



Western Builders Limited  
Occupational  
Health & Safety

# **OHS SAFETY POLICY, PROCEDURES & PLAN**

# CONTENTS

1. **POLICY STATEMENT**
2. **ADMINISTRATION OF SITE SAFETY**
3. **HAZARD MANAGEMENT**
4. **EMERGENCY PROCEDURE**
5. **ACCIDENT / INCIDENT REPORTING**
6. **RESPONSIBILITIES**
7. **APPENDIX**

- A Hazard Identification Form
- B Hazard Control Form
- C Emergency Actions List
- D Material Data Sheets
- E Accident Investigation Report
- F Project Audit Sheet
- G Site Inspection List
- H General Safety and Health Rules
- I Employee Safety Induction Record
- J Site Safety Plan

# 1. POLICY STATEMENT

Western Builders Limited (WBL) is committed to Health and Safety in the work place.

Our Objectives are: -

- To provide training and procedures in appropriate translations for the safe use, handling, storage and transport of plant and substances.
- To provide and maintain a safe work place for workers and non-workers, with all necessary Personal Protective Equipment (P.P.E.).
- To assist the Health and Safety committee in their function under the act, to continually improve his standard of safety in the work place.

We expect all of our employees to follow all health and safety policies and procedures, and to report all potential hazards to their Supervisor, H & S Rep, or manager.

*"Those who create the risk and work with the risk have the primary responsibility to solve the risk"*

The Health and Safety Work Act 1996 is attached to this safety plan. Western Builders Ltd and its employees have a responsibility.

## 2. ADMINISTRATION OF SITE SAFETY PLAN

The Project Manager / Supervisor / Foreman for this project is :-

\_\_\_\_\_ Ph: \_\_\_\_\_ Mobile: \_\_\_\_\_

The Project Manager has overall responsibility for ensuring the act and its objectives are complied with on each site. The Project Manager / Supervisor / Foreman as per the WBL policy will conduct an audit of each project at regular intervals. Typical Audit forms are attached. Refer Appendix F.

The Safety Officer for this project is:-

\_\_\_\_\_ Ph: \_\_\_\_\_

The Safety officer is responsible for the day-to-day administration of the Safety Plan, they will ensure that all WBL employees and visitors to site are aware of safety procedure.

The Safety Officer is responsible for Hazard Management on the site to ensure no incidents or accidents occur. He will be responsible for regular safety inspection and site safety meetings as considered reasonable for each project. Typical Inspection form is attached – Refer Appendix G.

# 3. HAZARD MANAGEMENT

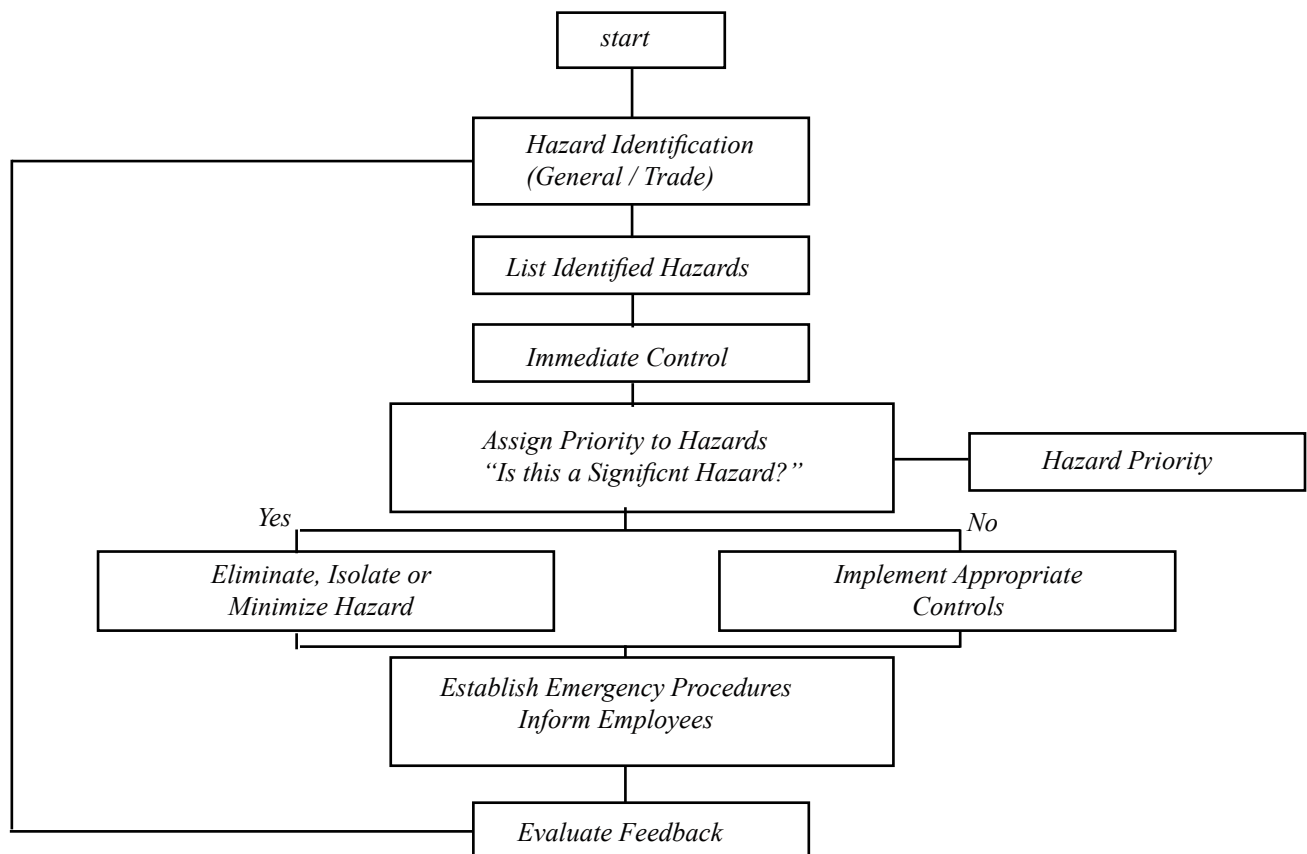
## Objective

- To identify existing and new hazards to employees and visitors at the project site.
- To assess the risk significance.
- To implement control to either eliminate, isolate, or minimize the hazard.

## Hazard Considerations

- Personal Safety Equipment such as appropriate footwear, safety goggles, ear muff, etc.
- Correct operation of Plant and Equipment.
- Material handling and storage.
- Working platforms, i.e. scaffolding, safety rails.
- Temporary works, i.e. excavations – are they barriered, will they cave in, etc.

The site manager with assistance from all staff and sub-contractors shall identify in each trade section the hazard, its duration and method of control. The following flow chart demonstrates procedure to be followed.



## Hazard Identification

The Safety Officer must record, in General and Trade Terms the possible hazards both current and potential for this project. "HAZARD IDENTIFICATION FORM" is used to list hazards. Refer Appendix A

## **Hazard Risk Assessment**

Each Hazard is categorized in to: -                      Significant or  
Non-Significant

Significant Hazards and Non Significant Hazards are then addressed by the Safety Officer.  
Can the hazards be:-

1.        Eliminated.
2.        Isolated.
3.        Minimised.

Safety Officer is to take reasonable action to effect Step 1, or 2 or 3 whichever is practicable.  
Considerations include:-

1.        Can the hazard be removed by design or engineering?
2.        Can the hazard be removed by substitution?
3.        Can the risk from the hazard be reduced by enclosing it or isolate it from the work force?
4.        Can the risk from the hazard be reduced by enclosing it or isolate it from the work force?
5.        Can the hazards be removed at source before they can effect the work force?
6.        Can the hazard be reduced by segregating the process from workers other than those needed for the process?
7.        Can personal protective equipment be used to reduce the risk of injury?
8.        Can rules or procedures be developed to reduce the risk of injury?

## **4. EMERGENCY PROCEDURES**

### **Objective**

- To be prepared for and act on any emergency that may develop on site.

### **Emergency Plan**

Each site will display.

- **Site Safety Location Plan.** (*Information to be included.*)
- Site Address.
- Site Telephone Number.
- Location of the site and adjoining streets.
- Location of site entrance.
- Location of site Officers and the amenities as appropriate.
- Location of First Aid Room.
- Location of phones.
- Location of Fire Extinguishers (*include type*).
- Location of assembly area in the case of an emergency.
- **Emergency Action List** (*refer Appendix C*).
- **Material Data Sheets** for Hazardous Materials stored on site (*refer Appendix D*).

The following emergency plans are to provide site staff with guidance on the typical steps to be taken in the case of a variety of emergencies, and recognizes the fact that all emergencies are different and may require different actions.

## **Serious Injury**

- Ensure injured person is in no danger of further injury.
- Find out what injuries there are/Apply First Aid/Send someone to notify

Ambulance.

- Dial 911.
- Ask for Ambulance.
  1. Give your name.
  2. The site address, which is \_\_\_\_\_
  3. Telephone No, which is \_\_\_\_\_
  4. How many hurt
  5. What the injuries are
  6. Where the victims are
- Ensure clear access for Ambulance.
- Meet Ambulance

*Note: Once emergency is under control:*

1. Inform Safety Officer immediately.
2. Close off accident site.
3. Erect accident control notice.
4. Do not interfere with Accident Scene (unless necessary to prevent further harm).
5. Safety Officer to Notify authorities immediately.
6. Safety Officer to carry out accident Investigation.
7. Safety Officer to provide accident report within 2 days of accident.
8. Safety Officer to provide details of accident to company records.

## **Fire**

- Raise Alarm.
- Get Everybody Out to Emergency Assembly Area.
- Dial 911.
- Ask for Fire Service.
  1. Give your name.
  2. The site address, which is.....
  3. Telephone No, which is.....
  4. Where the fire is
  5. What dangers there are – Solvents, Gases, Cylinders, Power Cables, etc.
- Check all employees are present, including any visitors.
- Do not re-enter building site until all clear given by the Fire Dept.
- Only attempt to extinguish the fire if you can safely do so (Note location and type of fire extinguishers on Site Safety Location Plan).

*Note: Once emergency is under control:*

1. Inform Safety Officer immediately.
2. Close off the site.
3. Erect accident control notice.
4. Do not Interfere With Fire Scene (unless necessary to prevent further harm or serious damage to property).

## **Structural Collapse**

- Ensure injured person is in no danger of further injury.
- Find out what injuries there are/Apply First Aid/Send someone to notify Ambulance.
- Dial 911.
- Ask for Ambulance.
  1. Give your name.
  2. The site address, which is .....
  3. Telephone No, which is.....
  4. How many hurt
  5. What the injuries are
  6. Where the victims are
- Ensure clear access for Ambulance.
- Meet Ambulance.

*Note: Once emergency is under control:*

1. Inform Safety Officer Immediately.
2. Close off accident site.
3. Erect accident control notice
4. Do not Interfere With Accident Scene (unless necessary to prevent further harm).
5. Safety Officer to Notify authorities immediately.
6. Safety Officer to provide accident report within 7 days of accident.
7. Safety Officer to provide details of accident to company records

## **Earthquake**

### *If inside*

1. Obtain shelter under the most solid and secure object, i.e. solid table, door way etc.
2. Remain in building until instructed to evacuate.
3. Do not use telephones unless in order to save a life.
4. If evacuation is ordered, follow the same procedure for fire.
5. Apply first aid to injured and get them to safe shelter from after shocks).
6. Put out any small fires.
7. Shut off any gas mains, power supplies, water supplies, plant and equipment, etc.
8. No smoking
9. Listen to the radio for instructions.
10. Report to the safety Officer.

### *If outside*

1. Keep well clear of any structures.
2. Do not stand near, scaffolding, power poles, high stacks of materials, etc.
3. Apply first aid to Injured and get them to safe shelter (from after shocks).
4. Put out any small fires.
5. Shut off any gas mains, power supplies, water supplies, plant and equipment, etc.
6. No smoking.
7. Listen to the radio for instructions.
8. Report to the Safety Officer.

## **Meteorological Storm/Cyclone**

1. If sufficient time allows before storm strikes, secure all equipment, materials (especially sheets of iron, plywood, glass, etc), close windows and doors, batten openings, and shut off services i.e. gas, power, water, etc.
2. Obtain shelter under the most solid and secure object, i.e. solid table, door way, etc.
3. Remain in building until instructed to evacuate.
4. Do not use telephones unless in order to save a life.
5. If evacuation is ordered, follow the same procedure for fire.
6. Apply first aid to injured and get them to safe shelter.
7. Shut off any gas mains, power supplies, water supplies, plant and equipment, etc.
8. No smoking.
9. Listen to the radio for instructions.
10. Report the Safety Officer.

## **Explosion**

- Raise Alarm
- Get Everybody Out to Emergency Assembly Area.
- Dial 911.
- Ask for the Fire Service.
  1. Give your name.
  2. The site address, which is.....
  3. Telephone No, which is.....
  4. Where the explosion occurred and location of fire is
  5. What dangers there are – Solvents, Gasses, Cylinders, Power Cables, etc.
- Check all employees are present, including any visitors.
- Do not re-enter building site until all clear given by the Fire Dept.
- Only attempt to extinguish the fire if you can safely do so.

*Note: Once emergency is under control:*

1. Inform Safety Officer immediately.
2. Close off the site.
3. Erect accident control notice.
4. Do Not Interfere With Explosion Scene (unless necessary to prevent further harm or serious damage to property).

## **Motor Vehicle Accident**

*Procedures 1 to 6 apply to any motor vehicle, however, procedures 7 to 14 only apply to accidents occurring on the project site, or involving site vehicles.*

- Ensure injured person is in no danger of further injury.
- Find out what injuries there are/Apply First Aid/Send someone to notify Ambulance.
- Dial 911.
- Ask for Ambulance.
  1. Give your name.
  2. The site address, which is.....
  3. How many hurt
  4. What the injuries are
  5. Where the victims are
- Ensure clear access for Ambulance.
- Meet Ambulance.



*Note: Once emergency is under control:*

1. Inform Safety Officer immediately.
2. Close off accident site (if on site).
3. Erect accident control notice.
4. Do not Interfere With Accident Scene (unless necessary to prevent further harm).
5. Safety Officer to Notify authorities immediately.
6. Safety Officer to carry out accident investigation (Ref. Appendix E).
7. Safety Officer to provide accident report within 7 days of accident.
8. Safety Officer to provide details of accident to company records

## **Chemical Spill**

- Ensure injured person is in no danger of further injury.
- Find out what chemicals have been spilt and what injuries there are/Apply First Aid/Send someone to notify Ambulance.
- Dial 911
- Ask for Ambulance.
  1. Give your name.
  2. The site address, which is.....
  3. Telephone No, which is.....
  4. How many hurt
  5. What the injuries are
  6. What chemicals are involved
  7. Where the victims are
- Ensure clear access for Ambulance.
- Meet Ambulance.

*Note: Once emergency is under control:*

1. Inform Site Manager immediately.
2. Close off accident site (if on site).
3. Erect accident control notice.
4. Do not interfere With Accident Scene (unless necessary to prevent further harm).
5. Site Manager to Notify authorities immediately.
6. Site Manager to carry out accident investigation (Ref. Appendix E).
7. Site Manager to provide accident report to authorities report to authorities within 7 days of accident.
8. Site Manager to provide details of accident to company records.

## **Electrocution**

- Switch Of Power Supply Immediately. Do Not Touch Injured Person Until You Are Certain That Power Is Switched Off. Ensure injured person is in no danger of further injury.
- Find out what injuries there are/Apply First Aid/Send someone to notify Ambulance.
- Dial 911
- Ask for Ambulance.
  1. Give your name
  2. The site address, which is.....
  3. Telephone No, which is
  4. How many hurt
  5. What the injuries are
  6. Where the victims are
- Ensure clear access for Ambulance
- Meet Ambulance

*Note: Once emergency is under control:*

1. Inform Site Manager immediately.
2. Close off accident site
3. Erect accident control notice
4. Do Not Interfere With Accident Scene
5. Safety Officer to Notify authorities immediately.
6. Safety Officer to carry out accident investigation
7. Safety Officer to provide report within 2 days of accident
8. Safety Officer to provide details of accident to company records

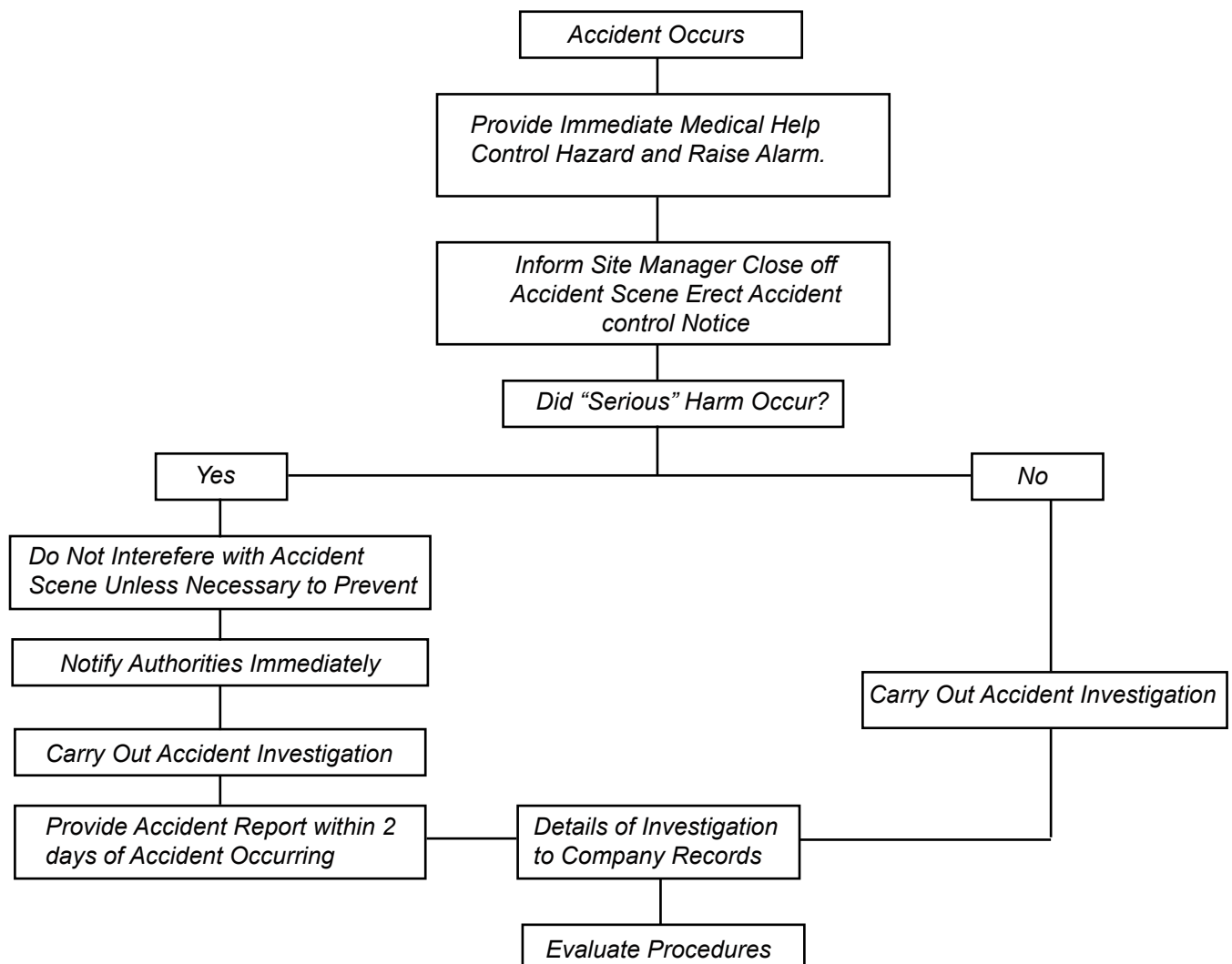
## 5. ACCIDENT / INCIDENT INVESTIGATION & REPORTS

### Objective

Should an incident or accident take place resulting in injury to person or property it is to be recorded in site safety book and report completed.

