

## STATE OF TENNESSEE DEPARTMENT OF HUMAN SERVICES

CITIZENS PLAZA BUILDING 400 DEADERICK STREET NASHVILLE, TENNESSEE 37243-1403

TELEPHONE: 615-313-4700 FAX: 615-741-4165 TTY: 1-800-270-1349 www.tn.gov/humanservices

BILL HASLAM GOVERNOR DANIELLE W. BARNES
COMMISSIONER

November 14, 2017

Amber Adkerson, Owner Creative Minds Learning Academy 1030 Maxwell Avenue Nashville. Tennessee 37206

Dear Ms. Adkerson,

The Department of Human Services (DHA) - Audit Services Division staff conducted an on-site unannounced monitoring review of the Child and Adult Care Food Program (CACFP) at Creative Minds Learning Academy (Sponsor), Application Agreement 00-232, on October 10, 2017. Additional information was received on October 12, 2017 to complete the review. The purpose of this review was to determine if the Sponsor complied with the *Title 7 of the Code of Federal Regulations* (CFR) applicable parts, application agreement, and applicable Federal and State regulations.

#### **Background**

CACFP sponsors utilize meal count sheets to record the number of meals served for breakfast, lunch, supper and supplements meals served. Meals served by participating sponsors must meet the minimum guidelines set by the United States Department of Agriculture (USDA) and DHS to be eligible for reimbursement. The CACFP sponsor reports the number of meals served through the DHS Tennessee Information Payment System (TIPS) system to seek reimbursement. We inspected meal counts sheets for our test period and reconciled the meals claimed to the meals reported as served for each meal service. We also assessed compliance with civil rights requirements. In addition, we observed a meal service during our unannounced visit on September 07, 2017.

Our review of the Sponsor's records for September 2017 disclosed the following:

## 1. The Sponsor improperly classified eligibility of the CACFP participants

#### Condition

The Claim for Reimbursement for the test month reported 31 participants in the free category, seven participants in the reduced-price category, and nine participants in the paid category. However, our review of the Sponsor's records showed that there were 33 participants in the free category, one participant in the reduced-price category, and 13 participants in the paid category.

- The Sponsor over reported two participants in the free category and four participants in the reduced-price category, and underreported six participants in the paid category.
- Two participants were moved from the reduced-price category to the free category.
   Participants were categorically eligible due to enrollment in the child certificate program.
- Two participants were moved from the paid category to the free category because.
   Participants were categorically eligible due to enrollment in the child certificate program.

There were 47 participants claimed and confirmed enrolled in CACFP. The adjustment in the free, reduced-price, and paid categories affected the claiming percentages. (See Exhibit)

This is a repeat finding from a previous report dated May 27, 2014

#### Criteria

Title 7 of the Code of Federal Regulations, Section 226.10 (c) states in part, "... In submitting a Claim for Reimbursement, each institution shall certify that the claim is correct and that records are available to support that claim..."

#### Recommendation

The Sponsor should report each participant in the correct category based on properly completed applications.

#### 2. The Sponsor menus did not meet USDA meal pattern requirements

#### Condition

Based on our review of the Sponsor's menus, we noted that the several of the Sponsor's menus for September 2017, did not meet the USDA meal pattern requirements. In order for a snack to be creditable, the Sponsor must serve two of the following five components: Fluid milk, meat and meat alternates, vegetables, fruits, and grains. Fruit juice, vegetable juice, and milk may comprise only one component of the snack. The following is a summary of the Sponsor's menus that did not meet the USDA meal pattern requirements:

Date	Menu	Missing Component	Disallowed Meals
9-6-17	Cookies and Water	No 2 <sup>nd</sup> component	38 Supplements
9-13-17	Apple Juice and Banana Pudding	No 2 <sup>nd</sup> component (Banana pudding not credible with apple juice)	34 Supplements
9-15-17	Water and Animal Crackers	No 2 <sup>nd</sup> component	33 Supplements
9-20-17	Water and Graham Crackers	No 2 <sup>nd</sup> component	31 Supplements
9-22-17	Water and Lemon Cookies	No 2 <sup>nd</sup> component	34 Supplements
9-26-17	Water and Graham Crackers	No 2 <sup>nd</sup> component	36 Supplements
9-28-17	Water, Oranges, and Apples	No 2 <sup>nd</sup> component	26 Supplements

As a result, 232 supplements served were disallowed. (See Exhibit)

#### Criteria

Title 7 of the Code of Federal Regulations, Section 226.17 states, "Each child care center participating in the Program shall claim only the meal types specified in its approved application in accordance with the meal pattern requirements specified in §226.20. ..."

