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| **This section to be completed by initiator: NAME: David Bailey** | | | | |
| **DESCRIPTION OF CHANGE (explain):** (attach supporting document as needed) | | | | |
|  | | | | |
| The Lock Out Tag Out procedure currently disconnects the small bagger on the ground level. This unit needs to continue running for roughly an hour after the mixer has been turned off to empty out the remaining material that has been batched. The mixer can not be cleaned out while doing so as the LOTO put in place for the mixer also effects the small bagger. The proposed change is to remove the small bagger from this loop, so that both jobs can be done simultaneously. | | | | |
| **REASON FOR CHANGE (explain):** (attach supporting document as needed) | | | | |
| To reduce the amount of time for change overs on the High Intensity Mixer unit. | | | | |
| **EXPLAIN IMPACT CHANGE WILL HAVE ON OPERATIONS (include EH&S and Quality Management System impacts):** | | | | |
| Making this change will allow the operators to cleanout the mixer on the HIM while the bagging operator is finishing up bagging the last batch. This will give us an opportunity to save up to an hour of time during the changeover process. | | | | |
| |  |  |  | | --- | --- | --- | | **ANNUAL SAVINGS: (by originator)** | **INVESTMENT (by planner)** | **PAYBACK ROI (optional)** | | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Describe Benefits (required)** | **$ Value (optional)** | **Describe Costs (optional)** | **$ Value (optional)** | **Years:**    **Return:** | | Will reduce changeover time for HIM |  |  |  | | | | | |
|  | **REQUIRED** | **OPTIONAL** | **NAME** | **DATE** |
| Site Manager | X |  | Brad Fogle |  |
| Quality Manager | X |  | Sherri Pettigrew |  |
| EH&S Manager | X |  | Lori Chalker |  |
| Finance Manager | X |  |  |  |
| Purchasing Manager |  |  |  |  |
| Engineering Manager |  |  | Jared Varner |  |
| R&D Manager |  |  |  |  |
| Supply Chain Manager |  |  |  |  |
| Product Manager |  |  | Tom Steele |  |
| Lean Manager |  |  | William Morganfield |  |
| Other |  |  |  |  |
| Other |  |  |  |  |
|  | | | | |
| **AUTHORIZATION SECTION:**  ***Check Appropriate Box:***Change request Approved  or Denied  ***By (Site Management):*** ***Date:*** | | | | |
|  | | | | |

If the Project Checklist Risk Assessment (Part II) does not need to be completed and no further action is required Stop here.



If approved AND Project Checklist Risk Assessment is required, proceed to below to Part II, to ensure that all aspects of the project and/or process quality/safety are considered, as well as risks and opportunities.

**1 NOTE: Procedural and Formula changes that do not involve new raw materials are not included in this Management of Change (MOC) process and if changing a supplier of an existing Raw Material, use the AU-PW-O01 *Change Control Procedure* for procedure and formula changes. Some simple (plug and play) equipment replacements (same or similar model) may not require Part II. This will be decided on a case by case basis between the initiator and the managers listed above.**

|  |  |  |  |  |
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| **Title: PART II - Project Checklist Risk Assessment** | | | Approved by: | S. Miglionico/S. Pettigrew |
| Location: Augusta, Ga. | Equipment: | | Issue/Rev Date: | 3/15/2018 |
| Primary Responsible: Project Manager | Purpose (Why): To provide a consistent risk assessment tool for reviewing New Equipment, Equipment Modifications, New Raw Material, Packaging and Infrastructure and/or Processes (including equipment relocation) before installation, use, or application in a way that prevents injuries and accidents, increase safety awareness, identify facility hazards, and ensure proper equipment installation. This risk assessment is a means to drive a custom pre-startup safety review for each project and to ensure that all aspects of the project and/or process quality are considered. | | | |
| Scope (Where): All operational systems and processes related to the facility. | | | | |
| **Reviewer:** | |  | | |
| **Date:** | |  | | |
| |  |  |  | | --- | --- | --- | | **This change is for:** | **Check Only One** | **Instructions:** | | Replace in kind equipment and/or direct replacements. |  | **STOP.** You do not need to fill out this checklist or the *Risk Mitigation Control Log.* | | Formulation change (no new raw material), vendor change, or procedure change |  | **STOP.** You do not need to fill out this checklist or the *Risk Mitigation Control Log.* Utilize AU-PW-O01-Change Control Procedure and AU-PU-O01-Purchasing Procedure and documents associated with the procedures to ensure proper changes are made and approved. | | New Raw Material (without new or modified equipment) |  | Send Safety Data Sheet(s) to EHS Manager for review and fill out *ONLY* ***Sections 7, 8 and 9*** *(includes Risk Mitigation Control Log)* | | New chemical or modification in chemical application. |  | Send Safety Data Sheet(s) to EHS Manager for review and fill out *ONLY* ***Sections 7, 8 and 9*** *(includes Risk Mitigation Control Log)* | | New Equipment or Modification (includes existing and new sites) |  | Send Safety Data Sheet(s) to EHS Manager for review and fill out ALL ***Sections 1 through 9*** | | Packaging Change |  | Send new packaging information to Procurement Manager for review and fill out *ONLY* ***Sections 7, 8 and 9*** *(includes Risk Mitigation Control Log)* | | Process or Production Relocation to a different site or toll manufacturer |  | Fill out *ONLY* ***Sections 7, 8 and 9*** *(includes Risk Mitigation Control Log)* | | | | | |

|  | **Yes** | **No or NA** | **Assigned to (if someone other than reviewer)** | **Details/Comments for YES answers (areas affected, additional info, etc.)** |
| --- | --- | --- | --- | --- |
| **1. Physical Conditions at Construction Phase** | Auto check boxes | |  |  |
| Moving equipment requiring the use of guards? |  |  |  |  |
| Vessels or Piping under pressure (air/water/gas)? |  |  |  |  |
| Excavation, trenching or underground work? |  |  |  |  |
| High temperature exposure? |  |  |  |  |
| Radioactive? |  |  |  |  |
| Noise? |  |  |  |  |
| Chemical exposure? |  |  |  |  |
| Welding? |  |  |  |  |
| Excessive use of water providing wet conditions? |  |  |  |  |
| Equipment/work at elevations above first floor? |  |  |  | 3rd floor of the HMI unit where the LOTO disconnect is located |
| Other (Specify) |  |  |  |  |
| **2. Environment, Health & Safety** |  |  |  |  |
| Are there contractors without pre-approval? |  |  |  |  |
| Will there be any impact on traffic, internal or external roads, railroads, building, property or current equipment locations? |  |  |  |  |
| Will the use of an existing chemical be increased or applied in a different area or manner? |  |  |  |  |
| Will new packing or process equipment be installed? |  |  |  |  |
| Will there be any changes to, or additions of, machine guarding? |  |  |  |  |
| Will utility flows (steam, water, electrical power, air, compressed gases) be moved, added, changed or eliminated? Note: Also answer YES if any disconnects will be added or relocated. |  |  |  |  |
| Will there be any changes to, or additions or relocations of fire protection equipment? Include the following items when applicable in the ***Comments*** column: a. Fire walls, b. Floors, and ceilings, c. Fire doors, d. Sprinkler systems, e. HVAC ducts through fire walls, f. Equipment and equipment structures (monitor nozzles, deluge systems, foam systems), g. Fire extinguisher, |  |  |  |  |
| Will new emissions be produced or existing emissions modified (air, water, or sewer)? Includes any relocation of emission controls. |  |  |  |  |
| Will any new solid or hazardous waste be generated? If **yes,** specify which type. |  |  |  |  |
| Will there be a formula or raw material change for any products? |  |  |  |  |
| Will any of the following be added or modified? a. Pressure vessels, b. Tanks |  |  |  |  |
| Will there be installation or modification of underground or above ground emergency fire (water) lines? |  |  |  |  |
| Will there be any site clearance? |  |  |  |  |
| Will the project affect water use? |  |  |  |  |
| Will operating or mechanical/electrical procedures be modified? |  |  |  | The PLC that controls the small bagger at the ground floor will be isolated from the LOTO loop. |
| Will there be any increase or decrease in loading to sanitary sewer or storm sewer? |  |  |  |  |
| Will plant combustors (boilers, heaters, ovens, etc.) including rental boilers, be added or modified? |  |  |  |  |
| Will any confined spaces be added? |  |  |  |  |
| Will there be any changes to electrical and/or instrumentation systems? |  |  |  | Moving the PLCs that control the small bagger away from the LOTO loop |
| Will any robotic systems be installed? |  |  |  |  |
| Will the project involve the use of any personnel for non-routine construction activity? |  |  |  |  |
| Will a permanent radioactive source, radio-frequency devices or lasers be added or removed? |  |  |  |  |
| Will there be any changes to HVAC (adding, removing or modifying equipment)? |  |  |  |  |
| Will there be changes to the “work area” (height, reach, position, repetition, force, etc.)? |  |  |  |  |
| Will the change result in an increase in noise levels? |  |  |  |  |
| Will odors generated from this change be detectable beyond the plant property line? |  |  |  |  |
| Will the removal or the disturbance of asbestos-containing materials or lead-contaminated paint be required? |  |  |  |  |
| Will there be a change in warehouse commodities, storage arrangements, or pallet usage? |  |  |  |  |
| Will this project impact site security during or after the change? Consider the following issues in the analysis: a. Change in traffic through gates (personnel, vendor, contractor), b. Effect on perimeter fences or gates, c. Proprietary information security  d. Need for additional access ID badges, and e. Need for confidential disclosure agreement requirements. |  |  |  |  |
| Other: (Specify) |  |  |  |  |
| **3. Operation** |  |  |  |  |
| Starting/Stopping/Emergency Switches? |  |  |  |  |
| Planned location of controls where easily accessible? |  |  |  |  |
| Material handling concerns? |  |  |  |  |
| Mobile equipment required? |  |  |  |  |
| Other: (Specify) |  |  |  |  |
| **4. Maintenance** |  |  |  |  |
| Isolation Valves? |  |  |  |  |
| Valves Identified and Blanked? |  |  |  |  |
| Safe Access to Equipment? |  |  |  |  |
| Lockout/Tag Out Procedures and Drawings? |  |  |  | The change will remove the vibrator and the bagging unit from the LOTO circuit and added to their own circuit. |
| Confined Space(s) and Inventory List? |  |  |  |  |
| Access Controls Required? |  |  |  |  |
| Identification of Switches/Starters? |  |  |  |  |
| Identification of Interlocks/Alarms? |  |  |  |  |
| Will a PM schedule be put in place? |  |  |  |  |
| **5. Safety Equipment** |  |  |  |  |
| ANSI Approved Safety Shower/Eye Wash Station? |  |  |  |  |
| Alarms-Audible or Visible? |  |  |  |  |
| Lighting Adequate/Emergency Lighting? |  |  |  |  |
| Hazard Detection Instrument? |  |  |  |  |
| Grounding/Bonding/Lightning Protection? |  |  |  |  |
| Guards and Shields/Guardrails? |  |  |  |  |
| Safety Signs/Safety Painting? |  |  |  |  |
| Back Flow Prevention? |  |  |  |  |
| Flammable Storage Cabinets? |  |  |  |  |
| Relief Devices Installed? |  |  |  |  |
| Machine specific LOTO procedure? |  |  |  |  |
| **6. Engineering** |  |  |  |  |
| Permits/Licenses obtained or in process? |  |  |  |  |
| Safety Data Sheets submitted to EHS Dept.? |  |  |  |  |
| Drawings to be supplied to Drafting Dept.? |  |  |  | Update electrical drawings |
| Ventilation System Design? |  |  |  |  |
| Safety Systems and Interlocks Described? |  |  |  |  |
| Mechanical Integrity/Quality Assurance? |  |  |  |  |
| Documentation of Codes and Design Practices? |  |  |  |  |
| Process Limits Documented? |  |  |  |  |
| **7. Standard Operating Procedures** |  |  |  |  |
| Will SOP's, Work Instructions, Formulations or Forms need to be modified or created for this change? |  |  |  | SOP for the process is being created as a part of the current SMED Kaizen event in Specialties |
| Will the Bill of Materials or any other information in E1 need revision? Explain YES in ***Comments***. |  |  |  |  |
| Will Maintenance procedures be needed (lubrication point/PM schedules)? |  |  |  |  |
| Will additional Safety procedures be needed (specific to area or equipment)? |  |  |  |  |
| **8. EMS/QMS** |  |  |  |  |
| Will this change go through a qualification procedure (PPAP, production trials, etc.) prior to project completion and release to production? |  |  |  |  |
| Is calibration of equipment required for this change? |  |  |  |  |
| Will there be any changes to raw materials, suppliers or packaging as a result of this change? List the changes in the *Details/Comments* section. |  |  |  |  |
| Will this change need to be communicated to internal or external parties (including customers)? If so; to whom, by whom, how and when? |  |  |  |  |
| Will this change require training? If so to whom, by whom, how and when? |  |  |  | Training will be outlined in the SOP for the change over |
| Will this change result in a change to the significant aspects in regards, to its environmental Impact? |  |  |  |  |
| **9. Risks and Opportunities** |  |  |  |  |
| Have the risks, both positive (opportunities) and negative, been assessed and entered into the *Risk Mitigation Control Log*? Please attach if completed or submit to QA Manager when complete. |  |  |  |  |
|  |  |  |  |  |

Please indicate distribution of this form and the *Risk Mitigation Control Log,* below:

|  |  |  |
| --- | --- | --- |
| **Indicate Distribution with an X:** | | |
| Site Manager (required) |  | **Date Submitted to Distribution list:** |
| Department Manager |  |
| Quality Manager |  |
| EH&S Manager |  |
| Engineering Manager |  |
| Finance Manager |  |
| Purchasing Manager |  |
| R&D Manager |  |
| Supply Chain Manager |  |
| Other |  |
| Other |  |

|  |  |  |  |  |  |  |  |
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| **RISK MITIGATION LOG** | | | | | | |  |
|  | | | | | | |  |
| Type of Risk  (ie: Safety, Environmental, Quality, etc.) | Description of Risk | Risk Mitigation Action Required | Responsible Person | Must be Completed prior to Operation | To be Completed after Operation | Target Date for Completion | Opportunities from Risk |
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| Document Change Table | | Original Date | 11/17/2017 |
| Change Date | Summary of Changes | | Reviewed By |
| 11/17/17 | New Form | | L. Chalker, S. Pettirew, S. Miglionico |
| 3/15/2018 | Changed the 3 documents to contain all in 1 MOC. Made Misc. changes during meeting of MOC training. | | S.Miglionico, S.Pettigrew, L.Chalker |
| 7-20-2018 | Added a question to section 8 and changed it from QMS to EMS/QMS | | S. Miglionico |
| 8-21-2018 | Section 2- 8 questions down added the following” Includes any relocation of emissions controls.” | | S. Miglionico |
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