
Guidelines for Identifying Root Cause Analysis and Developing Corrective Action Plan



Title:	Guidelines for Identifying Root Cause Analysis and Developing Corrective Action Plan Version 1.0
Document number:	NO-020424-ED-EN-074
Scope:	International
Approval date:	2 April 2024

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About the Sustainable Rice Platform (SRP)

The Sustainable Rice Platform e.V. (SRP) is a global multi-stakeholder alliance comprising over 100 institutional members from public, private, research, civil society and the financial sector. Originally co-convened by the International Rice Research Institute (IRRI), the United Nations Environment Programme (UNEP) and private partners, SRP is an independent member association, working together with its partners to transform the global rice sector by improving smallholder livelihoods, reducing the social, environmental and climate footprint of rice production, and by offering the global rice market an assured supply of sustainably produced rice.

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1. Glossary

Assessment*: The combined processes of audit, review and decision on a producer's or producer group's compliance with the requirements of a standard. Three methods are available:

Internal assessment: Assessment of compliance with the SRP Standard for Sustainable Rice Cultivation which peers, members of an IMS Team or an appointed external party (other than an approved CAB) conducts on behalf of the producer.

Self-assessment: Assessment of compliance with the SRP IMS Standard which the producer or producer group conducts themselves to evaluate the performance and effectiveness of the IMS itself.

Third-party Assessment: Assessment activity that is performed by an approved CAB that is independent of the producer or producer group being assessed.

Audit*: A component of an assessment. A systematic, documented process for obtaining records, statements of fact or other relevant information and assessing them objectively to determine the extent to which specified requirements are fulfilled.

Auditor*: Person who performs the audit.

Conformity Assessment Body (CAB): An independent entity authorized to issue a third-party statement that fulfilment of specified compliance requirements has been demonstrated.

Continuous improvement: A series of incremental, documented improvements in the producer group's operations. Among areas that contribute to continuous improvement plans are risk assessment; internal and third-party assessment findings; complaints and appeals records; and review of market requirements.

Corrective Action Plan (CAP): A documented plan of action developed to address identified non-conformities, deficiencies, or areas for improvement. It outlines specific steps, responsibilities, timelines, and resources required to correct the root causes of issues identified during verification audit.

Internal Management System (IMS)*: In group assurance, the documented set of procedures and processes that a group will implement to ensure it can achieve its specified requirements.

IMS Team: A team formed at Producer Group level to guarantee that the IMS is internally evaluated and that all group members receive internal inspection or conduct self-assessment according to the frequency stipulated in the SRP Assurance Scheme. This team is established with clear separation of roles (overall management, training, internal inspection, compliance decision taking, purchasing).

Non-compliance* (synonym: **non-conformity**): An identified occurrence of non-conformance with one requirement of a standard, i.e. a missed threshold, identified as part of an assessment.

Producer (synonym: farmer): The legally responsible individual or business in terms of practices, processes and sales of rice under the scope of verification

Producer Group: formed by individuals or businesses, either as a legal entity or informally. Such groups may include rice production communities, cooperatives, farmer organizations or millers with contract farmers. Producer groups without a legal entity are expected to follow the same processes as if they were a legal entity, in particular with regard to governance structures to implement an Internal Management System (IMS).

Risk*: The chance of something happening that will have an impact on objectives. It is measured in terms of a combination of the probability of an event and the severity of its consequences.

Risk Assessment*: a method of evaluating the potential and actual impact of sustainability standard on environmental, social and economic issues.

Root Cause Analysis (RCA): A systematic process used to identify the underlying causes or factors contributing to non-conformities, incidents, or undesirable outcomes.

Verification: Issuance of a statement that fulfilment of specified compliance requirements has been demonstrated.

Verified Unit: An entity or operational unit that has undergone verification or assessment to confirm compliance with SRP standards.

*Note: Definitions marked * are adapted from the ISEAL Assurance Code of Good Practice v 2.*

2. INTRODUCTION

The following guidelines outline the process for identifying the Root Cause Analysis (RCA) and developing Corrective Action Plan (CAP) in accordance with the Assurance Scheme V2.0¹. When non-conformities (NCs) are identified during audits, producers or producer groups are tasked with conducting RCAs to determine the underlying causes, and for preparing CAPs to address them effectively. These guidelines provide a structured approach to identify, analyze and address root causes to prevent recurrence of NCs, thereby enhancing the overall quality and compliance of operations within the framework of the Assurance Scheme V2.0.

