Occupational Health and Safety Management

System Manual

Health & Safety Unit

This Manual has been reviewed and approved by:

COO: _____

Occupational Health and Safety Management system

ISO 45001-2018 Standard – Document Matrix

Clause	Description	FMD Reference
1	**Scope**	For information only
2	**Normative references**	No action required
3	**Terms and definitions**	Apex 03, Apex 04
4	**Context of the organization**	Apex 01, Apex 02
4.1	Understanding the Organization and its context	CP 4.1, 4.2, 4.3
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5	**Leadership**	Title only
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5.2	OH&S Policy	Apex 01, CP 5.2
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6	**Planning for OHS Management System**	Title only
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6.1.2.1	Hazard Identification	CP 6.1.1, 6.1.2, 8.1.2
6.1.2.2	Assessment of OH&S risks and other risks to OH&S management system	CP 6.1.1, 6.1.2, 8.1.2
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6.1.3	Determination of Legal requirements and other requirements	CP 6.1.3, 9.1.2
6.1.4	Planning action	CP 6.1.4
6.2.1 & 6.2.2	OH&S objectives and planning to achieve them	CP 6.2
7	**Support**	Title only
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7.2	Competence	CP 7.1, 7.2, 7.3
7.3	Awareness	CP 7.1, 7.2, 7.3
7.4.1	General Communication	CP 7.4
7.4.2	Internal Communication	CP 7.4
7.4.3	External Communication	CP 7.4
7.5.2 & 7.5.3	Control of Documented information - Creating & Updating	CP 7.5

8	**Operation**	Title only
8.1.1	Operational planning & control	Apex 05
8.1.2	Eliminating hazards and reducing OH&S risks	CP 6.1.1, 6.1.2, 8.1.2
8.1.3	Management of Change	CP 8.1.3
8.1.4.2	Contractors	Refer to FMS CP 8.1.1 B, Under procurement and legal department
8.1.4.3	Outsourcing	Under procurement and legal department
8.2	Emergency preparedness and response	CP 8.2
9	**Performance evaluation**	Title only
9.1.1	Monitoring, measurement, analysis and evaluation	CP 6.1.3, 9.1.2
9.1.2	Evaluation of Compliance	CP 6.1.3, 9.1.2
9.2.1 & 9.2.2	General/ Internal Audit program	CP 9.2
9.3	Management review	CP 9.3
10	**Improvement**	Title only
10.2	Incident, nonconformity and corrective action	CP 10.2 A- CP 10.2 B
10.3	Continual improvement	CP 10.2 A- CP 10.2 B

Part 1: APEX

Apex Manual (APEX):	Includes the base of OH&S policies and principles pertaining to operation.

as described in CP 7.5 Documented Information: Control & Structure

Table of Content	
Reference No.	**Document Name**
Leadership and Organisation	
Apex 01	Vision and Mission
Apex 02	Approved Organizational Structure
Apex 03	Definitions
Apex 04	Abbreviations
Support	
Apex combined with CP 7.1, 7.2, 7.3 - Support (Resources-Competence & Awareness)	
Planning	
Apex combined with CP 6.1 & 6.2 - Managing Risks, Opportunities and Changes - FM Objectives & Achievement Plan	
Operations	
Apex 05	Operational Planning & Control
Performance Evaluation and Improvement	
Apex combined with CP 9.2 / 9.3 / 10.2 A / 10.2 B - Internal Audit - Management Review - Incident Reporting and Investigation - Non-Conformance and Corrective Action	

Vision

To be a leading developer and partner in innovative real estate projects, creating value for our stakeholders and the communities we serve

Mission

As a trusted real estate investor, developer, and project manager, we collaborate with partners to create world-class real estate projects that excite customers and are innovative and recognized for their design, quality, and return on investment.

Values

Insightful – Our decision-making combines local knowledge of our customers and our markets with world-class design approaches.

Bold – We are innovative and flexible, continuously stretching ourselves to deliver complex and challenging projects with a high level of quality and best-in-class value.
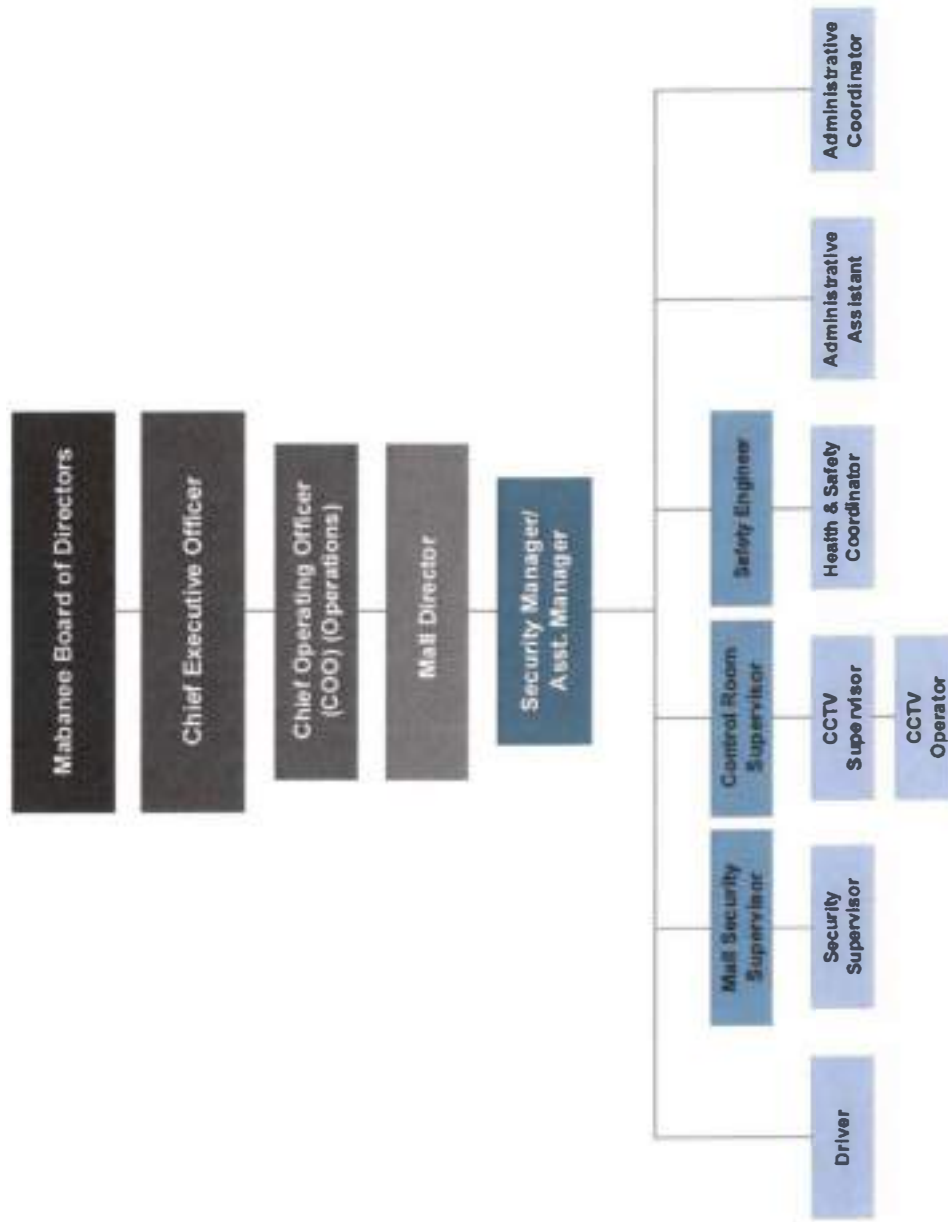
Customer and Community-Focused – At every step, we place the needs of our partners, shareholders, and customers first. We prioritize the needs of the communities we serve and the environments in which they live.

Trusted Employer – We are committed to excellence, reward outstanding performance, and provide our employees with the learning and development they need to excel and become world-class operators.

Responsible Business – We work as one team with integrity and humility, applying good governance to everything we do to earn the trust and respect of our stakeholders.

Organization Structure
Positional Structure-Security Department Details

Organization chart (Security Department):

- Mabanee Board of Directors
- Chief Executive Officer
- Chief Operating Officer (COO) (Operations)
- Mall Director
- Security Manager/ Asst. Manager
  - Mall Security Supervisor
    - Security Supervisor
  - Control Room Supervisor
    - CCTV Supervisor
      - CCTV Operator
  - Safety Engineer
    - Health & Safety Coordinator
  - Administrative Assistant
  - Administrative Coordinator
  - Driver

Approval

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	Position	**Signature**	**Date**
Prepared by	HSE MR		
Reviewed by	FMD MR		
Approved by	Head of HSE/ COO		

Amendment Record

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Terms & Definitions

Term	Definition
Audit	Systematic, independent, and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which audit criteria are fulfilled.
Conformity	Fulfilment of a requirement
Competence	Ability to apply knowledge and skills to achieve intended results
Contractor	External organization providing services to the organization in accordance with agreed specifications, terms and conditions. Services may include construction activities, among others.
Context of the organization	Business environment - Combination of internal and external factors and conditions that can influence an organization's approach to its products, services, and investments.
Continual Improvement	Enhancing performance relates to the use of the OH&S management system in order to achieve improvement in overall OH&S performance consistent with the OH&S policy and OH&S objectives
Corrective action	Action to eliminate the cause of a nonconformity and to prevent recurrence: There can be more than one cause for a nonconformity.
Documented information	Information required be controlling and maintaining by an organization and the medium on which it is contained.
Effectiveness	Extent to which planned activities are realized and planned results achieved
Hazard Identification	Process of recognizing that a hazard exists and defining its characteristics.

Hazard	A source with the potential to cause injury or ill health. Hazards can include sources with the potential to cause harm or hazardous situations, or circumstances with the potential for exposure leading to injury and ill-health;
Interested party	Person or organization that can affect, be affected by, or perceive themselves to be affected by a decision or activity. E.g. Owners, regulatory bodies, community, employees, staff, and visitors to the Mall etc.
Incident	an occurrence arising out of, or during, work that could or does result in injury and ill health.
Legal Requirements	Legal requirements that an organization has to comply with and other requirements that an organization has to or chooses to comply with. For the purposes of this document, legal requirements and other requirements are those relevant to the OH&S management system
Lost Time Injury	Any work-related injury (not an illness and not sickness) which prevents that person from doing any work after the incident i.e. any work-related injury that results in a person being unfit for his/her work for at least one full working day or shift;
Management system	Set of interrelated or interacting elements of an organization to establish policies and objectives. The system elements include the organization's structure, roles and responsibilities, planning, operation, performance evaluation and improvement
Measurement	Process to determine a value
Nonconformity	Non-fulfilment of a requirement
Near Miss	Any incident, accident or emergency which did not result in an injury.

Organization	Person or group of people that has its own functions with responsibilities, authorities, and relationships to achieve its objectives
Outsource	Arrange where an external organization performs part of an organization's function or process
Occupational Health and Safety (OH&S):	The conditions and factors that affect, or could affect, the health and safety of employees and other workers (including temporary workers and contractor personnel), visitors, or any other person in the workplace.
Occupational Health & Safety Management System (OHSMS)	A management system or part of a management system used to achieve the OH&S policy.
Occupational Health and Safety Policy (OH&S Policy)	Policy to prevent work-related injury and ill health to workers and to provide safe and healthy workplaces
Occupational Health and Safety Risk (OH&S Risk)	Combination of the likelihood of occurrence of a work-related hazardous event(s) or exposure(s) and the severity of injury and ill health that can be caused by the event(s) or exposure(s).
Occupational Health and Safety Objective (OH&S Objective)	Objective set by the organization to achieve specific results consistent with the OH&S policy.
Occupational Health and Safety Performance (OH&S Performance)	Performance related to the effectiveness of the prevention of injury and ill health to workers and the provision of safe and healthy workplaces.
Outsource	Arrange where an external organization performs part of an organization's function or process.