### Procedure

The following flow chart demonstrates the procedure to be followed.



Accidental Investigation Report form to be used (refer Appendix E)

# 6. RESPONSIBILITIES

## Introduction

WBL is committed to Safety, and to achieve this it must rely on its employees to act in a responsible manner. Each employee is made aware of these responsibilities under the act.

## Personal

Each employee is responsible for their own safety while at work and must ensure their actions do not harm others.

All sites are given an induction onto the site by the Safety Officer.

Site Induction will include:-

- Introduction of Project Staff and their role in the project.
- Advise that the Site Safety Plan is located on site and they are required to read and understand it. If the employee is unable to read, their responsibilities will be explained in suitable language.
- Advised of the obligation under Health & Safety at Work Act 1996.
- General Safety and Health Rules that are displayed on site are explained and gone through (refer Appendix H)
- Reporting Procedure
- Hazard Management Procedure
- Emergency Procedures
- Safety Information and Site orientation Plan Typical (attached Appendix I)
- Security Procedures
- Safety Performance and General Safety Awareness

## Subcontractors

All subcontractors must demonstrate willingness to participate in WBL's Safety procedure. Failure to do so will result in exclusion from the project. Personnel must participate in Hazard Identification Control.

## Monitoring

WBL Senior Management to be rostered to carry out monitoring of Safety program on each site. This will be done on a regular basis by either Company Director, General Manager or Chief Estimator.

## **HAZARD IDENTIFICATION FORM**

## **APPENDIX A**

HAZARD IDENTIFICATION BY AREA IS SUITED TO STATIC WORK, SITES SUCH AS OFFICES AND FACTORIES. PERSONNEL MUST BE INSTRUCTED AND ASSISTED TO IDENTIFY HAZARDS IN THEIR WORKPLACE

**Location:**

**Date of Assessment:**

HAZARD (DESCRIPTION AND LOCATION)	SIGNIFICANT YES	HAZARD NO	PRIORITY (1-20)	HAZARD NUMBER

## **ASSESSMENT DECLARATION**

Signature:	Name:	Date:

## **SAFETY SUPERVISOR**

Signature:	Name:	Date:



## HAZARD CONTROL FORM

## APPENDIX B

<b>HAZARD</b>	<b>PRIORITY RANKING</b>	<b>HAZARD NUMBER</b>
SIGNIFICANT HAZARD? <input type="checkbox"/> Yes <input type="checkbox"/> No		

<b>CONTROL METHOD</b>
<input type="checkbox"/> Eliminate <input type="checkbox"/> Isolate <input type="checkbox"/> Minimise

<b>LOCATION OF HAZARD</b>
DATE OF ORIGINAL ASSESSMENT

ACTION TO ACHIEVE CONTROL	ACTION BY WHOM	BY WHEN	CHECKED NAME	DATE

<b>Signature:</b>	<b>Name:</b>	<b>Date Informed:</b>

## SAFETY SUPERVISOR

<b>Signature:</b>	<b>Name:</b>	<b>Date:</b>
	<b>Review Date:</b>	



## **FIRE**

1. Sound Alarm
2. Dial 911
3. Ask for fire
4. Give you name, Address, where fire is and any dangers Ex: Solvents, Gas Cyclinders etc.
5. Get Everybody out.

## **SERIOUS INJURY**

1. Get first Aid
2. Find out what injuries are
3. Dial 911
4. Ask for Ambulance. Give you name, Address, how many hurt, what injuries are and where are the victims.
5. Ensure clear access.
6. Meet the Ambulance.

## **ELECTROCUTION**

1. Switch off power at source
2. Get first Aid
3. Dial 911
4. Ask for Ambulance. Give you name, Address. Say "Electrocution" and how to get to the victim.
5. Ensure clear access.
6. Meet the Ambulance.

**MATERIAL SAFETY DATA SHEET****WESTERN BUILDERS LTD****PROJECT TITLE:** .....*Safety Officers are to ensure the following information be provided:*

1.	Identity of Product:	
2.	Hazardous Hazards:	
3.	Physical & Chemical Characteristics:	
4.	Physical Hazards:	
5.	Health Hazards	
6.	Protection Information	
7.	Quantity on Site	
8.	Location on Site	

## ACCIDENT INVESTIGATING REPORT

## APPENDIX E

**IF SERIOUS HARM IS CAUSED, NOTIFY OHS (DEPARTMENT OF LABOUR) IMMEDIATELY  
AND PROVIDE A COPY OF THIS REPORT WITHIN 7 DAYS**

### EMPLOYER

Company Name:

Address:

Location of Accident (Department/Office) : Date/Time of Accident : am/pm  
: Shift at Time: ☐ Day ☐ Afternoon ☐ Night  
: Hours worked since arrival at work:  
: Date/Time of this Report : am/pm

Manager:

Investigator:

Tel:

Tel:

Position:

Signature:

Signature:

### PERSONAL INJURY

Injured's Name:

Occupation/Title:

Date of Birth: / /

Residential Address:

Sex: M ☐ F ☐

Name of Injury:

\* Serious Harm occurred:

Yes ☐

No ☐

\* Significant Hazard involved:

Yes ☐

No ☐

Treatment of Injury:

Nil ☐

First Aid ☐

Doctor (not Hospital)

Hospital ☐

Other ☐

Employee

Yes ☐

No ☐

Investigation carried out

Yes ☐

No ☐

### PROPERTY DAMAGE

Property Damage:

Nature of Damage

Person with control of Property:

Cost to Repair/Replace:

### NEAR MISS (Person/Property Involved):

### DESCRIBE HOW THE ACCIDENT OCCURRED: (Where, How, Names of Witnesses):

### WHAT CAUSED THE ACCIDENT, WHAT WERE CONTRIBUTING FACTORS:

#### SEVERITY POTENTIAL FOR FUTURE INJURY/DAMAGE

☐ 1 Negligible

☐ 2 Minor

☐ 3 Serious

☐ 4 Fatal

#### PROBABILITY OF RE - OCCURRENCE

☐ 1 Remote ☐ 3 Probable ☐ 5 Occurs all the time

☐ 2 Possible ☐ 4 Occurred previously

#### LIST ACTIONS REQUIRED TO PREVENT RE-OCCURRENCE

#### RESPONSIBILITY

#### COMPLETION

#### PERSON

#### COMPLETED BY

#### SIGNED DATE

**MANAGERS COMMENTS (Manager and Investigator are to sign and date report)**

\* "Serious harm" "Significant hazard" as defined by the Act



# WESTERN BUILDERS LTD PROJECT, HEALTH & SAFETY AUDIT SUMMARY

**PROJECT:** \_\_\_\_\_

**SAFETY AUDITOR:** \_\_\_\_\_

**DATE OF INSPECTION:** \_\_\_\_\_

**COPIES:** \_\_\_\_\_

ITEM	DESCRIPTION	COMPLIANCE WITH SAFETY PLAN	DEFAULT CORRECTED
1.	Signage indication safety footwear and hard hat requirements		
2.	Emergency plans displayed in appropriate locations and correct content		
3.	Standard site rules displayed in appropriate locations		
4.	Site facilities adequate for the site		
	a) Toilet b) Smoke c) Telephone d) Access		
5.	Safety inductions being carried out and records filed.		
6.	Contractors safety plans submitted and approved and copies retained on site.		
7.	Contractors hazard identification complete along with the maintenance of records. The hazards being categorized as significant or non-significant.		
8.	Did site workers participate in hazard identification, prior to commencement on site?		
9.	First Aid kit available and contains appropriate items. Person responsible for monitoring first aid kit.		
10.	Is a First Aid Officer nominated?		
11.	Are regular safety inspections carried out and recorded?		
12.	Are regular site safety meetings held, minuted and action taken?		
13.	Is a materials safety data sheet displayed at entry to site, refer safety plan?		
14.	Have all WBL Employees been through a safety induction session?		
15.	Has the WBL Health & Safety Booklet been given to contractors on this project?		
16.	Are site workers aware of Health & Safety Act?		
17.	Are records being kept of accidents/incidents?		
18.	Does the site have a site safety committee?		
19.	Site Safety Inspection Sheet completed during audit inspection.		
20.	Is the public area safe for children or should the site be secure from public access		

**PROJECT:** \_\_\_\_\_**NUMBER:** \_\_\_\_\_**SAFETY INSPECTION CARRIED OUT BY:** \_\_\_\_\_ *Signature***DATE:** \_\_\_\_\_

ITEM APPROVED	YES	NO
<b>PLANT &amp; MACHINERY</b> 1. Machinery Act 2. Portable Tools – Suitability, Condition, Double Insul, Guarding 3. Cranes (MOT Cert) Stability 4. Hoists (Engineers Documentation) 5. Compressor – (Fumes – Confined Spaces) Hose Couplings 6. PP Tools – Current Certificate – Operators Personal Protection 7. Nailing Guns – (Subsequent Mechanism) 8. Ladders – Height, Standards, Secure at base and top 9. Welding/Oxy Bottles secure  <b>SCAFFOLDING – NOTIFICATION</b> 1. Foundations 2. Standards – Ledgers, Putlogs – Bracing 3. Clip Ties 4. Guardrails – Toe Boards, Mid Rails, Platforms, Decking 5. Loading – Span, Height 6. Access – Protection 7. Registers (Over 8m High) 8. Mobiles (Stability, Guardrails) 9. Suspended (Support) 10. Verandah Support 11. Trestles 12. Crane Lifted Platforms 13. Ladder  <b>GENERAL SAFETY – ACCESS &amp; EGRESS</b> 1. Housekeeping 2. Fire Protection 3. Protective Helmets 4. Safety Glasses 5. Hearing Protection 6. Emergency Precautions 7. Protection of Workmen & Public 8. Perimeter Guardrails & Midrails 9. Toe Boards 10. Floor Penetrations 11. Brittle Roofing 12. Lighting 13. Signage 14. Protective Footwear		

ITEM APPROVED	YES	NO
<b>EXCAVATIONS</b> <ol style="list-style-type: none"> <li>1. Timbering</li> <li>2. Access &amp; Egress</li> <li>3. Excavated Material Placement</li> <li>4. Adjacent Work</li> <li>5. Guarding of Waterholes</li> <li>6. Public Protection – Barricades, Lights etc</li> <li>7. Gases Detection</li> </ol> <b>ASBESTOS</b> <ol style="list-style-type: none"> <li>1. Notification</li> <li>2. Pre Start Inspection</li> <li>3. Protection – Workers, Public</li> <li>4. Masking Up</li> <li>5. Method of Removal</li> <li>6. Disposal</li> <li>7. Monitoring</li> <li>8. Final Inspection</li> </ol> <b>AMENTIES</b> <ol style="list-style-type: none"> <li>1. First Aid</li> <li>2. Toilets</li> <li>3. Lunch Room</li> <li>4. Ventilation</li> <li>5. Water – Drinking, Washing</li> <li>6. Car Parking</li> </ol> <b>ELECTRICALS</b> <ol style="list-style-type: none"> <li>1. Switch Boards</li> <li>2. 3 Monthly Inspection</li> <li>3. Electrical Safe Guard (approved) Transformers Elcb's etc</li> <li>4. Leads</li> <li>5. Portable Tools</li> <li>6. Clearance From Overhead Wires – Scaffold Structures etc</li> <li>7. Multi Boxes – Double Adaptors</li> <li>8. Repair Maintenance – Registered Electrician</li> </ol> <b>TOXIC &amp; FLAMMABLE LIQUIDS</b> <ol style="list-style-type: none"> <li>1. Register</li> <li>2. Containers</li> </ol> <b>MATERIALS HANDLING</b> <ol style="list-style-type: none"> <li>1. Appropriate Precautions Being Taken</li> <li>2. Material Safety Data Sheets Available At Entrance</li> </ol> <b>NOTICES DISPLAYED</b> <ol style="list-style-type: none"> <li>1. Emergency Plan</li> <li>2. General Health &amp; Safety Rules</li> <li>3. Site Plan</li> </ol> <b>WORK ON ROOF</b> <ol style="list-style-type: none"> <li>1. Harnesses being worn and adequately fixed to secure members</li> <li>2. Perimeter handrails required</li> <li>3. Adequate safe access provided</li> <li>4. Has consideration being given to the recovery of an injured person on the roof area</li> </ol>		

### GENERAL SAFETY AND HEALTH RULES

- Report all hazards promptly.
- Report all accidents and near misses promptly.
- Keep all walkways clear at all times.
- Ensure all machine guards are in place.
- Use a push stick to feed machinery.
- Keep well clear of all moving drives, belts and parts of machinery.
- Stack materials safely.
- Keep a look-out for moving cranes hooks and plant.
- Wear your safety equipment.
- Know where fire extinguishers are located. And how to use them.
- Look out for openings in floors and make sure they are protected.
- Keep rubbish cleared away promptly.
- Don't work in the dark..... arrange lighting.
- Check electrical leads clear of water.
- Take care when using or handling hazardous materials.
- Watch where you are walking.
- Take care of your personal hygiene.
- Always use an isolating transformer or earth leakage breakers when using any electrical tool or appliance.
- No practical jokes or silly antics.....the fun can turn sour very quickly.
- Get into the habit of "thinking safety" .....it can only be of benefit to all!
- **NO ALCOHOL, DRUGS OR KAVA**

**WESTERN BUILDERS LIMITED**  
**EMPLOYEE SAFETY INDUCTION RECORD**

**APPENDIX I**

Surname _____	First Names _____
Employee No. _____	Date of Birth _____
Position/Job Title _____	Sex      M <input type="checkbox"/> F <input type="checkbox"/>
Job Function _____	Company _____
Workplace Location _____	Telephone / AH: _____

**SAFETY INDUCTION PROGRAMME**

- I have Read And Am Aware Of My Company's safety Policy Statement
- I am aware of my personal and the company's obligations under the Health & Safety Work Act 1996
- I am aware of the company structure including the safety personnel that I am to report to.
- I have knowledge of the company's Hazard Management Programme, including hazard identification
- I have knowledge of the company's Emergency Procedures
- I have knowledge of the company's Accident/Incident Procedures
- I have knowledge of the company's Safety Performance Programme
- I will actively partake in Safety in my work place.....in my interest and interests of others

**DECLARATION**

I certify that I have received training and instruction according to the above safety induction programme, including orientation to the work place.

Signed.....  
Date .....

Name.....

**Supervisor**

Signed.....  
Date .....

Name.....



## **HANDLING OF ASBESTOS SHEET**

### **SAFETY EQUIPMENT**

- Disposal gloves and overalls are to be worn.
- Class 1 or better respirators should be used.

### **METHOD OF REMOVAL**

- The asbestos cement sheets should be removed with minimum breakage.
- The sheeting should be sprayed with a fine water spray to minimize dust.
- No power tools are to be used in the removal process.

### **DISPOSAL**

- The asbestos should be disposed at an approved rubbish dump for burial.



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PH: 6674433 FAX: 6670261  
Email: [info@ajangroup.com.fj](mailto:info@ajangroup.com.fj)

P. O. BOX 247 BA, FIJI ISLANDS  
Website: [www.ajangroup.com.fj](http://www.ajangroup.com.fj)

**NOTICE**

ALL VISITORS MUST REPORT TO THE SITE OFFICE  
THIS PROTECTIVE EQUIPMENT  
**MUST BE WORN**  
IN THIS AREA



**SAFETY BOOTS**



**HARD HAT**



**NO SMOKING**

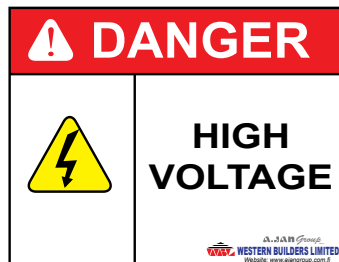


**NO ENTRY  
AUTHORISED  
PERSONNEL ONLY**



**EYE & HEARING**

## CONSTRUCTION SAFETY SIGNS



## WESTERN BUILDERS LIMITED

### SAFETY REGULATIONS

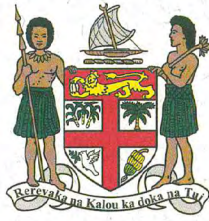
- \* Safety first for all people at all times.
- \* Be Polite
- \* Wear Helmet and other required safety protective gear
- \* No drinking, smoking, playing, and fighting at working place.
- \* Keep the project area safe, clean and tidy.
- \* Be aware of hazards.
- \* Only authorized vehicle is allowed to enter.



# A.JAN Group

## CONSTRUCTION SAFETY PHOTOS





Ministry of Employment, Productivity & Industrial Relations  
PO Box 2216, Government Building  
Suva, Fiji.

Phone: (679) 3316999  
Safetyline: (679) 3301301

Fax: (679) 3315029  
E-mail: info4@govnet.gov.fj

## NATIONAL OCCUPATIONAL HEALTH AND SAFETY SERVICE

### CERTIFICATE OF WORKPLACE REGISTRATION

This is to confirm that the undermentioned workplace has been registered with the National Occupational Health and Safety of the Ministry of Employment, Productivity & Industrial Relations as required under Section 29 of the *Health and Safety at Work Act 1996*, in conjunction with the *Health and Safety at Work (Administration) Regulations 1997*

(Legal Notice No. 170)

Name: **WESTERN BUILDERS LIMITED**

Workplace Location: **LOT 1, KOULA ROAD, VARADOLI, BA**

Postal Address: **P O BOX 247, BA**

Division: **BA** Central Eastern Western Northern

Registration Office: **WESTERN BUILDERS LIMITED**

Trading Name: **E - BUILDING CONTRACTORS**

Classification:  
(First Schedule)

Registration Number: **ME/NOHS/3-03/5/W-01**

Date Issued: **25/02/2019**  
Expiry Date: **31/03/2020**



**OSEA TUINIVANUA**  
for: Chief Health and Safety Inspector  
Permanent Secretary  
Ministry of Employment, Productivity & Industrial Relations



# OHS POLICY STATEMENT

Western Builders Limited is committed to promoting total excellence in the building industry market, which particularly includes providing a safe and healthy environment for all its workers, sub contractors, customers and visitors at workplace

Western Builders Limited will provide:

- Safe and healthy system at work
- Safe equipment, substance, premises
- Facilities for the welfare of workers and non- workers at the workplace
- Information, instruction , training in appropriate language and supervisions so that workers are able to work safely and without risks to their health

Western Builders Limited will take all reasonable action to identify, evaluate and control factors in the workplace, which affect employee's safety, health and welfare

Our management teams are accountable and responsible to ensure this policy is implemented within their work program:

- Provide training and familiarization on O.H.S. issue for all staff
- Involve employees and welcome them to contribute towards the improvement of O.H.S. act the health and safety at work regulation
- Provide resources to meet O.H.S. requirements

We expect our employees to co-operate and follow the health and safety polices and procedures and report all potential hazards to their immediate Supervisors, Health and Safety representatives or Managers

Our O.H.S. department is working to have 100% safe working environment for all workers through regular consultation

Our Management team will consult with the elected Health and Safety representatives and employees to ensure that any change required in the workplace does not affect their health and safety

This policy shall be periodically reviewed to ensure its efficiency and effectiveness



Taj Jan Mohammed  
Company Director