



# FAMILY CHILD CARE HOME SPONSOR MANAGEMENT PLAN

NORTH DAKOTA DEPARTMENT OF PUBLIC INSTRUCTION  
CHILD NUTRITION AND FOOD DISTRIBUTION PROGRAMS  
SFN 52474

Sponsor Name

Include copies of all appropriate forms for each section.

## **Nutrition Integrity**

What efforts are in place to ensure provider menus meet the Dietary Guidelines for Americans?

What are your sponsor nutrition objectives for the upcoming fiscal year?

Describe how nutrition information and education is provided to providers, children and parents.

## **Governing Board** *Attach name, date-of-birth, position on board, term on board and address of all current board members.*

How often does the board meet? Provide a copy of the minutes from the most recent board meeting.

What is the Board's role in approving fiscal actions, policy decisions, and other administrative actions?

How are board members selected? What is the term length for board members? Are any board members closely affiliated with the executive director/sponsor?

## Provider Recruitment

- Provide copies of all proposed outreach materials.

Describe the organizations' provider recruitment plan, policies and procedures. *Provide copies of all proposed outreach materials. All outreach efforts require prior approval.*

## Tiering Classifications

### Eligibility - Elementary School Data

Describe the process used to determine a provider's eligibility using elementary school data. How is eligibility documented and tracked?

Who is responsible for making determinations using elementary school data?

### Eligibility - Census Data

Describe the process used to determine a provider's eligibility using census data. Include a description of the computer software used.

Who is responsible for making determinations using census data? If regional staff participate in the decision process, how are these determinations reviewed and by whom?

### Eligibility - Household Income Data

Describe the system used to determine a provider's eligibility using household income eligibility data.

Who is responsible for making a determination using household income eligibility data?

**Eligibility - Provider's Own Children**

Describe the process used to distribute, collect, and make determinations on applications submitted by providers to claim their own children.

If the provider is not also area eligible (school or census), describe the system to ensure all information on the income application is verified.

Describe the process used to assure that provider's own children receive program benefits only when the provider is income eligible for Tier I rates.

**Tiering Timeframes and Notifications**

What is the time frame for notifying a provider of his/her Tier I determination?

Who is responsible for notifying a provider of his/her Tier I determination?

How will you notify a provider of his/her Tier I determination?

**Tier II Provider Options**

How will you notify Tier II providers of his/her reimbursement options?

What is the time frame for notifying a Tier II provider of his/her reimbursement options?

Who will be responsible for notifying Tier II providers of his/her reimbursement options?

How will the providers' selected reimbursement option be documented?

**Household Income Eligibility of Children in Tier II Homes**

Describe the method you will use to distribute income eligibility applications to families of a Tier II provider who elects to have the forms collected.

Describe the process that is used to collect income eligibility applications from households and determine the eligibility of enrolled children.

Who is responsible for making eligibility determinations on household income applications?

What is the time frame for making determinations?

What follow-up will occur on incomplete household income applications?

Describe the measures you will take to ensure the confidentiality of the information obtained on household income applications.

How will providers be notified of the number of Tier I eligible Tier II enrolled children? When will this be done?

**Tier Documentation**

How will a provider's Tier status be recorded and documented?

What system will be used to alert you when an income application needs to be re-issued (both provider and household applications)?

**Application**

Describe the system for collecting and maintaining the following required paperwork:  
Signed provider applications and agreements.

Documentation of licensure/self-declaration.

Enrollment information on all children claimed for reimbursement.

What is the method for ensuring all enrollment forms are completed annually?

Documentation of non-profit status.

## Training

Describe the system for providing orientation for new child care providers, including pre-approval 28 day follow-up visits.

Describe the plan to provide training to child care providers over the next year. (Workshops, tri-mester home visit information, newsletters, lending libraries, etc). Include topics that will be covered, dates, and staff involved.

Describe the system for initial and ongoing training of staff. Include the frequency of training, topics covered, personnel who conduct training, and documentation of attendance.

## Notifications

Describe how WIC/CACFP program information is distributed.

Detail the procedure for child care homes to notify sponsor regarding out-of-home hours of operation. Include information on how deductions will be made for non-compliance.

## Monitoring

Describe system used to ensure that at least one unannounced visit each year is a meal visit.

Describe system used to ensure that at least two visits each year are unannounced.

Describe system used to ensure that the timing of unannounced reviews is varied in a way that ensures they are unpredictable to the facility.

Describe system used to ensure that no more than six months may lapse between reviews.

Describe system used to ensure that visits include a sample of meal types claimed by home provider including morning, evening, weekend, and holiday meals.

Describe system used to ensure that new providers are reviewed within 28 days of operation.

Does the organization have a policy on the maximum number of home visits that can be conducted in one day?  Yes  No  
If yes, please describe.

Describe the system to supervise the work of those who monitor child care providers.

Describe the policy for conducting parent audits. How many providers have received a parent audit in the past program year?  
When there is no response from a parent contact, what procedure is followed?

Describe the sponsoring organizations procedures for identifying potential fraudulent situations.

Describe how and under what circumstances follow-up visits are conducted. (for example; provider over-capacity, observed meal does not meet meal pattern requirements, attendance during the visit is considerably lower than number of meals that have been claimed, etc.)

What policies and procedures are in place to make deductions during a home review? (Include a copy of the meal disallowance policy)

Describe the procedures for referring a situation to the local licensing authority.

What process is used to review provider meal counts and menus before claims are processed and paid?

Describe the sponsor's system for conducting 5 day reconciliation of meal counts. (Please note the changes that have been made to the 5-day reconciliation process). Provide review form used to conduct the 5 day reconciliation.

Describe how monitoring staff has been instructed to display photo-identification during home visits. How is this monitored for staff compliance?

What measures are used to ensure program accessibility to all children including infants?

How is the type of formula that a provider supplies tracked and monitored?



### Monitoring Staff Member Information

Instructions: Please detail the following information for each staff member involved with the monitoring process. Copy and complete a separate chart for **each** monitoring staff member. The monitoring staff equivalent may include the employee's time spent on scheduling, travel time, review time, follow-up activity, report writing and activities related to the annual updating of children's enrollment forms. The monitoring staff equivalent may not include time spent on menus, meal counts, or office work.

Information Required	Sponsor Response
Name of Monitoring Staff Member	
Position Title	
Number of Years of Monitoring Experience	
Educational/professional background of staff member	
Number of work hours per week specifically related to monitoring tasks	
Employment status of employee (full-time, part-time, other-describe)	
Area Served	
Caseload Number	
List specific monitoring responsibilities	
Detail any additional information that may impact monitoring efforts/duties	

Number of estimated number of family child care homes to be served by FCCH sponsor:

## Staffing Standards Summary

FOR STATE-AGENCY USE ONLY			
Employee Name	Number of Providers	Number of Hours per week monitoring related	Staffing Ratio Computation

### FOR STATE-AGENCY USE ONLY

Staffing Ratio: Number of FCCH  $\div$  Number of monitoring staff members = Average Number of Providers per Monitoring Staff Member

### FOR STATE-AGENCY USE ONLY

Is sponsor in compliance with federal and state staffing standards:  Yes  No (If not, describe):

### Staffing

- Provide an organizational chart complete with names and position titles.
- Provide job descriptions for each CACFP funded position.
- Include copy of performance evaluation template.
- Attach adopted policy prohibiting outside-employment that interferes with employee program duties/responsibilities.

Identify benefits available to employees (vacation, sick leave, paid holidays, retirement, health insurance, life insurance, disability, etc.).

Provide the organization policy that describes who is eligible to receive employee benefits.

Describe the method used and frequency of employee performance reviews.

Are any full-time staff members employed outside the organization? If so, does this interfere with program responsibilities?

Is any staff member assigned organizational responsibilities other than CACFP? If so, how does the organization ensure that staff time supported by CACFP is spent on CACFP activities?

### **Policies and Procedures**

- Provide a copy of the organization policies and procedures (Policies that must be included are: processing late provider claims, meal deductions, personal use of sponsor property, confidentiality of income eligibility information).

Describe the system for disbursing payments to child care providers and assuring that providers are paid within 5 days of the receipt of funds from the state agency.

