Nebraska Department of Education

Nutrition Services

# Family Day Care Home Sponsoring Organization Management Plan

**Instructions:** Click on the grey box to begin typing your answers. This will retain the desired formatting. Make sure that your responses are in red.

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| SECTION 1. PROGRAM OPERATIONS |
| * 1. How many providers have current agreements with the sponsoring organization? (based on July figures). |
| SPONSOR ANSWER |
| * 1. What is the average number of providers expected to claim each month for the fiscal year covered by this agreement? |
| SPONSOR ANSWER |
| 1.3. Describe how the sponsoring organization determined the number of projected claiming providers on which the budget is based. Increases or decreases in participation must be based on valid justification. |
| SPONSOR ANSWER |
| 1.4. Describe the sponsor’s plan for projected growth and service to additional providers, if applicable. |
| SPONSOR ANSWER |
| SECTION 2. ORGANIZATIONAL STRUCTURE AND CAPABILITY |
| * 1. Describe the organizational administrative structure of your sponsoring organization. |
| SPONSOR ANSWER |
| 2.2 a) Indicate if the organization is multi-purpose or operating solely to administer the CACFP.  b) If the organization operates solely to administer the CACFP, what are the other sources of funding?  **Supporting Documents: Multi-purpose organizations must submit a copy of the organization wide budget; complete Attachment B (Agency Revenue) or a document that captures that information.** |
| SPONSOR ANSWER |
| 2.3 List or describe all of the activities the sponsoring organization conducts other than the CACFP. |
| SPONSOR ANSWER |
| 2.4 Describe how the sponsoring organization would repay the state agency for any fiscal overclaims that may occur. How would the sponsoring organization plan on repaying the state promptly? |
| SPONSOR ANSWER |
| 2.5 What is the organization's policy regarding the collection of funds from providers if the sponsoring organization made an error in payment? |
| SPONSOR ANSWER |
| **SECTION 3. TRAINING - PROVIDER, STAFF, BOARD OF DIRECTORS** |
| * 1. Describe how the sponsor determines the training needs of providers. |
| SPONSOR ANSWER |
| 3.2 Describe the sponsoring organization's plan for training all new providers before they begin program operations. |
| SPONSOR ANSWER |
| 3.3 Describe the sponsor's plan for annual training of all providers in program requirements. *Include information on scheduling, conducting and documenting training and technical assistance to providers. Include critical areas (record keeping and meal count requirements, meal component and claiming requirements, nutrient content, food safety, sponsor payment, disallowance and monitoring policies, etc). Training may include workshops, in-home training, video training, courses, workshops, or other delivery methods.* |
| SPONSOR ANSWER |
| 3.4 Describe consequences if a provider does not meet annual training requirements. |
| SPONSOR ANSWER |
| 3.5 Describe the sponsoring organization's process for developing curriculum and agendas for provider training. |
| SPONSOR ANSWER |
| 3.6 How does the sponsor determine training needs of its staff? |
| SPONSOR ANSWER |
| 3.7 Describe the sponsoring organization's system for conducting and documenting training of program staff. *This could include staff meetings, staff newsletters, attendance at Nebraska sponsor meetings, attendance at state, regional or national conferences, etc. Annual training of key staff is required; this includes annual training of monitors and anyone involved in CACFP functions, person compiling claims, etc. Training should be appropriate to the level of staff experience and duties. Absence of training for staff has been identified by USDA as an Indicator of Potential or Existing Problems.* |
| SPONSOR ANSWER |
| 3.8 Describe training provided to members of the board of directors regarding board membership and CACFP policies and procedures. |
| SPONSOR ANSWER |
| **SECTION 4. STAFFING, MONITORING** |
| * 1. Monitor Territory and Caseload - Complete the Staff Profile in the online system. *Monitoring and non-monitoring job duties must be marked. For monitoring/monitoring related duties, indicate the average hours per week spent on these duties, the number of providers assigned (****monitoring staff only****) and the counties served (****monitoring staff only****). The sponsor’s ratio must comply with the Nebraska Staffing Factors (issued 07/17/2003). A sponsoring organization of day care homes must document that, to perform monitoring, it will employ the equivalent of one full-time staff person for each 50 to 150 day care homes it sponsors.* |
| 4.2 Describe how each monitor's territory or caseload is determined. |
| SPONSOR ANSWER |
| 4.3 What is the maximum number of providers the sponsoring organization would allow a monitor to manage? |
| SPONSOR ANSWER |
| 4.4 Describe how the sponsoring organization evaluates a monitor's performance. |
| SPONSOR ANSWER |
| 4.5 Describe the sponsoring organization's back up plan for completing visits in the event that a monitor is on medical leave, on vacation, leaves employment or is otherwise unable to complete the required reviews. |
| SPONSOR ANSWER |
| 4.6 a) Describe the sponsoring organization's procedures for scheduling and conducting preapproval visits to each new provider.  b) Describe how the sponsor assures that the first visit to a new provider is conducted within the first four weeks (28 days) of program operations. |
| SPONSOR ANSWER |
| 4.7 a) Describe the sponsoring organization's procedures for quality assurance and oversight of its monitoring functions. b) Describe the procedures the sponsoring organization uses to ensure that each home will be monitored at least three times per year with no more than six months between visits, that at least two visits include a meal observation, and that at least one visit is unannounced.  c) Describe the system for tracking the completion of monitoring visits to ensure visits are completed on schedule. |
| SPONSOR ANSWER |
| 4.8 Describe the sponsor’s system for averaging monitoring reviews, if applicable. |
| SPONSOR ANSWER |
| 4.9 a) Describe the sponsoring organization's procedures for identifying potential fraudulent situations, e.g., block claiming, excessive meals claimed for supper and weekends, etc. b) Describe how the sponsoring organization follows up on potentially fraudulent situations. |
| SPONSOR ANSWER |
| 4.10 Describe how and under what circumstances follow-up visits are conducted. *For example, block claims, provider is over capacity, observed meal does not meet meal pattern requirements, attendance during visit is considerably lower than number of meals that have been claimed, etc.* |
| SPONSOR ANSWER |
| 4.11 Describe the sponsoring organization's procedures for contact with parents (mail, telephone, survey, etc.) in evaluating provider performance and accuracy of claims. If a certain percentage is not done routinely, what are the indicators that trigger parental contact? Describe how the sponsoring organization documents that parent audits have been done.  **Supporting Documents: Attach sample parent surveys, telephone interview scripts, etc. that are used by the sponsoring organization. These documents may be uploaded as Supporting Documents in the online system.** |
| SPONSOR ANSWER |
| 4.12 Describe the procedures used when suspending a provider for imminent threat to the health and safety of the children in care. **Supporting Documents: Attach procedures, sample letters for suspension process.** |
| SPONSOR ANSWER |
| 4.13 Describe or attach the sponsoring organization's policy and procedures for referring providers to the Health and Human Services System (HHSS) or child protective services (CPS) when violations or safety concerns are noted. |
| SPONSOR ANSWER |
| **SECTION 5. OPERATIONAL PROCEDURES** |
| 5.1 a) Describe the procedure used to collect records from each provider to show 1) number of children in attendance each day; 2) number of meals claimed, 3) income eligibility information, 4) annual enrollment, e) race/ethnic category, and 5) menus.  b) For each type of record collected, describe the method used for collection, how frequently the records are collected and where the records are on file. |
| SPONSOR ANSWER |
| 5.2 a) Describe the sponsoring organization's system for making Tier I day care home determinations.  b) Describe what method(s) are used to apply the school and census data and what specific steps are taken to identify low-income households of day care home providers not located in low-income areas. |
| SPONSOR ANSWER |
| 5.3 Describe how the sponsoring organization notifies Tier II home providers of their reimbursement options. |
| SPONSOR ANSWER |
| 5.4 Describe the method used by the sponsoring organization to reimburse providers (actual, blended, claiming percentages). |
| SPONSOR ANSWER |
| 5.5 How are provider's meal counts tallied? |
| SPONSOR ANSWER |
| 5.6 How does the sponsoring organization notify a provider of the reason that meals are disallowed? |
| SPONSOR ANSWER |
| 5.7 How and when are menus reviewed for compliance? Explain if this is done during the home visit, during claims processing, etc. If a monitor notes noncompliance with meal pattern during a home visit, how is this deduction processed during claims submission? |
| SPONSOR ANSWER |
| 5.8 Describe the sponsor’s system for monitoring block claiming. *A block claim is defined as a claim with no variation in meal counts, for any single meal type or combination of meal types, for any continuous 15 day period within the month.*  Include a description of the sponsor’s system for scheduling and conducting unannounced follow-up reviews within 60 days of the submission of a block claim.  Describe how the sponsor will determine and document that there is a valid reason for a block claim. |
