

## MINISTRY OF ENERGY AND ENERGY AFFAIRS TEMPLATE FOR THE HEALTH AND SAFETY PLAN (HSP)

## HEALTH AND SAFETY PLAN TEMPLATE The completion of ALL sections is mandatory! SECTION ONE (1): CONTACT DETAILS OF THE APPLICANT **Full Name of Applicant: Mailing or Postal Address: Physical or Residential Address: Phone Number:** Fax Number: **Mobile Number: Email Address: Full Name of Alternative Contact Person: Phone Number: Fax Number: Mobile Number: Email Address: Signature:**

Date:

SECTION TWO (2): PROPERTY DESCRIPTION DETAILS
Project/Company/Operator's Name:
Quarry Location:
Area of the Land (in acres):
Land Status (Private or State):
Relevant Minerals:
Relevant Stakeholders:
Proposed Hours of Working and Planned Project Life (in years):
Daily Work Hours:
Third Party Insurance (If any):
Equipment used:
XX7 1.0
Workforce:

## **SECTION THREE (3): Quarry Design**

Please check ( $\sqrt{}$ ) the appropriate boxes where necessary.

## N.B: EACH OF THE FOLLOWING QUESTIONS WILL RELATE SPECIFICALLY TO YOUR OPERATION!

1. Is there a design for your quarry?
□ - Mine Design Plan
□ - Geotechnical Study/ Geological Survey
□ - Determination of depth of mineral resource
□ - Slope and Height of Quarry Faces
□ - Bench Heights/ Bench Widths
□ - Proximity to nearby communities and environs
□ - Set back distances from boundaries, roadways, rivers, watercourses
□ - Defined vehicular traffic routes entering and exiting quarry site away from pedestrian routes
□ - Other
Please indicate:
1.1 Are the following facilities present at the site?
□ - Sick Bay
□ - Medical Facilities
□ - Fire and Ambulance Service/s
□ - Provision of PPE and First Aid training
□ - Toilet Facilities with Potable Water
□ - Lunch Room with Potable Water
□ - Changing Room
□ - Emergency Evacuation Response team and procedure and muster point/s
☐ - First Aid Equipment (e.g. bandages, splints, medication, prescribed drugs, stretchers, etc.)
□ - Security
□ - Health and Safety Officer/ Inspector
□ - Other
If other, please specify-

1.2 Health and Safety Documents
The inspection and maintenance scheme will identify all areas that will need monitoring and maintaining and can be discussed and modified at the toolbox/ safety meetings before the start of each work day so that everyone knows what should be happening and ensures that it happens.
<ul> <li>□ - Job Safety Analysis (JSA)/ Risk assessments for each specific job daily identifying hazards, evaluating risks and setting out control measures</li> <li>□ - Daily Toolbox Meetings and records</li> <li>□ - Issuance and records of Personal Protective Equipment (PPE) to workers on a daily basis</li> </ul>
<ul> <li>□ - Daily vehicle and plant inspection schedules must be signed off by Supervisor</li> <li>□ - Safety Orientation and records for new employees; and retraining for all employees every 3 months</li> <li>□ - Evacuation response procedure training and employee records in the event of an accident or evacuation emergency</li> </ul>
If 'other' please specify-
1.3 Management
Does the quarry have sufficient management and supervision on a daily basis to ensure that the control measures set out in the health and safety document work? It must include all of those who have an influence on how the quarry works, and will include the Directors of the company, the geologists, engineers, contractors and surveyors as well as the site supervision setting out how the safety measures are co-ordinated including the competence levels of those involved. Please provide an organisational chart and/or a list of all staff employed at the quarry with respective job titles.
Please indicate:
Does the individual/s identified above possess qualified training in health and safety and/or quarry management? (E.g. OHSAS 18001, ISO 14001, First Aid training) Please provide a listing of the qualifications of individual/s in Health and Safety and/or Quarry Management.
If so, please specify:

Does the company/ quarry operator implement and initiate safe working procedures on how to operate machinery, safe mining practices, health and safety procedures, quality system procedures, training for continuous improvement of employees and operation and company policies?
<ul><li>☐ Yes</li><li>☐ No</li></ul>
What control measures have been implemented? Please specify-
Does your company or quarry operation implement or have in place the PDCA? (PLAN, DO, CHECK, ACT)
□ Yes □ No
Plan- (Identify, Evaluate, Develop), Please specify-
Do- (Implementation and Operation), Please specify-
Check- (Checking and Corrective Action), Please specify-
Act- (Adjust, Management Review), Please specify-

1.4 Air Emissions and Noise: Controlling and Mitigation
Do the people doing the job know what the air emission/dust and noise exposure levels are? What are the PPE used by employees in this operation?
Please specify-
What measures will be implemented to address dust and air emissions and noise levels? Please specify-
Are there any dust and air pollution and noise level monitoring to ensure the permissible limits are complied with?  Uses No
If yes, please specify-
1.5 Maintenance
Are all vehicle, machinery and plant inspection schedules completed on a daily basis?
□ Yes □ No
Are all guards on vehicle, machinery and plant properly installed to ensure a safe working environment to all employees?
□ Yes □ No
Have all critical equipment been identified on-site with the severity of the hazards and risks identified and evaluated?
□ Yes □ No
How the control measures identified are implemented?
Please specify-
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1.6 Vehicles and Signage
Have defined traffic routes been identified for vehicles entering and exiting the quarry site?
□ Yes □ No
Have signage been placed at strategic points along the traffic route/s indicating speed limit?
□ Yes □ No
Have signage been placed along the quarry indicating traffic flow, pedestrian movements, muster point/s, speed limits, etc.
□ Yes □ No
If yes, please indicate-
Are the widths of the haul roads sufficient to accommodate dual carriageway and how often are spraying of haul roads/ wheel washing conducted?
1.7 Shot firing/ Blasting (where applicable)
Is the Commissioner of Police informed of all the blasting exercises conducted?
□ Yes □ No
Are all blasting design plans complied with to ensure a safe and effective blast?
□ Yes □ No
Are all equipment removed from the blast area at a safe working distance?
□ Yes □ No

Is the blast conducted by a licenced blaster/shot-firer and are the explosives issued by the Ministry of National Security?	
□ Yes □ No	
1.8 Humans and Health	
Are all employees over the age of 18 years?	
□ Yes □ No	
Are all persons/ employees on site equipped with PPE?	
□ Yes □ No	
Please indicate, the type of PPE and how often PPE are issued to employees -	
Are all persons/employees on site aware of the emergency response procedure/ evacuation route/s in the event of an emergency? (E.g. muster points)	
□ Yes □ No	
Are health records of all employees available on site?	
□ Yes □ No	
Is there a vehicle/ Emergency Health Support on-site to transport individual/s to the nearest health facility/hospital in the event of an emergency?	
□ Yes □ No	
Are a health and safety team and/or a fire fighting team available on site in the event of an emergency with health and safety and fire fighting equipment?	
□ Yes □ No	
Please specify-	