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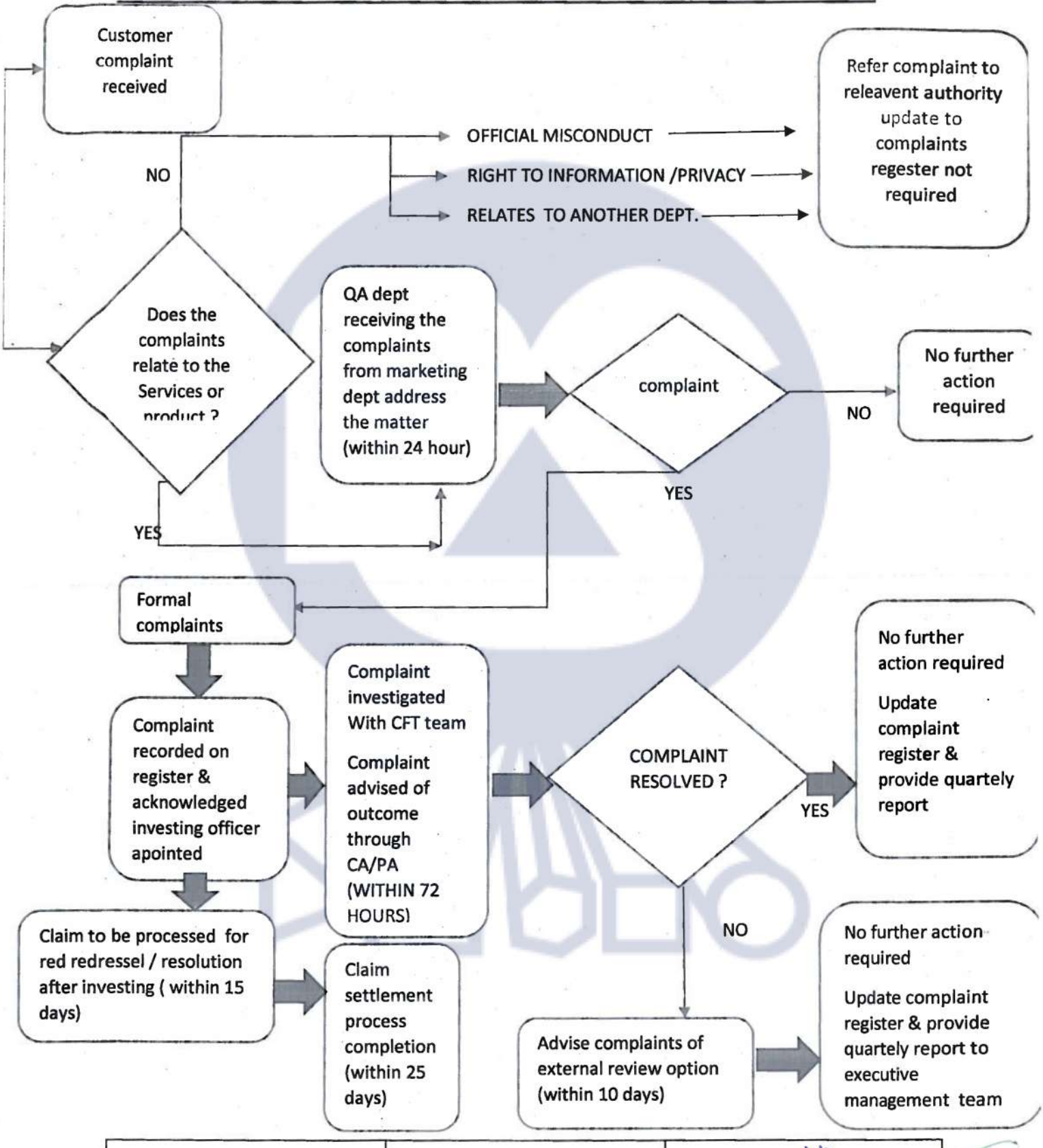
CUSTOMER COMPLAINTS & CLAIM REDRESSAL /RESOLUTION PROCESS



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	Procedure for Control of Non-Conforming Product	Doc. No.	QEHS/PRO/04
		Rev. No.	---
		Rev. Date	00
		Effec. Date	25-08-2019

1. PURPOSE:

To have a formal procedure for Identifying, evolving, implementing and maintaining control procedure for Non-Conformity.

Product that does not conform to specify requirements should not be supplied to a customer or transferred for subsequent work process unless the nonconformity has previously been eliminated or the items/ component in its existing condition has been accepted by the competent function.

2. SCOPE:

This applies to nonconforming product identified/ located at any stage from receiving stage to delivery of final products.

3. DEFINITION OF TERMS: NCP: Non-Conforming Product

4. RESPONSIBILITY:

The responsibility for implementation of this procedure lies with all HOD's and the responsibility of maintaining and reviewing this procedure lies with the MR/AMR

5. DESCRIPTION

5.1 Inspection personnel who find that product/ items/ component exhibits non-conformities with the requirement must restriction its further processing until a decision has been taken.

If nonconformity is found by a person other than the inspection personnel, the person concerned must immediately notify the person responsible for inspection in writing.

Quality Control should notify In process Inspector through In-process non-conformity alerts.

In-process Inspector should intimate stores through In-process non-conformity alerts to issue new item.

1. Any product which is not conforming / not meeting the specified requirements is treated as nonconforming product.
2. The nonconformity noticed during incoming inspection shall be recorded.
3. The nonconformity noticed during in process inspection shall be recorded in Product nonconformity report.
4. Initiator shall also indicate causes of non-conformity, disposition plan **correction** and corrective actions taken or planned and shall be authorized by HOD of initiating department.

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5. Rework shall be done as per Quality plan. The final inspection shall be carried out after rework has been carried out satisfactorily and re-inspected
6. When nonconforming product is considered as acceptable as it is (under concession) same shall be notified to customer or his authorized inspecting personnel, if required by contract / order.
7. When nonconforming product is considered unacceptable by HOD – Production, the material shall be rejected with rejection status by labeling / color and shall be moved to identify areas.
8. Detection of non-conformity of products after delivery or use of product has been started shall be treated as customer complaints /feed backs and shall be resolved as per Procedure.
9. The non-conformance reports raised and disposed shall be summarized on monthly basis with status of corrective actions.
10. The records of non-conformance and its summary shall be maintained for specified retention period.

Nonconformance in raw materials, finished product & byproducts shall be detected upon testing a "Nonconformance Report "in which the details of nonconformance shall be sent to the HOD Production-HOD Production

Depending on the nature of nonconformance HOD Production authorizes the disposition of the product. - HOD Production

Non-conformities are to be recorded. if the product, items/ component is to be repaired, Scrapped or rejected

If the non-conforming product is to be used as it is, It shall be recorded in Deviation Acceptance.

All non-conformities are to be identified with NC tag no. **(At Incoming Inspection stage, In-process Inspection stage and final inspection stage)**

6. DOCUMENT:

Sr. No	Document Name	Document No.
1	Corrective Preventive Action Report	QR-MR-06

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	Procedure for Corrective Action	Doc. No.	QHSE/PRO/05
		Rev. No.	00
		Rev. Date	00
		Efec.date	25-08-2019

1. **PURPOSE:**

   This procedure is established for evolving & implementing the corrective actions to prevent recurrence of non-conformities

2. **SCOPE:**

   Applicable to all Corrective action taken under Quality, Health, Safety & Environment Management System in **ROOPAM.**

3. **DEFINITION OF TERMS:**

   1. **Non-Conformity (NC):**
      Non-fulfillment of a requirement.
   2. **Conformity:**
      Fulfillment of a requirement.
   3. **Defect:**
      Non-fulfillment of a requirement related to an intended or specified use.
   4. **Corrective Actions (CA):**
      Action to eliminate the cause of a detected nonconformity (3.6.2) or other undesirable situation.
   5. **Corrections:**
      Action to eliminate a detected nonconformity.
   6. **Rework:**
      Action on a nonconforming product to make it conform to the requirements.
   7. **Regrade:**
      Alteration of the grade of a nonconforming product in order to make it conform to requirements differing from the initial ones.
   8. **Repair:**
      Action on a nonconforming product to make it acceptable for the intended use.
   9. **Scrap:**
      Action on a nonconforming product to preclude its originally intended use

4. **RESPONSIBILITY:**

   The responsibility for implementation of this procedure lies with all HOD's and the responsibility of maintaining and reviewing this procedure lies with the MR

5. **DESCRIPTION**

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8. In case for the same root cause, there can be a probability of occurrence of similar problem elsewhere at the site the preventive measures to be taken are identified by respective person and records the actions in the CA Format.

6. Records:

Sr. No	Document Name	Document No.
1	Corrective Preventive Action Form	QR-MR-06
2	Internal Audit NC Clause Wise	QR-MR-13

7. References:

Standard No.	Title of Standard clause / Procedure	Procedure / Clause No.
ISO 9001:2015	Non – Conformity and Corrective Actions	Clause No. 10.2
ISO 14001:2015	Non – Conformity and Corrective & Actions	Clause No. 10.2
OHSAS 18001:2007	Incidents investigation, Non-conformity, corrective and preventive actions	Clause No. 4.5.3

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Need for corrective actions are identified through:

Non conformities relating to Quality, Environmental Incidents, Health and Safety incident/accidents)
eg.: Non conformities detected in internal audits, Product quality (Reject/ Rework), spillage, leakages, improper waste disposal, incident & accident, abnormal increase, etc.

The sources of Non-conformities which may require Corrective Action shall be identified by respective HODs / M.R. for Quality, Health, Safety & Environment Management System Performance as per Process, Product and System.

B. Incidents where Corrective Action are required:

1. The sources of non-conformities identified above are reviewed periodically for identification of those non-conformities which require Corrective Action.
2. The basis of identification will be importance and recurring nature of Non-Conformance with respect to :
    - Conformance to Specifications
    - EHS Performance
    - Customer Satisfaction
3. The Non-Conformities identified for Corrective Action shall be reviewed to identify the Root Cause. For this first the concerned departments are communicated about the non conformance & possible causes are identified & evaluated.
4. If the root cause involves more than one department, a Corrective Action Form is raised by the user department (Ref. Corrective Action Form). The MR identifies the respective person for rectifying the cause.
5. The actions required to eliminate root cause are brainstormed, these are agreed and actions planned with defined responsibilities are recorded in the CA form. Actions are undertaken as per the planned arrangements.
6. The implementation effectiveness is reviewed as per the planned arrangements in CA form by the HOD of the user department. On ensuring effectiveness of implementation the corrective actions, The CA form shall be closed by the User Department.
7. In case the corrective actions results into changes in the Quality, Health, Safety & Environment management System, Processes or Product, the same are recorded in `CA' form through following the procedure of document change and in addition, risk assessment prior to implementation shall be performed for such type of changes.

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	Procedure for Preventive Action	Doc. No.	QHSE/PRO/06
		Rev. No.	----
		Rev. Date	00
		Effec.date	25-08-2019

1. PURPOSE:

To establish a system for

a) identification of the Potential Non-conformities in Process, Product and System,
b) investigation of cause of such probabilities, and
c) Planning and executing the Preventive Actions to eliminate probability of occurrence of such potential nonconformance.

2. SCOPE:

Applicable to preventive action taken under Health & Safety Management System in **ROOPAM.**

3. DEFINITION OF TERMS: PA: Preventive Action

4. RESPONSIBILITY: The responsibility for implementation of this procedure lies with all HOD's and the responsibility of maintaining and reviewing this procedure lies with the MR/AMR

5. DESCRIPTION

A. Identification of Opportunities for Preventive Actions:

Potential non-conformities are identified to prevent the occurrence at the first instance. Such potential non-conformances are identified from the following sources of information:

- Incidents/ communication.
- Communication on incidents
- Safety incidences from other industries performing similar operations.
- Review of performance.
- Preventive maintenance activities.
- Reviewing the infrastructural resource requirements of the site
- Training effectiveness review in Management Review meetings.
- Internal Audits' observation.
- Customer feedback.
- Spillage, leakages, improper waste disposal, abnormal increase, etc.

The potential non-conformities can be identified during production / inspection / reviewing, auditing, periodic checks etc.

B. Analysis of Cause :

The causes of potential non conformances are analyzed by the concerned departmental Head or a cross functional group based on the nature of potential non-conformance. The need for preventive actions is assessed considering the severity of impact on safety / legal compliance etc.

In case the Head or group as certain the need for preventive actions, an action plan is prepared with target dates and responsibilities and the actions are executed. Results of actions are recorded. Th

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preventive actions taken and their effectiveness for preventing occurrence of the nonconformance are reported during monthly Business review meetings as well as Management Review meetings.

6. DOCUMENTATION:

Sr. No	Document Name	Document No.
1	Corrective Preventive Action Report	QR-MR-06
2	Internal Audit non Conformity Note	QR-MR-15

7. References:

Standard No.	Title of Standard clause / Procedure	Procedure / Clause No.
OHSAS 18001:2007	Incidents investigation, Non-conformity, corrective and preventive actions	Clause No. 4.5.3

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