

Reference Standards
ISO 14001:2015 & ISO 45001:2018

Clause 7.1: Resources.
 Clause 7.2: Competence.
 Clause 7.3: Awareness.
 Clause 7.4: Communication.
 Clause 7.5: Documented information.

PSM (22 Elements) Model

Process Safety Information: It provides a foundation for identifying and understanding the hazards involved in the process. It ensures that PSM goals of HSE are achieved by providing process safety documentation. A PSI package shall be prepared for each process unit. Documents of the PSI package should be maintained up to date for the life of each process unit.

Effective Communication: The purpose of this element is to emphasize and elaborate the importance of effective two-way communication in prevention of occupational accidents/ illnesses and achieving safety goals and objectives.

Training and Development: This element signifies that all personnel whose work could affect the safety of the site must have, and maintain, the necessary knowledge and skills to execute their job functions in a manner consistent with the safe operation of the site.

This Section's Objectives

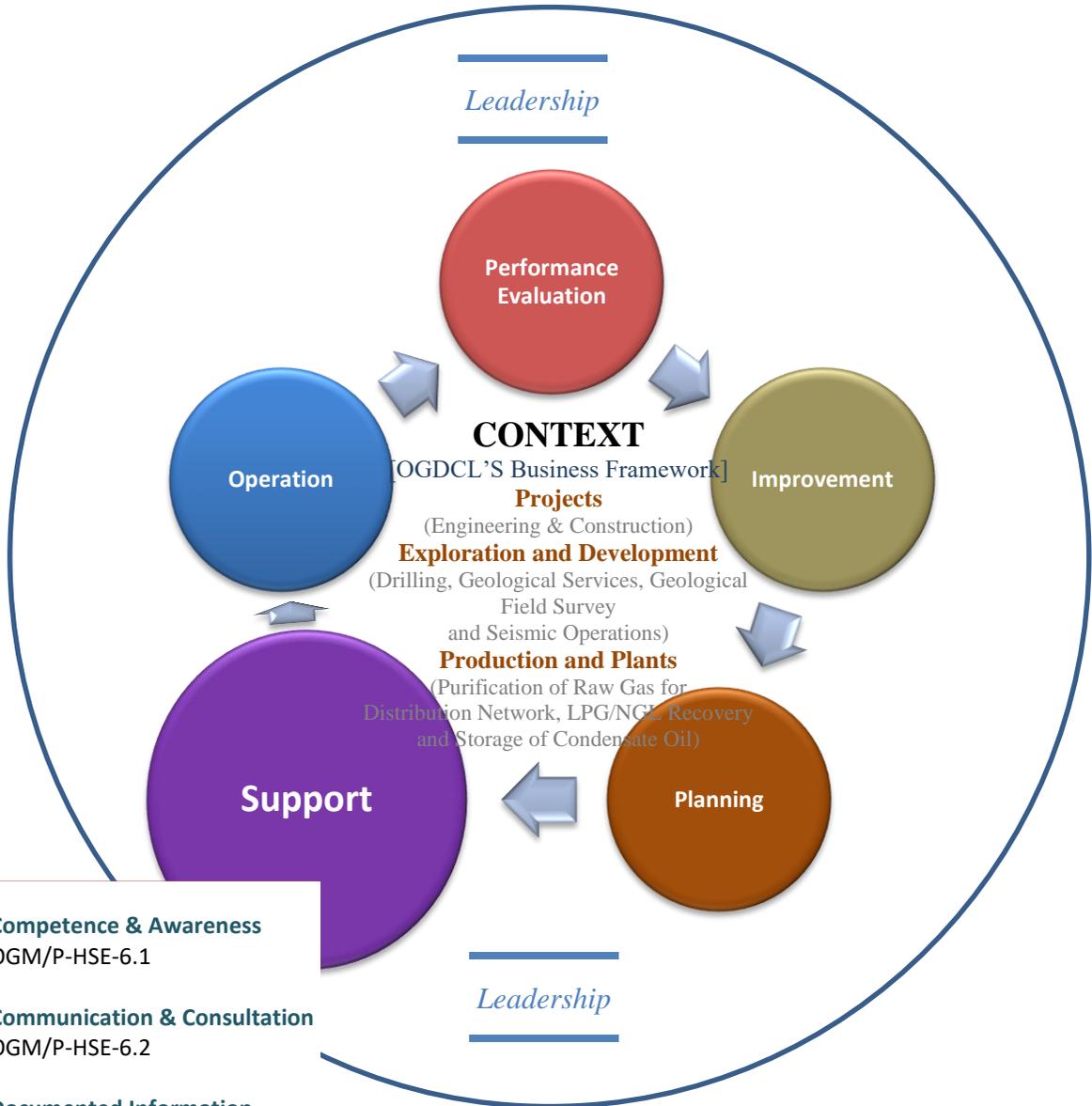
- Support HSE System by providing necessary resources.
- Support HSE System by ensuring that workforce is competent.
- Support HSE System by making workforce aware of their roles, duties, accountabilities and authorities.
- Support HSE System by creating effective communication processes.
- Support HSE System by facilitating internal communications.
- Support HSE System by establishing external communications.
- Support HSE System by managing and employing documented information.



Associated Documents

- HSE Short Awareness Session (Training) Planner
- Emergency Drill Planner
- Toolbox Talk Program
- HSE Short Awareness Session Attendance Record
- HSE Short Awareness Session Evaluation Form
- Training Certificates (to be issued by OGTI only)
- Product Safety Data Sheet (PSDS)
- External Environmental Complaint (EECS) Sheet
- Inter office Memos Format
- Master List of Documents
- List of External Documents
- Document Change Request (DCR) Form
- Distribution Log
- Master List of Records

Applicable Documents
 -- Nil --



- Competence & Awareness**
OGM/P-HSE-6.1
- Communication & Consultation**
OGM/P-HSE-6.2
- Documented Information**
OGM/P-HSE-6.3
- Control of Records**
OGM/P-HSE-6.4

6.1 Competence & Awareness

OGM/P-HSE-6.1(08) Revision Number 8

Original Issue: June 25, 2007
 This Issue: March 14, 2022

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Change/ Revision Log

#	Description of Change
1	Added: Methodology to conduct HSE Training Need Assessment (TNA).
2	Added: Health Awareness, Campaigns & Wellness Initiatives.
3	Amended: HSE Training Record and Effectiveness.

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
OGF – HSE – 005 Onsite Short Awareness Session (Training) Planner	Location HSE IC	Location HSE MRC	Location IC
OGF – HSE – 006 Emergency Drill Planner	Location HSE IC	Location HSE MRC	Location IC
OGF – HSE – 007 Toolbox Talk Program	Location HSE IC	Location HSE MRC	Location IC
OGF – HSE – 007A Toolbox Talk Evaluation	Location HSE Rep.	Sectional Rep. / Supervisor	Location HSE IC
OGF – HSE – 008 HSE Short Awareness Session Attendance	All Concerned	Location HSE IC	Location IC
OGF – HSE – 009 HSE Short Awareness Session Evaluation	All Concerned	Location HSE IC	Location IC
OGF – HSE – 010 Training Certificate	Trainer / Instructor	OGTI	OGTI

6.1.1 General

- ☐ The objective of HSE System awareness and training program shall be to ensure that all personnel know:
 - a) the importance of HSE management system and their roles in maintaining it;
 - b) significant vulnerabilities of their work on environment, health & safety, potential consequences of departure from procedures, and benefits of improved personal performance; and
 - c) emergency preparedness and response requirements.
- ☐ HSE trainings shall be in any format like demonstrations, mockup drills, classroom instruction, and participation in external seminars or conferences; whereas general awareness on HSE shall also be communicated through banners/ postings, HSE awareness programs/ events, etc.

6.1.2 HSE Competence and Skill Determination

- ☐ HSE and all other Departmental/ Sectional Heads shall be responsible for ensuring that personnel whose work can cause significant vulnerabilities (hazards) are sufficiently competent and skilled in performing their work.
- ☐ If workers are deemed "not" to be competent, refresher / remedial training of existing workforce members, recruitment of additional personnel or hiring / contracting of external expertise in order to acquire the necessary competence shall be arranged. The actions taken to raise competence to the required level shall be evaluated for effectiveness by means of the following mechanisms:
 - ☑ Interlocution of the workers on their understanding of their competence to perform the relevant tasks following the prescribed training;
 - ☑ Assessment of competence of the workers by observing them undertake the relevant tasks following the prescribed training;
 - ☑ Peer review or supervision following the required training.
- ☐ Competence requirements for individual tasks shall be determined by considering the following factors in deliberations:
 - ☑ The education, training and experience required to undertake the role and the re-training necessary to maintain competence;
 - ☑ The work environment;
 - ☑ The preventive and control measures arising from the risk assessment process;
 - ☑ The requirements applicable to the HSE management system;
 - ☑ The potential consequences of compliance and non-compliance, including the impact on the worker's health and safety;
 - ☑ The duties and responsibilities associated with the roles;
 - ☑ The complexity and requirements of operating procedures and work instructions;
 - ☑ The results from incident investigations;
 - ☑ Legal and other requirements;
 - ☑ The necessary updating of the competence made necessary by context or work changes;
 - ☑ Individual capabilities, including experience, language skills, literacy & diversity.

- ☐ Personnel who have proven experience in operating relevant processes and equipment shall not "necessary" be required to undergo any formal HSE training; however they may require behavior-based HSE sessions to avoid complacency.

6.1.3 Identification & Assessment of HSE Training Needs

- ☐ HSE Monthly Reports and Minutes of MRC Meetings shall be a regular ongoing source of determining the HSE performance levels and identifying the HSE training needs of the personnel.
- ☐ At the start of each year, HSE Department / Section, in consultation with the Department / Section heads, shall review the current HSE performance levels. Following factors shall be taken into account while identifying the gaps:
 - a) Changes in the HSE System, such as new or revised procedures, or changes in the HSE policy;
 - b) Changes in processes, or operations;
 - c) Changes in applicable laws, regulations, and other requirements;

- d) New significant HSE issues, objectives, or targets;
- e) New management programs;
- f) Results of Internal HSE Audits of the HSE System;
- g) Non-compliance against applicable laws, regulations, and other requirements;
- h) Non-attainment of specified HSE performance, or decreasing performance;
- i) Inadequate performance of individuals or groups of personnel.

HSE Department / Section shall carry out HSE Training Need Assessment (TNA) based on core HSE competencies in consultation with the Department / Section Heads on the following format (specimen):

Name & Designation	Role	HSE Training Need Assessment (TNA) of _____ Department/ Section																					
		Essential trainings required to impart HSE competencies in an individual																					
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	100	

Legend:-

X	Exempt from this training/ competency
1	Not yet capable to perform task as per HSE requirements and/ or demonstrated <u>poor</u> HSE Performance; hasn't participated in the training
2	Some capability to perform task as per HSE requirements and/ or demonstrated <u>average</u> HSE Performance; training completed but found ineffective
3	Capable to perform task as per HSE requirements and/ or demonstrated <u>good</u> HSE Performance; however refresher course required
4	Fully capable to perform task as per HSE requirements and/ or demonstrated <u>excellent</u> HSE Performance; training/ refresher completed & followed-up quite effectively
5	Expert to perform task as per HSE requirements, even can train others

6.1.4 HSE Training Plan

- Based on TNA, HSE Department/ Section shall prepare a biannual / annual HSE Training Plan/ Program.
- Annual HSE Training Planner may contain following essential trainings:
 - ⊕ HSE Laws & Regulations for oil and gas E&P Sector
 - ⊕ Enterprise Risk & Crisis Management
 - ⊕ Emergency Preparedness & Response Systems
 - ⊕ Rules of Permit To Work (PTW) System & Right Use of PPE
 - ⊕ Pollution Elimination & Waste Management Methods
 - ⊕ Journey Management & Defensive Driving
 - ⊕ Ergonomics & Office Safety (Monitoring, Measurement & Compliance)
 - ⊕ Electrical Safety (Monitoring, Measurement & Compliance)
 - ⊕ Mechanical Safety (Monitoring, Measurement & Compliance)
 - ⊕ Process & Chemical Safety (Monitoring, Measurement & Compliance)
 - ⊕ Control of Service Companies, Suppliers and Contractors
 - ⊕ First Aid & CPR
 - ⊕ How to conduct Effective Toolbox / Safety Talks
 - ⊕ Right Use of STOP Cards

- ⊕ Management of Change (MOC)
- ⊕ Accidents Prevention & Investigation through RCFA
- ⊕ Health & Hygiene
- ⊕ HSE Auditor
- ⊕ Train The HSE Trainer
- ⊕ Process Safety Management
- ☐ **Personal Protective Equipment:** Location management shall ensure that all employees, contractors, and visitors required to wear PPE are trained to know the following:
 - ▣ When PPE is required.
 - ▣ What PPE is required?
 - ▣ How to properly wear, remove and adjust the PPE.
 - ▣ What are the limitations of the PPE?
 - ▣ Proper care, maintenance and disposal of PPE.
- ☐ Personnel shall demonstrate an understanding of the training and show their ability to use PPE properly before being allowed to perform work. Retraining should be required if:
 - ▣ There are changes at the work site that impacts the previous training.
 - ▣ There are changes to the PPE used at the work site.
 - ▣ There are inadequacies in the individual's knowledge or use of the PPE.
- ☐ **Permit To Work (PTW) System:** To ensure that work is done safely and efficiently, training on Permit To Work (PTW) System shall be arranged. These shall be specific to hazardous areas & jobs and involve procedures to request, review, authorize, document and most importantly, de-conflict tasks to be carried out by front line workers. Before authorizing an individual for permit issuance or receiving, he shall have to undergo an evaluation on a standardized criterion to get his competence assessed. This evaluation shall be conducted by Location HSE Rep.; however formal authorization shall be granted by Location InCharge on recommendation of by Location HSE Rep.
- ☐ **Pollution Prevention:** Awareness sessions on Pollution Elimination & Waste Management Methods shall be arranged to equip workforce members with the knowledge of different environmental monitoring techniques for water, noise, air, and wastes; how to interpret the impacts of pollutants; and the techniques available to eliminate the pollutants and manage waste.
- ☐ **Emergency Preparedness & Response:** Effective emergency preparedness and response shall be achieved by implementation of the incident command system. Trainings to successfully implement ERP on fires, BLEVE, natural disasters, etc. highlight the need to incorporate incident command system in incidents such as well blowouts, fires, personnel injuries, pipeline ruptures, spills and uncontrolled releases.
- ☐ **Defensive Driving:** Location management shall support and encourage defensive driving. Employees authorized to drive a company vehicle shall be required to participate in a company sponsored defensive driving course.
- ☐ **Health Awareness, Campaigns & Wellness Initiatives:** In order to promote wellness & healthy lifestyle, health awareness information about common medical problems, seasonal diseases, epidemic medical threats, chronic diseases, their complications and their management shall be provided by Medical Services department to workforce members as follows:

Medium	Detail	Frequency
Handouts/ posters	<ul style="list-style-type: none"> ▣ Handouts/ posters shall be printed about the common medical problems, seasonal diseases, epidemic medical threats, chronic diseases, their complications and their management. ▣ Copy of health awareness by handouts/ posters shall be placed or pasted at prominent suitable places at the plant. 	Quarterly
Newsletters	<ul style="list-style-type: none"> ▣ Occupational Health Newsletters shall be published containing clinical statistics of general interest, highlights of medical activities and awareness articles on important medical problems. 	Quarterly

	<ul style="list-style-type: none"> ■ Newsletters shall also be sent through E-mail and request be made to communicate the contents to those who don't have access to mail. 	
Trainings	<ul style="list-style-type: none"> ■ Awareness sessions to employees about healthcare subjects of importance and epidemic medical threats shall be arranged. Following must be covered: <ul style="list-style-type: none"> ⊕ First Aid: The Advance First Aid team may provide additional medical training, which equips them with the skills to assist Location Doctor in emergency situations. The course contents may be designed by the Location Doctor in coordination of HSE with particular emphasis on the techniques and aspects of care considered important when escorting a seriously ill, injured casualty e.g. monitoring of vital signs, transportation of casualty (s), triage etc. ⊕ Basic Life Support (BLS)/ Cardiopulmonary Resuscitation (CPR) ⊕ Healthy Lifestyle to Reduce Coronary Risk Factors ■ Schedule of presentation shall be embedded with Onsite Training Planner and communicated through E-mail and circulars. 	Biannually
Walk Promotion Campaign	<ul style="list-style-type: none"> ■ Walk Promotion Campaigns shall be organized to encourage employees to be physically active and walk more whereby they also benefit from seeing positive messages & information that reassure them to participate in such programs more often. 	Annually
Sports	<ul style="list-style-type: none"> ■ Sports events shall include tournament of table tennis, cricket, football, hockey, etc. types of matches and be organized as a regular feature of the company. 	Annually

6.1.5 Onsite Scenario Based Emergency Mockup Drills

- ☐ Location IC shall ensure that all personnel designated for specific emergency response activities are adequately trained.
- ☐ Location HSE Department/ Section shall prepare an annual Emergency Drill Plan for probable scenarios like:

#	Drill Scenario	Facilitator	Target Audience	Frequency
a.	Fire	Fire Rep.	All Employees	Monthly
b.	Explosion	HSE Rep.	All Employees	Quarterly
c.	Toxic Gas Leakage	HSE Rep.	All Employees	Quarterly
d.	Chemical/ Oil Spill	HSE Rep.	All Employees	Quarterly
e.	Electrical Shock	HSE Rep.	All Employees	Quarterly
f.	Burst Gas Pipeline	HSE Rep.	All Employees	Quarterly
g.	Snake Bite	Medical Rep.	All Employees	Quarterly
h.	Natural Calamity/ Disaster	Admin. Rep.	All Employees	Semi Annually
i.	Pits overflow/ seepage	HSE Rep.	All Sectional ICs	Semi Annually
j.	Oil Tanker Turn Turtle	HSE Rep.	Commercial	Quarterly
k.	Drowning	Medical Rep.	All Employees	Semi Annually

- ☐ Standardized template shall be used for recording Emergency Drill Report.

6.1.6 HSE Training Record and Effectiveness

- ☐ Participation in all HSE specific trainings and general orientation shall be recorded. HSE training record of each employee shall be maintained by Location's HSEQ Section as follows:



Name of Employee:				
Employment No.:				
Designation:				
DOJ:				
Location:				
Training Date	Title of Training	Training Hours	Trainer's Name	Result (Qualified/ Reappear)

- ☐ Competence (i.e. applying skill, knowledge into work & attitude) acquired (gained) through experience shall be identified and recorded in the form of Experience Certificates or biodatas, which shall also be maintained by HSE Department/ Section.
- ☐ HSE Department / Section shall follow-up the implementation of HSE Training Plan/ Program and report the progress to the Location HSE Management Review Committee (MRC).

☐ However, it shall be the primary responsibility of Location IC to oversee the effectiveness of HSE sessions in terms of best-utilization of the training delegates. For that prescribed template shall be used.



OGF/XXX-HSE-005(01)



OIL & GAS DEVELOPMENT COMPANY LIMITED
Location (EFP/FGCP/Seismic Party/Drilling Rig/Field/Plant/Other)

ONSITE HSE TRAINING (AWARENESS SESSION) PLANNER FOR YEAR _____
[based on Training-Need-Analysis (TNA)]

Date	Duration	Time	Topics	Instructor/Facilitator	Target Participants	Venue

Note:

- 1) THIS INTERNAL TRAINING PLAN HAS BEEN PREPARED UNDER THE SECTION 6.0 "SUPPORT" OF OGDCL INTEGRATED HSE SYSTEM MANUAL DULY APPROVED BY MD&CEO OGDCL.
- 2) THE EFFECTIVENESS OF THE PARTICIPATION WILL BE MONITORED SO THAT AWARENESS & CONTINUAL IMPROVEMENT IN THEIR RESPECTIVE AREAS WOULD BE ACHIEVED.

Prepared by _____ Reviewed by _____ Approved by _____

OGF/XXX – HSE – 007(01)

OIL AND GAS DEVELOPMENT COMPANY LIMITED
 Location (EFP/FGCP/Seismic Party/Drilling Rig/Field/Plant/Other)



TOOLBOX TALK PROGRAM FY _____

Department / Section: _____

#	Topic	Talk Leader/Initiator	Frequency	Proposed Date/Time	Proposed Venue	Target Participants
1			Weekly			
2			Weekly			
3			Weekly			
4			Weekly			
5			Weekly			
6			Weekly			
8			Weekly			
9			Weekly			
10			Weekly			

Note:

- 1) THIS PLAN HAS BEEN PREPARED UNDER THE SECTION 6.0 "SUPPORT" OF OGDCL INTEGRATED HSE SYSTEM MANUAL DULY APPROVED BY MD&CEO OGDCL.
- 2) THE EFFECTIVENESS OF THE PARTICIPATION WILL BE RECORDED SO THAT IMPROVEMENT IN THEIR RESPECTIVE AREAS WOULD BE ACHIEVED.

Prepared By	Consulted By	Reviewed By	Approved By
Signature Location In-Charge HSE	Signature Concerned Domain Expert	Signature Members – Location HSE MRC	Signature Location In-Charge



Oil & Gas Development Company Limited
Location: (EFP/FGCP/Seismic Party/Drilling Rig/Field/Plant/Other)

OGF/XXX - HSE - 007A(00)

**Toolbox Talk
Evaluation Template**

DETAILS			
Section / Department:			
Supervisor:			
Date:			
Time:			
Description Of Task(s) To Be Performed:			
Discussion On Vulnerabilities / Impacts Associated With Task(s):			
Applicable Procedural Requirements Reviewed (provide details):			
Job Vulnerabilities / Hazards Assessment (JVA / JHA) Discussed With Workforce (mention details):			
ATTENDANCE			
#	PARTICIPANT NAME	DESIGNATION	SIGNATURE
ENDORSEMENT			
Toolbox Talk Conducted by:			
Signature:			
Effectiveness checked by:			
Signature:			

Ref. Section 06 (Support) of OGDCL's Integrated HSE System Manual



Oil & Gas Development Company Limited
Location: (EFP/FGCP/Seismic Party/Drilling Rig/Field/Plant/Other)

OGF/XXX - HSE - 009(01)

**HSE SHORT AWARENESS SESSION
EVALUATION TEMPLATE**

Lecture Title:	Venue:
Lecture Delivered By:	Lecture Date/ Time:

LECTURE MATERIAL:

Parameters	Strongly Dissatisfied	Dissatisfied	Average	Satisfied	Strongly Satisfied
1. Contents of course					
2. Practical information on subject					
3. Readability of course material					
4. Formatting					
5. Sample Examples					
6. What information is missing or lacking in the course material? Which part of course content needs to be more emphasized / improved?					

LECTURE PRESENTER (overall):

Parameters	Strongly Dissatisfied	Dissatisfied	Average	Satisfied	Strongly Satisfied
7. Subject Knowledge & Command					
8. Presentation & Teaching Skills					
9. Clarity of Presentation					
10. Two-way Communication					
11. Ability to answer questions					
12. Use of practical examples					
13. What area(s) do you think the tutor needs to improve?					

OVERALL LECTURE'S PERFORMANCE:

Parameters	Strongly Dissatisfied	Dissatisfied	Average	Satisfied	Strongly Satisfied
14. Meeting your expectations					
15. Learning experience					
16. Relevance to your work					
17. What areas need to be emphasized or improved to make the overall course more effective and useful?					

Name & OG #:	Department and Location:
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6.2 Communication and Consultation

OGM/P-HSE-6.2(08) Revision Number 8

Original Issue: June 25, 2007
 This Issue: March 14, 2022

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Change/ Revision Log

#	Description of Change
	<i>Reviewed, no change suggested.</i>

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
OGF – HSE – 011 Product Safety Data Sheet (PSDS)	Location Lab. IC	Location HSE IC	Location IC
OGF – HSE – 012 External Environmental Complaint Sheet (EECS)	Complainant → Location HSE Rep.	Location IC	GM HSE
OGF – HSE – 013 Inter Office Memos Format	HSE Department H.O.	Manager/ Chief HSE	GM HSE

6.2.1 Internal Communication

- The internal communication channels used for communicating HSE information shall mainly include (but not limited to):

HSE Information	Internal Communication Channel
a) HSE Policy, Procedures & Work Instructions	<ul style="list-style-type: none"> Website / Newsletters / Inter Office Memos / Bulletin & Notice Boards Safety Handbooks
b) Identification & Management of HSE vulnerabilities, impacts (Risk Register) and Objectives & Management Programs	<ul style="list-style-type: none"> Training & Awareness Sessions STOP Cards Toolbox Talks PTW/ Energy Isolation Standardization through Color Coding Schemes Area Classification & Signs / Labels Minimum Approach Distance (Safe Distance Communication) HSE Awareness Weeks / Workshops / Seminars
c) Hazardous Materials / Chemicals / Processes	<ul style="list-style-type: none"> Signs / Labels / MSDS/ PSDS Toolbox Talks PTW/ Energy Isolation
d) Feedback on HSE System and HSE System Performance	<ul style="list-style-type: none"> HSE Management Review Committee (MRC) MoMs STOP Cards
e) Lessons Learned From Incidents Investigations	<ul style="list-style-type: none"> Toolbox/ Safety Talks Safety Alerts
f) Progress in eliminating hazards and associated OH&S risks	<ul style="list-style-type: none"> ERPs HSE Awareness Weeks / Workshops / Seminars
g) Progress with consultation and participation of workers	
h) Operational Changes	
i) Suggestion and Feedback from Personnel	

6.2.1.1 Communication of HSE Policy, Procedures & Work Instructions

- HSE policy shall be documented in the HSE System Manual and shall be posted in all locations. Revisions of the policy shall be communicated through memos. Personnel shall also be made aware of the significance of policy through training sessions and informal meetings.
- Procedures and work instructions shall be issued formally to the relevant departments and sections and controlled.

HSE Policy, pertinent procedures, work instructions and handbooks shall also be communicated to the service companies, suppliers and subcontractors to ensure compliance.

6.2.1.2 Toolbox (Safety) Talk Program

- Toolbox Talk shall be done on daily or weekly basis as per nature of operations / jobs / project activities.
- Topic shall be chosen that is relevant to the audience; one that shall create a discussion; a two-way communication; either an in-internal topic shall be used e.g. an incident that happened on site the week before, new work hazards, or one generated from the Toolbox Talk Programme.
- The talks shall take place directly in the workplace, whether it is a production site, plant area, and workshop or at a construction site where between 4 and 10 in number shall be the most effective audience.
- Toolbox Talks shall be monitored for their effectiveness to generate interest in the topic by building up the discussion point by point.
- Signatures from delegates shall be obtained to confirm attendance and to maintain record.

6.2.1.3 Communication of Hazardous Materials/ Chemicals /Process

(Hazardous Materials Identification System)

- ☐ The four bars shall be color-coded, using the modern color bar symbols and the number ratings as follows:
 0 = Insignificant hazard; 1 = Slight hazard; 2 = Moderate hazard; 3 = High hazard; 4 = Extreme hazard

<u>Type of Hazard</u>	<u>HMIS Color Bar</u>
Health	Blue
Flammability	Red
Physical Hazard	Orange
Personal Protection	White

- ☐ The color bar is not for emergencies and is used to convey broader health warning information.

6.2.1.3.1 Permanent signs

- ☐ Permanent signboards must be used for signs relating to prohibitions, warnings and mandatory requirements and the location and identification of emergency escape routes and first-aid facilities.
- ☐ Signboards and/or a safety color must be used to mark permanently the location and identification of firefighting equipment.
- ☐ Signboards on containers and pipes must be placed as per material/product they are carrying and transporting.
- ☐ Places where there is a risk of colliding with obstacles or of falling must be permanently marked with a safety color and/or with signboards.
- ☐ Traffic routes must be permanently marked with a safety color.

6.2.1.3.2 Occasional signs

- ☐ Illuminated signs, acoustic signals and/or verbal communication must be used where the occasion requires signaling danger, to call persons to take a specific course of action and for the emergency evacuation of persons.
- ☐ Hand signals and/or verbal communication must be used where the occasion requires to guide persons carrying out hazardous or dangerous maneuvers.

6.2.1.3.3 Incoming Materials / Chemicals

- ☐ It shall be ensured that all original containers of hazardous chemicals or materials entering the department are properly labeled with the product name; Hazard warnings, including the target organ / physical effects; and Name and address of the manufacturer, distributor or supplier.
- ☐ Effective information and training shall be provided on hazardous chemicals or materials in the work area at the time of their initial assignment, and whenever a new physical or health hazard (the employees have not previously been trained about) is introduced into their work area.
- ☐ Material Safety Data Sheets (MSDS) shall be made available and maintained as follows:
 - ▣ Original with the work area (HazCom file)
 - ▣ Copy with the Materials / Store Department (Backup HazCom file)
 - ▣ Copy with the HSE Department/ Section (Central HazCom file)
 - ▣ Copy with the Medical Rep. / Doctor (Emergency HazCom file)
- ☐ Each department shall develop & update its own HazCom Equipment Table and display it at area's Bulletin & Notice Board as per following format:

Area	Equipment Description	Chemical being Used	MSDS #	H – F – R	Hazard
	1.				
	2.				
	3.				
	4.				

6.2.1.3.4 Outgoing Product

- ☐ Laboratory IC shall prepare the Product Safety Data Sheets (PSDS) in consultation with the relevant stakeholders based upon the properties of the product to be delivered to the client.
- ☐ PSDS shall include the following contents:
 - a) Product and company identification
 - b) Composition/information on ingredients
 - c) Vulnerabilities (threats & opportunities) identification
 - d) First aid measures
 - e) Firefighting measures
 - f) Accidental release measures
 - g) Handling and storage
 - h) Exposure controls/personal protection
 - i) Physical and chemical properties
 - j) Stability and reactivity
 - k) Toxicological information
 - l) Ecological information
 - m) Disposal considerations
 - n) Transport information
 - o) Regulatory information
 - p) Other information
- ☐ HSE Section shall review the PSDS for its completeness especially in accordance with the regulatory requirements.
- ☐ Subsequently the Location Management shall approve it.
- ☐ The PSDS shall be disseminated / conveyed to the downstream customers including product transporters to timely & effectively respond to daily exposure situations as well as to emergency situations.
- ☐ The PSDS shall be reviewed six monthly and the new revision shall only become in effect once the properties of the product has changed in a significant manner.
- ☐ Product Safety Data Sheets (MSDS) shall be made available and maintained as follows:
 - ▣ Original with the work area (HazCom file)
 - ▣ Copy to the Product Transporter / Purchaser
 - ▣ Copy with the Commercial Department (Backup HazCom file)
 - ▣ Copy with the HSE Department/ Section (Central HazCom file)
 - ▣ Copy with the Medical Rep./ Doctor (Emergency HazCom file)

6.2.14 Communication through Standardized Color Coding

6.2.1.4.1 Pipeline Color Code Identification Band System and Labeling System:

- ☐ This shall be complied where the following apply:
 - ▣ Pipe contents are hazardous, or could generate hazardous conditions.
 - ▣ The pipe serves a safety purpose, as part of hazard prevention or emergency response.
 - ▣ Flow must be redirected, shut off, or adjusted to allow for maintenance or other expected work.
 - ▣ The pipe or its contents could affect the procedures followed during an emergency.
- ☐ Standardization shall be accomplished in all facilities as follows:-

The Band System:

- ☐ All process equipment and pipe work apart from Fire Fighting System shall be finished in either Light Grey or White along its entire length as the decorative color (the base color or ground color).
- ☐ The fluid contents of all flow-lines shall be identified by tapes which are appropriately colored; the nature of the pipe contents shall be identified by means of a Color Code Identification Band System (CCIB).
- ☐ Ground colors shall be provided on the full pipe section; whereas color band width to be 25 mm up to 50 mm.

- ☐ When double color bands exist on the pipeline, then a proportional width of 4:1 to the next band is provided.
- ☐ These color bands are provided at suitable locations as:
 - ▣ At the beginning and termination points
 - ▣ At 25m intervals (up to 50m in case of headers)
 - ▣ At change in flow direction points and flow diversion locations.
 - ▣ At locations where the pipe enters the plant or exits from the boundary.
- ☐ Color Code Identification Band System (CCIB) is given below:

Type of Fluid	Identification Band Color
Water (Raw;Potable;Storm;Treated;Produced)	Green
Steam	Crimson Red
Firefighting	Signal Red
Oils (Combustible Liquids)	Dark Brown
Chemicals	Orange
Gases (Gaseous or Liquefied)	Yellow
Acids & Alkalis	Purple
Air (Utility; Service, Instrument)	Light Blue
Process Effluents (Drain; Vent; Flare)	Black

- ☐ The additional use of Colored Labels giving the full or abbreviated product description, temperature, pressure, and other details necessary to identify any potential hazard, together with the appropriate visual aids and hazard pictorial symbols, shall be applied where deem appropriate.
- ☐ In addition to being Color Coded, each process sub-system, pipeline and valve shall be individually identified by marking them in accordance with the Equipment Identification and Tag Numbering System.
- ☐ The line number and the flow direction shall be stenciled on each pipe section and pipeline together with the CCIB, to provide the pipe work with unique traceability.

The Labeling System

- ☐ The labels shall be placed on pipes:
 - ▣ Adjacent to all valves and flanges
 - ▣ Adjacent to all changes in pipe direction
 - ▣ On both sides of wall, floor or ceiling penetrations
 - ▣ Every 50 feet on straight runs of pipe (or every 25 feet in congested areas)
- ☐ A color code based on the type of hazard posed by a pipe's contents. The labeling color code shall be:
 - ▣ Water: **White** text on green text box
 - ▣ Steam: **White** text on crimson text box
 - ▣ Fire quenching fluids: **White** text on red text box
 - ▣ Combustible fluids: **White** text on brown text box
 - ▣ Toxic and corrosive fluids: **Black** text on orange text box
 - ▣ Flammable fluids: **Black** text on yellow text box
 - ▣ Acidic fluids: **White** text on purple text box
 - ▣ Compressed air: **White** text on blue text box
 - ▣ Process effluents: **White** text on black text box

6.2.1.4.2 Color Coding for Maintenance of Lifting Gears

- ☐ Lifting equipment comprises lifting appliances (equipment performing the lifting), lifting accessories (devices that connect the load to the lifting appliance 'GEARS') and lifted equipment (e.g. containers, baskets, etc). All shall be marked with the Working Load Limit (WLL) and Safe Working Load (SWL).
- ☐ An equipment register, including maintenance records and evidence of certification to be available with Operator.
- ☐ Following are some of the items used as gears in lifting activities;

Wire rope slings	Chains and chain slings	Man-made fibre slings	Shackles
Beam- and Plate clamps	Eye bolts & swivel rings	Hoist rings	Turnbuckles
Wedge sockets	Lifting harnesses	Drill pipe elevators	Casing elevators

Bail arms	Spreader beams	Hooks	Load cells
Pad eyes and bolts	Rigging screw	Pallet hook	

- ☐ Color coding shall be an add-on for visual inspection and confirm the following aspects;
 - a) an inspection has been carried out;
 - b) whether or not inspection is current; and
 - c) to determine the inspection results by being able to link back from the physical evidence to the records.
- ☐ Location ICs shall ensure that all portable, circulating & fixed lifting equipment and accessories for lifting, after thorough examination, are color coded to give visual indication of their certification and fitness status:-

Color Code	Period
Green	Lifting accessories, which have been inspected and found fit for purpose should be color-coded for a maximum six months.
Yellow	Lifting accessories, which inspection is due after lapse of 06 months shall be stored separately and clearly marked/ color coded and returned for re-inspection, certification and color coding.
Red	Crimson red color to denote equipment "unsuitable for the job" shall be applied. The crimson red color code shall also be used for discarded or rejected lifting gears that need to be kept in material storage for non-prescribed period of time.

6.2.1.4.3 Assured Grounding Color Codes

- ☐ All cords and current carrying conductors used with the portable power tools shall be protected by either a Ground Fault Circuit Interrupter (GFCI) or an Assured Grounding Program; Following Assured Grounding Color Code Calendar shall be used (each new year):

January	February	March
April	May	June
July	August	September
October	November	December

Note:- The colors in the form of "taped bands" shall be pasted on the wire near the plug.

6.2.1.4.4 Lockout Color Coding

- ☐ Lockout and Tagout (LOTO) devices shall be singularly identified; shall be the only device(s) used for controlling energy; and shall not be used for other purposes.
- ☐ Tags shall not be required if locks are otherwise "indelibly" marked so as to identify the person(s) to whom the lock belongs.

☐ For each Section/ Department, Locks shall be unique-color-coded to assist in identifying users.

Note: The authorized person applying a lock shall keep the key for that lock in his possession until the lock is removed. No employee should be able to open a lock attached by someone else.

6.2.1.5 Communication of Impacts, Objectives and Management Programs

- ☐ Information about vulnerabilities and related impacts (risks), objectives, targets, and management programs shall be communicated to the relevant departments and sections generally through distribution of memos, minutes of meetings, reports and other such documents; applying colour coding schemes, labelling, during toolbox talks and through HSE System awareness/ training sessions.

6.2.1.6 Safety Alerts

- ☐ Safety Alert shall provide advisory information and be issued after occurrence of an incident or when there is a current or emerging HSE issue that needs immediate corrective & preventive action.
- ☐ HSE Department shall notify all workforce members and concerned stakeholders regarding the description of associated dangers so that lessons be timely shared. It is encouraged that the Recipients of Safety Alert to share them further within their coworkers.

6.2.1.7 Feed Back on HSE System and HSE System Performance

- ☐ HSE improvement shall require collecting documents, information and data on vulnerabilities (threats & opportunities) and impacts, implementation of management programs, progress toward achieving objectives and targets, HSE performance status and results, compliance with legal and regulatory requirements, and other activities of the HSE System.
- ☐ This feedback information and data shall periodically be reported during the Location HSE Management Review Committee (MRC), and shall be used in making decisions regarding the HSE objectives, targets, and management programs.

6.2.1.8 Suggestion and Feedback from Personnel

- ☐ Personnel at all levels shall be encouraged to report problems and their concerns with HSE issues and the HSE System, and offer suggestions on how to improve HSE performance.
- ☐ They may communicate those HSE issues to their immediate departmental heads or directly to the HSE Department / Section.
- ☐ Departmental Heads shall be required to bring all relevant issues to the attention of the HSE Department / Section and during the Location HSE Management Review Committee (MRC) meetings.

6.2.1.9 HSE Awareness Events

- ☐ Annual HSE Awareness Event shall be arranged as a regular corporate feature.
- ☐ The objective of this location/ field-wide event shall be:
 - a) to promote best HSE practices and acknowledge the existing ones;
 - b) to reinforce HSE messages & increase employees awareness;
 - c) to promote a healthy lifestyle a benefit to the employees;
 - d) to provide better communication opportunities to employees on issues of work and safety; and
 - e) to enable learning through fun.

☐ HSE Awareness Event shall be organized as half, one or two day event depending upon the strength of the field and security conditions.

6.2.2 External Communication

- ☐ The external communication channels used for communicating HSE information shall include:

HSE Information	External Communication Channel
a) HSE Policy, Procedures & Work Instructions, Handbooks	<ul style="list-style-type: none"> ▣ Service Orders/ Contracts ▣ Website / Newsletters / Inter Office Memos / Bulletin & Notice Boards ▣ Service level agreements (SLAs), contracts and pre-project HSE planning meetings ▣ On-site Induction ▣ STOP Cards ▣ Toolbox Talks
b) Identification & Management of HSE vulnerabilities, impacts (Risk Register) and	<ul style="list-style-type: none"> ▣ On-site Induction ▣ Signs / Labels / MSDS/ PSDS ▣ PTW/ Energy Isolation ▣ Standardization through Color Coding Schemes ▣ Area Classification & Signs / Labels

Objectives & Management Programs	<ul style="list-style-type: none"> ▶ Minimum Approach Distance (Safe Distance Communication)
c) Hazardous Materials / Chemicals / Processes	<ul style="list-style-type: none"> ▶ On-site Induction ▶ Signs / Labels / MSDS/ PSDS ▶ PTW/ Energy Isolation
d) External Environmental Complaint (Locals/ Communities)	<ul style="list-style-type: none"> ▶ Application/ Email/ Memos
e) Legal Notices from Regulatory Bodies	<ul style="list-style-type: none"> ▶ Office Memos/ Notices/ Orders
f) Annual Returns and Reports (compliance obligation)	<ul style="list-style-type: none"> ▶ Prescribed Templates

- ☐ All communication from interested parties, whether written or verbal, received at site or any office shall be forwarded to HSE Department / Section.
 - ☐ External Environmental Complaint Sheet (EECS) shall be established and made available in the reception / security office for interested parties to lodge their complaint, if any: EECS shall provide the following information:
 - a) Particulars (Name, Address, Contact No.) of the complainant
 - b) Type / Nature of Complaint
 - c) Summary of the Complaint
 - d) Time and Date of Entry
 - e) Mode by which complaint was communicated / registered
 - f) Any Reference of the Litigation given in the complaint
 - ☐ HSE Department/ Section shall maintain documents related to external communication with the interested parties.
 - ☐ Area Manager and Location IC shall review the complaint and try to resolve the matter at field level.
- ☐ Critical issues shall be forwarded to GM HSE to determine which other departments should be informed or involved, what response should be given to the originator (if any), and whether any internal actions should be considered to address the issues raised in the communication.
- ☐ All inquiries from interested parties shall be responded in same manner on which they were logged.

6.2.2.1 External Communication of the HSE Policy

- ☐ The full text of HSE policy shall be available to the public at main entrance gate, both in English / Urdu and local language.
- ☐ The policy shall be displayed both inside and outside the main offices at appropriate places.
- ☐ Any requests for the HSE policy shall be responded to by mailing / emailing a copy of the same.
- ☐ All the same, HSE Policy shall be made available in company's official website for ready reference.

6.2.2.2 External Communication of Significant Vulnerabilities and Impacts (Risks)

- ☐ Location HSE Management Review Committee (MRC) while reviewing the HSE System shall consider whether information on significant HSE vulnerabilities & related impacts is required to be communicated externally.
- ☐ The decision shall be recorded in the minutes of this review.
 - ☐ In case it is decided to communicate the significant HSE vulnerabilities and related impacts to interested parties, HSE Department / Section shall make arrangements for external communication. The decision may be revised at any subsequent review / meeting.

6.2.2.3 External Communication during Emergencies

- External communication processes, in emergency situations where regular updates are required to be delivered in a clear and unambiguous manner, shall include the identification of designated contact personnel from the location to allow for appropriate information to be communicated in a timely and consistent manner.

(Further information already defined in a) Emergency Preparedness & Response b) Crisis Management and c) HSE Protocol for Management of Project Contractors & Service Companies procedures)



PRODUCT NAME: _____

PRODUCT SAFETY DATA SHEET
Effective Date: _____

This PSDS is a detailed information bulletin of OGDCL's product describing, among other things, the physical and chemical properties, physical and health hazards, routes of exposure, precautions for safe handling and use, emergency and first-aid procedures, and control measures. This information must be disseminated / conveyed to the downstream customers including product transporters to timely & effectively respond to daily exposure situations as well as to emergency situations.

- <LOCATIONNAME>
- <LOCATIONADDRESS>
- <LOCATIONFAX>
- <LOCATIONTEL.>
- <LOCATIONEMAIL>

V – FIRE FIGHTING MEASURES	
FLASHPOINT	FLAMMABLE LIMITS IN AIR
EXTINGUISHING AGENT	
UNUSUAL FIRE AND EXPLOSION HAZARD	

VI – ACCIDENTAL RELEASE MEASURES
STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED

VII – HANDLING AND STORAGE

VIII – EXPOSURE CONTROLS/PERSONAL PROTECTION
ENGINEERING CONTROLS
EYE/FACE PROTECTION
SKIN PROTECTION
RESPIRATORY PROTECTION
GENERAL HYGIENE CONSIDERATIONS

IX – PHYSICAL AND CHEMICAL PROPERTIES	
APPEARANCE AND ODOR	SPECIFIC GRAVITY
BOILING POINT	API Gravity
VAPOR PRESSURE	% VOLATILE, BY VOLUME
EVAPORATION RATE	SOLUBILITY IN WATER



Support: OGDCL's Integrated HSE System Manual

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OGF/XXX-HSE-011(00)

PRODUCT NAME: _____

PRODUCT SAFETY DATA SHEET

Effective Date: _____

This PSDS is a detailed information bulletin of OGDCL's product describing, among other things, the physical and chemical properties, physical and health hazards, routes of exposure, precautions for safe handling and use, emergency and first-aid procedures, and control measures. This information must be disseminated / conveyed to the downstream customers including product transporters to timely & effectively respond to daily exposure situations as well as to emergency situations.

- <LOCATION NAME>
- <LOCATION ADDRESS>
- <LOCATION FAX>
- <LOCATION TEL>
- <LOCATION EMAIL>

X - STABILITY AND REACTIVITY	
STABILITY	CONDITIONS TO AVOID
INCOMPATIBILITY (Materials to avoid)	
HAZARDOUS DECOMPOSITION PRODUCTS	

XI - TOXICOLOGICAL INFORMATION
Exposure Routes:
Target Organs:
Acute Effect:
Chronic Effect/Carcinogenicity:

XII - ECOLOGICAL INFORMATION

XIII - DISPOSAL CONSIDERATIONS
WASTE DISPOSAL METHOD

XIV - TRANSPORT INFORMATION
PROPER SHIPPING NAME
DOT HAZARD CLASSIFICATION
PLACARD REQUIRED
LABEL REQUIRED

XV - REGULATORY INFORMATION
CLEAN WATER ACT (OIL SPILLS)
SARA 311 CATEGORIES



Support: OGDCL's Integrated HSE System Manual

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OGF/XXX-HSE-011(00)

PRODUCT NAME: _____

PRODUCT SAFETY DATA SHEET
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This PSDS is a detailed information bulletin of OGDCL's product describing, among other things, the physical and chemical properties, physical and health hazards, routes of exposure, precautions for safe handling and use, emergency and first-aid procedures, and control measures. This information must be disseminated / conveyed to the downstream customers including product transporters to timely & effectively respond to daily exposure situations as well as to emergency situations.

- <LOCATIONNAME>
- <LOCATIONADDRESS>
- <LOCATIONFAX>
- <LOCATIONTEL.>
- <LOCATIONEMAIL>

XVI – OTHER INFORMATION
ACGIH: American Conference of Governmental Industrial Hygienists CFR: US Code of Federal Regulations IARC: International Agency for Research on Cancer NIOSH: National Institute for Occupational Safety and Health, US Department of Health and Human Services NTP: National Toxicology Program OSHA: Occupational Safety and Health Administration, US Department of Labor PEL: Permissible Exposure Limit SARA Title III: Title III of the Superfund Amendments and Reauthorization Act, 1986 TLV: Threshold Limit Value TWA: Time-weighted Average
FOR FURTHER INFORMATION CONTACT: HSEQ Department, OGDCL House, Blue Area, Islamabad, Pakistan.

Disclaimer: OGDCL assumes no responsibility for injury or death to any person or persons caused by the product if reasonable safety procedures or conditions are not met as stated within the PSDS. We also assume no responsibility for injury or death to any person or persons caused by abnormal use of this product or mixing of this product even if reasonable safety precautions were followed. Furthermore, all third person parties assume the risk in their use of this product. The information contained herein is based on the information at the indicated date of preparation with best available knowledge.

OGF/XXX-HSE-011(00)

Prepared By <div style="border: 1px solid black; height: 60px; margin: 5px 0;"></div> Signature Field I/C Laboratory	Reviewed By <div style="border: 1px solid black; height: 60px; margin: 5px 0;"></div> Signature Field I/C HSEQ	Approved By <div style="border: 1px solid black; height: 60px; margin: 5px 0;"></div> Signature Field / Plant Manager
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Oil & Gas Development Company Limited External Environmental Complaint Sheet (EECS)

This form is to be used for complaints regarding environmental issues including dust, smoke, odor, noise issues, or any health complaint. After discussing the issue with the concerned community person(s), Location HSE Rep. shall write down as much detail as possible to allow conduct of a thorough investigation/ follow-up.

Ref. No.:	
Complainant's Full Name:	
Postal Address:	
Residential Address:	
Phone Number:	
Email:	
Nature of Complaint:	

Signature

Date

Forward to (For action required):	
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Ref. Section 06 (Support) of OGDCL's Integrated HSE System Manual

6.3 HSE Documented Information and Control

OGM/P-HSE-6.3(08) Revision Number 8

Original Issue: June 25, 2007
 This Issue: March 14, 2022

Updated By:

Muhammad Sameem Hussain Qaiser
 Senior HSEQ Officer, OGDCL

Reviewed By:

Muhammad Mubashir Abbas
 Manager HSEQ, OGDCL

Checked By:

Mahmood-ul-Hassan Khan
 General Manager HSEQ, OGDCL

Approved By:

Syed Khalid Siraj Subhani
 Managing Director, OGDCL

Change/ Revision Log

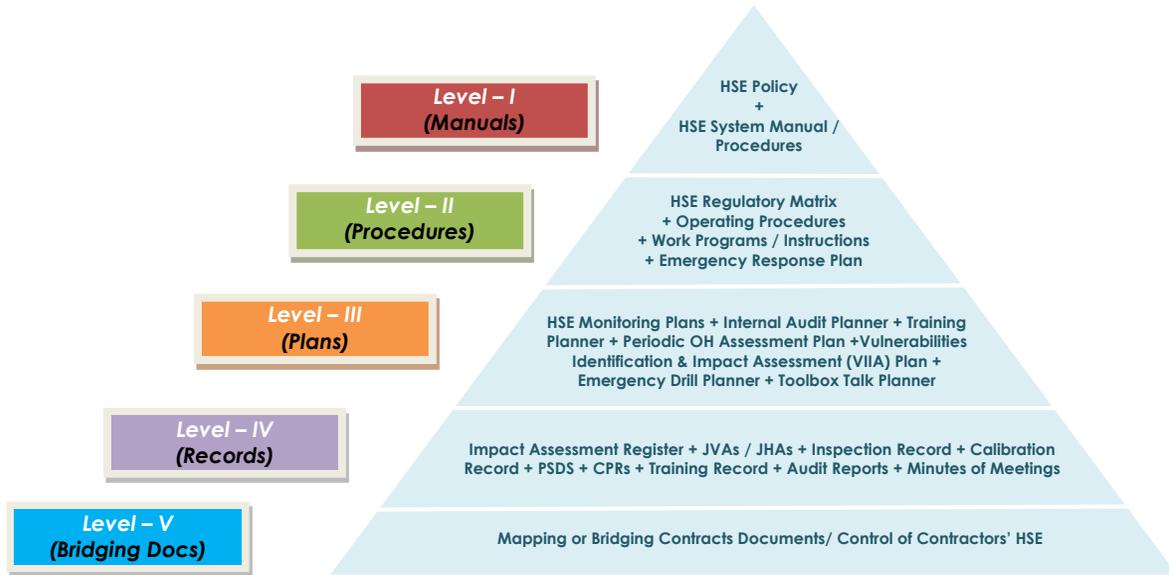
#	Description of Change
1.	Amended: An HSE Management System document shall be reviewed as required but at least <u>once</u> every year and updated if required.

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
OGF – HSE – 014 Master List of Documents	Section / Department Rep.	HSE Rep.	Concerned Departmental IC
OGF – HSE – 015 List of External Documents	Section / Department Rep.	Location HSE IC	Location IC
OGF – HSE – 016 Document Change Request (Corporate)	Initiator	Manager/ Chief HSE	GM HSE
OGF – HSE – 016 Document Change Request (Field)	Initiator	Location HSE IC	Area Manager / Location IC
OGF – HSE – 017 Document Distribution Log	Section / Department Rep.	HSE Rep.	Concerned Departmental IC

6.3.1 General

OGDCL's Integrated HSE Management System shall comprise of **FIVE LEVELS** as exhibited below:-



6.3.2 Document Numbering

OGDCL HSE Documents shall have a structured unique number based on variable codes, complete nomenclature of which can be understood by the following table:

Document	Format	Example
Control of System Manual Procedures	OGM/P-Location Name - Name of Department - Serial# (Revision #)	OGM/P-HSE-001 (00A) or OGM/P-DDK-HSE-001 (00A)
Control of HSE Policy	OGM/Policy- Name of Department - Serial# (Revision #)	OGM/Policy-HSE-001 (001)
Control of Regulatory Matrix	OGM/RM- Name of Department - Serial# (Revision #)	OGM/RM-HSE-001 (00A)
Control of Forms	OGF/Location Name - Name of Department - Serial# (Revision #)	OGF/HSE-001 (00) or OGF/DDK-HSE-001A (00)
Control of Work Instruction	OGW/Location Name - Name of Department- Serial# (Revision#)	OGW/HSE-001 (00) or OGW/DDK-HSE-001A (00)
Control of Inspection & Maintenance Plan	OGI/Location Name -Name of Department- Serial# (Revision #)	OGI/ HSE-001 (00) or OGI/DDK-HSE-001A (00)
Control of Checklist	OGC/Location Name -Name of Department- Serial# (Revision #)	OGC/HSE-001 (00) or OGC/DDK-HSE-001A (00)

Where,

OG = OGDCL
M = Management System
OGM/P = Procedure (-Location abbreviation where required)
OGM/Policy = HSE Policy
OGM/RM = Regulatory Matrix

OGF = Form (-Location abbreviation where required)
OGW = Work Instruction (-Location abbreviation where required)
OGI = Inspection/Maintenance Program (-Location abbreviation where required)
OGC = OGDC Checklist (-Location abbreviation where required)

DDK = Dhodak Location
HSE= HSE Department / Section H.O.

001A= A three digit Serial Number of Procedure, Form, Work Instruction, Inspection and Maintenance Plan, Checklist (with Serial Alphabet only in case of additional relevant document to achieve continuity)
(00A) = A two digit Revision Number for the Manual, Procedure, Form, Work Instruction, Inspection and Maintenance Plan, Checklist (with Serial Alphabet only in case of minor changes where approval of IC HSE is sufficient)

6.3.3 Document Approval & Issue

- After the preparation and numbering of documents, these shall be reviewed and approved by the competent authorities.
- The personnel / authorities responsible for initiating, reviewing and approving of various HSE documents are mentioned at the start of every individual procedure.
- These shall then be entered in the Master List of documents along with their revision number and retention period by the HSE Department / Section and

then issued to the concerned personnel as per distribution list.

- ☐ A controlled document shall meet the following conditions:
 - a) It must be numbered or coded according to the defined numbering scheme
 - b) It must be reviewed and approved before issue
 - c) Changes to these documents must be authorized and controlled
- ☐ All the controlled documents shall be identified as "Controlled Copy, Do Not Duplicate" typed in red color (font seen in soft copy), on the left bottom or top corner on all pages of the document, and "For Internal Use Only" to avoid their unauthorized copying and usage.
- ☐ Uncontrolled documents or copies shall not contain any "controlled document" identification.

6.3.4 External Documents

- ☐ Following documents used in OGDCL shall be of external origin:
 - a) HSE standards and other standards / specifications
 - b) HSE related federal and provincial acts, laws and regulations or applicable guidelines
 - c) Technical manuals, machine manuals and process diagrams / drawings
- ☐ Concerned Departmental Heads shall be responsible for controlling external documents related to their Department.
- ☐ Whereas HSE Department / Section shall be responsible for maintaining current copies of management systems related applicable Standards and current copies of Legislations / Acts / Regulations.
- ☐ The external origin documents shall not be required to be coded or approved.
- ☐ Related person enters the external origin document in the List of External Documents, shall stamp it "EXTERNAL DOCUMENT" with Red Ink and maintains distribution record of copies of external documents.

6.3.5 Changes/ Amendment In Documents

- ☐ **An HSE Management System document shall be reviewed as required but at least once every year and updated if required.**
- ☐ When required, Departmental / Sectional Heads shall initiate changes in HSE management system document by filling in Document Change Request (DCR). The DCR shall at least include a description of change requested and the reason for change.
- ☐ The DCR signed by the concerned Departmental Head shall be sent to HSE Department / Section. HSE Head, in consultation with the concerned Departmental Heads, shall review the nature of change requested. It shall then be sent to the approving authority who approves/rejects the DCR.
- ☐ After the approval, HSE Department / Section shall incorporate the changes in the concerned document and describe the nature of change on the amendment sheet. The revision number of the document shall be incremented and the revised document shall get approval from the concerned approving authority.
- ☐ The revised document shall then be distributed to all the concerned persons in the distribution list and the obsolete documents retrieved. Obsolete documents shall either be destroyed or stamped "OBSOLETE" with Red Ink to properly identify it. One copy of obsolete document shall be maintained for record purposes with the HSE Department / Section.



6.4 Control of Records

OGM/P-HSE-6.4(08) Revision Number 8

Original Issue: June 25, 2007
This Issue: March 14, 2022

Prepared By:

Muhammad Sameem Hussain Qaiser
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Reviewed By:

Muhammad Mubashir Abbas
Manager HSEQ, OGDCL

Checked By:

Mahmood-ul-Hassan Khan
General Manager HSEQ, OGDCL

Approved By:

Syed Khalid Siraj Subhani
Managing Director, OGDCL

Change/ Revision Log

#	Description of Change
	Reviewed, no change suggested.

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
OGF – HSE – 018 Master List of Records (Field)	Section / Department Rep.	HSE Rep.	Concerned Departmental IC

6.4.1 Filing and Indexing

- ☐ Hardcopies of records shall be filed in cardboard or plastic files. These files shall be numbered and indexed for easy retrieval and safe storage.
- ☐ Following labeling format shall be used for files:

File #:
Department:
File Title:
Date Started:
Date Closed:
Maintained by:
Location:

Example

File #: MMD-1
Department: MMD
File Title: Operational Control Procedures
Date Started: 1st January, 2005
Date Closed: 31st March, 2005
Maintained by: MMD Section
Location: DDK

6.4.2 Reference Numbering System

- ☐ Following format shall be implemented at organizational and unit level for controlling Audit records, CPRs, CCRs, Management Reviews, Impact Assessment Register, and JVAs / JHAs:

Document	Format	Example
Control of Internal HSE Audit Noncompliance Report	HSE / Abbreviation of Location / Year – NCR###	HSE/DDK/2007-NCR001
Control of Corrective Action Request	HSE / Abbreviation of Location / Year – CPR###	HSE/DDK/2007-CPR003
Control of Review Minutes	HSE / Abbreviation of Location / Year – MR###	HSE/DDK/2007-MR002
Control of Impact Assessment Register	HSE / Abbreviation of Location / Year – IAR(##)	HSE/DDK/2007-IAR(00)
Control of Job Vulnerabilities / Hazard Analysis	HSE / Abbreviation of Location / Section – JVA###(##)	HSE/DDK/LAB-JVA001(00)
Control of Change Control Requisition	HSE / Abbreviation of Location / Section – CCR###(##)	HSE/DDK/LAB-CCR001(02)

Where,

- HSE = HSE Domain
- DDK = Dhodak Plant
- 2007= Year record is taken
- NCR = Audit Noncompliance Report
- CPR = Corrective and Preventive Action Request
- MR = Management Reviews
- RR= Impact Assessment Register
- JVA / JHA = Job Vulnerabilities / Hazard Analysis
- CCR= Change Control Requisition & and Pre-Startup Safety Review Completion Form
- 001 = Serial Number of the record
- 02 = Revision number

6.4.3 Record Approval & Issue

- ☐ After the preparation and numbering of records, these shall be reviewed and approved by the competent authorities.
- ☐ The personnel / authorities responsible for initiating, reviewing and approving of various HSE records are mentioned at the start of every individual procedure.

6.4.4 Storage of Records

- ☐ The record files shall be stored in cabinets and drawers, and concerned persons in the Sections shall be responsible for ensuring the security and safety of records in their custody.
- ☐ Computer-maintained files shall be stored in directories or folders on the hard disk or main server following the parent-child directory setup.
- ☐ View/ Read, Write/ Edit/ Modify, & Delete/ Un-Delete rights of the computer records shall be specified.
- ☐ Back-ups & security/ protection from viruses, etc. of the computer records shall

be ensured.

6.4.5 Retention of Records

- ☐ The retention period of records shall be established for certain periods during which the record may be required for study or verification.
- ☐ After the retention period, the record shall be disposed off through appropriate means.
- ☐ Retention period shall be defined based on the following factors:
 - a) Frequency of record generation
 - b) Criticality of the record
 - c) Legal obligations
- ☐ Retention period for each record shall be defined in the Master List of Records maintained by HSE Department / Section

6.4.6 Disposition of Expired or Obsolete Records

- ☐ After the expiry of retention period of records, head of section shall review the validity and usefulness of records and segregate the record to be disposed.
 - ☐ The record shall be disposed off by:
 - a) Shredding,
 - b) Selling off, or
 - c) Archiving in store room
-



Oil & Gas Development Company Limited

OGF - HSE - 018(01)

MASTER LIST OF RECORDS

SR NO	DESCRIPTION OF RECORD	RECORD ID#	RETENTION PERIOD	DISTRIBUTION											

PREPARED BY	REVIEWED BY	APPROVED BY

Ref. Section 06 (Support) of OGDCL's Integrated HSE System Manual