

Document Reference Code BUC-STO-PR-005

Revision No.

Effectivity Date 01/05/2018

Page 1 of 5

CORRECTIVE ACTION PROCEDURE

REVISION HISTORY AND APPROVAL

Rev.	Date	Nature of Changes	Approved By
0		Original issue.	Rey M. Raagas



Document Reference Code
BUC-STO-PR-005

Revision No. Effectivity Date
0 01/05/2018

CORRECTIVE ACTION PROCEDURE

Page **2** of 5

1. PURPOSE

The purpose of this procedure aims to eliminate the identified non conformities to prevent recurrence.

2. SCOPE

This procedure applies to nonconformities found in the implementation of the quality management system.

3. DEFINITION OF TERMS

Nonconformity	Non-fulfilment of a requirement	
Corrective	Action to eliminate the cause of a detected	
Action	nonconformity (nonconforming service) or other	
	undesirable situation and prevent recurrence	

4. RESPONSIBILITIES

Division Staff	• Conducts root cause analysis, develops, plans, and implements corrective actions
Division Chief	• Ensures that actions are taken without undue delay to prevent the recurrence of nonconformities
Management Review Committee	 Ensures the provision of resources for the implementation of corrective actions Reviews the status and effectiveness of corrective actions



Document Reference Code BUC-STO-PR-005

Revision No. 0

Effectivity Date 01/05/2018

CORRECTIVE ACTION PROCEDURE

Page **3** of 5

5. PROCEDURE DETAILS

Activity	Person Responsible	Details/Functions	References
START Review and	Division Chief	 Receives and reviews the request for actions. Identifies concerned staff who will be involved in corrective action 	• Request for action Form (ADM-PR- 005-F01)
determine cause of non- conformity	Division Chief	Conduct root cause analysis	• Request for action Form (ADM-PR-005-F01)
Evaluate the need for action to prevent recurrence	Division Chief	Assess the risk associated with a recurrence of the nonconformity	• Request for action Form (ADM-PR- 005-F01
Determine and implement the action needed	Division Chief	 Develops, plans and recommends corrective actions Approves corrective actions Implements corrective actions 	• Request for action Form (ADM-PR- 005-F01)
Review corrective action taken END	Division Chief	• Reviews the implementation status and evaluates the effectiveness of corrective actions	• Corrective Action Status Report (ADM-PR- 005-F02)

6. GUIDELINES

- 6.1 The corrective action procedure shall be triggered by Request for Action from the other processes/ procedure in response to identified nonconformities from:
 - 6.1.1 Internal quality audits
 - 6.1.2 Customer complaints
 - 6.1.3 Qualified nonconforming services



Document Reference Code
BUC-STO-PR-005
Revision No. | Effectivity Date

Revision No. 0

Effectivity Date 01/05/2018

CORRECTIVE ACTION PROCEDURE

Page **4** of 5

- 6.1.4 Unacceptable deviations from the organization's programs and plans
- 6.2 Review of Nonconformity
 - 6.2.1 The initial review of the Request for Actions shall consider:
 - 6.2.1.1 The extent and impact of the reported nonconformity
 - 6.2.1.2 The processes contributing to and affected by the reported nonconformity
 - 6.2.2 The Division Chief shall identify concerned personnel who need to be involved in corrective action.
- 6.3 Determining the Cause of Nonconformity
 - 6.3.1 Root cause analysis shall consider the different factors contributing to the nonconformity, including:
 - 6.3.1.1 Manpower
 - 6.3.1.2 Methods
 - 6.3.1.3 Materials
- 6.4 Evaluating the Need for Corrective Action
 - 6.4.1 Risk assessment shall determine the significance of the nonconformity, considering the following:
 - 6.4.1.1 The likelihood of recurrence of the nonconformity
 - 6.4.1.2 The severity impact of the nonconformity to the organization should it recur.
 - 6.4.2 Likelihood can be evaluated in terms of "low", "medium", "high".
 - 6.4.3 The risk level can be determined by evaluating likelihood and severity together, using a A basic Significance Table for assessing risk is shown below:

		Likelihood of Recurrence		
		LOW	MEDIUM	HIGH
	Low	1	2	4
Severity of Impact	Medium	3	5	7
_	High	6	8	9

6.4.4 Using the Significance Table, for example, a nonconformity with a likelihood of "High" will be rated "9". Nonconformities with a rating of 4 and above are considered significant, and



Document Reference Code
BUC-STO-PR-005

Revision No.

Effectivity Date 01/05/2018

CORRECTIVE ACTION PROCEDURE

Page 5 of 5

shall be subjected to corrective action. Corrections may suffice for nonconformities with a rating of 3 and below.

- 6.5 Determining and Implementing Corrective Action
 - 6.5.1 Planning of corrective actions shall involve the following:
 - 6.5.1.1 generations of alternative solutions
 - 6.5.1.2 the selection of the best solution
 - 6.5.1.3 the identification of activities, resources, responsibilities and timelines needed to implement the selected solutions
 - 6.5.2 Corrective actions shall be approved by the Division Chief/Director of Agency.
- 6.6 Reviewing the Status of Corrective Action
 - 6.6.1 The implementation status and effectiveness of corrective actions shall periodically reviewed and evaluated by the concerned Division Chief; any related issue shall be promptly addressed.
 - 6.6.2 Corrective actions shall be collectively reviewed by the Management Team. Depending on the nature of the solution and the associated nonconformity, monitoring and review shall continue for at least 6 months after implementation, after which the corrective action shall be deemed completed.