**Instructions for Completing the Corrective Action Form:**

Having a documented process, either paper or electronic, can help project managers identify the deficiencies, where the deficiency is located, (project site or location within a facility or work site), who is assigned the duty to implement the deficiency, target and completion date.

|  |
| --- |
| ***Contractor Health & Safety Management System – Corrective Action Review*** |
| ***Location of Deficiency*** *(Project Name, Facility Location, etc.)* | ***Description of Deficiency*** *(Identify the deficiency and impact if needed)* | ***Assignment of Duty*** | ***Target Date*** | ***Completion Date*** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| ***Contractor Health & Safety Management System – Corrective Action Review*** |
| ***Location of Deficiency*** *(Project Name, Facility Location, etc.)* | ***Description of Deficiency*** *(Identify the deficiency and impact if needed)* | ***Assignment of Duty*** | ***Target Date*** | ***Completion Date*** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |