Office of Monitoring

AmeriCorps Monitoring Report and Corrective Action Planning
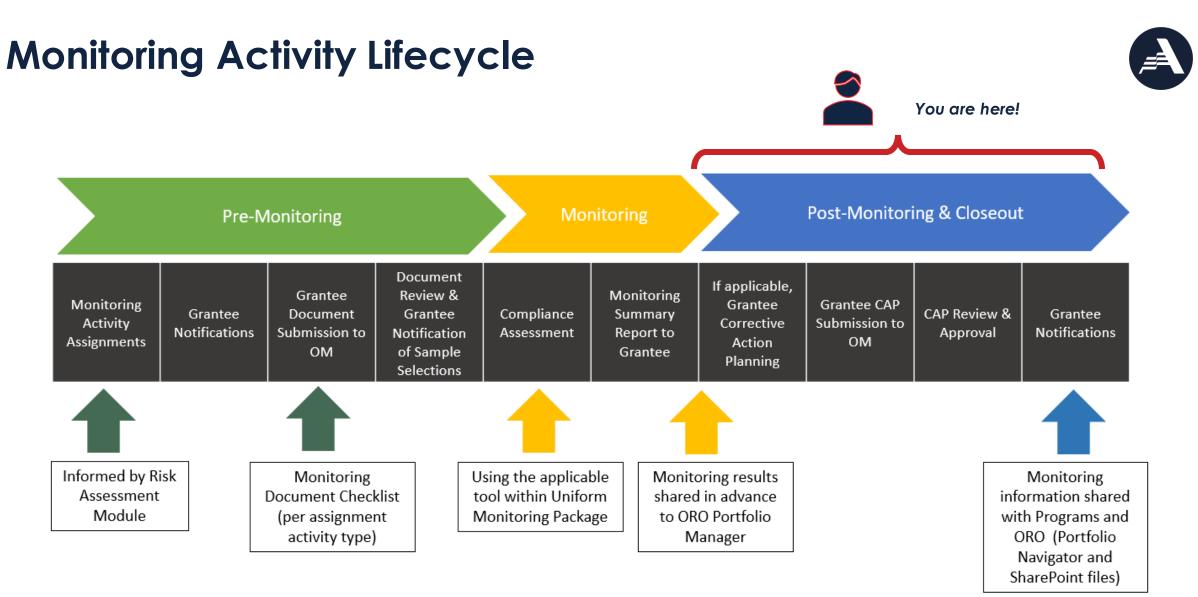
AmeriCorps

Welcome Message

Alex Delaney, Acting Deputy Director, Office of Monitoring

- Monitoring Process - Post Monitoring Stage

- Overview of Monitoring Notification Materials and Report Format
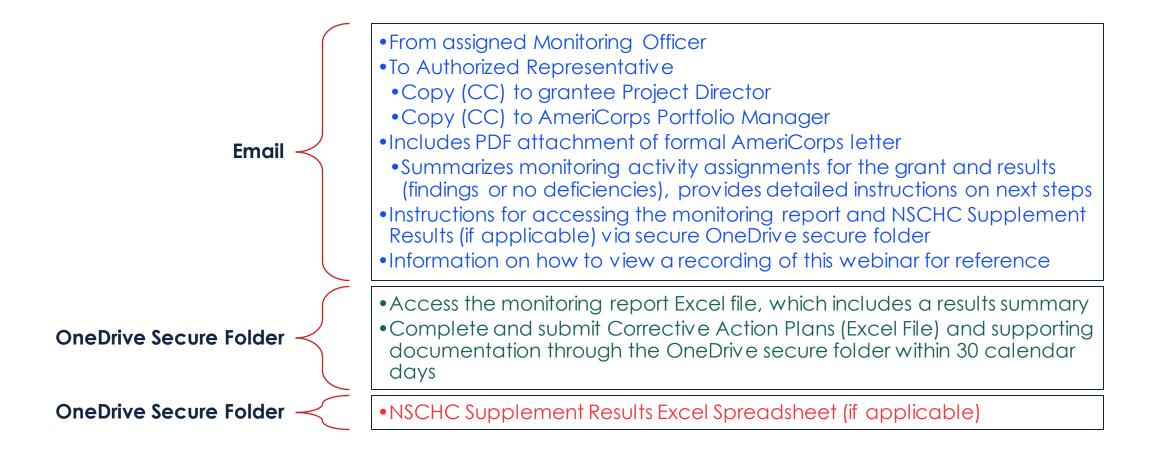
- Tips on Corrective Action Planning

Monitoring Activity Lifecycle

You are here!

Pre-Monitoring				Monitoring		Post-Monitoring & Closeout			
Monitoring Activity Assignments	Grantee Notifications	Grantee Document Submission to OM	Document Review & Grantee Notification of Sample Selections	Compliance Assessment	Monitoring Summary Report to Grantee	If applicable, Grantee Corrective Action Planning	Grantee CAP Submission to OM	CAP Review & Approval	Grantee Notifications

Informed by Risk Assessment Module

Monitoring Document Checklist (per assignment activity type)

Using the applicable tool within Uniform Monitoring Package

Monitoring results shared in advance to ORO Portfolio Manager

Monitoring information shared with Programs and ORO (Portfolio Navigator and SharePoint files)

ORO: AmeriCorps Office of Regional Operations

Monitoring Results and CAP Notifications

Email

- From assigned Monitoring Officer
- To Authorized Representative
  - Copy (CC) to grantee Project Director
  - Copy (CC) to AmeriCorps Portfolio Manager
- Includes PDF attachment of formal AmeriCorps letter
  - Summarizes monitoring activity assignments for the grant and results (findings or no deficiencies), provides detailed instructions on next steps
- Instructions for accessing the monitoring report and NSCHC Supplement Results (if applicable) via secure OneDrive secure folder
- Information on how to view a recording of this webinar for reference

OneDrive Secure Folder

- Access the monitoring report Excel file, which includes a results summary
- Complete and submit Corrective Action Plans (Excel File) and supporting documentation through the OneDrive secure folder within 30 calendar days

OneDrive Secure Folder

- NSCHC Supplement Results Excel Spreadsheet (if applicable)

Monitoring Report Format

Excel Workbook

AmeriCorps	
Office of Monitoring, Uniform Monitoring Package	
Grantee/Sponsor Organizatio	
Grant Number:	
Program Type:	
Grant Type:	
Monitoring Officer:	
Grantee Authorized Representative:	
Review Start Date:	
Review Completion Date:	
Review Type:	Financial and Operational Fitness (FOFA)
	Program-Specific (ASN, Seniors, VISTA, or Days of Service)
	Subrecipient Monitoring
	Prohibited Activities
	National Service Criminal History Check (NSCHC)
	New to AmeriCorps
Reporting Period:	
Monitoring Result:	

CoverPage | Prohibited Activities_Summary | CAP_Summary

Overview of Monitoring Summary Report and Corrective Action Planning

Stacy Dennis
Corrective Action Planning Specialist
Office of Monitoring

Noel Welsh
Corrective Action Planning Specialist
Office of Monitoring
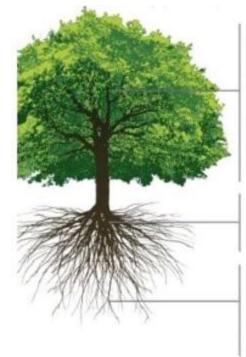
Corrective Action Planning

What Happens Next?

PHASE I: Create Corrective Action Plan

PHASE II: Work on Corrective Action Plan

Phase III: Corrective Action Plan Close Out

CAP PHASE I: Create A Corrective Action Plan

Elements to be applied to each issue, if applicable

- Root Cause Analysis
- Corrective Measures
- Required Plan of Action
- Evaluation/Follow-Up

- Planned Completion Date
- Person(s) Responsible for Implementation

CAP Element: Root Cause

❖ What is causing the finding issue?

❖ What flaws in the work processes led to the issue(s)?

❖ Has this type of issue occurred before and, if so, what caused it to reoccur?

❖ What should be happening?

Symptom: The Result or outcome of a problem, an observation.
- *The organization has volunteers participating in prohibited activities.*

Problem/Issue:
The volunteer is unaware of the prohibited activities.

Root Cause: What is causing the issue.
- *The agency does not have an updated policy on all prohibited activities.*
- *Volunteers have not been trained on prohibited activities.*

CAP Element: Corrective Measures

❖ How can the issue be fixed?

❖ Re-evaluate the policy/procedure

❖ Determine who will conduct training on the correct way to do the tasks

❖ Identify checks and balances to be strengthened to ensure issues do not reoccur

❖ What improved protocols will be established?

