| Section | Form subsection | Site Name | | Question # | Due Date | Status | |
|-----------------------------------|---|-----------|---|------------|------------|--|--|
| On-Site Assessment Tool - Site | Meal Components and Quantities - Day of Review | MIDDLE - | TWP HIGH | 401 | 06/28/2019 | CAP Accepted | |
| | CAP Accepted Lorena Paredes 06/28/2019 09:31 AM | S | CAP Accepted | | | | |
| | CAP Submitted DAWN DECAMILLO 06/27/2019 01:39 PM | | I will review a complete meal with my staff at back to school meeting on August 12, 2019. I will review lunch periods when school starts September 5, 2019 and continue to observe and make sure students get all components necessary. | | | | |
| | CAP Rejected Lorena Paredes 06/25/2019 01:16 PM | | Please indicate the date in September that this will begin. | | | | |
| | CAP Submitted DAWN DECAMILLO 06/25/2019 11:30 AM | | Will review at back to school meeting with all cashiers what a meal is. Will watch all lunches first week of school to ensure all students get a complete meal. | | | | |
| Corrective Action History | CAP Rejected Lorena Paredes 06/19/2019 10:04 AM | | Explain in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation. | | | | |
| | CAP Submitted DAWN DECAMILLO 05/29/2019 11:53 AM | | | | | | |
| | Flagged Lorena Paredes 05/28/2019 01:49 PM | | Students must take the required number of components for lunch in order for their meals to be claimed for reimbursement. Because the SFA has offer versus serve, students must select at least 3 food components in the proper quantities. One component selected must be ½ cup fruit and/or vegetable. Food service staff/cashiers must receive training on how to accurately recognize a reimbursable meal under offer versus serve. Explain in detail, how the finding will be corrected and the measures tak to ensure that it will not reoccur in the future. Indicate the date of implementation. | | | serve, Dne :aff/cashiers under offer easures taken | |

| Section | Form subsection | Site Nar | ne | Question # | Due Date | Status | | |
|-----------------------------------|---|---|--|--|------------------|----------------------------|--|--|
| On-Site Assessment Tool - Site | Meal Components and Quantities - Review Period | MIDDLE | TWP HIGH | 410 | 06/28/2019 | CAP Accepted | | |
| | CAP Accepted Lorena Parede 06/28/2019 09:31 AM | S | CAP Accepted | | | | | |
| Corrective Action History | CAP Submitted DAWN DECAN 06/27/2019 01:42 PM | CAP Submitted DAWN DECAMILLO 06/27/2019 01:42 PM | | ndling meals to include gr s new change with all staf | | | | |
| | CAP Rejected Lorena Paredes 06/25/2019 01:15 PM | 5 | Please indicate the date in Septemb | per that this will begin. | | | | |
| | CAP Submitted DAWN DECAN 06/25/2019 11:32 AM | CAP Submitted DAWN DECAMILLO 06/25/2019 11:32 AM | | school year we will bundle | e breakfast iten | ns to ensure | | |
| | CAP Rejected Lorena Paredes 06/19/2019 10:19 AM | | Explain in detail, how you will ensu ensure that it will not reoccur in the | | | | | |
| | CAP Submitted DAWN DECAMILLO 05/29/2019 11:30 AM | | I will make sure all meals served are complete | | | | | |
| | Flagged Lorena Paredes 05/2 01:38 PM | 28/2019 | At breakfast, for the review period, both daily and weekly minimum quantities must be met for each component offered. This includes giving graham crackers with items that only credit as one grain (ex: cereal, Pop Tarts, French toast sticks, etc.). No fiscal acti will be taken since it is a first occurrence. If two grains are not provided at time of nex Administrative Review, it will be considered a repeat violation and fiscal action will apply. Explain in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation. | | | | | |
| On-Site Assessment Tool | Verification | | | 209 | 06/28/2019 | CAP Accepted | | |
| | CAP Accepted Lorena Parede 06/25/2019 01:12 PM | S | CAP Accepted | | | | | |
| | CAP Submitted VICKI WALTC 06/19/2019 11:12 AM | DN | the webinar will be viewed and the guidelines will be strictly adhered to during the 2019- 2020 verification process | | | | | |
| | CAP Rejected Lorena Paredes 06/18/2019 12:53 PM | | Please complete the SFA-2 in the 'Corrections" tab. Date of implementation must be indicated. | | | | | |
