Awardee Guide to Developing Corrective Action Plans
Office of Monitoring
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Overview

The AmeriCorps Office of Monitoring Corrective Action Planning (CAP) process provides grant recipients with a standard approach to reviewing and addressing identified findings of noncompliance. The process can assist awardees in validating compliance, identifying breakdowns in processes and systems that may have contributed to noncompliance, as well as identifying preventative measures to reduce and eliminate findings in future monitoring activities. The CAP is structured to support the awardee in facilitating an internal process to identify root causes of the event that resulted in a finding, while fostering a timely, concise, and technically adequate corrective action proposal for submission to the Office of Monitoring (OM) for review and approval.

Awardees may use this guide to assist in the development of responses to each CAP element for findings of noncompliance that were identified within the monitoring summary results. As a reminder, the Office of Monitoring receives CAP submissions from awardees within the online platform (WizeHive) used for monitoring activities. Each finding of noncompliance requires a response to four elements of the CAP. More details on the four CAP elements are described below and these guiding questions are available to awardees within WizeHive.

CAP Element: Root Cause Analysis

Awardees should describe the results of an analysis of contributing factors that led to the underlying process and system issues (root causes) of the noncompliant finding. This section describes the cause of the problem at hand.

- What is causing the problem at hand?
- Are there flaws in the work processes the led to the issues?
- Has this type of issue occurred before and, if so, what caused it to recur?
- What should actually be happening?

CAP Element: Corrective Measures

Awardees should describe the proposed corrective changes to the processes and systems that will eliminate the root cause and reduce the likelihood of a reoccurrence of noncompliance, as well as how these changes will be implemented. The key is to choose corrective actions that address each root cause. These actions will generally require creating a new process or making a change to a current process. Corrective actions that change the system and do not allow the errors to occur are the strongest. If a particular corrective action or change cannot be completed due to current constraints (e.g., lack of resources), the awardee should look for other ways of changing the process to
prevent a similar event from occurring in the future. Doing nothing is not an appropriate option.

- How can the problem be fixed?
- Re-evaluate a procedure?
- Identify someone to conduct training on the correct way to do the tasks?
- Strengthen checks and balances to ensure issues do not recur?
- Establish improved protocols?

**CAP Element: Expected Outcomes**

Awardees should describe how successful implementation of corrective actions will be evaluated and measured. This should include details on how the organization will know that the proposed corrective actions are actually implemented during the anticipated timeframe, including assessment of individuals responsible for adhering to changes and the CAP is achieving the desired results. Some action plans may be short-term interventions which can be accomplished quickly, while others may require a longer implementation period. Consider how to effectively assess that people are complying with the proposed changes and if the changes have made a difference.

- How will they know if corrective measures are working or not?
- Is the objective/activity specific (measurable)?
- Is 100% compliance attainable?
- Are outcomes relevant to the issue?

**CAP Element: Responsible Parties**

Awardees should clearly state what is to be done, by whom, and when. Evaluating the success of the corrective actions usually becomes the responsibility of the person designated to oversee the corrective actions. Satisfactory implementation of the corrective actions will be monitored by AmeriCorps staff, so it is important to have a clearly defined plan and to be able to demonstrate that measures of success were monitored by organizational staff over time and that each responsible individual or party is confident that the change is permanent.

- Who is doing what?
- How and when will they report progress?
- What supporting documentation will be needed?

**NOTE:** Awardees with corrective action for National Service Criminal History Checks require individual record findings to be addressed outside of WizeHive, through the NSCHC Supplement Results in the Secure Folder.