Corrective Action and Non-Conformance Procedure

Viking Reinforcing Ltd. – Rebar Fabrication Yard and Reinforcing Steel Placement Operations (Parksville, BC)

Document Control

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Standard	ISO 45001:2018 Clause 10.2 – Nonconformity and Corrective Action
Regulatory Reference	WorkSafeBC Occupational Health and Safety Regulation
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1. Purpose

This procedure establishes the process used by Viking Reinforcing Ltd. to identify, investigate, and correct non-conformities and unsafe conditions in order to prevent recurrence and improve occupational health and safety performance.

2. Scope

This procedure applies to all Viking Reinforcing operations including the fabrication yard, material storage areas, equipment operation zones, and construction sites where reinforcing steel installation activities occur.

3. Definitions

Term	Definition
Non-Conformance	Failure to meet a requirement of a procedure, regulation, or safety standard.
Corrective Action	Action taken to eliminate the cause of a detected

	non-conformity.
Root Cause	The underlying reason why a problem occurred.
Preventive Action	Steps taken to prevent the occurrence of potential hazards or incidents.

4. Responsibilities

Chief Safety Officer (Dan Ansell)
• Oversees corrective action program and ensures compliance.

Superintendent (Thomas Gabinet)
• Ensures corrective actions are implemented at jobsites.

Yard Foreman (Matt Warawa)
• Ensures corrective actions related to fabrication yard hazards are addressed.

Director of Maintenance (Sean Vetra)
• Ensures equipment-related deficiencies are corrected.

Workers
• Report hazards, unsafe conditions, and non-conformities.

5. Sources of Non-Conformities

Non-conformities may be identified through:
• Workplace inspections
• Incident investigations
• Hazard reports
• Internal audits
• Equipment inspections
• Worker observations

6. Corrective Action Process

1. Identify the hazard, incident, or non-conformance.
2. Document the issue using the appropriate form or register.
3. Investigate the root cause.
4. Determine corrective actions.
5. Assign responsibility for implementing corrective actions.
6. Implement corrective measures.
7. Verify completion and effectiveness.

7. Root Cause Analysis

Root cause analysis techniques may include:

- 5 Whys analysis
- Cause and effect analysis
- Process review
- Equipment failure analysis

8. Corrective Action Tracking

Corrective actions must be documented in REGISTER-OHS-02 – Corrective Action Register. Completion of corrective actions must be verified and documented in LOG-OHS-06 – Corrective Action Closure Verification Log.

9. Records and Documentation

FORM-OHS-05 – Non-Conformance Report
REGISTER-OHS-02 – Corrective Action Register
LOG-OHS-06 – Corrective Action Closure Verification Log
FORM-OHS-04 – Incident Investigation Report

10. Continuous Improvement

Corrective action trends will be reviewed during management review meetings to identify recurring hazards and opportunities for system improvement.