



BRIGHT HOLDER

EMERGENCY RESPONSE PROCEDURE



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1. Purpose

This procedure describes the process to implement a procedure to facilitate and organize personnel (employees, contract workers, visitors) actions during workplace emergencies through understanding their roles and responsibilities, will result in fewer and less severe injuries and less structural damage to the facility.

Continual Improvement, for Product and Process excellence, for sustaining customer satisfaction, for better control of Occupational Health and Safety risks will result in modifications to this procedure or shall develop site specific work instructions accordingly.

2. Responsibilities

Workplace Managers: The key responsible for the implementation of this procedure and maintaining relevant records considering the workplace emergencies in their respective facilities. Responsible to develop and review the site-specific emergency action and response plan whenever feels necessary. Responsible to design work areas and make changes in infrastructure, installation and changes of safety equipment's and materials, periodically test of emergency system to respond to emergency situation so that all will result in fewer and less severe injuries and less structural damage to the facility on identified potential emergencies. Communicate appropriate information to all concerned.

QHSE representatives / Supervisor: Support Corporate QHSE office on their facility related QHSE initiatives and as communication interface on QHSE matters, conducting mock drills at their respective facilities with Emergency crews, Inspection of safety equipment's, safety records update and maintaining, conduct trainings on the relevant subjects to all concerned by coordinating with operations.

Setting up workplace HSE nominees, team and coordinate their relevant activities in the Work area. Communicate the pertained updates to the facility / contract staffs / visitors through available and defined communication tools. Supervisor will be the QHSE representative by default.

First Aider: - Trained First aider shall provide first aid to the victim by assessing the situation and considering the severity of the incident/ illness. The relevant details shall be recorded in the First aid box Monthly monitoring log and would ensure the first box is suitably stocked with the support of concerned. He may be a member of Emergency crews.

The First Aid Devices Controller may be the First Aider itself or a nominee in the absence of trained First aider. The role of this appointed person includes looking after first-aid equipment and facilities and calling the emergency services when required.

Emergency Crews: - Demonstrate the emergency procedures in various situations; Ensure facility employees / other site visitors are following the correct emergency procedures during mock sessions and real emergency situations. The crew may have to deal with several emergencies such as fires or first aid situations, need to work quickly and efficiently and required to be calm under pressure. Coordinate with all concerned on various HSE aspects. The Emergency crews may include evacuation wardens, fire wardens, QHSE Representatives, Supervisors, First Aiders etc... as per the complexity of facility processes.

Employees: Responsible for not placing themselves or others at risk of injury, reporting any hazards associated with the working environment, work tasks or activities to their line manager/ HSE nominees as soon as becoming aware of them. Support QHSE representative in their Workplace QHSE activities.

HSE Team / HSE committee: Responsible for assessing the processes is appropriate to the nature of the work, thus suitable, sufficient and it remains valid for the period of time to manage the potential emergency situations identified. Periodical review of relevant records and where necessary, revises their emergency preparedness and response procedure/s.

QHSE Corporate Office: Internal Auditors initiate a corrective action by nonconformance identified during their internal audits and verified its compliance.

Develop / review corporate level process in comply with required standards and communicate to respective workplaces.

3. Definitions

Interested party: Person or group, inside or outside the workplace, concerned with or affected by the OH&S performance of an organization.

Workplace: Any physical location in which work related activities are performed under the control of the organization.

QHSE: represents Quality, Food Safety, Occupational Health & Safety and Environment.

QHSE Representatives: May be QHSE personnel specially appointed for performing facility related QHSE activities or a nominee represented by the respective facility and where present will be included in the activities as mentioned in the procedure.

First Aid Devices Controller: Shall be the First aider itself or an appointed person to take charge of first aid arrangements in the absence of the First aider.

Line Manager: Shall be his immediate Supervisor. HSE: Health, Safety, Environment
OHSMS: Occupational health and safety management systems

Equipment/Software:

MS Office, Communication equipment's, First Aid box, Additional First Aid devices / Safety devices (considering the workplace safety assessments / potential emergencies)

4. Instructions

Workplace Emergency

A workplace emergency is an unforeseen situation that threatens the employees, customers or the public, disrupts or shuts down the operations or physical process or environmental damage.

Emergencies and disasters can strike anyone, anytime, and anywhere. Evacuation of the workforce is probable when least expected. The response plan has been designed to mitigate the impact and get operations back on stream as soon as possible. The best way to protect our self, our workers, and our business is to expect the unexpected and develop a well-thought-out emergency action plan to guide us when immediate action is necessary.

It is important to know how to report and respond in case of emergencies.

Potential Emergencies

Common sources of emergencies identified in the business include-

- Fire
- LPG leakage
- Chemical spills
- Explosions
- Workplace Incidents / violence resulting in bodily harm / trauma
- Terrorist threats/ acts

5. Emergency Response Plan (ERP)

The ERP outlines the basic preparedness steps needed to handle the anticipated emergencies at the work site although ERPs are not meant to be all inclusive; they should provide appropriate guidance on what to do in an emergency. Anticipating emergencies and planning the response can greatly lessen extent of injuries and limit equipment, material and property damage.

The following elements are considered in the ERP

- Means of reporting fires and other emergencies
- Evacuation procedures and emergency routes and exits
- Procedures to be followed by employees who remain to operate critical operations before they evacuate
- Procedure to account for all employees to after an emergency evacuation has completed

- Rescue and medical duties for those employees who are to perform them

6. Reporting Fires and Other Emergencies

The commitment and support of all employees are essential to the plan's success in case of emergencies. In case of emergencies that require response from employees, will be typically alerted by an alarm system to evacuate the workplace or perform other actions to operate critical operations before they evacuate. Ideally all employees in the facility will be able to hear the alarm.

Dialing ... 134 - 124 - 104..... is the common method for reporting emergencies if external emergency personnel are used at the facility. Emergency calling list (A current list of workplace key personnel and public emergency services contact numbers) are prepared by each facility and posted near telephones, or employee notice boards, and other conspicuous locations where telephone serve as a means of reporting / notifying emergencies to all concerned. Other personal contact numbers are available with Security and Secretary / QHSE representatives / Supervisors.

Services	Emergency Number
Ambulance	122
Police	134 - 124 - 104
Fire Service	066109

While you are making an emergency call, it is important to convey the message by

“Giving your name, location and the nature of the emergency as far as practicable”

7. Emergency Evacuation Plan and Procedures

Evacuation lay out for specific facility locations are developed from floor diagrams with clearly highlighted arrows to indicate the designated exits. These maps would include locations of exits, assembly point/s, employee's current location in the building (legend "You Are Here") and equipment's (such as fire extinguishers, first aid kits, fire glasses, legends etc.) The evacuation lay outs are posted on workplace notice boards or other conspicuous locations. Emergency exits are labelled and lit, exit direction signage are installed / posted wherever necessary.

The evacuation instructions / response are as follows for the identified potential emergencies,

Fire

When responding to an initial stage fire:

- Don't get panic or make the situation panic
- Break the Fire glass nearest to you, will activate the fire alarm and sounds
- Call emergency number 066115..... or Report to the key personnel on duty (if appropriate)
- Identify a safe evacuation path before approaching the fire. Don't let the fire, heat, or smoke to come between you and your evacuation path

Discharge the proper extinguisher (don't use water extinguisher for electrical fires) within its effective range using P.A.S.S technique,

- o Pull the pin.
- o Aim the nozzle at the base of the fire.

- o Squeeze the handle.
 - o Sweep from side to side.
- Back away from the extinguished fire in case it flames up again
- Evacuate the building immediately if the extinguisher is empty & fire is not out / if the fire progresses beyond the incipient stage
- Evacuate using the safe evacuation path, if no other alternative use the exit through a ground floor window, but beware of broken glasses
- Turn off the critical equipment's by the designated employees (if practicable)
- Reach the Assembly Point (Call emergency number066115..... or Report to the key personnel on duty if prior reporting not done)
- Give the head count
- Assist Emergency crews if requested and as necessary
- Do not return to the evacuated building unless told to do so by the emergency crews

Note: Do not use elevators for evacuation

If the visitor/ contractor / employees are in a confused level to take a critical decision to fight with fire, should evacuate immediately through a safest route and report at the nearest Assembly point.

Note: - Assist employees or visitors only in cases you're designated and trained (emergency crew) or if possible and prudent (later ensured that you are safe for anytime evacuation to the nearest Assembly point).

8. LPG leakage

- Evacuate as soon as possible
- Gather in assembly point.
- Call emergency Number : 066115

9. Chemical Spills

- ✓ Restrict further access to the area
- ✓ Stop the source of Spill, If possible
- ✓ Use appropriate substances not to spread the spills (Spill kit, sand, saw dust etc)
- ✓ Evacuate the building if it is uncontrollable
- ✓ Gather in assembly point
- ✓ Call emergency number..... 066115.....

Note: Dispose of the spill-cleanup materials carefully.

10. Explosions

- Stay away from glass windows / doors, immediately take cover under tables, desks and other objects, which will give protection against falling glass or debris
- Do not light matches.
- After the effects of the explosion and /or fire have subsided, notify the Emergency & Security Services.
- If necessary, or when directed (emergency crews) to do so, activate the building fire alarm.
- Identify the situation and evacuate if safe or you are directed to do so by the emergency crews.
- Move away from the hazard site to a safe location.

- If instructed to evacuate, walk quickly to the nearest marked exit and ask others to do the same considering the situation. Do not use the elevators in cases of fire.
- Assist others / disabled persons in exiting the building only if possible and prudent
- Report at the Assembly area and give the head count
- Confirm the emergency call has performed
- Inform the nearest police station
- Assist Emergency crews if requested and as necessary
- Do not return to the evacuated building unless told to do so by the emergency crews

Workplace Incidents / Violence Resulting In Bodily Harm / Trauma

- Contact workplace key personnel from the Emergency calling list
- Contact First aiders / Emergency crews
- Trained First aider shall provide first aid to the victim by assessing the situation and considering the severity of the incident / illness
- Call 122..... for medical assistance
- Assist First aider / Emergency crews if requested and as necessary.

11.Wounds

To stop bleeding:

- Follow the general precautions, including wearing gloves, if available.
- Apply direct pressure to the wound, if necessary, to stop bleeding.
- Protect the wound from contamination by covering it with a sterile dressing.
- Keep the victims from going into shock by laying them down to make them comfortable (not too hot or cold) and elevating their feet. If the victim has a head wound, don't elevate their feet.

Fractures

It can be difficult to distinguish between a bone, joint or muscle injury - so if in doubt, treat the injury as a broken bone. The main aim is to prevent further injury by keeping the casualty as like and ensuring they get safely to the hospital. If you suspect a broken bone,

- Support the limb

Leave the casualty in the position found. Secure and support the injured part. You can use rolled up blankets, cushions, clothes or whatever you have handy.

- Get the casualty to hospital

Assess the severity of the injury and decide how to get them to hospital. For example, if they have an arm injury, you may be able to drive them yourself. If you suspect a broken leg or a spine or neck injury, call
122..... for ambulance.

- Treat for shock if required

Look for signs of shock including pale, cold and clammy skin, rapid then weak pulse, fast & shallow breathing, sweating and complaints of nausea and thirst.

If you suspect shock, lie the casualty down and raise their legs above the level of their heart. Make you keep the casualty warm.

- Sprain and Strain

It's difficult to differentiate between a sprain and a strain. A sprain occurs at a joint and involves ligaments – most commonly a sprained ankle. A strain is an injury to muscle or tendons and tends to occur when the muscle is stretched – for instance when trying to shelve items on racks manually especially heavy items. The initial treatment for both injuries is the same – the RICE procedure:

- Rest the injured part
- Ice – apply ice or a cold pad to the injured area
- Comfortably support the injury using a bandage or soft padding
- Elevate the injured part
- Call 122..... in severe cases or admit to the nearest medical center

Shock

Shock can be fatal.

In the event shock sets in, symptoms might include pale, cold skin, rapid pulse, quick shallow breathing, and weakness.

- Lay the victim face up on a blanket or coat if possible and raise the feet above the head unless they are fractured. If the person is bleeding from the mouth or vomiting, tilt their head to the side to avoid fluids going into the lungs and airways. If you are unsure of injuries keep the person laying flat.
- Loosen tight clothing, braces, belts jewellery...etc to avoid constrictions of the waist, neck and chest.
- Keep victim comfortable and warm enough to be able to maintain their own body heat. If possible, remove wet clothing and place blankets beneath the victim.
- Place victim on his/her side if they are unconscious.

Heart Attack

If a person has the following symptoms:

- Prolonged, oppressive pain or unusual discomfort in the center of the chest behind the breastbone
- Pain radiating to the shoulder, arm, neck, or jaw
- Pain or discomfort accompanied by sweating, nausea, vomiting, and shortness of breath
- Symptoms sometimes subside and then return
- Make the individual as comfortable as is possible (loosen tie or tight fitting clothes, seat them or have them lie down – whichever makes them feel better)

Stroke

A stroke – or brain attack – occurs when the blood supply to the brain is disrupted, which can leave many long term disability or may leads to death. When dealing with a stroke, speed is of the essence. The earlier the casualty receives treatment, the better. Use the FAST (Face-Arm-Speech-Test) guide to understand stroke symptoms and provide immediate medical assistance to the casualty.

F – Facial weakness: the person is unable to smile and their eye and /or mouth is droopy

A – Arm weakness: the person is only able to raise one arm

S – Speech problems: the person is unable to speak clearly or can't understand the spoken word

T – Time to call 122..... for emergency help.

Fainting

If an individual feels faint:

- Seat the individual.
- Have them lower their head between their knees to increase blood flow to the head.
- If the individual actually faints, position them on their back with head turned to one side.
- If the individual regains consciousness, keep them quiet and lying down for at least fifteen minutes or until medical help arrives.

Minor Burns and Scalds

- Gently remove any jewellery, watches, or constricting clothing from the injured area before it starts to swell. Don't remove anything sticking to the burn. This may cause further damage and cause infection
- Cool the burn as quickly as possible by placing the affected area under cold running water for at least ten minutes
- Cover the injury with a sterile dressing, or any clean, non-fluffy material to protect from infection. A clean plastic bag or kitchen film may be used. Seek medical assistance if necessary.
- Don't use adhesive dressings
- Don't break blisters or interfere with the injured area
- Don't apply lotions, ointments, creams or fats to the injured area
- In limbs, raise the limb to reduce swelling
- Dial 122..... in severe cases, don't touch or interfere with the injured area and ensure the emergency services are on its way.

Chocking

The below instructions are to be followed in cases of chocking for anyone aged over one year, who seems unable to speak, cough or breathe and has a severe obstruction in their throat.

- Give up to 5 back blows between the shoulder blades with the heel of your hand.
- Check the mouth quickly after each one and remove any obvious obstruction. If the obstruction is still present,
- Give up to 5 abdominal thrusts. Place a clenched fist between the navel and the bottom of the breastbone and pull inwards and upwards. Check the mouth quickly after each one.
- If the obstruction does not clear after three cycles of back blows and abdominal thrusts, dial 122..... for an ambulance
- Continue cycles of back blows and abdominal thrusts until help arrived and resuscitate, if necessary, as described under CPR.

Any casualty who has been given abdominal thrusts must seek medical advice

Cardiopulmonary Resuscitation (CPR)

If the victim stops breathing, apply mouth-to-mouth resuscitation only if you are trained and certified to do so:

Note: Do not perform CPR unless you can do so without harming yourself or the recipient.

Always check for an Airway, Breathing, and Chest movement (ABC) before starting CPR

In the event the person stops breathing:

- Instruct a bystander to call for help for the medical assistance.
- Utilize universal precautions (use breathing mask and protective gloves), if possible, to minimize yours and the victim's exposure to potentially infectious agents.
- Lay the person on their back.
- Place one hand on the person's forehead, the other under their neck as you tilt the person's head back. Grasp their chin and pull the lower jaw up so that it juts out, opening the airway.
- Pinch the person's nostrils closed and cover their mouth with yours or a breathing mask.
- Give two slow breaths while watching the victim's chest rise when air passes through their open airway. If the chest fails to rise, check for obstruction in the person's mouth, readjust head tilt and repeat breaths.
- Give one breath every five seconds, removing your mouth each time to allow air to escape through the person's mouth.
- To administer CPR to an infant, place your mouth over the child's nose and mouth and blow gently. Give one breath about every three seconds, removing your mouth each time to allow air to escape.

If unable to ventilate the victim, reposition the head and try again. If still unable, perform the procedure as described under Choking. Resume mouth-to-mouth resuscitation until the individual begins breathing on their own / until help arrive.

12. Terrorist threats / acts

- Do not accept packages from strangers
- Report any suspicious activities to the workplace key personnel from the Emergency calling list
- Call 134 - 124 - 104..... accordingly for your local authorities
- Evacuate building in accordance with the established emergency evacuation plan (locate staircase and exits) later observing the environment and ensured you are safe as possible
- Exercise caution when you make moves
- Gather in Assembly point and give head count
- It's important that you remain calm and cooperate fully with local officials, Failure to follow instructions from local officials could cost you and others their lives
- Take necessary medical attention as necessary

13. Instructions for Critical Operators and Emergency Crews

Employees who may remain (Emergency crews / to shut down critical operations / certain equipment or utilities such as gas, electrical systems etc... that could create additional hazards to rescue teams) before evacuating must be capable of recognizing when to abandon the operation or task (fire is too big to fight; air safe to breathe; environment too hot or smoky; safe evacuation path) and evacuate themselves before their egress path is blocked. It is important to mark in plan, where the utilities (such as electrical and gas) can be shut down for all or part of the facility by the critical operators (usually will be the members of the emergency crews) as applicable.

The Emergency crews will help the employees / visitors to move from danger to safe areas during an emergency where practicable. The appropriate number crews will be available in every facility at all times during working hours.

The Emergency crews may be responsible for checking offices, bathrooms, and other spaces before being the last person to exit an area. They might also be tasked with ensuring that fire doors are closed when exiting. All Emergency crews to assist in emergency evacuation procedures should be trained in the complete workplace layout and various alternative escape routes if the primary evacuation route becomes blocked. Employees designated to assist in emergencies should be made aware of employees with special needs (who may require extra assistance during an evacuation), how to use the buddy system and any hazardous areas to avoid during an emergency evacuation.

Facility may maintain all visitors and contractors sign in entering the workplace and Emergency crews use this list when accounting for all persons in the assembly point.

14. Accounting Personnel after Evacuation

Accounting for all personnel following an evacuation is critical. The assigned Emergency crews will take a head count after evacuation at the assembly area. The names of unaccounted personnel and their last recognized locations will pass to the official in charge (may be from the company and / or of local public authorities). It is important not to make any type of confusions at the assembly area, which shall lead to delays in rescuing anyone trapped in the building or unnecessary and dangerous search and rescue operations by the concerned officials.

For further evacuation necessary in case the incident expands, the additional method of sending personnel home by normal means or providing them with transportation to an offsite location.

15. Emergency Team, Rescue and Other Services

GCC has a HSE Committee which comprises of nominees from each Department / Business Unit, as per the size and distribution of the department. The Leader of this committee is the Management Representative (MR).

The roles and responsibilities

of the HSE Committee members are communicated to them. This team will work to ensure and monitor the QHSE

Compliance as per the standards.

Apart from that each Department / Area / Shift (according to the size) has HSE coordinators (Generally QHSE Representative) to take care of the HSE relevant subjects. HSE team also will be available in every facility/ department / business unit (according to the size of the department) headed by the HSE coordinator. It is their responsibility to report incidents, conduct mock drills, develop evacuation plan, posters and signage, maintain shift roster and the details of disabled employees etc.

The Emergency crews are nominated in every facility / department / business unit (as per the size and distribution of the department) to take care of the procedures / responsibilities mentioned all through this procedure. The Emergency crews may include evacuation wardens, fire wardens, QHSE Representatives, Supervisors, and First Aiders etc... as per the complexity of facility processes.

Note: By default, the supervisors will be the QHSE Representative for their area /department / shift (Where QHSE Representatives are not available).

The organization relies on Local public resources such as fire services, hospitals, police authorities or appropriate services as necessary.

16. General Practices

a. Mock Drills

The purpose of the mock drill is to analyze the personnel responses and corrections & corrective actions. Mock drills are conducted / lead by the QHSE Representatives as per the designed frequency (At least once in a year) and reports are prepared. Lessons learnt from each mock drill are recorded at the report and communicated to all at the safety briefings generally during toolbox meetings.

b. Periodic Inspections

Periodic inspections of safety equipment's and alarm systems are essential in a preparedness planning. Fire extinguishers and Fire hose reels will be inspected by QHSE Representatives monthly. The sprinkler system and smoke detectors where applicable are checked annually /as contracted by the Outsourcing Agency. Any defaulted system or device will be replaced /repaired immediately

c. Periodic review

Emergency Preparedness and Responds procedure and the related work instructions if any will be reviewed periodically to accommodate the changes according to the feed backs from mock drills, test reports, risk assessments, incident reports and best practices from similar operations and suggestions from experts or employees. Modified procedure shall be communicated to all concerned.

Various level meetings such as HSE Committee, HSE Team and Staff Meetings will be conducted on a regular basis specifically to communicate individually and collectively with the staff and to provide an opportunity to establish a clear path for communication from the staff to management. Relevant HSE updates shall be posted on facility notice boards to communicate with all concerned. Meeting minutes will be prepared as necessary.

Emergency responsibility matrixes with their names, titles / role, phone numbers and emergency responsibility will be prepared and communicated to all concerned for additional information or clarification of some aspect of the plan.