

Administrative Changes to OC-ALCI 90-420, *Corrective Action Tracking Action System*

OPR: OC-ALC/QAI

References throughout to QAB are now changed to QAI.

References throughout to AFI 21-101 and AFMC_SUP to AFI 21-101 are now replaced with AFI 21-102 and AFSCMAN 21-102.

24 MARCH 2016

**BY ORDER OF THE COMMANDER
OKLAHOMA CITY AIR LOGISTICS
COMPLEX**

**OKLAHOMA CITY AIR LOGISTICS
COMPLEX INSTRUCTION 90-420**

1 MAY 2014



Special Management

**CORRECTIVE ACTION
TRACKING SYSTEM (CATS)**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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Certified by: OC-ALC/QA
(Mr. Dan McCabe)

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This instruction establishes process, procedures and responsibilities involved in the identification and resolution of Oklahoma City Air Logistics Complex (OC-ALC) nonconformance findings identified during process audits identified on OC-ALC Form 531, *Corrective Action Request (CAR)* and OC-ALC Form 531-1, *Root Cause Analysis (RCA) Worksheets*. This instruction is applicable to all complex organizations under the Aerospace Standard (AS) 9110 Certification (excluding 76th Software Maintenance Group (76 SMXG)). It does not apply to the Air Reserve and Air National Guard. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using Air Force Form 847, *Recommendation for Change of Publication*; route AF Form 847s through the appropriate chain of command to Quality Auditing Section (OC-ALC/QA). This instruction implements requirements outlined in OC-ALC Manual (OC-ALCMAN) 90-107, *OC-ALC Quality Manual*, and OC-ALC Instruction (OC-ALCI) 90-120, *Internal Audit System*. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with (IAW) Air Force Manual (AFMAN) 33-363, *Management of Records*, and disposed IAW Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS) located at <https://www.my.af.mil/afirms/afirms/afirms/rims.cfm>.

SUMMARY OF CHANGES

Minor formatting and administrative changes.

1. Purpose: This instruction describes processes and responsibilities for initiating, documenting and tracking OC-ALC Form 531, and the associated information collected on OC-ALC Form 531-1 in support of the AS Quality Management System (QMS) audit processes and procedures. CATS will be used for collecting, tracking and reporting all CARs and associated RCAs, Corrective Action Plans (CAPs), verification audits and 60-120 day follow-up audits. CATS is a tool to assist OC-ALC quality and management personnel in managing the corrective action process.

1.1. CATS is the only authorized database for documenting and tracking CARs submitted on OC-ALC Form 531 and their associated RCA. Data generated from the submittal of CARs and RCA worksheets shall be entered and maintained in CATS, a network hosted database. CATS provides authorized complex personnel direct access for the input and editing of data. Once information is entered in CATS, the electronic record shall represent the only official document. Any hard copy representation of the electronic record, either partial or complete, shall not be referred to as the official OC-ALC Form 531 or OC-ALC Form 531-1 and must be controlled as required by governing directive(s).

1.2. All OC-ALC personnel may acquire access to CATS as “read only” purposes provided they have the appropriate software, a user ID, and a password. CATS software may be downloaded by calling the 72 ABW/SCO Help Desk. The new user will then log into CATS, click the block that reads “Request CATS Access”, fill out the CATS Access Request and submit the request.

2. Scope: This instruction applies to all organizations within the scope of the OC-ALC AS Certification. It relates specifically to external, internal, and pseudo audit results or any CARs written as a result of stumble-on findings.

3. Procedures. A CAR shall be initiated whenever a condition warrants an investigation of an identified nonconformance(s) or suspected nonconformance(s). All CARs are subject to a validation review by the responsible lead auditor. Disputes - in the event a CAR finding or classification is disputed: subject CAR shall be elevated through management levels until resolution is achieved. All disputes resulting from actions taken in CATS shall be resolved in a similar manner.

3.1. All CARs shall be documented in CATS. When CATS is not available, a hard copy OC-ALC Form 531 shall be used and submitted to the Organizational Approval Authority (OAA) where the finding was initiated. Information from the hard copy of the OC-ALC Form 531 will be input into CATS by the OAA at such time availability is restored. Hard copies of official letters and forms should only be used when email and/or CATS is not operational or available.

3.2. CARs may be initiated as a result of, but not limited to, the following:

3.2.1. Nonconformances identified during external, internal, or pseudo audits, including stumble-on findings.

3.2.2. Review of trends or significant discrepancies discovered by analysis of various types of nonconformance reports.

3.3. CARs shall be classified as follows:

3.3.1. Observation. An observation warrants further review but is not necessarily a nonconformance. All observations shall undergo a review process (accomplished by the process owner through the OAA to determine whether or not a nonconformance actually exists). At such time it is deemed that no further action is required during the review process, the OAA shall notify the QA organization of CAR cancellation. When the responsible lead auditor concurs, the CAR shall be cancelled and no further action shall be taken. When the review process determines that a discrepant condition exists, the classification shall be elevated to “minor” or “major” and the development of an RCA and CAP shall be accomplished.

3.3.2. Minor. A non-fulfillment of a requirement which is not likely to result in the failure of the QMS, single system failure or lapse in conformance with a requirement, local or higher guidance or the AS.

3.3.3. Major. A nonfulfillment of a requirement which is likely to result in the failure of the QMS. The absence of or total breakdown of a system to meet a requirement, local or higher guidance, the AS or a nonconformity that would result in the probable shipment of a nonconforming product.

3.4. OC-ALC Form 531 CAPs and OC-ALC Form 531-1 RCAs. CAPs and associated RCAs shall be documented in CATS. If CATS is unavailable, hardcopies of OC-ALC Form 531 and OC-ALC Form 531-1 shall be utilized. When there is not enough space available within any of the form blocks, it is acceptable to use a continuation sheet. Upon completion, the hardcopies shall be submitted to the appropriate OAA or quality organization for input when CATS becomes available. Once input, the hard copy form may be discarded or destroyed.

3.5. OAA Appointment. An OAA primary and alternate shall be appointed by memo signed at the complex-level for complex POCs and at group level for group POCs. The organization CATS administrator (OCA) shall maintain a record of all OC-ALC/group-level OAA letters of appointment. Current OAA letters of appointment on file will stand until the POC is updated. The complex shall act as the point of contact for all CARs/CAPs processed and coordinated within the respective organizations, as well as any questions related to the CARs. The OAA may perform Level I or Level II CAP approvals or may appoint Level I and Level II approval authorities.

4. Responsibilities:

4.1. Organization CATS Administrator (OCA). The OCA for the complex will be appointed by the chief of the Quality Office. The OCA for the maintenance groups, if desired, will be appointed by the respective Quality Assurance Chief. The OCA's are the point of contacts for all administrative management functions between the assessed organization and the CAR originator. The OCA manages CAP verification audits, monitors and tracks suspense's within the CATS system for their organization, and closes CARs after completion of a passed verification audit.

4.2. CAR/CAP Approval Authority:

4.2.1. Level I: Personnel authorized to provide Level I CAP approval within the organizational area. All ISO registered Complex organizations within scope of

Aerospace Standard registration must have at a minimum, two personnel assigned to perform CATS Level I CAP approval actions.

4.2.2. Level II: Personnel authorized to perform Level II CAP approval within their organizational area. All ISO registered Complex organizations within the scope of Aerospace Standard registration must have at a minimum two personnel assigned to perform CATS Level II CAP approval actions.

5. Process: CAR Initiation and Approval. CARs issued as a result of audits shall be validated and approved in CATS within ten (10) working days from the audit end date.

5.1. The CAR initiator shall document finding(s) in CATS.

5.2. The Lead Auditor shall:

5.2.1. Validate and approve CARs. Ensure the defect code (Attachment 2) in the finding tab is annotated. When a submitted CAR is deemed invalid, the lead auditor shall provide justification and return to the originator for possible revision or further investigation.

5.2.2. The lead auditor will send email notification within 10 working days of audit closing date of CAR approval to the appropriate OAAs. Notification shall identify CAR by CATs index number and provide the suspense date for RCA and CAP completion.

5.3. The OAAs shall review all CARs assigned for accuracy and validity.

5.3.1. Monitor organization's open CARs to ensure suspense's are met.

5.3.2. Provide a 30-day status update in the notes section of each "OPEN" CAR.

5.4. RCA and CAP Preparation. The OAA or Level I approval authority will assign the CAR to a responsible manager or quality office within the relevant organization for RCA and CAP development and implementation.

