



GROUP SAFETY STANDARD 3 OCCUPATIONAL HEALTH AND WELLBEING STANDARD

DATE: 18 MARCH 2020

DATE	NAME	CHANGE	APPROVED	REVISION
01/09/2015	K. Ashby	Issued for Use	Executive Leadership Team (ELT)	0
04/04/2018	K. Ashby	Minor Corrections	ELT	1
26/04/2018	Nova Operations	Minor Corrections	K. Ashby	1.1
18/03/2020	By working group comprising sites, exploration and corporate representatives	Comprehensive rewrite and consolidation of the following IGO standards: <ul style="list-style-type: none">• GOHS 1 – Fitness for Work• GOHS 2 – Injury Management• GOHS 3 – Thermal Stress Management• GOHS 4 – Noise Management and Hearing Conversation	Safety Steering Committee	1.2



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1. PURPOSE

The purpose of this Standard is to describe the requirements for the provision and maintenance of a safe working environment that protects the health and wellbeing of IGO employees, its contractors and all personnel who work at IGO.

To prevent occupational injury and illness, health risk factors will be identified and assessed, impacts managed, personnel's health status and conditions at the workplace monitored.

2. SCOPE

This Standard applies to anyone accountable or responsible for managing the health and wellbeing of IGO employees, its contractors and all personnel who work at IGO sites and projects (corporate, exploration, construction and mining operations) (collectively refers to as 'sites' hereafter).

References within this Standard to 'site based' excludes office based personnel who work in an IGO corporate office.

Where this Standard identifies Australian and New Zealand Standards, IGO international sites will ensure any other standards relevant to a specific jurisdiction meet the minimum requirements established through this Standard.

3. REQUIREMENTS

3.1 Managing Health Risks

To successfully achieve the commitments of the **IGO Fitness for Work Policy** and **IGO Health, Safety and Wellbeing Policy**, IGO requires the following:

- All IGO mining and exploration operations to have a Health Risk Assessment and a Health & Hygiene Management Plan (also known as a Major/ Principle Hazard Management Plan) approved by the Registered Manager
- The physical and psychological health hazards, potentially exposed individuals/groups and risk factors that have the potential to cause injury and illness to be identified and documented
- The associated health risks and appropriate controls consistent with relevant industry standards and local Work Health Safety (WHS) legal requirements to be identified and evaluated
 - Implement exposure controls to eliminate or if not practicable, minimise the risk of harm to all employees and contractors
 - Mitigation controls are prioritised based on potential health consequence, the extent of exposure to workforce and extent of risk reduction
 - Health surveillance is performed where required by legislation or where the work is known to be associated with the development of a recognised health problem for which there is a validated method for testing and for which there is a strong and well-correlated "cause-effect" relationship between exposure and health impact
 - All work activities that require health surveillance are to be defined, surveillance is to be conducted by a competent health practitioner prior to work commencement (e.g. baseline established) and periodically as dictated by the nature of the hazard

- Industrial hygiene and occupational health expertise is used to assess health hazards (chemical, physical, biological, ergonomic and psychological) and advise on the implementation of appropriate controls and work practice
- Workplace monitoring is used to verify the effectiveness of proposed improvement control measures
 - follows validated data collection and assessment methodology consistent with applicable standards, see Appendix 1
 - follows quality control procedures
 - adequate records maintained for auditing and to corroborate compliance
- The assessment of potential harm will be relative to recognised and industry accepted workplace exposure standards or occupational exposure limits (OELs) for the jurisdiction the site operates, for example, the workplace exposure standards for atmospheric contaminants for IGO sites in Australia will comply with those set by Safe Work Australia
- Communicate and consult with relevant stakeholders (including health and safety representatives) at all stages of the risk management process (e.g. personnel are trained to understand the health risks, preventative measures/exposure controls and emergency procedures associated with their work) and surveillance results communicated
- Resources in place and personnel informed in order to provide a timely response for first aid, medical care or evacuation
- Provisions made for the management of medical emergencies associated with IGO operations and activities based on the level of risk and alignment with existing local provisions. This is to be implemented and monitored as part of the site's Emergency Management Plan
- Personal health records / medical information obtained by and behalf of IGO is strictly confidential and will be managed and controlled in accordance with legal requirements
- Identify and appoint statutory or designated roles (or contractors) for the implementation and compliance of health & hygiene management and monitoring programs e.g. Noise Officer, Ventilation Officer, Radiation Officers etc.
- Implement a health and wellness programme to educate employees on health promotion or prevention and risk reduction of key health and wellness issues (e.g. fitness campaigns, healthy eating campaigns, vaccination programmes, anti-smoking initiatives, meditation)
- Employees have access to a confidential professional support and counselling service to support fitness for work and wellbeing programs through its Employee Assistance Program (EAP)
- Significant health incidents or trends are investigated

