

Action Taken and Corrective Measures Report

Report Details

Date of Report: _____

Report Number: _____

Prepared By: _____

Department: _____

Incident / Issue Summary

Root Cause Analysis

Action(s) Taken

| No. | Description of Action | Responsible Person | Date Implemented |
|-----|-----------------------|--------------------|------------------|
| 1 | | | |
| 2 | | | |

Corrective and Preventive Measures

| No. | Measure | Responsible Person | Deadline | Status |
|-----|---------|--------------------|----------|--------|
| 1 | | | | |
| 2 | | | | |

Verification / Follow Up

Signatures

Prepared By: _____ Date: _____

Checked By: _____ Date: _____

Approved By: _____ Date: _____

Important Notes

- Provide clear and precise information for each section to ensure transparency.
- Ensure all actions and corrective measures are assigned to responsible persons with deadlines.
- Review and verify the effectiveness of corrective and preventive actions regularly.
- Keep documented evidence to support actions taken and verification steps.
- This document may be subject to periodic audits for compliance and improvement.