



SNP Administrative Review Findings

University Laboratory School (1421-4)

Program Year 2022

University Laboratory School (1421-4)

1776 University Ave, UHS Bldg. 3, Room 121
Honolulu, HI 96822-2447

No. of Sites / Reviewed: 1 / 1
Month of Review: February 2022
Dates of Review: March 28 – April 1, 2022
Exit Conference Date: April 1, 2022
Due Date for Corrective Action: August 25, 2025

Technical Assistance

* Sponsor: Verification

Explained how to complete HCNP's V-7a form correctly which calculates the number of applications to verify. Also, explained that the verification notifications should list the Office Manager as a contact person should the parent have any questions, instead of the Business Manager, since the Office Manager is the verifying official.

* Sponsor: Translations for Applications

Showed SFA where the free and reduced price application translations are available on HCNP's website.

* Sponsor: Benefit Issuance List

Here is the link to the HCNP Master List template: https://hcnp.hawaii.gov/wp-content/uploads/2020/07/Master-List-Template_7.2020.xlsx. There are tabs for each category and column to show the start and end dates for the eligibility status that is missing on the SFA's current Master List.

* General Program Compliance: Civil Rights Ethnic Data

For the Civil Rights Ethnic Data Report, explained if families do not self-report their race/ethnicity, use the race/ethnicity information from their enrollment system.

Verification - University Laboratory School (1421-4)

209. Review of verified applications – properly selected, replaced applications correctly, verified correctly?

Finding 9000: Other Finding

The SFA was required to review one application but verified two applications. The SFA did not calculate the requirement to verify 3% of approved applications correctly. The SFA completed the V-7a form using the number of free and reduced price students instead of the number of free and reduced price applications. TA was provided on how to complete HCNP's V-7a form correctly.

Corrective Action:

1. The verifying official must complete verification training.
2. Keep training documentation on file to show training was conducted.
3. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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Technical Assistance:

Technical Assistance was provided on how to complete HCNP's V-7a form correctly.



211. Verification notification letter?

Finding 9000: Other Finding

The verification notification letter that the SFA is using appears to be a template from 2012. The letter does not include the most current nondiscrimination statement and is missing the Use of Information Statement.

Corrective Action:

1. Update the verification notification letter to the most current version, ensuring it includes both the nondiscrimination statement and the Use of Information statement as required by USDA regulations. HCNP has a verification notification letter template on HCNP's website for SFA's to use.
2. Maintain documentation on file for all verification letters used for each household selected for verification.
3. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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General Program Compliance - University Laboratory School (1421-4)

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

Finding 9000: Other Finding

Some of the civil rights forms in the SFA's binder was not current. Please update your binder by replacing the following forms with the most current documents:

- Nondiscrimination Statement
- Nondiscrimination Procedures
- Complaint Form

Corrective Action:

1. Review and revise all documents to ensure your SFA has the most current versions. Replace any materials that include outdated or incomplete versions with the most current documents posted on HCNP's website.
2. Maintain documentation on file confirming that all relevant materials have been updated, including the date of revision and a list of revised documents.
3. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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

Finding 9008: Civil Rights information on the Off-site Assessment Tool not validated, or deficiencies found.

The SFA explained that the press release has only been distributed to families. Near the beginning of each school year, the public notice must be provided to the local news media, the unemployment office, and any major employers contemplating large layoffs in the attendance area of the school [7 CFR 245.5(a)(2)].

Corrective Action:

1. Develop and distribute the required public release to appropriate entities, such as local news media, the unemployment



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office, and any major employers in the school's attendance area that may be considering significant layoffs. Each year, HCNP provides a public release template that is available on HCNP's website for SFAs to use and complete.

2. Maintain documentation on file verifying that the public release was distributed and/or published, including the date and recipients.

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

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810. Non-discrimination on appropriate Program materials?

Finding 9000: Other Finding

The following materials did not contain the nondiscrimination statement:

- Follow up letter (verification)
 - Student Memos – 7/27/2021 and 8/4/2021 posted on the school website
- The nondiscrimination statement was not correct on the following materials:

- Notice of Approval/Denial
- We Must Check Your Application
- We Have Checked Your Application

Corrective Action:

1. Review and revise all documents to ensure they contain the current, complete USDA nondiscrimination statement. Replace any materials that include outdated or incomplete versions.
2. Maintain documentation on file confirming that all relevant materials have been updated with the correct nondiscrimination statement, including the date of revision and a list of revised documents.
3. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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

Finding 9000: Other Finding

All School Food Authorities (SFAs) are required to maintain a current and USDA-compliant Local Wellness Policy (LWP). The SFA's existing LWP has a revision date of October 14, 2016, and does not reflect the requirements set forth in the Final Rule, which became mandatory as of June 30, 2017. Therefore, the current LWP is out of compliance and must be updated accordingly.

The USDA Local Wellness Policy Implementation Summary of the Final Rule is available at: https://fns-prod.azureedge.us/sites/default/files/resource-files/LWPsummary_finalrule.pdf

- Additional information: SP 24-2017 Local School Wellness Policy: Guidance and Q&As: <https://fns-prod.azureedge.us/sites/default/files/cn/SP24-2017os.pdf>
- USDA Local School Wellness Policy website: <https://www.fns.usda.gov/tn/local-school-wellness-policy>

Corrective Action:

1. Revise the Local Wellness Policy to align fully with all USDA requirements under the Final Rule.



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2. Post the updated LWP publicly on the SFA’s website.
3. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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1400. Food safety plan – contain required elements, copy available at each school?

Finding 9000: Other Finding

The Process #1: No Cook chart and Process #2: Same Day Service chart within the SFA’s Food Safety Plan are incomplete. All process charts must be fully developed to reflect proper food safety practices. The SFA must ensure that all documents included in the Food Safety Plan are current, complete, and finalized in accordance with USDA and HACCP guidelines.

Corrective Action:

1. Review and update the Process #1 and Process #2 Charts to ensure it includes accurate information regarding food safety temperatures (cooking, holding, cooling, reheating) as per the latest case/product specifications and regulatory requirements.
2. This review will include aligning the chart with the SOPs for food safety processes, ensuring the temperatures meet the guidelines for food safety as outlined in the USDA/FDA and State of Hawaii Department of Health recommendations.
3. The Food Safety Plan, including the Process #1 and Process #2 Charts and all SOPs, will be reviewed annually to ensure they remain accurate and compliant with current food safety regulations.
4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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1400. Food safety plan – contain required elements, copy available at each school?

Finding 9142: The written food safety plan does not contain all the required elements.

An annual review of the Food Safety Plan is required; however, there is no documentation indicating that such a review has been conducted. Additionally, the Standard Operating Procedures (SOPs) within the SFA’s Food Safety Plan are not signed or dated, as required. This lack of documentation indicates noncompliance with USDA food safety requirements.

Corrective Action:

1. Conduct an annual review of the Food Safety Plan to ensure it remains current and compliant with USDA and HACCP requirements.
2. Sign and date the SOPs each year, and update the Food Safety Plan as needed based on changes in procedures, staffing, or regulations.
3. Provide training to all relevant staff on the contents and implementation of the Food Safety Plan.
4. Maintain documentation of the training, including a sign-in sheet, date of training, and agenda or training materials, to verify that the training was conducted with all appropriate personnel.
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.



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University Laboratory School (1421-4)

Program Year 2022

University Laboratory School (543-PCS)

1776 University Ave, UHS Bldg. 3, Room 121
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Month of Review: February 2022

Date of Onsite Review: March 24, 2022

Meal Counting & Claiming - University Laboratory School (543-PCS)

318. DOR - accurate meal counts by category at POS? Enter data.

Finding 9066: Inaccurate meal counts by eligibility category at the POS.

During the Day of Review, it was observed that the meal service lines did not accurately record the number of meals served by eligibility category at the point of service, as required. Specifically:

- 52 students were counted before receiving a full reimbursable meal.
- These 52 students did not take milk until after being counted at the point of service.
- Additionally, 2 students were counted as receiving a reimbursable meal but did not take milk at all.

This indicates that meals were not consistently counted at the actual point of service and may not have met the requirements for a reimbursable meal, resulting in potential claim inaccuracies. The two nonreimbursable meals will be disallowed.

Corrective Action:

1. To correct this finding, complete meal counting and claiming training and lunch meal pattern training.
2. Submit training documentation (date of training, training handouts, training certificate/training log) to confirm meal counting and claiming training and lunch meal pattern training was completed by appropriate staff.
3. Create and submit a detailed explanation of the new/revised process detailing how reimbursable and nonreimbursable meals will be counted correctly at the point of service that will be implemented to ensure an accurate meal counting and claiming system. Include in the process the names(s) and title(s) of the persons responsible at the SFA for ensuring compliance.
4. Train all appropriate staff on the new process to ensure that reimbursable meals and nonreimbursable meals are counted correctly at the point of service.
5. Submit training documentation (sign-in sheet, date of training, agenda) to confirm that training on the process was completed with appropriate staff.
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.

325. Review Period meal counts by category correctly used in the claim? Enter data.

Finding 9074: School's meal counts by category not used correctly in the SFA's claim for reimbursement.

On February 1, 2022, a total of 300 lunches were claimed for reimbursement. This total included one lunch recorded under the "Additional" column on the February 2022 Meal Count Listing: Lunch form. As noted at the bottom of the form:

"The Additional column shows the number of 2nd meals served. (Note that if any additional or earned meals were served, the total number of meals served may exceed the total number of eligible students.)"

Second meals are not reimbursable under USDA regulations. As a result, the one additional meal included in the claim will be disallowed.



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Corrective Action:

1. To correct this finding, submit a detailed explanation of the new/revised process that will be implemented to ensure an accurate meal counting and claiming system that assures second meals will not be claimed for reimbursement. Include in the process the names(s) and title(s) of the persons responsible at the SFA for ensuring compliance.
2. Train all appropriate staff on the new process to ensure second meals are not claimed for reimbursement.
3. Submit training documentation (sign-in sheet, date of training, agenda) to confirm that training on the new process 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.

Meal Components & Quantities - University Laboratory School (543-PCS)

402. DOR - quantities served meet daily meal pattern requirements for age/grade groups? Enter data

Finding 9000: Other Finding

On the Day of Review, students in Grades 9–12 were served 4 slices of cantaloupe, despite the production record indicating that 6 slices would be served. This discrepancy was confirmed through video documentation:

- “Add Fruit” video at 0:16 seconds
- “Plating” video at 0:02 and 0:06–0:07 seconds

As a result, the minimum daily 1 cup fruit requirement for Grades 9–12 was not met, placing the meal service out of compliance with USDA meal pattern requirements.

Corrective Action:

1. Update menus to come into compliance with NSLP meal pattern requirements.
2. Train all food service staff on how to follow production records correctly to ensure the appropriate quantities are offered to students for a reimbursable meal.
3. Maintain documentation of the training, including a sign-in sheet, date of training, and agenda or training materials, to verify that the training was conducted with all appropriate personnel.
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.

402. DOR - quantities served meet daily meal pattern requirements for age/grade groups? Enter data

Finding 9052: Day of Review portion sizes insufficient.

On March 24, 2022, the disher used to serve mashed potatoes at University Laboratory was incorrectly identified. During the review, it was noted that the marking “18-8” was mistaken as the disher size; however, this refers to the type of stainless steel, not the utensil’s portion size. Upon further verification using the Browne Foodservice website (matching the “Browne” branding on the utensil), the ivory disher used is a #10 disher, which serves 3/8 cup, not the required 1/2 cup.

Therefore, the mashed potato serving for the day of review will be counted as 3/8 cup. As a result, the total amount of vegetables served to students in grades 9–12 on March 24 did not meet the minimum daily 1 cup vegetable requirement, as mandated by USDA meal pattern guidelines.



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Corrective Action:

1. Train all food service staff on how to read the production record correctly and train staff on the sizes of the different serving utensils to ensure the appropriate quantities are served for a reimbursable meal.
2. Maintain documentation of the training, including a sign-in sheet, date of training, and agenda or training materials, to verify that the training was conducted with all appropriate personnel.
3. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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403. DOR - two varieties of milk available, allowable substitutions? Enter data.

Finding 9053: Milk variety not offered throughout serving period on Day of Review.

On the Day of Review, it was observed that at least two required milk varieties were not available throughout the entire serving period across all meal service lines. As a result, nine students during the first lunch service and 13 students during the second lunch service were unable to choose from the required milk options, which is in violation of USDA requirements for offering a variety of milk.

Corrective Action:

1. Create a Standard Operating Procedure (SOP) to ensure that two types of milk are consistently available throughout the entire meal service period on all meal service lines.
2. Provide training to all relevant staff on the contents and implementation of the new SOP.
3. Maintain documentation of the training session, including a sign-in sheet, the date of the training, and the agenda or training materials, to verify that the training was conducted with all appropriate personnel.
4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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

Finding 9000: Other Finding

Signage explaining what constitutes a reimbursable lunch to students (monthly menu) is posted at the end of the meal service line (next to the meal counter), not at or near the beginning of the meal service line. SFA needs to move the signage to the beginning of the serving line. SFA corrected this on 4/1/22 (photos were submitted showing the April 2022 menu has been posted at the beginning of the serving line for the cafeteria and classroom).

Offer versus Serve (OVS) signage is posted but OVS is currently not being implemented in SY 21-22. Remove OVS signage for SY 21-22 and then post at or near the beginning of the serving line when OVS is implemented.

Corrective Action:

1. Remove Offer versus Serve (OVS) signage if not implementing OVS.
2. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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Program Year 2022

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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.

Productions records were reviewed for the Review Period to determine whether the portion sizes of meal components from the planned menu and served during the Review Period meet the minimum meal pattern requirements for the age/grade group(s) being served.

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 Wednesday 2/16/2022 with only 1oz. eq. offered.

Consider the following suggestion to help meet requirements.

- Standardize the recipe to credit as the intended amount. 2oz eq m/ma was shown as the crediting yield on the menu planning template but crediting came up short on the recipe submitted for review. Consider reviewing the recipe and updating the servings per recipe or the amount/pounds of pulled pork used in a recipe. The preparation step, #7 in the recipe stated 3oz of the pulled pork was used per serving which would credit as 1.75oz eq m/ma per serving. This 3oz amount per serving would still not be sufficient to meet the 2oz eq m/ma required daily.

Corrective Action:

1. Update menus to come into compliance with the USDA NSLP meal pattern requirements.
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.

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.

Based on the documentation that was submitted, the meal pattern requirements were not met.

The production record on 2/14/22 listed negative numbers for amount leftover for tater tots and fruit cocktail. This indicates that there was not enough food. The FSMC mentioned that more food was brought to the SFA but they do not have documentation of this. Explained to the FSMC that the production record is the document that demonstrates whether or not the meal pattern requirements were met so they must document what was available.

Corrective Action:

1. Provide training on correctly completing daily production records for the meals produced and served to all kitchen staff.
2. Keep training documentation (sign-in sheet, date of training, agenda) to confirm that training was completed with the appropriate staff.
3. Maintain accurate and complete production records for the meals produced and served, which correctly identify meal components served, including portion sizes and crediting information for each age/grade group served.
4. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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Program Year 2022

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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.

Based on the documentation that was submitted, the meal pattern requirements were not met for lunch. The daily vegetable requirement was not met on Monday, 2/14/22 and Wednesday, 2/16/22, due to insufficient quantities. Also, the weekly vegetable requirement was not met.

Corrective Action:

1. Update menus to come into compliance with the USDA NSLP meal pattern requirements.
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.

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.

Based on the documentation that was submitted, the meal pattern requirements were not met for lunch. The daily fruit requirement was not met on Tuesday, 2/15/22 and Thursday, 2/17/22, due to insufficient quantities. Also, the weekly fruit requirement was not met.

Corrective Action:

1. Update menus to come into compliance with the USDA NSLP meal pattern requirements.
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 - University Laboratory School (543-PCS)

901. On-site monitoring review completed prior to February 1?

Finding 9103: On-site review of the school's meal counting and claiming procedures was not completed prior to February 1.

The SFA did not conduct an on-site review of the school's meal counting and claiming procedure prior to February 1 of the current Program Year. The on-site review occurred after February 1 without SA approval of an extension.

Corrective Action:

1. Complete all required on-site monitoring prior to February 1 each year.
2. Maintain documentation on file for all on-site monitoring conducted.
3. Complete and submit the Attestation Report by selecting the checkbox next to each identified finding and corresponding requirement area.

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Program Year 2022

1405. Food safety inspection dates?

Finding 9000: Other Finding

The SFA reported that, during a visit in September 2019, DOH Sanitarian informed them that two surprise inspections would be conducted per school year and that the "Request for Sanitation Inspection" form would no longer need to be submitted. However, since it is the end of March, it was advised that the SFA submit a request for a second inspection in case the Sanitarian is unable to conduct the inspection before the end of the school year.

The SFA submitted the written request to the Department of Health on March 31, 2022.

Corrective Action:

This was correct on-site. No further action is required.

1406. Most recent Food safety inspection posted, visible to public?

Finding 9147: Most recent food safety inspection report is not posted in a publicly visible location.

The most current food safety inspection was not posted. The SFA posted it and submitted a video on 3/31/22.

Corrective Action:

This was correct on-site. No further action is required.

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.