

## Occupational hygiene, health and safety plan

### **I. Objective**

The occupational hygiene, health and safety plan (OHHS plan) aims at deploying a set of activities that avoid or minimize risks to the health and safety of workers on the construction site and ensures that workers operate in healthy and safe conditions, thus reducing the risk of diseases, epidemics and accidents.

### **II. General Conditions**

#### **A. Scope of Application**

Applicable to all sub-contractors and HSE Ivoire team

#### **B. Applicable Regulations**

International labour law (ILO)

IFC Performance Standards (PS 2)

General Environmental, Health and Safety Guidelines from IFC

### **III. Measures**

#### **1. Site team**

The team deployed on site is composed of the following positions:

#### **ARISE Ivoire:**

- ESG Manager on site: 1

#### **Site works erection**

MAJOR DELIVERABLES	CONTRACTORS DETAILS/CONTRACT STATUS
Site Base camp Clearance	Awarded Dtech Sarl / Mobilised
Site Office Establishment	Dtech Sarl / Mobilised
Roads, Roundabouts Works	COLAS
Storm Water Drainage	COLAS
Welcome Gate	YET TO BE AWARDED
Sewerage Works	SIE TRAVAUX/MOBILIZED
Construction of CETP	YET TO BE AWARDED
Water Supply Works	SIE TRAVAUX/MOBILIZED
Electrical Works	YET TO BE AWARDED
Vertical Development Works	YET TO BE AWARDED
Construction of SWC Building	YET TO BE AWARDED
Construction of Fire Station	YET TO BE AWARDED
Warehouse Civil Works	YET TO BE AWARDED
Landscape works	YET TO BE AWARDED

## 2. QHSE organization

The QHSE organization rolled out on site is presented in Responsibilities and organisation procedure.

## 3. Work timetable

The work will be carried out over six days.

The working hours range from 7am to 6pm with breaks to be defined by each subcontractor.

This schedule can be adjusted according to the needs of the construction site.

## 4. Language of communication

The language of communication on the worksite is chosen by ARISE Ivoire and must be respected by sub-contractors and third parties. ARISE Ivoire has a bilingual policy: English and the local national language (French).

## 5. General risk assessment

A general risk assessment is a formal process to identify potential hazards related to an activity or operation, analyse the level of risk associated with those hazards and propose controls to reduce the level of risk.

The general risk assessment for all the company activities that could lead to accidents will be performed by ARISE Ivoire.

This general risk assessment will be updated for the particularities of the construction site and will be displayed in the worksite office. It will especially address the following risks as they have been identified as highly likely:

- Working in extreme weather
- Fire and electrical risks
- Lifting operations
- Transportation of equipment by road

The sections below underline more precisely the content of these risks and the mitigation measures proposed by the IFC General Environmental, Health and Safety Guidelines.

#### *a) Working in extreme weather conditions*

The project site is in a region where extreme temperatures can reach 40 degrees during the dry season.

Extreme temperatures in permanent and closed work environments should be avoided through implementation of engineering controls and ventilation. Construction site bungalows should be equipped with air conditioning or ventilators.

During outdoor work, temperature-related stress management procedures should be implemented which include:

- Avoid conducting heavy exterior work during the dry season (October to June): the hottest month of the season is April.
- Monitor weather forecasts for outdoor work to provide advance warning of extreme weather.
- During the hottest days, adapt working and rest hours to avoid work during the hottest hours of the day (between 12 and 3 pm).
- Provide temporary shelters to protect against the sun during working activities or for use as rest areas.
- Use of protective clothing against the sun and high temperatures, especially for expatriate personnel: cap, light cotton or linen clothes covering arms and legs, use of solar cream, etc.
- Provide easy access to adequate hydration such as drinking water or electrolyte drinks and prohibit consumption of alcoholic beverages.

#### *b) Fire and electrical risks*

The construction activities will require to perform complex work on electrical systems, especially for the construction of the power station. Hence, the electrical risk is important and the recommended procedures to prevent it are set below:

- Marking all energized electrical devices and lines with warning signs.
- Appropriate labelling of service rooms housing high voltage equipment ('electrical hazard') and where entry is controlled or prohibited.
- Establishing "No Approach" zones around or under high voltage power lines.
- Locking out (de-charging and leaving open with a controlled locking device) and tagging out (warning sign placed on the lock) devices during service or maintenance.

