



CAREER EXECUTIVE SERVICE BOARD

**QUALITY PROCEDURE
ON
CONTROL OF NONCONFORMITY**

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PURPOSE

The Quality Procedure on Control of Nonconformity aims to define and provide a system for identifying nonconformities related to CESB's Quality Management System (QMS). This procedure also aims to apply the necessary disposition for identified nonconformities and prevent its unintended use or delivery.

SCOPE and LIMITATIONS

The Quality Procedure on Control of Nonconformity shall apply to all identified nonconformities during implementation of CESB's Quality Management System.

REVIEW and AMENDMENTS

The Quality Management Representative (QMR) shall initiate the review of the Quality Procedure on Control of Nonconformity at least once every three (3) years or as deemed necessary.

Where amendments to this procedure are necessary, the QMR shall present proposed amendments to the CESB's Executive Director.

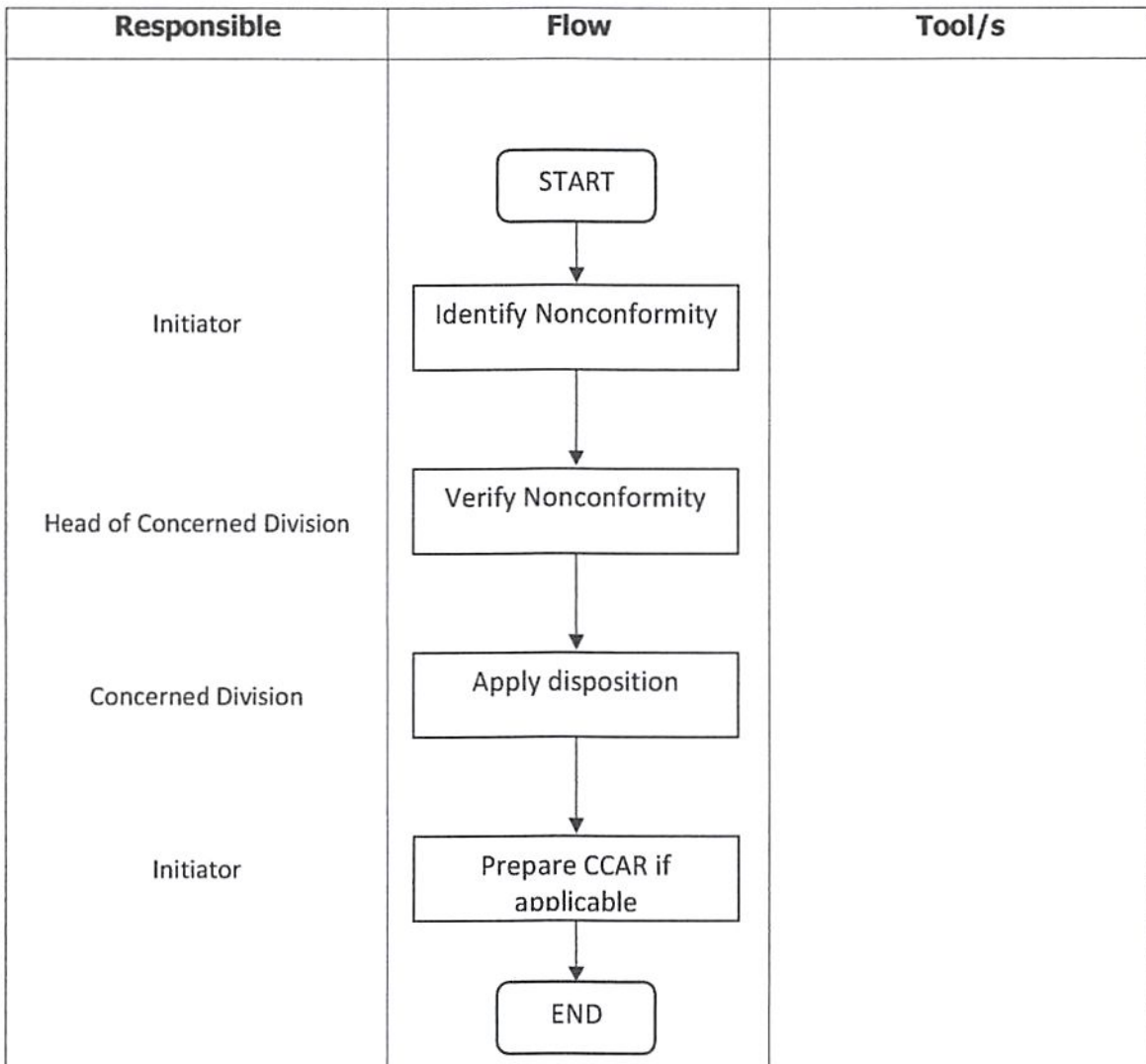
The Executive Director shall give the final approval of the proposed amendments to the Quality Procedure on Control of Nonconformity.

