

ACTION/ISSUE ITEM LIST

Project Na File Numb			Project Mana		-			
Action	Action Item Description	Requested	Person Action	Date	Date	Resolution	Status	Comments
Item No.		by	Assigned to	Requested	Required			



Water and Waste Department • Service des eaux et des déchets

<u>AUTHORIZATI</u>	ION FOR CONTRACT CHANGE	NO.
PROJECT DESCRIPTION:	DATE: FILE NO.: BID OPP. NO.: PRI NO.: DISTRIBUTION:	
CONTRACTOR:	City Departmen Contractor: CA: Other:	t:
Payment or credit for the following	ng change is hereby authorized:	
DETAILS OF CONTRACT CHAI		
for Contract Administrator	for Contractor	for City of Winnipeg
The Contract Price is increased/of the Contract Time is increased/of All other Terms and Conditions of	decreased by: days	
Original Contract Price: \$ Previous Additions/Deletions:\$ This Authorization:		mpletion Date: mpletion Date:
Revised Contract Price: \$		

Consultant Deliverable Log

Project	No.			File No:					
Project	Name			RFP No.:		- -			
Deliv. Log Item#	Туре	Submittal Name	RFP Section Reference No	Date Received from Consultant	completed	Returned to	Submittal Comments	Deliverable review status (R, R/N, RES)	Notes



CONSULTAN	NT SCOPE	CHANGE		
PROJECT DESCRIPTION:		-	DATE: FILE NO.: BID OPP. NO.: PRI NO.:	
Issued by: (Consultant) Prepared by:	-		DISTRIBUTION: City Department:	
	<u>-</u> er)		Doc. Control: Other:	
PROJECT DESCRIPTION: BID OPP. NO.: PRI NO.: PRI NO.: Stribution: Consultant Prepared by: (Consultant Project Manager)				
December Change				
Reason for Change				
(Include additional regard if more areas)	ma avvisa al\			
	requirea)			
	Manhours	Amount	Com	ments
Direct Costs				
Total Direct		0		
Tatal la dia a				
l otal indirect	<u> </u>	0		

Total Direct and Indirect Engineering Impact on Design Schedule Estimated Impact on Capital Cost Estimated Impact on Operations Cost	days	of Change: Scope recast
Details of Capex or Opex estimated	impact:	
Reviewed/Recommendation	Action Commen	ts
Project Manager Date	Do Not Proceed More Info Req'd Recommend Approva Other	
Scope Change Authorization: Winni	ipeg Sewage Treatment program	
	Comments:	
Project Director Date		
Manager Engineering Date		
Consultant Date		
Statement of Contract Original Assignment Value Sum of CSCO's to Date Value of this CSCO Current Assignment Value	Schedule Initial Assignment Completion Date Additional days required this CSCO Completion Date at last CSCO Assignment Completion Date this CS	 SCO

Consultant Submittal Review Log	
Project:	
Bid Opportunity:	
Consultant Deliverable Log Item #	
Submittal Document Name:	
Review Date	

by PM				by Reviewer		by Consultant
Review						
Item#	Page	Section or Ref Item	Name	Comment	Proposed Action	Reply Comment

Consultant Scope Change Order Log

Project File Nu	t Name ımber		_ _	Pro	oject Manag	ger			
PRI#	CSCO#	CSCO Description	CSCO Issue Date	CSCO Pricing Req'd by	CSCO Status	CSCO Amount	Capital Cost Impact	OPS Cost Impact	Comments

Winnipeg Sewage Treatment Program Integrated Management System



Risk Register

DOCUMENT NUMBER: PG-RM-TO-01

Rev	Prepared by	Reviewed by	Date	Approved by	Date

Project Risk Register - {insert project name}

Risk Registe	isk Register Template Version 4.5-nwa2												
	System							Program Information	n about the Ris	k Event			
Risk ID; Sequential ID	Last Reviewed Date	Status Change Date	Identification Date	Project	Phase	Task Group	Contract (Bid Op)	Operational or Capital	Facility	Process Area (optional)	Discipline (Optional)	Risk Type; Program or Project Level Risk	Category of Risk; Design, Construction, HR, Procurement etc
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Project Budget or Target Cost (\$,000) Insert \$ value

	Risk I	Event Identification							Risk Event A	Assessment		
Threat or Opportunity (T / O)	Due to (Cause Event)	this could occur (Result Event)	Resulting in (this Effect)	Threat / Opp Owner (per Agreement); CofW or Shared	Threat / Opp owner (Individual responsible)	Status (Identified / In Development / Defined / Closed)	k Magnitude of 1 Risk Event(1-5)	Likelihood (1-5)	Assessed Score C X L	Estimated Impact (\$,000) what is cost if risk occurred)	Financial Impact (% Target Cost)	Financial risk prior to Mitigation
Т	and do watering at SEWPCC	Bios lids decision report recommends no digestion or dewatering at SEWPCC	Revise project definition design work based on biosolids decision report	CoW		Identified	2	3	6	80	#VALUE!	36
0	Using a specialist contractor	We may increase productivity for producing O&M manuals	Reduce project delivery cost	Shared		In Development	5	1	5	60	#VALUE!	- 2
									0		#VALUE!	#N/A
									0		#VALUE!	#N/A
									0		#VALUE!	#N/A
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WSTP IMS Document PG-RM-TO-01 Risk Register.xls Print 08/04/2014 1:26 PM

