1. PURPOSE

The purpose of this document is to explain the procedures for the implementation and review of the effectiveness of corrective actions to be carried out in order to examine, evaluate, eliminate and prevent the repetition of nonconformities that arise in the management system or during accreditation activities.

2. SCOPE

This procedure covers all United States Accreditation Inc.'s management system and accreditation activities.

3. DEFINITIONS

Definitions related to this procedure are given in USACC-IN-01 Instructions on Terms and Definitions Used in the United States Accreditation Inc. Documentation.

4. RELATED DOCUMENTS

USACC-P-02 Procedure for Complaints and

Appeals

USACC-P-04 Procedure for Control of Records

USACC-P-05 Procedure for Internal Audits

USACC-P-09 Procedure for Improvement Risks and

Opportunities

USACC-P-16 Procedure for Management Review

USACC-FR-11 Corrective Action Request Form

5. IMPLEMENTATION

5.1 Although not limited to the following situations, nonconformities can be detected:

- During internal audits,
- As a result of evaluating customer complaints, or
- As a result of observations made during the execution of the quality management system and accreditation activities.

Observed deficiencies, inadequate practices or nonconformities regarding ineffective procedures shall be determined by all United States Accreditation Inc. personnel by filling out a "USACC –FR-11 Corrective Action Request Form" and the completed form shall be given to the Quality Manager.

In the relevant form, the nonconformity shall be described in detail and if there are any suggestions within the scope of corrective action to be taken when necessary, these shall also be stated.

The Quality Manager shall inform the President after assigning numbers to the forms and recording them in "USACC –FR-11 Corrective Action Request Form".

5.2 Cause Analysis

In order to determine the solution methods of the identified nonconformities, the source of nonconformities must be identified. In order to make this identification, cause analysis methods such as Structure-Process Analysis, Error Status and

Impact Analysis are applied within United States Accreditation Inc. Cause analysis shall be carried out with the participation of the head of department where the nonconformity has been identified, the quality manager and, when necessary, the relevant department personnel.

As a result of the cause analysis, correction(s) to be made for the nonconformity(ies) and the need for corrective action(s) shall be evaluated.

5.3 Corrective Actions

Head or supervisor of the relevant department shall fill out "USACC –FR-11 Corrective Action Request Form" with the source of the problem, correction to be made, corrective action to be implemented if deemed necessary as a result of the cause analysis, date on which this action will be completed and information about the personnel responsible for the corrective action. S/he shall sign the form and send it to the Quality Manager along with other attached documents. Actions to be taken within the scope of corrective actions shall be aimed at eliminating the nonconformity(ies) and at the same time preventing similar nonconformities that may occur in the future. Works to be done within the scope of corrective actions that have been sent by the relevant department shall be examined by the Quality Manager by considering such issues.

Measures to be taken until the corrective action is concluded shall be notified to the relevant departments by the Quality Manager. When the scope of correction and corrective action regarding the nonconformities is found effective and sufficient by the Quality Manager, the Quality Manager shall close the relevant nonconformity in "USACC –FR-11 Corrective Action Request Form". If the Quality Manager deems a follow-up audit necessary to assess the effectiveness of the proposed corrective action plan and whether it was completed on time, the scope and date of the follow-up audit shall be determined by the Quality Manager by taking the opinions of the relevant Department Supervisor and the auditor(s) shall be assigned.

After examining the effectiveness of the actions undertaken by the relevant department head, the auditor(s) shall evaluate the effects and performance of the actions in resolving the nonconformities and fill out the "USACC-FR-11 Corrective Action Request Form" accordingly, then submit the form to the Quality Manager.

In case the corrective action works are carried out in accordance with the determined date, the Corrective Action Request Form shall be approved "USACC-FR-11 Corrective Action Request Form" and closed by the Quality Manager. The action and completion dates shall be recorded on , and the person who notified the non-conformity or the complainant shall be informed about the results. Processes related to complaints and appeals shall be implemented according to "USACC-P-02 Procedure for Complaints and Appeals".

In case the proposed or implemented corrective action works are not found sufficient by the Quality Manager, the "No Performed Action" section in "USACC-FR-11 Corrective Action Request Form" shall be marked and a new "USACC-FR-11 Corrective Action Request Form" be opened. In this form, the more effective corrective action to be taken for the nonconformity shall be sent to the relevant department with its justifications and an additional time request.

In the event that the action has not been concluded within this period and any revision and renewal requirement in the United States Accreditation Inc. Procedures or Policies has been determined during the actions implemented, the issue is immediately submitted to the President following the notification of the Quality Manager.

The work for the necessary changes in United States Accreditation Inc. policies shall be carried out by the President.

Any changes in system documents resulting from corrective actions shall be carried out in accordance with "USACC-P-08 Procedure for Management of Documents".

In the event that the identified nonconformities are directly related to an action under the responsibility of the Quality Manager, the suitability and effectiveness of the correction performed by the Quality Manager and the corrective action implemented when necessary shall be evaluated and approved by the President to prevent conflict of interest.

Corrective actions carried out shall be taken as priority agenda item by the Quality Manager in Management Review meetings in order to prevent similar nonconformities, determine what kind of actions should be carried out (personnel training, work against procedures, resourcing) to take preventive measures.

For corrective actions involving potential risks, actions shall be taken according to "USACC-P-09 Procedure for Improvement Risks and Opportunities".

Corrective actions shall be addressed in Management Review meetings as required by the standard. The way they are addressed is defined in "USACC-P-16 Procedure for Management Review".

5.4 Archives and Records

Corrective actions implemented shall be considered as quality records and stored by the Quality Manager in accordance with "USACC-P-04 Procedure For Control of Records".

6. AUTHORITY AND RESPONSIBILITIES

Authority and responsibilities are described in USACC-G-34 Job Description and Organization Chart Guideline.