# The Effective Grant Manager

- Applications, Amendments, & Reimbursements
- Audits & Monitoring
- The K-12 Risk-Based Monitoring Process

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# Learning Objectives

- What are the rules governing the approval process for grant applications, amendments, and reimbursements?

- What are the best practices for preparing for an audit/monitoring visit?

- What are common audit defenses?

- What is OSSE's Risk-Based Monitoring?

# Approving Application & Amendments

# Pop Quiz!

What general assurances must be included in a subrecipient application?

a. Federal programs will be administered in accordance with all applicable statues, regulations, program plans, and application

b. Subrecipient must maintain appropriate control over all funds and property

c. All reporting requirements will be met on a timely basis

d. All of the above

# Pop Quiz!

Subrecipients are not required to compare actual expenditures with budgeted amounts or approved budget.

a. True

b. False

# Controlling regulations

34 CFR Part 76 – State-Administered Programs

◦ Subpart D – How to Apply to the State for a Subgrant

◦ Subpart E – How a Subgrant is Made to an Applicant

◦ Subpart G – What are the Administrative Responsibilities of the State and its Subgrantees

2 CFR Part 200 – Uniform Grant Guidance

◦ 2 CFR 200.331 – Requirements for Pass-Through Entities

# Applying for a Subgrant

34 CFR 76.300 – Contact OSSE for instructions

34 CFR 76.301 – Subgrantees must have a general application on file with OSSE that includes assurances:

◦ Will administer federal programs in accordance with applicable statutes, regs, program plans, and application;

◦ Maintain appropriate control of funds & property;

◦ Use of fiscal control and fund accounting procedures for proper disbursement and accounting of funds;

◦ Reporting; and more.

# Awarding a Subgrant

34 CFR 76.400 – Reviewing of Application
- Formula grant applications shall be approved if
  - Subrecipient is eligible under the program; and
  - App meets federal requirements.
- Discretionary grant applications may be approved if:
  - Subrecipient is eligible under the program;
  - App meets federal requirements; and
  - State determines project should be funded under the authorizing statute and regs.

# Subaward agreement

2 CFR 200.331(a): Subaward must contain, among other items:

- ◦ Subrecipient's name & unique entity identifier;
- ◦ Federal Award Identification Number (FAIN);
- ◦ Federal award date & the period of performance;
- ◦ Total amount obligated by this action, total amount including prior installments, and the total amount of the project.
- ◦ FFATA project description;
- ◦ Name of federal awarding agency; and
- ◦ Name and contact info for pass-through entity.

# Budgets

Once budgets are approved, all non-federal entities must compare actual expenditures with budgeted amounts.
(2 CFR 200.302(b)(5))

Have expenditures matched budgeted amounts?
◦ If not, why?

# Amendments

"Recipients are required to report deviations from budget or project scope or objective, and request prior approvals from the [pass-through entity] for budget and program plan revisions." – 2 CFR 200.308(b)

Must explain the cause of the deviation, provide justification that amended budget is still in line with allowable costs under the program.

# Amendments – Prior Approval Required
## 2 CFR 200.308(c)(1)

Change in the scope or the objective of the project or program;

- ◦ Any budget changes must be approved by OSSE through EGMS.

Change in a key person specified in the application or the federal award;

Disengagement from the project for more than three months, or a 25% reduction in time devoted to the project, by the approved project director or principal investigator;

The inclusion of costs requiring prior approval under the UGG.

# Amendments – Prior Approval Required (cont.)

Transfer of funds budgeted for participant support costs to other categories of expense;

Unless described in the application, transferring or contracting out of any work under a federal award, not including the acquisition of supplies, material, equipment or general support services;

Changes in the approved cost-sharing or matching fund;

The need arises for additional federal funds to complete the project.

➢ Application narratives must align with the purpose of the grant

➢ Application budgets must support and align with narrative

# Best Practices on Submitting Reimbursements

# Pop Quiz!

What must take place before a subrecipient can submit a reimbursement request?

a. The underlying cost must obligate

b. The subrecipient must expend non-federal funds on that cost

c. The subrecipient must contact the federal awarding agency regarding possible draw downs

d. A & B only

e. A & C only

# Pop Quiz!

If an employee works on a federal grant on November 3, is paid on November 5, but the reimbursement is not received by the non-federal entity until December 1, when did the cost obligate?

