

# **JANUARY 2024 MEETING**

# **BOARD OF DIRECTORS**

# THURSDAY, JANUARY 25, 2024

# Addendum A

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# **COMMUNITY ACTION PROMISE**

Community Action changes people's lives, embodies the spirit of hope, improves communities, and makes America a better place to live. We care about the entire community, and we are dedicated to helping people help themselves and each other.

# Helping People Changing Lives

# Mid-Willamette Valley Community Action Agency, Inc. Board of Directors Program Committee Meeting Minutes WEDNESDAY, DECEMBER 6, 2023

## **ATTENDANCE**

**Committee Members Present:** Erika Romine, Board Member and Program Committee Chair; Catherine Trottman, Board Member; Chris Lopez, Board Member; and Steve McCoid, Board Member

### Absent: None

**Staff:** Ashley Hamilton, Chief Program Officer: Housing and Homeless Services; Lucy Briseno, ARCHES Program Manager; Andrew Marshall, ARCHES Program Manager; and Carolina Maciel, HR Assistant.

# The meeting of the Program Committee started at 12:30pm. It was determined that a quorum was present.

#### 1. General Program Updates

- **a. HYS:** The new Drop-In location grand opening is scheduled for December 19 at 2pm. There will be a brief presentation followed by a self-guided building tour and a Q and A session.
- **b.** Sequoia Crossings: The grand opening for Sequoia Crossings is scheduled for January 30, 2024 at 12pm. A formal invite is coming in the next few weeks.
- c. Audits:
  - i. CoS-TBRA: Small audit scheduled for December 7, 2023 with the final being conducted on December 30, 2023.
  - ii. OHCS-OERA: Final audit scheduled on December 7, 2023.
  - iii. COC-ESG: Review in progress.
  - iv. ODHS-Taylors House: Scheduled for December 13, 2023.
  - v. HUD-Validation of Expenses: To be submitted on December 30, 2023.
- **d. David's House:** Monmouth youth transitional housing location is getting closer to opening. The security alarm corporation we are contracting with is in their final stages of updating the exit signage. Next steps are to schedule a tour of the facility for the insurance company and contact the city planner to begin the re-zoning process. The re-zone process will allow us to house more youth than originally slated. This process could take a few months.
- e. Marion County Psychiatric Crisis Center: We began a new partnership with Marion County Psychiatric Crisis Center for mobile crisis response specifically for the Navigation Center. They have staff available 24/7 to assist with client behavior. If further treatment is needed, they coordinate transporting the clients to a proper facility for further care. Clients always have the option to return to the center following treatment.
- **f. Tanner Project:** The program received final approval on placing clients directly into the YMCA Veteran Housing location.
- **g.** Woodburn Expansion: MWVCAA is looking into partnering with Ray of Hope, a nonprofit in Woodburn, that partners with smaller entities like "Neighbors Helping Neighbors" in order to assist in future projects. Neighbors Helping Neighbors is a nonfor-profit group focused on connecting community members to services. MWVCAA is looking at possibly providing stop-gap funding to get them through the winter months as their services are important to the community. CRP has a long term goal of expanding

services into Woodburn and more rural communities in Polk County and this is a great start. A follow up discussion is scheduled for December 8, 2023.

- 2. **ARCHES Inn Update:** Andrew Marshall, ARCHES Program Manager, provided a general overview of the ARCHES Inn and the services it provides to our community members. This facility houses chronically homeless, medically fragile individuals, wildfire affected households, unhoused adults with acute medical conditions (Home Health Care and Hospice Care is provided through a third party with referral from their medical provider) and members of diverse populations, i.e. BIPOC and LGBTQIA+ communities. We provide persons with laundry services, a grab & go food pantry, hot meals, and private restrooms in each room along with kitchenettes. Internet access, case management, access to primary care and mental/behavioral health services are also among the services provided.
  - a. Service Numbers:
    - i. 134 = Total Served by the ARCHES Inn in FY2022
    - ii. 37 = persons moved into Permanent Housing/Positive Placement (54% of all exits)
    - iii. 68 = total guest rooms, currently at about 90% capacity
    - iv. 70 = current number of persons being sheltered
    - v. 2100 = approximate number of hot meals served monthly
    - vi. 22 = staff (not including the manager)
    - vii. 24/7/365 = hours of operation
- **3. Redwood Crossings Update:** Lucy Briseno, ARCHES Program Manager, provided a general overview of the Salem Housing Authority Redwood Crossings supportive housing complex which opened during the summer of 2020. MWVCAA facilitates the wrap around case management services for clients housed at the facility which are optional. We have provided 568 service engagements in the month of November and have housed a total of 30 clients during this current fiscal year. The majority of these clients have experienced direct homelessness and/or struggled with chronic homelessness. Many have locked incomes or struggle to reach self-sufficiency due to their comorbidities. The case management services provided by the two case managers on site are crucial.

### Meeting adjourned at 1:40pm.

**Respectfully Submitted:** 

Jade Wilson, Executive Assistant

Kevin Karvandi, Board Secretary

# Mid-Willamette Valley Community Action Agency, Inc. Board of Directors Executive & Finance Committee Meeting Minutes THURSDAY, DECEMBER 14, 2023

## ATTENDANCE

**Committee Members Present:** Jade Rutledge, Board Chair; Shelaswau Crier, Board Vice-Chair; Kevin Karvandi, Secretary; and Helen Honey, Board Member.

Absent: Steve McCoid, Board Member

**Staff:** Jimmy Jones, Executive Director; Kaolee Hoyle, Chief Financial Officer; Ashley Hamilton, Chief Program Officer: Housing and Homeless Services; Rogelio Cortes, Chief Program Officer: Weatherization and Energy Services; and Jade Wilson, Executive Assistant

# The meeting of the Executive & Finance Committee started at 5:32pm. It was determined that a quorum was present.

### 1. Executive Director's Program Updates

- **a. Head Start:** Head Start program staff will be submitting a new application for their five year continuation grant. This grant provides the majority of the programs federal funds for operation. A meeting was conducted earlier this month between the Head Start staff, Policy Council members and our board members to discuss goals and objectives to be included with the application. The program is currently at 78% enrollment which is below the required enrollment rate. Because of that, the program is looking at a possible slot reduction.
  - i. Wallace Road: Construction is now complete at the new Head Start West Salem location at 1205 Wallace Rd. A final "punch walk" is scheduled with the contractors on December 21<sup>st</sup>. An open house will be scheduled for the end of January 2024.
- **b.** Nutrition First: The Oregon Department of Education monitoring is complete. There were several minor findings and all have been corrected. The program's Corrective Action Plan will be presented to the Committee in January.
- **c. CCR&R:** The program overall is doing well. Unfortunately, a grant through the Yamhill County Commissioners fell through. This outcome will not affect the operations of the program but has encouraged staff to pursue other opportunities.
- **d.** Weatherization: The new building search is underway, with several prospective locations in the research and touring phase. The goal is to house both Weatherization and Energy Services in the same building so there is a need for a substantially large building, which has proven difficult to find in the Salem area. Lastly, the program will be taking the last week of December off and will start the New Year out fresh.
- e. Energy: Energy Services has seen an influx in applicants after re-opening the application submission window. Staff are working diligently to process the large quantity of applications.

- f. HOME Youth Services: David's House (Monmouth Youth Transitional Housing) has a fire marshal inspection scheduled for December 28. The program is working with a city planner to get the property re-zoned to a medium density residence which will allow us to have more beds for youth. The goal is to complete this re-zone process before grants end in the summer. Also, the youth Drop-In will be having an open house on Tuesday, December 19 at 2pm. This will consist of a brief presentation and then self-guided tour of the new facility. Board members were encouraged to attend.
- **g. ARCHES (CRP):** The Governor's Emergency Order funding (year one) will be coming to an end on January 10; specifically the funding for eviction prevention (DAP). There is no anticipation of an issue with spending those funds down. We have prevented 672 households from being evicted as of November 30, 2023. That is above the target number of households to be served. Lastly, the ARCHES Inn has completed its Environmental Review and can begin the process of searching for a contractor to complete the renovation. We will host an open house at the Inn following completion of the construction.
- **h.** Woodburn Projects: MWVCAA will be partnering with Ray of Hope, a church in Woodburn, that partners with smaller entities like "Neighbors Helping Neighbors" in order to assist with sheltering needs. Neighbors Helping Neighbors is a not-for-profit group focused on connecting community members to services. MWVCAA will be assisting them in opening a Day Center and will provide stop-gap funding to get them through the winter months. CRP has a long term goal of expanding services into Woodburn, which is the second largest city in our service area.
- i. **IT/Facilities:** IT has been working on wiring security cameras at the ARCHES Lodge which will now house (in part) our Veteran's Services program. Robert Hale, CIO, shared that Facilities had hired a new Facilities Manager whom is adjusting well.
- **j. Operations Update:** Helana Haytas, COO, will be extending her leave of absence. She's expected to return in April 2024.
- 2. Financials Kaolee Hoyle, CFO, shared the July 2023 to October 2023 Financials.
  - **a.** Audit: The audit began on Monday this week. The auditors have chosen to review our LIHEAP funding first. The auditors have sent out risk questionnaires as well and are still waiting on some responses.
  - **b. Monitorings:** Several monitoring's are taking place currently. OHCS is utilizing a third party company to conduct their monitoring. Nutrition First has a monitoring in progress. Head Start also received an unannounced monitoring, but finance was well prepared for it.
  - **c. Bank Change:** The transition from US Bank to Umpqua is in the beginning stages. It's a slow process but is going well.
  - d. Amazon: The Day 1 Families Fund funds were received on December 5.
- **3.** January 2024 Full Board Meeting Draft The Strategic Plan update to be removed from the agenda, as we seek a contractor to assist the Board in that process. A brief update was provided at this meeting to the committee members.

**MOTION:** To approve the change to the agenda and the final agenda made by Helen Honey, **SECOND:** Kevin Karvandi. **APPROVED:** Unanimously approved

# Meeting adjourned at 6:37pm.

Respectfully Submitted:

Jade Wilson, Executive Assistant

Kevin Karvandi, Board Secretary

# Mid-Willamette Valley Community Action Agency, Inc. Board of Directors Ad-Hoc Membership Committee Meeting Minutes MONDAY, DECEMBER 18, 2023

## ATTENDANCE

**Committee Members Present:** Jeremy Gordon, Board Member; Jade Rutledge, Board Chair; and Helen Honey, Board Member.

Absent: None

Staff: Jimmy Jones, Executive Director; and Jade Wilson, Executive Assistant

# The meeting of the Membership Committee started at 11:00am. It was determined that a quorum was present.

- 1. Introductions: Jimmy Jones, Executive Director, introduced Eunice Kim, Long Range Planning Manager with the City of Salem, and interviewee to the committee and welcomed everyone in attendance.
- 2. Prospective Board Member Interview Eunice Kim, Long Range Planning Manager with the City of Salem: Miss Kim had submitted an application for membership to the Board of Directors. The Membership committee invited Miss Kim for a brief interview and discussion. Each committee member participated in asking the interview questions.
- **3.** Follow-up Discussion: It was decided that the committee would invite Miss Kim to the January 2024 Board Meeting and that a recommendation to the board would be made then to add Miss Kim to the board roster. Follow up emails will be provided to the board and Miss Kim.

Meeting adjourned at 11:40am.

**Respectfully Submitted:** 

Jade Wilson, Executive Assistant

Kevin Karvandi, Board Secretary

# Mid-Willamette Valley Community Action Agency, Inc. Board of Directors Program Committee Meeting Minutes WEDNESDAY, JANUARY 3, 2024

# **ATTENDANCE**

**Committee Members Present:** Erika Romine, Board Member and Program Committee Chair; Catherine Trottman, Board Member; Chris Lopez, Board Member; and Steve McCoid, Board Member

### Absent: None

**Staff:** Ashley Hamilton, Chief Program Officer: Housing and Homeless Services; Sean Sachs, ARCHES Program Manager; Lawrenza Gann, Veteran's Program Manager; and Jade Wilson, Executive Assistant.

# The meeting of the Program Committee started at 12:30pm. It was determined that a quorum was present.

- 1. General Program Updates Ashley Hamilton, CPO: Housing and Homeless Services, provided some general program updates. She reported that December was a slow month for program news.
  - **a.** Wallace Road Opening: Head Start will be opening a West Salem location on Wallace Road. The Open House is scheduled for January 26 at 1pm.
  - **b.** Nutrition First: Audit completed and there were some minor findings. All have been corrected at this time. The full report and a action plan to be provided to Executive Finance committee at January meeting.
  - **c. Head Start:** A possible slot reduction and updated five-year grant application to be reviewed at the January Special Board meeting scheduled for January 3.
  - d. Current Audits
    - i. CoS TBRA: Mini audit conducted on 12/7/23 awaiting report, complete audit pending Jan 2024
    - **ii. OHCS OERA:** Reviewed 30 files (less then 1% of all households) Draft report provided with responses submitted
    - iii. COC ESG: Review in progress
    - iv. ODHS Taylors House TX: Conducted on 12/13 Draft report provided
    - v. HUD Validation of expenses: Submitted on 12/30/23
  - e. CSBG: We are in the beginning stages of preparing the full CSBG (Community Service Block Grant) annual report. Each program to submit a report.
  - **f. CRP/HYS:** A tour of the CRP and HYS program sites for board members is scheduled for January 29, 2024.
- 2. Tanner Project Overview Veteran's Program Manager, Lawrenza Gann, provided an overview of our Veteran's services. Our Veteran Services program is located at the new ARCHES Lodge where they can provide transitional housing and wrap-around services for Veterans. Our program staff provide navigation to housing, assist clients in obtaining personal identification documents, assist clients in accessing economic development opportunities, and they promote self-sustainability by helping clients manage daily living activities. Many of the clients we serve in this program suffer from mental health issues sustained from military service which can make navigating daily living difficult. The Lodge provides thirty rooms for Veterans and thirty-six rooms for alternate populations (shelter plus clients and refugees).