- Checking all electrical cords, cables, and hand power tools for frayed or exposed cords and following manufacturer recommendations for maximum permitted operating voltage of the portable hand tools.
- Double insulating / grounding all electrical equipment used in environments that are, or may become wet, using equipment with ground fault interrupter (GFI) protected circuits.
- Protecting power cords and extension cords against damage from traffic by shielding or suspending above traffic areas.
- Rubber tired construction or other vehicles that come into direct contact with, or arcing between, high voltage wires may need to be taken out of service for periods of 48 hours and have the tires replaced to prevent catastrophic tire and wheel assembly failure, potentially causing serious injury or death.
- Conducting detailed identification and marking of all buried electrical wiring prior to any excavation work.

### *c) Lifting operations*

Lifting operations can pose a risk mostly in terms of accidental contacts between the lifting equipment and a vehicle or a pedestrian. Heavy equipment operators have limited fields of view close to their equipment and may not see pedestrians close to the vehicle. Center-articulated vehicles create a significant impact or crush hazard zone on the outboard side of a turn while moving.

Techniques for the prevention and control of these impacts include:

- Planning and segregating the location of vehicle traffic, machine operation, and walking areas, and controlling vehicle traffic through the use of one-way traffic routes, establishment of speed limits, and on-site trained flag-people wearing high-visibility vests or outer clothing covering to direct traffic.
- Ensuring the visibility of personnel through their use of high visibility vests when working in or walking through heavy equipment operating areas, and training of workers to verify eye contact with equipment operators before approaching the operating vehicle.
- Ensuring moving equipment is outfitted with audible back-up alarms.
- Using inspected and well-maintained lifting devices that are appropriate for the load, such as cranes, and securing loads when lifting them to higher job-site elevations.

### *d) Transportation of equipment via road*

The risk represented by the transportation of equipment by the road is treated in a dedicated plan.

## 6. Job risk analysis

A job risk analysis is a formal process to identify the dangers of specific job tasks in order to reduce the risk of injury to workers. It involves breaking down the steps of performing a job, identifying hazards at each step, and creating controls to keep workers safe while performing that task.

A Job risk analysis (JRA) is developed by ARISE Ivoire and its sub-contractors for the various job types planned on the construction site. The JRA covers physical, chemical and biological hazards for each type of job, assesses the effects of these hazards on the safety and health of workers and details associated prevention measures. It identifies jobs or tasks requiring specific working permits, PPE and/or trainings.

The table below presents the matrix to be used for JRA.

### Matrix for JRA

<b>Job risk analysis</b>	Type of job:	
	Date:	
<b>Basic job steps</b>	<b>Potential hazards</b>	<b>Recommended action or procedure</b>
Personal protective equipment to be worn:		
Required training(s):		
Required permit(s):		

### 7. Working permits

A work permit procedure is established by ARISE Ivoire, before starting work, which sets out the stages of communication and agreements on the method of safety at work between the person qualified to issue the work permit and the staff or subcontractor. Permits are written and must be stored by the HSE supervisor in a dedicated folder made accessible to auditors. Permits have a one-week validity.

The works requiring work permits are identified after the JRA are conducted and listed in the present plan.

### 8. Personal protective equipment

Adequate PPEs (adapted to the job risk analysis results and to the workstation) are made available by ARISE Ivoire and its sub-contractors to workers in sufficient amount so that no worker lack adequate PPE. Workers are trained on the use and maintenance of PPE. The HSE supervisor ensure that they are worn by conducting regular checks on site. Storage conditions for PPE is adequate, PPE expiry date is regularly controlled, and expired PPE are immediately replaced. The list of compulsory PPE to be worn in each specific area of the construction must be posted in visible locations.

At a minimum, staff on the worksite must wear a hard hat, safety shoes and a reflective vest.

The type of PPE recommended by IFC standards is presented in the table below.

#### IFC recommended PPE

<b>Objective</b>	<b>Workplace Hazards</b>	<b>Suggested PPE</b>
Eye and face protection	Flying particles, molten, metal, liquid chemicals, gases and vapors, light radiation	Safety glasses with side-shields, protective shades, etc.
Head protection	Falling objects, inadequate height clearance, overhead power cords	Plastic helmets with top and side impact protection
Hearing protection	Noise, ultra-sound	Hearing protectors (ear plugs or ear muffs)
Foot protection	Falling or rolling objects, pointed objects Corrosive or hot liquids	Safety shoes and boots for protection against moving and falling objects, liquids and chemicals

Hand protection	Hazardous materials, cuts and lacerations, vibrations, extreme temperatures	Gloves made of rubber or synthetic materials (Neoprene), leather, steel, insulating materials
Respiratory protection	Dust, fogs, fumes, mists, gases, smokes, vapors	Facemasks with appropriate filters for dust removal and air purification (chemicals, mists, vapors and gases) Single or multi-gas monitors, if available
	Oxygen deficiency	Portable or supplied air (fixed lines) On-site rescue equipment
Body/leg protection	Extreme temperatures, hazardous materials, biological agents, cutting and laceration	Insulating clothing, body suits, aprons of appropriate materials

(Source: Environmental, Health and Safety (EHS) Guidelines, IFC, 2007)

### 9. HSE training

An initial training covering HSE management is organized for all workers upon their recruitment as well as for site visitors.

Regular trainings and health and safety discussions are also organized, and awareness-raising material such as posters and leaflets are made available to workers.

In parallel, a behavioral safety monitoring program is set up and actively train and encourage staff to respond to risky behaviors and situations, and to report deviations.

Workers are required to immediately remedy any situation or condition that could result in injury or endanger work, people, property or the environment. If such a situation or condition cannot be eliminated immediately, they are trained to put in place temporary barriers and appropriate warning signs and devices and/or take the necessary measures for the protection of persons, property and the environment.

### 10. HSE communication

An efficient and effective internal health and safety communication channel is set up by ARISE Ivoire and its sub-contractors. Regular sessions are organized with all personnel involved in the work including, but not limited to:

- technical meetings prior to the start of work,
- weekly health and safety meetings on site, with all the parties concerned (including sub-contractors, the site manager and third parties),
- other forms of communication such as daily health and safety talks.

Information on the HSE performance, HSE issues or accidents on the construction site must not be disclosed to the public or the media without consent from the site manager.

### 11. Daily health and safety talks

Health and safety talks are organized at the start of each workday and before starting new activities using ARISE Ivoire toolbox.

These discussions are conducted in a language understood by the workforce.

A checklist is used where the following points are addressed as a minimum:

- a) Nature of the work

- b) Risks inherent in this work
- c) Safe working methods to be implemented
- d) Work permit requirements
- e) Covid-19 prevention measures on the worksite

## 12. Access to the construction site

Access to the construction site is prohibited to any unauthorized person.

Access to the construction site is secured to avoid intrusions, accidents and theft of materials with:

- Site access controls (badges with identification) with one or more vehicle control points
- A guardhouse guarded 24/7 by an unarmed guard equipped with a communication system (walkie talkie or mobile phone), a fence and an intrusion detection.

## 13. Reception of staff and visitors

Each person entering the site (visitor or external staff) must be given the OHHS induction allowing them to move and / or work safely. Permanent accompaniment of visitors is provided for all visitors.

All staff, visitors or other entering, male or female, into the construction site is equipped with personal protective equipment (PPE) in accordance with international standards and practices.

At a minimum, staff and visitors to the construction site must wear a hard hat and a reflective vest. Safety shoes is not mandatory for short-time visitors ( a day on field), but for more than 2 days on field, visitors will have safety shoes.

## 14. Safety of workplace

A safe access is ensured to all workplaces including emergency access and exits.

Passages to emergency exits should always be unobstructed. Exits should be clearly marked to be visible in total darkness. The number and capacity of emergency exits should be sufficient for safe and orderly evacuation of the greatest number of people present at any time, and there should be a minimum two exits from any work area.

Pictograms adapted to the OHS risks and PPE wearing obligations are displayed on site.

Hand, knee and foot railings on stairs, fixed ladders, platforms, etc. are installed on any area requiring it.

Clear loading/unloading areas, parking and material storage areas are defined.

Passageways for pedestrians and vehicles within and outside buildings should be segregated and provide for easy, safe, and appropriate access.

Equipment and installations requiring servicing, inspection, and/or cleaning should have unobstructed, unrestricted, and ready access.

The installations and equipment used are installed, maintained, overhauled, inspected and tested in accordance with the manufacturer's or constructor's instructions. These instructions are available on the worksite in the language of communication defined by ARISE Ivoire.

The integrity of workplace is ensured by systematic inspections before the installations and equipment are used.

Hazardous areas are signalled, and hazardous equipment is labelled. Workers are informed on the signification of hazard codes and on the restrictions of access to hazardous areas.

#### 15. Firefighting system

Firefighting systems with adequate, manual equipment that is easily accessible and simple to use and adapted to the fire risk of the construction site are installed and signalled clearly. The equipment should be maintained in good working order and be readily accessible. It should be adequate for the dimensions and use of the premises, equipment installed, physical and chemical properties of substances present, and the maximum number of people present.

Expiration date of firefighting equipment (fire extinguishers) is controlled and expired items are replaced. Regular inspection and maintenance of firefighting equipment is done according the supplier's recommendations.

#### 16. Working environment

The space provided for each worker, and in total, should be adequate for safe execution of all activities, including transport and interim storage of materials and products.

Facilities also should be designed and built taking into account the needs of disabled persons.

Sufficient air supply in all working environments is provided, especially in confined spaces.

Workplaces should, to the degree feasible, receive natural light and be supplemented with sufficient artificial illumination to promote workers' safety and health, and enable safe equipment operation. Supplemental 'task lighting' may be required where specific visual acuity requirements should be met.

Emergency lighting of adequate intensity should be installed and automatically activated upon failure of the principal artificial light source to ensure safe shut-down, evacuation, etc.

An adequate work environment temperature is maintained in all working environments and ventilation system in closed hot spaces is provided. Shelters are provided to workers to protect from the sun during work in high temperatures.

#### 17. Work with hazardous products

An assessment of the risks to the health of the personnel through exposure to hazardous materials is realized and describes the medical monitoring implemented.

The personnel wear adequate protection to prevent accidental contact with hazardous substances handled when it comes to acids, caustics and chemicals with corrosive and toxic properties.

#### 18. Hygiene of workers

Workers are provided with decent sanitary facilities (toilets and washbasins) equipped with toilet paper, running water, soap, and hand drying devices. The number and location of toilets will be adapted according to their configuration (distance, insulation, etc.) and the number of employees. The rule is to provide 1 individual toilets for 15 persons and 1 urinal for 25 persons. Separate sanitary facilities must be provided for women.

Sanitary facilities should be well located and easy to find. In addition, sanitary spaces should be well lit and ventilated or have exterior windows, have sufficient hand washing sinks and be well located.

The sanitary areas (showers, sinks, urinals, toilets) are cleaned and disinfected by the cleaning team at least once every 24 hours. The cleaning operations must be documented.



Where workers may be exposed to substances poisonous by ingestion and skin contamination may occur, facilities for showering and changing into and out of street and work clothes should be provided.

Based on the advice of qualified health personnel, staff is informed on the behaviors to be respected in terms of hygiene at work. Punctual information is not enough, employees must be regularly reminded of the importance of hygiene rules, documenting this reminder, and ensuring that they are understood, easily applicable and scrupulously followed.

Among the basic hygiene recommendations are:

- Always wash hands with soap after defecation and before handling food or eating.
- Do not drink untapped water.

## 19. Drinking water

Access to drinking water is always ensured for staff on the construction site.

The quantity and quality of this water must meet the standards set by the national regulation and the World Health Organization (WHO):

- Each worker has access to 3L of drinking water per day.
- The water must be considered as potable as per WHO standards (see § **Error! Reference source not found.**).

The type of drinking water supply for the worksite is not yet known but it could be through water tanks regularly supplied by external parties or through boreholes. ARISE Ivoire will update the ESMP to describe the type of water supply that is selected.

Unless the selected supply method comes from a certified supplier (e.g. bottled water or certified supplier), ARISE Ivoire tests the quality of the drinking water supplied to workers at the start of work and then at least on a monthly basis. If the water tests show results below WHO standards, the water is treated to reach WHO standards and the mode of treatment is described in the updated ESMP.

*N.B.: The collection and analysis of samples follow the protocol based on the recommendations of the World Health Organization<sup>1</sup>. The results are documented and made available in the construction site.*

The integrity of the water storage infrastructure (water tanks) is monitored to detect any leakage or infiltration.

## 20. Housing conditions

In the case of the presence of a base camp, it must be developed with adequate materials, functional sanitation and drinking water networks and waste collection and management infrastructures. All the facilities and infrastructures must be well maintained throughout the duration of the construction.

In the absence of a base camp and in the event that personnel are housed in reception facilities in the surrounding villages (hotels, guesthouses), good housing conditions are ensured, and the cost of housing is the responsibility of ARISE Ivoire.

In all cases, the housing conditions must follow the rules stated below:

- Provide separate rooms for men and women.
- Provide single beds in rooms that must comply with the following guidelines:

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<sup>1</sup> OMS. 2017. Guidelines for Drinking-Water Quality. Fourth edition Incorporating the First Addendum.

- bedrooms are lit and have a power outlet; the beds and windows are fitted with mosquito nets.
- floors are made of hard and waterproof materials.
- each bed is separated by a minimum of one meter.
- bunk beds are not recommended (for fire safety and hygiene reasons) and their use is restricted to a minimum. When they are nevertheless used, sufficient space must be provided between the bottom bunk and the top bunk. In general, a gap of between 0.7 and 1.10 metres is ensured.
- each bed is equipped with a comfortable mattress, pillow, blanket and clean sheets
- bed linen is washed frequently, impregnated with repellent and disinfectant, wherever necessary (for malaria prevention).
- Provide equipment in the rooms to store personal belongings, with a space of 0.5 m<sup>3</sup> and a shelf of 1 meter for each worker.