| Corrective Action History | CAP Submitted VICKI WALTON 06/03/2019 11:56 AM | | I believe the error was due to using an annualized income figure rather than the bi- weekly figure that should have been used which resulted in an incorrect determination o reduced instead of free. A letter was sent to the household and the determination corrected in the system. Closer attention to the type of income reported and method used for determination will be followed. | | | | | |
| | Flagged Lorena Paredes 05/28/2019 01:39 PM | | The SFA must complete the verification process according to guidelines established in The Eligibility Manual for School Meals. It is recommended that staff responsible for the verification process view the recorded Verification webinar available under the Training tab in SNEARS. Explain, in detail how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation. | | | sible for the the Training | | |
| On-Site Assessment Tool | Certification and Benefit Issuance | | | 137 | 06/28/2019 | CAP Accepted | | |

| Section | Form subsection | Site Name | | Question # | Due Date | Status | |
|---------------------------|--|---|--|---|----------------|-----------------|--|
| | CAP Accepted Lorena Parede 06/25/2019 11:07 AM | !S | CAP Accepted | | | | |
| | CAP Submitted VICKI WALTO 06/19/2019 11:07 AM | CAP Submitted VICKI WALTON 06/19/2019 11:07 AM | | ely and training to preven chool yearSeptember 2 | | kes will take | |
| Corrective Action History | CAP Rejected Lorena Pareder 06/19/2019 10:15 AM | S | Explain in detail, how the finding w that it will not reoccur in the future | | | to ensure | |
| | CAP Submitted DAWN DECA 05/29/2019 11:32 AM | CAP Submitted DAWN DECAMILLO 05/29/2019 11:32 AM | | rvice associates at back t | o school meeti | ng. | |
| | Flagged Lorena Paredes 05/28/2019 01:40 PM | | Eligibility determinations must be correctly transferred from the source document (applications, DC documentation) to the benefit issuance documents (e.g. tickets, master eligibility list, rosters, POS system). A test of the benefit issuance system compared to the benefit issuance documentation reviewed indicated certified eligibility was transferred incorrectly. All discrepancies were recorded on the Eligibility Certificatic and Benefit Issuance Error Worksheet (SFA-1). Correct the errors indicated and record the date of correction in the CA. Explain, in detail how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation. | | | | |
| On-Site Assessment Tool | Verification | | | 212 | 06/28/2019 | CAP Accepted | |
| | CAP Accepted Lorena Parede 06/25/2019 11:03 AM | :S | CAP Accepted | | | | |
| | CAP Submitted VICKI WALTON 06/19/2019 11:09 AM | | the corrective action will take place during the 2019-2020 verification process | | | | |
| | CAP Rejected Lorena Paredes 06/18/2019 02:00 PM | | Date of implementation must be indicated. | | | | |
| Corrective Action History | CAP Submitted VICKI WALTON 06/03/2019 11:49 AM | | the second attempt letters were sent but copies not made for auditing purposesin the future all second attempt letters will be copied and scanned to provide proper back up for verification | | | | |
| | Flagged Lorena Paredes 05/2 01:39 PM | Flagged Lorena Paredes 05/28/2019 01:39 PM | | for verification | | | |

| Section | Form subsection | Site Name | | Question # | Due Date | Status | |
|---------------------------|---|-----------|---|--------------------------|-----------------|--|--|
| On-Site Assessment Tool | Verification | | | 208 | 06/28/2019 | CAP Accepted | |
| | CAP Accepted Lorena Parede 06/24/2019 07:47 AM | s | CAP Accepted | | • | • | |
| Corrective Action History | CAP Submitted VICKI WALTON 06/19/2019 11:15 AM | | the confirming official signed the vertice the forms will be sent to the confirm signature | | | | |
| | CAP Rejected Lorena Paredes 06/18/2019 12:39 PM | | Date of implementation must be in | dicated. | | | |
| | CAP Submitted VICKI WALTON 06/03/2019 11:58 AM | | the documents that were reviewed | will be signed and dated | by the confirmi | ing official | |
| | Flagged Lorena Paredes 05/2 01:40 PM | 8/2019 | The Confirming Official must record on the application or Verification Tracker the date the confirmation review. Explain, in detail how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation. | | | | |
| Off-Site Assessment Tool | Local School Wellness | | | 1005 | 06/28/2019 | CAP Accepted | |
| | CAP Accepted Lorena Parede 06/24/2019 07:46 AM | s | CAP Accepted | | | | |
| | CAP Submitted VICKI WALTON 06/19/2019 11:17 AM | | this will be implemented for the 2019-2020 school year beginning September 2020 | | | | |
| | CAP Rejected Lorena Paredes 06/18/2019 12:38 PM | 5 | Date of implementation must be indicated. | | | | |
| Corrective Action History | CAP Submitted VICKI WALTON 06/03/2019 12:12 PM | | the assessment was not done for the year in review but will be conducted and publicized on the school website this coming year and all that follow | | | | |
| | Flagged Lorena Paredes 05/2 01:42 PM | 8/2019 | | | | , students nent. or posting how the | |
| Off-Site Assessment Tool | School Breakfast and Summer Food Service Program Outreach | | | 1601 | 06/28/2019 | CAP Accepted | |

| Section | Form subsection | Site Na | me | Question # | Due Date | Status | | |
|---|--|---------|--|-----------------------------|-----------------|-----------------|--|--|
| | CAP Accepted Lorena Paredes 06/24/2019 07:45 AM | S | CAP Accepted | | | | | |
| | CAP Submitted VICKI WALTON 06/19/2019 11:20 AM | | the flyer will be added to the schoo | l website in July 2019 | | | | |
| | CAP Rejected Lorena Paredes 06/18/2019 12:37 PM | | Date of implementation must be in | dicated. | | | | |
| Corrective Action History | CAP Submitted VICKI WALTO 06/03/2019 12:14 PM |)N | although there are no centers in ou website for eligible families | ir county we will upload th | ne flyer to our | school | | |
| Flagged Lorena Paredes 05/28/2019 01:41 PM | | 8/2019 | SFA must inform eligible families about the availability and location of free meals for students during the summer months through the Summer Food Service Program. The following link can be used to download a brochure from USDA that can be sent to households or posted on the SFA's web site: http://www.fns.usda.gov/sites/default/files/SFSP_Promotional_Flyer.pdf. Explain, in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation. | | | | | |
| Off-Site Assessment Tool | Civil Rights | | | 806 | 06/28/2019 | CAP Accepted | | |
| | CAP Accepted Lorena Paredes 06/24/2019 07:44 AM | s | CAP Accepted | | | | | |
| | CAP Submitted VICKI WALTON 06/19/2019 11:23 AM | | in order that all applicable staff be present the training will take place at the beginning of the new school year September 2019 | | | | | |
| | CAP Rejected Lorena Paredes 06/18/2019 12:36 PM | | Date of implementation must be indicated. | | | | | |
| Corrective Action History | CAP Submitted VICKI WALTON 06/03/2019 12:17 PM | | all of the staff that interact with the program will attend annual civil rights training and the proper documentation of attendance will be filed | | | | | |
| | Flagged Lorena Paredes 05/2 01:42 PM | 8/2019 | Annual civil rights training is required for all staff who interact with program particip or applicants (e.g. cafeteria staff, staff in charge of free/reduced application approva and verification of applications). The SFA must keep documentation of the annual training that includes staff who attended, date of training and topics covered. Explai detail, how the finding will be corrected and the measures taken to ensure that it wi reoccur in the future. Indicate the date of implementation. | | | | | |
| Off-Site Assessment Tool | Certification and Benefit Issuance | | | 107 | 06/28/2019 | CAP Accepted | | |
| | CAP Accepted Lorena Paredes 06/24/2019 07:44 AM | S | CAP Accepted | | | | | |
| | CAP Submitted VICKI WALTO 06/19/2019 11:26 AM | N | a call will be made June 19th, 2019 to the LunchTime software department to discuss updating the notifying letters to meet state guidelines | | | | | |
| Corrective Action History | CAP Rejected Lorena Paredes 06/18/2019 12:35 PM | 5 | Date of implementation must be indicated. | | | | | |
| | CAP Submitted VICKI WALTO 06/03/2019 12:20 PM |)N | all letters will be checked for consistency with the states requirements | | | | | |
| | Flagged Lorena Paredes 05/2 01:43 PM | 8/2019 | Letter used by SFA to inform households of eligibility status contains incorrect or outdated elements. It is strongly suggested that the Letter to Notify Households of Eligibility Status (Form 70) be used. Explain, in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the dat of implementation. | | | | | |

| Section | Form subsection | Site Nar | ne | Question # | Due Date | Status | |
|------------------------------------|--|----------|---|---------------------------|--|---|--|
| Off-Site Assessment Tool | Certification and Benefit Issuance | | | 110 | 06/28/2019 | CAP Accepted | |
| | CAP Accepted Lorena Paredes 06/24/2019 07:43 AM | S | CAP Accepted | | | | |
| | CAP Submitted VICKI WALTON 06/19/2019 11:29 AM | | upon our initial direct certification in downloaded from the SNEARS webs | | that will be us | ed will be | |
| Corrective Action History | CAP Rejected Lorena Paredes 06/18/2019 12:33 PM | 5 | Date of implementation must be inc | dicated. | | | |
| | CAP Submitted VICKI WALTON 06/03/2019 12:23 PM | | we have a new POS system and we were in accordance with the state of will be printed from the SNEARS do | juidelinesin the future a | | | |
| | Flagged Lorena Paredes 05/2 01:43 PM | 8/2019 | 9 Households of directly certified students must be notified, in writing, of th for free meals. The notification must include the complete and current no statement, in addition to informing households that no further applicatio benefits is required, that they should notify the SFA if there are are addit in the household not listed on the notification and that they have the opti benefits. The State Agency direct certification letter is strongly recommer developed letter can be used as long as it contains all the required inform above. Explain, in detail, how the finding will be corrected and the measu ensure that it will not reoccur in the future. Indicate the date of implementation. | | nd current non- ner application are are additio have the option gly recommend quired informa- nd the measure | discrimination for meal nal students n to decline ed. An SFA tion indicated es taken to | |
| On-Site Assessment Tool | Certification and Benefit Issuance | | | 128 | 06/28/2019 | CAP Accepted | |
| | CAP Accepted Lorena Paredes 06/24/2019 07:35 AM | S | CAP Accepted | | | | |
| | CAP Submitted VICKI WALTON 06/19/2019 11:31 AM | | the staff was made aware of the errors following the on-site review May 23rd, 2019 and will be gone over again at the beginning of the 2019-2020 school year | | | | |
| | CAP Rejected Lorena Paredes 06/18/2019 12:32 PM | | Date of implementation must be indicated. | | | | |
| Corrective Action History | CAP Submitted VICKI WALTON 06/03/2019 12:28 PM | | the procedures for income eligibility determination will be reiterated to the appropriate current staff and again in the beginning of the new school year | | | | |
| Flagged Lorena Paredes 01:44 PM | | 8/2019 | | | | reported on sing the . Explain, in | |
| Off-Site Assessment Tool | Civil Rights | | | 805 | 06/28/2019 | CAP Accepted | |

| Section | Form subsection | Site Nar | ne | Question # | Due Date | Status | | |
|---|---|---|---|---|---|---|--|--|
| | CAP Accepted Lorena Parede 06/24/2019 07:35 AM | s | CAP Accepted | | | | | |
| | 06/19/2019 11:34 AM | | effective immediately and implemented for the new school year a review of the handling of special dietary needs will include the nurse and all appropriate staffin order to reach all appropriate staff the meeting will have to take place in September at the beginning o the school year 2019 | | | | | |
| | CAP Rejected Lorena Paredes 06/18/2019 12:24 PM | 5 | Please explain how you accommoda MUST be indicated. | ate students with disabilit | ies. Date of ir | nplementation | | |
| Corrective Action History | CAP Submitted DAWN DECAMILLO 06/03/2019 01:06 PM | | What ever needs to be done we do it. Meet with teacher, parents, or the nurse. It is on an as needed basis and individual care. | | | | | |
| | Flagged Lorena Paredes 05/28/2019 01:42 PM | | The SFA must make reasonable acc needs. When a student has a life t documented by a licensed physicial must include a written statement o recommended alternate foods. Wi accommodations may be made, bu will be corrected and the measures Indicate the date of implementation | hreatening disability that n, accommodations must f the need for substitutior hen a student has a food t are not required. Expla t taken to ensure that it w | has been med be made. Doc n(s) that incluc intolerance, in, in detail, ho | ically umentation les ow the finding | | |
| On-Site Assessment Tool | Professional Standards | | | 1215 | 06/28/2019 | CAP Accepted | | |
| | CAP Accepted Lorena Parede 06/19/2019 10:20 AM | S | CAP Accepted | | | | | |
| | CAP Submitted DAWN DECAI 05/29/2019 11:29 AM | MILLO | Will complete 5.25 hours of training before school ends. | | | | | |
| Corrective Action History Flagged Lorena Paredes 05/28/2019 01:36 PM | | School Nutrition Program managers are required to complete at least 10 hours of annu- training. Training can be obtained in a variety of formats, including online courses, live or recorded webinars, in-person trainings/workshops, conferences, meetings etc. Training resources are also available at: http://professionalstandards.nal.usda.gov/. Explain in detail, how the annual training requirements will be met and the measures taken to ensure this finding will not reoccur in the future. Indicate the date of implementation. | | | | | | |
| On-Site Assessment Tool | Certification and Benefit Issuance | | | 126 | 06/28/2019 | CAP Accepted | | |
| | CAP Accepted Lorena Parede 06/19/2019 10:03 AM | s | CAP Accepted | | | | | |
| Corrective Action History | CAP Submitted VICKI WALTON 06/03/2019 11:45 AM | | letters were sent to the appropriate households and the determination changes will be made on June 10, 2019 as per required waiting period | | | | | |
| | Flagged Lorena Paredes 05/2 01:37 PM | 28/2019 | Incomplete and/or incorrectly determined applications were found during the State Agency review of the selected applications. Errors were recorded on the Eligibility Certification and Benefit Issuance Worksheet (SFA-1.) The SFA must indicate the date of correction for all application errors. | | | | | |

| Section | Form subsection | Site Nar | ne | Question # | Due Date | Status | |
|---------------------------|--|----------|---|------------|------------|-----------------|--|
| On-Site Assessment Tool | Certification and Benefit Issuance | | | 133 | 06/28/2019 | CAP Accepted | |
| | CAP Accepted Lorena Paredes 06/18/2019 12:31 PM | S | CAP Accepted | | | | |
| | CAP Submitted VICKI WALTON 06/03/2019 12:30 PM | | the students incorrectly identified a corrected as determined by that fin carryover procedure for accuracy | | | | |
| Corrective Action History | Flagged Lorena Paredes 05/2 01:41 PM | 8/2019 | Four students were listed as Direct Certified but there was no documentation to prove they were DC students this year. This was due to their free DC status being carried ove from last year past the carryover deadline. Documentation for students directly certifie as SNAP, TANF and foster is required. Certification errors were found during the State Agency review of documentation for directly certified students. Errors were recorded on the Eligibility Certification and Benefit Issuance Worksheet (SFA-1.) The SFA must indicate the date of correction for all direct certification errors recorded. Explain, in detail, how the finding will be corrected and the measures taken to ensure that it will no reoccur in the future. Indicate the date of implementation. | | | | |
| Off-Site Assessment Tool | Civil Rights | | | 803 | 06/28/2019 | CAP Accepted | |
| | CAP Accepted Lorena Paredes 06/18/2019 12:17 PM | S | CAP Accepted | | | | |
| | CAP Submitted VICKI WALTON 06/04/2019 09:20 AM | | if the school district is contacted directly in regards to a civil rights complaint they are given the opportunity to have a hearing with the school business administrator and a determination of corrective action or further review is made | | | | |
| Corrective Action History | Flagged Lorena Paredes 05/28/2019 01:43 PM | | SFAs must have a procedure for receiving and processing complaints alleging discrimination in the school meal programs. Complaints can be verbal or written. The USDA Program Discrimination Complaint Form (#148) can be used and is available on the Department Of Agriculture web site at: www.nj.gov/agriculture/applic/forms/#5. Civil rights complaints can either be sent to the New Jersey Division of Food and Nutrition which is turn will forward the complaint to the Civil Rights Division of the Regional USDA Food and Nutrition Services Office. Complaints can also be sent directly to the U.S. Department of Agriculture by (1) mail: Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. Explain, in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation. | | | | |