3.1.1 Mental Health Management

IGO will implement a ***Mental Health Strategy*** in accordance with the Western Australian Government's ***Code of Practice - Mentally healthy workplace for fly-in fly-out workers in the resources and construction sectors***.

3.2 Fitness for Work

- The assessment for fitness for work should address both the 'fitness for tasks' and 'fitness for the environment or location'



- Implement and monitor a structured process for the systematic identification, health assessments (i.e. pre-employment, pre-placement and periodic) and management of health risks associated with work based tasks that place specific demands or have safety critical impacts (see Appendix 2 for examples of common roles and tasks)
- As a pre-condition to employment at IGO, candidates will be required to undergo a job-specific pre-employment medical assessment which includes a mandatory drug and alcohol screening, hearing test and a functional capacity component
 - Site based individuals who will be onsite for less than seven (7) days may be exempted from undergoing a medical assessment when approval has been obtained by the IGO Site Manager (General Manager or Registered Manager) on the basis of the nature of the work the person is engaged to perform
- Medical assessments are to be evidence based and conducted by suitably qualified health professionals who have knowledge of the work to be performed in order to determine if a person is 'fit', 'fit subject to work modifications' or 'unfit' for the assigned work/ tasks and location of the identified job role
- The frequency of scheduled medical assessments is to be determined by the likelihood of change in health status that may impact a person's ability to undertake such roles and the local legislative requirements, where applicable
- Implement ongoing medical assessments (also known as 'with cause' or 'for cause' assessments) where there are reasonable grounds to query a person's fitness for work e.g.
 - post workplace incident or accident
 - referral by Supervisor (in consultation with HR representative) following observed behaviour (e.g. fatigue, exhibits signs or symptoms of drug or alcohol misuse in the workplace)
 - self-referral (e.g. reporting potentially impairing medication)
 - return to work post injury/illness (see section 3.3, injury management)
- Implement a risk-based approach drug and alcohol programme. Participation and compliance with the drug and alcohol program is a condition for working on an IGO premise or operational area
 - IGO may, at any time on company premises, conduct, or request the contractor to conduct, unannounced drug and alcohol testing OR unannounced inspections of personnel and their property for items that may include prohibited substances or contraband (in accordance with **IGO Group Security Procedure 1 – Property Security and Prohibited Items**)
- Apply and verify effectiveness a fatigue risk management system and/or Plan consistent with relevant industry standards (see Appendix 1) that proactively manages the risk of fatigue by identifying fatigue hazards and developing barriers and controls to reduce this risk (both organisational and personal mitigation strategies).
- Comply with the IGO Extended Working Hours and Fatigue Management requirements outlined in Appendix 3
- Where an IGO employee is found to be 'unfit' for duty', the case is to be managed by the IGO HR representative who is responsible for leading the necessary consultation process with line management



3.3 Injury Management

To successfully achieve the commitments of the **IGO Injury Management Policy**, IGO requires the following to be implemented:

- Personnel to have access to occupational health practitioners who can:
 - Help mitigate the effects of ill health on their ability to work effectively
 - Facilitate employee rehabilitation
 - Facilitate return to work post injury or illness
- Implement a system where personnel have access to primary, secondary and emergency medical care facilities in addition to counselling and employee assistance where appropriate
- Where practicable, work is adapted so personnel are included rather than excluded from work
- Implement the pre-conditions to return to work as outlined in Appendix 4
- Significant health incidents (including occupational illness) and significant near misses are reported to appropriate authorities as required and incident investigated (in accordance with **IGO Incident Reporting and Management Procedure**)
- IGO will comply with the requirements of the applicable worker's compensation legislation in the jurisdictions in which it operates