Title 7 of the Code of Federal Regulations, Section 226.20 (c)(3) defines a snack as creditable when, Serve two of the five components: Fluid milk, meat and meat alternates, vegetables, fruits, and grains. Fruit juice, vegetable juice, and milk may comprise only one component of the snack.

#### Recommendation

The Sponsor should review menus to confirm meals contain all required components and eligible for reimbursement.

#### 3. The Sponsor purchased an insufficient amount of milk

#### Condition

Based on the number of meals served with milk as a required component, a total of 4,804 ounces of milk were required. However, the Sponsor could only document the purchase of 3,328 ounces of milk, a shortage of 1,476 ounces of milk.

As a result, 246 breakfast meals claimed were disallowed. (See Exhibit)

#### Criteria

Title 7 of the Code of Federal Regulations, Section 226.20 (c)(1) states, "Fluid milk, vegetables or fruit, or portions of both, and grains are required components of the breakfast meal. ..."

#### Recommendation

The Sponsor should ensure that the required amount of milk was purchased and served to be claimed for reimbursement.

#### 4. The Sponsor did not have an enrollment addendum form on file for one participant

#### Condition

Our review of the Sponsor's records of participants in the CACFP disclosed one participant did not have a current enrollment addendum form on file.

This is a repeat finding from a previous report dated May 27, 2014

#### Criteria

Title 7 of the Code of Federal Regulations, Section 226.15 (e)(2) states, in part, "... For child care centers, such documentation of enrollment must be updated annually, signed by a parent or legal guardian, and include information on each child's normal days and hours of care and the meals normally received while in care."

#### Recommendation

The Sponsor should ensure that all participants have current documentation of enrollment.

#### **Technical Assistance Provided**

During our visit on September 07, 2017, technical assistance was provided regarding the claiming of infants. We also provided information regarding the new meal pattern requirements effective October 1, 2017. During the Sponsor visit on October 10, 2017, we referred the Sponsor to Program staff for technical assistance regarding income eligibility forms and income thresholds for free, reduced-price, and paid categories.

#### **Disallowed Meals Cost**

Based on the review, we determined that the Sponsor's noncompliance with the applicable Federal and State regulations that govern the CACFP resulted in a total disallowed meals cost of \$620.21.

#### **Corrective Action**

The Creative Minds Learning Academy must complete the following actions within 30 days from the date of this report:

- Login to the Tennessee Information Payment System (TIPS) and revise the claim submitted for September 2017, which contains the verified claim data from the enclosed exhibit;
- Remit a check payable to the *Tennessee Department of Human Services* in the amount of \$620.21 for recovery of the amounts disallowed in this report. <u>Please return</u> <u>the attached billing notice with your check</u>; and
- Prepare and submit a corrective action plan to address the deficiencies identified in this
  report. The corrective action plan template is attached. Please return the corrective
  action plan to:

AuditServices.CAPS.DHS@tn.gov

If you have questions relative to the corrective action plan please contact:

Allette Vayda, Director
Child and Adult Care Food Program
8th Floor Citizens Plaza Building
400 Deaderick Street
Nashville, Tennessee 37243
Allette.Vayda@tn.gov
(615) 313-3769

Please note that the amount of disallowed cost is subject to an interest charge. The interest charge will be waived if your revised claim within 30 days from the date of this report. If the revised claim is not completed by the 30-day deadline, an interest charge may be billed to your institution. Please mail your check and the billing notice to:

Child and Adult Care Food Program
Fiscal Services
11th Floor, Citizens Plaza Building
400 Deaderick Street
Nashville, Tennessee 37243

In accordance with the federal regulation found at 7 CFR Part 226.6 (k), your institution may appeal the amount of disallowed cost identified in this monitoring report. The procedures for submitting an appeal are enclosed. The appeal must be submitted to:

Tennessee Department of Human Services Appeals and Hearings Division, Clerk's Office P.O. Box 198996 Nashville, TN 37219

If the Institution decides to appeal the amount of disallowed administrative and meals cost, all appeal procedures must be followed as failure to do so may result in the denial of your request for an appeal.

