Hawaii Department of Education



SNP Administrative Review Findings

Hawaii National Guard Youth Challenge Academy RCCI (1420-6)

Program Year 2020

Hawaii National Guard Youth Challenge Academy RCCI (1420-6) Bldg 1787 Shangrila St Room104 Kapolei, HI 96707-0348

No. of Sites / Reviewed: 1 / 1 Month of Review: December 2019 Dates of Review: January 30-31, 2020 Exit Conference Date: January 31, 2020 Due Date for Corrective Action: **Tuesday, May 20, 2025**

Commendations

* Summary: AROT

Thank you for utilizing the AROT binder to help organize all documents.

* Summary: Staff

Staff were helpful and willing to answer questions.

* Summary: Meal Service

Meal service ran smoothly and efficiently.

* Summary: Dining Area

The dining area was clean and spacious.

* General Program Compliance Question: 808.: Medical Statement

Technical assistance was provided on the medical statement form and requirements for providing meal accommodations for cadets with disabilities/food allergies. If a cadet has a known food allergy but is without a medical statement, foods containing the known allergen should not be allowed. A medical statement should be obtained to ensure that the cadet is served a meal that is safe. If the SFA is aware a meal modification is needed, the SFA may not unduly delay providing the modification while awaiting the medical statement. Instead, the SFA should begin providing a reasonable modification to keep the child safe, and request the family provide a medical statement signed by a State licensed healthcare professional to support the meal modification as soon as possible. In this situation, school officials must document the initial interaction with the family where school officials first learned of the child's need for a modification. School officials should follow up with the family if the school does not receive the requested medical statement as anticipated and maintain a record of this contact. Schools should continue to follow up until the family submits a medical statement form is completed in its entirety, including signatures by the receiving party.

* General Program Compliance Question: 808.: Limited English Proficiency (LEP)

On the off-site assessment, the SFA indicated that there are no resources provided to households comprised of persons with Limited English Proficiency (LEP). USDA Food & Nutrition Services Instruction 113-1 requires that SFAs make services available to LEP persons. The NSLP coordinator communicated understanding that resources are available to provide translations to LEP persons if needed.

Technical Assistance



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Resource Management - Hawaii National Guard Youth Challenge Academy RCCI (1420-6)

704. SFA have any financial findings on previous reviews?

Finding 9000: Other Finding

The DOD's single audit report must include information for CFDA 10.555 & 10.553 for the NSLP & SBP reimbursement.

Corrective Action:

Ensure the NSLP 10.555 and SBP 10.553 reimbursements are included on the SEFA in future Single Audit reports.

SA verified that the NSLP and SBP reimbursements are being reported in subsequent Single Audit reports. Corrective Action accepted. No further action needed.

General Program Compliance - Hawaii National Guard Youth Challenge Academy RCCI (1420-6)

808. On-site observation validate Off-Site Assessment Tool responses to Civil Rights questions?

Finding 9000: Other Finding

Civil Rights Ethnic Data Report

Racial/ethnic data must be collected for everybody who has access to the National School Lunch Program (NSLP) and School Breakfast Program (SBP). Only having the question on meal applications does not meet the requirement.

The SFA completes the Civil Rights Ethnic Data Report twice each school year.

For the report completed on 10/31/19, the following issues were found:

- #3. Missing date of the civil rights training
- #4. Missing which languages were used
- #8. Should be N/A since the SFA does not have any free and reduced price applications.
- For the report completed on 1/29/20, the following issues were found:
- #3. Missing date of civil rights training
- #4. Missing which languages were used
- #8. Should be N/A since the SFA does not have any free and reduced price applications

Not signed at bottom of form

Corrective Action:

Corrected onsite. No further action required.

808. On-site observation validate Off-Site Assessment Tool responses to Civil Rights questions?

Finding 9000: Other Finding

Civil Rights Training

The SFA provided a sign-in sheet for staff who attended the Civil Rights training on July 19, 2019 and January 20, 2020. The NSLP Coordinator that training about the meals program was provided at this time. Based on the information provided, it appears that training was completed in 1 hour.

-Include an agenda/list of topics covered during training to demonstrate that staff were trained on topics related to the meals program.

-It is unlikely that Civil Rights training and SBP/NSLP was completed in only 1 hour. Training documentation must include the number of hours it took to complete the training. Furthermore, staff that have responsibilities related to the meals program require more than 1 hour of training annually. Refer to the handout provided by HCNP for professional standards requirements.



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Corrective Action:

1. Maintain on file the agenda/list of topics covered during the Civil Rights training to demonstrate that staff were trained on topics related to the meals program. Include the number of hours it took to complete the training.

 Create a standard operating procedure (SOP) on how the SFA will ensure all appropriate staff are trained on the required Civil Rights topics. Include the training topics, documentation of staff training, and documentation of hours for training.
Train all appropriate staff on the SOP.

3. Train all appropriate staff on the SOP.

4. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

5. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

808. On-site observation validate Off-Site Assessment Tool responses to Civil Rights questions?

Finding 9000: Other Finding

Complaint Log

SFA does not maintain a complaint log for each school year. The SFA must have a complaint log for each school year even if no complaints were received.

Corrective Action:

Corrected onsite. No further action required.

808. On-site observation validate Off-Site Assessment Tool responses to Civil Rights questions?

Finding 9000: Other Finding

Complaint Procedures

For the Nondiscrimination Procedures (Form O-4), page 2 is missing. Go to HCNP's website to print page 2 of the Nondiscrimination Procedures.

The SFA's procedures for receiving and processing discrimination complaints must indicate the following: whether an allegation is made verbally or in person, the person receiving the allegation must transcribe the complaint; procedures for receiving a complaint cannot prevent a complaint from being accepted; outside agencies forwarded complaints must be identified; procedures must not indicate that there was an attempt to resolve the complaint themselves nor can the SFA's complaint process be a prerequisite for accepting a complaint.

Corrective Action:

Corrected onsite. No further action required.

808. On-site observation validate Off-Site Assessment Tool responses to Civil Rights questions?

Finding 9000: Other Finding

Medical Statements

There are two cadets with medical statements on file for shrimp allergies. Neither of the forms were signed by the receiving party at the SFA. One of the forms was not filled out in its entirety and it contained ambiguous information.

- Ensure that the person who reviews the medical statement form signs Part C of the form to acknowledge receipt/review.



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- The person who reviews the medical statement must follow up on any incomplete/unclear information on the medical statement form.

Corrective Action:

1. Maintain on file complete medical statements.

2. Create a standard operating procedure (SOP) on how the SFA will ensure all medical statements are reviewed by the SFA, signed by the SFA, and are completed fully.

3. Train all appropriate staff on the SOP.

4. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

5. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

810. Non-discrimination on appropriate Program materials?

Finding 9000: Other Finding

The menus posted at the beginning of the serving line do not contain the USDA nondiscrimination statement. All program materials must include the USDA nondiscrimination statement.

Corrective Action:

Corrected onsite. No further action required.

1007. On-site observation validate Off-Site Assessment Tool responses to Local School Wellness Policy questions?

Finding 9011: Local School Wellness Policy information on the Off-site Assessment Tool not validated, or deficiencies found.

Some of the information gathered on the Off-site Assessment Tool regarding the SFA's Local School Wellness Policy could not be validated during on-site observations.

Discrepancies between the SFA's responses to Local School Wellness Policy questions on the Off-site Assessment Tool and the SFA's current practices as observed on-site: The wellness policy does not permit participation by the general public. Documentation of how the policy is made available to the public is also required.

Corrective Action:

1. The wellness policy leadership in the Local Wellness Policy of one or more SFA and/or school official(s) who have the authority and responsibility to ensure each school complies with the policy must make sure public involvement requirement is met and documented.

2. To meet the public involvement requirement, in the wellness policy, add information on efforts to review and update the wellness policy, who is involved, and how stakeholders are aware of their ability to participate.

3. Keep documentation on file to show the public involvement requirement was met.

4. Please complete and submit the Attestation Report by checking the box next to the relevant finding and requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.





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Technical Assistance:

Technical assistance was provided on local wellness policy requirements and a handout was provided.

1214. Validate OFS #1204 - Did the School Nutrition Director meet annual training requirements?

Finding 9000: Other Finding

The School Nutrition Program Director did not meet the training requirements, and did not have scheduled/planned trainings for the remainder of the school year to meet annual training requirements.

Corrective Action:

1. Each year, the School Nutrition Program Director will receive at least 12 hours of annual education/training.

2. Create a standard operating procedure (SOP) detailing how all school nutrition employees at the SFA level and at the school level have met the required professional standards hours training requirement annually. Include in the procedures how the SFA will have all required information readily available for review upon request by the State Agency.

3. Train all appropriate staff on the SOP.

4. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

5. Please complete the Attestation Report by checking the box next to the relevant finding and requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

1217. Frequency of tracking training hours

Finding 9000: Other Finding

The LEA is not tracking School Nutrition Program staff training hours for professional standards for all staff.

Training logs were submitted for two staff, but not for any other staff member. Training logs must be maintained for all staff who have duties in the meals program.

Corrective Action:

1. Each year, the School Nutrition Program Personnel will receive the required training related to their job duties.

2. Create a standard operating procedure (SOP) detailing how all school nutrition employees at the SFA level and at the school level have met the required professional standards hours training requirement annually. Include in the procedures how the SFA will have all required information readily available for review upon request by the State Agency.

3. Train all appropriate staff on the SOP.

4. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

5. Documentation of professional standards training should be kept for 3 years plus the current school year. Records that list the employee name, employer/school, training title, topic/objectives, training source, dates, and total training hours would be appropriate to show compliance with professional standards training requirements.

6. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.



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Technical Assistance:

Technical assistance was provided on Professional Standards requirements and a handout was provided. The program year runs from July 1 thru June 30. The NSLP Director must complete at least 12 hours of annual continuing education/training. Part-time staff who work less than 20 hours in nutrition program-related tasks per week must complete at least 4 hours of annual continuing education/training. New staff who started their duties after January 1st must complete only half of the required training hours (2 hours of training for part-time/non-nutrition program staff). If staff complete more hours than are required annually, excess hours may be counted towards the next program year. Ensure that training documentation is retained, including agendas (with time that the training occurred) and certificates of completion, if available.

1219. Validate OFS #1209 - Employees outside of the School Nutrition Program with School Nutrition Program duties receive training?

Finding 9000: Other Finding

The SFA has additional employees outside of the school nutrition program whose responsibilities include duties related to the operation of the school nutrition program who have not received applicable training.

Employees outside of the school nutrition program whose responsibilities include duties related to the operation of the school nutrition program throughout the school year are required to complete training hours (6 hours training for those working 20 hours or more per week or 4 hours for those working less than 20 hours with SNP). Employees outside of the school nutrition program whose duties do not last throughout the entire school year are not required to obtain training hours, but should receive adequate training specific to the task they will perform. Training may obtained in person, online, through local meetings, webinars, conferences, etc.

Corrective Action:

1. Each year, the employees outside of the School Nutrition Program whose responsibilities include duties related to the operation of the School Nutrition Program will receive training

2. Create a standard operating procedure (SOP) detailing how all employees outside of the School Nutrition Program whose responsibilities include duties related to the operation of the School Nutrition Program will receive training. Include in the procedures how the SFA will have all required information readily available for review upon request by the State Agency. 3. Train all appropriate staff on the SOP.

4. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

5. Documentation of professional standards training should be kept for 3 years plus the current school year. Records that list the employee name, employer/school, training title, topic/objectives, training source, dates, and total training hours would be appropriate to show compliance with professional standards training requirements.

6. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

1401. Warehouse storage – commercial and USDA foods stored properly?

Finding 9144: SFA-contracted and self-operated warehouses are not storing all foods (commercial and USDA) properly.

During the review, storage requirements were discussed with the SFA. The SFA must ensure that all expired food is disposed of properly.

During the onsite visit to the vendor, there were some expired products found (pizza dough).



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Corrective Action:

1. Create a standard operating procedure (SOP) on how all expired food will be disposed of properly.

2. Train all appropriate staff who maintain food storage for the vendor and SFA.

3. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

1602. On-site observation validate Off-Site Assessment Tool responses to SFSP & SBP Outreach questions?

Finding 9009: SFSP & SBP Outreach information on the Off-site Assessment Tool not validated, or deficiencies found.

Upon review of the school breakfast, it was found that the SFA is not informing households of the availability of the School Breakfast Program prior to, or at the beginning of the school year.

Upon review of the SFSP, it was found that the LEA is not informing households regarding the availability and location of free meals for students via the Summer Food Service Program.

Corrective Action:

1. Create a standard operating procedure (SOP) on how the SFA will ensure households are notified about the availability of the School Breakfast Program prior to, or at the beginning of the school year.

2. Train all appropriate staff on the SOP.

3. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

4. Create a standard operating procedure (SOP) on how the SFA will inform households regarding the availability and location of free meals for students via the Summer Food Service Program.

5. Train all appropriate staff on the SOP.

6. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

7. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

Technical Assistance:

The SFA must conduct SBP outreach at the beginning of the school year and multiple times throughout the school year. The SFA must also inform families of the availability and locations of meals under the Summer Food Service Program (SFSP) before the end of the academic school year.

Hawaii Department of Education



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Hawaii National Guard Youth Challenge Academy (904-RCC) Bldg 1787 Shangrila St Room104 Kapolei, HI 96707-0348

Month of Review: December 2019 Date of Onsite Review: January 31, 2020

Technical Assistance

* General Program Compliance: On-site Monitoring

Although it is not required (but recommended), the SFA completed the On-site Review Checklist (MC-7 form). There were some errors/inconsistencies in the responses on the forms. Technical assistance was provided clarification was provided by the coordinator. The forms were corrected on-site.

* General Program Compliance: Water

On the days of review, reviewers observed that cups were available by the water cooler at breakfast, but not at lunch. Although all of the cadets appeared to be carrying personal water bottles during meal service, participants cannot be required to bring their own cup/water bottle if they wish to have water with their meal.

Suggestions

* General Program Compliance Question: 1300.: Water

On the days of review, reviewers observed that cups were available by the water cooler at breakfast, but not at lunch. Although all of the cadets appeared to be carrying personal water bottles during meal service, participants cannot be required to bring their own cup/water bottle if they wish to have water with their meal.

Meal Components & Quantities - Hawaii National Guard Youth Challenge Academy (904-RCC)

404. DOR - signage explaining reimbursable meal near/at beginning of service line?

Finding 9000: Other Finding

Fruit was missing from the posted lunch menu on the day of review.

Corrective Action:

1. Update menus to make sure all components are listed on the menus.

2. Complete the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

407. DOR - school comply with planned menu, changes made? Enter data

Finding 9000: Other Finding

The planned menu was Hapa Rice, Mashed Potato, Milk, Fruit Cocktail, and Ham. The menu that was served was Breakfast Burrito, Hash brown, Pineapple, and Milk. The breakfast that was served met the meal pattern requirements. Also, it was observed that not all meals had the hash brown - vegetable croquette was substituted for the hash brown.



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At breakfast on the day of review, it was observed that some of the plates contained hash browns, but some of the plates contained vegetable croquettes. The vendor indicated on the transport record that hash browns were plated in the meals. Based on prior documentation provided by the vendor, the hash browns credit as ¼ vegetable, but the vegetable croquette is not creditable towards the meal pattern. The breakfast that was served met the meal pattern requirements. These types of inconsistencies could potentially lead to meal pattern deficiencies.

Corrective Action:

1. Review the meal pattern requirements.

2. Train the vendor on the meal pattern requirements including substitutions.

3. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

410. Review period menus and production records - Quantities and meal pattern requirements met? Enter data.

Finding 9000: Other Finding

The federal regulations require menus to be planned that meet the minimum daily 2-ounce equivalent meat/meat alternate requirement for grades 9-12. This requirement was not met on Day 4, with only 1.5 oz. eq. offered.

Corrective Action:

1. Update menus to come into compliance.

2. Complete the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

410. Review period menus and production records - Quantities and meal pattern requirements met? Enter data.

Finding 9000: Other Finding

The whole grain-rich requirements for SY 2019/2020 was 100%. The lunch menu met 73.3% whole grains for the week of review for grades 9-12.

At least 80% of grains offered must be whole grain-rich to meet requirements for SY 2024/2025.

Corrective Action:

Corrective Action

1. Update menus to come into compliance.

2. Complete the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.



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410. Review period menus and production records - Quantities and meal pattern requirements met? Enter data.

Finding 9076: Planned menus served during Review month do not meet portion size/quantity requirements. At least 100% of grains offered must be whole grain-rich to meet requirements in SY 2019/2020. The breakfast menu met 84% whole grains for the week of review for grades 9-12.

At least 80% of grains offered must be whole grain-rich, and the remaining grains offered must be enriched to meet requirements for SY 24/25.

The following products were not whole grain-rich. Increase the amount of whole grain-rich products offered to at least 80% of the weekly grain offerings for SY 24/25.

Rice

Corrective Action:

1. Update menus to come into compliance.

2. Complete the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

500. DOR - OVS properly implemented, meals with insufficient portion sizes counted for reimbursement? Enter data.

Finding 9078: School is not properly implementing Offer vs. Serve.

The SFA is not implementing OVS properly. Cadets are instructed to take all food components. This is not true OVS. At breakfast, cadets only need to select at least 3 food items, including at least ½ cup of fruit. At lunch, cadets only need to select 3 food components, including at least ½ cup of fruit or vegetable.

- At breakfast on the day of review, one of the cadets did not take a fruit. The reviewer informed the meal clerk and the cadet was told to go back and take a fruit. Upon review of the menu, there was a total of 1/2 cup of vegetables (hash brown and vegetables in the breakfast burrito). Therefore, the meal would be reimbursable without the fruit. Reviewer provided technical assistance explaining the OVS requirements and how the breakfast today had a 1/2 cup of vegetable in the preplated meal.

- OVS is required for the high school age group at lunch, but is not required at breakfast. If the SFA does not wish to do OVS at breakfast, please update the renewal application in HCNP Systems.

- It was observed that many cadets were discarding unopened milk at the end of meal service. If implemented correctly, cadets are not required to take milk under OVS. Proper implementation of OVS would help to reduce food waste/costs.

Corrective Action:

1. Provide OVS training to all food service staff, including the food service manager, and to all meal counting staff so staff understand what makes up a reimbursable meal under OVS.

 Food service staff must communicate with the meal counting staff daily prior to meal service so meal counting staff understand the portions of the food items served and offered to students to determine what makes up a reimbursable meal.
Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by



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the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

501. Cafeteria staff trained on OVS?

Finding 9079: Cafeteria staff have not been adequately trained on requirements and implementation of Offer vs. Serve.

SFA did not provide documentation demonstrating staff completed OVS training. Based on our observation of breakfast and lunch meal service, the SFA is not implementing OVS properly.

Corrective Action:

1. Provide OVS training to all food service staff, including the food service manager, and to all meal counting staff so staff understand what makes up a reimbursable meal under OVS.

 Food service staff must communicate with the meal counting staff daily prior to meal service so meal counting staff understand the portions of the food items served and offered to students to determine what makes up a reimbursable meal.
Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

502. DOR - Signage explaining OVS reimbursable meal near/at beginning of service line?

Finding 9080: No signage explaining what constitutes a reimbursable meal under Offer vs. Serve.

Offer versus Serve (OVS) signage posted did explain that at least 3 components must be selected and one of them must be at least 1/2 cup fruit or vegetable. However, OVS signage does not identify which component each menu item belongs to. Signage must instruct participants on how to select a reimbursable meal.

Corrective Action:

1. Make all of the appropriate corrections to OVS signage. Ensure that all of them items being served during meal service are listed, and that OVS signage shows students how to select a reimbursable meal.

2. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

General Program Compliance - Hawaii National Guard Youth Challenge Academy (904-RCC)

811. Justice for All poster displayed in prominent location?

Finding 9000: Other Finding

Two And Justice For All (AJFA) posters are displayed in the dining area. One poster was the current poster, but the other



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was the old poster. An old AJFA poster was also posted in one of the office windows. The SFA removed the outdated poster. HCNP will provide additional copies of the current AJFA poster.

Corrective Action:

Corrected onsite. No further action required.

1407. SFA written food safety plan implemented?

Finding 9148: Observations on the Day of Review do not indicate compliance with the SFA's written food safety plan. The written food safety plan does not contain the required elements.

The SFA's Food Safety Plan's Standard Operating Procedures (SOP) are not signed/dated.

Corrective Action:

1. Create a standard operating procedure (SOP) on how the SFA will ensure Standard Operating Procedures are reviewed each year. Include how the SFA will make sure to sign and date the Standard Operating Procedures to show annual review was completed.

2. Train all appropriate staff on the SOP.

3. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

1408. Temperature logs available?

Finding 9149: Temperature logs unavailable for review.

During the review, the food transportation logs were reviewed. The SFA's daily food transportation logs are often missing delivery temperatures. The SFA must ensure that all temperature logs are maintained and kept on file.

Corrective Action:

1. Create a standard operating procedure (SOP) on how the SFA will ensure daily transportation logs will be reviewed for completion. Include how the SFA will ensure that all food transportation logs will have delivery temperatures.

2. Train all appropriate staff on the SOP.

3. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with appropriate staff.

4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

NOTE: This will be reviewed during the next Administrative Review to ensure corrective actions have been implemented by the SFA. Therefore, at this time, for this finding, acknowledge to HCNP that the SFA understands the corrective actions that must be implemented to resolve the findings and provide assurance to HCNP that the corrective actions will be implemented.

Failure to complete corrective action or request an extension by the due date may result in claim payment being withheld until corrective action is complete and approved.