P005
Continuous improvement

Modifications: p. 2, 3

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1. **Treatment of non-conformities**

**Non-conformity:** Non-fulfilment of a requirement. Result of a dysfunction found by a member of OLAS concerning the rules of the accreditation process of the CAB’s of OLAS, or by a third party as part of an audit or peer review process.

**Corrective action:** action in order to eliminate the causes of a detected non-conformity.

Step 1: Each OLAS staff member can open a *F007 – fiche MLP Improvement report* and transmit it electronically to the QMa in the frame of the improvement of the accreditation process of the CAB.

Step 2: The non-conformity is examined by the QMa to define the corrective action.

Step 3: The QMa examines the non-conformity and decides about an immediate action if appropriate.

Step 4: The QMa analyzes the causes before defining a corrective action, if necessary with the assistance of the concerned staff member.

Step 5: The corrective action is taken.

Step 6: The QMa verifies the efficiency of the undertaken action and closes the form when the action has resulted.
2. **Treatment of preventive and improvement actions**

**Preventive action:** action following the identification of risks and intended in order to eliminate the causes of possible non-conformities.

**Improvement action:** action following the identification of opportunities and intended in order to improve the quality system without being preventive.

Preventive and improvement actions can be proposed to the QMa by all of OLAS staff members. They can result especially from:

Risks and opportunities are identified from:

- The day of the “Accreditation Community”,
- The management review,
- The internal audit,
- Accreditation Committee meetings,
- Internal meetings,
- Proposals made by the assessors during the annual training.

The QMa opens a F007 – *fiche MLP Improvement report* and treats it the same way than the corrective actions.