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Trainee:

INTERMEDIATE CRUTCHING OPERATION STEP UP CARD

SOP No:UCL/IBDMSG/CD/Q/03.0

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Skill Owner

/N Skill Name	Task	Target	Self Evaluation	First	First Evaluation	Final Evaluation
		Profic.	Date Evaluation	Da	9	Date Evaluation
	Operator knows order of addition in the crutcher	w	\dashv		12345	-
2	Operator understands why OOA must be followed strictly	ယ	12345	01	12345	ω 4
ω	Operator understands the unit operations and processes happening in the crutcher and how this is impacted by OOA	ω	12345	01	12345	1 2 3 4 5
4 on	Operator understands the crutching re-blend matrix	ω	12345		12345	1 2 3 4 5
	Operator can translate reblend matrix into actual material addition in crutcher	ω	12345		3 4	3 4
	Operator knows the impact of over or under addition of wet and dry scraps	3	12345	O1	12345	1 2 3 4 5
	Operator can compensate quantities of dry and wet scrap addition to achieve target CMM	3	12345	O.	12345	12345
	Operator can complete a crutcher batch in manual mode at right quality.	3	12345	0,	12345	12345
	Operator knows how to salvage a crutcher batch if order of addition is missed	3	12345	0,	12345	1 2 3 4 5
e cr	Operator understands the underlining principle behind the CMM calculator	3	12345	01	12345	12345
ediate	Operator understands the maximum limits of compensation allowed based on approved MI	ω	12345		12345	1 2 3 4 5
nterme	Operator understands the impact of material compensation and adjustments on slurry and powder quality	ω	12345		12345	1 2 3 4 5
3	Operator knows how to conduct paste pH	ω	12345		12345	1 2 3 4 5
4	Operator can identify acid spots in paste, understands the rootcause and mitigate acid spots creation	ω	12345		12345	1 2 3 4 5
5	Operator knows the impact of CMM, CMT paste pH on powder quality	3	12345		12345	12345
6	Operator can troubleshoot and fix crutching process losses (eg. Low density etc)	ω.	12345		12345	12345

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	Agbadu Lawrence Date: WFFS 72022	SOP OWNER
1 19	Alawode Ohujide Date: 11 W 2020	QA APPROVAL
	Adebiyi Adedoyin Date:	HSE APPROVAL
	Nadeeb Daramola Date: () 0 + () 0 + 2	AUTHORISATION

Date of Qualification

Signature of Qualifier

Date of Qualification