

Accident, Incident, Non-Conformance, Corrective and Preventive Action

Created By: T. Poole

Revised By: J. Curran

Reviewed By: P. Pollard

Approved By: J. Curran

1.0 Purpose

The purpose of this procedure is to manage the Company's response to accidents, incidents, non-conformances and identified opportunities for improvements to the Health and Safety Management System (HSMS) including investigation followed by corrective and/or preventive actions.

2.0 Scope

This procedure applies to all Company operations and activities. This includes all accidents, incidents, non-conformance and/or opportunities for improvement as they arise in:

- Company operations and activities.
- Activities of Company employees and contractors.

3.0 General

The Company will follow and maintain this procedure to handle all identified accidents, incidents and non-conformances and identified opportunities for improvements with respect to its HSMS.

4.0 Responsibilities

4.1 Directors

- Ensure their staff is aware of the requirements set forth by this procedure.
- Ensure resources are available to implement identified corrective and preventive actions.
- Ensure relevant corrective and preventive action is completed in their department/regions in the time frame prescribed.

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4.2 Health and Safety Management Representative (HSMR)

- Provides assistance to departments in the investigation of root causes for accidents, incidents, non-conformance.
- Provides assistance to departments in the evaluation of identified opportunities for improvement.
- Provides assistance to departments in the design of corrective and preventive actions plans to address non-conformances or opportunities for improvement.
- Ensures changes are implemented to address non-conformance or system improvement issues.
- Ensure risk assessments are completed for identified corrective and preventive actions.

4.3 Managers

- Ensure the root cause of an accident, incident, and /or non-conformance is determined.
- Ensure adequate consideration is given to the formulation of corrective and/or preventive action to address non-conformances.
- Provide resources to carry out the investigation of non-conformances or the evaluation of identified system improvements within their areas of responsibility.
- Provide resources to implement any corrective and preventive action within their areas of responsibility.
- Identify non-conformances to the HSMR.
- Ensure responsibility for corrective and preventive actions within their areas of responsibility are assigned.
- Ensure the identified corrective and/or preventive actions are completed.

4.4 Company Employees and Contractors

- Identify and communicate non-conformances, in line with this procedure.
- Identify system improvements, in line with this procedure.
- Carry out corrective and preventive actions, as required.

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5.0 Procedure

- 5.1 Accident reporting and investigation will be conducted as per [OPR300.08 – Accident Reporting and Investigation](#).
- 5.2 Health and Safety incidents, non-conformances, inquiries and system improvements shall be recorded and tracked in **Intelex** (Program for Reporting Employee Injuries, Vehicle, Environmental and Near-miss Incidents)
- 5.3 Non Conformances, Corrective and Preventive Action

5.3.1 Identification

Identification of non-conformances or system improvements can occur through:

- Audits
- Management Reviews
- Operational inspections and maintenance activities
- Incidents
- Accident Investigations – refer to [ORP300.08 Accident Reporting and Investigation](#)
- Accident Reports
- Relevant internal and external inquiries/complaints
- Monitoring and measurement
- Direct observations

The corrective and preventive actions entered into the [INTELEX](#) system will include but may not be limited to those identified through the eight Health and Safety modules of [INTELEX](#) as indicated in section 5.2 of this procedure.

If the non-conformance identified resulted from, or results in, an event that is classified as an emergency, the initiation of this procedure will be superseded by the appropriate [Emergency Preparedness and Response \(EPR\) Procedure](#). The EPR Procedures will be initiated to deal with the immediate situation. The identification of the non-conformance leading to the emergency or resulting from the emergency will take place after the emergency conditions have passed as well

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a review of our response to the emergency, as per [OPR500.16 – Emergency Preparedness and Response](#).

If the non-conformance does not warrant an EPR response, (the normal case) the response to the non-conformance will follow this procedure. The response must be appropriate to the magnitude of the non-conformance and shall be commensurate with the health and safety impact or potential impact of the non-conformance. Decisions will be made at appropriate levels within the Company as to the corrective and/or preventive action required. Preventive action identified can be initiated without the existence of a non-conformance.

System improvements can be identified even though no non-conformances exist. These identified improvements will be documented using the same system as non-conformances. Any changes will be incorporated as corrective and preventive actions.

5.3.2 Originator

All Company employees have the responsibility and authority to identify and report non-conformances. The usual reporting path for non-conformances identified in a formal documented incident investigation is through their respective Supervisor, Manager, or Director, using [INTELEX](#), found in the Health and Safety Section of Webster. Individuals outside the Company, for example contractors working for the Company, will report any non-conformances to a Company employee who, in turn, may initiate the formal reporting process. Non-conformances, minor in nature, shall be recorded and tracked in the corporate incident database (SWMS) or Avantis.

All employees have the authority and responsibility to take measures to prevent and/or minimize health and safety incidents and emergencies. For information on emergency response refer to the appropriate [EPR Procedure](#).

Non-conformances identified during incident investigations shall be documented

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and communicated using [INTELEX](#) found in the Health and Safety Section of Webster. If an employee does not have ready access to Webster they may verbally relay it to another employee with access. The information will be entered into [INTELEX](#) by whomever receives it. Information can only be entered into [INTELEX](#) by Company employees. Anyone other than a Company employee (e.g. contractor) will identify the issue to a Company employee who will then initiate a Health and Safety Inquiry Report in [INTELEX](#) found in the Health and Safety Section of Webster to document the issue and who identified it – refer to [OPR500.05 – Health and Safety Communications](#). The employee to whom the issue was communicated will then initiate a Health and Safety Inquiry Report in [INTELEX](#) in their own name.

In the case where activities reveal more than one non-conformance (such as audits), the HSMR may decide to manage the non-conformances through an Action Plan or by entering associated, assigned follow up actions via [INTELEX](#). In the instances where an action plan is used only one SMS Improvement Report shall be prepared by the HSMR or his designate referencing the Action Plan. The Action Plan will denote corrective action, preventive action, responsibility and time frames and any root cause analysis, as well as status. This will be updated quarterly and posted on Webster. At the end of the following calendar year (December 31) the Action Plan, if not complete, will be closed out with any outstanding items being moved to individual [INTELEX](#) Reports. A note on the Action Plan will indicate which [INTELEX](#) Report corresponds to which action item.

All Company employees have the responsibility and authority to identify opportunities for system improvements. These will be reported using the appropriate module of [INTELEX](#) (SMS Improvement).

5.3.3 Investigation

The degree to which a non-conformance is investigated will be based on the scope, magnitude and associated health and safety impacts, or potential impacts, of the non-conformance. The purpose of the investigation is:

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- Evaluation of the adequacy of existing procedures and review of all relevant information, including staff observation, prevailing instruction, relevant records and data.
 - Establishment of root cause(s), if required, of non-conformances to minimize the potential of future incidents.
 - Recommendation of corrective/preventive solutions.

This information will be documented in the appropriate [INTELEX](#) Report

The Manager, Director or designee will evaluate the reported non-conformance or proposed system improvement. If it is determined the non-conformance requires immediate action, they will initiate such action as required to eliminate the problem or control the situation.

The Manager, Director or designee has the authority to deal with any non-conformance or proposed system improvement they feel is within the scope of their position. If it is decided that the issue cannot adequately be addressed at their level or position, the [INTELEX](#) Report, along with their comments, shall be forwarded to another employee who they feel can more appropriately handle the development and implementation of the corrective and/or preventive action.

All corrective and preventive actions shall be reviewed to ensure they are appropriate by the appropriate Health and Safety Advisor before they are actually assigned.

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5.3.4 Mitigative Actions

All employees have the authority and responsibility, if they deem it necessary, to start mitigative actions as soon as possible to prevent further damage or impact to health and safety. A mitigative action may be direct, such as shutting down an operation, removing equipment from service, or changing work activities. Mitigative actions may be directed at correcting a situation prior to the occurrence of a non-conformance (preventive action). This approach is appropriate for situations where an implied risk has been identified. Any action taken shall be communicated to the supervisor.

The evaluation of the information reported through a [INTELEX](#) Report will lead to two possible types of action – corrective and preventive. Corrective action normally addresses the immediate issue and will be focused on the short term with more emphasis on what happened and is aimed at preventing recurrence. The preventive action will deal with prevention of an event occurring in the future and will normally include root cause analyses to discover the underlying causes. Typically preventive action will not be required unless the issue is systemic. Preventive action is normally focused on why something happened.

It is possible to have an issue where preventive action is not required.

Initiation of corrective and/or preventive action does not have to wait for information to be placed in the [INTELEX](#) System. As stated earlier, the responses will depend on the situation. Some situations will require immediate action. These immediate actions should be noted in the incident description as to what was done. In the case of a system improvement, the action will not be initiated until there has been a review by the appropriate Supervisor and or Health and Safety Advisor.

Where the corrective and /or preventive action identifies new or changed hazards or the need for new or changed controls the proposed action shall be taken through a risk assessment prior to implementation.

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The course of action chosen must fit the economic and technological limits of the Company. The corrective/preventive action shall be appropriate to the magnitude of the problem and shall be commensurate with the health and safety impact or potential impact of the non-conformance. Corrective and preventive action should specify: responsibilities, resources and completion dates. This information shall be recorded in the [INTELEX](#) System. Also the risk assessment process shall be considered for each action identified.

The Director of each Region/Department is responsible for ensuring the necessary corrective and preventive actions are carried out in their respective Departments/Regions in the timeframes indicated.

When developing the corrective and preventive actions, the Manager, Director or designee will indicate an estimated timeframe for completion of the actions and the resources required to carry out the actions. They will then issue the required action to an employee to be completed. This employee will be responsible for ensuring the actions issued to them are carried out. Before the actions are assigned they shall be evaluated for appropriateness by the Health and Safety Advisor. If that employee is unable to complete the assigned task they should contact the person who assigned it to him/her with a request to have it reassigned.

When a task is assigned to an employee that person then has the authority to input information into the corrective and /or preventive action sheet of the [INTELEX](#) system.

5.3.5 Evaluation of Appropriateness and Effectiveness

After the corrective and preventive action portions of the form have been completed, the HSMR Group will be notified and asked to assess the appropriateness of the actions outlined on the form. The HSMR group may have to work with the parties involved. Before the actions are assigned they are reviewed for appropriateness by a Health and Safety Advisor.

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Before each Management Review, the HSMR will compile information concerning the non-conformances, with their associated corrective and preventive actions that had occurred during the previous year (see [OPR500.19 – Management Review](#)) and summarize it as part of the management review package. In doing so the corrective and preventive actions are reviewed for effectiveness. Actions not deemed to be effective may be re-evaluated, and reassigned to better address the nonconformance. As well incidents recorded in [INTELEX](#) are typically on the agendas for OH&S Committee meetings for review and discussion. While further enhancing the participative and consultative role of the committees this also provides OH&S Committees with the opportunity to provide feedback on the effectiveness of corrective and preventive actions.

6.0 References

6.1 Reference Documents

- [OPR300.08 - Accident Reporting and Investigation](#)
- [OPR500.16 – Emergency Preparedness and Response](#)
- [OPR500.19 – Management Review](#)
- [EPR Procedures](#)

6.2 Related Hazards

- No related hazards

6.3 Legal and Other Requirements

- [OHSAS 18001: 2007 Occupational Health and Safety Management Systems – Standard](#)

7.0 Records

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- [INTELEX](#)
- Health and Safety Audit Action Plan

8.0 Glossary

- **INTELEX** – Incident reporting and tracking application
- **HSMR** – Health and Safety Management Representative
- **HSMS** – Health and Safety Management System
- **EPR** - Emergency Preparedness and Response
- **Avantis** – Electronic asset management system for maintenance
- **ISO** – International Organization for Standardizations

Corrective Action – Is any action taken or identified to be taken to correct an identified non-conformance or to implement an identified system improvement.
(Action taken to prevent recurrence)

Non-Conformance – a deficiency with respect to the prescribed HSMS. This may include, but is not limited to, inadequate procedures, regulatory noncompliance, procedures not followed, inadequate training, insufficient documentation, absence of a required procedure, failure to take corrective action, and occurrence of an incident or emergency. (Non-fulfillment of a requirement)

Preventive Action – any action taken to prevent any potential non-conformance from occurring. May arise from, but is not limited to, corrective action, monitoring and measuring activities, interested parties, other similar operations and routine inspections.
(Action taken to prevent occurrence)

Proposed System Improvement – any issue identified that is not a non-conformance but improves the HSMS.