If funds are withheld from provider payments, please describe the reasons for this and the procedures used.

Describe the involvement with food vendors.

Describe the office hours and how work breaks are provided for office staff, and policy for payment of regular compensation, overtime, compensatory time, holiday pay, benefits, awards, severance pay and payroll tax withholding. In addition, please describe how the organization will comply with US Department of Labors Fair Labor Standards Act for all nonexempt employees.

## Recordkeeping

Describe the system for maintaining and destroying records.

Describe how time and attendance records will be maintained for all staff who charge time to the CACFP. Provide copies of proposed time and attendance reports.

How has organization implemented the salary adjustment allowances for FY 2011 and 2012?

Does the institution have current copies of the following documents on file?

- CFR 226 (Child and Adult Care Food Program Regulations) 6/27/02

Yes     No

CFR 3016 (Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments.)

Yes     No

**OR**

- CFR 3019 – Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals and other Non-Profit Organizations.

Yes     No

FNS Instruction 796-2 Revision 3 (CACFP Financial Management Guidance) 5/14/01

Yes     No

## Financial Management

- Complete Budget Forms (Include copies of leases, contracts, and equipment inventory)

Describe how the sponsoring organization determined the number of projected claiming providers on which the budget is based. Increases or decreases must be based on valid justification.

Describe the system used to track actual expenditures to the approved budget. When are budget adjustments made?

Describe the organizations accounting system and back-up system, including information on the location and number of accounts used for CACFP purposes.

What internal controls are in place to ensure fiscal integrity and accountability? Describe how fiscal matters are managed to ensure separation of duties.

Organizations applying to participate in the CACFP are required to disclose and identify related party transactions, less-than-arms-length transactions, and ownership interests in equipment, supplies, vehicles, and facilities, or disclose any other information that inhibits HHSC from making an informed assessment of the allowability of a particular cost.

Do you have any expenses that require disclosure?  Yes  No

If "Yes," attach a detailed explanation.

Disclose in a written statement any relationships between employees; include any relationships between the director, board members, professional contractors or consultants or vendors by listing the names, position title and specific relationship. If there are no family relationships, please state in writing that there are none at this time.

Does the organization receive funding other than CACFP reimbursement? If so, what measures are in place to ensure that expenses covered by other funds are not claimed for CACFP reimbursement?

There are costs associated with the operation of a corporation, which are required by State incorporation laws but are not allowable costs under the CACFP. How will the organization fund these costs?

Describe the sponsor organization's plan to pay, with non-program funding, employees and providers, suppliers during Program payment interruptions and to pay debts for Program mismanagement.

At times, institutions operating the CACFP are required to return misspent reimbursement or disallowed costs. How does your organization intend to ensure that these potential over claims can and will be covered without jeopardizing or interrupting program operations?

Describe the process used to secure bids for any purchase over \$100,000. Include copies of all bids.

What procedures are in place for disposing of old equipment and for depreciating equipment over \$5000?

Please detail the various accounts used for CACFP reimbursement (Administrative and Food Service). Are any of the accounts interest bearing? If so, please provide a description of how the interest income will be tracked, off-set, and when applicable, returned.

Provide copies of any documents, such as travel expense voucher, used to reimburse staff for expenses.

### **Seriously Deficient Process**

Describe the process for dealing with areas of program non-compliance.

Describe the process used with child care providers involved in a seriously deficient procedure. **Include monitoring requirements, documentation, and corrective action policies.**

Describe the process and list individuals involved in handling/hearing provider appeals.

## Civil Rights

Within the USDA there are several civil rights requirements including:

- Racial/Ethnic Data Collection
- Civil Rights Complaints Procedures
- Resolution of non-compliance
- Requirements for reasonable accommodations of persons with disabilities
- Outreach Policy
- Display of civil rights poster
- Public Notification (Enclose a copy of the most recent public release. Include date and media source.)
- Requirements for language assistance
- Customer Service
- Conflict resolution

Describe how each of the above requirements is fulfilled.

Signature of Authorized Representative CACFP Sponsor of Child Care Homes	Date
Signature, State Director Child Nutrition and Food Distribution Program	Date