The sanitary facilities that must be provided are:

- 1 drinking water tap for 10 members
- An individual toilet for 15 members
- 1 urinal for 25 workers
- A shower for 10 members
- Separate showers are made available to women

The person in charge of housing management has the specific mission to report to the HSE supervisor the appearance of a contagious disease, food poisoning and any other worrying situation. The HSE supervisor in turn informs the health authorities concerned.

The temperature in rooms and common areas will be maintained at an acceptable level during occupancy hours (20 degrees in areas with moderate or cold climates, and with adequate ventilation in hot climates).

## 21. Food

Several food sellers are onsite to sell food to workers.

ARISE Ivoire conducts food sellers selection prior their arrival onsite. Only those who are agreed by ARISE Ivoire are able to sell food. Food is provided at a reasonable price and are prepared in the respect for hygiene rules during the preparation of meals. The food storage conditions are in compliance with good practices, especially regarding the cleanliness of the trucks, temperatures, the cold chain and use-by dates

Each SC provides to its workers a dedicated and covered clean eating area.

## 22. Medical check-up

The hiring of a worker is conditioned to the result of his pre-employment medical examination prior to hiring, which must certify that the candidate is physically suitable for the job for which he is applying. Unfit workers must not be employed.

All newly recruited staff members undergo a medical examination, carried out by a doctor or nurse qualified in this regard, prior to their mobilization on the construction site in order to check their fitness for work. It is sanctioned by a written medical certificate of fitness for the work planned for the worker.

For workers exposed to particular health risks (heavy noise or exposure to hazardous products), a specific medical check-up must be set up associated to a follow-up of the workers' health.

Annual medical visits are organized for all staff members and an up-to-date medical file is kept for each member of the staff.

The HSE supervisor is able to present a copy of the medical certificates of its staff at the request of the Construction site manager or any competent authority.

Any return to work by a member of staff after a stoppage related to a work accident is submitted to a prior medical examination giving rise to a written medical certificate of fitness to return to work at the designated position.

### 23. Pregnant and disabled workers

The refusal of recruiting a woman whose pregnancy was detected during the pre-employment medical examination is prohibited.

Pregnant workers must benefit from specific arrangements in their work schedule, work station and workload, that is adapted to their condition.

Persons with disabilities must benefit from special arrangements for in terms of work assignments and workstations.

### 24. Healthcare

ARISE Ivoire and its sub-contractors guarantee access to health care for all staff in the event of an accident or illness occurring during the execution of the work.

In order to set up its healthcare system, ARISE Ivoire will assess the capacities of the Anyama and Songon health facilities to ensure that they can provide the following medical services:

- a) Medical examinations: initial (pre-employment), annual and return to work after stoppage of work
- b) Screening, immunization and preventive health and to test and cure the main endemic diseases (especially malaria)
- c) General care during the work and treatment of minor injuries through small surgery and radiography
- d) Medical stabilization in the event of a serious accident and assistance during emergency evacuation

If the results of this assessment show that the local health facilities have the capacities to provide these services i.e. trained personnel and equipment, ARISE Ivoire will collaborate with local health authorities and make arrangements with a number of local doctors and / or nurses, health centres/hospitals and ambulance services to ensure the availability of medical staff, first aid equipment, infirmary and ambulance services at least within 45 minutes after the accident, on site or where the staff are accommodated.

If the results of this assessment underline a lack of capacity, ARISE Ivoire will:

- Identify one or several suitable health facilities that provides such services and that are reachable in a delay below 45 minutes by road in normal conditions.
- If such as facility is not available, deploy private medical personnel (doctor or nurse) on site.

ARISE Ivoire will then establish an agreement with a referral hospital providing well-equipped medical and intensive care, where emergency evacuees will be treated.

If private medical personnel are available on site and in the event of an accident or serious illness, the medical staff are trained, available and equipped with equipment, drugs and consumables to provide first aid to the patient, obtain stabilization of his condition, until the patient:

- (a) is treated or cleared to leave, or
- b) either hospitalized in a larger hospital, or
- c) be evacuated to a well-equipped medical center for intensive care, if necessary.

The OHHS plan will be updated by ARISE Ivoire when the details of the health care arrangements are known.

## 25. First-aid services

An intervention plan for first aid on the worksite is established by ARISE Ivoire covering in particular:

- readily accessible and visible first aid kits in each site area in sufficient quantity so that the time required to access them is approximately 5 minutes for all workers.
- one first aider, or an adequate number of persons (one first aider per 10 to 50 employees working on site) designated and trained to take charge of first aid measures (OHS staff).

The first aid kits can include:

- defibrillators,
- adhesive tape,
- antihistamine for allergic reactions,
- antibiotic ointment (such as bacitracin or neomycin),
- antiseptic solution or towelettes (disinfecting wipes),
- acetaminophen or ibuprofen,
- bandages in various sizes and shapes,
- cold pack (instant),
- compression (elastic) bandage for sprains and strains,
- cotton balls and cotton-tipped swabs,
- eyewash (sterile),
- gauze pads in various sizes to stop bleeding and cover wounds,
- gloves (latex or nitrile),
- hydrocortisone cream for stings and itchy, inflamed rashes,
- plastic bags for the disposal of potentially contaminated material,
- safety pins in different sizes,
- scissors,
- thermometer,
- tweezers, etc.

Staff and workers are well informed about first aid arrangements. A communication system (mobile phone, walkie talkie) is available immediately and only for the purpose of communicating with the emergency services.

The telephone numbers of emergency services and the names of service providers and doctors are displayed in the worksite office. Instructions on how to communicate with these services are equally displayed close to the communication system installations.

## 26. Evacuation and repatriation

If possible, a first aid vehicle is posted on the construction site during working hours. The vehicle is in charge of evacuating seriously injured or ill people to the reference health facility as planned in ARISE Ivoire healthcare system. Transport is guaranteed at all times and as soon as possible.

If there is no first aid vehicle available, ARISE Ivoire makes arrangements with a company specializing in the transport of seriously injured people requiring emergency medical evacuation.

In very remote areas or when the life of staff is clearly in danger, arrangements are made to provide for the use of air transport (if possible) in order to evacuate the injured person (s) to the referring hospital.

The medical repatriation of expatriate personnel will be taken in charge in the event of serious injury or illness, based on a rapid examination and diagnosis by the doctor. ARISE Ivoire subscribes to the required insurance for its expatriate personnel to cover the cost of supporting the medical repatriation of its staff.

## 27. Prevention of locally endemic diseases

The personnel are provided with prophylaxis against locally endemic diseases and disease vectors. Impregnated mosquito nets are distributed to all staff wherever their housing conditions, and their use is actively encouraged. Other prophylaxis means are put at the disposal of workers: sprays, creams, electric diffusers, etc...

Regular site inspections are conducted to identify water stagnation points and empty/complete them to avoid vector proliferation. If necessary, indoor residual spraying of mosquito products allowed by the WHO<sup>2</sup> are done in closed places. The proximity of the construction site and especially housing with cattle or animals and lush vegetation is avoided, as they attract mosquitoes.

## 28. Prevention of diseases with epidemic potential

ARISE Ivoire declares to the local health authorities any notifiable disease in the country of the Market such as: Botulism, Cholera, Yellow Fever, Viral haemorrhagic fevers\* (e.g. Ebola fever, Marburg fever, Crimean-Congo fever, Lassa fever), Anthrax disease (anthrax), Plague, Chikungunya, Etc.

Any person found or exposed to the contamination of one of the diseases covered by international health regulations, such as those mentioned above may be required to undergo health surveillance for a period equal to maximum incubation period laid down by that. When exposure to contagion occurs in a hospital setting, the suspect person is, as far as possible, kept under observation or in isolation for the same duration, if epidemiological circumstances so require.

The transport of persons suffering from the aforementioned diseases shall be carried out in a special vehicle which must be disinfected and, if necessary, disinfected after the journey and before any re-use of the vehicle. Disinfection may be carried out either by a public service or by a private undertaking, subject to the regulatory control of the operation by the health authority, which shall issue certificates.

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<sup>2</sup> [https://apps.who.int/iris/bitstream/handle/10665/69386/WHO\\_HTM\\_MAL\\_2006.1112\\_eng.pdf;jsessionid=FA03D4E9AFB6010506DA26FC1B5DE45D?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/69386/WHO_HTM_MAL_2006.1112_eng.pdf;jsessionid=FA03D4E9AFB6010506DA26FC1B5DE45D?sequence=1)

Contagious droppings or excretions cannot be discarded without having undergone a disinfection treatment. In particular, it is prohibited to spread them on the ground, manure or garbage piles and to discharge them into sewers or watercourses without having undergone treatment.

