

**Revision History**

<b>Description</b>	<b>Last Rev No.</b>	<b>Current revision No.</b>	<b>Amendments made</b>
SW/HSE/P07-Rev00	NA	00	New Document
SW/HSE/P07	00	01	The Corporate HSE function was removed.

## 1. PURPOSE AND SCOPE

To establish a process for the implementation and control of planned temporary and permanent changes that influence its HSE performance such as:

- New products, processes, or services.
- Changes to work locations, working conditions, processes, procedures, equipment.
- Change in organizational structure and/or external service providers.
- Changes to applicable legal and other requirements.
- Changes in knowledge or information concerning hazards/aspects and associated risks/impacts.
- Developments in knowledge and technology

## 2. APPLICABILITY

This procedure applies to all Sterling & Wilson Projects and Operations & Maintenance

## 3. DEFINITION OF TERMS

- **Change:** Any variation or change to approved/agreed outcomes
- **Temporary Change:** - Change which happened for a limited period.
- **Permanent Change:** It is a planned change which is permanent in nature. (i.e., Plant layout change, material change, specification change etc.)
- **Failed change:** A planned change that is not achieving its purpose.
- **Change Requestor:** An S&W employee, or a stakeholder who is engaged in the project operations and proposes a change.
- **Change Coordinator:** Site HSE or the appointed responsible person who will peruse and submit the proposed change to the required stakeholders for their evaluation.

## 4. RESPONSIBILITIES & ACCOUNTABILITY

Change Coordinator, Design Engineering, PM, Business HSE, MA, Business HSE, HOD, Top Management,

## 5. DESCRIPTION OF PROCEDURE:

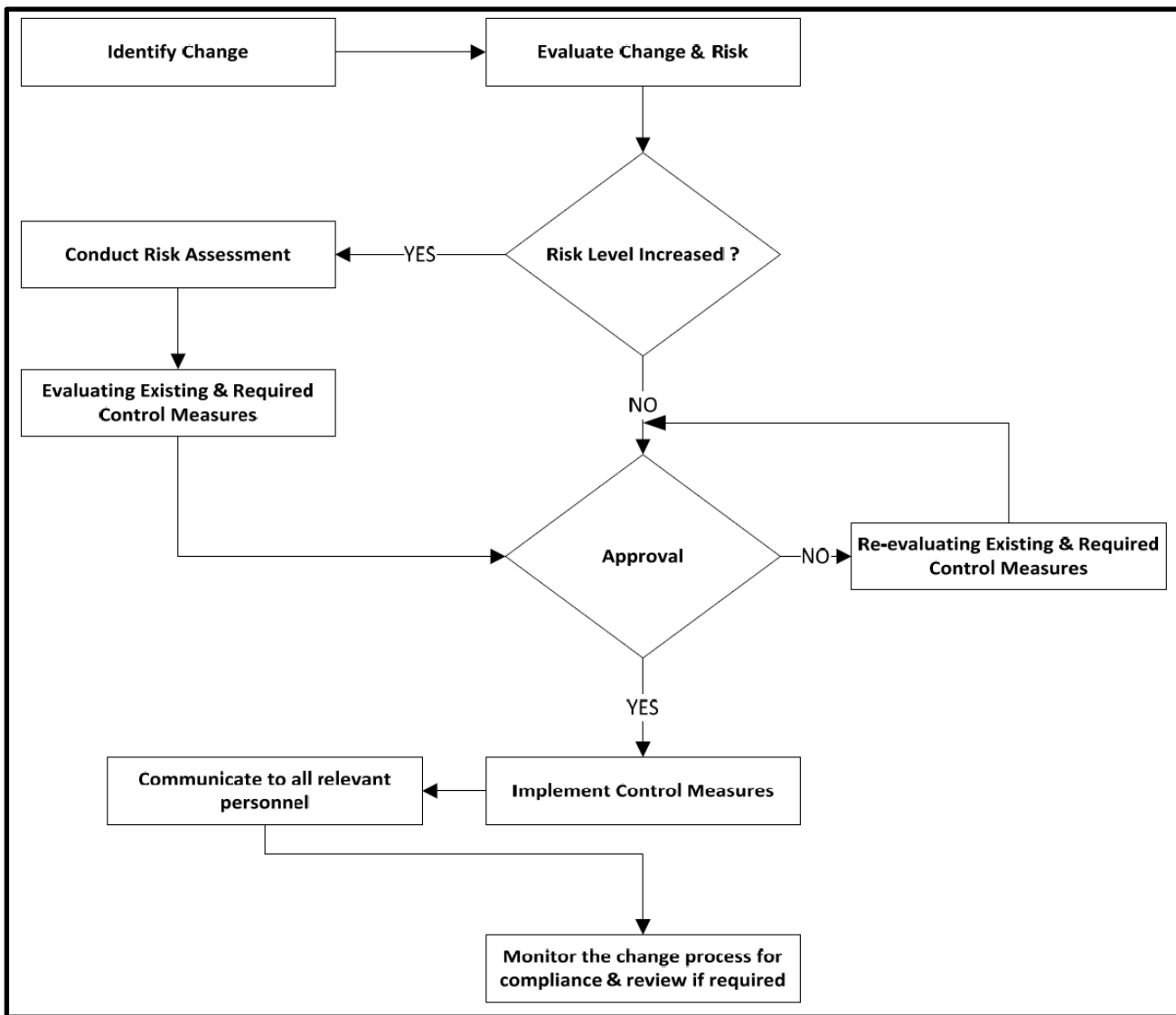
The following changes (both modification and{or} new), will be addressed through this procedure:

