

### **Corrective Action Plans**

**Administrative Review Training** 



Presented by: Robbie Scott
Education Specialist II
ALSDE Child Nutrition Programs

# Agenda

#### Administrative & Procurement Review Training

presented by

Alabama State Department of Education Child Nutrition

#### AGENDA

w	ednesday
	mber 6, 2023

#### Gordon Persons Building Auditorium

#### Montgomery, AL



9:00	2	9:15	Registration	ALSDE Staff
9:15	8	9:20	Welcome	Robbie Scott Education Specialist ALSDE School Programs
9:20	•	9:25	Introductions	Julie Autrey Education Administrator ALSDE School Programs
9:25		10:30	ARTips for Success: Part   3260 Administrative Review	Chad Langston Education Specialist ALSDE School Programs
10:30	9	10:45	BREAK	
10:45		11:15	ARTips for Success: Part II 3260 Administrative Review	Joe Clark Senior Accountant ALSDE School Programs
11:15		11:45	DocuSign Review 3320 Administrative Review	Magen Anthony Education Specialist ALSDE Human Resources
11:45	-	1:00	LUNCH	
1:00	-	2:00	All About the Procurement Review 2420 Bid Solicitation and Evaluation	Steven Rylant Senior Accountant ALSDE School Programs
2:00		2:30	Corrective Action 3320 Administrative Review	Robbie Scott Education Specialist ALSDE School Programs
2:30	8	2:45	Guestions and Answers 3260 Administrative Review	ALSDE Staff
2:45			Closing Remarks and Evaluations	Angelice Lowe State Director ALSDE CNP

#### What Comes before the Corrective Action Plan?

Once every three to five years, School Food Authorities (SFA) receive an Administrative Review (AR).

TIMELINE		
Preliminary AR Report	discussed with SFA during AR exit conference	
Final AR Report	mailed to SFA within 30 days of exit conference	
Corrective Action Plan	completed by SFA and submitted to SA (State Agency) within thirty (30) days of receipt of final report	
SA Response	review and respond to SFA within 30 days of CAP submission from SFA	

### Corrective Action

7 CFR 210.18(j)

Corrective action is required for any violation under either the critical or general areas of the review. Corrective action must be applied to all schools in the school food authority, as appropriate, to ensure that deficient practices and procedures are revised system-wide.

# Types of Citations

#### **Critical**

#### Performance Standard 1:

all free, reduced price and paid school meals claimed for reimbursement are served only to children eligible for free, reduced price and paid school meals respectively; and are counted, recorded, consolidated and reported through a system which consistently yields correct claims.

#### Performance Standard 2:

reimbursable lunches meet the meal requirements in 7 CFR 210.10 as applicable to age/grade group reviewed. Reimbursable breakfasts meet the meal requirements in 7 CFR 220.8, as applicable to age/grade group reviewed.

#### General

Areas of review specified in paragraph (h) of this section. These areas include free and reduced-price process, civil rights, school food authority on-site monitoring, reporting and recordkeeping, food safety, competitive food services, water, program outreach, resource management, and other areas identified by FNS.

### Corrective Action

#### 7 CFR 210.18

Documented corrective action means written notification required of the school food authority to certify that the corrective action required for each violation has been completed and to notify the State Agency of the dates of completion. Documented corrective action may be provided at the time of the review or may be submitted to the State Agency within specified timeframes.

Corrective actions may include training, technical assistance, recalculation of data to ensure accuracy of any claim that the school food authority is preparing at the time of the review, or other actions.

#### Response to Corrective Action Plan A separate form should be completed for each citation. Response to CAP SFA: Agreement #: Citation #: Person Accountable for Results of CAP: Citation State the citation in the box below. Be sure that you understand the finding. Do not be afraid to ask questions, Work with the reviewer to understand the finding and the source of any data used in the finding. State the finding and interpret it in your own words. Explain how the SFA was noncompliant in the box below. Identify what the root cause was for the occurrence of the citation. Unless the problem is stated appropriately, finding the root cause and in turn, identifying the solution is not feasible. (Ex. lack of training; no monitoring plan in place; etc.) Complete this form for each citation. Corrective Action Date Corrective Action has been implemented, (Date plan was put into action.): In the space below, describe the steps that have been made to correct the finding. Be sure to demonstrate how the noncompliance will be permanently eliminated. Create simple, measurable solutions to address the root cause of the finding. What is the exact issue that is causing the problem? Devise a way to rectify the noncompliance. (Ex. Provided training or retraining; revise policies, procedures, menus etc. to make them compliant and set schedule for monitoring this issue.) Response to Corrective Action Plan A separate form should be completed for each citation. SFA: Agreement #: List the person(s) responsible for overseeing the corrective Citation #: up and monitoring of the plan: Person Accountable for Results of CAP: In the space below, list any evidence you are providing the eliminated. Evidence must show compliance. (Ex. of suppo Citation procedures, training agenda, training materials and sign st State the citation in the box below. Be sure that you understand the finding. Do not be afraid to ask questions. Work with the reviewer to understand the finding and the source of any data used in the finding. State the finding and interpret it in your own words. The SFA certifies that the corrective action for Sianature: Date:



### Person Accountable for Results of CAP:

The first step is to identify who will be responsible for completing the Correction Action Plan for the individual citation.

This will typically be the responsibility of the CNP director.

State the citation in the box below. Be sure that you understand the finding. Do not be afraid to ask questions. Work with the reviewer to understand the finding and the source of any data used in the finding. State the finding and interpret it in your own words.

The next step is to simply re-state the citation listed in the preliminary or final AR report provided by the auditor.

Explain how the SFA was noncompliant in the box below. Identify what the root cause was for the occurrence of the citation. Unless the problem is stated appropriately, finding the root cause and in turn, identifying the solution is not feasible. (Ex. lack of training; no monitoring plan in place; etc.)

Step Three: State the root cause of the citation.

Date Corrective Action has been implemented, (Date plan was put into action.):



Next step: Record the date that the SFA corrected the citation.

The correction must take place prior to the deadline to submit the CAP to the SA.

In the space below, describe the steps that have been made to correct the finding. Be sure to demonstrate how the noncompliance will be permanently eliminated. Create simple, measurable solutions to address the root cause of the finding. What is the exact issue that is causing the problem? Devise a way to rectify the noncompliance. (Ex. Provided training or retraining; revise policies, procedures, menus etc. to make them compliant and set schedule for monitoring this issue.)

Step Five: State the actual procedures that are being implemented to assure the root cause is addressed and the citation won't reoccur.

→ Be specific and detailed.

List the person(s) responsible for overseeing the corrective action and ensuring compliance as well as followup and monitoring of the plan:

The individuals can vary greatly, and communication is important to ensure that all individuals involved in the correction are clear of their roles and responsibilities.

In the space below, list any evidence you are providing that verifies the cause(s) of the finding are eliminated. Evidence must show compliance. (Ex. of supporting documents - Copy of written policy, written procedures, training agenda, training materials and sign sheets, current production records, temp logs, etc.)

Final Step: Supporting documentation for each citation **must** accompany the CAP for the SA to sign off that the AR is complete.

### SDE Approval Letter

Upon receipt of your CAP by the SA, the Response to CAP form along with supporting documentation will be reviewed by Audit and/or School Program staff.

The SFA's corrective action plan must provide enough detail so that the SA can determine whether the findings/issues were **fully** and **permanently** corrected.

Once the SA makes the determination that the CAP demonstrated full correction of each citation, the SFA will receive a notification letter regarding the approval of the CAP.



\*If the CAP isn't received by the 30-day deadline, the SA may withhold reimbursement until the CAP is finalized.

#### Offer versus Serve (OVS) Signage

Federal guidance states that students, servers and cashiers must be able to identify what constitutes a reimbursable meal. The NSLP regulation at 7 CFR 210.10(a)(2) requires that schools identify, near or at the beginning of serving lines, what foods constitute unit priced reimbursable meals. Schools using Offer versus Serve (OVS) must also identify what a student must select in order to have a reimbursable meal under OVS. Signage should be posted on the service line to assist students in identifying a reimbursable meal. Signage was not posted on the service line.

**CORRECTIVE ACTION REQUIRED** per preliminary AR Report

Signage must be posted on the service line to assist students in identifying a reimbursable meal as required by federal regulations.

Offer versus Serve (OVS) Signage

#### **INSUFFICIENT RESPONSE**

The OVS signs were not posted in the cafetorium.

