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| **Title:** | **Date Initiated:**  **Date:** |
| **1. Background** |
| **2. Problem Statement/Current Situation**

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| --- | --- | --- |
|  | IS | IS NOT |
| WHAT |  |  |
|  |  |
| WHERE |  |  |
|  |  |
|  |  |
| WHEN |  |  |
|  |  |
|  |  |
| EXTENT |  |  |
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| **3. Goal** |
| **4. Root Cause Analysis** |

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| **Team:** |  |  | **A3** |
| **5. Recommendations** |
| **6. Implementation Plan**

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| --- | --- | --- |
| **Next Steps** | **Who** | **When** |
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| **7. Follow Up** |
| **8. Results** |