Title: Control of Non-Conformity, Corrective and Preventive Action

1.0 Scope

This procedure is applicable to all products/materials, process and system non-conformances including customer feedbacks/complaints and unmet quality objectives' targets.

2.0 Objective

To establish and maintain documented Control of Non conformity, Corrective and Preventive Action procedures to ensure effective implementation of the actions.

3.0 Reference Documents

ISO 9001:2008	– Quality Management System Requirements
LSPU-QM	- Quality Manual
LSPU-PM-01	- Control of Documents and Records
LSPU-PM-02	- Internal Audit
LSPU-IQA-WI-01	- Inspection Procedure

4.0 Procedure

4.1 All non-conformities detected as a result of defective product/material, unmet goals/ objectives and targets, customer complaints, unsatisfactory results of customer survey, audit findings and service related non-conformities, must be recorded and identified. Investigation of the cause must define the nature and extent of the non-conformity.

4.2 Any affected personnel upon observance of a non-conformity as stated in item 4.1 can raise a Non-Conformity Report or inform any member of the involved department about the non-conformity observed.

4.3 The involved department shall record the non-conformity into the Non-Conformity, Corrective/Preventive Action Report (LSPU-NCPAR-SF-012).

4.4 For product or material he/she shall identify and segregate the non-conforming product/material and dispose as follows:

a) Condemned or
b) Reject and return to supplier

4.5 Disposition must be reviewed, agreed and implementation must be verified through inspection and/or test as applicable. Records of accepted non-conforming product or material must be recorded.

4.6 Correction and Corrective Action

4.6.1 Correction shall be taken to eliminate a detected non-conformity. This can be made in conjunction with corrective action.

4.6.2 Corrective action shall be taken to eliminate the cause of a detected non-conformity to prevent the non-conformity recurrence. This can be initiated by any staff responsible for the non-conformity/s as a result described in item 4.1.

4.6.3 The department concerned of the non-conformity shall be responsible for the timely investigation on the probable root cause of the problem, the formulation of

correction as necessary and implementation of corrective action needed to eliminate its recurrence. Application of controls to ensure the effectiveness of the action taken shall be determined. These shall be recorded in the Non-conformity, Corrective/Preventive Action Report (NCPAR).

4.7 Preventive Action

The determination of preventive action to eliminate the cause of potential non-conformities in order to prevent their occurrence may be done through the following but not limited to results of meeting/s, internal and external audits, customer satisfaction surveys and analyzed data.

4.7.1 Proposed preventive action and controls to be applied to ensure its effectiveness shall be discussed by the Department Heads. Relevant Information on preventive actions taken shall be discussed during the regular Management Review meetings. The finalized preventive action shall be recorded in the Non-conformity, Corrective/Preventive Action Report (NCPAR) Form # LSPU-8.5.2.

4.8 Customer Complaints

4.8.1 Any report or feedback from the customer which is treated as complaint shall be handled by the _____ department, and shall be recorded through the Non-conformity, Corrective/Preventive Action Report (NCPAR).
Refer to Customer Complaints Handling procedure _____.

4.9 Verification

4.9.1 Corrective and preventive actions implemented shall be logged by the assigned personnel in the corrective and preventive action monitoring log form # LSPU-8.5.2A and will be monitored and regularly updated to verify its effectiveness. Refer to item 4.7 (Follow up) of Internal Audit Procedure LSPU-PM-02.

4.9.2 The Quality Management Representative and/or the Department head shall approve the verification.

4.9.3 All necessary changes brought about by the implementation shall be reflected in the affected documented procedure or relevant work instructions as applicable.

5.0 Records

Records are filed and maintained as per control of documents and records procedure-LSPU-PM-01.

6.0 Appendices

LSPU-NCPAR-SF-001 : Corrective/Preventive Action Monitoring Log
LSPU-NCPAR-SF-002 : Non-conformity and Corrective/Preventive Action Report

Title: Control of Non-Conformity, Corrective and Preventive Action

NON-CONFORMITY/ CORRECTIVE/ PREVENTIVE ACTION REPORT (NCPAR)

NCPAR No: **Date:**

Department:

1. Details: Nonconformity raised as a result of:

[ ] Material or Product
[ ] Customer Complaints
[ ] Internal Audit
[ ] Customer Satisfaction Survey
[ ] Unmet Goals/ Objectives
[ ] Service Non conformity
[ ] Potential Nonconformity
[ ] Others

2. Description of [ ] Non-Conformity [ ] Potential Nonconformity [ ] Improvement

Detected by: Date:

3. Disposition: (For Material /Product only - Optional)

[ ] Rework/ Repair
[ ] Reject & return to supplier
[ ] Use as is
[ ] N/A

Proposed by: Date:

4. Investigation: [ ] Cause of non-conformity: [ ] P Potential non-conformity

Conducted by: Date:

5. Corrective/Preventive Action:

[ ] Correction (Immediate Action or Containment Action):

Responsible: Date:

[ ] Corrective Action: [ ] Preventive Action: [ ] Improvement:

Responsible: Date:

6. Follow-up on Implementation of Action:

[ ] Satisfactory **[ ]** Not satisfactory (issue new NCPAR)

Remarks: _____

Name & Signature: Date:

7. Verification on the effectiveness of action: (To be completed by the QMR or Dept. Head)

[ ] Satisfactory (Close out) **[ ]** Not satisfactory (issue new NCPAR)

Remarks: _____

Verified by: Date:

Title: Control of Non-Conformity, Corrective and Preventive Action

Laguna State Polytechnic University

CORRECTIVE ACTION MONITORING LOG

CPAR #	Issued Dept.	Date Issued	Date Due	Non-conformance	Root Cause Analysis	Action Taken	Implemented Date	Date Ver. Implemented	Date Ver. Effective	Status