**Compliance Program Policy & Procedure Template**

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| **SUBJECT**:Corrective Action | **EFFECTIVE DATE**: | **REVISION DATE**: |
| **APPROVAL**: | **DATE**: |  |

**PURPOSE:** To define a standardized process for monitoring and correcting identified deficiencies as well as clearly establishing accountability for this process.

**POLICY:**  (“the Company”) shall develop a Corrective Action Plan (“CAP”) for each instance when a potential violation is identified that requires action to correct the potential violation and prevent future non-compliance. The CAP should be tailored to address the specific identified deficiency/issue of non-compliance and designed to correct the underlying problem that resulted in the program violation/s and to assure compliance with all federal and State laws and all applicable government program regulations.

**PROCEDURE:** The business area/entity responsible for the deficiency is to work within their area or with the respective vendor they are responsible for monitoring to develop the CAP by performing a root cause analysis. All parties involved in the deficiency are to have input into and agreement on the CAP. Once developed, all CAPs are to be emailed to the Company’s Compliance Officer.

CAPs should continue to be monitored by the business area/entity responsible for the deficiency to ensure they are effective. A CAP should be in writing and include a summary of the issue, the steps to be taken to correct the deficiency, the person responsible, the projected date for completion, and any comments that are applicable. The owner of the CAP is to keep the Company’s Compliance Officer informed of the CAP progress, especially if there are any delays in the CAP.