****

**Kaius Resources**

**Mine Operating Procedure – Fitness for Work**

Reference: MOP-011

Table of Contents

[1. Purpose 3](#_Toc75784610)

[2. SCOPE 3](#_Toc75784611)

[3. AUTHORITY 3](#_Toc75784612)

[4. RESPONSIBILITIES 3](#_Toc75784613)

[5. DEFINITIONS AND ABBREVIATIONS 4](#_Toc75784614)

[6. PROCEDURE 5](#_Toc75784615)

[6.1 Obligations 5](#_Toc75784616)

[6.1.1 Mine Worker Obligations 5](#_Toc75784617)

[6.1.2 Kaius Mine Obligations 6](#_Toc75784618)

[6.2 Physiological Disturbance / Stress 6](#_Toc75784619)

[6.3 Physical and Psychological Impairment 6](#_Toc75784620)

[6.4 Declaration of medication 6](#_Toc75784621)

[6.4.1 Potential Contributors to Physical and Psychological Impairment 6](#_Toc75784622)

[6.4.2 Understanding the Symptoms 7](#_Toc75784623)

[6.4.3 Reporting for Work 8](#_Toc75784624)

[6.4.4 Illness while at site 8](#_Toc75784625)

[6.4.5 Work Restrictions resulting from impairment 8](#_Toc75784626)

[6.4.6 Medical Examinations 8](#_Toc75784627)

[6.4.7 Disclosure of Information 10](#_Toc75784628)

[6.5 Prohibited Drugs and Alcohol on Site 10](#_Toc75784629)

[6.5.1 Alcohol Limits 10](#_Toc75784630)

[6.5.2 Drug Limits 10](#_Toc75784631)

[6.5.3 Testing Types 10](#_Toc75784632)

[6.5.4 Alcohol Breath Testing 12](#_Toc75784633)

[6.5.5 Drug Testing 13](#_Toc75784634)

[6.5.6 Refusal to Test 14](#_Toc75784635)

[6.5.7 Tampering with a Drug or Alcohol Sample 14](#_Toc75784636)

[6.5.8 Confidentiality Privacy and Records 14](#_Toc75784637)

[6.6 Training 14](#_Toc75784638)

[7. REVIEW CRITERIA 14](#_Toc75784639)

[8. SAFETY AND ENVIRONMENT 14](#_Toc75784640)

[9. ATTACHMENTS, REFERENCES AND RELATED DOCUMENTS 15](#_Toc75784641)

[9.1 References and Related Documents 15](#_Toc75784642)

# Purpose

To provide a documented procedure for the Kaius Mine to manage mine worker’s Fitness for Work and to reduce the risk to an acceptable level.

# SCOPE

This Mine Operating Procedure (MOP) applies to all activities at sites operated and/or under the control of Kaius Pty Ltd and its subsidiaries. It applies to all persons working on the site including exploration personnel, permanent, temporary and contract employees. This MOP forms a key part of the Kaius Safety & Health Management System which has been established to manage risk to an acceptable level and in accordance with all relevant legislation

# AUTHORITY

This procedure can only be altered with the approval of the Site Senior Executive (SSE).

# RESPONSIBILITIES

Site Senior Executive (SSE)

Site Senior Executive shall ensure:

* That all of the provisions of this MOP are implemented and that compliance is achieved;
* Adequate resources are provided to maintain compliance with the requirements of this MOP;
* The application and requirements of this MOP are periodically audited and reviewed; and

Supervisors

Supervisors shall ensure:

* The requirements of this MOP are implemented;
* That workers, including contractors, are trained in the requirements of this MOP;
* All work undertaken within their area of responsibility is conducted in accordance with the requirements of this MOP;
* They monitor compliance with this MOP;
* This Standard is readily available to all workers and contractors;

Mine Workers

Mine Workers shall:

* Undertake the training and assessment provided by the SSE;
* Act in accordance with this MOP; and
* Not undertake any tasks for which they are unable to safely complete.

# DEFINITIONS AND ABBREVIATIONS

The following definitions and abbreviations are used in this procedure.

|  |  |
| --- | --- |
| AMA | Approved Medical Adviser |
| Authorised Person | A competent person who has been authorised in writing by the SSE  |
| BAC | Blood Alcohol Concentration |
| KRES | Kaius Mine |
| MQSHA | Mining and Quarrying Safety and Health Act (1999) |
| MQSHR | Mining and Quarrying Safety and Health Regulation (2017) |
| Competent Person | A person who has the necessary training, skills and capability to carry out the task |
| EAP | Employee Assistance Program |
| Medical Specialist | A specialist under the Medical Act 1939 for a branch of medicine that is relevant to the worker’s condition. |
| MW | Mine Worker |
| MOP | Mine Operating Procedure |
| Physical Impairment | A temporary or permanent physical condition, where a person is incapable of carrying out their allocated duties in a safe and healthy manner. |
| Psychological Impairment | A person’s state of mind resulting in their inability to make normal, rational decisions that affect routine work and may place someone at risk of injury. |
| Prohibited Drugs | Any illicit drugs and substances, non-declared medication or drugs and substances which may affect fitness for work |
| Shall | Indicates that a statement is mandatory |
| SHEMS | Safety, Health and Environmental Management System |
| Site | Any areas inside the mining lease boundaries (eg. Camp, workshops, operational areas, exploration areas, carparks) |
| Should | Indicates a recommendation |
| SSE | Site Senior Executive |

# PROCEDURE

The Kaius Mine Project takes a “Zero Tolerance” view on proven breaches of fitness for work requirements in relation to Drugs and Alcohol.

Proven breaches of this procedure will result in removal of site and accommodation privileges.

## Obligations

### Mine Worker Obligations

Mine workers have an obligation to present fit for work. and be able to carry out their duties without risk to themselves or others. This includes travel to and from work each shift.

Mine workers shall ensure they do not report for work or perform work where they are not fit or where they are suffering the adverse effects of fatigue, stress, alcohol or drugs.

Mine workers shall notify their manager or supervisor of any concerns they may have which may have the potential to impact on their safety, or the safety of others. Mine workers shall not start work or continue work where they are unfit for duty.

It is the obligation of all mine workers to monitor their own health to ensure that they remain fit for work. A mine worker should ensure that:

* They display respect for others – harassment and anti-social behaviour (violent or offensive) shall not be tolerated;
* They undergo regular health and fitness assessments;
* They undergo health assessments in accordance with the relevant legislation;
* Their treating medical practitioner is aware of the physical requirements of their position;
* They comply with treatment advice provided by their treating medical practitioner;
* They obtain information from their treating medical practitioner about the impact that any injury or illness they may be suffering from will have upon their capacity to carry out the duties of their position safely;
* They take adequate and regular breaks so that they can rest, eat and rehydrate;
* They ensure adequate rest and sleep is obtained away from work so they can arrive at work ready for duty; and

They provide accurate information to their manager or supervisor about the state of their health and alert their manager or supervisor to any health issue that they are aware of that may impact their capacity to safely carry out the duties of their position.

If a mine worker knows or suspects that they are physically or psychologically impaired they are obligated to report the details of the impairment to their supervisor and only work if they are fit to do so.

It is also a mine worker’s obligation to provide all relevant information to the SSE so that it may be used to assist in providing a safe workplace and ensuring an acceptable level of risk.

### Kaius Mine Obligations

The KRES has a duty of care to provide a safe working environment to all its mine workers. This involves all levels of management taking reasonable measures to ensure that all mine workers who perform work at the site are fit for work.

## Physiological Disturbance / Stress

It is recognised that grief, stress, fatigue, illness or some other physiological disturbance can render a mine worker unfit for duty and hinder their ability to work safely.

Mine workers who believe they are unfit for these reasons shall report to their supervisor.

Where a mine worker reasonably believes that another mine worker is affected and has the potential to place a person’s safety at risk, they shall notify their supervisor.

KRES fatigue management requirements are set out in MOP-042 Fatigue Management.

## Physical and Psychological Impairment

A person is suspected to have physical or psychological impairment if due to an illness, injury or other condition that person is unable, wholly or partly, to carry out the duties for which they are employed without an unacceptable level of risk.

A mine worker may be impaired due to a workplace injury or illness, or a non-workplace injury or illness, this applies in relation to both situations.

Mine workers who are impaired or have been impaired due to an injury or illness shall provide a clearance from a medical practitioner that satisfies the requirements of the SSE prior to commencing work.

## Declaration of medication

 Mine workers shall declare any/all medications they are taking to their supervisor. A Medical Condition and Medication Declaration Form shall be completed when taking prescription or over the counter medications.

 Advice on the effects of the medication shall be sought from the site paramedic prior to the mine worker being assigned to any duties – this may include site access being revoked until the mine worker can demonstrate that they are fit for work.

When declaring prescription medication, the mine worker shall provide a copy of the prescription or a letter from their treating physician.

### Potential Contributors to Physical and Psychological Impairment

Potential contributors to physical and psychological impairmentmay include (but are not limited to):

**Roster Design:**

* Night shifts;
* Split shifts;
* Incentives to work excessive hours;
* Insufficient breaks between shifts;
* Abnormal start/finish times (e.g. a start time between midnight and 6 am); and
* Roster changes that do not allow an adequate rest period between shifts.

**Task-Related Contributors:**

* Repetitive or monotonous work;
* Sustained physical or mental effort; and
* Tasks requiring sustained awkward postures or body positioning.

**Work Environment Contributors:**

* Bullying and other psychological workplace stresses;
* Excessive commuting times;
* Adverse working conditions such as extremes of temperature and poor lighting; and
* Glary or highly reflective lighting conditions.

**Non-Work Related Contributors:**

* Family / social commitments;
* Sleeping disorders (e.g. insomnia, sleep apnoea);
* Psychological issues;
* Lack of physical exercise;
* Poor nutrition and dehydration;
* Alcohol and drug use;
* Inappropriate use of pre-work out supplements;
* Second jobs / non-paid work;
* Medical conditions; and
* Medications.

### Understanding the Symptoms

Symptoms of physical and psychological impairment, may include (but is not limited to):

* Shortness of breath when carrying routine tasks;
* Unusual sweating, normally accompanied by pale skin tones;
* Hot, but dry, skin accompanied by complaints of nausea or light-headedness;
* Chest pains or numbness in limbs;
* Inability to focus vision or failing vision;
* Vertigo or balance problems;
* Weakness in limbs;
* Unusual behaviour;
* Vagueness or inability to concentrate on the task at hand;
* Incoherent speech;
* Limited concentration span;
* Open talk of personal harm or suicide; and
* Emotional distress.

Fitness for Work Form may be used to assist supervisors with assessing mine worker’s fatigue levels. Supervisors shall provide assistance to mine workers demonstrating potential fitness for work issues to ensure that they do not pose an unacceptable level of risk to themselves or other mine workers.

Each matter shall be managed on a case by case basis and handled with strict confidentiality and sensitivity for the individuals concerned.

### Reporting for Work

A mine worker shall NOT report to work unfit because of any of the following (non exhaustive list):

* With levels of illegal drugs in their body that is at or in excess of the limits specified in the Standard. With an equivalent Blood Alcohol Concentration (“BAC”) at, or in excess of 0.000%;
* With detectable levels of prescription or non-prescription medication exceeding cut-off levels specified in AS4308;
* From taking prescription medication or over-the-counter medication that will affect their ability to safely perform their work; and
* When knowingly suffering from fatigue, illness or a physical or psychological condition that will affect their ability to safely perform their work.

### Illness while at site

In the event of illness, notify your supervisor. Do not proceed to work or continue working until clearance is given by the site paramedic or a doctor.

### Work Restrictions resulting from impairment

There may be instances where a mine worker may work at the mine when they are physically or psychologically impaired.

If a mine worker’s treating medical practitioner has advised work restrictions due to the mine worker’s health, then a mine worker shall provide that information to their supervisor and the SSE.

If the SSE seeks further information or wishes to speak to the mine worker’s treating medical practitioner, then the mine worker shall cooperate for the purposes of ensuring that this occurs so that the mine worker can work safely at the mine.

The mine worker and the mine worker’s supervisor shall review any work restrictions and ensure that the mine worker does not carry out any duties which breach the restrictions.

The SSE may require the work restrictions to be reviewed by a medical practitioner. This may require the mine worker to submit to a medical examination by a medical practitioner designated by the SSE. The mine worker shall cooperate with any medical examination required by the SSE for the purpose of review of work restrictions.

The mine worker’s continued site access whilst restrictions are in place shall be at the discretion of the SSE.

### Medical Examinations

Prior to the commencement of work on site, all mine workers shall submit an Approved Form - Section 4 - Health Assessment Report. The health assessment (among other records) shall be reviewed and approved before the mine worker can be enrolled in the site induction and gain site entry.

It is the responsibility of the mine worker’s employer to arrange health assessments. Health assessments shall be carried out at a minimum of every 5 years.

A respiratory function and chest x-ray examination shall be completed if the person is not yet employed as a mine worker, and then at least once every 10 years (unless deemed unnecessary by risk assessment). A comparative assessment of the person’s respiratory function shall be carried out with their previous results.

Any restrictions outlined on the approved form are assessed on a case-by-case basis, and if deemed necessary by the SSE, a health management plan in relation to the restrictions may be required before the mine worker is authorised to enter site.

If a mine worker has been absent from work due to illness or injury and the SSE is concerned for any reason about the mine worker’s capacity to carry out the duties of their position safely with an acceptable level of risk, the SSE may require the mine worker to undergo a medical examination by a medical practitioner.

The SSE shall ensure that the medical practitioner is provided with details of the mine worker’s tasks and if appropriate the tasks of any alternate position nominated by the company.

If a medical examination is carried out by a doctor other than the AMA, the health assessment shall be completed on the approved form and be reviewed by the appointed AMA. It is the responsibility of the AMA to provide the SSE with the health assessment report.

If the AMA appointed by the SSE requires information from the mine worker about their health then the mine worker shall cooperate in providing the information that has been requested and this may include obtaining information (including documents) from their own treating medical practitioner or other medical practitioners or health records from health institutions such as hospitals.

A mine worker shall, to the best of their knowledge, give accurate and honest information in response to questions about their health.

The medical practitioner is required to examine the mine worker to determine whether the mine worker can continue to fulfil the inherent requirements of their role or whether they are fit to undertake any nominated alternate position safely and with an acceptable level of risk.

In determining risk the medical practitioner shall take into account not only any risk to the mine worker but also to other persons at the site.

If a health assessment report shows the mine worker is unable to carry out their tasks without creating an unacceptable level of risk, then he /she shall be given reasonable opportunity to undergo a further health assessment from another AMA or a relevant specialist of their choice. The AMA or specialist shall be provided with details of the mine worker’s tasks.

If the mine worker undergoes a further health assessment, a copy of the ‘further health assessment report’ shall be given to the AMA who conducted the original health assessment. The AMA shall then provide the SSE with a report about the review.

For an appreciable increase in the level of risk to a mine worker, a notice shall be given to the AMA to decide whether or not a medical assessment is necessary.

Granting of site access to a mine worker following the reviews remains at the discretion of the SSE.

#### Retirement Examination

If a person permanently retires from working as a mine worker, he or she may request a retirement examination. This examination shall be carried out within 3 months prior or 3 months after their end date. After the examination is carried out, the AMA shall confirm that the person agrees with the explanation provided in the retirement report; and provide the SSE and the person with a copy of the report on the approved form.

NB: Only persons who have worked for more than 3 years as mine workers, and who did not complete a chest x-ray and respiratory function examination within the last 3 years are entitled to a retirement examination.

### Disclosure of Information

The SSE may request an appointed medical practitioner to provide information about the individual’s health that is relevant to:

* The capacity of the mine worker to carry out the duties of their position or any other nominated alternate position safely with an acceptable level of risk.
* Whether continuing to employ the mine worker in the position or any other nominated alternate position poses an unacceptable level or risk to either the mine worker or others.
* The SSE will make information arising from a medical examination of a mine worker carried out in accordance with this policy available to the mine worker.

## Prohibited Drugs and Alcohol on Site

NB: Recognised Standard 07 Criteria for the Assessment of Drugs in Coal Mines shall be used as the minimum standard until an agreement has been achieved with the majority of the workers at the mine.