Technological, Plant and equipment, Facilities, Work practices and procedures, Design specifications, Input materials, Packaging of input materials, Organization structure, External service providers, Standards, and Regulations.

The HSE Manager in conjunction with the relevant Project Managers / Engineers, Design Engineering team and other relevant employees are responsible for ensuring that any changes as described above are addressed & managed according to this procedure.

During the project life cycle if any change is identified the change will be registered in the Change Management request Form No SW/HSE/F450.

**PROCESS FLOW DIAGRAM**



### Change Requestor:

- A requestor is an SW employee or a stakeholder who is engaged in the project operations and needs to be functionally involved.
- The requestor will propose a Change Item.
- This can be done via email, brought up in meetings etc.

### Change Coordinator:

- The Change Coordinator (Site HSE or who is the appointed responsible person) will peruse and submit the proposed change to the required stakeholders for their evaluation.
- The Change Coordinator is responsible to gain approval or rejection of the change.
- If the change is found necessary and approved, then the necessary changes in the process & procedure will be incorporated after obtaining the necessary review & approval of the concerned HOD and MA.
- The Change Coordinator will prepare all necessary documentation for change/mark-ups required to submit a formal change request. These documentaries include Process documents, Registers, Drawings, Forms, Templates, Manuals, Plant & equipment details etc. as necessary.
- If the change is found not required and not approved, the existing control measure will be reviewed once more to find its adequacy.
- The Change Coordinator is responsible to prepare the Communications Plan of notifying all affected parties/ concerned of the change.
- The request will be registered by the change coordinator using the change management request form. If consultation is required, the change coordinator is responsible to organize a meeting with the required stakeholders to propose the suggestions/change.
- It is then evaluated after taking the required inputs from the concerned employees to assess for the new HSE Hazards / Aspects and its associated Risk / Impact.
- Decision will be taken to adopt new control measures if the new Risk / Impact level supersedes the previous Risk /Impact level. HIRA-AIA matrix will be updated and evaluated accordingly. New control measures will be adopted in case of higher HSE risk/impact evolved due to the change.
- Any change in the existing HSE process & procedure will be communicated as per Communication Matrix by the Change Coordinator. The Change coordinator will identify if there is a need for training due to new changes in process, procedure, etc.; and will organise the training through site training, induction, toolbox talks, meetings, or visual display.
- All Communications and training related to a change are to be completed within 1 month of the change. Records will be maintained as evidence.
- In a failed change, the Change Coordinator initiates a review of what went wrong, and to learn from the failed change, to put actions in place to prevent a re-occurrence of the failure. The training and communication plan to be updated accordingly. After a successful implementation of the said Change process to be closed.

- Changes in the HSE process, procedure, and Risk/Impact assessment, which is identified as a corrective action against nonconformities or incident investigation findings, will be incorporated into the HSEMS after revision of that required section/process of HSEMS.
- Any changes arising out of the Management Review outcome will also be addressed and necessary revisions in HSEMS will be carried out.

