SOP Template: Corrective Action and Resolution Process

This SOP defines the **corrective action and resolution process**, detailing the steps for identifying non-conformities, investigating root causes, implementing corrective measures, monitoring effectiveness, and documenting outcomes. The goal is to ensure consistent resolution of issues, prevent recurrence, and promote continuous improvement within the organization.

1. Purpose

To establish a standardized procedure for addressing non-conformities and implementing corrective actions to eliminate causes and prevent recurrence.

2. Scope

This procedure applies to all employees and departments responsible for identifying, reporting, and resolving non-conformities within the organization.

3. Definitions

Term	Definition
Non-conformity	Failure to meet specified requirements or standards.
Corrective Action	Action to eliminate the causes of a detected non-conformity.
Root Cause	The underlying reason for the occurrence of a non-conformity.
Effectiveness	The degree to which actions taken successfully resolve the non-conformity and prevent recurrence.

4. Responsibilities

- **All Staff:** Report non-conformities as soon as they are identified.
- **Department Managers:** Investigate reported issues, participate in root cause analysis, and implement corrective actions.
- **Quality Assurance (QA):** Oversee the process, facilitate root cause analysis, verify effectiveness, and maintain records.

5. Procedure

1. **Identification**
   - Detect and report non-conformities through established channels (forms, digital reporting tools, etc.).
   - Record details: date, location, description, person reporting.
2. **Evaluation**
   - Assess the significance and impact of the non-conformity.
   - Initiate containment actions if necessary to limit immediate effects.
3. **Root Cause Analysis**
   - Assemble a team to investigate the non-conformity.
   - Use analysis methods such as the 5 Whys, Fishbone Diagram, etc.
   - Document findings.
4. **Development of Corrective Actions**
   - Identify specific actions to eliminate the root cause.
   - Assign responsible persons and set target completion dates.
5. **Implementation**
   - Carry out corrective actions as planned.
   - Document completion and any deviations.
6. **Verification of Effectiveness**
   - Monitor outcomes to verify that corrective actions resolved the issue.
   - If ineffective, reinitiate the process from root cause analysis.
7. **Documentation and Closure**
   - Complete all required documentation, including evidence of resolution, in the corrective action log.
   - Formally close the action once effectiveness is verified.

6. Records

- Non-conformity Reports
- Root Cause Analysis Reports
- Corrective Action Implementation Records
- Verification of Effectiveness Documents

7. Review and Continuous Improvement

This SOP will be reviewed annually, or as needed, to ensure effectiveness and process improvements are incorporated.

8. Appendices

- Sample Non-conformity Report Form
- Template for Root Cause Analysis
- Corrective Action Log Template