Alcohol shall only be stored or consumed in approved designated areas.

Prohibited drugs shall not be stored or consumed on site under any circumstances.

Proven breaches may result in site access being revoked.

### Alcohol Limits

The accepted limit for alcohol on site is 0.000% (0.000 mg/100ml BAC).

### Drug Limits

The initial and secondary cut off limits in the table below are based on AS4308:2008 shall be used for initial on site testing and confirmatory secondary testing by laboratories in the case of non-negative results being returned.

|  |  |  |
| --- | --- | --- |
| Class of Drug | Initial Cut Off Level μg/L | Secondary Cut Off Level μg/L  |
| Opiates (Morphine) | 300 | 300 |
| Methylamphetamines | 150 | 150 |
| Amphetamines | 150 | 150 |
| Cannabinoid’s THC (Marijuana) | 50 | 15 |
| Cocaine | 300 | 300 |
| Benzodiazepines | 200 | 200 |

The SSE shall liaise with appropriate health practitioners and AMAs to monitor systems for identifying additional illicit drugs or substances (e.g. synthetic substances) which may not be detected by routine drug tests.

### Testing Types

There are four types of testing:

* Self-Testing
* Random Testing
* For Cause Testing
* Mandatory Testing

**Note:** On the return of a non-negative passive breath test result a full test shall be completed.

#### Self-Testing

A breathalyser will be made available for mine workers to self-test at the camp. Mine workers have the opportunity to self-test if they think they may be unfit for duty due to the effects of alcohol. Mine workers who self-test non-negative for alcohol shall notify their supervisor that they are unfit for work and shall not proceed to site until they self-test negative.

Following a non-negative self-test Supervisors shall assess the worker using Fitness for Work Form prior to the mine worker commencing any work.

#### For Cause / Behavioural Testing

Any mine worker on site may be requested to undergo testing for drugs and alcohol if:

* The mine worker was involved in any incident or near miss, or where a person is deemed to have directly contributed to any incident or near miss; or
* Where a KRES representative believes that the mine worker is demonstrating unusual, dangerous, aggressive or erratic behaviour; or
* Where a KRES representative finds evidence of a drug or alcohol either on site or in a vehicle or on an individual’s possession; or
* Where a KRES representative suspects that the mine worker is under the influence of alcohol or drugs.

#### Random Testing

Alcohol breath testing may be conducted on a random or mandatory basis. The SSE may decide when to randomly test. The SSE may also randomly select the persons to be tested on any particular day at any time during the shift.

Any mine worker on site may also be randomly tested for drugs. The SSE will determine the timing of such random drug testing. All mine workers on site at the time of the test may be tested, or a random sample of mine workers may be selected.

Blanket testing for drugs and alcohol may be triggered at any time at the discretion of the SSE.

#### Mandatory testing

All mine workers presenting for work shall be tested for alcohol prior to commencing any work each shift.

#### Testing Frequencies

|  |  |  |
| --- | --- | --- |
| **Testing Type** | **Frequency** | **Testing Conducted** |
| Self Testing | Determined by mine worker | Alcohol  |
| Random Testing | 10% of workforce daily | Drug and Alcohol |
| For Cause Testing (including blanket testing) | Following incident or as determined by KRES rep. | Drug and Alcohol |
| Mandatory Testing | When presenting for work | Alcohol |

### Alcohol Breath Testing

Persons nominated to conduct testing will be trained and authorised by the SSE.

Alcohol Testing will occur in accordance with the testing procedure for the type of breathalyser used.

The breath testing equipment will be calibrated in accordance with the manufacturer’s recommendations – records of calibration and copies of calibration certificates shall be maintained.

Any person recording a breath analysis over the limits contained within this policy will be deemed to have recorded a non-negative result. Upon request, the mine worker after testing positive shall undertake a second breath test after a delay of 20 minutes following the initial test.

The mine worker is required to refrain from taking anything by mouth for the 20 minute waiting period – this includes (non-exhaustive list) smoking, drinking water or any other liquids, eating, gargling, using mouth wash.

Should the second test result be over their specified limit, the person will be stood down for the remainder of the shift.