Risk Response Assessment (based on an Implemented Risk Management Plan - future state)									
Risk Response Type (Avoidance, Transferance, Mitigation, Acceptance)	Risk Response Plan - Actions	Residual Magnitude occur (1-5)	Residual Likelihood (1- 5)	Assessed Residual Score	Cost of Mitigation (\$,000)	Adopted	Financial risk after mitigation	Trigger date (mandatory review date)	k 3
Mitigate - Obtain early direction on biosolids strategy for SEWPCC before biosolids decision report is finalised		3	4	12	20				
Employ specialist contractor for O&Ms, tie in with specific deliverables from constructor and designers		2	3	6	20				
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		Risk Response Plan - Execution Log			Contingency Plan		
Date for each action	Mitigation Evaluation	Action Log Reference	Comments	k 4	Contingency plan	K	Risk Level Before After Mitigation Mitigation
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						N	lot Assesse Not Assessed
						N	lot Assesse Not Assessed
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Assessment of the Magnitude of Opportunity

	Insignificant Savings	Minor Savings	Moderate Savings	Major Savings	Significant Savings
	1	2	3	4	5
Cost ¹			•		> 20% of Project Budget ²
	Time savings	Time savings	Time savings	Time savings	Time savings
Time ²	<½ day	½ – 1 day	>1 day, < 1 week	>1 week, < 1 month	>1 month
Other ⁴					

Notes

- 1 Project Manager to replace with project specific values
- 2 Use Target Cost where the project is subject to a Target Cost
- 3 Replace with project specific values
- 4 To be defined by the Project Manager if required

Assessment of the Magnitude of Threat

	Negligible	Moderate	Substantial	Severe	Disastrous
Descriptor	Small effect on costs Moderately effects costs			Serious threat to the organization, public etc.	The impact is totally unacceptable to the organization
	1	2	3	4	5
Safety	Negligible – No injury, near miss	Minor – minor cuts, bruises, muscle strain	Serious – broken bones, muscle and ligament injuries	Serious / permanent injury / illness	Catastrophic – Single or Multiple fatalities
Financial Impact upto a maximun value (re-work / loss etc) 1	< 2% of Project Budget ²	< 5% of Project Budget ²	< 10% of Project Budget ²	< 15% of Project Budget ²	> 20% of Project Budget ²
Schedule, impact on critical path ²	Not likely to impact dates	Likely to absorb float between planned dates and target dates	≤ 1 month	≤ 2 month	> 2 month
Environment	Negligible Environmental effect		Moderate but short term Environmental harm	Localised, long term Environmental harm	
Regulatory	negligable, near miss	ranart radilirad to	Inspection by Manitoba Env safety officer etc		Clean Environment Commission (CEC) Hearing

Image / Reputation	Single Public Enquiry	Multiple Public Enquiries and / or informal Councillor and / or MP Request	Political – Formal Council and / or MP Request / Moderate	Provincial Government, Major Political & Media Scrutiny / Major Public Impact	Federal Investigation
Moral	No Impact	Grumblings at wter	Moderate / Increasing Absenteeism	Loss of Statt / "Go	Catastrophic Negative / walk out
Legal	No Liability		Damages > \$10,000 < \$250,000	Damages >\$250,000 < \$1,000,000	Damages >\$1,000,000
Other ⁴					

- 1 Project Manager to replace with project specific values
 2 Use Target Cost where the project is subject to a Target Cost
 3 Replace with project specific values
 4 To be defined by the Project Manager if required

III. Assessing Liklihood/probability of Risk Occurrence

Descriptor	Rating	Frequency	Probability
Almost certain	5	Is expected to occur during projects of this type	> 95%
Likely	4	More likely as not, regularly occurs during projects of this type	60% < x < 95%
Moderate	3	As likely as not, might occur at sometime during a project of this type	30% < x < 60%
Unlikely	2	Could occur at some time during the project, rarely occurs on projects of this type	5% < x < 30%
Rare	1	Only occur in exceptional circumstances on projects of this type	< 5%

Note on the use of Specific Probability Data and Distributions:

The first step in assessing the likelihood / probability of a risk should always be to apply the project teams engineering judgement and experience, in most cases this approach is all that is required. Specific probability data is available from a variety of sources, however unless the assumptions underpinning such distributions and data hold, the results can be misleading and introduce greater risk. Such data should be checked carefully before it is used.

Total Severity	Category	Response
20-25	Critical	Expected cost to the project is unacceptably high. This risk must be eliminated or transferred before proceeding with the project. Attempt to avoid or transfer risk
10-20	Serious	Expected cost is high compared to total project cost. It probably is cost effective to eliminate or transfer this risk.
5-10	Important	Consider eliminating or transferring. If accept then manage proactively.
0-5	Acceptable	Accept and manage

PROJECT RECORD LOG

Project #:	
File#:	
Proiect Name	

PRI Description		No.	CSCO#	Magn. of		Status	Class	Reason Comments
			LSCU#	Cost				
	-							
	-							



Water and Waste Department • Service des eaux et des déchets

REQUEST	FOR INFORMATION NO:
TO:	DATE: FILE NO.: BID OPP. NO.:
PROJECT:	PRI NO.: DISTRIBUTION: Owner: Contractor:
ISSUED BY: REASON:	Other:
INSTRUCTIONS TO CONTRACTO	R:
 Fill in the information requested section where applicable. Submit to Contract Administrator 	section referencing drawing number and specification references.
Information Requested:	
Date Response Required:	
Response:	
Date Response Sent:	Response by:



TRAVEL AUTHORIZATION NO.:

PROJECT DESCRIPTION: CONSULTANT:	DATE: FILE NO.: RFP NO.: DISTRIBUTION: City Department: Contractor CA: Other:	
Purpose of Travel		
Depart from Location	Travel to Destination	
Departure Date/Time	Return Date/Time	
Duration of Stay(nights)		
Employee Names:	No. of Unit Price Units To	
	Airfare	0
	Accomodation Car Rental	0
	Mileage	0
	Meals	0
	Taxi	0
	Other	0
	Total 0	0
Project Manager Comments Authorization		
Project Manager	Date:	

	•	g Sewage Treatment Program E Engineering Record	
		omission of Employees' Ideas)	
Project ref #			Idea No:
Project Title:			Date:
Submitted by:	Name:	Job Title:	Service/Organization
Plant or system Area studied	Name:		Code:
Item/function studied	Name		Code (Tag):
ldea title:			•
Description of o	current approach or p	oroblem:	
Proposed impi	rovement or solutio	n:	
Action plan:			
Benefit (quant	ify if possible):		
Risks:			
Remarks:			
Attachments:			
Employee sigr	nature:	Reviewer Name and signature:	Date:
Project Manag Approved fo Investigate fo Other Do not imple	or implementation further	Need to decide by: Likely cost reduction Quantified Risk: Schedule impact: Change request No:	
PM Name and S	Signature:	Reviewer Name and signature (v	vhen applicable):
Date:		Date:	

Form: # Revision: # 0.1			Value Engineering Register													
Issue Date: # Project name:		PM		Until date:		Until date:			VE Facilitator				Until date:			
Project Ref	: <u> </u>			PM			Design	Manager			J VE Fac	VE Facilitator				
VE Proposal or Idea No and Rev	Submital date	Workshop No Name of Employee	o or Area		System or sub system	Description of problem	Description of solution	Reference document (VE Record or WS report)	identified cost saving or value improvement	Risk level	Design Manager opinion	Implementati on	Status	Confirmed improvement	to be generalized	
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JOB HAZARD ANALYSIS	Job Name:
Created date:	Task Name:
Written by:	Location/Area:
Task Completed by:	Revised Date:



Training required prior to completing job:	Personal Protective Equipment (PPE) Required/Recommended:
•	•

Job Steps	Hazards	Corrective Actions
-		

SAFE WORK PROCEDURE	Job Name:
Created date:	Task Name:
Created by:	Location/Area:
Last Revised:	Crews:



Approved by:	Reviewed by:
Signature	Signature

Emergency	Notes
1. Call 911.	Employers must ensure that workers are trained on, and follow this safe work procedure.
	Hold tailgate meeting before starting task. Complete Job Plan where required.
	 Report any hazards related to this task or recommendations regarding this document to your supervisor.
	Common signs/symptoms of MSI may include pain, burning, stiffness, numbness/tingling, and/or loss of movement or strength in a body part. Report any symptoms to your supervisor.

Hazards					Ste	eps					
		1	2	3	4	5	6	7	8	9	10
•											
•											
•											
•											

Personal Protective Equipment (PPE)

	Safe Approach					
1.						
	•					
	If:					
	•					
	NEVER: ⊗					
2.						
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	If:					
	NEVER: ⊗					
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NEVER:

Training

Tools/Supplies

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Reference		Disclaimer
Workplace Safety & Health Act W210 Manitoba	•	This document is uncontrolled when printed; refer to OWAM for the
Regulation 217/2006		most current version.
• # and Title	•	Government regulations take precedence; all workers should be
CSA Standards		familiar with these regulations.
Guidance Documents	•	This procedure must be reviewed any time the task, equipment or
		materials change and at a minimum every three years.

STANDARD OPERATING PROCEDURE					
Document No.:	Title:				
Revision No.:	Location:				
Prepared date:	Prepared by:				
Reviewed date:	Reviewed by:				
Approved date:	Approved by:				



1. Purpose

Brief description of the purpose of the SOP

2. Scope

Description of areas to which SOP does and does not apply

3. Responsibilities

Summary of the roles listed in the procedure and responsibilities of each role.

4. Definitions

Define terms and acronyms used in SOP.

5. Procedure

- 5.1. Step 1
- 5.2. Step 2....

6. Related Documents

List any internal and external related documents.

7. Revision History

Revision No:	Date	Description of Changes	Completed by: