**Welcome to Swab Master Ltd…….**You will find in your new employee packet forms that are required as part of the hiring process. Complete all forms and return to your Rig operator and/or the main office. Please note due dates and hand all forms in on time to avoid any payroll delays.

**Payroll**: Payroll is done monthly (vacation pay is included) with cut-off date the 20th of each month. The company does direct deposits the last business day of the month. Loans (advances) are payable mid - month.

**Medical Benefit Plan:** You may be eligible to participate in our medical plan following 3 months full time employment. Swab Master will pay ½ of the premiums for Medical, Life and AD&D. We can provide you with a booklet describing what is available. It takes approximately a month to process your application – your forms **MUST BE COMPLETED ASAP TO AVOID ANY PENALTIES** (note: Life, AD&D are mandatory, medical can be waived if you have other coverage).

Swab Master Ltd. provides the necessary safety equipment with the exception of safety footwear and winter clothing. Please ensure you have CSA approved safety footwear that is in good condition for your first day of work.

Employees are required to keep current safety tickets. The company will pay for renewal of required safety tickets, however, it is the employees responsibility to notify management prior to tickets expiring or if additional tickets are required.

**Company Equipment:** Employee is to treat with care and respect any company property in the employee's possession and will return to Swab Master upon termination of employment. Any and all electronic resources including software or systems purchased and/or developed by the company is the sole property of the Company, and shall be used only for purposes intended by the company.

If your position requires that you either operate equipment, drive a company vehicle or your personal vehicle for work, as a condition of employment you must maintain a valid driver's license and a driving record that is acceptable to the Company. Any significant change in your driving record must be reported immediately to the office.

During the course of your employment the Company may collect employee personal information where it is reasonable for us to do so for the purposes of establishing, managing and/or terminating our employment relationship. *The Company may use and disclose your employee personal information only for those purposes, or as permitted or required by law.*

If you have any questions you can speak to your Rig Manager/Supervisor or contact Garth Smith at (403) 793-0033 or Marj
Baillie at (403) 794-0034.

Please contact the office for login information and visit www.swabmaster.com to complete your on-line training.

## Additional Bank Account Option

August, 2014 (INCORPORATED DATE)

TO ALL EMPLOYEES - PAYROLL

You have the **option** to have your banking institution set up a savings account besides your regular direct deposit account or use an already existing savings account, and payroll can set a flat amount or a percentage of your direct deposit into this extra account to allow you to save money. Some employees already have a second account which they use to accumulate some monies to set aside for when they take a vacation or to buy something that you want to save for.

As an example, if you wanted $200.00 every month to go to a savings account, we would split it so that $100.00 of your advance pay and $100.00 of your month end pay would go into this other account. Unfortunately we cannot pull this amount from just the month end pay. Once you set it for the amount you want, it pulls on every pay run. But you can pick whatever amount you would like to go into this new account. If you only want $50.00 we would split that in two for $25.00 for each pay.

If you pick a percentage instead as an example, if you wanted 10% every month to go into a savings account, we would split it so that 5% of your advance pay and 5% of your month end pay would go into this account. Your choice.

If this is an option you would like to choose, you only have to go to your banking institution and request a new account and a slip from the bank to hand into payroll so the correct account information is set up properly. This slip is also required if you want to use an existing savings account.

Thank you and if you have any questions, please feel free to contact Marj at the office at any time.

Marj Baillie - Office Manager / Payroll Administrator

**Swab Master Ltd.**

# Direct Deposit

**Employee Name: _____**

Swab Master pays employees by direct deposit only. If you wish to have your direct deposit stub e-mailed to you can provide us with your e-mail address, otherwise paystubs will be given to your rig operator or left at the shop for you to pickup.

**Yes, I want my paystubs emailed to me: _____**
**(email address)**

The information on this form has been provided for the sole use and benefit of Swab Master Ltd.

In order to implement the direct deposit program, you must attach a **void cheque** to this form. If you cannot provide a void cheque, please have a Bank Officer complete, sign and stamp the following:

Bank Name: _____

Bank/Institution Number:____/_____/____

Transit/Branch Number: ___/___/___/___/___

Account Number: _____

Bank Stamp:_____ _____
Employee Signature Bank Officer Signature

Date: _____

*Payroll information **must** be received one week prior to payday in order for direct deposit to be processed. If you have any questions, do not hesitate to contact the payroll department.*

# WAGE DEDUCTION AUTHORIZATION AGREEMENT

I understand and agree that my employer, Swab Master Ltd. may deduct money from my pay from time to time for reasons that fall into the following categories:

1. My share of the premiums for the Company's group medical/dental plan;
2. My share of the premiums for the Company's group Life and ADD plan;
3. Any contributions I may make into a retirement or pension plan sponsored, controlled, or managed by the Company;
4. In the event of a special situation where I am on WCB, Short-Term or Long-Term disability, it is my responsibility to pay both the employee and employer share of benefits premiums to 100% in order to keep such benefit coverage active. Benefits may be terminated if I cannot cover the premiums for both.
5. Installment payments on loans given to me by the Company, and if there is a balance remaining when I leave the Company, the balance of such loans**; NOTE: No loans other than mid-month advances will be given to any new employee until such employee's probation period has been met;**
6. If I receive an overpayment of wages for any reason, repayment to the Company of such overpayments (the deduction for such a repayment will equal the entire amount of the overpayment, unless the Company and I agree to a series of smaller deductions in specified amounts);
7. The cost to the Company of personal long-distance calls I may make, or messages I may send, using Company phones (land lines or cell phones) or Company accounts, of personal faxes sent by me using Company equipment or Company accounts, or of non-work related access to the Internet or other computer networks by me using Company equipment or Company accounts;
8. The cost of repairing or replacing any Company supplies, materials, money, or other property that I may damage (other than normal wear and tear), lose, fail to return, or take without appropriate authorization from the Company during my employment (except in the case of misappropriation of money by me) I understand that no such deduction will take my pay below minimum wage, or, if I am a salaried exempt employee, reduce my salary below its predetermined amount.
9. The total cost of equipment as deemed by our Insurance Company to replace or repair equipment damaged in an at-fault preventable accident. If drug or alcohol is a factor – it is considered an automatic at-fault preventable accident. If using any company equipment during down time for personal use, this will also be considered an automatic at-fault preventable accident.
10. Taking a training course upon failing the first course. Swab Master will pay for training courses provided I remain with the company for a minimum of 6 months upon completion and passing of training courses. All training courses must be authorized and booked by Management.
11. Administrative fees in connection with court-ordered garnishments or legally-required wage attachments of my pay, limited in extent to the amount or amounts allowed under applicable laws; including any traffic violations incurred using Swab Master vehicles.

I agree that the Company may deduct money from my pay under the above circumstances, or if any of the above situations occur. I further understand that the Company has stated its intention to abide by all applicable federal and provincial wage and hour laws and that if I believe that any such law has not been followed, I have the right to file a wage claim with appropriate provincial and federal agencies.

_____ _____

Signature of Employee Date

_____

Employee's Name - Printed

# *New Employee Hire Form*

## *Please Print Legibly*

**Date: _____ S.I.N.# _____ - _____ - _____**

**Surname: _____ First: _____ Middle:_____**

**Birthdate:_____(M M/DD/YYYY) Email Address:_____**

**Alberta Health Care #: _____**

**Driver Licence Number: _____ Class: _____Province:_____**

**Mailing Address: _____**

**City/Town: _____Province: _____Postal Code:_____**

**Contact Phone Number(Include Area Code) _____(Home/Cell)**

**Date of Hire:_____(MM/DD/YYYY)**

**Position Hired For:_____**

**OFFICE USE ONLY**

**Rate of Pay Agreed Upon By Owner: *Rig rate, shop time and travel time rates will be determined by experience & approved by the Owner – PAY RATES ARE CONFIDENTIAL AND ARE NOT TO BE DISCUSSED WITH OTHER EMPLOYEES***

**Rig Operations $ _____ / hr. Shop Time: $_____ / hr. Travel Time: $_____ /hr.**

**Subsistence that is authorized: $_____ / night (if required.)**

**Nightshift Subsistence that is authorized: $_____/night (if required.)**

**Probation Period: _____**

**Employee Signature: _____Date:_____**

**EMPLOYER signature_____Date:_____**

# EMPLOYEE EMERGENCY INFORMATION

SWAB MASTER LTD.

**Employee Name:_____ Date of Birth:_____**

**Emergency Contact Numbers** **Updated on:_____**

| | | |
|---|---|---|
| Alberta Health Care Number: | Physician: | |
| | Physician Phone No: | |
| Emergency Contact Name: | Phone No: | Relationship: |
| Emergency Contact Name: | Phone No:: | Relationship: |

All Allergies/Drug Sensitivities:

All current medications/medical conditions (use reverse if necessary):

Medical Disabilities and/or conditions:

Do you have any medical conditions that could affect your driving performance?

Emergency information is confidential – any current conditions/prescriptions must be reported to your supervisor.

*I am aware of my obligations to work safely and to report unsafe conditions. I am also aware of my right of refusal to work in unsafe conditions, including any conditions that I personally feel to be unsafe. As a new employee I will follow instructions from more experienced crew members and will not undertake any job or enter any area without direct instructions from experienced crew members(Not understanding: How to properly perform a task and not understanding the possible dangers in performing the task can lead to serious injury and damage to equipment).*

Date:_____ Signature:_____

Supervisor:_____

# SUBSTANCE ABUSE PREVENTION POLICY

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## 1.0 – Introduction

As a responsible employer, Swab Master Ltd. has a compelling interest in establishing programs to promote and enhance health and safety in the workplace. Swab Master Ltd. Substance Abuse Prevention Policy is directed at protecting the health and safety of employees, co-workers, contractors, general public and environment. The Substance Abuse Prevention Policy combines drug and alcohol testing with education, training and access to assistance.

## 2.0 – Scope

This policy applies to all employees and management of Swab Master Ltd. Testing provisions of this policy only apply to individuals in identified safety sensitive positions. While this policy refers specifically to alcohol and drugs, it is intended to apply to all other forms of substance abuse.

The guiding principles of the Canadian Model for Providing a Safe Workplace, a best practice guide from the Construction Owners Association of Alberta (COAA) and the Energy Safety Canada are incorporated into this policy.

Swab Master Ltd. shall comply with all applicable Federal and Provincial related drug and alcohol laws and or regulations.

## 3.0 – Roles and Responsibilities

Employees are expected to:

- Arrive fit for work and remain fit for work during their period of duty
- Consult with their doctor or pharmacist regarding the proper use of medication they are using to determine if the medication may have a negative effect on their performance
- Must disclose & seek advice on appropriate counseling or treatment if they suspect they have a dependency or an emerging substance abuse issue

- Advise Management if they are using medical cannabis
- Take appropriate actions to ensure a co-worker does not remain in an unfit condition at work that may endanger the employee, co-workers or others. This may include contacting your Manager, Supervisor, HS Representative or Office Manager for confidential advice on what action to take

Managers and Supervisors are expected to:

- Monitor and evaluate work performance with an objective of early identification and handling of all performance issues
- Ensure that investigations of work related accidents are carried out in accordance with the company accident investigation procedures
- Refer an employee for a drug and or alcohol test when required to do so under this policy
- Monitor policy compliance and take appropriate action as required under this policy
- Confer with the HS Representative and Office Manager on substance abuse issues as appropriate
- Arrange for safe transportation of an employee to their residence or nearest public transportation when appropriate under this policy

Office Manager will:

- Act as a confidential and objective resource within the company on matters related to the Substance Abuse Prevention Policy
- Communicate with the Medical Review Officer and Substance Abuse Professionals as required
- Advise the employee's supervisor, where appropriate of work limitations, suspension or termination considerations
- Provide confidential service to all employees regarding drug and alcohol information, referral to a Substance Abuse Professional but not to provide any counseling
- Maintain confidential records of all test results, including refusals to test, correspondence from the Medical Review Officer and or Substance Abuse Professional

HS Representative will:

- Act as a confidential and objective resource within the company on matters related to the Substance Abuse Prevention Policy
- Undertake periodic reviews and revisions of the Substance Abuse Prevention Policy
- Maintain records of all training / education of managers, supervisors and employees
- Ensure that investigations of work related accidents are carried out in accordance with the company accident investigation procedures

## 4.0 – Training

Swab Master Ltd. recognizes that employee education on substance abuse and on our Substance Abuse Prevention Policy is a critical step in achieving the objectives of the program.

**Employee training**

- Employees will receive awareness education in regards to how this policy applies to everyone including: the risks of drug and alcohol use and their potential impact on safety in the workplace, consequences for policy violation, available resources for employee assistance services, explanation of the testing procedures and situations when testing will occur

**Supervisor/Manager Training**

- Supervisors/Managers will be given the above training as well as more specific training on how to recognize signs and symptoms of drug and alcohol use in the workplace and appropriate responses

## 5.0 – Testing Options

### Pre-employment

- Successful applicants of safety sensitive positions will be drug tested after a conditional offer of employment. Employment is conditional to the successful completion of the pre-employment drug test

#### Post-Accident

- An employee will be drug and alcohol tested after an accident that involves a fatality, disabling injury, significant incident or near miss that could have had potential serious consequences
- Supervisor is required to conduct immediate preliminary investigation
- Testing will never delay necessary medical attention for injured worker following an accident
- Testing is not required when the act or omission of the employee was not a contributing factor (e.g. structural, mechanical failure or act of God)
- Testing is required when the actions of a worker, human error, were the contributing factors leading to the accident and it is not frivolous
- Drug testing should occur within 2 hours of accident with attempts to test for up to 32 hours of accident. Alcohol testing should occur within 2 hours of accident with attempts to test for up to 8 hours of accident
- Reasons are documented if testing is required, not required or unable to conduct required tests

### Reasonable Cause Testing

- An employee will be tested for alcohol and or drug use where a company supervisor or other official, who is trained to identify drug and alcohol use by an employee, makes observations which form a reasonable basis for suspecting that the employee is in breach of this policy. Such observations must be documented, specific, clearly stated observations concerning the appearance, speech or body odors of the employee. The observations may include indications of the chronic and withdrawal effects of drug and alcohol use
- Observations which may lead to reasonable cause testing are not limited to, but include: odor of alcoholic beverage or marihuana on breath, slurred speech, glassy eyes, unsteadiness in walking, standing, flushed face, disoriented and or drowsy, accidents or injuries, repeated errors in job performance, excessive absenteeism or lateness, credible complaints of drug and or alcohol use at work

### Pre-Access

- Drug and alcohol testing of employees to gain and or maintain access to company or client worksites

### Return to duty

- Drug and or alcohol testing of an employee who has engaged in prohibited conduct and is returning to work after an assessment by a Substance Abuse Professional and compliance with recommendations

### Follow-up

- Drug and or alcohol testing on an unannounced basis for at least one year on return to duty. Frequency and duration of testing is determined by the Substance Abuse Professional in consultation with the Office Manager

## 6.0 – Prohibitions

### Alcohol Use

- Alcohol concentration: No employee shall report for duty or remain on duty while having a confirmed alcohol concentration of 0.02 or greater
- On duty use: No employee shall use alcohol while on duty

- Pre duty use: No employee shall perform safety sensitive functions within four hours after using alcohol
- Use following an accident: No employee required to take a post-accident alcohol test shall use alcohol for eight hours following the accident, or until he/she undergoes a post-accident alcohol test, whichever occurs first

**Drug Use**

- No employee shall report for duty or remain on duty when the employee uses any drug, except when the use is pursuant to the instructions of a licensed medical practitioner who has advised the employee that the substance will not adversely affect the employee's ability to work safely at the job site. If a licensed medical practitioner advises the employee that the substance will affect the employee's ability to work safely, the employee will notify his/her immediate supervisor. The supervisor will advise senior management of the circumstances
- Senior management shall ensure that the employee is removed from duty and accommodated to meet safety concerns. Accommodation may include work restrictions, modified duties, sick or disability leave
- No employee will intentionally misuse prescription or over the counter medications in such a manner as to render themselves unfit to safely perform their duties
- Employees must notify their direct supervisor if they are taking any prescription, substance or over the counter medication that may impair their ability to work safely

**Possession**

- Possession, use or offering for sale of alcohol, drugs or drug paraphernalia on company or client sites or company vehicles is prohibited
- Possession of devices or products designed to compromise drug and or alcohol testing are prohibited
- Employees who violate this provision may be subject to immediate termination and referral to law enforcement agencies when applicable
- Use of alcohol for social functions or when it relates to company business is permitted when approved by senior management who will ensure that the use does not contravene the intent of our policy and any applicable laws or regulations

## 7.0 – Maintaining a Valid Operator's License

All individuals that operate a motor vehicle on behalf of Swab Master Ltd. are required to maintain a valid operator's license. Any loss of driving privileges (license) must be reported to your supervisor and the individual will no longer be allowed to drive on behalf of the company. The individual will be accommodated where it is feasible to do so. Loss of driving privileges includes temporary suspensions, etc.

## 8.0 – Collection of Specimens and Analysis

A designated drug testing company will collect and process urine specimens for drug testing as required. Drug testing will be conducted according to US Dept. of Health & Human Services (HHS) standards in laboratories accredited by the Substance Abuse and Mental Health Services Administration (SAMHSA). The accredited laboratory will perform required testing with test results forwarded to a Medical Review Officer. Drug testing refers to marihuana, cocaine, amphetamines, opiates and phencyclidine. Oral fluid testing will follow the recommended standards of the Substance Abuse and Mental Health Services Administration (SAMHSA). Point of Collection Testing (POCT) drug screening may be conducted in conjunction with laboratory based testing or as a standalone drug test including laboratory confirmation and review by an MRO.

Alcohol screen testing will be with an approved saliva tester or breath test. All alcohol screening tests at .020 or higher will be confirmed with an approved Evidential Breath Alcohol Testing Device that is listed on the U.S. DOT Conforming Products List (CPL).

## 9.0 – Positive Test Procedures

**Positive Pre Employment Test**

- Potential employees who are positive on pre-employment drug tests will have their offer of employment rescinded
- Potential employees who are positive on the pre-employment drug test will be encouraged to seek assistance from a Substance Abuse Professional and to reapply for available positions when they can meet the company standards
- Potential employees whose drug test results in a MRO issued Safety Letter will have their offer of employment rescinded. The potential employee will be encouraged to reapply for available positions when the prescribed medication and or substance are no longer required

**Positive alcohol test procedures**

- Employees with a confirmed alcohol concentration of .020 to .039 will be removed from duty immediately and will not be allowed to return to work until the following shift. The employee may be subject to corrective disciplinary action
- Employees having a confirmed alcohol concentration of .040 or greater will be removed from duty/suspended

**Positive drug test procedures**

- Employees who are positive on drug tests as verified by the Medical Review Officer will be removed from duty/suspended

**Refusal to test**

- No employee shall refuse to submit to a drug and or alcohol test required under this policy
- No supervisor shall permit an employee who refuses to submit for required testing to remain on duty
- An employee who refuses to submit to a required test, tampers or attempts to tamper with a test sample or obstructs the testing process will be considered to have violated this policy. Positive test procedures will apply

**Removal from duty**

- Employees removed from duty/suspended having a positive drug test verified by an Medical Review Officer and or a confirmed alcohol concentration of .040 or greater will be required to attend a meeting with Senior management who will review each case and provide written correspondence of the resources available in evaluating and resolving problems associated with the misuse of alcohol and or drugs, including the names, addresses and telephone numbers of Substance Abuse Professionals. Where practical management will endeavor to meet or contact the employee the next working day and direction will be provided regarding the suspension and return to work choices
- Any employee who was removed / suspended from duty having a positive drug test result verified by a Medical Review Officer and or a confirmed alcohol concentration of .040 or greater shall be evaluated by a Substance Abuse Professional who shall determine what assistance, if any, the employee needs in resolving substance abuse issues
- In order for this policy to be effective in ensuring that company employees will perform their duties unimpaired by alcohol or drugs, the provisions of this policy must be enforced. Accordingly, where an employee violates any provision(s) of this policy, the employee may be subject to corrective disciplinary action, as appropriate, up to and including discharge

**Self-Disclosure**

- The company understands that an alcohol or drug dependency is a preventable and treatable condition and recognizes that an individual may want assistance. Employees are required to come forward or seek assistance on their own, without fear of reprisal. The company will do its utmost to assist the employee. An employee who comes forward seeking assistance will be treated as if they had a positive drug and or alcohol test. Once an assessment has been completed a return to work plan can be formulated

**Medical Review Officer Issued Safety Letter**

- In the event of a reported positive drug test the MRO may determine that the donor has a legitimate drug prescription; the positive result may be changed to a negative. If the MRO determines that the use of that particular prescription may compromise safety in the performance of a safety sensitive function the MRO will issue a "Safety Letter" to the DER (employer)
- The employee will be removed from safety sensitive duties pending the receipt of a clearance letter from the employee's prescribing physician. The employee will be provided instructions for his/her physician along with a physical demands analysis and or job description of their safely sensitive position
- When a Safety Letter is issued for prescribed medical cannabis, the employee will not be allowed to work in a safety sensitive position until the prescribed substance is no longer required for treatment

## 10.0 – Return to work after a positive test

An employee cannot be returned to duties until he/she has been evaluated by a Substance Abuse Professional, complied with recommendations, and has a negative result on a return to duty test and or a breath alcohol concentration less than .020. The employee must provide a written report from the Substance Abuse Professional verifying the evaluation and any required treatment or provide a release document for the required information. The Substance Abuse Professional will only release relevant information which will assist in returning the worker to their duties.

Follow up testing will be conducted to monitor the returning employee for no less than one year. The frequency of testing will be determined by the Substance Abuse Professional in consultation with the Office Manager and will be designed to assist the employee in remaining alcohol and or drug free at the work place.

## 11.0 – Confidentiality and Record Keeping

All drug test results are confidential and are released by the Medical Review Officer or designate to the Designated Employer Representative or alternate. Alcohol test results are confidential and released by the testing company to the Designated Employer Representative or alternate. The Designated Employer Representative or alternate may release relevant information to company decision makers as required. Confidential information from a Substance Abuse Professional will be handled in a similar manner.

All records will be maintained in a locked and secure manner. Records will be kept separate from personnel files. Negative test results will be maintained for no less than one year with positive test results and Substance Abuse Professional assessments maintained for a five year period. A third party administrator can maintain records on behalf of the company.

## 12.0 – Definitions

**Accredited Laboratory** – Meets guidelines and standards of the Substance Abuse and Mental Health Services Administration which is the certifying agency for forensic urine drug testing laboratories in Canada and the United States. Collection and testing processes follow the U.S. Department of Health and Human Services guidelines

**Alcohol** – The intoxicating agent in beverage alcohol, ethyl alcohol or other low molecular weight alcohols including methyl or isopropyl alcohol

**Alcohol Concentration** – The alcohol in a volume of breath expressed in terms of grams of alcohol per 210 litres of breath

**Breath Alcohol Technician** – An individual trained and certified to conduct breath alcohol testing utilizing an Evidential Breath Tester

**Chain of Custody** – The process of documenting the handling of a specimen from the time a donor gives the specimen to the collector, during the testing at the laboratory, and until the results are reported by the laboratory

**Collector** – Non medical and medical personnel contracted by an agency who have received training in collecting urine samples in accordance with guidelines that would be acceptable to the regulatory agencies

**Drug** – Any substance other than food which is taken to change the way the body or mind functions. Drug testing refers to marihuana, cocaine, opiates, phencyclidine and amphetamines with cut-off levels as per the Substance Abuse and Mental Health Services Administration of the Department of Health and Human Services which is the certifying agency for forensic urine drug testing laboratories in Canada and the United States

**Evidential Breath Testing Device** – Capable of measuring the alcohol content of deep lung breath samples with sufficient accuracy for evidential purposes. The Evidential Breath Tester must be on the conforming products list as per the U.S. National Highway Traffic Safety Administration

**Fit For Duty** – Being capable of performing work related duties in a safe, efficient, productive manner with no drugs and or alcohol present in the body at or above established standards

**Medical Review Officer (MRO)** – The MRO is a licensed physician (Medical Doctor or Doctor of Osteopathy) responsible for receiving laboratory results generated by an employer's drug testing program who has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's confirmed positive test result together with his or her medical history and any other relevant bio medical information

**Safety Sensitive Position/Function** – A position or function where an individual has a key and direct role in an operation where safety is a bona fide occupational requirement at the job, in that safety is necessary to assure the efficient and economical performance at the job without endangering the employee, their fellow employees, general public or the environment. Includes employees where there is no direct or limited supervision available to provide frequent operational checks. An employee in a safety sensitive position cannot have drugs and or alcohol in the body after the above established standards.

**Significant Incident** – Incidents involving a fatality, disabling injury, significant property damage, spill or abnormal discharge that may cause long term health effects to employees and or the public, public evacuation or serious environmental damage or an event or near miss that could have had potential serious consequences
Substance Abuse Professional (SAP) – A licensed Physician (Medical Doctor or Doctor of Osteopathy), or a licensed or certified psychologist, social worker, employee assistance professional or an addictions counselor. All must have knowledge of and clinical experience in the diagnosis and treatment of alcohol, drugs and related disorders

**Supervisor Training** – Shall include the physical, behavioral, speech and performance indicators of probable alcohol or drug misuse and appropriate intervention strategies

## 13.0 – Standards

**Designated Drug Testing Company**

ECS Safety Services Ltd.
P.O. Box 2109, 350 Aquaduct Drive
Brooks, Alberta T1R 1C8
Toll Free 1-877-784-3784 Fax 403-793-8171

**Testing Standards**

- All drug tests are DOT panel for Marihuana, Cocaine, Opiates, Amphetamines and Phencyclidine. Urine specimens are collected by trained staff using chain of custody procedures. Our collectors are trained in procedures by a Certified Professional Collector Trainer (CPCT) who has been certified by the Drug and Alcohol Testing Industry Association (DATIA). ECS Safety Services Ltd. utilizes a 5 part chain of custody form with a split specimen collection for Non DOT collections and a single specimen for Point of Collection Testing (POCT).

- Alcohol testing procedures will follow the guidelines and standards of the U.S.DOT. ECS Safety Services Ltd. utilizes Evidential Breath Testing instruments when testing for the presence of alcohol. The instrument(s) are on the US DOT Conforming Products List as an approved testing device. E.C.S follows the Manufacturer Factory Quality Assurance Program and all of our Breath Alcohol Technicians are trained by a certified instructor.

**Laboratory**

- ECS Safety Services Ltd. utilizes the services of Gamma Dynacare Medical Laboratories:
  245 Pall Mall Street
  London, ON N6A 1P4
  Toll Free 1-800-265-5946
- Certified by the Substance Abuse and Mental Health Services Administration

**Medical Review Officer**

- The role of the MRO requires a physician who is not only knowledgeable about substance abuse problems, but one who also has skills in understanding medico-legal issues, policy development issues, clinical medicine and occupational medicine. They must also possess investigation and problem solving skills and must have the ability to communicate effectively with specimen donors, senior officers in management, community based physicians, unions, government representatives and any other interest groups.
- The MRO's single most important function is the review of laboratory positive test results and the determination of an alternate medical explanation for the positive result. The ECS Safety Services MRO is a licensed physician certified by the American Association of Medical Review Officers or Medical Review Officer Certification Council.

## APPENDIX A – Analyite & Cut-off Levels

| **Initial test analyte** | **Initial test cutoff concentration** | **Confirmatory test analyte** | **Confirmatory test cutoff concentration** |
|---|---|---|---|
| Marijuana metabolites | 50 ng/ml | THCA[1] | 15ng/ml |
| Cocaine metabolites | 150 ng/ml | Benzoylecgonine | 100 ng/ml |
| Opiate metabolites.<br>Codine/ Morphine[2] | 2000 ng/ml | Codeine<br>Morphine | 2000 ng/ml<br>2000 ng/ml |
| 6-Acetylmorphine[3] | 10 ng/ml | 6-Acetylmorphine | 10 ng/ml |
| Phencyclidine | 25 ng/ml | Phencyclidine | 25 ng/ml |
| Amphetamines.<br>AMP/MAMP | 500 ng/ml | Amphetamine<br>Methamphetamine[5] | 250 ng/ml<br>250 ng/ml |
| MDMA[6] | 500 ng/ml | MDMA<br>MDA[7]<br>MDEA[8] | 250 ng/ml<br>250 ng/ml<br>250 ng/ml |

[1] Delta-9-terahydrocannabinol-9-carboxylic acid (THCA)
[2] Morphine is the target analyte for codeine/morphine testing
[3] Either a single initial test kit or multiple initial test kits may be used provided the single test kit detects each target analyte independently at the specified cutoff
[4] Methamphetamine is the target analyte for amphetamine/methamphetamine testing
[5] To be reported positive for methamphetamine, a specimen must also contain amphetamine at a concentration equal to or great than 100 ng/ml
[6] Methylenedioxymethamphetamine (MDMA)
[7] Methylenedioxyamphetamine (MDA)
[8] Methylenedioxyethylamphetamine (MDEA)

The laboratory will use the cutoff concentration levels of the above chart for initial and confirmation drug tests. All cutoff concentrations are expressed in nanograms per milliliter (ng/mL)

## APPENDIX B – Contractual Requirements

Swab Master Ltd. may have contractual obligations with our client which will be specific to working on the client's site. Any specific requirements will be identified and relayed to our employees who will be required to access the client work site.

## APPENDIX C – Search Provisions

As a condition of gaining or maintaining entry and or access to company or client work sites, searches may be conducted by Swab Master Ltd., the client or the client on behalf of Swab Master Ltd. including without limitation, searches of any room or vehicle located in the work or camp site. Refusal to submit to such searches will result in the employee / contractor being denied access to the accommodations and or work site.

When reasonable grounds exist to conduct searches of personal property located at a client or company work site, within a company or client accommodation or within a vehicle located on the said site, consent for the search will be obtained from the employee/contractor. If the employee/contractor does not consent to the search, the employee/contractor will be denied access to the work site and or accommodation.

Searches may be conducted with the use of a Drug Recognition Dog.

Revised May 6, 2019
By E.J. Secondiak, C.D.
ECS Safety Services Ltd

# DRUG & ALCOHOL ACKNOWLEDGEMENT

## Acknowledgement

I acknowledge that I have received Swab Master Ltd. instructions regarding substance abuse prevention. I understand and accept that compliance with this policy is a condition of employment.

## Consent

I hereby give my voluntary consent for the medical representative or designate Swab Master Ltd. to collect urine samples from me. I also give consent to test the samples for alcohol, drugs and controlled substance as well as any other necessary tests.

## Authorization to Release Information

I authorize all medical representatives to release all negative test results to my employer, Swab Master Ltd. All positive results will be reported to the Safety Consultant representing and advisory for Swab Master Ltd. and / or the company's President. I also agree that the Safety Consultant or President may consult with my personal physician and any other health professional for information as to whether the positive results are consistent with the non-medical use of drugs. The Safety Consultant will inform the President of Swab Master Ltd. with the results and a decision will be concluded at that time.

All information is held in confidence and will only be viewed by Safety Manager and the Management of Swab Master Ltd.

_____ _____

Employee Name (print) Employee Signature

# PLEDGE OF CONFIDENTIALITY

In the course of employment with **Swab Master Ltd('the Company')**, employees may become privy to information or documentation pertaining to confidential matters such as **pricing, equipment details, wages etc., or may be involved in processes in which confidential matters or incidents are discussed**.

The obligation of confidentiality applies to all past and present Swab Master Ltd. employees. It is the policy of the Company that all confidential business information relating to the company must be used solely for business purposes. Employee desires to give, and Swab Master Ltd. desires to accept from the employee, a covenant not to engage, either directly or indirectly, in competition with, or to solicit any customer, client, or account of Swab Master Ltd.

*Employees are expected, as part of their employment contract, to maintain this confidentiality and refrain from divulging or disclosing any information which may damage reputations or influence proceedings. As such you will be expected to refrain from discussing or releasing such information in any form whatsoever except as required by Swab Master Ltd.'s policies or legal requirements.* All company records are the sole property of the Company and are to remain as such.

Information to the press and media will be the responsibility of management and employees should defer all questions and responses to management.

I _____will not, except as required by law, either during the term of my employment with Swab Master Ltd. or at any time thereafter, directly or indirectly, by any means whatsoever, divulge, furnish, provide access to, or use for any purpose other than the purposes of Swab Master Ltd., any confidential information. This includes secrecy in regards to all business pricing, vendors, customers and employees of Swab Master Ltd.

Employee signature: _____

Date: _____

Manager Signature: _____

Date: _____

**Authorization to Obtain Alberta Driver's Abstract**

A "Driver Abstract" is the product name under which the Alberta Government releases specific information from a person's driving record, which contains:

- Name
- Height
- Class
- License Number
- Expiration Date
- Address
- Weight
- Issue Date
- Current Demerit Points
- Reinstatement conditions (if any)
- Date of Birth
- Sex
- MVID Number
- Suspended Status
- List of Violations (Descriptions, Demerit / Merit Points and Suspension Term)

Insurer: Continental Casualty Company

Policy #: CAE2973539

Insured: Swab Master Ltd.

I _____ hereby authorize C.N.A Insurance &/or HUB International Insurance Brokers to obtain under s. 5(1)(b)(i)(A) of the Access to Motor Vehicle Information Regulation (AMVIR) a copy of my: **(check only one box)**

☐5-year electronic, **OR**

☐5-year printed Driver's Abstract

for the purposes of determining my eligibility to be covered under the insurance policy issued to the Named Insured, for underwriting, rating and claims purposes and for providing the Named Insured with loss prevention and risk mitigation services.

Full Name: _____

Date of Birth (mm/dd/yyyy`): _____

Employed On (mm/dd/yyyy): _____

Driver's License Number: _____

Signature: _x_____

Date: x_____

"This consent will remain in force as long as my employment with the Named Insured is active and the above noted Policy Remains in force." This document is confidential and intended solely for the use of the individual or entity to whom they are addressed. All other recipients are prohibited from disclosing, copying, distributing or taking any action in reliance on the contents. If you have received this in error, please notify the sender.

**Company Equipment:** The employee agrees to treat with care and respect any company property in the employee's possession and will return to Swab Master upon termination of employment. Duplication of keys is strictly prohibited. Any and all electronic resources, including software and systems purchased and / or developed by the company, will remain the sole property of the Company, and shall be used only for purposes intended by the company.

| | Description(list all): | Date Issued: | Date Returned |
|---|---|---|---|
| Vehicle(s): | | | |
| Key(s) | | | |
| Company Cell Phone: | | | |
| Laptop: | | | |
| Coveralls Summer: | | | |
| Winter Coveralls: | | | |
| Hard Hat | | | |
| Gas Card(s) | | | |
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*I hereby authorize Swab Master Ltd. to deduct from any payment due at any time, any amount(s) owing to Swab Master Ltd.* _____ _____

Employee Name Employee Signature

Date: _____

## GENERAL ADMINISTRATION AND APPLICATION

Health & Safety rules, regulations and policies will be available to all employees.

The Main Office will maintain a record of receipt of these rules, regulations and policies by all employees on file. The main office will also contain a copy of the current OH&S Act, Regulation and Code.

Health & Safety rules, regulations and policies will be under constant review by all employees.

The Management responsible for day-to-day operations of the company will enforce the Health and Safety rules, regulations and policies consistently. In circumstances where employees fail to observe known Health & Safety rules, regulations and policies, progressive discipline will be applied as deemed necessary by Management.

Health & Safety Rules, Regulations and Policies apply to all employees, visitors, contractors, and all others having business in areas within the jurisdiction of Swab Master Ltd. and its divisions.

An annual review of the Swab Master Ltd. Occupational Health & Safety Policy will be held during the spring break up company meeting. All employees that are in attendance will be asked to review their Job Descriptions, Job Hazard Assessment Matrices, and their particular responsibilities as defined in OH&S Legislation.

All Managers, Supervisors and Workers will have an annual performance evaluation to assess their strengths and areas of improvement. This evaluation will be two-fold, with the employee being reviewed doing a self-assessment and his/her manager doing an assessment of the employee. There will be a formal evaluation meeting where the results are compared, discussed and documented.

Compliance with company rules, regulations and policies is a ***mandatory*** condition of employment.

## RESPONSIBILITIES, DUTIES & OBLIGATIONS

Every level of employee at Swab Master Ltd. (The Company) is bound by the Occupational Health & Safety Act, Regulation and Code to take responsibility for the health and safety of themselves, co-workers, contractors and visitors at the place of work.

The Company and its Management are responsible to ensure, as far as it is reasonably practicable:

- The Health & Safety of employees engaged in the work of the company, and
- Employees who are not engaged in the work of the company, but present at the work site where work is being carried out, and
- Employees engaged in the work of the company are aware of their responsibilities and duties under the Occupational Health and Safety Act
- Providing a safe workplace, equipment, and systems for all workers.
- Providing training and supervision to ensure the safety work procedures.
- Making workers aware of safety or health hazards and the use of safety devices and to design controls for workplace hazards
- Implementing and maintaining a comprehensive Health and Safety program
- Complete inspections as outlined in Element 4 and address deficiencies promptly

Supervisors are responsible to ensure, as far as it is reasonably practicable:

- That they are protecting their own and others' safety and health.
- They are using all safety and health devices and protective equipment as required.
- Ensure that they are cooperating fully with the Health and Safety Program.
- They are aware of their responsibilities and duties under the Occupational Health and Safety Act
- Knowing and understanding safe work practices, policies and procedures.
- Ensuring they are trained for the task/job.
- Ensuring that they know their "right to refuse" unsafe work
- Report and / or correct workplace hazards
- The workers they are supervising are competently trained and that their health and safety is protected
- To complete inspections as outlined in Element 4 and report or address deficiencies promptly
- Ensure their paperwork, and the paperwork of their assistant is correctly filled in before submission

Workers are responsible to ensure, as far as it is reasonably practicable:

- They are protecting their own and others' safety and health.
- They are using all safety and health devices and protective equipment as required.
- They are aware of their responsibilities and duties under the Occupational Health and Safety Act
- They are cooperating fully with the Health and Safety Program.
- Knowing and understanding safe work practices, policies and procedures.
- Ensuring that they have the proper training for the job/task
- Report workplace hazards, near misses, accidents, incidents or illnesses.
- Ensuring that they know their "right to refuse" unsafe work, right to know and right to participate.

Health and Safety is EVERYONE'S responsibility

## RESPONSIBILITIES, DUTIES & OBLIGATIONS

### CONTRACTOR MANAGEMENT

When a contractor is required for repairs at the main office, management is responsible for hiring a qualified person to complete the assigned task. Most contractors are hired based on previous experience with Swab Master Ltd. or referral. In the case of a new contractor the following protocols will be checked prior to engagement:

- Review any qualifications needed for the job
- Interview the candidate and confirm they are able to meet the requirements of the job
- Check references of the contractor to ensure capability

Contractors working on a Swab Master Ltd. work site are responsible to ensure, as far as it is reasonably practicable:

- They are protecting their own and others' safety and health.
- They are aware of their responsibilities and duties under the Occupational Health and Safety Act
- They are using all safety and health devices and protective equipment as required.
- They are cooperating fully with the Health and Safety Orientation.
- They have had a site specific safety orientation and are aware of who to report to in the event of an emergency
- Ensuring that they have the proper training for the job/task

All Contractors and Visitors of the Swab Master Ltd. Main Office / Shop area must check in at the reception area of the office or the dispatch office if after hours. From here they will sign in, review the site orientation map, be advised of the muster point in case of evacuation or emergency and explained the hazards on-site.

Contractors will be required to do a site tour with a Supervisor or the person designated in charge of the shop area and sign off on the Sub-Contractor Orientation form before starting any work. They are to be given a "SAFETY ORIENTATION COMPLETE" badge so everyone at the work site is aware that they know what to do in the event of an emergency. These badges should be returned to the office upon completion of the work.

All contractors are subject to disciplinary actions if they are found to be negligent to our health and safety procedures. Since they are not employed under Swab Master Ltd, our disciplinary policy will not apply. On first offense they will receive a verbal warning about their behaviour and the consequence and on a second occurrence they will be asked to leave the premises and black listed from working on our locations in the future.

Contractors are to report any and all health and safety hazards they observe to a Manager or their assigned Supervisor. The Manager or Supervisor is responsible for filling out the required paperwork and ensuring the hazard is reported properly. Contractors are not required to correct hazards on Swab Master Ltd. property, however, if the hazard is low risk and the contractor feels confident they are able to resolve the issue – they are permitted to do so, providing they are protecting their own and others health and safety. The contractors are still obliged to report even minor hazards to a Manager or Supervisor.

Contractors will be required to be involved in the investigation process only if they were directly involved in any accident or incident that prompted the investigation. If the contractor was involved in any accident or incident that triggered an investigation – they will be required to give an account of the events and help determine the root cause of the occurrence. If they were a witness to an accident or incident – they will be required to give a witness statement only and will not be asked to participate in the investigation.

## VISITOR POLICY

Visitors at the Swab Master Ltd. main office/shop are responsible to ensure, as far as it is reasonably practicable:

- They have signed in at the Main Office and have been assigned to a Swab Master Ltd. representative and remain with that person at all times while on Swab Master Ltd. property.
- They are protecting their own and others' safety and health.
- They are using all safety and health devices and protective equipment as required.
- They have reviewed the Site Map and are aware of the muster point in the event of evacuation.

Visitors are required to be accompanied by an employee of Swab Master Ltd. AT ALL TIMES while in the vicinity of Swab Master Ltd. operations.

## COMPANY ORGANIZATION

**ORGANIZATIONAL CHART**

**ORGANIZATIONAL CHART**

**REVISED MAY, 2019**

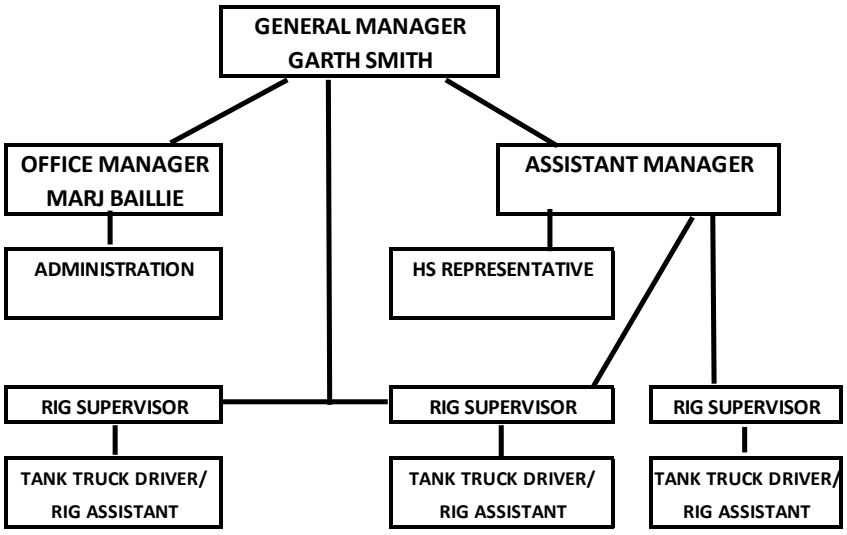
**NOTES:**

**Swab Master Ltd. operates a crew of 1 RIG SUPERVISOR & 1 TANK TRUCK DRIVER/RIG ASSISTANT **(Possibly 2 depending on the clients request).**

**While some crews are set and do not change, most crews are revolving with the RIG SUPERVISOR having any one of the ASSISTANTS that are availablel for the job.**

**Every Employee is responsible for reviewing and understanding the Health & Safety Program.**

**** Denotes Part-Time or On-Call Employees**




Health and Safety is EVERYONE'S responsibility

# Swab Master Ltd. Occupational Health & Safety Policy

Swab Master Ltd. and its divisions are committed to providing their clients with the highest quality of service. In order to accomplish this goal, the safety of our employees, contractors, and the general public is of utmost importance. This includes the protection and maintenance of the health and safety of employees (physical, psychological, and social well-being). On-going hazard analysis, communication and training will provide our workers with the skills and knowledge to perform their jobs efficiently and with reduced risk.

It is the duty and responsibility of every employee to actively participate in making the work environment safe and productive. All employees must comply with the safety standards set by the company as well as all relevant government regulations. All employees have the Right to Know, Right to Participate and the Right to Refuse. If any employee feels they are in danger or their job is too dangerous, then it their responsibility to stop what they are doing at once and report this to management.

Management and supervisors are responsible to ensure that all employees are properly trained, and all appropriate safety procedures are followed. "Safety First" is to be promoted in all our operations.

Workers are responsible for ensuring that they are protecting the health and safety of themselves and others at all times and to adhere to all safety protocols implemented. They are our best resource to help continually evolve the health and safety program.

Contractors and visitors are responsible for their own health and safety and that of others in the work place. Contractors and visitors are to follow our health and safety policies as well as all applicable health and safety legislation.

Our goal is a healthy, injury free, productive working environment for our employees and for others around us. Our commitment is to the safety of our employees. Working together we will achieve this goal. "Start Smart - Stay Safe"!

START
SMART
STAY
SAFE

Garth Smith
General Manager

Date: March 17, 2020

# Swab Master Ltd.
# Employee Health and Safety Policy Agreement

*I am committed to a Health and Safety Program that protects other workers, the general public, all property, the environment and me.*

Being an operator of equipment for Swab Master Ltd, I declare that "Safety First" is the number one priority, for my livelihood depends on it.

I am responsible and accountable for my health and safety performance.

I will comply with all Government Regulations and Legislations at all times. I will use my personal protective equipment, which is required by my safe work procedure and by my client's protocol, at all times. As a driver of the vehicles or member of the administration, I am responsible for any infractions of the Highway Traffic Act, National Safety Code and Work Place Health and Safety Legislations (Occupational Health & Safety) at all times.

Swab Master Ltd. encourages health & safety suggestions in Safety Meetings, by open door management communication or by electronic submission and will take the opportunity to provide suggestions, policies and procedures when required.

By working together with co-workers and company representatives, contractors and government officials, we can keep the workplaces accident free. I commit to contributing in the health and safety program by being observant of hazards and reporting them and participating in pre-job safety meetings prior to starting work. I promise to "Start Smart - Stay Safe"

I hereby acknowledge receipt of my Swab Master Ltd. "*Health & Safety Manual*" and the "*Employee Hand Book"* and agree to adhere to all Regulations therein and any other changes, which may occur or be added. I will read the manual and ask my superior if I am unsure about any policy or procedure.

| | |
|---|---|
| Employee (print) | Employee (signature) |
| Date: | Supervisor's / Manager's (signature) |

# EMERGENCY RESPONSE PLAN

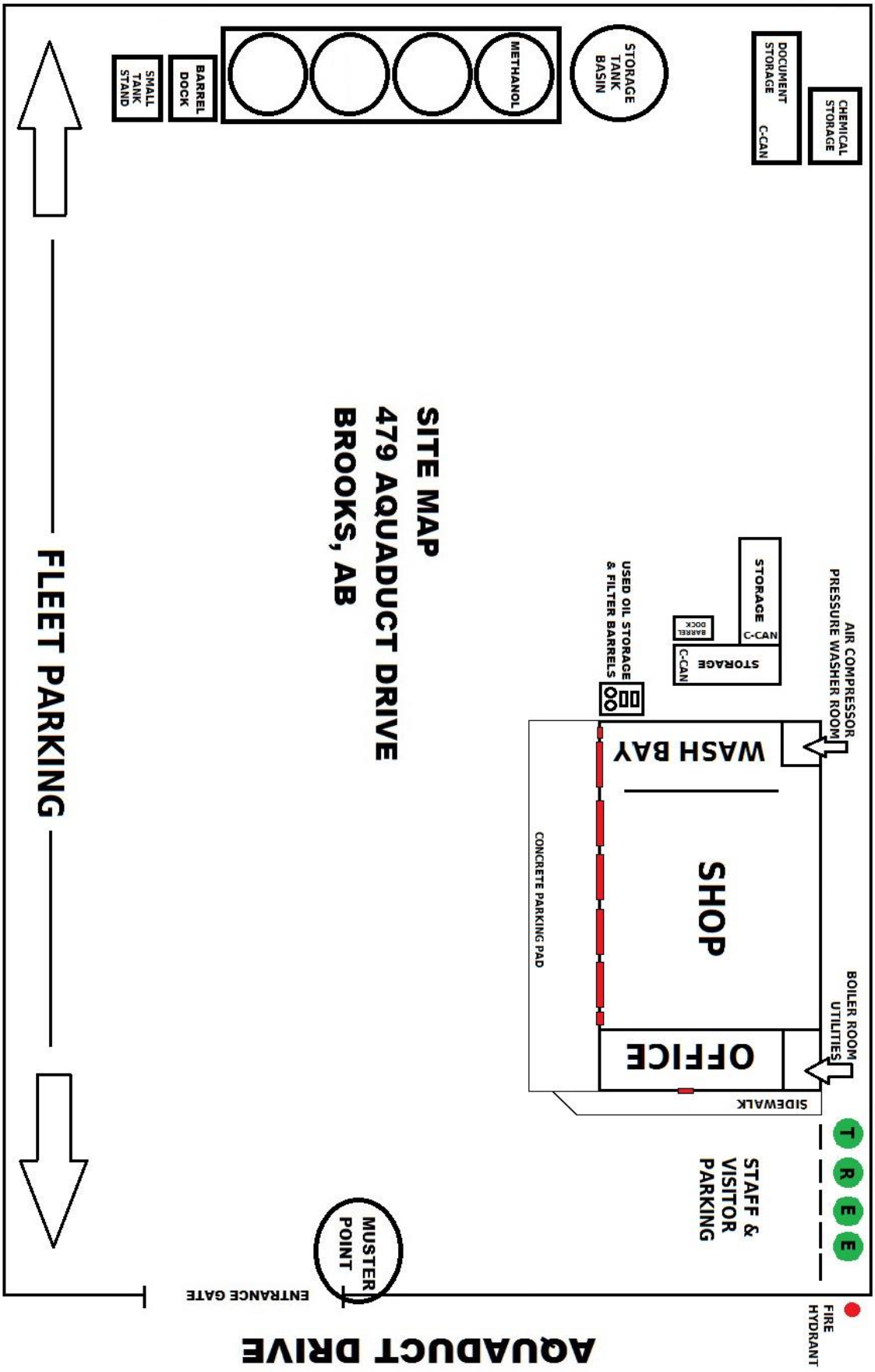
## EMERGENCY REPORTING AND EVACUATION PROCEDURES

Types of emergencies to be reported by site personnel are:

- MEDICAL
- FIRE
- SEVERE WEATHER
- CHEMICAL SPILL
- VIOLENCE

THIS DOCUMENT SHOULD BE TAKEN TO THE MUSTER POINT WITH YOU UPON EVACUATION OF THE BUILDING

# EMERGENCY RESPONSE PLAN
## SHOP / OFFICE MAP


SITE MAP
479 AQUADUCT DRIVE
BROOKS, AB
CHEMICAL STORAGE
DOCUMENT STORAGE
C-CAN
STORAGE TANK BASIN
METHANOL
BARREL DOCK
SMALL TANK STAND
FLEET PARKING
AIR COMPRESSOR
PRESSURE WASHER ROOM
STORAGE
C-CAN
STORAGE
C-CAN
BARREL DOCK
USED OIL STORAGE
& FILTER BARRELS
WASH BAY
SHOP
OFFICE
CONCRETE PARKING PAD
SIDEWALK
BOILER ROOM
UTILITIES
T R E E
STAFF &
VISITOR
PARKING
MUSTER POINT
ENTRANCE GATE
FIRE HYDRANT
AQUADUCT DRIVE

## EVACUATION PROCEDURE

*Use the ERP Shop / Office Map and familiarize yourself with where to find your emergency exits, fire extinguishers and blow horns. These are to be used in evacuations only. Sounding the blow horns for "fun" will result in disciplinary action. Know and familiarize yourself with the following evacuation procedure:*

### *BROOKS SHOP /OFFICE*

- Remain Calm – try to help others to remain calm
- Sound the blow horn if no one has done so. 1 Long Blast for Evacuation. 3 Short Blasts for First Aid Emergency.
- If you hear the blow horn – take it seriously **- REACT**
- Leave the building by the nearest exit calmly and quickly – **do not stop to collect your things.**
- First person out to grab the attendance board & Emergency Response Plan
- Last person out of an exit– close that door behind you
- First person out is responsible for taking the attendance sheet and taking attendance
- ***479 Aquaduct Drive*** **-** Proceed to your muster point located at the main gate
- Do an attendance call to ensure everyone is out – give this to the most senior manager on site and last known locations of missing employees as soon as possible after arriving at the muster point.
- Call 911 if not already done – you will give them your name, address, and situation; identify if there is anyone not accounted for or injured persons.
- Injured persons: begin your first aid according to the situation
- The most senior management on site will assist all emergency personnel and in keeping the site clear for emergency vehicles.
- Keep quiet and follow direction of emergency personnel i.e.: Fire Chief, Police
- Call Garth at 403-793-0033.

**Do NOT under any circumstances go back in unless directed by an emergency professional**

### *IF YOU CANNOT LEAVE THE BUILDING*

- Find the closest safe spot possible.
- Call 911
- Give them your exact location, your name and the address

# AIR HORN PROCEDURES

**EMERGENCY/EVACUATION –**

SOUND HORN **1 LONG BLAST**

**FIRST AID ONLY –**

SOUND HORN **3 SHORT BLASTS**

AIR HORNS LOCATED AT BOTH SHOP EXITS & IN THE OFFICE

# SWAB MASTER LTD.

**First Aid Certificates (Brooks Shop Only)**

| EMPLOYEE | EXPIRY |
|---|---|
| Hong Zhong Guo | July 20th, 2020 |
| Kevin Krieger | January 22nd, 2021 |
| Philip Pinsent | December 12th, 2019 |
| Farley Schellenberg | January 9th, 2021 |
| Garth Smith | April 18th, 2021 |
| Neil Williams | February 14th, 2020 |

2021

# SWAB MASTER LTD.

## EVACUATION ATTENDANCE

DATE: _____ TIME: _____ LOCATION: _____

| EMPLOYEE NAME | IN | OUT | AT MUSTER POINT? | NOTES |
|---|---|---|---|---|
| | | | | |
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1) Write Employees Name
2) Check IN or OUT according to the attendance board
3) Now take attendance at the muster point & confirm all employees are accounted for
4) If any employee is missing - use the "NOTE" column to write last known location

# *MEDICAL EMERGENCY*

☐ Call medical emergency phone number
- Ambulance 911
- Fire Department 911

☐ Provide the following information
a) Nature of the medical emergency
b) Location of the emergency (479 Aquaduct Drive)
c) Your name & phone number

☐ Address your own safety first

☐ Do not move any victim unless absolutely necessary

☐ If you are not qualified to assist in First Aid, call someone who is

☐ If there is NO ONE available who is trained in First Aid, as a minimum, attempt to provide the following assistance:
a) Stop the bleeding with firm pressure on the wounds (NOTE: Avoid contact with blood or other bodily fluids if you are not wearing medical grade gloves)
b) Clear the air passages using the Heimlich Maneuver in case of choking

☐ In case of giving assistance to someone exposed to a hazardous material, consult the Material Safety Data Sheet (MSDS) and wear the appropriate Personal Protective Equipment (PPE). Attempt first aid only if you are qualified.

☐ In case of a psychiatric crisis, where the individual is threatening suicide, try to keep the individual occupied, but stay out of harm's way, while emergency services are called. If the individual is threatening harm to you or someone else, call the police and remove yourself to a safe location until emergency services arrive. If the individual refuses to get help, emergency services must step in.

# *FIRE & EXPLOSION EMERGENCY*

***When fire is discovered or explosion occurs:***

- ☐ Yell the LOCATION of the emergency, and sound the air horn. (i.e.: FIRE in the BOILER ROOM!!)
- ☐ Notify the Fire Department by calling 911
- ☐ Evacuate the area as quickly as possible. Follow Evacuation Procedure

***Fight the fire only if:***

- ☐ The Fire Department has been notified
- ☐ The fire is small and not spreading to other areas.
- ☐ Escaping the area is possible by backing up to the nearest exit
- ☐ You are trained on fire extinguisher use

***Upon being notified about the fire emergency, occupants must:***

- ☐ Leave the building using the nearest exit
- ☐ Assemble at the primary muster point located at the main gate or the secondary muster point across the street at PPI (460 Aquaduct Drive) if the fire is spreading toward the primary muster point
- ☐ Remain outside until emergency services arrive and confirm that it is safe to reenter the building.

# *SEVERE WEATHER& NATURAL DISASTERS*

## *TORNADO*

*If indoors:*

- ☐ When a warning is issued by sirens or other means, seek inside shelter immediately. If you are already in the shop, proceed to the internal muster point in the dispatch office.
- ☐ Stay away from outside windows
- ☐ Use arms to protect head and neck
- ☐ Remain in the muster point until the tornado threat is announced to be over

*If outdoors:*

- ☐ If caught outdoors and you cannot reach your designated shelter, lie flat in a ditch, excavation or culvert. If possible, lay flat holding onto the base of a small tree, bush or shrubbery to avoid being lifted or blown away.
- ☐ If caught while driving, drive away from the funnel at a right angle or to its direction of travel. If you cannot escape the path of the funnel, get out of your vehicle immediately and seek shelter in a ditch or ravine, keeping its slope between you and the funnel.
- ☐ If hail becomes a factor, use whatever you can to protect your head & body
- ☐ If caught in a built up area, seek shelter in a sturdy building. Go to an interior hallway or washroom on the lower floor.
- ☐ Avoid buildings with large span roofs such as malls or supermarkets
- ☐ Do not seek shelter under large trees due to lightening and tree fall risk.

## *FLOOD*

*If indoors:*

- ☐ If it is unsafe to leave the building, get to the highest area (the loft) and stay there until it has been determined that is safe to leave.
- ☐ Be ready to evacuate to the primary muster point located at the main gate or to the secondary muster point across the street at PPI (460 Aquaduct Drive)

*If outdoors:*

- ☐ Climb to the highest ground possible
- ☐ Avoid walking or driving through flood waters
- ☐ If your vehicle stalls, abandon it immediately and climb to higher ground

## *BLIZZARD*

*If indoors:*

- ☐ Stay indoors!
- ☐ If there is no heat, close off unneeded rooms or areas, stuff towels or rags in openings under or around doors, cover windows if possible.
- ☐ Eat and drink. Food provides the body with energy & heat while fluids prevent dehydration.
- ☐ Wear layers of loose-fitting, light-weight, warm clothing if available.

*If outdoors:*

- ☐ Find a dry shelter. Cover all exposed parts of the body
- ☐ If a shelter is not available, prepare a lean-to, wind break or snow cave to protect yourself from the wind.

- ☐ If possible build a fire for heat and to attract attention. Place rocks around the fire to absorb and reflect heat.
- ☐ Do NOT eat snow. This will lower your body temperature. Melt it first.

*If stranded in a vehicle:*

- ☐ Stay in the vehicle!
- ☐ Run the motor about 10 minutes each hour. Open the windows a little for fresh air to avoid carbon monoxide poisoning. Make sure the exhaust pipe is not blocked.
- ☐ Make yourself visible to rescuers. Turn on the dome & headlights while the vehicle is running (at night) and / or tie a colored cloth or reflective safety tape to the antenna or door.
- ☐ Make sure to move around and stretch to keep blood circulating and to keep warm.

## *CHEMICAL SPILL*

*When a minor chemical spill has occurred:*

- ☐ Stay clear of the immediate area where the spill has occurred and warn others of the spill.

- ☐ Assist injured or contaminated persons with first aid if you are able and trained to do so. However, do not put yourself at risk for contamination in the process.

- ☐ Assess the situation, is this an emergency? An emergency exists when there is significant high risk of:
  a) People
  b) Property
  c) Environment

  Minor spills of chemicals that are low in toxicity and/or volatility can be handled by personnel at the worksite.

- ☐ Deal with the spill in accordance with the instructions listed in the MSDS and be sure to wear proper PPE.

- ☐ Report the spill using an incident form to management.

*When a large chemical spill has occurred:*

- ☐ Immediately notify the designated emergency personnel.

- ☐ Using proper PPE, contain the spill as best as possible without putting yourself at risk for contamination.

- ☐ Secure the area and alert other worksite personnel.

- ☐ Do not attempt to clean up the spill unless trained to do so.

- ☐ Evacuate the area if necessary

- ☐ Attend to injured or contaminated persons with first aid if you are able and trained to do so. However, do not put yourself at risk for contamination in the process. Call the medical emergency number (911) if necessary.

- ☐ Call
  ***Environment Canada-Spill Reporting 1-800-222-6514***
  ***Transportation Safety Board 1-819-997-7887***
  ***Disaster Services and Dangerous Goods 1-800-272-9600***

# *VIOLENCE / HARASSMENT*

*The office has an air horn in place for emergency violence / harassment procedures. Tips for de-escalating an angry person are outlined in the "Emergency Response for Harassment / Violence in the Office" section in Element 3 of the Safety Manual.*

- ☐ If there is an employee / client / person in the office who is becoming increasingly aggressive toward the office personnel, they may call for assistance using 1 LONG Blast of the air horn.

- ☐ If you are working in the shop / yard and hear the LONG blast coming from the office, take your cell phone out and be ready to dial 911. Cautiously make your way around the front of the building and be observant of anything you can see through the windows. You do not want to startle the rattled person into action.

- ☐ If you can see the aggressor and that (s)he is not in possession of a weapon - open the front door and ask if you can be of assistance.

- ☐ If you CAN see that the perpetrator has a weapon, immediately back away from the door and call 911.

- ☐ Always use your best judgement in determining how to handle a hostile situation.

## *EMERGENCY RESPONSE PROCEDURE* *Element 8: Health & Safety Manual*

In accordance with Workplace Safety and Occupational Health and Safety regulations, Swab Master Ltd. is required to develop Emergency Response procedures to ensure that all personnel on site can be assisted and cared for in time of need or be evacuated to a safe area when life threatening situations arise.

Emergency Response procedures are put in place to assist personnel in time of life threatening situations. *Such emergency response procedures in place for Swab Master Ltd are considered conditions of employment and must be followed at all times while on site.*

Emergency Response procedures are discussed at pre-job safety meetings and all employees are made aware of the location of:

- Safe site (Muster point)
- Emergency phone numbers
- Cell phones and / or other means of contact

All personnel are required to help implement and maintain the emergency response plan by:

- Discussion
- Monitoring effectiveness of emergency response plan
- Awareness
- Adherence to the procedures

- Training

***Note:*** *However, because the work environment is not static and is continually changing, the emergency response plan (s) must be reviewed as activity progresses to ensure that the plans are current and applicable for the work area.*

## REPSONSIBILITIES

**The General Manager is responsible for:**

- Ensure emergency response roles and responsibilities are included into work site orientation and regularly reviewed at safety meetings.
- Coordinate post incident reviews within 48 hours to discuss emergency response and identify response plan strengths and improvement opportunities.
- Develop standard documents for use within the plan.
- Work with regulatory agencies and emergency response agencies regarding the site plan or issues arising from emergency situations.
- Review the Emergency Response Plan's effectiveness and make recommendations.
- Have documented evacuation drills and discuss procedures at safety meetings.

**Rig Managers/Supervisors are responsible for:**

- Communicating the Emergency Response Plan to new or transferred employees.
- Ensuring the emergency evacuation plan is available to the crew on site
- Evacuating the work area as outlined in the Emergency Response Plan.
- Participating in client company ERP drills and note in Safety Meeting notes.
- Conducting and documenting regular ERP drills
- Collecting information and documents relevant to an incident.
- Conducting head count and report results to management.
- Shutting down any operating equipment

## EVACUATION PROCEDURES

*Know and familiarize where to find your emergency exits, fire extinguishers and blow horns.*
*These are to be used in evacuations only. Sounding the blow horns for "fun" will result in disciplinary action. Know and familiarize yourself with the following emergency procedure:*

### *BROOKS SHOP /OFFICE*

- Remain Calm – try to help others to remain calm
- Sound the blow horn if no one has done so
- If you hear the blow horn – take it seriously -REACT
- Leave the building by the nearest exit calmly and quickly – **do not stop to collect your things.**
- Last person out of an exit– close that door behind you; ensure the attendance board is removed.
- First person out is responsible for taking the attendance sheet and taking attendance
- ***479 Aquaduct Drive*** - Proceed to your muster point located at the main gate
- Do an attendance call to ensure everyone is out – give this to the most senior manager on site and last known locations of missing employees as soon as possible after arriving at the muster point.
- Call 911 if not already done – you will give them your name, address, and situation; identify if there is anyone not accounted for or injured persons.
- Injured persons: begin your first aid according to the situation
- The most senior management on site will assist all emergency personnel and in keeping the site clear for emergency vehicles.
- Keep quiet and follow direction of emergency personnel i.e.: Fire Chief, Police
- Call Garth at 403-793-0033.

**Do NOT under any circumstances go back in unless directed by an emergency professional**

## *IF YOU CANNOT LEAVE THE BUILDING*

- Find the closest safe spot possible.
- Call 911
- Give them your exact location, your name and the address

## *ON SITE*

- Follow your evacuation procedures as per your pre job hazard assessment or your tail gate meeting evacuation plan

## NOTIFICATION OF NEXT OF KIN

*****Under no circumstances should the name of an accident victim or fatality be released without permission from Garth Smith, and/or the R.C.M.P.** It is important that the employee's next of kin be notified as soon as possible. Contact the Office or General Manager and they will assist you in this area. The name, addresses, and telephone numbers of next of kin are included in the employee's personal file.

### Non-Fatal Injury

**The next of kin should be notified in the following manner:**
If the injured person is capable, he/she should make the necessary telephone calls.
If the injured person is not capable, the Office shall make the following statement. They must exercise discretion when discussing the nature of the injury and answer any questions and make arrangements for necessary assistance. There is no need to create panic when notifying the next of kin.

> "An accident has occurred at _____ and your (relationship); (full name) has been injured. She/he has been taken to (Hospital) in_____ for treatment".

### Fatal Injury

The notification should be made in person, only under the discretion of the General Manager. The person notifying the family should be accompanied by the victim's family clergy, doctor, or friend. The R.C.M.P. will assist with the notification whenever possible and will ensure that the notification is complete. *Extreme discretion and tact is necessary.* The next of kin will be in extreme shock and require support and assistance.

**UNDER NO CIRCUMSTANCES IS THE NAME OF THE VICTIM TO BE RELEASED BEFORE THE NEXT OF KIN HAVE BEEN NOTIFIED.**

### Training and Information

Train employees in evacuation, shelter and other safety procedures. Conduct sessions at least annually or when:

- Employees are hired
- New equipment, materials or processes are introduced
- Procedures are updated or revised
- Exercises show that employee performance must be improved
- Provide emergency information such as checklists and evacuation maps.

**Employees Training**

All employees are required to have training in the following:

- First Aid
- TDG
- WHIMIS
- $H_2S$
- Petroleum Safety Training

**Other courses offered as required (but not limited to) include:**

Confined Spaces - Detection and Control - Fire Extinguisher Level II - Blowout Well Prevention (BOP) - Fatigue Management & Hours of Service – GODI

## ALBERTA Emergency Phone Numbers

(Emergency) 911 for: ambulance, hospital, RCMP

Swab Master 24-hour Emergency Response:

Garth Smith – Owner: 403-793-0033

Marj Baillie – Office Manager: 403-793-3956

***CANUTEC** "WHMIS & EMERG. DISPATCH" 613 - 996-6666*

Alberta "0" Zero (403) 544-4485

***Province of Alberta S.T.A.R.S. Emergency link center 1-888-888-4567***

***Province of Alberta POISON CONTROL 1-800-332-1414***

### *Canada-Wide Emergency Numbers*

***Environment Canada-Spill Reporting 1-800-222-6514***

***Transportation Safety Board 1-819-997-7887***

***Disaster Services and Dangerous Goods 1-800-272-9600***

### Government Agencies:

**Alberta Energy & Utilities Board** (A.E.U.B.)

Calgary Office: (403) 297-8311 Medicine Hat Office: (403) 527-3385

Fax: (403) 297-7336 Fax: (403) 529-3103

## Brooks Emergency Phone Numbers:

| | |
|---|---|
| R.C.M.P. | 403-362-5535 |
| FIRE | 911 (using cell phones request the town nearest to emergency) |
| AMBULANCE | 911 (using cell phones request the town nearest to emergency) |
| FIRE CHIEF | 403-362-2331 |
| HOSPITAL | 403-501-3232 |
| POISON CONTROL | 1-800-332-1414 |
| HYDRO (Fortis AB) | 310-9473 |
| GAS COMPANY (Atco) | 1-800-511-3447 |
| WATER (Brooks Utilities) | 403-362-3146 |

## Strathmore Area Emergency Phone Numbers:

| | | | |
|---|---|---|---|
| AMBULANCE (Office) | (403) 934-4079 | | |
| FIRE DEPARTMENT | (403) 934-3022 | | |
| HOSPITAL | (403) 934-4204 | | |
| TOWN OFFICE | (403) 934-3133 | | |
| R.C.M.P. (Dispatch) | (403)-934-3535 | Administration | (403) 934-3968 |

## Medicine Hat Area Emergency Phone Numbers:

| | | | |
|---|---|---|---|
| AMBULANCE (Office) | (403) 529-8800 | | |
| FIRE DEPARTMENT | (Emergency) 911 | | |
| HOSPITAL (office) | (403) 529-8000 | | |
| R.C.M.P. (Complaints) | (403) 548-2222 | (Administration) | (403) 548-2288 |

## Red Deer Emergency Numbers 911 (using cell phones request the town nearest to emergency

| | |
|---|---|
| R.C.M.P. | 403-343-5575 |
| FIRE | 911 (using cell phones request the town nearest to emergency) |
| AMBULANCE | 911 (using cell phones request the town nearest to emergency) |
| HOSPITAL | 403-343-4422 |

## Rimbey Emergency Numbers 911 (using cell phones request the town nearest to emergency

| | |
|---|---|
| R.C.M.P. | 403-843-2223 |
| FIRE | 911 (using cell phones request the town nearest to emergency) |
| AMBULANCE | 911 (using cell phones request the town nearest to emergency) |
| HOSPITAL | 403-843-2271 |

## Drumheller Emergency Numbers 911 (using cell phones request the town nearest to emergency

| | |
|---|---|
| R.C.M.P. | 403-823-2630 |
| FIRE | 911 (using cell phones request the town nearest to emergency) |
| AMBULANCE | 911 (using cell phones request the town nearest to emergency) |
| HOSPITAL | 403-823-6500 |

## Three Hills 911 (using cell phones request the town nearest to emergency

| | |
|---|---|
| R.C.M.P. (Office) | (403) 443-5538 |
| FIRE DEPARTMENT | 911 |
| AMBULANCE (Office) | 911 (using cell phones request the town nearest to emergency) |
| HOSPITAL | (403) 443-2444 – emergencies only |

## BASHAW 911 (using cell phones request the town nearest to emergency)

| | |
|---|---|
| R.C.M.P. (Office) | 780-372-3593 |
| FIRE DEPARTMENT | 780-372-3911 |
| AMBULANCE (Office) | 911 (using cell phones request the town nearest to emergency) |
| HOSPITAL | 911 |

Alberta Poison Control: 1-800-332-1414

## Spills:

Includes Petroleum crude oil, synthetic crude, sour gas, produced water and oilfield wastes.

Reporting is required if the release is >2.0 m3 (12.3 bbls) on lease, or any quantity off-lease, or any release from a pipeline, anywhere of any size that may cause an adverse effect.

> *****Remember: How well you train your workers may determine their ability to save your life.***

Transportation of Dangerous Goods
Phone: 613-990-2309 Fax: 631-954-4731 24Hrs: **1-800-272-9600**

**Alberta Environment**: Phone 1-800-222-6514 Fax: (780) 427-3178
All commercial chemical products such as:

- Diesel, gasoline, sulfur, solvents, corrosion inhibitors, methanol, lube oils, glycol, amine, etc.
- All spills or releases of dangerous goods, which occur during road transportation, loading, unloading or in storing of the dangerous goods.
- Spills or releases of materials to Federal Lands and those listed under the Canadian Environmental Assessment Act. Reporting is required for:
    - Any quantity, which occurs in a National Park, on a Native Reservation, or along a Railway Row.
    - If it is harmful to fish or fish bearing waters.

**Workplace Health & Safety (OH&S) Phone: 1-866-415-8690**
In Alberta, if you have difficulties reaching any Government agency, phone Emergency Management Alberta at 1-800-272-9600 (24 Hours).

**STARS** offers free of charge a job registration service. This service also includes establishing links with the emergency response agencies closest to the project and arranging for alternate response. STARS will also provide this service for projects in B.C., they may not respond themselves, but will still provide all of the planning services.

**IMPORTANT:** Upon job completion call to cancel the STARS service.
**Cell: *4567 Phone: 1-888-888-4567**

**They Need to Know:**

1. Who you are/Company
2. Call back number/radio frequencies/sat, phones, etc.
3. Type of work
4. Location (i.e. GPS, Long/Lat.) at a minimum, LSD
5. Number of people on location
6. Level of medical training on site/transport capabilities
7. Landing Zone (LZ) in relation to hazards, location to coordinates, and large markings in the area
8. Landing Zone Markers

## MEDIA RELATIONS

If the media should arrive at the scene of the emergency before the company has prepared a statement, the senior Swab Master Ltd. Representative at the scene of the emergency is authorized to release the following statement:

> **"We are currently dealing with the emergency situation to ensure the safety of personnel, property, public and the environment. A more comprehensive statement will be released as soon as more factual information has been determined".**

DO NOT SPECULATE ON THE CAUSE OF THE EMERGENCY OR PROVIDE THE MEDIA WITH ANY TYPE OF STATEMENT THAT IS "OFF THE RECORD".

Before admitting the media onto Swab Master Ltd. Property, the senior Swab Master Ltd representative shall ensure that the area is absolutely safe and admittance will not hamper emergency services or investigation. The media *shall always be accompanied* while on Swab Master Ltd. property.

Garth Smith 403-793-0033 (cell)

### Emergency and Level Definitions

An Emergency is an event that calls for immediate special action to prevent or minimize danger to Life, Property or the Environment. For any Emergency, the involved department must designate an Emergency Director and On - Scene Supervisor. Rig Supervisors will be classified as on scene supervisors and or other workers if the Rig Supervisor is unable to perform his duty.

**All workers are to be trained and made aware of the following levels of emergency, who to contact, what to do and how to follow the procedure. This information must be discussed at pre-job safety meetings, monthly safety meetings and written information must be made available. A yearly drill will be performed.**

**Good communication is important for a first aid plan to be successful. Make sure all workers are made aware of location of supplies, emergency equipment etc. This information needs to be discussed at pre-job safety meetings.**

## Levels of Emergencies

### When to Contact Safety Coordinator:

- All level 1, 2, and 3 emergencies.
- Immediately for accidents involving an injury or fatality.
- H2S emission.
- Hazardous chemical spill.

**Note:** Only one condition of the next emergency level is required to elevate the overall level classification of the specific incident.

### Level 1- At this level:

- The situation is confined to and expected to remain confined to company controlled property.
- There is no immediate danger to the public or risk of significant adverse to the environment. There is minimal potential for safe operating control to be lost.
- The situation is expected to be handled without the need for outside emergency response services such as police, fire and ambulance.

### Level Two- At this level:

- The situation may or may not be confined to company controlled property.
- There exists a potential danger to the public and/or the situation may have adverse impact on the environment.
- There is a moderate potential for safe operating control to be lost.
- Outside emergency services will be alerted and kept informed of the situation.

## Level Three- At this level:

- The situation may or may not be confined to company controlled property.
- Serious injury or fatalities have occurred.
- Serious immediate damage to the environment, surrounding areas or communities has resulted, or has the potential to occur.
- Safe operating has been lost or is expected to be lost.
- Internal and/or external emergency response services are required to achieve control of the situation.

## FIRST AID PLAN

***In accordance with Workplace Safety and Occupational Health and Safety regulations, Swab Master Ltd has developed Emergency Response procedures to ensure that all personnel on site can be assisted and cared for in time of need or be evacuated to a safe area when life threatening situations arise. All injuries and / or illnesses are to be reported to head office and management immediately. All incidents and illnesses are recorded and kept on file at Swab Master Ltd. head office.***

## Assessing a work site for first aid requirements

1. **How hazardous is the work**

- Review the hazards and types of injuries and illnesses likely to occur on the job site prior to commencement of the job. Determining the exposure to the workers will enable you to decide what steps and procedures are to be followed to ensure the workers will receive the best medical attention if an incident occurs. Always consider the possibility of a worker being alone on a job site.

2. **The time it takes to travel to a health care facility**

- It will have to be determined whether the site is considered to be a remote site or immediate to heath care facilities. If medical attention is immediate you will not require specialized planning and therefore procedures for emergency response will be followed.

## If special advanced planning is required then the following procedure is to be followed:

Depending on the remoteness of your area you will Contact **STARS** for the JOB REGISTRATION SERVICE Phone: 1-888-888-4567 Cell: *4567

Contact the ambulance service closest to the job site (see phone numbers for ambulance services closest to the area you will be working at on the ERP phone lists.

If there is a potential for worker exposures then municipal emergency services may need to be contacted ahead of time so that any specialized treatment, supplies and equipment are in place.

**The types of information you will be required to give are as follows:**

- Who you are/Company
- Call back number/radio frequencies/satellite phones, etc.
- Type of work
- Location (i.e. GPS, Long/Lat.) at a minimum, LSD
- Number of people on location
- Landing zone in relation to hazards, location to coordinates, and large markings in the area
- Landing zone markers

## ****ALWAYS REMEMBER TO CALL BACK WHEN JOB IS COMPLETED

**1) The numbers of workers on the site**

- Lone workers are to be monitored hourly so proper communication is very important
- Large amount of workers would require that more services be available to assist in an emergency.

**SWAB MASTER LTD DOES NOT REQUIRE THEIR EMPLOYEES TO WORK ALONE BUT WILL BE PREPARED AND TRAIN ALL WORKERS IF THIS SITUATION SHOULD ARISE.**

**First Aiders** First Aid Courses: (Saint John Ambulance and (or) Canadian Red Cross)
***To comply with OH&S first aid requirements Swab Master Ltd. employees are required to take the above course. We require that ALL of our employees have an Emergency First Aid course. This enables us to work in low, medium or high hazard work areas. Courses are documented and employees are enrolled in new courses before expiration of existing course.***

## *Common Types of Emergencies at Swab Master Ltd.:*

- Highway/Equipment Failure Emergency
- Accidents
- Environmental Emergencies
- Threats
- Bomb Threats
- Tornado Emergencies
- *Fire and Possible Explosion*
- *Overhead Power lines*

**Always have a backup plan if the first type of transportation is not available. Being prepared can save a life.**

## Highway, Equipment Failure Emergency

If your equipment experiences a mechanical failure on a highway, follow the procedure:

- Set out emergency flairs or reflectors.
  **1**: 30 meters (100 feet) in front and behind the equipment.
  **2**: 150 meters (500 feet) in front and behind the equipment if you are on a crest of a hill.
- Notify head office – see your emergency call list
- Do not leave your vehicle unattended
- **Wait** for help to arrive

## Accidents

If you are involved in an accident, you must stop. *Failure to stop is a criminal offence*. In the event of an accident, if at all possible try and follow the necessary steps. At any given time, contact the Emergency Director.

- Set out emergency flairs or reflectors.
  **1**: 30 meters (100 feet) in front and behind the equipment.
  **2**: 150 meters (500 feet) in front and behind the equipment if you are on a crest of a hill.
- See that any injured persons are protected from further injury, but do not attempt to move them unless it is absolutely necessary.
- Notify the police.
- Inform headquarters as per your emergency phone list
- **Do not discuss the accident, except with the police officer or Swab Master Representative**.
- Do not leave your equipment unattended unless directed to do so.
- Do not move any vehicle(s) involved until the police arrive.

## Complete an accident report indicating the following:

- Date, time, and exact location.
- Make, model type, license number, insurance company (if able to access), owners and passengers names and contact numbers and addresses for every vehicle involved.
- Extent of injuries.
- The name of the hospital or clinic where the patients were transported.
- Description of damage to the vehicles or property.
- Name and addresses of witnesses, license numbers and the first vehicle on location.
- The name and department of the investigating police department.

*****If you can, try and make a diagram of the accident scene. If you have a camera or cell phone camera available, try to include the following:***

- Terrain- upgrade, downgrade or level. Do this from both sides of the accident.
- Weather and traffic conditions.
- Obstructions.
- Type of traffic signs and signals.
- Path of travel of involved vehicles before impact, point of impact and after impact.
- Type of road – 2 lanes or 4 lanes.
- Measurements such as road and lane width, distances from fixed landmarks, etc.

## Environmental Emergencies

**When to contact Alberta Environment**: Phone: 1-800-222-6514 Fax: (780) 427-3178

- H2s release
- Unintentional spills/leaks/emission to environment from facilities.
- Spill of oil, brine, and hazardous or toxic materials.
- Evacuation to the public
- Spill of dangerous goods.

**Provide information to Provide Alberta Environment:**

- Time, location and nature of emergency.
- Extent of damage and action taken.
- Nature of adjacent land, topography, rivers, lakes and land use.
- Proximity to people, public areas or other industrial operations.
- Name of Safety Supervisor.
- Which government agencies advised

**For spills, actions include:**

- Ensure the waste or product which may be incompatible with a released with a released material is kept away from the affected area.
- Keep any potential ignition source away from the emergency area if spilled material is flammable.
- Ensure that W.H.I.M.I.S. trained personnel are available for assistance.
- Apply water fog over the contaminated area if possible to avoid vaporizing.
- Minimize affected area with appropriate containment.
- Coordinate clean up, place recovered contaminated materials in appropriate containers or disposal systems.

## Bomb Threats

- Never try to remove or disclaim an object that may be a bomb- this is a job for the experts.
- Workers may be asked to assist the police if a bomb threat is received. Generally, this assistance would be limited to searching the site for suspicious objects and unlocking doors and cabinets. The decision to assist the police in the search for a bomb is ***totally voluntary.*** The Company does not expect its employees to assist if they prefer not to do so.

## Threats

Although many threats have proven to be hoaxes, it is Company Policy that if a threat is received at any of its operations, it will be assumed that the threat is real until the police have investigated and determined otherwise. Depending on the circumstances, threats will be considered Level Two or Level Three emergency. The R.C.M.P. must be contacted and the Emergency Response Plan activated if a threat is received. If a threat is received by telephone:

- Remain Calm.
- Be courteous to the caller.
- Listen carefully to everything you are told.
- Do not interrupt the caller.
- Obtain as much information as possible from the caller.
- Try and record the information on an incident or near miss report.
- The senior person on-location will become the On-Scene Commander.
- Contact a senior management representative, who will become the Incident Commander
- The On-Scene Commander is authorized to evacuate the premises and contact the R.C.M.P. before contacting an Incident Commander if he/she believes that circumstances require immediate action.

## Tornado Emergencies

A tornado is nature's most violent form of storm activity. It can produce an upwardly spiralling wind between 120 to 450 kilometers per hour, producing devastating damage along a path of 50 to 300 meters in width.

### What does a tornado look like?

A Tornado is recognizable by a funnel cloud hanging from a base of a dark, ominous looking storm cloud. The sounds have been described as a tremendous roar which sounds like an express train or jet aircraft. The clouds are green or yellow tinge.

### Weather Warnings

Weather offices, radio and television issues, repeated weather watches and warnings.
Stay tuned to your radios for updated storm information.
The word *Tornado* will be used in three different weather announcements.

1: Severe thunderstorm warning. Thunderstorms can produce tornados.
2: Tornado Watch: A "*WATCH"* is an advisory only. Nothing may happen but a watch could develop into a warning. ***Stay Alert***
3: Tornado Warning: A "*WARNING"* means that the event is imminent. ***Monitor warnings***

## Shelters: Select a shelter that would offer protection such as:

- A basement with sound solid flooring.
- Underneath a stairway that leads to a basement.
- Rooms with concrete structure.
- Offers protection from glass or flying debris.
- Closets or inner rooms.

Note: Stay away from large areas or open span roofs and windows.

## Post Storm:

After the storm re-unite the employees in a designated area away from the area.

- Do not return to the storm area due to interferences of rescue teams.

- Avoid using telephone except in an emergency.
- Monitor local media reports for information.
- Drive carefully and watch out for debris.
- Wait until you are advised that it is safe to enter premises.
- Proceed with caution.
- Check for leaking gas lines or pipes in your building.

## Outdoors

If you are caught outdoors and cannot reach a safe haven:

- Lie flat in a ditch, excavation or culvert.
- If possible: hold onto the base of a small tree, shrubbery to avoid being lifted up or blown away.
- If caught while driving; drive away from the funnel at a right angle or to its direction of travel…If you cannot escape the path of the funnel, get out of your vehicle immediately and seek shelter in the ditch or ravine, keeping the slope between you and the funnel.

### *Fire and Possible Explosion*

**Emergency Procedure**:

- Sound emergency horn, verbal or mechanical Alarm.
- Power down- set brake on drum if the works are still in the hole.
- Kill all the power to the equipment.
- Activate the Emergency Shut Off Switch to the tractor.
- Shut fuel source down to well if possible.
- Move to the safe zone on the lease. (The opposite direction of the flags)
- Take head count and make sure that all personnel are accounted for.
- Contact administration. (He may want to call for Well Secure)
- Contact Customer if directed by administration.
- Activate EMS.
- Stay in the safe zone until safe.

**More information is needed if the gasses may contain $H_2S$, consult the $H_2S$ section in the manual.**

## *OVERHEAD POWER LINES*

**NO ONE OTHER THAN AUTHORIZED POWER COMPANY SHALL BE PERMITTED TO LIFT OVERHEAD LINES TO PERMIT A LOAD TO PASS BELOW. Never attempt to rescue anyone involved in a power line incident (or any electrical incident) until the system has been de-energized by a qualified utility worker**

If your vehicle load comes in contact with an overhead power line:

- Stay in the vehicle unless there is an additional life threatening emergency (i.e.: fire)
- Drive the vehicle away from the power line only if it is safe to do so
- Call 911 or local emergency number. Attract attention by flashing the vehicle lights or sounding the horn, if necessary.
- If you must leave the vehicle, never contact the vehicle and the ground at the same time:

- To make a safe escape, keep both feet together and hands by your side make a short jump from the vehicle.
- Ensure your entire body clears the vehicle and you land on your feet keeping them together, without stumbling
- Do not allow any part of your body to touch the vehicle while your touching the ground – do not attempt to close the vehicle door
- Shuffle or hop away from the vehicle. Don't walk or run:
- If shuffling, shuffle without lifting your feet from the ground and without moving them forward more than a show-length at a time

- If hopping, hop with both feet together to avoid straddling zones with different voltages
- Keep shuffling or hopping until you're at least 10 metres (33 feet) from the downed power line.

## *EMERGENCY EVACUATION DRILLS:*

To ensure workers understand and are able to respond safely to an emergency, emergency situation tests will be conducted at least once per year. These tests will be used to identify any deficiencies in the program and any corrective action(s) required to rectify the deficiency. A written report will be completed immediately following the drill. The documentation will provide information as to the date and time of the drill, any deficiencies observed and the corrective action(s) necessary as a result. This information will be kept on file for 5 years and serve as documentation that the drill occurred.

## Well Site Evacuation Drill Procedure

One common means of protection is evacuation. An immediate evacuation to a predetermined area away from the facility may be necessary.

**Procedure:**

- Determine the conditions under which an evacuation would be necessary.
- Establish a clear chain of command. Identify personnel with the authority to order an evacuation.
- Designate employees to assist others in an evacuation and to account for personnel.
- Designate personnel to continue or shut down critical operations while an evacuation is underway. They must be capable of recognizing when to abandon the operation and evacuate themselves.
- Designate primary evacuation routes and a safe site (muster point). Ensure it is as follows:
  - Wide enough to accommodate the number of evacuating personnel
  - Clear and unobstructed at all times
  - Unlikely to expose evacuating personnel to additional hazards

### Assembly Areas and Accountability

- Designate assembly areas where personnel should gather after evacuating.
- Take a head count after the evacuation.
- Establish a method for accounting for non-employees.
- Establish procedures for further evacuation in case the incident expands.
- Search and rescue should be conducted only by properly trained and equipped professionals.

## Training and Information

Train employees in evacuation, shelter and other safety procedures. Conduct sessions at least annually or when:

- Employees are hired
- New equipment, materials or processes are introduced
- Procedures are updated or revised

## EMERGENCY EQUIPMENT

All Rig units are to be equipped with

1) 3 Blankets
2) Eye Wash Station(s)
3) First Aid Kits # 2
4) Scott pack(s)
5) Personal gas monitor(s)
6) Fire Extinguishers

Shop/Main Office

Eye wash station
First aid Kits
Burn Kit
Scott Paks
Fire Extinguishers
Blankets

### First Aid Kit # 2 contains:

(a) 10 antiseptic cleansing towelettes, individually packaged;
(b) 50 sterile adhesive dressings, individually packaged;
(c) 20 10 centimetres x 10 centimetres sterile gauze pads individually packaged;
(d) 3 10 centimetres x 10 centimetres sterile compress dressings, with ties, individually packaged;
(e) 3 15 centimetres x 15 centimetres sterile compress dressings, with ties, individually packaged;
(f) 1 20 centimetres x 25 centimetres sterile abdominal dressing;
(g) 2 conform gauze bandages — 75 millimetres wide;
(h) 4 cotton triangular bandages;
(i) 8 safety pins — assorted sizes;
(j) 1 pair of scissors;
(k) 1 pair of tweezers;
(l) 1 25 millimetres x 4.5 metres roll of adhesive tape;
(m) 2 crepe tension bandages — 75 millimetres wide;
(n) 1 resuscitation barrier device with a one-way valve;
(o) 6 pairs of disposable surgical gloves;
(p) 1 sterile, dry eye dressing;
(q) 1 first aid instruction manual (condensed);
(r) 1 inventory of kit contents;
(s) 1 waterproof waste bag

**Swab Master will consider all Rig Units to carry: First Aid Requirements for High Hazard Work**

| No. of workers at work site | Close work site (up to 20 minutes) | Distant work site (20 – 40 min) | Isolated work site (more than 40 min) |
|---|---|---|---|
| 2- 4 | 1 Emergency first aider<br>No. 1 first aid kit | 1 Standard first aider<br>No> 2 First aid kit<br>3 Blankets | 1 Standard first aider<br>No. 2 First aid kit<br>3 Blankets |

**First Aid Requirements for Low Hazard Work – Main Office**

| No. of workers at work site | Close work site (up to 20 minutes) | Distant work site (20 – 40 min) | Isolated work site (more than 40 min) |
|---|---|---|---|
| 2-9 | No. 1 first aid kit | 1 Emergency first aider<br>No> 2 first aid kit | 1 Standard first aider<br>N. 2 first aid kit |

**First Aid Requirements for Medium Hazard Work - shop**

| No. of workers at work site | Close work site (up to 20 minutes) | Distant work site (20 – 40 min) | Isolated work site (more than 40 min) |
|---|---|---|---|

## Fire Extinguishers Procedure

Good housekeeping is essential in the prevention of fires. Fires can start anywhere and at any time. This is why it is so important to know which fire extinguisher to use and how it operates. Always keep fire extinguishers visible and easy to get to. Fire extinguishers have to be maintained and inspected on a regular basis to ensure that they are in good operating condition. All inspection and repairs to extinguishers must be recorded. All fire extinguishers must have tags with dated inspections by employees monthly. All fire extinguishers will have a yearly inspection by an accredited company.

### Responsibilities:

All employees at Swab Master are to understand this procedure and the chemicals used and / or stored at the shop
Employees should know locations of all fire extinguishers.
All employees are to be familiar with the MSDS sheets for the chemicals used/stored at Swab Master.

### TYPES OF FIRES

**Class A: These fires consist of wood, paper, rags, rubbish and any other ordinary combustible material.**
Recommended Extinguishers
- Water from a hose, pump type water can or pressurized extinguisher
- Soda ash extinguishers

Fighting the fire: soak the fire completely – even the smoking embers

**Class B: Flammable liquids, oil and grease.**
Recommended Extinguishers
- ABC Units
- Dry chemical
- Foam and carbon dioxide

Fighting the fire: Start at the base of the fire and use a swinging motion from left to right, always keep the fire in front of you.

**Class C: Electrical equipment**
Recommended extinguishers
- Carbon dioxide
- Dry chemical (ABC units)

Fighting the fire: Use short bursts on the fire. When the electrical current is shut off on the Class “C” fire, it can become a Class “A” fire if the materials around the electrical fire are ignited.

## *EMERGENCY FIRST AID PROCEDURES*

***Do you have the First Aid app on your phone? – If so, USE IT!! Read your First Aid & CPR Manual – the following is a quick guide only.***

There are **3** steps to follow when assessing an emergency situation. By following these steps you will minimize any confusion that can occur at the scene. These are CHECK, CALL, and CARE.

**1a. CHECK the scene**

when assessing the situation you will first want to make sure there is not an immediate danger to you. Survey the scene; look and listen and ask yourself these questions:

- Is it safe? Are there any gaseous odors, something that could fall on you, etc?
- What could have happened?
- How many people are involved?
- Is there anyone that can help you?

Once you have made sure the area is safe for you then you will proceed to the victim and check for life-threatening conditions and ask yourself these questions:

**1b. CHECK the victim**

is the Victim:

- Unconscious?
- Having trouble breathing or not breathing at all?
- Showing signs of life: breathing or chest movement?
- Severely bleeding?

### FIRST AID STEPS

1. Check the scene and then the person.

2. Obtain Consent

3. Call 9-1-1 for any life threatening conditions.

4. Ask the person—
   - What is your name?
   - What happened?
   - Where do you feel pain or discomfort?
   - Do you have any allergies?
   - Do you have any medical conditions?
   - Are you taking any medications?
   - When did you last eat or drink anything?

5. Check head to toe for:
   - Bleeding, fluids or wounds.
   - Skin color and temperature
   - Medical ID bracelets or necklaces.
   - Observable signs of pain.

6. Continue to monitor (ABC's) until help arrives
   - Airway
   - Breathing and
   - Circulations

**3. CALL**

Call **9-1-1**. Calling is the most important action you can do to help someone who is ill or injured. This will dispatch the emergency medical response team ensuring they arrive at the scene as quickly as possible. This is important! If you don't call **9-1-1**, no emergency help will come. **NOTE: YOU MAY PHYSICALLY NOT BE ABLE TO PERFORM CPR FOR AN EXTENDED PERIOD OF TIME.**

**WHO SHOULD CALL 9-1-1?**

- If **SOMEONE** else is around, instruct **THEM** to call **9-1-1** so you can begin **CARE**.
- If you are **ALONE** : CALL **9-1-1** FIRST

Some protocols state that if you come upon an unconscious child, younger than 12 years old or any victim of a drowning, give 2 minutes of CPR and then call **9-1-1**. *BUT remember, no emergency help will arrive until you call.

**4. CARE**

At this point, you have to decide if CPR or FIRST AID is required. It is always recommended to use gloves and a breathing barrier when giving emergency care. By following standard precautions to protect yourself, you can minimize the risk of disease transmission.

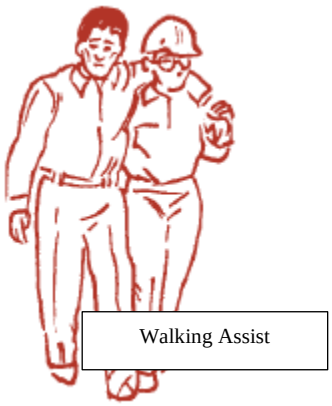
Follow reporting protocol & report the incident to Swab Master Ltd. Head Office or Management immediately.

## MOVING AN INJURED PERSON

The rule to remember when giving care is "Do No Further Harm". It is very dangerous to move an injured person because further injury can occur and complicate the recovery. ONLY move a person under the following THREE circumstances:

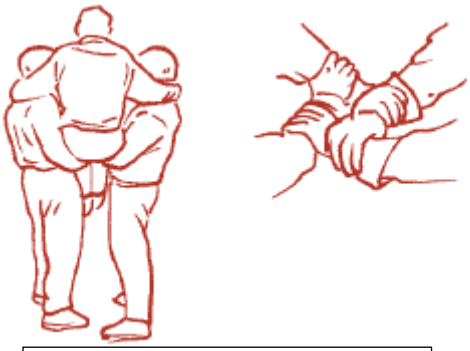
- 1. When there is imminent and immediate danger in an area that is unsafe.
- 2. When you get to another person with more serious injuries and they are blocking access.
- 3. When you need to get them into a position to provide proper care such as lying down to do CPR.

## EMERGENCY MOVES

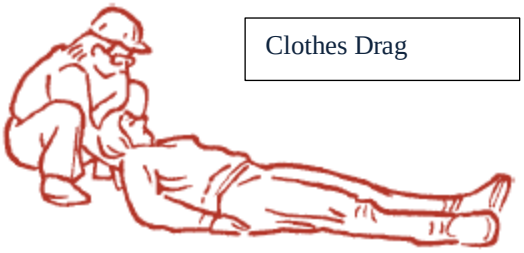


Walking Assist

Pack-Strap Carry



Two-Person Seat Carry



Clothes Drag

There are more emergency moves such as the blanket drag and the armpit drag. You will need to assess your situation and choose the drag that will help you get the victim to a safe place and position.

## CHECKING an ADULT from head to toe:

Do NOT move any body part that hurts. Start with their head and look for any cuts, bleeding, or bruises and feel their forehead for temperature, color and moisture. Then check through the limbs and down the torso looking for injuries and listening for signals of pain. Watch for changes in consciousness and signs of breathing trouble. Have the person rest while you care for any conditions you find.

## SHOCK

After a serious injury and/or severe bleeding, a person may go into Shock. This occurs when not enough blood is being delivered to all of the body parts. A person may experience a rapid heartbeat and circulation problems and may collapse as a result. Signs that a person is going into shock will be:

- Restlessness
- Irritability
- Altered Consciousness
- Nausea or Vomiting
- Rapid Breathing
- Pale Cool Skin
- Excessive Thirst

## CARE For Shock

- Do NOT give the person anything to eat or drink
- Control external bleeding
- Keep him/her from over-heating or getting chilled
- Elevate the legs about 12 inches

## MONITOR the A.B.C. – Airway, Breathing, Circulation

Prevent disease transmission by using gloves and a breathing barrier. Blood-borne pathogens can be spread by coming in direct contact with the blood of a victim that has a disease. Since it is impossible to know if there are pathogens in another person's blood, you can minimize the risk of disease by taking preventive measures. When responding to an emergency or sudden illness, it is always advised that you wear gloves and have a breathing barrier. Even a plastic grocery bag with a hole ripped in it is better than nothing. After giving care, dispose of the barrier and gloves and wash hands thoroughly.

**Airway** – Open the airway by tilting the head back and raising the chin
**Breathing** – Put your ear near their mouth and listen for air, feel for breath and look to see if the chest is rising.
**Circulation** – Check for signs of life, including a pulse on a child or an infant, and for bleeding.

## ROLLING A PERSON ONTO THEIR BACK

To provide CARE, a person must be on his/her back. If he/she needs to be rolled over, position yourself so that you are facing the back of the head. Move the arm closest to you up next to the head. Place one of your hands on the back of the neck and the other on their hip. Gently pull him/her towards you keeping the body alignment of the head, neck and spine in a straight line.

## RECOVERY POSITION

If the victim must be left alone so that you can call **9-1-1** or retrieve the AED, or if the victim vomits, place them in the recovery position. This will allow them to maintain a clear airway and stay in a position so as not to aggravate a spine injury. You must support the head and neck and keep them in alignment with the spine.

- Place the arm closest to you above the head.
- Place the far arm to the shoulder nearest you.
- Bring the near knee up towards the waist at a 45-degree angle.
- Hold the side of the head.
- Gently rotate the victim toward from you so that the head lies on the arm.
- Place the legs comfortably at 90 degree angles so they don't slip.
- Make sure the body position is stable
- Make sure there is no pressure on the chest.

For Broken Bones/Dislocations

Follow your 6 First Aid Steps then:

- Place the broken bone in the position of function and splint or bandage to reduce movement. **Do not attempt to reset the broken bone.**
- Keep the injured body part in a position of comfort
- Call **9-1-1** for Open Fractures

If a person has suffered a head, neck or back injury, minimize the movement of the head neck or back. Monitor the signs of life while EMS personnel are on the way and keep the person from getting chilled or overheated.

With any minor open wound:

Follow your 6 First Aid Steps. Then:

- Apply direct pressure to control bleeding
- Wash the wound with soap and water and rinse with clean water for about 5 minutes.
- Apply triple antibiotic ointment and cover with a sterile dressing and bandage.

If a wound is major and requires medical attention, **control bleeding by placing a clean covering over the wound and pressing down with direct pressure**. Seek medical care and close the wound with stitches.

Read your First Aid & CPR Manual
It can save a life

# SWAB MASTER LTD.

**NOTE: THIS FORM <u>MUST</u> BE FILLED IN WHEN YOU REQUIRE A DAY(S) OFF**

## DAY OFF REQUEST FORM

Date: _____

Employee: _____

Re: Leave Request

---

I would like to request the following Days Off:

From: _____

To & Including: _____

Employee Signature:_____

Approved by: _____

Date: _____

12/6/2014

From: Garth Smith

To: All Swab Master Personnel

I am writing this letter to reiterate and reinforce Swab Master's commitment to the health and safety in all aspects of Swab Master's business and operations. Ultimately, I am responsible for, and committed to, the health and safety of all Swab Master Personnel and everyone we work with. I take this responsibility very seriously. As a result of this commitment, our team is continually investing in, and working to improve, our safety systems, policies, and procedures. That said, a truly effective safety program requires the positive attitude, commitment and diligence of every member of the team. It is important to note that I cannot be everywhere, so we must work as a team to accomplish the company's zero-incident safety objective.

While all personnel have a responsibility to work safely and follow all applicable government and company health and safety policies, we all have a responsibility for the health and safety of our fellow workers as well. It is very important that all personnel have a clear understanding of their health and safety responsibilities and the policies, procedures and rules designed to help keep everyone safe. It is just as important that we all look out for each other. Personnel in management or leadership positions have an even greater responsibility to ensure that those reporting to them understand and follow all safety guidelines and best practices.

It is also the responsibility of the entire team to work toward the continuous improvement of our safety program. If, at any time, any employee has a safety question, concern, or idea, that person has the right and the RESPONSIBILITY to pursue an answer or resolution. This pursuit should start with their Safety Manual and their direct manager, and continue all the way to the top of the Swab Master Management chain if necessary.

In closing, while all aspects of our safety program are important, the success of the program hinges on your attitude and commitment. Your positive attitude and dedicated commitment to your safety, the safety of others, and to the continuous improvement of Swab Master's safety programs is the foundation on which we will continue to build a safe, productive and rewarding work environment for everyone working for, or with, Swab Master.

Please sign below, acknowledging that you have read and understand the above.
Sincerely,

Employee Name: _____

Signature: _____

Date: _____

# PERSONAL ELECTRONIC DEVICE (PED) POLICY

For the purposes of my own safety and the safety of others around me, I agree to adhere to the stipulations set forth by the Personal Electronic Device (PED) Policy.

I understand that this policy is secondary to any clients' policy pertaining to personal electronic devices. I will uphold any clients' rules and regulations regarding the use of personal electronic devices while on site and revert to Swab Master Ltd.'s policy when no clients' policy is found on site or when working in the shop.

***Management / Office Staff / Supervisors*** – are permitted to use a PED during work hours, providing the purpose is work-related. For example, a Supervisor may use their cell phone to check in with a client or with Swab Master Ltd Management.
***Rig Assistants / Shop Hands / Helpers*** – are NOT permitted to use any PED during work hours. This includes working in the shop or in the field at a well location.
***Visitors / Contractors*** – are permitted to use their own PED, providing they are in a safe environment as deemed by their Swab Master Ltd. convoy.

I agree to adhere to the general prohibitions as well as the driving prohibitions listed in the Personal Electronic Device (PED) Policy, including but not limited to:

- Engaging in personal conversations
- Playing games
- Surfing the internet
- sending SMS/MMS text or video messages
- Use of any social media platforms
- E-reading
- Checking email
- No use of a Personal Electronic Device (PED) while driving for any reason.

I will ensure that my family, friends, loved ones and next of kin are aware of the appropriate contact number to reach me during work hours in the event of a personal emergency.

I understand that if I violate this policy by carrying any PED on my person during work hours or using a PED inappropriately during work hours, I will be subject to disciplinary actions as outlined in the Disciplinary Policy.

Employee (Printed) _____ Witness (Printed)_____

Signature: _____ Signature: _____

Date: _____ Date: _____

# SWAB MASTER LTD. – ORIENTATION & TRAINING

## *ACKNOWLEDGEMENT*

I acknowledge that I have received a Swab Master Ltd. New Employee Orientation and have an understanding of the topics covered. I do understand that Health & Safety is a Condition of Employment and I will refuse any unsafe work.

- ☐ Management Organization
- ☐ Employer Responsibilities
- ☐ Employee Responsibilities and Training Requirements
- ☐ PPE & Equipment Required
- ☐ Access to the Health & Safety Manual
- ☐ Access to the OH&S Act, Code & Regulations
- ☐ Right To Know, Right to Participate & Right to Refuse
- ☐ Safe Work Procedures
- ☐ Emergency Response Plan
- ☐ Hazard Identification
- ☐ Reporting Requirements
- ☐ Attendance Requirements
- ☐ Safety Meeting Attendance
- ☐ Time Off Requests
- ☐ Personal Electronic Device (PED) Policy
- ☐ Disciplinary Policy
- ☐ Drivers Abstract Review
- ☐ Inspection Protocols & Requirements
- ☐ Payroll Schedule and Procedures

_____ _____

Employee Print Employee Signature

_____ _____

Date Supervisor / Trainer