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Self-Assessment Corrective Action Process and Planning

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 revised Federal child support enforcement audit rules by passing from the Federal government to states the responsibility for conducting an annual review to determine if Federal requirements are being met. This annual self-assessment was designed as a management tool, to help states evaluate their child support enforcement programs and identify areas that need improving.

As discussed in the self-assessment regulations at 45 CFR 308, a state must describe how it will change its child support enforcement program to better achieve the goals of the program and the benchmarks of self-assessment. The actions described should be clearly aimed at solving all the problems identified in the self-assessment and to assist the state in evaluating its own performance against the eight program criteria specified in the regulations.

The self-assessment regulations stipulate that a state that is failing one or more of the self-assessment criteria must complete a corrective action plan. However, the regulations do not prescribe a criteria or methodology for creating or developing such a plan. Given this, it is the goal of this TEMPO to provide states with directions for creating a corrective action process as well as to provide suggestions for evaluating program practices and processes for the corrective action plan.

What Constitutes Developing a Corrective Action Plan

A corrective action plan may embody several different forms. One state's corrective action plan may not resemble another state's in its unique design or creative approach for finding solutions to child support case management problems. Ultimately, the corrective action plan must be an ongoing administrative process, utilizing the self-assessment efficiency scores to

develop effective methods of eliminating errors or problems found during the self-assessment review process. With the enactment of PRWORA and to ensure broad input, the Office of Child Support Enforcement (OCSE) designated a self-assessment core workgroup to consult with a wide variety of program stakeholders to get their recommendations on: the criteria to be covered in annual reports to the Secretary; the methodology for reviewing the criteria; and an approach for reporting the results of these reviews. OCSE considered these recommendations in developing the proposed rule that preceded the final regulations on self-assessment. As part of the recommendations, the self-assessment core workgroup defined their expectations and the objectives of the corrective action process. These expectations and objectives are as follows:

A corrective action process details the causes and effects of non-compliant criteria. It also identifies errors and explains the direct and indirect cause of the errors with the intent of developing an on-going process to correct identified problems.

To meet this definition of a corrective action process requires active participation and commitment of top management in a state's child support enforcement agency. Top management commitment is vital because sometimes the corrective action process can require the allocation of significant staff and automation resources. Without the allocation of sufficient resources, the process may fail to provide its intended goal: improvement in program performance. Top management participation in the process and their commitment to the details of the corrective action process will lead to improved performance.

Once top management participation and commitment has been achieved, a systematic approach should be applied to the corrective action process and this approach should include the components shown in figure 1, next page.

Figure 1: Components of Systematic Approach to the Corrective Action Process

1. Establish statistically reliable data that identifies where problem areas exist.
2. Identify the problem areas.
3. Perform in-depth quantitative and/or qualitative analyses revealing the root causes of the problem areas.
4. Develop action steps that need to be taken to correct any identified problems.
5. Create a defined schedule for proceeding with the identified action steps.

Establish Statistically Reliable Data that Identifies Where Problem Areas Exist

Before you build your corrective action process, you first need to ensure that your data are both valid and reliable. This is vital because, naturally, you do not want to make policy and management decisions based on inaccurate information. To check the validity and reliability of your self-assessment information, you should evaluate your self-assessment sample results. To do this, the OCSE Office of Audit suggests you use the confidence interval method. By doing this, you can be sure that the sample size accurately reflects your state's child support caseload.

As we stated in the *Statistical Sampling for Self-Assessment* TEMPO (OCSE-DCL-02-08, page 16), there is an inverse relationship between the level of confidence and the precision or width on a confidence interval. The greater the confidence, the wider the limits and therefore the less precision the analyst has about a finding. For example, if you use confidence limits to guess the mean support order amount of non-custodial parents in your caseload and you use very wide limits, such as \$50.00 to \$500.00, you will have greater confidence that the intervals include everyone in the caseload but very little precision. Management could not base policy and case management decisions on this kind of information.

Since self-assessment's primary goal is to provide management information, it should be the goal of the evaluator to have precision while allowing for a small amount of error. See the

Statistical Sampling for Self-Assessment TEMPO for an at-a-glance method of calculating error and determining sample size at a 95% confidence level. When evaluating the sample results, the results should be applied to both statewide samples as well as focused samples.

If your sample has both sufficient precision and confidence, you may proceed with drafting the corrective action process, assured that you can make management and policy decisions based on the self-assessment data.

Identify the Problem Areas

Once your sample results have been evaluated, you are ready to identify the problem areas. One of the easiest methods to use is the Pareto chart. Consider using the Pareto chart if you discover several problems and need to decide which problem to solve first. A Pareto chart may also be used to categorize self-assessment efficiency scores into manageable areas.

The Pareto chart was developed by Vilfredo Pareto, a nineteenth-century Italian economist whose statistical work focused on inequalities in data. He proposed that most “activity” is caused by relatively few factors.¹ Pareto’s concept is called the 80-20 rule, whereby 80 percent of the errors are caused by 20 percent of the factors. Hence, by concentrating on the 20 percent of the factors, managers can attack 80 percent of the problems.²

A Pareto chart is organized in the following manner (see Figure 2 on page 8):

1. Factors are plotted in decreasing order of frequency.
2. Factors are listed along the horizontal axis.
3. Each Pareto chart has two vertical axes, the left one showing the frequency, similar to a histogram, and the right one showing the cumulative percentage of frequency.

¹ Krajewski and Ritzman, *Operations Management Strategy and Analysis* (Massachusetts: Addison-Wesley Publishing, 1996), p. 163.

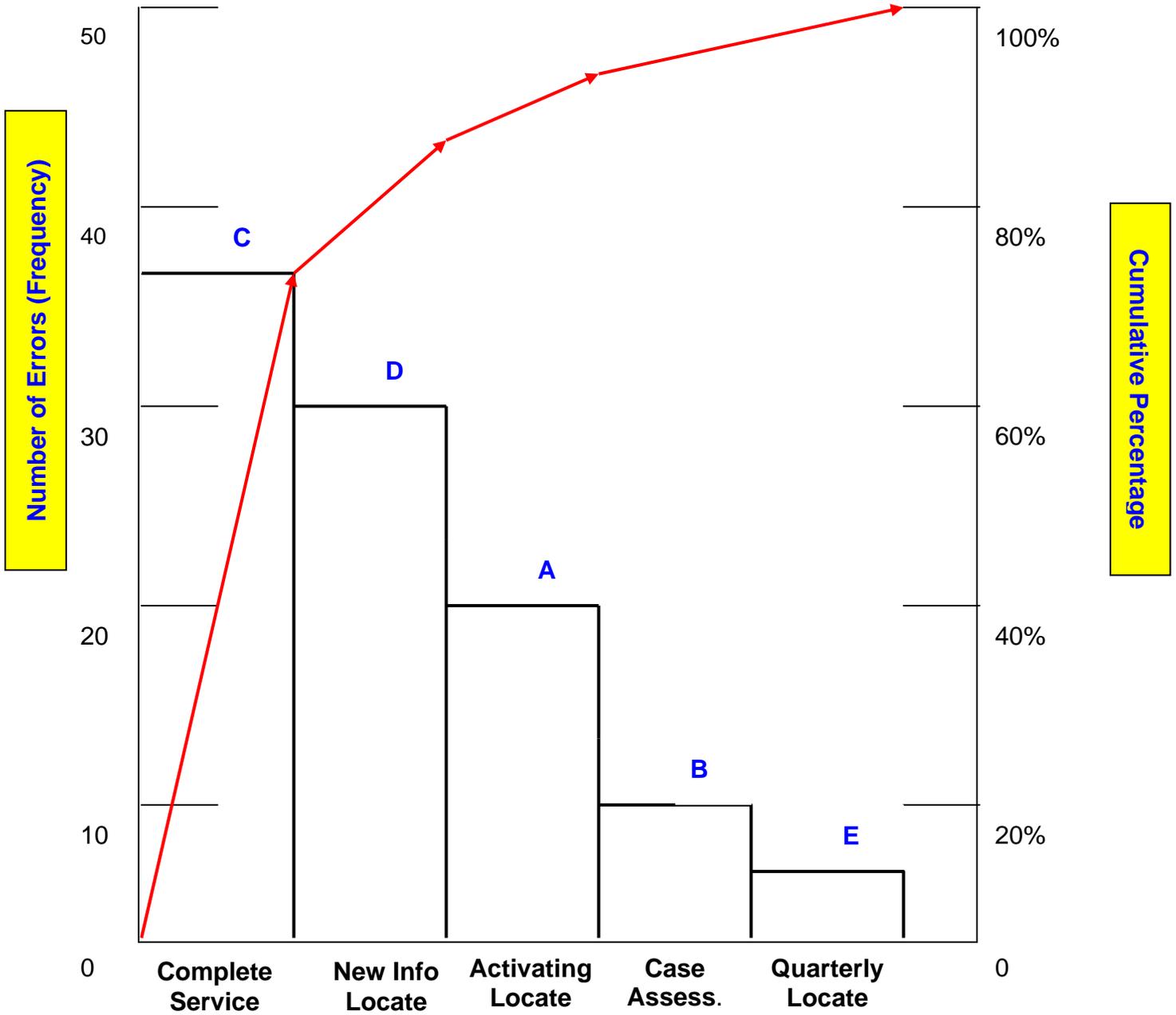
² Ibid.

4. A cumulative frequency curve identifies the few vital factors that warrant managerial or corrective action process attention.

When using a Pareto chart, keep in mind that the cumulative frequency curve identifies how much a particular factor contributes to the larger problem. For example, the sample Pareto chart in Figure 2 reveals a “snapshot” of the paternity and order establishment criterion. The “snapshot” lists all the components (sometimes known as subsets of the criterion) on the horizontal axis. Next, it details the number of errors associated with each component. As we see from the cumulative frequency curve, the complete service component clearly contains the most errors. The cumulative frequency curve shows that complete service accounts for nearly 80 percent of the problem in this criterion, in keeping with Pareto’s 80-20 rule.

The Pareto chart is only the second step in crafting a successful corrective action process. The chart identifies that a problem does exist and that the problem needs to be explored further and in greater detail. This exploratory course of action is essential to creating an effective corrective action process because it provides the initial insight that allows us to proceed to the next step in the systematic approach, which is to uncover the root causes of problems.

Figure 2: Pareto Chart



Case Actions - Paternity and Order Establishment
Displayed as steps A - E

Perform In-Depth Quantitative and/or Qualitative Analyses Revealing the Root Causes of Problem Areas

One of the most critical components in the corrective action process is identifying the root causes of problems. Without identifying root causes—or by misidentifying roots causes—resources can be needlessly wasted and the program may develop strategic difficulties that can put it on the wrong path and render it incapable of improving performance. The process of constructing the cause and effect diagram brings both management and analyst attention to the primary factors affecting performance for each category of the self-assessment.

Many tools can help you determine the root causes of problems. The challenge you face in utilizing these tools is using them properly, without skipping steps or cutting corners, and knowing which tool to apply in what situation. If you skip steps or cut corners you will have incomplete information—and thereby unreliable data—on which to base management decisions.

In this section we will discuss the following three root cause analysis tools:

1. Cause and effect diagrams
2. Flow charts
3. Process chart

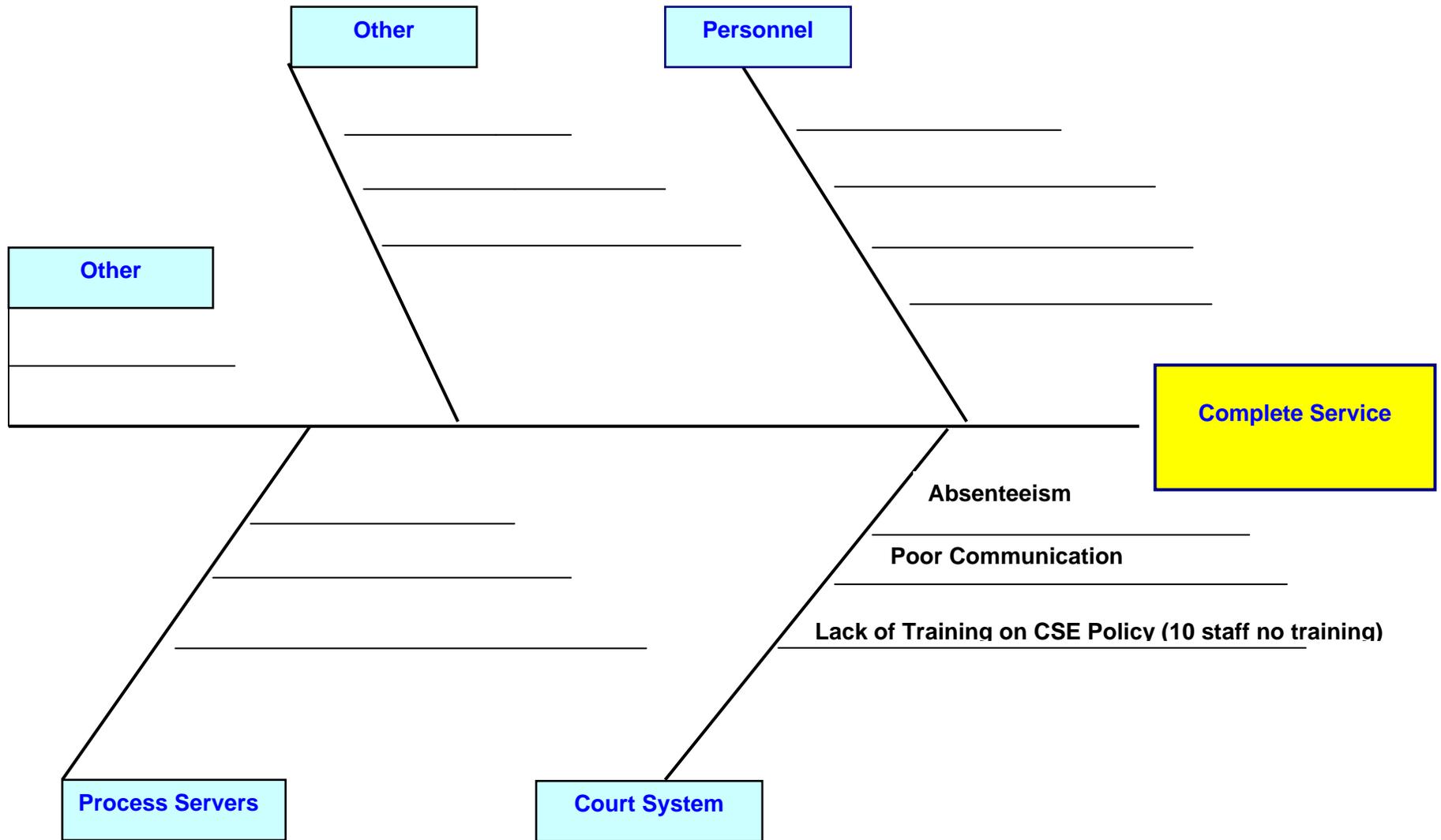
Cause and Effect Diagrams

The cause and effect diagram is most often used to identify design problems. It relates key problems to their potential causes. The diagram helps to trace errors directly to the operations involved. Cause and effect diagrams are sometimes called “fishbone” diagrams because of their resemblance to the skeletal system of a fish.

A cause and effect diagram allows you to organize the information that surrounds the problem or error. Further, it allows for total brainstorming and ensures that you have

accounted for all causes of problems. As shown in the example on the following page, the main error or problem is labeled as the fish's "head," the major categories of the potential causes are the structural "bones," and the more specific causes are the "ribs."

Figure 3: Cause and Effect Diagram



Using the paternity and order establishment example from the Pareto chart, the fish's "head"—that is, the main error or problem—would be "complete service." The structural "bones"—that is, the major categories of potential causes—might include the court system, process servers, and order establishment personnel.

Finally, the "ribs"—that is, the specific causes, which can be listed in order of importance with data supporting the ordered list—might include, under the court system category, a lack of training on child support policy and procedures. Documentation supporting this lack of training on child support policy and procedures would also be included on the "rib." This documentation can be obtained by qualitative interviews with staff and/or by a review of documentation contained on the automated system (if the documentation pointed to a clear lack of training). The documentation would reflect the number of staff who indicated that they did not have training on child support policy and procedures. Other specific causes which might be included on the "ribs" in this example are absenteeism and poor communication between the court system and the child support program. Everything on the "ribs," then, illustrates specific causes for the major categories of problems/errors associated with complete service.

Flow Charts

Flow charts systematically map the details of a specific program aspect or process to allow for better understanding of it. This tool should be applied to operations having one or more of the following characteristics:

- The process is slow in responding to customers. A customer can be defined as any outside entity that interacts with the program, such as a custodial parent, non-custodial parent, court, governors office, etc.
- The process results in too many problems or errors.
- There is a suspected bottleneck in the process with work piling up waiting to go through it.
- There is little value added in the process. For example, the process does not add to a specific outcome such as establishing orders.

The process of flow charting involves breaking a process into detailed components. To do this a series of questions should first be asked, as shown in the figure below.

Figure 4: Flow Charts—Series of Questions to Ask³

First ask the following series of questions:

1. What is being done?
2. When is it being done?
3. Who is doing it?
4. Where is it being done?
5. How long does it take?
6. How is it being done?

Then ask another series of questions to challenge the answers to the previous questions:

1. Why is the process being done?
2. Why is it being done where it is being done?
3. Why is it being done when or for how long it is being done?

Answers to questions such as those shown above in Figure 4 can often lead to creative answers that can result in a breakthrough in the design of the process. Given this potential, you should brainstorm with other staff on as many aspects of the process as possible and list as many solutions as possible. By doing this, you may be able to eliminate many unnecessary functions or processes, thereby saving time and money and improving outcomes.

Many individuals have a preferred format to use when constructing a flow chart. Technically, however, a flow chart may be drafted minimally with boxes, lines, and arrows

³ Ibid., p. 116.

(see Figure 5 on page 16 for a sample flow chart). For the corrective action process, you should use the format that works best for your program.

When constructing a flow chart that describes a process, it may be useful to construct more than one, taking into consideration how the process may be seen from the perspective of different customers (e.g., the custodial parent, the non-custodial parent and the child support enforcement (CSE) agency itself). For example, a flow chart of an enforcement tool such as income withholding would look very different from these three different perspectives. The custodial parent would (ideally) only see money going into her account, the non-custodial parent would receive a notice that his wages were going to be garnished by income withholding to pay his child support responsibility, and the CSE agency would flow chart the process of locating the non-custodial parent, sending the income withholding order/notice to the employer, receiving the funds and transferring them to the correct accounts. Then you might realize you also needed to flow chart the employer's interface with the income withholding process as well.

Further, process measurements are also helpful to include beside each box of the flow chart. Such measurements include:

- Total elapsed time
- Error frequency

Many organizations, such as state audit divisions, already have detailed flow charts of the program's case work processes. Often, these processes were charted when the program began creating its new automated system. It is helpful to look at these official flow charts and use them as reference material. However, these official flow charts should not be used to conduct root cause analysis for two specific reasons:

1. Frontline workers may have changed a practice that was originally included in the official flow chart. Whether or not the new practice helps or hinders the process, it should be re-

charted and documented to determine how it works with the larger case-processing scheme.

2. Frontline workers may be using outdated materials, or they may have created their own new, and they think better, materials. Again, whether or not the outdated materials or the newly created materials are better, worse, or redundant, re-chart the practice to determine exactly its impact on the larger case-processing system.

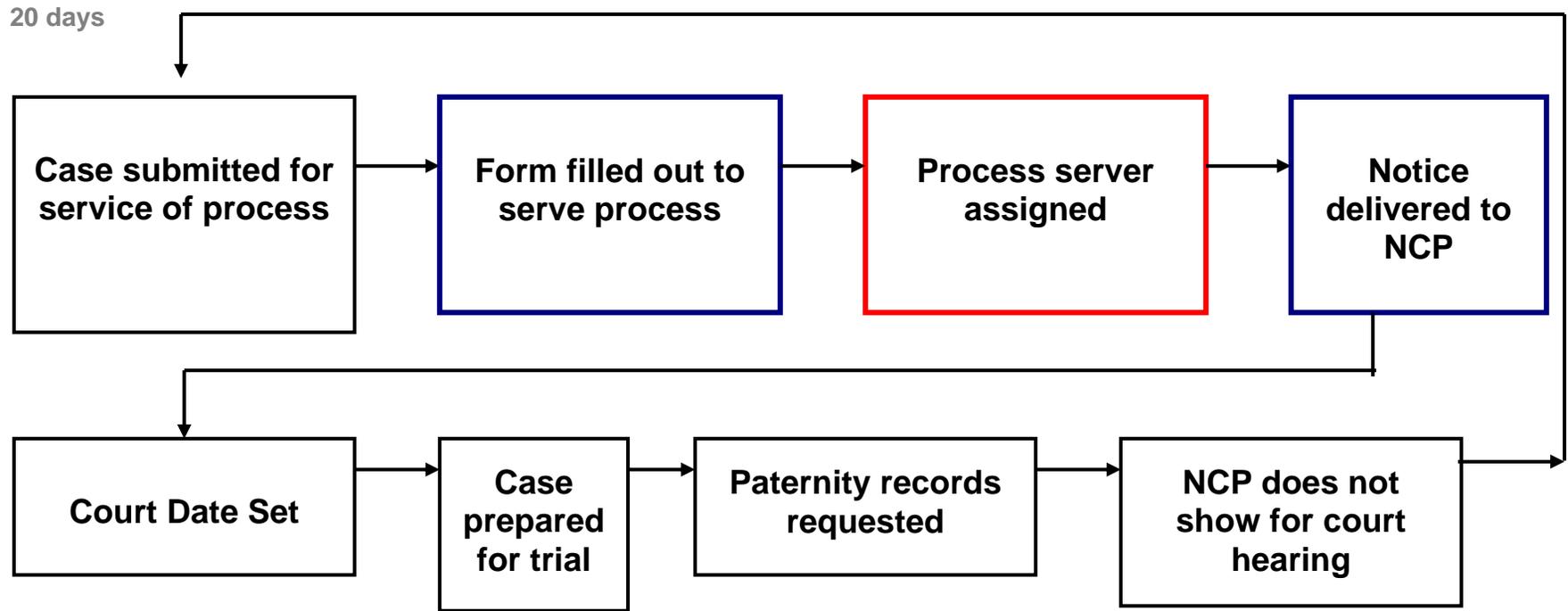
In addition, official organizational flow charts are useful for cross-referencing purposes and they provide a map with a clear case processing strategy. However, child support case work, as with most organizational processes, is interactive and involves many entities. These entities may experience a change in management, organization, or a change in legislation, law, or regulation. Given this, if a program wants to determine the root cause of a problem, it is always smart to create a new flow chart. This will allow the program to capture the most current processes and thereby hope to identify the root cause of any problem.

Figure 5: Flow Chart

Process: Paternity and Order Establishment

Subject Charted: Complete Service

Beginning: Case submitted for service of process



Ending: Order established

Process Chart

A very useful and simple technique for determining the root cause of any problem is process charting. A process chart is an organized way of recording all the activities performed by an employee or customer. Usually a process chart is grouped into at least five categories:

Figure 6: Process Chart Categories

Process Chart Categories	
1. Operation	Records a change, creates or adds something.
2. Transportation	Moves the study's subject from one place to another. The subject can be a person, a case file, a custodial parent or a non-custodial parent, etc.
3. Inspection	Checks or verifies something but does not change it.
4. Delay	Occurs when the subject is held up waiting for further action. For example, waiting for a copy of a court order from the district court's office.
5. Storage	Occurs when something is put away until a later time. For example, filing a case file into a file cabinet.

These five categories are most commonly used; however, you may use other categories depending upon the situation.

Figure 7 on the next page represents an example of what a process chart could look like. However, you may modify or create your own process chart that may better represent the categories and subjects more common to your program. If you decide to create your own process chart, it is important to include:

- The number of steps
- Amount of time it took to do each task
- Distance traveled to complete the task

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Figure 7: Process Chart

<p>Process: Serve process for paternity and order establishment cases</p> <p>Subject Mapped: Preparing case for hearing.</p> <p>Beginning: Process has been served</p> <p>Ending: Case is ready for court.</p>			Summary						
			Activity	Number of Steps	Time (Min)	Distance (ft)			
			Operation λ	1	3	1			
			Transport \langle	2	11	16			
			Inspect ν	1	1	6			
			Delay ω	1	15	10			
			Store τ	1	3	1			
Step no.	Time (Min)	Distance (ft)	λ	\langle	ν	ω	τ	Step Description	
1	8	15 ft		X				Case worker receives case.	
2	3	1	X					Print necessary documentation.	
3	3	1					X	Place supporting documentation in file until needed.	
4	3	1		X				Send required documentation to court.	
5	1	6			X			Inspect case file.	
6	15	10				X		Documentation missing in case file.	

Once this information has been recorded, it can be analyzed to determine whether the process by which the function is organized should be modified to improve efficiency.

The three root cause analysis tools discussed in this section—cause and effect diagrams, flow charts, and process chart—all provide sound techniques to assist in identifying the root causes of operational problems.

Develop Action Steps that Need to be Taken to Correct Any Identified Problems

Now that you have determined that your data are accurate and you have figured out the root causes of your problems, you need to determine the action steps to correct the problems.

There are five action steps that should be a part of any corrective action process:

Figure 8: Five Action Steps for Corrective Action Processes

1. Developing a plan that outlines quantitative goals for improvement.
2. Implementing the plan.
3. Monitoring the corrective action's progress.
4. Analyzing and monitoring data to determine how closely the data corresponds to the goals set forth in the plan.
5. Documenting the process so that it becomes the standard procedure for all who use it.

Developing a Plan that Outlines Quantitative Goals for Improvement

An essential step in developing the corrective action process is to develop a plan that outlines how the program will attempt to correct the problem or errors identified. The plan should include:

- An assessment of costs and benefits for fixing the problem
- Alternative solutions
- An implementation strategy
- Quantifiable measures for improvement

Some plans may include more or less detail concerning each of the bulleted points. However, all plans at a minimum should include information pertaining to these bulleted points.

Assessment of Costs and Benefits

Each plan should contain an assessment of the costs and the benefits for fixing the problems or errors. Some examples of what the assessment could include are:

- Costs for any modification to the automated system
- Costs of not fixing the problem (e.g., redundant casework, caseworkers spending more hours on the phone with customers trying to manually fix cases)
- Approximate hours of labor
- Hours for training on the new procedure/process
- Benefits of fixing the problem (e.g., caseworkers spending less time on the phone and more time working the cases, higher productivity due to increased resources)

Alternative Solutions

Compiling a list of alternative solutions can be very beneficial, especially if later monitoring reveals that the implemented solution did not work as planned. Should this happen, you can look to your list of alternative solutions to determine a better solution to implement.

Implementation Strategy

The implementation strategy should cover the anticipated process for putting the plan in place. You should take time to ponder the “what if’s.” For example, try to construct a list of

what could possibly go wrong during implementation and how you would fix it. This can reduce the chance of being caught off guard should something go wrong during implementation.

Quantifiable Measures for Improvement

The most important step is to develop quantifiable measures of success. Quantifiable measures will allow you to know if you have fixed the problem. The measures should contain both process measures as well as outcome measures. We suggest having both because process measures help in determining exactly where something went wrong and outcome measures demonstrate the significance of the identified problem area. A frequency distribution of error causes is a good example of a process measure and a self-assessment criterion efficiency rate is a good example of an outcome measure.

Implementing the Plan

For effective implementation, you must collect data continuously to measure improvements in the process. You should document any changes or departures from the original plan. Should the original plan change, you should revise it to reflect the changes. By doing this, you create an up-to-date record of what it has and has not accomplished with respect to the plan.

Some points you should think about when implementing the plan are:

- How often should the program collect and analyze its data?
- What are the costs associated with collecting the data?
- What are the costs associated with not collecting the data? Can the program afford not to analyze this problem?
- How should the data be collected and analyzed? Will it take a team of analysts to collect the data manually, or can it be done through an ad hoc report?
- Is the system put in place to collect the information so cumbersome that it will defeat the purpose of collecting the data?

Analyzing and Monitoring Data to Determine how Closely the Data Corresponds to the Goals Set Forth in the Plan

Once you have implemented a new process to fix problems or errors, monitoring the effectiveness of the new process can save dollars, resources, and re-work later on. For example, sometimes fixing a process can cause a problem in another area or procedure. Without monitoring, you will not discover this problem until it is too late and the damage has been done.

To effectively monitor, you should collect and analyze data to determine how closely the data corresponds to the quantifiable measures set forth in the plan outlined above. If major shortcomings are apparent, you should reevaluate the plan. When you reevaluate your plan, pose these questions to gain greater insight into the shortcomings:

- What is an acceptable level of departure from the quantifiable measures set forth in the plan?
- What is an unacceptable level of departure from the quantifiable measures set forth in the plan?
- What are the costs of going forward should there be major shortcomings?

Should the monitoring reveal little or no shortcomings, the corrective action process should proceed to the next action step.

Documenting the Process so that it Becomes the Standard Procedure for All Who Use It

If the results of the implementation are successful, you should officially document the revised process so that it becomes the standard procedure for all who may use it. Documenting the procedure usually consists of including it in the program's policy and procedures manual as well as sending notification of the new process to all employees.

Create a Defined Schedule for Proceeding with the Identified Action Steps

Now that we have clear and precise action steps for the corrective action process, the next task is to develop a schedule for proceeding with the action steps. To accomplish this, you must carefully analyze what needs to be done. Give thought to determining how long it will take to draft a clear, concise, and succinct plan and its associated quantitative goals. Once you have drafted the plan and the goals and it has been agreed upon by all the necessary parties, you need to give consideration to implementing the plan. Unfortunately, many organizations let too much time pass between the planning steps and the implementation steps. When this occurs, the plan usually becomes watered down because the organization's enthusiasm for the plan has waned and it therefore lacks the momentum to improve.

Monitoring should be an on-going process. However, as we pointed out in the above steps, consideration should be given to how often the program should collect and analyze the data. Further, thought should also be given to the availability of the organization's resources. To make this task manageable given these considerations, you should create a controllable schedule and adhere to it. This makes the task of monitoring and analyzing the data much easier to accomplish.

What is the Structure of the Corrective Action Process?: A Collaborative Effort in an Organization

Where Does the Corrective Action Process Fit and Who Should Conduct It?

Many programs question where exactly the corrective action process fits in a child support organization. This question is not easily answered because there is not one right place, but several, depending on the structure of your organization. To determine the right spot within your organization for the corrective action process, you must first look at the set-up of your organization and base your decision on its internal structure. For example, if your organization is a state/centrally-administered program, you would put the corrective action

process in a different part of the organization then you would if it was a county-administered program.

No matter where you locate the corrective action process, it should be based upon the premise that it is a collaborative team effort involving several individuals throughout the entire organization. Who should shape the corrective action process really depends on the program's internal structure. When determining who should shape the corrective action process, there are some guiding principles, as shown in Figure 9.

Figure 9: Guiding Principles for Determining Who Should be Responsible for the Corrective Action Process

- For a corrective action process to be successful, it must engage all individuals it impacts.
- Employees feel valued and empowered when they are given the opportunity to find solutions to their work/caseload problems/errors.
- The corrective action process provides the rare opportunity to empower the entire program to achieve success.
- Individuals from outside the program do not usually have the trust of the employees or the knowledge of intricate program details.

Given these principles, you should determine who should do the corrective action.

Many child support programs struggle with finding resources to commit to the corrective action process. Given budget constraints and overwhelming caseloads, program directors often find that they cannot hire new staff to tackle such a process. As a result, some programs have created corrective action teams using experienced existing personnel.

Such corrective action teams are designed to tackle all the corrective action needs of an organization. The corrective action team should involve a small group of employees from all levels to create solutions to problems and should:

1. Have a common purpose
2. Set their own performance goals and approach
3. Hold themselves accountable for success

The philosophy behind the approach is that the people who are directly responsible for providing the services will best be able to consider ways to solve problems regarding the service.

A corrective action team differs from a more typical working group, as outlined in the figure below.

Figure 10: Characteristics of a Corrective Action Team

1. Members have a common commitment to an overarching purpose that all believe in and that transcends individual priorities.
2. Leadership roles are shared rather than held by a single leader.
3. Performance is judged not only by individual contributions, but also by collective work products that reflect the joint efforts of all the members.
4. An objective is open-ended discussion rather than a managerially defined agenda.
5. Members of the team do real work together, rather than delegating to subordinates.

Many states have encountered problems with teams they had worked with in the past. These problems ranged from members not being committed to the process to the team being a part of a larger negative environment. Research concerning teams has concluded that the management of the team plays a vital role in its success.⁴ According to this research, the approaches shown below in Figure 11 lead to more successful teams.

⁴Ibid., p. 147.

Figure 11: Approaches for More Successful Corrective Action Teams

- The team's project should be meaningful with well-defined performance standards and direction.
- Particular attention should be paid to creating a positive environment, especially at the first few meetings.
- Team members should create clear rules on issues such as attendance, openness, constructive confrontation, and commitment to the team.
- To foster a sense of accomplishment, the team should set a few immediate performance-oriented tasks and goals that will allow them to achieve some early successes.
- People outside the team should be consulted for fresh facts and information.
- If possible, team members should spend a lot of time together to foster creative insights and personal bonding.
- Managers should look for ways beyond direct compensation to give the team positive reinforcement.

How is the Corrective Action Implemented?

Implementing the corrective action is one of the most challenging aspects of the corrective action process. How to implement it depends upon the approach you took to create the corrective action process. And, again, there is not one way of implementing the process. However, there are some questions the organization should put forward and consider to aid in implementation. These questions are shown in figure 12 on page 27.

Figure 12: Questions to Guide Corrective Action Implementation

- If you are using a corrective action team, does the team have the authority to suggest and make the changes? From whom do they receive their authority?
- Should the changes be implemented from the bottom up or top down?
- How can the organization ensure staff are held accountable for changing?
- What priority should the changes take in the course of the day-to-day workload of the organization?
- How can the organization ensure that there are adequate resources for administering the change?

While these questions do not provide a road map to successful implementation, they do create a structure for organizing it. Further, they ensure that the program considers all the challenges before embarking on the task.

How to Make Corrective Action Part of a Larger Initiative to Increase Program Performance

When the first self-assessment core workgroup met in the summer of 1997, its goal in formulating the self-assessment process was to create an efficient management tool that would help focus on core program functions. The workgroup also hoped that CSE programs would make the self-assessment corrective action process part of a larger initiative to improve overall program performance. To accomplish this, the workgroup believed a program would need to start to use the self-assessment report to develop and interpret the relationship between performance and compliance. To do this, the self-assessment report needed to be analyzed to determine whether there is a direct or indirect relationship between compliance and performance. Presently, there are many opinions about whether the data from the OCSE-157 Report can be compared with self-assessment compliance data. Until a statistically valid and reliable method is presented to the states, the best way to analyze both performance and compliance data is through the process of benchmarking and comparing internally the difference between the self-assessment scores and the state's results from the

OCSE-157 Report. The tools outlined in this TEMPO may be adapted to conduct analyses related to the program performance measures/indicators. This will allow you to complete a more robust evaluation of your program.

Components of the Corrective Action Plan

Many states have asked us to provide an example of a solid corrective action process and plan. Further, states wanted to know how to set up this process within their self-assessment reports. With the help of the self-assessment core workgroup, we developed a list of the components of a corrective action plan. These components are designed to allow a program to have creativity in their own specific design yet ensure all necessary parts are included.

