\_\_\_\_\_ Department of Social Services

### DATE CAP APPROVED: \_\_\_\_\_ DATE CAP TO BE COMPLETED BY: \_\_\_\_\_

REQUIREMENT:					
	Special Assistance applications.				
SAD – 60 Calendar L	Days SAA- 45 Calendar Days				
Timely processing of Sp	ecial Assistance redeterminations.				
Determination of financial eligibility for S	pecial Assistance beneficiaries correctly and timely				
STATE POINT OF CONTACT	COUNTY POINT OF CONTACT				
Name:	Name:				
E-mail address:	E-mail address:				
Phone number:	Phone number:				
COUNTY	SELF-ASSESMENT				
Brief summary of county self-assessment that list	s reasons for compliance monitoring 30% threshold failures]				
[,, _,, _	3				

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	ACTION PLAN -					
GOAL #1 (e.g. "Achieve 85% time						
			ctions for Improvention provention provention of the section of th			
ACTION(S) FOR GOAL #1 (det	ailed description):					
Desired Outcome (including associated metrics):	Target Dates and Checkp (including targeted completion		Strategy/Action C	Owner	Resources Needed	State Actions/Support Required
TA	ARGETED IMPROVEMEN	T UPDAT	ES – TO BE COM	MPLET	ED BY STATE STA	FF
Quarter 1	Quarter 2		Quarter 3		Quarter 4	
<u>STATUS</u>	<u>STATUS</u>	<u>STATUS</u>		<u>STATU</u>		
□ Achieved	□ Achieved	□ Achieve		🗆 Ach		
☐ In Progress – On Schedule	□ In Progress – On Schedule	_	ress – On Schedule		Progress – On Schedule	
☐ In Progress – Behind	□ In Progress – Behind	-	ress – Behind		Progress – Behind	
□ Not Started	□ Not Started	🗆 Not Sta	arted	□ Not	t Started	
ACTIONS	ACTIONS	ACTIONS		<u>ACTIO</u>	<u>INS</u>	

Revised 9/24/2024

# Special Assistance Corrective Action Plan SFY 2024-2025 Department of Social Services

□ Remove from CAP	□ Remove from CAP	□ Remove from CAP	□ Remove from CAP
Revise/Re-evaluate goal	🗆 Revise/Re-evaluate goal	Revise/Re-evaluate goal	Revise/Re-evaluate goal
Continue to Implement	Continue to Implement	Continue to Implement	Continue to Implement
Continue to Monitor	Continue to Monitor	Continue to Monitor	Continue to Monitor

	ACTION PLAN – TO BE COMPLETED BY DSS STAFF					
GOAL #2 (e.g. "Achieve 85% timeliness for 3 subsequent months"):						
	Strategies & Ad	ctions for Improvement				
		east one action per goa				
ACTION(S) FOR GOAL #2 (deta	ACTION(S) FOR GOAL #2 (detailed description):					
Desired Outcome (including associated metrics):	Target Dates and Checkpoints (including targeted completion date):	Strategy/Action Owner	Resources Needed	State Actions/Support Required		
ТА	ARGETED IMPROVEMENT UPDAT	ES - TO BE COMPLET	ED BY STATE STAFE			
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Quarter 1	Quarter 2	Quarter 3	Quarter 4
STATUS	<u>STATUS</u>	<u>STATUS</u>	<u>STATUS</u>
□ Achieved	□ Achieved	□ Achieved	□ Achieved
□ In Progress – On Schedule	□ In Progress – On Schedule	□ In Progress – On Schedule	🗆 In Progress – On Schedule
🗆 In Progress – Behind			
□ Not Started	□ Not Started	🗆 Not Started	Not Started
ACTIONS	ACTIONS	ACTIONS	ACTIONS
□ Remove from CAP	Remove from CAP	Remove from CAP	Remove from CAP
□ Revise/Re-evaluate goal	Revise/Re-evaluate goal	□ Revise/Re-evaluate goal	Revise/Re-evaluate goal
Continue to Implement	Continue to Implement	Continue to Implement	Continue to Implement
Continue to Monitor	Continue to Monitor	Continue to Monitor	Continue to Monitor

	ACTION PLAN – TO BE COMPLETED BY DSS STAFF					
GOAL #3 (e.g. "Achieve 85% timeli	ness for 3 subsequent months"):					
		ctions for Improvemen				
	(Must enter at le	east one action per goa				
ACTION(S) FOR GOAL #3 (detail	ACTION(S) FOR GOAL #3 (detailed description):					
Desired Outcome (including associated metrics):       Target Dates and Checkpoints (including targeted completion date):       Strategy/Action Owner       Resources Needed       State Actions/Support						

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TA	ARGETED IMPROVEMEN	T UPDATES – TO BE CON	MPLETED BY STATE STA
Quarter 1	Quarter 2	Quarter 3	Quarter 4
<u>STATUS</u>	<u>STATUS</u>	<u>STATUS</u>	<u>STATUS</u>
□ Achieved	□ Achieved	□ Achieved	□ Achieved
🗆 In Progress – On Schedule	□ In Progress – On Schedule	□ In Progress – On Schedule	□ In Progress – On Schedule
🗆 In Progress – Behind	🗆 In Progress – Behind	□ In Progress – Behind	□ In Progress – Behind
Not Started	□ Not Started	🗆 Not Started	🗆 Not Started
ACTIONS	ACTIONS	ACTIONS	ACTIONS
Remove from CAP	Remove from CAP	Remove from CAP	Remove from CAP
□ Revise/Re-evaluate goal	□ Revise/Re-evaluate goal	□ Revise/Re-evaluate goal	□ Revise/Re-evaluate goal
Continue to Implement	Continue to Implement	Continue to Implement	Continue to Implement
Continue to Monitor	Continue to Monitor	Continue to Monitor	Continue to Monitor

## **ACTION PLAN – TO BE COMPLETED BY DSS STAFF**

GOAL #4 (e.g. "Achieve 85% timeliness for 3 subsequent months"):

Strategies & Actions for Improvement (Must enter at least one action per goal)

ACTION(S) FOR GOAL #4 (detailed description):

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Desired Outcome (including associated metrics):	Target Dates and Checkp (including targeted completion		wner Resources Needed	State Actions/Support Required
				rioquilou
TA	ARGETED IMPROVEMEN	T UPDATES – TO BE COM	APLETED BY STATE STAFF	
Quarter 1	Quarter 2	Quarter 3	Quarter 4	
<u>STATUS</u>	<u>STATUS</u>	<u>STATUS</u>	<u>STATUS</u>	
□ Achieved	□ Achieved	□ Achieved	□ Achieved	
□ In Progress – On Schedule	□ In Progress – On Schedule	□ In Progress – On Schedule	In Progress – On Schedule	
In Progress – Behind	In Progress – Behind	In Progress – Behind	🗆 In Progress – Behind	
□ Not Started				
	□ Not Started	🗆 Not Started	🗆 Not Started	
			□ Not Started	
ACTIONS	ACTIONS	ACTIONS	ACTIONS	
ACTIONS	<u>ACTIONS</u>	ACTIONS	ACTIONS	
ACTIONS	ACTIONS	ACTIONS	ACTIONS	

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Date of CAP Review Q1:	
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Reviewed By: \_\_\_\_\_

Next Projected review of CAP: \_\_\_\_\_

KEY STEPS PRIOR TO NEXT REVIEW:

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Date of CAP Review Q2: \_\_\_\_\_

Reviewed By: \_\_\_\_\_

Next Projected review of CAP: \_\_\_\_\_

#### CAP PROGRESS REVIEW AND UPDATES – TO BE COMPLETED BY STATE STAFF

Section to be completed by authorized reviewer [INSERT TIME FREQUENCY] and findings reviewed by [COUNTY NAME] Director.

SUMMARY	(key findings of review):	KEY STEPS PRIOR TO NEXT REVIEW:	