

BILL LEE GOVERNOR

# STATE OF TENNESSEE DEPARTMENT OF EDUCATION NINTH FLOOR, ANDREW JOHNSON TOWER 710 JAMES ROBERTSON PARKWAY NASHVILLE, TN 37243-0375

PENNY SCHWINN COMMISSIONER

August 22, 2019

Dr. Mike Winstead Maryville City Schools 833 Lawrence Avenue Maryville, TN 37803

#### Dear Director Winstead:

Please find attached the summary review of findings from the School Nutrition Program's 2018–19 fiscal year administrative review of Maryville City's National School Lunch Program and School Breakfast Program. This review was conducted the week of April 1, 2019, with the exit date of April 3, 2019. The attached summary includes the identified findings and the corrective actions required.

District responses and supporting documentation of corrective actions are required for all findings, and findings must be corrected district wide. The School Nutrition Program director must provide the responses to the findings via the Tennessee: Meals, Accounting, and Claiming (TMAC) system in the "Compliance" section, as discussed with the lead reviewer. Technical assistance areas do not require responses; these suggestions are only to help the district improve the program. They are also available in the "Compliance" section in TMAC.

All corrective actions shall be documented and supported in the "Compliance" section in TMAC no later than April 30, 2019. During this timeframe, if you find errors or points of disagreement in our findings, please contact me, to discuss next steps. If there are no errors or points of disagreement, please be mindful that refusal or failure to comply with the required, corrective actions within the allotted timeframe may result in potential fiscal action.

Upon receipt of Maryville City's documented corrective action, the Tennessee Department of Education will determine whether the documentation is complete and resolves the findings identified. Once the department approves the corrective actions, your district will receive a closure letter closing the review within 30 calendar days.

If you have any questions or concerns, please contact our office at (800) 354-3663.

Sincerely,

Sandy Dawes State Director

School Nutrition Program



## Maryville City (052) Review ID: 1652

Exit Conference Date: 4/3/2019

Review Year: 2018-2019

Month of Review: February

Lead Reviewer: Frankie Norton

| Area Findings ID Finding Description Required Co | orrective Action |
|--------------------------------------------------|------------------|
|--------------------------------------------------|------------------|

#### **SFA - Level Findings**

| 100 -<br>Certification<br>and Benefit<br>Issuance | V-0100 | Certification and benefit issuance requirements were not met. The notification of denied benefits did not advise households the reason for denial or inform them of their ability to reapply at any time during the school year. | Revise the notification letter to include required components, and upload a copy of the corrected letter to demonstrate compliance.                                                             |
|---------------------------------------------------|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 200 -<br>Verification                             | V-0200 | Verification requirements were<br>not met. The household<br>notification of selection for<br>verification did not include the<br>Use of Information Statement.                                                                   | Revise the verification selection letter to include all required components, and upload a copy of the corrected letter to demonstrate compliance.                                               |
| 800 - Civil<br>Rights                             | V-0800 | contain the full non-                                                                                                                                                                                                            | Revise the school meal application to include the full non-discrimination statement and the Use of Information Statement. Upload a copy of the corrected application to demonstrate compliance. |
| 200 -<br>Verification                             | V-0200 | Verification requirements were not met. The notice of adverse action did not provide households the right to appeal.                                                                                                             | Revise the adverse action letter to include a notice than an appeal must be filed with ten calendar days, and upload a copy of the correct letter to demonstrate compliance.                    |



| 100 -         | V-0100 | The notification of eligibility    | Revise the notification of direct certification to |
|---------------|--------|------------------------------------|----------------------------------------------------|
| Certification |        | established through direct         | include all required components, and upload a      |
| and Benefit   |        | certification did not meet         | copy of the corrected letter to demonstrate        |
| Issuance      |        | program requirements. The          | compliance.                                        |
|               |        | notification did not clarify that  |                                                    |
|               |        | that free meal benefits extend     |                                                    |
|               |        | to all school-aged children in     |                                                    |
|               |        | the household, inform              |                                                    |
|               |        | households of how to notify the    |                                                    |
|               |        | SFA of any additional school-      |                                                    |
|               |        | aged children in the household     |                                                    |
|               |        | not listed on the notification, or |                                                    |
|               |        | explain how the household can      |                                                    |
|               |        | notify the SFA if the household    |                                                    |
|               |        | did not wish to receive free       |                                                    |
|               |        | benefits for directly certified    |                                                    |
|               |        | children.                          |                                                    |

## Site - Level Findings: Maryville Junior High School (0020)

| 500 - Offer | V-0500 | Breakfast meal pattern     | Develop signage that explains what constitutes                           |
|-------------|--------|----------------------------|--------------------------------------------------------------------------|
| versus      |        | requirements were not met. | a reimbursable meal and display it in the meal                           |
| Serve       |        |                            | service area. Upload a picture of the signage to demonstrate compliance. |