



# Scope of Summer Food Service Program Requirements

**SFSP Sponsors must comply with all provisions of SFSP regulations regardless of whether a sponsor is up for review and must retain all records supporting reimbursements for a minimum of five years.**

**Program Sponsors must meet the following performance standards:**

❖ **Performance Standard Number 1 – Financial Viability**

- Demonstration of community need for summer meals
  - Sponsoring agency is well established in the community
  - Sponsoring agency provides year-round service to the community
  - Widespread program promotion of the availability of SFSP meals
- Demonstration of sponsor's financial resources and financial history
  - Maintain a detailed ledger of SFSP revenue and expenditures
  - Provide complete transparency regarding SFSP financial status
- Demonstration of budget items are necessary, reasonable, and allowable
  - All expenditures must be clearly documented and receipts retained with program records
  - Any expenditures used for multiple purposes must be pro-rated for SFSP to be allowable

❖ **Performance Standard Number 2 – Administratively Capable**

- Have adequate staff to comply with program requirements
  - Conducts and documents annual training for administrative and site staff
  - Meets all sponsor monitoring requirements
  - Reads and acts on state agency communications throughout the summer
- Have written policies and procedures for specific program responsibilities and duties

❖ **Performance Standard Number 3 – Fiscal and Program Accountability**

- Management controls to ensure a financial system that demonstrates
  - All funds and property are handled with fiscal integrity and accountability
  - Internal controls are in place for full financial transparency within the organization
  - Expenses are incurred with integrity and accountability
  - Monthly invoices are paid in a timely manner
  - Claims are processed accurately and timely
  - Program funds are safeguarded and used for authorized Program purposes
  - Safeguards and controls are in place to prevent and detect improper financial activities
  - Funds leftover at the end of the SFSP season become the beginning balance for the next program year
- Maintain appropriate program records, including budgets, accounting records, management plans and meal counts and meal pattern compliance for site operations
  - Daily meal count sheet retention by site
  - Daily meal pattern compliance including components and serving sites, with documentation of any substitutions
  - Site monitoring reports are organized and maintained
  - Required documentation for sponsor and site approval retention
    - Sponsor Management Plan
    - Sponsor Integrity Plan (Rural Non-Congregate Sites)
    - Health Department Notification Letter, including for sites added after initial approval
  - CNPweb Updates occur throughout the summer
    - Changes in site operations must be entered and approved prior to taking effect
    - Staffing changes must be updated as they occur

# Writing Corrective Action Plans

The State Agency requires a written response to a finding... What do you do now?

Read Review Letter/  
Findings Report

- All noncompliances will be listed as findings
- If you are unsure of any findings of noncompliance, direct questions to your Field Specialist.

What is a  
Noncompliance?

- An issue identified during a review that needs to be corrected permanently
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What is a Corrective  
Action?

- A written response that details the specific action to be taken within a specified time frame to permanently correct the noncompliance
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What should a  
Corrective Action  
written response  
include?

- Detailed step-by-step actions must include the "what, who, how, when, and where" (see steps below)
- Processes (a series of actions or steps)** and **procedures (an established way of doing something)** that are consistent with federal regulations, state policy, and organizational requirements
- Answer each finding thoroughly and completely.

Submitting  
Corrective Action to  
the State Agency

- After corrective actions, submit all requirements identified to the state using the instructions provided in the review letter.
- List or attach any additional documentation to support the corrective action (training materials, menus, etc.)
- Additional information may be requested by the state for clarification.
- A closure letter will be sent when all corrective actions have been accepted.
- Keep corrective action plan in program files and remember to reference as needed to ensure compliance.

## Things to think about when answering the corrective action:

WHAT processes and procedures have been implemented to correct the finding?	WHO is ultimately responsible for implementing the process and internal controls?	HOW will the processes and procedures prevent a reoccurrence?	WHEN will the processes and procedures be implemented and at what frequency?	WHERE will the documentation be retained and for how long?
<p>What will be changed to fix the identified finding/non-compliance issues?</p> <p>List new processes or procedures that are now being conducted to correct the finding.</p> <p>Explain with a lot of specific detail.</p> <p>Remember that <i>anyone</i> should be able to read the corrective action plan and understand the steps that are in place to fix the issue permanently and completely to prevent reoccurrence and resolve the root-cause conditions.</p>	<p>List name, title, and responsibility of the individuals involved in permanently correcting the finding.</p> <p>Include those individuals responsible for conducting the procedure to correct the finding/ non-compliance and those responsible for ensuring that the procedure is conducted and permanently corrected.</p>	<p>Explain how the specified processes will be monitored to confirm procedures are followed consistently to prevent a reoccurrence of the finding/non-compliance.</p> <p>What edit-check system is put into place so more than one staff member is responsible for oversight?</p>	<p>When will the process or procedure to correct the finding/ non-compliance begin?</p> <p>When will the procedure be completed (daily, weekly, monthly, or annually)?</p> <p>When will the corrective procedures be monitored?</p>	<p>Where will the documentation be retained and for how long?</p> <p>Is it in a safe and secure place? Who will have access to the program records?</p>

Corrective Action is not a punishment –but an opportunity to improve the operation!