

## QUALITY ASSURANCE VENDOR NON-COMPLIANCE ISSUE RESOLUTION FORM

<b>Date:</b>		
<b>Incident #</b>	<b>Issue:</b>	<b>Complaint Type:</b>
<b>Supplier Name:</b>	<b>Vendor Representative:</b>	<b>Phone:</b>
<b>Facility Location:</b>	<b>Title:</b>	
<b>STN#</b>	<b>Lot #'s &amp; Best Before Date:</b>	
<b>UPC Codes:</b>		<b>Complete Response Needed By:</b>

### Problem Description (Thoroughly describe the problem)

### Goal Statement (Thoroughly describe the goal to achieve from problem solving process)

### Containment Plan (Describe what immediate actions will take place in order to minimize impact. Actions may be to hold product on site, in distribution center/retails and/or increase immediate inspection)

<b>Implementation Date:</b>	<b>Containment Lifted:</b>
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### Response Team

Name	Title	Email

### Root Cause, Action Plan and Risk Assessment

<b>Probable Root Cause</b> <small>(Root Cause Analysis should be developed in every CAR, the extent of this may vary complaint to complaint, sometimes when the Root Cause is not clear a proper analysis should be performed with a brainstorming session. Recommended Tools: Affinity diagram, Cause and Effect diagram, KP Analysis)</small>	<b>Countermeasure / Action Plan Task</b> <small>(action to be taken to resolve the Root Cause)</small>	<b>Crit</b>	<b>Risk Factors</b> <small>(Enter risk factors for every action, what would happen if Countermeasure is not implemented)</small>

**Method of Measurement and Verification** (Once the actions have been accomplished; Overall Monitor: Monitor the actions to ensure that they are working as planned, Monitor if new/revised procedures are being followed, Monitor training effectiveness through performance; Verification: Ask yourself the question: How comfortable is the team the problem has been fixed and how is the team going to check it? A file/log of the verification process should be created and attached to this Form. This file should contain a random check performed on the product where the problem initially occurred. NOTE: Waiting to see if the customer submits another complaint on the same issue is NOT a way to verify that the root cause and action plan were successful.)

Task / Activity (Define activities that will show that this problem has been fixed. (Audits, Random Checks, Tracking Sheets, etc) NOTE: Any verification activity should be attached to this form)	Goal	Cplt	Was the Goal Accomplished?

**Photos** (attach photos if applicable)

**Safeway Closure Method and Approval (Safeway Use Only)** Describe means of effectiveness

Safeway QA Auditor:	Signature & Date:
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