

**Rehabilitation Services Administration  
Vocational Rehabilitation Program  
Corrective Action Plan  
Instructions for Completing CAP Form**

Pursuant to section 107 of the Rehabilitation Act of 1973, as amended by the Workforce Innovation and Opportunity Act, the Rehabilitation Services Administration (RSA) is required to conduct periodic monitoring of the vocational rehabilitation (VR) programs in each state. VR agencies found to be out of compliance with Federal requirements as a result of this monitoring must develop for RSA approval corrective action plans (CAP). In addition, the agencies must use the form to report progress toward resolution of the findings specified in the CAPs on a quarterly basis. The instructions for completing each field in the CAP form are as follows. The RSA State liaison fills in the first page of the CAP form prior to sending it to the VR State agency.

**Finding Headline**

For each finding covered by the CAP, type in the finding topical headline from the Monitoring Report. For example, “Internal Controls.”

For each finding, type in data under the “**Finding**” topic and complete all information as identified below.

**Finding**

Type in a brief statement of the finding narrative as contained in the Monitoring Report into the space provided. For example, “The agency is not in compliance with [citations of relevant statutory and/or regulatory provisions] because...” Typically, such statements can be copied directly from the Monitoring Report.

**Mandated Corrective Action**

Type in the mandated corrective action associated with the finding as contained in the Monitoring Report.

**RSA Focus Area**

Determine from the Monitoring Report whether the finding relates to an RSA focus area and type in the appropriate response.

**Corrective Action 1.1**

**Action**

Type in each corrective action separately that the agency will implement to address the finding and the result of the agency being in compliance with the Federal requirement under the “Corrective Action” heading on the form.

**Standard to be Met and Method of Evaluation**

Type in the identified compliance requirement or level of performance to be met to establish that the finding is resolved and type in the methods the agency will use to evaluate that it has resolved the finding.

**Planned Start Date**

Type in the projected start date for implementing the corrective action using two digit month/ two digit day/ and four digit year. Example: 12/01/2020

**Actual Start Date**

Type in the actual date of implementation of the corrective action using two digit month/ two digit day/ and four digit year. Example: 12/01/2020.

**Projected Completion Date**

Type in a projected date for each corrective action to be completed using two digit month/ two digit day/ and four digit year. Example: 12/01/2020.

**Actual Completion Date**

Identify the actual date on which the corrective action was completed using two digit month/ two digit day/ and four digit year. Example: 12/01/2020.

**Quarterly Updates**

Type in the quarterly narrative update on the progress of the VR agency toward implementing corrective actions to resolve compliance findings under the “Quarterly Progress” heading on the form.

**RSA State Team Comments**

For use by RSA only. RSA may type in narrative comment under this area on the form regarding the performance of the VR agency in the implementation of corrective actions taken toward the resolution of findings specified in the CAP and the effectiveness of those corrective actions in achieving compliance with the Federal requirement.

**Resolved**

For use by RSA only. RSA is to type in this option when a finding has been fully resolved and the agency has met the Federal performance requirement.

**Public Burden Statement**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1820-0694. Public reporting burden for

this collection of information is estimated to average 50 hours for development of the corrective action plan and 5 hours for each of three quarterly updates per response, for a total of 65 hours annually, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain benefit (Section 107A of the Rehabilitation Act of 1973, as amended by Title IV of the Workforce Innovation and Opportunity Act). If you have any comments concerning the accuracy of the time estimate, suggestions for improving this individual collection, or if you have comments or concerns regarding the status of your individual form, application or survey, please contact Joseph Doney, Rehabilitation Services Administration, 550 12th St SW, Washington, DC 20202-2800 / joseph.doney@ed.gov, directly.