



HEALTH AND SAFETY POLICY

P&R INFRAPROJECTS LTD.,
QUIET OFFICE NO. 7, 1ST & 2ND FLOOR,
SECTOR 35-A, CHANDIGARH

Is committed to the protection of:
Employees,
Property,
and other people
from accidental injury or
damage from work carried out by and
on behalf of the company
and adopts
Health, Safety and Welfare
as a fundamental business objective.

***“SAFE ENVIRONMENT MEANS ENHANCED MORALE
&
IMPROVED PRODUCTIVITY”***

INDEX

1. General Regulations and Safety Rules
2. P-Personal Protective Equipment
3. H-Housekeeping
4. O-Orientation-Position
5. T-tools, Equipment & Plant
6. O-Operating Procedures
7. Face Drilling
8. Dangerous Liquids
9. Ladders
10. Care Of The Hands
11. Manual Handling
12. Gas Welding
13. Supervisors
14. Abrasive Wheels
15. Eye Protection
16. Working Dress
17. Compressed Gas Cylinders
18. Cartridge Hammers or Rivet Guns
19. Supervision
20. Annexures
 - Significant Site Hazard Sheet
 - Accident/Incident Register
 - Accident/Incident Report
 - Health and Safety Induction Register
 - Site Safety Induction Checklist
 - Site Specific Safety Plan

General Regulations and Safety Rules

Fire Risk and Fire – Fighting Equipment

1. You must always inform the person(s) responsible for coordination and fire prevention if you intend to use inflammable goods.
2. It is imperative that evacuation routes are kept open.
3. Make sure that you know where fire extinguishers are placed.
4. When not in use, gas and LP gas cylinders must be collected and placed in specially designated areas marked by warning signs.

General Regulations and Safety Rules

Sub-Joint Contractors

1. Sub-joint contractors must make sure that their own personnel are informed about the above rules.
2. Each contractor must provide safety equipment for his own personnel.
3. Each contractor is responsible for the regular inspection and maintenance of his own equipment.
4. Staggering and /or working –in and out of working hours is not allowed without special agreement with the responsible coordinator.

General Regulations and Safety Rules

Compulsory Inspection of Machines

1. Excavators, cranes, lifting devices, elevators and similar equipment must in inspected at regular intervals.
2. Equipment without an up-to-m date inspection certificate may not be used at the worksite.
3. Inspection certificates shall be shown to the responsible coordinator before commencement of any work.
4. In cases where a driving or operating license is required, this must also be shown.
5. Failure to do so, or carelessness, may be penalized in accordance with the Work Environment Act, AML, and chapter 8-2.

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PERSONAL PROTECTIVE EQUIPMENT

1. Provides a barrier from injuries.
2. Reflects state of mind and attitude of person. Wearing or not wearing or using.
3. Eyes
Ears
Head
Nose and mouth
Extremities
Body in general
List is endless
4. If items of personal protective equipment are advocated by the company they must be worn without question. This is a behavior issue.
5. Injuries to watch for
 - A. Head injuries from falling objects
 - B. Eye injuries
 - C. Deafness
 - D. Dust in lungs
 - E. Hand injuries
 - F. Foot injuries
 - G. Inhaling or absorbed through skin

HOUSEKEEPING

1. Don't leave rubbish lying about.
2. Keep all gangways, aisles and stairways clear.
3. Wipe up spilt oil, grease and liquids.
4. Clear up turnings, chips or off-cuts.
5. Use metal containers for oily or greasy rags and waste.
6. Stack goods and materials clear of gangways.
7. Stow your tools safely when not in use.
8. Keep benches and worktops uncluttered.
9. Ensure that access to the fire extinguishers is not obstructed.
10. Keep all fire doors and exits clear of obstructions.
11. Don't accumulate scrap or waste.
12. Don't leave loose tools on running machines.

A CLEAN WORKPLACE MEANS FEWER ACCIDENTS.

ORIENTATION – POSITION

1. Where a person is standing at any one time.
2. How a person physically performs his work (lifting, etc)

3. Leaving his job orientation
(Other than where he should be).
4. Injuries to watch for
 - A. Striking against things or being struck.
 - B. Being caught on, in or between.
 - C. Fall at same, or to a different level.
 - D. Temperature extremes.
Long term-hot or cold.
 - E. Contacting electric current.
 - F. Inhaling or absorbing through skin.
 - G. Swallowing harmful materials.
 - H. Over- exerting whilst lifting, pulling, pushing or reaching (back problems).

TOOLS, EQUIPMENT AND PLANT

1. Only use tools, equipment or plant if you are authorized to do so.
2. Right tool for the job.
3. Use it correctly.
4. Do not use tools, equipment or plant that is in an unsafe condition.
5. Observe people using tools, plant and equipment on a regular basis.
6. Most people who are injured received their injuries from tool, equipment or plant.
(Motor Vehicle)

OPERATING PROCEDURES

1. Employers to involve employees in development of health and safety procedures.
2. Are the procedures adequate for the job?
3. Are the procedures established and known by the workers?
4. Maker's manuals must be followed.
5. The law must be upheld.
6. Are the procedures being re-evaluated and modified to suit changing conditions?
7. Road code.
8. When devising procedures, always consider P.H.O.T.O.

DRILLING

1. Only authorized people are to operate the Drilling machine.
2. Never drill in butt holes or sockets.
3. Follow the designated drill pattern.
4. Keep well clear of moving boom.
5. Stand well clear of face during collaring and drilling avoid falling rocks.
6. Change bits regularly and in a safe place.
7. Make sure all hand tools, hammer, and drift chisels, etc. is in good condition.
8. Don't turn on power until the Jumbo is in position at the face of drilling point.
9. Drive with extreme care at all times.
10. Keep operating area clear of rubbish.
11. Always ensure that a fire extinguisher is available at all times on the machine.
12. Report all defects to the supervisor.

DANGEROUS LIQUIDS

1. Don'ts touch - liquid may be HOT
2. Don'ts touch - liquid may be ACID.
3. Don't touch - liquid may be CORROSIVE.
4. If you get burnt or splashed, flush copiously with cold water AT ONCE.
5. Don't smoke near it - liquid may be FLAMMABLE.
6. Don't smell it - vapor may be POISONOUS or TOXIC.
7. Don't drink it - liquid may be POISON.
8. Always replace the stopper, cork or bung.
9. Wash spills and splashes away with running water.
10. Never add water to acid; always add ACID TO WATER.
11. Be especially careful with bottles which have LABELS MISSING.
12. Treat all liquids as DANGEROUS until you know they are safe.

IF YOU DON'T KNOW-LEAVE LIQUIDS ALONE.

LADDERS

1. Use clear varnish to protect a ladder; paint may cover a defect.
2. Never use an unsound or damaged ladder.
3. Be sure the ladder is set on a firm level base.
4. Have a man at the foot or lash the top.
5. Make certain the ladder reaches at 3 ft. 6 in. (1.070m) above landing platform.
6. The correct pitch of a ladder is 1 foot (300 mm) out at the base for every 4 feet (1.210 m) vertical height = 1 to 4.
7. Use the right length ladder for the job. Never lash two short ladders to make a longer one.
8. Do not carry loads on ladders –use a hoist line.
9. Do not lean sideways from al ladder –it’s safer to move the ladder.
10. Face the ladder when climbing or descending.
11. Beware of wet, greasy or icy rungs.
12. Inspect ladde4rs before use and regularly when stored.

ON BUILDING SITES, BURY FOOT OF LADDER IF GROUND IS UNEVEN.