5.4.1. Major Finding: RCAs and CAPs shall be completed and returned to the originating office within 15 working days from the date of notification of CAR approval. For all major findings the originating office shall review, approve/disapprove the submitted RCAs/CAPs within three (3) working days of receipt.

5.4.2. Minor Finding: For all CARs resulting in minor nonconformance's, the RCAs and CAPs must be completed and returned to the originating Quality Assurance office within 20 working days from the date of CARs approval/notification. The originating office shall review and approve/disapprove the submitted RCAs/CAPs within five (5) working days for minor non-conformances. The relevant organization's leadership and OAA's will be informed of the status of the CAR. (**NOTE:** There shall be no extensions for the RCA/CAP preparation. Failure to submit a RCA/ CAP within the required suspense will result in delinquent status and finding shall remain delinquent until such time as the RCA/CAP is approved. CARs in deferred status are not considered delinquent.)

5.5. The responsible manager or designee shall:

5.5.1. Perform RCA and Develop CAP:

5.5.1.1. The organization's responsible manager or designee shall accomplish RCA and CAP development electronically in CATS. When electronic method is

unavailable refer to paragraph 3.1. for OC-ALC Forms 531 and 531-1 hard copy instructions.

5.5.1.2. An RCA shall be provided for all approved CARs. A valid RCA shall consist of no less than the completion of an OC-ALC Form 531-1 annotated in CATS.

5.5.1.2.1. Human factors should be considered when developing RCA/CAP to ensure that nonconformities do not recur; examples of human factors: physical fitness, physiological characteristics, stress, fatigue, distraction.

5.5.1.3. Map the Root Cause identified on the OC-ALC Form 531-1 utilizing the “Cause Matrix” and enter the Root Cause Code into the CATS, RCA (block 5).

5.5.1.4. Cause Codes – A Cause Matrix chart shows cause codes divided into 4 levels (4th level is not utilized and shall reflect “000”). This matrix chart identifies the related root cause into four levels, determines that appropriate reasons for an undesirable situation or problem (defect/ nonconformance) that, if eliminated or corrected, would prevent reoccurrence. (**NOTE:** The cause matrix chart is a tool for mapping root causes already identified via sound RCA. It is not designed for use in determining the root cause itself.)

5.5.1.5. Develop a CAP, provide a Planned Start Date (PSD), Planned Completion Date (PCD), and annotate the “Root Cause Code.”

5.5.1.6. CAPs shall be based on the root cause of the nonconformance and shall include both a description of the suggested correction to eliminate the noted finding and the action(s) taken to prevent the likelihood of recurrence. Specific action will be taken to determine if other areas are impacted by the nonconformity (OC-ALC Form 531, section III, item D).

5.5.1.7. When computer access is available, document the RCA/CAP in CATS. Otherwise document on OC-ALC Forms 531 and 531-1 and submit to the responsible lead auditor or Level I approval authority. When documented directly in CATS, email notification shall be sent to the responsible approval authority.

5.5.1.8. When CAP is not approved, OAA shall coordinate disapproval with the Level I and II approval authority for revision at the appropriate level.

5.5.1.9. Responsible designee shall monitor PCDs to prevent delays. Responsible designee shall submit requests for extensions allowing two days for review by both the OAA and the responsible lead auditor.

5.5.1.10. Upon CAP completion, responsible designee shall notify the OCA that a verification audit should be scheduled. Once the verification audit has been completed, it will be documented in the “notes” section of CATS.

5.6. Organization CATS administrators (OCA) shall:

5.6.1. Ensure the CAR/CAP “Status” field is current for all open CARs.

5.6.2. The responsible OCA shall monitor CATS for status and accuracy on all open CARs, 30-day status updates, and PCD.

5.6.3. The OCA shall monitor and track the CAP implementation status for all open CARs for their area of responsibility.

5.7. RCA/CAP Review. All CAR RCAs and CAPs shall be reviewed and approved at two different levels of authority.

5.7.1. The OAA or Level I approval authority shall review submitted RCAs, identified root cause codes, and associated CAPs for accuracy, adequacy, and feasibility before providing 1st level approval. The OAA or Level I approval authority shall:

5.7.1.1. Review the RCA for validity as part of the CAP. Any RCA with missing, invalid or inconsistent information shall be referred back to the responsible OAA/Level I for revision.

5.7.1.2. Resolve all noted discrepancies with the responsible manager prior to RCA/CAP approval.

5.7.1.3. Notify the originating workflow email account that RCA/CAP is ready for review and second level approval.

5.7.1.4. Ensure all disapproved CAPs returned from the originating office are forwarded to the appropriate responsible designee or manager for revision.

5.7.1.5. Monitor, provide guidance, and assist the responsible designee or manager during CAP revision.

5.7.1.6. Review revised CAP.

5.7.1.7. Forward CAP to the originating quality office or OAA for review/approval.

5.7.2. The responsible lead auditor or Level II approval authority shall review all CAPs, associated RCAs, and identified root cause codes for accuracy, adequacy, and feasibility before providing 2d level approval/disapproval. All 2d level approvals from the OAA or Level I approval authority shall be submitted by email to the issuing organization's workflow account. The lead auditor or Level II approval authority shall:

5.7.2.1. Return all disapproved CAPs along with justification and recommendations, through each organization's OAA or Level I approval authority. Disapproval will be based on documented requirements, established policies, or procedures, and governing standards and or regulations, and shall be clearly defined to the responsible authority. All disapproved CAPs will be annotated in CATs.

5.7.2.2. Review all re-submitted CAPs for accuracy, adequacy, and feasibility prior to approval/disapproval.

5.7.2.3. Elevate the CAP to the appropriate management official(s) when a CAP is disapproved a second time. The appropriate management official(s) will be at a minimum; the OCA, OAA, and the chief of the quality organization that issued the CAR.

5.7.2.4. Issues regarding individual RCAs/CAPs may be reviewed by an informal RCA/CAP review group, which may be convened by the CAR issuing organization. Should the issue(s) not be resolved, the finding may be elevated to the next level of management.

5.7.3. The 2d level approval on all RCAs/CAPs submitted for CAR's written against the complex Quality Office (OC-ALC/QA) will be provided by Complex OAA's.

5.7.3.1. CAPs disapproved by the (OC-ALC/QA) are returned to Level I approval authority who in turn will:

5.7.3.1.1. Ensure deficiencies identified are addressed during CAP Implementation. If the CAP is not agreed upon, or clarification/discussion is needed, the OAA, subject matter expert, and/or lead auditor will help with resolution issues. Should issue(s) not be resolved, they may be elevated through management to the complex quality manager (QM) chief.

5.7.3.1.2. The OAA will ensure all revisions are documented in CATs and returned to the lead auditor or 1st level approving authority within the established suspense.

5.7.3.1.3. The OAA will annotate revision documentation in CATs.

5.7.4. The responsible OCA shall monitor CATS for status and accuracy on all open CARs, 30 day status updates, and PCD.

5.8. CAP Implementation. Is based on the established PCD identified for each CAP.

5.8.1. The lead auditor or Level I approval authority shall:

5.8.1.1. Monitor the status of each CAR/CAP to ensure completion dates are met and or ensure extensions are requested to support corrective actions completion (See para. 5.8.2.3.). Ensure 30-day status updates are annotated in the "notes" section of CATS for all CARs that remain open in excess of 30 days from the CAP approval date. Status updates will continue to be provided at 30-day increments until CAP completion.

5.8.1.2. Notify the OCA approval authority when CAP implementation has been accomplished.

5.8.1.3. Upon CAP implementation, the OCA will schedule a verification audit. When verification audit is passed, the issuing quality office performs 60-120 day verification audit.

5.8.2. The responsible manager or designee shall:

5.8.2.1. Implement the CAP.

5.8.2.2. Ensure all documented nonconformance findings are addressed/resolved and a request for closure submitted to the lead auditor or Level I approval authority to allow review before referring to the appropriate organization for a verification audit.

5.8.2.3. Request PCD Extensions: First request for PCD extension may be granted by lead auditor or Level I approval authority. Request for second extension require group approval submitted to OC-ALC/QA workflow account oc-alc.qa.wf@us.af.mil. For group issued CARs, request for second extensions require group command office approval submitted to the issuing organization's workflow account. **NOTE:** Extension requests may be sent by email or formal memo to applicable workflow. Include progress to date, and reason for extension. The

responsible organization shall include milestones for CAP and all CARs with a PCD of more than 180 days from initiation date.

5.8.3. The organizational manager, OAAs, or lead auditor, shall:

5.8.3.1. Review implementation status reports.

5.8.3.2. Provide assistance and guidance to the organizations as required or requested.

5.8.3.3. Review all requests for PCD extensions submitted for approval.

5.8.4. The OCA shall monitor and track the CAP implementation status for all open CARs for their area of responsibility.

5.8.5. Deferred Status: A CAR/CAP may be assigned a “Deferred” status in CATS when the following conditions are met.

5.8.5.1. Two or more CARs are assigned to the complex and the same CAP is used in all the CARs. One CAR remains in “Open” status to track the implementation of the CAP.

5.8.5.1.1. The control number and applicable notes for all the deferred CARs will be listed in the notes section of the CAR that remains “Open”.

5.8.5.1.2. In the notes section of each “Deferred” CAR there is a statement that identifies the control number of the “Open” CAR used to track the implementation of the CAP.

5.8.5.1.3. The CAP and RCA will be completed on all “Deferred” CARs.

5.8.5.1.4. When requesting closure on the “Open” CAR used for tracking CAP implementation closure will also be requested for all associated “Deferred” CARs.

5.8.5.1.5. When closure is requested on the primary CAR all deferred CARs will be changed to “Closed Pending” and evaluated based on corrective actions taken.

5.8.5.2. A single CAR that requires additional clarification or action outside the control of OC-ALC may be placed in “Deferred” status. This would not preclude requirements to accomplish thirty day status reports and brief the status during management reviews.

5.9. CAP Verification Audit/CAR closure. Must be completed within 10 working days from date a request for closure is received by email and submitted into the notes section from a lead auditor or Level I approval authority through the issuing organizations workflow email account.

5.9.1. OCA shall: (See paragraph 5.6.)

5.9.1.1. Assign and notify an auditor to perform a CAP verification audit.

5.9.1.2. Monitor and track ten working-day suspense to ensure verification audits are performed.

5.9.1.3. Provide notification of verification audit to the lead auditor, Level I approval authority, OAA, Complex QM, or designee.

- 5.9.1.4. Upon successful completion of a verification audit with a recommendation to close and concurrence by the lead auditor, close the CAR in CATS and provide notification to the responsible Level I approving authority.
- 5.9.2. CAP verification auditor shall:
- 5.9.2.1. Conduct verification audit to verify CAP implementation and findings noted on CAR has been resolved. When applicable the verification audit should be sufficient enough to determine if other areas are impacted by the nonconformity.
 - 5.9.2.2. Annotate verification audit findings in CATS along with a recommendation to close or annotate justification for audit failure to include any references.
 - 5.9.2.3. Notify the responsible lead auditor and the OCA that the follow-up audit is complete and available for review.
- 5.9.3. The responsible manager or designee shall:
- 5.9.3.1. Provide assistance as required to facilitate CAP verification audits.
 - 5.9.3.2. Review audit failures. Discuss CAP verification audit failures with responsible auditor, Level I approval authority, and responsible lead auditor to derive clear understanding of any identified shortcomings.
 - 5.9.3.3. Verify CAP is still valid. If not, develop a new CAP and seek approval as before. If so, make corrections to comply with CAP and request a verification audit.
- 5.9.4. The responsible lead auditor, upon notification of completion of a CAP verification audit, shall:
- 5.9.4.1. Review the findings and recommendation(s). Upon successful completion of verification audit, recommend closure, notify the responsible OCA so the CAR may be closed.
 - 5.9.4.2. For audit failures, notify the OCA and contact the responsible Level I approval authority and the responsible QM (or their designee) with any recommendations. For group failures, contact the responsible process owner and quality assurance supervisor with any recommendations.
 - 5.9.4.3. For CAPs failing two or more CAP verification audits, refer the failure to the appropriate quality manager for resolution.
- 5.9.5. 60-120 Day Follow-Up. A follow-up audit conducted by the organization that issued the CAR to ensure the finding noted in a closed CAR has not reappeared/recurred. It shall take place no sooner than the 60th day and no later than the 120th day from a CAR's closure. No action shall be taken if the finding has not recurred. If the finding has recurred, the lead auditor shall:
- 5.9.5.1. Initiate a new CAR within the context of the original CAR's audit. The new CAR should duplicate the basic data and shall be annotated that it is a "Repeat CAR" in the CAR finding field.
 - 5.9.5.2. A repeat CAR shall begin the resolution process from the beginning.

