alpcatering
it all begins with a smile

HSE PLAN | POLICY | PERFORMANCE

TABLE OF CONTENT

ORGANIZATION, RESPONSIBILITES, RESOURCES, STANDARD AND DOCUMENTATION

HAZARDS AND EFFECTS MANAGEMENT ASSESSMENT OF PPE

Alp Catering is a renowned catering company with huge experience. We have shown high standards both in Safety, hygiene and qualitative catering and housekeeping for a period of time and will continually sustain the standards with great emphasis on HSE policy and implementations.

Alp Catering will carry out all activities to ensure that the health, safety, environment and security of life and properties of our staff, company and other parties that may be involved are not jeopardized. To achieve the above target, the HSE plan will strive to promote a higher level of responsiveness in all areas covered in the HSE policy. That, is all efforts will be directed to having practical safety side-by-side safety in the heart show-me strictly adhering to safety rules and regulations. We will embark on serious campaign of safety and hygiene awareness among our staff and fully involve them in all HSE matters.

We will give catering hygiene very serious emphasis. We will put in place measures through the chain of buying transporting, storage and processing to check practices that could lead to food poising. In addition, we will give adequate attention to inspections, audit through supervisors to avoid unwholesome practices. Take HSE management element like job Hazard Analysis, Journey Management, Hazard and effects Management procedures and environmental Impact Assessment including the use of hazard registers will attract management attention.

We think that all parties involved in our operation will carry out their duties in accordance with this HSE policy and must discontinue any activity found to be unsafe, unhealthy, insecure or has the possibility of causing harm, community disturbances or environmentally unfriendly.

HUDAYNAZAR ATAGELDIYEV
General Director

1.1 DEFINITION, OBJECTIVES AND SCOPE OF HSE MANAGEMENT SYSTEM

DEFINITION:

A management system is "The structured framework of controls from management level to task level i.e. from director level down to the cooks, helpers and the lowest rank in **Alp Catering** which ensures that all activities are carried out in accordance with specified requirement, which creates room for continuous improvement of importance.

OBJECTIVES:

Alp Catering HSE management system (HSE-MS) is to ensure that HSE risks in the operation are handled within a set of controls.

The Catering HSE-MS is poised to make sure that:

- The HSE-MS elements (policies, Objectives, Organizational Structure, Responsibilities, Standards, Processes, Procedures, Controls and Resources are defined and arranged to manage catering activities.

- Processes and methods are in existence to carefully identify, access and control HSE risks to agreed performance standards and to recover HSE incidents whenever they occur.

- Performance standards are defined as part of program of performance monitoring, audit and reviewing in support of continuous improvement.

SCOPE:

HSE-MS plan applies to all catering activities throughout all regions where **Alp Catering** operates.

OBJECTIVES OF CATERING HSE-MS PLAN THIS HSE-MS DOCUMENT

1) Define process and procedure in place used to identify access and control risks to agreed standards.
2) Identifies the controls that exist while managing catering activities.
3) Defines the standard of performance that are maintained through scheduled monitoring audit and review.
4) Ensure that environmental policies are continuously improved and conform to legislations.
5) Ensures that all risk identified are, "As Low as Reasonable Practicable (ALARP)".

This HSE-MS Plan:

a) Explain the elements in the HSE-MS and their interactions.
b) Describes how it links with other aspect of the overall management system.

The HSE-MS plan comprises 5 parts as shown below:

PART 1	PART 2	PART 3	PART 4	PART 5
Management System Elements	Catering Activities	Ref: Documents and Standards	Remedial Action plan	Catering Hazard Register

2.1 ALP PROJECT SPEECIFIC HSE-MS PLAN

Alp Catering is into the provision of Catering and Housekeeping Services. In carrying out the above services, there are associated potential hazards. These include but not limited to steam, naked flames, Hot Fluids, Transport, Slip/trip, use of sharp tolls (knives, sharp edge tools), Heat and Electricity.

The hazards will be reduced by employment of qualified workers, regular training of staff, provision of appropriate Personnel Protection Equipment (PPE), adequate close supervision, regular inspections, audit, preparing and following food work procedure, carrying out food handlers medical examination, and embarking on good housekeeping.

2.2 LEADERDHIP AND COMMITMENT

The success implementation of visible management commitment to any HSE-MS policy cannot be over-emphasized.

The management of Alp Catering is highly committed to HSE-matters. This is shown by his desires to provide all resources that will enhance HSE standard and participation in HSE meeting, audits and inspections.

2.3 POLICY AND STRATEGIC OBJECTIVE, HEALTH, SAFETY AND ENVIRONMENTAL POLICY

Alp Catering plans to carry out all activities in such a way that:

- The health, safety and security of employees, others and properties that may be affected ensured
- Adequate recognition is given to host communities.
- The environment is adequately protected and conserved.

Every employee of **Alp Catering** and suppliers are expected to carry out their duties in compliance with this HSE policy and any activity found to be unhealthy, unsafe, insecure or environmentally unfriendly or possibly cause community disturbance must be stopped and reported immediately to relevant authority.

HUDAYNAZAR ATAGELDIYEV
General Director

COMMITEMENT TO HEALTH, SAFETY AND ENVIRONMENTAL POLICY

As **Alp Catering** company, we are engaged in public catering and restaurant business.

Observing the ISO 22000:2005 international standard, we strive for making safe products according to requirements of our clients and legislation.

We constantly keep in contact with suppliers, customers, clients, as well as the staff of our company.

We train the employees and suppliers at all levels of the organization to realize our principles in the field of safety of foodstuff.

We aim for providing steadily high rates of quality and food safety with a way of maintenance of effective management in the field of food safety.

We continuously improve our system of management of safety of foodstuff to achieve a great success.

As a General Director, I am committed to Policy in the field of safety of foodstuff, which was approved by Board of directors of our company. Responsibility for successful realization of policy in the field of safety of foodstuff is conferred on every single employee at all levels and in all departments of **Alp Catering**.

HUDAYNAZAR ATAGELDIYEV
General Director

DRUGS AND ALCOHOL POLICY

Alp Catering recognized the fact that the abuse of drugs and alcohol can be injurious to people and reduce performance level at work. The management of **Alp Catering** shall therefore ensure that all employees recognize this fact and aims to drastically reduce associated risks.

Alp Catering recognize alcohol or drug dependence as a condition that can be treated as such:

a) Alp encourages employees who depend on alcohol or drugs to seek medical advice to follow treatment.
b) Depending on the condition, Alp shall assist such employee to obtain treatment.
c) Employees who seek treatment assistance from the Company will not jeopardize their employment.
d) In case of any illness, normally Company benefits will be available.