| SPONSOR ANSWER |
| 5.9 Describe the sponsor’s system for conducting a 5-day reconciliation of meal counts and determination of overclaims or other action(s). |
| SPONSOR ANSWER |
| 5.10 Describe how the sponsoring organization verifies the eligibility of providers, participants, meal service times and meal types before claims are processed for payment. |
| SPONSOR ANSWER |
| 5.11 Describe the sponsoring organization's procedures for disbursing payments to providers to assure that providers are paid within five days of the receipt of funds from the state agency. |
| SPONSOR ANSWER |
| 5.12 Describe the procedures used in determining that a provider is seriously deficient. Include timelines, notification to the state agency.  **Supporting Documents: Attach or upload copies of procedures and template letters. Include copy of appeal/administrative review procedures.** |
| SPONSOR ANSWER |
| Name of hearing/appeal official: SPONSOR ANSWER |
| 5.13 Describe how the sponsor evaluates if the corrective action on a serious deficiency has been fully and permanently corrected. |
| SPONSOR ANSWER |
| **SECTION 6. INTERNAL CONTROLS** |
| 6.1 Describe or attach copies of the sponsoring organization's policies and procedures for financial management, which include: 1) purchasing and requisition, 2) income and expense accounting, 3) processing invoices, including payments from petty cash, 4) reconciliation of expenses and 5) payment authorization procedures, including approval of CACFP expenditures and persons authorized to approve expenditures. |
| SPONSOR ANSWER |
| 6.2 Describe or attach copies of the sponsoring organization's procedures for tracking and reporting administrative costs/reimbursement and tracking expenses to specific cost line items and/or programs, including comparing CACFP expenses to the approved budget.  If a multi-purpose organization, indicate what percentage of the organization's annual budget is allocated to CACFP. Attach documentation that shows how this percentage was determined.  Submit cost allocation information from all income and expenses including non-CACFP funds and activities. |
| SPONSOR ANSWER |
| 6.3 Describe the sponsoring organization's procedures for compiling and reporting administrative costs to the state agency. Describe procedures for submitting administrative expense information to the state agency. |
| SPONSOR ANSWER |
| 6.4 Describe the sponsoring organization's procedures in the event expenses deviate from budgeted line items. |
| SPONSOR ANSWER |
| 6.5 Describe or attach copies of the sponsoring organization's purchasing policies and procedures, and the bid process used. All purchases and service contracts in excess of $25,000 must be formally procured. It is strongly urged that sponsors obtain a minimum of three bids for purchases of items in excess of $500. |
| SPONSOR ANSWER |
| 6.6 Does the sponsoring organization use a paper ledger or accounting software? If accounting software is used, list the name of the software package. |
| SPONSOR ANSWER |
| 6.7 What back-up system is used in the event that the accounting system is not available (theft, property damage, system crash, etc.)? |
| SPONSOR ANSWER |
| 6.8 What type of accounting system does the organization use: cash or accrual? |
| SPONSOR ANSWER |
| 6.9 How many bank accounts does the sponsoring organization use for CACFP monies? Describe the use for each account. |
| SPONSOR ANSWER |
| 6.10 Describe how provider reimbursement funds are separated from administrative funds. |
| SPONSOR ANSWER |
| 6.11 List all leases and rental agreements in effect for the fiscal year on which this management plan is based. *Submit or upload copies of all lease and rental agreements.* |
| SPONSOR ANSWER |
| **SECTION 7. PRIOR APPROVAL** |
| 7.1 List all of the planned budget items requiring prior written approval. Items that are approved will be specified in the approval letter you receive for the current fiscal year. Sponsor must contact NDE Nutrition Services prior to purchase. |
| SPONSOR ANSWER |
| 7.2 List all of the planned budget items requiring specific prior written approval. Items that are approved will be specified in the approval letter you receive for the current fiscal year. Sponsor must contact NDE Nutrition Services prior to purchase. |
| SPONSOR ANSWER |
| 7.3 Disclosure of Less-Than-Arms-Length Transactions. Describe all Less Than Arms Length Transactions. *These are related party transactions that are conducted between related parties. This applies to transactions such as loans, leases, purchase of goods and services and hiring. All Less-Than-Arms-Length Transactions must be disclosed and justify why it is needed. Disclosure must identify the type of expense and amount and the connection to each budget line. Failure to disclose these types of transactions may result in administrative or legal penalties against the sponsor.* |
| SPONSOR ANSWER |