CAP Element: Required Plan of Action

S M A R T

| Specific | Measurable | Attainable | Relevant | Time Based |

❖ Who is doing what?
❖ How will the plan be implemented?
❖ What supporting documentation will be needed?

CAP Element: Evaluation/Follow-Up

❖ What is the plan/procedure to evaluate the plan implemented?

❖ How often will the plan be evaluated?

❖ What are the desired results?
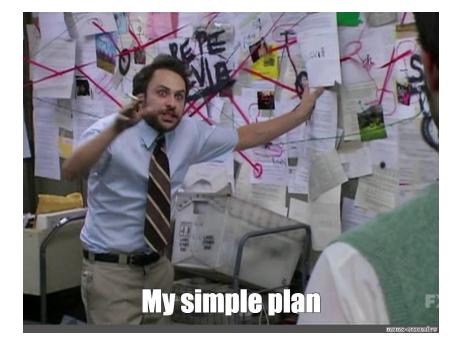

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IT'S WORKING

makeameme.org

CAP Element: Additional Fields

❖ Planned Completion or Implementation Date

❖ Person(s) Responsible for Implementation

Corrective Action Plan Example

Issue (This will auto populate)	Root Cause	Corrective Measures	Required Plan of Action	Evaluation/Follow-Up	Grantee Planned Completion - Implementation Date	Person(s) Responsible for Implementation
	What is causing the finding issue? • What flaws in the work processes led to the issue(s)? • Has this type of issue occurred before and, if so, what caused it to reoccur? • What should actually be happening?	**How can the issue be fixed?** • Re-evaluated the procedure/policy. • Who will conduct training on the correct way to do the tasks? • How can checks and balances be strengthened to ensure issues do not reoccur? • What improved protocols will be established?	**Describe the procedures used to implement the corrective measures (specific, measurable, attainable, realistic, timebound)** • Who is doing what? • How will the plan be implemented? • What supporting documentation will be needed to ensure implementation?	**How will grant recipients know if corrective measures are working or not?** • Plan/Procedure to evaluate the implementation. • Timeframe for the evaluation: how often? • What are the desired results?		
Volunteers are participating in Prohibited Activities.	1. The agency does not have an updated policy on all prohibited activities. 2. Volunteers have not been trained on prohibited activities.	1. Update prohibited activities policy 2. Volunteer orientation will include training on prohibited activities. 3. Annual training provided for staff/volunteers will include prohibited activities. 4. Quarterly check-in/reminders.	1. Program Director will update the Prohibited Activities Policy by August 31, 2023. 2. All volunteers and staff will be trained on prohibited activities during September site meetings. 3. The Program Director will provide the Office of Monitoring a copy of the updated and board approved policy, and proof of volunteer/staff training on prohibited activities by October 6, 2023. 4. Site Supervisors will e-mail quarterly check ins with volunteers and report issues to the Program Director.	1. Policy is compliant and board approved. 2. All new volunteers trained at orientation. 3. 100% of Current volunteers/staff trained on updated policy in September. 4. Review of quarterly check in results. 5. Trained volunteers are not participating in prohibited activities.	October 6, 2023	Program Director, Sam Smith

Corrective Action Plan Phase I: Key Points

To be submitted to Office of Monitoring within 30 calendar days

- Address each finding of noncompliance by creating a CAP and submitting it to the assigned Monitoring Officer through a secure folder within 30 calendar days.

- CAP submissions must include targeted timeframes and deliverables for implementation of the corrective action plan.

- If your organization addressed the finding and completed corrective actions during the 30 day CAP creation period, please include supporting documentation for evaluation.

- Submitted CAP will be reviewed by Monitoring Officer. The CAP will either be Resolved (no additional work), Insufficient (returned for rework), or Approved In Progress (long-term plan).
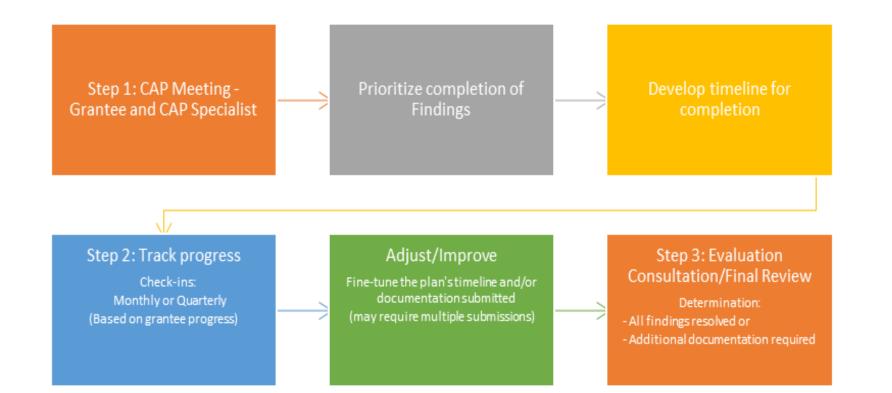
Corrective Action Plan Phase II

