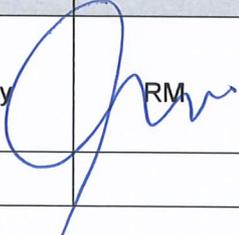


QHSE MANAGEMENT SYSTEM

Document Name: Corrective/ Preventive Action Request Procedure	QHSE Ref. No.	IMS/QHSE/CPAR/06 Rev.00
	Date:	6 th of June 2019

CORRECTIVE/ PREVENTIVE ACTION REQUEST PROCEDURE

Rev	Date	Revision Record	Updated by	Reviewed by	Approved by
00	06/06/19	1 st Issuance as per the new version of the standards ISO 9001:2015, ISO 14001:2015 & ISO 45001:2018	3 rd Party	 RM	 NY



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<p>QHSE MANAGEMENT SYSTEM</p>	<p style="text-align: center;">SAIFCO Electromechanical Works (LLC) </p>	
<p>Document Name: Corrective/ Preventive Action Request Procedure</p>	<p>QHSE Ref. No.</p>	<p>IMS/QHSE/CPAR/06 Rev.00</p>
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1.0 PURPOSE

This procedure describes how Non-Conformances are reported, their causes investigated and how corrective actions are implemented to prevent recurrence. It also addresses potential non-conformances & the preventive actions to prevent occurrence.

2.0 SCOPE

The scope of this procedure covers:

- All non-conforming products / services by SAIFCO as well as those provided by the Suppliers
- All formal complaints received verbally or in writing in relation to the products provided by SAIFCO to its customers or in relation to HSE performance of SAIFCO
- All safety and environmental incidents / accidents / emergency situations
- All non-conformances from the internal/ external audits
- All potential non-conformances/problems

3.0 DEFINITIONS

None

4.0 RESPONSIBILITY

All SAIFCO employees as defined in the procedure.

5.0 PROCEDURE

5.1 General

5.1.1 The "Corrective & Preventive Action Request" (**CPAR**) form (**IMS/QHSE/CPAR/06/01**) shall be used for the identification, reporting, investigation and subsequent corrective/preventive actions:

- Product Non-conformance (**PNC**)
- Customer Complaints (**CC**)
- Interested party complaint (**IPC**)
- Audit non-conformities (**ANC**)
- Potential non-conformities/problems (**PNP**)
- Opportunities for improvement (**OFI**)
- Others (OTH)

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SAIFCO

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The "Corrective & Preventive Action Request" (**CPAR**) is structured into the following distinct parts:

5.1.2 The first part is to be completed by the initiator for identification of the non-conformance, the following information must be recorded:

- a) CPAR Sr. No.
- b) Date
- c) Reported by (Name, designation & department)
- d) Location/department/reference (of the non-conformance)
- e) In case of Customer complaint-the customer reference, source and media (fax, e-mail, etc..)
- f) Addressed to (Which department is responsible)

5.1.3 The initiator shall also complete record the particular details of the potential/actual non-conformance and reports it to the responsible department.

5.1.4 The CPARs shall be reported as follows:

CPAR related to	Responsible Department
Customer Complaint	Operation/ Related Projects & Departments
Supplier/ Contractors	Operation/ Procurement Department
Projects	Operation/ Project Site
Human Resources & Administration	HR & Admin. Department
Maintenance	Maintenance Department
QHSE Management System	QHSE Department
Information Technology	IT Department
Technical/ Engineering	Operation/ Project Site
Estimation	Estimation Department

5.1.5 **CPARs numbering**, to be as follows:
Department or Project Code from COD / Year / CPAR serial number 01 onwards

i.e. QHSE/2019/CPAR/01, S234/2019/CPAR/01

5.2 Non-Conformance Reporting

5.2.1 All Non-conformance report related to the projects shall be reported to the respective Project Manager.

5.2.2 The following information shall be reported as applicable:

- Project name, number, reference, other details...etc
- Customer name, contract reference... etc

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	<ul style="list-style-type: none"> • Consultant/contractor name, contract reference ...etc • Description and nature of non-conformance – in detail
5.2.3	<p>If the non-conformance is due to vendor-supplied goods, supplier/ manufacturer shall be notified for the immediate corrective action. The CPAR form shall be filled out for the corrective action and its preventive measures to prevent the error reoccurring.</p> <p>On completion, the fully a copy of completed CPAR form shall be filed in procurement department for periodic review as tool of key performance indicator (KPI).</p>
5.3	Customer / Interested party complaints
5.3.1	On receipt of a customer complaint, whether verbal or written, concerned SAIFCO employee is responsible to record the receipt and initiate a CPAR form and relay this to the concerned department through the management representative, as appropriate.
5.3.2	<p>The following information shall be reported as applicable:</p> <ul style="list-style-type: none"> • Project name, number, reference, other details...etc • Customer name, contract reference... etc • Consultant/contractor name, contract reference ...etc • Description and nature of non-conformance – in detail
5.3.3	The concerned department shall communicate with the customer / interested party via letter/fax/e-mail/phone acknowledging the complaint and assuring the company's commitment to resolve the issue.
5.3.4	A CPAR file shall be maintained by the concerned department which will contain all, documented actions, correspondence and resolutions, which relate to the resolution of the customer complaints.
5.3.5	The person receiving the complaint shall send the CPAR to the concerned department head for logging & initiation of subsequent actions.
5.3.6	The CPAR shall be handled as per above stated procedure.
5.3.7	On the closing out of the CPAR, the concerned department shall review all findings and formal responses, prior to formally notifying the customer (letter/fax/e-mail/phone) as to the findings and what actions have been taken to prevent a re-occurrence of the non-conformance.
5.3.8	This letter/fax/e-mail should request the customer to acknowledge and convey/ confirm their satisfaction over SAIFCO's response to their complaint.



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5.4 Potential non-conformance

5.4.1 Potential non-conformances are identified through various sources such as:

- Internal Audit results (observations)
- Analysis of Data (Customer feedback/supplier performance/process & product trends)
- Management meetings
- Supplier/sub-contractor audits

5.4.2 Where a potential non-conformance is detected a "Corrective & Preventive Action Request" (CPAR) shall be issued and closed out as per the procedure above.

5.5 Analysis of Non-Conformances, Corrective & Preventive Actions

5.5.1 All department heads shall maintain their updated CPAR log sheets (**IMS/QHSE/CPAR/06/02**) and **Non-Conformance Log (IMS/QHSE/CPAR/06/03)** in their respective documentation folder in their department folder.

5.5.2 The management representative will consolidate the data received and summaries it in order to be presented for the management's review.

6.0 ATTACHMENTS

Type	Name	Number / Code
Form	Corrective/ Preventive Action Request (CPAR)	IMS/QHSE/CPAR/06/01
Form	Corrective/ Preventive Action Request (CPAR) Log Sheet	IMS/QHSE/CPAR/06/02
Form	Non-Conformance Log	IMS/QHSE/CPAR/06/03

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	Date:	

CPAR Ref No.	e.g QHSE/2019/CPAR/01	CPAR Reported By:	
CPAR Receipt Date		Customer/ Interested Party:	
CPAR Related Dept.		Customer Party Contact Name:	
Person/s investigating		Customer/ Party Contact Number / e-mail	

Reported non-conformance (actual / potential)
--

Correction Action including mitigation, if applicable	Date Completed

Root Causes of the non-conformity
--

Is Corrective / Preventive Action Needed / Feasible		
Proposed corrective / preventive action/s	Date completed	HSE Risk Assessment Yes / No / NA

Verification of Effectiveness of the Corrective Action			
Date of review	Findings of review of effectiveness	Effectiveness Yes / No	Reviewer

