Hello,

Thank you for submitting your Summer Food Service Program waiver via the 2022 Summer Food Service Program Waiver Request Form. Here's a summary of your request. If you see that any details are not correct or if you wish to change your submission, please contact your Food and Nutrition Service Regional Office.

Regards,

The Food and Nutrition Service Waiver Team

Region: MWRO

State: Ohio Department of Education

Name of State director: Brigette Hires

State agency mailing address: 25 S. Front St. Mail Stop 303

Name and title of person completing this form: Brigette Hires, Director

Do you have authority to complete this waiver request on behalf of the State director? Yes, I have the authority.

Email address of person completing this form: Brigette.Hires@education.ohio.gov

Email address for each State agency staff for FNS to include on the waiver response: Brigette.Hires@education.ohio.gov, Elizabeth.Douglass@education.ohio.gov

Waiver type: Meal Service Time Restrictions requirements under 7 CFR 225.16(c)(1) and (c)(2)

Statewide or specific service provider: Statewide

Name of service provider, if applicable:

Is the service provider in good standing, if applicable:

What challenges would sponsors face without the waiver? ["Increase in administrative burden","Increase in labor costs","Exacerbation of staffing shortages","Negative impact on the ability to meet the needs of children and at-risk youth."]

How will the waiver benefit sponsors? ["Streamline processes","Allow sponsors to schedule meal service times that align with community activity programs and resources."]

Regulations and statute to be waived: I agree with waiving the regulations at 7 CFR 225.16(c)(1) and 225.16(c)(2), only.

Describe the program procedures that will be in place under the waiver: Waiver approval process incorporated through the application process on the Claims Reporting and Reimbursement System. Waiver will allow programs to align meal service times with staffing and community needs and leverage shared technology, staff and assets to reduce costs and improve services.

Describe any anticipated challenges under the waiver: No anticipated challenges at this time. The State Agency has previously implemented the waiver successfully.

Waiver period: I agree to the waiver period of May 1, 2022 to April 30, 2023.

Describe the steps the State agency of service provider will take to successfully implement the waiver:

The state agency has to approve the sponsor use of the waiver in the Claims Reimbursement and Reporting System. The waiver will be reviewed as part of the SFSP compliance review process. The state agency will also use the bi-weekly email to communicate technical assistance on this waiver and discuss the waiver during program training.

Please provide a link to the public notice:

https://education.ohio.gov/Topics/Student-Supports/Food-and-Nutrition/Resources-and-Tools-for-Food-and-Nutrition/Food-and-Nutrition-Waivers

Signature and title of requesting official: Brigette Hires, Director

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