The corrective action plan within the self-assessment report should include the components shown in the figure below.

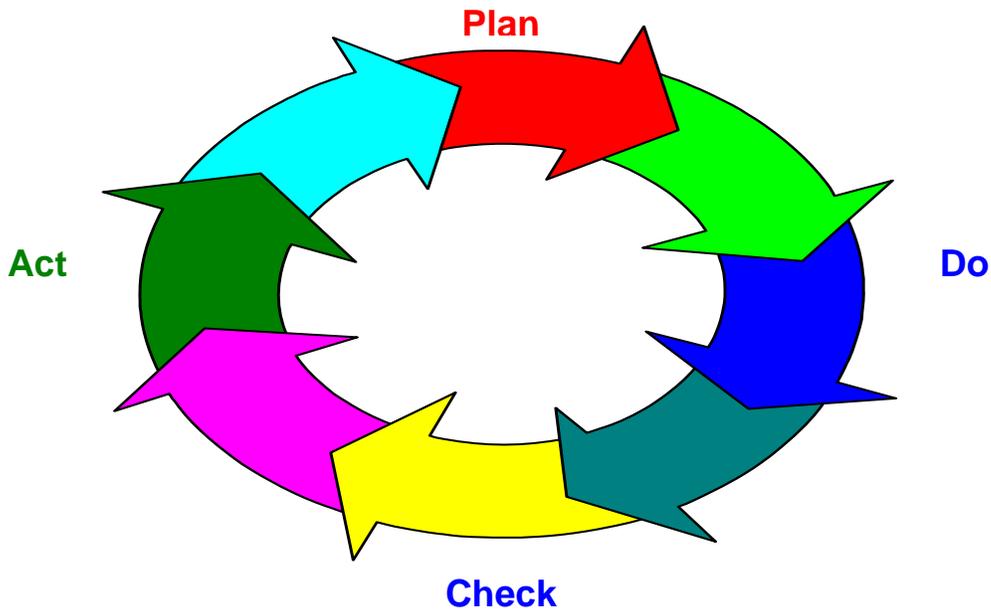
Figure 13: Components of Corrective Action Plan in Self-Assessment Report

Corrective Action Components	
1.	Details concerning the cause of any errors or problems during the self-assessment review. <ul style="list-style-type: none">• Explain and cite the root cause analyses performed. You could include your own process chart, flow chart, Pareto chart, or fishbone diagram.• Include a list of factors that are influencing performance and preventing the state from meeting the compliance benchmark.
2.	Describe the action used or implemented to stop the errors. <ul style="list-style-type: none">• Describe possible alternatives to the implemented action (should the chosen action not succeed).• Describe the pros and cons of the action and each alternative action.
3.	State general timeframes for fixing the problem/errors. <ul style="list-style-type: none">• Explain short-term vs. long-term fixes.• Determine benchmarks.
4.	Implement a monitoring process and plan (as describe earlier in this TEMPO) to determine whether the proposed solution to the problem worked or created another problem.

Corrective Action Components	
	<ul style="list-style-type: none">• The monitoring plan should explain whether the program has progressed to its self described goal.• The monitoring plan should also reveal whether there is enough data to continue with the proposed corrective action.
5.	For each self-assessment report, the state should look back to the previous year's corrective action and report any changes in the plan should the monitoring reveal that the plan did not produce the desired results.

The above table details all the components needed to produce an effective corrective action plan within the self-assessment report. The cycle is represented using the Deming Quality Wheel, as shown in the figure below.

Figure 14: Deming Quality Wheel (Plan-Do-Check-Act)



The cycle represents the steps in a method of problem solving resulting in continuous improvement. These steps are detailed in the figure below.

Figure 15: Continuous Improvement Steps⁵

Steps in the Process to Continuous Improvement	
1. Plan	<ul style="list-style-type: none">• Determine the procedure that needs to be improved.• Document the procedure by analyzing the data.• Set quantitative goals for improvement (include various ways to achieve goals, assess benefits, costs, and alternatives).• Develop the plan.
2. Do	<ul style="list-style-type: none">• Implement the plan and monitor its progress.• Collect data continuously to measure improvements.• Document any changes in the original plan.
3. Check	<ul style="list-style-type: none">• Analyze the data collected during the Do step.• The data should be analyzed to determine how closely the data corresponds to the goals set forth in the Plan step. If major shortcomings exist, reevaluate the plan or stop the project.
4. Act	<ul style="list-style-type: none">• If the results are successful, document the revised process so that it becomes the standard procedure for all who may use it. ⁶

Conclusion

A successful corrective action process contains the many essential elements outlined in this TEMPO. A corrective action plan should be:

- Management-oriented with a commitment to success in improving performance.
- Collaborative, engaging all who may be impacted in the organization.
- Based on a fully integrated progression of analysis, planning, implementation, and evaluation.

⁵ Ibid., p. 152.

⁶ Ibid., p. 182.

Ensuring the corrective action process incorporates these characteristics will lead to a more carefully crafted process that will have a greater impact in eliminating programmatic problems. However, each corrective action process should be tailored to the discrete needs of your state program. Further, as with any research and analyses tools, the corrective action process has its limitations. But even with these limitations, the corrective action process, applied as one of your management tools, increases the performance of your child support program.

Bibliography

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