1. Policy

Preventive actions allow the FAU to be proactive in identifying potential nonconformities and to continuously reduce the likelihood of nonconformities. This quality manual document fulfills the requirements of the FAU Quality Management system, ISO/IEC 17020 International Standards and ANAB AR 3120 Standards.

2. Scope

The outlined procedures apply to all FAU personnel who are involved in the preventive action process.

3. Procedure for Implementing Preventive Action

A preventive action is an action to eliminate the cause of a potential nonconformity and to mitigate potential problems before they occur. Any member of the FAU may identify a potential nonconformity and initiate a Preventive Action Request.

3.1 **Notification of Potential Nonconformity:** If a potential nonconformity or area of improvement is identified, the FAU member responsible for its identification shall notify the QA Specialist (if the individual is someone other than the QA specialist). The QA Specialist or designee will assess the causes for the potential nonconformity and will evaluate whether there is a need to initiate a Preventive Action Request to prevent its occurrence. When a preventive action request is initiated the QA Specialist or designee will determine the appropriate action steps to implement.

3.2 **Preventive Action Request (PAR) form:** A (PAR) form is used to document and track the progress of the preventive action being implemented. The form outlines the potential nonconformity, the individual managing the preventive action, the individual approving the preventive action plan, the action steps required to address the potential nonconformity, the expected date of completion, completion date, and the follow-up review.

3.2.1 **Preventive Action Steps**: Action steps should focus on ways to improve upon a situation/condition and ways to reduce the risk of a nonconformity.

3.2.2 **Approving a PAR**: The designated PAR approver (i.e., QA Specialist, Director, or OCME Quality Assurance Director) shall review the preventive action plan to confirm that the action steps are appropriate and effectively address the potential nonconformity and that the expected time frame is adequate.

If the designated PAR approver determines the preventive action plan is inadequate the PAR form shall be returned for revision.

When the preventive action plan is accepted, the designated approver shall sign and date the PAR form in the space labeled "Reviewed and Accepted By" and return the form to the individual responsible for implementing the PAR.

Note: the designated PAR approver shall not be the individual assigned to fill out the PAR form and implement the action step(s).

3.2.3 **Completing Preventive Actions:** Upon completion of the action step(s), the individual responsible for implementing the PAR shall sign and date the form in the space labeled "Action Step(s) Completed By:"

3.2.4 **Preventive Action Follow-up Review:** The designated approver shall perform a follow-up review of the action step(s) to confirm the effectiveness of the preventive action in addressing the potential nonconformity. The action is considered "closed out" once the approver signs and dates the form in the space labeled "Follow-up Review Completed By".

3.2.4.1 If the approver determines the action step(s) were not sufficiently implemented or the action step(s) did not effectively address the potential nonconformity, the PAR form shall be returned to the individual responsible for managing the PAR for further action.

3.3 **Documentation**: All Preventive Action Requests and associated records will be retained by the FAU for at least the duration of the current accreditation cycle.

4. References

AR 3120: 2023, ANAB Accreditation Requirements for Forensic Inspection (2023).

International Standards ISO/IEC 17020: 2012 (E) Conformity assessment - Requirements for the operating of various types of bodies performing inspection, 2nd edition, International Standards Organization (ISO)/International Electrotechnical Commission (IEC), 2012.

5. Revision History

REV.	DATE	SUMMARY OF CHANGES
0	29 January 2018	New document.
1	27 September 2018	Section 3.1: OCME QA Director was added to individuals that can initiate a preventive action plan during an internal audit. Section 3.2: Added the statement "the individual approving the preventive action plan" to what should be included on the PAR form.

		Section 3.2.2. changed the statement to as follows: "**Approving a PAR**: An approver is designated to review the preventive action plan to confirm the action steps are appropriate and effectively address the potential nonconformity and that the expected time frame is adequate. The designated approver can be the OCME QA Director, the QA Specialist, or the Forensic Anthropology Director (Director)." Section 3.2.3 changed clause to "**Completing Preventive Actions:** Upon completion of the action step(s), the individual responsible for implementing the PAR shall sign and date the [illegible] in the space labeled "Action Step(s) Completed by" before returning the form to the designated approver." Added procedure for a follow-up review in sections 3.2.4 and 3.2.4.1.
2	19 March 202[illegible]	Minor edits to clauses 3.2, 3.2.3, and 3.2.4
3	10 April 2023	Added reference to ANAB AR 3120 Standards document. Updated clause 3.1 to include statements regarding assessing the cause for the potential nonconformity, evaluate the need to initiate a PAR and determine the appropriate steps. Also deleted the last statement of the clause (unnecessary statement). Updated the language in clauses 3.2, 3.2.2 and 3.3. Minor editorial changes throughout the document.