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1.0 Objective

To describe the means by which a nonconformity to the QMS is identified, investigated, and addressed to mitigate any quality-related consequences, and for initiating and completing corrective action and improvement

2.0 Scope

This system procedure covers the application of corrective action and improvements for actual and potential nonconformities relating to the PNOC's QMS such as:

- 2.1 Process nonconformity
- 2.2 Legal non-compliance
- 2.3 Objectives and targets not being met
- 2.4 Programs not implemented as planned
- 2.5 Internal/ external audit findings
- 2.6 Problems identified by the management
- 2.7 Other system and process nonconformity such as non-compliance to established procedures as detected by the Supervisor or Department Manager.

3.0 Definition of Terms


- 3.1 Corrective Action Report (CAR) - a report describing an actual nonconformity, identifying the root cause, and requesting appropriate action
- 3.2 Nonconformity (NC) - failure to satisfy a particular requirement
- 3.3 Corrective Action (CA) – action taken to eliminate the root cause of a nonconformity and prevent it from recurring

4.0 References

- 4.1 ISO 9001:2015 Quality Management System Clause 10 Improvement

5.0 Policies and Guidelines

- 5.1 Corrective action must be commensurate to the impacts of the problem on the quality performance of PNOC.
- 5.2 Corrective actions, improvement actions, and future development plans that may introduce new or modified risks or may need new or modified controls shall be

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subjected to QMS-01 Planning and Change Management. Example of actions that require risk assessment are those involving:


- 5.2.1 Construction or modification of infrastructure
- 5.2.2 Alteration of workplace, e.g. re-layout
- 5.2.3 New equipment
- 5.2.4 Service offering
- 5.2.5 Revision to existing process
- 5.2.6 Organizational Structuring

5.3 When CAR is not needed:

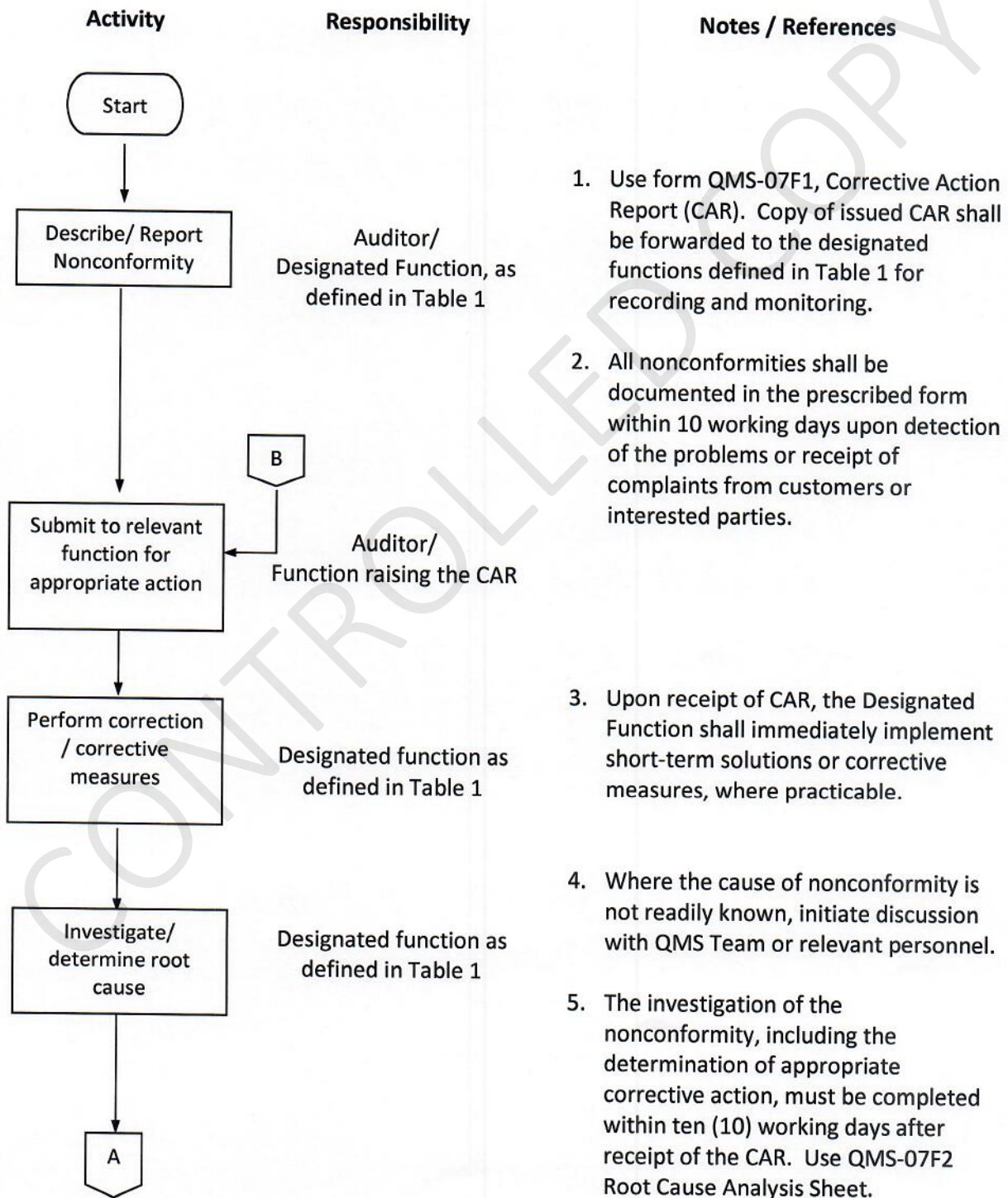
- 5.3.1 Nonconformity to procedures that can be corrected immediately.
- 5.3.2 Nonconforming services detected during ongoing service/ program implementation that are immediately corrected.
- 5.3.3 In IPCR, when individual action plans are not done or targets are not achieved as planned, but the Superior agrees to make adjustments accordingly.


5.4 When CAR is needed:

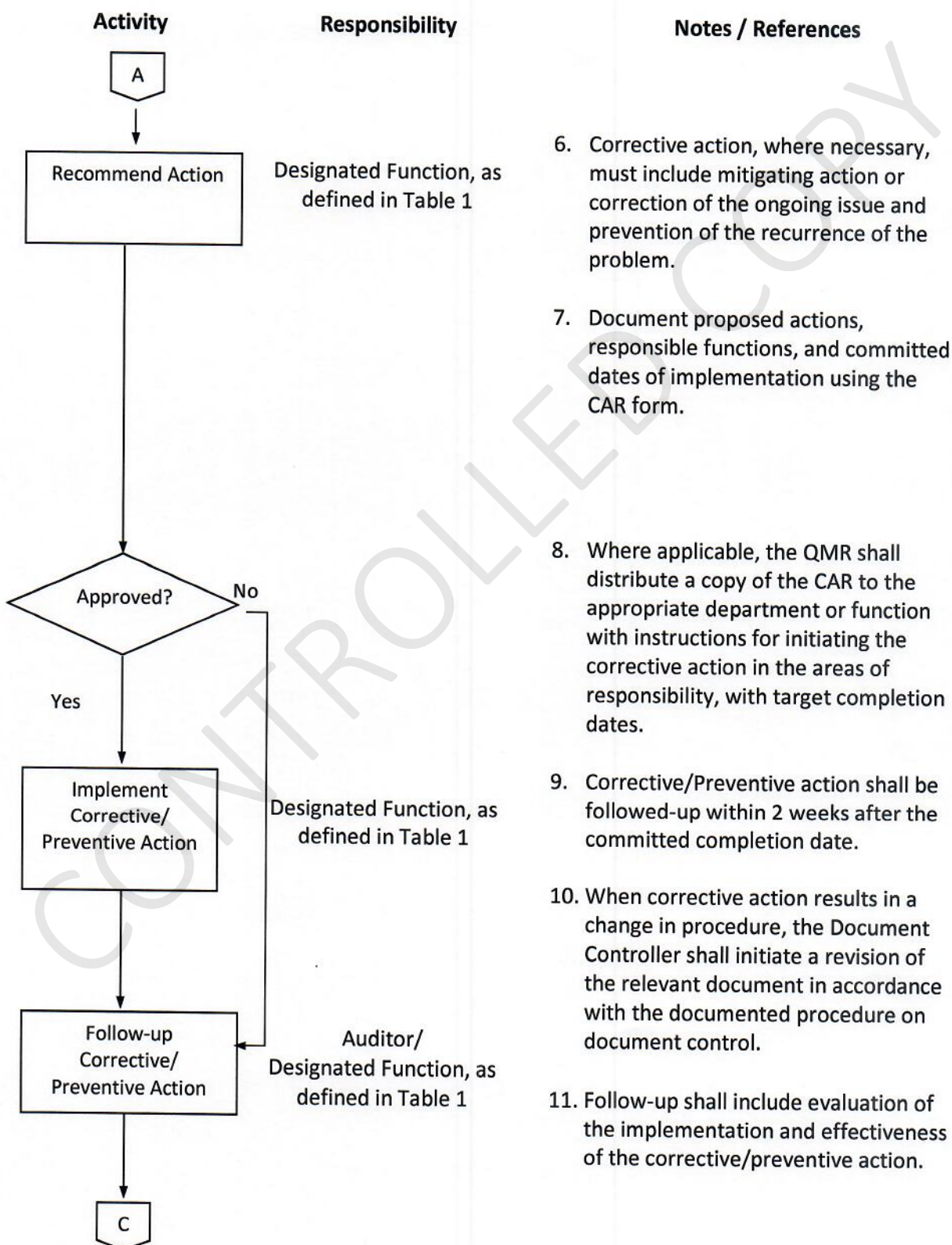
- 5.4.1 Repeated nonconformity to procedures, as detected/ reported by immediate superior for at least three times in the department/division within three consecutive months.
- 5.4.2 Valid and significant complaints from internal clients or other external interested parties.
- 5.4.3 Nonconformity raised during internal QMS audits and certification audits. Refer to QMS-05 Internal Audit.
- 5.4.4 In the OPCR, when a set objective or target is not met within the defined time frame, or an activity/ action, defined to meet an objective or target, is not implemented as planned.
- 5.4.5 When Notice of Violation received by the PNOC from the regulatory bodies, (e.g. DOE/COA/BIR/CSC, etc.).


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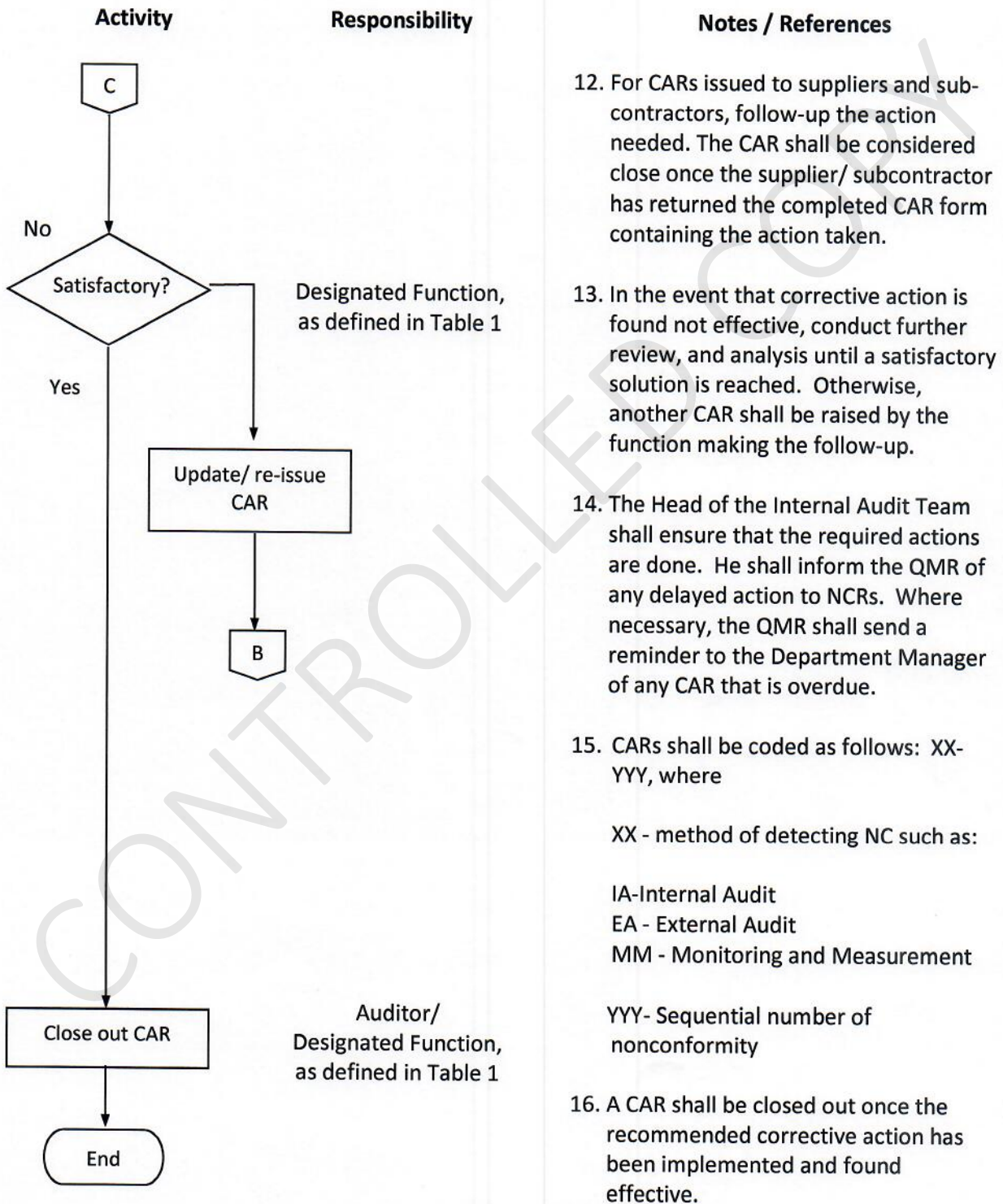
6.0 Procedure




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7.0 Forms

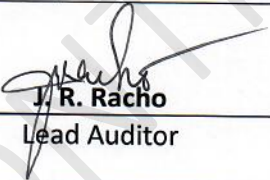
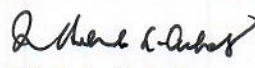
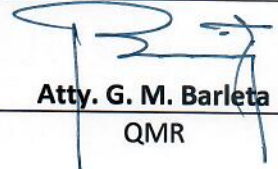
QMS-07F1	Corrective/ Preventive Action Request
QMS-07F2	Root Cause Analysis Sheet
QMS-07F3	CAR Progress Monitoring
QMS-07F4	QMS Monitoring Rating Form for Auditors

8.0 Attachments

QMS-07A1 Designated Functions for Raising and Processing CAR's

Sample Forms

Rev. No.	Affected pages/ section	Revision History
0	-	New version of PNOG QMS; to include PNOG Energy Supply Base and PNOG Industrial Park.
1	6	Additional form

Prepared by	Reviewed by	Approved by
 J. R. Racho Lead Auditor	 M. B. L. Cubelo Deputy QMR	 Atty. G. M. Barleta QMR