a. December 1

b. November 3

c. November 5

# Pop Quiz!

If your non-federal entity signs a contract for services on August 30 for services provided on October 15, you receive an invoice on October 20, and you pay for the invoiced services on November 1, the cost of the contract obligated on:

a.   October 15

b.   October 20

c.   November 1

d.   None of the above

# Major Considerations

In order to be reimbursable, costs must be allowable under the federal award (considering factors under 200.403)

- The non-federal entity must have supporting documentation demonstrating allowability
- Must be aligned in the approved budget narrative
- Costs must be under approved budget amounts
- Costs must be under approved local plan/application

# Factors Affecting Allowability of Costs 200.403

All Costs Must Be:

1. Necessary, Reasonable and Allocable (200.405)
2. Conform with federal law & grant terms
3. Consistent with state and local policies
4. Consistently treated
5. In accordance with GAAP
6. Not included as match
7. *Net of applicable credits (moved to 200.406)*
8. Adequately documented

# Other requirements

- Costs must be in accordance with subrecipient's written policies and procedures

- Contracts must be in line with 200.318 – 200.326

- Equipment costs must be in compliance with 200.313

- Staff salaries & wages must be supported by proper time distribution records (200.430(i))

# Timing

Must be within the period of performance.

Written procedures must describe reimbursement system:

- Subrecipient must not submit reimbursement request until it has expended non-federal funds.

- Cannot request reimbursement until funds have been obligated.

# Obligations - 200.71

Obligation = Means orders placed for property and services, contracts and subawards made and similar transactions during a given period that require payment during the same or a future period.

Reimbursement Payment Process
- Obligation
- Liquidation
  - Payment
- Submit Request
- Drawdown

# When Obligations Are Made 76.707

| Type of Obligation | When Obligation Occurs |
|---|---|
| Acquisition of Property | Date of binding written commitment |
| Personal Services by Employee | When services are performed |
| Personal Services by Contractor | Date of binding written commitment |
| Travel | When travel is taken |
| Approved Pre-Agreement Cost | On the first day of the grant or subgrant performance period. |

# When May Begin to Obligate 76.708

Formula Grants:

- Grantees and subgrantees may begin to obligate funds when:
    - When the awarding agency approves application; or
    - Awarding agency determines application is "substantially approvable."
- Reimbursement subject to final approval.

Discretionary Grants:

- When subgrant is made. However, pre-agreement costs are permissible (reference to 2 CFR Part 200).

- All reimbursement requests must align with approved applications/budgets

- Reimbursements must be allowable in accordance with program requirements and cost principles

- All costs must have back up documentation, such as compliant time & effort certifications, invoices, and other source documentation

# Audit & Monitoring Visits

# Pop Quiz!

A subrecipient may refuse to give auditors or monitoring teams access to its grant records.

a.   True

b.   False

# Pop Quiz!

In regards to the annual Single Audit, subrecipients need only be concerned with

a.    Major programs as defined by 2 CFR 200.518

b.    Any program at risk of a questioned cost of $25,000 or more

c.    Any material weakness in the subrecipient's internal controls

d.    All of the above

e.    A & C only

# Pop Quiz!

According to the most recent OMB Compliance Supplement, single auditors will review the following in your Title I-A program:

a.  Allowable Costs

b.  Cash Management

c.  Supplement, Not Supplant

d.  All of the above

e.  A & C only

# Pop Quiz!

Your staff should treat audit and monitoring visits as the appropriate time to list any grievances with the way your non-federal entity manages federal grants?

a. True

b. False

# Pop Quiz!

If your non-federal entity disagrees with an audit or monitoring finding, when should you first respond in writing with your arguments and/or defenses?

a. When the pass-through entity or the federal awarding agency issue their management decision

b. After the final audit or monitoring report

c. 30 days before the management decision is finalized

d. As soon as you receive the draft audit or monitoring report

# Who Must/May be Audited or Monitored?

Any non-federal entity that expends $750,000 or more in federal funds in a year must have a "single audit."

- ◦ Governed by Subpart F of Part 200
- ◦ Non-federal entity's responsibility to select an independent auditor and make sure the audit is completed

Federal awarding agencies, OIG, or GAO may conduct additional audits at their discretion.

Federal programs can also initiate monitoring visits.

Pass-through entity must monitor subrecipients.

# Auditee Responsibilities

Arrange single audit
◦ Must follow procurement standards

Prepare financial statements

Follow up and corrective action on findings

Provide access (2 C.F.R. 200.508)

# Corrective Action Plan
## 2 C.F.R. 200.511(c)

***Corrective action plan:***

◦ At the completion of the audit.

◦ Must address each audit finding included in the current year auditor's reports.

