



Risk Assessment – Pre-Contract Uniform Grant Guidance Compliance

FINANCIAL REVIEW (PART ONE)

AGENCY INFORMATION

Legal Name:	University of Rhode Island		
Contract Number or ID:	SNAP ED 15/17-01	CFDA Number:	10.561
Program Contact:	Linda Sebelia	Financial Contact:	Michelle Wood

Instructions: Fill out the Financial Review at least once per year for each sub-recipient applying for pass-through funding. This information will aid in determining the specific risks imposed by passing through federal funds to this entity. Fill out the Program Review for each individual award being passed through to the same sub-recipient to be in compliance with the Uniform Grant Guidance section 200.331.

Grading: For each question, answer according to the code listed at the end of the question. Use the numerical guide below to grade the answer in the "Numerical Grade" box below. Total the right column for the entity's total score. **High Risk =5 Points, Medium Risk =3 Points, Low Risk =0 Points, Yes =0, No = 5, NA =0**

Any entity receiving a Financial Review score of 15 or greater is considered high risk, a score of 9 to 14 is considered medium risk, and a score under 8 is considered low risk.

FINANCIAL REVIEW

Question	Answer/Explanation	Numerical Grade
SAM.GOV Is the entity registered with Sam.Gov? (Y/N)	Yes	0
If yes, is the entity debarred, suspended, proposed for debarment, or declared ineligible? History on the List? (H/M/L/NA)	No	0
Audit / Fiscal Statements Has the Department received the entity's formal audit or financial statements in the past 12 months? (Y/N)	Yes	0
If yes, are there significant audit findings. (H/M/L/NA)	No	0
If yes, was the corrective action plan followed and implemented by the entity? (Y/N)	NA	0
Invoices Invoice history of the entity, i.e. accurate, timely, complete invoices and/or fiscal reports. (H/M/L/NA)	Yes	0
Staffing Has the Financial Staff had high turnover in the past 12 months? (H/M/L/NA)	No	0



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System Changes Does the entity plan on changing the accounting or billing system in the near future or are they currently changing their system? (H/M/L/NA)	No	0
Legal Risk Has the entity been in legal trouble in the past 12 months? I.e. Personnel arrested for embezzlement, bankruptcy, etc. (H/M/L/NA)	No	0
Has the entity been investigated in the past 12 months? I.e. investigated by state or federal agencies, media exposé, etc. (H/M/L/NA)	No	0
Total Score		0

CHECK ONE BOX BELOW		
HIGH RISK <i>Score of 15 or greater</i>	MEDIUM RISK <i>Score of 9 to 14</i>	LOW RISK <i>Score of 8 or lower</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Iwona Ramian, Esq.

SNAP Administrator

08/25/2016

Analysis Prepared by (print and sign),

Title,

Date

REAPPROVE INITIAL _____

APPROVER NAME _____

DATE _____



Risk Assessment – Pre-Contract Uniform Grant Guidance Compliance

PROGRAM REVIEW (PART TWO)

AGENCY INFORMATION

Legal Name:	University of Rhode Island		
Federal Grant Name:	SNAP Nutrition Education		
Contract Number or ID:	SNAP ED 15/17-01	CFDA Number:	10.561
Program Contact:	Linda Sebelia	Financial Contact:	Michelle Wood

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PROGRAM REVIEW		
Question	Answer/Explanation	Numerical Grade
Experience With Grant Rate the entity's risk due to past experience working with state or federal programs and specifically this program. (H/M/L/NA)	Low risk	0
Has the entity been timely in submission of grant or contract applications, amendments, or revisions? (H/M/L/NA)	Yes	0
Data / Reporting Has the entity reported all requested data elements from the RFP and/or past agreements? (H/M/L/NA)	Yes	0
Staffing Has the entity ensured the appropriate staff with relevant experience working on this program? (H/M/L/NA)	Yes	0
System Changes Does the entity have a new eligibility or similar system or plan on substantially changing the current system within the year? (H/M/L/NA)	N/A	0



State of Rhode Island

Executive Office of Health and Human Services

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Licensing Is the facility hold a valid license and/or are staff licensed in accordance to the requirements?	Not Applicable for DHS	0
Participant Safety Are rules complied with in the Patient Safety Process?	Not Applicable for DHS	0
Total Score		0

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FINANCIAL REVIEW (PART ONE)

AGENCY INFORMATION

Legal Name:	University of Rhode Island		
Contract Number or ID:	SNAP 15/17-02	CFDA Number:	10.561
Program Contact:	Kathleen Gorman, Ph.D.	Financial Contact:	Jane Stach

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Risk Assessment – Pre-Contract Uniform Grant Guidance Compliance

PROGRAM REVIEW (PART TWO)

AGENCY INFORMATION

Legal Name:	University of Rhode Island		
Federal Grant Name:	SNAP Outreach		
Contract Number or ID:	SNAP 15/17-02	CFDA Number:	10.561
Program Contact:	Kathleen Gorman, Ph.D.	Financial Contact:	Jane Stach

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