CAP Approval - Approved In-Progress

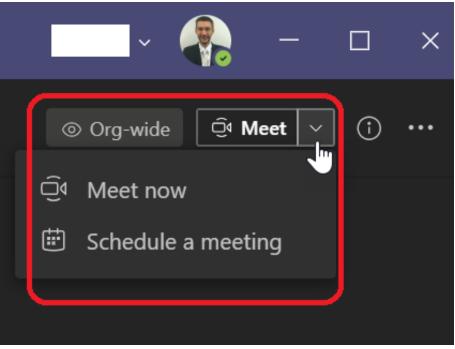|		
Step 1: CAP Meeting - Grantee and CAP Specialist	**Prioritize completion of Findings**	**Develop timeline for completion**

Step 2: Track progress Check-ins: Monthly or Quarterly (Based on grantee progress)	**Adjust/Improve** Fine-tune the plan's timeline and/or documentation submitted (may require multiple submissions)	**Step 3: Evaluation Consultation/Final Review** Determination: - All findings resolved or - Additional documentation required

CAP Phase II: Work on Corrective Action Plan

Step I- Meet With Your CAP SPECIALIST

- ✓ Schedule a time to meet with the Corrective Action Planning Specialist.

- ✓ Review Corrective Action Plan.

- ✓ Discuss timeline for components of the Corrective Action Plan.

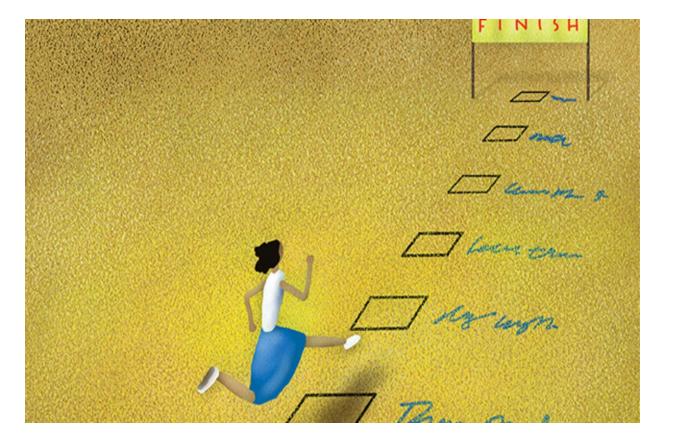- ✓ Establish goals to resolve any findings and complete the post-monitoring process.

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CAP Phase II: Work on Corrective Action Plan

STEP 2 & 3 - Quarterly Updates and Evaluation/Review

- ✓ Schedule regular (at minimum, quarterly) CAP meetings to review CAP progress.

- ✓ Provide Quarterly Updates and Provide Documentation of CAP items resolved.

- ✓ CAP Specialist will review and provide feedback.

CAP Phase III: Resolving Corrective Action Plan

Step 3- Final Review: CAP Closure

Our Goal is to provide the needed support to help grantees resolve findings noted on the CAP Summary report.

Once all findings are resolved, the grantee will receive a notice from the Monitoring Office of the CAP Closure.

Corrective Action Plan Phase II and III: Key Points

To be complete within one year after CAP Approval

- Once the CAP is Approved In Progress, an assigned CAP Specialist will support grantees in the implementation of the CAP.

- Grantees will meet with their assigned CAP Specialist quarterly and submit corrective actions through the OneDrive Secure Folder.

- Submissions should include documentation/evidence to support the finding resolution.

- Based on a final review, when all findings are resolved, a notification of CAP closure will be sent to the grantee for record-keeping.

Questions?

Please contact your assigned Monitoring Officer or the Monitoring Office at monitoring@cns.gov.