6. Metrics. CATS is designed to allow all users data contained therein for the development of metrics.

7. CATS Records. The CATS electronic record shall represent the only official representation of an OC-ALC Form 531 or OC-ALC Form 531-1.

DONALD E. KIRKLAND
Brigadier General, USAF
Commander

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFMAN 33-363, *Management of Records*, 1 March 2008

OC-ALCMAN 90-107, *OC-ALC Quality Manual*, 28 October 2013

OC-ALCI 90-120, *Internal Audit System*, 20 November 2013

Prescribed Forms

OC-ALC Form 531, *Corrective Action Request*

OC-ALC Form 531-1, *RCA Worksheet*

Adopted Forms

AF Form 847, *Recommendation for Change of Publication*

Abbreviations and Acronyms

76 SMXG—76th Software Maintenance Group

AS—Aerospace Standard

AFRIMS—Air Force Records Information Management System

CAPs—Corrective Action Plans

CAR—Corrective Action Requests

CATS—Corrective Action Tracking System

IAW—In Accordance With

QMS—Quality Management System

OAA—Organizational Approval Authority

OCA—Organization CATS Administrator

OC—ALC – Oklahoma City Air Logistics Complex

OC—ALC/QA – Quality Auditing Section

OC—ALCI – Instruction

OC—ALCMAN – Manual

OPR—Office of Primary Responsibility

PCD—Planned Competition Date

PSD—Planned Start Date

POC—Point of Contact

QM—Quality Manager

RDS—Records Disposition Schedule

Terms

Complex Management Representative— A member of management appointed by the ALC commander and chartered with the responsibility of ensuring that the Quality System is maintained and assures the timely reporting on the system through a complex-level management review.

Correction— An immediate action to correct a discrepant condition or defective item.

Corrective Action—The process of identifying a problem, assigning responsibility, determining the root cause, developing a plan to correct the problem and taking action to eliminate the root cause so as to prevent recurrence. The intent is to eliminate the cause of the nonconformity in order to prevent recurrence.

CAR (Corrective Action Request) Identification Number— A unique auto-generated alphanumeric identification number for each CAR entered into the CATS.

Corrective Action Request (CAR) Form, OC-ALC Form 531— Form designed to document and resolve through corrective action nonconformities or problems identified during scheduled or unscheduled quality audits.

CATS Administrator— Individual designated by the OC-ALC/Quality Chief as responsible for the integrity of data contained in CATS and tasked with reporting on the status of all open CARs

Defect—: (See “**Nonconformity/Nonconformance**”)

External Audit, Complex-level— A scheduled review of conformance to Aerospace Standard conducted by the OC-ALC registrar.

Human Factors— The study of how humans behave physically and psychologically in relation to particular environments, products or services and the potential effect on safety. Recognition that personnel performing tasks are affected by physical fitness, physiological characteristics, personality, stress, fatigue, distraction, communication and attitude in order to ensure a safe interface between the personnel and all other environmental elements such as other personnel, equipment, facilities, procedures and data.

Initiator— Any person or Complex organization that identifies a nonconformance, defect, or undesirable situation and initiates a CAR (usually an audit team member).

Internal Audit— A scheduled review of conformance to Aerospace standard. It is planned and implemented under the supervision of the designated Quality Office independent from the OC-ALC registrar’s oversight.

Lead Auditor— Person designated within an organization as having the authority to assess, and or approve CARs, RCAs, and CAPs. Individual who has responsibility for all phases of an audit and has authority to make final decisions regarding the conduct of an audit and any observations/findings.

Level I Approval Authority— Appointee responsible for approving CAPs/RCAs for the audited organization, usually the OAA.

Level II Approval Authority— Appointee responsible for approving CAPs/RCAs for the organization performing the audit, usually the lead auditor.

