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The Keys to Valid Negative Actions



A product of The National Payment Accuracy Work Group (NPAWG).

Introduction to Negatives

A negative action occurs whenever eligibility staff take action to terminate, deny or suspend a Supplemental Nutrition Assistance Program (SNAP) case. State Quality Control (QC) reviewers include a review of negative actions in their monthly sample. The Negative Error Rate (NER) represents the percentage of households whose SNAP benefits were denied, terminated, or suspended incorrectly, based on this review. When the QC process initially began, a Federal re-review of a State's QC negative case sample was only conducted if the State was eligible for "enhanced funding." However, in Federal Fiscal Year (FFY) 2000, the U.S. Department of Agriculture, Food and Nutrition Service (FNS) began validating negative actions for all States each year. Since then, error rates for negative actions have increased considerably in many States.

Households that are inaccurately denied SNAP benefits or whose cases are inappropriately terminated or suspended are likely to experience great hardship.

Invalid negative actions indicate that access to SNAP is hampered and that eligible children and adults may not be receiving the nutrition assistance they need. Without the food assistance they are seeking, children and adults may go hungry unnecessarily.

Ensuring that negative actions are valid is an FNS priority.

FNS has been working with State and local-level staff from around the country to identify the most effective initiatives States have taken to ensure accurate negative actions:

- ◆ **Top Leadership Commitment:** Exemplifying top-level management commitment to ensure that all negative actions are correct and appropriate. Greatest success occurs when this message is communicated clearly and often.
- ◆ **Staff Communication:** Educating staff about the importance of providing access to the Program and the consequences of erroneously denying participation, or terminating/suspending a household's benefits. It is imperative that all eligibility staff have a clear understanding of SNAP policies and procedures and apply them consistently.
- ◆ **Documentation and Verification:** Ensuring eligibility workers know the proper way to clearly document case records when a negative action is taken. This includes documentation of any requested verification, the timeframes for returning the verification, and what that verification showed about the household circumstances.
- ◆ **Computer System Enhancements:** Maintaining an effective automated eligibility system that fully supports the accurate determination of SNAP eligibility.
- ◆ **Resource/Reference Tools for Staff:** Providing resource and reference tools to workers and supervisors to help them more accurately and effectively determine eligibility.
- ◆ **Case Reviews:** Having an effective case review process in place to identify and correct inaccurate or inappropriate negative actions immediately.
- ◆ **Analyzing Negative Errors:** Analyzing all data available to determine the root causes of invalid decisions identified through QC and other sources.
- ◆ **Corrective Action Planning:** Planning corrective action initiatives to timely and effectively reduce or eliminate problem areas identified.

Having a thorough understanding of what constitutes an invalid negative action and what can be done to prevent them can effectively improve customer service and access to SNAP. The information provided here can help you assess your operations and determine which practices may be useful for your agency.

Top Leadership Commitment

Top leadership commitment has been the cornerstone to obtaining and maintaining SNAP payment accuracy. The same holds true for the validity of negative actions. It is critical that top leadership recognize the impact that a high negative error rate has on Program access and customer service and make improving the negative error rate an agency-wide priority. Incorrectly denying, closing, or suspending benefits for households eligible to receive food assistance establishes barriers to Program participation. Agency leadership must communicate throughout the organization that this is unacceptable. The leadership must set the expectation that households applying for SNAP will receive an accurate determination of eligibility and that households found not to be eligible will receive a timely and accurate notice of denial, termination or suspension.

High-performing States can compete for a performance bonus in the negative error rate category. Setting performance goals each year, developing a plan to achieve the goals, and clearly articulating this to all staff shows management's commitment to ensuring the integrity of the Program and making it more accessible.

Did you know?



Each year, \$6 million is divided among six high-performing States for their Negative Error Rate (NER):

- ◆ Four states with the lowest NER; and
- ◆ Two states with the most improved NER.

SUCCESSFUL STRATEGIES

- ◆ The agency's performance goal or target is expressed to staff at all levels – including all functional areas within the State and local offices, from receptionists to county or State directors. They must be made aware of:
 - ◆ The commitment to Program access;
 - ◆ The target for a low negative error rate; and,
 - ◆ The means for reaching the goal.
- ◆ Staff are held accountable for the negative error rate. The top leadership meets regularly with staff to review error rate trends and supports error review committee meetings.
- ◆ Staff receive acknowledgement for negative error rate improvements and excellence. This is best accomplished through direct contact from top leadership to staff during functions such as conferences and staff meetings to reinforce good performance.
- ◆ Top leadership appreciates receiving new ideas to improve Program administration, access and customer service from all levels within the State agency.
- ◆ Top leadership supports and encourages open communication among State agency staff (policy, quality control, training, systems and corrective action) and between State and local staff to ensure that error causes are identified and eliminated.
- ◆ Corrective action plans are targeted to specific problems and establish distinct timeframes for action and improvement. Staff at all levels buy in to the plan and understand what must be accomplished.
- ◆ Top leadership supports system changes necessary to reduce or eliminate error causes and makes these changes a priority.

Staff Communication

It is our responsibility to see that all who are eligible to participate in SNAP have access to the Program and that barriers to participation do not exist. Correctly determining denials, terminations and suspensions is essential to good customer service and Program access.

SUCCESSFUL STRATEGIES

- ◆ Ensure staff understand all the steps that must be taken before a case can be denied, terminated, or suspended. When training new staff about these requirements, ensure that all trainers use the same terminology to eliminate any confusion.
- ◆ If your State organizes casework by task or function, i.e. caseload banking and/or specialized units, be sure that staff understand their roles and communicate with each other regarding actions that have been taken or need to be taken. Additionally, having a system in place that tracks work and ensures accountability is critical for success.
- ◆ Emphasize to case workers the importance of correctly determining all negative actions and ensure they understand the correlation between the negative error rate and the FNS priorities of access and integrity. This includes explaining how an incorrect denial, termination or suspension can adversely affect an eligible household.
- ◆ Develop a “marketing plan” for top leadership’s use that highlights the importance of correct case determinations and stresses the positive economic impacts of SNAP on the local economy.
- ◆ Inform staff about the Quality Control (QC) process, including how the negative error rate is calculated through QC reviews of negative case actions. Also, explain to staff that the lowest and most improved negative error rates are FNS performance bonus categories that can result in additional funding for the State.
- ◆ At every opportunity, remind workers not to deny an application too early and that they must allow clients at least 10 days to gather the necessary information. Many states use the slogan, “Don’t deny before it’s time.”
- ◆ Recognize eligibility workers for a job well done to boost staff morale and create a positive work environment. When negative case actions are determined correct by QC or supervisory reviews, workers should be recognized. Examples of employee recognition include: individual notes, e-mails or certificates for a job well done. The State or locality may want to develop a campaign to encourage correct negative actions and create friendly competition between workers, units or local offices as an incentive to perform well.

Documentation and Verification

An important strategy for achieving a low negative error rate is to ensure that case records fully document the circumstances that result in denial, termination or suspension actions. The case record, whether paper and/or electronic, should tell the story of the household's circumstances.

A good case file will document that the household knew what verifications were necessary, when and if those verifications were provided, and what key information in the verifications assisted in the case determination. Furthermore, the final determination of denial, termination, or suspension must be clearly spelled out in a timely notice to the client, and that notice must be part of the case file, whether in paper or electronic.

Finally, if State or Federal Quality Control selects a negative action for review, all case record information that was used to make the decision to deny, terminate or suspend the case and all notices to the client, including information housed on the automated eligibility system, are reviewed. Documentation must provide enough detail to allow a reviewer to determine the validity of the negative action.