◦ Must provide the name(s) of the contact person(s) responsible for corrective action, the corrective action planned, and the anticipated completion date.

◦ Must include an explanation and specific reasons if auditee disagrees with finding.

# Federal Agency Responsibility
## 2 C.F.R. 200.513

Cognizant agency for audit provides predominant amount-funds

## Responsibilities

◦ Technical Assistance to auditees

◦ Quality control

◦ Advice to auditors; Notice of audit deficiencies

◦ Coordinate management decisions

◦ Monitor corrective actions

◦ Use of cooperative audit resolutions

# Major Program Determination

Audit review is a risk-based multi-step process

Step 1 – Determine Type A or Type B programs:
◦ Depends on amount of funding (see 200.518)
◦ Type A is largest programs

Step 2 – Identify Type A programs at Low Risk

# Major Program Determination (cont.)

## Step 3 – Identify Type B at High Risk

## Step 4 – Must audit High-Risk A and B programs (major programs)

## Reporting

◦ Questioned costs above $25K - major program

◦ Questioned costs above $25K in non-major program if auditor becomes aware

◦ Material weakness in internal controls

# Before the Visit

# Know Potential Trouble Spots

- Self assessment – critical
  - **Required – 200.328(a)**

- Look at Available Information
  - Review significant violations from other processes.
  - Review prior findings.
  - Review performance data/outcomes.

# "Significant Violations" from USDE
## (though OSSE may look at additional issues)

1. Time Distribution
2. MOE
3. Supplement Not Supplant
4. Unallowable Expenses
5. Procurement Irregularity
6. Ineligible Students
7. Lack of Accountability for Equipment/Materials
8. Lack of Appropriate Record Keeping
9. Record Retention Problems
10. Late or No Submission of Required Reports, Inaccuracies, Inconsistence
11. Audits of Subrecipient Unresolved
12. Lack of Subrecipient Monitoring
13. Drawdown before funds are needed or more than 90 days after the end of funding period
14. Large Carryover Balances
15. Lack of valid, reliable, or complete performance data

# 2019 OMB Compliance Supplement: Compliance Requirements

- **Activities Allowed or Unallowed**
- **Allowable Costs**
- Cash Management
- **Eligibility**
- Equipment, Real Property Management
- **Matching, Level of Effort, Earmarking**

- Period of Performance
- Procurement and Suspension and Debarment
- Program Income
- Reporting
- **Subrecipient Monitoring**
- **Special Tests**
  - **Equitable Services**
  - **Charters**
  - **Report Cards**

Items in BOLD are required during audit of the federal Title I program

# Areas to Evaluate for Audit/Monitoring

1. OIG Audit
   - Notice of Audit: Correspondence

2. Single Audit
   - Prior Audits
   - Compliance Supplement

3. Monitoring
   - Monitoring Instrument

# Request for Documentation

- "Audit/Monitoring Binder"

- Central location for all requested documents

- Does not have to be hard copy

# Corrective Action Plan

**Critical** – have in place at time of visit, even if implementation will be in the **future**

- Specific Measurable Objectives

- Timelines

- Clear Lines of Responsibility

# Remedy Problem Areas or Develop Corrective Action Plan

E.g., Los Angeles Unified School District Internal Controls over Nonpayroll Purchases – Erroneous Charges of $84,000

- **No findings!!!**
  - CAP in place
  - Auditor agreed
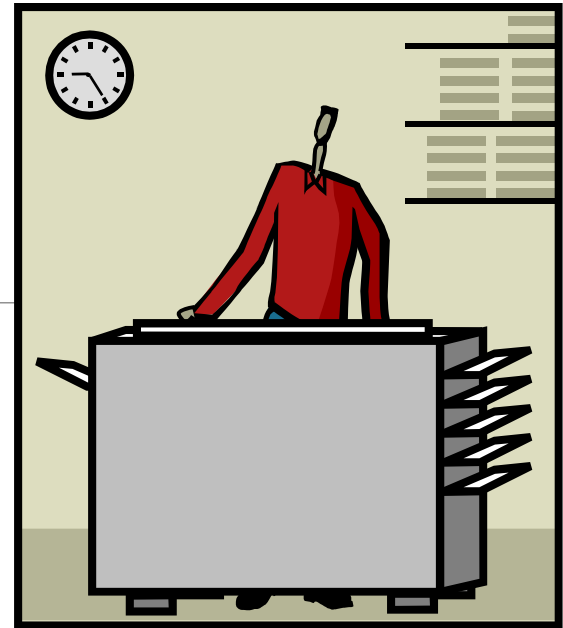
# The Visit

# Logistics



Secure Space

Audit/Monitoring Binder

Copy Machine
◦ Keep extra copy of <u>all</u> documents supplied!!!

Professional Demeanor

# Requested Records

- Can the auditee refuse to provide the auditors with requested documents?
  - 2 C.F.R. 200.336 provides audit access to records without qualifiers.
  - If requested records are not provided, likely receive an audit limitation or finding.

- Applies to monitoring as well!

# Identify Key Staff (Audit Committee)

**Audit/Monitoring Liaison:**

Key contact for all questions, interview arrangements, documents requests, logistical arrangements

**Agency Leadership:**
◦ Entrance, exit conference

# Identify Key Staff

**Relevant Staff (Audit/Monitoring Committee):**
- Assure staff are prepared for interview
- Subject matter awareness
- Terminology/Definitions
    - Time and Effort
    - Necessary and Reasonable
    - Inventory
- Familiarity with job description
- Familiarity with prior problem areas
- Familiarity with likely areas of inquiry

# Entrance Conference

- Leadership
  - Set positive but professional tone.

- Audit/Monitoring Liaison
  - Review process/logistics.
  - Request all interview requests go through manager.
  - Request periodic updates (especially problem areas).
    - Do not wait for exit conference.

# Immediate Staff Debrief!

Debrief staff after interviews.

Clear up misunderstandings.

# Exit Conference

- Ask for specifics with auditors/monitors
  - For audits, what issues were identified?
  - Documents requested?
    - List and send.

- Potential noncompliance findings (for audits)
  - Review carefully .
  - If confirmed, develop corrective actions proactively.

# After the Visit

# Next Steps

- OIG Audit, Single Audit
  - Draft Audit Report
  - Final Audit Report
  - Final Determination (Feds, State Agency)
- Monitoring
  - Monitoring Report – Includes "Determination"
    - May receive draft findings, but it is up to the monitoring team

# Always be Ready to Respond!

- Respond carefully at each level.
  - Problems always easier to resolve at earliest level.
  - Set the table for possible appeal.

# Next Steps for Audits

- Federal Awarding Agency/Pass-Through can:
  - Accept finding as is, including recovery of funds
  - Accept finding but reduce or eliminate liability
  - Reject finding
- Letter of Final Audit Determination
  - Establishes prima facie case

# Review by Feds

Any $$ liability: Appeal to Administrative Law Judges (ALJs)

◦ (ALJs) are independent

**<u>Caution</u>** –

◦ Time Limits

◦ Other Rules of Procedure for Appeals

# Review by Feds (cont.)

ALJ Decision

⬇

Appeal to Secretary

# Example: St. Louis School District

- OIG Audit Finding:
  - Purchased 700 laptops, used 300, district could not account for 125.
  - Required refund and corrective actions.

- District's Response:
  - Disputed missing number, offered to pay for replacement from non-federal funds, otherwise agreed to corrective actions.

- ED Determination:
  - Sustained finding, but did not seek recovery of funds.

WHAT'S YOUR NEXT STEP?

➢ Practices must match written policies & procedures that are compliant with most restrictive federal, State, and local rules

➢ Proper record-keeping is key for avoiding audit/monitoring findings

➢ Be prepared before audit or monitoring happens

➢ All subgrantees should be familiar with the Compliance Supplement and the applicable compliance requirements for federal programs (Slide 32)

# Defense and Resolution

# Resolution Strategies

- CAROI
- Compromise
- Settlement
- Litigation
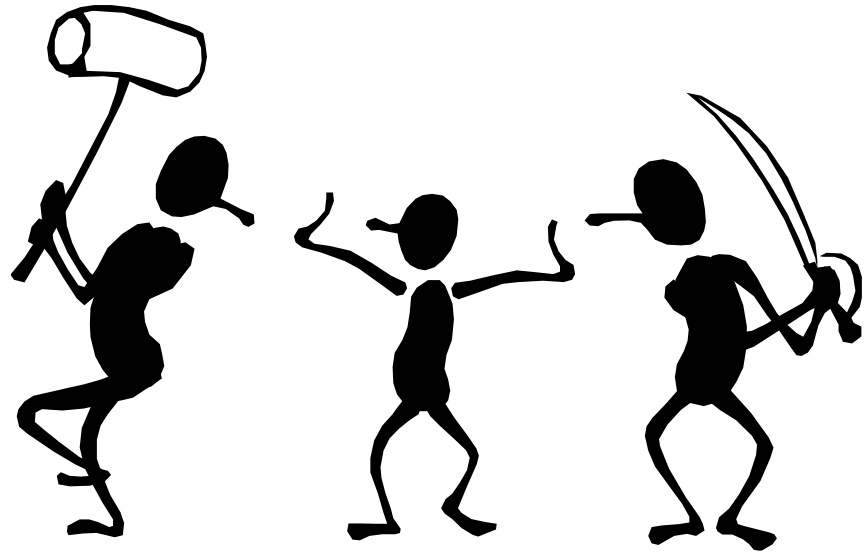
# Cooperative Audit Resolution (CAROI)

- 200.513: The Federal awarding agency must use Cooperative Audit Resolution to improve federal program outcomes.

  - Cooperative Audit Resolution means the use of audit follow-up techniques which promote prompt corrective action by improving communication, fostering collaboration, promoting trust and developing an understanding between the Federal agency and non-Federal entity (200.25).

# The K-12 Risk-Based Monitoring Process

June 2020|    Rachel Stafford

# OSSE monitors its federal K-12 grants using a consolidated risk-based monitoring approach

In the 2015-2016 school year, the Office of the State Superintendent of Education (OSSE) transitioned to a consolidated, risk-based monitoring approach in an effort to streamline state-level monitoring efforts and reduce burden on local education agencies (LEAs).  OSSE's transition was guided by five clear goals:

◦ Focus on what matters

◦ Reduce burden on LEAs

◦ Improve communication with LEAs

◦ Differentiate and customize OSSE's support for LEAs

◦ Ensure basic requirements are met

# OSSE uses an 11-factor test to determine the LEA monitoring touchpoint

| Risk Matrix Indicators and Weights | |
|---|---|
| Single Audit and Fiscal Findings | (~22%) |
| Higher Grant Award Totals | (~7%) |
| Failure to Drawdown Grant Funds | (~7%) |
| Findings that Resulted from IDEA Complaints filed against Agency | (~4%) |
| IDEA Part B Determination Level | (~4%) |
| Comprehensive Support and Improvement School (CS1) | (~4%) |
| Comprehensive Support and Improvement School (CS2) | (~4%) |
| Targeted Support and Improvement (TS) | (~2%) |
| Unresolved Noncompliance | (~4%) |
| Additional Concerns | (~13%) |
| Past Monitoring | (~27%) |

# Fifteen grant programs are included in this consolidated monitoring review structure

Grant Programs

- Title I, Part A
- Title I, 1003 School Improvement Fund
- Title I, 1003g School Improvement Grant (SIG)
- Title I, Part D
- Title II, Part A
- Title III, Part A
- Title IV, Part A
- Title IV, Part B - 21st Century Community Learning Centers
- SOAR, Academic Quality
- SOAR, Facilities
- Title V, Part B
- McKinney-Vento
- IDEA, Part B
- Special Education Enhancement Fund
- CARES – Elementary and Secondary School Emergency Relief

# Risk Matrix Criteria

## Process for determining an LEA's risk level

1. Total the points assigned across all 11 risk categories to determine the Risk Score

2. Identify the 25$^{th}$ percentile score and the 75$^{th}$ percentile score to determine LEA risk levels.

3. Assign a risk level based on the established logic



Low Risk   Medium Risk   High Risk
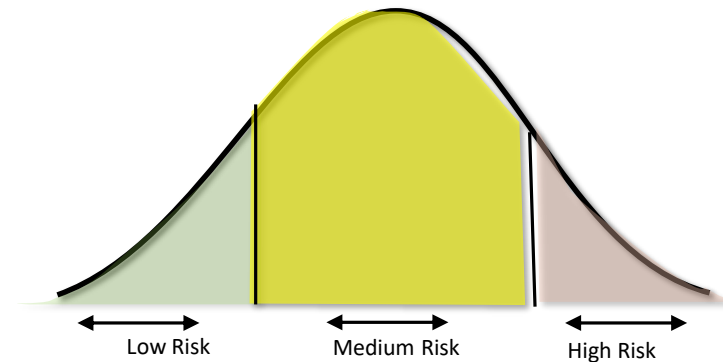
*Bell curve represents sample distribution of LEAs across risk levels

