



Lusail Real Estate Development Company

Health, Safety, Security, Environment, Logistics & Quality Department

STANDARD OPERATION PROCEDURE – DOCUMENT CONTROL PROCEDURE

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COMPANY PROPRIETARY INFORMATION

Prior to use, ensure this document is the most recent revision by checking the Master Document List. To request a change, submit a Document Change Request to the Document Control Representative. Master copy of this document will be maintained by the LREDC QA/QC Manager. Not controlled if printed.

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1.0 PURPOSE

To establish and maintain a system for preparation, approval, distribution and access control, availability and updating of internal documents and maintenance of External documents related to Quality Management System. Provide a Numbering System to the Documentation evolved in Lusail Real Estate Development Company (LREDC).

2.0 SCOPE

Applicable to the Documentation Structure of the OHSAS that includes the OHSAS Manual, Procedures-Guidelines, Safe Operating Procedures, Registers, & Form including information of documents of External Origin.

3.0 RESPONSIBILITY

TABLE 1

STAGES	LEVEL 1	LEVEL 2	LEVEL 3
	OHSAS POLICY & OHSAS Manual	PROCEDURES-QSP & QCP	
Preparation of the document (Doc)	MA	MA	PROJECT PLANS, REQUIREMENT SPECIFICATIONS, TECHNOLOGY SPECIFICATION, DESIGN DOCUMENTS, SOFTWARE SOURCE CODE, TEMPLATES & FORMATS
Approval / Re-approval of Doc	Director HSSELQ	MA	HSSELQ Director
Issue & Distribution Control of Doc	MA	MA	Respective departments
Change Request	MA	ANY ONE	ANY ONE
Change Req Apv.	MA	MA	MA
Control of Ext. Doc	NA	NA	MA
Write Access	MA	MA	Resp Group Members

4.0 DEFINITIONS & VOCABULARY

Document : Information and its supporting medium, specification procedure document, drawing, standard., checklist also see NOTE 1, 2 & 3 below;

NOTE 1 The medium can be paper, magnetic, electronic or optical computer disc, photograph or master sample, or a combination thereof.

NOTE 2 A set of documents, for example specifications and records, is frequently called “documentation”.

NOTE 3 Some requirements (e.g. the requirement to be readable) relate to all types of documents, however there can be different requirements for specifications (e.g. the requirement to be revision controlled) and records (e.g. the requirement to be retrievable).

5.0 PROCEDURE

5.1. GENERAL: QSP RELATED PROCEDURES

A Master List of Document LUS-HSE-FM4-445-001 Master List of Documents of Level I and Level II is maintained by the MA or their appointee, while the Level III documents is maintained by respective departments. All these includes various categories of documents (including various Lists) and data used in LREDC including those supplied by the external bodies.

- 5.1.1. The purpose of maintaining such a Data Base is to clearly state the current revision status of the relevant document/page, the approving authority and the personnel in possession of the relevant document.
- 5.1.2. Each document and data are clearly legible and have a unique identification, which includes, as appropriate:
 - Document title
 - Document number
 - Revision number
 - Approval Name
 - Page numbers & total number of pages & Issue date
 - Number and Version number at the bottom of each page of the document. .
- 5.1.3. The most current document will be electronically signed and loaded onto the intranet. Only documents on the intranet should be taken as current. No hard copy master file is to be held onsite without the written permission of the MA. These files must be stamped “current” if in hard copy and access must be restricted. The hard copy must reflect the intranet copies exactly.
- 5.1.4. In the case of documents of external origin, these are reviewed by the relevant personnel and must be kept up to date as per the documents outlined in the Legal Register. All external documents once current should be stored in the shared drive as per the current filing system.
- 5.1.5. In case a need to create a fresh document is found necessary to address a process/ activity / task then relevant author (AS PER TABLE 1) is identified by MA and HSSELQ Director and the requirements to be included in the document are discussed.
- 5.1.6. MA receives the draft document from the Author and reviews them with the concerned dept. which has interaction and interrelation with the process/ activity / task. A working party may be formed for this task.

- 5.1.7. The finalized document is approved as mentioned in the Responsibility addressed in Table 1.
- 5.1.8. Whether a document consists of ONE or MORE than ONE Page, in all cases the Approver needs to sign in the space, provided by the approver. (Amendment Record)
- 5.1.9. The Document Numbering System is detailed in the **Annexure A of this procedure**.
- 5.1.10. Irrespective of the date mentioned in each of the system procedure, OH & S manual, Functional procedures, guidelines, work group procedures, the implementation date is 1st January 2015 –for all the documents and system implementation.
- 5.1.11. Only documents available on the internet page will be considered current. Printed copies are considered uncontrolled.

5.2. ISSUE & DISTRIBUTION CONTROL:

- 5.2.1. **SOFTCOPY:** The most current and approved documents are only made available in the electronic medium on the Lusail Web-Site. Regular backups are taken by the IT department. Back-ups are scheduled weekly and will be managed by IT Department
- 5.2.2. Integrity of the information is maintained by providing READ access only.
- 5.2.3. Employees who required Write Access as per Responsibility mentioned in Section 3.0. may seek an editable version by seeking approval from the MA or his appointee. Access to these documents will be restricted via password protection when stored on the shared drive.
- 5.2.4. The National and International Standards used (where required) for OHSAS including the various Specifications Standards- Statutory requirements is maintained by the MA. These are kept updated through regular interaction with relevant bodies.

5.3. DOCUMENT CHANGES/REVISION CONTROL

- 5.3.1. Anyone can request for a change in the procedure by filling a Change Request Form *LUS-HSE-FM4-445-003 Change Request form* and submit it to the MA with changes marked on the document. Change requests will be required for all changes from May 15 2105.
- 5.3.2. Where a bulk review of documents is to be undertaken then one form can be submitted listing all changed documents if the MA gives their approval to do so.
- 5.3.3. If the change pertains to one function/activity only, the proposed change is discussed with the MA and HSELQ Director, else a meeting is called for of all affected process owners / MA / HSELQ Director to discuss and finalize the change desired.
- 5.3.4. The revision details are updated in the List of Documents and also the change is effected in the identified location for further use to concerned personnel.
- 5.3.5. The obsolete/invalid documents (hard copy) are removed or destroyed. While the documents in the electronic medium i.e in the server/ machine/files is archived into the FOLDER called ARCHIVES.
- 5.3.6. The OHSAS documents are periodically reviewed under following conditions:
 - Addition / change of any process to the exiting level
 - Any situation requiring review
 - Any incident/ accident leading to change in document
 - Any change in legal requirements leading to change in document

- 5.3.7. Review all documents when necessary for continuing suitability and issue revised documents as mentioned above, where necessary.

6.0 RECORD

LUS-HSE-FM4-445-001 Master List of Documents

LUS-HSE-FM4-445-003 Change Request form

DOCUMENT NUMBERING SYSTEM- ANNEXURE A