APPENDIX 1: METHODS OF ASSESSMENT AND CONTROL

Agent	Assessment methodology consistent with:	Management consistent with:
Airborne Exposures	<ul style="list-style-type: none"> AS 3640 Workplace atmospheres - Method for sampling and gravimetric determination of inhalable dust AS 2985 Workplace atmospheres - Method for sampling and gravimetric determination of respirable dust ISO 7708:1995 Air quality — Particle size fraction definitions for health-related sampling NIOSH Manual of Analytical Methods, Department of Health and Human Services, Centres for Disease Control and Prevention, National Institute for Occupational Safety and Health, USA 	<ul style="list-style-type: none"> SafeWork Australia, Workplace Exposure Standards for Airborne Contaminants (April 2018) Department of Industry and Resources, 1997, Underground Ventilation (Metalliferous Mines): Resources Safety, Department of Mines and Petroleum, Western Australia
Alcohol	<ul style="list-style-type: none"> AS3547: 2019 Breath alcohol testing devices for employee use 	<ul style="list-style-type: none"> Commission for Occupational Safety and Health, 2008, Alcohol and Other Drugs at The Workplace – Guidance Note, Department of Mines, Industry Regulation and Safety, Western Australia
Asbestos	<ul style="list-style-type: none"> National Occupational Health and Safety Commission (1995) specified that the occupational exposure standard (OES) should: <ul style="list-style-type: none"> be defined as the time-weighted average (TWA) asbestos fibre concentration of the air breathed by a worker during a working shift; and not exceed 0.1 fibres per millilitre (f/mL) for all forms or mixtures of asbestos. <p>Note (1) Adjustment for extended work shift required as IGO site based personally typically complete a 12 hour work day</p>	<ul style="list-style-type: none"> Department of Mines and Petroleum, 2015, Management of fibrous minerals in Western Australian mining operations – guideline (2nd edition): Resources Safety, Department of Mines and Petroleum, Western Australia
Biological Monitoring	<ul style="list-style-type: none"> ACGIH (2019). TLVs® and BEIs® based on documentation of the threshold limit values for chemical substances and physical agents & biological exposure indices. Cincinnati, OH: American Conference of Governmental Industrial Hygienist or other recognised index 	<ul style="list-style-type: none"> SafeWork Australia, Health Monitoring for Exposure to Hazardous Chemicals – Guide for Persons Conducting A Business or Undertaking (2013)
Diesel Particulate Matter	<ul style="list-style-type: none"> US-based National Institute of Occupational Safety and Health (NIOSH) recommends using the associated thermal optical analysis method (i.e. method 5040) to measure elemental carbon for personal exposure monitoring or other recognised index 	<ul style="list-style-type: none"> Department of Mines and Petroleum, 2013, Management of diesel emissions in Western Australian mining operations — guideline: Resources Safety, Department of Mines and Petroleum, Western Australia
Drugs	<ul style="list-style-type: none"> AS/NZS 4308 (urine): Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine; or other recognised index AS 4760 (oral): Procedures for specimen collection and the detection and quantitation of drugs in oral fluid (for laboratory-based testing); or other recognised index ISO/IEC 17025: General requirements for the competence of testing and calibration laboratories 	<ul style="list-style-type: none"> Commission for Occupational Safety and Health, 2008, Alcohol and Other Drugs at The Workplace – Guidance Note, Department of Mines, Industry Regulation and Safety, Western Australia
Fatigue	<ul style="list-style-type: none"> IGO Fatigue Risk Assessment Form 	<ul style="list-style-type: none"> Government of Western Australia Code of Practice -Working Hours (2006) SafeWork Australia Guideline for Managing the Risk of Fatigue at Work (2013) Australian National Transport Commission, Model Legislation – Heavy Vehicle Driver Fatigue Regulations (2007)
Hazardous Chemicals	<ul style="list-style-type: none"> SafeWork Australia – Hazardous Chemicals Requiring Health Monitoring (2013) 	<ul style="list-style-type: none"> SafeWork Australia, Health Monitoring for Exposure to Hazardous Chemicals – Guide for Persons Conducting A Business or Undertaking (2013)
Health and Hygiene Management Plan		<ul style="list-style-type: none"> Government of Western Australia, Preparation of a health and hygiene management plan – guide October 2018
Health Risk Assessment	<ul style="list-style-type: none"> International Council on Mining & Metals – Good practice guidance on occupational health risk assessment 	<ul style="list-style-type: none"> Department of Consumer and Employment Protection, 2008, Risk-based health surveillance and biological monitoring — guideline: Resources Safety, Department of Consumer and Employment Protection, Western Australia



Agent	Assessment methodology consistent with:	Management consistent with:
Noise	<ul style="list-style-type: none"> The exposure standard for noise (in relation to a person) is defined in the WHS Regulation as Laeq,8h of 85 dB(A) or an LC, peak of 140 dB(C) <ul style="list-style-type: none"> Laeq,8h means the eight-hour equivalent continuous A-weighted sound pressure level in decibels (dB(A)) referenced to 20 micropascals; determined in accordance with AS/NZS 1269.1 or ISO 9612:2009 <p>Note (2) Adjustment for extended work shift required as IGO site based personally typically complete a 12 hour work day</p> <ul style="list-style-type: none"> LC, peak means the C-weighted peak sound pressure level in decibels (dB©) referenced to 20 micropascals; determined in accordance with AS/NZS 1269.1 or ISO 9612:2009 <ul style="list-style-type: none"> OSHA Standard 1910.95 - Occupational Noise Exposure AS/NZS 1269.1 Occupational noise management – Measurement and assessment of noise emission and exposure; or other recognised index AS/NZS 2399:1998, Acoustics – Specifications for personal sound exposure meters; or other recognised index AS/NZS 1269.4:2014, Occupational noise management Auditory assessment; or other recognised index ISO 9612:2009 Acoustics – Determination of occupational noise exposure – Engineering method 	<ul style="list-style-type: none"> IGO Noise Control Policy Model Code of Practice: Managing Noise and Preventing Hearing Loss at Work AS/NZS 1269.2 Occupational noise management – Noise control management
Occupational Exposure Limits	<ul style="list-style-type: none"> ICMM (2007) The Setting and use of Occupational Exposure Limits: Current Practice. International Council on Mining & Metals 	<ul style="list-style-type: none"> Commission for Occupational Safety and Health, 2019. Mentally healthy workplaces for fly-in fly-out (FIFO) workers in the resources and construction sectors – code of practice: Department of Mines, Industry Regulation and Safety, Western Australia
Psychological	<ul style="list-style-type: none"> Australian radiation Protection and Nuclear Safety Agency (ARPANSA). Radiation Protection Series International Atomic Energy Agency (IAEA) Radiation Protection and Safety of Radiation Sources: International Basic Safety Standards - IAEA Safety Standards Series No. GSR Part 3 (Interim) 	<ul style="list-style-type: none"> SafeWork Australia Guide for Managing the risks of working in heat NIOSH (2019). Preventing cold-related illness, injury, and death among workers. By Jacklitsch B, Ceballos D. Cincinnati, OH: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health. DHHS (NIOSH) Publication No. 2019-113
Radiation	<ul style="list-style-type: none"> Government of Queensland Heat Stress Calculator Wet Bulb Globe Temperature index, Thermal Work Limit or alternate recognised methodology ACGIH (2019). TLVs® and BEIs® based on documentation of the threshold limit values for chemical substances and physical agents & biological exposure indices. Cincinnati, OH: American Conference of Governmental Industrial Hygienist 	<ul style="list-style-type: none"> SafeWork Australia Workplace vibration guidance material
Thermal Stress	<ul style="list-style-type: none"> Implementation and Effectiveness of the European Directive Relating to Vibration in the Workplace National Hazard Exposure Worker Surveillance: Vibration exposure and the provision of vibration control measures in Australian Workplaces ISO 2631-1:1997 Mechanical vibration and shock — Evaluation of human exposure to whole-body vibration — Part 1: General requirements United Kingdom Health and Safety Executive (HSE) Vibration Calculators: Whole Body Vibration Calculator, Hand-Arm Vibration Calculator ISO 5349-1:2001 Mechanical Vibration – Measurement and Evaluation of Human Exposure to Hand-transmitted Vibration – Part 1: General Requirements ISO 5349-1:2001 Mechanical Vibration – Measurement and Evaluation of Human Exposure to Hand-transmitted Vibration – Part 2 - Practical Guidance for Measurement at the Workplace 	<ul style="list-style-type: none"> SafeWork Australia Workplace vibration guidance material
Vibration	<ul style="list-style-type: none"> Implementation and Effectiveness of the European Directive Relating to Vibration in the Workplace National Hazard Exposure Worker Surveillance: Vibration exposure and the provision of vibration control measures in Australian Workplaces ISO 2631-1:1997 Mechanical vibration and shock — Evaluation of human exposure to whole-body vibration — Part 1: General requirements United Kingdom Health and Safety Executive (HSE) Vibration Calculators: Whole Body Vibration Calculator, Hand-Arm Vibration Calculator ISO 5349-1:2001 Mechanical Vibration – Measurement and Evaluation of Human Exposure to Hand-transmitted Vibration – Part 1: General Requirements ISO 5349-1:2001 Mechanical Vibration – Measurement and Evaluation of Human Exposure to Hand-transmitted Vibration – Part 2 - Practical Guidance for Measurement at the Workplace 	<ul style="list-style-type: none"> SafeWork Australia Workplace vibration guidance material



APPENDIX 2: EXAMPLES OF ROLES AND TASKS WITH SPECIFIC DEMANDS OR SAFETY CRITICAL IMPACT

The following list is a common example of roles and tasks with specific demands or safety critical impact. This is not an exhaustive list, the tolerance of risk, local regulatory requirements, location and other practical considerations should be considered.

- Personnel required to undertake Defined Hazardous Work tasks such as working at heights, confined entry (refer to **IGO GSS 14 – Defined Hazardous Work & Permit to Work**)
- Lone, isolated and remote location personnel (e.g. Field Assistants, Surveyors)
- Colour vision-dependent tasks (e.g. electricians)
- Workers in climatic extremes (hot or cold)
- Emergency responders
- Personnel required to utilise sealed mask breathing apparatus
- Manual tasks with high aerobic energy demands



APPENDIX 3: IGO EXTENDED WORKING HOURS AND FATIGUE MANAGEMENT PLAN

	Fatigue Management Requirements
Fatigue Management	Employees must not work extended shifts or rosters that would affect their health or safety. IGO will facilitate this requirement through the implementation of this Plan.
Self-Assessment for Fatigue	<ul style="list-style-type: none"> • Employees are in the best position to recognise if they are too fatigued to perform their job safely. If the employee feels fatigued, they must report to their Supervisor immediately • Self-Assessment tools include Prior Sleep Walk Calculator, Samn Perelli Checklist and other tools designed for this purpose • Where it comes to IGO's attention that a person's total waking hours has or will exceed 19 hours at the end of any given shift, they will be deemed unfit for work
Extended Shifts	<p>If an extended shift is required it must be a) authorised on a case by case basis by the appropriate Departmental Manager and b) the following guideline adhered too unless otherwise approved in writing by the Site Manager (Registered Manager or General Manager):</p> <ul style="list-style-type: none"> • No shift of greater than 16 consecutive hours in a 24-hour period shall be performed at an IGO site • Where a 12-hour shift is extended up to 14 hours (i.e. 2-hour extension), the extension is only permitted subject to the approval of the Supervisor • Where a shift is extended beyond 14 hours (i.e. >2-hour extension), a written Fatigue Risk Assessment must be completed by the Supervisor with the assistance of an independent employee (such as the site safety professional or elected Safety Representative) prior to the commencement of the 15th hour of work • An employee working any shift of 14 hours or greater will be provided alternative transport to their place of residence or rest. (For example, someone drives the affected employee back to camp or they get a taxi home) • The minimum break following an extended work period must be not less than 10 hours <p>Where extended working hours are being considered, Defined Hazardous Work should be avoided. Refer to IGO Group Safety Standard 14 – Defined Hazardous Work & Permit to Work for more information.</p>
Extended Rosters	<p>If an extended roster is required it must be a) authorised on a case by case basis by the appropriate Departmental Manager and b) the following guideline adhered too unless otherwise approved in writing by the Site Manager (Registered Manager or General Manager):</p> <ul style="list-style-type: none"> • IGO's maximum allowable permanent roster cycle (swing) is 21 consecutive twelve hour shifts at the workplace followed by 7 days on rest and recreation (i.e. 3 and 1 roster) • Only one change from day to night shift, or vice versa, is permitted in any given roster cycle
Commute/Travel Time	<ul style="list-style-type: none"> • Travel time may have a significant impact on the quality of any rest period between shifts and or rostered periods on site. Travel time is to be included when considering Extended Shifts and Extended Rosters • For FIFO and DIDO employees, it is incumbent on the employee to make such arrangements as required to ensure that they arrive at the mine site, exploration area or other location fit for work
Broken Shifts or Call Outs	<ul style="list-style-type: none"> • Employees working broken shifts must not be required to work more than 12 hours in any 24-hour period • The minimum break following a broken shift or call-out must be not less than 8 hours except where a Fatigue Risk Assessment has been completed, and a shorter break has been deemed acceptable
Fatigue Risk Assessment	<p>Supervisors must conduct a Fatigue Risk Assessment as required by this Plan or in such other circumstances as they think reasonable.</p> <p>The Fatigue Risk Assessment should be completed using the IGO Fatigue Risk Assessment Form or other recognised methodology.</p> <p>When completing the risk assessment, the following factors should be considered:</p> <ul style="list-style-type: none"> • Number of hours awake for the individual preceding the shift (including travel times, quality of sleep) • Any use of prescribed substances and alcohol • The degree of attributable fatigue an employee would be expected to experience across those working hours when performing that task • The degree of experience an employee has in performing the task and the level of supervision required to be provided throughout the task • The nature of the task (e.g. high/low critical tasks, physical and mental demands, etc.) • Recognised exposure rates and required adjustments to workplace environments (e.g. heat, noise, vibration or chemicals) • The cumulative nature of sleep deprivation
Stand Down	A Supervisor can stand down anyone of their direct reports (with pay), including contractors if they believe that the individual is not fit for work.
Repeated Fatigue Occurrences	If an employee is frequently affected by fatigue and the individual is unable to attend multiple days of work or is unable to perform normal work duties, the employee's suitability for that particular role will be subject to review.