During the above-mentioned illnesses, the objects used by the patient and the persons assisting him/her, as well as all objects that may have been contaminated or soiled, must be disinfected.

For this purpose, these objects shall be collected under such conditions that they cannot be a source of contamination.

No person shall give, throw away or sell without prior disinfection any carpet or sheet, bed linen, linens or clothing used in or on the site occupied by such patients; objects of low value shall preferably be incinerated.

During illness, the cleaning of facilities and objects that may have been contaminated shall be carried out using hypochlorite or products and processes approved for this purpose.

It is forbidden to deliver, without prior disinfection, to laundries, public or private laundries, mattresses or other industrial establishments, any object or effect likely to have been contaminated.

In the case where terminal disinfection is compulsory, the premises occupied by the patient, his linen, bedding and the objects used, must be disinfected without delay by means of products, processes approved for this purpose.

Implementation of this requirement shall be evidenced by a certificate issued to the persons concerned by the health authority. This certificate shall designate the disinfected premises, without mentioning the patient's name or the nature of the illness.

## 29. Prevention against STDs and HIV/Aids

ARISE Ivoire takes all measures to reduce the risk of transmission of the HIV virus among the staff and workers and between the workers and the local community, to promote early diagnosis and to assist infected individuals.

These measures include:

- Carry out Information, Education and Communication (IEC) campaigns, at least once every two months, for all the staff and the workforce of the site (including the employees of the sub-contractors) regarding the risks, dangers and impact, and preventive behaviors to adopt with regard to sexually transmitted diseases (STDs) - or sexually transmitted infections (STIs) in general and HIV-AIDS in particular.
- Provide all the staff and the workforce with free male or female condoms as appropriate.

## 30. Prevention of COVID-19 epidemic

The following measures are applied for the prevention of COVID-19 epidemic in Cote d'Ivoire:

- Respect the instructions issued by the Ivorian health authorities in the fight against COVID-19.
- Present the exceptional organization of work before each taking up position (health and safety talk).
- In addition, give general instructions and recommend barrier gestures to be strictly observed:
- Always respect a minimum distance of 1 m between people, except special instructions.
- Correct and frequent hand washing with water and liquid soap, at least at the start of the day, at each change of task, and every 2 hours in the event of non-permanent wearing of gloves, after

impromptu contact with other people or carrying objects recently handled by other people, with disposable paper towel. Wash hands before eating, drinking and smoking.

- Use of friction with hydroalcoholic solution if washing is not possible.
- Remind staff of the need to avoid touching their face with or without gloves and without prior hand cleaning.
- Wearing a mask and compulsory glasses when the work is carried out within one meter of another person.
- Staff should be trained in the use of masks.
- Disposable masks must be changed every 4 hours and collected in bin bags dedicated solely for this purpose with a functional closure system (sliding link for example).
- Control the access of employees and other stakeholders to the construction site:
- Refuse access and have anyone with symptoms of illness, in particular cough with temperature (above 38.5 ° C), loss of smell and / or taste, stay at home with a surgical mask.
- Implement dedicated measures at the construction site:
- Ensure a strong and visible display of health instructions.
- Respect, in all circumstances, a distance of at least 1 m between people, in particular:
  - By dividing by two the nominal capacity of simultaneous reception for all installations (excluding offices)
  - Possibly, by organizing the passage orders
  - Possibly, by shifting the postings
  - Optionally, by setting up markers to ensure a distance of at least 1 m is respected: adhesive tape on the ground, barriers (for example with the use of tables and chairs), organization of internal circulation, etc.
  - By limiting access to meeting spaces and rooms.
- If possible, set up meeting, rest and break places outside.
- Ventilate the premises at least twice a day.
- Place several hand washing machine systems with access to a water point and soap or dispensers of gel or hydroalcoholic solution on construction site and impose hand washing before entering the site.
- Provide vials of gel or hydroalcoholic solution (if available) in frequented places and near contact surfaces (tables, counters, etc.).
- Provide disinfectant wipes in the toilets for disinfection before each use.
- Check several times a day that the soap, hand towel, disposable wipes and gel or hydroalcoholic solution (if available) dispensers are stocked.
- Ensure a daily frequency of cleaning of all common facilities with disinfectant. The cleaning work includes: floor, furniture, fixed workstations including a guard post. The most common contact surfaces (doors and handles, stair railings, windows and any other equipment where you can put your hands, toilets (including portable toilets) must be cleaned every 2 hours. The personnel in

charge of cleaning must be competent and properly equipped A cleaning follow-up register must be in place.

- Surgical masks and cartridges should be thrown away after each operation in a dedicated waste bag. Once the bag is full, it must be stored for 24 hours and then can be disposed of in accordance with the recommendations for household waste in the waste management plan.
- Non-disposable masks, glasses, face shields will be wiped with a disinfectant wipe inside and outside.
- Manage vehicles and machinery:
- Ensure the minimum distance of 1 m between people: 1 person per row maximum and staggered if several rows.
- In the case of shared vehicle use and for machinery, provide for the disinfection of the contact surfaces between users (steering wheel, control buttons, gear change handle, etc.) and the provision of disinfectant wipes and gel or hydroalcoholic solution.
- Limit the number of people to limit the risk of meeting and contact:
- Limit coactivity by reorganizing operations.
- Assign tools individually except in the case of systematic wearing of work gloves. Limit the loan of equipment between companions. Avoid the exchange of equipment or, failing that, disinfect the equipment between two companions if necessary.
- Before each start of the task, check that the operating modes allow the distance of at least 1 m to be respected. If this is not possible, check the wearing of glasses and surgical masks. Stop the activity if this is not possible.

### 31. Health requirements for expatriate personnel

Expatriate personnel is required to consult their doctor (possibly also their dentist) and to ensure that ARISE Ivoire has subscribed for them to an insurance contract covering medical expenses repatriation.

Expatriate personnel is required to use personal protection measures (sprays, creams, electric diffusers, mosquito nets...). To these measures must be added a medicinal treatment adapted to each individual: each expatriate should contact its regular doctor or a travel counselling center. Treatment should be continued after return to France for a period varying according to the product used.

During the expatriate stay, and during the two months following the return, in case of fever, a medical opinion must be taken quickly, to implement as soon as possible a possible antimalarial treatment.

Vaccination against yellow fever is mandatory (it must be carried out in an approved center). The use of diphtheria-tetanus-polio vaccination is recommended. Vaccination against meningococcal meningitis is strongly recommended. Other vaccinations that may be advised by your doctor are: typhoid fever, viral hepatitis A and B. Vaccination against rabies may also be offered in some cases.

Expatriate staff must be provided with medical advice to limit exposure to local endemic diseases by adapting their behaviors:

- Wash your hands thoroughly and avoid the collective towel.
- Avoid swimming in stagnant water (risk of parasitic infection).
- Avoid walking barefoot on sand and wet ground (risk of parasitic infection).



- Do not pet the animals you meet.
- Never take the medications you buy on the street.
- Pack your suitcase with all the medicine you might need.
- Use drinking water for the hygiene, drinking and washing of foodstuffs.
- Do not drink tap water. If the country does not have a water treatment system, use water delivered in an encapsulated bottle (which will be unsealed before you). If not available, only consume filtered, boiled and decontaminated water.
- Beware of "hidden" sources of contaminated water: fruits and vegetables that may have been washed with soiled water (must be peeled), ice cubes, ice creams and sorbets.
- Avoid seafood. Avoid inadequately cooked food (fish, meat, poultry, milk).
- When consuming in bars or restaurants, be sure that soft drinks are open at your table.

### 32. OHSS plan monitoring and reporting

The performance of the OHSS plan is monitored monthly and displayed into a monthly monitoring report that is shared to the construction site manager.

The report must contain the following data concerning the work:

- a) Progress against the OHSS plan
- b) A list giving a brief description of all incidents and dangerous situations
- c) The number of deaths
- d) The number of serious incidents
- e) The frequency rate of declared accidents
- f) The number and type of accidents with or without loss of time
- g) Serious illnesses
- h) The total number of near misses
- i) The number of flights
- j) The number of security incidents and the number and type of any other incident

Any degradation in the HSE performance must be countered by an HSE performance improvement plan.

On an occasional basis, HSE performance and the OHSS plan can be assessed by external HSE experts if ARISE Ivoire wishes to improve its performance.

<b>Monitoring indicators</b>	<ul style="list-style-type: none"> <li>• presence and effective wearing of protective equipment (PPE) on the construction site</li> <li>• number of JRA conducted</li> <li>• number of work permits delivered</li> </ul>
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	<ul style="list-style-type: none"> <li>• number of accidents that have occurred and type of accidents (lack of adequate equipment, flammable substances, road, welding work, etc.)</li> <li>• number of near missed accidents</li> <li>• number of sick workers and type of illnesses.</li> </ul>
<b>Reference documents</b>	<p>Water resource management and discharge monitoring plan</p> <p>Traffic and road safety plan</p> <p>Waste management plan</p> <p>Hazardous products management plan</p>
<b>Procedure approved by</b>	
<b>Emission/last revision date</b>	

