharing of information with other sites, businesses and the wider corporate organisation.</p> |
| <p>6.4 All operations shall ensure that the consultation, participation and communication programmes take into consideration the cultural and educational diversity of the workforce and the varying levels of responsibility, ability and workplace risk. Where appropriate, the programmes shall be adapted to account for these considerations and reviewed for effectiveness. Communication shall be delivered in an effective and appropriate medium.</p> | <p>6.8 The consultation, participation and communication processes shall be reviewed on a regular basis with all applicable personnel to evaluate their effectiveness and to ensure that they remain relevant and appropriate to the nature and extent of the associated occupational health risks.</p> |

7 DOCUMENT AND DATA CONTROL

All relevant occupational health documentation shall be identifiable, readily available and, where appropriate, controlled.

PERFORMANCE REQUIREMENTS

- 7.1 All operations shall implement and maintain an appropriate document control system for the purposes of controlling relevant occupational health management systems, documentation and data.
- 7.2 The document control system shall include a current document outlining the core elements of the occupational health management system and their interactions, including direction to related documents.
- 7.3 The system shall ensure that current versions of documents relevant to the occupational health management system are available, maintained and periodically reviewed for adequacy and accuracy by authorised personnel and are legible and understandable.
- 7.4 The system shall ensure that documents from external sources (including Material Safety Data Sheets) necessary for the planning and operation of the occupational health management system are registered and current, and in a suitable format, either paper or electronic.
- 7.5 The system shall ensure that medical surveillance and occupational exposure records be identified, securely stored, readily located and retrievable, have established retention times of a minimum of 40 years and have responsible custodians assigned.
- 7.6 The system shall ensure that medical and legal confidentiality is protected. This extends to archived confidential materials.
- 7.7 The system shall ensure that obsolete documents and data shall be promptly removed or, otherwise, identified and protected from unintended use.
- 7.8 The system shall ensure that a register of archived documents and data, retained for legal purposes or the preservation of knowledge, is kept and maintained.

8 OPERATIONAL CONTROL

All operations shall apply appropriate control measures for the effective management of health hazards and risks arising from processes and activities.

PERFORMANCE REQUIREMENTS

Through the processes outlined in Standard 2: Risk and Change Management:

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| <p>8.1 All operations shall identify and plan for those processes and activities that require control measures to be applied, based on the results of occupational hygiene monitoring and risk assessments. The operational controls shall be consistent with the nature and extent of the health hazards and risks associated with the operations.</p> <p>8.2 Formal control measures for all relevant processes, products, services and activities, including maintenance, shall be established, implemented and maintained by relevant competent personnel and approved by senior management.</p> <p>8.3 All operations shall have risk-based occupational hygiene programmes in place that identify and assess the occupational health hazards associated with all activities and work environments. Information from these programmes shall be provided to management for the implementation of improvement programmes to address the identified risks using the hierarchy of controls approach.</p> <p>8.4 Control measures shall be based on the results of occupational hygiene monitoring and risk assessments and shall be consistent with the nature and extent of the associated risks. Where appropriate, this shall include reference to design data and operating limits. The control measures shall include documented systems and procedures, where appropriate, and shall be implemented following the principles of the hierarchy of controls.</p> <p>8.5 Relevant control measures, including procedures and other documented requirements, shall be communicated clearly to all relevant personnel, including suppliers and contractors.</p> | <p>8.6 All operations shall ensure that appropriate systems are in place for the effective training of all relevant personnel in the appropriate operational controls to ensure the effective management of health risk.</p> <p>8.7 All operations shall ensure that all appropriate personnel are trained and understand the controls, operational parameters, procedures and maintenance requirements that are in place to manage the occupational health risks.</p> <p>8.8 All operations shall ensure that formal maintenance and inspection programmes are established, implemented and maintained to ensure the ongoing integrity of the facility, work equipment and any equipment that is critical to occupational health. The programmes shall include inspection, testing, calibration and certification at intervals determined by the level and nature of the health risk and manufacturers' requirements.</p> <p>8.9 Systems shall be in place to test and maintain the availability and effectiveness of protective systems and devices.</p> <p>8.10 Facility design, construction and maintenance activities shall take into account sound engineering practices consistent with national, international or Anglo American codes and standards, whichever is the more stringent.</p> <p>8.11 Systems, procedures and work practices shall be formally reviewed on a periodic basis and/or following a potentially harmful exposure or incident to ensure that they continue to be applicable, relevant and effective in controlling the risks for which they were developed or intended. The results of these reviews shall be used for continual improvement and discussed with all appropriate personnel.</p> |
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8 OPERATIONAL CONTROL (continued)

- 8.12 All operations shall ensure that programmes are in place to ensure that personnel in critical jobs are medically fit for duty and are not compromised by external influences, including alcohol and drug abuse.
- 8.13 All operations shall have risk-based medical surveillance and monitoring programmes in place to ensure that employees and contractors undergo assessment of their fitness to work in their own occupations/specific work areas and that these assessments are formally documented and approved by appropriately qualified occupational health personnel (see 2.5). The monitoring programmes shall conform to Anglo American standards.
- 8.14 Where equipment is required for monitoring and measurement of occupational health performance, all operations shall establish and maintain programmes for the calibration and maintenance of the equipment. Records of calibration and maintenance activities, and of the results, shall be documented and retained for appropriate periods.
- 8.15 Occupational health programmes at the operational level shall include programmes to encourage healthy lifestyles and address issues of stress that might affect health.
- 8.16 All operations shall have programmes in place to assess and manage the health risks to employees and contractors in relation to work-related travel, in particular where travel is a frequent and integral part of work.
- 8.17 Processes shall be in place to ensure the effective periodic review of the operational control systems, measures and processes to ensure that they remain relevant and appropriate to the nature and extent of the associated health risks.

9 EMERGENCY PREPAREDNESS AND RESPONSE

All operations shall identify, prepare for and have the capability to respond appropriately to emergency and crisis situations.

PERFORMANCE REQUIREMENTS

- 9.1 All operations shall identify, assess and document all potential emergency and crisis situations and their impacts.
- 9.2 Occupational health personnel shall be included in the team that undertakes this assessment.
- 9.3 Assessments shall be undertaken using methodologies appropriate to the nature and scale of the risk and the potential identified emergency and crisis situations. These shall include potential risks to neighbours and the possible impact of external emergencies (such as major disease outbreaks) on the company.
- 9.4 All operations shall develop and implement plans to respond to the identified emergency and crisis situations. These plans shall outline measures for the prevention and mitigation of illnesses and injuries arising from the emergency and crisis situations. The plans shall be aligned with the Anglo American Crisis Communication Plan.
- 9.5 All operations shall ensure that when developing these plans, they consider as a minimum the nature and scale of the operation, the results of risk assessments and control measures, worst-case scenarios, the availability and capability of local emergency services, details of any emergency response or consultation arrangements, legal and other requirements, experiences of previous emergencies (including experiences from other similar organisations), best practice and the findings from emergency drills.
- 9.6 All operations shall identify the appropriate resources, both on and off site, to ensure the effective implementation of the emergency and crisis situation arrangements. These resources shall include personnel, occupational health practitioners, organisations, equipment, medical facilities and warning devices necessary for emergency response. All equipment and warning devices shall be identified, maintained, tested and available.
- 9.7 All operations shall clearly define, document and communicate all roles and responsibilities associated with the implementation and execution of the emergency and crisis situation arrangements. This shall include all appropriate personnel: occupational health practitioners, employees, legal advisors, contractors, emergency services and, where appropriate, external regulators.
- 9.8 Occupational health practitioners shall have access to up-to-date Material Safety Data Sheets (MSDSs) and HAZMAT documentation.
- 9.9 All operations shall ensure that all relevant personnel are trained, competent and familiar with the requirements of the emergency and crisis situation arrangements and of their respective roles and responsibilities.
- 9.10 All employees, contractors and visitors shall be trained appropriately to understand their respective roles and responsibilities regarding the emergency and crisis situation arrangements.
- 9.11 Emergency response drills shall be conducted to determine the effectiveness of the emergency and crisis situation arrangements, and should include occupational health practitioners. Where appropriate, the drills shall include liaison with and involvement of external response organisations. Lessons learned shall be documented and incorporated into revisions of the arrangements.
- 9.12 All operations shall formally review, document and amend emergency and crisis situation arrangements periodically, but at least on an annual basis and following any emergency or crisis situations, to ensure that they remain relevant and appropriate to the nature and extent of the associated risks.

10 CONTRACTOR AND BUSINESS PARTNER MANAGEMENT

All contractors and business partners shall undertake their activities in accordance with legal, regulatory, and other occupational health requirements including the Anglo American Occupational Health Rules.

PERFORMANCE REQUIREMENTS

- 10.1 The scope and application of the contractor and business partner (C&BPs) arrangements shall include temporary activities, discrete projects of finite duration, and those engaged under contract to carry out specific short-, medium- and long-term tasks or services within operations.
- 10.2 All operations shall have a formal contractor management system (CMS), appropriate to the nature and extent of the associated risks, the purpose of which is to ensure that all C&BPs undertake their activities in line with the Anglo American Occupational Health Rules.
- 10.3 The CMS shall include the requirement for all C&BPs to be subject to a risk-based evaluation prior to contractual arrangements being established. This shall consider the nature of their products, activities or services and previous occupational health performance, training, awareness and competence.
- 10.4 The CMS shall include the requirement for formal occupational health arrangements to be built into the contract to ensure C&BPs comply with the legal obligations and the Anglo American Occupational Health Rules.
- 10.5 The contract shall explicitly state that C&BPs are responsible for their own occupational health. There shall be specific reference to the consequences of non-compliance which shall be explicitly identified, communicated and understood.
- 10.6 C&BPs shall be required to undertake health risk assessments for all pertinent activities and develop occupational health plans as part of the contract conditions and prior to commencing any work. The occupational health plans relating to the C&BP activities shall include hazard identification and analysis, risk assessment, appropriate control measures (including the use of PPE), guidance on emergency response actions, monitoring and reporting of occupational health performance and requirements to conform to the Anglo American Occupational Health Rules.
- 10.7 The CMS shall contain clear and documented reporting relationships, lines of consultation and communication, roles, responsibilities, accountabilities and (where appropriate) system interfaces between C&BPs and the operation.
- 10.8 All operations shall appoint specific representatives to act as a focal point for the management and oversight of C&BPs. These representatives shall ensure that competent persons undertake periodic occupational health reviews/audits of C&BP occupational health performance in accordance with the CMS.
- 10.9 All C&BPs shall report regularly on their occupational health performance to the appointed representatives and, where appropriate, be involved in site meetings, reviews and incident investigations.

10 CONTRACTOR AND BUSINESS PARTNER MANAGEMENT (continued)

- 10.10 All C&BPs shall provide information on the hazards and risks associated with their equipment, products (including relevant MSDSs) and services prior to delivery or commencement of work and whenever changes occur. This shall include arrangements for the evaluation and risk assessment of equipment or materials prior to purchase, hire or lease, to ensure their suitability for use and to prevent the introduction of occupational health hazards and risks. This evaluation and risk assessment shall be performed by suitable and competent persons.
- 10.11 All operations shall have a register of all C&BPs working on site. This register shall include documented information on their occupational health performance, from both a compliance and non-compliance perspective. Contracts shall include a right to terminate for poor occupational health performance.
- 10.12 The management of contracting companies shall regularly audit and review their operations on site for compliance with their own standards and the Anglo American Occupational Health Rules. Contractor management shall also engage their colleagues and employees in the correction of risky behaviours.
- 10.13 Processes shall be in place to ensure the effective review of the CMS to ensure that it remains relevant and appropriate to the nature and extent of the associated health risks.