**Design Engineering:**

- If the change requires updates in design parameters and drawings, a responsible member of the design engineering team will provide approvals on the same.

**6 DOCUMENTS & RECORDS**

<b>Sr. No.</b>	<b>Document / Format No.</b>	<b>Title</b>
1	SW/HSE/F431	HIRA-AIA register
2	SW/HSE/F460	Legal Register
3	SW/HSE/F459	Risk and Opportunity Register
4	SW/HSE/F450	Change Management Form

**Annexure 1 Change Management Form**

<b>Information</b>		
Change Requestor:	Designation:	Date:
Description of proposed change		
Area of Change		
<ul style="list-style-type: none"> <li>▪ Expected Date and Time to implement Change:</li> <li>▪ Does the affected personnel (e.g. operations, maintenance, contractors, etc.) require notification or briefed about with this change?                      Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></li> </ul>		
Name and Signature of the concerned _____		
<ul style="list-style-type: none"> <li>▪ Does design parameters &amp; drawings require updating based on change?                      Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></li> </ul>		
<ul style="list-style-type: none"> <li>• If Yes, Approval obtained from Design Engineering?                      Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></li> </ul>		
Name and Signature of the Design / Engineering responsible _____		
<ul style="list-style-type: none"> <li>▪ Are operating procedures or maintenance procedures required to be updated as a result of this change?                      Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></li> </ul>		
<ul style="list-style-type: none"> <li>▪ Is the Occupational Hazard and Risk, Aspect and Impact registers impacted by this Change?                      Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></li> </ul>		
<ul style="list-style-type: none"> <li>▪ Emergency Response Procedures require updating as a result of this change?                      Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></li> </ul>		

- If yes,
- Date: \_\_\_\_\_ Reference document : \_\_\_\_\_

**HSE Review**

- If the modification affects any ventilation system, check for if the modified ventilation system comply with appropriate standards?  
Yes  No  N/A
- Does the modification alter the normal permitted discharges to the air or water of the facility? If yes, check for adequate measures are addressed in the permits / SOP ?  
Yes  No  N/A
- Does the modification require that the onsite inventory of hazardous chemicals be increased?  
Yes  No  N/A
- Is the existing storage and Fire / emergency system adequate for the change in chemical inventory?  
Yes  No  N/A
- Does the modification require that hazardous material storage facility to be upgraded? If yes, the same is addressed / completed?  
Yes  No  N/A
- Does the modification lead to additional hazardous wastes generation? If yes, the same is addressed / completed?  
Yes  No  N/A
- Are the indications and alarms in the existing plant adequate for the modified plant?  
Yes  No  N/A
- Does the modification require additional personnel protection measures (e.g., PPE)? If yes, the same is arranged?  
Yes  No  N/A
- Have the modifications created any additional vulnerabilities to external events which did not exist before (vehicle, Road traffic water accumulation, high wind, surrounding locality etc.)?  
Yes  No  N/A

If yes, provide details of the additional requirements and how these are addressed  
 \_\_\_\_\_  
 \_\_\_\_\_

Is electrical power and other services adequate or require any change? If yes, the measure is taken to mitigate the HSE risk?  
 Yes  No  N/A

Are the existing site security procedures adequate?  
 Yes  No  N/A

Are the existing eyewash/safety showers adequate?  
 Yes  No  N/A

Has the change been reviewed and approved by management?  
 Yes  No  N/A

Other HSE issues not yet addressed?  
 Yes  No  N/A

Is the change Permanent or Temporary  
 \_\_\_\_\_  
 \_\_\_\_\_

If the change includes new equipment, has the inspection requirements updated accordingly  
 Yes  No  N/A

If yes,  
 Date: \_\_\_\_\_ Reference document : \_\_\_\_\_

Other impacts if any?  
 \_\_\_\_\_  
 \_\_\_\_\_

Training and communications status:  
 Planned: \_\_\_\_\_ Completed : \_\_\_\_\_

Further Safety Review if required  
 Yes  No  N/A

**(Attach details as annexure)**

Any other actions required as part of this change?  
 \_\_\_\_\_  
 \_\_\_\_\_



Completed by: <i>(Change Coordinator)</i>	Completion date:
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