SOP: Deviation and Non-Conformance Reporting Guidelines

This SOP establishes **deviation and non-conformance reporting guidelines** to ensure systematic identification, documentation, and resolution of any deviations from established procedures, standards, or specifications. It covers the process for reporting non-conformances, assessment and investigation, corrective and preventive actions, communication protocols, and continuous improvement measures to maintain product quality and compliance with regulatory requirements.

1. Purpose

To define a uniform process for the identification, documentation, investigation, and closure of deviations and non-conformances to ensure compliance with quality and regulatory standards.

2. Scope

This SOP applies to all personnel responsible for performing tasks that could impact product quality, safety, or compliance at [Company Name/Facility].

3. Definitions

- **Deviation:** Departure from an approved procedure, standard, or specification.
- Non-Conformance: Failure to meet specified requirements such as regulatory guidelines, internal or external standards.
- CAPA: Corrective and Preventive Action.

4. Responsibilities

- All Employees: Promptly report deviations and non-conformances.
- Supervisors/Managers: Ensure thorough documentation, assessment, and timely resolution.
- Quality Assurance (QA): Oversee process, review reports, coordinate investigations, and ensure closure and reporting to management and regulatory authorities as required.

5. Procedures

1. Identification & Initiation

 Any observed or suspected deviation or non-conformance should be reported immediately using the approved reporting form/system.

2. Documentation

- o Record all relevant information (date, time, personnel, equipment, description, and impact assessment).
- Assign a unique identifier or reference number to each case.

3. Assessment & Investigation

- o Assess severity and potential impact on product quality and compliance.
- Initiate a root cause investigation and document findings.

4. Corrective & Preventive Actions (CAPA)

- Define and implement corrective actions to address immediate concerns.
- $\circ \;\;$ Identify and implement preventive actions to avoid recurrence.

5. Communication & Review

- Maintain clear communication with affected stakeholders throughout the process.
- o Management and regulatory agencies must be notified as required.

6. Closure & Verification

- · Ensure all actions are documented, completed, and verified.
- Close the case and retain documentation as per record-keeping policies.

6. Documentation and Records

- Deviation/Non-Conformance Reporting Forms
- Investigation Reports
- CAPA Documentation

· Communication Records

All records must be maintained in accordance with [Company] record management policies and applicable regulatory requirements.

7. Continuous Improvement

- Regular review and analysis of reported deviations/non-conformances for trend identification.
- Implementation of process improvements based on trend analysis.
- Periodic SOP review and updates to reflect current best practices and regulatory expectations.

8. References

• [List applicable regulations, standards, company policies and related SOPs, e.g., FDA CFR, ISO 9001, internal quality manual, etc.]

9. Revision History

Version	Date	Description of Change	Author	Approval
1.0	[Date]	Initial Release	[Name]	[Name/Title]