CARE OF THE HANDS

1. The most important factor is personal cleanliness.
2. Barrier cream appropriate to the exposure should be used if gloves cannot be worn.
3. Gloves should be worn for handling rough or sharp material. But not on drilling machines.
4. Cuts or punctures can turn septic-get first-aid at once.
5. Change soiled dressings on wounds.
6. Rings on fingers can be dangerous.
7. Use safeguards installed or provided.
8. Do not use solvents to remove oil or material from the hands.
9. Wash before eating-there may be harmful chemicals on your jhadns or harmful bacteria.
10. Do not use a pumice stone or abrasives for cleaning hands.
11. At the end of the day or shift, wash hands with warm water and soap or cleaning cream-dry well -(Swafiga0
12. Always wash hands after going to the toilet.

MANUAL HANDLING

1. Where possible, gloves should be worn to protect against cuts, scratches or punctures.
2. Wear safety boots or shoes to protect toes from falling loads.
3. Size up the load and, if necessary, make a trial lift of a few inches.
4. Do not attempt to lift alone any load that is too heavy, too large or awkward.
5. Take up position, feet hip breadth apart, one foot slightly advanced pointing in direction it is intended to move.
6. Bend the knees; back muscles should be relaxed.
7. Get a secure grip of the load.
8. Lift, keeping the back straight, arms close to body, leg muscles taking the strain.
9. Step off in direction advanced foot is pointing, load held close to body.
10. See that there are no obstructions in the direction you will be going.
11. Do not carry a load which obscures the vision.
12. When lifting to a height from the floor do it in two stages.

GAS WELDING

1. Oil or grease must not contact oxygen fittings.
2. Use goggles, face shield or helmet with dark lenses.
3. Open cylinder valve slowly. Close valve when not in use.
4. When welding near flammable materials, beware of flying sparks and hot slag. Keep fire extinguishing equipment available and check area before leaving.
5. Do not use gas cylinders as work supports.
6. Do not leave torch in enclosed vessels when not in use.
7. Do not weld material de-greased with solvents unless it is absolutely dry.
8. Do not attempt to weld enclosed vessels or tanks until safety precautions have been taken.
9. Do not allow any source of heat to reach cylinders.
10. Do not weld galvanized or coated metals without taking proper precautions against fumes.
11. Use screens to protect other personnel-glare can cause eye injury up to 30 meters distance.
12. Keep hose lines clear of traffic lanes.
13. Always stand cylinder upright.

ALWAYS PROTECT YOUR EYES.

ABRASIVE WHEELS

1. Wear goggles when using an abrasive wheel.
2. Adjust the guard to expose the minimum wheel surface necessary for the operation.
3. The speed of the machine must not exceed the maximum permissible speed of the wheel.
4. Adjust the tool rest as close as possible to the face of the wheel.
5. Keep your fingers below the tool rest level.
6. Take care work does not slip off the rest.
7. Never use the side of the wheel unless it is designed for it.
8. Use the correct grade of wheel for the work in hand.
9. Keep the face of the wheel evenly dressed.
10. Do not exert heavy pressure on the wheel.
11. Run a replacement wheel for a full minute before using. Make sure everyone is standing clear during the test.
12. Stop the wheel when not in use.

PROTECT YOUR EYES FROM FLYING FRAGMENTS.

EYE PROTECTION

1. A tiny fragment in your eye can cause disaster.
2. Trained first-aid for attention to eyes-not a dirty handkerchief.
3. You have al legal obligation to wear or use the eye protection provided in accordance with regulations.
4. Even if you are not carrying out one of the specified processed you may be at risk, so wear or sue the eye protection provided.
5. Do not watch welding processes unless your eyes are properly protected.
6. Do not go into areas where eye protection is required unless you are wearing protective equipment.
7. Take care of any protective equipment issued to you.
8. Have any damaged, lost or unserviceable protective equipment replaced immediately.
9. Make sure your eye protectors are suitable for you and for the work being done.
10. Ensure the eye protectors are comfortable to wars and keep them clean.
11. The place for eye protectors is over your eyes-not on your head or round the neck.
12. Remember-eye protectors are replaceable; your eyes are not.