CESB QUALITY PROCEDURE ON CONTROL OF NONCONFORMITY	Section PROCEDURE DETAILS	Section No 2	Effective 08-26-15
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1. A nonconformity may be detected and identified from audit observations (refer to the Quality Procedure on Internal Audit), client feedback, or during implementation.
2. As appropriate, identification shall include label, tag, or remarks, among others.
3. All identified nonconformities shall be referred to the concerned Division Chief for evaluation and verification. The verification process shall be facilitated by the Division Chief through a meeting with the concerned personnel.
4. Once detected, identified, and verified, the Division Chief and concerned personnel shall apply the disposition. Disposition, as appropriate, includes any of the following:
 - a) Application of correction;
 - b) Authorization of use, release, or acceptance under concession by a relevant authority, and where applicable, by the client;
 - c) Discontinuation of use; and
 - d) Taking action when the non conformity is detected after delivery or use has started.
5. After applying the appropriate disposition, concerned division/s shall conduct root cause analysis to determine if there is a need to initiate corrective action.
6. Necessary action shall be identified, implemented, and verified for effectiveness.
7. Root cause analysis and action plans shall be documented in the Correction and Corrective Action Report (CCAR).

Records of the nature of nonconformity and results of subsequent actions taken, including concessions obtained, shall be maintained in accordance to the Quality Procedure on Records Control.

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CESB QUALITY PROCEDURE ON CONTROL OF NONCONFORMITY	Section FORMS	Section No 4	Effective 08-26-15
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Correction and Corrective Action Report

Section 1 - Details of Nonconformity (To be Accomplished by the Auditor/Initiator)			
Date: _____	References: (manuals, procedures, policies, ISO clauses, etc.) _____	Control Number: _____	
Auditor / Initiator: _____		_____	
Issued to: (Concerned Personnel) _____			
Details: (As Resulted) <input type="checkbox"/> Internal Quality Audit <input type="checkbox"/> Service Relation <input type="checkbox"/> Others (Pls. Specify) _____			Section/Division: _____
Issued by: _____ Signature Over Printed Name		Issued to: _____ Signature Over Printed Name	
Description of Nonconformity/OFI: (include evidence) _____			
Acknowledged by: (Concerned CESB employee) _____			
Section 2 - Necessary Action(s) (To be accomplished by the Auditee/Concerned Unit)			
Correction: _____		Target Completion Date: _____	
Describe the Necessary Corrective Action(s): _____			
Approved by: _____		Target Completion Date: _____	
Section 3 - Verification of Effectiveness (To be Accomplished by the Auditor/Initiator)			
Results of Action(s) taken		Remarks	
_____		_____	
Verified by: (IQA/Initiator) _____		Verification Date: _____	
Acknowledged by: (Division Chief) _____		Next Verification Date: _____	
Results of Action(s) taken		Remarks	
_____		_____	
Verified by: _____		Verification Date: _____	
Acknowledged by: _____		Next Verification Date: _____	

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This quality procedure has been thoroughly reviewed and approved.



MARIA ANTHONETTE VELASCO-ALLONES, CESO I
 Executive Director
 Career Executive Service Board

Date