**Monitoring Report and Corrective Action Plan Presentation 2025**

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 **Patterson, Lainie** 0:24
Hello and welcome to AmeriCorps office of Monitoring's Overview of monitoring reports and corrective action planning.
My name is Laney Patterson.
A corrective action planning specialist with the Office of monitoring here at AmeriCorps.
Throughout this webinar I will provide an overview of the next steps in the monitoring process.
Discuss the monitoring report results and notifications and provide an overview and tips on the corrective action plan.
Planning process.
Since initiating the monitoring cycle earlier this year, our monitoring officers have coordinated remote monitoring assessments with grantee staff, which included a review of internal policies and procedures, a review of sample documentation to validate our assessment and in some cases, interviews with grantee staff members and volunteers.
This slide of the monitoring activity life cycle shows the steps that have been taken since the kickoff this cycle.
The pre monitoring activities have been completed.
We are now completing our monitoring phase of the lifecycle and are entering the post monitoring and closeout phase.
So at this point we are preparing to distribute the monitoring results to each awardee monitored this round.
Please know these monitoring results are shared in advance to the Office of Regional Operations portfolio managers.
Once the results are received, if there were identified issues of non compliance, it will be time to begin work on a corrective action plan or cap a plan that outlines how your organization will address the issues discovered during the monitoring activity.
This is discussed in more detail later in the webinar.
This is a high level overview of the post monitoring and closeout phase, but let's talk a bit more about the details of the results you will receive.
Grantees will be receiving an e-mail notification from their assigned monitoring officer indicating the monitoring results are ready for review.
The e-mail includes a PDF attachment of the formal monitoring results notification from the Office of Monitoring.
This letter provides key information about the monitoring activities that were assigned to the Ameri Corps grant, as well as the outcome of each review.
Whether there are issues of non compliance or no deficiencies?
The letter will also indicate if monitoring activity results will require the grantee to develop a corrective action plan within 20 business days from receiving the results.
The e-mail and notification letter will also provide instructions for how grantees can access their secure folder to review and to review the monitoring report and detailed National Service criminal history check components if available.
To reiterate, the e-mail will give you the documents you need, instructions on next steps and how to access your secure folder.
The monitoring summary report itself and the National Service criminal History Check supplemental results spreadsheet, if applicable, will be available to view and download from the Secure folder.
Now that we've covered what you will receive in the notification, let's take a closer look at the monitoring report itself.
The next few slides will show the layout and format of the monitoring.
Report the monitoring report is an Excel spreadsheet. Each part of the report is accessed through tabs located at the bottom of the worksheet.
The first tab is the cover page.
The top section will give you general information related to your grant your organization, the monitoring officer who conducted the review, and the review start and completion date.
The middle section shows the monitoring activity assignments throughout this monitoring process. Your grant has been monitored for either one or more of these different review types.
A summary tab for each assigned monitoring activity will be visible at the bottom of the report.
The bottom of the cover page provides the monitoring results if all assigned monitoring assessments resulted in no deficiencies.
You will see a pass, which means there is no corrective action or follow up activity related to non compliance.
In that case, it will still be helpful to review the monitoring results on the summary tab, which we'll talk about in a moment.
But it will not require corrective action planning.
Alternatively, if issues of noncompliance were discovered during the review, you will see a result of corrective action, plan or CAP.
Now let's review the summary tab, which again will be specific to the monitoring activity assigned to your organization.
The image above is a fofa summary.
Summary Tabs list all assessment questions within the activity. The compliance determination for each question and any associated notes from the monitoring officer or recommendations for improvement.
For example, we see this first question in the sample image is non compliant and there are notes from the monitoring officer with details of why.
Moving down, the following question was determined to be compliant.
This sample includes a note stating the compliance determination, but there may not always be notes for compliance questions.
Each question includes space for recommendations for improvement.
These recommendations are for you to review and incorporate as you see fit, but will not require a corrective action plan as the overall subject area involved has already been deemed compliant.
Upon receiving the monitoring report, it is recommended to read the report in full, including all compliance determinations.
