1.0 Objective

The purpose of this procedure is to specify guidelines on ensuring that products and services that do not conform to the requirements are identified and controlled to prevent their unintended use or delivery, or if delivered, to ensure that appropriate remedies are effectively taken and their root causes.

2.0 Scope

This procedure applies to the outputs of the LGU San Vicente, Palawan from identification of nonconformity of product and services up to the evaluation of the effectiveness of corrective actions.

3.0 Definition of Terms

Nonconforming outputs	Outputs that do not fulfill requirements. Outputs may mean products or services. Products refer to physical items, such as reports and other documents prepared and released in conjunction with service delivery. Examples of physical products are documents like certificates issued, reports, etc. While coordination and advocacy activities are examples of services provided by the LGU of San Vicente, Palawan. Services refer to intangible outputs, such as consultancy, education, among others.
Correction	Action taken to eliminate and correct the nonconforming product/service, to make it conform to requirements or otherwise prevent its unintended use or delivery. This may include reworking, regarding or scrapping of nonconforming products, or redoing the service.
Concession	Permission to use or release a product or deliver a service that does not conform to specified requirements. A concession is generally limited to the delivery of a product that has nonconforming characteristics within the specified limits for an agreed time or

quantity of that product.

Corrective Action	Action to eliminate the cause of a detected nonconformity (nonconforming product/service) or other undesirable situation, and prevent recurrence or occurrence elsewhere.
Process Owner	Individual/office whom/where the process being performed is where the NC is detected Employee/office responsible for the performance of a process and ensuring that objectives are realized, and that appropriate actions are carefully reviewed and approved and are taken without undue delay to eliminate nonconformities and their causes.

4.0 Reference Documents

4.1 QMS Manual
4.2 Internal Quality Audit Procedure

5.0 Procedure Details

Ref. No.	Key Activities		Responsible	Reference Document/ Record
5.1	Identify nonconforming product/service	• Detect nonconforming product/service • Receive citizen feedback on NC product/service	Process Owner	Applicable Issuance or Procedure
5.2	Review detected and potential nonconformity	• Receive and review the Request for Action (RFA) • Identify concerned staff who will be involved in corrective action	Process Owner	RFA

Ref. No.	Key Activities		Responsible	Reference Document/ Record
5.3	Take actions to eliminate the nonconformity	• Isolate nonconforming output, and/or temporarily stop process/service delivery • Provide initial response to client feedback, as needed • Provide initial correction in the product/ service, if applicable	Process Owner	Records
5.4	Evaluate the need for actions	• Conduct root cause analysis, if applicable	Process Owner	RFA
5.5	Determine and implement the action needed	• Develop, plan and recommend corrective actions • Approve corrective actions • Implement corrective actions	Process Owner	RFA
5.6	Review corrective action taken	• Review the implementation status and evaluate the effectiveness of corrective actions	Management QMR	RFA, Corrective Action Status Report
5.7	Make changes to the QMS	• Revise documented information • Update risks and opportunities register	Process Owner/QMS Secretariat	Risk Register

5.1 Identifying Nonconforming Product/Service

5.1.1 Nonconforming products/services may be detected internally by the LGU staff as they perform their functions, through observation, monitoring, inspection, verification and review.

5.1.2 The possible nonconformities may occur in the following areas, but not limited to:

a. Management Process (lack of internal audit system, inefficient document management).
b. Core Processes (processing of incomplete documents, erroneous input of data/records or delay in the submission of required documents)
c. Support Processes (Absence of preventive maintenance schedule for equipment, inefficient internet connectivity)

5.1.3 Nonconforming products/services may also be detected externally by the customer/citizen through feedback or complaints.

5.1.4 When nonconforming products/services are detected, they shall be evaluated against requirements defined in applicable operating procedures, process guidelines, product/service guidelines, or quality plans.

5.2 Take Actions to Correct Nonconformity

5.2.1 Once nonconformities are detected, there is a need contain the problem so that no additional nonconforming products/services are produced or delivered, and/or prevent already nonconforming product/service from worsening.

