



QUALITY MANAGEMENT SYSTEM PROCEDURE

CONTROL OF NONCONFORMITY AND CORRECTIVE ACTION

Code : DAP-QP-03

Revision No. : 4

Effectivity: August 16, 2016

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1.0 PURPOSE

This procedure shall establish the requirements for:

- 1.1 Reviewing nonconformities (including customer complaints);
- 1.2 Determining the causes of the detected and potential nonconformities;
- 1.3 Evaluating the need for action to prevent the occurrence and recurrence of a nonconformity;
- 1.4 Determining and implementing action needed;
- 1.5 Records of the results of action/s taken;
- 1.6 Reviewing the effectiveness of the corrective actions taken;
- 1.7 Defining the controls and related responsibilities and authorities for dealing with nonconforming services.

2.0 SCOPE

This procedure shall cover all corrective actions that can be done to address a nonconformity which can affect the DAP Quality Management System.

3.0 POLICY

The delivery of DAP's products and services should always satisfy customer's requirements in accordance with the service agreement. As such, it is the policy of the Academy to identify, control and prevent occurrence/recurrence of products and services that do not conform to specified requirements. Likewise, it is also an Academy policy to implement corrective actions to continually improve the effectiveness of the established Quality Management System.

4.0 DEFINITION OF TERMS:

- 4.1 **Correction** – action to eliminate a detected nonconformity.
- 4.2 **Corrective Action** - action to eliminate the cause of a nonconformity and to prevent recurrence.
- 4.3 **Conformity** – fulfillment of a requirement.
- 4.4 **Nonconformity (NC)** - failure to comply with a requirement.



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4.5 **Opportunity for Improvement (OFI)** - an observed situation which is not a nonconformity but where the results achieved may not be optimal, less than well-organized, or over complicated.

4.6 **Request for Action (RFA)** - document used to:

4.6.1 Record a nonconformity or an opportunity for improvement;

4.6.2 Identify the root-cause of the nonconformity;

4.6.3 Determine correction and corrective action.

5.0 RESPONSIBILITIES

5.1 **Quality Council** - ensure that this procedure is properly implemented.

5.2 **Heads/Process Owners** - ensure that corrections and corrective actions are carried out without undue delay
- ensure that all RFAs received are properly responded and submitted to the IQA, and that documented information is retained.
- ensure the effectiveness of actions taken.

5.3 **Internal Quality Audit Team** - verify if the corrections and corrective actions have been effectively carried out.

6.0 PROCEDURE DETAILS

6.1 Identification of nonconforming and potential nonconforming products/services

Nonconforming products/services may be detected through or as a result of (but not limited to) the following:

6.1.1 Statutory and Regulatory Requirements

6.1.2 Client Feedback/ Customer Satisfaction Surveys

6.1.3 Products and Service Realization

6.1.4 Audit Activities

6.1.5 Management Reviews

6.1.6 Suppliers Performance

6.1.7 Benchmarking



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6.2 When a nonconformity or a potential nonconformity is detected, implement the following procedure:

- 6.2.1 Document the nonconformity by accomplishing the appropriate part of the RFA;
- 6.2.2 Submit the RFA to the Internal Quality Audit Team for review and control number assignment. The IQA Team shall be responsible in forwarding the RFA to the concerned group/center/institute/unit;
- 6.2.3 The initiator and the IQA Team shall coordinate on the status of actions, and until the nonconformity is resolved;
- 6.2.4 In the case of nonconformity from non-achievement of a Center's/Unit's objective or target, the "Action Plan for Unmet Targets" form can be used to document the NC. This document is decentralized.

6.3 When an RFA is received, implement the following procedure:

- 6.3.1 Group/Center/Institute/Unit Head should acknowledge the RFA by signing on the 1st page (space provided);
- 6.3.2 Perform a Root-Cause Analysis (RCA). As necessary, use quality tools such as a "Fishbone Diagram" to further identify and analyze the root-cause of the problem;
- 6.3.3 Using the results of the RCA, formulate a correction and a corrective action. The actions to be taken should address the identified cause/s of the NC.
- 6.3.4 Provide a specific implementation date for both the correction and corrective action;
- 6.3.5 Secure the approval of the Group/Center/Unit Head;
- 6.3.6 Submit the RFA to the IQA Team within fifteen (15) working days upon receipt.

6.4 Disposition and Monitoring of Correction and Corrective Action

- 6.4.1 The concerned Center/Unit Head shall be responsible to carry out the necessary corrective actions. To lower the risk of recurrence of detected NCs, and the risk of occurrence of potential NCs, the Center/Unit Head shall:
 - 6.4.1.1 Review and approve the RCA, the correction, and the corrective action that have been identified in the RFA;



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6.4.1.2 Monitor if actions are carried out according to the targeted implementation date;

6.4.1.3 Conduct a regular meeting regarding the Center's/Unit's implementation of the DAP-QMS, the results of actions taken in the RFAs, and other QMS concerns.

Note: Documentation of the meetings should be retained accordingly (ISO 9001:2015 7.5 Documented Information)

6.4.2 The Center/Unit heads shall be primarily responsible in ensuring the effectiveness of their own actions.

6.5 CONTROL OF NONCONFORMITY MATRIX

Nature of NC	Action/Disposition	Responsibility
Delay in the perfection of project contract	<ul style="list-style-type: none"> Seek approval from authority; refer to MC-2012-003 Implementing Guidelines for the Product and Project Development Investment Management System (PPIDMS) 	Project Manager Supervising Fellow OSVPP Office of the President
Delays on target date for deliverables	<ul style="list-style-type: none"> Inform the Client Revise Workplan 	Project Manager Supervising Fellow
Change in Project Duration and Team composition	<ul style="list-style-type: none"> Inform the Client Revise Special Order Revise Project Implementation Plan (PIP) 	Project Manager Supervising Fellow Center Head
Non-appearance of Facilitator and/or Resource Person on scheduled appointment with client	<ul style="list-style-type: none"> Plan and mobilize alternative facilitator and/or Resource Person Reschedule 	Project Manager Supervising Fellow
Exceeding the allotted project budget	<ul style="list-style-type: none"> Monitor succeeding project disbursements Revise PIP, re-align budget items Request customer or center for additional funding, if applicable 	Project Manager Supervising Fellow Center Head



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Nature of NC	Action/Disposition	Responsibility
	<ul style="list-style-type: none"> Discontinue affected activities, subject to customer's approval 	
Unavailability of internal support services	<ul style="list-style-type: none"> Provide allowance/anticipate time in reserving support services Seek external support services 	Project Manager
Billing errors	<ul style="list-style-type: none"> Retrieve the Billing Statement Re-issue Billing Statement with covering explanation 	Project Manager Finance
Change in project deliverables: <ul style="list-style-type: none"> Course, research, training, publication, report design Topics Duration Activities 	<ul style="list-style-type: none"> Inform the client Refund fee Offsetting Revise Workplan and PIP Revise acceptance criteria 	Project Manager Supervising Fellow Center Head Finance
Inability to notify customer re: changes in planned arrangements	<ul style="list-style-type: none"> Issue written explanations/apologies 	Project Manager Supervising Fellow
Errors in publication	<ul style="list-style-type: none"> Publish errata 	Project Manager Purchasing Unit
Deviation from established Code of Conduct	<ul style="list-style-type: none"> Investigate Refer to superior/manager for immediate appropriate action 	Project Manager Supervising Fellow Center Head Human Resource
Documentation errors <ul style="list-style-type: none"> Reports Certificates Handouts Correspondence 	<ul style="list-style-type: none"> Retrieve Revise Resend 	Project Manager Supervising Fellow
Discrepancy on target participants	<ul style="list-style-type: none"> Advance confirmation Reschedule/Cancel the activity Inform Client Provide additional batch Decline attendance 	Project Manager Supervising Fellow



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Equipment malfunction	<ul style="list-style-type: none">• Replace with spare equipment• Rent equipment from external service provider	Project Manager DAPCC
Problems with utilities/ facilities/ infrastructure	<ul style="list-style-type: none">• Secure remedial immediate action from concerned utility/facilities provider• Use alternative venue• Postpone/cancel the activity	Project Manager DAPCC General Services Div.



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7.0 REFERENCE

- 7.1 Clause 10.2 ISO 9001:2015 - Nonconformity and Corrective Action