SUCCESSFUL STRATEGIES

- ◆ **Case Notes:** Eligibility workers must make certain that all conversations with the client, verifications received or other issues that led to the final negative action are recorded in the case record. The case notes should also be written using clear language so that others reading the case can understand what action was taken and why.
- ◆ **Paperless or Automated System Documentation:** In States where documentation and case records are fully automated (a paperless system), verification and documentation contained in the automated record must be sufficient to establish the validity of the negative case action.
- ◆ **Verification Checklists:** Regulations require the State agency to provide each household, at the time of application or recertification, with a written notice that informs the household of the verification requirements the household must meet as part of the application process. At a minimum, the notice should include examples of the types of documents the household should provide, the period of time the documents should cover, and when the information is due. Not providing this notice and/or lack of documentation that this notice was provided to the household can lead to an invalid negative action. Many states have created Verification Checklists to simplify this process.
- ◆ **Documentation of Household Statements:** It is important for the eligibility worker to clearly and accurately document household statements regarding their income or resources, such as bank accounts, employment, etc., that would render the household ineligible from participation in the Program.
- ◆ **Withdrawals:** Application withdrawals should be requested by the client, not as a result of a suggestion or determination made by the eligibility worker. All withdrawals must be based solely on client statements.
- ◆ **Notice of Denial:** If the application is denied, the State agency must provide the household with written notice explaining the reason for the denial, the household's right to a fair hearing and the contact information for the local office. Again, the negative action reason provided on the client's notice should correlate with the case file documentation. The primary rules to follow when preparing notices are:
 - ◇ The notice must be written in such a way that clearly informs the household of the reason for the negative action;
 - ◇ The notice must be sent to the client timely and in accordance with Federal regulations; and
 - ◇ The notice must be in the case file or available electronically.

Computer System Enhancements

A highly functioning automated eligibility determination/processing system is key to achieving a high level of performance in SNAP, including the area of negative actions. Misuse, misunderstanding or system limitations can cause or contribute to the problem of invalid negative actions.

Many states have examined their automated eligibility systems to explore opportunities for enhancements that could reduce the likelihood of errors. Some system enhancements or changes automate actions to help reduce worker errors.

SUCCESSFUL STRATEGIES

- ◆ Prevent workers from denying an application prior to the 30th day. If data shows that negative denial errors often occur because of caseworkers taking action prior to the 30th day, a change to the automated system can prevent these errors from occurring.
- ◆ Automatically deny an application after 30/60 days (or less if your State has a waiver). This can prevent cases from being held open longer than allowed.
- ◆ Prevent workers from denying or terminating a case during the 10-day period clients have to provide verification.
- ◆ Prevent the automatic termination of SNAP benefits when eligibility for another program is terminated.
- ◆ Implement an electronic case filing system. Nationally, one major cause of invalid negative actions is lost case records and/or verification. Electronic case filing or a good automated paperless system can ensure that case records are not lost and can be reviewed. Also, scanned documents can reduce or eliminate the occurrence of lost paperwork.
- ◆ Ensure that system fixes are implemented quickly when the system is not correctly applying policy. If policy or procedures are programmed into the system incorrectly, improper denials and terminations can result. In addition, workers may be tempted to develop workarounds, which can create further problems. Workarounds should be identified and analyzed so that system corrections can be put into place swiftly.
- ◆ Prevent workers from creating “shortcuts” to the standard case processing. This type of workaround is very error prone because workers are overriding the system and ignoring correctly programmed policy for expedience. If your system does allow workarounds, these should be identified and analyzed.
- ◆ Ensure that adequate system training has been provided for workers, especially when new processes are implemented. Workers need to understand what the different system codes mean and the consequences for entering incorrect codes. Instructions on the automated eligibility system should be easy to understand and provide examples whenever possible.
- ◆ If the state has an on-line policy manual, ensure that workers receive proper training on the manual. Keep it up-to-date and reflective of current policy.
- ◆ Thoroughly test all system changes. Provide guidance on new procedures to ensure that additional errors are not created.
- ◆ Automatically generate alerts to notify workers when an application requires action or a case is pending termination. A well-designed alert system or worker dashboard can aid tremendously in organizing and prioritizing workflow.
- ◆ Include local-level eligibility staff in discussions about system changes and enhancements. This is important because, as daily system users, they may have great ideas for enhancements and/or warnings about potential drawbacks.
- ◆ Document case actions directly in the system. Some State systems provide templates for documentation to help ensure thoroughness and consistency.
- ◆ Automate the Notice of Missed Interview. This can prevent a significant number of negative errors.