CORRECTIVE ACTION REQUEST (CAR)
 QMS-07F1 Rev.0

Relevant Function:	CAR Initiator: <i>(Signature over printed name)</i>	CAR Control No:	Date:
Type of Non-conformity <i>(tick where appropriate)</i> : <input type="checkbox"/> Internal Audit Finding <input type="checkbox"/> Complaints form customer <input type="checkbox"/> Complaints from interested parties	Classification:	ISO Clause:	Document Code:
	<input type="checkbox"/> Incident, Accident or Emergency	<input type="checkbox"/> Objectives & targets not met	
	<input type="checkbox"/> Non-compliance to procedure/ work instructions	<input type="checkbox"/> Legal non-compliance	
	<input type="checkbox"/> Supplier/Subcontractor nonconformity		
Description of Non-conformity:			
Acknowledged by: _____ Date: _____ (Signature over printed name)			
Correction:			
Done by: _____ Date: _____ Reviewed/Approved by: _____ Date: _____ (Signature over printed name) (Signature over printed name)			
Cause of non-conformity: <i>(Determine the cause of the problem; attach RCA Sheet if needed)</i>			
Done by: _____ Date: _____ Reviewed/Approved by: _____ Date: _____ (Signature over printed name) (Signature over printed name)			
Agreed Corrective/Preventive Action <i>(Attach risk identification, if required)</i>		Action Party	Completion Date(s)
Reviewed/Approved by: _____ Date: _____ (Signature over printed name)			
Follow-up Results Date	Remarks	Status	Signature



Root Cause Analysis Sheet

QMS-07F2 Rev.0

Problem	Reference No:
	<input type="checkbox"/> CAR _____ <input type="checkbox"/> Incident Report _____

Why-why / 4M's E (Identify possible causes; probe and verify each)

Man	Machine	Materials	Method	Environment

CONTROLLED COPY



**QMS Monitoring Rating Form
(Per PMT Resolution No. 3 Series of 2017)
QMS-07-F4**

QMS Monitoring Rating Form for Auditors

Auditor:	
Auditee:	

Please rate the following:	Excellent	Good	Adequate	Poor	Very Poor
	5	4	3	2	1
a. Professionalism of the auditor (punctuality, knowledge, good judgment, skills, and polite behavior)					
b. Communication skills of the auditor (auditor speaks clearly and explains their thoughts, ideas, and suggestions during the meeting/presentation of findings)					
c. Notification of the audit purpose and scope (audit purpose and scope clearly stated)					
d. Clarity of the audit findings (audit findings clearly stated and well-organized for better understanding by the auditee)					
e. Duration of the audit (sufficiency or insufficiency of time to cover the scope of the audit)					
f. Timeliness of the audit report					
g. Value of the audit recommendation(s) – (recommendation helps improve the system)					


Additional comments about the auditor and/or the audit process:

**Note: This form shall be submitted to the Supervising SVP a day after the audit has been done.*

Rater: _____

Date: _____



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DESIGNATED FUNCTIONS FOR RAISING AND PROCESSING CARs (TABLE 1)		0	1 of 1	

TYPE OF CAR	CAR INITIATOR	INVESTIGATE CAUSE/VALIDATE COMPLAINTS	RECOMMEND CORRECTIVE ACTION	REVIEW/ APPROVE CORRECTIVE ACTION	IMPLEMENT CORRECTIVE ACTION	FOLLOW-UP CORRECTIVE ACTION
Nonconformity found during the Internal Audit	Auditor	Concerned Manager	Concerned Manager	QMS Team/ Concerned Manager	Concerned Manager	Auditor
Complaints from customers & other interested parties	Corporate QMR	Concerned Manager	Concerned Manager	MANCOM/ Corporate QMR	Concerned Manager	Corporate QMR
Product/ Process/ System/ Legal nonconformity resulting from monitoring or review	Auditor/ Concerned Manager	Concerned Manager	Concerned Manager	QMS Team/ Concerned Manager	Concerned Manager	Auditor/ Concerned Manager
OPCR not met or action plans not done as planned	QMS Team/ Concerned Manager	Concerned Manager	Concerned Manager	QMS Team/ Concerned Manager	Concerned Manager	QMS Team/ Concerned Manager
Suppliers/ Subcontractors with low performance rating	End User	Proponent/ Supplier/ Subcontractor	Supplier/ Subcontractor	QMS Team/ Concerned Manager	Proponent/ Supplier/ Subcontractor	End User
Potential Problem (Planning and Change Management)	QMS Team/ Concerned Manager	Concerned Manager	Concerned Manager	QMS Team/ Concerned Manager	Concerned Manager	QMS Team/ Concerned Manager