Example: A CAPA Table in the Context of ISO 22301

A Corrective Action and Preventive Action (CAPA) table is a valuable tool for tracking and managing non-conformities and their associated corrective and preventive actions within the context of ISO 22301. Here's an example of an ISO 22301 CAPA table:

CAPA Number	Date Identified	Non-Conformity Description	Root Cause Analysis	Corrective Action Plan	Responsibility	Target Completion Date	Verification of Effectiveness	Preventive Action Plan	Preventive Action Responsibility	Preventive Action Completion Date	Verification of Preventive Action Effectiveness
CAPA-001	2023-01-15	Incomplete Emergency Response Plan	Lack of Training	Conduct emergency response training for all relevant personnel	Emergency Management Team	2023-02-28	Reassessment of emergency response capabilities and drills	Review and update the Emergency Response Plan	Emergency Management Team	2023-04-15	Internal audit to confirm updates and improvements
CAPA-002	2023-02-10	Lack of Business Impact Analysis	Inadequate Risk Assessment	Conduct a thorough Business Impact Analysis (BIA)	Business Continuity Manager	2023-03-31	Review and update the risk assessment process	Implement regular reviews and updates of the BIA	Business Continuity Manager	Ongoing (quarterly)	Internal audit to ensure ongoing effectiveness
CAPA-003	2023-03-20	Failure to Update Contact Information	Lack of Communication	Establish a process for regular updates of contact information	Communication Officer	2023-04-30	Implement a communication plan to ensure contact information is updated promptly	Develop and conduct training on the communication plan	Communication Officer	2023-06-15	Internal audit to confirm adherence to the communication plan

Explanation:

1. CAPA Number: A unique identifier for each Corrective Action and Preventive Action.
2. Date Identified: The date when the non-conformity was identified.
3. Non-Conformity Description: A brief description of the identified non-conformity.
4. Root Cause Analysis: Analysis of the root cause of the non-conformity.
5. Corrective Action Plan: The plan detailing the actions to correct the identified non-conformity.
6. Responsibility: The individual or team responsible for implementing the corrective action.
7. Target Completion Date: The deadline for completing the corrective action.
8. Verification of Effectiveness: The method or process used to verify that the corrective action was effective.
9. Preventive Action Plan: Actions planned to prevent the recurrence of similar non-conformities.
10. Preventive Action Responsibility: The individual or team responsible for implementing the preventive action.
11. Preventive Action Completion Date: The deadline for completing the preventive action.
12. Verification of Preventive Action Effectiveness: The method or process used to verify that the preventive action was effective.

This table provides a structured overview of the CAPA process, making it easier to manage and monitor corrective and preventive actions in line with ISO 22301 requirements.