

**NORTH CAROLINA
BREAST AND CERVICAL CANCER CONTROL PROGRAM / WISEWOMAN PROGRAM
Monitoring Committee Findings
& Corrective Action Plan Template**

Agency: _____

Date of Monitoring Event: _____

FY _____

After the monitoring event is complete, a summary of findings will be discussed by the monitoring team with provider staff at the end of the event. Copies of the monitoring reports will be sent to the appropriate members of the program staff within 60 days.

A Corrective Action Plan (CAP) needs to be submitted **and implemented within 60 days** addressing each out-of-compliance issue identified using the following template:

The Monitoring Team will re-evaluate 6-12 months after the corrective action plan is approved.

Continuation of the provider's service contract will be evaluated based upon the ability to meet performance indicators for delivery of contract services and monitoring criteria.

Compliance Issues	Agency Corrective Action Plan (CAP) Response	Person Responsible	Implementation Date