

P2 S3 C5 Preventative Action and Continual Improvement Policy

Ownership:	Managing Director, Head of Operations, QA Officer.	
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PURPOSE AND POLICY CONSIDERATIONS

Overview

Preventative action is action taken to eliminate the cause of a potential non-conformity or other potentially undesirable situation. Preventative action is divided into two sets of actions: risk assessment and continuous improvement.

Purpose

The procedure establishes the process to track and investigate potential non-conformances in the Forus Quality Management System. The cornerstone of preventive action is written and retrievable documentation of actions taken and follow-up monitoring to determine that preventive actions have been implemented and documented.

DEFINITIONS

Preventative Action: a change implemented to address a weakness in a management system that is not yet responsible for causing nonconforming product or service.

SCOPE

This procedure is applicable to all aspects of Forus Training services.

QUALITY POLICY – POLICY STATEMENT

It is the policy of Forus Training to identify not only potential problems, but also opportunities for improvement. Changes that are enacted through a preventive action process, and controls are included to prevent and check for possible nonconformities.

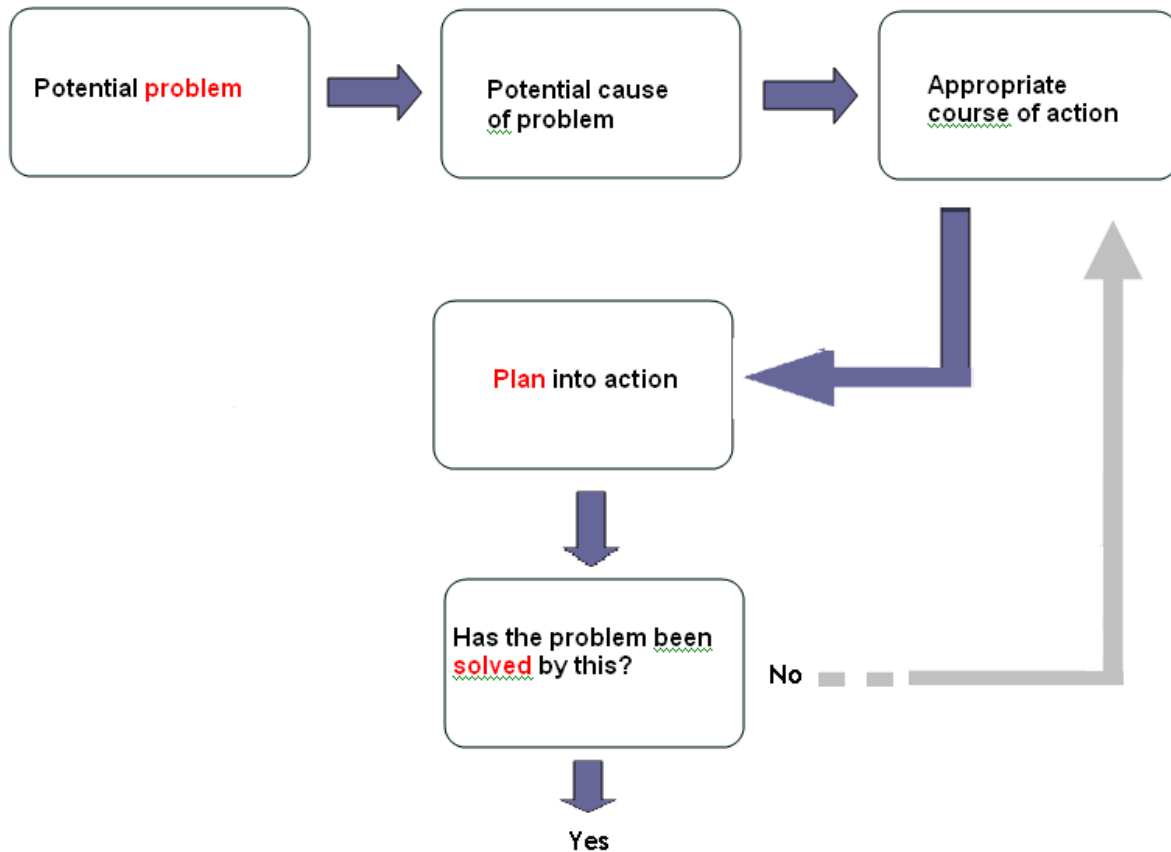
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PROCEDURES AND PRACTICES

Preventive Action Process



Method(s) used to carry out this procedure

1. Identify the cause to a potential non-conformance from:
 - Inadequate or non-existent procedures and documentation,
 - Audit process / results Lack of training,
 - Poor communication,
 - Inadequate process control,
 - Poor scheduling,
 - Inadequate resources (human or material),
 - Regulatory requirements".
 - QAAGC runs checks against modules being proposed to be scheduled.

2. Potential Cause Investigation

Investigate the potential cause of a non-conformance.

- Nonconformity records,

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- Observations during process monitoring,
- Audit observations,
- Field, service or purchaser complaints,
- Regulatory authority or customer observations,
- Observations and reports by personnel,
- Subcontract problems,
- Management review results.

3. Preventive Action

Determine the preventive action needed to eliminate the potential cause of the non-conformance.

- Planning Meetings,
- Write new procedure,
- Amend existing procedures,
- Supplier meetings,
- Implement procedure,
- Train Staff,
- The members of the QAAGC are clear on our scope of provision and the process by which programmes are validated.

4. Monitor Potential non conformance

- Quality checks on records,
- Carry out monitoring observations during training,
- Internal audits,
- Record complaints and implement procedures and processes to ensure no repeat complaints are received,
- Ensure up to date information on Regulatory authority and customer requirements,
- Carry out staff suggestion / satisfaction survey through regular meetings and email communications,
- Monitor sub-contractors quality of service,
- Carry out management review.

COMMUNICATION PLAN

Stakeholders are informed about this Preventative Action Policy at induction.

WHO MUST OBSERVE THIS POLICY

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- Management,
- All staff,
- Trainers,
- Assessors.

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Amendment History			
Amendment summary sheet			
Revision	Date	Amendment summary	Training Requirements
002	16/12/2020	Initial release	Read and Review
003	12/08/2021	Component validation	Read