APPENDIX 4: PRECONDITIONS TO RETURN TO WORK

The following applies to both IGO and contractors. Personnel are responsible for disclosing to their Supervisor if they are on medication (prescription or non-prescription) that may potentially impact their fitness for work.

Medical Certificate Confirming Fitness for Work

All IGO personnel must provide a Medical Certificate to their Supervisor and/or licensed health care professional (e.g. site nurse) prior to returning to an IGO site (i.e. before boarding the plane or driving to the site) as issued by a company approved medical practitioner in the following circumstances:

- Post-surgery which required a general anaesthetic or requires on-going wound management by an on-site licensed health care professional
- Post-acquiring a notifiable infectious disease
- After being transported from the site for any medical treatment
- They had previously been deemed unfit for work by a medical practitioner
- When the time away from the work site exceeds one (1) month
- Following a non-work related injury that prevents the worker from working full duties
 - Note: IGO may require a medical practitioner clearance prior to recommencement of pre-injury duties. A Return to Work Plan may be required for non-work-related injury or illnesses

Where a person arrives to site without the requisite medical certificate, IGO reserves the right for the individual to be removed from the site (having taken reasonable steps to facilitate this). IGO reserves the right to stand-down a person (on normal pay) or require that they complete alternate duties until they provide adequate proof of their fitness for work.

Site Medical Centres

IGO has a statutory duty to provide a safe system of work. This duty specifically requires that IGO does not place its personnel at undue risk. Consequently, IGO requires that:

- Prior to shift commencement from a work related injury, any IGO site based personnel returning to work must be reviewed by the on-site licensed health care professional
- Any person requiring ongoing medical treatment from the site-based medical centre must attend the medical centre prior to their first shift with their medical certificate which a) indicates what treatment is required, and b) what restrictions if any have been placed on the person's duties
- All attendees to the medical centre are required to sign a consent form authorising the medical centre staff to contact their doctor in the event that they have questions related to medical certificates or treatment

Where the above requirements are not met, the medical centre may advise the person's Supervisor that the person is to be removed from the site.

Treating physicians maybe unaware of either the physical demands placed on an IGO personnel and/or the significant delays in accessing medical assistance associated with the site's remoteness. Consequently, if in the opinion of the on-site licensed health care professional, there remains a concern for the welfare of a person returning to work (even if they have a medical clearance certificate), IGO retains the right to require that the person be further reviewed by IGO's preferred health professional as a precondition to approval to return to site (an activity to be completed at IGO's expense).