DEPARTMENT OF SCIENCE AND TECHNOLOGY

**FM-ROF1**

Rev 4 / 04/15/2019

CALABARZON

NONCONFORMITY AND CORRECTIVE ACTION REPORT

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| **1 TYPE OF NONCONFORMITY** (*check all applicable*) DATE:  **Dec. 16,2020**NCAR NO (for IQA): \_**20201216-181919-0** RELEVANT FUNCTION: PSTC - Laguna INITIATOR: T. Pamplona,R. San Antonio, [ ] Internal Audit Findings: \_\_\_ (MJR) Major Nonconformity \_**X**\_(MNR) Minor Nonconformity J. Paran[ ] Systems Nonconformities [ ] Complaints from Customers and Interested Parties [ ] Output from Management Review[ x] Objectives/Targets/Programs Not Done or Not Met As Planned [ ] Process Measurements/Outputs from Data Analysis[ ] Relevant QMS Documented Information [ ] Legal Noncompliance |
| **2 DESCRIPTION OF NON-CONFORMITY** ((*if applicable,*  include relevant ISO 9001 clause/s for audit findings)FM-TO-F7 Monitoring Sheet for Impact Assessment Survey was not used as a tool to monitor the impact assessment survey, this was against PM-TO 09-01-01 that states that all IAQ's before dissemination and the retrieved IAQ before sending to the Regional Coordinator are logged in FM-TO-F7. | Acknowledged by: SLC WGRTRS MCP  JLLDate: Dec 18, 2020 |
| **3 IMMEDIATE CORRECTION :**1. Call a meeting to discuss the corrective action
 | Person responsible:SLC WGDR TRS MCP JLLDate implemented:Jan 05,2021 |
| **4 RESULT OF INVESTIGATION / CAUSES OF NON-CONFORMITY** (ATTACH THE ROOT CAUSE ANALYSIS/TOOL USED)1. Some employees were not aware of the form being used for Impact assessment survey monitoring

( FM – TO – F7) 1. Too much reliance on the prompting of staff in charged from Regional Office.
2. Tasks not prioritized due to workload, the PSTC is understaffed.
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| **5 PLANNED CORRECTIVE ACTION** *(for Process Owner)*1. To conduct re- orientation for all staff (Both old and new) of existing monitoring forms being used under ISO.
2. To consolidate all trainings conducted per calendar year and to identify those needing monitoring (i.e . All Food safety related trainings & those conducted for two days or more.
 | Agreed Date of Completion: January 05, 2021 |
| 6 ACTUAL CORRECTIVE ACTION (1) *(for Process Owner)*1. Use the form and disseminated the accomplished form (FM\_ TO F7) to all PSTC Staff, starting with all trainings conducted in YEAR 2020
 | **7 Evaluation (1)** (for Auditor)\_\_\_\_Effective \_\_\_\_\_Not Effective*\_\_\_\_ Closed \_\_\_\_\_ Follow up Date**Remarks:*Reviewed and Approved by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_ |
| 8 ACTUAL CORRECTIVE ACTION (2) *(for Process Owner)* | **9 Evaluation (2)** (for Auditor)\_\_\_\_Effective \_\_\_\_\_Not Effective*\_\_\_\_ Closed \_\_\_\_\_ Follow up Date**Remarks:*Reviewed and Approved by: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ |
| 10 FOLLOW-UP AUDIT RESULTS (for Internal Audit) | **11** (for Auditor)Verified by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |