

## **CONDUCT OF MANAGEMENT REVIEW MEETINGS**

### **SOP-FTIP-UNPAD-9.3.1**

#### **1. PURPOSE**

This SOP provides guidelines for the implementation of management review meetings

#### **2. SCOPE**

This SOP applies to the review of the effectiveness of the management system and any other relevant issues that need to be resolved immediately by the faculty.

#### **3. GENERAL DESCRIPTION**

1. Management review meetings are held to review the effectiveness of the implementation of the faculty management system and address any existing problems in education, research, and community service services.
2. Management review meetings are held every 6 months after internal audits are carried out and findings of irregularities are followed up by the relevant work units.
3. The agenda of the management review meeting shall at least include:
  1. Status of corrective actions from previous management reviews
  2. Changes in external and internal issues relevant to the faculty education management system
  3. Information related to the performance and effectiveness of the management system including related trends:
    1. Satisfaction of students and other beneficiaries;
    2. Student feedback and other beneficiary requirements;
    3. Achievement of performance goals and objectives;
    4. Process performance and conformity of products and services;
    5. Compliance and corrective action;
    6. Monitoring and measurement results;
    7. Internal and external audit results;

8. Performance of external providers;
  9. UTS and UAS assessment results.
4. Resource adequacy
  5. Effectiveness of actions taken to address risks and opportunities;
  6. Opportunities for continuous improvement;
  7. Feedback from lecturers and related education personnel;
  8. Issues related to education services;
  9. Issues related to research services;
  10. Issues related to community service;
  11. Issues related to faculty management in general.
  12. Other relevant issues developed during management review meetings.
4. The management review meeting was chaired by the Dean and attended by:
    1. Vice Dean for Learning, Student Affairs, and Research;
    2. Vice Dean for Resources and Organisation;
    3. Manager of Learning, Student Affairs, and Alumni;
    4. Manager of Research, Innovation and Cooperation;
    5. Resource, Planning and Information Manager;
    6. Head of the Department of Agricultural and Biosystems Engineering;
    7. Head of Department of Food Industry Technology;
    8. Head of the Department of Agricultural Industrial Technology;
    9. Head of the Agricultural Engineering Study Programme;
    10. Head of the Food Industry Technology Study Programme;
    11. Head of the Agricultural Industrial Technology Study Programme;
    12. Chairperson of the Master of Agroindustrial Technology Study Programme;
    13. Chairperson of the Master of Agricultural Industrial Technology Study Programme;

14. Chairperson of the Agroindustrial Technology Doctoral Study Programme;
15. ;
16. Head of Internationalisation Unit;
17. Head of Study Centre;
18. Head of Laboratory;
19. Information and Technology Team;
20. Public Relations Team;
21. Journal Team;
22. Quality Control Cluster Team;
23. Lecturer;
24. Education Personnel.

#### **4. PROCEDURE**

1. Quality Assurance Unit
  1. Make preparations for the management review meeting by doing the following:
    1. Prepare and ensure the completeness of the management review meeting materials as described in point 3.3;
    2. The entire management review meeting material is written in the Management Review Meeting Material Form SOP-FTIP-UNPAD-9.3.1/F1;
  2. Prepare invitations, agendas, and schedules for management review meetings using the Management Review Meeting Invitation and Agenda Form SOP-FTIP-UNPAD-9.3.1/F2;
  3. Submit an invitation to the Dean for approval at least 5 working days before the implementation;
  4. Distribute invitations and agendas for management review meetings that have been approved by the Dean, at least 3 working days before the meeting is held;

5. Coordinate with each work unit regarding all necessary preparations for the smooth implementation of the management review, including all necessary data as described in point 3.3;
6. Submit the management review meeting materials to the dean at least 1 day before the implementation;
7. Opening management review meetings;
8. Report on the performance of the management system of the management system implemented by the faculty;
9. Report obstacles encountered in the implementation of the management system implemented by the faculty.

2. Dean

1. Lead the discussion and resolution of any issues that have been tabled in the management review meeting in order;
2. Establish recommendations for corrective and preventive actions needed to improve the performance of the faculty's management system, including (where possible) improvements to the faculty's operational policies;
3. Ensure any recommended corrective and preventive actions are related to:
  1. Improvement of the faculty management system and its processes, particularly those related to education, research, and community service;
  2. Improvement of services related to student and other beneficiary requirements;
  3. Fulfilment of resources necessary for effective implementation of the management system;
  4. Continuous improvement of every aspect related to education, research, and community service services.
4. Assign responsibility for the implementation of any necessary corrective and preventive action recommendations.
5. Delegate authority to the to monitor and verify any corrective actions taken by each work unit.

3. Quality Assurance Unit
  1. Make a summary of the results of the management review meeting using the Management Review Meeting Results Form SOP-FTIP-UNPAD-9.3.1/F3;
  2. Provide a summary of the results of the management review meeting to the meeting participants;
  3. Facilitate a question and answer room for participants with the Dean regarding item 4.3.2;
  4. Closing the management review meeting;
  5. Submit the summary of the management review meeting to the Dean for approval;
  6. Distribute the results of the management review meeting approved by the Dean to the head of the relevant unit no later than 2 working days after the management review meeting is held;
  7. Store and maintain the results of management review meetings;
4. Head of Unit
  1. Receive the results of management review meetings;
  2. Follow up the results of the management review meeting based on the recommendations set by the Dean;
  3. Inform the of the completion of the follow-up to the results of the management review meeting;
5.
  1. Receive information on the completion of follow-up on the results of management review meetings;
  2. Monitor and verify corrective actions implemented by the relevant work unit based on the decision of the management review meeting using the Management Review Meeting Follow-up Record Form SOP-FTIP-UNPAD-9.3.1/F4;
  3. Report the progress made in implementing corrective actions based on the decision of the management review meeting to the Dean.

**5. RELATED FORMS**

1. SOP-FTIP-UNPAD-9.3.1/F1: Management Review Meeting Material Form.
2. SOP-FTIP-UNPAD-9.3.1/F2: Invitation Form and Agenda for Management Review Meeting
3. SOP-FTIP-UNPAD-9.3.1/F3: Management Review Meeting Outcome Form.
4. SOP-FTIP-UNPAD-9.3.1/F4: Meeting Follow-up Record Form

**6. RELATED ATTACHMENTS**

1. SOP-FTIP-UNPAD-9.3.1/L1: Flowchart

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**FACULTY OF AGRICULTURAL INDUSTRIAL  
TECHNOLOGY  
PADJADJARAN UNIVERSITY**



**STANDARD OPERATING PROCEDURE  
IMPLEMENTATION OF CORRECTIVE ACTION**

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## **IMPLEMENTATION OF CORRECTIVE ACTION**

### **SOP-FTIP-UNPAD-10.1.1**

#### **1. PURPOSE**

This SOP provides guidance in the identification of nonconformities and the implementation of corrective actions.

#### **2. SCOPE**

This SOP applies to any non-conformity that occurs in education, research and community service services at the Faculty of Agricultural Industrial Technology UNPAD.

#### **3. GENERAL DESCRIPTION**

1. This procedure is implemented to ascertain any nonconformities that arise or are discovered:
  1. Immediate corrective action is taken to reduce the negative consequences or impacts caused
  2. Corrective action is taken to prevent the same problem from recurring.
2. Non-conformities include education, research and community service products and services.
  1. Non-conforming products include:
    1. Inappropriate teaching modules/materials
    2. Inappropriate exam questions (corrections made during the exam)
    3. Inappropriate answers to exam questions
    4. Inappropriate data and information
  2. The non-compliant services referred to here include:
    1. Inappropriate administrative services
    2. Inappropriate academic guidance services
    3. Non-compliant education, research and community services
  3. Inappropriate research services are handled by the university

4. Community service is not appropriately handled by the university
3. The corrective actions taken include at least the following steps:
  1. Conduct a review of nonconformities
  2. determine potential causes of nonconformities
  3. identify and define the corrective actions required to eliminate the causes of item 3.3.2, according to the negative impact of the nonconformity that could occur.
  4. implementing corrective action
  5. conduct a review of the effectiveness of corrective actions
  6. conduct reviews and or changes to the management system affected by the implementation of corrective actions in point 3.3.5. (if required)
4. Discrepancies reported to the Dean/Chair of the Quality Assurance Unit follow the following provisions:
  1. Relates to education services
  2. Related to system and management reported to the

#### **4. PROCEDURE**

1. Head of Work Unit
  1. Identify non-conforming educational products and services that occur in their work area.
  2. Deal promptly with nonconformities arising in their work area in accordance with points 3.3 to 3.5. in accordance with the authority possessed
  3. Report non-conformities of products and services that cannot be handled and / or beyond their authority and / or have been submitted to customers to the Dean / Head of the Quality Assurance Unit using the non-conformity report form using the Non-Conformity and Corrective Action Form SOP-FTIP-UNPAD-10.1.1/F1
2. Dean/Leader of Quality Assurance Unit
  1. Receive non-conformance reports from work units

2. Review the clarity and completeness of non-conformity information on education products and services.
3. determine recommendations for corrective action and the person responsible for implementation. If the non-conformity involves several work units, the Dean/Head of the Quality Assurance Unit holds a meeting with the relevant parties.
4. Submit recommendations to the head of the work unit for implementation.
5. Monitoring the implementation of recommendations by the head of the work unit directly or through the Head of the Quality Assurance Unit.

Head of work unit

6. Receive recommendations and directions from the Dean/
  7. Correct any nonconformities based on the recommendations set out in the report.
  8. Check and ensure corrective actions are appropriate to the negative impacts that could arise
  9. report the completion of corrective actions to the Dean / Head of the Quality Assurance Unit accompanied by evidence using the completed discrepancy report form
- 3.
1. receive a report on the completion of corrective actions
  2. verify the effectiveness of corrective actions
  3. close the nonconformity report if based on verification the action is found to be effective, and request recorection if based on verification it is found to be ineffective.
  4. keep and maintain records of nonconformities and implementation of corrective actions

**5. RELATED FORMS**

1. SOP-FTIP-UNPAD-10.1.1/F1 Nonconformity and Corrective Action Forms

**6. RELATED ATTACHMENTS**

N/A

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