



DILG REGIONAL OFFICE 02
**SYSTEM
 PROCEDURE**

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PROCEDURE TITLE	CONTROL OF NONCONFORMING OUTPUT	
SCOPE	This process describes the procedure in identifying and controlling nonconforming output, including the disposition actions and responsibilities.	
PURPOSE	To ensure prevention of unintended delivery of nonconforming output.	
PROCESS DESCRIPTION:		
INPUT	PROCESS	OUTPUT
Client Identified Nonconforming Output →	<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> CONTROL OF NONCONFORMING OUTPUT </div>	Disposition / Nonconforming Output record → Client
DESCRIPTIVE STATEMENT:		
<p>The Process Owner identify the nonconforming output, determine the appropriate disposition or action, and submit to DC or Head of Office for review and approval. The disposition is then implemented and verified. Copy of the signed Nonconforming Output record is submitted to QMS Secretariat for logging and consolidation.</p>		

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
1	Process owner	Identify nonconforming output	<ul style="list-style-type: none"> Identify/detect and record nonconforming output such as: <ul style="list-style-type: none"> Typographical errors Other errors resulting from processing lapses Describe the detected nonconforming service. 	<ul style="list-style-type: none"> Nonconforming Output Form (NOF)
2	Process owner	Decide appropriate disposition	<ul style="list-style-type: none"> Determine the appropriate disposition/recommended action to address the nonconforming service such as: <ul style="list-style-type: none"> Replacement Rework/Reprocess Other appropriate action 	<ul style="list-style-type: none"> Nonconforming Output Form (NOF)

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Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			<ul style="list-style-type: none"> Submit to Division Chief/ Head of Office for review and approval. 	
3	Division Chief/OIC/ Head of Office	Review and approve the recommended disposition	<ul style="list-style-type: none"> If recommended disposition is found in order, sign the NOF; else, return to Process Owner for appropriate action. 	<ul style="list-style-type: none"> Nonconforming Output Form (NOF)
4	Process Owner, Division Chief/OIC/ Head of Office	Implement disposition	<ul style="list-style-type: none"> Process Owner: Record the implementation of the disposition. Division Chief/ Head of Office: Verify and ensure that the resulting service conforms to specified requirements. If verification shows that requirements are not met, advise process owner to take appropriate action; else, sign the NOF. Submit copy of the signed NOF to the QMS Secretariat. 	<ul style="list-style-type: none"> Nonconforming Output Form (NOF)
5	QMS Secretariat	Log the nonconforming output	<ul style="list-style-type: none"> Log the nonconforming output in the Nonconforming Output Log Sheet 	<ul style="list-style-type: none"> Nonconforming Output Log Sheet
6	Designated Custodian	Retain records	<ul style="list-style-type: none"> Retain records in accordance with the Control of Retained Documented Information Procedure and Master List of Records 	<ul style="list-style-type: none"> Control of Retained Documented Information Procedure Master List of Records

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Definition of Terms:

- Nonconforming Output – is a service or product resulting from QMS processes that does not meet specified requirements.
- Nonconforming Service Form (NOF) – the specified form used to record the nonconforming output and the actions taken to rectify it.

Prepared By	Reviewed By	Approved By
 IVE B. SALUDEZ	 ATTY. ODILON L. PASARABA, CESO V	 JONATHAN PAUL M. LEUSEN, JR., CESO IV
QMS Secretariat Head	Regional Quality Management Representative	Regional Director

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NONCONFORMING SERVICE FORM

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Office: _____ Date: _____
 Process/ Service: _____ Division/Unit: _____

1. Type of NC Service
- Typographical error
 - Process lapses
 - Others: _____

2. Description of detected nonconforming product / service:

3. Disposition / Recommended action to address the nonconforming service:
- Replace Repair/ Rework/Reprocess
 - Other Action _____

4. Disposition/ Recommended Action Statement

Prepared by: _____ Approved by: _____
 (Name and Signature of Process owner) (Name and Signature of Division Chief/ Head Office)

5. Status of implementation of disposition / recommended action:
- Implemented Date Implemented: _____
 - Not Implemented Reason: _____
- _____
- _____

6. Verified by: _____ Date Verified: _____
 (Name and Signature of Division Chief / Head Office)

Prepared By	Reviewed By	Approved By
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QMS Secretariat Head		

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NONCONFORMING OUTPUT LOG SHEET

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Office: _____

No.	Process	Type of Nonconforming Output	Description of Nonconforming Output	Disposition / Recommended Action	Date Implemented	Reason for Non-implementation	Remarks, if any

Prepared By
{ Name Here }
Date: _____
{ Position Title Here }

Noted By
{ Name Here }
Date: _____
{ Division Chief }

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