Major Nonconformity— A non-fulfillment of a requirement which is likely to result in the failure of the QMS. The absence of or total breakdown of a system to meet a requirement, local or higher guidance, the Aerospace Standard or a nonconformity that would result in the probable shipment of a nonconforming product.

Minor Nonconformity— A non-fulfillment of a requirement which is not likely to result in the failure of the Quality Management System (QMS). A single system failure or lapse in conformance with a requirement, local or higher guidance or the Aerospace Standard.

Nonconformance Alert (NCA)— A finding of such importance or magnitude that if not addressed and corrected immediately could result in serious consequences to personnel, equipment or mission capabilities.

Nonconformity/Nonconformance— The non-fulfillment of a specified requirement. The departure or absence of one or more quality characteristics including reliability, functionality, and serviceability to any documented instruction, procedure, regulation or quality system standard.

Observation— An issue that warrants further review but is not necessarily a nonconformance.

Organic, Internal— All that is owned, managed, or derived from OC-ALC to include: resources, production, processes, and services.

Organic, External— Workload accomplished at OC-ALC upon assets not owned or managed locally.

Organizational Approval Authority (OAA)— Individuals designated by the OC-ALC, Group, and staff offices as points of contact for CARs/CAPs.

Organization CATS Administrator (OCA)— Administrator for CATS database in the OC-ALC Quality office.

Organization Issued To— Organization identified as responsible for and having control over a finding noted in a CAR.

PCD— **Planned Completion Date**

Pseudo Audit— An unplanned audit established to facilitate the recording of “stumble-on” Aerospace Standard nonconformance findings observed outside of a planned audit.

Responsible Manager— Responsible individual/manager within an organization identified as having responsibility for findings noted in a CAR.

Quality Management (QM) Organization— The designated office or activity officially assigned responsibility for quality management within the maintenance complex. Quality management may refer to Complex, organization, or both, and is dependent upon assigned levels of responsibility.

Root Cause Analysis (RCA) Work Sheet, OC-ALC Form 531-1— Form used to document RCA using the natural progression of defining the problem, identifying the immediate cause of the problem, identifying all the intermediate causes, identifying the root cause, and identifying actions to prevent recurrence. See the detailed “cause matrix level codes” on the 531-1 block 5.

Root Cause— The basic reasons for an undesirable situation or problem (defect/nonconformance) that, if eliminated or corrected, would prevent it from recurring.

Supplier— An organization that provides product or service to a customer. The customer may be any purchaser, user, beneficiary, or consumer of the product or service provided.

Thirty (30) day status updates— 30-day status updates shall be relevant and current and added in the notes section for each “OPEN” CAR.

Verification Audit— Audit conducted to verify that the CAP has been successfully implemented and functioning in order to close a CAR.

Attachment 2
DEFECT CODES

Table A2.1. Defect Codes

<u>MANAGEMENT SYSTEM - EA</u>
001 General Requirements Compliance LTA (4.1)
002 Documentation Requirements LTA (4.2)
003 Configuration Management LTA (4.3)
<u>MANAGEMENT RESPONSIBILITY - FA</u>
001 Management Commitment LTA (5.1)
002 Customer Focus LTA (5.2)
003 Quality Policy LTA (5.3)
004 Planning LTA (5.4)
005 Responsibility, Authority & Communication LTA (5.5)
006 Management Review LTA (5.6)
<u>RESOURCE MANAGEMENT – GA</u>
001 Provision of Resources LTA (6.1)
002 Human Resources LTA (6.2)
003 Infrastructure LTA (6.3)
004 Work Environment LTA (6.4)
<u>PRODUCT REALIZATION – HA</u>
001 Planning of Product Realization LTA (7.1)
002 Customer-Related Processes LTA (7.2)
003 Design and Development LTA (7.3)
004 Purchasing LTA (7.4)
005 Production and Service Provision LTA (7.5)
006 Control of Monitoring & Measuring Devices LTA (7.6)
<u>MEASUREMENT, ANALYSIS, & IMPROVEMENT – IA</u>
001 General Requirements LTA (8.1)
002 Monitoring & Measurement LTA (8.2)
003 Control of Nonconforming Product LTA (8.3)
004 Analysis of Data LTA (8.4)
005 Improvement LTA (8.5)
<u>NO LISTING – OT</u>
001 Other
<u>NO DEFECT – ZZ</u>
001 No Defect