We appreciate the assistance provided during this review. If you have any questions regarding this report, please contact Sean Baker, Audit Director 2, at 615-313-4727 or Sean.Baker@tn.gov.

Sincerely,

Sam O. Alzoubi, CFE Director of Audit Services

**Exhibit** 

cc: Allette Vayda, Director, Child and Adult Care Food Program
Debra Pasta, Program Manager, Child and Adult Care Food Program
Elke Moore, Administrative Services Assistant 3, Child and Adult Care Food Program
Constance Moore, Program Specialist, Child and Adult Care Food Program
Marty Widner, Program Specialist, Child and Adult Care Food Program
Comptroller of the Treasury, State of Tennessee

#### Exhibit

Sponsor: Creative Minds Learning Academy Review Month/Year: September 2017 Total Meal Reimbursement Received: \$2,462.26

Site Meal Service Activity and Monitor Reconciliation	Reported on Claim	Reconciled to Provided Documentation
Total Number of Days Food Served	21	19
Percentage of Participants in the Free or Reduced-price Category	xxxxx	72%
Number of Breakfasts Served	479	233
Number of Lunches Served	478	478
Number of Supplements Served	639	639
Number of Participants in Free Category	31	33
Number of Participants in Reduced Category	7	1
Number of Participants in Paid Category	9	13
Total Number of Participants	47	47
Total Amount of Eligible Food Costs	XXXXXXX	\$548.49
Total Amount of Eligible Food and Non-Food Costs	xxxxxxx	\$748.45



## STATE OF TENNESSEE DEPARTMENT OF HUMAN SERVICES

CITIZENS PLAZA BUILDING 400 DEADERICK STREET NASHVILLE, TENNESSEE 37243-1403

TELEPHONE: 615-313-4700

FAX: 615-741-4165

TTY: 1-800-270-1349 www.tn.gov/humanservices

**BILL HASLAM** 

**GOVERNOR** 

**DANIELLE W. BARNES** 

COMMISSIONER

November 14, 2017

Amber Adkerson, Owner Creative Minds Learning Academy 1030 Maxwell Avenue Nashville, Tennessee 37206

Notice of payment due to findings disclosed in the monitoring report dated November 14, 2017, for Child and Adult Care Food Program (CACFP).

Institution Name:	Creative Minds Learning Academy	
Institution Address:	1030 Maxwell Avenue Nashville, Tennessee 37206	-
Agreement Number:	00-232	
Amount Due:	\$620.21	
Due Date:	December 14, 2017	

Based on the monitoring report issued on November 14, 2017, by the Audit Services Division within the Tennessee Department of Human Services, the Community and Social Services - Food Programs - CACFP & SFSP management has agreed with the findings which require your institution to reimburse the Department of Human Services for disallowed meals cost.

Please remit a check or money order payable to the *Tennessee Department of Human Services* in the amount of \$620.21 by the due date to:

Tennessee Department of Human Services
Fiscal Services 11<sup>th</sup> Floor
Citizens Plaza Building
400 Deaderick Street
Nashville, Tennessee 37243-1403

Please note that the disallowed cost/overpayment of the CACFP is subject to an interest charge. The interest charge will be waived if the payment is received by the due date. If payment is not received by the end of the 5th day of the due date, an interest charge may be added to the original amount due and will be billed to your entity.

If you have any questions regarding this notice, please feel free to contact Allette Vayda, Director, Community and Social Services - Food Programs - CACFP & SFSP at (615) 313-3769 or Allette.Vayda@tn.gov.

