



Performance Evaluation: OGDCL's Integrated HSE System Manual

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Reference Standards

ISO14001:2015 & ISO45001:2018

Section 9.1: Monitoring, Measurement, Analysis and

Evaluation.

Section 9.2: Internal Audit.

Section 9.3: Management Review.

PSM (22 Elements) Model

Quality Assurance (QA): QA is important for new facilities and revisions or repairs to existing facilities to ensure that safety critical equipment which handles hazardous material (as it is fabricated) is suitable for the process application. It also ensures that safety critical equipment installed is consistent with design specifications and manufacturer's recommendations.

Mechanical Integrity: This element addresses equipment tests and inspections including predictive and preventive maintenance, reliability engineering, maintenance procedures, quality control procedures, training and performance of maintenance personnel. All of these mechanical integrity efforts ensure an incident free and reliable operation, and they help to pin point root causes and avoid incident recurrence and pre-mature failures. Audits and Observations: This element covers the importance of effective auditing in site safety management and provides guidelines for conducting and evaluating safety audits. Integrated Organization for Safety: The purpose of the overall safety organization is to mobilize all available talent in the interest of safety, health, and environmental protection. It does not, in any way, relieve individual members of the line organization of their safety responsibilities. Various committees are staffed principally by members of the line organization supplemented by safety staff members and other specialists.

Motivation and Awareness: The purpose of this element is to discuss and provide guidelines on different concepts and recommended practices on progressive motivation. Internal motivation is necessary to sustain high-level safety performance once that level of performance has been reached. External motivation is necessary to make the initial transition to high level safety performance because of established behavior patterns in the individual.

Integrated Organization for Safety: The purpose of the overall safety organization is to mobilize all available talent in the interest of safety, health, and environmental protection. It does not, in any way, relieve individual members of the line organization of their safety responsibilities. Various committees are staffed principally by members of the line organization supplemented by safety staff members and other specialists.

Preamble

Terms & Definitions

Context

Leadership

Plannina

Support

Operation

Performance Evaluation

Improvement

This Section's Objectives

- Hazards identification and reporting.
- Determine & assess HSE System performance and compliance.
- Monitor OGDCL's HSE System.
- Establish internal audit methods, schedules, and requirements.
- Conduct HSE System conformance audits and document results.
- Review organization's HSE System.

Associated Documents

- STOP Cards
- Safety Monitoring Plan
- 🗎 Environmental Monitoring Plan
- 🗎 Occupational Health Assessment (Trade / Fitness Test) Plan
- HSE Monthly Report
- List of Internal (Qualified) HSE Auditors
- Annual Internal HSE Audit Planner
- Internal HSE Audit Checklist
- Internal HSE Audit Summary Report
- Internal HSE Audit Non-Conformity Report (NCR)
- Agenda of Location HSE MRC Meeting
- Minutes of Location HSE MRC Meeting

Applicable Documents

-- Nil -





Leadership **Hazards & UBsUCs Identification** & Reporting OGM/P-HSE-8.1 Monitoring, Measurement & Performance **Compliance Evaluation Evaluation** OGM/P-HSE-8.2 **Analysis of Data** OGM/P-HSE-8.3 CONTEXT Reward, Recognition & Penalties **Impro** OGM/P-HSE-8.4 Operation [OGDCL'S Business Framework] **Projects** (Engineering & Construction) **Internal HSE Audits Exploration and Development** OGM/P-HSE-8.5 (Drilling, Geological Services, Geological Field Survey **Management Reviews** and Seismic Operations) OGM/P-HSE-8.6 **Production and Plants** (Purification of Raw Gas for Distribution Network, LPG/NGL/Sulphur overy, and Stabilization & Storage of Crude/Condensate Oil) Support **Planning** Leadership



8.1 Hazards & UBsUCs Identification & Reporting

OGM/P-HSE-8.1 (08) Revision Number 8

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

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Change/ Revision Log

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#	Description of Change
1	Added: Techniques for Hazard Identification
2	Added: Hazard Hunt Program (HHP)
3	Added: STOP Card for OGDCL House

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
STOP Card	Any Employee	Location HSE Rep.	Location IC
STOP Analysis	Location HSE Rep.	Location HSE IC	Area Manager / Location IC/ GM HSE





8.1.1 Introduction

- To eliminate incidents and injuries, hazards need to be identified and managed. The foundation of hazards management is proactive and correct identification of hazards. Identified hazards are principally subjected to following stages;
 - Identify all applicable hazards (both based on conditions and having origin in human behavior),
 - Apply hierarchy of controls for managing hazards &
 - o Communicating hazards and review the same.
- All identified hazards are manageable as based on continuous efforts, the hazards and risk profile of a Location is minimized.
- It is an obligation of every Employee and Contractor to timely report hazards encountered at our sites. Therefore, they shall be encouraged to raise maximum number of hazards so that no one gets hurt.

8.1.2 Techniques for Hazard Identification

- Many techniques are used for identification of hazards; however selection of a technique depends on factors including regulatory requirement, scope, stage in project lifecycle, type and complexity of system under review.
- During normal operations, reporting of hazards is encouraged to make the workplaces safer. Following scheme of hazard identification shall be employed;
 - STOP Card
 - + Hazard Hunt Program
 - JHA/JVA (separate Procedure)
 - Risk Register (separate Procedure)

8.1.2.1 STOP Observation

- The basic principle of STOP is that all injuries and occupational illnesses can be prevented. The main objective of the STOP program is to train each member of the line organization on-spot to eliminate incidents and injuries by skillfully observing people as they work, talking with them to correct their unsafe acts, and encouraging them to follow safe work practices.
- STOP Program aims to modify behaviors, by observing people as they work and by intervening them; hence eliminating at-risk behaviors. For this reason all hazards shall be identified, reported and documented using STOP Cards.

8.1.2.1.1 How to Conduct STOP Observation Tour

- STOP requires following the intervention cycle;
 - Stop Observe Act Report
 - One of the most important aspects shall be the communication with the personnel during the STOP intervention. This is when one can encourage good behavior / practice and with the individual, identify and discuss unsafe acts and hazards. Furthermore, it is important to realize that the intent to STOP is not a blame system, STOP is instituted to rectify hazards there and then (if possible) and change behavior and understanding of individuals involved with the task.
 - It is important to realize that you "are getting STOP observation tour to keep your fellow employees safe and change their behavior towards safety".
- A typical STOP Observation Tour shall be conducted as follows.
 - STOP near enough to the person so that you can clearly see what they are doing but far enough as to ensure that they do not impede their task.
 - Observe everything the person is doing in a careful systematic way as you review the audit categories in your mind; i.e. reactions of people, personal protective equipment, positions of people, tools and equipment, specifications and housekeeping.
 - OBSERVE activities from a distance and try to spot any unsafe acts. Some unsafe acts happen quickly e.g. lifting etc. So you do need to watch carefully. Try not to focus solely on people's PPE, look also at their body positions, access to the job, type and suitability of tools, people moving around, Rushing etc...
 - **ACT** by talking with the person to reinforce safe work practices and address at-risk behavior. The best method to do so get the job supervisor attention when safe to do





so, enquire about the task at hand, then ask what unsafe behavior or conditions they can observe around them. Your aim is to gently guide the supervisor towards being able to identify the unsafe acts and conditions themselves. This is called Buy-In. If the Supervisor can figure out the unsafe conditions or actions they shall eradicate themselves without requiring interventions.

- Try to engage workers; Ask open-ended questions. Speak less, listen more.
- It's better not to say 'I am conducting a STOP visit' as this tends to put people on the defensive immediately.
- Ask them if they can leave the job for a few minutes while you have a chat about HSE.
- Act in a friendly manner.
- Ask them to explain "what the job is" and "what is it for/about".
- Ask them how they think the task can be made safer
- Ask them about suggestions to improve HSE
- Only talk once the employee has finished telling you what they think
- In case of witnessing an unsafe behavior or action. Your aim is to gently guide the worker towards being able to identify the unsafe acts and conditions themselves. This is called Buy-In. If he can figure out the unsafe conditions or actions themselves, they shall eradicate it themselves without requiring interventions.
- Try to get to the root cause of the problem in order to know what the appropriate corrective action should be. Remember it may not be the individuals fault it could be due to:
 - o Inadequate training.
 - o Non recognition of the hazard or the associated impact.
 - o Impracticality of the official system or procedure.
 - o Unavailability/suitability of safety equipment.
 - o Perceived time pressure.
- Try and agree when and what needs to be done by whom.
- Try to get them to conclude what should be done rather than just telling them the answer. They are then much more likely to do this when you have gone.
- If the activities are already being conducted in safe manner, do not forget to encourage workers. This will reinforce the positive behaviors.
- **REPORT** your interventions and actions on a STOP intervention card without naming the person.

8.1.2.1.2 STOP Administration

- STOP Cards shall be available on every prominent area along with the Drop Boxes
- Location IC shall ensure that Observation Tours are made and STOP Cards are filled-in as per following frequency:-
 - Once every day for HSE IC
 - Once every week for Departmental / Sectional IC
 - Once every fortnight for Location IC
- Different employees/ operations to be picked at a time; the objective is to train all employees to get acquainted with the use of STOP Cards, observe the unsafe conditions/ acts anytime.

8.1.2.2 Hazard Hunt Program (HHP)

- HHP is an effective hazard identification process that aims at identifying the hazards through structured and team based approach by following an approved calendar plan.
- Corporate Annual Management Walk Around (MWA) Plan For Hazards Hunting & Reporting shall be developed by HSEQ Department emphasizing HSE commitment and visibility by OGDCL Leadership (EDs; GMs/ HODs; Area Managers) as best industry practices as per following frequency:-
 - Twice every year by ED
 - Twice every year by GM/ HOD
 - Once every quarter for Area Manager
- Location's Annual Hazard Hunt Plan shall be formulated by HSE Section and approved by Location Management as tabulated below:

#	Quarter	Date	Area	Team Lead	Member-l	Member-II
1		Jan	Operations			
2	First	Feb	Camp			
3		March	Remote			
4	Second	April	Operations			





5		May	Camp		
6		June	Remote		
7		July	Operations		
8	Third	Aug	Camp		
9		Sept	Remote		
10		Oct	Operations		
11	Fourth	Nov	Camp		
12		Dec	Remote		

- Location InCharge shall nominate members for each team; each team shall be constituted of cross-functional representatives and limited to maximum three (03) members.
- The teams would visit the specified area as per respective timeslot mentioned in the approved Hazard Hunt Plan to collect positive & negative observations.
- All of the positive and negative observations during the HHP are required to be formally captured on STOP Cards as well.
- Each Hazard Hunt Team shall discuss the observations of each particular area with the concerned Department/ Section.
- The concerned Department/ Section shall complete the required action(s) in order to address the observations.

8.1.2.3 Review of STOP Cards

- The observations shall be presented in HSE Management Review Committee (MRC) meetings or as deemed appropriate by Location Management where Hazard Hunt Team shall deliver a presentation containing the pictorial evidence of all positive and negative observations; intent of the system remains to be to improve the workplace conditions. (HHP should not be used as tool to abase any Department/ Section or individual.)
- Authentically filled STOP Cards are to be kept with all Sectional ICs.
- On monthly & annual basis, each Sectional IC shall review / analyze its own STOP Results whereas Location HSE IC along with Location IC shall review / analyze STOP Results of the entire Location by using the following pattern:

 Number Of Unsafe Actions / Number Of Unsafe %age

	Behaviors		Conditions			∕∞uge						
	Reaction of people (1)	Personal Protective Equipment (2)	Ergonomics (Positions of people) (3)	Tools and Equipment (4)	Procedures (5)	Tools & Equipment (6)	Structure and Work Area (7)	Environmen† (8)	Orderliness (9)	Total	Open	Closed
December												
November												
October												
September												
August												
July												
June												
May												
April												
March												
February												
January												
Total												
%age												• _

- Monthly STOP Results shall be shared with HSEQ Department H.O. for review.
- Based on the annual review of STOP Cards, in order to improve the PDCA cycle, if required, CPRs be initiated; HSE Impact (Risk) Assessment Register be updated; Safety Talks/ Toolbox meetings be improved; HSE Inspections and Audits be facilitated; HSE MRC meetings' agenda be extended; Trends regarding the type and/ or cause of unsafe conditions & acts be exhibited; Training Need Assessment (TNA) for updating Training Calendar be performed; PPE Need Assessment Matrix be reviewed/ updated; JVAs (JHAs) be revised, etc,





8.1.2.4 Follow-up of STOP Cards

- HSEQ Department/ Section shall follow-up for the close out of the recorded hazards.
- If any of reported hazard/ STOP Card remains open and action not taken, Location's Risk Register shall be updated for incorporation of the open hazard.
- The close out status shall be presented by HSEQ Department/ Section in the HSE MRC meetings through pictorial presentation as before & after HHP.