11 OCCUPATIONAL HEALTH REPORTING AND INVESTIGATION

All occupational health risks, exposures and diseases shall be reported, investigated and analysed. Appropriate corrective and preventive action shall be taken and closed out and the lessons shared.

PERFORMANCE REQUIREMENTS

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| <p>11.1 All operations shall have formal systems in place for the reporting, investigation, closure and communication of all occupational health risks, high-level exposures, occupational diseases and non-conformances⁹.</p> <p>11.2 The systems shall define the methodology, responsibility and authority for the general handling and investigation of all accidental high-level risks, reported occupational diseases and non-conformances, with the objective of establishing the fundamental root cause of each of these.</p> <p>11.3 The systems shall include mechanisms to ensure that legal defences are not compromised during the initial and subsequent internal and external investigation processes.</p> <p>11.4 The systems shall ensure that comprehensive investigations that identify and prioritise corrective and preventive actions are performed to eliminate or reduce the risk and recurrence of occupational health risks, hazardous exposures, occupational diseases and non-conformances. These investigations shall specifically include root cause analysis where appropriate.</p> <p>11.5 The systems shall, as a minimum, include the identification and documentation of the controls necessary to treat the occupational health risks, exposures, or non-conformances and the analysis of all contributing factors, root causes and control failures.</p> <p>11.6 The proposed corrective and preventive actions shall be reviewed through the risk assessment process prior to implementation to ensure that these are appropriate to the nature and extent of the hazards and associated health risks.</p> <p>11.7 Formal systems shall be in place to ensure that corrective and preventive actions are documented, communicated, followed up and completed.</p> | <p>Confirmation of the effectiveness of corrective and preventive actions shall be undertaken.</p> <p>11.8 Where changes to existing systems or procedures take place, these shall be effectively communicated to all relevant personnel.</p> <p>11.9 All relevant information gathered during an investigation shall be analysed and reported to management to assist in identifying and assessing the existing or proposed additional control measures.</p> <p>11.10 Systems shall be in place to allow lessons from investigations to be shared across the operation and to others in the wider organisation as appropriate.</p> <p>11.11 All operations shall ensure that, when significant occupational health risks or exposures are identified or occur, information will be shared within the Anglo American group to allow risk assessment and preventive actions to be implemented in all similar workplaces, activities and operations.</p> <p>11.12 All operations shall ensure that competent senior management sign off the investigative processes to demonstrate that appropriate reviews and assessments have been undertaken.</p> <p>11.13 All operations shall have systems that encourage all personnel and contractors to report occupational health risks, exposures and diseases.</p> <p>11.14 All operations shall report on appropriate health indicators, as determined from time to time, to the Anglo American SHE database.</p> <p>11.15 All operations shall have a formal system of processing and implementing relevant information from Anglo American Occupational Health Alerts.</p> <p>11.16 Processes shall be in place to ensure effective review of the systems and processes to ensure that they remain relevant and appropriate to the nature and extent of the associated health risks.</p> |
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⁹ Non-conformance is defined as repeated exposure above the OEL.

12 MONITORING, AUDITS AND REVIEWS

All operations shall ensure that occupational health performance, systems and equipment are monitored, audited and reviewed to identify trends, measure progress and assess compliance.

PERFORMANCE REQUIREMENTS

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| <p>12.1 All operations shall establish and maintain programmes to monitor and measure occupational health performance on a periodic basis. The criteria shall be consistent with internationally recognised occupational health and safety management system standards such as OHSAS 18001.</p> <p>12.2 All operations shall establish, document and maintain a formal audit programme that ensures the effective monitoring of conformance with the Anglo American Occupational Health Rules.</p> <p>12.3 All operations shall implement and maintain first party audit programmes that monitor conformance to the Anglo American Occupational Health Rules.</p> <p>12.4 All operations shall conduct a baseline audit, after which the scope, frequency and methodology of audit programmes shall be determined based on the results of risk assessments and the results of previous audits, and be appropriate to the nature and scale of the hazards and associated health risks.</p> <p>12.5 The programme shall include details of the specific competencies, roles and responsibilities and the requirements for conducting audits and reporting results.</p> <p>12.6 Audit programmes shall, as a minimum, include occupational health management system reviews, departmental audits, appropriate technical audits, contractor audits and third-party audits.</p> | <p>12.7 Management shall be actively engaged in appropriate audits to ensure that effective Visible Felt Leadership, mentoring and coaching are demonstrated.</p> <p>12.8 All operations shall have formal processes for responding to, and for the monitoring of, actions resulting from the audit programmes to ensure that issues are closed-out appropriately and in a timely manner.</p> <p>12.9 Executive and senior management shall have clear accountability for ensuring that the audit programme is developed, implemented and reviewed to ensure continual improvement. Operational management shall have clear responsibility to ensure the audit programme is implemented and maintained effectively.</p> <p>12.10 Outside of the formal audit programme senior management shall periodically review the occupational health management system to ensure its continuing implementation and effectiveness, and to ensure that it remains relevant to the operations. The review shall be documented and, as a minimum, address the possible need for changes to policy, objectives and other elements of the occupational health management system. The findings from occupational health management system audits shall be analysed and utilised in the process of continual improvement.</p> |
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DEFINITIONS OF TERMS USED IN THE ANGLO OCCUPATIONAL HEALTH WAY

ALARP	As low as reasonably practicable. The concept of weighing the risk against the sacrifice needed to implement the measures necessary to avoid the risk. In health and safety it is assumed that the measures should be implemented unless it can be shown that the sacrifice is grossly disproportionate to the benefit.
Assessment	A systematic and documented review of the effectiveness of implementation of processes, programmes and procedures, based on general process criteria and the professional judgment of experienced assessors.
At-risk behaviour	Conduct (whether witnessed or not) that unnecessarily increases the occupational health risks and the likelihood of harm through hazardous exposures and non-conformances.
Audit	A systematic, independent and documented process for obtaining evidence and evaluating it objectively to determine the extent to which the management systems criteria set by the organisation are fulfilled.
C&BP	Contractors and business partners.
Change	A departure (permanent, temporary or incremental) from a currently established baseline, or anything that is or may be substituted for something else. This includes changes to personnel, processes, systems, plant and equipment, technology, documents, risks, legislation, commitments, obligations, other requirements and external environmental, physical and social factors affecting or affected by the organisation.
Change management	The systematic process for dealing with change to manage risk to occupational health and safety.
CMS	Contractor management system.
Communicate	The process of sharing and exchanging ideas or information.
Competence	A combination of attributes such as knowledge, skills, abilities, experience, qualification and attitudes providing adequate assurance of successful performance. In the context of occupational health, competence includes medical and physical fitness.
Consequence	Outcome or impact of an event.
Continual improvement	A process of enhancing performance and management systems, not necessarily simultaneously in all areas.
Contractor and business partner	An individual, company or other legal entity that carries out work or performs services pursuant to a contract for service. This includes subcontractors.
Crisis	An actual or potential threat to Anglo American's long-term ability to do business due to the impact on the occupational health and safety of employees and contractors or the impact on the public, the environment, Anglo American's operability, assets, image and reputation, or potential for liability.
Critical equipment	A piece of equipment or a structure of which the failure, or failure to perform to design specification, has the potential to result in a major hazard to occupational health and safety.
Culture	The whole complex of distinctive spiritual, material, intellectual and emotional features that characterise a society or social group.
Design data	All the information that is used in the planning and construction of plant or equipment. From an occupational health perspective this will include, but is not limited to, operating criteria such as emission levels and ergonomic factors.

DEFINITIONS CONTINUED

Documents	Structured units of recorded information, published or unpublished, in physical or electronic form, managed as discreet units in the occupational health management system. Most records are documents, but not all documents are records. A document becomes a record when it is part of a business transaction, is kept as evidence of that transaction and is managed within a record-keeping system.
Emergency	A serious, unexpected and potentially dangerous situation requiring immediate action.
Employee	An individual who works for Anglo American or one of its divisions or operating units under a contract of employment.
Environment	Surroundings in which Anglo American operates, including air, water, land, natural resources, flora, fauna, habitats, ecosystems, biodiversity, humans (including human artefacts, culturally significant sites and social aspects) and their interaction. The environment in this context extends from within an operation to the global system.
Exposure	The experience of coming into contact with a hazard in the workplace (physical, chemical, biological, ergonomic or psychological) that potentially has a harmful effect on health.
Formal	A defined method which is appropriate for the purpose intended – e.g. a defined and documented system.
Harm	A significant and/or long-lasting adverse impact on people, the environment or the community.
Hazard	A source of potential harm, injury or detriment. In the occupational health setting these are defined as physical, chemical, biological, ergonomic and psychological.
HAZMAT documentation	Documentation that describes the physical, chemical and toxicological properties of hazardous materials and the protective measures needed to manage exposure. Material safety data sheets (MSDS) are part of this documentation.
Hierarchy of controls	A series of controls which should be applied in the following order: <ol style="list-style-type: none"> 1. Eliminate – the complete elimination of the hazard. 2. Control at source – application of engineering controls such as enclosure, local exhaust ventilation, redesign of machinery 3. Minimising the risk – substitution of the chemical or process with a less hazardous one, dilution of a chemical or gas, administrative changes to work (e.g. job rotation) 4. Personal Protective Equipment – using properly fitted PPE where other controls are not practicable.
ICOH	International Commission on Occupational Health.
Impact	A marked change to the health and safety of people, the environment, the community or property, whether adverse or beneficial, wholly or partially resulting from an organisation's activities, products or services.
Incident	In the context of the Anglo Occupational Health Way this means any occupational disease or preclinical adverse change in a health parameter (as identified by medical surveillance) and any exposure to a hazard that has resulted in or has the potential to result in adverse consequences to health.
KPIs	Key performance indicators.
Likelihood	A description of the probability or chance that an event will occur.
Management system	Management processes and documentation that collectively provide a systematic framework for ensuring that tasks are performed correctly, consistently and effectively to achieve a specified outcome and to drive continual improvement in performance.