The Policy Strictly Prohibits

* The consumption of alcohol or drugs by any employee while at work
* The possession, use, distribution or sales of alcohol or illegal drugs on company business or work area.

Alp Catering May

* Take summary dismissal action against any employee who due to illegal drugs or alcohol use are unable to work except where such employees are undergoing medical assistance.
* Test for abuse of drugs and alcohol employment and at any other time when the need arises.
* Carry out unannounced search for drugs and alcohol at work locations.
* Carry out periodic or random testing on employees at their consent.

If on a first time, a test result is positive; the employee will be allowed to continue working provided the employee is ready to comply with appropriate rehabilitation procedures that may be put in place. If thereafter a test is positive, disciplinary action will be taken which is at Alp discretion.
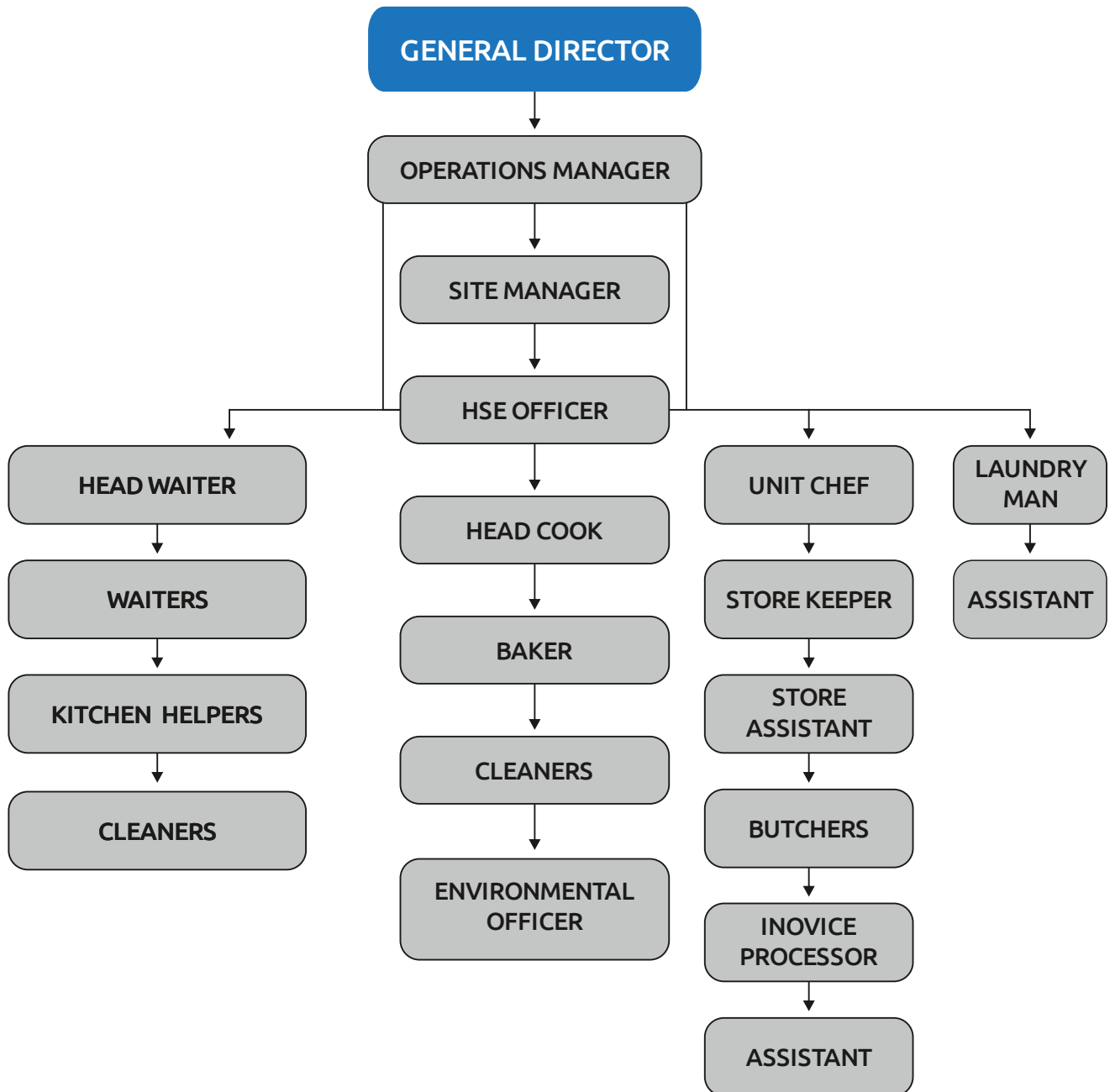
It is Alp Catering's policy that:

* The smoking of cigarettes, cigars or pipe is prohibited in all Alp working locations and other designated no-smoking areas, which includes but not limited offices, public areas, and company or client's restaurant.
* Where there is deviation from clients' policy, Alp will comply strictly to clients' alcohol and drug policy.

All **Alp Catering**'s contractor and sub-contractor area expected to comply with this policy.

HUDAYNAZAR ATAGELDIYEV
General Director

ORGANIZATIONAL, RESPONSIBILITIES RESOURCES, STANDARDS AND DOCUMENTATION

GENERAL DIRECTOR

OPERATIONS MANAGER

SITE MANAGER

HSE OFFICER

HEAD WAITER

WAITERS

KITCHEN HELPERS

CLEANERS

HEAD COOK

BAKER

CLEANERS

ENVIRONMENTAL OFFICER

UNIT CHEF

STORE KEEPER

STORE ASSISTANT

BUTCHERS

INOVICE PROCESSOR

ASSISTANT

LAUNDRY MAN

ASSISTANT

SITE MANAGER:

Directs the execution of all activities on site. The site manager or camp boss or supervisor performs the function below:

- Liaises with the HSE officer in preparing the company HSE plan.
- In collaboration with the HSE officer, he defines competencies required for HSE critical positions.
- He assigns appropriate worker to these positions
- Ensuring that adequate resources to implement remedial actions, which resulted from an audit as quickly as possible
- Provides all items/resources needed for the job.
- Convenes and chairs HSE meetings.
- Rewards any staff with distinction in HSE related matters.
- Plays active role in facility inspection initiated by contract supervisor.
- Carries out regular inspection and audit, as regard the job.
- In addition, the site manager performs the following functions/duties.
- Fulfills the re-execution of HSE requirement.
- Implements of the HSE plan.
- Seeks formal approval from the contract holder for any proposed deviation.

SITE HSE OFFICER:

The site HSE officer performs the following functions:

- Fully participates in HSE planning, implementation and monitoring.
- He is the custodian of HSE documents.
- He monitors HSE compliance and deviation.
- Collates HSE statistic like Man-Hours, LTI, FAC, TRA etc.
- Prepares schedules for site inspections, audits and monitors implementation.
- Participate in accident investigation, review/follow-up and implementation of recommendations.
- Carries out site surveillance audits.
- Monitors equipment maintenance.
- Participates in all site HSE activities.
- Ensures that HSE standard is sustained.
- Ensures that jobs are executed and completed.

In the HSE plan, the HSE officer shall also carry out the under mentioned responsibilities.

DUTIES OF THE HSE OFFICER IN THE HSE-MS PLAN:

Directs the execution of all activities on site. The site manager or camp boss or supervisor performs the function below:

- Makes requisition of HSE materials.
- Identifies training needs.
- Carries out formal in-house training for all employees.
- Maintains record of stock and monitors issuance of HSE materials.
- Attends management HSE meeting as ex-officio member
- Liaise with key personnel to prepare HSE procedures guide for specific activities.
- Advises management on standards and latest HSE development on the job
- Develops emergency procedure guide in line with client's procedure.
- Monitors program progress and passes information to management.
- Ensure that staffs comply with HSE rules and regulations (adoption of safe work method and use of PPE).
- Acts as the company's Quality Assurance/Control Officer.

CHIEF COOK:

- Ensuring that all selections have what to use for the daily cooking.
- Overseeing the activities of every section.
- Making sure that food is ready at the appropriate time, temperature, quality and quantity to customers.
- Making sure that staff complies with good housekeeping, personnel hygiene practices.

PASTRY COOK:

- Checks that all baking item are in good condition before use.
- Makes requisition of items needed for the meals.
- Bakes according to specification.
- Makes sure that all baking equipment (oven, mixer, pans) is in good-looking condition.
- Encourages good housekeeping within the kitchen.

STEWADS:

- Takes orders from customers.
- Sends customer's orders to kitchen staff (cooks).
- Takes good care of all crockery items.
- Sets tables.
- Serve food to customers.
- Keeps record of crockery items.
- Encourages good housekeeping with the restaurant area.

BARMAN/MAID:

- Take orders (drinks) from customers
- Serve drinks to customers
- Takes good care of all bar items.
- Serve food to customers at times.
- Makes requisition for drinks.
- Encourages good housekeeping within the bar area.

HOUSEKEEPER:

- Ensures proper housekeeping of the rooms prior to arrival of quest
- Replaces toiletries of guest
- Records and sends guest clothes to the laundry and collects same to the respective guest.
- Sweeping, dusting and mopping of the rooms.

STOREKEEPER:

- Receives all supplies from base office
- Checks the standard of the supplies
- Rejects all sub-standard supplies
- Issues out item to staff base on authorizes requisition
- Makes requisition for all items lacking or in short supply
- Stores all items accordingly to discourage cross contamination and food poisoning
- Records daily items issued out and give such records to the location head.

HELPER/CLEANER:

- Makes sure that the working area is in good condition always.
- Washes all used utensils in the kitchen.
- And any other related jobs/duties.

SUB CONTRACTOR (VENDORS):

NOTE: Most of our suppliers are from the communities where we operate.
We use our quality checklist to checks-in their supplies. See the quality checklist form below:

S/N	DATE	SUPPLIERS	TYPE OF GOODS	GOOD	BAD	REMARK
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Checked by:
Name: _____
Sign: _____
Date: _____

_____
Quality Assurance / Control Officer

HSE MEETING PROGRAMME

The format of a typical meeting agenda is shown below:- Quarterly or Monthly

* Theme
* Opening Speech
* Presentation by HSE /any Competent Person
* Film Show
* Learning Points
* Any Other Business (A.O.B)
* Closing Remarks

The format above takes the form of an HSE meeting schedule and targeted to discuss any HSE related issues. However new HSE changes and ideas could also be introduced.

HSE PROMOTION AND AWARENESS

Besides external and internal training put in place by professionals and Alp HSE coordinator, notice boards, stickers, posters and handbills are placed at strategic locations to keep us the HSE standard and zeal.

HSE is further enhanced and promoted among the work force especially at the end of the year with awards given to staff who distinguished themselves in HSE related matters. The measurements for such awards are determined by attendance to daily toolbox briefing, monthly HSE meeting, adherence to HSE requirement and outstanding performance towards enhancing and sustaining HSE standards.

ALP CATERING HQ - HSE MEETING SCHEDULE FOR EVERY YEAR

S/N	DATE	TOPIC	PRESENTER
1	24.01	Review of Last Year's Performance	
2	25.02	Environmental Awareness	
3	24.03	Office Safety Practices	
4	25.04	Hygiene Guidelines	
5	26.05	Effect of Accidents	
6	24.06	Occupational Health	
7	28.07	SHOC	
8	29.08	QAC in Caterng	
9	27.09	Horse Play	
10	24.10	The use of PPEs in catering	
11	29.11	Safety in our Road	
12	19.12	Fire and its Properties	

NOTE: The monthly meeting schedule in the remote-site operation is in accordance with client's arranged HSE meeting. Alp staffs on board attend all HSE related meetings put in place by our client. Alp HSE Manager visits the remote-site periodically to ensure workers give serious attention to HSE matters**.**

HSE COMPETENCE RECRUITMENT

All potential staff must pass through a serious recruitment exercise. Those who pass through the exercise successfully are sent through medical examination. To make sure the workers are medically fit to handle food at all times, the workers pass through a six monthly routine medical examination at local hospital.

EMPLOYEE ORIENTATION PROGRAMM

Managers, location supervisors and HSE coordinator give new employees orientation and induction on policy and aims/targets in relation to HSE issues. They are also given induction on Alp intentions and how they carried out all activities safely at the least cost possible.

HSE TRAINING PROGRAMME

Training program/opportunities are available to both professionals and general workers. See the next page for a tabulated general HSE training schedule.

Professionals HSE training program are also available as detailed below:

1)	General HSE	-> HSE Officers
2)	HSE competence courses levels II & III	-> HSE Officers
3)	HSE competency courses (Level I)	-> All Staff
4)	Journey Management	-> All Drivers
5)	Defensive Driving Course (DDI & II)	-> All Drivers

HSE TRAINING GENERAL
LIST OF HSE COURSES

S/N	COURSE TITLE	PERIOD
1	Hazard Identification	
2	Unsafe Acts and Condition	
3	First Aid Appreciation	
4	Food Handling	
5	Practical Fire Fighting/Prevention	
6	HSE-MS Awareness	
7	Waste Management	
8	First In First Out (FIFO) Principles	
9	House Keeping	
10	Emergency Response	
11	Personal Hygiene	
12	Occupation Health	
13	Environmental Hygiene	
14	Safe keeping of Items	
15	Good Storage System	
16	Journey Management	
17	Induction etc.	

HAZARD AND EFFECTS MANAGEMENT AND ASSESSMENT OF PPE REQUIREMENT

Alp management takes into cognizance the hazards and their possible effects associated with the operation by carrying out management analysis of the hazards. The issue from the assessment was that of PPE to be worn by staff in order to minimize the effects of the hazards. Consequently upon this exercise, Alp Catering has been able to make provision for high quality and durable personal protective equipment (PPE) for staff use.

HAZARD ASSESSMENT/PPE REQUIREMENT
The PPE required for different catering jobs as stated below:

COOKING: PPEs required includes coveralls (uniform), Hair covers (both male and female), safety shoes or canvas and aprons.

SLICING & CUTTING: PPEs required are coveralls, hand gloves, hair covers (men should wear low cut), safety shoes or canvas and aprons.

CLEANING: PPEs required are coveralls, hand gloves, hair covers (men should wear low cut), safety shoes or canvas and aprons.

STEWARDING: Suitable PPEs includes working uniform, safety shoes.

NOTE: Personal Protective Equipments are given to workers twice annually (2 pairs per staff).

2.5 PLANNING AND PROCEDURES BASIC HSE RULES
a) Report unsafe conditions to your immediate supervisor
b) Report all injuries to your immediate supervisor promptly.
c) Always wear correct PPE while at work
d) Do not operate any machine unless all guides and safety devices are in place and in proper operating condition.
e) Keep every tool in safe working condition. Do not use defective tool or equipment. Promptly report faulty equipment to your immediate supervisor.
f) Proper care should be given to PPEs.
g) Be alert and keep out from under overhead load.
h) Never operate machine/equipment if you are not authorized to do so.
i) Practice good housekeeping always
j) All passed safety rules must be obeyed and must not be removed unless by management authorization.
k) Every staff must attend pep-talk and HSE meetings.

EMERGENCY PLAN AND RESPONSE PROCEDURE
Alp Catering will make all staff familiar with ENI TURKMENISTAN and other client's emergency procedure before work commences. Copies of conducted drills will be sent to through its HSE focal point and other clients' HSE focal point.

Should any emergency occur, the following ENI emergency numbers must be remembered.

Security: ……………
Fire: …………………
Medical: ……………

PRINCIPLES OF FIRST AID

The principles of first aid states that "do first thing first, quick, methodically without panic". Give artificial respiration if pulse is on but breathing has stopped. Stop bleeding if necessary. Guard against shock and treat it if manifests by moving the victim as little as possible gently.

Do not attempt to do too much. Do the little that is essential to save life and prevent condition from worsening.

Reassure the victim and those around in order to help lessen anxiety. Do not remove clothes unnecessarily. Arrange for the removal of the victim from the scene to the hospital as soon as possible.

BANDAGE USE BY FIRST AIDER

Triangular bandage is the most useful bandage for first aider to the fact that it is easily made of improvised use of fed nut to secure the end of bandage.

ASPHYXIA EMERGENCY RESUSCITATION

Loss of breathing and blockage of air passage could result to lack of oxygen.

CAUSES OF ASPHYXIA

a) Blocked trachea due to choking
b) Smothering mouth/nose covered with pillow, plastic bag. e.t.c.
c) Hanging tracheas blocked with tight wire, rope of cloth
d) Strangulation neck being twisted
e) Drowning water enters in lungs
f) Electrocution current (electric) passes to the body
g) Suffocation smokes or flames into lungs.

SIGN AND SYMPTOMS

Weakness and dizziness
Difficulty in breathing which later becomes noisy with frothing out of the mouth and may finally stop.
Weak rapid pulse Consciousness is gradually lost Fits may occur.

TREATMENT

Remove the cause from the casualty from the cause.
Lay the casualty down in comfortable manlier/position sees recovery position Allow free air passages by:

* Clearing the nose, mouth and throat of foreign bodies.
* Guarding against the tongue from blocking the throat.
* Loosen tight clothing around the next, chest and waist.

TREATMENT FOR SHOCK

Apply artificial respiration
Send the casualty to the hospital.

WOUNDS

Wound is an abnormal break in the continuity of the tissue of the body, which permits the escape of blood externally of internally and may allow the entrance of germs causing infections.

Wounds may be classified as follows:

- Incise or clean-cut. Caused by sharp object and may bleed profusely
- Lacerated or torn traumatic. Edges of wound are irregular
- Contused or bruised caused by blow from blunt instrument fall against a hard object surface by crushing.
- Puncture or stab caused by sharp pointed object/instrument.
- Abrasion wounds peeling away of skin due to robbing skin against rough surface.
- Gunshot wound bullet causing small entry associated with internal injury with a large exit wound.

DANGER OF WOUNDS

Bleeding Shock Infection Discoloration Pain

SIGNS AND SYMPTONS

Pain Bleeding Tenderness Shock Discoloration

TREATMENT

Stop bleeding
Wash away dirty from the wound with soapy water (antiseptic) Cover the wound with dry and clean dressing
Treat for shock Refer to the hospital

SPRAIN AND DISLOCATION

Spring Caused by over stretching of ligaments or tendons without bones.

SIGNS AND SYMPTOMS

Sprain – swelling, immobility and pains
Dislocation swelling, severe pains, deformity and immobility.

TREATMENT

Sprain – Rest affected area, apply pressure bandage and surround the area with good layer of cotton wool.

Dislocation – Do not attempt to replace the bone in its original position Support the limp in most conformed position.
Send casualty to hospital immediately.

BURNS/SCALDS

Burns are caused by:

- Dry heat such as fire, flame, contact with hot objects or exposure to sun.
- Electricity such as electric current or by lighting
- Friction: Contact with revolving wheel (brush Burn) rope or wire.

Scalds are caused by moist heat, such as boiling water, steam, hot oil e.t.c.

FIRST AID ADMINISTRATION

The HSE officer shall monitor a first aid register. The format for this is shown below:

S/N	NAME	DATE	COMPLAIN	DRUG ADMINISTERED	REMARK

It is the duty of the safety Officer to re-order drugs wherever minimum stock level is reached.

LIST OF FIRST AID BOX CONNTENT

1) Analgesic (Paracetamol) – 10-Tablets
2) Hibitane lotion (Hydrogen Peroxide) – 100 mill
3) TBC – 100 mill
4) Cotton Bandage
5) Creep Bandage-piece
6) Cotton wool ball – large quantity
7) Quaze – 4 piece
8) O.R.T. Sachets – 3 piece
9) Plaster strips – 1 packet. Hand gloves – 2 pairs.

SAFETY TRAINING

This shall be the systematic development of person's attitude, knowledge and skills in order to adequately perform a task or job.