A mine worker returning a non-negative result may be deemed to have breached this procedure and may have their site access revoked.

#### Classification of Non-Negative Alcohol tests at start of shift

Any mine worker returning a confirmed non-negative test for alcohol shall classified using the following table and responded to in accordance with KRES Personal Conduct Standard.

|  |  |
| --- | --- |
| **Breach** | **Response** |
| **Minor**BAC 0.01 – 0.05% | **1st Instance**Stand MW down for the remainder of the shiftApply Just Culture Process in accordance with Personal Conduct StandardRecord breach of personal conduct standard and place on file**2nd Instance within 1 year**Site access shall be revokedRecord breach of personal conduct standard and place on file |
| **Major** BAC > 0.05% | Site access shall be revokedRecord breach of personal conduct standard and place on file |

### Drug Testing

A suitably qualified and authorised person will conduct the drug testing on site.

All sample collection, integrity and chain of custody procedures will conform to AS4308:2008.

Prior to testing, the mine worker will be asked by the tester if they are on medication either prescribed or over the counter. The testing officer will record these details.

If the mine worker returns a non-negative result, confirmative testing, via laboratory testing will be conducted.

A mine worker who returns a non-negative result for a drug test and has not declared any medication of the same drug group will be considered unfit for work and will not be permitted to access site.

A mine worker will be able to remain at work if the drug group tested is consistent with the type of medication declared to the testing officer and after consultation with the mine worker’s supervisor and the site paramedic regarding impairment and side effects of the medication.

A mine worker who has returned a non-negative result will not be permitted to access site if they did not declare any medication or the result is contrary to the medication that they have declared.

Following confirmation of laboratory testing, if the drug concentration is above the specified cut off levels, the result will be deemed to have breached this procedure and will be treated as a breach of the KRES Personal Conduct Standard.

To confirm the test result, the sample shall be sealed and transported to an approved laboratory for secondary testing.

The mine worker will not be permitted to access site. If laboratory testing returns a negative result the mine worker’s site access shall be reinstated.

### Refusal to Test

Any mine worker who refuses to undertake either an alcohol or drug test shall be deemed to have returned a non-negative result and site access will be revoked.

The mine worker will not be permitted to access site until they produce a negative test result.

Any visitor who declines to participate in the drug-testing program will be refused access to site.

### Tampering with a Drug or Alcohol Sample

Tampering with an alcohol or drug sample may lead to site access being revoked.

### Confidentiality Privacy and Records

The KRES shall comply with relevant legislation and standards relating to confidentiality, privacy and record keeping, specifically:

* The *Privacy Act 1988* (Cth) which governs how organisations handle personal information, and
* The Australian Privacy Principles which covers the collection, use, disclosure and storage of personal information

## Training

Training in this procedure shall consist of the following:

* Visitor induction;
* Site induction;
* Workforce education programs;
* Supervisor training; and
* Periodic awareness / refresher sessions.

Managers and supervisors should be trained in the following:

* How to recognise fatigue;
* How to implement fatigue control measures, including how to design suitable rosters and work schedules in consultation with workers; and
* How to take appropriate action when a worker is displaying physical or psychological impairment.

# REVIEW CRITERIA

This document shall be reviewed:

* Every three years;
* When there is a change of method and/or technology that may affect the accuracy of this document; and
* When a significant incident has occurred that is relevant to this document and its subject matter.

# SAFETY AND ENVIRONMENT

Safety and Environment are covered in the body of this procedure

# ATTACHMENTS, REFERENCES AND RELATED DOCUMENTS

## References and Related Documents

Coal Mining Safety and Health Act 1999

Coal Mining Safety and Health Regulation 2017

DNRM Hazard Database

Minerals Industry Safety Handbook Jan 2004

Minerals Exploration Safety Guidance Note Nov 2004

AS4308:2008 Procedures for the collection, detection and quantitation of drugs of abuse in urine

AS4760:2006 Procedures for specimen collection and the detection and quantitation of drugs in oral fluid

QGN 16 Guidance Note for Fatigue Risk Management

Recognised Standard 07 Criteria for the assessment of drugs in coal mines

MOP RSK 011 – Fitness for Work