

 <p style="text-align: center;">City of Grand Rapids Environmental Services Department Policies and Procedures</p>	
Title: Element 14 – Nonconformance’s: Preventive and Corrective Action	Created by: Dave Harris Approved by: William R. Kaiser
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General

The City has developed the following procedures to ensure prompt response to any nonconformance events. Events of this nature will command immediate attention by responsible supervisory personnel or contractors. Failure to respond will be grounds for disciplinary action for City staff and will be considered a contract violation for contractors.

A nonconformance is defined to mean:

“Incidents or situations where legal, voluntary, or BMP requirements are not met.” Such requirements also include policies, plans, procedures, operational control targets, and other guidelines that form the basis for the BMP “biosolids management program.”^A

The use of a Corrective Action Plan and an Investigation Committee may also be used for issues other than nonconformance, such as investigation of processes and mechanical concerns.

Procedures

As part of its continuous improvement process, whenever a nonconformance occurs the City will implement the following response actions intended to answer the following questions:

- Why did it happen?
 - How could we have prevented it?
 - Was there a way we could have flagged the problem earlier?
 - What do we need to do next time?
- 1) The BMP coordinator will take actions to correct the nonconformance utilizing the investigation report in 3)a). If the nonconformance warrants The BMP coordinator may form an investigation committee^B who will be charged with investigating the nonconformance and providing a written report to the BMP coordinator. The investigation committee will appoint a committee chair who will have general oversight of the investigation process and serve as the primary contact with the BMP coordinator. The investigation committee will remain active until corrective action is in place and complete^C, at which time the committee will be dissolved.

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- 2) The investigation committee will utilize techniques such as root cause analysis to investigate a nonconformance and develop strategies to correct and avoid future similar nonconformance incidents.
- 3) The investigation committee will normally be given up to five days to conduct their investigation. Based on the complexity of the investigation, the committee chair may request additional time by submitting a written request to the BMP coordinator.
 - a) The investigation report^D shall include:
 - i) Date nonconformance identified
 - ii) If an investigation committee is used document all meeting dates
 - iii) Personnel interviewed including interview date
 - iv) Root cause analysis report. Consideration to related processes, if appropriate, to help prevent a future nonconformance
 - v) Supporting documentation, as attachments
 - vi) Recommended corrective action
 - vii) If applicable; dates BMP coordinator met with investigation committee and affected workgroups to review findings
 - viii) Recommended system changes to avoid future nonconformance incidents
 - ix) Complete corrective action plan (Figure 14.1)
 - x) Other observations and comments
 - xi) Date nonconformance corrective action was in place and complete^E
- 4) The BMP coordinator will review the findings with the investigation committee.
- 5) The BMP coordinator will facilitate meetings between the investigation committee and affected workgroups to review recommendations. The investigation committee will consider input from affected workgroups and include a corrective action plan (Figure 14.1) as part of their written report.
- 6) The investigation committee, in coordination with the BMP coordinator and the affected workgroups, will oversee implementation of the corrective action plan and will submit a completed “Nonconformance – Investigation Committee Report Form” and “Corrective Action Plan” to the BMP Coordinator once the corrective action has been implemented and the nonconformance has been corrected.
- 7) Maintain records on any nonconformances including all relevant data and investigation committee reports along with recommendations and supporting documentation^F.
- 8) Include summary information of any nonconformance incidents in the City’s Periodic Biosolids Program Performance Report^G.

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- 9) The BMP coordinator will analyze nonconformances whenever updating Table 14.1 to determine if any patterns or trends exist to take corrective measures to help prevent reoccurrence. Table 14.1 was moved to appendix D on the departmental Sharepoint site so that nonconformances can be updated without checking out the element.
- 10) Review progress with the ESD Manager at the periodic management review of performance meeting held during the last quarter of the calendar year.
- 11) Develop, conduct and document employee re-training, if required, based on the nature of the nonconformance.

References

Appendix A Glossary

Appendix B Tables, Figures, Forms

Appendix C CCP Postings

^A Source: NBP Biosolids Environmental Management System Guidance Manual

^B This may include Internal BMP Team members as well as employees familiar with the process or incident

^C This is defined to mean when the nonconformance corrective action controls are in place and the nonconformance condition no longer exists.

^D Reference Table 14.2 “Nonconformance Investigation Worksheet”

^E Contained in the investigation committee’s final report

^F Reference Table 14.1 “Nonconformance Summary and Response Time”

^G Reference Element 15 Periodic Biosolids Program Performance Report

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Figure 14.1 Corrective Action Plan

Corrective Action Plan			
<p>Instructions: BMP Coordinator will provide information on the need for a CAP, resources needed to conduct an investigation of the issue and the requested completion date. The purpose of the corrective action plan is to layout a plan of action for investigating the root cause of an issue and implementing corrective actions to avoid a reoccurrence, and correct . Once the corrective actions have been implemented the lead investigator must date, sign and return this form to the BMP coordinator. Portions of this corrective action plan, its attachments, and findings will be included in the department’s annual management review of performance and included with the annual internal audit reports.</p>			
Completed by BMP Coordinator	Nonconformance #, If applicable		Date nonconformance identified
	Issue or Nonconformance to be investigated and corrected:		
	Responsibility: (list team members if more than one)		
	Resources provided:		
	Requested completion date:		
Investigation findings:			
Resolution/Corrective Action:			
Actual completion date:			

“To the best of my knowledge the above stated corrective action plan has been investigated and the corrective action noted above has been implemented.”

Date (MM/DD/YYYY: ___/___/____) Signed: _____
(Lead Investigator)

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Table 14.2 Investigation Worksheet

INVESTIGATION COMMITTEE REPORT FORM			
Action Item		Response	
Nonconformance #, If applicable			
Investigation Committee Members			
Lead Investigator (Committee Chair)			
Nonconformance and date identified			
Personnel interviewed including date and time			
Root cause analysis, why did nonconformance occur? (consider related processes, if appropriate, to help prevent a future nonconformance)			
Recommended corrective action			
Recommended system changes to avoid a future nonconformance			
Other observations and comments			
Corrective actions to be implemented following committee meeting with workgroups and BMP Coordinator (submit completed corrective action plan figure 14.1 with report)			
On a monthly basis, track progress toward implementation of identified corrective action(s)	Date:	Comments:	
	Date:	Comments:	
	Date:	Comments:	
	Date:	Comments:	
Date investigation was completed		Date corrective action was in place and complete	
Meeting date with BMP coordinator to review findings		Date(s) of committee meetings	

Submitted: (MM/DD/YYYY) _____ Signature of Committee Chair: _____