



**STATE OF TENNESSEE
DEPARTMENT OF HUMAN SERVICES**

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

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BILL HASLAM
GOVERNOR

DANIELLE W. BARNES
COMMISSIONER

March 9, 2018

Alexsia Williams, Owner
University of Little Scholars
941 East Raines Road
Memphis, Tennessee 38116-6322

Dear Ms. Williams,

The Department of Human Services (DHS) - Audit Services Division staff conducted an unannounced on-site review of the Child and Adult Care Food Program (CACFP) at University of Little Scholars Application Agreement 00-559 on January 30, 2018. The purpose of this review was to determine if the Sponsor complied with *Title 7 of the Code Regulations* (CFR) applicable parts, application agreement, and applicable Federal and State regulations.

Background

CACFP Sponsors utilize meal count sheets to record the number of breakfast, lunch, supper and supplement 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) to seek reimbursement. We inspected meal count 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 on November 27, 2017.

The Sponsor had two childcare centers in operation during the test month. University of Little Scholars Phase II 0002 was selected as the sample site. Applications, attendance and meal counts were also viewed at University of Little Scholars 0001 to meet the required valid statistical sample and for milk calculations.

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

1. The number of participants reported in the free and paid categories was incorrect

Condition

The claim for reimbursement for the test month reported 54 participants in the free category, one participant in the reduced-price category, and nine participants in the paid category. However, our review of the Sponsor's records verified there were 53 participants in the free category, one participant in the reduced-price category, and ten participants in the paid category. The differences were based on the following:

University of Little Scholars 0001

There was one participant reported in the free category, but the application on file was not dated by the determining official. This participant was reclassified as paid.

Criteria

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

Title 7 of the Code of Federal Regulations Section 226.17 (b)(8) states, "Child care centers shall collect and maintain documentation of the enrollment of each child, including information used to determine eligibility for free and reduced price meals in accordance with §226.23(e)(1) ... 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 each participant is classified and reported according to income eligibility applications for child care center participants. Applications should be maintained on file and updated annually.

This is a repeat finding, from the report dated May 4, 2015.

2. The Sponsor claimed the incorrect number of meals

Condition

The claim for reimbursement for the test month reported 654 breakfast meals, 844 lunch meals and 973 supplements. However, our review of the Sponsor's records verified 656 breakfast meals, 851 lunch meals, and 978 supplements prior to any meal disallowances. The Sponsor under claimed the number of breakfast meals by two, under claimed the number of lunch meals by seven, and under claimed the number of supplements by five. The differences were based on the following:

University of Little Scholars Phase II 0002

The Sponsor reported 177 breakfast meals, 170 lunch meals, and 306 supplements for University of Little Scholars Phase II 0002. However, our review of the Sponsor's records verified 179 breakfast meals, 177 lunch meals, and 311 supplements for the feeding site prior to any other meal disallowances.

Criteria

Title 7 of the Code of Federal Regulations, Section 226.10 (c) states "...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 ensure that the number of meals claimed for reimbursement agrees with the actual served meal count documentation.

3. The Sponsor provided menus that did not meet the USDA meal pattern requirements

Condition

The menus for November 2017 had deficiencies and listed the following:

University of Little Scholars Phase II 0002

Date	Missing Component	Disallowed Meals
11/03/17	Missing Component: Second fruit or vegetable Menu Listed: Milk, turkey sandwich with cheese, cheddar chips, applesauce, and wheat bread.	9 lunch meals
11/07/17	Missing Component: Second fruit or vegetable Menu Listed: Milk, turkey sandwich with cheese, cheddar chips, applesauce, and wheat bread.	10 lunch meals
11/14/17	Missing Component: Second fruit or vegetable Menu Listed: Milk, turkey sandwich with cheese, cheddar chips, applesauce, and wheat bread.	10 lunch meals
11/21/17	Missing Component: Second fruit or vegetable Menu Listed: Milk, turkey sandwich with cheese, cheddar chips, applesauce, and wheat bread.	9 lunch meals
11/29/17	Missing Component: Second fruit or vegetable Menu Listed: Milk, turkey sandwich with cheese, cheddar chips, applesauce, and wheat bread.	9 lunch meals

As a result, the cost reimbursement of 47 lunch meals was disallowed.

Criteria

Title 7 of the Code of Federal Regulations Section 226.17(b)(4) 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 ..."

The USDA Crediting Foods in the Child and Adult Care Food Program, page 33, states, "Snack chips such as banana, fruit, vegetable, and potato chips may not be credited as a fruit or vegetable. However, 100% dried fruits or vegetables are creditable based on the volume served..."

The USDA Crediting Foods in the Child and Adult Care Food Program, page 38, states, "Potato chips are a snack food and are not creditable."

Recommendation

The Sponsor should ensure menus for meals served meet the meal pattern requirements established by the USDA.

4. The number of lunch meals and supplements verified exceeded the attendance

Condition

During our on-site visit at University of Little Scholars Phase II 0002 on November 27, 2017, the monitoring staff conducted a five-day reconciliation. Based on our review of the meal count and attendance documentation for the five day reconciliation, we noted that the lunch meals and supplements exceeded the verified attendance on November 22, 2017. The attendance documented for November 22, 2017 was six; however the meal count documents showed ten lunch meals and 10 supplements. For reimbursement purposes, the number of meals served cannot exceed the verified attendance.

As a result, the cost reimbursement of four lunch meals and four supplements was disallowed.

Criteria

Title 7 of the Code of Federal Regulations, Section 226.10 (c) states, "...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 ensure an accurate number of meals and attendance are claimed for reimbursement and meals do not exceed attendance.

5. The Sponsor reported incorrect participant days

Condition

The claim for reimbursement for the test month reported 980 participant days. However, based on our review of the Sponsor's records, we noted 1,005 participant days. The difference was based on the following:

University of Little Scholars 0001

The Sponsor reported 674 participant days for University of Little Scholars 001. However, based on the review of the attendance records for the site, we verified 672 participant days.

University of Little Scholars Phase II 0002

The Sponsor reported 306 participant days. However, based on the review of the attendance records at the sample site, we verified 333 participant days.

Criteria

Title 7 of the Code of Federal Regulations, Section 226.10 (c) states, "... 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 ensure the attendance is recorded and reported correctly. Appropriate supporting documentation should be maintained and available.

Note: Our observation of the meal service on November 27, 2018 revealed no deficiencies.

Technical Assistance Provided

Technical assistance was provided to the Sponsor on the new meal pattern requirements. The Sponsor was informed that potato chips are not creditable as a fruit or vegetable component.

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 cost of \$239.22.

Corrective Action

The Sponsor's management must complete the following actions within 30 days from the date of this report:

- Log into the Tennessee Information Payment System (TIPS) and revise the claim submitted for November 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 \$239.22 for recovery of the amounts disallowed in this report. **Please return the attached billing notice with your check;** 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 of Operations
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 is completed 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 overpayment identified by the monitoring report. The procedures for submitting an appeal are enclosed. The appeal must be submitted to:

Tennessee Department of Human Resources
Appeals and Hearings Division, Clerks Office
P.O. Box 198996
Nashville, Tennessee 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

Exhibits

Cc: Allette Vayda, Director of Operations
Debra Pasta, Program Manager, Child and Adult Food Program
Elke Moore, Administrative 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 A

Verification of CACFP Sponsor of Affiliated Centers Claim

Name of Sponsor: University of Little Scholars

Review Month/Year: November 2017

Total Meal Reimbursement Received: \$ 4,364.19

Program Area	Reported	Reconciled by Monitoring Review
Number of Days that CACFP Food Service was operated	19	19
Total Attendance	980	1,005
Number of Breakfasts Served	654	656
Number of Lunches Served	844	800
Number of Supplements Served	973	974
Number of Participants in Free Category	54	53
Number of Participants in Reduced-Price Category	1	1
Number of Participants in Paid Category	9	10
Total Number of Participants	64	64
Total Number of Centers	XXXXXXXX	2
Total Amount of Food Costs	XXXXXXXX	\$2,284.39
Total Amount of Eligible Food and Nonfood Costs	XXXXXXXX	\$5,124.81

EXHIBIT B

Verification of Affiliated Sponsored Center Data

Name of Sponsor: University of Little Scholars
Site Name: University of Little Scholars Phase II 0002
Review Month/Year: November 2017
Total Meal Reimbursement Received: \$927.18

Program Area	Reported on	Reconciled by Monitoring Review
Number of Days that CACFP Food Service was operated	19	19
Total Attendance	306	333
Percentage of Participants in the Free or Reduced-price Category (For Proprietary Center Only)	XXXXXXXX	76%
Number of Breakfasts Served	177	179
Number of Lunches Served	170	126
Number of Supplements Served	306	307
Number of Participants in Free Category	16	16
Number of Participants in Reduced-Price Category	0	0
Number of Participants in Paid Category	5	5
Total Number of Participants	21	21
Total Amount of Eligible Food Costs	XXXXXXXX	See Affiliated Sponsor Exhibit
Total Amount of Eligible Food and Non-Food Costs	XXXXXXXX	See Affiliated Sponsor Exhibit

EXHIBIT C**Verification of Affiliated Sponsored Center Data****Name of Sponsor: University of Little Scholars****Site Name: University of Little Scholars Phase 0001****Review Month/Year: November 2017****Total Meal Reimbursement Received: \$3,437.00**

Program Area	Reported on	Reconciled by Monitoring Review
Number of Days that CACFP Food Service was operated	19	19
Total Attendance	674	672
Percentage of Participants in the Free or Reduced-price Category (For Proprietary Center Only)	XXXXXXXX	88%
Number of Breakfasts Served	477	477
Number of Lunches Served	674	674
Number of Supplements Served	667	667
Number of Participants in Free Category	38	37
Number of Participants in Reduced-Price Category	1	1
Number of Participants in Paid Category	4	5
Total Number of Participants	43	43
Total Amount of Eligible Food Costs	XXXXXXXX	See Affiliated Sponsor Exhibit
Total Amount of Eligible Food and Non-Food Costs	XXXXXXXX	See Affiliated Sponsor Exhibit



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March 9, 2018

Alexsia Williams, Owner
University of Little Scholars
941 East Raines Road
Memphis, Tennessee 38116-6322

Notice of payment due to findings disclosed in the monitoring report dated March 9, 2018 for Child and Adult Care Food Program (CACFP)

Institution Name:	University of Little Scholars
Institution Address:	941 East Raines Road Memphis, Tennessee 38116-6322
Agreement Number:	00-559
Amount Due:	\$239.22
Due Date:	April 9, 2018

Based on the monitoring report issued by the Division of Audit Services 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 disallowed meals cost noted in the report.

Please remit a check or money order payable to the **Tennessee Department of Human Services** in the amount of \$239.22 by the due date to:

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

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 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 of Operations at (615) 313-3769 or Allette.Vayda@tn.gov

Thank you for your attention



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: University of Little Scholars	Agreement No. 00-559	<input type="checkbox"/> SFSP <input checked="" type="checkbox"/> CACFP
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Mailing Address: 941 East Raines Road Memphis, Tennessee 38116-6322

Section B. Responsible Principal(s) and/or Individual(s)

Name and Title: Alexsia Williams, Owner	Date of Birth: / /
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Section C. Dates of Issuance of Monitoring Report/Corrective Action Plan

Monitoring Report: 3/9/2018	Corrective Action Plan: 3/9/2018
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Section D. Findings

Findings:

1. The number of participants reported in the free and paid categories was incorrect
2. The Sponsor claimed the incorrect number of meals
3. The Sponsor provided menus that did not meet the USDA meal pattern requirements
4. The number of lunch meals and supplements verified exceeded the attendance
5. The Sponsor reported incorrect participant days

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

Measure No. 1: The number of participants reported in the free and paid categories was incorrect

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 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:

How will new and current staff be informed of the new policies and procedures to address the finding (e.g., Handbook, training, etc.)? Please describe below:

Measure No.2: The Sponsor claimed the incorrect number of meals

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 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:

How will new and current staff be informed of the new policies and procedures to address the finding (e.g., Handbook, training, etc.)? Please describe below:

Measure No. 3: The Sponsor provided menus that did not meet USDA requirements

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 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:

How will new and current staff be informed of the new policies and procedures to address the finding (e.g., Handbook, training, etc.)? Please describe below:

Measure No. 4: The number of lunch meals and supplement meals verified exceeded the attendance

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 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:

How will new and current staff be informed of the new policies and procedures to address the finding (e.g., Handbook, training, etc.)? Please describe below:

Measure No. 5: The Sponsor reported incorrect participant days

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 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:

How will new and current staff be informed of the new policies and procedures to address the finding (e.g., Handbook, training, etc.)? Please describe below:

I certify by my signature below that I am authorized by the institution to sign this document. As an authorized representative of the institution, I fully understand the corrective measures identified above and agree to fully implement these measures within the required time frame. I also understand that failure to fully and permanently correct the findings in my institution's CACFP or SFSP will result in its termination from the program, and the placement of the institution and its responsible principals on the National Disqualified List maintained by the U.S. Department of Agriculture.

Printed Name of Authorized Institution Official:

Position:

Signature of Authorized Institution Official: _____

Date: / /

Signature of Authorized TDHS Official: _____

Date: / /

- (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 forward 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.