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Document Title: Corrective and Preventive Actions

Approval Authority: Bureau Chief

A. PURPOSE AND SCOPE

This procedure establishes a method for corrective or preventive actions to improve processes within or services provided by the Education, Training and Technical Assistance (ETTA) Bureau. Corrective or preventive action items may address written or non-written processes, practices, measurements or analyses, or any part of the ETTA quality system.

B. ACTION STEPS

1. Customer Complaints:

- a. At the end of each month, each bureau employee who receives a complaint (actual or apparent) about a bureau service or product will forward a completed Customer Complaint Form to the management representative. Refer to Appendix A.
- b. The management representative will record the customer complaints and assign them to the appropriate bureau supervisor for resolution.
 - (1) If the complaint is not relevant to the Bureau Quality Assurance Program, the supervisor will resolve the complaint in accordance with appropriate bureau or state personnel practices. Upon resolution, the supervisor will provide appropriate feedback to the complainant.
 - (2) For complaints that are relevant to the Bureau Quality Assurance Program, the supervisor will complete an action request and forward it to the management representative. At that time, the action request will be processed as in the procedures for handling corrective actions or preventive actions, below.

2. Corrective Action:

- a. An action request form is prepared and forwarded to management representative upon identification or observance of nonconformities.
- b. Bureau management assigns responsibility for corrective action.

- c. Nonconformities are reviewed and prioritized as to importance. Customer complaints are always assigned a high priority and resolved in a timely manner.
- d. The cause of the nonconformity is investigated
- e. The current condition is resolved, if practicable, particularly if the nonconformity is a customer complaint.
- f. An analysis of relevant systems or processes is conducted using appropriate problem solving or process improvement techniques. Results are recorded on the action request form.
- g. A documented action plan is developed to eliminate the cause and prevent recurrence.
- h. Appropriate approvals for the action plan are obtained and the plan is implemented.
- i. Changes to the system are enacted, if required (using appropriate change procedures).
- j. Action request and plan are filed for retention.
- k. Changes are evaluated for effectiveness.

3. Preventive Action:

- a. Potential nonconformities and improvement opportunities may be identified by a number of means: corrective action items, periodic systems review, suggestions for improvement, and assessment observations.
- b. Upon identification, an action request form is prepared and forwarded to management representative.
- c. Bureau management reviews and prioritizes as to importance and assigns responsibility for preventive action.
- d. Relevant systems or processes are analyzed using appropriate problem solving or process improvement techniques. Results are recorded on the action request form.
- e. A solution and documented action plan, including targets for improvement is developed.
- f. Appropriate approvals for the action plan are obtained and the plan is implemented.

- g. Changes to the system are made, if required (using appropriate change procedures).
 - h. Action request and plan are filed for retention and inclusion in the management review process.
 - i. Changes are evaluated for effectiveness.
4. Corrective and preventive action requests and plans are scheduled for review in both the next quarterly management review and internal assessment.

C. REFERENCES

[BOP D.04.A.01 Document and Data Control](#)

[Action Request Form](#)

D. REVISIONS

1. 02/2009 – revised section B.1.
2. 03/2011 – reviewed.
3. 12/2016 – reviewed.
4. 09/2019 – reviewed.
5. 05/2021 – revised section D.
6. 06/2023 – reviewed.

Appendix A

Customer Complaint Form

Date: _____ Complainant Name: _____

Phone Number: _____ Requesting Follow Up: Yes/No

Nature of the Complaint: _____

Bureau Information:

Employee's Name (If Complaint against an employee): _____

Supervisor's Name: _____

Section: _____

Corrective Action Taken: _____

Confirmation of Corrective Action:

Bureau Chief: _____

Date: _____