SCOPE AND PURPOSE

This policy guidance & standard (PG&S) applies to Suncor Energy Inc. and its subsidiaries world-wide (collectively “Suncor” or “Company”). References in this document to “Suncor Personnel” include directors, officers, employees, contract workers, consultants and agents of Suncor. Suncor will not manage or fund any Occupational Health and Hygiene programs for Non-Suncor personnel, unless there is an agreement for these services. It is the expectation of Suncor that Non-Suncor personnel will manage their own Occupational Health and Hygiene programs to comply with applicable regulatory requirements.

All business units will have procedures and processes in place to ensure they comply with the requirements of this PG&S.

The purpose of this PG&S is to identify the key Occupational Hygiene and Occupational Health (OH&H) requirements that ensure the prevention of occupationally related injury and illness through the use of a prevention strategy.

The key Occupational Hygiene elements of the prevention strategy include, but are not limited to, the anticipation, recognition, evaluation, and control of occupational health hazards. The key Occupational Health elements include but are not limited to, health monitoring, injury and illness management.

Figure I represents the relationships between elements of the occupational hygiene and health prevention strategy and the protection of the worker.
Current versions of approved documents are maintained online. Printed copies are uncontrolled.

Primary Prevention – Controls:
- Elimination/Substitution
- Engineering/Administrative Controls
- Training, Awareness, Competence
- Injury/Illness Prevention & Health Promotion

Assessment of Health Hazards:
- Anticipation
- Recognition
- Evaluation
- Risk Assessment

Injury/Illness Management:
- Disability Management

Secondary Prevention:
- Injury/Illness Emergency Treatment
- Health Monitoring

Figure I: Occupational Hygiene & Health Prevention Strategy

OCCUPATIONAL HYGIENE ELEMENTS

The Business Unit will ensure processes are in place to assess the chemical, physical, biological, and ergonomic hazards.

Anticipation

The processes whereby occupational health hazards may be anticipated include, but are not limited to:
- review of Material Safety Data Sheets (MSDS)
- engineering design reviews
- process safety management risk assessments
- task analysis

Recognition

The processes whereby occupational health hazards may be recognized in the workplace include, but are not limited to:

- inspections of the workplace
- walkthrough surveys
• information gathering via employee/management interviews, and review of records, literature and regulations
• injury/illness incident data
• establishment of a comprehensive exposure assessment strategy

Evaluation

Occupational health hazards shall be evaluated using recognized, validated methodology and equipment, and shall be conducted by a competent industrial hygienist or other qualified professional. Occupational Hygienists shall provide interpretation of assessment results using established and acceptable comparison criteria, such as regulated Occupational Exposure Limits.

Evaluation assessments include but are not limited to:
• Airborne exposures
• Exposure modeling
• Ergonomics
• Noise
• Temperature extremes
• Radiation
• Biological agents

Control

Based upon results of the anticipation, recognition, and evaluation of occupational health hazards, controls will be recommended according to the hierarchy of hazard controls as noted in Figure II below. Most effective to least effective

The Hierarchy of Hazard Controls

Control of hazards starts at the top and works down with PPE being the last line of defense.

Last resort
Personal Protective Equipment (PPE):
The least effective way to protect workers. If the PPE fails, the workers are exposed to the hazard.

Administrative:
Changing the way workers do their jobs, changing policies and procedures for safe work practices, training, etc.

Engineering Controls:
Separate: Isolate the hazard by guarding or enclosing
Redesign: Change a process or reconfigure equipment
Substitute: Replace materials or processes

Most effective to least effective

Figure II: The Hierarchy of Controls: a method for determining appropriate Operational Controls.
OCCUPATIONAL HEALTH ELEMENTS

Each Business Unit will ensure processes are in place to evaluate the requirements for health monitoring and injury & illness management.

Health Monitoring

The fundamental processes whereby employee health status is evaluated include but are not limited to:

_Injury and Illness Emergency Treatment:_

- Emergency treatment is made available in a timely manner, in case of worker injury or illness. Evaluation of service is required to ensure sites, at a minimum, meet all legislated requirements.

_Pre-placement / Pre-assignment Assessment:_

- Health status assessment prior to job placement is completed to determine whether the individual meets the identified health requirements and can, from a medical standpoint, perform the essential duties of the job safely, without endangering the safety of others.
- Job transfer involving significantly different functional areas, identified health hazards, or field level job demands should also trigger appropriate placement assessments.

It is important to note that health assessments alone cannot determine an individual's ability to perform the essential duties of a particular position. Health information can be an essential element in determining an individual's suitability for job tasks. However, management has the obligation to consider issues that are not strictly medical (e.g., reasonable accommodation or assessment of undue hardship on the operation of the business unit's operations). Employment-related decisions involving health are fundamentally managerial, not medical. (American College of Environmental and Occupational Medicine)

_Occupational Health Surveillance:_

- Baseline and periodic assessments are completed for workers exposed to health hazards. The aim is to detect abnormalities early enough to prevent or limit disease progression by designing control measures to prevent injury and illness and initiating health intervention.
- Post Exposure Assessments are required in the event of an acute exposure as identified by and in consultation with Industrial Hygienist and Medical Consultant.
- Termination Health Assessments are performed when exposure to a legislated hazard has ceased at reassignment or when employment ends. The data collected provides a reference point for potential work-related injury/illness claims.

Health Monitoring practices may include but are not limited to:

- Job Demands Analysis review
- Medical and occupational history review
- Organ or system specific physical assessments
- Diagnostic imaging
- Biological monitoring
- Job specific physical demands testing
- Personal health status and risk factors Assessment
Evidence based periodic health screening examinations
Worker notification and education
Medical records’ confidentiality
Medical document management
Individual and population data analysis

Injury / Illness Management

Disability management (Disability Management Policy) is an active process designed to minimize the impact of injury or illness on an individual's capacity to work, while maximizing his/ her health. The aim is to prevent disability, or if disability already exists, to prevent further deterioration.

Disability management practices include, but are not limited to:

- monitoring of appropriate diagnosis’ and treatment plans in accordance with best practices
- case management
- review of job demands analyses
- fitness to work assessments
- independent medical examinations
- functional capacity evaluations
- diagnostic imaging
- temporary or permanent workplace accommodation

Program Relationships

Listed below are the programs or elements thereof that require collaboration between Occupational Hygiene and Occupational Health. These include but are not limited to:

- Job Demand Analyses
- Health Assessment Guidelines
- Biological Monitoring criteria and frequency
- Evaluation of prevention strategy elements [e.g. Hearing conservation program, respiratory protection program etc.]
- Designated substance programs [e.g. lead, asbestos, benzene, etc.]
- Collaborate in relation to specific occupational injury/ illness case management as required

Occupational Hygiene and Occupational Health professionals will also collaborate with other Technical Experts such as engineers, EHS professionals, Maintenance, Operations and construction personnel and contractors.
ROLES AND RESPONSIBILITIES

OCCUPATIONAL HYGIENIST

The primary responsibilities of the Occupational Hygienist are:

1. Developing and implementing all aspects of the occupational hygiene elements outlined in this PG&S to protect employee and contractor health and fulfil ethical and legal responsibilities.
2. Working collaboratively with the Occupational Health Professional in management of the business units' health hazards.
3. Supporting the business areas in the anticipation, recognition, evaluation and control of health hazards associated with operational or maintenance processes, jobs, tasks, and environmental agents.
4. Recommending appropriate controls where exposures are identified and participating in design of new facilities when required, to ensure health hazards are designed out wherever possible.
5. Correspond with external regulators as required.

OCCUPATIONAL HEALTH PROFESSIONAL

The primary responsibilities of the Occupational Health professional are:

1. Developing and implementing all aspects of the occupational health elements outlined in this PG&S to promote and restore health, prevent injury and illness and protect the worker from occupational and environmental hazards while fulfilling ethical and legal responsibilities.
2. Working collaboratively with the Occupational Hygiene Professionals in management of the business units' health hazards and employee health.
3. Supporting the business areas in the monitoring of employee health as health hazards are evaluated and controlled in association with operational or maintenance processes, equipment and agents, job changes or new jobs being introduced.
4. Providing expertise in the design, collection, analysis and trending of health data to support the evaluation of risk identification and hazard controls.
5. Supporting the business areas through the application of disability management processes for reducing the business impacts of injury/illness.
7. Correspond and liaison with external regulators as required.

Business Units are responsible for ensuring the implementation and adherence to all elements of this PG&S.

EXCEPTIONS

The VP Sustainable Development must approve exceptions to this PG&S.
DEFINITIONS

<table>
<thead>
<tr>
<th>Definition</th>
<th>Description</th>
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<tbody>
<tr>
<td>Occupational Hygiene</td>
<td>Occupational hygiene is the science and art devoted to the anticipation, recognition, evaluation, and control of environmental stresses associated with work and work operations that may cause sickness, impaired health and wellbeing, significant discomfort and inefficiency among workers or community citizens.</td>
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<tr>
<td>Occupational Health</td>
<td>Occupational health is a distinct branch of medicine concerned with how a worker's health can affect his or her ability to do the job and how work and the work environment can affect an employee's health.</td>
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<td>Biological Monitoring</td>
<td>The testing of the biologic sample such as blood or urine for the presence of a chemical substance or its metabolite</td>
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<td>Occupational Health Surveillance</td>
<td>The process of monitoring the health status or worker populations to gather data on the effects of workplace exposure and using the data to prevent injury or illness. The purpose is to link workplace exposures to adverse health outcomes and, support implementation of design control measures to prevent injury and illness. Health Surveillance provides a basis for establishing engineering and administrative controls of workplace hazards. (AAOHN)</td>
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<td>Primary Prevention</td>
<td>Denotes the exclusion, cessation or limitation of exposure so that an injury / illness process is not initiated.</td>
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<td>Secondary Prevention</td>
<td>The early detection of disease with interventions to reverse, prevent or slow disease progression. (ex. monitoring blood lead levels)</td>
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KEY WORDS


RELATED DOCUMENTS

Environment, Health Safety and Policy Statement  
Environment Health and Safety Management System Standard  
Classification of Occupational Injuries/Illnesses PG&S  
Incident Learning and Prevention PG&S  
Risk Management Standard  
Management of Change Standard  
OSHA, OHS, CPPI, CAPP, WCB, WSIB Guidelines, Standards or Regulations