**APPENDIX – Sample *Corrective Action Plan***

**AZHSD 012345; Agency for Homeless Relief; May 15, 2019**

The table below summarizes the issues requiring action on your part. Where possible, a suggested target date for completion and/or corrective actions that may assist in resolving the issues has been identified. Please provide a response to the issues identified below by completing the table and attaching any relevant documentation. Please submit your response no later than July 1, 2019.

|  |  |  |  |
| --- | --- | --- | --- |
| **Issue/Concern** | **Corrective Action** | **Status** | **Target****Date** |
| Progress reports were delinquent in two consecutive quarters | Improve data entry to complete reports on time | In progress | 07/01/19 |
| Insufficient child care services for parent participating in job training program | Review budget to determine if funds can be reallocated to meet this need | Not started | 07/01/19 |
| Program falling below target for number of clients completing mental health screening | Determine if the issue is client reluctance or service availability and respond accordingly | Not started | 08/01/19 |