Sustainable Fibre Alliance

Corrective Action Procedure

Document Reference:

SCS-040-01.0-EN

Approvals

The signatures below certify that this Scheme Certification Manual has been reviewed, approved and demonstrates that the signatories are aware of all the requirements contained herein and are committed to upholding them.

	Name	Signature	Position	Date
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Approved by	Una Jones		Chief Executive	05/08/2021

Amendment Record

This procedure reviewed to ensure its continuing relevance to the systems and process that it describes. A record of contextual additions or omissions is given below:

Page No.	Context	Revision	Date

Contents

P012 Corrective Action Procedure

1. Introduction & Purpose

The purpose of this procedure is to establish the process for identifying, documenting and implementing corrective actions in order to eliminate actual non-conformances. The Sustainable Fibre Alliance's (SFA's) internal management system (IMS) is geared toward the elimination of defects and to this end; a formal corrective action system is utilised.

2. References

Reference	Title & Description
	Internal Management System Manual
F012-1	Corrective Action Request
F012-2	Corrective Action Request Log

3. Terms & Definitions

Term	Definition
Non-conformity	Non-fulfilment of a requirement
Corrective Action	Action taken to eliminate the cause of a non-conformity

4. Application & Scope

This procedure is applicable to all corrective actions related to non-conforming products, services and audit results. Any corrective action taken to eliminate the causes of actual non-conformances is appropriate to the magnitude of the problem whilst also being in proportion to the risks presented by the non-conformance.

Root causes of non-conforming products and services, as well as, quality management system defects are investigated and actions implemented to prevent their recurrence.

5. Requirements

Personnel & Process Owners are required to:

- Highlight potential non-conformances to their Manager
- Follow this procedure upon detection of a non-conformance

The **Standards and Compliance Manager** is required to:

- Determine the causes of non-conformances
- Maintain a system for reporting and record keeping

The **Chief Executive** is required to:

- Implement necessary actions to achieve resolution
- Review the effectiveness of corrective actions taken

6. Process

6.1 Review Non-conformities

- Non-conformances or opportunities for improvement may be identified by employees, customer complaints or by IMS audit reports. By whichever means a non-conformance is identified, the underlying cause of the non-conformance is investigated.

6.2 Determine Causes

- The Standards and Compliance Manager will review any issues raised and complete a non-conformance report F011-1 to identify root cause and level of action required.
- Repeated non-conformances of the same nature or significant deviations from procedures or the SFA business objectives are reported to the Chief Executive for action and resolution.

6.3 Evaluate Need for Action

- If corrective action is necessary then from F012-1 will be developed and appropriate personnel assigned tasks.

6.4 Implement Action

- Designated personnel must implement the agreed level of action within an agreed timescale. The Standards and Compliance Manager or nominated representative will follow up all corrective actions to ensure effective and timely responses are achieved.
- The Standards and Compliance Manager or nominated representative will close out the corrective action 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.

6.5 Verify Effectiveness

- The corrective action request originator verifies the effectiveness of the corrective action(s) taken. Where the originator is also responsible for the implementation of the corrective action, the Standards and Compliance Manager or nominated representative will provide the verification for corrective action request closure.
- If corrective actions are determined to be not effective, the original corrective action request will be closed and a new corrective action request will be issued.

6.6 Management Review

- A review of corrective actions is undertaken by top management to verify the performance and effectiveness of corrective actions taken. Corrective actions are reviewed for long-term effects and process improvements in Management Reviews.
- The Standards and Compliance Manager and the Chief Executive determines if the action taken could potentially improve other areas of the organisation.

6.7 Documentation & Records

- Any changes to the quality management system and its procedures, as a result of corrective actions are recorded. All documentation and records generated by the corrective action process are managed in accordance with IMS Clauses 4.2.3 & 4.2.4.

6.8 Corrective Action Process Map