PROCEDURE

Corrective and Preventative Action

The current controlled version of this procedure is located on RSG Network IMS Folder. All other printed copies of this procedure are to be considered uncontrolled and should be validated against the current controlled version on the RSG Network IMS Folder before use.

Document Review Record				
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2	Merge Corrective Action (P-QA-009) and Preventative Action (P-QA-010) Procedures	E Wicks	G Wicks	28.11.2013
3	Update Numbering Structure	L Strappazon	M Delaney	08.06.2016
4	Remove and transfer responsibilities section to QMS-PRO-026 – Authority and Responsibilities procedure.	A Forrest	L Strappazon	26.09.2016
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6	Section 3. Update ISO 9001:2008 to ISO 9001:2015	M Vorpagel	D McNeil	20.09.2019
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1 PURPOSE

The purpose of this procedure is to detail the process for identifying, capturing and recording, reviewing and closing corrective and preventative actions.

All corrective and preventative actions should be captured so that Reay Services Group can improve its performance.

2 SCOPE

Corrective and Preventative Actions may be identified for any Quality, Safety, Environmental or other event, compliance or process affecting the company and are generally identified as a result of:

- Incident investigations
- Management Reviews
- System failures
- Improvement processes; and
- Audit Reports

3 DEFINITIONS

Company / the Company: Refers to Reay Services Group and associated entities.

Corrective Action: Action taken to rectify the non-conformance, safety incident or to mitigate an environmental impact (real or potential) or to comply with ISO 9001:2015.

Non-conformance: The nonfulfillment of specified requirements, out of conformance with the company's QMS, SMS or EMS Manual or regulatory requirements.

Preventive Action: Action taken to avoid repetition of the same non-conformance. This could involve modification or enforcement of procedures, or implementation of further controls.

Root Cause: The fundamental deficiency that results in a non-conformance that must be eliminated through corrective action to prevent recurrence of the same or similar non-conformance.

Senior Management: Refers to the senior management team (including the Managing Director, General Manager, Business Development Manager, Commercial Manager)
System: Quality, Safety and Environmental Management Systems.

4 RESPONSIBILITIES

All Company employees and contractors are responsible for complying with the requirements of this procedure.

Refer to QMS-PRO-026 – Authority and responsibilities procedure for further details.

5 PROCEDURE

5.1 Event

5.1.1 Quality Non-conformances (including customer complaints)

Non-conformances or opportunities for improvement will be identified either by employees, customer complaints or by quality management system audit reports. By whichever means a non-conformance is identified, the underlying cause(s) of the non-conformance will be investigated. Non-conformances are investigated in accord with HSEQ Incident Reporting and Investigation Procedure (WHS-PRO-002).

The Management Representative will review any issues raised and complete an Investigation Report (WHS-FRM-004) to identify root cause, contributing factors and level of action required.

Repeated non-conformances of the same nature or significant deviations from procedures or quality policy will be reported to Senior Management for action and resolution.

5.1.2 Incidents & Accidents (including near miss and hazards)

Incidents and Accidents (including near miss and hazards) shall be reported by employees immediately. All incidents and accidents are investigated in accord with HSEQ Incident Reporting and Investigation Procedure (WHS-PRO-002). The investigation shall ensure that root causes and contributing factors are identified and reported.

5.2 Evaluate Need for Action

5.2.1 Corrective Action

If corrective action is necessary to address the identified root cause/s or contributing factors then Corrective Action will be developed and appropriate personnel assigned tasks.

5.2.2 Preventative Action

Investigate the potential cause of the non-conformance or incident. They could arise from processes affecting quality, safety or environmental performance, audit results, lack of training or poor communication.

If preventive action is necessary then actions will be developed to address potential cause and appropriate personnel assigned tasks.

5.2.3 Recording Action

The corrective action shall be entered into the Corrective and Preventative Action Register QMS-REG-001 for monitoring through to close out, providing details of action taken to close the corrective action.

5.3 Implement Action

Designated personnel must implement agreed level of action within agreed timescale. The Management Representative will monitor corrective and preventative actions to ensure effective and timely responses are achieved.

Corrective and preventative action will be closed out on the register when satisfactory resolution has been achieved and when objective evidence of close out has been obtained through inquiry or audit.

Preventive action such as, implementing, modifying or enforcing procedures or controls will be taken to avoid repetition of the non-conformance where necessary.

5.4 Record the Results

Apply controls to ensure that the corrective and preventative action is implemented and effective by: management review of changes, personnel training and/or documentation of implemented changes.

Any changes to the quality, safety and environmental management systems or associated procedures, as a result of corrective action, will be recorded.

5.5 Management Review

A review of corrective and preventative actions will be undertaken by senior management to verify the performance and effectiveness of corrective or preventative actions taken. The Management Representative and senior management will determine if action taken could potentially improve other areas of the company.

5.6 Corrective Action Form (CAR)

If a quality, health and safety or environmental issue or non-conformance is identified on site a corrective action request (CAR) shall be raised detailing the non-conformance/corrective action to be undertaken and sent to Head Office for notification and Authorisation.

Any non-conformances Identified during Internal Audits and Inspections the Corrective Action form (CAR) will be issued to site detailing the Non-Conformance and Corrective Action to be implemented.

6 REFERENCE DOCUMENTATION

WHS-FRM-006 Incident Report Form
WHS-FRM-004 Incident Investigation Form
QMS-REG-001 Corrective and Preventative Action Register
WHS-PRO-002 HSEQ Incident Reporting and Investigation Procedure
QMS-FRM-014 – Corrective Action Request (CAR)