

## 1.12 PROGRAM REVIEWS

**Policy:** Program reviews of sub-recipients must be conducted in accordance with the HHS grants administration regulations (*45 CFR parts 74.26 and 92.26*), as applicable, by auditors meeting established criteria for qualifications and independence (OMB A-133). The FPP will conduct formal program reviews of all sub-recipients. These reviews will serve a four-fold purpose:

1. To enable FPP staff to learn more about local programs;
2. To assess compliance with federal regulations, Title X Program Requirements, and QFP;
3. To monitor the accuracy of CVR entries through chart reviews; and
4. To identify areas in which sub-recipients may need technical assistance or training.

Sub-recipient clinics will have a program review conducted at least every three years. Reviews may be more frequent as determined by selective criteria or upon request from a sub-recipient. ([Montana Administrative Rules 37.19.101-37.19.104](#)) (<http://www.mtrules.org/gateway/ChapterHome.asp?Chapter=37%2E19>)

**Procedure:**

Each fiscal year, the FPP will determine the sub-recipients that are to have program reviews. Program review tools will be sent to the sub-recipient prior to the review.

**Scheduling:**

Two months before the program review, the sub-recipient director will be contacted by FPP to coordinate the review activities for the program review. The visit will be scheduled on a mutually agreed upon date.

**Notification of Program Review and Request for Materials:**

Four to six weeks before a program review, the designated Audit Team Lead from FPP will send materials to the sub-recipient. The notification will include:

1. The schedule and the objectives for the program review.
2. A list of the materials to be sent to FPP prior to the program review.
3. A list of the materials that will need to be available at the sub-recipient site during the review.
4. Pre-visit self-assessment program review tool.
5. Program review tools and chart review forms. These tools and forms will be used by FPP for the review.

**Chart Numbers:**

Approximately 1 week prior to the program review, FPP will send chart numbers to the sub-recipient Director when EHR access is not available to complete chart reviews prior to the scheduled program review date(s). These chart numbers are selected from reports obtained from the MT Family Planning Data System and identify clients who have received various services and contraceptive methods within a six-month period. These charts must be available at the sub-recipient site for review.

**Summary/Exit Interview:**

Upon completion of the Program Review, FPP will summarize and present their findings at an exit interview to the Title X clinic director, staff and others as deemed appropriate (clinic staff, Board members, etc.).

**Follow-Up Written Report:**

A written corrective action plan (CAP) report summarizing the program review findings with follow-up recommendations will be sent to sub-recipient within 45 days of the program review visit. The program

will be requested to submit a response to the CAP with a plan to address the program review findings within one month.

**Follow-Up of Corrective Action Plan:**

FPP will reply to the sub-recipient's CAP response within one month of receiving the plan.

**Follow-Up of Corrective Action Plan Response:**

The sub-recipient will be requested to respond to the DPHHS's reply to the CAP as necessary.