

EMERGENCY RESPONSE PLAN

In an effort to ensure a timely response in the event of an emergency, the following Emergency Response and Procedures Plan has been developed.

Prior to commencing work, the Oliver Construction Co. team will review these procedures with all supervisory and office personnel. Periodic updates to the plan will be required with additional review as required.

Emergency Service Cards are to be posted at all project/office phones. The Emergency Services Cards will list emergency phone numbers for the ambulance, fire and police departments. The phone numbers for the selected medical clinic and hospital will also be listed.

All Oliver Construction Co. Supervisors will have current certification cards in first aid and CPR. The project/office is equipped with a first aid kit/cabinet.

1. Types of Emergencies

- a. **Medical** - Example: Injury or heart attack occurs.
- b. **Hazardous Materials** - Example: 55 Gal. drum spills
- c. **Catastrophic** - Example: Earthquake or Tornado

2. What to Do When an Emergency Occurs on Your Jobsite.

a. Type "A" Emergencies "MEDICAL"

Notify Management immediately, give a brief description of accident and location of injured. Do not leave the injured unless you must do so to get help. Do not move the injured unless he/she may be in danger of further injury.

Management must immediately refer to Type "A" Emergencies Checklist and begin response plan. (See page 3.)

b. Type "B" Emergencies "HAZ-MAT/ FIRE"

Notify Management immediately, give a brief description of emergency and if any employees have been injured. Evaluate and determine if on site equipment such as fire extinguishers are sufficient to handle the emergency, if so attempt to use, but never place one's self in a situation where he or she may be put into danger / trapped by the fire, such as between the fire and a combustible material.

Management must immediately refer to Type "B" Emergencies Checklist and begin response plan. (See page 4.)

c. **Type “C” Emergencies "CATASTROPHE"**

Notify Management immediately, give a brief description of emergency and if any employees have been injured.

It is imperative that each employee be accounted for. ALWAYS KNOW POTENTIAL WAYS TO EXIT JOBSITE AND GATHER AT PREDETERMINED STAGING AREAS FOR HEAD COUNT. A Supervisor will perform a physical head count of his entire crew to determine if any are missing or injured.

Management must immediately refer to Type “C” Emergencies Checklist and begin response plan. (See page 5.)

1. Call 911 and have appropriate emergency response dispatched to the site. An Oliver Construction Co. employee will escort the emergency response personnel to the injured worker.
2. Have an Oliver Construction Co. employee notify upper Management and Safety Consultant. If they are not reachable, contact the main. Give location of emergency and brief description.
3. Other employees should keep the route of access and the area of the injured person clear so as not to hamper or delay response, remember time could be critical.
4. When the injured is removed by the emergency response personnel, one person should always go with or follow the unit. This should be the Foreman, Safety Consultant or a Manager. This individual can also deliver any information to the hospital, such as name and address of employee. If required by DOT, owner or company policy, a drug screen and alcohol test shall be done.
5. Nothing at the scene of the accident may be moved until completion of the accident investigation. The investigation should include photographs, witness statements, any pieces of evidence, etc.

Emergencies Other Than Those Requiring Immediate Hospitalization.

Employees who require first aid onsite/shop or taken to a clinic to be evaluated, are required to notify the Management. Management will help to ensure the injured employee is receiving the correct medical attention and may request a drug/alcohol test per the DOT, owner or company policy.

A report returned from the doctor's office will indicate if the employee is able to return to work. **In no case shall an employee return to work without this clearance.** The employee's foreman should be notified once the employee is released to return to work and if there are any restrictions placed on the employee's work activity.

Media / News Crews

If the Media/ News are on site, the upper Management shall be made aware of this immediately. **Never allow employees to try to cover the camera if the Media are on site, it would appear there was something to hide!!**

- Call
- Instruction on what to do will be given

EMERGENCY RESPONSE FORM

TYPE "A" EMERGENCY

MEDICAL

DATE: _____ TIME OF CALL: _____ AM/PM

NAME OF WHO IS CALLING/REPORTING? : _____

NAME OF INJURED, IF KNOWN AND BRIEF DESCRIPTION: (type of injury)? : _____

EXACT LOCATION OF INJURED: _____

ARE PARAMEDICS NEEDED? : _____

ARE FIRE/RESCUE NEEDED? : _____

ARE HAZ-MAT TEAM NEEDED? : _____

"MAY-DAY" CALLED ON RADIO? : _____

"911" DISPATCHED? : _____

SAFETY CONSULTANT DISPATCHED? : _____

PROJECT/OFFICE MANAGER DISPATCHED? : _____

RESPONSIBLE PERSON DISPATCHED TO MEET AND DIRECT AMBULANCE:

WHO ACCOMPANIED OR FOLLOWED WITH VICTIM? : _____

REQUEST FOR DRUG SCREEN (If applicable): _____

EMERGENCY RESPONSE FORM

TYPE "B" EMERGENCY

HAZARDOUS MATERIAL/FIRE

DATE: _____ TIME OF CALL: _____ AM/PM

NAME OF WHO IS CALLING/REPORTING: _____

TYPE OF DISASTER: _____

EXACT LOCATION: _____

BRIEF DESCRIPTION: _____

ARE PARAMEDICS NEEDED? : _____

ARE FIRE/RESCUE NEEDED? : _____

ARE HAZ-MAT TEAM NEEDED? : _____

"MAY-DAY" CALLED ON RADIO? : _____

"911" DISPATCHED? : _____

SAFETY CONSULTANT DISPATCHED? : _____

PROJECT/OFFICE MANAGER DISPATCHED? : _____

RESPONSIBLE PERSON DISPATCHED TO MEET AND DIRECT RESPONSE PERSONNEL? :

WHO ACCOMPANIED OR FOLLOWED WITH VICTIM? : _____

REQUEST FOR DRUG SCREEN (If applicable): _____

REFER TO DOT EMERGENCY RESPONSE GUIDEBOOK

A: This book can help you judge the hazards of a released chemical. It gives the following information:

**The material's physical and chemical properties.
Its physical hazards and health hazards.
Fire fighting techniques and equipment recommended.
How to best deal with spills and leaks.
First aid measures.
Safe evacuation distances.**

EMERGENCY RESPONSE FORM

TYPE "C" EMERGENCY

CATASTROPHIC

DATE: _____ TIME OF CALL: _____ AM/PM

NAME OF WHO IS CALLING/REPORTING: _____

TYPE OF DISASTER: _____

NOTE: A SUPERVISOR MUST PERFORM PHYSICAL HEAD COUNT AND BE ACCOUNTABLE FOR ALL EMPLOYEES! MANAGEMENT SHOULD MAINTAIN CREW ROSTER AND SUBCONTRACTOR LIST FOR EMERGENCY ACCOUNTABILITY.

SHUT OFF GAS/WATER/ELECTRIC: _____

ARE THERE ANY INJURIES? : (type of injury) _____

EXACT LOCATION: _____

BRIEF DESCRIPTION: _____

ARE PARAMEDICS NEEDED? : _____

ARE FIRE/RESCUE NEEDED? : _____

ARE HAZ-MAT TEAM NEEDED? : _____

"MAY-DAY" CALLED ON RADIO? : _____

"911" DISPATCHED? : _____

SAFETY CONSULTANT DISPATCHED? : _____

PROJECT/OFFICE MANAGER DISPATCHED? : _____

WHO ACCOMPANIED OR FOLLOWED WITH VICTIM? : _____

REQUEST FOR DRUG SCREEN (If applicable): _____

INVESTIGATION CHECKLIST OF MINIMUM REQUIRED INFORMATION
WHEN ACCIDENT OCCURS

- _____ **Date and time of accident.**
- _____ **Exact location and address of incident.**
- _____ **Full names of all parties involved in the accident, including witnesses.**
- _____ **Complete addresses; telephone numbers.**
- _____ **Injured person's occupation and age.**
- _____ **Description of what injured person was doing when hurt.**
- _____ **The nature and extent of the injury.**
- _____ **Where was injured taken for treatment? Transportation?**
- _____ **Were authorization and drug screen forms provided?**
- _____ **Description of property damaged, identification numbers, etc.**
- _____ **Owner of property damaged and address of owner.**
- _____ **Year, make, model, serial number, license number of vehicle.**
- _____ **Names of other party's insurance company(s).**
- _____ **Witnesses' statements or accounts of accident.**
- _____ **Company personnel involved in incident; Names, addresses, occupation, how involved.**
- _____ **Details of incident fully described to answer the basic how, when, why questions.**
- _____ **Photographs of the scene and equipment.**
- _____ **Name and identification of person completing report.**
- _____ **Signature of investigator.**

EMERGENCY RESPONSE PLAN FOR JOBSITE OFFICES

EMERGENCY ACTION

A. Escape Procedure

1. From offices or structures
 - a. Test door for heat. If cool, open door carefully, being ready to slam it shut. If egress is clear, escape. Close door.
 - b. If egress area is filled with smoke or fire, stay inside and keep door closed and try secondary egress. Call for help by telephone and stay near windows to await rescue. If smoke comes in around door or through the ventilators, seal them with tape and trash bags or any available material.

B. Evacuation

1. When evacuation is determined necessary, employees will leave the building by the nearest exit or as advised and report to the designated staging area.
2. When evacuating work areas, employees should close doors behind them, but do not lock unless otherwise instructed. Employees working with electrically operated machines or equipment should switch the equipment off or unplug it prior to leaving the work area. Leave lights on for Emergency personnel.
3. When evacuating, employees should walk, remain quiet, grasp handrails and follow all other emergency instructions.
4. Regardless of the exit used, employees will gather at _____. This designated area will be used unless it is downwind of the particular hazard. The off-site area will be designated if this occurs.
5. After evacuation is completed, police and other emergency personnel will prevent entrance to this site.
6. When emergency is over, the upper Management will advise employees to return to the building.

C. Emergency Reporting

1. If it is safe to do so from the office, call appropriate emergency number posted on the Emergency Service Cards.

D. Medical and First Aid Emergencies

1. Serious illness or injury to employee or client.
 - a. Notify Management and Safety Consultant
 - b. Request assistance from Paramedics.
 - c. Do not move victim unless absolutely necessary.
 - d. Initiate first aid action as necessary.
 - e. Refer to Emergency Response Form "A".

2. Minor Injuries
 - a. Initiate immediate first aid action as necessary.
 - b. If required, summon assistance.
 - c. Arrange for hospital emergency service, doctor's office emergency service, and doctor's appointment as needed.

E. Earthquake Emergencies (Wisconsin Does Have Fault Lines)

1. Personal safety procedures at time of quake
 - a. Most important - DO NOT PANIC! Remain calm and protect yourself.
 - b. If you are in a building, stand next to an interior wall away from windows and inside glass, move away from heavy objects that may topple, slide or fall.
 - c. Do not leave building. Falling debris may injure or kill you.
 - d. When outside and high buildings are not a threat, move to an open area away from overhead wires and other objects that may pose a safety hazard.
 - e. Know the safest place in a room because it is difficult to move about during a severe Earthquake..... WHERE IS IT?

2. Recommended procedures after the shaking stops
 - a. Take time to evaluate your situation; remain calm.
 - b. Check the persons around you for injuries and assist where possible.
 - c. Do not return to building to use the telephone except for emergency assistance or major utility damage. Make sure the building is secured and safe to enter.
 - d. Be helpful to people around you; this may lessen psychological trauma.
 - e. When evacuation is ordered, move quickly but do not run.
 - f. Be prepared for after-shocks that always occur and may cause major damage to an already weakened structure.
 - g. Check for safety, check for gas, water, sewer breaks, downed electrical lines and shorts; turn off appropriate utilities; check for building damage and potential safety problems.
 - h. Inform DeLuca & Hartman Management of any injuries.

F. Emergency Fire Problems

1. Person discovering fire;
 - a. Alert Oliver Construction Co. office personnel.
 - b. Call "911" and report the following information:
 - I am reporting a fire at: _____.
 - The nearest cross street is: _____.
 - Fire is on which floor or area?
 - What is burning?
 - Are there injuries, is medical attention needed?

2. Foreman/Mangers responsibilities
 - a. Evaluate situation.
 - What is burning?
 - Size of fire and smoke conditions?
 - Any injuries and how serious?
 - Will evacuation be necessary?
 - Evacuate personnel if necessary.
 - Establish security measures as necessary to safeguard records and equipment.
 - b. Fire Department notified?
 - c. Assign person(s) to use fire extinguisher if fire is controllable.
 - d. Designate person to prepare for evacuation.

3. Everyone
 - a. When ordered to evacuate, do not take personal belongings with you. Leave all lights on for firemen. Close all doors and windows, but do not lock them.

G. Bombs Threats and Search

1. If a bomb threat is received **by phone** ask:
 - a. When is the bomb going to explode?
 - b. Where is the bomb right now?
 - c. What kind of bomb is it?
 - d. What does it look like?
 - e. Why did you place the bomb?

KEEP THE CALLER ON THE PHONE AS LONG AS POSSIBLE

Have someone call "911" and report incident immediately.

2. If a bomb threat is received **by mail**, employees should:
 - a. Not handle the letter, envelope or package.
 - b. Notify Management immediately.
 - c. Preserve the evidence for law enforcement officials.
3. Suspicious object
 - a. If a suspicious object is discovered, the employee should:
 - Not attempt to touch or move object.
 - Notify Management immediately.
 - Evacuate the immediate area.
 - Attempt to find possible owner of object.
 - Await further instructions.

H. **Explosion**

1. In the event of any explosion in the building, such as those caused by leaking gas, faulty boilers, or explosives, employees should perform the following actions:
 - a. Take cover under any sturdy object, which will give protection against flying glass or debris.
 - b. Notify the Fire Department.
 - c. If evacuation is ordered, exit as instructed previously.
 - d. Upon leaving the building, proceed to the assembly area and await instructions from the emergency personnel.

I. **Tornado**

1. Advise Management of any tornado (funnel type cloud) in the vicinity.
2. If you see a funnel cloud nearby, take shelter immediately
3. Employees should seek shelter at below grade elevation or stay within the structures, away from glass walls and doors.
4. If employees are outside, lie flat in the nearest ditch, ravine, or culvert and shield your head with your hands.
5. The least desirable place to be during a tornado is in a motor vehicle. Cars, buses, and trucks are easily tossed by tornado winds.
6. *DO NOT TRY TO OUTFRAN A TORNADO IN YOUR CAR.* If you see a tornado, stop your vehicle. Do not get under your vehicle.