

COMPANY NAME.

ENVIRONMENTAL PROCESS MANUAL

DOCUMENT NUMBER	ABC / EMS-P / 001
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	PREPARED BY	REVIEWED & APPROVED BY
DESIGNATION	Management Representative	MD
SIGNATURE		

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MANUAL DISTRIBUTION

Controlled Copy No.	Distributed to
1	CEO
2	MR
3	HODs
4	Certification Body

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LIST OF PROCESSES

Sl. No.	Process Title	Process Code	Effective Date	Relevant ISO 14001 Clause (s)
1	Control of Documented Information	EMS/PCS/01	01.01.2023	7.5.2, 7.5.3
2	Risks & Opportunities (Context of organization)	EMS/PCS/02	01.01.2023	6.1.1
3	Environmental aspect/ impact assessment	EMS/PCS/03	01.01.2023	6.1.2
4	Compliance Obligations	EMS/PCS/04	01.01.2023	6.1.3
5	Objectives and Planning to achieve them	EMS/PCS/05	01.01.2023	6.2
6	Competence, Training, and Awareness	EMS/PCS/06	01.01.2023	7.2, 7.3
7	Communication	EMS/PCS/07	01.01.2023	7.4
8	EMS Operational control	EMS/PCS/08	01.01.2023	8.1
9	Emergency Preparedness and Response	EMS/PCS/09	01.01.2023	8.2
10	EMS Performance evaluation	EMS/PCS/10	01.01.2023	9.1
11	EMS nonconformities and Corrective Action	EMS/PCS/11	01.01.2023	10.2
12	Internal Audit	EMS/PCS/12	01.01.2023	9.2
13	Management Review	EMS/PCS/13	01.01.2023	9.3

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CONTROL DOCUMENTED INFORMATION (EMS/PCS/01)

1. OBJECTIVE

Control documented information maintained and retained by ABC.

2. BOUNDARY

Covers control of documented information related to EMS.

3. PROCESS OWNER

CEO
HODs
MR

4. REFERENCE/RECORDS

List of documented Information maintained

List of formats

List of documented information maintained (External origin)

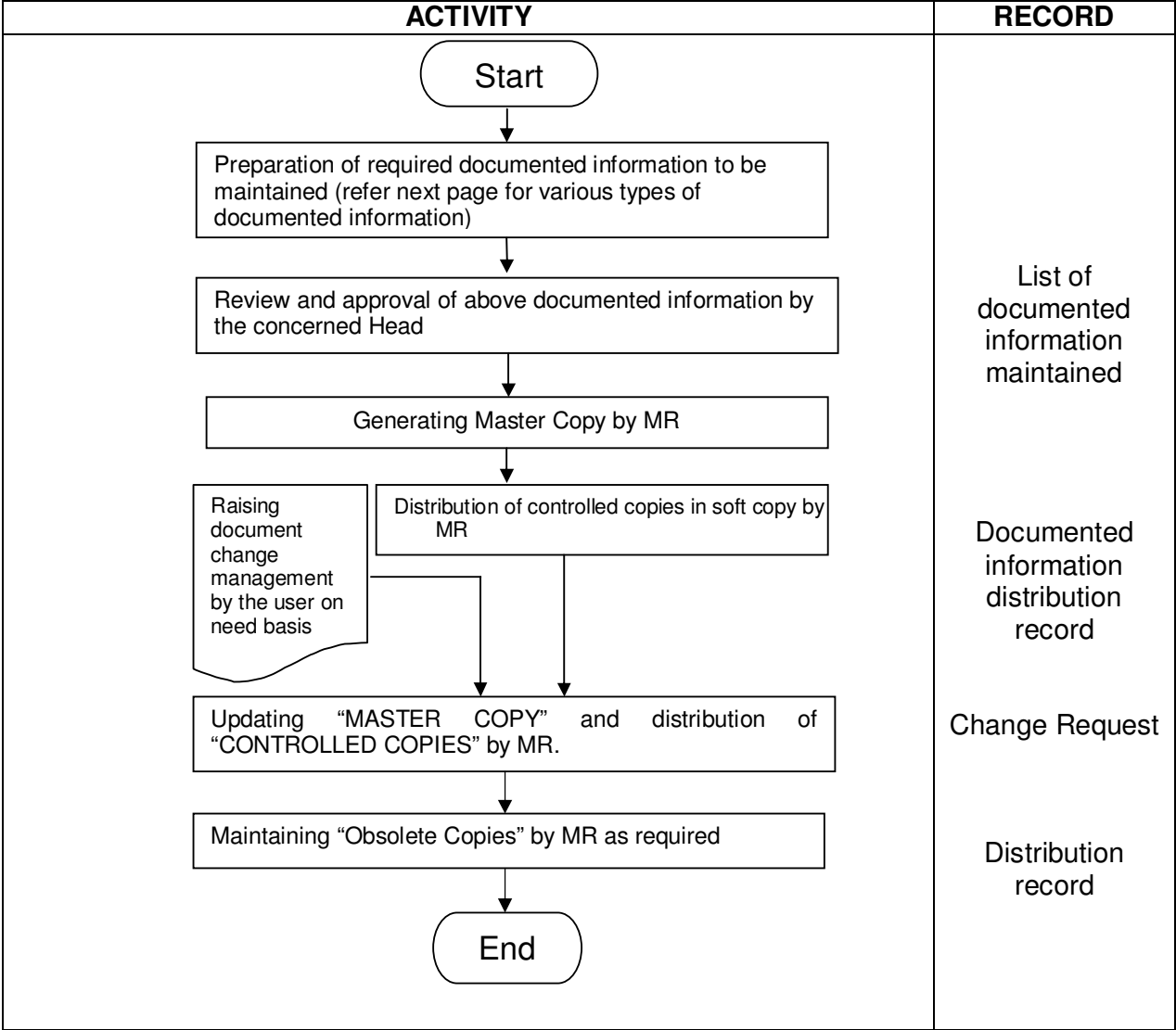
Controlled Copies distribution record

Change request for documented information

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5. PROCESS FLOW SHEET

Control of Documented Information maintained



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Control of Documented Information retained (RECORDS)

ACTIVITY	RECORD
<div><div>START</div><div>↓</div><div>Determining the records (evidence) to be maintained as per EMS standards requirements & ABC requirements</div><div>↓</div><div>Capturing the above in the form of list of records with the information related to identification, responsibility and retention periods</div><div>↓</div><div>Retaining above determined documented information by the respective department/Section</div><div>↓</div><div>END</div></div>	<div>List of records</div> <div>Records as per above list</div>

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GUIDELINES FOR CONTROL OF DOCUMENTED INFORMATION

1. DOCUMENTED INFORMATION

Documented information is maintained in the form of any or combination of the following maintained in hard / soft copy.

- EMS Policy
- Objectives
- External Issues and Internal Issues
- Requirements of interested parties
- Risks and Opportunities
- EMS Manual
- EMS Processes manual
- Legal register
- EMS Risks / Hazard Identification and Risk Assessment Register
- Onsite emergency plan
- Documented information of external origin (ISO 14001 standard, OEM Manuals, Acts & Rules, etc.)

2. DEFINITIONS

MASTER COPY

Master copy is the one, which is duly approved (Signed) and authorized for use. Master copy will be used for generating “CONTROLLED COPY” as required.

CONTROLLED COPY

A copy of a document, which is updated whenever the Master Copy is changed and is distributed as per the distribution list, is termed “CONTROLLED COPY”.

UNCONTROLLED COPY

Any copy of a document, which is generated on ‘want basis, shall be referred to as “UNCONTROLLED COPY”. This is also generated from Master Copy.

OBSOLETE COPY

Master copy of a document, which are not in use (Old revisions) preserved for legal/ knowledge preservation.

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3. APPROVAL OF DOCUMENTED INFORMATION

Documented information common to all Functions and management function are reviewed and approved by CEO.

Documented information specific to the Function are reviewed and approved by the concerned HODs / MR.

4. DOCUMENTED INFORMATION CODING

The OHS documented information is coded uniquely as per the list maintained with MR.

5. REVISION NUMBER

In case of modification of a document / form, the revision number would be next numeric number.

E.g.: Rev.: 00 indicates no revision
Rev.: 01 indicates first revision
Rev.: 02 indicate second revision and so on.

The revision status of the document is set to **Rev.00** in case of issue of document with new Issue Number.

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6. DISTRIBUTION OF CONTROLLED COPIES – HARD COPY:

- 6.1 Master copy (hard copy) of documents is generated by printing the documents and by obtaining approval of the same
- 6.2 Master copy of documents is stamped in violet on the rear side of all pages of documents as “MASTER COPY”.
- 6.3 Controlled and uncontrolled copies are generated by photocopying ‘Master Copy’.
- 6.4 Controlled copies of ISO 14001 documents are distributed according to the distribution list duly stamped in red as “CONTROLLED COPY” on the right hand top of all sheets.
- 6.5 As per the distribution list, the controlled copies of the documents are sent to the recipients. The record of the same is maintained in a distribution record.
- 6.6 Uncontrolled copies of the documents are issued by MR on request duly approved by MR. Uncontrolled copy is also generated from computer and stamped as UNCONTROLLED COPY in green and sent to the recipients. This copy of the document does not warrant updation.
- 6.7 Previous revisions of Controlled Copies are destroyed and those of Master Copy are maintained with MR and stamped as OBSOLETE in Blue color.
- 6.8 Master list of documented information is maintained by MR.

7. DISTRIBUTION OF CONTROLLED COPIES:

- 7.1 Master Copy of Soft Copy version is kept in the computer of MR under safe custody through pass word protection and hard copy is also maintained.
- 7.2 Controlled copy – Controlled copies are photocopies of master copies issued for implementation.
- 7.3 MR is responsible for updating the above controlled copy based on the changes to the Master Copy.

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8. DOCUMENT REVISION / MODIFICATION:

8.1 Modification / revision to an existing document can be sought by the user due to:

- a) change in system or personnel
- b) change required on audit findings
- c) change in organizational setup
- d) change arising out of corrective action / preventive action
- e) change in acceptability standards
- f) changes to the legal requirements

8.2 User seeking a change to documented information intimates MR through EMS documented information change request form duly approved by the concerned authority.

8.3 MR incorporates the changes(s) and distributes amendments to all controlled copy holders.

8.4 Revised documents replace earlier revision and old revision documents are destroyed by the controlled copy holder.

8.5 Record of changes to documents is maintained in Revision Record Sheet kept on top of documents.

9. RETENTION OF ORIGINAL DOCUMENT

All outdated Master copy documents of EMS Manual, process Manuals and Formats, where complete revision have taken place are stamped "OBSOLETE" in Blue color and retained by MR till next revision.

10. CONTROL OF FORMATS

10.1 All Formats are controlled by concerned HOD / MR and list of the same is maintained by HOD / MR .

10.2 User seeking modification sends request to the concerned HOD along with details of changes for review and approval by the designated approving authority. Subsequently, HOD / MR distribute controlled copies of forms along with updated list of forms to all concerned.

11. CONTROL OF DOCUMENTED INFORMATION MAINTAINED– EXTERNAL ORIGIN

11.1 Documented information of external origin such as national standards (IS standards), international standards, statutory documents, corporate documents, etc. as necessary for the planning and operation of the EMS, are identified by the

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respective HODs/ MR. The distribution of these documents also controlled by the respective HODs/ MR and the list of the same is maintained.

11.2 List of documents of external origin is maintained by the concerned HOD / MR and updates these documents based on the information subscribed based on the following:

- a. Information received from legal authorities
- b. Information received from book houses
- c. Information available on websites
- d. Information received from other related industries

12. CONTROL OF DOCUMENTED INFORMATION RETAINED (RECORDS)

12.1 Records are maintained in the form of Format / Register in the form of Hard Copy / Soft Copy.

12.2 Standard Formats are used for maintaining most of the records and these are controlled by the concerned HOD / MR.

12.3 Records are identified by unique identification number and are maintained by the HOD concerned in a format.

12.4 Records are legibly prepared and stored in such a way that they are readily retrievable.

12.5 Records are stored in a suitable environment, to prevent from damage, deterioration and loss. Record holders are responsible for the upkeep and protection of records under their control.

12.6 HOD concerned maintains a list of all records under their control.

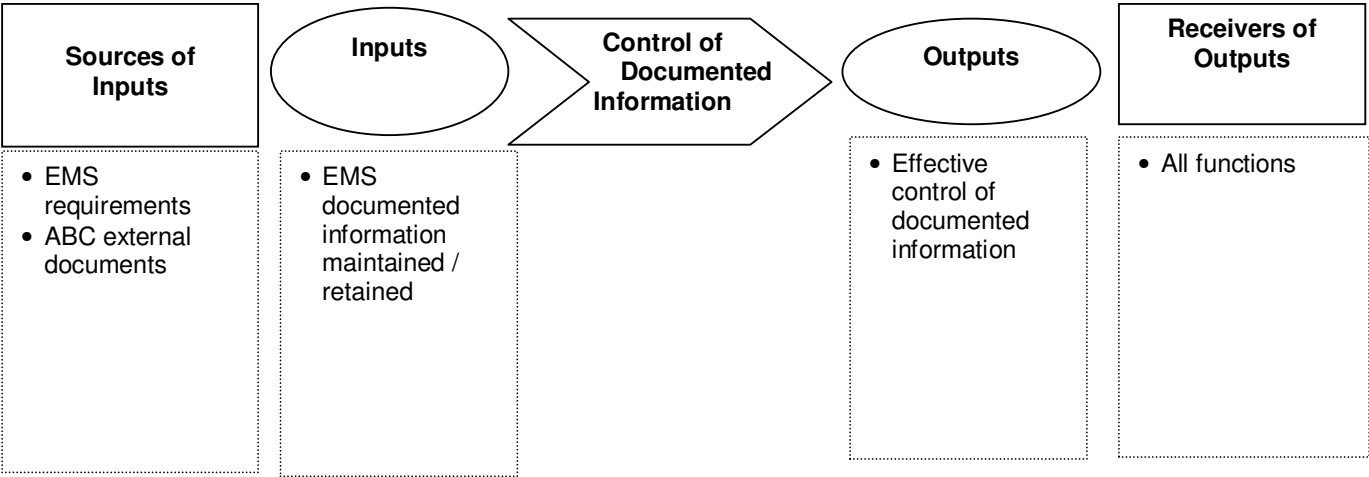
12.7 Retention time of all records is mentioned in the index. After the retention period is over, the concerned record holder seeks approval of HOD for disposal of the records.

12.8 Records are normally destroyed through manual / machine shredding.

12.9 Records are made available to customer or the customer's representative, if agreed contractually, with the approval of MD.

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6. PROCESS MAP



7. PERFORMANCE INDICATORS

- Number of non-conformities related to control of documented information

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RISKS & OPPORTUNITIES (Organization Context) (EMS/PCS/02)

1. OBJECTIVE

To determine organization level risks & opportunities related to EMS and plan action to address them.

2. BOUNDARY

From determination of risks & opportunities to taking action and evaluating their effectiveness.

3. PROCESS OWNER

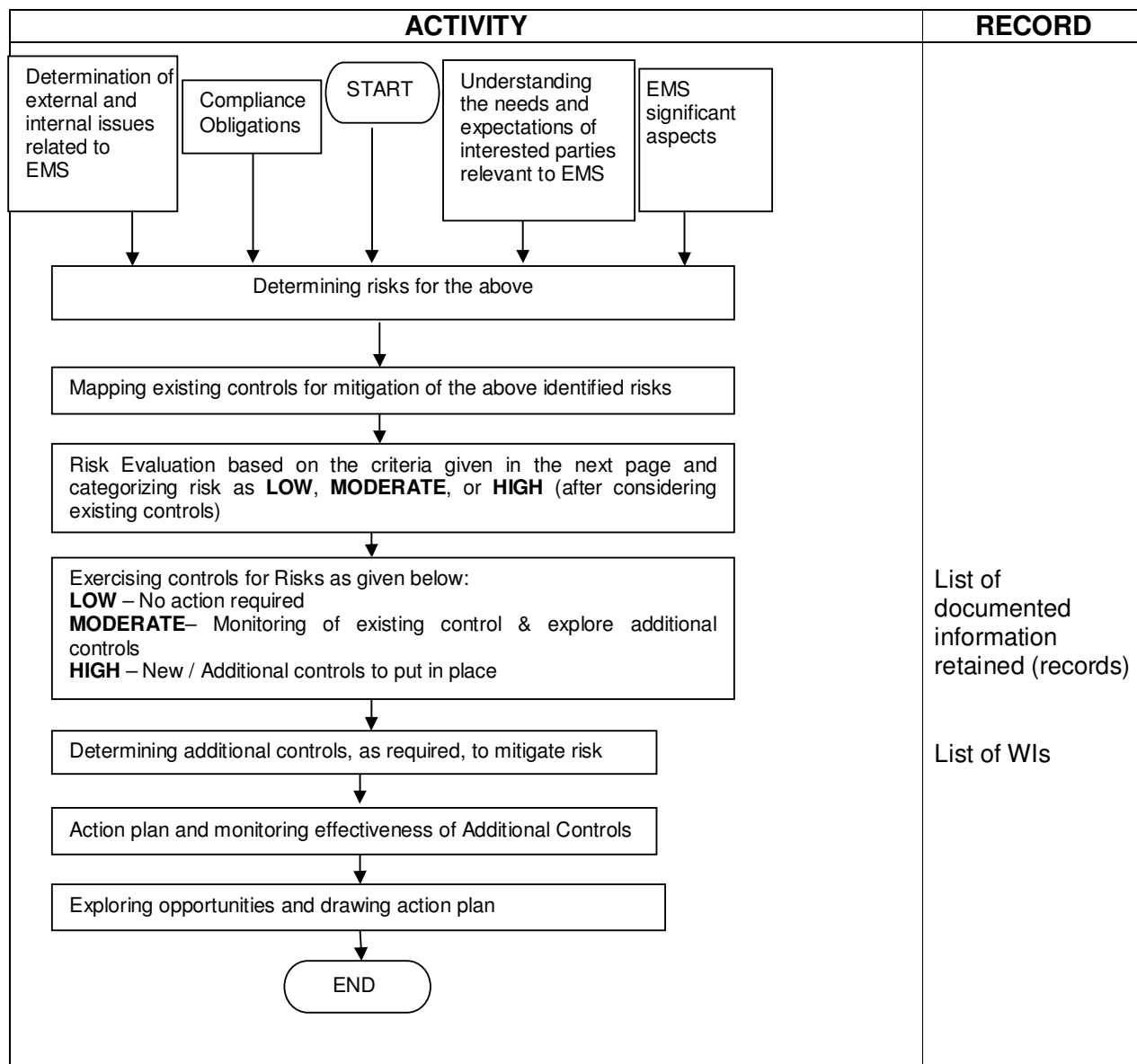
CEO
HODs

4. REFERENCE/RECORDS

- Internal issues
- External issues
- Actions related to Risks & Opportunities
- Risk and opportunities from external, internal issues and requirements of interested parties.

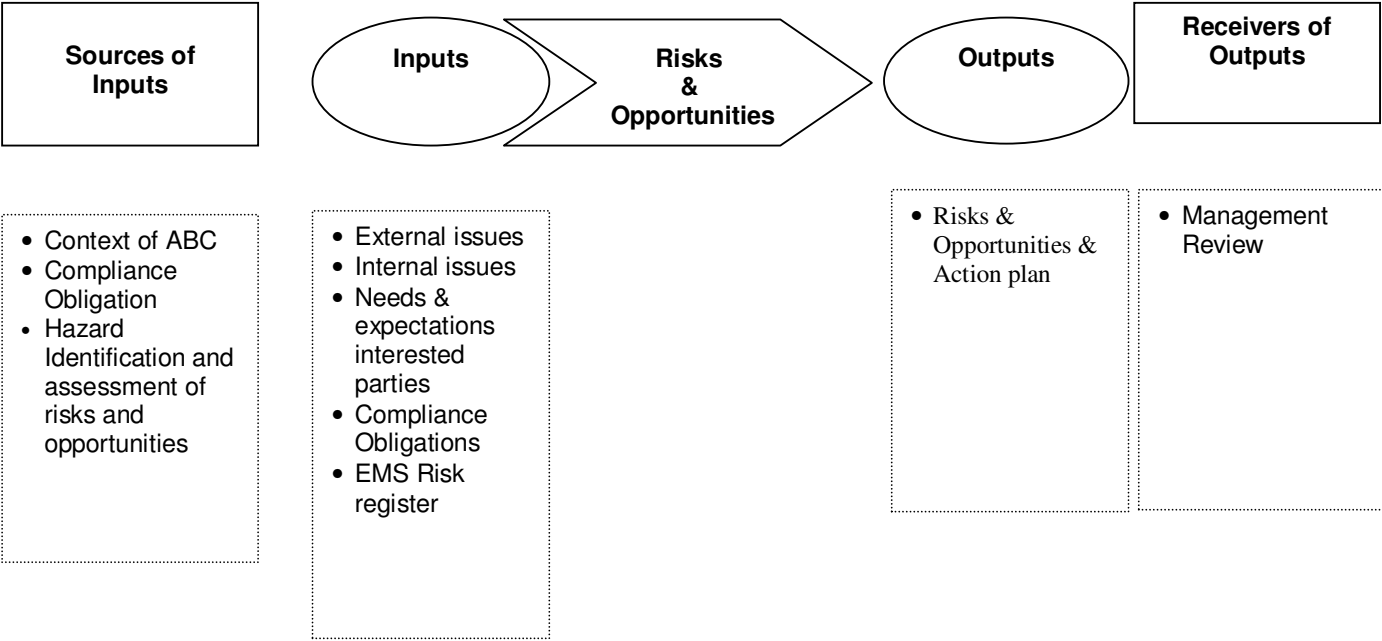
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5. PROCESS FLOW SHEET



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6. PROCESS MAP



7. PERFORMANCE INDICATORS

- Status of Achievement: Objects.

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PROCESS FOR IDENTIFICATION OF ENVIRONMENTAL ASPECTS AND IMPACTS AND RISKS (EMS/PCS/03)

1. OBJECTIVE

Purpose of this process is to outline the process for identifying relevant environmental aspects and impacts and environmental risks related to the activities, products and services under the direct control or influence of Facilities.

2. BOUNDARY

All activities carried out in the factory.

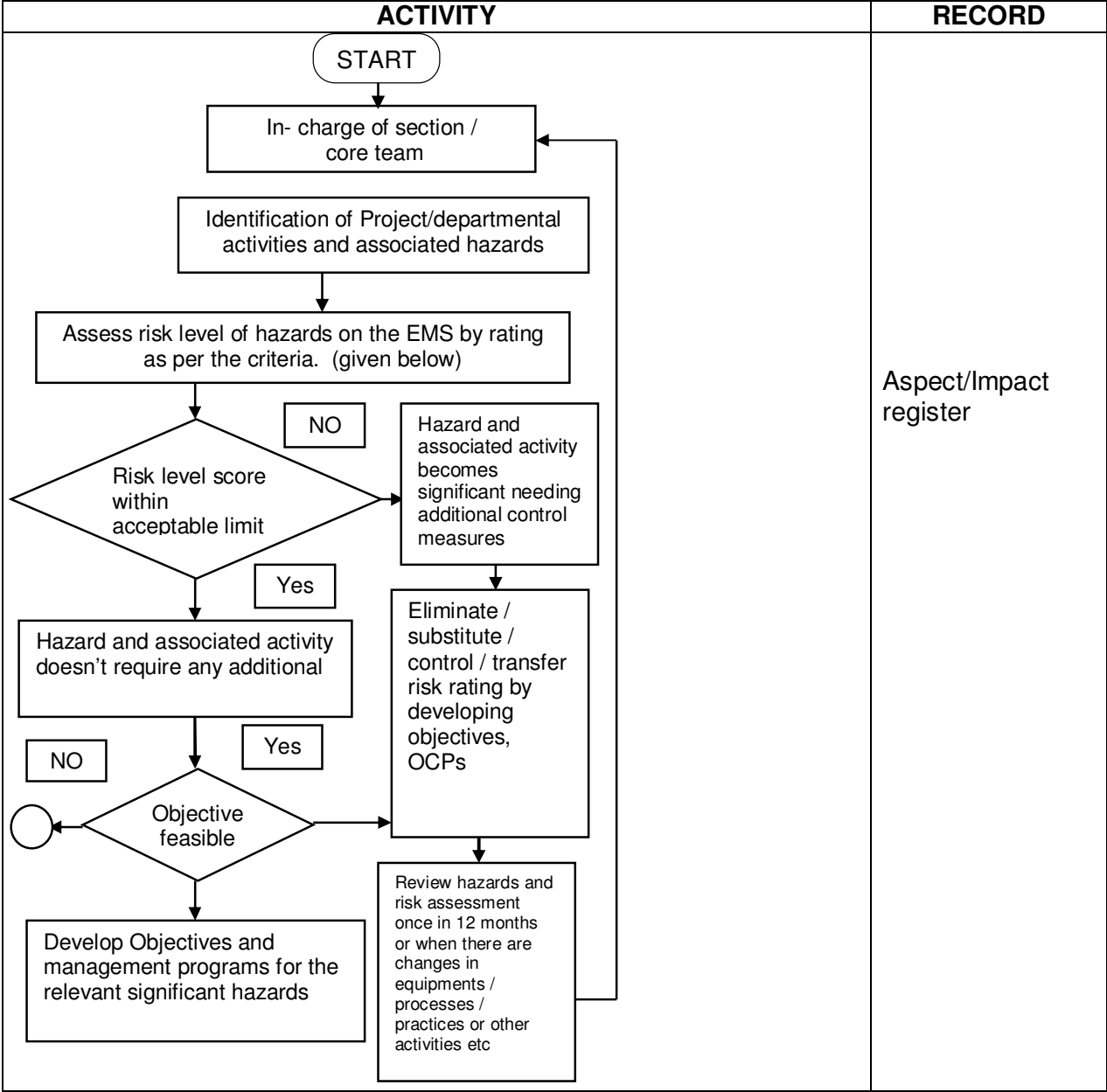
3. PROCESS OWNER

MR
HODs

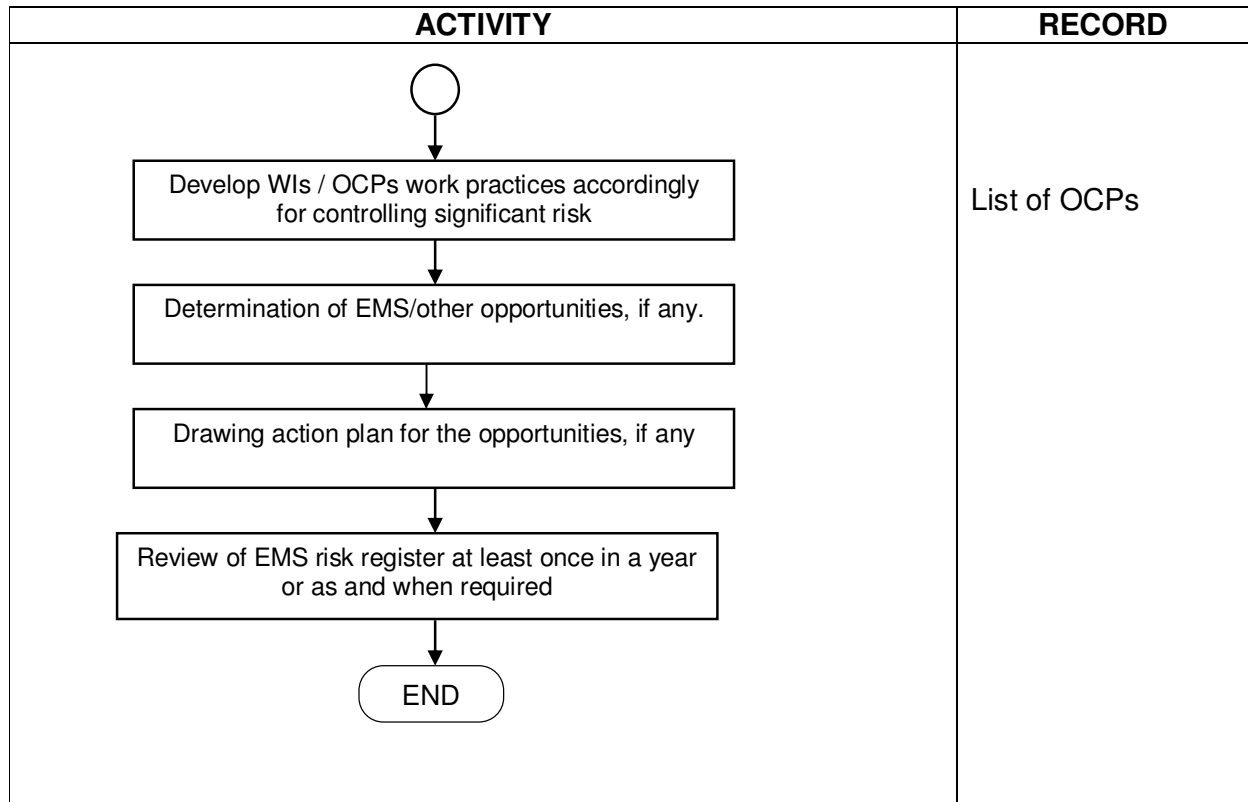
4. REFERENCE/RECORDS

Environmental Aspect/Impact Register

5. PROCESS FLOW SHEET



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5.1 Procedure

Team along with the MR who has identified the activities/ processes of the company as the following functions:-

- Purchase
- Production
- Operations
- HR
- Maintenance
- Stores RM/ Chemicals
- External Environment

The Team along with the department personnel identifies the activities / processes that have got any impact on the environment and record the details in the aspect/impact form.

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Identification of the aspects and impacts are based on the environmental aspects of activities, products and services that it can control and influence and their associated impacts considering lifecycle perspective. While assessing the environmental aspects the company has taken into account :

- Land condition
- Emission to air
- Release to water
- Release to land
- Use of materials and natural resources
- Usage of energy
- Noise
- Waste water discharge
- Material use
- New developments
- Normal/ abnormal and emergency conditions
- New activities/modified activities

5.2 Determination of significant environmental aspects and risks.

While analysing the level of significance of the impact on the environment, the following criteria is taken care:

- Internal/ external issues
- Concerns of interested parties
- Compliance obligation
- other relevant issues

5.3 Risk Evaluation Criteria

Total risk = Likelihood X Severity

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Criteria	Ranking	Points	Description
Severity	Catastrophic	5	Non reversible/ danger to human life/environment
	Major	4	Short term problems
	Significant	3	Minimal/ within statutory limits
	Minor	2	Insignificant
	Insignificant	1	Positive impact
Criteria	Ranking	Points	Description
Likelihood	Almost certain	5	Impact occurs continuously
	Likely	4	Impact occurs occasionally
	Possible	3	Impact occurs once in a year
	Unlikely	2	Impact occurs once in life time
	Rare	1	Positive

S E V E R I T Y	Catastrophic					
	Major				HIGH	
	Significant					
	Minor	LOW		MEDIUM		
	Insignificant					
		Rare	Unlikely	Possible	Likely	Almost certain
	LIKELIHOOD					

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RISK	ACTION PARAMETERS
High	[16 – 25] The activity MUST NOT proceed. Alternate controls put in place to reduce the risk rating to LOW or MEDIUM . (EMP)
Medium	[7 – 15] The activity can proceed so long as the highest level and most appropriate risk control measures have been identified and implemented . OCP/EPRPs
Low	[1 - 6] The activity may proceed with normal supervision after implementing the control measures

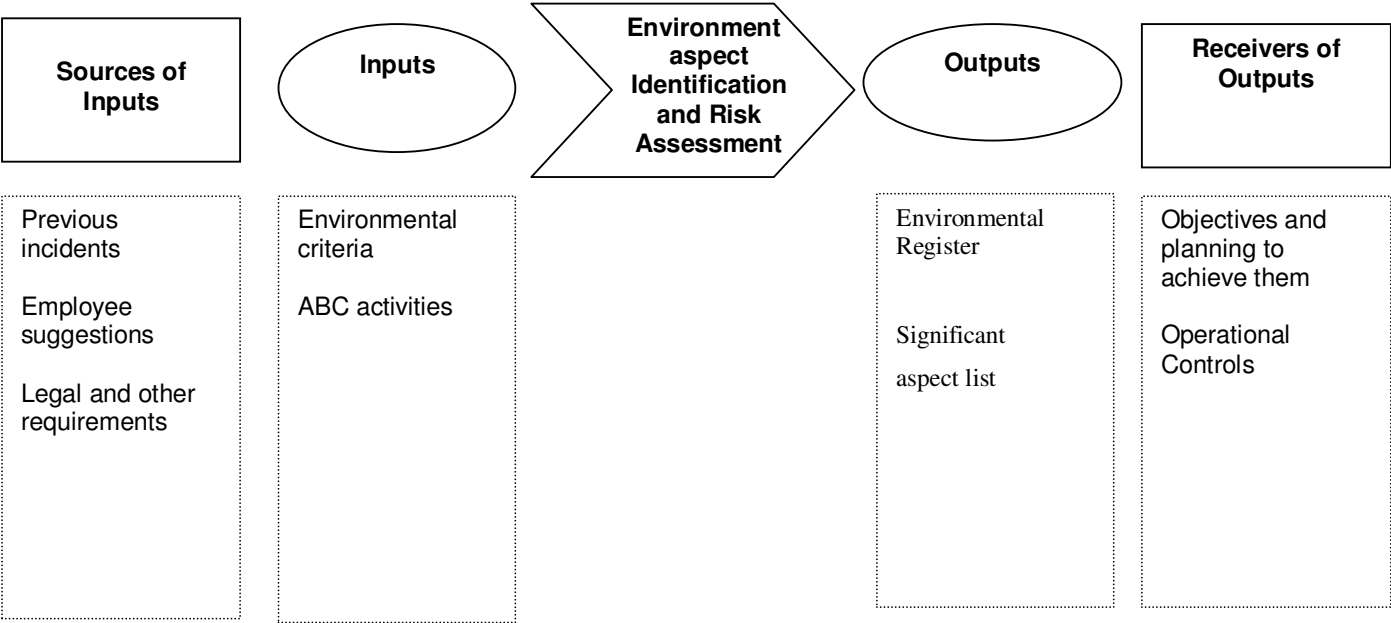
The details of the risk assessments are recorded in Environmental risk Assessment form.

Wherever the risk scores in High/ Medium, those aspects are considered significant and the mitigation plan is decided as

- EMP – Environmental Management Program.
- OCP – Operational Control Program.
- EPRP – Emergency Preparedness and Response Program.

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6. PROCESS MAP



6.1 References

- ISO 14001 - 2015 - Environmental Management System Standard
- Procedure for compliance obligation
- Procedure for Communication EMS
- Procedure for Emergency Preparedness and Response

6.2 Records

- Environmental risk assessment form

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COMPLIANCE OBLIGATIONS (EMS/PCS/04)

1. OBJECTIVE

To ensure fulfillment to compliance obligations (legal and other requirements).

2. BOUNDARY

Determination of compliance obligations applicable to ABC and its fulfillment.

