

UGEE CHEMICALS

Plant General SOP

SOP

Standard Operating Procedure

HOW TO WRITE A STANDARD OPERATING PROCEDURE

SOP #: UCL/IBDSITE/CD/Q/01.0

Issuance Date:

Revision Date:

Maximum 2 years from
Effective Date

20 working days from
the issuance date.

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PURPOSE

- This SOP provides a uniform means for development, review, approval, distribution, maintenance, and deployment of new and revised SOPs.

SCOPE

- Anyone originating, reviewing, and approving Standard Operating Procedures will follow this Standard Operating Procedure (SOP).

RESPONSIBILITY

- Site QA Leader: Makes sure that appropriate SOPs are prepared or revised to meet the requirements of the company's QA goals & local regulatory guidelines.
- Site HSE Leader: Makes sure that appropriate SOPs are prepared or revised to meet the Company's HSE & Hygiene requirements.
- The Plant/ Dept Written Procedures Owner: Coordinates issuance, maintenance & records of new and revised SOPs, the SOP Master File and Index. Ensures SOP numberings are in compliance with Quality requirements.
- **SOP Owner:** Complies with all requirements of the is SOP and ensures it is mapped as a skill to all eligible roles on Learning platform.

PROCEDURE

FORMATTING

1. All SOPs will use the format and heading detailed in this SOP (See attachment 1).

1.1 Header -

1.1.1 The header will consist of a Title, Type/Category of SOP, SOP Number, Issue Number, Page Number, Issuance Date, Revision Date, Effective Date.

SOP OWNER	QA APPROVAL	HS&E APPROVAL	AUTHORISATION
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Adio Sakiru			Site QA: Alawode Olujide
Date: 1000201	Date:	Date:	Date: (0 18 2012

	(PLANT NAME) (Type/Category of SOP)		SOP Standard Operating Procedure
	SC	OP TITLE	
SOP #: Organization Name/Plant and	Issuance Date:	Last date on the Signa Block	ature
Department/Control document/Owning Dept/Seria #. Version number	Revision Date:	Maximum 2 years fro Effective Date	om
	Effective Date:	20 working days from issuance date.	the

1.1.2 The SOP Number, Issue Number and page number must be included in the header on all subsequent pages and attachments using Arial font size 8. For example:

SOP No: UCL/IBDSITE/CD/Q/01.0 Page 2/6

2. Footer-

2.1 The footer will contain at least 2 signatures. The names of the signatories will be printed on the SOP. These signatories are:

<u>SOP Owner</u>: The person writing or revising the SOP who must be a subject matter expert in the field/area in question.

QA Approval: The QA Manager approves the SOP.

HS&E Approval: The HS&E Manager approves the SOP where applicable.

<u>Authorization</u>: The following people can authorize an SOP: The Plant Manager, Department Head, or the Line Manager. In procedures where Site QA has to authorize this is also indicated beside the name as Site QA:.

2.2 The footer will appear on the first page of the SOP and on every attachment of the SOP as shown below:

SOP OWNER	QA APPROVAL	HSE APPROVAL	AUTHORISATION
Name	Name	Name	Name Date:
Date:	Date:	Date:	

SOP Number

3.1 Site quality assurance SOP and departmental SOP numbering system shall be in compliance with site document requirements.

<u>The SOP Numbering shall be as follows:</u> Organization name slash (/) plant and originating department slash (/) Control document Slash (/) Owning department slash (/) SOP name (dot) version number i.e Organization Name/Plant and originating Department/Control document/Owning Department/SOP title/ Serial #. Version number. For example, UCL/IBDSITE/CD/Q/SOP of SOP/01.0

DEPARTMENT PREFIX:

Department/Area	Prefix	
Fabric & Home Care (General)	FHC	
Making Dept (FHC)	MSG	
Packing Dept (FHC)	PSG	
SNO-Warehouse	WH	
Lab (QA)	QALAB	
Plant General	SITE	
Human Resources	HR	
Clinic	MED	
Storeroom	STR	
Health Safety and environment	HSE	

- 3.2 The first 2 numbers of the SOP numbering reflect the serial number of the SOP as shown in the SOP tracking index. Serial number in this case will be a sequence of numbers showing the position of the SOP
- 3.3. The issue number is indicated after a full stop (.) and refers to the version number of the particular SOP in question. The first issue number for all SOPs would be one (01).

For example: The first issue of second SOP in MSG department under quality will be UCL/IBDMSG/CD/Q/02.01

- 4. Purpose A statement explaining the objective/intent of the SOP
- 5. Scope A statement detailing the activities/boundaries covered by the SOP's requirements.
- 6. Responsibility An outline of the organizations and/or individuals who must carry out the different tasks described in the SOP. These must be people that are eligible to be trained on the SOP.
- 7. <u>Procedure</u> The steps or actions required by the SOP listed in order of execution.
- 8. <u>Abbreviations:</u> This section is used to clarify meaning of any acronyms that might have been used in the body of the SOP. This is included as applicable
- 9. Attachments (where applicable) A listing of all attachments required by the SOP
- 10. For SOPs highlighting safety procedures not described in a JSP, the following headings must also be included immediately after the "responsibility" heading:
 - 9.1 Potential risks A summary of itemized list of all potential safety risks involved in executing the task.
 - 9.2 <u>PPE required</u> An itemized list of all the Personal Protective Equipment (PPE) required for executing the task in a safe manner.
- 11. The effective date of all SOPs will be a recommended maximum of <u>20</u> working days from the date of issuance.
- 12. The title of an SOP will be brief and will include key words relating to the topic to be covered. Avoid redundant titles such as those starting with "Procedure to ...".
- 13. The writing style should be direct and brief. All steps should be numbered.
- 14. SOP's will have a written qualification sheet and hands-on qualification/ step up card (as applicable) as an attachment. Qualification sheet must have at a minimum 10 basic questions that reflect purpose and

process described in the SOP (see attachment 2). Procedures that are practical based will require practical demonstration of the ability to perform the task stated via hands-on qualification/step up cards.

15. Font:

- 15.1 First level headings shall be bold, upper case letter with Arial font size 12 e.g. Scope, Purpose etc.
- 15.2 Second level headings shall be bold, upper case letters, underlined with Arial font size 10.
- 15.3 SOP Title shall be Arial font size 18
- 15.4 Body of procedure shall be normal case with Arial font size 10.
- 15.5 Headers on subsequent pages shall be Arial font size 8.
- 15.6 Line Spacing shall be 1.5 lines
- 16. Watermark "Uncontrolled if Not Stamped" with font Arial size "Auto" will be printed on all the pages of the SOP except the attachment.

INITIATION & REVIEW

- 17. Any person may identify the need for a written procedure. The initiator (owner) will prepare a draft using the standard format and distribute the draft. This distribution will consist of those personnel deemed appropriate and agreed to by the line manager for initial input and feedback.
- 18. All comments will be returned to the owner within five working days or as aligned. The owner will revise the draft copy as needed, determine if an additional comment period is required based on the significance of changes, and forward a final hard copy and an electronic copy to the written procedure system owner.
- 19. The written procedures owner will prepare the final version of the document for signature. This includes checking the format and ensuring that the procedure is complete and workable (This is called a dry run).
- 20. All SOPS must have been checked by the QA leader for compliance to the standards specified in this SOP before being passed to the site QA for approval.

APPROVAL

21. All procedures will have the approvals as indicated in the footer. (refer to section 2.1)

MASTER FILES

- 22. Reviewed and approved Plant General SOPs will be loaded on a designated space on One drive and share with the team where all personnel can have access to them.
- 23. Reviewed and approved departmental SOPs could also be loaded on a designated space on the each department One drive space or in folders where all personnel's can have access to them. The original hard copy of SOPs will be kept in a Master File. If any SOP is printed out or copies made from the original copy, it must be destroyed within 48 hours from the date of print-out. A copy of approved SOP stamped for the purpose of control placed in a folder must be kept at the place of use (Only distributed copies are stamped for control).
- 24. The written procedures system owner will maintain the index for the SOPs and store them in the Master File.
- 25. All original obsolete SOPs will be kept in an obsolete Master File for three (3) years following their superseded date. Departmental written procedures system owner shall keep obsolete departmental SOPs while Site written procedures system owner shall keep obsolete Plant General SOPs.

TRAINING & DEPLOYMENT

26. The SOP owner will define all the Eligible roles for the SOP in the Eligibility Matrix based on roles definition and skill need assessment. The SOP owner then sends a copy of the Eligibility Matrix to the Site Learning and development owner within 24hrs for it to be updated on Learning platform for all applicable roles.

- 27. The department/plant written procedures system owner aligns with the dept/plant learning & development system owner to deploy the new SOPs. The learning & development system owner will track to confirm the deployment for effective implementation of new SOPs.
- 28. Deployment and qualification should be completed before the effective date of a new/revised SOP.
- 29. Refresher period for SOP trainings shall be determined by the subject matter expert (SME) and maintained in e-learning. This will be indicated on the SOP tracking index (attachment 3).
- 30. All SOPs with qualification sheet will have model answers created. This forms part of the attachment.
- 31. Classroom training on SOPS will be done for the first version of all SOPs and for new hires and transferees. Subsequent refresher will be handled via "" or classroom as necessary.
- 32. The SOP content will be used to define the target proficiency level on the training platform i.e e-manufacturing.
- 33. A location matrix (Attachment 12) will be maintained for and displayed at all locations where SOPs are distributed.

REVIEW

- 34. All existing SOPs will be formally checked annually to determine if revisions are needed.
- 35. If no revisions are required, copies of the signed SOP Review/Update Form (see Attachment 4) will be filed with the appropriate SOP in the Master File.
- 36. The review form will also be used to document appropriate alignment of any deviation (delays in updates, pending updates inclusion in SOPs) and this will be filled with the SOP.
- 37. If revisions are required, same process for the new SOPs from steps 1 to 9 outlined above is followed.
- 38. SOPS must be reviewed & re-approved every 2 years from its effective date even if there are no changes.

SOP CHANGE CONTROL

- 39. A change control document will be filled by different roles highlighted in front of the task for all existing/new/revised SOPs using the SOP Change Control Form (see Attachment 5) at most 1 day before the effective date of the SOP, to confirm that all necessary requirements have been met.
- 40. Change Control Form is signed off by Departmental QA leader for Departmental SOP and Site written procedures system owner for Plant General SOP and filed with the appropriate SOP in the Master File
- 41. Copies of SOPs made for the purpose of distribution to other locations must be stamped for control and the location indicated on the SOP tracking sheet.

GREEN COLOUR

Procter & Gamble Nigeria
APPROVED COPY
Dept:
Copy No:
Authorized User:
Location:
Date:
Note: Use if stamp is in original

RED COLOUR

Procter & Gamble Nigeria

OBSOLETE COPY

DO NOT USE

SOP REVIEW & DEPLOYMENT

- 42. SOP review form will be filled for updates on reference global SOPs that does not impact the local SOP as a form of confirmation that the SOP is checked appropriately.
- 43. Written procedures system owner will monitor the validity of SOPs on monthly basis, will initiate SOP reviews

REASON FOR UPDATE

SOP No. UCL/IBDSITE/CD/Q/SOP of SOP/01.0

44. Reason for update will be indicated in all SOPs. Statement on reason for updates should not be more than 6 updates (inclusive of the current update to the SOP).

MANAGING EXCEPTION TO SOPS

- 45. The site will comply with all SOP requirement. If unavoidable, then a written explanation of the issue together with any potential resolution and timing will be submitted by the site QA manager to site leader.
- 46. All local SOP compliant gaps/deviations will be channeled to quality assurance leader for approval. Risk assessment and mitigation plans will be identified, and the deviation will be document via the local SOP on Managing Deviations and Exception

REASON FOR UPDATE: New SOP

End of Procedure

SOP RELATED ATTACHMENTS

Attachment 1 - Blank SOP Format

Attachment 2 - SOP Qualification Format

Attachment 3 - SOP Index Format

Attachment 4 - SOP Review / Update Form

Attachment 5 - SOP Change Control Form

Attachment 6 - Deployment Cover letter

Attachment 7 - Model Answers Format

Attachment 8 - Training & Qualification Sheet

Attachment 9 - Step Up Card

Attachment 10 – Model Answers

Attachment 11 - Eligibility Matrix

Attachment 12 -Location Matrix