DEFINITIONS CONTINUED

Manager	Any Anglo American employee or contractor who has other persons reporting to him or her, or who has the authority to allocate resources.
Non-conformance	Any departure from work standards practices procedures regulations management system performance etc. that could either directly or indirectly lead to injury or illness, property damage, damage to the workplace environment, or a combination of these.
Occupational health	Occupational health encompasses the disciplines of occupational hygiene and occupational medicine.
Occupational health practitioner	A nurse or medical doctor with specialist training in occupational health.
Occupational hygiene	The discipline of anticipating, recognising, evaluating and controlling health hazards in the working environment with the objective of protecting worker health and well-being and safeguarding the community at large.
Occupational hygienist	A person who has an appropriate qualification (diploma or degree) to practise the discipline of occupational hygiene.
OEL	Occupational Exposure Limit.
OHSAS 18001	Occupational Health and Safety Assessment Series (specifications for occupational health and safety management systems).
Partners	Includes joint venture partners and government agencies, and other stakeholders executing projects or programmes of work with Anglo American companies/operating units, excluding contractors.
Participation	A process through which stakeholders influence and share control over initiatives, decisions and resources which affect them.
Peer review	The peer review programme has been developed as a means of assurance that fundamentally sound, risk-based management systems are in place at all Anglo American operations or places of business. Peer review assists in building core competence and acts as a catalyst for learning and sharing across the Anglo American group.
Personal protective equipment	Items of clothing (including safety hard hats, overalls, safety boots) and equipment (including safety glasses, face masks, gloves, ear plugs) designed and intended for the purpose of preventing any harm or injury to personnel while engaged in work-related activities.
Personnel	People engaged in work for, or on behalf of, Anglo American companies, including employees, people on temporary contracts and contractors.
Preventive action (corrective and preventive)	An action implemented to prevent the occurrence of harm. The preventive action is proportionate to risk.
Procedure	A specified way to carry out an activity or a process. Procedures may be documented or not. An Anglo American procedure is mandatory to all Anglo American sites and operations; these documents address specific areas (e.g. corporate performance reporting, risk management, incident investigation, etc) where it is important that activities are carried out consistently across the Anglo American group.
Product	Articles, materials and wastes arising from the processes and activities of the site.
Records	Recorded information, in any form, created or received and maintained by an organisation or person in the transaction of business or the conduct of affairs, and kept as evidence of such activity.
Resources	Resources may include human resources and specialised skills, organisational infrastructure, plant, equipment, technology and financial resources.

DEFINITIONS CONTINUED

Risk assessment	A structured and systematic evaluation of the likelihood of harm resulting from exposure to a hazard in the workplace. This is dependent upon the correct identification of the hazards and an appropriate estimation of the risks arising from them with a view to comparison with acceptable risk criteria or goals for the purposes of control or avoidance of the risk.
Risk management	The systematic approach to the control and avoidance of risk (see hierarchy of controls). This includes the process of risk assessment described above.
Risk	Exposure to the consequences of uncertainty. Risk has two dimensions: the likelihood of something happening and the consequences if it were to happen.
Root cause	The cause of the incident (not the direct cause) that, when rectified, will prevent the recurrence of not just incidents with those exact circumstances, but others with similar causes. When applied to successes, it can elicit the actions required to emulate and repeat the success. (Root cause is sometimes referred to as underlying cause.)
Rules	Anglo American's vision and aim of Zero Harm, the Anglo Occupational Health Policy, the Anglo Occupational Health Principles, the Anglo Occupational Health Management System Standards and local relevant legislation are collectively referred to as the Anglo American Occupational Health Rules.
S&SD	Safety and Sustainable Development.
Scope	Defines the boundaries within which the management system applies.
Significant risk	A situation in which continued exposure will in all likelihood result in harm in the foreseeable future.
Standard	Standards are mandatory at all Anglo American sites and operations and form the basis for the development and application of management systems at all levels of Anglo American.
Supplier	A business entity that provides goods and/or services integral to and utilised in/for the production of Anglo American products and services.
System	A set of arrangements, responsibilities and authorities aimed at ensuring the achievement of defined outcomes.
Target	Detailed performance requirements, quantified whenever practicable, that arise from objectives and are set in order to achieve the objectives.
Third party	An independent party, distinct from Anglo American employees, who provides inputs on assurance of compliance with the Anglo Occupational Health Management System Standards.
Tolerable risk	A risk that has been reduced to a level where continued exposure is unlikely to result in harm.
Visible Felt Leadership	A term describing the process of management regularly visiting the workplace addressing health and safety issues; "Walking the talk" in a consistent, visible and credible manner.
Visitor	A person, visiting an Anglo American site, who is not an Anglo American employee or contractor at that site.
Zero Harm	Anglo American's vision and aim of preventing any harm to any employee, contractor or visitor at any Anglo American operation or place of business.
Zero mindset	The culture of proactively preventing harmful exposures and occupational diseases, as part of the broader culture of preventing any harm to any employee, contractor or visitor at any Anglo American operation or place of business.

NOTES

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