

# Corrective Actions

Not a punishment – but an opportunity to improve operation of the CACFP!

For all participating organizations

May 2019

Supersedes previous trainings.



## Participant Guide

This institution is an equal opportunity provider, employer, and lender.



### Step(s) in the Right Direction Activity

15 minutes

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1

Explain the purpose of corrective action

2

Analyze the root cause of noncompliance resulting in corrective action.

3

Corrective Action Plans

Understand the relationship between corrective action a corrective action plan.

4

Identify the key components of a successful CAP.

5

Evaluate the effectiveness of a CAP.

6

CHAAMPS

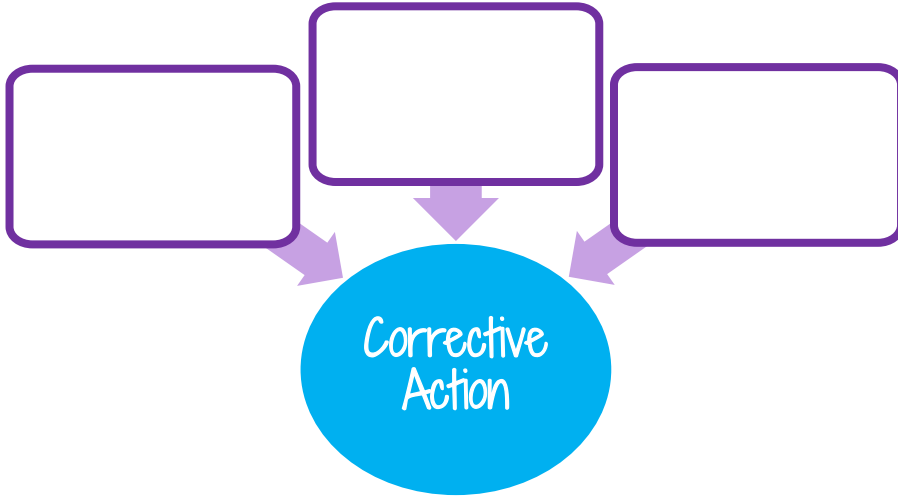
Navigate corrective actions and CHAAMPS.

# Learning Outcomes

This institution is an equal opportunity provider, employer, and lender.

## Why Corrective Action is Required

Corrective action is required to address Program findings and to maintain Program compliance.



As a sponsoring organization:

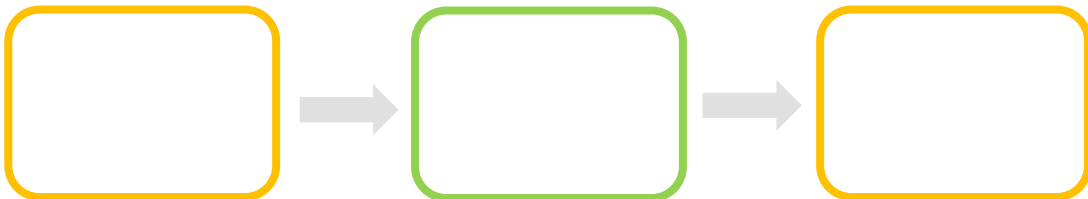
1. You are required to provide corrective action as a result of findings cited to you by your State agency during a Program review, when requesting a 36 month claim exception, or as a result of your organization being declared seriously deficient by the State agency or FNS.
2. You are required to provide corrective action as a result of findings from a Single audit (if it is required).
3. If you are a sponsoring organization of multiple centers or day care homes, you are required to obtain corrective action from homes or centers for findings cited during a monitoring review or part of the serious deficiency process for sponsored homes.

## Corrective Action

§226.15(e) **Participating institutions accept final \_\_\_\_\_ and \_\_\_\_\_ responsibility for Program operations.**

↳ §226.16(c) Additionally, sponsoring organizations of multiple facilities (homes or centers) accept final administrative and financial responsibility for the food-service operations in all facilities it sponsors.

- Independent Institutions: \_\_\_\_\_
- Sponsors of facilities: \_\_\_\_\_



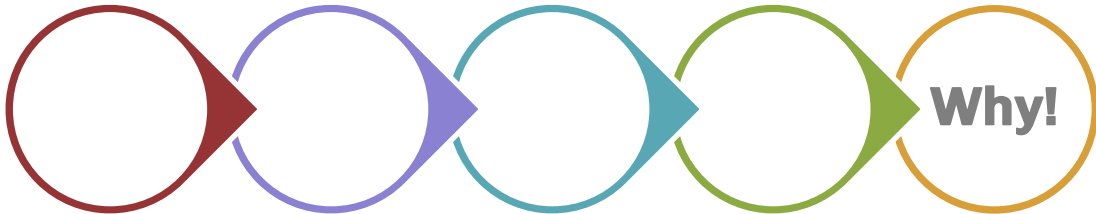
When noncompliance is identified, it must be cited, and sponsoring organizations must require corrective action.



To successfully implement a corrective action, it is necessary to understand what \_\_\_\_\_ the finding of noncompliance. The \_\_\_\_\_ is documented in the finding description.

A \_\_\_\_\_ analysis is necessary to get to the bottom of the issue. The best way to determine the root cause is to ask the question "Why?".

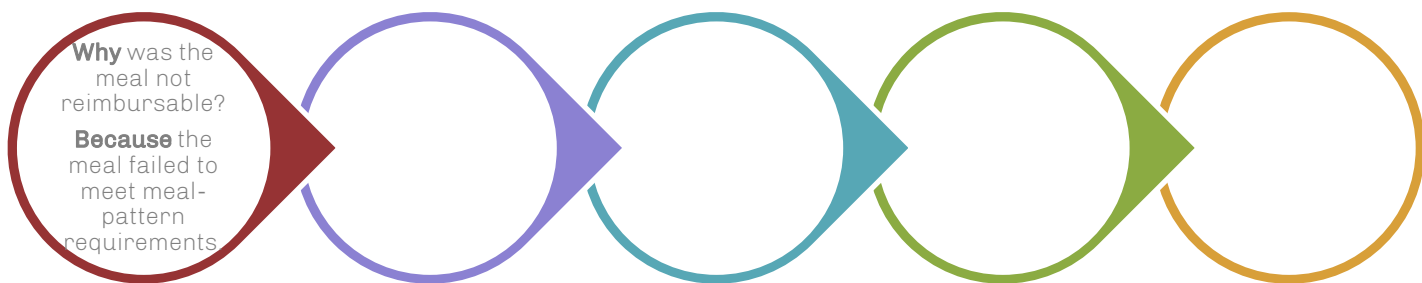
## The 5 Whys Method



### Scenario Finding: Failure to maintain compliance with meal-pattern requirements [§226.20(c)]

You are the sponsor of a childcare center under review by the State agency. During the on-site meal observation, the reviewer notices that orange drink is served for the milk component at breakfast. The reviewer questions the cook, who indicated that whole, skim, or fat-free milk (depending on age-level) is listed on the posted menu for the day. However, there is no milk available. All the center has is orange drink, 100% apple juice, and water. In order to provide something to drink for the children in care, the cook decided to serve orange drink because it has vitamin C and the kids like it. The cook said she did not know that orange drink does not meet meal-pattern requirements. Therefore, the State agency cites the center for failure to meet the meal-pattern requirements noted in 7 CFR 226.20(c).

**Required Action** Centers must comply with 7 CFR 226.20(c). Each meal claimed for reimbursement must have a corresponding menu that lists all required components. Only credible meals and food items should be served and claimed for CACFP reimbursement.




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## Corrective Action Plan

2 CFR 200.511(c)

A written response that details the **specific action** the facility will take within a specified time frame to permanently correct the noncompliance.



- ⊗ details step-by-step actions
- ⊗ must include the "what, who, when, where, how"
- ⊗ actions must resolve the root-cause condition that resulted in noncompliance
- ⊗ actions must prevent recurrence
- ⊗ process and procedures must be consistent with federal regulations, State policy, and organizational requirements.

## Notes

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# Developing the Corrective Action Plan

**W** What processes and procedures will be implemented to correct the finding?

**W** Who is ultimately responsible for implementing the processes and internal controls?

**H** How will the facility ensure the processes and procedures are followed consistently to prevent recurrence?

**W** When will the processes and procedures be implemented and at what frequency?

**W** Where will the documentation be retained?

## CAP Supporting Documentation

Additional supporting documentation must be submitted with the CAP. Supporting documentation must demonstrate the problems identified were fully and permanently corrected.

Some examples of supporting documentation include, but aren't limited to:

- ☉ Income eligibility forms
- ☉ Enrollment forms
- ☉ Enrollment rosters
- ☉ **Staff training documentation**
- ☉ Site monitoring reports
- ☉ Attendance records
- ☉ Updated form templates
- ☉ Menus
- ☉ Child Nutrition (CN) labels/manufacturers' product analysis sheets
- ☉ Recipes

Supporting documentation is one factor that assists with supporting an organization or facility's CAP. It is not necessarily the only factor. The above list is not all inclusive. It is important to remember that supporting documents are heavily dependent on the noncompliance issue.

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## Evaluating a Corrective Action Plan



The State agency and sponsoring organizations of multiple facilities have the same responsibility for corrective action plans.

Understanding the State agency's main objectives in evaluating the corrective action plan is helpful if a time comes in which your organization will be required to submit a CAP.

### Key Objectives

- Determine whether the corrective action plan includes all required elements (4 W's and 1 H);
- Assess whether or not noncompliance is sufficiently addressed;
- Determine whether noncompliance is likely to recur; and
- Assess whether corrective action has been fully implemented.

### Activity: Analyzing a Corrective Action Plan

1. In your team, read and discuss the finding and required corrective action.
2. Determine the root cause using the 5 *Whys* method.
3. Evaluate the CAP using the CAP checklist, is the CAP acceptable? Why? Why not?
4. Be prepared to report your decisions.

### Scenario

During a Program review, the State agency reviewer determined that VDH Childcare failed to maintain child nutrition labels (CN), signed product analysis sheets, manufacturer's specifications, product formulation statements, or recipes, in compliance with Appendix C 7 CFR Part 226 – Child Nutrition Labeling Program. Per the menus provided to the State agency reviewer on 9/20/18, VDH Childcare served the following meals:

- o Lunch on 9/14/18: Whole wheat cheese pizza, green beans, apple slices, 1% milk
- o Lunch on 9/12/18: Chicken nuggets, baked sweet potato fries, tossed salad (spinach, carrots, ranch dressing), 1% milk

Upon the State agency's request for the label documentation, the Lead Cook indicated that last month the Center Director was supposed to contact the food vendor to obtain CN labels for the pizza and nuggets. However, due to a sudden family emergency, the Center Director went out of town for 2 weeks. Upon the Director's return to the center, she forgot to call the food vendor, and the Lead Cook forgot to remind her to do so. The center does have a current policy to update CN labels; however, it was not followed.

Due to the lack of CN labels the State agency was unable to determine whether the products met meal-pattern requirements. Therefore, the 25 lunches served on 9/14/18 and 32 lunches served on 9/12/18 must not be claimed for reimbursement.

#### REQUIRED ACTION

VDH Childcare must ensure compliance with Appendix C 7 CFR Part 226- Child Nutrition Labeling Program. CN Labels, signed product analysis sheets, manufacturers' specifications, product formulation statements, or recipes for combination foods served at the facility must be on file and available for review.

## Activity: Analyzing a CAP Cont.

Root-Cause Analysis:  
5 Whys  
Method

**Why** did VDH not have CN Labels or product statements on file?

**Because** the Center Director failed to follow their written policy for obtaining CN labels..

**Why** did the Center Director fail to follow their written policy?

**Because** a family emergency occurred, and she left for 2 weeks.

**Why** did the center director not request the CN labels upon her return?

**Because** the CD forgot about the task to contact the food vendor, there was no reminder system in place to ensure the policy was followed.

Root-cause

Lack of checks and balances system

### Corrective Action Plan Response

- VDH Childcare reviewed our upcoming menus to identify all pre-prepared combination foods served at our facility.
- We have identified the following items and obtained the corresponding CN labels: Whole wheat cheese pizza, chicken nuggets, breaded fish, beef stew.
- The Center Director contacted the vendor on 9/22/18 and obtained copies of CN labels for the four abovementioned products. She also revised the CN label policy to add the Lead Cook as the primary check and the CD as the secondary check.
- Going forward, the LC will check all pre-prepared products against the product labels during receipt of food to ensure that we have current documents on file and that food items meet meal-pattern requirements.
- A "to-do" list has been created for the LC. It is posted in the kitchen and includes the information listed in part d. The LC must check off tasks as they are completed. Additionally, a biweekly reminder has been added to both the LC and CD's calendars (accessible in the kitchen and office) that will prompt the LC to complete the task described in part d and remind the CD of the LC's responsibilities. The CD will check in with the LC at the end of the day (every other Monday) to verify that the task was completed. The CD will make this verification by signing off on the completed "to-do list".
- As they are received, the LC will add new CN labels to the binder stored in the kitchen. The CD will periodically check the binder to ensure all documents are up to date.
- The corrective action plan was implemented on 9/30/18.

Is this response acceptable? Why? Why not?

Use the Sample Corrective Action Plane Evaluation Checklist in your training packet.



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## ReCAP

Purpose of corrective action	
Root-cause analysis	
Corrective action plan requirements	
CAP Components and evaluating effectiveness	
CHAAMPS Compliance Section	

# References

## Requirements

Code of Federal Regulations (7 CFR 226)

§226.6(c) – participating organizations

§226.16(l) – FDCH providers

USDA Policy Memos

CACFP 14-2012, *Child and Adult Care Food Program Guidance on Serious Deficiency Process and Acceptable Corrective Action Plans, National Disqualified List Procedures and Debt Collections*, May 1, 2012.

USDA Handbooks

*Serious Deficiency, Suspension, & Appeals for State Agencies & Sponsoring Organizations*, USDA (February 2015).

## Resources

Handouts

Corrective Actions Participant's Guide

CAP Evaluation Checklist

CAP Development Template

**Training and Resources from VDH** <http://www.vdh.virginia.gov/child-and-adult-care-food-program/>

This training and participant guide were adapted from the March 2019 CACP Operational Resources and Education "Corrective Action" training by MH Miles Company.

Presentation template by [SlidesCarnival](#) // Photographs by [Unsplash](#)