REPUBLIC OF THE PHILIPPINES
METROPOLITAN NAGA WATER DISTRICT
40 J. MIRANDA AVENUE, NAGA CITY

OFFICE OF THE GENERAL MANAGER

PROCEDURES AND WORK INSTRUCTIONS MANUAL (PAWIM)

(QMP04) CORRECTIVE ACTION

Revision Status

This list identifies the revisions made in this section. The date refers to the date this section was made effective and implemented and not to the date the document was signed or printed.

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Metropolitan Naga Water District Quality Management System

1. PURPOSE

The procedures outlines the method of Corrective Action (CA) to ensure that the existing nonconformities of the QMS are addressed by eliminating the cause of non-conformities thus preventing recurrence.

2. SCOPE

Covers review of nonconformity, determination of consequence and implementation of immediate action, identification of true cause of nonconformity and implementation of corrective action to prevent recurrence.

3. RESPONSIBILITIES

ISO Team and internal auditors are responsible in ensuing that internal quality audits are implemented effectively and on-time.

4. CRITERIA

Corrective Actions (CAs) are taken to address existing non-conformities of the QMS. Corrective Action are taken to eliminate the cause of non-conformities in order to prevent their recurrence.

4.1.REVIEW NON-CONFORMITY

4.1.1. Customer Feedback;
4.1.2. External and Internal Issues;
4.1.3. Operational Concerns;
4.1.4. Violations to Legal or Regulatory Requirements;
4.1.5. Emergency Incidents / Situations;
4.1.6. New and Upcoming Legal or Regulatory Requirements;
4.1.7. Decisions and Actions from Management Review;
4.1.8. Concerns from Interested Parties and Surrounding Areas;
4.1.9. Natural Disasters;
4.1.10. Effect of Changes in the QMS; and
4.1.11. Risk Assessment

4.2.DETERMINE COSEQUENCE OF NON-CONFORMITY AND IMPLEMENT ACTION NEEDED

Possible consequence or impact of non-conformity can be related to quality and delivery of service to customers, cost, and complaint from interested parties. Action/s to address consequence should also be determined and implemented.

4.3.DETERMINE CAUSE OF NON-CONFORMITY

Non-Conformities (NC) should be investigated to determine the root cause or source of the problem and if similar NCs exist or could potentially occur. Root Cause Analysis should be conducted whenever applicable. Consideration should be given to various aspects of the system e.g. procedural, technical, accidental, or even human. Root causes may involve external factors which are beyond control of the organizations, e.g., delays due to regulatory bodies, natural forces. If necessary, a committee or team may be formed to perform the investigation and analysis due to the complexity or nature of the NC.

4.4.EVALUATE, DETERMINE AND IMPLEMENT ACTION NEEDED

Corrective Actions (CA's) are undertaken by the respective divisions/sections. CAs should address the root cause of the problem and not only on its effects, the solution should also address the system or be "systematic" in nature to prevent the recurrence. CA's should also identify the resources required, timetable and CA Team / Task Force (if necessary). Action taken should be appropriate to the effects or magnitude of the potential problems or non-conformities encountered. Considerations should be given to impact to customers, cost considerations and potential savings and safety.

Plan of Actions may cover revisions of procedures, actual practices, or recording of activities. Changes to procedures and support documents resulting from the corrective and preventive actions should be done according to Control of Documented Information procedures.

Initial plan of action to address the NC should be made within two (2) weeks from the time of issuance. Non-conformities which cannot be resolved by the division are brought up to management.

4.5.RECORDS RESULTS OF ACTION

In general, CA's are documented through the Corrective Action Form which captures all stages of the CA process from problem identification, to root-cause-analysis, to plan of action to verification of effectiveness. Additional documentation can be referenced or attached to support the key ideas in the Corrective Action Form.

4.6.REVIEW ACTION TAKEN

These are two phases in reviewing the action taken, the first deals with the Plan of Action to ensure that it has been implemented. The second evaluates if the said Plan of Action was effective in preventing the non-conformance from recurring. If the CA is found to be ineffective, additional actions will have to be made until the non-conformance is sufficiently addressed.

The review or verification is performed by an independent party e.g. ISO Head, Internal Auditor within one (1) month after CA was identified. For CAs requiring considerable amount of time, the status /progress of action taken is monitored at least every month until completion.

Corrective Action Format shall only be closed if there's no recurrence of non-conformity after the implementation of corrective action. Assessment of risk and opportunities related to non-conformity and corrective action should be done, if applicable.