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| Rev. # | **Description of Change** | | | Clause # |
|  |  | | |  |
| **A** | **Initial Release - ISO 9001 : 2015 Requirements** | | | **N.A.** |
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| **Prepared and Reviewed By** | | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature) | | MANAGEMENT REPRESENTATIVE  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Designation) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Date) | |
| **Approved By** | | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature) | | **CEO**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Designation) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Date) | |

**1.** **Purpose :** The purpose of this procedure is to manage the changes in Verztec Consulting Pte Ltd and to ensure that they continue to meet specified requirements.

**2.** **Scope :** This procedure applies to all changes defined in this procedure that happens at Verztec Consulting Pte Ltd.

**3.** **Responsibility :**

3.1 The following are responsible for this procedure:

• Individual function heads will receive the change request via email or change notice and log in the request date ;

• The Respective Department Supervisor and Individual function heads will review the changes and notify affected party for discussion;

• They will also identify actions required and work out implementation plan based on effective date via Change request form ( refer to attachment I);

• They will seek approval from MR and implement changes;

• Respective Department Supervisor / RA / Business RA Team will ensure affected parties conduct respective assessment and submit for approval;

• Individual function headswill verify actual implementation and ensure documentation are updated.

**4.** **Procedure :**

4.1 **Execution**

4.1.1 **Submission of Change Notice**

The following would require a submission of change notice:

* A new product (E.g. a specific material, or chemical not previously supplied to the specific customer)
* New equipment or process to be installed and used
* Changes to process location that may have adverse effect due to environmental conditions such as humidity, lighting, temperature etc.
* Correction of a discrepancy on a previous product or service. Discrepancy can be related to :
* product / service performance against the customer requirement
* dimensional or capability issues
* subcontractor / vendor (external provider) issues
* For only editorial changes to documents, and if the changes do not affect the methods of work or the specification then does not require CN (Change Notice)
* Changes to organizational knowledge / competence of staff
* Changes to Client requirements or applicable legal requirements
* Changes to ISO standards / specification applicable to Organization that requires document changes

4.1.2 **Change Request Form (CRF)**

* A Change request form together with the Risk Assessment report is required to be submitted to the Individual function headsfor review and approval. Business Risk Assessment will also be reviewed and revised accordingly
* All control measures must be in place before the change is implemented to ensure the risk is under control. The Individual function heads/ RA team may request additional control measures or operational control procedures to be developed to further reduce risk / impact. Business Risk Assessment will also be reviewed and revised accordingly
* The Individual function heads/ RA team shall ensure that changes that have legal implication are being addressed and complied with before approval is given
* Update affected procedures, work instructions and specifications.
* A briefing need to be conducted for the affected staff to inform them of the changes and the necessary control measures that need to be put in place. The briefing can be done during tool box meeting or other communication platform.

4.1.3 **Management System Change**

* Such changes shall be submitted to the Individual function headsfor review, evaluation and approval prior to implementation of the change, including changes to be made to existing management system documentation.

**5. Reference Quality Records / Forms**

5.1 Change Request Form

**5.1** **CHANGE REQUEST FORM**

|  |  |
| --- | --- |
| **This section to be completed by Requestor** | |
| **Department / Section :** | **Date :** |
| **Requestor Name :** | |
| **Affected Project/Process:** | |
| Category of Change : ⬜ Equipment ⬜ Processes ⬜ Materials ⬜ Location ⬜ Contractors⬜ Others  **Current Situation :**  **Description of Changes:** (Provide a brief description of the changes) | |
| **Changes would affect:**  ⬜ Department : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⬜ Documents : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⬜ Staff Training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ⬜ Others : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| ⬜ **Attached completed Risk Assessment with proposed change (include review of business RA also)** | |
| **Approved by Departmental Head / Manager / Supervisor/MR (Signature) :** | |
| **Name Departmental Head / Manager / Supervisor :** | |
| **Date of Approval :** | |