- Our food service professionals have had extensive training in OVS. I am confident that each school program is only claiming reimbursable meals, based on their training. The nutritionist monitors each program and reports show no issues with Offer versus Serve.
- Cashiers in our school district are not required to have OVS training as their focus is entering the correct student number for an accurate meal count. The nutritionist will request signs from the State Office and send them out to the schools when they arrive. We always strive to do our best for the children.

#### SUFFICIENT RESPONSE

- Step 1 John Doe CNP Director
- Step 2 Our school district participates in Offer versus Serve (OVS) and must identify, through the appropriate signage, what a student must select in order to have a reimbursable meal under OVS. Federal regulations 7 CFR 210.10(a)(2) require signage be posted on the serving line to assist students in making choices for a reimbursable meal. That guidance also states servers and cashiers must also be able to identify what constitute a reimbursable meal. This provides additional assurance that only reimbursable meals clear the cashier station.
- Step 3 The underlying issue for receiving the citation was the director wasn't aware of the requirement and directing the focus of the cashier away from reimbursable meals and more towards accurate meal counts.

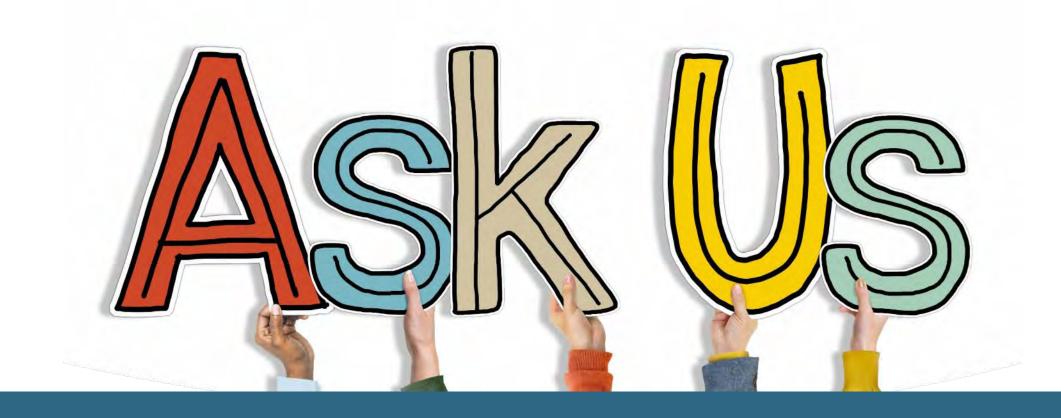
#### **SUFFICIENT RESPONSE (continued)**

- Step 4 00/00/00
- Step 5 At the conclusion of the exit conference, the CNP Director sent an email of high priority to each CNP manager, supervisor, and nutritionist informing them of the meal review finding and the Federal guidance for Offer versus Serve. The email instructed program managers to print and laminate the attached OVS signage and post them near or at the beginning of the serving lines for compliance with National School Lunch Program OVS requirements and to request additional signage as needed from the administrative assistant.

The same email announced a mandatory training on Offer versus Serve for CNP central office staff, managers, cafeteria serving staff, and cashiers that was held on 00/00/0000. Monitoring forms, used by supervisors, were revised 00/00/0000 to list each type of signage observed as opposed to "signage". The Assistant CNP Director will perform Quality Reviews on supervisors monitoring to ensure future compliance with OVS signage. The QR must be completed 10 days after the monitoring visit.

#### **SUFFICIENT RESPONSE (continued)**

- Step 6 supervisors will utilize monitoring forms and Asst. CNP Director will perform Quality Reviews on supervisors monitoring
- Step 7 Documents attached:
  - Email and Attachments
  - Revised Monitoring Form
  - Training Agenda
  - Training Attendance Sign-In Sheet
  - Responsibilities and Duties for Assistant Director



#### **USDA Non-Discrimination Statement**

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To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <u>USDA Program Discrimination Complaint Form</u> from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the

from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

\*This language was added pursuant to the May 5, 2022, USDA memorandum. However, the inclusion and applicability of this language is currently under challenge in the matter of *The State of Tennessee*, et al. v. USDA, et al., Case No. 3:22-cv-00257, and may be subject to change.