Monitoring officer notes and recommendation for improvement the last half of the report is the corrective Action Plan tab.
Monitoring reports with identified issues of non compliance will require corrective action plans, also known as caps. The corrective action plan is the last tab of the monitoring report.
This blank tab is where grantees document their plan for bringing issues into compliance.
The left section of the tab lists all monitoring questions that resulted in a not compliant status.
And a description of the identified issue of non compliance.
The middle portion of the TAB holds space for grantees to document the root cause of the issue. Action steps for resolving the issue listing out the deliverables that will demonstrate compliance and plan completion.
A description of the plan to maintain long term compliance and other information.
The right side of the tab is filled out by the Office of monitoring and includes relevant due dates.
Issue status after documentation is submitted.
And OM review notes.
All notes provided throughout the cat process is documented in this space.
We'll discuss developing a corrective action plan later in this webinar.
After receiving monitoring results showing a corrective action plan is needed, you may be asking yourself what happens next.
The corrective action planning process provides grant recipients with a standard approach for reviewing and addressing identified issues of non compliance.
It will be conducted in three phases.
Cap intake cap implementation and cap closeout.
Each phase will be discussed in further detail throughout the next few slides.
However, please know during each of these phases there may be several requests for documentation rework.
A corrective action plan is a method of documenting an issue or finding of non compliance, identifying its root cause, clearly laying out corrective measures in the plan of action to resolve the finding.
In addition to check on the effectiveness of the proposed corrective action, it should contain an evaluation or follow up that allows your organization to verify that corrective actions put in place.
Are working to ensure long term compliance.
Prior to creating the corrective Action Plan review, the awardee guide for developing caps as it provides guidance in developing responses to each CAP element for findings of non compliance identified within the monitoring results.
Create the corrective action plan within the Excel based tool used during monitoring.
Each issue of noncompliance listed in the monitoring requires a response to the four elements root cause, action steps, deliverables, and long term compliance.
Each element has guiding questions to assist in planning how to resolve each issue.
After providing a response to each element for the issue, determine a target date for completing the corrective actions and the person responsible for plan implementation.
Now let's take a look at each individual element in the corrective action plan.
The first cap element is the root cause. The issues in the monitoring report are essentially the symptoms. The result or the outcome of a problem. The root cause is what is causing that issue.
For this section describe in detail the underlying reason for the issue when completing this section, ask what is causing the issue.
What action or actions resulted in the noncompliance?
Asking these questions can help identify the gaps in the work process that led to the issue.
Let's look at the example next to the tree in the picture.
The organization has volunteers participating in prohibited activities.
This is the symptom.
It's what was shown during the monitoring.
The gap identified in the work process is the volunteer is unaware of the prohibited activities.
The root cause, the underlying reason for the issue is the agency does not have an updated policy on all prohibited activities.
Volunteers have not been trained on prohibited activities.
There may be one root cause or multiple causes.
Make sure to accurately identify what is causing the issue.
Element two of the CAP is action steps.
Describe the proposed action steps to the processes, systems or policies that will eliminate the root cause and reduce the likelihood of a recurrence of non compliance as well as how these changes will be implemented.
Clearly state what is to be done by whom and when.
Some action plans may be short term interventions that can be accomplished quickly, while others may require a longer implementation period.
Consider how to effectively implement the plan so people are complying with the proposed changes and whether those changes will make a difference.
Create smart goals with feasible.
Deadlines. They should be specific, measurable, achievable, realistic and time bound.
Make sure these goals or solutions are centered around the root cause, detailing every step necessary to eliminate the underlying cause of the issue.
After determining what action steps are needed, the next step is to list the items you will provide to the Office of monitoring.
What supporting documentation will be needed to effectively implement the action steps?
Deliverables provided to AmeriCorps should document proof of completion of the listed action steps.
The deliverables you plan to submit to AmeriCorps should demonstrate implementation of the listed action steps.
For example, if your action steps include training staff or volunteers on a new procedure, then you should list a training attendance list as one of your deliverables.
The 4th CAP element is long term compliance.