Stop TOP Report	SE CAS DE L	PMENACOMPANA	الله الله الله الله الله الله الله الله	Stop TOP Report	OPMENT COMMENT	القال ال
OBSERVATION CHECKLIS	ST /	هرست	ھانچ پڑتال کی ا	ELIMINATE UNSA	FE CONDITIONS	PREVENT INJURIES
MARK IF ANY UNSAFE MARK IF ANY S	AFE V	محفوظ كيلي نشان لكاتي	غير محفوظ كيلية نشان لگائيس	OBSERVATION CHE	CKLIST	جانج پرقال كى فھرست غىرمخۇغ كىلئےنثان لگائي مىخۇغ كىلئےنثا
NSAFE ACTIONS	SAFE	فمخوظ	ا فعال	· Control of the Cont		• (
	Safe	تمل محفوظ	لوگوں کارڈیل	CONDITION	SAFE 55"	کیفیت رحوط
Adjusting Personal Protective Equipment Changing Position	nt \square		تنافلق آلات نميك كرنا على تبديل كرنا	Tools and Equipment	All Safe	مادمالان /آلات
Rearranging Job			کام کور تیب بیل لانا کام کور تیب بیل لانا	Are They Right for the Job		کیایہ کام کیلئے فیک ہیں صد
Stopping Job			کام کوروک دینا	In Safe Condition Structures and Work Area	الا All Safe] مستح مالت میں ہیں بنیاد در کام کی بکید
Attaching Grounds Performing Lockouts			ارتھ کا استعال الکآؤٹ کا استعال	Are They		کایہ] صافیاں
	Safe	عمل محفوظ	دَانَى حَالَمَى ٱلات	Orderly] باضابطه بین
_ Head			/ 🗆	Right for the Job In Safe Condition] کام کیلے ٹھیک ہیں آ سکتی حالت میں ہیں
Eyes and Face			ترقعيس اور چيره	Environment	All Safe	باعول
Ears Respiratory System			کان سانسکانظام	Clean Is It		کیایہ] مافین
Arms and Hands			ا من من ها من المنظم ا باتھاورہازو	Orderly] باضابلہ بیں] کچ حالت میں ہیں
Trunk			* D	In Safe Condition Orderliness	All Safe] مح مالت میں بیں بار ملکی
Legs and Feet			المحتمين اور پاؤل	Standards Available		معیار] موجود ب ین
	Safe	عمل محوط	لوگون کی پوزیش (زخم کی وجوحات)	Adequate		J. J
Striking Against Objects Struck By Objects			اشیاہ ہے مکراؤ اشیاہ کالگنا	SAFE ACTS / CONDITION	ONS OBSERVED	 معیاری حفاظتی افعال/ کیفیت کادیکنا
Caught In, On, or Between Objects		_	🗀 اشیاه کانتا 🔲 اشیاه مین او پریاد رمیان مین پیش جا:	ACTIONS TAKEN TO E CONTINUED SAFE PER	NCOUPAGE	 معیاری حاصی افعال/یفیت کادیفنا مسلس حفاظتی کاد کردگی کیلئے افعال کی حوصہ
Falling			🔲 گرچانا	CONTINUED SAFE PER	RFORMANCE GIPLS	الما ناه الردن يا الحال فالوط
Contacting Temperature Extremes			ا زیاده درجه حرارت سے شسلک موجانا	-		
Contacting Electric Current Inhaling a Hazardous Substance			برتی روسے فسلک ہونا خطرناک مادہ سے دم گھٹنا	-		
Absorbing a Hazardous Substance			مران کی ادو به دران کی ادو جذب ہونا طرناک مادو جذب ہونا			
Swallowing a Hazardous Substance			رو گارو بادو خطرناک ماده نگل لینا	-		
Overexertion			حدے زیادہ کام کرنا	-		
Repetitive Motions			J. 18 0 0			
Awkward Position/Static Postures		- in -	عيرمناسب جكه أساكن حالت	UNSAFE ACTS / CONDITI		 غیرحفاظتی افعال/کیفیت کادیکھنا
	Safe	عمل مخفوظ	مازومامان/آلات	 IMMEDIATE CORRECTIVE ACTION TO PREVENT RE 		 موقع پر سی اقدام کرنا دوباره کمل کورو کئے کے اقدام
Wrong for the Job			🔲 کام کے لئے غیرمناسب			
Used Incorrectly In Unsafe Condition			ا غلط طريقة استعال غير محفوظ كيفيت			
	Safe	عن محود	ر روایس از تیب اور طرایت کار			
Procedures Inadequate			تا ت			
Procedures Not Known/Understand			طریقه کار دمعلوم ندمونارند بجهنا طریقه کاردمعلوم ندمونارند بجهنا			
Procedures Not Followed			طريقة كاركى ويروى ندكرنا			
Orderliness Standards Inadequate			پاضابطه معیاری طریقه کارنا کافی مونا	Observer's Signature:		ر از کے دستھا
Orderliness Standards Not Known/Unders Orderliness Standards Not Followed	itand [_]	ت П	یا ضابط معیاری طریقه کارے ناواقفیا باضابط معیاری بیروی ندکرنا	Working Area:	Date:	می جگهتاریخ
. 1828rc.	1					WATERL -
THE BE				GDCL HOU		
(ONLY TO BE FIL	LED IN			AND(OR) CONDITIONS		EHAVIOR ONSPOT)
☐ General Movement	□Vis	itor/ Guest/	Office: Ergonomics	y (Job/ Operation/ Process/ Meeting, Seminar,	Function) ☐ Filing, Material	☐ Manual Handling of
☐ Special Movement	Deleg	ation's Movement	☐ Office: Ambience*	Workshop, Interview	Stacking, Storage	Office Equipment
☐ Manual Handling of Heavy Equipment	2000000	mpressor: O&M iler: O&M	☐ Computers/ Laptops & Accessories: O&M	☐ Fire Extinguishers/ Hydrants/ Hoses: O&M	☐ Food: Preparation, Serving & Washing	☐ Generators: O&M ☐ Electric Room: O&M
☐ HVAC System: O&M	□ Ele	vators: O&M	☐ Electrical Appliances:	☐ Batteries/ Solar Cells:	☐ Janitorial Services: O&M	☐ Suspended Working
☐ AHU System: O&M ☐ Hot/ Work-At-	□То	Room: O&M	O&M ☐ Lights/ Fans/	O&M Plumbing Job	☐ Data Center: O&M	Platform: O&M Paint Job
Height/ Electrical Job ☐ Server Room: O&M	& Sto	rage P Centre: O&M	Detectors: 0&M Communication	☐ Photocopying: O&M ☐ Facsimile (Fax) Room:	☐ Data/ Maps Archival☐ IAQM/ Vehicular	☐ Masonry Job ☐ Carpentry Job
☐ IT DR Room: O&M		1200 Fire Supression	Room/ Services: O&M	0&M	Emissions Monitoring	S-reductive section (5000)
☐ Medical Services/ Drugs Supply		tients Sampling in	☐ Vaccination/ Blood Donations/ Trade Tests	☐ Fumigation ☐ Disinfection	☐ Scanners/ Detectors: O&M	☐ Reception ☐ Waiting Room
☐ Power Cabling &	□ Ne	twork Cabling &	☐ Fuel: Transport,	☐ Lube Oil & Chemical:	☐ Weapons: Handling	☐ Security: Protection &
Accessories: O&M Wudu (Ablution)		sories: O&M vice Calibration/	Handling & Use ☐ Surveillance/	Handling & Use □ Emergency Handling	& Operations Pray/ Leisure/ Rest	Communication Muster Point
Areas/ Washrooms	Testin	g/ Emergency Drill	Walkthroughs	(Evacuation/ Rescue)	Area or Room	☐ Vehicular Parking
-Office ambience is a working en						a positive or negative way.
DDF			NN 4	and (or) UNSAFE ACTS/CON		17
PPE Safe Unsafe	Sat	Posture fe Unsafe	Hazard(s) Exposure Safe Unsafe	Tools & Equipment Safe Unsafe	Procedure Safe Unsafe	Housekeeping Safe Unsafe
				e continued safe perform		
			5 8 4 A 5 8 A A 7		* * * * * * * * *	
			X-X-V-8-X-X-V-8-V-4			
HSE TOP = On-Spot HSE Trainin	ng Observa	ation Program	IAQM = Indo	or Air Quality Monitoring	C	&M = Operations & Maintenance
	Signatur		Specify The Working Are		Reporting Dat	



8.2 HSE Monitoring, Measurement & Compliance Evaluation

OGM/P-HSE-8.2(08) Revision Number 8

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

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Change/ Revision Log

#	Description of Change					
1	Amended: Sequence of monitoring areas changed and tabulated as emergency equipment, safety					
	critical equipment (SCE), fuel/ explosives handling, storage & transportation, operational machinery/					
	equipment, material handling & storage and data storage					
2	Added: Monitoring of buildings/infrastructure/ porta cabin (caravans)/ offices/ camps					

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
OGF – HSE – 034 Health & Hygiene Monitoring Plan	Location Medical IC in consultation with Location HSE IC	Location HSE MRC	Location IC
OGF – HSE – 035 Safety Monitoring Plan	Concerned Section IC in consultation with Location HSE IC	Location HSE MRC	Location IC
OGF – HSE – 036 Environment Monitoring Plan	Location HSE IC in consultation with Location Lab. IC	Location HSE MRC	Location IC
OGF – HSE – 037 Occupational Health Assessment (Trade / Fitness Test) Plan	Location Medical IC in consultation with Location HSE IC	Location HSE IC	Location IC
HSE Monitoring/Inspection Checklist (Preparation)	Concerned Section IC	Concerned Section IC	Concerned Section IC
HSE Monitoring/ Inspection Checklist (Filling Phase)	Concerned Section Rep.	Concerned Section IC	Concerned Section IC
Calibration Record	Concerned Section Rep.	Concerned Section IC	Concerned Section IC





8.2.1 General

- When determining what should be monitored and measured (in addition to progress on objectives / targets), the following should be considered:
- Significant vulnerabilities, threats & opportunities,
- Compliance obligations, and
- Status (effectiveness/ reliability) of operational controls & equipment.
- HSE monitoring and measurement shall include both proactive and reactive monitoring. It shall include Type of Measurement like:
 - a) Monitoring of emissions to air
 - b) Monitoring of effluents to water and land
 - c) Monitoring of emergency equipment
 - d) Monitoring of mechanical integrity & fitness of safety critical equipment
 - e) Monitoring of electrical equipment / appliances & accessories
 - f) Monitoring of operation equipment/machinery
 - g) Monitoring of employee's health
 - h) Monitoring of noise & lighting levels
 - i) Monitoring of safety tags, signs, labels, color coding, etc.
 - j) Monitoring of energy and natural resources consumption
- For each parameter / characteristic to be monitored, the Location HSE Representative in consultation with concerned Sectional InCharge shall determine for each item/ element:
 - a) the measurement or test method (Reference Standard)
 - b) frequency of measurement
 - c) sample point for that parameter
 - d) acceptance criteria (Acceptable Limit for that parameter)
 - e) responsibility for measurement
 - f) measurement apparatus or equipment to be used to measure that parameter and the manner for recording results
- Based on these parameters, three separate OH, S, & E Monitoring Plans shall be prepared.

The monitoring activities, frequencies and responsibilities for the OH, S, & E Monitoring Plans shall be set in the light of the table below (not exhaustive):

#	Item/ Element	Prioritized Monitoring Activity	Recommended Monitoring Frequency	Primary Responsibility					
	Emergency Equipment								
1.	Fire Extinguishers (AFFF, DCP, Foam,	a. Functional Reliabilityb. Visual Inspection	a. Quarterly b. Weekly	HSE					
1.	CO ₂ and Water DCP/ CO2 Trolley)	Hydrostatic (Water Jacket) Test of Cylinder	5 Yearly/ as per NFPA	HSE					
2.	Mobile Foam Unit	Functional Reliability	Quarterly	HSE					
3.	Fire Reservoir	General Inspection & Water Level	Daily	HSE/ Process					
4.	Fire Blanket	Physical Inspection	Quarterly	HSE					
5.	Fire Buckets	Physical Inspection	Monthly	HSE					
6.	Emergency Exit & Light	Cleaning and Maintenance (Physical Inspection)	Monthly	HSE					
7.	Emergency Signage & Layout Diagram	Physical Inspection / Availability	Monthly	HSE					
8.	Wind Socks	Physical Condition	Monthly	HSE					
9.	Spill Control System (Leak tape, absorbent, container, pump, etc.)	Physical Inspection	Monthly	HSE/ IC Commercial/ IC Store					
10	Life Javeliete / De ete	Physical & Functional	Monthly	HSE					
10.	Life Jackets / Boats	Reliability	Daily (On need basis)	Crew In- Charge					
11.	Fall Arrest/ Safety Harness	Physical & Functional Reliability	Monthly	HSE/ IC Workshop/Mecha nical					
12.	Temperature-controlled Medicines' Storage	Physical condition, integrity & Reliability as per Manufacturer Guidelines	Monthly	Medical					
		Calibration	Annually (3 rd Party)						
13.	Nebulizer, Suction Machines, Glucometer	Physical & Operational Reliability as per Manufacturer Guidelines	Monthly	Medical					
		Calibration	Annually (3 rd Party)						
14.	First Aid Box	First Aid Box Items	Monthly	Area Owner/ Sectional IC					
15.	Anti-Snake Venom / Emergency Vaccines / Life Saving Drugs	Physical Inspection / Availability/Required/ quantity / Expiry date	Monthly	Medical					





			Safety Critical Equipment (SC	CE)			
16.	Personnel I	Protective Equipment (PPE)	Physical Inspection / Availability	Daily Monthly	Every Section HSE		
17.	Pressure Relief	Pressure Safety Valve (PSV) Pressure Vacuum Safety Valve (PVSV) Rupture / Bursting Disc Pressure switch /	Physical Inspection/ Calibration (Trevi or Bench Test)/ Leak Test/ Block & Bleed Test/ Isolation Test	Annually/ ATA as per CM/ PM Plan	Process/ Prod. Facilities/ Inst./ Telemetry/ Mechanical		
18.	Emergenci and Isolatio	transmitters y Shutdown on	Emergency Shutdown valves (ESDV) and associated components (i.e. solenoid, actuator, switches, transducers, etc.)	Annually/ ATA as per CM/ PM Plan	Process/ Prod. Facilities/ Inst./ Telemetry/ Mechanical		
19.	Emergenc	y Blow-Down and Flaring	Emergency Blow-down valves (EBDVs) and associated components (i.e. solenoid, actuator, switches, transducers, etc.) Flare stacks and associated components (i.e. instrumentation, sensors, alarms, etc.)	Annually/ ATA as per CM/ PM Plan	Process/ Prod. Facilities/ Inst./ Telemetry/ Mechanical		
			Fire / Flame / Smoke Detector	Quarterly (Internal) Annually (Third Party)			
			Heat / Thermal Detector	Quarterly (Internal)	1		
	Emergency	y Shutdown	Combustible Gas Detector	Annually (Third Party) Quarterly (Internal)	Process / Inst./		
20.	and Evacu			Annually (Third Party) Quarterly (Internal)	Telemetry		
			Toxic Gas Detector ESD Push Buttons	Annually (Third Party) Annually (Third Party)			
			Associated beacons, horns,	Quarterly (Internal)			
			and solenoids Fired Heaters and Boilers	Annually (Third Party Monthly (in-house)			
			Associated instrumentation	Annually (Third Party	Process / Inst./		
21.	Critical Pro	cess Systems	(combustion safety controls, flame arrestors/ fire-check) and shutdowns	Quarterly (Internal) Annually (Third party)	Telemetry		
			Emergency Generators (including switchgear)	Monthly (Internal) Annually (Third Party)			
22.	Emergency Power Systems		Uninterruptible Power Supply (UPS) Systems (including transfer switches)	Monthly (Internal) Annually (Third Party)	Electrical & Inst		
					, ,		Emergency light panels
			Batteries	Monthly (Internal) Annually (Third Party)	-		
			Exhaust fans	Quarterly			
23.	Building Ve	entilation	HVAC (A/C Units, Air handling units, building heaters, louvers, etc.)	Quarterly	Process/ Electrical/		
20.	bollallig vo	in and in	Building HVAC Acid and Fume scrubbers	Quarterly Quarterly	Admin/ Lab		
			Hood vents (e.g. sample boxes, laboratory)	Quarterly			
24.	Flexible Ho	ses and Expansion Joints	Flexible hose (including metal braided hoses, flex rubber hose, elastomer, Teflon, dresser couplings, etc.)	Quarterly	Mechanical/ PFS		
			Expansion Joints	Quarterly	1		
_	Tanks and	Vessels (containing	Level indication/ ATGS (i.e. level transmitters, level	Quarterly (Internal) Annually (Third party)	Process/ Production/		
25.		or toxic commodities)	switches, etc.) Associated components (i.e.	Quarterly (Internal)	Inst./ Telemetry		
			alarms, shutdowns, etc.) Fire Extinguishers	Annually (Third party) Monthly /Quarterly			
			Hydrants	Monthly/Quarterly	1		
26.		ession Equipment &	Automatic Sprinklers Fire Pumps/ Water Supply	Monthly Monthly	HSE/ Process/ Inst.		
20.	Emergenc	y Medical Services	Fire-water Control Valves SCBA/ SABA	Monthly Monthly	-		
			Fire Lorry / Responder Vehicle Ambulance	Monthly	Medical		
	Emergency Alarm System / Siren (Call		Physical Inspection	Monthly Monthly	Medical E&I		
27.	& Muster Points)/ Public Announcement & General Alarm (PAGA) system		Function Test	Quarterly	E&I		
28.	Means of E	scape	Physical Inspection	Monthly	Process/ Admin./ HSE		
29.	Chemical	Safety Equipment	Safety showers	Monthly / Annually	HSE/ Lab / Process/		
		, 45.15	Eye wash	Monthly / Annually	Production Production/		
٠.			Berms, bunds, dikes or walls	Quarterly / Annually	Process/ Store		
30.	Secondary	Containment	Drains, sumps, valves and piping for draw-off	Monthly	Process/ Production		
			Associated components for	Monthly	Process/ Production,		





		safe handling (i.e. safety shields for flanges, pipe joints, expansion joints, acid walls/ Plexiglas, etc.)		Mech. / Prod. Facilities
31.	Scully Grounding System/ Overfill Prevention System	Functional Reliability	Monthly	Electrical/ Commercial/ Store
32.	Earthing Continuity Earth Leakage Circuit Breakers	Functional Reliability	Quarterly / Pre-Use	Electrical
33.	(ELCB), Ground Fault Circuit Interceptors (GFCI)	Calibration Physical Condition	Annually	Rig Maint./ Electrical
34.	Blow Out Preventer (BOP) System	Physical & Functional Reliability	On Installation, Situational (Need basis)	Drilling / Rig Maint.
35.	BOP Controls	Functions & Labeling	Monthly, Situational (Need basis)	Rig Maint.
36.	Passive H2S dosimeter and badges	Calibration / Functional	Situational	Process / Inst./
37.	Electric General Inspection	Reliability Safety Reliability	(Need basis) Quarterly	HSE/ Mech/ Elec. Electrical
38.	Test Equipment i.e. Vibrometer, Dead Weight Tester, Earth Tester, Master Calibrator, Temperature Gun, Master Gauges, Flue Gas Analyzer, Sound Level Meter, Multi Gas Detectors etc.	Physical inspection & Calibration to ensure operational reliability and integrity	Quarterly / Annually (3 rd party)	Instrument/ Electrical/ Telemetry/ Mechanical/HSE/ Lab
	Fuel/	Explosives Handling, Storage & Tr Physical Condition (Dyke;	ransportation	
39.	Crude/ Condensate Storage Tank & Associated Equipment	Lightening Arrestor; Breather; Blanketing Gas; Flame Arrestors; Ladders); Foam- Water Deluge System	5 Yearly (3 rd Party) Quarterly (Internal)	Production / Process, Prod. Facilities
40.	LPG Storage Vessels (Bullets) & Associated Equipment	Calibration / Inspection /NDT; Sprinkler System (Pneumatic Control Valves & Relevant Systems)	As per OEM recommendation/ applicable code	Process/ Inst./Mechanical
41.	Oil/ LPG Filling Gantry	Foam-Water Deluge System, Calibration of Flow Measurement Equipment (Coriolis meters, weighing bridge, TLAS system)	Monthly (Internal) Quarterly (3 rd Party)	Prod./ Process/ Commercial/Inst/T elemetry
42.	Condensate Oil/ Crude Oil/ LPG Bowzer	Physical & Operational Reliability	Daily (if applicable)	Process/ Prod/ Commercial/ Security/ HSE
43.	Odorizing Unit/ Odorization of raw gas	Physical Inspection /	Monthly	Process/ Prod.
	with Methyl Mercaptan	Availability Integrity Assessment (Hardness & Thickness)	Annually (3 rd Party)	Production Facilities/ Corrosion
44.	Well-site Pipeline/ Flow line/ Headers	Pipeline Foundation, Nipple, Socket, Weldolet, Threadlet	Quarterly (Internal)	Prod. Facilities/ Mechanical
		Corrosion Monitoring Earthing, Safe distance,	Monthly/ Fortnightly Fortnightly	Corrosion Shooter/ Security
45.	Explosives Magazine Camp	Fencing, Security	Daily (Surprise)	HSE
46.	Explosive Transportation	Explosive Vehicle Check	Daily (Mandatory) Daily (Surprise)	Shooter HSE
47.	Explosive Handling	Explosive Vehicles / Field	Daily (Mandatory)	Shooter
	Explosive Harianing	Check Earthing, Safe distance,	Fortnightly	Shooter/ Security
48.	Explosives Magazine Camp	Fencing, Security	Daily (Surprise)	HSE
49.	Explosive Transportation	Explosive Vehicle Check	Daily (Mandatory) Daily (Surprise)	Shooter HSE
50.	Explosive Handling	Explosive Vehicles / Field Check	Daily (Mandatory) Monthly (Internal)	Shooter
		Well Monitoring & Flow	Monthly	Well Services/
51.	X-Mass tree & Well Head Assembly	Condition Down Hole Flow Parameters & Pressure Survey	Annually	Production Well Services/ Production
52.	Down Hole Tubing, Flowline & Plant Piping	Corrosion Assessment	Monthly	Production / Prod. Facilities / Corrosion
		Integrity Assessment	Annually (3 rd Party)	Process/
53.	Plant Pipeline & Flow line	(Hardness & Thickness) Pipeline Foundation, Nipple, Sockolet, Weldolet,	Quarterly (Internal) as per CM/ PM Plan	Mechanical Process/ Mechanical
		Threadolet Corrosion Monitoring	Monthly / Fortnightly	
5.4	SSVs/ SSSVs	Calibration/ Functional	At the time of work-over	Corrosion Production/
54.	JJ V S/ JJJ V S	Reliability Calibration / Inspection		Telemetry
55.	ESD Panel/ WHCP	(Hydraulic Oil Level, etc.) Environment, Safety &	Quarterly	Inst. / Telemetry
56.	Well site	integrity inspection	Quarterly	Production
		Operational Machinery/Equip Physical & Functional		F1 11 11 11 1
57.	Electrical Heaters/ Geysers Tools	Reliability Hand and portable power tools and equipment including pneumatic power	Bi-Annually Monthly/ Pre Use	Electrical/ Admin. Concerned Department
59.	Gas Cutting / Welding	tools Pressure Gauges of cylinders; Cutting torch Tip, Clamps;	Monthly/ Pre Use	Mechanical/ Prod.
		NRV (Flash back arrester) Functional Reliability; Oil	,	Facilities Mechanical/
60.	Arc Welding Plant	Leakage, Earth Leakage	Monthly/ Pre Use	Electrical/ Prod.

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		Circuit Breaker (ELCB), Cable, Wiring, Welding Rod Holder		Facilities
61.	Control Room/ SCADA Telemetry System/ DCS	Functional Reliability of Transducer, PLC (time/ pressure/ temperature/ volume), Securities, etc.); FM- 200 Suppression System	Quarterly (Internal) Annual (3 rd Party)	Telemetry/ Inst.
62.	Lights	Luminance	Bi-Annually	Electrical
63.	Power Transformer (e.g. 750 KVA)	Vibration; Cooling system; Relays, Alarms & Control Switches; Insulation resistance; Resistive value	Annually	Electrical/ Mechanical
64.	Chiller, Cooling Tower, Stabilizing Column, Flare Stack, etc.	Mechanical Integrity	As per OEM recommendation / applicable code & CM / PM Plan	Mechanical
65.	Heat Exchanger, Hot Oil Heater, Boiler, etc.	Calibration / Inspection/ NDT	As per OEM recommendation / applicable code & CM / PM Plan	Mechanical
66.	Vessel, K.O drum, Flash Tank, Separator, etc.	Mechanical Integrity	As per OEM recommendation / applicable code & CM / PM Plan	Mechanical
67.	Control Panel	Functional Reliability	Annually	Inst.
68.	Motor Control Centre (MCC)/ Power House	FM-200 Suppression System, Air Circuit Breaker, Bus Bar, Electrical Cable, etc.	Annually (3 rd Party) Quarterly (Internal)	Process/ Electrical & Inst.
69.	Heat Tracing Cable & Insulation System Level Indicator / Transmitter / Switch	Physical & Functional Reliability	Annually	Electrical
70.	Controller, Temperature Gauges, Pressure Gauges	Functional Reliability	Monthly	Inst./Telemetry
71.	Chemical Injection Pump	Functional Reliability	Bi-Monthly	Corrosion/ Prod. Facilities
72.	Chemical Injection Package	Functional Reliability	Monthly	Corrosion/ Prod. Facilities
73.	Extraction / Reinjection Well Wheel Mounted & Portable Drilling	Operational Reliability Physical & Operational	Bi-Annually Annually (SDU, OGDCL)	Prod./ Prod. Facilities
74.	Rigs	Reliability	Monthly (Internal)	Mechanical/ Drilling
75.	Pressurized Hoses of equipment	Physical condition/ Functional Reliability	Pre-use Quarterly	Process/ Mechanical/Prod./ Prod. Facilities/ Drilling
76.	Compressed Gas Cylinders (Operations)	Handling and Storage Proof Pressure Test	Quarterly 5 Yearly (3 rd Party)	Mechanical/ Lab./ HSE/ Prod. Facilities/ Inst./ Telemetry
77.	Compressed Gas Cylinders	Handling and Storage	Quarterly	Admin.
-//-	(Residential)	Proof Pressure Test	5 Yearly (3 rd Party) Monthly (Internal)	7 GITIIII.
	Rotary Equipment (Turbine, Pump,	Vibration Analysis/ Oil Analysis	Annual (3 rd Party) as per CM/ PM Plan	Mechanical
78.	Compressor, Power Generator, Turbocharger, etc.)	CO ₂ Suppression/ Flooding System (Pressure Test & Solenoid Valve Logic Function & Relevant Components)	Quarterly (Internal) Annual (3 rd Party) as per CM/ PM Plan	Inst./ Mechanical/ Process
		Material Handling & Storage	e	
79.	Lube Oil/ Diesel Storage	Fencing; Safe Distance; Leakage; Secondary Containment, Scully Grounding System, overfill protection device	On every consignment	Store / Security
80.	HSD Filling	Safe Distance, Calibration of HSD Dispensing Unit	Monthly (internal) Quarterly (3 rd Party)	Store
81.	Chemical Storage	Designated Yard/ Stacked in an order; Labeling; Material Safety Data Sheet; Chemical Warning Signs; Ventilation; Secondary Containment; Expiry	On every consignment	Store/ User Department
82.	Company Maintained & Hired Vehicles	Vehicle Fitness Vehicle Inspection	Annually Daily(Pre-Trip)	Admin. / TPT/ Concerned
		Load Test	Annually (3 rd Party)	Section
83.	Overhead Crane/ Mobile, Truck Mounted Crane/ Hoist/ Chain Block/ Lifting Gears	Visual Inspection Physical & Operational	Pre Use Monthly (Internal)	Mechanical/ TPT/ Prod. Facilities
84.	Fork lifter	Reliability Physical & Operational Reliability	Annually (3 rd Party) Monthly (Internal) Pre Use	TPT/ Mechanical/ Store
85.	Ladders, Stair cases, Scaffolding	Physical	Ladder (Bi-Annually) Scaffold (Periodically)	Process, Mechanical & HSE
86.	Mechanical Equipment, Parts/ Pipes Storage	Designated Yards/ Racks; Housekeeping; Obstacle-	On every consignment/ Emergent Purchase	Store/Mechanical
87.	Electrical Equipment, Parts/ Panels Storage	Free; Convenient handling Packaging condition; safe handling; proper stacking	On every consignment	Store
88.	General Items' Storage	Segregation; Proper Shelves/ Racks (Safe Working Load); Housekeeping; Access	On every consignment	Store

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89.	Hazardous Waste Storage Yard	Fencing; Proper stacking: Leakage; Secondary Containment, etc.	Annually	Store
		Data Storage		
90.	Seismic Data Processing (SDP) Facility	FM-200 Suppression System; Fire Extinguishers; Heat, Smoke & Fire Detectors;	Annually(3 rd Party) Quarterly (Internal)	HSE
91.	Seismic Data Interpretation (SDI) Facility	Alarms Functional Reliability & Condition of Storage Media; Ambience (Humidity,	Annually	Exploration
92.	Technical Data Library (TDL)	Temperature, Light Intensity)		
	Buildings / Infi	rastructure / Porta Cabin (Carava	ns)/ Offices / Camps	
93.	Elevator/ Lift	Physical & Operational Reliability	As per OEM recommendation	Admin./ Maintenance
94.	Metal Detector/ Walkthrough Gate	Physical & Functional Reliability	As per OEM recommendation	Security
95.	X-ray Baggage Scanner	Physical & Functional Reliability	As per OEM recommendation	Security
96.	HVAC System	Boiler; AHU; ADS; Cooling Towers	Quarterly (Internal) Annual (3 rd Party)	Admin./ Maintenance
07	Constant of Wards District	Integrity/ Load Test / Wire	Quarterly (Internal)	Admin./
97.	Suspended Work Platform	rope condition Physical Inspection	Annual (3 rd Party) Monthly/ On need basis	Maintenance HSE
98.	Control Room	Structure Integrity; FM-200 Suppression System	Quarterly (Internal) Annual (3 rd Party)	Process/ Inst./ C&ESS
99.	Electric Geysers, Heaters, AC units, Electrical Fixtures (cords, extension wires, switches, Earthing Configuration of Porta Cabins/ Metallic Structures etc.)/ Appliances General Inspection	Safety Reliability	Quarterly	Admin./ Electrical
100	Utility (Fuel/ Water) Pipes Lines	Leak Detection; Physical Condition (paint; pin holes; rust; anchoring, pressure gauges, pressure regulators, valves condition.)	Quarterly (Internal) Annual (3 rd Party)	Admin./ Maintenance/ Camp Maintenance/worksh op
101	Weapons	Physical & Operational Reliability	As per OEM recommendation	Security
102	Communication Antenna / Dishes	Physical & Functional Reliability	Bi-Annually	Comm.
103	Guy Wires of Communication Towers, Flare stacks etc.	Physical Condition Monitoring	Annual	Comm./ Maintenance
104		Free from sludge, oil contaminated effluents	Quarterly	Process/ Production
105	Roofs and Sheds (over equipment)	Physical condition (paint; pin holes; rust; anchoring)	Quarterly	PFS/ Mechanical/ Electrical & Inst.
		Environment Monitoring		
		Fugitive Emission & Soil Erosion, Effluent Monitoring	Monthly / Quarterly	Lab.
106	Ponds/ Pits (Evaporation/ Mud/CPI/API/TPI) (produced water), Sewerage Pits	Fencing, Leakage/ Leaching/ Seepage	Monthly	Process/ Drilling/ Well Services/ HSE/ Admin/ C&ESS
	·	QC Checks regarding waste pits treatment & restoration	Before Rig Demobilization	Drilling/ Production / C&ESS/ HSE
107	DG, GG, Stacks & Fire Fighting Engine, Vehicles	Emissions	Monthly	Lab.
108	Flare/ Vent	Ambient Air Quality	Annually (3 rd Party)	Lab.
109	Storage/ Loading of Condensate/ Crude Oil	Exposure Levels BTX Volatile Organic Compounds	Bi-Annually	Lab.
110	Hazardous Material and Waste Bins	Segregation, Labeling, Storage Condition	Monthly	HSE
111	Heavy or Rotating/Vibrating Machinery/Vehicles	Noise Survey	Plant (Monthly) Vehicles (Bi-Annually)	HSE TPT.
112	Sludge from Pipeline and Crude/ Condensate Oil Storage Tanks	Naturally Occurring Radioactive Material (NORM)	As per PNRA requirements	Prod./ Process/ Well Services
113	Drinking Water	Health & Hygiene Monitorin Chemical, Physical and Biological parameters	Biannually	Lab.
114	Workforce's Health*	OH Assessment / Fitness Tests (Trade-wise)	Annually	Medical
115	Food culture analysis	Personal Hygiene Inspection Microbiological analysis	Monthly Annually	HSEQ /Admin/
	<u> </u>	,	,	Medical
116	7,0	Personal Hygiene Inspection Cleanliness, hygiene, and	Monthly	Medical Admin/ Medical/
117		quality Cleanliness, hygiene,	Monthly	HSE Admin/ Medical /
118	Hygiene Inspection of Camp	fumigation, insecticide spray, etc.	Quarterly	HSE/ Camp Maintenance
119	Water Tanks/ Soak Pits	Cleanliness, hygiene	Annually	Admin./ Camp Maintenance

^{*}Note:- It shall be the sole responsibility of Contractor to ensure examinations of their employees under contractual obligation; however OGDCL may crosscheck by carrying out some of these tests on their own where deemed appropriate or on random basis in the larger interest of the health & safety of their workforce members.







- OH, S, & E Monitoring Plans shall be developed by the concerned Sectional InCharges for the areas, activities, operations and processes under their jurisdiction.
- OH, S, & E Plans shall be revised based on amendments in applicable standards, guidelines and results of conditional monitoring.
- Inspection Plans / Checklists/ Forms shall be developed by the Responsible / Concerned Sectional ICs to observe & document the status observed during the monitoring.
- The equipment used for monitoring and measurements of key parameters (related to significant HSE vulnerabilities & impacts and HSE regulations) shall be calibrated as per schedule and record of calibration shall be maintained.
- Calibration record shall be specifically documented for each equipment as follow:

#	Parameters to be calibrated	Required value/set point	Read values	Final values after calibration	Calibration carried on (date)	Next calibration due date

- When HSE performance shall fall below desirable level, or when there shall be a possibility of a noncompliance against laws or regulations, the concerned Section InCharge shall initiate corrective or preventive actions (CPR), and may also recommend establishment of appropriate objectives/ targets and management programs to improve HSE performance.
- The status of CPRs shall be shared in HSE MRC meetings so that rigorous followup remains in place.



OGF/XXX - HSE - 034(01

OIL AND GAS DEVELOPMENT COMPANY LIMITED

HEALTH & HYGIENE MONITORING PLAN

Location (EFP/FGCP/Seismic Party/Drilling Rig/Field/Plant/Other):

Related Record					
Responsible					FORMANCE
Measurement Equipment					TION 8.0 "PER
Measurement Frequency					OR THE SECTION OF THE
Monitoring Place					RED UNDE
Acceptable limit					AS BEEN PREPA
Reference Standard					ORING PLAN H
Parameters to be measured					IIS OCCUPATIONAL HEALTH MONITORING PLAN HAS BEEN PREPARED UNDER THE SECTION 8,0 "PERFORMANCE". AT I A THON!" OF OCINCE NITIED A TED HIS EVETEN MANITAL DITLY ADDROVED DYN DROTED DONARD.
Type of Measurement					OCCUPATION.
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Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual

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GF/XXX - HSE - 035(01)

OIL AND GAS DEVELOPMENT COMPANY LIMITED SAFETY MONITORING PLAN

Location (EFP/FGCP/Seismic Party/Drilling Rig/Field/Plant/Other):

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Related Record				
Responsible				
Measurement Equipment				
Monitoring Measurement Place Frequency				
Monitoring Place				
Acceptable limit				
Reference Standard				
Parameters to be measured				
Type of Measurement				
Sr. No				Note:

THIS SAFETY MONITORING PLAN HAS BEEN PREPARED UNDER THE SECTION 8.0 "PERFORMANCE EVALUATION" OF OGDCL. INTEGRATED HSE SYSTEM MANUAL DULY APPROVED BY MD&CEO OGDCL.

APPROVED BY	
REVIEWED BY	
PREPARED BY	

Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual





OIL AND GAS DEVELOPMENT COMPANY LIMITED

ENVIRONMENT MONITORING PLAN

Related Record				TION" OF
Responsible				E EVALITA
Measurement Equipment				PERFORMANC
Measurement Frequency				P 0.8 NOTE
Monitoring Area				R THE SEC
Acceptable limit				PREPARED LINDE
Reference Standard				AN HAS BEEN!
Parameters to be measured				Note: THIS ENVIRONMENT MONTTORING PLAN HAS BEEN PREPARED UNDER THE SECTION 8.0 "PERFORMANCE EVALUATION" OF
Type of Measurement				ENVIRONMEN
S. So				Note:

OGDCL INTEGRATED HSE SYSTEM MANUAL DULY APPROVED BY MD&CEO OGDCL.

APPROVED BY	
REVIEWED BY	
PREPARED BY	

Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual





OGF/XXX - HSE - 037(00)



OIL & GAS DEVELOPMENT COMPANY LIMITED OCCUPATIONAL HEALTH ASSESSMENT PLAN FY Location (EFP/FGCP/Seismic Party/Drilling Rig/Field/Plant/Other):

Dec THIS PLAN HAS BEEN PREPARED UNDER THE SECTION 8.0 "PERFORMANCE EVALUATION" OF OGDCL INTEGRATED HSE SYSTEM MANUAL DULY APPROVED BY THE CONTRACTORS OF 3RD PARTY EMPLOYEES ARE LIABLE TO CARRY OUT HEALTH EXAMINATION OF THEIR RESPECTIVE EMPLOYEES ONCE IN THE YEAR. EXACT TYPE OF EXAMINATION WILL BE DETERMINED BY LOCATION INCHARGE MEDICAL BASED ON THE HAZARDS AN EMPLOYEE RECENTLY EXPOSED. Nov Approved By Oct Sept Aug July Reviewed By Schedule June May ASSESSMENTS TO BE CONDUCTED IN THE LAST WEEK OF EVERY MONTH. Apr **Consulted By** March Feb Jan Type of
Examination
(Trade-wise) MD&CEO OGDCL. Prepared By Name of Section/ Department

IMPORTANT:- IT IS EVERYBODY'S RESPONSIBILITY TO ENSURE THAT THE OGDCL'S HSE MANAGEMENT SYSTEM IS IN PLACE. 19

Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual

Members - Location HSE MRC

Signature

Signature Location Medical In-Charge

Location In-Charge HSE

Signature

Signature Location In-Charge



8.3 Analysis of Data

OGM/P-HSE-8.3(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.	Modified: Leading and Lagging Performance Indicators display format.

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
OGF – HSE – 038 Monthly HSE Report	Location HSE Section	Location HSE IC	Location IC
OGF – HSE – 038A Monthly HSE Report (Static Locations)	Location HSE Section	Location HSE IC	Location IC
HSE KPI Analysis / HSE Performance	HSE Department H.O.	GM HSE → EDs	CEO / MD





8.3.1 Leading & Lagging Indicators

HSE performance shall be analyzed on regular basis and reported to top management and stakeholders through Key Performance Indicators (KPIs): KPIs mentioned below may be monitored on regular basis:

8.3.1.1 Leading Indicators (Pre-Loss/ Prevention → Loss Control)

- a) Related to Safe Man Hours
- b) Vulnerabilities (hazards), Impacts (risks) as High, Medium, Low
- c) Related to UBUCs / STOP Cards
- a) Related to Process Safety (e.g. discovery of failed safety systems upon testing)
 - o # of relief devices fail bench tests at set points
 - # of interlock test failures
 - o # of uninterruptible power supply system malfunctions
 - # of times fire, gas, & toxic gas detectors found to be defective during routine inspection
 - # of times the emergency vent line header found completely blocked
 - # of times emergency shutdown valves found stuck or jammed
 - # of times blockages found in the process vent
- e) Related to Work Permits (Hot & Cold)
 - o Corrective Jobs
 - o Breakdown Jobs
 - o Prevent. Maintenance
- f) Laboratory Analysis of Products (oil; gas; LPG, etc.)
- g) Related to Energy Consumption & Conservation (for primary usage, makeup or loss)
 - o Power
 - o Fuel
 - Lubricating Oil/ Grease
 - Water
 - o Light
 - o Chemicals
 - pH Stabilizing Additives
 - Scale Inhibitors
 - Oxygen Scavengers
 - Corrosion Inhibitors
 - Scale Dispersants
 - Anti-Bacterial agents
 - Anti-Microbial Agents
 - Sweetening Agents
 - Dehydration/Drying Agents
 - Anti-Gel Additives
 - Desalting Agents
 - Surfactants
 - Chelating Agents
 - Anti-Emulsion Agents
 - Reducing Agents
- h) Related to Trainings and Awareness Sessions
- i) Related to HSE Observations, Surveillance Activities and Audits
- j) Related to Employees Fitness Tests
- k) Related to HSE Management Review Committee (MRC) Meetings

8.3.1.2 Lagging Indicators (Post-Loss/ Reaction → Loss Containment)

- a) Related to Lost Man Hours
- b) Related to Near Hits/ Misses
- c) Related to Accidents
 - o Non-Fatal Accidents
 - Fatal Accidents
 - o First Aid Cases
 - Workers Compensation Costs
 - Property Damage Costs
- d) Related to Recordable Injury Cases
 - Restricted Workday Injuries
 - Lost Workday Injuries
 - Medical Treatment Cases
- e) Related to Occupational Health Illnesses
 - Drinking Water
- f) Related to Waste Management
 - o Non-Hazardous Waste
 - Metallic Scrap







- Vehicle Scrap
- Miscellaneous
- Hazardous Waste
 - Process
 - Mechanical
 - Clinical
 - Flectrical
- g) Related to Pollution
 - o Air Emissions
 - from vehicles
 - from generators
 - from turbines
 - from boilers
 - from incinerators
 - others
 - Fugitive Emissions
 - Leaks from pressurized equipment
 - through valves
 - through pipe connections
 - through mechanical seals
 - others
 - Emissions from
 - CPI/TPI/API
 - Waste Water Ponds
 - Crude/ Condensate Storage Tanks
 - Tankers' filling and decanting
 - others
 - Ambient Air Quality
 - due to Flare
 - due to Vent
 - Liquid Effluents
 - Produced Water
 - Process (drain) Water
 - Sewerage
 - Noise

8.3.2 HSE Performance Assessment

- All locations shall submit (preferably through email) the basics HSE facts and figures to HSEQ Department H.O. on daily basis. These shall include summary of incidents and near hits (UBUC). HSEQ Department shall further apprise top management of any untoward event(s) or symptom(s).
- All locations shall submit the consolidated HSE performance of their working entity on monthly basis to HSEQ Department H.O. on the **Monthly HSE Report**.
- B HSE Scorecard (Leading and Lagging Indicators) based on following three aspects shall be discussed in Location HSE MRC meetings and used to keep an eye on how involvement of each Location or within Location (Section / Department) is working in bringing improvement in HSE System:
 - Results (Injury & Environmental Stats)
 - Program (Training, inspections, audits, etc.)
 - Culture (UBUC, rewards & recognition, etc.)
- All pertinent data (statistics) shall be compiled in an HSE database.
- Subsequently, **HSE Performance** shall be exhibited in the pattern given below which shall be reported on monthly, quarterly, yearly and 5-yearly basis (for corporate level and for an individual location/ field level):

HSE Lagging Performance Indicators

For Year:

HSE KPI	Formula	Benchmark	Score	Deviation
Fatality Index (Corporate)	(Number of Fatalities due to work related injuries) / (Total hours worked) × 1,000,000*			
Reportable Injury Cases	LTIs + RWIs + MTCs			
LTIF (Corporate)	(Number of Fatalities + LTIs) / (Total hours worked) × 1,000,000*			
TRICF (Corporate)	(Total Reportable Injury Cases) / (Total hours worked) × 1,000,000*			
TVIR (Corporate)	(Total Vehicular Incidents / (Business Use Driven KM) × 1,000,000*			

Note: For location or field-wise calculation of KPIs, 200,000 to be used instead of 1,000,000.

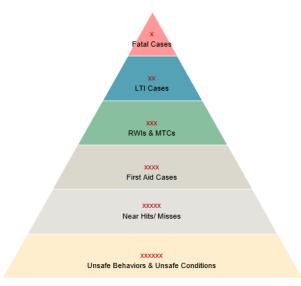




Performance Evaluation: OGDCL's Integrated HSE System Manual

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Category	Number of Incidents	Description
Fire/ Explosion		
Oil/ Chemical Spill		
Vehicular		
Bowsers		
Fall/ Work-at-Height		
Confined Space		
Excavation		
Others		



Total Cases

XX
LTI Cases

XX
RWIs & MTCs

XX
RWIs & MTCs

XX
First Aid Cases

XX
VOCOX
Near Hits/ Misses

XX
VOCOX
Unsafe Behaviors & Unsafe Conditions

OGDCL's Performance

Contractors' Performance

HSE Leading Performance Indicators

For Year Safety Critical Equipment Inspections: SCE inspections are the proactive and reactive monitoring of the devices, equipment or system, whose failure can result in serious injuries, significant Occupational Health Assessments: Fitness for work assessments aim those employees who are exposed to hazards directly and may require due attention & care property damage or environmental impacts UBUCs/ STOP Cards: **HSE Meetings:** Leak Detection And Repair Surveys help address fugitive emissions and leakages. OGDCL STOP card system involves observing unsafe behaviors & conditions and intervening on-spot to prevent injuries and occupational illnesses in the workplace. HSE Meetings are the salient feature of OGDCL as performance on PDCA cycle of each Unit is discussed for availing improvement opportunities. Rewards & Recognitions: Emergency Drills:

Drills remain a vibrant part of our preparedness towards emergencies to ensure timely response. Risk Assessments: OGDCL encourages positive behaviors & attitudes amongst employees and long term contractors who have sustained focus towards HSE aspects. Hazards identification and risk assessment helps in making workplaces safe through proactive decision making **HSE Awareness Sessions:** OGDCL is focused on capacity building through in-house Safety/Toolbox Talks: Pre-job discussions regarding job and site based hazards and control measures. training resources Personnel Participated: **6** Competence enhancement is key element for OGDCL's HSE Management System. Permits to Work:

Permits related to cold work, hot work, electrical work, confined space/vessel entry, radiography, excavation & civil work, working at height, and vehicle entry permit show number of vulnerabilities and exposures for which safety protocols are followed. **HSE Audits:** Internal and external HSE Audits are to seek compliance w.r.t. OGDCL's HSE Management System and ISO standards. Leading Indicators Hazard Hunt Programs:
HHPs are for workforce members to identify potential hazards and to highlight the potential harm along with suggestions to manage the situation. Management Walk Around:

MWA are for Top/ Line Management/ HODs to identify potential hazards and to highlight the potential harm along with suggestions to manage the situation. **Hazardous Waste Disposal:** OBM drill cuttings, wastewater and process waste is hazardous due to substantial / potential threats to health and environment and hence is safely disposed EIA/ IEE Studies: **Ambient Air Quality Monitoring:** Environment studies are regulatory requirement to monitor baseline data to minimize and avoid adverse impacts of project on environment. Systematic, long-term assessment of pollutant levels by measuring the concentration and types of certain pollutants in the surrounding indoor/ outdoor air.



MONTHLY HSEQ REPORT

OGF- HSE - 038(13)

Name of Unit							;L	ocat	ion /	Site:																
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Hours Worked																										
Vehicles																										
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Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual

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SAFETY STATISTICS

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Safe Ma	an Hours																										
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e-OGDCL this column must include data of all OGDCL employees i.e. Regular + OGDCL Contracts + Trainees + Work-Charge/Casuals; whereas,

Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual

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Item	(Unit	Jan	Feb	March	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Yearly
Total Patients	OGDCL	No.													
visited Dispensary	Community	No.													
Occupational Health Patients visited Dispensary (Med. Rep.)		No.													
Epidemic/ Pandemic Dispensary (Med. Re		No.													
Employees Undergone OH	Officers	No.													
Assessment (Fitness Tests)	Staff	No.													
Kitchen Staff Underg Assessment	one OH	No.													
Employees Hospitalia	zed	No.													
Employees Quarantined		No.													
Employees Job Rotated Due To OH Problems		No.													

Monthly Log of Incidents

#	Date & Time	Incident Type	Short Description	Reason (Cause)	Action Taken To Avoid Recurrence
-					
					· · · · · · · · · · · · · · · · · · ·

Monthly Log of HSE Awareness/ Training Sessions

#	Date & Time	Title	Facilitator/ Instructor	Venue/Institute	Number of Participants
Exte	rnal or Outsource Train	nings/ Sessions			
Onsi	ite/ Internal Trainings/	Sessions			

Monthly Log of HSE Reward and Recognition

Stamp of Field HSE In-charge and Signature

107 011	Horitiny Log of TioL Reward and Recognition										
#	Name & OG/S #	Design.	Type of Award	Amount Month		Description of Contribution towards HSE System Improvement					

Note:- Duly Filled HSEQ Report must be emailed to HSEQReports@ogdcl.com by the 5th of every month.

Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual

Stamp of In-charge Location and Signature



Performance Evaluation: OGDCL's Integrated HSE System Manual

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8.4 Reward, Recognition & Penalties

OGM/P-HSE-8.4(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.	Added: HSE awards shall be conferred to the eligible workforce members at field /sectional-levels from
	the already/ existing financial head of Imprest of respective locations.

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by





8.4.1 Reward and Recognition Process

- All OGDCL Facilities shall institute a reward and recognition plan as per guidelines provided below. These Special recognition awards are designed to recognize consistent team based and individual's achievements. These are linked with our efforts to strive for zero harm with the following objectives:
 - Engagement of team for achievement of injury free operations
 - Encouragement of positive behaviours and attitudes amongst employees and long term contractors to have sustained focus towards HSE aspects.

Award Title	Frequency	Estimate Reward Value	Award Committee
On Spot Recognition Award	Maximum of Three Per Month	PKR 500	Location IC & Location HSE IC
HSE Champion of the Month Award	<u>Monthly</u>	PKR 3,000	Location IC & Location HSE IC
Quarterly HSE Recognition Award for the Department/ Section	<u>Quarterly</u>	PKR 5,000	Location HSE MRC
Annual Best HSE Location of the Directorate Award	<u>Annual</u>	Certificate, Shield(s) & Souvenirs	MD / CEO & GM HSE

Note: HSE awards shall be conferred to the eligible workforce members at field /sectional-levels from the already/ existing financial head of Imprest of respective locations.

8.4.1.1 Eligibility & Selection Criteria

8.4.1.1.1 On Spot Recognition

- On the spot recognition is aimed at positive, immediate and certain recognition of a significant contribution- including an aspect related to any one out of followings:
 - HSE system/ practice improvement, recommendation or implementation.
 - Positive behavior (such as good housekeeping/proper maintenance of PPE).
 - Process safety assurance and improvement.
 - Effective reporting of critical unsafe behavior/ condition.
 - Effective engagement with employees, contractors, sub-contractors or service company
 - + Fearless suspension of an unsafe work etc.
- In order to have a competitive environment, maximum one award per month per 100 workers is recommended for each location / facility.
- All workforce members are eligible and encouraged to nominate any person for On Spot Recognition as per the above mentioned criteria.

8.4.1.1.2 HSE Champion of the Month Award

- This award is aimed at encouraging reporting of UBUC (hazards) and Near hits. For this reason the award shall only be given whereby an EXCEPTIONAL HAZARD / NEAR HIT HAS BEEN PROPERLY DOCUMENTED AND REPORTED on Preliminary Incident Reporting Form, CPR or STOP Card.
- All OGDCL and contractor / service company's employees are eligible for this award, who have reported UBUC (hazard) or Near hit which assisted to save life, protect environment from damage, prevent asset loss, improve HSE performance at site, ensure compliance of safe work practices, improve existing HSE Management System and/ or raise risk awareness.

8.4.1.1.3 Quarterly HSE Recognition Award for the Department

- Location HSE MRC shall evaluate HSE performance of departments (sections) for this award.
- The award shall be given to one department (section) for each quarter based on the following eligibility criteria:





			Exa	mples c	of Depa	rtment	s (Secti	ons)	
	Benchmark	Production	Process	Mechanical	Electrical	Instrumentation	QC / Lab.	Medical	Stores/ MMD
Near hits & UBUC reported									
Inspections Performed									
Awareness Sessions Attended									
Toolbox Talks Conducted									
HSE MRC meetings Attended									
%Personnel Undergone OH /									
Fitness Assessment									
Emergency Drills Attended									
HSI	Score								

8.4.1.4 Annual Best HSE Location of the Directorate Award

- This award is designed to annually recognize facilities which have demonstrated preferred behavior in handling HSE issues in their Directorate (Exploration / Petrosery / Production).
- Each Location IC shall submit an Annual HSE Score Card based on achievements in terms of incidents and pollution prevention where following three aspects shall be used to assess how involvement of each Location has worked in imparting improvements in the HSE System of the location:

					Loca	tions			
	Benchmark	Location A	Location B	Location C	Location D	Location E	Location F	Location G	Location H
			Resul	ts					
Fatalities									
LTIs (LWIs)									
Leakages & Spills									
			Progra	ım					
Trainings									
Inspections									
Audits									
			Cultu	re					
Near Hits									
UBUC									
Safety Talks									
H	SE Score								

8.4.2 Dealing with Violations

- It is imperative for any organization to balance the need for a non-punitive learning environment with the need to hold individuals accountable for their actions.
- The purpose to describe how to "deal with Violations" is to provide guidance on the application of a fair and consistent assessment process which balances the need for a non-punitive learning environment with the need to hold individuals accountable for their actions. Henceforth, this process shall be referred to as 'Fair Treatment' Process.
- The purpose of Fair Treatment Assessment process shall be to determine the exact nature of an individual's involvement in an event where OGDCL HSE policies, standards, protocols and procedures may have been compromised and take necessary corrective, preventive and punitive action.





- In case of any incident / near hit where willful violation of OGDCL HSE policies, standards, protocols and procedures is considered to have taken place, a Fair Treatment Assessment process shall be activated upon the request of relevant Location IC and / or Location IC HSE.
- MD / CEO in consultation with HOD HSE and HOD Discipline shall constitute, where deem necessary, a Fair Treatment Assessment Committee for taking up necessary corrective, preventive and punitive actions.
- Fair Treatment Assessment Committee shall come up with and submit its suggestions / recommendations within a fortnight to MD / CEO.



8.5 Internal HSE Audit

OGM/P-HSE-8.5(08) Revision Number 8

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

Updated By:

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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

1		
	#	Description of Change
	1.	Amended: For High Risk Exposed Sites, one full audit + 01 follow-up of audit recommended.

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
OGF – HSE – 039 List of Approved Internal HSE Auditors	HSE Department H.O. Rep.	Manager HSE	GM HSE
OGF – HSE – 040 Annual HSE Audit Planner (Schedule)	HSE Department H.O. Rep.	Manager HSE	GM HSE
OGF – HSE – 041 HSE Audit Plan	Internal HSE Team Member/ Auditor	HSE Lead Auditor	Manager HSE
OGF – HSE – 042 Standardized HSE Audit Checklist	HSE Department H.O. Rep.	Manager HSE	GM HSE
OGF – HSE – 043 HSE Audit Report	HSE Lead Auditor	Manager HSE	GM HSE





8.5.1 Purpose

- Internal HSE Audits shall be planned and carried out in order to:
 - determine whether HSE management system conforms to the planned arrangements for controlling and minimizing the significant HSE risks;
 - oversee whether HSE management system has been implemented, maintained and meeting HSE policy & objectives in an effective manner; &
 - provide feedback to management of the results of such audits.

8.5.2 Audit Team

- Internal HSE Auditors shall be selected from different organizational functions based on their experience and professional skills.
- Internal HSE Auditors shall be at least university graduates (professional engineers, environmentalists, or domain specialists).
- Internal HSE Auditors shall have to undergo and qualify Certificate Level Training on HSE Auditing Methodologies, Skills & Ethics.
- HSE Department shall maintain the training, evaluation and certification renewal record of the qualified HSE Auditors for their continual professional development.

8.5.3 Audit Modalities

3.1 Definitions	
Auditee	Location (field/site) to be or being audited.
Auditor	Competent person who conducts an HSE audit.
Audit Conclusion	Outcome of an audit, after consideration of the audit objectives and all audit findings.
Audit Criteria	Set of policies, procedures or requirements used as a reference against which audit evidence is compared.
Audit Evidence	Records, statements of fact, or other documented information (qualitative or quantitative) which are relevant to the audit criteria and verifiable.
Audit Findings	Results of the evaluation of the collected audit evidence against audit criteria. The findings include good practices, nonconformities, observations or opportunities for improvement.
Audit Grade	Audit Grade for a specific location (attributed as Excellent, Good Poor) is based upon percentage compliance level determine by Audit Team against the Standardized HSE Audit Checklist
Audit Plan	Arrangements for an audit planned (as per audit planner/ schedu for a specific time frame and directed towards a specific purpose.
Audit Planner (Schedule)	Audit program arrangements for a set of audits scheduled for a specific time period and directed towards specific purpos
Audit Scope	Extent and boundaries of an audit; It generally includes a description of the physical locations, organizational units, activities and processes, as well as the time period covered.
Audit Team	One or more HSE Auditors conducting an audit, and supported by technical or subject matter experts, if needed
Documented Information	Documented information, refers to any information required to be controlled & maintained. (It can be in any format/ media, an from any source.)
Lead Auditor	An experienced HSE Auditor of the Audit Team who is appointed as Team Leader for a specific audit.
Objective Evidence	Records, statements of fact, or other documented information (qualitative or quantitative) supporting the existence verity of something obtained through observation, measurement, test, or other means.

8.5.3.2 Categories of Audit Findings

Audit findings shall be categorized as follows:

Non-conformity (Category 1): As defined in the standardized audit checklist it is either a) a SYSTEMATIC FAILURE, SIGNIFICANT DEFICIENCY in part of the HSE system, or the LACK OF IMPLEMENTATION of such a part, governed by applicable standards or b) an ISOLATED or SPORADIC LAPSE in the content or implementation of procedures or records which could reasonably "lead to" a systematic failure or significant deficiency if not corrected.





- Observation (Category 2): As defined in the standardized audit checklist it is an AREA OF CONCERN, a process, document or activity that is CURRENTLY CONFORMING or a WEAK PRACTICE which, if not improved, RESULTS IN A NONCONFORMING system, product or service.
- **Opportunity For Improvement OFI (Category 3):** OFI is a RECOMMEND BEST INDUSTRIAL PRACTICE which results in improvement of HSE management system.

8.5.3.3 Scoring Criterion for Audit Findings

Following Audit Scoring Criteria shall be used for audit findings:

Compliance Level (Against Each Requirement)	Score
Documentation and implementation is totally absent	0
Documentation is partially available but not completely implemented	2.5
Documentation is completely available but partially implemented Or Implementation is there but documents partially in place	5.0
Documentation & implementation is in place to a larger extent	7.5
Documentation and implementation is fully in place	10

8.5.3.4 Audit Grade & Star Rating

Audit outcome shall be assigned a Grade and Star Rating as follows:

	Audit Grade	Star Rating	Percentage Compliance
Α	Excellent Compliance Level	000	More than 76 Percent
В	Good Compliance Level	00	51 – 75 Percent
С	Poor Compliance Level	©	Less than 50 Percent

8.5.4 Audit Planning

HSE Department shall prepare an Annual HSE Audit Planner (Schedule) before the 31st of July each year based on the following Matrix of Frequency-Risk Classification;

<u>Risk</u>	Risk Classification	<u>Preferred Sites</u>	<u>Audit</u>
Exposure High	Where multiple regulated hazards are present in a significant proportion of the workplace operations, e.g. project activities, high pressure & temperature, un-stabilized oil, H2S, steam, flammable material, working at heights, chemical exposure, confined spaces, rotary equipment, and process hazardous waste.	 Production Fields/ Gas Processing Plants Drilling Rigs 	Frequency Biannual (one full audit + 01 follow-up of audit)
Medium	Where multiple regulated hazards are present but on intermittent basis w.r.t. the workplace operations and/ or conditions.	 Seismic Parties Engineering Field Parties Field Gathering Construction Party 	Annual Only annual inspection is recommended
Low	Where regulated hazards are generally not present in the workplace operations. This includes office-based administrative operations, regional offices, medical units, material storage, workshops, or teaching/research areas.	 OGDCL House Medical Centers OGTI G&R Labs. Workshops Base Stores 	Only annual inspection is recommended; but in case of Certification, audit is recommended

- HSEQ Department shall develop/ update Standardized HSE Audit Checklist (attached) based on the requirements of HSE management system and hand it over to Lead Auditor.
- Lead Auditor shall prepare Audit Plan of a specific location based on audit criteria and scope using risk-based approach to ensure focus on matters that are significant in terms of risks & opportunities and the results of previous audits.
- The scope of audit shall be based on the size, functions and complexities of processes, operations and activities of the site.
- The Audit Plan along with the copy of Standardized HSE Audit Checklist shall be disseminated to Location InCharge.
- The Audit Plan shall enlist all the activities corresponding to the HSE management system, identify areas where these activities are taking





- place, and time of audit for each activity.
- Location InCharge shall arrange logistics and relevant Personal Protective Equipment (PPE) for the auditors.

8.5.5 Audit Execution

- Before starting an audit, internal HSE auditors shall ensure the possession of:
 - a) Audit Plan
 - b) Standardized HSE Audit Checklist
 - c) HSE System Manual
 - d) HSE Risk Register
 - e) HSE Regulatory Requirements Matrix

8.5.5.1 Opening Meeting

- o The audit shall begin with an introduction of audit team members & location's management, briefing on the objective, methodology, scope and criteria of the HSE audit and any occupational health, safety, environmental and administrative arrangements required.
- o Audit Plan shall be discussed for ensuring smooth audit process.
- Location InCharge shall ensure the availability of all Sectional InCharges, auditee personnel and a suitable guide/ Rep. to escort the audit team.

8.5.5.2 Conducting the Audit

- While conducting audit, the auditors shall seek to verify whether procedures and instructions are being implemented. For this, following shall be considered:
 - Examination of the data & record (documented information),
 - Talking to personnel actually performing various tasks,
 - Observing tasks/ operations being carried out, and
 - Validating safety critical equipment to see whether these are fit to address emergencies.
- Internal HSE Auditors shall ensure to focus and spend more time on significant areas and activities with high risks keeping in view time management as one of the crucial factors of HSE audit.
- HSE Auditors shall ensure proper handling and reporting of sensitive information applying due diligence.
- HSE Auditors shall remain impartial, free from bias & conflict of interest, and maintain integrity and objectivity throughout the audit process to ensure that audit findings and conclusions are based on audit evidence.
- During the proceedings of audit, Lead Auditor shall convene short meetings with the audit team members to exchange notes and discuss audit progress.

8.5.5.3 Closing Meeting

- o On completion of audit, a closing meeting shall be arranged with the management of the site to share findings and conclusion of the audit.
- None of the audit information shall be used inappropriately for personal gains by the auditors, or in a manner detrimental to the legitimate interests of the auditee.

8.5.6 Audit Report

After the completion of audit, audit team members shall formally submit findings to Lead Auditor who compiles, categorizes & assign scores to audit findings; calculate sub-score for each element of HSE-MS (Plan-Do-Check-Act cycle) and determine HSE Audit Score & percentage compliance as follows:





	Plan	
Leadership	HSE & RM Policy Statements OGM/P-HSE-4.1	
	Fatality Control Policy Guidelines OGM/P-HSE-4.2	
	Roles, Responsibilities, Accountabilities, and Authorities OGM/P-HSE-4.3	
	Crisis Management OGM/P-HSE-4.4	
Planning	Risk Management OGM/P-HSE-5.1	
	Job Vulnerability /Hazard Analysis OGM/P-HSE-5.2	
	Legal & Other Requirements OGM/P-HSE-5.3	
	Objectives & Management Program OGM/P-HSE-5.4	
Support	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	
	Sub Score (A)	
	Do	
Operation	Operational Planning and Control OGM/P-HSE-7.1	
	Permit to Work System OGM/P-HSE-7.2	
	Handling, Segregation and Disposal of Waste OGM/P-HSE-7.	
	Journey Management OGM/P-HSE-7.4	
	Framework For Hydrogen Sulfide Management OGM/P-HSE-7.5	
	Management of Project Contractors & Service Companie OGM/P-HSE-7.6	
	Use of Personal Protective Equipment OGM/P-HSE-7.7	
	Framework For Site Restoration OGM/P-HSE-7.8	
	Sub Score (B)	
	Check	
Performance	UBUC (Hazards) Identification & Reporting OGM/P-HSE-8.1	
Evaluation	Monitoring, Measurement & Compliance Evaluation OGM/P-HSE-8.2	
	Analysis of Data OGM/P-HSE-8.3	
	Reward, Recognition & Penalties OGM/P-HSE-8.4	
	HSE Audit OGM/P-HSE-8.5	
	Management Reviews OGM/P-HSE-8.6	
	Sub Score (C)	
	Act	
Improvement	Opportunities For Continual Improvement OGM/P-HSE-9.1	
	Management of Change OGM/P-HSE-9.2	
	Incident Investigation OGM/P-HSE-9.3	
	Sub Score (D)	

Audit Score (Sub Score A+B+C+D)
Percentage Compliance

- Subsequently, Lead Auditor shall prepare the draft of Audit Report, containing following information:
 - Composition of the audit team, roles and audit man-hours.
 - Introduction; audit's objective, criteria & scope.
 - Audit modalities.
 - Audit score, percentage compliance and grade (secured).
 - Good practices observed.
 - Actual audit findings (non-conformities, observations and opportunities for improvement)
 - Areas missed out.
 - Names of auditee-team.
 - Instructions regarding HSE Audit Corrective Action Plan.
 - Pictorial/ documented evidence.
- The draft Audit Report shall be submitted to HSEQ Department within a week (after conducting the audit) for review.
- Based upon the HSE Audit Score & percentage compliance, HSEQ Department shall assign a Grade and Star Rating to the Audit Report.
- The final Audit Report shall be distributed to the concerned auditee through their respective HOD/GM/ED with a copy to MD/CEO.





8.5.7 Post-Audit Action Plan and Follow up

■ The audit findings shall be discussed in the Corporate and Location's HSE MRC Meetings and be addressed as tabulated below:

Audi	t Grade & Star Rating	Action Required
Α	Excellent Compliance Level	 Location securing Excellent (Grade) shall be recommended for Annual Best HSE Location of the Directorate Award.
		Respective GM shall nominate a suitable operational representative to develop an Action Plan to address the audit findings and closeout within 06 months.
В	Good Compliance Level	Respective GM shall nominate a suitable operational representative (not below the rank of Chief) to develop an Action Plan to address the audit findings and closeout within 04 to 06 months.
С	Poor Compliance Level	Respective ED shall nominate an Officer (not below the rank of Manager) to develop an Action Plan to address the audit findings and closeout within 03 to 06 months.

Auditee (Area/ Location InCharge) shall submit HSE Audit Corrective Action Plan to HSEQ Department within a week (after receiving of the audit report) in the following format:

#	Audit Finding (Ref. Audit Report)	Probable Cause(s) (In perspective of PDCA Cycle)	Action(s) Recommended	Responsibility	Target Deadline

Where required, Lead Auditor/ HSE Rep. shall follow-up the audit to determine if corrective actions have been implemented effectively and submit Audit Follow-up Status Report in the following format:

#	Audit Finding (Ref. Audit Report)	Action Recommended (Ref. Audit Report)	Action(s) Actually Taken	Audit Finding's Closure Status	Further Follow- up Required (Yes/ No)

- When there is sufficient objective evidence that the corrective action(s) are effective, audit shall be closed out.
- If more work is needed to fully implement the corrective actions, a new followup date shall be agreed upon and audit shall be closed out accordingly.





OGF - HSE - 039(01)

Oil & Gas Development Company Limited

List of Internal (Qualified) HSE Auditors

(To be kept with HSE Department Head Office)

	Manager I Breakfronce Passes	OG	Posted at	HSE A	uditor Training
#	Name/ Designation	OG Number	(Location)	Date (when attended)	uditor Training Name of Institute & Instructor
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Oil & Gas Development Company Limited ANNUAL INTERNAL HSE AUDIT PLANNER FY

OGF - HSE - 040(00)

Location Team Lead	# (Auditee) (Auditor)								Prepared by:	
it Team	Members									
Duration of	Audit (days)									
Zan,	Actual	Planned Actual	Approved by:	Date:						
	Jan									
	Feb Mar Aprl May Jun									
	ar Aprl									
	May									
Year <										
٨	Jul									
	eS gu									
	pt Oct									
	Aug Sept Oct Nov									
	Dec									

Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual



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Oil & Gas Development Company Limited Location:

OGF - HSE - 041(01)

INTERNAL HSE (RISK BASED) AUDIT PLAN

Based on ISO 19011:2018 Guidelines For Auditing Management Systems

Aı	udit#:	Audit Dates/ Man-Hours:
A	Well Site Operations Production Engineering Separation, Dehydration Sulfur Recovery LPG Recovery Crude Oil Storage & Dispatch/ Marketing Maintenance (Mechanical, Electrical, Instrument) HSE & Medical Services Quality Control/ Metering Raw Material, Spare Parts, etc.,	Audit Criteria: ISO 14001:2015 ISO 45001:2018 OGDCL's Integrated HSE System Manual
Le	ead Auditor:	Audit Team Members:

Time	Dept./Section to be audited	Risk Based Activity/ Operation	Auditors	HSE MS PDCA Cycle Elements to be audited
DAY & DATE	∄ :			
				Leadership
				Planning
				Support
				Operation
				Performance Evaluation
				Improvement
				Leadership
				Planning
				Support
				Operation
				Performance Evaluation
				Improvement
		BRI	EAK	
				Leadership



				Planning	
				Support	
			E	Operation	
			3	Performance Evaluation	
				Improvement	
				Leadership	
				Planning	
			1	Support	
			1	Operation	
			1	Performance Evaluation	
				Improvement	
		END OF	DAY-1		
DAY & DATE	:				
	-				
				Leadership	
			3	Planning	
				Support	
				Operation	
			3	Performance Evaluation	
				Improvement	
				Leadership	
				Planning	
				Support	
				Operation	
				Performance Evaluation	
				Improvement	
		BRI	EAK		
				Leadership	
			1	Planning	
			i i	Support	
			,	Operation	





	Performance Evaluation Improvement
	Leadership
	Planning
	Support
	Operation
	Performance Evaluation
	Improvement
END OF DA	· -2

Prepared by:	Reviewed by:	Approved by:
	(Lead Auditor)	Manager (HSEQ)
(Internal HSE Auditor)	(2004) (444)	manager (11024)
Date:	Date:	Date:





OGF - HSE - 042(00) Standardized HSE Audit Checklist



Standardized HSE Audit Checklist

			_ =	PLAN (40 Que	astions)			
					Rating			
#	HSE MS Element	Not Applicable	Documentation and implementation is totally absent	Documentation is partially available but not completely implemented	Documentation is completely available but partially implemented Or Implementation is there but documents partially implemented	Documentation & implementation is in place to a larger extent	Documentation and implementation is fully in place	Findings and Comments (Use separate sheets where required)
	Rating		0	2.5	5	7.5	10	
HSE i	& RM Policy Statements OGM/P-HSE-4.1							
1.	Are HSE/ Risk Management Policies available and understood/ communicated for compliance?							
Lifesa	aving Golden Rules/ Fatality Control Policy Guidelines OGM/P-	HSE-4.2						
2.	Are Lifesaving Golden Rules/ Fatality Guidelines communicated at sub-unit levels and transformed into objectives & targets for conformity?							
Roles	, Responsibilities, Accountabilities, and Authorities OGM/P-HS	E-4.3						
3. 4.	Is line management and workforce aware of their HSE roles, responsibilities, accountabilities and authorities? Are Location Emergency Management Teams formulated and aware of their HSE roles?				0			
Crisis	Management OGM/P-HSE-4.4							
5.	Is site based Emergency Response Plan developed and implemented?							
6.	Are Emergency LMT Teams and Duty Roster(s) prepared and disseminated to all concerned?				4.			
7.	Is mock-up drill plan prepared, approved and exercised? Is updated record of Emergency Drill Reports available?				9			
8.	Is an authentic Head Count System established for rescue operations during emergency situations?							
9.	Are First Aid Boxes available & maintained at all pertinent places?							
10.	Are validation tests of emergency detection & response system /equipment performed at a prescribed frequency?							
11.	After an Emergency/ Drill, Is Location Emergency							

Page 1 of 8



OGF - HSE - 042(00) Standardized HSE Audit Checklist



Standardized HSE Audit Checklist

	Preparedness & Response Plan (ERP) discussed in the HSE MRC Meetings and revised based on Lessons Learned?			
12.	Is Emergency Response Control Centre LMT Room / Alternate LMT Room available with tested resources?			
13.	Is list of required resources for ERTs identified, available, and maintained?			
Enter	prise Risk Management OGM/P-HSE-5.1			
14.	Is Hazards Identification & Risk Assessment (HIRA) Team formulated and conducted HIRA?			
15.	Is Location-based Risk Register developed/ updated by HIRA Team, reviewed by HSE MRC and approved by Location Charge?			
16.	Are Risk Ratings communicated to all concerned stakeholders?			
Job V	ulnerability /Hazard Analysis OGM/P-HSE-5.2			
17.	Is JVA/ JHA conducted for all tasks performed under a Permit to Work (PTW)?			
18.	Is JVA/JHA discussed with workforce prior to commencement of work?			
Legal	8 Other Requirements OGM/P-HSE-5.3	310 10		
19.	Are all applicable legal and other requirements identified & timely updated in the Regulatory Requirement Matrix and their compliance obligation status evaluated on periodic basis?			
Objec	tives & Management Program OGM/P-HSE-5.4			
20.	Is Annual HSE Plan developed and readily available? Is Progress against HSE Plan followed up?			
21.	Are HSE Objective & Targets Management Programs formulated to reduce, manage or mitigate the impact of high rated risks?			
22.	Are Annual HSE Plan, HSE Objective & Targets discussed, reviewed and followed up in HSE MRC?			
Comp	etence & Awareness OGM/P-HSE-6.1			
23.	Based on TNA, is Annual HSE Training and Awareness Planner developed considering all essential HSE topics, and disseminated to all concerned?			
24.	Do the selection of training facilitators/ instructors consider some eligibility criterion?			
25.	Are HSE Trainings/ Awareness Sessions conducted at the identified frequencies?			
26.	Is record of HSE Trainings/ Awareness Sessions maintained and are the sessions being attended by adequate number of personnel?			

Page 2 of 8



Standardized HSE Audit Checklist

110 031		
27.	Is effectiveness of HSE Trainings/ Awareness Sessions evaluated to oversee their intended purpose/ utilization?	
28.	Are site visitors, guests, etc. provided formal HSE induction and record kept?	
Com	munication & Consultation OGM/P-HSE-6.2	
29.	Are Tool Box Talks conducted by each Section?	
30.	Is Effectiveness of Tool Box Talks evaluated on periodic basis on prescribed template?	
31.	Are adequate number of safety signboards available at site and are these maintained to a good standard?	
32.	Are Product Safety Data Sheets developed, reviewed and distributed to Purchasers?	
33.	Are updated copies of applicable MSDSs distributed to Store, Medical, HSE and User's Sections and contents therein properly communicated?	
34.	Are Pipeline and Vessels color coded and labeled?	
35.	Are lifting gears color coded and labeled?	
36.	Are assured grounding color codes; lock out tag out devices color coding being carried out?	
37.	Is External Environmental Complaint Register maintained to log the complaints?	
38.	In case it is decided in the HSE MRC Meeting to communicate the significant HSE vulnerabilities and related impacts/ risks to the interested parties, are suitable arrangements made for external communication?	
Docu	mented Information OGM/P-HSE-6.3	
39.	Is Documented Information controlled (i.e. prepared, reviewed, updated, approved, and distributed)?	
Cont	rol of Records OGM/P-HSE-6.4	
40.	Are documents reference numbering, approval & issuance, record keeping, retention and disposition being carried out?	
	SUB SCORE	

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Standardized HSE Audit Checklist

				DO (30 Question	ns)			
				Ratin	<u>ıq</u>		Î	
#	HSE MS Element	Not Applicable	Documentation and implementation is totally absent	Documentation is partially available but not completely implemented	Documentation is completely available but partially implemented Or Implementation is there but documents partially implemented	Documentation & implementation is in place to a larger extent	Documentati on and implementati on is fully in place	Findings and Comments (Use separate sheets where required)
	Rating		0	2.5	5	7.5	10	
Opera	ational Planning and Control OGM/P-HSE-7.1						•	
41.	Are Standard Operating Procedures (SOPs) and Work Instructions (WIs) prepared by relevant Sections for all activities which may pose an HSE Risk?							
42.	Are Preventive Maintenance Plans developed and implemented?							
43.	Are Calibration Plans developed and implemented? Does real-time testing validate the calibration results?							
Perm	it to Work System OGM/P-HSE-7.2							
44.	Are Work Permits easily accessible during normal conditions, emergencies, SIMOPs, ATAs, etc.?							
45.	Is a system of Authorized Person for permit issuance and receiving documented and implemented?							
46.	Have Issuing and Receiving Authorities received PTW trainings and record of these trainings available?							
47.	Are adequate gas detectors available to conduct gas test?							
48.	Is energy isolation/ Lockout - Tagout (LOTO) system developed and implemented?							
49.	Are applicable Permits timely issued, complied upon, closed out and record maintained?							
50.	Are PTW audits conducted and outcome of these audits actioned?							
Hand	ling, Segregation and Disposal of Waste OGM/P-HSE- 7.3					·		
51.	Is On-Site Waste Management Plan developed and implemented?							
52.	Is waste segregation, handling, temporary storage and disposal carried out?							

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Standardized HSE Audit Checklist

53.	Is record of waste collection, handing over and disposal maintained? Disposal sites crosschecked/ verified?					
Journ	ey Management OGM/P-HSE-7.4					
54.	Is Journey Management Plan developed, made available in vehicles and record maintained?			T		
55.	Are all applicable operational controls checked and made available/ ensured before journeys? Are controls for the high security journeys in place?					
56.	Are driver(s) competence and fitness assured through trainings and monitoring?					
Frame	work for Hydrogen Sulfide (H ₂ S) Management-7.5					×
57.	Is location categorized w.r.t Framework for Hydrogen Sulfide (H ₂ S) Management?					
58.	Are H2S detection system and protective/ emergency controls available and in healthy condition?				2	
Mana	gement of Project Contractors & Service Companies OGM/P-H	HSE-7.6				
59.	Do Contracts bound Contractors & Service Companies for HSE requirements as an obligation?					
60.	Are Contractors & Service Companies managed through overseeing their compliance toward HSE protocols?					
	Are Contractors & Service Companies recognized through HSE rewards and warned for violations?					
Use o	Fersonal Protective Equipment OGM/P-HSE-7.7					
62.	Do all Sections prepare and update PPE Need Assessment Matrix and maintain record?					
63.	Do PPE i.e. Safety Spectacle/Glasses; Face Protection, Respiratory Protection, Hearing Protection, Clothing, Head Protection, Hand Protection, Fall Protection, Protective Footwear meets technical requirements?					
64.	Is a quantitative noise survey completed around all machinery and equipment and sign posted where noise levels greater than 80 dB(A)?					
65.	Does PPE issuance, cleaning & maintenance, disposal meets requirements?					
66.	Is adequate PPE stock available to cater for employees, contractors and visitors?					
67.	Is color coding for hard helmets and coverall followed?					
Frame	awork For Site Restoration OGM/P-HSE-7.8		**			
68.	Are treatment and restoration cases for hazardous/ non- hazardous sites/ pits initiated and processed?					
69.	Is well site's handing over taking over carried out and record maintained?			2		
70.	Is QC for treatment & restoration performed and record maintained?					

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OGF - HSE - 042(00) Standardized HSE Audit Checklist

Standardized HSE Audit Checklist

	SUB SCORE							
				CHECK (20 Ques	tions)			
				Re	ting			
#	HSE MS Element	Not Applicable	Documentation and implementation is totally absent	Documentation is partially available but not completely implemented	Documentation is completely available but partially implemented Or Implementation is there but documents partially implemented	Documentation & implementation is in place to a larger extent	Documentation and implementation is fully in place	Findings and Comments (Use separate sheets where required)
	Rating		0	2.5	5	7.5	10	
UBUC	(Hazards) Identification & Reporting OGM/P-HSE-8.1		20-					
71.	Are STOP Cards available at prominent areas along with the Drop Boxes?							
72.	Is STOP Cards/ UBUC Hazard Hunt Tours schedule/ frequency followed?							
73.	Are STOP Cards analyzed, results shared and record maintained?							
Monit	oring, Measurement & Compliance Evaluation OGM/P-HSE-8	2						
74.	Are Section wise Occupational Health, Safety & Environmental Monitoring Plans developed/ updated and distributed?							
75.	Are monitoring Checklists developed/ updated and made available in each Section?		0			2		
76.	Are HSE monitoring activities performed in accordance with HSE Monitoring Plans?							
77.	Are CPRs initiated for the deviations and corrective actions followed up?							
78.	Are objective s& targets set for the deviations and progress followed up?			5		,		
Analy	sis of Data OGM/P-HSE-8.3		ve					
<i>7</i> 9.	Is Location Management aware of his location's HSE Performance/ KPI/ benchmarking criteria?							
80.	Is location's HSE performance shared with all concerned via HSE Monthly Reports?							
81.	Is HSE Scorecard (Leading and Lagging Indicators) discussed in Location HSE MRC meetings and used to							

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OGF - HSE - 042(00) Standardized HSE Audit Checklist



Standardized HSE Audit Checklist

	keep an eye on how involvement of each Section is going in bringing improvement?					
Rewar	rd, Recognition & Penalties OGM/P-HSE-8.4		***	**	37	
82.	Is the reward and recognition system known and followed in letter & spirit?	1				
Intern	al HSE Audits OGM/P-HSE-8.5					
83.	Are Internal HSE Audits planned and conducted?					
84.	Are Internal HSE Audit Teams trained/ certified and the list of location's qualified Internal HSE Auditors maintained?					
85.	Are Internal HSE Audits findings referred to all concerned for developing Action Plan?				U	
86.	Are Internal HSE Audits findings effectively closed out?					
Manag	gement Reviews OGM/P-HSE-8.6					
87.	Are quarterly HSE Management Reviews conducted?					
88.	Are Agenda and Minutes of HSE MRC Meetings timely circulated to all concerned for necessary actions?					
89.	Does each Section reflect its own HSE Performance (through Presenting Section's PDCA Cycle) in HSE MRC Meetings?					
90.	Are HSE MRC meeting decisions followed up?					
	SUB SCORE		***	- All		

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OGF - HSE - 042(00) Standardized HSE Audit Checklist



Standardized HSE Audit Checklist

				ACT (10 Quest	ions)			
				Ra	ting			
#	HSE MS Element	Not Applicable	Documentation and implementation is totally absent	Documentation is partially available but not completely implemented	Documentation is completely available but partially implemented Or Implementation is there but documents partially implemented	Documentation & implementation is in place to a larger extent	Documentation and implementation is fully in place	Findings and Comments (Use separate sheets where required)
	Rating		0	2.5	5	7.5	10	
Oppo	rtunities For Continual Improvement OGM/P-HSE-9.1							
91.	Are Corrective Preventive Actions (CPRs) initiated and processed?							
92.	Is CPR Log maintained and updated?							
Mana	gement of Change OGM/P-HSE-9.2							
93.	Are Engineering Changes Request (ECR) made for modification jobs? Are records of these changes available and maintained?							
94.	Is an ECR Committee formulated in the field?							
95.	Does the ECR Committee conduct Monthly ECR Reviews and record minutes?							
96.	During post incident scenarios, are Emergency ECR meetings convened?		0	x				
Incide	ant Investigation OGM/P-HSE-9.3							
97.	Are Preliminary Incident Reports timely submitted to head office?							
98.	Are investigation conducted as per criterion?							
99.	Are investigation reports developed using the standard template?							
100.	Are lessons learned shared with all concerned?							
	SUB SCORE							

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OGF - HSE - 043(01)

INTERNAL HSE AUDIT REPORT <Location's Name>



Ref. Audit Plan- OGF-HSE-041 (01)

Audit Date:	
Audit Session:	
Audit Conducted By:	
Report Prepared By:	
Report Reviewed by:	
Report Endorsed by:	
Forwarded For C&P Actions:	
Copy to:	
Date:	

	A	udit Outcome		
	Nonconformity	Observation	OFI	Total
Plan				
Do				
Check				
Act				
Total				
Score:		·		
Percentage Compliance:				
Grade:				
Star Rating:				





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1. Objective

This was the first/ second Internal HSE Audit of ______FYxx-yy in compliance with the Annual Internal HSE Audit Schedule FY 20xx-yy. The audit was conducted as per already furnished Audit Plan in order to determine whether activities and related results comply with the planned arrangements as per the requirements of OGDCL's Integrated HSE Management System and whether these arrangements are implemented effectively. The Internal HSE Audits are to be conducted at least once in 06 months for each field/plant on mandatory basis to fulfill the requirements of OGDCL's Integrated HSE System Manual Rev-6.0 (duly approved by MD/CEO). The Internal HSE Auditors were selected from different organizational functions based on their experience and professional skills. The Internal HSE Auditors were trained on auditing skills by conducting internal training sessions. HSEQ Department maintains the audit-training records of these qualified auditors.

2. Scope

Section Audited	Functions	Standards' Requirements
		Leadership
		1. HSE & RM Policy Statements OGM/P-HSE-4.1
		2. Fatality Control Policy Guidelines OGM/P-HSE-4.2
		3. Roles, Responsibilities, Accountabilities, and
		Authorities OGM/P-HSE-4.3
		4. Crisis Management OGM/P-HSE-4.4
		5. Structure OGM/P-HSE-4.5
		Planning
		6. Enterprise Risk Management OGM/P-HSE-5.1
		7. Job Vulnerability /Hazard Analysis OGM/P-HSE-5.2
		8. Legal & Other Requirements OGM/P-HSE-5.3
		9. Objectives & Management Program OGM/P-HSE-5.4
		Support
		10. Competence & Awareness OGM/P-HSE-6.1
		11. Communication & Consultation OGM/P-HSE-6.2
		12. Documented Information OGM/P-HSE-6.3
		13. Control of Records OGM/P-HSE-6.4
		Operation
		14. Operational Planning and Control OGM/P-HSE-7.1
		15. Permit to Work System OGM/P-HSE-7.2
		 Handling, Segregation and Disposal of Waste OGM/ HSE- 7.3
		17. Journey Management OGM/P-HSE-7.4
		18. Management of Project Contractors & Service Companies OGM/P-HSE-7.6
		19. Use of Personal Protective Equipment OGM/P-HSE-7
		20. Framework for Site Restoration
		Performance Evaluation
		21. UBUC (Hazards) Identification & Reporting OGM/P- HSE-8.1
		 Monitoring, Measurement & Compliance Evaluation OGM/P-HSE-8.2
		23. Analysis of Data OGM/P-HSE-8.3
		24. Reward, Recognition & Penalties OGM/P-HSE-8.4
		25. Internal Audits OGM/P-HSE-8.5
		26. Management Reviews OGM/P-HSE-8.6
		Improvement
		27. Opportunities for Continual Improvement OGM/P- HSE-9.1
		28. Management of Change OGM/P-HSE-9.2
		29. Incident Investigation OGM/P-HSE-9.3







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3. Audit Modalities

Categories of Audit Findings

- Non-conformity (Category 1): As defined in the standardized audit checklist it is either a) a SYSTEMATIC FAILURE, SIGNIFICANT DEFICIENCY in part of the HSE system, or the LACK OF IMPLEMENTATION of such a part, governed by applicable standards or b) an ISOLATED or SPORADIC LAPSE in the content or implementation of procedures or records which could reasonably "lead to" a systematic failure or significant deficiency if not corrected.
- Observation (Category 2): As defined in the standardized audit checklist it is an AREA OF CONCERN, a process, document or activity that is CURRENTLY CONFORMING or a WEAK PRACTICE which, if not improved, RESULTS IN A NONCONFORMING system, product or service.
- Opportunity For Improvement OFI (Category 3): OFI is a RECOMMEND BEST INDUSTRIAL PRACTICE which results in improvement of HSE management system.

Scoring Criterion for Audit Findings

Compliance Level (Against Each Requirement)	Score
Documentation and implementation is totally absent	0
Documentation is partially available but not completely implemented	2.5
Documentation is completely available but partially implemented Or	5.0
Implementation is there but documents partially in place	
Documentation & implementation is in place to a larger extent	7.5
Documentation and implementation is fully in place	10

Audit Grade & Star Rating

	Audit Grade	Star Rating	Percentage Compliance
A	Excellent Compliance Level	000	More than 76 Percent
В	Good Compliance Level	00	51 – 75 Percent
C	Poor Compliance Level	0	Less than 50 Percent

4. Audit Score Sheet

Plan		
	HSE & RM Policy Statements OGM/P-HSE-4.1	
I marel marely to	Fatality Control Policy Guidelines OGM/P-HSE-4.2	
Leadership	Roles, Responsibilities, Accountabilities, and Authorities OGM/P-HSE-4.3	
	Crisis Management OGM/P-HSE-4.4	
	Risk Management OGM/P-HSE-5.1	
Planning	Job Vulnerability /Hazard Analysis OGM/P-HSE-5.2	
Flammig	Legal & Other Requirements OGM/P-HSE-5.3	
	Objectives & Management Program OGM/P-HSE-5.4	
	Competence & Awareness OGM/P-HSE-6.1	
Support	Communication & Consultation OGM/P-HSE-6.2	
Support	Documented Information OGM/P-HSE-6.3	
	Control of Records OGM/P-HSE-6.4	
	Sub Score (A)	
Do		
	Operational Planning and Control OGM/P-HSE-7.1	
	Permit to Work System OGM/P-HSE-7.2	
Operation	Handling, Segregation and Disposal of Waste OGM/P-HSE- 7.3	
Operation	Journey Management OGM/P-HSF-7 4	

Management of Project Contractors & Service Companies OGM/P-HSE-7.6

Ref. Section 08 (Performance Evaluation) of OGDCL's Integrated HSE System Manual Page 3 of 5

Framework For Hydrogen Sulfide Management OGM/P-HSE-7.5

Journey Management OGM/P-HSE-7.4







	Use of Personal Protective Equipment OGM/P-HSE-7.7	
	Framework For Site Restoration OGM/P-HSE-7.8	
	Sub Score (B)	
Check		
	UBUC (Hazards) Identification & Reporting OGM/P-HSE-8.1	
	Monitoring, Measurement & Compliance Evaluation OGM/P-HSE-8.2	
Performance	Analysis of Data OGM/P-HSE-8.3	
Evaluation	Reward, Recognition & Penalties OGM/P-HSE-8.4	
	HSE Audit OGM/P-HSE-8.5	
	Management Reviews OGM/P-HSE-8.6	
	Sub Score (C)	
Act		
	Opportunities For Continual Improvement OGM/P-HSE-9.1	
Improvement	Management of Change OGM/P-HSE-9.2	
	Incident Investigation OGM/P-HSE-9.3	
	Sub Score (D)	

Audit Score (Sub Score A+B+C+D)	
Percentage Compliance	

5.	Good	Practices	Observed

6. Audit Findings

6.1 PI	AN (CONTEXT, LEADERSHIP, PLANNING	& SUPPORT)		
#	FINDING	REF. CLAUSE/ SEVERITY	RECOMMENDATION	RESPONSIBILITY

6.2 D	O (OPERATION)			
#	FINDING	REF. CLAUSE/ SEVERITY	RECOMMENDATION	RESPONSIBILITY

6.3 CF	HECK (PERFORMANCE EVALUATION)			
#	FINDING	REF. CLAUSE/ SEVERITY	RECOMMENDATION	RESPONSIBILITY

6.4 A	CT (IMPROVEMENT)		44	
#	FINDING	REF. CLAUSE/ SEVERITY	RECOMMENDATION	RESPONSIBILITY



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7. Key Personnel Interviewed

S/No.	Name	Designation	Department/Section

8.	Problems	racea/	Areas	iviissea	

9. Instruction For HSE Audit Corrective Action Plan and Follow-p

Auditee (Area/ Location InCharge) MUST SUBMIT HSE AUDIT CORRECTIVE ACTION PLAN to HSEQ Department within a week (after receiving of the audit report) in the following format:

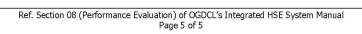
#	Audit Finding	Probable Cause(s) (In perspective of PDCA Cycle)	Action(s) Recommended	Responsibility	Target Deadline

Lead Auditor/ HSE Rep. shall follow-up the audit to determine if corrective actions have been implemented effectively and submit Audit Follow-up Status Report in the following format:

#	Audit Finding (Ref. Audit Report)	Action Recommended (Ref. Audit Report)	Action(s) Actually Taken	Audit Finding's Closure Status	Further Follow- up Required (Yes/ No)

When there is sufficient objective evidence that the corrective action(s) are effective, audit shall be closed out. If more work is needed to fully implement the corrective actions, a new follow-up date shall be agreed upon and audit shall be closed out accordingly.

10. Pictorial/ documented evidence.







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8.6 Management Review

OGM/P-HSE-8.6(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
	Reviewed, no change suggested.

Associated Documents Approval & Issue

Related Document/ Record	Initiated by	Reviewed by	Checked/ Verified / Approved by
OGF – HSE – 044 Agenda of Management Review Committee (MRC) Meetings	Location HSE Section	Location HSE IC	Location IC
OGF – HSE – 045 Minutes of Management Review Committee (MRC) Meetings	Location HSE Section	Location HSE IC	Location IC





8.6.1 General

- Functional Heads/ Area Managers shall be responsible to establish Location HSE Management Review Committee (HSE MRC) to coordinate and control the activities of the HSE System being carried out by different functions and to periodically review and evaluate the performance of HSE system.
- However MD/ CEO shall be responsible to call an Annual Corporate HSE Management Review (Meeting) during the end of each Year to be attended by all Functional Heads (EDs and HODs) as a minimum; otherwise he may conduct HSE Performance Reviews by any other suitable means.
- In addition, daily HSE meetings shall be conducted at the start / end of each business day in each location. This meeting can either be conducted separately or as part of daily 'operations' meeting however it shall, at the minimum, be attended by Location IC, Location HSE Representative and Section ICs. The minutes of meeting shall be recorded and agenda of meeting shall comprise of the following:
 - Review of outstanding action items from previous meeting
 - Review of hazards/ incidents reported since last meeting
 - Review of HSE issues pertaining to any operational jobs
 - New HSE initiatives
 - HSE incident/ video/ learning of the day

8.6.2 Frequency of HSE MRC Reviews

- The Location HSE MRC Meeting shall be held at on quarterly basis.
 - Q1- Around End March
 - Q2- Around End June
 - Q3- Around End September
 - Q4- Around End December
- However, the meeting may be called at any time, when it is considered necessary, on the discretion Location Management.
- In case where delay is inevitable, the management may delay the Location HSE MRC Meeting for a maximum of 30 days; However in case of emergencies, the Location HSE MRC Meeting may not take place over a period of time and can be part of regularly scheduled management activities such as operational meetings.

8.6.3 Composition of HSE MRC

Location HSE MRC shall review the HSE issues on fields with following constitution:

Location IC	Chairman
Location IC HSE	Secretary
All Sectional ICs	Members
HSE Department H.O. Rep.	Observer(optional)
Area Manager	Observer(optional)

8.6.4 HSE Inputs to HSE MRC Reviews

- The agenda of the Location HSE MRC shall be prepared by the HSE Section a week before the meeting and distributed to all the members mentioned above.
- The inputs to Location HSE MRC Meeting shall include quarterly performance on PDCA cycle of each Section to be presented by relevant Sectional ICs:

Plan

- Communication/understanding level of OGDCL HSE policy (to be presented by HSE IC)
- Status of threats and opportunities identified during risk assessment
- HSE objectives & management program (to be presented by HSE IC)
- Evaluation of compliance with legal requirements and other requirements
- Training need analysis (to be presented by HSE IC)
- Effectiveness of toolbox/ safety talks (to be presented by HSE IC)





Do

- Participation levels in scenario-based mockup emergency drills
- Status of and issues related to permit to work system
- Status of safe disposal of hazardous waste, measures to reduce waste quantum and waste streams

Check

- Analysis of STOP Cards (to be presented by HSE IC)
- Lagging & leading indicators, performance and compliance
- Calibration status of measuring equipment/gadgets
- Compliance of Safety/ Environment/ OH Monitoring Plan
- Results of internal and external HSE audits (to be presented by HSE IC)
- Follow up of previous MRC MoMs (to be presented by HSE IC)

Act

- Complaints, accidents, incidents, comments and views of interested parties and feed back (to be presented by HSE IC)
- Status of preventive and corrective actions (to be presented by HSEIC)
- Issues related to modification jobs and compliance of MoC
- Any recommendations/ suggestion for improvement in process or system

8.6.5 Outputs to HSE MRC Reviews

- The minutes of Location HSE MRC meeting shall be prepared by the Secretary after the meeting and then distributed to the members.
- The minutes shall include decisions related to:
 - a) Improvement in Pollution Prevention System;
 - b) Improvement in Accident Prevention System;
 - c) Execution of Annual Vulnerabilities Identification and Impact (Risk) Plan
 - d) Execution of Annual Internal HSE Awareness Plan;
 - e) Execution of Annual Emergency Drill Plan;
 - f) Execution of Annual OH Assessment Plan;
 - g) Execution of Annual Toolbox Talk Plan;
 - h) Specific corrective actions for individual/ subcommittees with target dates of completion.
 - i) Revisions to HSE Objectives and Management Programs;
 - j) Resource/training needs.
- The minutes shall include the name of persons who attended the meeting, matters reviewed, decisions taken on required actions, the names of persons responsible for implementing such actions and the dates by which they are to be completed.

8.6.6 Follow up of the HSE MRC Meeting

HSE Department/ Section shall be responsible for the follow up of the decisions taken in the meeting to ensure that the decisions are implemented in the time frame specified.





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OGF/XXX - HSEQ - 044(00)



AGENDA HSE MANAGEMENT REVIEW COMMITTEE (MRC) MEETING

MEETING TYPE	MEETING DATE	MEETING TIME	MEETING LOCATION
MEETING CALLED BY			

- 1. Previous items (follow-up)
- 2. Improvement
 - a) Summary of incidents and actions taken/ follow-ups
 - b) External complaints received and follow-ups
 - c) No. of CPRs issued, pending, closed & their effectiveness
- 3. Leadership
 - A) Status of objectives/ targets and goals
 - B) Surprise visits/ Walkthroughs by location management
- Planning
 A. Vulnerabilities identification and impact (risk) assessment
 compliance issue
 - B. Any regulatory requirement/ compliance issue
- 5. Support

 - A) Training need analysis, gaps, and effectiveness
 B) Toolbox Talks effectiveness + Analysis of Stop Cards
 - C) Status of labels, signs, etc.
- 6. Operation
 - A) Pollution prevention measures (summary of waste collected from each Section and safe
 - disposal & measures to minimize waste generation at source)
 b) Accidents prevention measures (summary of modification/ maintenance jobs and risk management & permit system)
 - C) Status of Personal Protective Equipment (PPE)
 - D) Emergency (mock-up) drills and effectiveness
- 7. Performance evaluation
 - a) Status of Occupational Health Monitoring (planned vs actual)
 B) Status of Environment Monitoring (planned vs actual)
 C) Status of Safety Monitoring (planned vs actual)
 d) Outcome of internal HSE audits & follow-up
- 8. Other





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PREPARED BY	
REVIEWED BY	
APPROVED BY	





Oil & Gas Development Company Limited

OGF/XXX - HSE - 045(00)

S O O S	Location:				
,,,, ,,,	MINUTES	OF HSE	MRC MEET	ΓING	
QUARTER	DATE		TIME	LOCATIO	ON
1 ST /2 ND /3 RD /4					
		1			
MEETING CALLED BY					
DEPARTMENT / SECTION	N				
CHAIRMAN					
SECRETARY HSE MRC					
COORDINATOR					
ATTENDEES					
	*				
AGENDA TOPICS					
AGENDA TOPI	c	TIME ALLOCATED		PRESENTER	
DISCUSSION					
CONCLUSIONS					
ACTION ITEMS			PERSON RESPONSIBLE	DEADLINE	





AGENDA TOPIC	TIME ALLOC	CATED	PRESENTER
ISCUSSION			
ONCLUSIONS			
			Trise and the second
CTION ITEMS		PERSON RESPONSIBLE	DEADLINE
OBSERVERS			
OBSERVERS			
SPECIAL NOTES			
DDEDARGE DV			
PREPARED BY REVIEWED BY			
APPROVED BY			
	DIST	TRIBUTION	
NAME	DESIGNATION	NAME	DESIGNATION