**3.** Emergency Order Prevention/Resource Centers Overview – ARCHES Program Manager, Sean Sachs, whom is in charge of our Emergency Order prevention and resource services, provided an overview of the program. This program is focused on eviction prevention. The program is housed in three locations: 2085 Commercial St in Salem, Woodburn and Mill City at the Santiam Outreach Center. They service all of Marion County and as of December 2023 they had served 518 households with the average household pay out being \$2,042.

Meeting adjourned at 1:33pm.

**Respectfully Submitted:** 

Jade Wilson, Executive Assistant

Kevin Karvandi, Board Secretary

## Mid-Willamette Valley Community Action Agency, Inc. Board of Directors Special Meeting WEDNESDAY, JANUARY 3, 2024 MEETING MINUTES

### **ATTENDANCE:**

#### **Board of Directors:** Present:

# Present:

| Catherine Trottman | Laura Reid     | Steve McCoid    |
|--------------------|----------------|-----------------|
| Erika Romine       | Kevin Karvandi | Jade Rutledge   |
| Helen Honey        | RW Taylor      | Shelaswau Crier |

#### Absent:

Jeremy Gordon Cindy Ramirez Cisneros Frank Lonergan

### **Others Present:**

# Program Directors/Staff/Guests:

Jimmy Jones, Executive Director Kaolee Hoyle, Chief Financial Officer Robert Hale, Chief Information Officer Eva Pignotti, Chief Program Officer: Early Learning and Child Care Liz Salinas, Head Start Associate Program Director Stacey Eli, Head Start Associate Program Director Nancy Cain, Head Start Grants Specialist Jade Wilson, Executive Assistant

# The meeting of the Board of Directors was called to order at 5:30pm by Board Chair Jade Rutledge. It was determined that a quorum was present.

#### I. <u>Welcome</u> Board Chair Jade Rutledge welcomed everyone.

# II. <u>Public Comment</u>

None were made.

III. <u>Approval of Agenda</u>

No changes were made.

**MOTION:** To approve agenda made by Helen Honey, **SECOND:** Kevin Karvandi. **APPROVED:** Unanimously approved

### IV. Board Business

1. HHS Baseline 5 Year Grant 2024-2029: The baseline application for HHS federal Head Start & Early Head Start for the five year period 2024-2029 was presented for approval. This grant includes the regular grant to fund 167 Head Start slots and 204 Early Head Start slots, a new set of Program Goals and

Objectives, a Change in Scope slot reduction plan, which is required because of chronic under-enrollment, and equipment purchases that exceed \$5,000.

- 2. Head Start Program Goals and Objectives 2024-2029: Board and Head Start Policy Council members formed a committee with Head Start management to create a new set of five year goals and objectives as a part of the HHS Baseline Grant application. Annually, the program will report to the Board and Policy Council on progress made to each program goal and objective.
- **3. Head Start Equipment included in Baseline Application 2024-2029:** There were two items brought to the board for approval as equipment costing more than \$5,000 and that would be included in the HHS Baseline Application for 2024-2029. Below is information regarding both items:
  - i. School Bus \$120,000; One EHS school bus is needed to replace a bus removed from the fleet because of state law changes concerning emissions of diesel school buses.
  - **ii. Dishwasher** \$6,276.00; Replacement dishwasher for the Dallas site. The old dishwasher has outlived its useful life and its warranty, and has required multiple repairs.

**MOTION:** To approve the HHS Baseline 5 Year Grant 2024-2029, a new set of Head Start Program Goals and Objectives for 2024-2029, a change in scope slot reduction plan, and equipment purchases that exceed \$5,000 (School Bus for \$120,000 and a dishwasher \$6,276) made by Helen Honey, **SECOND:** Kevin Karvandi.

APPROVED: Unanimously approved

4. Head Start Video Surveillance Equipment Purchase – Tabled for future meeting.

MOTION: To approve tabling the Head Start Video Surveillance Equipment Purchase made by Helen Honey, SECOND: Kevin Karvandi. APPROVED: Unanimously approved

- **5. Head Start Equipment to be purchased with 2023-2024 Grant Funds:** The following equipment purchases were brought to the board for approval as purchases exceeding \$5,000 and will be allocated for purchase with the remaining funding from the 2023-2024 federal Head Start/Early Head Start grant:
  - i. HVAC system for Dallas \$25,000; Replacement of aging system that has required frequent emergency maintenance
  - **ii. HVAC system for Middle Grove** \$55,000; Expansion of HVAC system for basement staff offices, which currently have inadequate boiler/radiator heating and no air conditioning.
  - iii. Play structure for Middle Grove Early Head Start \$7,491
  - iv. Play structure for Middle Grove Head Start \$24,910

**MOTION:** To approve the equipment to be purchased with 2023-2024 grant funds (HVAC System for Dallas for \$25,000, HVAC system for Middle Grove for \$55,000, play structures for Middle Grove Early Head Start for \$7,491, and a play structure for Middle Grove Head Start for \$24,910) made by RW Taylor,

**SECOND:** Kevin Karvandi. **APPROVED:** Unanimously approved

# V. <u>Adjournment</u> The Board of Directors meeting was adjourned at 5:59pm.

Respectfully Submitted:

Jade/Wilson, Executive Assistant

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Kevin Karvandi, Board Secretary

# Mid-Willamette Valley Community Action Agency, Inc. Board of Directors Executive & Finance Committee Meeting Minutes THURSDAY, JANUARY 11, 2024

## **ATTENDANCE**

**Committee Members Present:** Jade Rutledge, Board Chair; Shelaswau Crier, Board Vice-Chair; Kevin Karvandi, Secretary; Helen Honey, Board Member; and Steve McCoid, Board Member

### Absent: None

**Staff:** Ashley Hamilton, Chief Program Officer: Housing and Homeless Services; Rogelio Cortes, Chief Program Officer: Weatherization and Energy Services; Eva Pignotti, Chief Program Officer: Early Learning and Childcare; and Jade Wilson, Executive Assistant.

# The meeting of the Executive & Finance Committee started at 5:35pm. It was determined that a quorum was present.

#### 1. General Program Updates

- a. **HYS/CRP Inclement Weather Response:** Ashley Hamilton, Chief Program Officer: Housing and Homeless Services, provided an overview of the services provided by HYS and CRP during inclement weather. Both HYS and CRP support clients during freezing temperatures by providing multiple warming center sites around Marion and Polk counties, expanded day center and drop-in hours, provided transportation to warming centers, and a warming activation hotline available to community members.
- b. Emergency Order: Ashley Hamilton, CPO, provided updates regarding Governor Kotek's Emergency Order funding provided to CRP at the beginning of 2023. Phase one of the order is complete with over \$1.8 million dollars spent on direct client services. 792 households and 2,144 individuals were served over a nine-month period and 25% of the funding was directly allocated to serve Polk County community members. Phase two will be beginning soon. With phase two the goal is to assist at least twenty-six households per month in Marion County and thirteen households in Polk County per month over eighteen months. Ashley shared the pros and cons of this next phase.