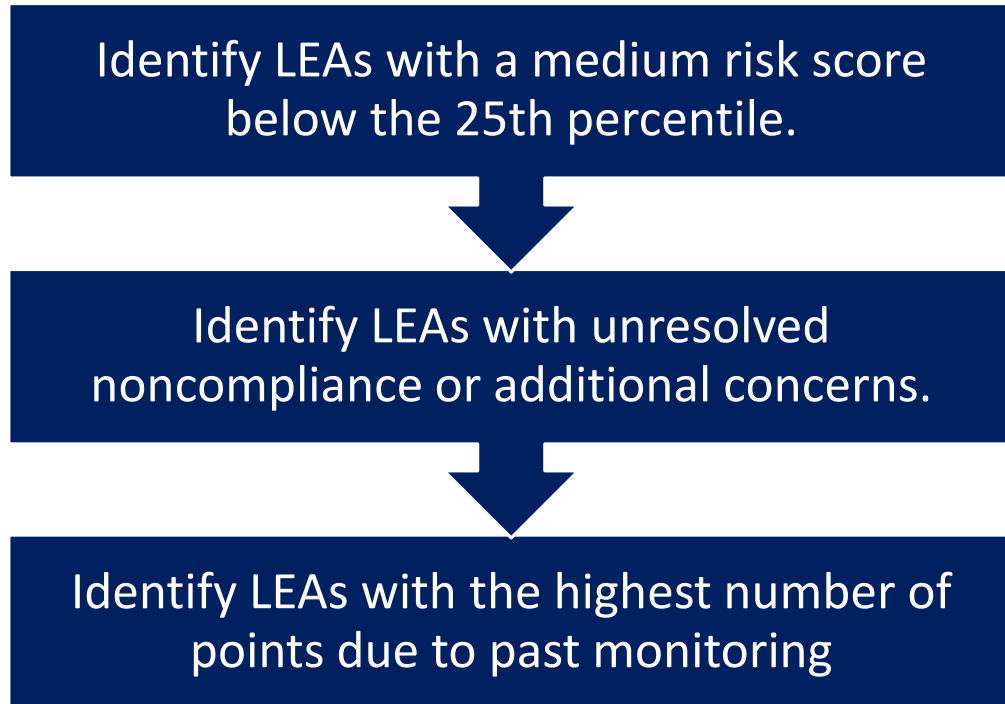| Risk Level | Low Risk |
| | The LEA's risk score is below the 25th percentile |
| | Medium Risk |
| | The LEA's risk score is between the 25th and 75th percentile |
| | High Risk |
| | The LEA's risk score is above the 75th percentile |

# Risk-Based Monitoring Model

| | Tier I Low Risk | Tier II Medium Risk | Tier III High Risk |
|---|---|---|---|
| Selection Methodology | Risk analysis in all applicable areas. | | |
| Risk Indicators | <ul><li>Results from the single audit required by 2 CFR 200, Subpart F and financial review results for entities that do not meet the $750,000 single audit threshold</li><li>Higher grant award totals</li><li>Failure to timely drawdown grant funds</li><li>Findings as a result of any IDEA complaints filed against the subrecipient</li><li>IDEA, Part B determination level (i.e., Met Requirements, Needs Assistance or Needs Intervention)</li><li>Comprehensive Support and Improvement Schools (CS1)</li><li>Comprehensive Support and Improvement Schools (CS2)</li><li>Targeted Support and Improvement Schools (TS)</li><li>Unresolved noncompliance from previous monitoring reviews and audits</li><li>Dates of most recent on-site monitoring visits</li><li>Additional concerns raised by individual grant managers: prior experience in administering federal grants, untimely reporting: 1 late report/application, untimely reporting: 2+ late, GAN requirements not met/LEA on special conditions, failure to submit required data (includes funding amendments), grant funds withheld or revoked</li></ul> | | |
| Monitoring Experience | **No Desktop or On-Site Monitoring** Any subrecipient falling within the low risk tier will not be required to participate in desktop or on-site monitoring activities under the risk- based model. | **Desktop Monitoring** Desktop monitoring is a tiered monitoring approach that could be as specific as a request for documentation supporting a single reimbursement request or as expansive as a request for a series of quarterly reports or supporting documentation across the grant period. Results are compiled into a single Consolidated Monitoring Report, and in some instances a corrective action plan may be required. | **On-Site Monitoring** On-site monitoring is a process by which selected subrecipients receive an on-site visit by OSSE's Coordinated Monitoring Team for a comprehensive document and record review, stakeholder interviews, fiscal examination and follow-up technical assistance, if needed. Results are compiled into a single Consolidated Monitoring Report, and in some instances a corrective action plan may be required. |
| Pre-Site Conference Required | **Not Applicable** | **May include a phone conference** | Yes, either on-site or via phone conference |

## Process for determining LEAs subject to fiscal desktop monitoring

Once OSSE identifies medium risk LEAs, it then uses the following framework to prioritize LEAs subject to desktop monitoring.

Identify LEAs with a medium risk score below the 25th percentile.

↓

Identify LEAs with unresolved noncompliance or additional concerns.

↓

Identify LEAs with the highest number of points due to past monitoring

# Preparing for the Monitoring Visit

# The on-site monitoring process includes a series of steps to ensure that reports in a timely manner

1.  Identification for monitoring

2.  Notification of monitoring selection

3.  Pre-site activities: Pre-site documentation submission and site visit and/or phone conference

4.  On-site monitoring visit and activities

5.  Preliminary monitoring report issued (within 70 calendar days of visit)

6.  LEAs have 10 days to correct findings in the preliminary monitoring report

7.  Final monitoring report issued (within 90 calendar days of the LEA response to the initial report)

8.  Correction of noncompliance

9.  Verification of correction of noncompliance

10. Closure of findings of noncompliance

# The desktop monitoring process follows a similar process to ensure that reports are issued within a timely manner

1. Identification for monitoring

2. Notification of monitoring selection

3. LEA documentation submission

4. Desktop monitoring review

5. Preliminary monitoring report issued (within 70 calendar days of review)

6. LEAs have 10 days to correct findings in the preliminary monitoring report

7. Final monitoring report issued (within 90 calendar days of the LEA response to the initial report )

8. Correction of noncompliance

9. Verification of correction of noncompliance

10. Closure of findings of noncompliance

# Things to consider to ensure a successful and effective monitoring visit

◦ **Review the OSSE Monitoring Tool**

– **Use the** tool to ensure that your team is prepared to answer questions and provide documents requested by the OSSE team

◦ **Prepare LEA Supporting Monitoring Documentation**

– Identify documents required for pre-site submission (See LEA Notification for naming conventions)

– Identify documents needed for on-site visit

– Collect and organize all documents using a centralized  organizational structure

– Submit the pre-monitoring documentation by the established deadline

◦ **Engage with LEA Staff**

– Identify the specific staff member(s) responsible for  gathering grant documents and participating in the monitoring visit

– Share all monitoring protocols from OSSE with relevant LEA staff

– Share relevant timelines and on-site dates with relevant LEA staff

# Monitoring Tool

OSSE is responsible for providing subgrantees with clear guidance, policies, and technical assistance related to the local and federal statutes, regulations, and non-regulatory guidance governing its federal education funds. In fulfillment of this responsibility, OSSE uses a  monitoring tool to help LEAs prepare for their monitoring visit.
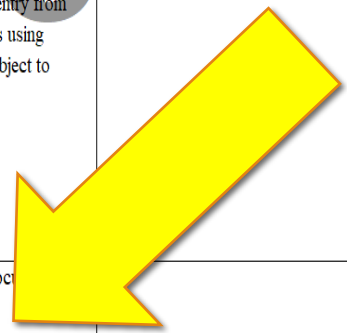
# The monitoring tool includes all of the grants organized by tabs at the bottom of the screen



| Indicator | Guiding Statement | Citation | Evidence | | Determination | Rem |
|---|---|---|---|---|---|---|
| NOTE: The Uniform Administrative Requirements at 2 CFR Part 200 apply to all grants and non-competing continuations (including carryover funds) made on or after December 26, 2014. The audit requirements at 2 CFR Pa to fiscal years beginning on or after December 26, 2014. | | | | | | |
| **FISCAL MANAGEMENT AND ADMINISTRATION** | | | | | | |
| NOTE: Subgrantees may note that multiple indicators require the same evidence. The subgrantee does not need to provide multiple submissions of the same document, instead note the applicable indicator and document description in the naming convention (i.e. Fiscal 1.1,1.2.1.3 _General Ledger). | | | Pre-Site Documents: These documents must be submitted to OSSE in advance of the monitoring visit. | On-Site Documents: These documents must be made available to OSSE during the monitoring visit. | | |
| **Indicator 1: Financial Management** | | | | | | |
| 1.1 | The subgrantee can provide evidence that its financial management system provides for the identification in its accounts of all Federal awards received and expended and the Federal programs under which they were received. Federal program and Federal award identification must include, as applicable, the CFDA title and number, Federal award identification number and year, name of the Federal agency, and name of the pass-through entity, if any. | 2 CFR §200.302(b)(1) | - Screenshots of financial management system, including screenshots showing the identification of awards within the financial management system<br><br>- Financial management system documentation including the following:<br>  1. Sample accounting journal entry from FY18 that includes transactions using federal grant program funds subject to monitoring;<br>  2. General ledger; and<br>  3. Chart of accounts. | | | |
| 1.2 | The subgrantee can provide evidence that its financial management system provides for the accurate, current, and complete disclosure of the | 2 CFR §200.302(b)(2) | - Fiscal management system docu requested in Indicator 1.1 | | | |

Summary | **Fiscal (General)** | IDEA (Program) | IDEA (Fiscal) | IDEA (Program Correctional) | Title I, Part A (Program) | Title I, Part A (Fiscal) | Tit ...

# A few things to consider when using the monitoring tool…

- Use the monitoring tool as a planning resource when deciding what evidence to include in your centralized organizational system

- Understand that you may be asked to provide additional complementary information on-site.

    - We have worked to making the monitoring tool exhaustive. However, during interviews, we may ask for additional documentation to support a response given.

- LEAs are encouraged to ask any questions of the Lead Monitor before the monitoring event.

# Final tips before getting started…



**Review the Monitoring tool** to determine who should participate in interviews and ensure that your team is prepared to answer questions and provide documents requested by the OSSE team.

**Identify LEA staff members for interviews** and develop coverage plan for that time.

**Organize your documentation** beforehand using binders or other organizational structure.

**Connect with your Lead Monitor** regarding any questions regarding logistics.

**Schedule the appropriate people to be available during the monitoring visit.**

# THANK YOU!

For additional questions regarding

K-12 Risk-Based Monitoring Process, please reach out to Rachel Stafford

at Rachel.Stafford@dc.gov

# Takeaways

| Item | Staff Responsible |
|------|-------------------|
| Application narratives must align with the purpose of the grant and application budgets must support and align with narrative. | COO, Senior Finance Lead, Grant Manager and Program Manager |
| All reimbursement requests must align with approved applications/budgets and be allowable in accordance with program requirements and cost principles. | Senior Finance Lead and Grant Manager |
| All costs must have back up documentation, such as compliant time & effort certifications, invoices, and other source documentation. | COO, Senior Finance Lead and Grant Manager |

# Takeaways (con't.)

| Item | Staff Responsible |
|---|---|
| Practices must match written policies & procedures that are compliant with most restrictive federal, State, and local rules. | CEO, COO and Senior Finance Lead |
| Proper record-keeping is key for avoiding audit/monitoring findings. | CEO, COO, Senior Finance Lead, Grant Manager and Program Manager |
| All subgrantees should be familiar with the Compliance Supplement and the applicable compliance requirements for federal programs (slide 32) | COO, Senior Finance Lead and Grant Manager |

# Next Steps…

➢ Ensure applications, amendments and reimbursements align with the purpose for the grant

➢ Make sure costs have back-up documentation

➢ Confirm policies and procedures are up-to-date and followed

➢ Make certain records are organized and stored

# Grant Management: Possible Consequences of Non-Compliance

FY 2019-20

# Possible Consequences of Non-Compliance

For K12SS Consolidated Monitoring, compliance findings are reported to the subgrantee's leadership and board members, if applicable.

Subgrantees can be placed on "specific conditions" (2 CFR 200.207; 2 CFR 200.338) which may include:

- ➤ Additional detailed financial reporting
- ➤ Increased project monitoring
- ➤ Technical or management assistance
- ➤ Restricting funding

# Provisions OSSE has placed on subgrantees under specific conditions:

➢Increased monitoring such as quarterly visits

➢Increased reporting such as monthly program and fiscal reports

➢Directed use of funds

➢Withheld all or part of grant award

# Resources

Grants and Funding:
- https://osse.dc.gov/page/grants-and-funding-0
- Search words: Grants and Funding OSSE

Risk Based Monitoring Grant Guidance and Tool
- https://osse.dc.gov/publication/risk-based-monitoring-tools-and-resources
- Search words: Risk Based Monitoring OSSE

2 CFR 200 – Uniform Grant Guidance
- https://www.ecfr.gov/cgi-bin/text-idx?SID=e69faf6635f502760e38219847b65f32&mc=true&tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl
- Search words: Electronic CFR

The Administrator's Handbook on EDGAR
- https://www.bruman.com/publications/

# Closing

- Please complete the survey

- Questions?

- Please contact Renu Oliver at Renu.Oliver@dc.gov or 202-741-5251

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