Logo

Preventive Action

http://quality-management.magt.biz

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Justification	
This Procedure is written because:	☐ Of the lengthiness of the process.
	☒ Of the complexity of the process.
	☐ The process is routine, but it's essential that everyone strictly follows the rules.
	☒ The process demands consistency.
	☒ The process involves documentation.
	☐ The process involves significant change.
	☒ The process has serious consequences if done wrong.

Organization Details	
Organization Name	
Organization representative	
Organization Address	

Purpose and Scope

The purpose of this procedure is to establish the process for identifying, documenting, analyzing, and implementing preventive action.

The scope of this preventive action procedure is to eliminate causes of non-conformities in order to avoid their repetition as well as to study and analyze data records in order to pro-actively avoid non-conformities to happen in the future.

Input(s)

Common inputs to this procedure are,

- Established processes and procedure documentation,
- Management Plans,
- Non-Conformance Reports and Corrective Action Reports,
- Lessons Learned Register,
- Data Records

Output(s)

Outputs of this procedure are:

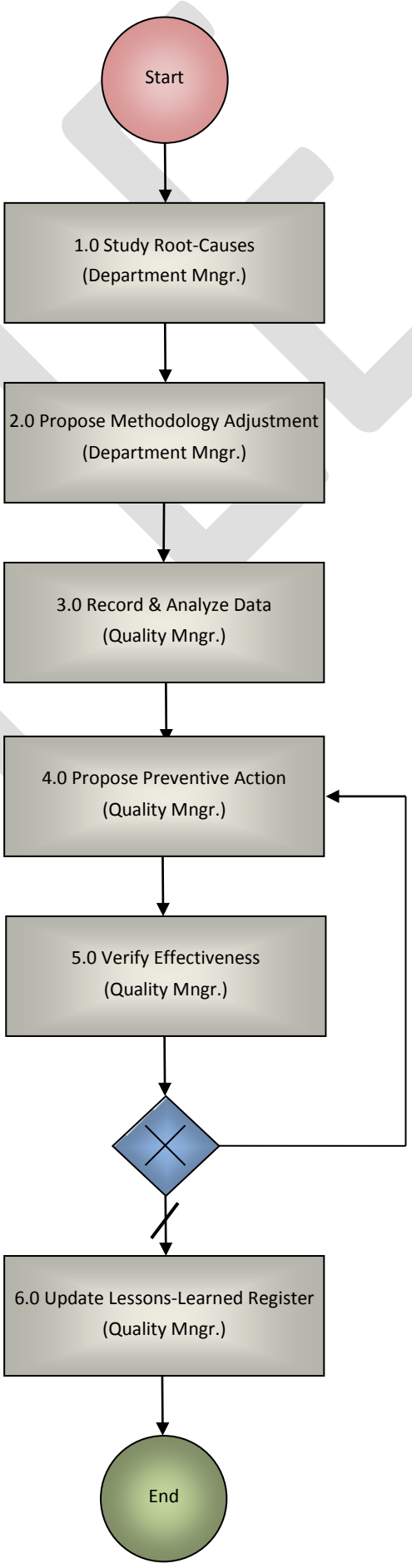
- Updates to work methodologies,
- Updates to training plans and/or approved material lists (whatever applicable)

Process

1) Study previous corrective actions and the underlying root cause of the non-conformity.
2) Propose adjustments to avoid repetition.
3) Record and analyze data.
4) Propose preventive action.
5) Verify effectiveness of corrective actions.
6) Update the Lessons-Learned Register.

Responsibilities

a) The departmental manager of the affected area or his designee is responsible to identify the root cause of occurred non-conformity, to elaborate it and to implement corrective action.
b) The QA/QC manager or his representative with the support of the departmental manager studies the corrective action and the underlying non-conformity and kicks-off prevent action procedure.



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