



COUNTY OF LOS ANGELES
Public Health



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SAPC BULLETIN NO.: 12-01

January 31, 2012

TO: Executive Directors
Program Providers

FROM: John Viernes, Jr., Director 
Substance Abuse Prevention and Control

SUBJECT: CORRECTIVE ACTION PLAN TEMPLATE

This is to advise you that effective immediately, Substance Abuse Prevention and Control is requiring all agencies to use a standard template for Corrective Action Plans (CAP). The use of a standard template will ensure that all information necessary to review and approve the CAPs is submitted to your assigned Contract Program Auditor (CPA).

Attached is a copy of the template. An electronic copy may be downloaded from <http://publichealth.lacounty.gov/sapc/resources/CAP/SAPC30dayCAP.docx>.

If you have any questions or need additional information, please contact Tony Hill at thill@ph.lacounty.gov.

JV:dhd

Attachment

c: Wayne Sugita
Dorothy de Leon
Tony Hill

**COUNTY OF LOS ANGELES – DEPARTMENT OF PUBLIC HEALTH
SUBSTANCE ABUSE PREVENTION AND CONTROL (SAPC)
CORRECTIVE ACTION PLAN (CAP) TEMPLATE**

| | | | |
|--------------------|-------------------------------------|---|--|
| Fiscal Year | Agency Name and main address | Date listed on Cover Letter of Monitoring Report | Date CAP Due to SAPC Contract Program Auditor |
| Choose an item. | | Click here to enter a date. | Click here to enter a date. |

I. Corrective Actions: Complete the following table to detail the actions your agency will take to correct the noncompliance in a timely manner. Strategies must be identified in those areas that are contributing to the noncompliance. This CAP must be submitted to SAPC Contract Program Auditor for approval by the due date. All noncompliance must be corrected immediately in accordance with your County Contract.

| Program Monitoring Summary Report (Section, Number, Contract Number) | Requirement | Finding | Corrective Action |
|---|--------------------|----------------|--------------------------|
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Signatures of individuals completing CAP

Print name and Title

Date

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To be completed by SAPC staff only:

Signature of SAPC Contract Program Auditor

Approved or Not Approved

Date

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CPA Comments

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