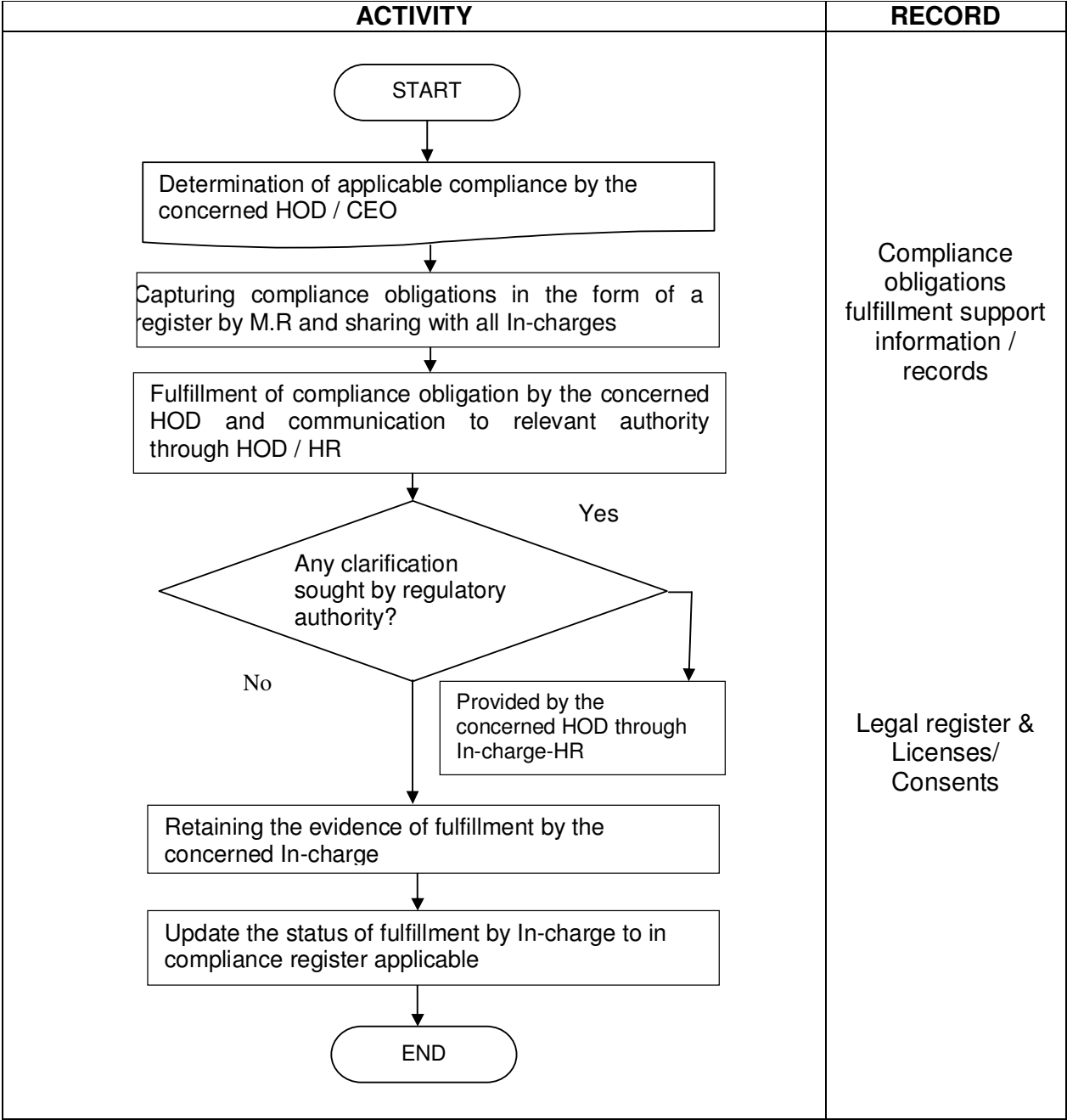
3. PROCESS OWNER

CEO
HODs

4. REFERENCE/RECORDS

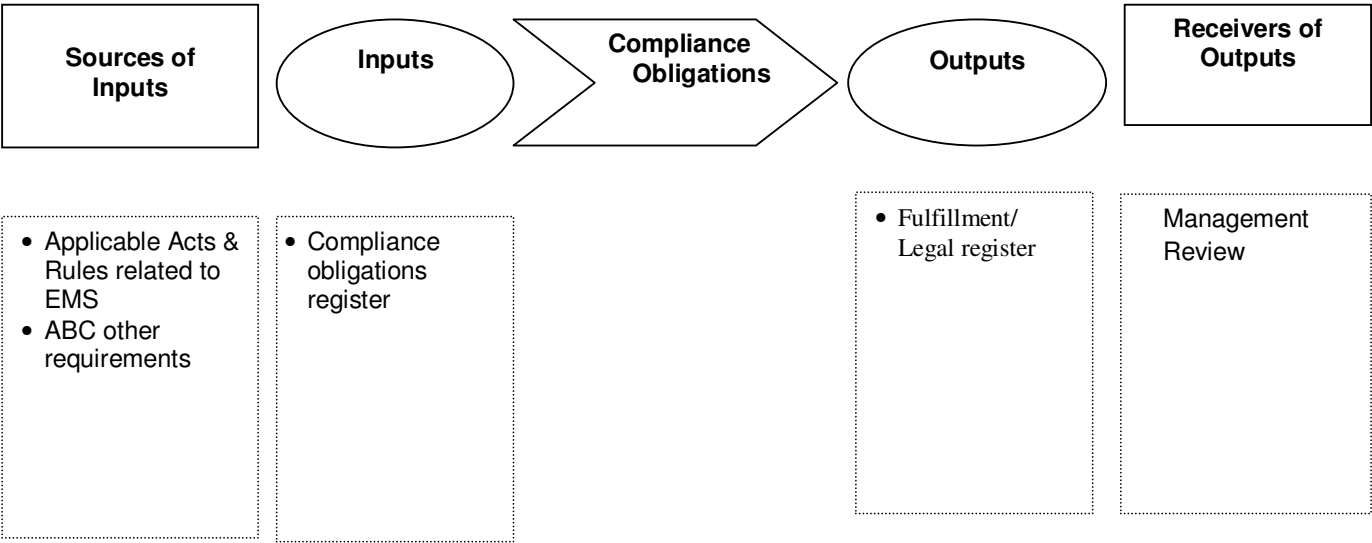
- Licenses/ Consents
- Legal register.

5. PROCESS FLOW SHEET



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6. PROCESS MAP



7. PERFORMANCE INDICATORS

- Deviation to compliance obligations :

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OBJECTIVES AND PLAN TO ACHIEVE THEM (EMS/PCS/05)

1. OBJECTIVE

To establish objectives and planning to achieve the same.

2. BOUNDARY

Covers establishing objectives at organization level and dept. / functional levels and these include objectives related to EMS.

3. PROCESS OWNER

CEO

HODs

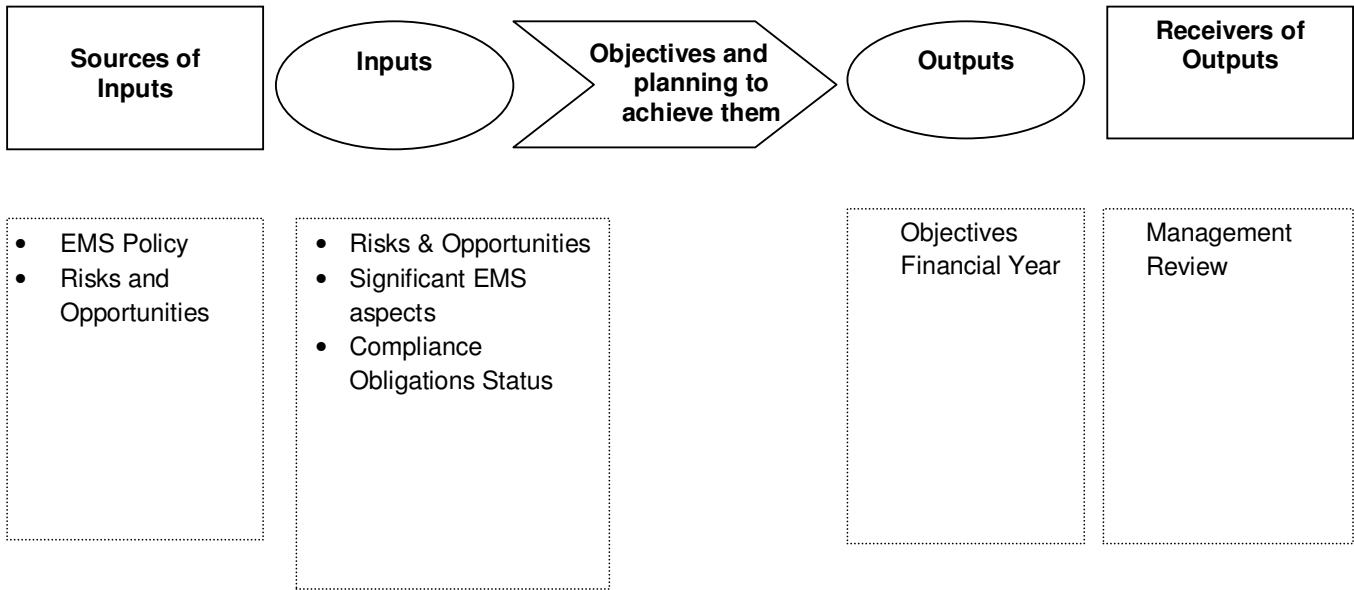
MR

4. REFERENCE/RECORDS

- Objectives achievement status

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6. PROCESS MAP



7. PERFORMANCE INDICATORS

- Objectives achievement
- Compliance Obligations

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COMPETENCE, TRAINING AND AWARENESS (EMS/PCS/06)

1. OBJECTIVE

To ensure the competency of personnel carrying activities affecting process performance.

2. BOUNDARY

Determination of competency requirements to training imparting and evaluation

3. PROCESS OWNER

CEO
HOD-HR

4. REFERENCE/RECORDS

- Competence evaluation record
- Training calendar
- Training records
- Training imparting and evaluation record

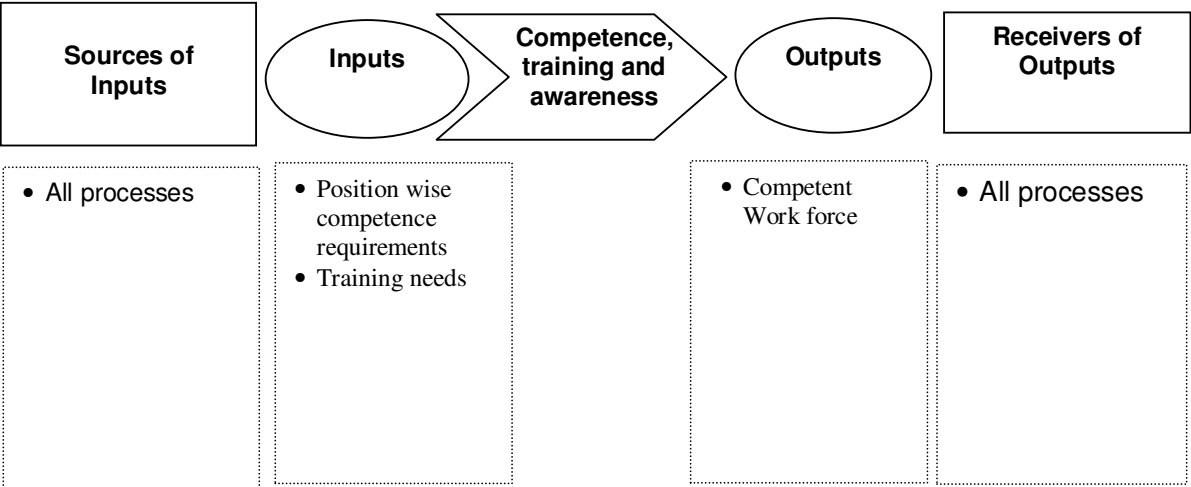
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5. PROCESS FLOW SHEET

ACTIVITY	RECORD
<div>START</div> <div>Determination and evaluation of competence requirements for all critical positions by Unit Head/In-charge-HR</div> <div>Summarizing competence evaluation information by</div> <div>Identifying training needs of employees by once in a year by HODs-HR/Safety</div> <div>Preparation of training calendar by HOD (HR)</div> <div>Providing training for as per the training Calendar</div> <div>Evaluation of effectiveness of training</div> <div>Maintaining records of training and evaluation</div> <div>END</div>	<div>Training Data</div> <div>Training needs identification</div> <div>Training plan</div> <div>Training Records</div> <div>Training evaluation records</div>

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6. PROCESS MAP



7. Performance Indicators:

Number of training man hours per year

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COMMUNICATION (EMS/PCS/07)

1. OBJECTIVE

Communicate information related to EMS effectively.

2. BOUNDARY

Covers internal and external communications

3. PROCESS OWNER

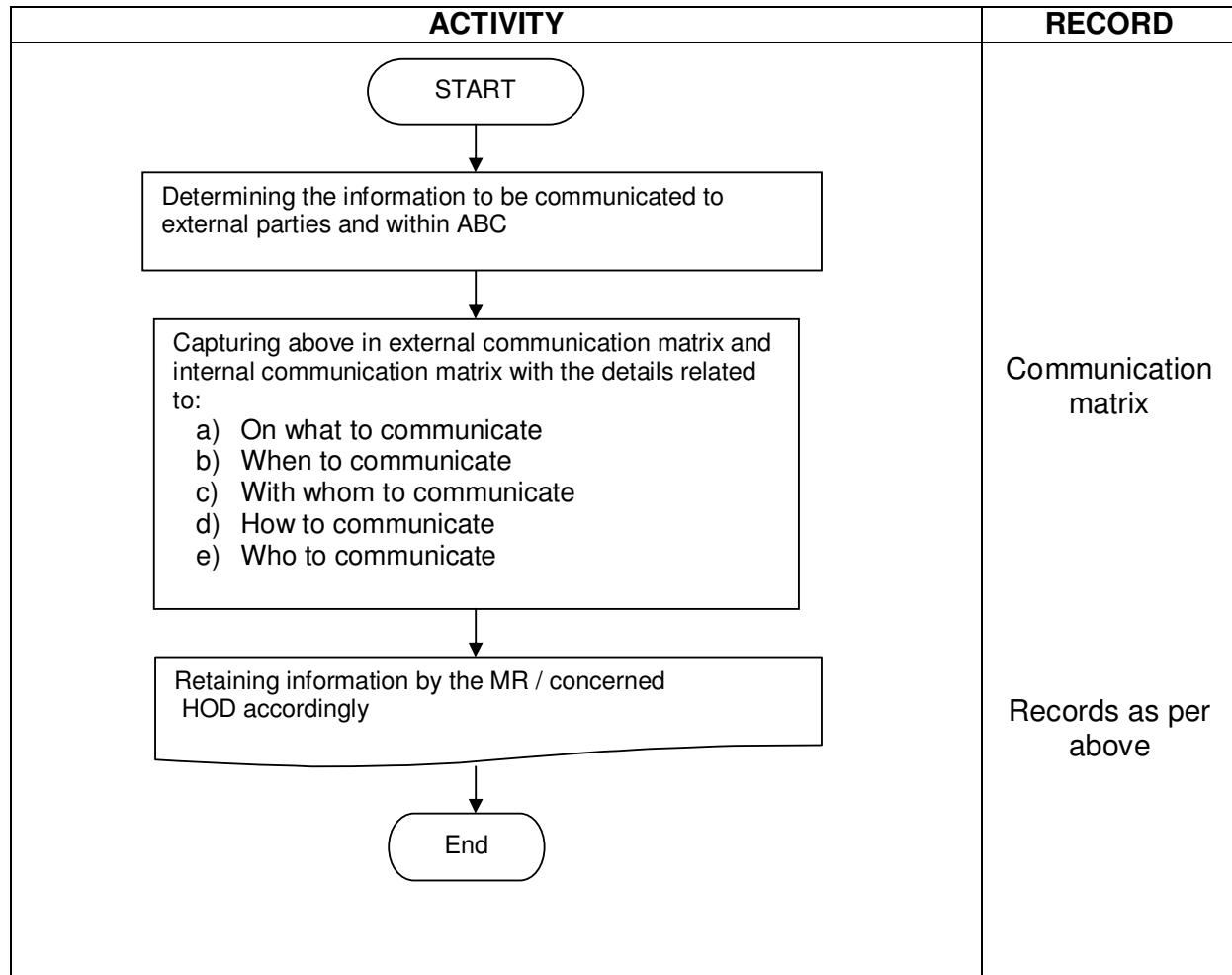
CEO
HODs

4. REFERENCE/RECORDS

Documented information retained (records) as per communication matrix.
WI- Communication

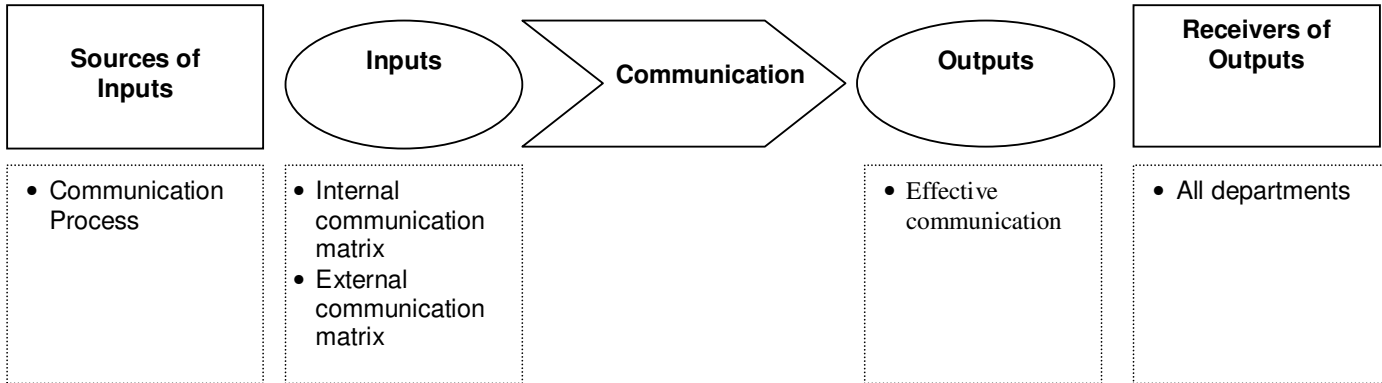
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6. PROCESS MAP



7. PERFORMANCE INDICATORS

- Deviation to communication matrix

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EMS OPERATIONAL CONTROL (EMS/PCS/08)

1. OBJECTIVE

Define a procedure for EMS operational control procedures

2. BOUNDARY

Applicable to all identified significant Environmental aspects.

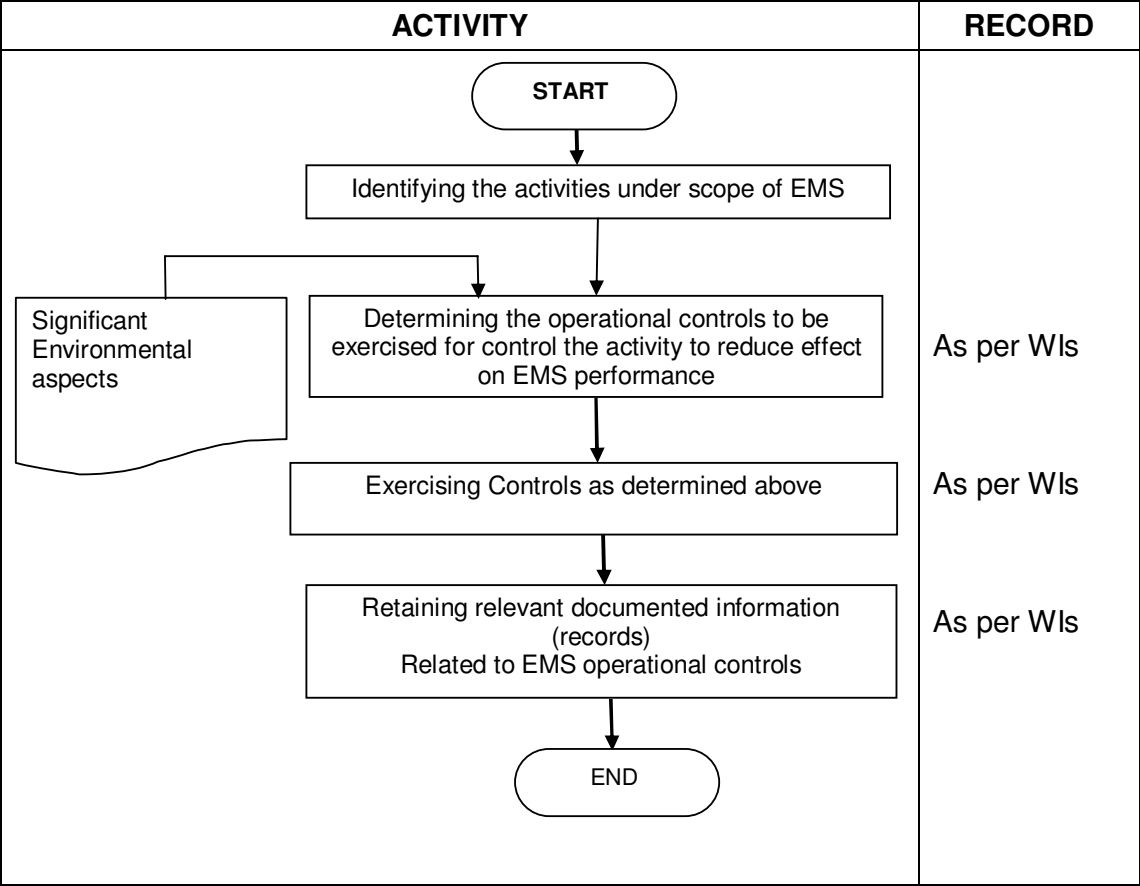
3. PROCESS OWNER

HOD s

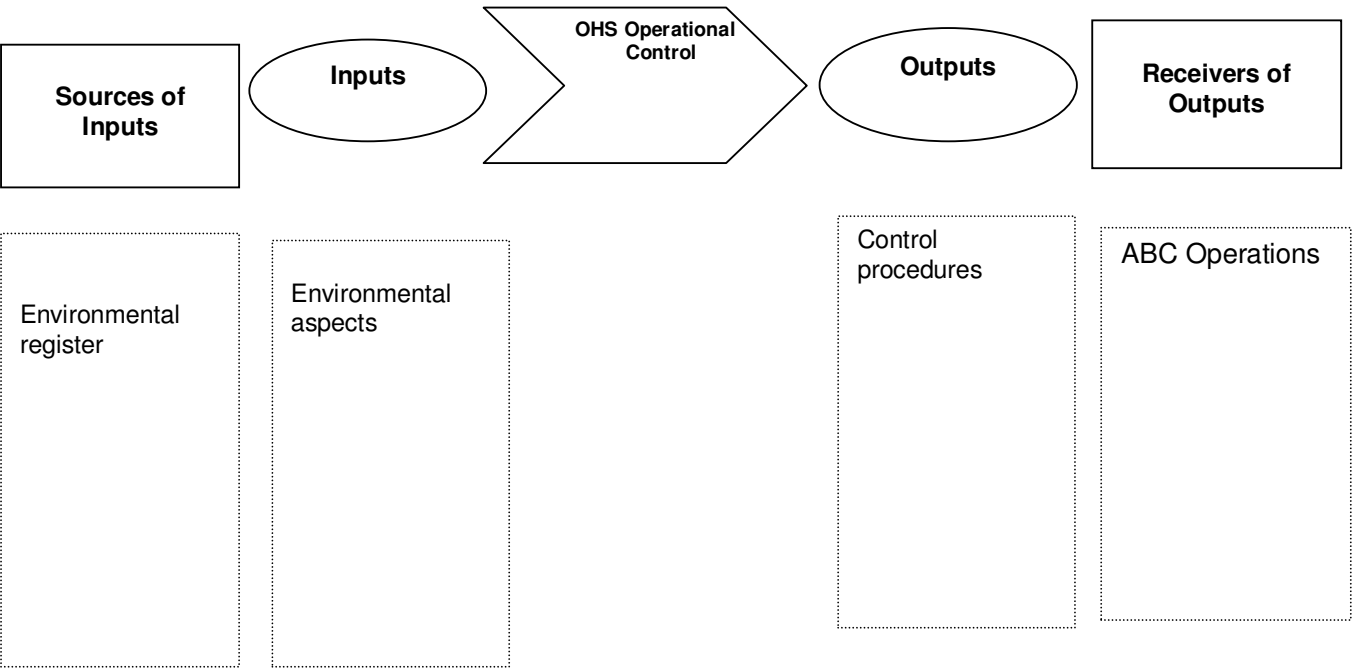
4. REFERENCE/RECORDS

Work instructions/ OCPs

5. PROCESS MAP:



6. PROCESS MAP



7. PERFORMANCE INDICATOR

- No. of incidents due to not exercising effective Operation Controls

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EMERGENCY PREPAREDNESS AND RESPONSE (EMS/PCS/09)

1. OBJECTIVE

To be in preparedness, for the effective control of any emergency situations, that could arise within the factory/office premises.