#### c. CRP Facilities:

- **i.** Family Shelter (Center Street): New roof construction completed in December 2023. They were able to confirm no historical/site of significance review is needed on the property. The next step is to find a plumber to conduct the full scope of the work needed.
- ii. **ARCHES Lodge:** Procurement process is underway for finding a contractor to perform roof repairs. Procurement process is also underway on the painting, flooring installation, and client laundry install work needed. They will be revising the scope to model a large scale renovation project prior to submitting a new RFP for an architect.

- **iii. ARCHES Inn:** The City of Salem approved the Environmental Review on 12/20/23. They are still awaiting approval from HUD.
- iv. David's House (Monmouth): All renovations and fire requirements are complete. The Fire Marshall did a walkthrough and signed off on the property as of 1/8/24.
- d. Potential Property Sale Union Street: Ashley shared a general overview of the Union Street property (formerly the HOME Youth Drop-In). She shared the pros and cons of owning the property as well as the pros and cons of selling the property. There was further discussion and it was decided to add an agenda item to the January 2024 Full Board Meeting agenda for discussion at the full board meeting.
- 2. CACFP Corrective Action Plan for Head Start: Eva Pignotti, Chief Program Officer: Early Learning and Childcare, presented on the Head Start Corrective Action Plan as a response to the recently completed CACFP (Child and Adult Care Food Program) Administrative Review performed from November 28, 2023 to December 4, 2023. There were several minor findings that have since been corrected and documented. The program policies and procedures have been reviewed, updated and implemented to meet full compliance with the USDA and the Oregon Department of Education recommendations. The full corrective action plan and supported documentation was provided to committee members.
- 3. Financials Tabled for the full board meeting due to Kaolee, CFO, being out sick.
- 4. January 2024 Full Board Meeting Draft (updated) It was requested to add to the agenda a discussion and possible approval item regarding the agency's Union Street property.

MOTION: To approve the addition to the January 2024 Full Board Meeting Agenda made by Helen Honey, SECOND: Steve McCoid. APPROVAL: Unanimously approved.

**MOTION:** To approve the 2024 Full Board Meeting Agenda as amended made by Helen Honey, **SECOND:** Kevin Karvandi. **APPROVAL:** Unanimously approved.

# Meeting adjourned at 6:31pm.

Respectfully Submitted:

Jade Wilson, Executive Assistant

Kevin Karvandi, Board Secretary

## Mid-Willamette Valley Community Action Head Start Agreement #: 2413005 Corrective Action Plan – January 5, 2024

Community Action Head Start has completed all corrective actions in response to concerns from the CACFP Administrative Review performed on November 28 – December 4, 2023 as required. Policies and procedures have been reviewed, updated and implemented to meet full compliance with the USDA and the Oregon Department of Education. Revised policies and procedures, and other required documentation are included in this plan.

#### Section 3: Enrollment Records

### **Corrective Action: Revised Enrollment Policy and Procedure**

The policy and procedure for Enrollments has been updated to identify the title/position of the staff involved in each step of the procedure, and include a double check system between the Intake/Enrollment and Nutrition teams, to ensure all Child Enrollment Forms are accurately completed for participants, prior to meals being claimed. Completeness of form includes participants First and Last names, days, times and meals received, parents/guardians printed name and signature. All information documented on the Child Enrollment Form will match all information added into ChildPlus. Completed Child Enrollment Forms will be submitted to Nutrition Services Specialist for review immediately after the enrollment appointment. If corrections are needed, Nutrition Services Specialist will return CEF to Operations Manager for correction. Operation Managers will return the corrected CEF to Nutrition Services Specialist within one week. Nutrition Services Specialist will track all incomplete CEF's in CEF Spreadsheet.

Intake staff have completed the CACFP Chapter 5- Enrollment- part 2 training on 12/12/2023. A signed training certification checklist has been submitted as verification that all current staff completing enrollments have watched ODE's CACFP Chapter 5- Enrollment part two training.

Nutrition Services Specialist, will conduct an annual mandatory CACFP Child Enrollment training on reviewing Child Enrollment Forms for completion and accuracy. Training will be conducted in April prior to processing enrollments for the new school year.

#### Section 7: Menu Records and Meal Pattern Requirements

# Corrective Action: Revision of Identified Recipes and Supporting Crediting Information; Revised Menu and Meal Documentation Policy and Procedure

The Nutrition Team: Nutrition Services Specialist, Nutrition Services Supervisor and Nutrition Services Assistant has revised and implemented a double check system for all recipes used in the program. All recipes amounts are entered into the Master Recipe Spreadsheet, prior to transferring to recipe template, all recipe amounts, ingredients and crediting information are reviewed to ensure information matches the master recipe. Recipe crediting amounts are verified through USDA Recipe Analysis Worksheet. Completed RAWs will be saved into shared Recipe folder. After completion of recipe and RAW, nutrition staff will initial recipe and RAW lines on the Recipe Checklist Spreadsheet. After first recipe and RAW review, nutrition team member sends recipe and RAW to a second nutrition team member for a spot check.

Prior to implementing new or uncommon grain items, the Nutrition Services Specialist will review USDA's Whole Grain-Rich Foods worksheet for creditability. In the event of supply chain issues causing the inability to attain creditable food items the Nutrition Services Specialist will contact Vendor for creditable substitute options. If there any concerns on creditability or documentation requirements, Nutrition Services Specialist will contact Sponsor's assigned Child Nutrition Specialist for clarification.

Required updated recipes and supporting documents are included with this plan for:

- Turkey and Cheese Sandwiches
- Macaroni and Cheese with Ham
- Chicken Burger on WG Bun
- Broccoli Salad

The policy and procedure for Menu and Meal Documentation has been updated to identify the title/position of the staff responsible for each step of the procedure, the process used to double check recipe calculations and compare them to RAW crediting amounts, the process to spot check established recipes to ensure ingredients, amounts, and crediting is correct, instructions for where menu item creditability resource for verifying whole grain status can be found, to be referenced when incorporating uncommon or new grain items, and a process for contacting the agency's assigned Child Nutrition Specialist when questions arise concerning a food items eligibility or documentation requirements.

### Section 10: Multi-Site Monitoring

# Corrective Action: Revision of Site Monitoring Policy and Procedure; Revision of Site Monitoring Reviews Tracking System

The Site Monitoring Policy and Procedure has been revised to include the title/position of the staff involved in each step of the procedure, when the schedule for annual site monitoring visits will be determined, including planned date, planned meal/snack observation and planned type of review, when the review information will be entered into the tracking system, and what information will be tracked.

Nutrition Services Specialist will determine planned dates for monitoring visits for all sites at the beginning of each school year and enter the information in the Site Monitoring Reviews Tracking spreadsheet. The person acting as the Site Monitor (Nutrition Services Specialist, Nutrition Services Supervisor or Nutrition Services Assistant) will double check the completed Site Monitoring Report Form for accuracy and completion after the monitoring visit. Site Monitor sends the form to a second member of the nutrition team for a double check within 1 day of completing the site visit.

All sections to be reviewed by Site Monitor and second member of the nutrition team include:

- Actual date of review
- Actual meal/ snack observation
- Type of review (announce or unannounced)
- Monitor who completed the site visit

- If corrective action was taken
- If a follow-up is necessary
- Staff who reviewed Site Monitoring Report Form

After verification of completeness by two team members of the nutrition team, all information will be added into Site Monitoring Tracking Spreadsheet within 7 days of completing the site monitoring visit. A hard copy will be filed in a locked cabinet inside Nutrition Services Specialist's office. The Nutrition Services Specialist will ensure all Site Monitoring Forms are on file for each site before the end of the school year, Nutrition Services Supervisor or Nutrition Services Assistant will complete double check review of all filed site monitoring reports forms to ensure all visit have been completed and match information added to tracking system.

An updated Tracking System Spreadsheet, with all review report information that will be tracked and all FY24 site monitoring review information are attached.

A completed site monitoring review report for Center St for FY 2024 is attached.

#### Section aa: Civil Rights Compliance

# Corrective Action: Revised Civil Rights Policy and Procedure for Collecting and Storing Racial and Ethnic Data Forms

The policy and procedure Civil Rights has been revised to include the title/position of the staff involved in each step of the procedure, when racial and ethnic data will be collected, how racial and ethnic data will be collected, when the CACFP racial and ethnic data form will be completed, where, how and for how long the CACFP racial and ethnic data forms will be stored, and a double check system to ensure forms are on file for all sites prior to the end of the fiscal year.

All staff completing enrollments will collect racial and ethnic data through enrollment based on information voluntarily submitted by parent or guardian. Visual identification will not be used. All information will be added into Childplus. Nutrition Services Specialist will complete CACFP Racial and Ethnic Data forms using **ChildPlus report 4020- Primary Race** for all sites with 60 days of the new FY. All CACFP racial and ethnic forms will be kept on file in a locked file cabinet located in Nutrition Services Specialist's office for three years plus the current fiscal year. A CACFP racial and ethnic spreadsheet has been created for tracking of all forms. Nutrition Services Specialist will complete forms and initial they have been completed on the CACFP Racial and Ethnic Data Spreadsheet located in OneDrive shared files. Nutrition Services Specialist will send completed forms to Nutrition Services Supervisor or Nutrition Services Assistant for double check, reviewer will be noted on the CACFP Racial and Ethnic Spreadsheet.

Attachment includes CACFP racial and ethnic data forms for all current FY24 sites.

#### Section 16: Program Administration

#### Corrective Action: Revised Meal Counts and CACFP Reimbursements Policy and Procedure

The Revised Meal Counts and CACFP Reimbursements policy and procedure has been revised to clearly demonstrate that meals are only claimed for approved meal types, for approved sites, and for approved

days and times, menus and menu documentation is reviewed for meal compliance, and meals are only claimed for participants with a valid Child Enrollment form on file.

Nutrition Services Specialist reviews all CACFP records prior to submitting monthly reimbursement into ODE's CNPWeb. All records that will be reviewed include:

- Approved meal types
- Approved sites
- Approved days and times
- Menu and menu documentation for meals served
- CEF for all participants and on file and valid.

Nutrition Services Specialist unchecks any disallowed meals on meal counts and notes disallows on Monthly Claim Spreadsheet. Nutrition team will review Daily Menu Records and menu supporting documentation to ensure all meals meet CACFP reimbursement requirements. Nutrition team will review CEF's for participants to ensure a valid CEF is on file prior to submitting CACFP monthly reimbursement.

### The following documents are included with this report:

- Revised Enrollment Policy and Procedure
- ODE Training certification checklist for CACFP Chapter 5 Enrollment part 2 training.
- ODE Revised recipes and supporting crediting for:
  - a. Turkey and Cheese Sandwich
  - b. Macaroni and Cheese with Ham
  - c. Chicken Burger with WGR Bun
  - d. Broccoli Salad
- Revised Menu and Meal Documentation policy and procedure
- Revised All Site Monitoring reviews policy and procedure
- Updated Tracking Spreadsheet
- Completed first site monitoring review report for Center St for FY 2024
- Revised Civil rights and Racial and Ethnic data form policy and procedure
- Racial and ethnic data forms for all current FY 2024 sites.
- Revised Meal Counts and CACFP reimbursements policy and procedure

Oregon Department of Education 255 Capitol St. NE Salem, OR 97310

Office of Child Nutrition, Fingerprinting and Transportation Child Nutrition Programs

# **CACFP Administrative Review Report**

# Response due within 30 calendar days from the date of receipt of this report

 Sponsor: Mid-Willamette Valley Community Action Agency- Head Start

 Agreement #: 2413005

 Review Date(s): November 28- December 4, 2023

 Exit Conference Date: December 7, 2023

 Sponsor Staff Interviewed: Jolanda Ibarra – Nutrition Services Specialist

 Eva Pignotti - Chief Program Officer - Early Learning & Child Care Nancy Cain- Head Start Grant Specialist

Reviewers:Kaitlin Skreen, Child Nutrition Specialist<br/>Ashlie Berry, Program Analyst 1

Test month/Year: October 2023

The Oregon Department of Education Child Nutrition Program (ODE CNP) staff conducted an Administrative Review of the operation of Mid-Willamette Valley Community Action Agency - Head Start's Child and Adult Care Food Program (CACFP) operation. We commend you for participating in the CACFP and for your commitment to serving nutritious meals in healthy environments. We appreciate the courtesy and cooperation shown to Kaitlin Skreen and Ashlie Berry during the review.

The Administrative Review included the areas listed in Table 1 below. The purpose of the review was to measure the program to State and Federal standards; assess agency viability, accountability, and capability; and to follow-up on any previous review findings to ensure Mid-Willamette Valley Community Action Agency - Head Start adequately and permanently implemented the required corrective actions. The review was not intended to discover all possible program deficiencies in the operation of the CACFP and any omission from this report does not mean that those deficient practices are acceptable.

ODE CNP reviewer(s) evaluated Mid-Willamette Valley Community Action Agency - Head Start's administrative records for Fiscal Year 2023, Fiscal Year 2024, the October 2023 test month, and November 2023 review month. A meal service observation was conducted at Center Street (14822) and Edgewater (13921) on November 28 and 29 2023, and site records were reviewed.

The ODE CNP Reviewer found:

- Six areas in compliance with Federal and/or State regulations and policies.
- Five areas not in compliance with Federal and/or State regulations and policies.

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| Section Reviewed   | Corrective<br>Actions<br>Required?<br>Y/N | Procedural<br>Y/N | Clerical<br>Y/N | Severity<br>(Minor,<br>Significant<br>or Critical) |
|--|---|-------------------|-----------------|--|
| Section 1: Program Information                           | <u>н</u>                                  | -                 | 2               | 2  |
| Section 2: Income Eligibility                            | đ   | 7                 | -               | =  |
| Section 3: Enrollment Records                            | Y   | Y                 | Y               | Minor  |
| Section 5: Attendance Records                            | -   | -                 | -               | -  |
| Section 6: Meal Counts                                   | 12  | 124 m             | -               | <u>B</u>   |
| Section 7: Menu Records and<br>Meal Pattern Requirements | Y   | Y                 | Y               | Significant  |
| Section 8: Financial                                     | -   | -                 | ×               | -  |
| Section 9: Staff Training                                |   | <b></b>           | E.              | -  |
| Section 10: Multi-site Sponsors                          | Y   | Y                 | Y               | Minor  |
| Section 11: Civil Rights Compliance                      | Y   | Y                 | N               | Minor  |
| Section 16: Program Administration                       | Y   | Y                 | N               | Minor  |

#### **Table 1: Administrative Review Summary**

This report includes findings and the specific corrective actions Mid-Willamette Valley Community Action Agency - Head Start must develop, submit, and implement to bring your CACFP operation into compliance with Federal and State regulations and policies, and a timeline for compliance. Federal regulation(s) and USDA CACFP Center Manual Chapter(s) governing each area of noncompliance are cited in the report.

If any findings from this administrative review resulted in adverse action by ODE CNP, appeal rights will be provided with this report. Financial assessment related to paid reimbursement claims will be documented on a separate form and provided with this report.

#### You are required to:

- 1. Implement all corrective actions by no later than <u>January 6, 2023</u>, which is 30 days from the date this report is signed, unless otherwise noted, and
- 2. Submit the written corrective action plan to ODE CNP, Attention Kaitlin Skreen, by January <u>6, 2023</u>, which is 30 days from the date this report is signed.

Failure to provide a written corrective action plan that is satisfactory and permanently corrects deficiencies noted will result in Mid-Willamette Valley Community Action Agency - Head Start being categorized as *seriously deficient* per Federal Regulation 7 CFR 226.6 (c).

After approval of the required corrective action plan described in this report, and application of any financial assessment related to this administrative review, your organization will be notified in writing of the administrative review closure.

If you have any questions concerning this report or the corrective actions required, please contact Kaitlin Skreen at (503) 508-0533 or <u>Kaitlin.skreen@ode.oregon.gov</u>.

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# Mid-Willamette Valley Community Action Agency - Head Start Agreement No. <u>2413005</u> Administrative Review Report

# Review Dates: November 28-December 4, 2023

#### Section 3: Enrollment Records

7 CFR 226.15(e)(2), 7 CFR 226.16(d)(4)(I)

ODE CNP CACFP Center Manual – Chapters 3 and 21

#### Findings:

- 1. The Sponsor's implemented procedure to collect and maintain participant enrollment information annually for each participant enrolled for care at all sites is not adequate.
  - a. CACFP Child Enrollment forms for October 2023 for the sites were missing required information.

#### Background/Observations:

- 1. A review of a sample of Center St. test site participants who attended on October 18, 2023 found that the CACFP Child Enrollment Forms (CEF) for participants did not include all required information. Below is a summary of the CEF errors observed.
  - a. Tenorio, Evaristo's CEF is missing a parent signature and date.
  - b. Miller, James's CEF does not have their name printed on the actual form, name was on a sticky note attached to the form.
  - c. Romeo Corona-Villegas's CEF is missing a printed parent name.
  - d. Child Enrollment Forms for multiple participants were missing regular hours and days of care.
    - i. Sponsor noted that this was due to the timing of when the CACFP Child Enrollment form is completed during the Head Start enrollment process as the class a participant will join is not confirmed at that time.

#### Corrective Actions:

- 1. Revise and submit to ODE the Sponsor's Enrollment policy and procedure. Include in the procedure:
  - a. The title/position of the staff involved in each new step of the procedure.
  - b. A double-check system to review CACFP Child Enrollment Forms for completeness prior meals being claims for participants.
  - c. The specific form elements that will be reviewed as a part of the double check system. This must include:
    - i. Participant First and Last name that matches all Head Start Enrollment documents.
    - ii. Parent printed name.
    - iii. Parent signature and date
      - 1. Requirements for accepting a electronic signature.

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- iv. Times, regular days of care, and meal participation
- d. How staff reviewing Child Enrollment Forms will be trained on the requirements for a CEF to be considered complete/valid and when this training will occur.
- Submit to ODE training certification checklists for all current staff involved in the collection and review of Child Enrollment Forms documenting that they have completed the <u>CACFP</u> <u>Chapter 5 – Enrollment – Part II</u> training.

#### Section 7: Menu Records and Meal Pattern Requirements

7 CFR 226.20, 7 CFR 226.17(b)(4), 7 CFR 226.19(b)(6), 7 CFR 226.15(e)(10), 7 CFR 226.16(e), 7 CFR 226.21, 7 CFR226.10(c)

ODE CNP Center Manual – Chapters 9, 10, and 11

#### Findings:

- Menus for the test month of October 2023 at both test sites and November 28, 2023, Edgewater Lunch meal observation did not meet meal documentation requirements. This is a repeat finding from the Sponsors January 2020 CACFP Administrative Review.
- 2. Menu documentation for the October 18, 2023 daily menu record did not meet menu documentation requirements. This is a repeat finding from the Sponsors January 2020 CACFP Administrative Review.

#### Background/Observations:

- Recipes on file did not credit for the minimum serving size required for the age group served. Discussion with the Sponsor indicated that clerical errors with crediting equivalents attributed to the incorrect recipe crediting. The following menu item recipes did not document that the serving sizes met minimum component requirements for the age groups served.
  - a. Turkey and Cheese Sandwich recipe, served during November 28, 2023 Lunch meal observation at the Edgewater test site, does not document that the minimum portion size required for the age group was served. The recipe ingredient weight and instructions result in 1.125oz Meat/Meat Alternate (MMA) provided, the required minimum serving size is 1.5oz MMA. The recipe was credited incorrectly via the USDA Food Buying Guide, using an item with crediting information that did not match the Product Formulation Statement crediting provided for the deli meat item used in the recipe.
  - b. Macaroni and Cheese with Ham recipe, served at the Center St site on October 10, 2023, does not document that the minimum portion size required for the age group was served. The recipe lists crediting that does not match the USDA Recipe Analysis Workbook (RAW) crediting provided. Additionally, the weight and measurement for Parmesan Cheese do not match each other, or the RAW.

- c. Chicken Burger on WG Bun recipe, served at the Center St site on October 16, 2023, does not document that the minimum portion size required for the age group was served. The recipe ingredient weight and instructions result in 1.375 oz Meat/Meat Alternate (MMA) provided, the required minimum serving size is 1.5oz MMA.
- d. Broccoli Salad recipe, served at the Center St site on October 16, 2023, does not document that the minimum portion size required for the age group was served. The recipe ingredient weight and instructions result in 1/8 cup Vegetable component provided, the required minimum serving size is ¼ cup Vegetables.
- 2. The October 18, 2023 Daily Menu record for both test sites documented WW Parmesan CousCous as Whole Wheat (WW) when the supporting documentation shows that it is a non-creditable food item.
  - a. WW Parmesan CousCous served at both Center St and Edgewater on 10/18/2023, is noted on the menu as Whole Wheat, however, the supporting nutrition label documentation shows that this item is neither whole wheat nor an enriched grain, making it a non-creditable food item.
- 3. While both of these findings were also issued on the previous CACFP Administrative review in FY20, there has since been a transition in CACFP Administrative staff and the Sponsor has made significant improvements to their homemade recipe development, tracking and review procedures. The Sponsor has a clear understanding of the menu and meal pattern requirements but lacks a sufficient double-check process for recipes and documentation to eliminate clerical errors. Given this improvement of administrative systems from the previous review, ODE is declining to disallow meals for this finding per 7 CFR 226.8(f).

### **Corrective Actions:**

- Submit to ODE revised recipes and supporting crediting information (RAW) as applicable for the following menu items. The recipes must meet minimum portion sizes for the MMA or Vegetable component for the age group served or include instructions in the recipe for additional food items that will be served with the recipe to meet minimum portion sizes for the Meat/Meat Alternate or Vegetable components.
  - a. Turkey and Cheese Sandwich
  - b. Macaroni and Chee with Ham
  - c. Chicken Burger with WG Bun
  - d. Broccoli Salad
- 2. Revise, and submit to ODE, Sponsor's Menu and Meal Documentation procedure to include:
  - a. The title/position of the staff responsible for each new step of the procedure.
  - b. The process used to double check recipe calculations and compare them to RAW crediting amounts.
  - c. A spot check of established recipes to ensure ingredients, amounts, and crediting is correct.
  - d. Instructions for where menu item creditability resource for verifying whole grain status can be found, to be referenced when incorporating uncommon or new grain items.

e. A process for contacting the Sponsor's assigned Child Nutrition Specialist when questions arise concerning a food items eligibility or documentation requirements.

#### Section 10: Multi-Site Monitoring

### 7 CFR 226.15(e)(11), 7 CFR 226.15(e)(14), 7 CFR 226.16(d), 7 CFR 226.6(m)(4)

### **ODE CNP Center Manual – Chapter 14**

Findings:

1. The Sponsor does not have an adequate tracking system for site monitoring reviews to ensure compliance with regulations.

Background/Observations:

- Sponsor did not have documentation that a third site monitoring visit was conducted for the Center St, site in FY 23, this resulted in more than six operating months elapsing between the last review conducted in FY 23 and the first review conducted in FY 24. Sponsor reported that the review was conducted, but the review report documentation could not be located.
- 2. The second site monitoring review report for the Woodburn site is dated on a Sunday in 2022. Sponsor confirmed this is a clerical error.
- 3. Sponsor's tracking system does not include tracking the announced or unannounced or the meal/snack planned to be observed for each site review. The tracking system submitted by the Sponsor for FY2023 was incomplete.

Corrective Actions:

- 1. Develop and submit to ODE a policy and procedure to track all site monitoring reviews. Include in this procedure:
  - a. The title/position of the staff involved in each step of the procedure.
  - b. When the schedule for annual site monitoring visits will be determined. Including:
    - i. Planned date of each review
    - ii. Planned meal/snack observations.
    - iii. Planned type of review (announced/unannounced)
  - c. When actual review report information will be added to the tracking system. For example, within 1 week of each completed site review.
  - d. What actual review report information will be tracked. Including:
    - i. Actual date of each review
    - ii. Actual meal/snack observed.
    - iii. Type of review
    - iv. Monitor who completed the site review
    - v. If corrective action was taken
    - vi. If a follow-up visit is necessary
    - vii. Staff who reviewed site monitoring report form.

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- e. When and how review reports will be reviewed for completeness/clerical errors.
- f. When and how the review tracking system will be reviewed for completeness.
- g. A double-check system to ensure all review report forms are on file.
- 2. Submit to ODE an updated tracking spreadsheet that includes all review report information that will be tracked from Corrective Action 1 of this section and all FY24 site monitoring review information.
- 3. Submit to ODE a completed first site monitoring review report for Central St. for FY 2024.

#### **Section 11: Civil Rights Compliance**

#### 7 CFR 226.23(d), 7 CFR 226.23(i), FNS Instruction 113-1

ODE CNP Center Manual – Chapter 12

#### Findings:

1. The Sponsor did not collect racial and ethnic participation data for participants at all sites for FY 2023. 7 CFR 226.6(b)(4)(iii)(B).

#### Background/Observations:

1. The Sponsor did not have racial and ethnic data forms on file for the Silverton Rd, Wilbur, and Woodburn sites for Fiscal Year 2023.

#### Corrective Actions:

- 1. Complete and submit racial and ethnic data forms for all current FY 2024 sites.
- 2. Develop and submit to ODE a policy and procedure for collecting and storing racial and ethnic data forms for all sites. Include the procedure:
  - a. The title/position of the staff involved in each step of the procedure.
  - b. When racial and ethnic data will be collected
  - c. How racial and ethnic data will be collected.
  - d. When the CACFP racial and ethnic data form will be completed
  - e. Where, how, and for how long the CACFP racial and ethnic data forms will be stored.
  - f. A double check system to ensure forms are on file for all sites prior to the end of the fiscal year.

#### **Section 16: Program Administration**

7 CFR 226.10(d), 7 CFR 226.11(b)(1), 7 CFR 226.11(e)

Administrative Oversight: 7 CFR 226.6(c)(3)(ii)(U), 7 CFR 226.6(c)(3)(ii)(Q) 7 CFR 226.6(c)(3)(ii)(C), 7 CFR 226.6(b)(2)(vii)(B), 7 CFR 226.6(b)(2)(vii)(C)(5)(iv) &(v), 7 CFR 226.6(c)(3)(ii)(F)

### **ODE CNP Center Manual – Chapter 1**

Findings:

1. Sponsor's written claim procedure does ensure that records that support CACFP claims for reimbursement are available. 7 CFR 226.10(c)

#### Background/Observations:

- 1. Sponsor's procedure for reviewing menu documentation does not adequately determine if recipes are correctly written and credited. This resulted in menu items being served and claimed for reimbursement that did not meet the meal pattern minimum serving per component for the age group served.
- 2. Sponsor's procedure for reviewing Child Enrollment forms does not adequately determine if all forms are valid and complete. This resulted in participants being claimed for reimbursement who did not have a valid Child Enrollment form on file.
- 3. Sponsor's written procedure does not include the following claim review elements.
  - a. Meals are only claimed for approved meal types.
  - b. Meals are only claimed for approved sites.
  - c. Meals are only claimed for approved days and times.
  - d. Menus and Menu Documentation reviewed for meal compliance (included in verbal process)
  - e. Meals are only claimed for participants with valid CEF on file. (included in verbal process)

#### Corrective Actions:

- 1. Revise and submit to ODE the Sponsor's Meal Counts and CACFP Reimbursements procedure to include additional CACFP records reviews. Include in the procedure:
  - a. Meals are only claimed for approved meal types.
  - b. Meals are only claimed for approved sites.
  - c. Meals are only claimed for approved days and times.
  - d. Menus and Menu Documentation reviewed for meal compliance.
  - e. Meals are only claimed for participants with valid CEF on file.
- 2. The completion of Section 3: Enrollment Records Corrective Action 1 and Section 7: Menu Records and Meal Pattern Requirements Corrective Action 2 will also support permanently and fully correcting this finding.

#### **Commendations, Recommendations and Technical Assistance**

- 1. The management plan on CNPweb is a living document that must be updated as procedures, staff, and positions change. ODE CNP recommends reviewing the management plan when submitting the monthly claim to ensure the management plan is current.
- 2. **USDA Foods:** This programs' mission is to strengthen the Nation's nutrition safety net by providing food and nutrition assistance to children and families; and support American agriculture by distributing high quality, 100% American-grown USDA Foods to operators of federal Child Nutrition Programs.
  - a. The USDA Foods program is separate from Child Nutrition Programs and does not use CNPweb. Please email <u>ode.fooddistribution@ode.oregon.gov</u> for all USDA Foods questions and to update contact information.
  - b. Resources and information about using your USDA Food dollars for the best benefit of your nutrition program are available on the USDA Foods Program webpage <u>https://www.oregon.gov/ode/students-and-</u> <u>family/childnutrition/USDAFoods/Pages/default.aspx.</u>
- 3. Throughout the review it was clear that the Sponsor's CACFP documentation and records are well organized as documents were able to be provided on very short notice due to the review being unannounced.
- 4. As a reminder, all staff who support CACFP duties, either operationally as classroom staff/aides, administratively collecting or reviewing forms, or reviewing and allocating income and expenses must receive documented training annually that is relevant to their CACFP involvement. While ODE provides recorded trainings on all CACFP topics, ODE recommends developing Sponsor specific trainings that reference the Sponsor's specific policies and procedures.
- 5. When crediting recipes ODE recommends the following:
  - a. Confirming the serving size listed for food items like pre-sliced deli meat, to determine the actual per slice crediting if recipe measurement will be in slices.
  - b. When using the Food Buying Guide, double check that the crediting amount per ounce for items used to determine crediting for a recipe matches any Product Formulation statements for the actual food items used.
- 6. Since the last administrative review in FY20, ODE has issued additional guidance regarding the requirements for written policies and procedures for Non-Profit Food Service and Claim procedures. ODE recommends that the Sponsor review their current policies and procedures to ensure the include all procedure requirements.
- All CACFP trainings can be found on ODE's CACFP Training Center webpage (<u>https://www.oregon.gov/ode/students-and-</u> family/childnutrition/cacfp/Pages/CACFPTrainingCenter.aspx)

- 8. The Sponsor has developed good administrative and operational systems and now needs to strengthen those procedures by including additional review details and more robust double-check processes.
- 9. ODE CNP appreciates how knowledgeable all staff at every level are concerning program requirements and their commitment to following all procedures.
- 10. ODE CNP thanks the Sponsor for their graciousness and flexibility throughout the review process.

Reviewer certifies that s/he has reviewed the contents of this Administrative Review Report, and all required Corrective Actions with the Sponsor's representative at the exit conference. Kaintin Quina **ODE Child Nutrition Specialist** 12/7/2023 Signature of Reviewer Title Date ODE Child Nutrition Specialist Date Title Signature of Reviewer Sponsor's representative certifies that s/he has had the opportunity to review the contents of the Administrative Review Report with the reviewer, understands the required Corrective Actions and has received a copy of the Administrative Review Report. n 5

| Signature of Sponsor Representative | Title | Special 4 1217123<br>Date |
|-------------------------------------|-------|---------------------------|
| Signature of Sponsor Representative | Title | Date                      |
| Signature of Sponsor Representative | Title | Date                      |
| Signature of Sponsor Representative | Title | Date                      |
| Signature of Sponsor Representative | Title | Date                      |
|                                     |       |                           |

If the Sponsor's Board Chair is not present at the exit conference, a copy of the Administrative Review Report will be emailed to the Board Chair.



For release on January \_\_\_, 2024

Contact: Eva Pignotti

Phone: 503-581-1152 x 5220

Email: eva.pignotti@mwvcaa.org

# **Head Start Adding New Location in West Salem**

Mid-Willamette Valley Community Action Agency's Head Start program has opened a new early learning site in West Salem.

**SALEM, OR** – Mid-Willamette Valley Community Action Agency's Head Start program is opening a new early learning center, to better serve eligible children and families in West Salem.

Located at 1205 Wallace Rd NW, Salem, OR 97304, the new Head Start location will serve 51 preschool children across three classes.

"This helps us to meet a long term goal of increasing our services to children and families in Polk County, and specifically in West Salem," said Eva Pignotti, Chief Program Officer of Early Learning & Child Care.

Jimmy Jones, Executive Director of MWVCAA, stated "We are excited to open the Wallace Early Learning Center, and continue our commitment to quality early learning services in Salem and Polk County. Head Start is the nation's best, most effective anti-poverty program, using services designed based on decades of research and experience. Our staff are early learning professionals who are dedicated to the success of our children and families."

MWVCAA plans to further develop the property in the future, to add additional capacity for our Early Head Start program, for children ranging from birth to three years old.

"We are grateful to both the City of Salem and to Senator Deb Patterson for their support with funding for the renovation of the Head Start building," Pignotti said.

MWVCAA and Head Start will host an Open House for the new Wallace Road Head Start location on Friday, Jan. 26, 1:00 – 3:00 p.m. We encourage the public to attend the Open House, hear remarks from our community partners, and take part in self-guided tours of the facility.

Mid-Willamette Valley Community Action Agency is Marion-Polk's anti-poverty agency, and the area's largest non-profit social services provider. Our programs provide services in housing and homelessness, early learning, and energy and weatherization.

Head Start is a free preschool program that serves income eligible families and their children, ages 3-5. Early Head Start serves children age's birth to three years, and expectant mothers. Our programs include early learning, nutrition, mental health, disability, health, and family services. The ultimate goals for our Head Start and Early Head Start programs are to strengthen child-parent relationships and build a strong foundation for youth before kindergarten.