



<u>Product Approval Work Instructions</u>	Work Instruction No.: PAD 12.10
<u>01/11/2025</u> (09--04-2026)	Work Instruction: Corrective and Preventive Actions

Change follow up

Revision	Date	Changes

1. General

1.1 Scope

- 1.1.1 Identification, handling and reporting of existing and potential nonconformities, and quality problems.
- 1.1.2 Opening, defining, applying, following-up and closing corrective and preventive actions, including authority and responsibility.

1.2 Objectives

- 1.2.1 To establish a process of continuous improvement in the PAD using a systematic method of:
 - A. Defining and reporting existing and potential nonconformities and quality problems.
 - B. Performing corrective actions aimed at preventing recurrence of nonconformities and quality problems
 - C. Performing preventive actions intended to prevent the first occurrence of nonconformities and quality problems.
 - D. Initiation of continuous improvement activities.

1.3 Applicability

- 1.3.1 This procedure is applicable to any activity or service of PAD, at any time, by any of the personnel.

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2. **Applicable documents**

2.1 **Documents mentioned in this work instruction**

- 2.1.1 ISO/IEC 17065- Conformity assessment—Requirements for bodies certifying products, processes and services
- 2.1.2 ISO/IEC 17020- Conformity assessment—Requirements for the operation of various types of bodies performing inspection
- 2.1.3 ISO/IEC 17025- General requirements for the competence of testing and calibration laboratories is the main standard used by testing and calibration laboratories
- 2.1.4 Work Instruction PAD 12.18- Certification Records

2.2 **Appendices and forms**

- 2.2.1 Form 102 - Status Report on Corrective/Preventive Actions

3. **Definitions and terms**

- 3.1 **Corrective Action** - an action taken in order to remove root cause/s of an existing nonconformity or quality problem, in order to prevent its recurrence.
- 3.2 **Preventive Action** - an action taken in order to prevent a Risk (potential cause/s of a potential nonconformity or quality problem) so it does not occur.

4. **Details and instructions**

4.1 **Corrective Action**

- 4.1.1 Typical sources of information for identification of nonconformities, deficiencies or quality problems and initiation of requests for corrective action:

- A. Clients' complaints.
- B. Internal and external quality audits.
- C. Problems and faults in the work processes identified by PAD personnel.
- D. Protocols of management reviews.
- E. Quality records.
- F. Customer satisfaction surveys.

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G. Stakeholders complaints.

H. SII-Institute Laboratories.

I. PAD Directorate.

- 4.1.2 Nonconformities and quality problems identified by any of the PAD personnel shall be reported to QM. Correction will be done without delay. The Quality Manager will record them all using Form 102 - Status Report on Corrective/Preventive Actions.
- 4.1.3 The Head of PAD shall encourage employees to report nonconformities and problems, as a basis for performance of corrective actions and enhancing the process of continuous improvement.
- 4.1.4 The Quality Manager shall decide whether the nonconformity, problem or defect requires corrective action. If so, he shall raise the subject for discussion during periodic work and update meetings With The Head of PAD for getting decision which corrective action is to be taken, who shall be responsible and the due date of completion.
- 4.1.5 The Quality Manager shall follow up performance of corrective actions at the assigned dates and shall close them only after reviewing and assuring their effectiveness.

4.2 Preventive Action

- 4.2.1 The Head of PAD shall encourage personnel to initiate and propose preventive actions for potential problems (Risks).
- 4.2.2 Typical sources of information for identification of potential nonconformities or quality problems and initiation of requests for preventive actions:
- A. Customer needs and expectations.
 - B. Market surveys.
 - C. Analysis of data and records.
 - D. Measurement of manufacturer/customer and worker satisfaction.

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E. Measurement of process performances.

F. Systematic risk analysis.

G. SII-Institute Laboratories.

H. PAD.

I. Impartiality Committee

4.2.3 Preventive actions shall be treated in accordance with the stages defined for corrective actions and documented on the same form.

4.3 Continuous Improvement

4.3.1 Continuous improvement actions are actions which are initiated in order to improve customer satisfaction or PAD's performance. These actions are carried out in a planned, systematic and controlled fashion.

4.3.2 Initiation of continuous improvement actions can come from anyone and can be related to any of PAD's activities. The following aspects are especially worthy of continuous scrutiny of their potential for improvement:

A. The quality of PAD's services and processes.

B. Timetables for completion of duties, including shortening response times

C. Cost of operations and service.

4.3.3 Continuous improvement actions will be handled according to the stages described above, using the same form for documentation.

4.3.4 Continuous improvement actions will generally be executed by improvement teams where the team's appointment, its actions and implementation of its decisions will be carried out in a planned and systematic fashion.

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- 4.3.5 The team's activities, results recommendations for implementation will be reported at the PAD staff meeting and at the management review.
- 4.3.6 An analysis of potential nonconformities and quality problems discovered and reported in the specified period will be presented at management reviews. Their severity, their trends, the corrective/preventive actions taken to prevent their occurrence/reoccurrence and their effectiveness shall be presented.
- 4.3.7 Nonconformance and corrective/preventive action reports shall be kept in accordance with the Work Instruction PAD-12.18 - Certification records.