Thank you for your attention

# CONTROL OF THE PARTY OF THE PAR

#### Tennessee Department of Human Services

## Corrective Action Plan for Monitoring Findings

Instructions: Please print in ink or type the information to complete this document. Enter the date of birth for each Responsible Principal and/or Individual in Section B. Attach the additional documentation requested. Enter your name, title and date of signature on the last page. Please sign your name in ink. Please return ALL pages of the completed Corrective Action Plan form.

#### **Section A. Institution Information**

Name of Sponsor/Agency/Site: Creative Academy	Minds Learning	Agreement No. 00-232	☐ SFSP ☑ CACFP
Mailing Address: 1030 Maxwell Avenue	Nashville, Tenness	ee 37206	
Section B. Responsible Principal(s) a	nd/or Individual(s)		
Name and Title: Amber Adkerson, Owner	er		Date of Birth: / /
Section C. Dates of Issuance of Moni	toring Report/Corr	ective Action Plan	
Monitoring Report: 11/14/2017	Corrective /	Action Plan: 11/14/2017	7
			***

#### Section D. Findings

#### Findings:

- 1. The Sponsor improperly classified eligibility of the CACFP participants.
- 2. The Sponsor menus did not meet USDA meal pattern requirements.
- 3. The Sponsor purchased an insufficient amount of milk.
- 4. The Sponsor did not have an enrollment addendum form on file for one participant.

The following measures will be completed within **30 calendar days** of my institution's receipt of this corrective action plan:

Measure No. 1: The Sponsor improperly classified eligibility of the CACFP participants.

The finding will be fully and permanently corrected.
Identify the name(s) and position title(s) of the employee(s) who will be responsible for ensuring that the finding
is fully and permanently corrected:

Name: Position Title:

Name:	Position Title:
Describe be	low the step-by-step procedures that will be implemented to correct the finding:
- Control of the Cont	
When will timplementing will they be	the procedures for addressing the finding be implemented? Provide a timeline below for ng the procedures (i.e., will the procedures be done daily, weekly, monthly, or annually, and when gin?):
-	
Where will the	ne Corrective Action Plan documentation be retained? Please identify below:
	v and current staff be informed of the new policies and procedures to address the finding (e.g., raining, etc.)? Please describe below:

### Measure No.2: The Sponsor menus did not meet USDA meal pattern requirements.

Identify the name(s) and position title(s) of the employee(s) who will be responsible for ensuring that the finding

The finding will be fully and permanently corrected.

is fully and permanently corrected: Name: Position Title: Name: Position Title: Describe below the step-by-step procedures that will be implemented to correct the finding: When will the procedures for addressing the finding be implemented? Provide a timeline below for implementing the procedures (i.e., will the procedures be done daily, weekly, monthly, or annually, and when will they begin?): Where will the Corrective Action Plan documentation be retained? Please identify below:

sed an insufficient amount of milk.
corrected. of the employee(s) who will be responsible for ensuring that the findir
Position Title:
Position Title:
edures that will be implemented to correct the finding:
ng the finding be implemented? Provide a timeline below for the procedures be done daily, weekly, monthly, or annually, and whe

Where will the Corrective Action Plan	documentation be retained? Please identify below:
	Todas identify below.
How will new and current staff he infor	mod of the new policies and presedures to add the first (
Handbook, training, etc.)? Please des	med of the new policies and procedures to address the finding (e.g., scribe below:
Measure No. 4: The Sponsor did not	t have an enrollment addendum form on file for one participant.
The finding will be fully and permanently dentify the name(s) and position title(s) s fully and permanently corrected:	y corrected. ) of the employee(s) who will be responsible for ensuring that the finding
Name:	Decition Title:
value.	Position Title:
Name:	Position Title:
Describe below the step-by-step process	edures that will be implemented to correct the finding:

When will the procedures for addressing the finding be implemented? Provide a timeline below for implementing the procedures (i.e., will the procedures be done daily, weekly, monthly, or annually, and when will they begin?):

