BY ORDER OF THE COMMANDER OKLAHOMA CITY AIR LOGISTICS COMPLEX

OKLAHOMA CITY AIR LOGISITICS COMPLEX INSTRUCTION 90-120

8 APRIL 2025

Special Management

CORRECTIVE ACTION TRACKING SYSTEM (CATS)

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

ACCESSIBILITY: Publications and forms are available on the e-Publishing website at **www.e-Publishing.af.mil** for downloading or ordering

RELEASABILITY: There are no releasability restrictions on this publication

---

OPR: OC-ALC/QAX

Certified by: OC-ALC/QA (Mr. John P. Wood)

Supersedes: OC-ALCI90-420, 19 March 2021

Pages: 11

This instruction implements Department of the Air Force Policy Directive (DAFPD) 90-1, *Policy, Publications, and DoD Issuance Management*. It describes processes and responsibilities for initiating, documenting and tracking the Oklahoma Air Logistics Complex (OC-ALC) Form 531, *Corrective Action Request* in support of the Aerospace Standard (AS) 9110, *Quality Management Systems – Requirements for Aviation Maintenance Organizations* international standard required by Air Force Sustainment Center Manual (AFSCMAN) 21-102 OC-ALCSUP, *Depot Maintenance Management*. Corrective Action Tracking System (CATS) will be used for collecting and tracking all Corrective Action Requests (CAR)s, 5 Whys, Root Cause Analysis (RCA), Corrective Action Plan (CAP), verification audits and 120-calender day follow-up audits. CATS is an electronic tool to assist OC-ALC quality and management personnel in managing the corrective action process. This instruction establishes processes, procedures and responsibilities involved in the identification and resolution of OC-ALC nonconformities identified during AS9110 process audits on OC-ALC Form 531. This instruction is applicable to all OC-ALC organizations under AS9110 certification. 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 Department of the Air Force (DAF) Form 847, *Recommendation for Change of Publication*; route DAF Form(s) 847 through the appropriate chain of command to the Quality Assurance Office (OC-ALC/QA). This publication may be supplemented at any level, but all direct supplements must be routed to the OPR of this publication for coordination prior to certification and approval. Requests for waivers must come through the chain of command from the commander or civilian director of the maintenance group or staff office seeking relief from compliance. Waiver requests

must then be submitted to the OPR; waiver authority has not been delegated. Ensure all records generated as a result of processes prescribed in this publication adhere to Air Force Instruction (AFI) 33-322, *Records Management and Information Governance Program*, and are disposed in accordance with the Records Disposition Schedule located in the Air Force Records Information Management System. The use of the name or mark of any specific manufacturer, commercial product, commodity, or service in this publication does not imply endorsement by the Air Force.

SUMMARY OF CHANGES

This publication has been significantly revised and should be reviewed in its entirety. It incorporates several updated Corrective Action System (processes and procedures). Unless otherwise noted, days are considered working days.

Chapter 1

SCOPE

1.1. This instruction applies to all organizations within the scope of OC-ALC AS9110 Certification. It relates specifically to external and internal audits, or CARs issued after stumble-on nonconformities. CATS is the only authorized method for documenting and tracking CARs submitted on OC-ALC Form 531. Data generated from the submittal of the OC-ALC Form 531 must be entered and maintained in CATS by the lead auditor/audit team.

Chapter 2

PROCEDURES

2.1. A CAR must be initiated whenever a condition warrants an investigation of an identified nonconformance(s) or suspected nonconformance(s).

2.2. Disputes: In the event a CAR nonconformity or classification is disputed: subject CAR must be elevated through management levels until resolution is achieved. All disputes resulting from actions taken in CATS must be resolved in a similar manner.

2.3. All CARs must be documented in CATS by the lead auditor/audit team. CARs may be initiated because of, but not limited to, the following:

2.3.1. Nonconformance(s) identified during external and internal, or stumble-on nonconformities.

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

2.4. CARs must be classified as follows:

2.4.1. Minor: Nonconformities that do not affect the capability of the Quality Management System (QMS) to achieve the intended results; or a single system failure or lapses in conformity to meet AS9110 standard requirements, customer QMS requirements to include local or higher guidance.

2.4.2. Major: Nonconformities that cause significant doubt of effective process controls; failed CARs; detrimental issues concerning the integrity or safe use of the product or service; absence of or total breakdown of a system to meet AS9110 standard requirements, customer QMS requirements to include local or higher guidance; any nonconformity that can result in the probable delivery of nonconforming product or service and conditions and could result in the failure or reduce the usability of the product or service for its intended purpose; or any number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

Chapter 3

ORGANIZATION APPROVAL AUTHORITY

3.1. Organization Approval Authority (OAA) Appointment. Primary and Alternate OAAs must be appointed by memo for OC-ALC/QAX, OC-ALC/QASA, OC-ALC/QASC and OC-ALC/QASP personnel. The AS9110 program manager, upon request and production requirements, require the services of all assigned OAAs. Upon approval by Quality Branch Chiefs, may request assistance of squadron level quality assurance specialists as needed. Current OAA letters of appointment on file will stand until the POC is updated.

3.2. The OAA must: Act as a liaison between the organization audited and OC-ALC/QAX audit team, and work with the organization to provide realistic 5 Whys and RCA/CAP for CARs.

Chapter 4

PROCESS

4.1. CAR Initiation and Approval. CARs issued due to audits will be inputted into CATS within 10 working days from the audit end date noted in the audit report.

4.1.1. Major Nonconformity: The 5 Whys and RCA/CAPs must be completed and returned to the originating office within 15 working days from the date of notification of CAR approval. For all major nonconformities, the lead auditor/audit team will review, approve/disapprove the submitted 5 Whys and RCA/CAP within three working days of receipt.

4.1.2. Minor Nonconformity: The 5 Whys and RCA/CAP must be completed and returned to the originating Quality Assurance office within 20 working days from the date of CARs approval/notification. The lead auditor/audit team will review and approve/disapprove the submitted 5 Whys and RCA/CAP within five working days for minor non-conformances. The relevant organization's leadership and OAAs will be informed of the status of the CAR. **Note:** There will be no extensions for the RCA/CAP preparation. Therefore, the failure to submit the 5 Whys and RCA/CAP within the required suspense will result in delinquent status and the nonconformity will remain delinquent until the approval of the 5 Whys and RCA/CAP.

4.2. The Lead Auditor must:

4.2.1. Determine and initiate CARs and input in CATS.

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

4.3. The OAAs must review all CARs assigned for accuracy and validity.

4.3.1. Monitor organization's open CARs to ensure suspenses are met.

4.3.2. Provide a 30-calendar day status update for each "OPEN" CAR to the lead auditor via e-mail.

4.3.3. Assign the CAR to the POC identified in the audit plan unless the POC changed, within the relevant organization, for the development and implementation of the 5 Whys and RCA/CAP.

4.4. Preparation of 5 Whys and RCA/CAP. This process involves the facilitation of the Lead Auditor and OAA to assist the OPOC in determining the root cause(s) of a major or minor nonconformity.

4.5. OC-ALC Staff and Group Commanders or civilian equivalents are responsible to ensure that an Organizational Point of Contact (OPOC) within their organizations will:

4.5.1. Perform 5 Whys, RCA and Develop CAP (OPOCs should work with the OAA to provide realistic 5 Whys and RCA/CAP for CARs).

4.5.2. Consider human factors when developing the 5 Whys and RCA/CAP IAW OC-ALC Form 531.

4.5.3. Complete OC-ALC Form 531 in its entirety and return to OAA for approval.

4.5.3.1. The appropriate human factor codes must be selected in the Human Factors Casual Analysis block.

4.5.3.2. At a minimum, enter the 5 Whys Root Cause Analysis for the following blocks: WHY #1, WHY #2 and WHY #3. If applicable, complete the next two blocks: WHY #4 and WHY #5.

4.5.3.3. Enter a valid Root Cause.

4.5.3.4. Enter a legitimate Corrective Action.

4.5.3.5. Enter a reasonable Planned Completion Date (approximately 90 calendar days or less) and answer the five subsequent questions with a yes or no checkmark.

4.6. Review of 5 Whys and RCA/CAP. The OAA and lead auditor must review and approve the 5 Whys and RCA/CAP.

4.6.1. The OAA must: Review submitted 5 Whys and RCA/CAP for accuracy, adequacy, and feasibility before approving it. Any missing, invalid or inconsistent information must be referred to the Organizational POC for revision. Mitigation plans may be required when estimated CAP completion dates are excessive.

4.6.2. Notify the lead auditor via email that 5 Whys and RCA/CAP are ready for review and approval.

4.6.3. Ensure all disapproved CARs returned from the lead auditor are forwarded to the OPOC for revision.

4.6.4. Monitor, provide guidance, and assist the OPOC with CAR revision.

4.6.5. Review revised CAR.

4.7. The Lead Auditor must:

4.7.1. Review CAR for accuracy, adequacy, and feasibility before approving/disapproving.

4.7.2. Return all disapproved CARs along with justification and recommendations, through each organization's OAA. Disapproval will be based on documented requirements, established policies, procedures, and governing standards and/or regulations, and must be clearly defined to the responsible authority.

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

4.8. CAP Implementation.

4.8.1. **Organizational POC.**

4.8.1.1. Implement the CAP.

4.8.1.2. Ensure all documented nonconformance(s) are addressed/resolved and a request for closure submitted to the OAA for review before being submitted to the lead auditor for a verification audit.

4.8.1.3. Request planned completion date (PCD): The PCD should occur within 90 calendar days for a timely CAP.

4.8.1.4. PCD Extension: The AS9110 program manager may grant a onetime extension. Note: Extension request may be sent by email or formal memo. Include progress-to-date and reason for extension.

4.8.1.5. Upon CAP completion, the OPOC must notify the OAA that a verification audit should be scheduled.

4.9. The Audit Team must:

4.9.1. Monitor the CARs status of each CAP to ensure completion dates are met and/or ensure extensions are requested to support corrective action completion.

4.9.2. Upon CAP implementation, schedule a verification audit. When verification audit is passed, status of the CAR will be changed to "pending 120-day follow up."

4.10. CAP Verification Audit/CAR closure.

4.10.1. Once the lead auditor/audit team has received a request for closure, the CAP verification audit must be completed within 10 working days. If the verification cannot be completed within the 10 working days, justification must be documented in CATS and the status will be changed to "Open." Lead auditor should communicate via e-mail to the OAA.

4.10.2. Lead Auditor must:

4.10.2.1. Conduct verification audit to verify CAP implementation and nonconformities noted on CAR have been resolved. When applicable, the verification audit should be sufficient to determine if other areas are impacted by the nonconformity.

4.10.2.2. Annotate verification audit nonconformities in CATS along with a recommendation to close or annotate justification for audit failure to include any references.

4.10.2.3. For audit failures, notify the OAA and OPOC with any recommendations.

4.10.3. The OPOC must:

4.10.3.1. Provide assistance as required to facilitate CAP verification audits.

4.10.3.2. Review audit failures. Discuss CAP verification audit failures with the OAA to derive clear understanding of any identified shortcomings.

Chapter 5

ONE HUNDRED TWENTY (120) CALENDAR DAY FOLLOW-UP

5.1. A Follow-Up Audit: The lead auditor/audit team will conduct the follow-up to ensure the nonconformity has not reoccurred while the CAR was in a closed status. It must take place approximately 120 days from a CAR closure. No action will be taken if the nonconformity has not reoccurred.

5.1.1. If the nonconformity has reoccurred, the lead auditor must initiate a new CAR within the context of the original CAR's audit. The new CAR should duplicate the basic data and must be annotated that it is a "Repeat CAR" in CATS.

5.1.2. A repeat CAR will begin the resolution process from the beginning and rated as a major.

BRIAN R. MOORE
Brigadier General, USAF
Commander

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

DAFPD 90-1, *Policy, Publications, and DoD Issuance Management*, 24 March 2023

AFI 33-322, *Records Management and Information Governance Program, 22 March 2020*

AFSCMAN 21-102 OC-ALCSUP, *Depot Maintenance Management, 21 March 2022*

Prescribed Forms

OC-ALC Form 531, *Corrective Action Request*

Adopted Forms

DAF Form 847, *Recommendation for Change of Publication*

Abbreviations and Acronyms

AS—Aerospace Standard

CAP—Corrective Action Plan

CAR—Corrective Action Request

CATS—Corrective Action Tracking System

OAA—Organizational Approval Authority

OC-ALC—Oklahoma City Air Logistics Complex

OPOC—Organizational Point of Contact

OPR—Office of Primary Responsibility

PCD—Planned Competition Date

POC—Point of Contact

QMS—Quality Management System

RCA—Root Cause Analysis

Terms

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 to prevent a recurrence. The intent is to eliminate the cause of the nonconformity to prevent a recurrence.

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.

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 to ensure a safe interface between the personnel and all other environmental elements such as other personnel, equipment, facilities, procedures and data.

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 nonconformities.

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.

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.

Organizational Approval Authority (OAA)—OC-ALC/QAX, OC-ALC/QASA, OC-ALC/QASC and OC-ALC/QASP personnel designed to act as the liaison between the organization audited and OC-ALC/QAX audit team, and work with the organization to provide realistic 5 Whys and RCA/CAP for CARs.

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

Root Cause Analysis (RCA)—A systematic process for identifying "root causes" of problems or events and an approach for responding to them.