5.2.2 The following actions may be taken to eliminate and/or address the nonconformity:

a. Marking the product to identify it as nonconforming (e.g. clear marking such as “defective”);
b. Segregating the product and storing it in a location designated for nonconforming products to prevent it from being mixed with conforming product (e.g. malfunctioning office equipment are placed in designated areas/stockrooms);
c. Providing treatment to prevent further damage (e.g. repair/preventive and corrective maintenance or retrieving the issued document);

d. Returning and/or terminating the nonconforming product/service to the suppliers/dealers/contractors (e.g. defective equipment, materials failed to meet specifications);
e. Temporarily discontinuing the nonconforming service (e.g. stop operations);
f. Inspecting the delivered goods, materials, tools/ equipment and infrastructure projects to identify it as nonconforming based on the Terms of Reference/Specifications (e.g. inspection of delivered track materials); or
g. Obtain product concession.

5.2.3 When the nonconforming product/service is detected just prior to the customer/citizen or at any time thereafter, the customer/citizen shall be informed of the nonconforming product/service

5.3 Evaluate the Need for Actions

5.3.1 The review of nonconformity is triggered by an issued RFA from other processes/procedures in response to identified nonconformities from:

a. internal quality audits;
b. customer/citizen complaints (from the monitoring and measurement of customer satisfaction);
c. qualified nonconforming outputs;
d. poor process performance results and unacceptable deviations from the organization's programs and plans; and
e. from management reviews

5.3.2 The initial review of the RFA considers the extent and impact of the reported nonconformity and the processes contributing to and affected by the reported nonconformity.

5.3.3 The Department Head identifies concerned personnel who need to be involved in developing the corrective action. This may extend to personnel outside his/her own department; thus, coordination with the other concerned departments should be established.

5.4 Determining the Cause of Nonconformity

5.4.1 All occurring nonconformities are subjected to root cause analysis to be able to come up with corrective action plans.

5.4.2 Root cause analysis considers the different factors contributing to the nonconformity, including:

a. Manpower - personnel competencies and their ability to consistently perform their functions as required.

b. Machine - the availability of appropriate tools, equipment and facilities to enable effective operations
c. Methods - the availability and consistent application of appropriate procedures, guidelines and standards
d. Materials - the availability of the needed materials and supplies to enable effective operations.
e. Environment – the condition of the surroundings, facilities, and work environment

5.4.3 Where several root causes are identified, they are prioritized relative to their contribution to the nonconformity

5.5 Determining and Implementing Corrective Actions

5.5.1 Based on the root causes identified, corresponding corrective action plan is developed and approved by the Department Head.

5.5.2 Planning of corrective actions (solutions) involves the following:

a. generation of alternative solutions
b. the selection of the best solution (from the alternatives)
c. the identification of activities, resources, responsibilities and timeliness needed to implement the selected solution.

5.6 Reviewing the Status of Corrective Actions

5.6.1 The implementation status and effectiveness of corrective actions is also periodically reviewed and evaluated by the concerned Department Head; any related issues are primarily addressed.

5.6.2 The IQA Team conducts verification audit to determine the effectiveness of actions taken. The root causes and corrective action plans documented in the RFA are reviewed and monitored by the IQA Team.

5.6.3 Corrective actions are collectively reviewed by the Management Team in the Management Review. Depending on the nature of the solution and the associated nonconformity, monitoring and review continues for at least 6 months after implementation, after which the corrective action is deemed completed.

5.7 Make Changes to the QMS, if necessary

5.7.1 The LGU of San Vicente, Palawan reviews and updates risks and opportunities identified during planning.

5.7.2 As necessary, changes may be made to the QMS in order to prevent a recurrence of the nonconformity.

6.0 Review and Amendment

This procedure is periodically reviewed every three (3) years to ensure up-to-date information and relevance. It undergoes appropriate review, approval, storage, and retention process in accordance with the Control of Documented Information Procedure.

7.0 Approval

Prepared by:

MERIAM D. ETCHINIQUE
QMS Leader

Reviewed by:

LYDIA A. RODRIGUEZ
Municipal Administrator

Approved by:

AMY ROA ALVAREZ
Municipal Mayor