Resource/Reference Tools for Staff

Many States have found that providing eligibility staff with easy-to-use resource and reference tools helps reduce both invalid negative actions and payment errors. These tools serve as summaries and reminders of policies and procedures. The tools can save staff time by potentially reducing the occasions eligibility staff have to reference a voluminous policy manual and can also help to ensure that correct policies and procedures are applied consistently.

SUCCESSFUL STRATEGIES

- ◆ **Checklists:** Generally a one-page document summarizing requirements that must be met prior to denial of eligibility or benefit approval. Checklists provide a simple means of assuring that all required items or documentation have been reviewed. Many agencies require a copy of the checklist to be included in the case record as documentation that all applicable items have been provided and considered in the eligibility determination.
- ◆ **Desk Guides:** Typically a more detailed version of a checklist that is also convenient and easy to use. Many agencies use desk guides to summarize complex policies.
- ◆ **Tip Sheets:** Generally, tip sheets cover only one or two key points. They are often used to remind eligibility staff of a policy or procedure that is complex or error prone and should be sent out periodically. Some States are now providing tips via e-mail alerts that go directly to the individual workers or broadcast messages through the automated eligibility system.
- ◆ **Newsletters:** Agency newsletters can be a valuable source of information and serve many purposes. Some examples include: specific articles highlighting tips for accurate negative actions, policy clarifications, reminders about correct system codes, error rate data and error prone elements, as well as recognition for individuals, units or all staff for achievements.
- ◆ **Interactive Games, Quizzes or Surveys:** These are fun ways to test staff on Program knowledge. They can be effective adult-learning tools because they require the active involvement of the worker. Depending on the format, these tools may also be used to document training. Supervisors can also use these as a fun but effective way to review error prone or complex policy issues during unit meetings.

The above tools can address a variety of topics, including:

- ◆ Types of documents that are acceptable for verifying required eligibility elements. Examples of excessive verification requests can also be provided to show a meaningful contrast.
- ◆ The information that should be documented in a case record when a decision is taken to deny, terminate or suspend an application/case. This could include specific samples of good documentation versus poor documentation.
- ◆ The eligibility items and required processes that should be reviewed one final time before the case is finalized. This could be a tool for a supervisor or second-level approver.
- ◆ The information that should be maintained in the case record after the action has been taken. Remember, if a case record does not clearly document the reason for the action, the action may be considered invalid.

Case Reviews

One of the most successful tools in attaining and maintaining payment accuracy is a good case review system. The same holds true for ensuring the validity of negative actions. Many States mandate case reviews because they have proven to be an integral part of their overall management of the Program by providing managers and supervisors valuable information on the validity and timeliness of case determinations. Information gathered from case reviews can help determine the root cause(s) of errors and thereby identify specific areas needing corrective action, such as policy clarification, refresher training, changes in office procedures, improved case record documentation, system changes, etc. Combining data from case reviews with the data collected from Quality Control (QC) reviews provides a more comprehensive assessment of problem areas from which to determine appropriate corrective action initiatives.

All case review processes should include the requirement to review negative actions in addition to active cases. Supervisors and managers should be trained periodically on the proper way to review a negative action and have a review guide available for their reference. It is important that a review of a negative action includes a system review to ensure proper use of the automated eligibility system, such as coding, documentation, etc.

Through case reviews, it is possible to gather real-time data needed to determine the types of problems occurring and the root causes. In order to take a proactive approach to finding solutions that address the causes of invalid negative actions, review results should be made available to management within a one- to two- month timeframe after the case review is complete. Case reviews alone, without analysis and understanding of the causes of the errors and trends, are not productive and simply become a “find and fix” process. Without data analysis, similar errors are repeated and there is no mechanism to improve the overall process. The data provides vital information for proactively correcting case actions and identifying problem areas. It also provides critical information for holding staff accountable for their work.

