CORRECTIVE ACTION PLAN

Project Name	Agency		
Project Manager	Phone	Email	
Project Contact	Title	Email	Phone
Approver(s)	Title	Email	Phone

BACKGROUND:

Summary – Briefly provide any background information that may be useful in understanding how this Corrective Action Plan will be executed. For example, identify whether Corrective Action Plan(s) have been initiated for this project in the past.

Completion Date Estimate – Identify the target date for complete execution of this Corrective Action Plan.

	ues – Briefly identify each issue, including those ntified by QAT, the agency, or another source.	Causes – Briefly describe the root cause of the issue.
1		
2		
3		

PLANS:

Corrective Actions - Briefly describe actions that will correct the issues, and in some cases verify the root causes.

Preventative Actions - Briefly describe actions that will mitigate reoccurrence of the issues in the future.

Methodologies – Briefly describe processes for analyzing, monitoring, managing risks, reporting, and other activities that impact execution of the corrective and preventative actions.

ADDITIONAL INFORMATION:

Addendum – Briefly provide any additional information that may be useful to further clarify execution of this Corrective Action Plan. Identify and attach any material that may be helpful to QAT such as a Project Recovery Plan or Enterprise Project Health Check Tools.

Attachment Name	Attachment Purpose	Attachment Audience

QAT ASSISTANCE:

Request – Briefly describe any type of assistance needed from QAT during execution of this Corrective Action Plan such as review of recent project changes.