**Annexure-4: HSE Performance Evaluation Form**

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| --- | --- | --- | --- |
| **Company Name** |  | **Company Category****(Generation, Transmission or Distribution)** |  |
| **NEPRA License No.** |  | **Corporate Address** |  |
| **Evaluation Year** |  | **Submitted Date** |  |

Note: The company shall compile all subcategories into a single PDF file. This PDF file should include a table of contents and page numbers for each subcategory. The title of the PDF file should contain the respective category serial number for immediate reference.

|  |  |  |
| --- | --- | --- |
| **Sr. No.** | **Category** | **Points** |
|  | **HSE Management System** Approved HSE Management System/ Manual is available in compliance to Power Safety Code?

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. HSE Management System/ Manual

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Legal Compliance Register

(Attach approved register) | 🞎 | 🞎 | 🞎 |
| 1. Third Party HSE Audit Report

(Attach report) | 🞎 | 🞎 | 🞎 |
| 1. Management System Certification

(Attach certificates) | 🞎 | 🞎 | 🞎 |
| 1. Insurance Risk Engineers Report for plants and facilities.

(Attach report) | 🞎 | 🞎 | 🞎 |
| 1. HSE initiatives and improvements made by the company during the evaluation year.
 | 🞎 | 🞎 | 🞎 |

 |  |
|  | **HSE Management Team** Is the company providing a sufficient number of qualified HSE staff at the site for supervision, who can effectively oversee their employees and contractors?

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. HSE team details/organogram is maintained.

(Attach approved organogram) | 🞎 | 🞎 | 🞎 |
| 1. HSE team training certifications or training attendance record.

(Attach certificates or record) | 🞎 | 🞎 | 🞎 |
| 1. Independent and functional HSE Directorate/Department.

(Attach order) | 🞎 | 🞎 | 🞎 |
| 1. HSE Team responsibilities and duties clearly defined.

(Attach approved responsibilities and duties document) | 🞎 | 🞎 | 🞎 |
| 1. Total number of company direct employees.

(Attach Admin/HR Letter) | 🞎 | 🞎 | 🞎 |

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|  | **Hazards/ Aspect Identification and Risk/ Impact Assessments**The approved Hazards/Aspect Identification and Risk/Impact Assessment is available, and the recommended measures have been implemented.

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Risk/ Impact Assessment Procedure/ SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Risk/Impact Assessment Worksheet.
 | 🞎 | 🞎 | 🞎 |
| 1. List of Risk/ Impact Assessment recommendation(s).

(Attach List) | 🞎 | 🞎 | 🞎 |
| 1. Risk/ Impact Assessment recommendations implementation action plan/ evidences/ photographs.

(Attach approved action plan and evidences) | 🞎 | 🞎 | 🞎 |

 |  |
|  | **HSE Meeting**The approved periodic plan for HSE Meetings is available, and these meetings are conducted at the top management level. Additionally, detailed minutes of each meeting are documented.

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| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. HSE Meeting procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. HSE Meeting approved periodic plan.

(Attach plan) | 🞎 | 🞎 | 🞎 |
| 1. Top management attended.
 | 🞎 | 🞎 | 🞎 |
| 1. Minutes of meeting available.

(Attach MOM) | 🞎 | 🞎 | 🞎 |
| 1. Recommendations implementation action plan/evidences/photographs.

(Attach approved action plan and evidences) | 🞎 | 🞎 | 🞎 |

 |  |
|  | **Job Specific Training**The approved training need assessment and periodic plan for Job Skills Competency Training are available. Does the company provide job skills competency training for various roles such as Electrical Technician, Assistant Lineman, Lineman, Line Superintendent, Heavy Equipment Operators, Riggers, Scaffold Supervisors, etc.?

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Training procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Job specific training need assessment.

(Attach approved TNA) | 🞎 | 🞎 | 🞎 |
| 1. Job specific training approved periodic plan.

(Attach approved plan) | 🞎 | 🞎 | 🞎 |
| 1. Sample of in-house training attendance record or third party training certifications.

(Attach record or certificates) | 🞎 | 🞎 | 🞎 |

 |  |
|  | **HSE Awareness Training**The approved training need assessment and periodic plan are available for HSE awareness trainings, covering topics such as Work Permit Issuer & Receiver, Electrical Safety, Isolation, PPE/T&P, Fire Watch, Standby man, Fire Prevention, First Aid, Working at Height, Confined Space, Emergency and Rescue Operation, etc. Have all essential employees/contractors attended the necessary HSE awareness trainings, including new employees/contractors, before conducting their activities?

