

## B9 - Travel and remote site health

### 1 Scope

This standard is applicable to all Rio Tinto business units and managed operations, including new acquisitions, administration/corporate offices and research facilities located off site; during exploration, through all development phases and construction, operation to closure and, where applicable, for post closure management. It covers the general travel health issues associated with temporary site visits, health issues associated with working in remote areas or at operations that supply food and water, and altitude sickness. It covers travel health programme design and management, to ensure that employees, contractors and third parties will not suffer adverse health effects.

### 2 Programme design

- 2.1 There must be in place a programme to prevent both chronic and acute illnesses through proper sanitation, food hygiene and control of disease vectors at remote operations. Vector control must be conducted in a manner that prevents the transmission of disease and ensures that control measures are applied in a safe and healthy manner.
- 2.2 There must be in place a programme to minimise as far as possible the impact of travel related ill-health and safety risks, and ensure that all international travellers (eg visitors, secondees & contractors) are adequately informed before travel. The programme must include information on jet lag,

deep vein thrombosis (DVT), food safety, relevant community health hazards (including infectious diseases), local security and safety threats and emergency procedures.

2.3 Deleted.

## **3 Management**

3.1 Deleted.

3.2 The need for immunisations and behavioural precautions (eg sunscreen, insect repellent, appropriate clothing, food preparation, etc) must be documented and communicated to relevant staff. A medical travel kit must be made available for travellers to remote/high risk areas. In addition, a process must be established to manage travel-related health concerns that arise following departure from the site, including the development of malaria type symptoms.

3.3 An in-house occupational health service, a service provider or a general practice must provide relevant pre-travel advice and preparation, as well as a medical review on return to home if there are health concerns. Professional responsibility for the provision of these pre- and post-travel medical services must be defined. Where a service provider or a general practice is used, standards for the level of service provided must be established.

3.4 Consultants, bulletins and the Rio Tinto Intranet must be used to provide up-to-date warnings on health risks for remote area workers and visitors. A nominated person will post warnings received from the operations to the Intranet.

- 3.5 Deleted.
- 3.6 Where food and water is provided by the business, there must be a system to ensure that:
- a) food is purchased from reputable sources, stored at appropriate temperatures and prepared in a hygienic manner and location. It must be inspected for temperature and signs of spoilage on receipt;
  - b) potable water sources are located away from potential sources of contamination, and the water be treated to kill disease-producing organisms and periodically checked for potability;
  - c) waste is treated in a way that will prevent water and air pollution and is not accessible to insects or rodents; and
  - d) documented procedures are available for the above requirements and relevant employees are trained in these procedures.

## **4 Altitude**

- 4.1 Prior to a visit, a physician must have reviewed all travellers to altitudes above 3000m within the previous 12 months, specifically for travel to high altitudes, and the following must be included in the review:
- a) previous history of travel to similar altitudes;

- b) lung function to establish the absence of significant restrictions;
  - c) heart function to establish normal exercise tolerance and absence of significant ischaemic or valvular disease. An electrocardiogram (ECG) should be performed;
  - d) blood pressure to ensure the absence of significant uncontrolled hypertension. Particular care is required for those with labile or poorly controlled disease;
  - e) cerebral function to establish the absence of conditions such as epilepsy that may be adversely affected by low oxygen concentrations;
  - f) any other concern of the traveller about the trip; and
  - g) the use of medications to reduce the effects of altitude.
- 4.2 Whenever possible two or three days must be allowed to begin acclimatisation to altitude before work commences.
- 4.3 Whenever possible, visitors must move to lower levels at night. Practical experience suggests that moving to 3500m or below significantly improves the duration of sleep. Irritability and severe breathlessness or anxiety may be indicators of maladjustment to altitude, and must be treated by moving the sufferer to lower altitude.

- 4.4 In the first week of a trip considerable caution must be exercised to avoid excessive physical exercise. Thereafter, exercise can increase very slowly.
- 4.5 Deleted and moved to clause 4.3.

## Revision history

Version no.	Effective date	Prepared by	Authorised by	
1	Feb 2003	Richard Gaunt & Ian Firth	ExCo	
Version no.	Revision date	Revised by	Authorised by	Reason for change
4	December 2008	Ian Firth; Adrian van Tonder	Manoel Arruda	Incorporation of suggested changes from operations and alignment with HSEQ management system.

# B10 - Occupational exposure limits

## 1 Scope

This standard is applicable to all Rio Tinto business units and managed operations, including new acquisitions, administration/corporate offices and research facilities located off site; during exploration, through all development phases and construction, operation to closure and, where applicable, for post closure management. To protect all who work at our operations from occupational illness, workplace hazardous exposures must be controlled to below occupational exposure limit (OEL) and/or biological test limit values. The lists of substances (or agents) are derived from an assessment of business unit exposures, but do not necessarily include all hazardous exposures found within the Rio Tinto Group.

## 2 Definitions

2.1 Deleted.

2.2 Deleted.

2.3 Deleted.

## 3 Programme design

3.1 Each business or operation must establish or adopt an OEL for each hazardous agent for which significant worker exposure is possible. Where, in the absence of a legal or Rio Tinto OEL, a