

IMS Standard 1.19 Corrective and Preventative Action

1 Purpose

The purpose of this management system standard is to describe the requirements to ensure that identified corrective or preventive actions and opportunities for improvement, are effectively managed, implemented and closed out.

2 Scope

OTML is committed to setting the highest standards of leadership and performance in the areas of safety, occupational health, environment and community/social (SHEC) responsibility.

This standard applies to all OTML sites, projects and controlled activities, and to all OTML employees, contractors and visitors when involved in controlled activities.

3 Standard

3.1 General

Standard operating procedures shall be developed to manage corrective or preventative actions arising from identified actual and potential non-conformities, and opportunities for improvement. These procedures shall define the requirements for:

- Identification, ranking and correction of non-conformities and opportunities for improvement, and implementing actions to mitigate their consequences.
- Investigating non-conformities, determining their root cause(s) and identifying appropriate actions to prevent recurrence.
- Ensuring actions are appropriate to the nature and scale of the actual or potential consequence or level of risk, and address the root cause of the deficiency.
- Ensuring systems are in place to identify, prioritise, assign and manage actions through to close-out in the required time frame.
- Recording, documenting and communicating the results of corrective and preventative actions, trend data and improvements.

Approved By:	Print Date:	14/05/18	Page No:	1 of 3			
UNCONTROLLED COPY							



Non-conformities and opportunities for improvement shall be identified from a range of sources including but not limited to the following:

- Incident investigations.
- Inspections and Job Safety Observations.
- Hazard identification and risk management.
- Measurement, monitoring and analysis.
- Complaints and suggestions for improvement.
- Management of change processes.
- Internal and external audits and assessments.
- Incident Management exercises and debriefs.
- Management reviews.
- Improvement plans.

3.2 Action Management

OTML maintains a centralised electronic SHEC tracking and management system in SAP for corrective and preventative actions, which includes, but is not limited, to the following functionality:

- Collation and record of information relating to the action (date, location, equipment, persons, nature of any injuries, etc).
- Recording risk and priority associated with each action.
- Assignment of a unique identification number for each action.
- Assignment of each action to a responsible person.
- Requirement that each action be approved by the responsible manager.
- Tracking the implementation status of each action through to verification and closeout.
- Escalation of actions that are not completed by the due date to the next level of management.
- Ability to retrieve data and generate status reports and trend data for management review, reporting and communication purposes.
- Records maintained and stored in accordance with the requirements of IMS 1.12 Document Control and Records management standard.

3.3 Monitoring and Review

Review of corrective and preventative action data shall be carried out by the OHS Manager and Environment Manager, no less than quarterly to assess the system effectiveness, and to identify trends or key indicators for recurring deficiencies.

Approved By:	Print Date:	14/05/18	Page No:	2 of 3			
UNCONTROLLED COPY							



Post implementation verification reviews of major non-conformances shall be carried out by the responsible General Manager in conjunction with the OHS Manager and Environment Manager, to ensure that actions have been effectively implemented in a timely manner.

3.4 Performance Measures

The application and effectiveness of this standard will be assessed by:

- Review and analysis of data and information to assess the system effectiveness and to identify trends and recurring deficiencies.
- Review of KPI's including but not limited to the following:
 - Major non-conformances identified (total, by department and activity).
 - Percentage of actions incomplete for both major and all nonconformances (total and by department).
 - Percentage of actions incomplete and overdue more than 3 month for both major and all non-conformances (total and by department).
- SHEC compliance audits in accordance with the requirements of the IMS
 1.20 Audits and Assessments standard.