A SENSIBLE WORKER VALUES HIS SIGHT.

G R O U P

WORKING DRESS

1. Wear the right clothing for the job.
2. Always keep clothes clean. Dirty clothes can offer a fire or dermatitis risk.
3. Loose ends of sleeves or scarves can become entangled.
4. Long hair can get caught and result in scalping.
5. If protective equipment is provided, wear it.
6. Finger rings or bracelets are dangerous near moving machinery.
7. A safety helmet will protect your head-and perhaps save your life.
8. Safety shoes save toes.
9. Danger can strike upwards. Be sure your boots or shoes have strong soles.
10. Remove contaminated clothing immediately, and WASH.
11. Remember, cotton burns easier than wool.
12. It is worth dressing properly, even for a short job.
13. A hard hat must be worn underground.
14. Ear protection must be worn where noise level is over 80 Db.
15. Always have dust mask available.

PROPER CLOTHING MEANS SAFER WORKING.

COMPRESSED GAS CYLINDERS

1. Treat every cylinder as ‘full” and handle carefully.
2. Always use a carrier and secure the cylinder to it.
3. Always secure acetylene cylinders in an upright position both in use & in storage.
4. Store ALL cylinders so that they cannot fall or roll.
5. Keep them away from sun artificial heat, flammable materials, corrosive chemicals and fumes.
6. Avoid damage to valves and fittings. Do not use them for lifting or carrying.
7. Do not use cylinders as rollers for moving equipment.
8. Keep valve4s and fittings of oxygen cylinders free from oil and grease.
9. Open cylinder valves slowly and close sufficiently to shut off gas-never use force.
10. Always lift cylinder from trucks-do not drop or slide them.
11. Keep hose line4s clear of traffic lanes.
12. In case of fire keep cylinders cool with water spray.

REPORT ANY DAMAGE OR DEFECTS IMMEDIATELY.

CARTRIDGE HAMMERS or RIVET GUNS

1. Read makers' instructions carefully before using gun.
2. Before handling gun, make sure it is NOT LOADED.
3. Load gun with barrel pointing in safe position-away from you and other persons.
4. Never place your hand over the end of the barrel.
5. Never walk around with a loaded gun-load at site.
6. Check material into which bolt is to be fired.
7. Allow at least 3 in. (76mm) from edges of concrete or brickwork.
8. Hold gun at right angles to the job when firing.
9. Wear goggles when using the gun.
10. In the event of a misfire, wait a minute before unloading.
11. Keep the gun clean and well oiled.
12. Never leave gun loaded when not in use.
13. Always use ear protection.

TREAT CARTRIDGE HAMMERS WITH RESPECT – ALWAYS.

SUPERVISION

1. Give extra care to young persons.
2. Stop all running & skylarking.
3. Stop the use of boxes in place of step ladders.
4. Stop the carrying of objects while climbing.
5. Insist on the use of handrails on stairs.
6. Stop the wearing of unsafe clothing and footwear.
7. See that goods are stacked safely and clear of gangways.
8. See that all guards are in place on the machines.
9. Watch for wet, oily, slippery or damaged floors.
10. Report all unsafe conditions in your area.
11. Send all minor injuries to first-aid room.
12. Give careful instructions and make certain they are under-stood.
13. Make sure all procedures are carried out.

THE GOOD SUPERVISOR PROTECTS HIS TEAM FROM ACCIDENTS.

G R O U P

SIGNIFICANT SITE HAZARD SHEET

**Company: P&R Infraprojects Ltd.,
Chandigarh**

**Site.....
.....**

Date identified	Hazard		Method of control	Method to control or prevent the hazard from occurring	Person(s) Responsible
	Potential Source / Cause of Harm	Description			

Key: E=Eliminate I=Isolate M=Minimize (Assess the requirement to monitor the effects of the hazard and record



ACCIDENT/ INCIDENT REPORT

WORK PLACE/SITE..... JOB NO. REPORT NO.

REPORTED BY: DATE:../../... TIME OF

INCIDENT:

TYPE OF INCIDENT:

LOST TIME:

A: Serious Harm Injury
Days/Hrs

B¹: Harm Accident (Off site medical treatment and rehabilitation/ rest for not severe or permanent injury but involving lost time.....
Days/Hrs

B2: Minor Harm Accident (Onsite First Aid treatment with no lost time)

C: Potential Incident (any event/observation that could have caused/resulted in injury or property damage)

NAME OF PERSON injured/involved in incident	NAME OF INCHARGE
POSITION	TRADE

Name and Address of Witness (if any).....

Statement Attached Yes No

Location of accident/ near miss

& Weather Conditions:

Photo attached: Yes No

WHAT HAPPENED (Record all facts prior to and including accident/incident. Include conditions of work area. Use separate page if necessary)

EFFECT OF ACCIDENT:

- Fatal
- Amputation
- Burns
- Poisoning/Toxic effect
- Multiple Injury
- Internal injury
- Fracture of spine
- Other fractures
- Hearing Loss
- Head Injury
- Dislocations
- Puncture Wound
- Bruising or crushing
- Sprain or strain
- Open Wound
- Laceration Cut
- Foreign Body
- Superficial (scratch/abrasion)
- Gradual Process Injury
- Other (specify)

Treatment of Injury: Nil On Site First Aid Only Doctor Hospitalized
Name of Treatment Provider.....

Description of Injury:
.....
.....

Property Damage:



Mechanism of Accident <input type="checkbox"/> Fall trip or slip <input type="checkbox"/> Hitting objects with part of body <input type="checkbox"/> Being hit by moving objects <input type="checkbox"/> Body stressing <input type="checkbox"/> Heat, radiation or energy <input type="checkbox"/> Chemicals or other substances <input type="checkbox"/> Sound or pressure <input type="checkbox"/> Other (specify)	Agency of Accident <input type="checkbox"/> Access to workplace <input type="checkbox"/> Powered equipment, tools, appliance <input type="checkbox"/> Non powered hand tools/equipment <input type="checkbox"/> Mobile plant or transport <input type="checkbox"/> Machinery or fixed plant <input type="checkbox"/> Environmental (dust, rain, wind) <input type="checkbox"/> Material or substances <input type="checkbox"/> Other (specify)
What was the cause of the Accident? (Note any contributing factors)	Major Contributing Factor <input type="checkbox"/> Housekeeping <input type="checkbox"/> Scaffolding Platform <input type="checkbox"/> Excavation <input type="checkbox"/> Electrical <input type="checkbox"/> Incorrect use of tools <input type="checkbox"/> Incorrect use of Tools <input type="checkbox"/> Incorrect work method

Was the injured person trained in the task/activity being carried out at the time? Yes No

Was there a plant or equipment failure? ----- Yes No

How long has the injured person, or the person(s) involved in the near miss, been employed for?
 How bad could it have been? Serious Minor

What are the chances of this happening again? Likely/Often Unlikely

Was the appropriate means to control identified on the hazard sheet? Yes No (*if no, amend hazard sheet*)

PREVENTIVE ACTION: Describe controls/methods to minimize risk of recurrence	Major Contributing Factor <input type="checkbox"/> Re-train Personnel <input type="checkbox"/> Improve Hazard ID <input type="checkbox"/> Improve Hazard Control <input type="checkbox"/> Improve Task Analysis <input type="checkbox"/> Discuss in Tool Box Talks <input type="checkbox"/> Increase Supervision
---	---

ACTION TO BE COMPLETED BY: Name:

Employer:

By Date:/...../.....

CLOSE OUT: Agreed actions have been completed and this situation is now satisfactory.

Signed:/...../.....



SITE SAFETY INDUCTION CHECKLIST

To be used for all staff on their commencement at a new site/ work

EMPLOYEE NAME: COMPANY:

INDUCTION NO: INDUCTED BY:

POSITION: SITE SAFE PP/GC NO:

SITE: DATE:/...../.....

Item	Description	when completed
1.0	Health & Safety Policy and Site Safety Plan: Show location of Health & Safety Policy and Site Safety Plan and familiarize employee with contents and duties.	<input type="checkbox"/>
2.0	Emergency Procedure: Show and discuss emergency procedures.	<input type="checkbox"/>
3.0	Site Hazards: Discuss site hazards from the Significant Hazard Sheets Identify any hazards that the employee may create or be exposed to and how to control these. Confirm process for notification of new hazards introduced.	<input type="checkbox"/>
4.0	Safety Equipment: Advise employee of location of First Aid Kit and trained First Aid Givers Advise employee of location of Fire Extinguishers, fire call points, fire hose reels, etc.	<input type="checkbox"/>
5.0	Accident Reporting & investigation: Discuss the responsibility and importance of reporting all accidents or near misses. Advise location of Accident Register and Reporting forms	<input type="checkbox"/>
6.0	Safety Information: Confirm locations of other information appropriate to their position, e.g. OSH Guidelines, Codes of Practice and Material Safety Data Sheet (MSDS).	<input type="checkbox"/>
7.0	Safety Training: Confirm that the employee is adequately trained in the safe use of all plant, equipment and personal protective equipment that they will be required to use during their time on site. Note: Main zeal Safety Training 1 video (Construction Safety Essentials and Office Safety) is available from the Area Quality Coordinator.	<input type="checkbox"/>
8.0	Site Amenities: Show location of toilets, wash areas, smoke sheds.	<input type="checkbox"/>
9.0	Personal Protective Equipment (PPE): The following PPE is required on this site (tick). <input type="checkbox"/> Safety Hat <input type="checkbox"/> Safety Earmuffs Grade: <input type="checkbox"/> Safety Footwear <input type="checkbox"/> Safety Goggles... <input type="checkbox"/> Other (as identified on hazard sheets).....	<input type="checkbox"/>
10.0	Ask the employees to identify any conditions that they are aware of that would affect their ability to perform their duties where there is a risk of harming themselves or others (record actions to manage and agree the method of maintaining confidentiality of this information).	<input type="checkbox"/>
11.0	Other site induction requirements: (list as appropriate, e.g. Videos, clients briefing etc.)	

I acknowledge that I have been inducted in Health & Safety on this Site as outlined above, and I am aware of my responsibilities

SITE SPECIFIC SAFETY PLAN



To be completed and handed to the Main Contractor's Site Supervisor prior to commencement of work on site.

To:
(Contractor) (Project)

From:
(Subcontractor) (Date)

Subcontract Works:

Site Safety Representative:

Our nominated Safety Representative for this project.....

Hazard Management:

- Listing of hazards associated with our subcontract works and the methods to control such hazards, is attached.
- Hazardous products are associated with our subcontract works and the applicable Material Safety Data Sheets are attached.

Communicating:

Means of communicating safety information to employees (e.g. Toolbox/pre task planning meetings, notice board, etc.).....

Emergencies:

Our first aid kit is located:

The site emergency signal is:

In the event of an evacuation our staff report to:

Accident Reporting: (All reports will be copied to the Contractor)

Our accident register is located:

Safety Inspections and Safety Reviews:

Frequency of inspections is:

Frequency of reviews is:

Training/Induction:

All employees are holders of Site Safe passports, • Yes, • No, if no, provide proof that employees have been booked on the Passport course:

All employees are trained to carry out works safely, • Yes, • No, if no, explain responsibilities for supervision:
.....

Other:
.....
.....

Approved: **Date:**

.....
(Company Safety Representative)