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Training procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. HSE training need assessment.

(Attach approved TNA) | 🞎 | 🞎 | 🞎 |
| 1. HSE training approved periodic plan.

(Attach approved plan) | 🞎 | 🞎 | 🞎 |
| 1. Sample of in-house training attendance record or third party training certifications.

(Attach record or certificates) | 🞎 | 🞎 | 🞎 |
| 1. Annual public awareness campaign periodic plan and photographs.

(Attach approved plan and evidences) | 🞎 | 🞎 | 🞎 |

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|  | **Management HSE Walk-through/ Site Tours**The approved periodic plan for Top Management HSE Walk-through/Site Tours is available and executed as planned. Does the top management actively participate in these tours, and are corrective actions taken when necessary?

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| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. HSE Walk-through/Site Tours approved periodic plan.

(Attach approval plan) | 🞎 | 🞎 | 🞎 |
| 1. Top Management participation.
 | 🞎 | 🞎 | 🞎 |
| 1. List of observation/findings.

(Attach List) | 🞎 | 🞎 | 🞎 |
| 1. Evidences or photographs of open/ close status of observation/findings.

(Attach evidences) | 🞎 | 🞎 | 🞎 |

 |  |
|  | **Asset Integrity Management**The approved Preventive Maintenance periodic plan is readily available and actively implemented. The approved list of safety critical protection devices, instrumentation, interlocks, protection relays, breakers, controls, safety relief valves, F&G detection system, software and components are available and their in-service testing/inspection is carried out according to the periodic plan, either by the government authority or inspection agencies registered with Pakistan Standards and Quality Control Authority.

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Asset Integrity Management procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Preventive maintenance/ schedule outage approved periodic plan.

(Attach plan) | 🞎 | 🞎 | 🞎 |
| 1. Preventive maintenance execution record. (Attach record)
 | 🞎 | 🞎 | 🞎 |
| 1. Safety critical protection devices approved list. (Attach approved list)
 | 🞎 | 🞎 | 🞎 |
| 1. Sample of safety critical protection devices testing (in-house or third party). (Attach evidence, certificate or report)
 | 🞎 | 🞎 | 🞎 |
| 1. In-house or third party integrity inspection/certificate of stability of civil and steel structure of plant platforms, workshop, warehouses, normal office buildings, porta cabins and blast resistant buildings at intervals of 3 to 5 years.

(Attach evidence, certificate or report) | 🞎 | 🞎 | 🞎 |
| 1. In-service Boiler Inspection Certificate. (Attach certificate)
 | 🞎 | 🞎 | 🞎 |
| 1. In-house or third party inspection of in-service electrical installation of plant, workshop, warehouses, normal office buildings and blast resistant buildings at intervals of 3 to 5 years. (Attach evidence, certificate or report)
 | 🞎 | 🞎 | 🞎 |

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|  | **Management of Change (MOC)**The Management of Change (MOC) program is available and actively implemented. MOC Committee/Team is present to review and approve any permanent or temporary changes, modifications, additions, or deletions that are considered "Not In Kind".

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| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Management of Change (MOC) procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. MOC Committee/team notification.

(Attach evidence or order) | 🞎 | 🞎 | 🞎 |
| 1. List of MOCs. (Attach list)
 | 🞎 | 🞎 | 🞎 |
| 1. Sample of complete MOC. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |

 |  |
|  | **Personal Protective Equipment (PPE)**Personal Protective Equipment (PPE) approved list is available with material description. Adequate amount of PPE inventory is maintained by company at each site?

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. PPE procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. PPE need assessment sheet/report.

(Attach approved sheet/report) | 🞎 | 🞎 | 🞎 |
| 1. Stock and non-stock PPE approved list is available with material description. (Attach approved list)
 | 🞎 | 🞎 | 🞎 |
| 1. Stock PPE inventory is maintained. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Certificates/ photographs of in-service special PPE inspections conducted either in-house or by a third party. (Attach evidence, certificate or photographs)
 | 🞎 | 🞎 | 🞎 |

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|  | **Electrical and Mechanical Energy Isolation**The electrical and mechanical isolation system is available and fully operational.

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| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Electrical and Mechanical Energy Isolation procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Electrical Isolation lockout sample evidences/ photographs. (Attach photographs)
 | 🞎 | 🞎 | 🞎 |
| 1. Mechanical Isolation chain off sample evidences/ photographs.

(Attach photographs) | 🞎 | 🞎 | 🞎 |
| 1. Sample evidences/ photographs of mechanical isolation by valve closure with use of rated blinds at Inlet and Outlet Or removal of pipe spool with the use of blind flange Or double block & bleed with use of blind Or removal of mechanical couplings.

(Attach photographs) | 🞎 | 🞎 | 🞎 |
| 1. Blind list or the blind register or marked P&ID reflecting numbered locations of blinds.

(Attach evidence or list) | 🞎 | 🞎 | 🞎 |

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|  | **Permit to Work**The Permit to Work system is available and has been effectively implemented. Additionally, the list of approved authorized Permit to Work Issuers & Receivers is readily available.

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| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Permit to Work procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Authorized Permit to Work Issuer & Receiver List.

(Attach approved list) | 🞎 | 🞎 | 🞎 |
| 1. Training or refresher training for authorized Permit to Work Issuer & Receiver. (Attach evidence, attendance sheet or record)
 | 🞎 | 🞎 | 🞎 |
| 1. Sample of executed Permit to Work.

(Attach executed Permit to Work sample) | 🞎 | 🞎 | 🞎 |

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|  | **Heavy Equipment, Machinery, Power Driven Tools and other Handheld Portable Equipment’s**The approved list of Tools & Plants (T&P), heavy equipment, machinery, power-driven tools, and other handheld portable equipment is available, and regular in-service inspections are conducted with inspection tags installed. Moreover, the list of Heavy Equipment Operators and Riggers is readily available, and all personnel in these roles are trained and certified.

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| Subcategory | Attached | Not Available | Not Applicable |
| 1. Relevant procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Tools & Plants (T&P) approved list.

(Attach approved list) | 🞎 | 🞎 | 🞎 |
| 1. Heavy equipment approved list.

(Attach approved list) | 🞎 | 🞎 | 🞎 |
| 1. Samples of in-house or third party inspection certification or tags of in-service heavy equipment.

(Attach evidence or certificate) | 🞎 | 🞎 | 🞎 |
| 1. Heavy Equipment Operator and Rigger list. (Attach list)
 | 🞎 | 🞎 | 🞎 |
| 1. Heavy Equipment Operator and Rigger training, License and certification. (Attach training record, license and certificate)
 | 🞎 | 🞎 | 🞎 |

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|  | **Internal HSE Audit**The Internal HSE Audit system is available, and audits are planned and conducted during the evaluation year.

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| Subcategory | Attached | Not Available | Not Applicable |
| 1. Internal HSE Audit procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Internal HSE Audit periodic plan.
 | 🞎 | 🞎 | 🞎 |
| 1. Sample of internal HSE audit report/ outcomes/ email.

(Attach report/ outcomes/ email report) | 🞎 | 🞎 | 🞎 |
| 1. Audit non-compliance open/close status. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |

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|  | **Health & Hygienic Facilities**Health & Hygienic facilities are provided and regularly maintained. Occupational health assessments are conducted for selected employees/contractors who are typically engaged in critical tasks, based on their job roles, to ensure that individuals are medically, physically, and mentally fit for their assigned responsibilities.

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| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Health & Hygienic procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. Occupational health assessment record. (Attach evidence, record or certificate)
 | 🞎 | 🞎 | 🞎 |
| 1. Evidences/ photographs of hygienic facilities such as potable drinking water at workplace, hygienic canteen, mess or cafeteria. (Attach evidence or photographs)
 | 🞎 | 🞎 | 🞎 |
| 1. In-house or third party assessment conducted with correction evidences for workplace ergonomics, illumination, ventilation, temperature, heat stress, noise, dust and fume. (Attach evidences, results or reports)
 | 🞎 | 🞎 | 🞎 |
| 1. Annual Inspection Report by Labour Welfare Office. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Employees' Social Security Registration Certificate for private sector organizations. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Employees' Old-Age Benefits Institution (EOBI) Registration Certificate for private sector organizations. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |

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|  | **Environmental Management System**The Environmental Management System is available and being implemented as per the established guidelines.

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| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Environmental management procedure/ SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. An Initial Environmental Examination (IEE) or Environmental Impact Assessment (EIA) study in compliance with EPA.

(Attach report) | 🞎 | 🞎 | 🞎 |
| 1. Site Specific Environmental and Social Management Plan for Sustainable Development.

(Attach plan) | 🞎 | 🞎 | 🞎 |
| 1. Construction or operational phase EPA No Objection Certificate (NOC)/Approval Letter.

(Attach letter) | 🞎 | 🞎 | 🞎 |
| 1. Pollution control measures related to air quality, water quality, land quality, irrigation, noise levels, radiation emission, waste management, ozone depletion control and natural resource conservation.

(Attach results) | 🞎 | 🞎 | 🞎 |
| 1. Initiatives to obtain carbon credit certificates for the reduction of carbon dioxide and other greenhouse gas emissions aim to achieve emissions reduction targets, reduce carbon footprints, and mitigate the impacts of climate change. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Environmental monitoring report submitted to relevant Environmental Protection Agency. (Attach evidence or report)
 | 🞎 | 🞎 | 🞎 |
| 1. Petroleum storage License/ Approval. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Sulfuric acid or other regulated chemical utilization License/ Approval. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Industrial waste reduction evidence. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Industrial waste reuse evidence.
 | 🞎 | 🞎 | 🞎 |
| 1. Industrial waste recycling evidence. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Industrial waste not intended for recycling or reuse is treated and/or disposed of via approved contractors or facilities within one hundred and eighty (180) days of the waste being generated. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |

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|  | **Fire Prevention & First Aid Facilities**Fire prevention equipment’s are present and regularly maintained at each site. First aid facilities/boxes are also available and well-maintained at each site. In-service inspection and refilling of first aid supplies are carried out on a monthly basis during the first week of each month.

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| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Fire Prevention & First Aid procedure/SOP.

(Attach title page, table of contents, and approval page only) | 🞎 | 🞎 | 🞎 |
| 1. In-house or third party inspection records of in-service fire protection equipment. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Evidences of First aid facilities/ boxes. (Attach evidence or photographs)
 | 🞎 | 🞎 | 🞎 |
| 1. Evidences of inspection and refilling of in-service first aid facilities/boxes. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |
| 1. Evidences of in-service ambulance inspection. (Attach evidence or photographs)
 | 🞎 | 🞎 | 🞎 |
| 1. List of dedicated First Aid providers at site. (Attach approved list)
 | 🞎 | 🞎 | 🞎 |

 |  |
|  | **Emergency Management**The Emergency Management system is available and actively implemented. Both announced and unannounced emergency drills are planned and regularly conducted.

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Emergency Management procedure /SOP. (Attach title page, table of contents, and approval page only)
 | 🞎 | 🞎 | 🞎 |
| 1. Announced and unannounced emergency drills periodic plan.

(Attach approved plan) | 🞎 | 🞎 | 🞎 |
| 1. Announced and unannounced emergency drills sample evidences/ photographs. (Attach evidence or photographs)
 | 🞎 | 🞎 | 🞎 |
| 1. Drill recommendations action plan/ implementation evidences/ photographs. (Attach evidence or photographs)
 | 🞎 | 🞎 | 🞎 |

 |  |
|  | **Incident Reporting and Investigation**The Incident Reporting & Investigation system is available and functioning effectively. Does the company adhere to NEPRA's emergency reporting instructions for incidents? Furthermore, has the company conducted thorough investigations for all incidents, including near-misses?The total work-related fatal accidents during the evaluation year:The total public fatal accidents during the evaluation year for which the company was responsible:

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. Incident Reporting & Investigation procedure/SOP. (Attach title page, table of contents, and approval page only)
 | 🞎 | 🞎 | 🞎 |
| 1. Sample injury accident investigation report. (Attach report)
 | 🞎 | 🞎 | 🞎 |
| 1. Sample critical near-miss investigation report. (Attach report)
 | 🞎 | 🞎 | 🞎 |
| 1. Investigation report recommendations action plan/ implementation evidences/ photographs. (Attach evidence or photographs)
 | 🞎 | 🞎 | 🞎 |

 |  |
|  | **Response to NEPRA Recommendations/ Corrective Actions**Have all recommendations/corrective actions directed by NEPRA been fully implemented within the specified period of time?

|  |  |  |  |
| --- | --- | --- | --- |
| Subcategory | Attached | Not Available | Not Applicable |
| 1. The action plan/evidence of the implementation of the recommendations provided by NEPRA within the specified timeframe. (Attach evidence)
 | 🞎 | 🞎 | 🞎 |

 |  |
| Total Performance Evaluation Points:  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Role** | **Name** | **Mobile Number** | **Signature** | **Date** |
| Prepared by (Licensee Representative) |  |  |  |  |