Please describe the plan to maintain compliance post monitoring.
What is the procedure process to self monitor the plan implemented?
How often will the plan be evaluated?
What are the desired outcomes?
Our goal is to help you make the changes needed to ensure your organization's long term compliance after the monitoring exercise.
Is complete.
We ask you to focus on self monitoring and routinely reviewing processes and making updates as needed to maintain compliance.
The one remaining field to complete within the CAP document is the person responsible for implementation.
In the persons responsible for implementation, field list individuals within the grantee sponsor organization who will complete and maintain the required plan of action.
List individuals who will provide the deliverables to the Office of monitoring.
Let's look at an example of a corrective action plan.
For prohibited activities.
The snapshot shown on the screen is a portion of the cap. The CAP elements discussed earlier are shown across the top of the screen.
With this example, the issue is volunteers are participating in prohibited activities.
For the root cause.
One the agency does not have an updated policy on all prohibited activities.
And two volunteers have not been trained on prohibited activities.
Keep in mind the root cause for a finding may be different depending on the organization.
Is it policy related?
Is it training related?
Is it lack of supervision?
Determine the reason for the issue at hand.
Now in the action plan it says.
One, the program director will update the prohibited activities policy by July 31st.
Two policy will be reviewed and approved by the Board of Directors at the August board meeting.
Three, all volunteers and staff will be trained on prohibited activities during September site meetings.
For volunteer orientation will include training on prohibited activities.
And five site supervisors will e-mail quarterly reminders to volunteers.
For the deliverables.
The program director will provide the Office of monitoring one a copy of the updated and board approved policy.
2 proof of volunteer and staff training on prohibited activities, and three.
A copy of the volunteer orientation agenda and material.
In long term compliance, it says one the policy will be reviewed and updated annually then submitted.
To board for approval at the June board meeting.
Two new volunteers are trained at orientation and current volunteer staff are trained on the updated policy prohibited activities procedure every September.
Three site supervisors quarterly check in.
Results will be reviewed quarterly to monitor long term compliance.
And four, the desired outcome is 100% of current staff volunteers are trained on and are not participating in prohibited activities.
This example shows how to develop responses for one issue. The process continues until responses have been provided for all issues of non compliance.
It's listed on the cap.
As mentioned in the previous slide, all issues listed on the CAP must have responses for the CAP to be completed.
Now I'll work through the process of submitting the CAP for review to the Office of Monitoring.
Step one.
The first step is to develop the corrective action plan.
This is done by ensuring all issues contain responses for each CAP element.
Next, the cap is submitted to the Office of Monitoring for review.
Once the CAP is received, the monitoring officer will review the CAP responses.
Each issue will receive a status and relevant notes.
If any information is missing or if more detail is needed in responses, a rework will be requested.
If a rework is requested, the issues with insufficient statuses must be revised.
Based on the feedback provided in the OM Review notes section of the CAP.
The rework must be resubmitted within 10 business days.
Once insufficient issues have been revised, the CAP must be resubmitted to the Office of monitoring.
This cycle continues until all issues are approved.
Once responses to all issues are approved.
The CAP is considered approved in progress.
The monitoring officer will send a notification of CAP approval.
Remember, this entire process should be completed within 20 business days.
To avoid repeated request for reworks, it is important to read the OM review notes in detail and respond accordingly.
The day the notification of CAP approval is sent starts the three month long cap implementation period, which is phase two of the CAP process.
Some issues of noncompliance will contain a 30 business day requirement, which will be noted in the corrective Action Plan tab of the monitoring report.
This is reserved for issues resulting in tangible debts and or grant related reports that require correction.
These issues should be prioritized in the CAP intake phase because unlike other issues which have.
A three month implementation period for resolution.
These issues only have 30 business days.
Caps with 30 business day requirement issues will highlight the due date for those issues and will be discussed by the monitoring officer during the exit conference.
Let's review the key points for phase one of the corrective action planning process.
Each issue of noncompliance identified in the monitoring report must be addressed by creating a CAP.
The plan will be developed and compiled on the CAP tab of your monitoring report.
The corrective action plan must be submitted to your assigned monitoring officer within 20 business days of the receipt of your monitoring report.
Any request to extend this deadline must be communicated to the monitoring officer as soon as possible.
Cap submissions must contain the elements previously reviewed.
Root cause corrective measures required plan of action and evaluation follow up.
If an issue can be resolved during the initial 20 business daycap creation period, Please remember to submit all relevant supporting documentation for review to your monitoring officer.
This should be reserved only for issues that can be resolved in a single step as the primary focus of CAP intake is to develop and approved plan.
The CAP implementation period.
Is for developing CAP documentation to resolve the caps.
Once the CAP is approved, phase two begins, which is what I'll discuss next.
If your corrective action plan is approved in progress, you will move into phase two of the corrective action planning process CAP implementation.
Phase two is considered the implementation and maintenance phase for the next two phases of the plan. You will work with your assigned OM staff who will provide support to ensure you complete your CAP within three months of the CAP approval or sooner.
These are the two steps in phase two. Let's review each.
When your corrective action plan is approved in progress, you will move into phase two of the corrective action planning process.
As previously stated.
When the corrective action plan is approved, your organization will receive a notice of approval from your monitoring officer.
Note that the date of the approval notice determines the deadline to fully resolve your CAP.
As noted previously, three months from the date of the approval notice.
Shortly after receiving the notification of CAP approval, you will receive a message from OM staff.
This could be the monitoring officer who conducted the monitoring activity or a corrective action planning specialist.
Requesting you to schedule a call within 14 days.
During this meeting, you will have an opportunity to review the CAP, confirm timelines and deadlines.
Discuss the deliverables you will submit to the Office of monitoring.
And ask any questions you may have about the cap process.
Your organization's designee for handling the cat process should plan to update their assigned OM staff on the progress of each issue of the CAP throughout this three month period.
Timelines for each CAP will differ monthly or BI. Monthly meetings may be necessary depending on the Cap's complexity.
Conversely, an issue may be able to be resolved in only a matter of weeks.
6.
Regular communication is key to closing the CAP as quickly as possible.
At any point, if you are ready to submit a document for review, contact your assigned OM staff and they will provide you with a link to your secure folder.
Once they receive your submission, the assigned OM staff will review the document and provide feedback.
Please note some issues.
May not be resolved quickly.
Multiple submissions may be required and documentation provided.
May need to be revised one or more times in order to fully resolve the issue.
This is not a punitive process. This work ensures that your organization will implement the plan necessary to achieve and maintain compliance.
If the finding is not resolved.
Called the assigned OM staff will send you a cap update with detailed feedback, including a summary of the steps necessary to resolve the issue in full.
The end goal of the cap process is phase three. The resolution of all issues noted on your monitoring report and closure of your CAP.
Once all issues are resolved, your assigned OM staff will send you an official notification by emailing.
By e-mail stating the CAP has been closed.
The notification will be accompanied by a final cap report.
Which details the actions taken to resolve each issue and the determination of compliance by the monitoring officer.
All documentation should be retained in accordance with all other records pertaining to the grant that was monitored.
Let's review the key points for phases two and three of the corrective action planning process.
While the CAP is approved in progress, your monitoring Officer will provide support until all findings are resolved and the CAP is closed.
Grantees will provide progress updates to discuss progress and workshop challenges while routine progress updates are required. Om staff are available at any time to address questions or concerns.
Cap documentation is submitted through a secure folder in accordance with standard practices within the Office of monitoring.
The assigned OM staff will review all submissions and respond with an updated CAP report that either outlines next steps or confirms resolution for each issue.
Once all approved in progresses are resolved, a notification of cap closure will be sent to the grantee along with a final cap report.
All records associated with the CAP should be retained in accordance with all other records pertaining to the grant that was monitored.
This concludes the monitoring report and corrective action planning informational webinar.
Thank you for listening along. If you have any additional questions, please contact your assigned Monitoring Officer or the Monitoring Office at monitoring at americorps.gov.
Thank you.

 **Patterson, Lainie** stopped transcription