Where will the Corrective Action Plan documentation be retained? Please ide	entify below:
How will now and over-at staff ha informed af the many living and	- A A C d' (
How will new and current staff be informed of the new policies and procedure Handbook, training, etc.)? Please describe below:	s to address the finding (e.g.,
•	
I certify by my signature below that I am authorized by the institution to sign the representative of the institution, I fully understand the corrective measures ides implement these measures within the required time frame. I also understand permanently correct the findings in my institution's CACFP or SFSP will result program, and the placement of the institution and its responsible principals or maintained by the U.S. Department of Agriculture.	entified above and agree to fully that failure to fully and t in its termination from the
Printed Name of Authorized Institution Official:	Position:
Signature of Authorized Institution Official:	_ Date: / /
Signature of Authorized TDHS Official:	Date: / /

## Appeal Procedures for Child and Adult Care Food Program-Institutions Revised March 2017

- (xi) The institution, one of its sponsored facilities, or one of the principals of the institution or its facilities has been convicted for any activity that indicates a lack of business integrity;
- (c) Administrative review is also available if the State agency notifies the institution and responsible principal or responsible individual of the following actions: proposed disqualification of a responsible principal or responsible individual, denial of a budget, denial of a line item within a budget, downward adjustment of the amount approved in a budget, suspension of an institution's participation, denial of start-up or expansion funds, denial of a request for advanced payment, recovery of an advance in excess of a claim, denial of a claim for reimbursement (except for late submission), decision not to an exception request for payment of a late claim, overpayment demand, denial of a new or renewing institution's application for participation, denial of sponsored facility application, notice of proposed termination, claim denial, claim deadline exceptions and requests for upward adjustments to a claim, or any other action affecting an institutions participation or claim for payment.
- 3. All appeal requests must be presented in writing to the TDHS Division of Appeals and Hearings not later than 15 calendar days after the date the institution or sponsoring agency receives the notice of adverse administrative action.
- 4. The date of an institution's or sponsoring agency's receipt of a notice of suspension and/or proposed termination and disqualification will be governed by the federal regulation at 7 CFR Part 226.2. The notice must specify the action being proposed or taken and the basis for the action, and is considered to be received by the institution or day care home when it is delivered, sent by facsimile, or sent by email. If the notice is undeliverable, it is considered to be received by the institution, responsible principal or responsible individual, or day care home five days after being sent to the addressee's last known mailing address, facsimile number, or email address.
- 5. The TDHS Division of Appeals and Hearings will acknowledge the receipt of the appeal request within 10 calendar days of the receipt of the institution's or sponsoring agency's request for review. The written request for review should state if a fair hearing is requested or if a review of written information in lieu of a fair hearing is requested. If the appeal request from the institution or sponsoring agency does not specifically request a hearing, a review of written information in lieu of a hearing will occur. If a fair hearing is requested and the institution or sponsoring agency's representative fails to appear, the right to a personal appearance is waived.
- 6. If an institution or sponsoring agency does not request a fair hearing or a review of written information in lieu of the hearing within 15 calendar days from the date the institution or sponsoring agency receives a Notice of Proposed Termination, the TDHS will issue a letter advising the institution or sponsoring agency that it is terminated from the CACFP effective on the 16th calendar day following the institution's or sponsoring agency's receipt of the notice, and that the responsible principals and individuals of the institution or sponsoring agency are disqualified from participation.
- 7. To be considered for a fair hearing or for a review of written information in lieu of a fair

Appeal Procedures for Child and Adult Care Food Program-Institutions Revised March 2017

hearing, all written documents must be submitted to the TDHS Division of Appeals and Hearings not later than 30 days after receipt of the notice of adverse administrative action.

- 8. The action of the TDHS must remain in effect during the administrative review. The effect of this requirement on particular actions by TDHS is as follows:
  - (i) Overpayment demand. During the period of the administrative review, TDHS is prohibited from taking action to collect or offset the overpayment. However TDHS must assess interest beginning with the initial demand for remittance of the overpayment and continuing through the period of administrative review unless the administrative review official overturns the TDHS's action.
  - (ii) Recovery of advances. During the administrative review, TDHS must continue its efforts to recover advances in excess of the claim for reimbursement for the applicable period. The recovery may be through a demand for full repayment or an adjustment of subsequent payments.
  - (iii) Program payments. The availability of Program payments during an administrative review of the denial of a new institution's application, denial of a renewing institution's application, proposed termination of a participating institution's agreement, and suspension of an institution are addressed in paragraphs (c)(1)(iii)(D), (c)(2)(iii)(D), (c)(3)(iii)(D), (c)(5)(i)(D), and (c)(5)(ii)(E), respectively, of 7 CFR §226.6.
- 9. The institution or sponsoring agency must refute the charges contained in the notice during the fair hearing or in the written information that is provided in lieu of the hearing.
- 10. The institution and the responsible principals and responsible individuals may retain legal counsel, or may be represented by another person.
- 11. If a fair hearing is requested, the institution or sponsoring agency will be notified in writing of the time, date and place of the fair hearing at least 10 calendar days in advance.
- 12. Any information which supports an adverse administrative action taken by the TDHS shall be available to the institution or sponsoring agency for inspection from the date of the receipt of the request for a fair hearing or a review of written information in lieu of the hearing.
- 13. In accordance with 7 CFR Part 226.6 (k)(8), the TDHS Division of Appeals and Hearings must conduct the administrative review of the proposed disqualification of the responsible principals and responsible individuals as part of the administrative review of the application denial, proposed termination, and/or proposed disqualification of the institution with which the responsible principals or responsible individuals are associated. However, at the administrative review official's discretion, separate administrative reviews may be held if the institution does not request an administrative review or if either the institution or the responsible principal or responsible individual demonstrates that their interests conflict.
- 14. The procedures contained in the Uniform Administrative Procedures Act found at TCA 4-5-301 et seq. shall be followed in rendering a decision on all appeals. The decision of the hearing officer is the final administrative determination to be afforded to the institution or sponsoring agency, and shall be rendered in a timely manner not to exceed 60 calendar days from the date of the receipt of the request for a fair hearing.
- 15. The processing limits for administrative appeals MUST be met. In the event a continuance is requested by a party, one continuance may be granted at the Hearing Official's discretion. This

Appeal Procedures for Child and Adult Care Food Program-Institutions Revised March 2017

continuance shall not be for a period longer than ten (10) calendar days unless there are exceptional circumstances. Exceptional circumstances must be detailed in the order of continuance and the order must contain a date certain for the hearing, to be set as soon as possible. A report of pending CACFP desk review and fair hearing requests will be generated and reviewed daily by the Clerk's Office and the Legal Director for Appeals and Hearings who will monitor the dates for timeliness. In the event a decision has not been rendered within forty-five (45) calendar days of the date of receipt of the request for fair hearing or desk review, the Legal Director for Appeals and Hearings or their back-up shall notify the hearing official to take appropriate action.

16. All requests for a fair hearing or for a review of written information in lieu of a hearing must be submitted to:

Tennessee Department of Human Services
Division of Appeals and Hearings
PO Box 198996, Clerk's Office
Nashville, TN 37219-8996
Fax: (615) 248-7013 or (866) 355-6136

E-mail: AppealsClerksOffice.DHS@tn.gov

17. If a termination action is upheld by the hearing officer, the TDHS will issue a letter to the institution or sponsoring agency and its responsible principals and individuals advising that the termination and disqualification are effective on the date of the ruling issued by the hearing officer. The agency maintains searchable records of all administrative reviews and their dispositions for a period of five (5) years.

18. As required by 7 CFR Part 226.6 (c)(7), each disqualified institution, sponsoring agency, principal and individual will be placed on the National Disqualified List maintained by the U.S. Department of Agriculture (USDA). Once included on the National Disqualified List, an institution, sponsoring agency, principal and individual shall remain on the list until such time as the USDA, in consultation with the TDHS, determines that the serious deficiencies that led to their placement on the list have been corrected, or until seven years have elapsed since they were disqualified from participation. However, if the institution, sponsoring agency, principal or individual has failed to repay debts owed under the program, they will remain on the list until the debt has been paid.