2. BOUNDARY

Emergency preparedness, Preparation of mock drill schedule to conducting mock drills & report preparation.

3. PROCESS OWNER

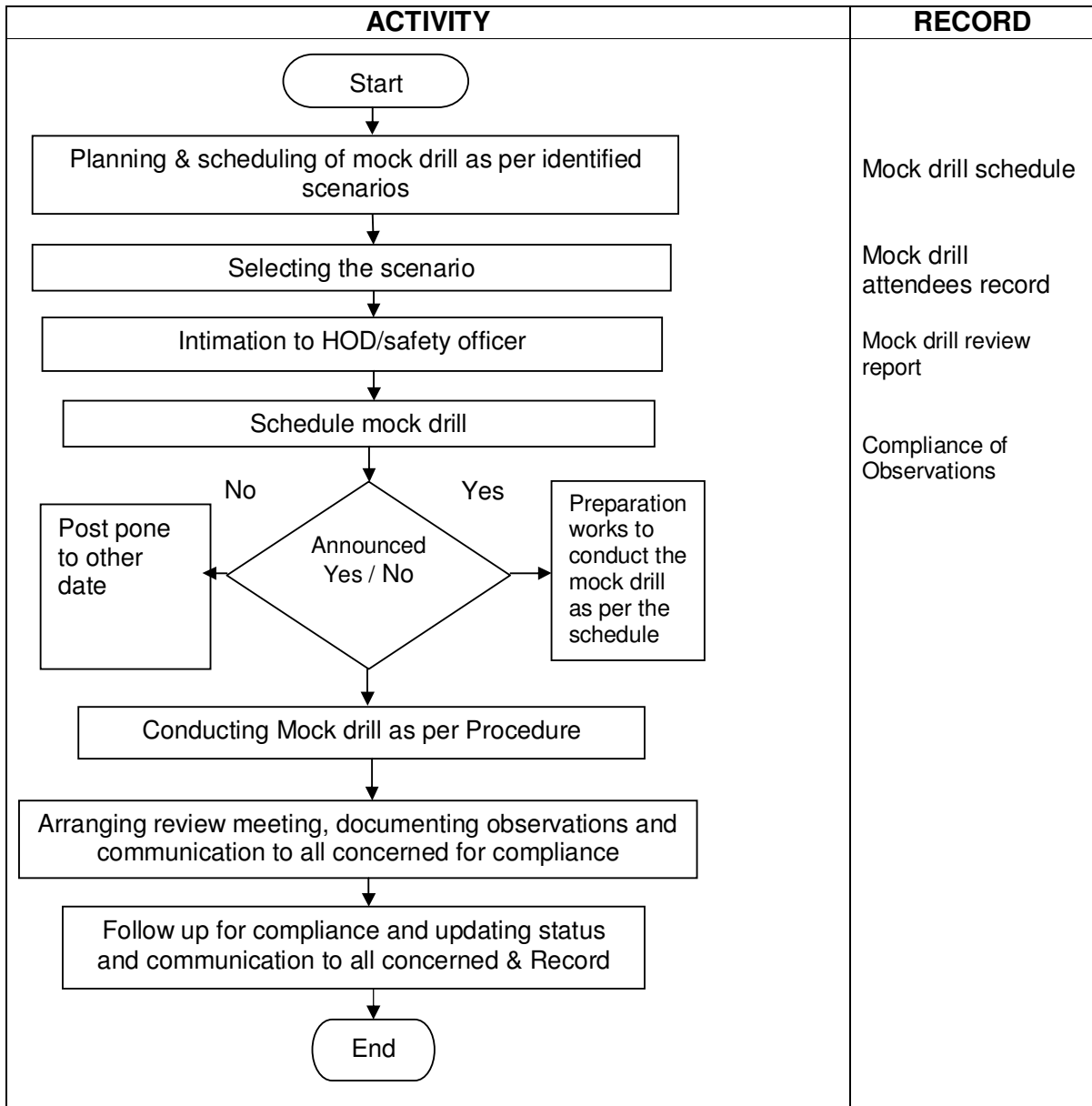
HOD-Safety

4. REFERENCE/RECORDS

- WI for ABC
- List of Fire fighters
- List first aiders
- List of First aid medicines
- Mock drill schedule
- Mock drill reports

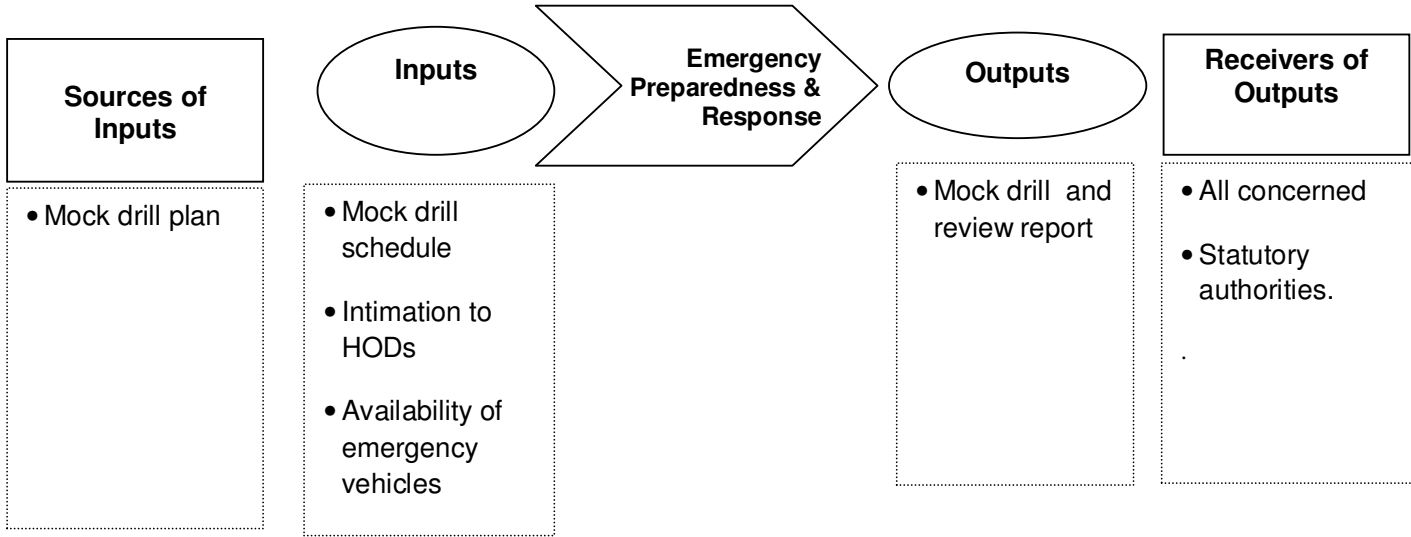
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5. PROCESS FLOW SHEET



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6. PROCESS MAP



7. PROCESS MEASURES

- No. of Non-Conformances observed during mock drills

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EMS PERFORMANCE EVALUATION (EMS/PCS/10)

1. OBJECTIVE

To monitor EMS performance and evaluation of compliance based on parameters.

2. BOUNDARY

Monitoring of all EMS and Legal & other requirements.

3. PROCESS OWNER

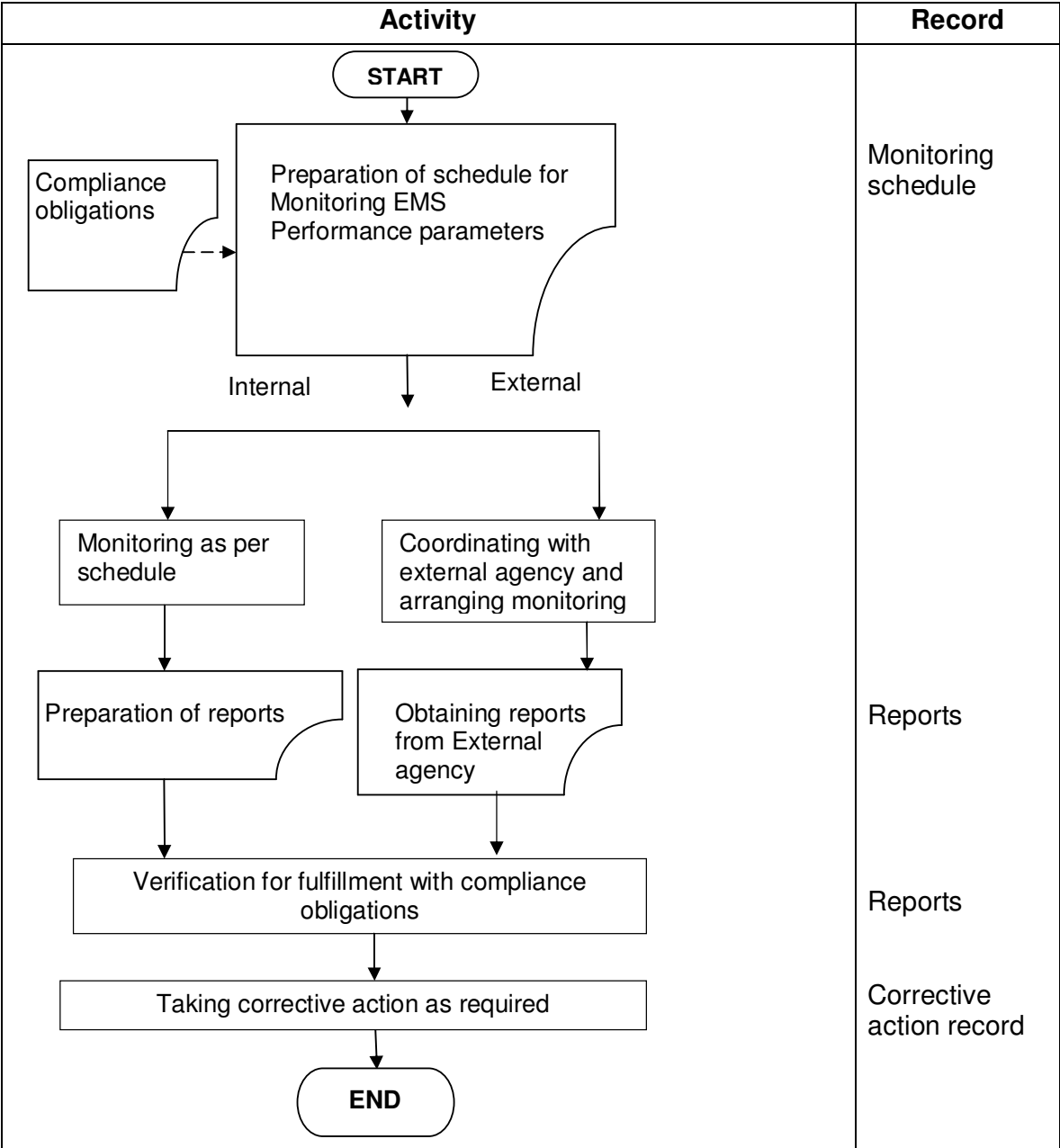
HODs

4. REFERENCE/RECORDS

EMS performance indicators monitoring schedule

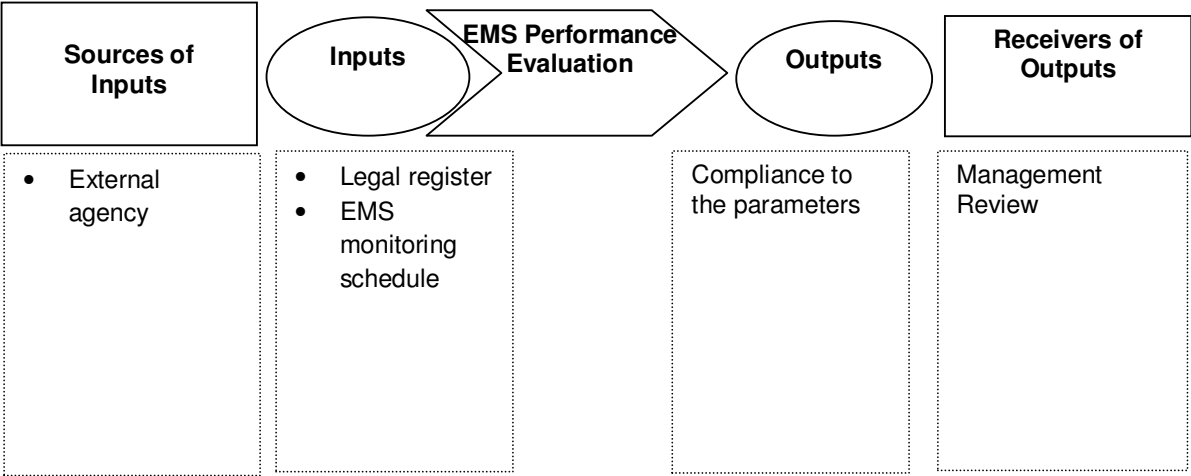
EMS performance indicators monitoring record / reports

5. PROCESS FLOW SHEET



ABC	<p align="center">Environmental Management System</p> <p align="center">PROCESS MANUAL</p>	DOC No.: ABC/EMS-P/ 001 Rev. No. : 00 Date : 01.01.2023 Page : 44 of 54
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6. PROCESS MAP



7. PROCESS MEASURES

- a) Adherence to EMS parameters monitoring schedule

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EMS NONCONFORMITIES AND CORRECTIVE ACTION (EMS/PCS/11)

1. OBJECTIVE

To implement corrective action to eliminate the causes of detected non-conformities

2. BOUNDARY

This process covers EMS nonconformities.

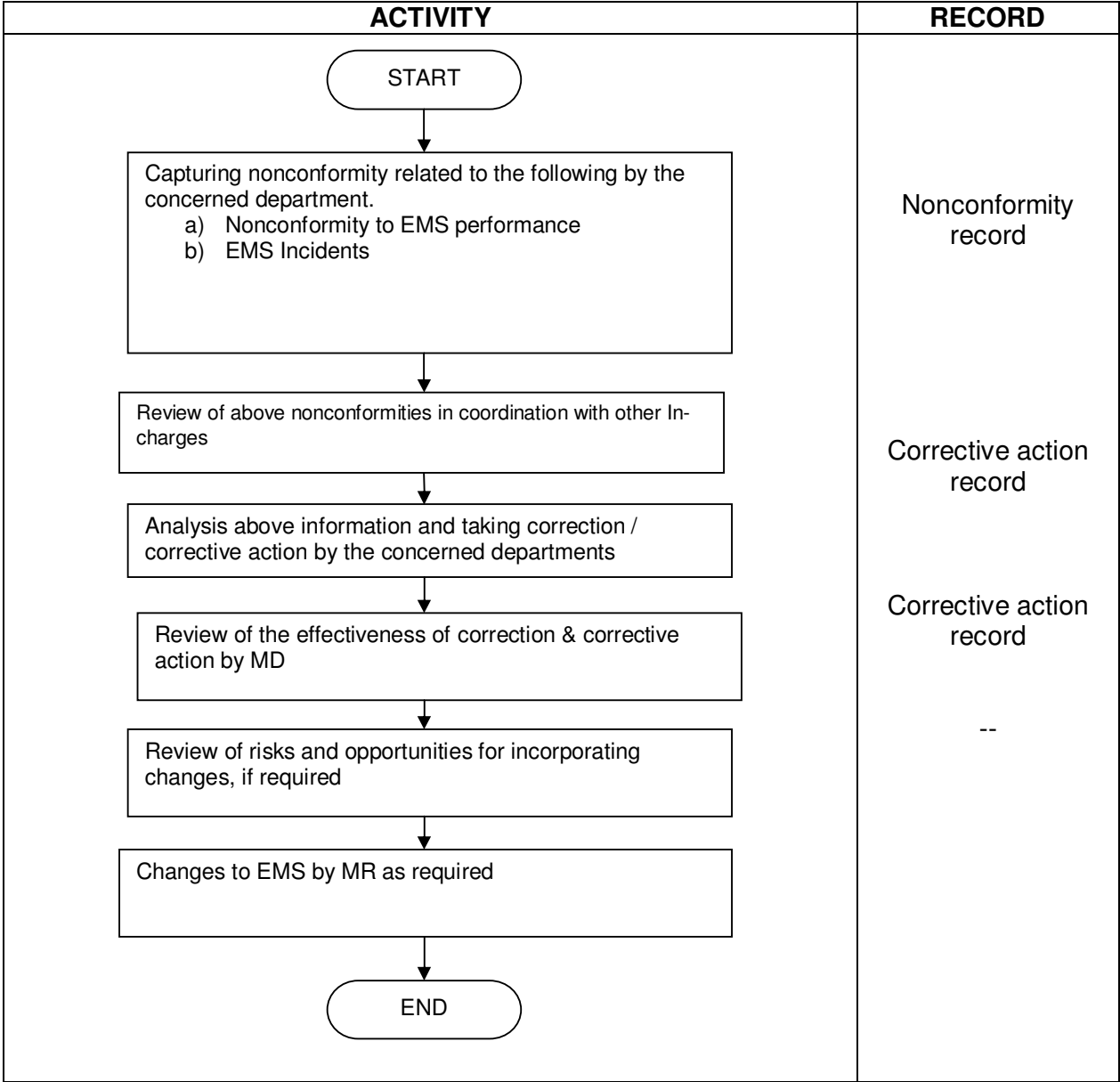
3. PROCESS OWNER

MR
HODs

4. REFERENCE/RECORDS

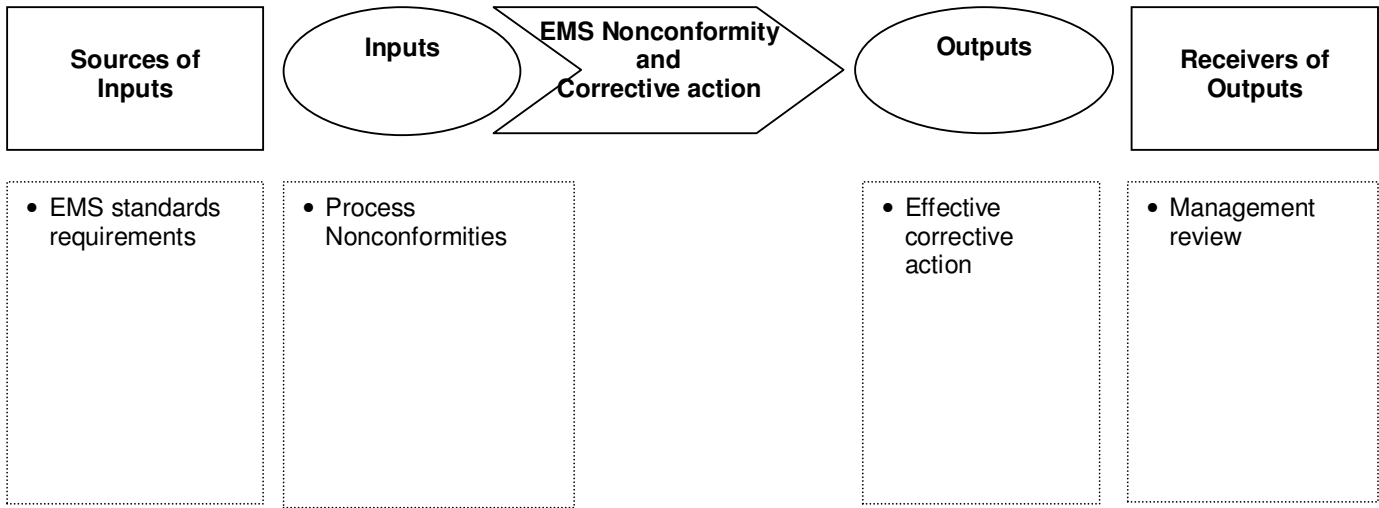
- Nonconformities and corrective action record

5. PROCESS FLOW SHEET



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6. PROCESS MAP



7. PERFORMANCE INDICATORS

- No. of repeated Nonconformities

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INTERNAL AUDIT (EMS/PCS/12)

1. OBJECTIVE

To carry out internal auditing to determine whether EMS

- conforms to the planned arrangements, to the requirements of ISO 14001 and to the EMS established by ABC
- Is effectively implemented and maintained.

2. BOUNDARY

This applicable to all processes of EMS based on ISO 14001:2015 standard.

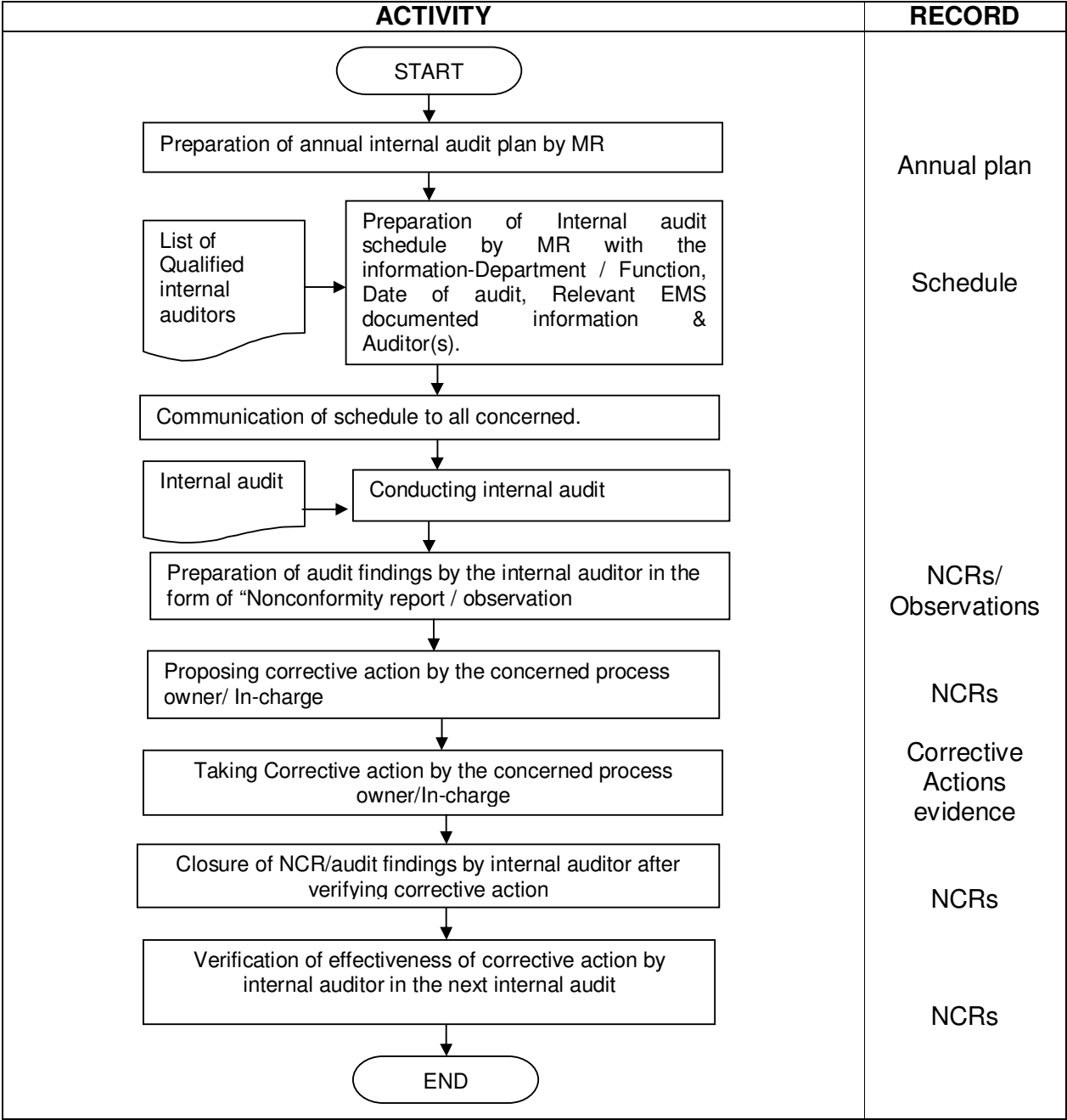
3. PROCESS OWNER

MR
HODs

4. REFERENCE/RECORDS

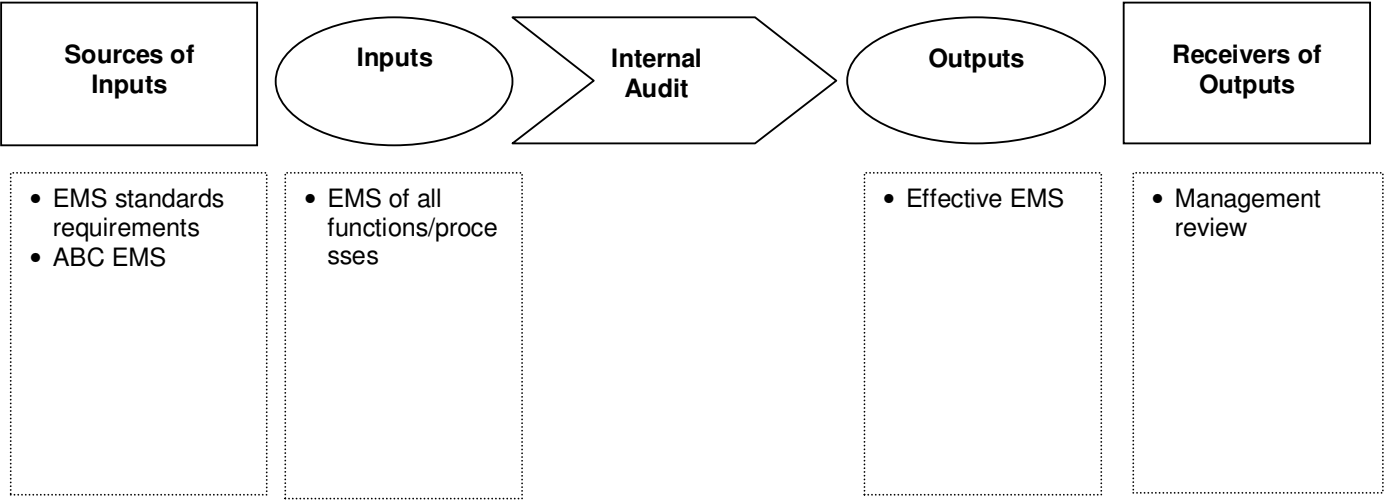
- Internal Audit Plan
- Internal Audit Schedule
- Nonconformity for Internal Audit
- Internal Audit Nonconformities - Summary

5. PROCESS FLOW SHEET



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6. PROCESS MAP



7. PERFORMANCE INDICATORS

- No. of audits per year planned vs. conducted.

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MANAGEMENT REVIEW (EMS/PCS/13)

1. OBJECTIVE

Review the effectiveness of EMS to ensure its continuing suitability, adequacy, effectiveness and alignment with the strategic direction of ABC.

2. BOUNDARY

Conducting management review as per agenda based on inputs of ISO 14001:2015 standard.

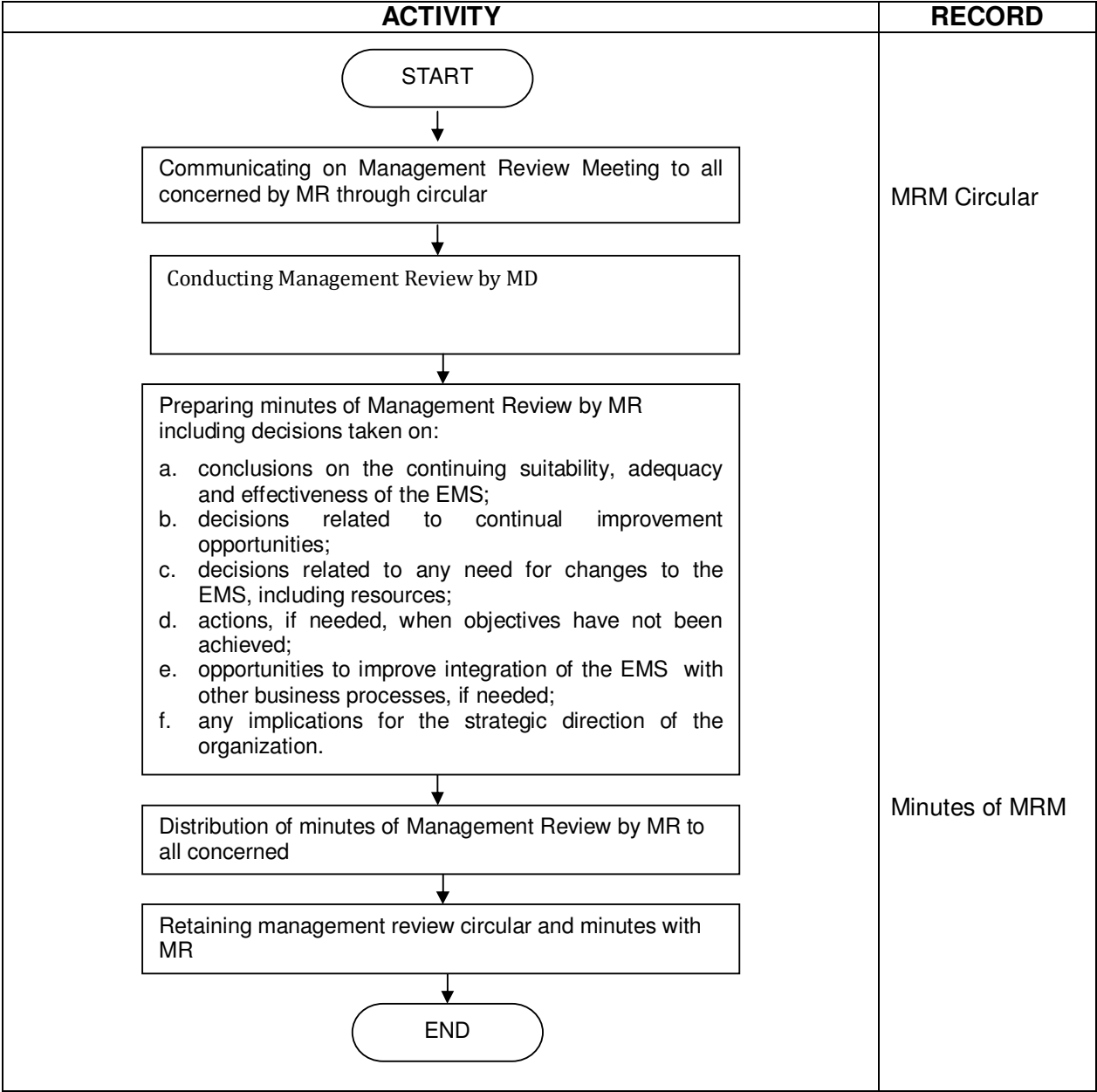
3. PROCESS OWNER

CEO
MR

4. REFERENCE/RECORDS

- Management Review Circular
- Minutes of Management Review meeting

5. PROCESS FLOW SHEET



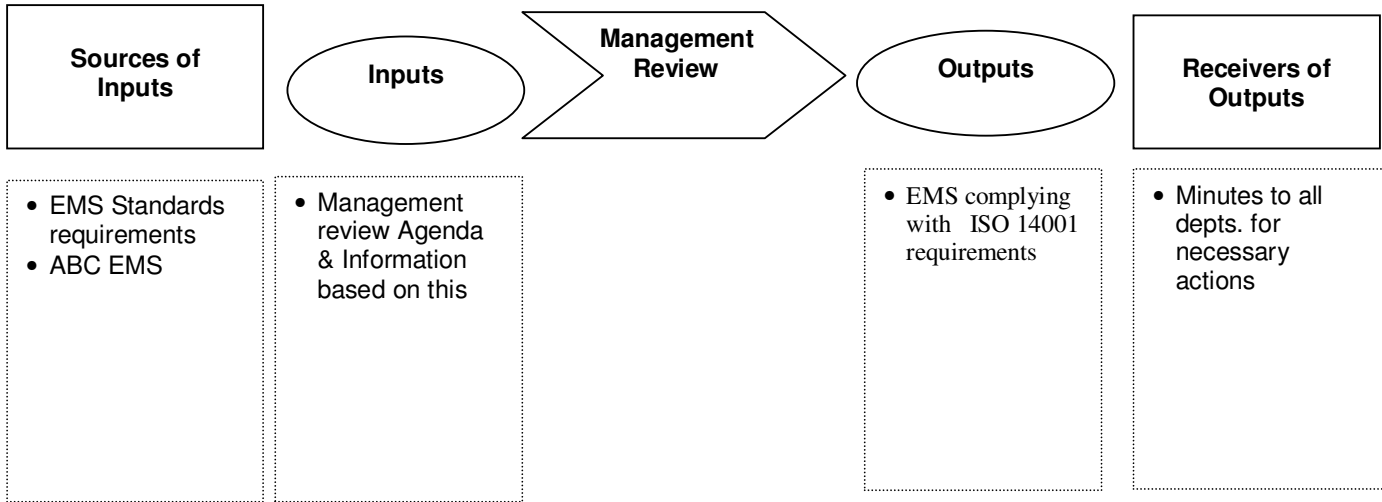
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EMS Management Review Agenda:

Sl.	Agenda Point
a.	Status of actions from previous management review;
b.	Changes in external and internal issues that are relevant to the EMS;
1	Changes in the needs and expectations of interested parties
2	Changes in compliance obligations
3	Changes to Environmental aspects
4	Changes to risk and opportunities
c.	Extent to which EMS Policy& objectives have been met
d.	EMS performance including trends in
1	Non conformities and corrective action
2	Monitoring and measuring results
3	Fulfilment of its compliance obligations;
4	Audit results
e.	Adequacy of resources
f.	Relevant communication from interested parties, including complaints
g.	Opportunities for continual improvement

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6. PROCESS MAP



7. PERFORMANCE INDICATORS

- EMS MRM scheduled Vs Conducted