

SUBJECT:	Fermilab Corrective & Preventive Action Plan – Form 1 - Simple	NUMBER:	1004.1001 FORM 1
RESPONSIBILITY:	Quality Assurance Manager	REVISION:	000 C3
APPROVED BY:	Head, Office of Quality and Best Practices	EFFECTIVE:	04/03/09

CAP INITIATION

This section to be completed by the person requesting simple corrective / preventive action	
Requestor Name: Bakul Banerjee	Organization: CD-Office of Project Management Phone: 5251
Problem/Opportunity To Be Addressed: The Computing Division does not have a formal program in place for communicating and interpreting to its employees Director’s Policy # 13. More specifically, CD should determine which “policies, program documents, program implementation plans and procedures” should be treated as controlled documents and what document information should be included in the header of CD controlled documents (for example, unique ID number, revision number and date, etc.).	
Unique Tracking Number: DD-MM/DD/YYYY-x: CD-04-14-2009-2	
(DD=Div or Sec, MM/DD/YYYY= Date Opened, x=1, 2, ...n)	
Responsible Person: Bill Boroski (previously Vicky White) Organization: CD-CDO Phone:	
**Responsible Person Acceptance: [Bill Boroski Signature on file]_____ Date: 5/20/09	
<p>*Comments: For reference only: Director’s Policy 1 states that “All Fermilab policies issued by the Director have Laboratory-wide applicability. All Laboratory employees shall follow Fermilab policies that are implemented by Division/Section programs and procedures. The Directorate shall approve Division/Section programs and procedures that implement Laboratory-wide policies.”</p> <p>Director’s Policy 13 on “Document Control” states that “All policies, program documents, program implementation plans, and procedures shall be controlled by the issuing organization in accordance with their internal policies. At a minimum, all documents shall have Document number, Revision, Issue and Date in the heading of each controlled document.”</p> <p>It was also noted that certain documents that are likely candidates for becoming controlled documents were not in CD DocDb. For example, the Network Layout document was not on DocDB at the time of as-is assessment.</p>	

CAP DEVELOPMENT

This section to be completed by the Responsible Person	
Describe the Actual Problem/Opportunity, and What Caused it (Simple Root Cause):	
Remedial/Compensatory, Corrective, and/or Preventive, actions being taken and (where applicable) Initial Lessons Learned:	
Planned start date (format MM/DD/YYYY):	
Key milestones and Dates:	

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Estimated date for completion:		
Who will complete the work,	Phone:	
Who will perform verification and/or validation, 6001	Kurt Mohr	Phone:
**Responsible Person: _____	Date:	
*Comments:		

CAP APPROVAL, & CONCURRENCE

This section to be completed and signed by persons identified below		
** Approval Head D/S/C: _____	Date:	
*Comments:		
***OQBP Concurrence: _____	Date:	
*Comments:		

CAP CLOSURE

This section to be completed and signed by persons identified below		
Description of actions taken to implement:		
**Implemented By: _____	Date:	
**Verified By: _____	Date:	
*Comments:		
** Acceptance Requestor: _____	Date:	
*Comments:		
**Acceptance Head D/S/C: _____	Date:	

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***Comments:**

See Fermilab Corrective Action Plan Guide to Form 1 for directions and a completed example