SUCCESSFUL STRATEGIES

- ◆ Create a case review sheet that is tailored to negative actions and collects detailed information about the actions taken.
- ◆ Include a sample of negative actions in mandated supervisory reviews.
- ◆ Implement a system to track the cases selected for review, the types of errors found, and required corrective actions.
- ◆ Analyze the findings in a timely manner – the sooner the better.
- ◆ Determine the root cause of the problem. For example, it is common to assume that because there are a lot of problems occurring related to a particular policy, the workers need to receive refresher training. Before settling on that conclusion, check first to be sure the policy is clearly written, the computer system is properly programmed to handle the policy, and procedures in place are not contributing to invalid negative actions.
- ◆ Develop and implement corrective actions immediately once the root cause has been discovered.
- ◆ Conduct a targeted review 6 to 12 months after implementing the corrective action to ensure the problem has been effectively resolved.
- ◆ Ensure eligibility workers are using the appropriate termination, suspension or denial codes in the system and that case documentation supports the action.

TYPES OF CASE REVIEWS

There are a number of different approaches to case reviews. Keep in mind that conducting case reviews on 100% of cases is not the most effective strategy and, in most States, is probably not feasible. A more strategic and targeted review plan allows for a more in-depth look at fewer cases rather than a cursory review of all cases.

Short Term Projects: Case reviews conducted on a targeted sample of the caseload that usually focus on specific error prone elements of the case record for a short period of time. Consider using QC data to determine cases to target and/or error prone elements. These projects are generally undertaken to gather information needed to address a particular problem(s). For example, in a State with Broad-Based Categorical Eligibility, pull denied applications with one- or two-member households, and determine if these households should have received the minimum allotment.

Peer Reviews: Eligibility workers within the same unit or office switch cases for review. Peer reviews work best when conducted prior to denying, terminating or suspending a case. Most workers would prefer to have a co-worker find their mistakes than their supervisor. Peer reviews are used to provide another pair of eyes to catch situations where reported information was not included in the eligibility determination; reinforce policy knowledge; and find and correct errors in a large number of cases.

Supervisory Case Reviews: Either targeted or thorough case reviews conducted by supervisors. Generally there is a mandate that supervisors conduct a required number of reviews each month following a prescribed procedure. This mandate should include a minimum number of negative actions as well as active cases. These reviews are an excellent management tool for supervisors to check the validity of negative actions taken. They also provide valuable information on staff's ability to manage their workload, indicate when refresher training is needed, and contribute to the overall level of customer service provided by the unit, office, project area and State.

Third Party Reviews: A re-review of a sample of completed case reviews, conducted by another supervisor or a higher-level manager, to determine the accuracy of the initial reviews completed by workers, supervisors or a special team of reviewers. For example, an initial case review is conducted by a supervisor and then re-reviewed by the office manager. All effective case review systems include a third-party review process to:

- ◆ Ensure staff conducting initial case reviews have an accurate understanding of policy;
- ◆ Identify when case review refresher training is needed for the supervisor(s);
- ◆ Ensure a thorough, rather than cursory, review is conducted;
- ◆ Maintain the integrity and consistency of the review process, e.g., ensure that similar problems are coded the same way on the review instrument;
- ◆ Enable the office or State to utilize supervisory case reviews as performance measures.

New Worker Reviews: A thorough review of all negative actions completed by new workers, prior to denying, suspending or terminating cases, to ensure they have a thorough understanding of the Program and are taking the appropriate action. The immediate supervisor generally conducts this type of review during the first 6 to 12 months of the new workers' employment.

Targeted Case Reviews: Reviews focused on specific error prone negative actions and/or elements of the case. These reviews are effective in isolating and correcting specific types of errors within an office, county or State. The specific error prone elements are generally identified through other types of case reviews.

Error Review Committees: A representative group of staff from all functional areas brought together on a regular basis to review cases that QC identified as being invalid actions or valid based on further case record review. The committee should review and discuss all invalid negative actions to determine the root cause and possible corrective actions. This will reinforce top-level commitment to ensure all decisions to deny, suspend or terminate cases are accurate. Error review committees also provide an opportunity to discuss trends and look for ways to improve customer service and the validity of negative actions.

Analyzing Negative Errors

The foundation for corrective action planning is good data analysis. To ensure you have a thorough understanding of a particular problem, it is crucial to identify the root cause of the problem and who or what led to the invalid decision on the case. Without these essential pieces of information, you could be trying to fix something that really is not broken!

SUCCESSFUL STRATEGIES

- ◆ Gather data from all available sources, such as Quality Control (QC), Case Reviews, Customer Complaints, Fair Hearings, Management Evaluation results, and Access Reviews.
- ◆ Be sure you know your data well. Understand the definition of QC codes. Meet with QC periodically to discuss what each code means. For example, if an eligible non-citizen was discovered by QC during a review, should they code this as a citizenship/non-citizen (130) or household composition (150) problem? The correct answer is this would be a citizenship/non-citizen problem because QC reviewers are directed not to code “150” if characteristics are specifically addressed under other 100 series elements. This same kind of understanding is needed for all sources of data as listed above.
- ◆ Monitor data on a continual basis to look for emerging error trends, target corrective action initiatives, determine the effectiveness of corrective action activities, and identify the need for specific policy options/waivers.
- ◆ Review errors to identify the source of the problem. You may need to examine the case record to identify the root cause. An error review committee is very helpful in this effort. Unlike payment errors (active cases), errors found in negative action cases are not coded for cause. However, the nature codes do provide information that can direct you toward the cause of the problem.
- ◆ Review analysis reports to determine their effectiveness. You may need to review and/or revise your data analysis reports to make sure that they include all of the information necessary to help you identify the root cause(s) of errors in your agency. Below are some key data elements you should include in your analysis:
 - ◇ Error Element (i.e., wages & salaries, shelter costs, vehicles, etc.)
 - ◇ Nature Code – the circumstances surrounding the error; why it occurred.
 - ◇ County, Unit and/or Worker responsible for the error – This category can help you to better target the corrective action strategies. Retraining everyone may not be necessary.

IDENTIFYING THE ROOT CAUSE

Below are a few questions you can ask to help determine the root cause of an invalid negative action:

Was the client made aware of the timeframe for providing needed verifications?

Did the worker allow the client the full 10 days that are allotted to provide verification before sending the notice of termination?

Did the worker (and the automated system) deny the application too early?

If your agency allows an additional 30 days for clients to provide requested information, did the worker waiting the full 60 days from the date of application before denying the application?

If the verification(s) were received just before or on the due date, why are these documents not getting to the worker quickly enough?

Did the worker fully document the reason for the negative action?

Did the worker copy the source documents used to determine ineligibility and fully document the case record with the information?

Does the worker know how to use the on-line manual efficiently and effectively to research policy? Is the on-line manual up to date?

Is there a hardcopy policy manual available, if needed? Is it kept up to date?

Is the policy manual or guidance written clearly?

Did the worker ask questions of their supervisor or another worker? Was the correct answer provided?

Does the worker know the proper way to enter the information into the automated system, using the correct codes, etc.? Have workers recently received initial/refresher training on system codes?

Did the worker try to use a system workaround when entering the case into the automated system? Do workers understand the ramifications of using system workarounds? Why is a workaround necessary? How can it be prevented?

Is the system Help Desk responsive to worker inquiries?

Is a recent system change causing other problems?

When system changes are implemented, do eligibility staff receive clear instructions regarding the change, i.e., what the new screen looks like, how to enter information, new codes, what is going on behind the screen, policy related to the change, examples?

Did the worker ask the right questions during the interview to get all the needed information to make a good policy decision?

Is there an office procedure that could be causing the problem?

If the error is the result of the Notice of Missed Interview (NOMI) not being issued, why wasn't it issued?

Corrective Action Planning

Corrective action planning is the process by which State and local agencies document initiatives to reduce or eliminate deficiencies in every area of Program operations, including invalid negative actions. Documenting your corrective action initiatives and sharing the plan confirms top-level commitment to staff at all levels to continue to improve the efficient and effective administration of the Program and service to households applying for SNAP. Federal regulations require States with a negative error rate of one percent or higher, as determined by Quality Control (QC), to develop and implement corrective action initiatives to ensure the validity of negative actions.

SUCCESSFUL STRATEGIES

- ◆ Start your corrective action planning with detailed data analysis. Ideas for good data analysis are addressed in the “Analyzing Negative Errors” Key on page 10. Getting to the root cause of the problem is essential.
- ◆ Involve staff at all levels in the corrective action process, including support staff. Pull together a corrective action committee to discuss problem areas identified through data analysis. Staff are usually very willing to help. When management involves staff in corrective action planning and problem solving, they reinforce teamwork, demonstrate confidence in staff input and ensure buy-in from all levels when implementing a corrective action initiative.
- ◆ Brainstorm corrective action ideas with the group. Don’t automatically exclude new or different ideas before some exploration of their merits.
- ◆ Be realistic about the number and scope of corrective action initiatives undertaken at any one time. Focus your efforts on the initiatives most likely to yield the biggest payoff in improving Program operations and the validity of negative actions.
- ◆ Once you see improvement in a particular area, do not lose all focus on that area as you turn your efforts to a different problem area. Try to maintain as much balance as possible. For example, if you have focused all your efforts on improving payment accuracy in the last few years and now shift focus to improving the validity of negative actions, you may see a slip in payment accuracy. Instead, continue to emphasize the importance of each in your communication with staff.
- ◆ Assign target completion dates and person(s) responsible for each step necessary to implement an initiative. Make the target dates reasonable so you can stay on track but do not allow so much time that the activity is never completed or the initiative is never fully implemented.
- ◆ Monitor to ensure implementation of each initiative is on schedule and the steps are being carried out correctly. Monitoring should be as simple as possible. If problems are identified, immediately make the necessary modifications to the initiative to ensure success. If you determine that the initiative is not going to work, abandon it and go back to the drawing board to develop a new initiative. Do not waste valuable time and resources on an initiative that is ineffective.
- ◆ Develop plans to monitor and evaluate the initiative at the same time you develop the corrective action initiative.
- ◆ Understand that the evaluation process is very different than the monitoring process. Evaluation is done at the end of the trial period for the corrective action initiative to determine if it was successful in reducing or eliminating the targeted error(s). Monitoring is an ongoing process during the implementation and operation of the initiative.

WHAT SHOULD YOU INCLUDE IN A CAP?

Preparing a thorough yet easy-to-implement Corrective Action Plan (CAP) does not have to be complex, but should contain the following information:

A thorough description of each deficiency.

The magnitude of the deficiency (or number of cases found in error) and the geographic extent (i.e., a statewide problem, one or more project areas, a unit within a project area).

The data source(s) used to identify the deficiency and the magnitude (QC, supervisory reviews, fair hearings, Management Evaluation (ME) reviews, access reviews, etc.).

A complete description of the initiative developed to resolve the deficiency.

The tasks, timeframes and person(s) responsible for each step of implementation of the initiative.

A description of the plan to monitor implementation of the initiative.

A description of the plan to evaluate the effectiveness of the initiative and the expected outcome.

The current status of the initiative (include this in all CAP Updates submitted until the initiative has been fully implemented and evaluated).

The name and title of the person who has overall responsibility for the CAP.

A sample format sheet is included below, which States may use to document corrective action initiatives. Use a separate format sheet for each initiative to ensure clear documentation of each problem area and each corrective action. Remember, thorough documentation of all corrective action initiatives shows your commitment to improvement.

SNAP Corrective Action Plan

(Type additional information on a separate sheet of paper.)

Agency:

Date:

Office(s) and/or Unit(s) implementing this plan:

Description of deficiency, including associated error element and root cause:

Magnitude and geographic extent of deficiency and data sources used:

Complete description of activity developed to resolve deficiency:

Tasks/steps, time frames and person(s) responsible for each task/step:

Description of Task/Step	Person Responsible	Target Completion Date

SNAP CORRECTIVE ACTION PLAN (continued)

Description of plan to monitor implementation tasks/steps and time frames:

Description of plan to evaluate effectiveness of activity to resolve deficiency:

Expected outcome:

As of the date of this plan/update, the status of performing tasks/steps, meeting time frames and effectiveness of initiative to resolve deficiency:

Name and title of person who has overall responsibility for this plan: