

# STATE OF TENNESSEE DEPARTMENT OF HUMAN SERVICES

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BILL LEE GOVERNOR DANIELLE W. BARNES

January 22, 2019

Ronnie Brooks, Board Chairman Southwest Human Resource Agency P.O. Box 264 Henderson, Tennessee 38340-7625

Dear Mr. Brooks,

The Department of Human Services (DHS) - Division of Audit Services staff conducted an unannounced on-site monitoring review of the Child and Adult Care Food Program (CACFP) at Southwest Human Resource Agency (Sponsor), Application Agreement number 00070, on December 11, 2018 and December 12, 2018. 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, provider 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 counts sheets for our test period and reconciled the meals claimed to the meals reported as served for each meal service. We assessed compliance with civil rights requirements. In addition, we observed lunch meal services at Decatur County Head Start on October 24, 2018 and Hardeman County Head Start Center on October 29, 2018. We also observed supper meal services at Denmark Elementary at-risk on October 25, 2018, Rose Hill at-risk on October 26, 2018, Scott Street Center at-risk on October 31, 2018 and Whiteville Elementary School at-risk on October 29, 2018.

Two types of programs were evaluated during the test month of October 2018- Head Start centers and At-Risk sites. Our sample included two Head Start centers and four At-Risk sites.

Our review of the Sponsor's records for October 2018 disclosed the following:

#### At-Risk sites

Based on our review of the Sponsor's records and information provided, the Sponsor had 23 At-Risk feeding sites operating during the review period. Whiteville Elementary School, Rose Hill, Denmark Elementary and Scott Street Center were selected as the sample sites.

#### 1. The Sponsor reported meal counts incorrectly

#### Condition

The claim for reimbursement for the test month reported 15,673 supper meals and 3,425 supplements. However, based on our review of the Sponsor's documentation, we noted support for 15,672 supper meals and 3,425 supplements. The Sponsor overreported the number of supper meals by one (1). The difference is based on the following:

The Sponsor reported 506 supper meals served at the **Rose Hill** at-risk site. However, based on our review of the Sponsor's available documents, we found there were 505 supper meals supported as served, prior to any meal disallowances.

As a result, one (1) supper served was overreported (See Exhibit C)

# 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 claims for reimbursement are completed correctly and based on accurate supporting documents.

# 2. The Sponsor reported the number of attendance days incorrectly

#### Condition

The claim for reimbursement for the test month reported 16,494 attendance days. However, based on our review of the Sponsor's documentation, we noted 16,488 attendance days. The difference is based on the following:

The Sponsor reported 845 participant days for the **Whiteville Elementary School** at-risk site. However, we found that there were 840 participant days.

The Sponsor reported 516 participant days for the **Rose Hill** at-risk site. However, we found that there were 515 participant days.

#### <u>Criteria</u>

*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 all participants are recorded as present only for their actual days of attendance.

# This is a repeat finding from a previous report dated May 7, 2018.

#### 3. The Sponsor did not complete monitoring as required

#### Condition

The monitoring documentation for the sample sites revealed the following deficiencies:

According to the monitoring documentation provided for the **Whiteville Elementary School** atrisk site, monitoring was documented as completed on February 26, 2018, April 09, 2018 and October 29, 2018. More than six months lapsed between the April and October monitoring reviews.

The monitoring documentation provided for **Denmark Elementary** dated September 18, 2018, did not have a 5-day reconciliation of meal counts as required.

#### Criteria

*Title* 7 of the Code of Federal Regulations, Section 226.16(d)(4)(iii) states, "Sponsoring organizations must review each facility three times each year, except as described in paragraph (d)(4)(iv) of this section. In addition: (A) At least two of the three reviews must be unannounced; (B) At least one unannounced review must include observation of a meal service; (C) At least one review must be made during each new facility's first four weeks of Program operations; and (D) Not more than six months may elapse between reviews."

*Title 7 of the Code of Federal Regulations, Section 226.16(d)(4)(ii) states, "*Reviews must examine the meal counts recorded by the facility for five consecutive days during the current and/or prior claiming period..."

#### Recommendation

The Sponsor should ensure that the required monitoring is completed as determined and defined by the USDA.

#### This is a repeat finding from a previous report dated May 7, 2018.

#### Head Start Centers

The Sponsor had 13 Head Start Centers in operation during the test month. **Decatur County Head Start** and **Hardeman County Head Start Center** were selected as the sample sites.

#### 4. The Sponsor served meals outside of the approved serving time

#### **Condition**

During our monitoring visit on October 24, 2018 at **Decatur County Head Start**, an observed lunch meal began before the approved meal service time detailed in TIPS. The observed meal

service was from 11:20 a.m. to 12:00 p.m., but the TIPS approved meal service time was 11:30 a.m. to 12:00 p.m.

<u>Note:</u> No meals were disallowed due to monitoring staff's observance; however, meals should be served during the approved meal service time.

# 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...."

#### Recommendation

The Sponsor should ensure that meals are served during the approved feeding site time.

# 5. The Sponsor reported the number of days of operation incorrectly

#### Condition

The Sponsor reported 23 days of operation and food service for **Decatur County Head Start** and **Hardeman County Head Start Center**. However, we found there were 22 days of operation and food service at the feeding sites.

# 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 number of operation days is reported correctly and according to supporting documentation.

#### Technical Assistance Provided

Technical assistance was provided regarding the fiscal year-end inventory

#### **Disallowed Meals Cost**

The disallowed meal cost associated with the findings above is below the DHS threshold for repayment.

# **Corrective Action**

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

• 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 Child and Adult Care Food Program James K. Polk Building, 15<sup>th</sup> Floor 505 Deaderick Street Nashville, Tennessee 37243 <u>Allette.Vayda@tn.gov</u> (615) 313-3769

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 <u>Sean.Baker@tn.gov</u>.

Sincerely,

Sam O. Alzoubi. CFE

Director of Audit Services

Exhibit

 cc: Mike Smith, Executive Director, Southwest Human Resource Agency Glenda Jewell, Assistant Director for Child Health Services, Southwest Human Resource Agency Patti Pickler, At-Risk Program Director, Southwest Human Resource Agency Susan Presson, Assistant Director for Admin/Career Development, Southwest Human Resource Agency Allette Vayda, Director of Operations, Child and Adult Care Food Programs Debra Pasta, Program Manager, Child and Adult Care Food Program Elke Moore, Administrative Services Assistant 3, 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

# Sponsor of CACFP At-Risk Afterschool Meals Program Data

# Sponsor: Southwest Human Resource Agency Review Month/Year: October 2018 Total Reimbursement: \$58,677.54

Site Meal Service Reconciliation and Monitor Activity	Reported on Claim	Reconciled to Documentation
Total Days of CACFP Food Service	23	23
Number of Sites	23	23
Total Attendance	16,494	16,488
Number of Supplements Served	3,425	3,425
Number of Supper Meals Served	15,673	15,672
Total Amount of Food Costs	XXXXXXXX	\$60,155.18
Total Amount of Eligible Food and Nonfood Costs	XXXXXXXX	\$60,155.18

# Exhibit B

# At-Risk Afterschool Meals Site Data

#### Site: Denmark Elementary Month: October 2018

Site Meal Service Reconciliation and Monitor Activity	Reported on Claim	Reconciled to Documentation
Total Days of CACFP Food Service	18	18
Total Attendance	278	278
Number of Supper Meals Served	268	268

# Exhibit C

# At-Risk Afterschool Meals Site Data

# Site: Rose Hill

Month:	October	2018

Site Meal Service Reconciliation and Monitor Activity	Reported on Claim	Reconciled to Documentation
Total Days of CACFP Food Service	18	18
Total Attendance	516	515
Number of Supper Meals Served	506	505

# Exhibit D

# At-Risk Afterschool Meals Site Data

Site Meal Service Reconciliation and Monitor Activity	Reported on Claim	Reconciled to Documentation
Total Days of CACFP Food Service	17	17
Total Attendance	433	433
Number of Supplements Served	433	433
Number of Supper Meals Served	433	433

# Site: Scott Street Center

# Exhibit E

# At-Risk Afterschool Meals Site Data

# Site: Whiteville Elementary School

Site Meal Service Reconciliation and Monitor Activity	Reported on Claim	Reconciled to Documentation
Total Days of CACFP Food Service	14	14
Total Attendance	845	840
Number of Supper Meals Served	824	824

# Exhibit F

# Sponsor of CACFP Head Start Meals Program Data

# Sponsor: Southwest Human Resource Agency Review Month/Year: October 20118 Total Reimbursement: \$47,530.78

Site Meal Service Reconciliation and Monitor Activity	Reported on Claim	Reconciled to Documentation
Total Days of CACFP Food Service	23	22
Number of Sites	13	13
Total Attendance	9,362	9,362
Number of Breakfast Meals Served	8,880	8,880
Number of Lunch Meals Served	8,924	8,924
Total Amount of Food Costs	XXXXXXXX	\$43,505.49
Total Amount of Eligible Food and Nonfood Costs	XXXXXXXX	\$47,252.33

# Exhibit G

# Head Start Meals Site Data

# Sample Site: Decatur County Head Start Month: October 2018

Site Meal Service Activity and Monitor Reconciliation	Reported on Claim	Reconciled Meals to Meal Counts Sheets
Total Number of Days Food Served	23	22
Total Attendance	339	339
Number of Breakfast Meals Served	301	301
Number of Lunch Meals Served	285	285

# Exhibit H

# Head Start Meals Site Data

# Sample Site: Hardeman County Head Start Center Month: October 2018

Site Meal Service Activity and Monitor Reconciliation	Reported on Claim	Reconciled Meals to Meal Counts Sheets
Total Number of Days Food Served	23	22
Total Attendance	673	673
Number of Breakfast Meals Served	630	630
Number of Lunch Meals Served	658	658



# 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: Southwest Hum Agency	an Resource	Agreement No. 00070	□ SFSP ⊠ CACFP	
	000.40			
Mailing Address: P.O. Box 264 Henderson, Ten	inessee 38340-	/625		
Section B. Responsible Principal(s) and/or Individual(s)				
Name and Title: Ronnie Brooks, Board Chairman		Date of Birth: / /		
Section C. Dates of Issuance of Monitoring Report/Corrective Action Plan				
Monitoring Report: 1/22/2019	Corrective Action Plan: 1/22/2019			

# Section D. Findings

Findings:

- 1. The Sponsor reported meal counts incorrectly
- 2. The Sponsor reported the number of attendance days incorrectly
- 3. The Sponsor did not complete monitoring as required
- 4. The Sponsor served meals outside of the approved serving time
- 5. The Sponsor reported the number of days of operation incorrectly

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 reported meal counts incorrectly

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 reported the number of attendance days incorrectly

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 did not complete monitoring as required

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 Sponsor served meals outside of the approved serving time

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 the number of days of operation incorrectly

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:	/	/	

DHS staff should check the "Forms" section of the intranet to ensure the use of current versions. Forms may not be altered without prior approval. Distribution: OIG and CACFP/SFSP as appropriate RDA: 2341 HS-3187 (Rev. 11-16) Page 7 of 8

# APPEAL PROCEDURES FOR CHILD AND ADULT CARE INSTITUTIONS AND SPONSORING AGENCIES

#### Appeal Procedures

1. Pursuant to 7 CFR §226.6(k)(4), the TN Department of Human Services (TDHS) must provide administrative review procedures to institutions and responsible principals and responsible individuals as follows:

(a) Annually to all institutions;

(b) To an institution and to each responsible principal and responsible individual when the State agency takes any action subject to an administrative review as described in 7 CFR 226.6(k)(2); and

(c) Any other time upon request.

2. Pursuant to 7 CFR 226.6(k)(3) and (k)(9), some administrative actions are not subject to administrative review. Those actions are listed in paragraph 2.(a). Other administrative actions may be administratively appealed. Those actions are listed in paragraph 2.(b) and (c). All institutions and sponsoring agencies may appeal any adverse administrative action listed in paragraph 2.(b) which are taken by the TDHS by requesting a fair hearing to appear in person to refute the action, or by requesting a review of written information in lieu of a fair hearing.

(a) Pursuant to 7 CFR Part 226.6 (k)(3) TDHS is prohibited from offering administrative reviews of the following actions:

- (i) FNS decisions on claim deadline exceptions and requests for upward adjustments to a claim.
- (ii) Determination of serious deficiency.
- (iii) State agency determination that corrective action is inadequate.
- (iv) Disqualification and placement on State agency list and National disqualified list.
- (v) Termination.
- (vi) State agency or FNS decision regarding removal from the National disqualified list.
- (vii) State agency's refusal to consider an application submitted by an institution or facility on the National disqualified list.

(b) Pursuant to 7 CFR Part 226.6(k)(9), an abbreviated appeal process is available for the following actions. TDHS must limit the administrative review to a review of written submissions by the TDHS and institutions or sponsoring agencies concerning the accuracy of the State agency's determination if the application was denied, or the State agency proposes to terminate the institution's agreement because:

- (viii) The information submitted on the application was false;
- (ix) The institution, one of its sponsored facilities, or one of the principals of the institution or its facilities is on the national disqualified list;
- (x) The institution, one of its sponsored facilities, or one of the principals of the institution or its facilities is ineligible to participate in any other publicly funded program by reason of violation of the requirements of the program;

(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 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 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

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)(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

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: <u>AppealsClerksOffice.DHS@tn.gov</u>

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.