

COVID-19 Guidance

VERSION 1 JUNE 2020

Group Corporate Relations

GUIDELINES FOR IN-PERSON COMMUNITY ENGAGEMENT WITH SOCIAL DISTANCING

Disclaimer

No representation or warranty, either express or implied, is provided in relation to the accuracy, completeness or reliability of the information contain herein. None of Anglo American or any of its affiliates, advisors or representatives shall have any liability whatsoever (in negligence or otherwise) for any loss howsoever arising from any use of this material or otherwise in connection with this material.

Group terminology

In this material references to "Anglo American", the "Anglo American Group", the "Group", "we", "us", and "our" are used to refer to either Anglo American plc and its subsidiaries and/or those who work for them generally, or where it is not necessary to refer to a particular entity, entities or persons. The use of those generic terms herein is for convenience only and is in no way indicative of how the Anglo American Group or any entity within it is structured, managed or controlled. The Anglo American Group is comprised of separate legal entities. "Subsidiaries" are entities over which the Anglo American Group has joint control are referred to as "joint ventures". "Managed joint ventures" are entities where the Anglo American Group has management control or an ability to direct day to day activities.

Intellectual Property

We are the owner of all trade marks, trade names, business names, service marks, design marks, patents, rights to inventions copyright and related rights, rights in get-up, goodwill, database rights and all other intellectual property appearing on or contained within this material.

Except as expressly provided below: (a) use of the material does not grant you any right, title, interest or licence to any such intellectual property appearing on or contained within the tools on this material; (b) use or reproduction of the intellectual property is strictly prohibited; and (c) nothing in this material should be construed as granting, by implication, estoppel, or otherwise, any licence or right to use any of the intellectual property in this material.

We grant you a revocable, non-transferable, non-exclusive, royalty free licence to use this material, and any and all intellectual property that we own in this material.

We make no express or implied warranty or representation that: (a) we have the right to grant the licence set out above and such licence is granted solely on the basis of the rights that we actually hold; (b) the intellectual property contained in the tools is valid or enforceable; and (c) any use of this material shall not infringe any third party's intellectual property rights.

© 2020 Anglo American

Anglo American™,



AngloAmerican

are trade marks of Anglo American

GUIDELINES FOR IN-PERSON COMMUNITY ENGAGEMENT WITH SOCIAL DISTANCING

INTRODUCTION

This document contains guidelines for in-person community engagement with social distancing (the/these Guidelines). It is intended for sites operating in a context in which in-person meetings between site staff and community members are legally allowed. Where a site is unsure of what is legally permissible regarding meetings or gatherings, Group Legal can be contacted for clarification.

Social distancing involves **avoiding** and **reducing** day-to-day contact with other people as much as possible and maintaining a distance of at least 1.5 metres between individuals in order to reduce the spread of the coronavirus.

Not all jurisdictions where in-person meetings are allowed may require social distancing measures to be followed. However, social distancing is considered best practice during this pandemic and should be applied to community meetings by all Anglo American sites until further notice.

The Guidelines apply to all in-person interactions between all site staff and all community members, including:

- Those with groups of all sizes, i.e. small and large groups of people, and one-on-one meetings.
- Those in the form of formal and informal meetings, regular and one-off interactions, office 'walk-ins', planned and unplanned interactions, etc.
- Those involving interaction with community members and all (i.e. social performance and other) site staff, teams, functions, contractors, and consultants.
- Those with all types of community stakeholders, including community leaders, local government representatives, non-governmental organizations, faith groups, SED programme partners, etc.

The practical implementation of these Guidelines will depend on the local circumstances and government regulations. For example, the government regulations for the maximum allowed size of groups or gatherings, the minimum square meterage required per person inside a venue, and the requirements for the use of PPE may vary between jurisdictions. At the same time, the local context influences what are considered priority topics for engagement and these will therefore be different at each site.

It should also be noted that in-person meetings with social distancing:

- Require time to plan. Spontaneous or last-minute meetings should be avoided as the risk of not being
 able to adequately prepare and implement the required health and safety measures outlined in these
 Guidelines is high.
- Are not able to accommodate high numbers of participants. In practice this may mean that several meetings need to be held to reach large numbers of participants.

GUIDING PRINCIPLES

• Sites should always comply with applicable laws and regulations.

- Sites should always comply with applicable Anglo American health and safety protocols.
- In situations where there is a conflict between applicable laws and regulations and these Guidelines regarding non-pharmaceutical interventions, best practices from a reputable source (i.e. WHO guidelines) should be applied.
- Where possible, conducting community meetings through channels that do **not** involve in-person interaction is always the preferred option.
- Sites should use a risk-based approach to decide whether to hold in-person community meetings.
- In-person community meetings should only be held if the requirements outlined in the checklists of these Guidelines can be adhered to.

RISKS-BASED APPROACH

The type of risks and impacts associated with in-person community meetings, and/or the lack thereof, are site-specific and should be included in the Baseline Workplace Risk Assessment and Control (WRAC). Such risks and impacts can include:

- The risk that the virus is transferred to site staff via a community member during an in-person community meeting;
- The potential impact that the virus is transferred to a community member via a site worker during a community meeting;
- The reputational risk of the perception that Anglo American staff spread the virus in communities through community meetings;
- The potential impact that the lack of in-person community engagement results in a lack of consultation on issues that may have significant adverse impacts on the community; and
- The potential impact that community members with severe connectivity challenges are excluded from engagement activities if no in-person meetings are held.

These risks and impacts may conflict and have different consequence levels. For example, while in-person community meetings may mitigate certain risks/impacts (for example, in-person meetings may be the only way to consult with community members with severe connectivity challenges), they can also create other risks/impacts (such as the spread of the virus between meeting participants, or the perception thereof).

The next section outlines criteria to be used in deciding on whether an in-person meeting should be held. Once the decision to have an in-person meeting is approved, the checklists in these Guidelines should be used to ensure that the in-person meetings are conducted safely.

DECIDING ON WHETHER TO HAVE AN IN-PERSON COMMUNITY MEETING

Various factors should be considered when deciding on whether to have a specific in-person community meeting, i.e. a meeting on a specific topic with a specific community stakeholder.

The questions in Figure 1 should be used to guide the decision-making process. For each question in Figure 1, more information is provided in Table 1. Sites should only answer the questions in Figure 1 if:

- holding of such meeting/s is permitted by local law and regulations;
- the purpose and topic of the potential meeting is clear;

• j	t is cle	ar where	the	meeting	would	take	olace;	and
-----	----------	----------	-----	---------	-------	------	--------	-----

 it is clear which individual community member(s) would participate i 	ı	r is clear which indivi	duai community	memberisi) WOUIG	participate in	ine meeti	ına.
--	---	-------------------------	----------------	-----------	---------	----------------	-----------	------

Figure 1 – Decision tree to decide whether to have an in-person meeting

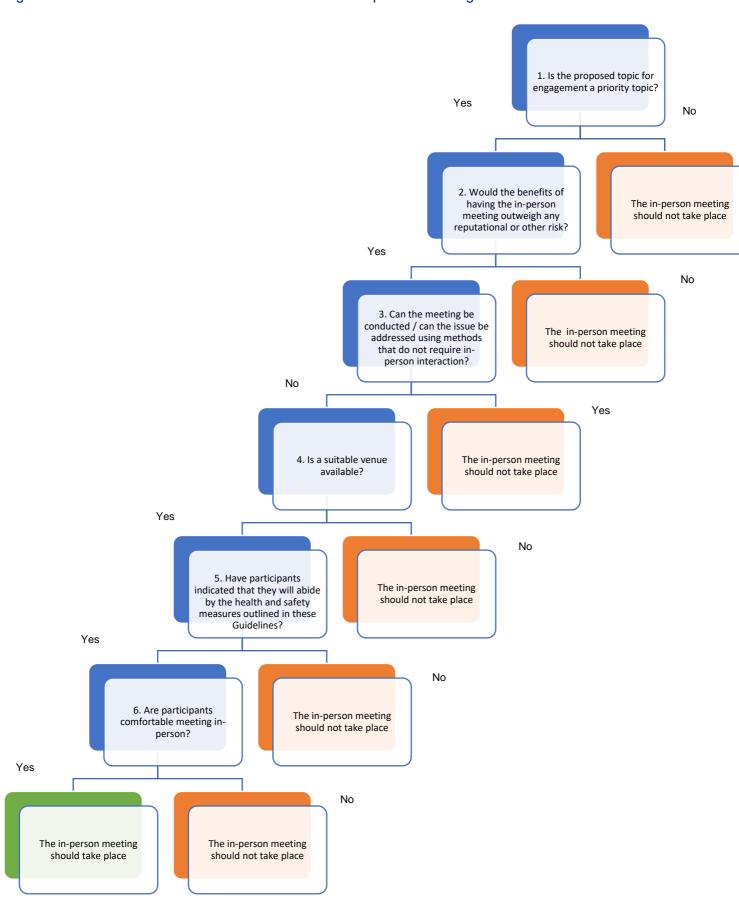


Table 1 – Information to consider for each decision-tree question

Nr.	Question	Information to consider
1	Is the proposed topic for in-person	Not all topics are a priority. Site priority topics for engagement should be determined and documented in advance and could include:
	engagement a priority topic?	 risk and impact issues of medium, high, and major consequence levels (as indicated in the Baseline WRAC)
		permitting requirements
		 issues related to long-term and annual social performance and/or engagement objectives (as indicated in the SMP and the SEP)
		the investigation of grievances and incidents of consequence level 3 and higher
		 issues of key importance to key stakeholders. Priority stakeholders and the issues they value should be captured in the Stakeholder Mapping and Analysis and the Stakeholder Register.
2	Would the benefits of having the in-	Risks and (potential) impacts associated with in-person meetings (or the lack thereof) should be captured in the Baseline WRAC – see section 'Risk-Based Approach' above.
	person meeting outweigh the risks?	This includes the risk of the site being perceived as contributing to the spread of the Coronavirus. Communication with community stakeholders, the grievance log, and local media coverage may give an indication of whether this risk exists.
3	Can the proposed meeting be conducted/can the	Consider connectivity and other issues that may leave certain community members vulnerable to being excluded from engagement activities and provide tailored engagement opportunities if possible.
	issue be addressed using methods that do not require in-	Where the option of using other methods exist, check with the community stakeholders to ensure that they are comfortable using other channels that do not require in-person interaction.
	person interaction?	An in-person meeting can also be combined with videoconferencing or dial-in, i.e. those participants who can join the meeting remotely should do so.
4	Is a suitable venue	Outside venues are considered suitable and are preferred over inside venues.
	available?	Venues should be well ventilated and be spacious enough to maintain 1.5 metres distance between participants.
5	Are participants	Need to ask participants about this in advance of the meeting.
	comfortable meeting in-person?	Participants also include any partner organization representatives planning to attend the meeting.
6	Have participants indicated that they will abide by the	Health and safety measures that will be upheld during the meeting include maintaining 1.5 metres distance between participants, regularly washing hands, wearing a face mask, and signing required documentation.
	health and safety measures outlined in these Guidelines?	Participants that fall in the high-risk group (see Annex A) should not attend the meeting. Participants coming from an area in the community that is currently a Covid-19 'hotspot' or where several people are currently isolated due to Covid-19 should not attend the meeting.
		Participants that have recently been tested for Covid-19 but are still awaiting the test results should not attend the meeting. Participants who have been in recent physical contact with a person who tested positively for Covid-19 or is still waiting for test results should not attend the meeting.
		In case participants ask for additional health & safety measures to be implemented during the meeting, sites should accommodate these where possible.
		Participants also include any partner organization representatives planning to attend the meeting.

APPROVAL

Sites should develop an internal approvals process for in-person meetings that is consistent with the principles of these Guidelines, i.e.:

- In-person meetings are the exception, not the rule;
- The decision for having an in-person meeting is taken following a risk-based approach as outlined in the section above:
- At in-person meetings the health & safety measures outlined in Checklist 1, 2, and 3 are adhered to.
 Therefore, unplanned or spontaneous meetings are avoided where possible; and
- In-person meetings comply with applicable laws and regulations. Depending on the jurisdiction, government approval may also be required for certain in-person meetings ('gatherings').

CHECKLISTS FOR PLANNING, DURING, AND AFTER THE MEETING

Once approval for the meeting is provided, the following checklists should be used:

- Checklist 1: Planning the meeting (see Page 8)
- Checklist 2: During the meeting (see Page 11)
- Checklist 3: After the meeting (see Page 12)

The checklists do not include local government requirements. These should be added and updated by the site as needed.

In case it becomes evident when planning the meeting, or during the meeting, that the requirements for social distancing included in Checklist 1 and 2 cannot be or are not being adhered to, consider terminating the meeting and reconvening if and when the requirements can be implemented.

Checklist 1 – Planning the meeting

Nr.	Requirement	Check?
Venue		
1	The venue is spacious, well-ventilated, and able to accommodate the number of meeting participants applying 1.5 metres distance between individuals.	
2	In areas where queues are likely to form (such as near bathrooms and coffee areas), (floor) markings are used to mark 1.5 metres distance.	
3	The entry and exit are regulated so that it does not become overcrowded.	
4	The venue (tables, chairs, doorknobs, etc.) is disinfected prior to the meeting.	
5	Seats designated for meeting participants to sit on are clearly marked with the participant names.	
6	The cutlery and plates are available in disposable format only.	
7	Salt, pepper, and sugar are available as individually packaged items only.	
8	Beverages and food are available as individual items only, e.g. in cans and containers.	
9	Hand sanitiser for all meeting participants is available and provided by the site as needed.	
10	Hand washing areas (sinks) are available, with liquid soap and paper towels/ air driers available (no fabric towels).	
11	Non-contact equipment for screening the temperature of all meeting participants is available and provided by the site.	
12	Cloth face masks for all meeting participants are available and provided by the site.	
13	Tissues/paper towels for all meeting participants are available and provided by the site as needed.	
14	A bin to dispose of face masks and tissues is available.	
15	Materials for disinfecting the venue and equipment are available and provided by the site as needed. Fogging and misting is not recommended.	
Trans	portation	
1	Any site-vehicles provided to transport site staff and/or community members to and from the meeting should allow for enough social distancing. Seats should be marked accordingly	
2	When two or more people travel to or from the meeting in a vehicle provided by the site, they wear face masks.	
3	At the point of pick-up social distancing is respected.	
Comm	punity participants	
1	A list of community members that will attend the meeting exists.	
2	A seating plan for meeting participants is developed with seating labelled and spaced at a minimum of 1.5 meters distance. Compliance should be verified as part of the minutes of the meeting. This will enable contact tracing should the need arise	
3	Community members that will attend the meeting do not fall into a high-risk group that may be vulnerable to the effects of Covid-19 (see Annex A).	
4	Community members that will attend the meeting are aware of all the health and safety measures that will be applied, including the lack of any form of physical contact, regularly washing hands, wearing a face mask, etc. (see Checklist 2)	
5	Community members that will attend the meeting know that they should not travel to or attend the meeting if they are feeling unwell and/or if they have symptoms of the Coronavirus (see Annex B).	
Site p	articipants	
1	Site staff that will participate in the meeting do not fall into a high-risk group that may be vulnerable to the effects of Covid-19 (see Annex A).	
2	The number of site staff that will attend the meeting is as small as possible (preferably one person).	
3	All site staff that will attend the meeting are aware of the health and safety measures that will be applied during the meeting.	
4	A safety share on Covid-19 and key non-pharmaceutical controls that will be applied during the meeting has been prepared for the meeting. Hand washing, social distancing and donning/removing facemasks will be specifically discussed.	

5	Site staff that will attend the meeting are comfortable to do so.
6	Site staff that will be conducting temperature checks know how to use equipment that will be used to do so.
7	All presentations that require projecting at the venue are sent to the site staff in advance of the meeting.
8	If required by applicable testing criteria, site staff have been tested for Covid-19 and test result were negative.
Venu	e workers
1	Venue staff that will be present during the meeting do not fall into a high-risk group that may be vulnerable to the effects of Covid-19 (see Annex A).
2	The number of venue staff that will be present during the meeting is as small as possible.
3	Venue staff are aware of all health and safety measures that will be applied during the meeting.
Partn	er organization workers
1	Partner organization staff that will be present during the meeting do not fall into a high-risk group that may be vulnerable to the effects of Covid-19 (see Annex A).
2	The number of partner organization staff that will be present during the meeting is as small as possible.
3	Partner organization staff are aware of all health and safety measures that will be applied during the meeting.

Checklist 2 – During the meeting

Nr.	Requirement	Check?
Venue		
1	The venue (tables, chairs, doorknobs, and other high contact areas) are regularly disinfected during the meeting.	
2	The use of microphones or pointers should be limited. If there is a need to share such equipment (including laptops) it should be disinfected between participants.	
3	Entry of participants to the meeting room should be checked according to the attendance sheet.	
All me	eting participants and venue staff	
1	No physical contact at any time, including when greeting someone and when taking pictures.	
2	Everyone (site staff, partner organization staff, community members, and venue staff) wears a face mask, except when they need to present or speak. The meeting is facilitated in such a way that the number of people speaking at the same time is minimized.	
3	Everyone (site staff, partner organization staff, community members, and venue staff) washes their hands upon arrival. At meetings taking place outside, everyone uses hand sanitiser.	
4	A site worker checks participants IDs and registers all meeting participants on an attendance sheet with their first and last name, address, contact numbers, and emergency contact details.	
5	Everyone's (site staff, partner organization staff, community members, and venue staff) temperature is checked and recorded by site staff. Only those without fever will be admitted to the meeting.	
6	Everyone (site staff, partner organization staff, and community members) signs a declaration stating that they are free of symptoms and that they do not fall into a high-risk group. Only those that do not have any symptoms and that do not fall into a high-risk group will be admitted to the meeting. See Annex C.	
7	The meeting safety share consist of the health & safety measures taken during the meeting, i.e. how to correctly wear and dispose of face masks, need to wash hands regularly, how to cough, etc.	
8	Everyone (site staff, partner organization staff, community members, and venue staff) washes their hands before and after a coffee or bathroom break. At meetings taking place outside, everyone uses hand sanitiser.	
9	In case it becomes evident that the requirements for social distancing cannot be or are not being adhered to, consider terminating the meeting and reconvening when the requirements can be implemented	

Checklist 3 – After the meeting

Nr.	Requirement	Check?
Venue		L
1	The venue (tables, chairs, doorknobs, and other high contact areas) are disinfected after the meeting.	
Trans	portation	
1	Any site-vehicles provided to transport site staff and/or community members to and from the meeting should allow for enough social distancing. Seats should be marked accordingly.	
2	When two or more people travel to or from the meeting in a vehicle provided by the site, they wear face masks.	
All me	eting participants and venue staff	
1	No physical contact at any time, including when saying goodbye.	
2	Everyone (site staff, partner organization staff, community members, and venue staff) disposes of face mask in bin.	
3	Everyone (site staff, partner organization staff, community members, and venue staff) washes their hands when leaving the venue.	
4	No lingering after the meeting.	
Site p	articipants	
1	Site staff uploads meeting notes and stakeholder contact information into stakeholder register and log.	
2	Site staff notify all meeting participants in case a meeting participant develop any symptoms up until 14 days after the meeting.	

ANNEX A: HIGH RISK GROUPS

Those people that are currently identified as being at a higher risk of contracting COVID-19 fall into the following groups:

- 1. Immunocompromised as a result of a disease or treatment, for example, may include individuals:
 - a. who have solid organ transplants
 - b. who have cancers who are undergoing active chemotherapy
 - c. with lung cancer who are undergoing radical radiotherapy
 - d. with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
 - e. who are undergoing immunotherapy or other continuing antibody treatments for cancer
 - f. with targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors g. who have had bone marrow or stem cell transplants in the last 6 months, and / or who are still taking immunosuppression drugs
- 2. Immunocompromised workers who are living with HIV and a low CD4 count
- 3. Severe respiratory conditions including all cystic fibrosis, frequent (at least one episode a month while on treatment) asthma and severe chronic obstructive pulmonary (COPD), severe lung fibrosis from tuberculosis
- 4. Rare diseases and inborn errors of metabolism that significantly increase the risk of infections such as severe combined immunodeficiency, homozygous sickle cell disease
- 5. Immunosuppression therapies sufficient to significantly increase risk of infection.
- 6. Women who are pregnant with significant heart disease, congenital or acquired.
- 7. People older than 60.
- 8. All ages with underlying medical conditions, particularly if not well controlled, including people with one of or a combination of the following:
 - a. cardiovascular disease
 - b. diabetes mellitus
 - c. chronic respiratory disease, e.g. current or past tuberculosis or pneumoconiosis
 - d. chronic renal disease e. pregnant employees
 - f. obesity of 40kg/m2 or higher
- 9. Workers who are on immunosuppressive therapy, i.e. systemic corticosteroids, chemotherapy for cancer, bone marrow or organ transplantation
- 10. Smokers, including vaping

ANNEX B: TYPICAL COVID-19 SYMPTOMS

People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhoea

ANNEX C: PARTICIPANT DECLARATION FORM

I confirm that I have been briefed about the potential health risks associated with attending this meeting, and:

- I do not fall into a high-risk category.
- I do not have any of the Covid-19 symptoms.
- I have not been tested for Covid-19 recently and am still awaiting the test result.
- I should not be in quarantine based on local regulations.
- I have not been in close contact with someone that has Covid-19 or that has been tested for Covid-19 in the last 14 days.

I understand that I am attending this meeting at my own risk, and that I should not attend this meeting if any of the above applies to me.

In case I develop Covid-19 symptoms in the next 14 days or if I get tested for Covid-19 in the next 14 days, I will notify Anglo American [insert phone number and/or email address] to protect the health and safety of the participants of this meeting.

Signed by
Date:
First name:
Last name:
Contact details:
Signature: