insco
insulation supply company

Procedure: **QSP-8.5.101**	**Page 1 of 2**
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Corrective Action and Problem Solving

Purpose
This procedure defines INSCO practices for resolving problems through effective corrective and preventive action(8.5).

Scope
- Documented corrective action is required when:
  - a major customer complaint is received
  - a major quality or delivery problem arises
  - a significant incident of downtime or scrap occurs
  - the Discrepancy Report indicates an unfavorable trend

INSCO Management Committee may also require documented corrective action for any problem situation that it considers significant in its actual or potential impact on product or process quality or customer satisfaction.

Definitions
Discrepancy Report - A record of a nonconformity or error discovered in product, documentation, and/or service that is captured on form QF-74. Discrepancy Reports describe the type of discrepancy, its cause, corrective action, and disposition. It serves as an authorization for product returns as well as a record for identifying, analyzing and correcting quality problems.

Documentation - Written material defining the process to be followed. Also technical documents such as certifications and test reports that identify and verify the properties of a product or material.

Minor complaints/problems - Occasional or singular situations of limited consequence that can be identified and resolved without initiating formal corrective action.

Responsibilities
ANY EMPLOY Any Insulation Supply Company Employee
QUAL MGR (aka QA Admin) Quality Manager
MGMT COMM Ad-hoc committee comprised of top manager(s) and Quality Manager
MGR & SUP Managers and Supervisors

Procedures
ANY EMPLOY Identifies and Defines Problem or Customer Complaints
- Identifies initial problem and symptoms.
- Collects information about the problem.
- Takes or requests appropriate containment (such as segregating suspect material/product to prevent further shipments until a full assessment can be made).
- Creates a Discrepancy Report.

QUAL MGR Investigates and Determines Significance

- Reviews the initial problem/complaint statement.
- Collects and analyzes information about problem/complaint.
- Investigates problem/complaint with responsible person(s).
- Assesses significance of problem/complaint.

MGMT COMM Reviews and Endorses Corrective Action Plan

- Reviews proposed Corrective Action Plan.
- Discusses Plan with responsible manager or department head.
- Approves Plan and assigns corrective action to responsible manager or supervisor, with implementation due dates.
- Approves criteria and methods for evaluating effectiveness.
- Approves resources needed to implement corrective action.

MGR & SUP Takes Corrective Action(s)

- Responsible manager or supervisor reviews Corrective Action Plan and takes corrective action(s) within time allotted.
- Responsible manager or supervisor records action(s) taken on CPAR form and routes to QA Administrator.
- Responsible manager or supervisor monitors outcome of corrective action(s) to determine effectiveness.
- When appropriate, Responsible manager or supervisor requests an internal audit of activity related to corrective action(s).

QA ADMIN Verifies that Corrective Actions were Effective

- Tracks progress on all outstanding Corrective Actions.
- Coordinates with responsible manager or supervisor in measuring outcome of corrective action(s) and evaluating effectiveness.
- Schedules follow-up internal audits to verify effectiveness of corrective action(s).
- Initiates any necessary document changes.
- Closes Corrective Action Request when effectiveness has been verified and necessary document changes have been made.

NOTE: In the event where the QA Manager determines the Corrective Actions take were not timely or effective the Quality Manager will meet MGT COMM to determine the cause. For supplier non-conformances, the issue will be escalated through their management until the issue is resolved. Failing resolution, the supplier may become disapproved.

For ineffective internal corrective actions, the MGT COMM will once again determine the significance and impact to customers and create/approve an appropriate alternate corrective action plan. This process cycles until the issue is resolved. If the issue cannot be resolved, the affected party(s) will be contacted to help determine the next action(s) to be taken.

QA ADMIN Keep Records On Corrective Actions

- Reviews closed Corrective Actions and outcomes with INSCO management at Management Reviews.
- Maintains cross-reference of Corrective Actions to Product, Process, Vendor, Customer.
- Retains CPAR forms and records in Corrective Actions file for at least 7 years.

Records

Discrepancy Report QF-74	Retain for at least 7 years

Revision Notes

- Changed revision from B.0 to C
- Removed reference to CAWeb (DR system)
- Removed reference to obsolete form QF-91
- Rev D removes reference to ISO steering committee. Added a.k.a. – QA Admin. Note added to address untimely or ineffective corrective actions.