Policy	Intentions and direction of an organization, as formally expressed by its top management
Process	Set of interrelated or interacting activities which transforms inputs into outputs.
Performance	Measurable result Performance can relate either to quantitative or qualitative findings. Results can be determined and evaluated by qualitative or quantitative methods.
Performance indicator	Performance metric - Characteristic having significant impact on realization of the output and customer satisfaction
Participation	Involvement in decision-making. Participation includes engaging health and safety committees and workers' representatives, where they exist.
Procedure	Specified way to carry out an activity or a process (
Quality	Degree to which a set of inherent characteristics of an object fulfils requirements
Risk	The effect of uncertainty, or a combination of the likelihood of an occurrence of a hazardous event or exposure(s) and the severity of an injury or ill health that can be caused by the event or exposure(s). Risk = Likelihood (Probability) x Severity (Consequence)
Risk assessment	The process of evaluating the risk(s) arising from a hazard(s), considering the adequacy of any existing controls, and deciding whether the risk(s) is acceptable
Requirement	Need or expectation that is stated, generally implied or obligatory

Revision Record	Is a summary of changes, with brief description of and reason for each change
Root Causes	Deficiencies in the (management) System, indicating inadequacies of controls
Strategy	Planned activities to achieve an objective
Top management	Person or group of people who directs and controls an organization (3.1) at the highest level.
Workplace	a place or location under the control of the organization where a person needs to be or to go for work purposes

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Abbreviations

Acronym	Expansion
CEO	Chief Executive Officer
COO	Chief Operating Officer
Mabanee/ Company/ Organization	Mabanee Company
OH&S	Occupational Health and Safety
MS	Management System
OHSMS	Occupational Health & Safety Management System
MR	Management Representative
CP	Control Procedures
CF	Control Forms
ISO	International Standards Organization
ISO 45001	International Standard for Facility management — Management systems
KEPA	Kuwait Environmental Public Authority
KFD	Kuwait Fire Department
KPIs	Key Performance Indicators
MOH	Ministry of Health
LoR	Level of Risk
MOM	Minutes of Meeting
PO	Purchase Order
JO	Job Order
PPE	Personal Protective Equipment
Manual	OH&S Manual
RA	Risk Assessment
PPM	Planned Preventative Maintenance
CAR	Corrective Action Request
PAP	Preventative Action Plan
RC	Root Cause

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1. Operational Risk Control

Control of risks is essential in ensuring quality of our services, improved customer satisfaction and health and safety of mall users. To achieve this, we have policies, procedures, forms, and monitoring processes in place to mitigate the identified risks.

We endeavour to improve our services through better response times, focus on customer needs, and effective communication.

2. Operational Planning and Control

Planning, implementing and controlling the processes is essential for ensuring quality of our services.
We achieve this by:

- Defining the requirements for our services;
- Establishing the acceptance criteria for processes and services, as required;
- Providing the needed resources;
- Controlling the processes in accordance with the criteria;
- Maintaining records, as necessary;
- Managing and controlling planned and unintended changes;
- Controlling outsourced processes.

3. Customer communication

The Retail Delivery Unit provides the Investor Manual to the tenants on signing of the lease. The manual has the description of the services that FMD will provide and also extent of responsibilities is outlined.

Any change in their contractual requirements is informed by Leasing Dept.

Tenant communication related to maintenance, requests for services and additional services is through Retail Delivery Unit and Help Desk.

Help Desk is available 24/ 7 and handles tenant maintenance requests, complaints and takes feedback on the services provided.

We do not handle any customer property.

In the event of a non-conforming service, or identification of an issue, the tenant is informed, and corrective actions are taken.

4. Establishing and review of service requirements

The service requirements are defined by Mabanee for our Facilities Management Department.
All the corrective maintenance is provided as per Investor Manual.

For any additional work requests / services from the tenant, procedures are in place to review the requirements, including feasibility, clarity, legal and others, prior making a quotation to them. Records are maintained.

5. Design and Development

Design is only limited to fit out projects for tenants and Mabanee. It is ensured that all the requirements are addressed appropriately.
Scope, description and details of all the Services provided to the tenants by FMD are compiled in Investor Manual. This manual is customized for each phase of Avenues and updated as required.

6. External Providers

Our policy towards External providers is to ensure that contracting of services, and purchase, hire or lease of equipment and materials conforms to our requirements and QMS.

Procedures have been documented for the evaluation, selection, monitoring of performance, and re-evaluation of external providers. All the material, equipment and services that have impact on the quality of the service and customer satisfaction are sourced from qualified and approved providers against approved requisitions / Contracts.

We ensure an efficient purchasing process through

- Clearly defining purchasing information / scope of work;
- Selecting the suppliers after prudent evaluation;
- Communicating requirements / procedures to suppliers / contractors where applicable;
- Reviewing / approving the requisitions / contracts prior release; and
- Verifying that the purchased products / services meet the specified requirements.

7. Service provision

To ensure that our services are provided under controlled conditions, we have established procedures and process criteria as appropriate.

The business processes are conducted as per the defined procedures, forms and checklists.

The approvals are taken as necessary at various stages as defined.

The measurement and monitoring instruments / equipment of FMD and their contractors are calibrated as required.

All information pertaining to the particular service can be readily identified and traced through forms and logs. Status is monitored through inspections and approvals throughout service provision.

FMD doesn't use the tenants' property. However, during maintenance / repairs at the tenant premises, it is ensured that their premises and products are protected from damage. Also, the sufficient security is provided in the Mall to protect the premises and the property of tenants and external providers.

In the unlikely event of damage to or loss of tenants' or contractors' property, they are informed, and issue is resolved. Records are maintained.

In addition, we have in place emergency procedure so that in the unlikely event of an emergency, prompt and appropriate actions are taken to reduce the overall impact on people, property, and the environment.

After the delivery of service, contractual obligations, maintenance, warranty, or any other service as applicable is extended to the tenants.

Any changes in service provision are addressed in a controlled manner as per the Change Managing Changes procedure.

All the service and processes are monitored as specified in the various contracts or procedures. Monitoring is done through inspections at various stages and also before final approval to ensure compliance.

If our service does not conform to the requirements, we ensure that immediate actions are taken to address the situation.

The non-conforming services are handled as per the Non-conformity and corrective action procedure. All the non-conforming services are identified and suitably controlled to prevent their recurrence.

Part 2:
Procedure Manual

Procedures Manual (PM):	Includes responsibilities and authorities, procedures, and appendices.

*as described in CP 7.5 Documented Information: Control & Structure

Table of Content	
Reference No. ***compatible with ISO 45001: 2018 standards**	**Document Name**
Leadership and Organisation	
CP 4.1, 4.2, 4.3	Context and Scope OH&S
Planning	
CP 4.4	Process Map
CP 5.1	Leadership and Commitment
CP 5.2	OH&S Policy
CP 5.3	Organizational roles, responsibilities & authorities
CP 5.4	Consultation and participation of workers
CP 6.1.1, CP 6.1.2	Risk Management (Hazard Identification & Risk Assessment)
CP 6.1.3, CP 9.1.2	Identification of Legal & Other Requirements & Evaluation of Compliance
CP 6.1.4	Planning of Actions
CP 6.2	OH&S Objectives & Achievement Plan
Support	
CP 7.1, 7.2, 7.3	Support (Resources-Competence & Awareness)
CP 7.4	Communications
CP 7.5	Documented Information (Control & Structure)
Operations	

CP 8.1.2	Eliminating hazards and reducing OH&S risks (Combined with CP 6.1.1, 6.1.2, 8.1.2)
CP 8.1.3	Managing of Changes
CP 8.1.4	Procurement (Under Procurement/ Legal)
CP 8.2	Emergency Preparedness, Response and Planning
Performance Evaluation and Improvement	
CP 9.2	Internal Audit - Evaluation of compliance (combined with CP 9.1.2 Legal)
CP 9.3	Management Review
CP 10.2 A	Incident Reporting and Investigation
CP 10.2 B	Non-Conformance and Corrective Action

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1. Purpose

The purpose of this procedure is to outline Mabanee's process for the identification and determination of internal and external issues, interested party requirements, management system scope and processes that relate to its OH&S management system, and which influence our strategic direction and our operational purposes. This procedure has been developed to assist Mabanee in meeting its requirements to provide a high-level understanding of the issues that can affect, either positively or negatively, the way our organization manages its responsibilities. Determining our organization's context and interested parties enables Mabanee to ensure the OH&S Management System is more effective and efficient at delivering interested party requirements.

The Departments of Mabanee Company

- **Legal Dept**. – Supports all Mabanee departments on legal and regulatory issues.
- **Finance Dept**. – Provides professional financial services including cash management, budget planning, procurement, accounting, reporting and risk management. In addition, financial leadership to optimise long term shareholding value by using innovative processes, tools and systems is provided.
- **HR & Admin Dept:** aim to identify and recruit people with potential, to develop their talent through programs of professional and personal growth.
- **Facilities Management Dept:** Responsible for operation and maintenance, civil works, MEP works, RDU works, technical support and soft services.
- **Tenant Relations Dept**: maintain effective relationships between tenants/customers and the Mall Management. Accountable for creating positive stable standards for Food and Beverages provision.
- **Marketing Dept**. – Responsible for raising the profile of the organization as a brand to the public and to market and promote the shopping mall on an ongoing basis.
- **Leasing Dept**. – Responsible for leasing and maintaining the occupancy levels in each of the Company's existing and future projects with high quality and credit worthy tenants.
- **Information and Communication Technology Dept. (ICT)**. – provide quality IT services and solutions to users/tenants, effectively aligning business and technology objectives through collaboration, to provide the most cost-effective solutions that facilitate and improve the conduct of business.
- **Government Affairs** – Supporting all Mabanee departments and tenants on the local regulatory process. Dealing with ministries and governmental agencies regarding the company licenses and authorisations.

- **Project Management Dept**. – Control on site work to ensure the contractor is complying with technical specifications of the project whilst engaging in the technical, planning, contractual, local, and regulatory process and commercial aspects of the Projects.

- **Security Dept**. – To monitor and maintain the overall security of the premises and the overall OH&S activities.

2. OH&S Scope

Facilities Management and Provision of Building Maintenance Services including Health, Safety and Security to The Avenues Mall.

- **OH&S Unit Scope**

- Responsible for the provision of a safe and healthy working environment for all parties involved.

- Compliance with or exceeding the requirements of all applicable OH&S standards and regulations

- Elimination of hazards and reducing OH&S related risks

- Monitoring the OH&S Management System and implementation of measures for its continual improvement

- Raising awareness of OH&S standards amongst all employees and ensuring compliance with OH&S requirements

- Ensuring consultation and participation of relevant parties through HR dept for the implementation and improvement of the OH&S Management System

Mabanee's OH&S Scope has been made available and documented whilst considering the factors below.

3. Capturing Internal Issues

Sources of internal issues may include information relating to the structure of our organization, the identification of roles and responsibilities, and the arrangements for governance; or consultants' reports showing how well the business is performing. Internal factors may include:

- Organizational structure, and roles;

- Policies and objectives;

- Capabilities in terms of resources such as capital, human and technological;

- Information systems;

- Types of activities and exposure to hazards;

- Location of where activities take place;

- Relationships with, as well as perception of workers;

- Contractual relationships such as outsourced activities;

- Workforce characteristics including, quantity, experience, age, diversity;

- Working conditions, organizational culture, working time arrangements and ergonomics;

- Changes in products, processes, equipment;

- Changes in any of the above factors.

4. Capturing External Issues

Establishing the external context is important to ensure that stakeholders and their objectives are considered when developing risk management criteria and that externally generated threats and opportunities are properly considered. The process of operational risk and opportunity identification involves gaining an understanding of our organization's capabilities, goals, objectives, strengths, and weaknesses. The following may be considered:

- PESTLE (Political, Economic, Social, Technological, Legal and Environmental) etc. factors;

- New competitors, contractors, suppliers, partners, etc.;

- Legal requirements;

- Industry or sector specific requirements;

- Latest knowledge about products and their ability to affect OH&S;

- Key drivers and trends relevant to industry;

- Relationships with external interested parties;

- The identity and nature of interaction with key stakeholders;

- The existence of any operational constraints;

- Objectives and key performance indicators;

- Business resilience vulnerabilities and management systems;

- Relevant issues relating to recent change management risk, performance or audit reviews;

- Regulatory and contractual requirements and constraints.

5. Needs & Expectations of Interested Parties

5.1 General

Interested parties can be legal and regulatory authorities, parent organizations, suppliers, contractors and subcontractors, workers representatives, workers organizations such as trade unions and employers' organizations, customers, medical or other community services, media, business associations etc.

5.2 Identifying Interested Parties

Mabanee identifies relevant external and internal interested parties such as:

- Employees
- Partners
- Tenants
- Customers
- Service providers
- Shareholders
- Investors
- Regulatory and legal authorities
- Local community
- Any other, as applicable.

The interested parties are initially captured and communicated using the Interested parties - Needs and Expectations Table.

5.3 Interested Party Requirements

Mabanee determines the relevant interested parties and their requirements (needs and expectations) relating to our activities and the impact upon OH&S Management System compliance.
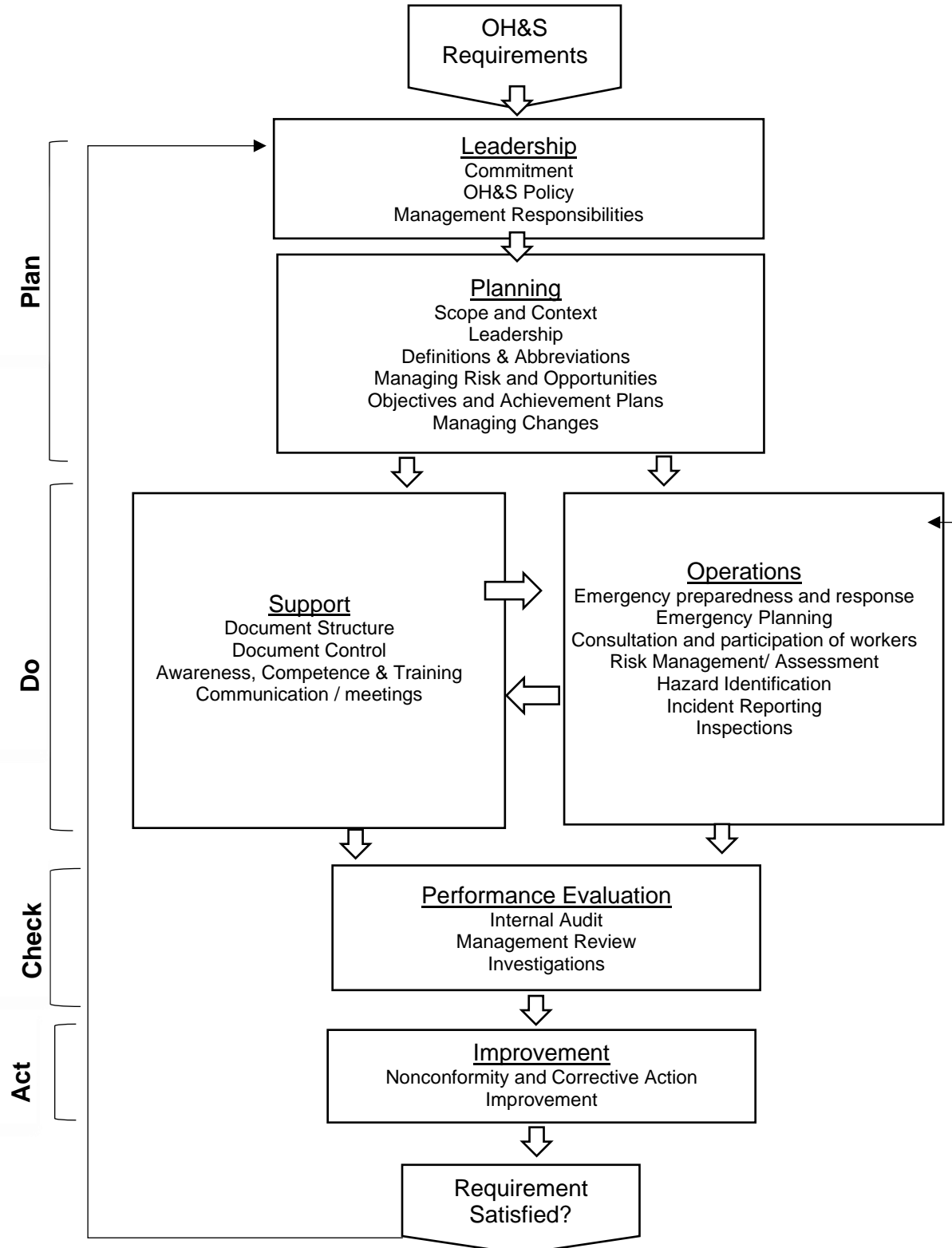
Using the Interested parties - Needs and Expectations Table, the respective OH&S Unit Head identifies and lists the needs and expectations of any interested parties in relation with the OH&S department that may have a potential impact on the achievement of Mabanee's OH&S objectives, policy and the overall OH&S management system.

6. Records

- Apex 02 - Approved Department Structure 2021

7. Reference

- Interested parties - Needs and Expectations Table

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          ┌─────────────────┐
          │      OH&S       │
          │  Requirements   │
          └────────┬────────┘
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Plan

Leadership
Commitment
OH&S Policy
Management Responsibilities

Planning
Scope and Context
Leadership
Definitions & Abbreviations
Managing Risk and Opportunities
Objectives and Achievement Plans
Managing Changes

Do

Support
Document Structure
Document Control
Awareness, Competence & Training
Communication / meetings

Operations
Emergency preparedness and response
Emergency Planning
Consultation and participation of workers
Risk Management/ Assessment
Hazard Identification
Incident Reporting
Inspections

Check

Performance Evaluation
Internal Audit
Management Review
Investigations

Act

Improvement
Nonconformity and Corrective Action
Improvement

Requirement Satisfied?

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1. Leadership and Commitment

The OH&S Unit Head is committed and is accountable for the implementation and maintenance of the OH&S Management System.

The management and supervisory personnel demonstrate leadership and commitment to overall OH&S through, but not limited to:

Leadership Commitment:	Manual Reference:
Taking overall responsibility and accountability for the prevention of work-related injury and ill health, as well as the provision of safe and healthy workplaces and activities	Refer to CP 10.2 A- Incident Reporting and Investigation 10.2 B- Non-Conformance and Corrective Action
Ensuring that the OH&S policy and related OH&S objectives are established and are compatible with the strategic direction of the organization;	Refer to CP 5.2- OH&S Policy CP 6.2- OH&S Objectives & Achievement Plan
Ensuring the integration of the OH&S management system requirements into the organization's business processes;	Refer to CP 4.4- Process Map
Ensuring that the resources needed to establish, implement, maintain, and improve the OH&S management system are available;	Refer to CP 7.1, 7.2, 7.3- Support (Resources- Competence & Awareness)
Communicating the importance of effective OH&S management and of conforming to the OH&S management system requirements;	Refer to CP 7.4 - Communications
Ensuring that the OH&S management system achieves its intended outcome/s	Refer to CP 9.1, 9.2 - Internal Audit & Performance Evaluation
Directing and supporting persons to contribute to the effectiveness of the OH&S management system;	Refer to CP 7.1, 7.2, 7.3- Support (Resources- Competence & Awareness)
Ensuring and promoting continual improvement	Refer to CP 10.2 A- Incident Reporting and Investigation CP 10.2 B- Non-Conformance and Corrective Action

Supporting other relevant management roles to demonstrate their leadership as it applies to their areas of responsibility	Refer to CP 5.3 - Organizational roles, Responsibilities, and authorities
Developing, leading, and promoting a culture in the organization that supports the intended outcomes of the OH&S management system	Refer to CP 7.1, 7.2, 7.3- Support (Resources- Competence & Awareness)
Protecting workers from reprisals when reporting incidents, hazards, risks and opportunities;	Refer to CP 5.4- Consultation and participation of workers
Ensuring the organization establishes and implements a process for consultation and participation of workers	Refer to CP 5.4- Consultation and participation of workers
Supporting the establishment and functioning of health and safety committees	Refer to CP 5.3 - Organizational roles, Responsibilities, and authorities

2. Records

- HSE procedure manual

3. Reference

- OH&S 45001:2018 Standards

Approval

The signatures below certify that this health and safety management system procedure has been reviewed and accepted and demonstrates that the signatories are aware of all the requirements contained herein and are committed to ensuring their provision.

	Position	Signature	Date
Prepared by	HSE MR		
Reviewed by	FMD MR		
Approved by	Head of HSE/ COO		

Amendment Record

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Brief Description	Rev.	Page	Prepared By	Reviewed By	Date
First Audit: OH&S procedure revised to incorporate requirements of ISO 45001:2018	0	All	HSE	FMD	03/05/21'

Occupational Health & Safety Policy

As an integral part of its business and operational strategy, Mabanee is fully committed to overall continual improvement of its Occupational Health & Safety performance levels whilst adhering to the standards set by the ISO 45001:2018 standard to ensure the safety and well-being of all internal and external parties involved.

It is the Occupational Health & Safety Unit's responsibility to provide:

"**Facilities Management and Provision of Building Maintenance Services including Health, Safety & Security to Mabanee premises**" efficiently and professionally, with the objective of meeting or exceeding the expectations of all interested parties.

Mabanee's OH&S Policy focuses on:

- Compliance with or exceeding the requirements of the ISO 45001:2018 OH&S Standard;
- Commitment to provide safe and healthy working conditions for the prevention of work-related injury and ill health and is appropriate to the purpose, size and context of the organization and to the specific nature of its OH&S risks and OH&S opportunities;
- Identifying and evaluating the risks and opportunities in our activities;
- Commitment to eliminate potential hazards and reduction of OH&S risks in all areas of operation;
- Provision of a healthy and safe environment to prevent injuries and health issues;
- Provides a framework for setting OH&S objectives;
- Requiring all OH&S employees to be committed to achieve measurable objectives and targets set in all levels, and reviewing it at regular intervals;
- Monitoring the OH&S Management System and implementation of measures for its continual improvement;
- Commitment to fulfil legal requirements and other requirements;
- Integration of OH&S requirements to Mabanee's policies and business processes;
- Raising awareness amongst all relevant parties and ensuring compliance with the OH&S requirements;
- Commitment to consultation and participation of workers, and, where they exist, workers' representatives.
- Ensuring consultation & participation of relevant parties through Human Resources Department for the implementation of OH&S Management System;
- Ensuring that all persons working for and on our behalf understand this policy; are aware of their responsibilities; and are prepared for emergencies;
- Continually improve the effectiveness of implementation of the OH&S Management System by providing required resources, including the training for the development of competent manpower;

السيد / حمـد السـريع
مـديـر الأمـن

Head of OH&S Unit

Chief Operating Officer

Organizational roles, Responsibilities, and authorities

1. Purpose

To define roles and responsibilities of employees of OH&S Unit pertaining to OH&S Management System. The responsibilities defined here are in addition to and irrespective of their other responsibilities/job description in Mabanee.

2. Responsibilities

2.1 OH&S Unit Head

- To provide vision and direction to ensure that strategic objectives are realised;

- To raise awareness of OH&S policies and guidelines through appropriate training.

- To ensure employees' compliance with OH&S policies and guidelines

- To ensure emergency preparedness and response is made available and drills are conducted

- To provide direction to the OH&S Unit for setting objectives and targets for continual improvement

- To control and review that objectives and actions are implemented;

- To ensure OH&S Management System complies with ISO 45001:2018;

- To ensure that OH&S Unit adheres to all OH&S policies and procedures

- Ensuring corrective actions related to existing or potential non-conformances are taken and are effective.

- To provide, manage and utilise resources.

- To ensure that risk assessment and opportunities for improvement are part of the management process.

- To ensure that OH&S performance levels are reported to top management.

- Ensure compliance to legislative, regulatory and other requirements.

- Ensure the monitoring the health of employees.

- To ensure that relevant parties are made aware of the relevant sections of the OH&S management system including the requirements for regulatory compliance and the consequences of deviation.

- Participate and contribute to management reviews meetings.

2.2 OH&S Coordinators

- To monitor the premises through daily patrolling to ensure adherence to all OH&S policies and guidelines;

- To conduct regular storage inspections as required;

- To report and investigate incidents to provide both corrective and preventive recommendations;

- To ensure that all workers are wearing the appropriate PPE through Physical check-ups, when required.

- To inspect all areas of work before, during and after work is conducted to ensure adherence to all OH&S guidelines;

- To raise NCR's and any opportunities for improvements when required or deemed necessary;

- To conduct scheduled OH&S internal audits;

- To ensure compliance to all OH&S management system requirements;

- Ensure the health of employees is monitored through physical check-ups, when required.

2.3 Management Representative (MR)

The MR is responsible for the establishment, implementation, and maintenance of the OH&S management system.

MR Responsibilities:

- To adhere to all OH&S policies and procedures.

- Facilitate development and maintenance of the OH&S management system

- Report regularly on OH&S performance and any need for improvement to top management;

- To ensure the promotion of awareness throughout OH&S unit;

- To define any new training needs to enhance competence for OH&S unit;

- Internal and external communication with respect to OH&S;

- To liaise with external parties on matters relating to the OH&S;

- To schedule OH&S Management Review meetings and maintain its records; and to communicate the management decisions to all concerned.

- To ensure the OH&S policy is communicated to all employees

- To ensure internal and external audits pertaining to management system are conducted;

- To ensure monitoring of incidents reported and NCRs and tracking corrective/preventive action requests.

2.4 Internal Auditor/s

The Internal Auditor is responsible for conducting audits ensuring the objectivity and the impartiality of the audit process.

Internal Auditor Responsibilities:

- Ensure that the Auditee is complying with the approved OH&S policies, procedures and standards.

- Follow the Audit program and Agenda set by MR.

- Evaluation of the audited organization by reviewing of systems, documents and records.
  Internal Auditor shall raise any observations/ opportunity of Improvement and Corrective Action Requests (CAR): (*Refer to CP 9.2 - Internal Audit)*

- Communicate the findings and recommendations to the Auditee/ MR for consideration and rectification.

- Follow up and close out of Opportunity of Improvement and CARs raised during the internal audit (as per the agreed implementation and follow up dates).

- Support MR with Internal Audit requirements, not limited to the above.

2.5 Each Employee shall:

- Adhere to OH&S policies and procedures;

- Bring to the attention of their management / Unit coordinator any non-compliance, risks or opportunities for improvement.

3. References

- CP 6.1.1, 6.1.2, 8.1.2- Risk Management (Hazard Identification & Risk Assessment)
- CP 6.1.3, 9.1.2- Identification of Legal & Other Requirements & Evaluation of Compliance
- CP 6.2- OH&S Objectives & Achievement Plan
- CP 9.2 - Internal Audit
- CP 10.2 A- Incident Reporting and Investigation
- CP 10.2 B- Non-Conformance and Corrective Action

4. Records

- HIRA register
- Training Records
- CAR records
- NCR records
- HSE inspection records

Approval

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Prepared by	HSE MR		
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1. Purpose

The scope of this procedure covers all health and safety related consultation, participation and communication activities and applies to all workers, contractors, and any other persons present at our facilities. Mabanee provides channels of communication in relation to health and safety issues to update workers on relevant safety matters, promote the participation of workers in safety-related decisions, and to provide employees with the awareness and the means to communicate their concerns and Responsibilities.

2. Responsibilities

2.1 OH&S Unit Head is responsible for:

- Working in collaboration with Managers, Coordinators, and workers towards the prevention of incidents that cause injury to people, harm the environment, or damage assets or property.

- Unit Head shall authorise and encourage workers to report incidents, hazards, risks and opportunities through CMMS and that no reprisals shall occur

2.2 OH&S coordinators are responsible for:

- Ensuring appropriate consultative arrangements are in place in all areas under their control;

- Facilitating the availability and use of allocated resources;

- Making available workers for consultative forums as required;

- Consulting with Health & Safety Representatives and/or workers regarding issues where there are changes proposed which affect health and safety;

- Establishing and encouraging consultative arrangements at workplaces under their control;

- Implementing safe work practices within their area of responsibility and contribute to their improvements.

2.3 Workers are responsible for:

- Taking reasonable care for their own health and safety and for other workers and visitors to their workplace;

- Following and complying with reasonable instruction and co-operate with policies and procedures, including consultation at work;

2.4 Health & Safety Unit is responsible for:

- Meeting on Monthly basis;

- Facilitating cooperation between the workers in the management of health and safety;

- Retaining relevant records of meetings, decisions, discussions, and outcomes, including any action items arising from meetings.

- Provide a forum through CMMS for the participation and consultation of workers on hazard and risk issues identified, potential changes to work systems, work environments, practices and procedures that may affect workers;

- Providing a forum for resolution of health and safety matters through CMMS;

- Provide training and education on safety matters;

- Identifying, reviewing, and publishing procedures in relation to health and safety.

3. Records

- Monthly meeting records/ Minutes of Meeting (MoM)
- CMMS records

4. References

-

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1. Purpose

This procedure defines the OH&S Hazard Identification and Risks Assessment process to be carried out to control the risks associated with all the activities of Mabanee.

It is applicable to all the activities of Mabanee that have an impact on the OH&S of Mabanee and can create risks for any person within its premises.

2. Responsibility

OH&S officer/representative for:

- Conducting risk assessments
- Assessment of risks and determining priorities
- Conducting Safety meetings

MR for:

- Reviewing the amended documents for integrity and risks.
- Authorizing the content, issue and re-issue of OH&S documents.

OH&S Unit Head for:

- Conducting risk assessments
- Assessment of risks and determining priorities
- Conducting Safety meetings
- Determining the control used to address each risk (Hierarchy of control)
- Review performed risk assessments

Risk Assessment Team for:
- Conducting risk assessments
- Review of risk assessments

Key personnel involved in performance and supervision of activities for:
- Participate in hazard identification when risk assessment is conducted
- Participate in safety meetings

The designated holders of any document are responsible for:

- Ensuring they have the latest version of the documents and using them
- Keep all documents properly filed, updated and available at the point of use

3. Hazard Identification and Risk Assessment:

The process for Hazard Identification and Risk assessment shall be as follows:

3.1 General procedure:

A team is compiled to perform risk assessments. The team shall include the following members:

- Unit Heads
- OH&S Officer/representative
- Key personnel involved in performance and supervision of activities

Risk assessments should include routine/normal activities, non-routine activities and any potential emerging situations.

3.2 Hazard Identification

Hazards are identified for activities, processes, facilities and equipment. Hazards may be identified by, but not limited to, the following:

- Monthly Meetings
- Planned walk through to the site
- Past incidents
- Reports from industry best practices
- Reports from regulatory bodies
- Group discussions

Hazard identification shall be conducted annually at a minimum and shall be updated to include new or changed operations.

3.3 Risk Assessment

Evaluate the process of consequences and likelihood of an event happening. Once the risks are identified, OH&S officer/representative and Unit Heads shall assess each OH&S risk to determine its risk priority. Risk priority shall be determined and set by taking the following into consideration:

- Severity of potential consequences to people, environment, business, health and safety. Severity is the magnitude of impact if risk did occur.
- The likelihood of the risk or incident occurring. The likelihood takes into account the frequency of the event and the probability of the impact occurring from the event.
- Assign a priority for controlling the risk by ranking risks through risk significance scores (Risk significance = Impact x Likelihood)

4. Managing and Controlling the Risk

To manage and control the risk, the following shall be done:

- Starting with the highest risk ranking, determine and implement appropriate controls to ensure the risk is "As Low as Reasonably Possible" (ALARP)
- Ensure risk has suitable administrative controls in place
- Allocate each identified risk to an owner who will take responsibility for managing it
- To ensure that the required resources are provided, there are no cost issues and that the responses are implemented effectively
- Progress is monitored against agreed milestones and targets
- Document Agreed upon controls in HIRA register.

The Hierarchy of controls for the identified risks should be as per the following illustration:

Often a combination of several control methods will be used to effectively manage a OH&S risk.

5. Risk Assessment Outputs

The output of the risk assessment may include the following:

- Identified operations of all OH&S hazards and risks associated with Mabanee's activities/system
- Qualification of risk
- Control measures to control the risks
- Identified competency or training requirements
- Input for setting improvement objectives and programs for its achievement

The risk measures identified shall include controls such as termination/elimination, treatment of the risks, transfer of the risks by suitable measures and, where required, tolerated as long as it meets local laws and legislations.

Outputs of the risk assessment may be used for the following:

- Setting OH&S objectives and targets
- Training needs identification
- Terminating the risk if it is practical
- Facility engineering controls
- Emergency preparedness and response plan
- Administrative controls
- Insurance

6. Objective Plan and KPI's

In scenarios where the risk is evaluated as high or severe, it shall be incorporated to the company or departmental objectives, with clear timelines and responsibilities identified for initiatives and action programs to manage/control/mitigate the risk to an acceptable level.

7. Engineering Controls

After considering the possibility and appropriateness of hazard elimination, the company shall consider the most effective and appropriate method (refer to hierarchy of control above) for controlling the risk.

Engineering controls may include, but not limited to, the following:

- Isolation of hazard by enclosing the source. This is done by preventing personnel from reaching the source with barriers, shielding the source of harm.
- Use of alternative engineering control of complicated process
- Use of alternative operational control
- Use of alternative equipment/machine/tool
- Proper stacking and housekeeping system
- Local modifications such as vents, fans, cooling systems etc.
- Installation of warning alarm or lighting systems when such activities are performed
- Lock out switches, emergency stop buttons, and use of lifting aids.
- Security cameras
- Drainage system, secondary containments for harmful liquids storage.

8. Administrative Controls

Administrative control activities may include, but not limited to, the following:

- Procedures/work instructions
- Training
- Group communication
- Lock Out Tag Out system
- Permit to work system
- Planned inspections and audits
- Safety tours by top management
- Proper signages
- Use of MSDS
- Electronic access and exit control

9. Personal Protective Equipment (PPE)

- Generally, PPE strategy shall be considered as the last resort. Adequate PPE shall be provided.

10. Review of Risk Assessment

Review risk assessments at planned intervals (as needed) taking into consideration the changing circumstances, technological changes etc.

Risk assessments should be reviewed in the following situations:

- Change in the nature of work process
- Changes in legislation
- After an incident with loss or incident without loss but had high catastrophic risks.
- Failure in plant or equipment
- Modification of workplace or equipment or procedures
- Changes in technology
- Evaluating and executing major projects
- Strategic or operational planning
- Internal or external audit findings
- Feedback from tenant/customer/property owner related to HSE risk

Risk assessment team may establish a method for conducting the review which may include the following elements:

- Operations management and input from any other experienced personnel may be considered
- The review and any associated outcomes are documented, including who participated in the review and who provided the input
- When conducting the review ensure risk reduction is considered for those risks where KPI's were established and achieved. The risk ranking may not always change but it should be clear as to why it did not change.
- Ensure risks and rankings associated with activities where changes occurred are adequately updated to reflect the changes
- Ensure risks have been properly identified, evaluated and prioritized. The review includes controls into the place and verifies that the established OH&S risk management procedures are valid and appropriate to the nature and magnitude of the identified risk.

11. Safety Meetings

Chaired by: OH&S Unit Head, OH&S officer

Participants: Key personnel involved in performance and supervision of activities

Agenda: The following points are addressed as applicable:

- Follow up on action points from previous meetings
- Status of trainings
- Status of inspections
- Incident/accident analysis
- Identification of risks
- Sharing of key experiences and learning points
- Opportunities for improvement
- Any other related issue

Records shall be maintained.

12. Reporting

All employees are responsible for reporting to their supervisor through CMMS any potential or actual OH&S risk in their work area. OH&S team is responsible for reporting to its OH&S Unit Head to implement controls and manage the risk.

Performed risk assessments shall be reviewed by the OH&S unit head and the distribution of the risk assessment shall be controlled as per procedure for control of documents.

13. Records
- HIRA Register
- CMMS Records

14. References
- CP 7.5 – Documented Information (Control & Structure)

Approval

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Reviewed by	FMD MR		
Approved by	Head of HSE/ COO		

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1. Purpose

To identify the applicable local regulations and to make sure the whole organization is aware and complies with the applicable legal and other requirements

2. Responsibilities

OH&S Unit Head must ensure that:

- Compliance with all OH&S legal and other requirements
- Availability and maintenance of all OH&S legal requirements
- OH&S legal requirements are updated accordingly

3. Procedure

3.1 Identification of Legal & Other Requirements

- OH&S unit head shall collect and maintain all applicable local regulations from the regulating authorities
- OH&S unit head shall monitor the status with local and other authorities and where required
- OH&S legal and other requirements may include, but not limited to, the following governmental bodies:
  - i)   Private Sector – Kuwait Labor Law
  - ii)   Kuwait Fire Department
  - iii) Any other governmental body with requirements that are applicable to Mabanee

3.2 Communication of Legal & Other Requirements

OH&S unit head shall ensure that all workers and relevant parties are aware of the OH&S legal requirements. This may be done through, but not limited to, the following:

- Training
- Meetings
- Signages
- Incorporating requirements to procedures and work instructions
- Publication on portal
- Any other method as practicable

3.3 Legal & Statutory Compliance Monitoring

- OH&S unit head shall maintain a register for related governmental bodies and ensure that all the applicable legal requirements are monitored and ensure compliance with these requirements

- Monitoring shall be conducted annually to ensure that the legal records maintained are up-to-date to the latest rules and regulations.
- NC's shall be raised for legal non-compliance and decide corrections and then corrective and preventive actions to eliminate the cause of actual or potential non-conformance and to investigate any impacts caused.

4. Records

- OH&S Legal Register
- Audit Reports

5. References

- Relevant Governmental Bodies' requirements
- Kuwait Fire Department
- Private Sector – Kuwait Labor Law

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1. Purpose

To Provide a documented methodology for identifying operational controls to improve and/or control where their absence could lead to deviation from the OH&S Management System

2. Responsibilities

OH&S Unit Head must ensure that:

- All required OH&S operational controls are identified

- Ensure that significant risks are identified and identify the best OH&S operational control is used for the identified risk

OH&S Coordinator must ensure that:

- Carry out the required operational controls

- Ensure that all required documents are implemented and maintained

3. Procedure

3.1 General

The list of significant risks becomes a major input for setting of operational control procedures. All significant risks are considered when conducting a study for the establishment of objectives and operational control procedures. Operational control procedures such as "Emergency Preparedness and Response" procedure shall also be available to ensure the overall safety of everyone within Mabanee's premises.

- The list of significant risks becomes a major input for setting of operational control procedures.
- All significant risks are considered when conducting a study for the establishment of objectives and operational control procedures.
- Operational control procedures such as "Emergency Preparedness and Response" procedure shall also be available to ensure the overall safety of everyone within Mabanee's premises.
- Operational control procedures shall include instructions for controlling OH&S hazards relating to operations carried out within Mabanee's premises.
- Operational control procedures shall be applicable to workers, tenants, contractors, suppliers and customers where their absence could lead to deviation from OH&S objectives, targets and programs
- OH&S coordinator along with OH&S unit head approve the operational controls
- A master list of operational control procedures is available with the OH&S unit

- OH&S operational control procedures are added/modified as deemed necessary by the OH&S unit head wherever hazard/risks arise

3.2 Communication of Operational Controls to Employees

- The OH&S coordinator along with OH&S unit head shall identify the employees who undertake the activities and operations associated with the operational controls and ensure that the requirements and operating criteria are communicated to and understood
- For employees, this may be undertaken by including the operational controls in training programs or communication programs.
- The OH&S coordinator along with the OH&S unit head shall identify contractors/tenants/suppliers who undertake activities associated with the operational controls.

4. Records

- OH&S Risk Register
- OH&S procedures related to process/activities

5. References

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1. Purpose

The purpose of this procedure is to establish objectives and planning to achieve them for the implementation and efficiency of OH&S Management System.

Objectives are consistent with the OH&S Policy and are capable of being measured.
Procedures are in place to ensure that the established objectives and plans to achieve objectives are clear, measurable, monitored, communicated, updated, and resourced.

2. Scope

This procedure is applicable to all the activities under the control of OH&S Management.

OH&S Management Objectives targets and programs are established at relevant levels.

The objectives may be in line with the OH&S Policy and results of risk and opportunity analysis as well as Risk Assessment which identify the significant of Occupational Health & Safety Risks.

Ensure that the OH&S Objectives established are compatible to the strategic direction and the context of the organization.

Objectives shall be measurable (wherever practicable), realistic and include the time frame to achieve the targets.

The following points may be considered, while establishing the objectives, targets, and programs:

- Internal & external issues of the organization.

- Strategic direction of organization and aligned with the organizational objectives.

- Consistent with OHS policies.

- Significant OHS hazards.

- Compliance with applicable Legal & Regulatory Requirements.

- Business requirements.

- Views of interested parties.

- Technological & financial aspects.

- Suggestions from employees.

- Potential emergency situations.

- Results of internal & external audits.

- Waste handling & disposal practices.

- Training of employees.

- SLAs

- OHS incidents/ accidents.

- Corrective & Preventive Actions.

The objectives and targets are documented properly for monitoring. The objectives shall be measurable without excessive cost or documentation.

The objectives and targets shall be reviewed during Management Review Meetings and are revised, modified, if required

3. Planning to Achieve OH&S Objective

3.1 Setting up of Objectives
Prior to December of every year, OH&S Unit Head shall set objectives for HSE unit following SMART concept, to be reviewed by MR ensuring it is in line with OH&S's policy and objectives.

S	Specific (simple, sensible, significant).
M	Measurable (meaningful, motivating).
A	Achievable (agreed, attainable).
R	Relevant (reasonable, realistic, and resourced, results-based).
T	Time bound (time-based, time limited, time/cost limited, timely, time-sensitive).

Objectives are categorized into two sections:

- **Fixed Objective:** This objective is unit specific and is generated every year.
- **Short-term:** This objective is short, to be reviewed in 12 months.

The set objectives shall be evaluated and approved by OH&S Unit Head.

After obtaining the approval, the objectives shall be communicated to the Unit, to the level necessary to achieve the set objectives.

When setting up of objectives, the following shall be considered:

- Objectives shall be specific, and where possible, measurable without excessive cost or documentation;

- Results from analysis and review of various monitoring / verification reports to identify areas for improvement, and from review of risks and opportunities;

- Objectives could relate to business, quality, health, safety, and environment.
- Objectives shall be consistent and aligned with the organizational objectives & OH&S policies.

3.2 Action Plan

Action plan shall be prepared for both organisation and personal objectives and include, as applicable:

- Time scales for completion and monitoring;
- Responsibilities;
- Objective Evaluation method

Complete objectives Action Plan.

3.3 Monitoring and follow up

OH&S Unit Head shall ensure the objectives are achieved within the stipulated time frame.

Unit objectives to be monitored as specified in the plans.

Quarterly reports shall be sent to MR for notice, to update the status of each unit objectives accordingly.

3.4 Reporting and Review

Status of Unit objectives shall be reviewed during Management review meetings.

Inputs from these statuses shall be used to set the subsequent objectives.

4. Planning of Risks and Opportunities

The OH&S has been planned after due consideration of the context of our Company and the influence and requirements of the interested parties. Risks and opportunities are determined and addressed.

Risk management is everyone's responsibility, from top management to individual employees. Our focus is on the operational risks related to quality of business processes, health and safety of customers, damage to property, and to avoid damage to the companies' reputation.

It is Company's principle that all risks should be assessed, and action taken to eliminate or reduce them to an acceptable level.

Mabanee realize control of risks is essential in ensuring quality of our services. To achieve this, we have policies, procedures, forms, and monitoring processes in place to mitigate the identified risks. The procedures have been written in sufficient details to cover the expected risks of all routine activities of the Company.

For those non-routine activities / situations that are not covered in this manual, guidelines have been provided to assess risk and take actions to mitigate them. Where available, the Company uses generic industry guidance and manufacturer's instructions to reduce risks.

To ensure our risk control measures remain adequate procedures and processes are reviewed regularly and updated as required.
We endeavour to improve our services through better response times, focus on customer needs, and partnership with external providers. We actively seek and evaluate opportunities towards this purpose.

And define actions that can be taken to address the risks and opportunities that could influence the performance of our OH&S or disrupt or damage its operation.

5. Records

- Objectives Action Plans
- Records on follow up on Objectives

6. References

Approval

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1. Resources

Management ensures that adequate resources are provided, at appropriate times, to establish, implement, maintain, and improve the facilities, quality and occupational health & safety Management System. Where internal resources are considered inadequate, external providers are used.

Mabanee employ people that are suitable for an effective facilities & quality management system and are competent to fulfil their responsibilities.

Mabanee provides the infrastructure, facilities, associated utilities, supporting services and equipment required for the effective and efficient functioning of the organisation.
ICT Department is responsible for providing and maintaining computers and software.

It is Mabanee's policy to provide a safe, healthy, pleasant and supportive working environment for all its employees.
Mabanee strives to provide equal employment opportunities in conformance with all applicable laws and regulations by administering our HR policies, programs and practices in a non-discriminatory manner in all aspects of employment relationships.

2. Competence

2.1 Purpose

To ensure that:

- Training needs of the OH&S employees are identified, and training is provided to maintain and enhance the competency.
- OH&S employees are aware of OH&S policy, objectives, and implications.

2.2 Responsibility

OH&S Unit Head for ensuring that competent persons are employed, and their competencies are maintained.

OH&S Unit Head for

Identifying OH&S training programs required for their staff, ensuring that training is provided in liaise with Mabanee HR Department.

MR, in coordination with HR, ensures that all new employees are given Awareness training by an assigned employee.

3. Awareness

3.1 Awareness of OH&S – Induction

When a new employee joins OH&S, they shall be given an Induction Training within 2 weeks of joining.

The training must include, as a minimum, the following:

- General awareness of the activities of the OH&S and their interrelation;
- Specific procedures related to the Unit.

Induction checklist must be completed and maintained.

Any employee transferring from one unit to another within OH&S also shall be given awareness on relevant topics within 2 weeks of joining.

3.2 Identifying Training Needs for HSE employees

OH&S Unit Head must identify the OH&S training needs of all employees that arise:

- Core competencies are maintained and enhanced;
- As Follow up / trainings.

The training shall be identified:

- At the time of recruitment;
- During routine work or as recommended by the management;
- During performance evaluation;

The above training needs to be communicated to HR department through appropriate training plan.

3.3 Effectiveness of training

Effectiveness of trainings shall be assessed through appropriate methods.

3.4 Sharing of knowledge gained and evaluation

The attendee shall give feedback/evaluation of the training provided.

The knowledge gained from the training shall be shared with colleagues during the unit / department meetings.

3.5 Contractor / Subcontractor HSE Awareness

Safety and emergency awareness are provided to all employees / contractors / tenants by the H&S Unit. Visitors are made aware of emergency exits through signage and during evacuation.

3.6 Conducting of HSE Training Plans

Training plans shall be provided by the HSE Unit to be circulated by HR department.

Training plan shall cover all HSE related training requirements deemed relevant by the HSE Unit Head. IT may include but not limited to:

- Emergency preparedness and response
- First Aid training
- Fire protection
- Material handling and storage
- Safety hazards
- General awareness of OH&S activities.

Training schedule, plan and relevant records shall be maintained.

4. Records

- Competence Requirements / Job Descriptions (by HR);
- Employee CVs / certificates / competence records (by HR);
- Training plans and records
- Effectiveness of Trainings (through Training Evaluation)
- Induction Checklist

5. References

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1. Purpose

To define standards and proper channels for all internal and external communications.

2. Responsibility

OH&S Unit Head for ensuring that:
- OH&S Policy is communicated to all staff of Health & Safety Unit;
- Ensuring that these procedures are adhered to their units;
- Communicating OH&S objectives to their employees;

All employees are responsible for forwarding all OH&S related communication/ suggestions to OH&S Unit Head.

MR for ensuring all OH&S related communication with management, employees, and external parties.

3. Procedure

3.1   General

OH&S uses the following modes for internal and external communication:
- Correspondence (physical and emails);
- Company website and Intranet;
- Training / Workshops / Seminars;
- Suggestions;
- Meetings;
- Any Other.

3.2   Meetings

Meetings are an important mode of communication and are utilised as an effective two-way communication forum with a focus on involving employees in decision-making.

Both vertical (management to employees and vice versa) and horizontal communications (between various units) are addressed through the following formal / informal meetings. Other than these, meetings are held as required.

The records for the following meetings shall be maintained.

3.2.1   Management Meetings – Monthly

These meetings shall be attended by
- OH&S Unit Head
- MR
- OH&S Coordinators
- Any other invitee.

Agenda may include applicable topics such as,

- Status of operations;
- Action points from previous meetings, if any;
- Approval of Revision Record, in case any revisions are there;
- Internal and External Issues – any changes;
- Change in need and expectations of interested parties
- Risks – current and potential;
- Identify/ review new business opportunities;
- Resources including adequacy of human resources;
- Trainings;
- Any other.

3.2.2   Management Review Meetings – *as scheduled.*
Attendees:

- Chief Operating Officer (Chair)
- OH&S Unit Head
- MR
- Any other invitee.

Agenda to include:

- Action Points from previous meeting;
- Effectiveness of OH&S
- Progress / concerns in OH&S Implementation;
- Risks / Areas of concern;
- Suggestions for improvement;
- Incident reports;
- Any achievements;
- Sharing of experience / knowledge / trainings;
- Any other issues.

3.2.3   Management Review Meetings
Refer to CP 9.3- Management Review procedure.

3.3   Addressing Internal Complaints & Grievances
Internal complaints and grievances of employees during day-to-day operations shall be brought to the notice of the OH&S Unit Head for resolution.

3.4 Suggestions

Suggestions for improvements identified by employees during day-to-day operations shall be brought to the notice of the MR through OH&S coordinators (suggestion form). MR shall register each suggestion and maintain records.

These suggestions shall be reviewed by MR, brought to the notice of management as required, and implemented as per the action plan agreed with the management.

MR to follow up and close these.

3.5 Internal & External Communications

OH&S maintains a consistent, reliable and concise communication among the various levels and functions of the organization, ensuring an effective implementation of Operational Health & Safety Management System.

These communications consider the diversity aspects, needs and its legal requirements generated within the Facilities management system.

OH&S Communication channels shall include:
- Management departments and sub-units;
- Service Providers and visitors to the workplace;
- Interested parties (external & internal);
- Other relevant parties, as appropriate.

To ensure clear communications are maintained, Mabanee has in place:
- The Mabanee intranet;
- Defined communication channels and authorities for internal and external communications;
- Formal and informal meetings;

MR is responsible for ensuring all external communications related to OH&S is maintained and handled.
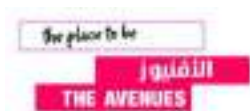
4. Records

- Files and emails
- Schedule / Agenda of the meetings
- Minutes of Meetings (MoM)
- Suggestion Form/ records
- Follow up on the action points

5. References

- CP 9.3- Management Review

- CP 6.1.1, 6.1.2, 8.1.2- Risk Management (Hazard Identification & Risk Assessment)

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1. Documented Information

1.1 General

OH&S management system and related documentation is necessary to achieve the desired results. OH&S unit have achieved this through:

- Clearly documented policies, procedures and forms;

- Ensuring that inputs from all employees are taken to capture their valuable practical experience;

- The need to demonstrate fulfilment of legal requirements and other requirements;

- The responsible persons review and approve all documents prior to inclusion or change;

- There are procedures in place to ensure adequate control of these documents;

- Ensuring controlled subsequent changes so as not to affect the integrity of the system;

- Ensuring that only the current versions are in use at all work locations;

- Exercising control on documented information of external origin;

- Managing and protecting records.

2. Document Structure:

2.1 Purpose

To ensure that a consistent format and structure is used in all documentation of the OH&S.

2.2 Responsibility

MR must ensure that

- All documents follow the structure and layout as per this procedure.

The content under headings is as defined in this procedure.

2.3 Procedure

Layout of OH&S Manual

The OH&S Manual comprises of three sections- Apex Manual, Procedures Manual, and Forms Manual.

Apex Manual (Apex):	Includes the base of OH&S policies and principles pertaining to operation.
Procedures Manual (PM):	Includes responsibilities and authorities, procedures, and appendices.
Forms Manual (FM):	Includes forms and checklists related to the procedures

2.1 Layout of documents

These templates for the Apex manual, Procedures manual, and Forms must be used for creating new documents or formatting existing ones.

Purpose

- Specifies the purpose, objective and / or scope of the document

Responsibility

- Overall, for the process and / or executive responsibilities to be specified briefly for all key activities within the document.

Procedure

- Procedures and instructions for the process must be specified here in sequential order. These must be in simple and clear language. Instructions must not be repeated elsewhere in the document. Reference to other documents must be kept at minimal; when unavoidable the name of the section / document should be given and not the reference numbers.

Records

- All the records generated because of / or as evidence of implementing the procedure are to be specified here.

References

- All internal or external references, if any, related to the procedure to be mentioned.

3. Document Control

3.1 Purpose

To ensure that

- Documents related to the OH&S are maintained accurately and are up to date.
- Latest revisions of these documents are available at points of use.
- All new / modified documents are risk assessed and approved.

This applies to hard copies as well as soft copies.

3.2 Responsibility

- **OH&S Coordinators** for
- Identification and development of procedures.
- Review of the OH&S documents.

- **MR for**
- Reviewing the amended documents for integrity and risks.
- Authorizing the content, issue, and re-issue of OH&S documents.

- **OH&S Unit Head** for approving all new documents / amendments in documents.

The designated holders of any document are responsible for

- Ensuring they have the latest version of the documents and using them;
- Keep all documents properly filed, updated and available at the point of use.

General Procedure

All controlled documents shall be developed, compiled, approved, issued, amended, or deleted in accordance with this procedure.

- The OH&S procedures on the intranet and the hard copies with the signed cover page are   the controlled copies of the manual- all other printed copies are uncontrolled.

- OH&S Coordinators shall ensure that the updated procedure is readily available to all.

3.3 Development

MR must:

- Ensure all documentation is reviewed and approved prior to issue.

- Maintain and control all OH&S documentation.

- Ensure controlled documents are having the signed cover page.

The OH&S Documentation shall:

- Be concise, coherent, and easily readable.

- Be consistent in content style and format.

- Include an appropriate level of detail.

- Not contain any unnecessary prescriptive detail but a level dependent on:

  - Complexity of process.

  - Risk the procedure is aimed to mitigate; and

  - Knowledge, skills, and competence of the user.

- Be in a style and language that considers the audience and circumstances when a procedure might be referenced such as an emergency.

- Use simple, common vocabulary understanding not all readers are native English speakers.

3.4 Amendments

Any OH&S employee may propose an amendment to the OH&S by filling and submitting "Change Request Form" to the Unit Manager.

Amendments may be the consequence of, but not limited to:

- Change in process / activity;

- Internal/ external audit finding;

- As part of corrective action;

- Change in rule/ regulation/ legislation/ ISO standards;

- Decision of management review or as result of OH&S review/s;

- Change in policies;

- Continual improvement or any other.

OH&S Coordinator(s) shall review, determine the action required and forward to the MR for approval as follows:

- Reject: No direction action required, inform originator, and provide reasons for rejection;

- Minor revision (e.g. grammar, spelling, format, etc.): Amend and reissue with required editorials;

- Amendment: Modification to- or development of new operating procedures or other OH&S documentation. Initiate Change Review

Change Review:

MR shall conduct a comprehensive review of proposed changes in the event of amendments / new documents. If required, MR may seek inputs from Unit coordinators to complete the review.

- Approve, reject, or propose alternative actions to be taken;

- Allocate responsibility;

- Establish a deadline for completion of actions;

- Establish deadline and track progress and close amendment request once completed; and

- Ensure originator is informed either directly or via the Unit Managers.

Change Request shall be completed.

Compilation, Distribution & Updating Manuals

- MR shall ensure that all approved amendments are compiled / inserted; layout and integrity shall be reviewed and verified; Revision Record to be prepared;

- During the Monthly Management meeting, the Revision Record shall be reviewed and acknowledged. Acknowledgement Signature of the OH&S Unit Head shall be visible on the Revision Record;

- MR shall distribute the revised documents along with Revision Record after approval;

- The revised / new documents shall be inserted in the procedure and the replaced documents shall be destroyed.

Urgent Changes

Urgent changes (changes that require immediate action / attention) shall be addressed and implemented immediately.

Documents of external origin

MR shall ensure that the latest versions of the documents of external origin (e.g. standards) are available on all points of use.

The users shall remove the older versions (or mark them as obsolete) on receiving the latest version.

Distribution to third parties

The relevant procedures may be released to third parties, if required, MR approval shall be obtained each time these are released. Documents issued shall be marked as uncontrolled.

4. Record Control

4.1 Purpose

To ensure maintenance of records (both paper and electronic) to demonstrate the achievement and effective operation of the OH&S.

4.2 Responsibility

OH&S Coordinators for maintenance of records as mentioned in the procedures.

4.3 General Procedure

Records must be maintained in designated place in the department and archived after retention period. All files must be labelled as per Appendix A- File Label Format.

Sensitive material such as details of personnel, legal or financial records must be secured against unauthorized access.

Retention time for Records

Records shall be maintained:

As defined by legal / statutory requirements; or

Where there is no required retention time:

- As a minimum 3 years as defined by the Company; or
- The period as defined in the OH&S form used.

The following records shall be retained indefinitely:

- Legal / arbitration minutes and correspondence;
- Contracts;
- Payment and Budget Records (if any).

Change in the retention time shall be approved the OH&S Unit Head.

4.4 Archiving of Records

OH&S Administration shall ensure that:

The Standard Filing Index is reviewed annually, and updated as required;

Lists of records to be archived, and scanned are prepared and approved by OH&S Unit Head;

Identified records are archived and scanned;

Records in archive storage are catalogued and filed properly to enable efficient withdrawal. All records in archive storage are protected against damage, loss, or deterioration due to environmental conditions.

4.5 Electronic Records

The electronic records must be protected and backed up periodically.

5. File Label Format

mabanee
Health & Safety Unit

Title:	
Ref:	
File No:	

Date		
From:	**[Month]**	**202**
To:	**[Month]**	**202**

6. Records

- Change Request

- File Labels

7. References

- Documented policies, procedures and forms

Approval

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1. Managing Changes

1.1 Purpose

To respond to planned or unplanned changes in the organisation, activities, procedures, contractors' scope, or equipment that could have impact on the quality, health and safety and property with a view to eliminate or reduce the risk.

1.2 Responsibility

- **OH&S Unit Coordinators** for initial review of suggested changes;
- **MR** for reviewing the recommended changes for integrity and risks;
- **OH&S Unit Head** for approving all changes.

All levels of management shall ensure that changes are evaluated, and correct response is taken.

All staff shall report any changes that could adversely affect quality, health, safety, or property, to OH&S Unit Head.

1.3 Procedure

When a change is expected (planned) or encountered (unplanned) a formal request for change shall be initiated (Change Request) to evaluate and reduce the quality, health, safety and property risks and environmental impacts.

The changes may be related to:
- Workplace locations and surroundings;
- Work organization;
- Working conditions;
- Equipment;
- Work force;
- Changes to legal requirements and other requirements;
- Changes in knowledge or information about hazards and OH&S risks;
- Developments in knowledge and technology;
- Scope of work;
- Activity / new activity;
- Policies;
- Process or procedures;

- Major scope of contractors;
- Equipment;
- Regulations;
- Any other.

For changes in Documents, refer to CP 7.5 - Documented Information (Control & Structure)

1.4 Review of proposed change/s

Risks resulting from a change shall be assessed by to determine.

- If they are acceptable;
- Whether controls are adequate to reduce impact.
- Changes can result in risks and opportunities.

Controls that are developed during this process shall be communicated, implemented, and monitored.

1.5 Change Review

MR in coordination with HSE unit shall conduct a comprehensive review of proposed changes in the event of Amendments / new documents. If required, he may seek inputs from Unit Managers to complete the review.

- Approve, reject, or propose alternative actions to be taken;
- Allocate responsibility;
- Establish a deadline for completion of actions;
- Establish deadline and track progress and close amendment request once completed; and
- Ensure originator is informed either directly or via the Unit Managers.

Change Request shall be completed.

1.6 Communication and training

All affected by the change shall be informed, and where appropriate trained in the new situation.

1.7 Urgent Changes

Urgent changes (changes that require immediate action / attention) shall be addressed and implemented immediately;

2. Records

- Change Request
- Minutes of Meetings (MoM)
- Risk Assessments;

3. References

- CP 7.5 - Documented Information (Control & Structure)
- CP 6.2 - OH&S Objectives & Achievement Plan
- CP 7.4 - Communications
- CP 9.3 - Management Review

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1. Purpose

To provide instructions for the evacuation of the mall in case of an emergency.

2. Responsibilities

OH&S Unit Head must ensure that this procedure is implemented and followed;

Help Desk for initial communication and coordination;

HSE Coordinators for ensuring that the fire doors and exits are not blocked and the fire doors close properly.

3. Procedure

Emergency Controller: A representative from management available on site authorized to take decisions related to emergency at hand.

3.1 Non-Evacuation Emergency Response

3.1.1 Ministry of Health (MOH)

Inform help desk. Help desk will inform and coordinate with MOH and inform OH&S immediately.

3.1.2 Law and Order (Security)

Inform help desk/security. Help desk will inform security.

3.1.3 Technical Emergency

Emergencies such as major water leakages, water supply disruptions, power outages, gas supply disruptions or leakages etc. are termed as technical emergencies.

OH&S Unit Head must ensure that the immediate action (switching on the emergency generator or switching off the gas supply etc.) as required, is taken by the authorized personnel. The concerned ministry must be informed.

3.2 Standby Emergency

Tenant/employee must inform help desk when an incident or a symptom is observed that may escalate to an emergency situation if not controlled.

Help desk must forward the report immediately to

- OH&S Unit Head
- All unit managers and engineers
- Control room (CCTV)

Once help desk are informed, main contractor/concerned contractor must send a relevant team immediately to the site. The team will review and report the situation.

If it is not an emergency, appropriate action will be taken, help desk will be informed and standby closed out.

If it is or can become an emergency, the status will be escalated to the "Emergency" status and emergency procedure will follow.

3.3 Emergency

In case of emergencies related to either fire or chemical/gas, help desk must inform, in this sequence, the following:

- Duty Manager/OH&S Unit Head
- Cleaning unit
- Control room (CCTV)

In case of emergencies related to bomb threats, weather and public violence, help desk must inform, in this sequence, the following:

- Duty Manager/OH&S Unit Head
- Control Room (CCTV)

3.4 Evacuation Action Plan

Evacuation decision to be taken by management.

Evacuation is announced on PA system.

The assembly point 4 located at the head office is the Evacuation Head Quarter for the Emergency Response Team

3.4.1 Evacuation Announcement

Control Room will make/play pre-recorded evacuation announcement

The following message should be announced over the P.A. system.

"Ladies and gentlemen your attention please.

 Due to a technical fault, we are required to evacuate the mall for safety reasons. Please follow the directions provided by our staff to the nearest exit as quickly as possible.

Please do not run, do not use the elevator and stay calm.

Thank you for your cooperation"

3.5 Fire Evacuation

Responsibilities for executing the evacuation shall be distributed into two teams:

Team 1: For external areas

Responsibilities include the following:

- Stop the flow of public/mall visitors to the mall
- Clear the traffic at mall entrances
- Assist the rescue force (KFD and/or the police) as they start arriving

- Guide the workers/visitors/tenants to the assembly area as they start evacuating
- Keep the areas of the fire hydrants clear at all times

Team 2: For internal areas
Responsibilities include the following:

- Direct people to the closest fire exit or emergency exit
- Organize the flow of people on each people on each floor to ensure clear walkways
- Assist people with special needs (handicap, elderly and children) to evacuate
- Report the situation to the control room and the emergency controller via two-way radio
- Search the entire floor to make sure no one is left behind and all areas and stores are clear
- Evacuate the building

3.6 Bomb Threat Evacuation
Bomb Threats shall be considered credible at all times
Full evacuation for a bomb threat is a must. Bomb threats can be received in two ways.

- Telephone bomb threats
- Mail bomb threats

3.6.1 Telephone Bomb Threats
The person receiving the bomb threat shall:

- Remain calm and not panic
- If possible, notify his supervisor or his co-worker about the nature of the call without letting the caller know.
- Notify the following in order:
1. MOI
2. KFD
3. Head of security

3.6.2 Mail Bomb Threats
The person receiving the bomb threat shall:

- Remain calm not panic
- Not handle the package
- Evacuate the location of the package immediately
- Notify the following in order:
1. MOI
2. KFD
3. Head of security

3.7 Post Evacuation

After evacuation, the areas should be searched to ensure that all personnel have left and that the affected areas are clear. That in the event of casualty situations, triage is applied and that the staff are familiar with this principle.

3.8 Media Handling

Only Commercialization Department is authorized to communicate with media. No employee or contractor shall make any statement or respond to media queries.

3.9 Emergency Response Evaluation

After every emergency, the response must be evaluated on adequacy. This evaluation should be recorded on or attached to the OH&S Incident Report Form

4. Emergency planning

4.1 Purpose

To ensure that, in the event of an emergency, plans and resources are in place and that Mabanee responds to emergencies in a coordinated, prompt, and effective manner.

The objective of the emergency plan is to reduce:

- Injuries to people
- Damage to the environment
- Damage to property

4.2 Responsibilities

OH&S Unit Head shall ensure that:

- Mabanee is capable of responding to any emergency situation

- This procedure is implemented and followed

4.3 Procedure

Potential Emergency Situation

Non evacuation emergency situations are the following:

- Medical (addressed by MOH)
- Law and order (addressed by security)

Emergencies that require either partial or complete evacuation:

- Fire emergencies
- Bomb threats
- Public violence
- Inclement weather
- Gas/chemical spill
- Earthquake

4.4 Planning

OH&S Unit Head shall ensure that:

- Availability of emergency equipment/facilities
- Communication devices are effective and that instructions can be given to emergency personnel in any part of the building with minimum time loss
- Emergency lighting is serviceable and well placed

- Signposting of firefighting equipment
- The effective distribution of emergency first aid equipment throughout the mall
- All exits, evacuation routes, firefighting equipment and first aid equipment are prominently sign posted
- Determination of most effective fire escapes and evacuation routes
- To ensure that fire escapes are practical
- To ensure that evacuation routes are kept clear
- Evacuation routes (and alternatives) should be clearly marked on floor plans, prominently advertised and kept clear at all times
- To ensure that fire hazards are eliminated or kept at a minimum
- The availability and procurement of adequate emergency first aid equipment

4.5 Emergency Response Team

4.5.1 Composition and Responsibilities

Title	Responsibility
CEO/Mall Director	• Shall assume overall responsibility
Security Manager	• Carrying out an effective execution of the evacuation operation • Coordinate with management as required • Communication with external agencies – KFD, MOI etc. as required.
OH&S Unit Head	• General direction & supervision of the evacuation operation • Managing the execution of the evacuation operation • Coordinate with Unit managers, contractors, help desk and security
Helpdesk	• General support and coordination as required
Health and Safety Coordinator 1	• Ensure that doors and windows are closed when evacuating due to fire and opened when evacuating due to a bomb threat or discovery of a suspect package • Panic is kept to minimum when evacuating and that order is maintained during the process
Health and Safety Coordinator 2	• Make sure that all the emergency escape routes are clear, and the exit doors are in operation and free from obstacles
Contract Security Supervisors	• Follow instructions from head of security • Direct supervision of security staff during the evacuation operation

4.6 Assembly Areas

4.6.1 In Event of Fire

In the event of a fire in the mall that requires the site to be evacuated, all visitors, tenants and personnel not involved in the evacuation procedure should be directed to their designated assembly areas located around the buildings

Refer to "Emergency Assembly Points and Evacuation Layout" for the locations of the assembly areas.

4.6.2 In Event of Bomb Threat

In the event of a bomb threat or suspicious package necessitating an evacuation, the assembly area would differ from that of a fire evacuation. This is due to the blast area of any explosive device.

In such instances the assembly area should be located at a different location with emergency assembly area signs posted.

4.7 Training

OH&S Unit Head shall ensure that

- All personnel with emergency responsibilities are adequately trained to perform their duties and that all phases of the emergency plan are practiced regularly
- All employees, tenants and contractors are aware of the emergency and evacuation procedures and are capable of their roles, if any
- Security Supervisors shall ensure that all the security staff are trained on the emergency procedure and evacuation
- Specifically, at least the following trainings shall be ensured:
- Control of annual exercise and practice by all security guards
- All personnel on the basic use of fire equipment and in the correct method of reacting upon discovery of a fire
- All personnel on fire awareness

4.8 Emergency Evacuation Drills

OH&S Unit Head shall ensure that:

- Annual schedule of drills is prepared and executed and registered in the Training plan and records.

5. Records

- Training plan/records
- OH&S Incident Report Form

6. References

- Emergency Assembly Points and Evacuation Layout
- Mall Evacuation Plan

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First Audit: OH&S procedure revised to incorporate requirements of ISO 45001:2018	0	All	HSE	FMD	03/05/21'

1. Purpose

To verify and report compliance of the Occupational health and safety management systems with the requirements of International Standard ISO 45001:2018 and the OH&S Manual. The audits shall be systematic, independent and aim towards continual improvement. Internal Audits shall ensure that OH&S is adequate, effectively implemented and maintained.

2. Responsibility

- **MR** for planning/scheduling of internal and external audits;
- **Internal Auditors** for conducting and reporting the audit, and follow up till close out;
- **Auditees** are responsible for providing cooperation and necessary information required for audit; and providing scheduled corrective actions after audit findings.
- **OH&S Unit Head** for ensuring timely response to the findings and implementation of corrective actions.

3. Procedure

Planning

MR shall prepare an annual master schedule covering all activities. The schedule is to be approved by OH&S Unit Head.

MR shall ensure that audits are conducted according to the schedule.

4. Internal Auditor Requirements:

MR shall maintain the list of qualified internal auditors;

The Audited unit shall undergo at least one internal audit per year.

Unscheduled audits: OH&S Unit Head may initiate an audit outside the schedule.

Qualified internal auditors shall conduct the audits;

5. Audit Preparation

At least 2 weeks before a planned audit, MR shall:

- Confirm operational availability of the unit;
- Appoint audit team. Appointed auditor shall be independent of the department being audited.
- Prepare and forward the Audit Program to whom it may concern

The auditee shall make the necessary arrangements and preparation for an effective and efficient audit.

6. Conduct the Audit

The audit will include

- Interviews with persons from all levels in the department;
- A general condition tour through the units / ongoing projects etc. for verification of maintenance and upkeep;
- Review of systems, documents, and records;

The findings during the audit shall be recorded on the Corrective Action Request (CAR) by the auditor, presented to the OH&S Unit Head and agreed on.

7. Reporting

The auditors shall forward copies of the CARs to MR within 1 week of the audit.

MR shall compile all completed reports at the end of the year, generate an audit report and distribute it to OH&S Unit Head.

OH&S Unit Head provides the audit report during Management Meetings for discussion.

8. External Audits

Planning

MR shall coordinate with the external auditors and OH&S Unit to ensure:

- That all external audits are executed as planned;
- Organize the audit process;

- Notify the Unit Coordinators and forward the audit agenda to them.

9. Audit

MR shall provide guide/support the external auditors as required.

Auditees will receive the findings and shall propose corrective/preventive actions.

MR will receive the audit report from the auditors, distribute it to the OH&S Unit Head and Unit Coordinators. Unit Coordinators shall communicate the report within their unit and ensure that identified corrective actions are appropriate.

On receiving findings from the audit, auditees shall process them in the same way as internal audit findings. Unit Coordinators shall ensure that corrective actions are implemented and are effective.

Auditee shall complete the external audit reports / formats and forward the same to MR within the time frame.

MR shall

- Monitor the status of findings and follow up with the Unit Coordinators.
- Send the response to the report to the external auditors.

10. Monitoring & Review

MR will maintain record of audit plans, audits by date of completion, reporting, close out and outstanding corrective actions.

MR shall:

- Review the audit conducted as against the audit plan and take appropriate corrective action if the plan is not being achieved;
- Monitor the status of all findings to ensure the defined performance standards / time scales are being followed;

The results of the audits shall be analyzed regularly to identify trends for the purpose of continual improvement. The result of trend analysis shall be presented at annual management review meetings.

11. Maintaining of Records

MR shall maintain the following records:

- Related to internal audits:
  - Master Schedule
  - Internal Audit Program
  - Corrective Action Requests
  - Internal Audit Reports
  - Corrective and Preventive Actions Taken

  Related to external audits:
  - Audit agenda
  - Audit Reports

  Status reports on internal and external audits

The units shall maintain records of audits conducted on them, and their closed-out CARs.

12. References

- CP 10.2 B- Non-Conformance and Corrective Action

13. Records

-

Approval

The signatures below certify that this health and safety management system procedure has been reviewed and accepted and demonstrates that the signatories are aware of all the requirements contained herein and are committed to ensuring their provision.

	Position	Signature	Date
Prepared by	HSE MR		
Reviewed by	FMD MR		
Approved by	Head of HSE/ COO		

Amendment Record

This procedure is reviewed to ensure its continuing relevance to the systems and processes that it describes**. A record of contextual additions or omissions is given below:**

Brief Description	Rev.	Page	Prepared By	Reviewed By	Date
First Audit: OH&S procedure revised to incorporate requirements of ISO 45001:2018	0	All	HSE	FMD	03/05/21'

1. Purpose

To review the OH&S Manual at least annually to

- Verify the adequacy of the system;
- Improve its effectiveness; and
- Establish improvement opportunities.

2. Responsibility

MR for planning and organizing the meeting, preparing agenda, circulating the minutes / action plan of the meeting to the attendees;

OH&S Unit Head for ensuring that all the action points arising from the meeting are completed in time as required.

3. Procedure

3.1 Frequency

The management review meeting must be held:

- Annually, after the completion of Internal Audit.
- Whenever called by OH&S Unit Head.

Members
- OH&S Unit Head
- OH&S Coordinators
- MR;
- MR Team (if any)
- Others as required.

3.2 Inputs

All attendees must present their data / analysis in concise fashion with supporting documentation.

OH&S Unit Head, Unit coordinators and relevant staff must present key risks, opportunities and suggestions for review and further action.

3.3 Agenda and conduct of meeting

MR must ensure that the OH&S Management Review Agenda is finalized, approved by OH&S Unit Head, and sent to invitees one week prior to the meeting.

All the agenda items must be addressed.

3.4 Action / Analysis / Report

Recurring or major problems related to OH&S must be identified, reviewed and remedial actions agreed to.

Responsibilities for follow-up action must be assigned and datelines for implementation confirmed. MR must ensure that action points are implemented.

The effectiveness of internal audit procedures and training efforts must be reviewed, and recommendations made for improvements.

The overall effectiveness of the OH&S must be reviewed including organizational structure and distribution of responsibilities.

The report of management review meeting must be circulated along with the follow up action plan to all relevant parties.

4. Records

- OH&S Management Review Agenda
- Record / minutes of meetings
- Follow up Action Plans

5. References

-

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1. Purpose

To establish a procedure for reporting, documenting, and investigating work related incidents. This procedure aims at:

- All the incidents are reported on time
- Injured and ill health employees receive medical treatment on time
- All incidents are investigated and root causes are identified
- Corrective actions effectively implemented and incident reports are closed without unjustified delays

2. Responsibilities

OH&S Unit Head shall ensure that:

- All injuries, events or any sort of OH&S incident shall be reported.
- All incidents are investigated and root cause is identified
- All procedure requirements are implemented

Security Manager shall ensure that:

- If required, emergency response procedure is followed.
- If required, coordinate with OH&S Unit Head during incident investigation and close out
- If required, incident area is isolated

OH&S Coordinator shall ensure that:

- Incidents are reported and maintained
- Sequence of immediate response is followed
- Formal incident investigation is conducted
- Incidents are closed out and recommendations to avoid recurrence are provided

3. Procedure

3.1 Incident Scene preservation

- All injuries, major injuries, major events or any sort of OH&S incident shall be reported by any person to the OH&S coordinator on duty as soon as practicable after becoming aware of its occurrence

- Emergency response procedure shall be followed in responding to the emergency cases

- Sequence of immediate response actions:
  1. Protect your health and safety
  2. Protect the health and safety of others
  3. If necessary, provide aid to any injured person(s) involved in the incident
  4. If necessary, call for first aider
  5. If necessary, call emergency services
  6. If applicable, call company security to coordinate access for emergency services in the area
  7. If applicable, take essential action to make the site safe or to prevent another incident from occurring

3.2 Incident Investigation & Documentation

- When an incident has been reported, an investigation shall be carried out.

- All events leading up to the incident shall be reviewed. The investigation shall:
  1. Identify causes or contributing factors such as design, environment, behavioral or management factors
  2. Identify problem areas or particular hazards
  3. Identify root cause of the incident/accident
  4. Recommend corrective/preventive action
  5. Provide information that can be used to formulate preventive actions
  6. Provide information that can be used to analyze the need for training programs.

- OH&S coordinator & OH&S unit head shall complete an incident report form for any incident, injuries, or illnesses that occurred.

- All investigations shall be documented, where "Incident Register Log" shall be maintained by OH&S coordinator. Identified corrective actions and opportunities for preventive actions shall be documented and assessed prior to implementation

3.3 Incident/Accident Investigation Process

- OH&S coordinator along with OH&S unit head shall ensure formal incident investigation is completed for OH&S incidents and near misses.

- The formal investigation shall identify and include causes of the incident. Causes may be, but not limited to, the following:
  1. Behavioral causes (substandard practices) that led to the incident occurring
  2. Management systems (procedural) deficiencies that led to the behavioral causes (substandard practices)

3. Physical causes (substandard conditions) that led to the incident occurring
4. Management systems (procedural) deficiencies that led to the physical causes (substandard conditions)

- An immediate inspection of the site/scene should be conducted.
- Establishment of the events leading up to incident. This may be, but not limited to, the following:
  1. What was the system of work being carried out?
  2. What were the instructions given for the work?
  3. Were there any variations from instructions?
  4. What were the workplace conditions such as lighting floor surface, stair treads, warning signs, weather conditions etc.
  5. What was the exact location of the incident?
  6. What materials were used or handled?
  7. What type of transport of equipment was used?
- Establishment of facts of the incident/accident. This may be, but not limited to, the following:
  1. The state of the systems and the actions that occurred at the moment of the incident
  2. Who were directly involved and who was involved from a distance?
  3. What tools, equipment, material was directly concerned?
  4. Date and time of the incident
- Relevant facts of what occurred immediately after the incident. This may be, but not limited to, the following:
  1. The events leading consequential injury or damage, if applicable
  2. The involved personnel, including those rendering first aid
  3. Any problems in dealing with the injuries or damages
- Recommendations to avoid recurrence. Recommendations should identify corrective actions for as many of the listed causes as possible. Such recommendations may relate to:
  1. Eliminating the causes
  2. Minimizing possible consequences
  3. Improving rescue or damage containment measures

3.4 Assessment of OH&S Performance

- OH&S Incidents and investigations conducted are assessed by OH&S Unit Head and are used to set objectives, targets and programs for continual improvement of the OH&S management system.

3.5 Near Misses

- All Near Misses shall be reported and documented using the Incident Report form. Records shall be preserved and maintained.

4. Records

- Incident Report
- Investigation Report
- Minutes of Meeting (MoM)
- Incident Register Log

5. References

-

Approval

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First Audit: OH&S procedure revised to incorporate requirements of ISO 45001:2018	0	All	HSE	FMD	03/05/21'

1. Purpose

To establish a procedure for describing the methods used for controlling nonconforming products or services that do not conform to specific Occupational Health and Safety Requirements

2. Responsibilities

OH&S Unit Head must ensure that:

- All non-conformities are reported by OH&S Coordinators
- All non-conformities' corrective actions are implemented
- Non-conformities are reported to the relevant department/personnel

OH&S Coordinator must ensure that:

- Non-conformities are registered
- Immediate action is taken for non-conformities
- Recommended corrective actions are proposed
- Corrective actions are implemented

2.1 Procedure

2.2 Non-Conformance

Different types of non-conformities require immediate attention and corrective action. OH&S Non-conformities may be, but not limited to, the following:

- Any material which does not meet the required specifications
- SLAs not complied
- Corrective maintenance delays due to manpower or spare part issues
- Failure of equipment
- Security issues
- Any incomplete documentation
- Failure of inspection & follow ups as per defined frequency
- Failure of integration of services
- Complaints/observation/non-conformance not addressed adequately
- Items left in back corridors
- Fire incidents/accidents

- Smoking in undesignated areas
- Major injuries, incidents and accidents
- Property/equipment damage
- Death, fracture accident
- Missing out regular OH&S inspection
- Missing out mock drills

Non-conformities are registered through CMMS.

2.3 Non-Conformances and Corrective Actions Taken

The following controls and actions are taken when reporting and correcting non-conformities:

- Define and implement corrective actions to control and correct consequences until a permanent corrective action is implemented
- Root cause is investigated of the actual/potential causes of non-conformities and may be through verification of product/process/activity and relevant records/complaints/OH&S incidents.
- Determine and implement corrective action including target date(s) as well as personnel responsible in consultation with relevant department
- Prepare Violation report through CMMS and send description to the relevant department
- Verify the effectiveness of the corrective action taken and, if required, take steps for changes in relevant process related documents.
- Maintain a register of all non-conformities through CMMS.
- Update the risks and opportunities determined during planning, if necessary.

3. Records

- CMMS Records
- Risks and Opportunities Register

4. References