



<p>Standard Operating Instruction – EMS-0100.004 Name: Corrective/Preventative Action Report</p>	<p>Corresponding Requirements: ISO Standard: 4.5.2 EMS Manual: 4.5.2</p>
<p>Prepared By: Beth Eckert, Industrial Chemist</p>	<p>Revision #: 3 Revision Date: 2/22/01</p>
<p>Approved By: Larry Cummings, Asst. Superintendent of WWTD</p>	<p>Effective Date: 1/1/00</p>
<p>Signature:</p>	<p>Page 1 of 3</p>

**Corrective / Preventative Action
 Standard Operating Procedure**

1.0 Purpose

1.1 This procedure is to develop and implement a corrective and preventative action program to monitor, report, investigate and mitigate any impacts caused by the occurrence of non-routine incidents and/or near misses and nonconformance with the Division’s environmental policy or any related procedures.

2.0 Associated Equipment

2.1 None

3.0 Associated Documents

- 3.1 *Corrective/Preventative Action Report EMS-0101.004*
- 3.2 *Document Control Procedure EMS-0100.002*
- 3.3 *City of Gastonia: EMS Manual EMS-0100.000*

4.0 Procedure

- 4.1 Corrective/Preventative Action reports will be used to identify potential needs for corrective and/or preventative actions identified during audits, EMS review, external regulatory audits and following the occurrence of an event that may have a significant environmental impact or a deviation from a current procedure.
- 4.2 All Corrective/Preventative Action Reports must be completed with 5 working days following an incident or near miss. Corrective/Preventative Action Reports for NPDES violations may be submitted at the same time, but not later than, the Discharge Monitoring Report (DMR) is submitted to the North Carolina Division of Water Quality.
- 4.3 Any WWTD employee is empowered to create a Corrective/Preventative Action Report following an incident or near miss or at any other time the employee wishes to make recommendations for changes to existing procedures or policies.
- 4.4 Area supervisors or trained internal auditors are required to develop Corrective/Preventative Action reports for incidents or near misses reported by employees or identified by other means unless an employee has already done so.

- 4.5 While completing the corrective/preventative action reports the author should use the following guidance (If another report form such as the state spill report, the internal supervisor's report, or any other detailed report form is required that completely satisfies the intent of any of the following sections you may complete that section by typing "See attached form" and attaching a copy to this report):
- 4.5.1 List personnel who identified the problem.
 - 4.5.2 Describe the problem. If procedure or EMS documents and/or procedures are a focus of the findings then they should be identified by there document control #, when possible. If prompted by an audit the auditor must specify which section of the ISO Standard the finding is related to. . Initial and date.
 - 4.5.3 Provide a root cause analysis, which identifies the source of the problem. Initial and date.
 - 4.5.4 Describe Corrective/Preventative Action.
 - 4.5.4.1 If unable to determine what corrective or preventative actions must be taken to resolve the problem, skip this section. If an emergency issue the supervisor must contact the appropriate personnel to immediately resolve the problem.
 - 4.5.4.2 If able to determine what corrective or preventative actions must be taken to resolve the problem, take appropriate actions. Initial and date upon completion. If long term action is required submit report without completion date and initials for this section.
 - 4.5.5 The author must submit the completed corrective action report to the EMS Project Coordinator along with any and all support data for submittal to the MRB.
- 4.6 MRB will determine if the corrective action that has taken place is sufficient.
- 4.6.1 If sufficient and completed, the report will be signed and returned to the EMS Coordinator for proper filing.
 - 4.6.2 If insufficient or not completed, the Superintendent or Assistant Superintendent may assign a new or revised corrective/preventative action to take place and establish a desired completion date. If necessary, the Superintendent will assign a person to follow-up and all follow-ups must be completed within 30 days of the implementation of the corrective action and submit completed report to the EMS project coordinator.

4.6.3 The EMS project coordinator will report final actions to MRB and record completed corrective/preventative action reports on the U: drive. Any required changes in the documented procedures as a result of the corrective/preventative action will be completed by area supervisors per the Document Control procedure (EMS-0100.002).

5.0 Deviations from this procedure must be documented by completing a Corrective/Preventative Action Report (EMS-0101.004).