

How to Close a Corrective Action Plan (CAP)

Program Support and Monitoring
Exceptional Student Services
Arizona Department of Education

****Disclaimer:** This presentation reflects current federal and state compliance requirements included in the Arizona ESS monitoring system. It does not include local PEA policy, procedure and practice that may exceed compliance requirements .

What is a Corrective Action Plan (CAP)?

- The CAP identifies the underlying issues or concerns that led to identified noncompliance.
- The CAP is developed in collaboration with Program Support and Monitoring (PSM) at the conclusion of the Public Education Agency (PEA) monitoring activities.
- The CAP is unique to the PEA and it is the responsibility of the PEA to manage throughout the CAP process and ensure the timely closing.

What Evidence is Needed to Close the CAP?

60- Day Corrections

Individual Report Of
Noncompliance (IRON) Corrections

Subsequent Files

Completed
Rubric(s)/Action Plan(s)

Documentation of CAP
Activities

60- Day Corrections

Free Appropriate Public Education (FAPE) - prohibitive items must be corrected within 60 calendar days of the date noted in the Written Notification of Findings (WNOF).

The 60- day corrections should be prioritized. It is recommended all other non-compliant items be corrected within the same student file when making the 60- day corrections.

Individual Report of Noncompliance (IRON)

- The IRON is generated from student -specific findings of noncompliance during the monitoring.
- The PEA is responsible for correcting all student- specific non-compliance during the CAP year.
- IRON corrections will be verified by PSM Specialist(s) during CAP visits.
- The PEA must develop an internal tracking system to ensure all IRON items are corrected, such as utilizing the PEA checkbox on the original student file forms.
- Evidence of PEA tracking system for IRON items is required to evidence correction of all IRON items.

Subsequent Files

Subsequent files will be reviewed at CAP visits throughout the CAP year.

Subsequent files must contain a representative sample of the PEA population (ex: varied disability categories, English Learner students, varied service delivery models, varied grades, etc.).

Subsequent files should be “subsequent” to the most recent CAP visit to ensure the PEA has time to implement additional technical assistance and feedback.

Subsequent files are reviewed using the PEA specific modified student form and the guide steps from the year the PEA was monitored.

Subsequent files are reviewed by PSM specialist(s) and overall feedback is shared with PEA.

Rubrics and Action Plans

As part of the monitoring process, all PEAs are required to complete a rubric and action plan based on a self-selected Outcome Focus Area.

Depending on monitoring results, compliance rubric(s) and action plan(s) for Initial Evaluation Timeline and/or Secondary Transition will be assigned.

The CAP cannot close without the completed rubric(s) and action plan(s).

Documentation of CAP Activities

- For each area of noncompliance, the PEA must ensure there is a system in place for sustainability of compliance.
- Activities are documented in the PEA's CAP and can include:
 - *Individual and group trainings using Arizona Department of Education resources etc.*
 - *Creating documents, checklists, task analysis steps and procedure manuals.*
- PSM specialist will verify these activities through evidence of sign- in sheets, agendas, and other documentation as appropriate.

Modified Student Form

- Modified student forms are created for each individual PEA based on the PEA's identified areas of noncompliance found during the monitoring.
- During CAP visits, the PEA's modified student form will be used to review those components and/or line items that remain open in subsequent student files.
- Modified student forms change throughout the CAP process as the PEA evidences compliance and sustainability in components and/or line items.

CAP Visits

First visit is usually scheduled approximately 45 days after the monitoring to check the status of the 60 -day corrections.

Minimum of three subsequent visits.

PSM specialist will review subsequent files, IRON corrections, and evidence of any CAP activities presented by the PEA at each visit.

PSM specialists will bring additional team members, dependent on the quantity of documents indicated by the PEA to be reviewed.

CAP Visits (cont.)

CAP visits are not a typical file review and are not a training opportunity for the PEA or PEA team member(s).

The PSM specialist(s) will review files and provide feedback to the PEA SPED director (others as included by the PEA SPED Director).

Following the visit, the PEA will receive an updated CAP (within 2 weeks).

PEAs should review their updated CAP to verify changes made to components and/or line items and utilize feedback to plan for the next PEA CAP visit.

Preparing for the CAP Visit

Collect subsequent file sample:

- Ensure files have gone through the PEA verification process as outlined in the PEA's CAP
- Ensure file sample is representative of the PEA's CAP (campuses, disability categories, EL, evals, IEPs, etc.)
- Ensure all files included in the sample were completed **after** the last CAP visit
- Ensure files in sample include a complete IEP and/or evaluation

Include IRON items completed since the last CAP visit.

Provide any documentation for CAP activities completed and not yet reviewed by PSM specialist.

Preparing for the CAP Visit (cont.)

Complete rubric(s) and action plan(s) if not yet completed and submitted to PSM specialist.

Plan adequate space based on the number of PSM specialists (verify with your assigned specialist).

Plan time to debrief with the PSM specialist. Be sure to ask the PSM specialist when this may occur.

- To close a CAP, the PEA has to come into compliance with [OSEP 09-02 Memo](#) through:
 - **Individual Report of Noncompliance (IRON)** – correction of student-specific items found out of compliance
 - **Systemic Change** – evidence of fundamental changes within PEA systems
 - **Sustainability** – evidence of continuous implementation of systemic changes

One -Year Timeline

Evidence	Evidence	Complete	Provide
PEA must evidence systemic correction and sustainability	PEA must evidence correction of all IRON items	PEA must complete all rubric(s) and action plan(s)	PEA must provide verification of CAP activities

Potential Roadblocks to Timely CAP Closure

Maintaining minimal to no evidence of CAP activities

Focusing on one part of the CAP process rather than all required pieces

Not correcting all instances of noncompliance in files that require 60- day correction

Failing to complete required rubrics and action plans

Not using updated PEA CAP to drive subsequent file sample provided to PSM specialist

Waiting to conduct CAP visits toward the end of the CAP year instead of spacing them out during the CAP year

Potential Enforcement Actions

- If the PEA fails to complete all required activities within the 60 day correction and/or one -year timeline, ADE/ESS may take any of the following actions:
 - Interruption of IDEA funds
 - Assignment of a special monitor
 - ESS development of a prescribed CAP with required activities and timelines
 - Enforcement of CAP activities outlined in current PEA CAP
 - Review and revision of the current CAP to develop targeted activities to address the noncompliance
 - For charter schools not receiving federal monies, withholding of up to 10% of state funds
 - For charter schools, notification to the State Board for Charter Schools

Additional Resources

- Monitoring Manual- [Please visit and reference the **Resources** tab to find the Monitoring Manual for the school year in which your PEA was monitored.](#)
- Guide Steps- [Please visit and reference the **Resources** tab to find the Guide Steps for the school year in which your PEA was monitored.](#)
- **Find your Program Specialist here** for questions specific to your Corrective Action Plan (CAP).