3. WHY IDENTIFYING RCA AND DEVELOPING CAP IMPORTANT?

The process of identifying Root Cause Analysis (RCA) and development of a Corrective Action Plan (CAP) are crucial for the following reasons:

1. **Identify underlying issues:** RCA helps uncover the root causes of non-conformities (NCs) or incidents, rather than merely addressing their symptoms. By understanding the underlying issues, organizations can implement more effective solutions to prevent future occurrences.
2. **Prevent recurrence:** The CAP outlines specific actions to rectify identified root causes and prevent recurrence of NCs. This proactive approach helps to mitigate risks and maintain compliance with standards and regulations.
3. **Continuous improvement:** The RCA/CAP process fosters a culture of continuous improvement within organizations. By systematically addressing root causes and implementing corrective actions, organizations can enhance their processes, systems, and overall performance over time.
4. **Maintain reputation and trust:** Addressing issues promptly and effectively demonstrates commitment to quality, safety, and compliance. This helps to maintain the reputation and trust of stakeholders, including customers, partners, regulators, and communities.

In summary, identifying RCA and developing CAP is essential for understanding and addressing the root causes of missed thresholds or non-conformities, preventing their recurrence, driving continuous improvement, and upholding the Verified Unit's reputation and trust.

¹ SRP-Assurance-Scheme-2.0-Nov2023.pdf (sustainableice.org)

4. HOW VERIFIED UNITS IDENTIFY RCA & DEVELOP CAP

The purpose of RCA is to delve beyond observed symptoms and identify the fundamental causes of NCs. By identifying root causes, Verified Unit (VU) can develop effective strategies to address issues at their source and prevent recurrence in the future. RCA involves gathering and analyzing data, investigating contributing factors, and using various analytical techniques to uncover the root causes of observed symptoms. The findings of the RCA inform development of a Corrective Actions Plan (CAP) which documents introduction of preventive and mitigating measures to eliminate NCs, improve performance, enhance quality and mitigate overall risks within the VU's system.

When a VU is notified of non-conformances (NCs), they may promptly implement immediate corrections to resolve the issue. However, these corrections often only address the symptoms and may not fully close the NC. Without identifying root cause(s) through RCA, the CAP cannot be effectively focused, resulting in a risk of recurrence.

The primary objective of a CAP is to prevent recurrence of NCs and ensure ongoing compliance with standards, regulations, and requirements. CAPs may include measures to mitigate risks, improve processes, enhance performance and promote continuous improvement within the VU's system.

Identifying the RCA and developing CAP involves a stepwise process to systematically identify and address the underlying causes of an identified NC. The following table illustrates how such a structured approach can be adopted.

Step	Action	Process
Root Cause Analysis (RCA)		
1.	Define the problem	Clearly articulate the problem or non-conformance. Be specific about what is happening and why it is a concern.
2.	Identify possible causes	Brainstorm and list potential causes of the problem. Encourage input from team members and/or stakeholders familiar with the issue.
3.	Gather data	Collect relevant data and information, such as reports (from internal assessment and third-party assessment), records, observations, interviews, and any other credible sources of information.
4.	Root cause identification	Investigate each potential cause further to determine if it is indeed a root cause or merely a symptom of a deeper issue. Use techniques such as the "5 Whys" method ² to dig deeper into the underlying reasons behind each cause. Kindly check

² [What Is Root Cause Analysis? | Definition & Examples \(scribbr.co.uk\)](https://www.scribbr.co.uk/what-is-root-cause-analysis/)

		the video of how to do a 5 WHYs the right way³.
5.	Validate root causes	Once you have identified potential root causes, gather additional evidence or data to validate your findings. This may involve further experiments, simulations or analysis.
Corrective Action Plan (CAP)		
6.	Determine corrective actions	Develop specific actions to address each root cause identified. These actions should be targeted at eliminating or mitigating the root causes to prevent the problem from recurring.
7.	Implement corrective actions	Put your corrective actions into practice. Assign responsibilities, establish timelines and allocate resources to ensure actions can be implemented effectively. Note: VU could implement correction as an immediate action to solve the problem; however, the NC should still be closed with a documented CAP based on a valid RCA.
Submission to CAB		
8.	Document	Document the entire RCA process, including problem definition, data collected, RCA, corrective actions and outcomes.
9.	Submit for review	Submit RCA and CAP for review and approval by the CAB. Once approved, proceed to the next step.
10.	Communicate	Communicate findings and recommendations from the RCA and CAP exercise as approved by the CAB to all relevant parties for implementation.
Implementation and monitoring		
11.	Monitor, evaluate and learn	Continuously monitor the effectiveness of your corrective actions. Track progress against established indicators to determine if the problem has been resolved or if further adjustments are needed.
12.	Continuous Improvement	Incorporate lessons learned from the RCA process into practices and procedures. Use feedback and insights gained to continually improve processes and prevent similar problems from occurring in the future.

By following these steps, the VU can systematically identify root causes and develop

³ BEFORE you do a 5WHYs root cause analysis check this out

effective solutions to address NCs, ultimately improving overall performance and reliability of the VU's systems and processes.

In the case of producer group or individual producer with multiple farm plots, the RCA and CAP development will be overseen by the Internal Management System (IMS) team or manager. The IMS manager is responsible for ensuring the process is properly documented and submitted to the CAB for approval. They will also monitor and evaluate implementation of the CAP to drive continuous improvement.

5. HOW CAB VERIFY THE RCA & CAP

CABs play a crucial role in verifying RCA and CAPs to ensure compliance with SRP standards. The verification audit process involves several systematic steps aimed at thoroughly assessing the effectiveness of RCA and CAP. By following these steps, CABs can provide objective assurance that the identified root causes of NCs have been adequately addressed and that appropriate corrective actions have been identified and implemented to prevent or mitigate the risk of recurrence.

1. **Document review:** CABs examine the submitted RCA and CAP documentation to ensure they are comprehensive, well-documented, and aligned with the requirements of the appropriate standards and/or regulations.
2. **Assessment of effectiveness:** CABs assess RCA and CAP effectiveness in addressing the identified root causes and preventing recurrence of NCs. They seek evidence that the corrective actions taken are appropriate and likely to succeed.
3. **Evaluation of implementation:** CABs may conduct on-site visits or audits to verify implementation of the corrective actions outlined in the CAP. During these visits, direct observations, interviews and review of records help to confirm that the proposed actions have been implemented as intended.
4. **Verification of compliance:** CABs ensure that the RCA and CAP align with the requirements specified in the SRP standards and that the RCA and CAP development processes adhere to established protocols, guidelines and best practices throughout.
5. **Approval process:** Once satisfied with the verification process, CABs approve the RCA and CAP, confirming that they meet the required standards and are acceptable for compliance purposes.
6. **Verify evidence to close NCs:** CABs audit the implementation of the CAP by the VU to close the NCs previously recorded. Depending on seasonality of the NC, NCs fall into one of two types: (a) Immediately auditable NCs; and (b) Only-seasonally auditable.

In accordance with the Assurance Scheme V2.0, table of *Audit Report and Responses Schedule*, page 52, for immediate auditable NCs, CAB will verify evidence submitted by the producer or producer group within 14 calendar days. In the case of only-seasonally-auditable NCs, the evidence will be verified as soon as possible during the next season or next audit. Below is the timeline extracted from the Assurance Scheme V2.0 for easy reference, check the one highlighted in light blue.

Audit report and response schedule			
Responsibility	Action	<i>Maximum</i> calendar days	<i>Maximum elapsed days</i> after last day of audit
CAB Auditor	Produce draft audit report	21	21
CAB Reviewer	Review and approve before send to producer/ producer group	7	28
Producer/ producer group	Check and comment on any inaccuracies	7	35
If NO NCs in the audit report			
CAB	Finalise audit report, update SRP platform and send final report to SRP and producer/ producer group	7	42
If NCs in the audit report			
CAB	Finalise audit report, update SRP platform and send final report to producer/ producer group to build Root Cause Analyses (RCAs) and Corrective Action Plans (CAPs)	7	42
For immediately auditable NCs in the audit report			
Producer/ producer group	Provide RCA and CAP	28	70
CAB Reviewer	Review and agree CAP	14	84
Producer/ producer group	Provide evidence of corrective action	21	105
CAB Reviewer	Review and approve evidence	14	119
CAB	Finalise audit report, update SRP platform and send final report to SRP and producer/ producer group	7	126
For only-seasonally-auditable NCs in the audit report			
Producer/ producer group	Provide RCA and CAP	28	70
CAB Reviewer	Review and agree CAP	14	84
Producer/ producer group	Provide evidence of corrective action	At next audit will be reviewed during audit process	
CAB	Finalise audit report, update SRP platform and send final report to SRP and producer/ producer group	7	91

Annex 1: RCA and CAP Format

Format RCA and CAP submitted to CAB

SRP Secretariat provide an official template⁴

Verified Unit name :
 Year of Audit :
 Submission date :
 Name of IMS manager :
 Contact details :

Req #	NC description	Root cause analysis	Specific steps	Responsible person	Timeline	Resources required	CAB review and decision
		1.	1.				
		2.	2.				
		3.	3.				
		4.	4.				
		5.	5.				
		6.	6.				
		7.	7.				
		8.	8.				
		9.	9.				
		10.	10.				
		11.	11.				
		12.	12.				

⁴ RCA - CAP template available on SRP webpage

Annex 2: Example

A cooperative receives an NC against SRP Standard for Sustainable Rice Cultivation requirement #25, demonstrating straw burning for two of its members. The Cooperative must first **define the problem**: the cooperative observes instances of straw burning, which leads to air pollution, soil degradation and health hazards.

Then the cooperative must **identify the potential causes** of straw burning, including:

- Agronomic/phytosanitary/cropping system constraints;
- Lack of awareness about negative impacts;
- limited knowledge of and/or access to alternatives;
- economic incentives favoring burning;
- inadequate enforcement of regulations.

The cooperative **collects data** on the frequency, extent and impacts of straw burning incidents, environmental regulations, member practices, alternative approaches and stakeholder concerns.

Using the "5 Whys" method⁵, the cooperative delves into the reasons for the lack of awareness and limited access to alternative disposal methods. They discover that members lack awareness and education on the negative environmental impacts of straw burning and face logistical challenges in accessing alternative disposal methods.

Based on this information, the cooperative conducts surveys and interviews with members to validate the **identified root causes**, confirming gaps in knowledge and constraints to addressing the issue.

Based on the RCA findings, the cooperative **develops a CAP** as approved by the CAB, following an agreed timeline:

⁵ [What Is Root Cause Analysis? | Definition & Examples \(scribbr.co.uk\)](https://www.scribbr.co.uk/what-is-root-cause-analysis/)

[BEFORE you do a 5WHYs root cause analysis check this out](#)

1. Conduct educational workshops on the environmental consequences of straw burning. The cooperative organizes workshops and training sessions for its members to raise awareness about the impacts of straw burning;
2. Provide training on alternative disposal and use methods such as mulching and composting, and where feasible, demonstrate alternative techniques for disposal or utilization;
3. Facilitate access to resources and equipment for implementing these methods;
4. Collaborate with local authorities and organizations to provide resources, support and incentives to implement alternative methods.

The cooperative ensures that the same NC will not recur by **monitoring practices** of its members with regard to straw disposal and use methods over time to assess the effectiveness of the agreed corrective actions. This will include tracking the reduction in straw burning incidents, improvements in air and soil quality, and member satisfaction and challenges in adopting alternative disposal and use methods.

Format RCA and CAP submitted to CAB

SRP Secretariat provide an official template

Req #	NC description	Root cause analysis	Specific steps/ actions	Responsible person	Timeline	Resources required	CAB review and decision
25	Based on interviews of sampled farmers, it was confirmed that two sampled members are practicing straw burning. This was also confirmed through field visit, where spots were seen where straw burning had taken place.	<ol style="list-style-type: none"> 1. Lack of awareness about negative impacts; 2. Limited knowledge of and/or access to alternative methods of disposal or utilization; 3. Economic incentives favoring burning; 4. Inadequate enforcement of regulations. 	<ol style="list-style-type: none"> 1. Conduct educational workshops on the environmental consequences of straw burning. The cooperative organizes workshops and training sessions for its members to raise awareness about the impacts of straw burning; 2. Provide training on alternative disposal or utilization methods such as mulching and composting, demonstrate alternative techniques; 3. Facilitate access to resources and equipment for implementing these methods; 4. They also collaborate with local authorities and organizations to provide resources and support for implementing these methods. 	Trainer team. Mr. Y will lead the process	1 st week of April 2024	Classroom meeting. Extension officer to deliver other methods as alternative disposal techniques. Engage with other stakeholders to utilize the straw.	CAB has received the CAP on 26 March and review the RCA and CAP which found adequate to close the NC. However, the implementation should be completed as per the timeline and evidence shall be submitted within a week after the training session.