

SPOTSWOOD BD OF ED-02304970 - Corrective Action Report (Detail)

Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Certification and Benefit Issuance	Certification and Benefit Issuance (On-Site Assessment Tool) (124H)	SPOTSWOOD BD OF ED-02304970	126	02/20/2023	CAP Accepted
Corrective Action History	Corrective Action Plan: Accepted by Corinne Santos-Hernandez 03/10/2023 06:25 PM CAP Accepted				
	Corrective Action Plan: Submitted by Tami Schmitz 02/16/2023 01:18 PM We implemented this correction action plan starting on January 17th.				
	Corrective Action Plan: Rejected by Corinne Santos-Hernandez 02/08/2023 03:28 PM Please include the date of implementation for this corrective action plan .				
	Corrective Action Plan: Submitted by Vita Marino 02/07/2023 05:47 PM Families were contacted via phone and/or mail if errors were found on their applications within the timeframe indicated by the reviewer. Eligibility determinations were corrected immediately.				
	Flagged by Corinne Santos-Hernandez 02/08/2023 03:27 PM Incomplete and/or incorrectly determined applications were found during the State Agency review of the selected applications. Errors were recorded on the Eligibility Certification and Benefit Issuance Worksheet (SFA-1.) Changes in eligibility which result in increased benefit levels must be made as soon as possible, but no longer than 3 operating days. Households for whom benefits were to be reduced or terminated must be given 10 calendar days written advance notice of the change. Explain, in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation..				
Certification and Benefit Issuance	Certification and Benefit Issuance (On-Site Assessment Tool) (124H)	SPOTSWOOD BD OF ED-02304970	131	02/20/2023	CAP Accepted

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	CAP Accepted				
	Corrective Action Plan: Submitted by Vita Marino 02/07/2023 05:47 PM				
	The qualification for the student was changed from denied to reduced in the Genesis system under the student's profile on 1/17/2023. A letter was sent to the parent notifying them of the error and the resolution. Along with the explanation letter, a new eligibility status letter was sent. Going forward, income will not be automatically annualized but will be determined by the timeframe indicated on the application unless two timeframes are used then the application will be annualized.				
	Flagged by Corinne Santos-Hernandez 01/19/2023 02:50 PM				
	During the state agency review of selected denied applications, determination errors were found. Errors were recorded on the Other Eligibility Certification and Benefit Issuance Errors Worksheet (SFA-2). One application was denied incorrectly. The income was \$29,536 for a household of 2. The income provided was \$848 for biweekly and \$144 for weekly. The application should be determined as Reduced. The SFA must record the corrective action and date corrected on the SFA-2. The completed SFA-2 must be uploaded in Documents within the required deadline. Changes in eligibility which result in increased benefit levels must be made as soon as possible, but no longer than 3 operating days. Explain, in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation.				

Report Selections

Flagged, CAP Submitted, CAP Rejected, CAP Accepted, CAP Removed, Problem resolved, Re-Flagged