Therefore the objective of all the safety training is to:
a) Improve attitudes in the form of cost and safety awareness
b) Pass on knowledge of the basic fundamental of accident prevention
c) Increase and perfect skills necessary to implement safety systematizing these basic fundamental.

The safety Adviser shall liaise with Personnel Manager based on written records of these procedures, staff equipment etc. but it can be safety assumed that existing material will not provide all the information necessary.

Therefore the following sources should be investigated.

1) INTERNAL

From within the company
• Records, documents, past training and accident statistics
• Direct interviews and observation

2) EXTERNAL

* Industrial training boards
* Employees association
* Client training centaurs/school
* Factory fire authority
* Red cross organization.

Contractor Representative:
- Fulfilling the pre-execution HSE requirements
- Implementing the contractor's HSE plan
- Seeking formal approval from the Contract Holder for proposed deviations from amendment to the Contractor's HSE
- Implementation of any additional requirements imposed by the Contract Holder.

2.6 CRITICAL SUCCESS FACTORS FOR IMPLEMENTING THE PLAN

To effectively implement our 2015 HSE we must ensure that:

- There is a dedicated and dynamic HSE Coordinator
- All staff participates in HSE meeting.
- The entire workforces attend pep talk.
- Emergency procedures are on display on site.
- HSE-MS is strictly followed and adhered to.
- All policies are on display on site.
- HSE-MS is strictly adhered to.
- All policies are on display on site
- Follow-up actions resulting from audits are implemented.
- The use of hazard register is enhanced in job execution.
- Pre-gas lighting inspection check is always carried out.
- Demonstration of effective procedure for the management of waste generated from the operation.
- Immediate identification of risks and subsequently bring them to a level as low as reasonably practicable (ALARP).

ALP CATERINGEMERGENCY COMMAND STRUCTURE
Should there be an emergency, the manager with due advises from the HSE Officer takes charge. Where the manager or HSE officer is not available, the camp boss or supervisor acts as a HSE officer and takes control.

EMERGENCY PROCEDURE – FIRE
If you discover fire use the following:
a) Raising Alarm:
- ***Shout Fire! Fire!! Fire!!!***
- Operate alarm system if available

b) Contact Fire Department:
- Telephone: ……………
c) Extinguish Fire:
- Fight the fire with any available fire extinguisher if there is no danger to life.
d) Exit:
- Shout Fire! Fire!! Fire!!!
- Leave building or kitchen through the nearest exit.
- Assemble at mustering point.

If you hear fire alarms do the following:
- Stop all activities
- Switch off all electrical appliances, leave Kitchen, room, close door (do not lock)
- Proceed to the mustering point a calmly and purposefully. ***Do not panic.***

OCCUPATION HEALTH

Due to the fact that we striving towards proper management of staff occupational health, a first aid box fully equipped is provided with item specified by client medical department. The HSE officer is managing the first aid box.

At present the company has at least three qualified first aiders in our operation. This number will be improved upon depending on the volume of job at our disposal.

We shall from time to time arrange with our client's medical personnel to train our staff.

We shall employ experienced hands to take proper cleaning of the rooms accommodation based on a prepared cleaning schedule.

HSE EQUIPMENT AND EQUIPMENT HSE INSPECTION
All HSE equipment to be used during the operations are:

1) Cooking: Boilers, Burners, Fryers, Microwave Ovens, Ovens, Expellers/Hoods.
2) Storage: Cold Rooms, Deep Freezers/Refrigerators/Racks
3) Preparation: Knives/Grinders, Powered Hand Tools/Manual Hand tools.
4) Stewarding: China Wares/Drinking Glasses/jugs.
5) First Aid: Acceptable Drugs, Scissors/Safety Pins/ Condoms/ Crepe/ Bandage/ Triangular Bandage/ Plaster Strip/ Cleaning Lotions e.t.c.
6) Fire: Extinguishers/ Automatic/ Manual Alarm/ Fire Blanket e.t.c.
7) PPEs: Personal Protective Equipments.
8) Vehicles: Operational Vehicles

ENVIRONMENTAL

WASTE EVACUATION PROCEDURE
1) Waste management (hazardous and non hazardous):
Waste are generated and managed adequately. There is proper waste segregation into glass, paper, food/biological and chemical as well. These are separated, as they are being generated into different defined bin (lined bins).

They are subsequently taken to the waste hut where the collectors will eventually evacuate them accordingly.

Waste are evacuated, consignment notes used. Volume of wastes is recorded, time of evacuation, who evacuates and where they are sent to are recorded. The next day, they are confirmed that the previous wastes evacuated were received and dumped.

2) Sewage is also evacuated and the HSE Officer keeps reports. Monitoring and Restoration Records of qualities/types of all waste ARE KEPT. These reports are monitored received by sponsor department.

At the end of operation the entire work place is cleaned and neatness ensured. This is done on Daily basis.

ROAD TRANSPORT

DRIVER – COMPETENCE AND SELECTION

ALP DRIVERS CERTIFICATION: Apart from their Turkmenistan Driving license, they are sent to ALP DRIVING PROGRAMS.

Their Medical/Experience/Physical capabilities/Qualities checks and driving tests confirmed, including specialist skills. (Terrain, Community Knowledge and First Aid).

2.7 IMPLEMENTATION AND PERFORMANCE MONITORING HSE PERFORMANCE

Our performance shall be measured with targets we set to achieve and this is rightly displayed in our manual.

Plan to measure HSE performance includes:

• Performance indicators.

ALP CATERING HSE TARGETS REVIEWED

HSE Indicators	Units	Target	Actual	Remark
Fatality	NO	0	0	Achieved
LTI	NO	0	0	Achieved
Unsafe Conditions	NO	15	10	Achieved
Unsafe Acts	NO	20	12	Achieved
RTA	NO	0	0	Achieved
Zero Food Poisoning	NO	0	0	Achieved
Fire Incident	NO	0	0	Achieved
Stick Absence	Days	10	8	Achieved
Emergency Drills	NO	4	1	Short tall
Security Incidence	NO	0	2	Short Tall
Internal Audit	Quarterly	4	3	Not Achieved
Facility Visit Inspection	NO	12	6	Average
Near Miss	NO	20	5	Achieved
DDCI	NO	1	0	Zero
DDC2	NO	4	0	Zero
Fire Warden Training	NO	4	0	Not Achieved
HSE Meeting	NO	12 in each Location	6	Average
Food Handlers Medical Check	%	100%	100%	Achieved
HSE-MS Awareness	NO	4	1	Short Tall
Swimming	%	100%	100%	Achieved
Pre-employment Medical Check	%	100%	100%	Achieved
Pep Talk	%	100%	50%	Average

Health and Safety Statistics – Monthly Return

CONTRACT NO:	
NAMES OF COMPANY:	
RETURN FOR THE MONTH OF:	
No. of Employees Working on Contract:	
No. of Man-Hours worked (including any overtime) in the month	
No. of Fatality & Permanent Disabilities in the month:	
No. of Lost Workday Cases in the month (LWC)	
No. of Restricted Work Cases in the month (RWC)	
No. of Medical Training Cases in the month (MTC)	
No. of First Aid Cases in the month (FAC)	
No. of Near Miss in the month (SEVERITY0)	
No. of Occupational Illness in the month (TROL)	
No. of Calendar Man-Days lost due to Sickness Absence	
No. of Non-Injurious (SEVERITY 4 or 5) Incident in the month which are not included above:	
No. of Non-Accidental Deaths in the month: (NAD)	
No. of Road Training Deaths in The Month: (RTA)	

Monthly Driving Statistics	No. of Vehicles/Crafts	KM/Village Driven
Vehicle above 2500kg gw		
Personnel carriers		
Tight Marine Vessels		
Tag Boats		
Other Vehicle Vessels		

Names of Injured People absent from Work or on Restricted Work during the Month.

NAME:		DATE:
	WAS CERTIFIED UNFIT ON	
	WAS CERTIFIED UNFIT ON	
	WAS CERTIFIED UNFIT ON	

Names of previously injured people **CERTIFIED FIT TO RETURN TO WORK** during the month, following an LTI absence or a period.

NAME:		DATE:
	RETURN TO WORK	
	RETURN TO WORK	
	RETURN TO WORK	

Signed by Contractor's Authorized Rep.	Signed by Contract Holder:	
Position in Company:	Reference Indicator:	
Date:	Date:	

NOTES: All return should be related to the previous calendar month only. The average may be taken as the total number of employees when fluctuations occur.

HSE Indicators	Units	Target	Actual	Remark
Fatality	NO	0		
LTI	NO	0		
Unsafe Condition	NO	15		
Unsafe Acts	NO	20		
RTA	NO	0		
Zero Food Poisoning	NO	0		
Fire Incident	NO	0		
Sick Absence	Days	10		
Emergency Drills	NO	4		
Security Incidence	NO	0		
Internal Audit	Quarterly	4		
Facility Visit Inspection	NO	12		
Near Miss	NO	20		
DDCI	NO	1		
DDC2	NO	4		
Fire Warden Training	NO	4		
HSE Meeting	NO	12 in each Location		
Food Handlers Medical Check	%	100%		
HSE MS Awareness	NO	4		
Swimming	%	100%		
Pre employment Medical Check	%	100%		
Pep Talk	%	100%		

- HSE incentive scheme:
- Achievements of milestones
- Clearance of action items:
- Compliance with HSE regulations by selective testing (e.g. road safety)
- Journey management rate (Km covered/total man hours):
- Environment spills.
- Occupational illness (lost time occupational illness frequency, total occupation illness frequency, total occupation illness severity):
- Sickness absenteeism:

**THESE ARE REPORTED MONTHLY AND ALP HQ HSE DEPARTMENT
FOR INCIDENT INVESTIGATION**

COVERAGE
Reporting Procedure:
All incidents both major are reported to CLIENT:
CLIENT is notified and actions taken immediately. All incident and near miss investigation and reporting covering injuries to and time lost by personal health, incidents (disease, exposures to hazardous substances). Environmental incidents (spills release, contamination etc.) safety equipment failure, loss of capital equipment and materials loss are reported accordingly.

Method
Details of incidents investigation method to determine and correct primary and root cause (The incident investigation teams led by the ENI/ALP Managers) at the end of the staff through morning briefing and information board.

2.8 AUDIT, REVIEW AND INSPECTION AVAILABILITY

Security Emergency Response
Audit and Inspection plan are shown below Security Emergency response
Community Disturbance Strike Civil Disorder Stealing/Theft
Labor Crisis
Scope

Compliance with the Contract HSE plan including:
• HSE Management
• Department Personnel
• Technical Personnel
• Sub-Contactors
• Journey Management
• Occupational Health
• Unsafe acts.

ALP CATEERING INTERNAL AUDIT PLAN (QUARTERLY)

MONTH	DATE	ACTIVITY	AUDIT COORDINATORS	REMARK
JANUARY	20	UNSAFE AACT/PPE AUDIT	CAMP BOSS, HSE OFFICER & ASST. COOK	
JUNE	15	GOOD HOUSE KEEPING AUDIT	EX-CHIEF, CAMP BOSS, HSE OFFICER, STORE KEEPING, RESTAURANT SUPERVISOR	
DECEMBER	11	WASTE MANGEMENT AUDIT	CATERING INSPECTOR, CAMP BOSS, HSE OFFICER, COOK, ASST. COOK	

HSE PERFORMANCE

HSE Indicators	2012	2013	2014	2015
Fatality	0	0	0	0
LTI	0	0	1	2
Unsafe Condition	3	4	14	10
Unsafe Acts	3	3	8	5
RTA	0	0	0	0
Zero Food Poisoning	0	0	0	0
Fire Incident	0	0	0	0
Sick Absence	8	9	5	6
Emergency Drills	2	1	2	2
Security Incidence	0	0	0	0
Internal Audit	1	1	4	4
Facility Visit Inspection	3	3	6	4
Near Miss	30	30	1	5
DDCI	1	0	0	0
DDC2	1	0	0	0
Fire Warden Training	1	1	2	2
HSE Meeting	12	6	12	10
Food Handlers Medical Check	100%	100%	100%	100%
HSE MS Awareness	1	1	4	4
Swimming	100%	100%	100%	100%
Pre employment Medical Check	100%	100%	100%	100%
Pep Talk	100%	100%	100%	100%

The purpose of this audit is for the Co-ordinator to conduct an assessment of hygiene standards in all aspects of the food handling procedures carried out in the facility and to ensure that all relevant Corrective Actions are carried out and documented.

These records will be available for all auditors including those from the Food Authority.
Audit records will be kept for a period of four years as per the Food Authority Guidelines.

Date of Audit ....

Auditor ....

Audit Instructions

1. Complete a Food Safety Audit at least once at the month.
2. If necessary, complete an audit for each food service area within the organisation.
3. The audit consists of two types of review:

- A Desktop Audi t i.e. a review of the documentation and records used as part of the organisation's Food Safety Program.
- An on - Site Audit of the practices and procedures being carried out during production and service of food. During the audit, speak with staff/ volunteers to gauge what is actually happening day-to-day.

4. Record "NA" for questions which are not relevant.
5. On completion of the audit develop an action plan to ensure any non-conformances are dealt with immediately and appropriately. Ensure a completion date is entered into the audit to document the corrective action has been carried out.
6. Retain and file all audits.

ALP CATERING FOOD SAFETY AUDIT CHECKLIST

DATE: _____   AUDIT CONDUCTED BY: _____   AREA: _____

Critical Item	Compliant YES / NO		Completed / Actioned
Reciept			
1. When questioned, are staff aware of the food safety issues accepting receipt of incoming products?			☐
2. When questioned, are staff aware of the main food safety factors when inspecting a food delivery vehicle?			☐
3. Are all products listed on your Approved Supplier's List?			☐
4. Are specifications available for all products?			☐
5. Are these available at the receiving area?			☐
6. Do records for receipt of goods demonstrate accordance with the written procedures?			☐
7. Are refrigerated and frozen product temperatures monitored upon receipt (except whole fruit and vegetables?			☐
8. Upon receipt are the products stored quickly in their appropriate storage areas?			☐
9. Is documentation available or is this observed?			☐
10. Are food delivery vehicles inspected (monitored regularly) before receiving goods?			☐
11. Is documentation available?			☐
12. Is the delivery record sheet completed?			☐
Glass and Wood Policy			
13. There is no evidence of glass or wood in food production areas?			☐
Labeling and Traceability			
14. All perishable items in storage are clearly labeled with name, date of purchase and use by date?			☐
15. All pre-prepared foods and work in progress in storage are clearly labeled?			☐
Storage			
16. Are all storage areas neat and tidy with food products stored off the ground and not in contact with wall surfaces?			☐
17. Are all foods in storage containers covered and labelled with name of product, date of receipt?			☐
18. Is all packaging in good condition?			☐

19. Are foods stored in a rotation use-by date basis?			☐
20. Is there sufficient storage space?			☐
21. Is there a dedicated holding area for foods on hold or involved in a recall?			☐
22. Are temperatures of the storage areas operating in the correct range?			☐
23. Are foods stored to prevent cross contamination from raw to cooked products in storage areas?			☐
24. Are foods stored to prevent cross contamination from raw to ready to eat foods in storage areas?			☐
25. Are foods free from allergens stored so that they cannot be contaminated by foods containing allergens?			☐
26. Is the structure of the storage area in good condition ie no cracks in walls, impervious floors, no condensation in refrigeration?			☐
27. Are equipment, door seals in good order?			☐
28. Have appropriate corrective actions been taken and recorded?			☐
29. Are chemicals and cleaning products stored away from food storage areas?			☐
30. Are storage areas free of evidence of pests?			☐
31. Are refrigeration appliances calibrated on a regular basis (at least once every six months)?			☐

Cleaning			
32. The Cleaning schedule is visible and is being followed?			☐
33. Does the cleaning schedule include all relevant information eg: instructions on chemical preparation and cleaning steps, items to be cleaned, frequency, chemicals to be used, equipment to use, who is responsible etc?			☐
34. Are the cleaning schedules completed regularly?			☐
35. Is there adequate equipment and facilities to undertake cleaning effectively?			☐
36. Is the cleaning equipment clean, in good repair and stored appropriately after use?			☐
37. Are sanitisers for work surfaces readily available for use during food preparation?			☐
38. Are cleaning chemicals made up correctly?			☐
39. Are all cleaning chemicals store separately from food areas?			☐
40. Are all cleaning chemicals in clearly labelled containers?			☐
41. All new equipment has been included in the Cleaning Schedule?			☐
42. The dishwashing machine is operating correctly and maintained in good order (i.e. Wash tanks are emptied and refilled with clean water regularly)?			☐

Critical Item	Compliant YES / NO		Completed / Actioned
Maintenance of Premises and Equipment			
43. Is all the equipment in good repair and facilitate cleaning?			☐
44. There is sufficient and well maintained: - Lighting -Ventilation -Drainage?			☐
45. All reported equipment defects are being dealt with effectively?			☐
46. Unused or broken equipment is removed from the premises?			☐
47. Fittings such as benches are free from cracks and crevices, in good condition?			☐
48. Food service equipment such as boards/ crockery is free from cracks and chips?			☐
49. All major pieces of equipment such fridges, freezers ovens, hot holding equipment, cold holding equipment are fitted with working temperature monitoring gauges?			☐
50. All fixed temperature monitoring gauges have been calibrated at least in the past six months?			☐
51. All probe thermometers have been calibrated monthly and any without a 1C tolerance disgarded?			☐
52. Is the premises in good repair with clean drains, no peeling paint, no holes orgaps where pests might enter etc.?			☐
53. Are there building and equipment maintenance programs and are they being followed?			☐
54. Are all light fitting covered or fitted with non-shatter globes?			☐
55. All probe thermometers have been calibrated every one month and recorded onthe Daily Food Safety Checklist?			☐
Training and Induction			
56. All staff training is up-to-date and recorded on the Food Safety Training Sheet?			☐
Pest control			
57. There is no evidence of pest or rodent activity?			☐
58. Records of pest control visits and the treatments administered are kept?			☐
59. There is a pest control contract on-site?			☐
60. There is a map of all bait stations?			☐
61. Pest sightings are reported by staff?			☐
62. There is a record of all pest control chemicals used?			☐
63. Have actions been taken and recorded when there has been evidence of pest activity?			☐
64. External openings are adequately sealed to prevent entry of pests?			☐

Waste			
65. Waste is removed when bins are ¾ full?			☐
66. Are waste disposal bins identifiable from food storage bins?			☐
67. Are waste disposal bins identifiable from food storage bins?			☐
68. Waste containers are covered, kept clean and emptied after each work period?			☐
69. The refuse storage area is separated from the food preparation areas?			☐

Personal Hygiene			
70. Daily hygiene practices are monitored by the Co-ordinator and all corrective actions completed?			☐
71. There are sufficient hand-washing facilities installed in all food handling areas -Warm water -Soap -Paper toweling?			☐
72. Food handlers wash their hands as often as necessary?			☐
73. Food handlers use gloves appropriately and correctly?			☐
74. All jewelry including watches is removed prior to commencing direct food handling?			☐
75. There is no evidence of eating or smoking in food preparation areas?			☐
76. Kitchen personnel wear appropriate protective clothing and protective head coverings?			☐
77. All staff understand their responsibilities with regards reporting of illness?			☐
78. Sick staff are excluded from working with food?			☐
79. There is a first-aid box available/ wounds are covered with coloured, water proof dressings?			☐
80. Are staff aware of food safety practices and their responsibilities?			☐
81. Are staff aware they must not be at work when they may be suffering from a food borne illness or condition?			☐
82. Are staff trained in food hygiene?			☐
83. All staff have been provided with the Food Safety Training Handouts?			☐
84. All new staff have been taken through an induction covering reporting of illness, correct hand washing / correct use of gloves, and personal hygiene standards?			☐
85. All staff have appropriate skills and knowledge in food hygiene?			☐
86. Staff training records are up-to-date?			☐

Non -Conforming Product and Complaints			
87. All incidents, complaints and non conforming products are recorded on the Non Conforming Product and Complaint Form and all corrective a ctions have been implemented?			☐

Critical Item	Compliant YES / NO		Completed / Actioned
Food Preparation			
90. Is the 2hr rule not exceeded for the sum of all steps performed at room temperature including preparation distribution and service?			☐
91. Are salads and other raw vegetables sanitised prior to serving?			☐
92. Where a chemical sanitiser is used are there records to show levels are maintained?			☐
93. Correct use of equipment/ utensils prevents cross-contamination?			☐
94. Is there documentation to show that the cleaning program is followed?			☐
95. Are work surfaces, utensils and equipment clean and is there?			☐
96. Are chemicals stored in a manner to prevent contamination?			☐
97. Is the risk of foreign objects (physical items) controlled to prevent contamination?			☐
98. Is equipment working and well maintained in this area?			☐
99. Is equipment installed to facilitate effective cleaning in this area?			☐
100. Is food waste disposed of efficiently and appropriately?			☐
101. Are waste bins emptied regularly?			☐
102. When questioned are staff aware of the risks when handling food?			☐
103. Are staff wearing appropriate protective clothing?			☐
104. Are staff following good hygiene practices?			☐
105. Are staff who are not in good health kept away from direct contact with food?			☐
106. Are there adequate hand washing and drying facilities for staff?			☐
107. When questioned are staff knowledgeable in personal hygiene practices?			☐
108. Are staff personal belongings stored in appropriate manner and not at risk of contaminating food or equipment during preparation?			☐

Critical Item	Compliant YES / NO		Completed / Actioned
Thawing			
109. Are food products thawed under refrigeration?			☐
110. Are raw products thawed separately from cooked products to prevent cross contamination?			☐
111. Are products being thawed covered, and or wrapped and labelled?			☐
112. Items that are thawing in cool rooms labeled with a sticker that specifies:- Date removed from the freezer?			☐
113. All thawing products labeled?			☐
114. Thawed products are used within 2 days of removal from the freezer?			☐

115. Have appropriate corrective actions been taken and recorded wherever problems have occurred?			☐
116. Are foods covered during thawing?			☐

Cooking			
117. Have the product monitoring forms been completed?			☐
118. Are all foods handled with utensils or where direct hand contact is required, are fresh gloves worn?			☐
119. Has appropriate corrective actions been taken and recorded where problems arose?			☐
120. Are cooking times and temperatures satisfactory and monitored by staff?			☐
121. Are all necessary steps taken to prevent the likelihood of food being contaminated with microorganisms or allergens during the cooking process?			☐
122. Are staff following good hygiene practices?			☐
123. When questioned are staff knowledgeable in personal hygiene practices?			☐
124. Is the equipment and utensils clean prior to use for cooking?			☐
125. Is the working environment in a clean and sanitised condition at the start and maintained as practicable as possible during the cooking process?			☐
126. Is the flow of food such that there is no likelihood of cross contamination from raw unprocessed food to ready to eat food?			☐
127. Are staff not in good health kept away from direct contact with food ?			☐
128. Is the temperature measuring equipment accurate?			☐
129. Is the risk of post cooking cross contamination controlled?			☐

Cooling			
130. Are there records of temperature monitoring for all refrigerated storage areas used (eg cool rooms, refrigerators etc)?			☐
131. Is documentation available?			☐
132. Cooked foods are cooled to 21ºC or below within two hours and 5ºc or below within a further four hours?			☐
133. Is the food covered where practicable while cooling down / after blast chilling?			☐
134. If cooling in refrigerator or cool room, are foods kept covered?			☐
135. Is there adequate control to prevent likelihood of cooked and ready to eat foods becoming contaminated by raw unprocessed food?			☐
136. Have the product monitoring forms been completed?			☐
137. Have appropriate corrective actions been taken and recorded where problems have occurred?			☐

Critical Item	Compliant YES / NO		Completed / Actioned
138. Are cooling down times and temperatures satisfactory and monitored by staff? Is documentation available?			☐
139. Are all necessary steps taken to prevent contamination during the cooling down process?			☐
140. Are food containers dated and labelled with the product name prior to cold storage?			☐

Reheating			
141. Are all necessary steps taken to prevent the likelihood of food being contaminated after the reheating process?			☐
142. Are reheating times and temperatures satisfactory and monitored by staff?			☐
143. Is the food reheated in appropriate food containers?			☐
144. Has corrective action been taken and recorded where problems arose?			☐
145. Is the food covered where practicable during the reheating process?			☐
146. Is the risk of cross contamination during the reheating controlled?			☐

Hot Holding			
147. Have appropriate corrective action been taken and recorded where problems have occurred?			☐
149. Are all necessary steps taken to prevent the likelihood of food being contaminated during the holding process?			☐
150. Are hot food holding facilities adequate?			☐
151. Is the risk of contamination of the food while in display units controlled?			
152. Are display / holding units clean prior to use?			☐
153. When questioned are staff aware of the risks of contamination?			☐
154. Is the 2hr/4hr rule not exceeded for the sum of all steps during the holding process?			☐

Plating / Packing / Service			
155. Are there records of temperature monitoring for all refrigerated storage areas used (eg cool rooms, refrigerators etc)?			☐
156. Are serving times and temperatures satisfactory and monitored by staff?			☐
157. Have appropriate corrective actions been taken where problems have occurred?			☐
158. Are all necessary steps taken to prevent the likelihood of food beingcontaminated during the serving process?			☐

159. Is food covered where ever possible while being plated and served?			☐
160. Is all food handled with utensils and are there sufficient serving utensils for use?			☐
161. Are staff aware of the risks of contamination?			☐
162. Are staff following good hygiene practices?			☐
163. Are all items of crockery and cutlery clean prior to use?			☐
164. Are pest control measures adequate and effective?			☐

Transportation			
180. All foods are stored in suitable containers to maintain temperature control during transit?			☐
181. The temperature of all food items is checked before distribution?			☐
182. All food items are covered in a way to eliminate contamination?			☐
183. Are temperature control records completed and available for transport vehicles?			☐
184. Are unprocessed raw and ready-to-eat foods delivered so that cross contamination does not occur?			☐
185. Have appropriate corrective actions been taken and recorded where problems have occurred?			☐
186. Have all the hazards during transportation been identified?			☐

REPORT ALL FOOD SAFETY PROBLEMS

Describe Problem	Describe what you did about it	Who is responsible?	When will the problem be fixed by?	Completed on (date)