



**New Mexico Public Education Department**  
 Student Success & Wellness Bureau  
 Administrative Review Corrective Action Plan

Name of School Food Authority: **Holy Ghost Catholic School**

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School Site(s) reviewed: **Holy Ghost**

Date of On-Site Review: **Date: September 12, 2018**

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Date Corrective Action Plan Was provided to SFA: **Date: October 10, 2018**

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**Date your Corrective Action Plan Response is due to NMPED: Due Date: November 9, 2018**

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**COMMENDATIONS**

PERFORMANCE STANDARD 1
SFA uses takes meal counts properly and correctly consolidates meal count for reimbursement.
SFA used an electronic POS system and demonstrated proper use of the students accounts.

PERFORMANCE STANDARD 2
SFA had production records for breakfast and lunch filled out correctly.
SFA had proper signage in food service area in regard to the meal pattern

GENERAL AREAS
SFA had health inspection on site.
SFA had proper nondiscrimination statement posted at the serving area.

The following pages address the findings that were identified during your Administrative Review. For each finding you will be presented with the following:

- A summary of the regulation / requirement
- The finding, and details specific to the SFA regarding the finding
- The Code of Federal Regulations citation number or alternate resource citation
- Suggested guidance for the SFA in order to achieve compliance
- SFA area for reply to state how, when and by whom corrections will be made



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**Please provide a detailed response to each finding in the spaces provided**

<b>Finding #1</b>
<b>On the day of review, the K-8 lunch menu did not meet the 3/4 cup daily vegetable requirement. Vegetables were provided, however the minimum required portion size was not met.</b>
<b>Technical Assistance Provided</b>
<b>During the review, the portion sizes required by the meal patterns was discussed with the SFA. The SFA must ensure that all meals counted for reimbursement contain the required components in the minimum portion size required for the specific grade group. The SFA should review all menus to ensure that at least the minimum portion size are planned for the specific grade group. The SFA should also provide additional training to the kitchen staff on the requirements of a reimbursable meal. The training should include what to do if a certain planned menu item is not available or if the item runs out during service. The USDA FNS website can be used for training materials, resources and guidance on the meal pattern. <a href="http://healthymeals.nal.usda.gov/">http://healthymeals.nal.usda.gov/</a></b>
<b>Regulation / Citation Summary</b>
<b>210.10(c) Meal pattern for school lunches. Schools must offer the food components and quantities required in the lunch meal pattern established: K-8: 3/4 cup of vegetable.</b>
<b>SFA Suggested Guidance for Compliance</b>
To come into compliance with meal pattern requirements, the SFA must provide the State Agency with a written plan that will be implemented to ensure future compliance. The plan should include; a statement that all menus will be reviewed to ensure that all portion sizes planned meet at least the minimum required amount for the specific grade group, a process for sites to reference when they do not have one of the planned menu items or there is insufficient quantities, a statement that the serving line will be visually reviewed prior to service to confirm that all required components are available and that additional menu training for all SFA staff will be provided. Provide the outline and dates for the trainings that will be completed. In addition please submit the name(s) and title(s) of the SFA representative(s) that will oversee this area and ensure future compliance. Submit the menu from the day of review with the corrections that were made to the menu to bring it into compliance moving forward.
<b>SFA Response</b>



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**Other areas of Technical Assistance (NOT requiring Corrective Action)**

- TA was provided to the SFA that a public release needed to be advertised promoting the national school lunch program.
- When looking at application one student's eligibility was moved from reduced to free. The change was made onsite and benefit issuance list was updated.

Signature of  
Reviewer:

Angelica Ruelas

Date: 5/15/18

Signature of  
Nutritionist  
Signature of  
SFA

\_\_\_\_\_

Date: \_\_\_\_\_

Representative:

\_\_\_\_\_

Date: \_\_\_\_\_

If you have any questions, feel free to contact me at your convenience. Thank you.

**Name of Reviewer:** Angelica Ruelas  
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Please insert your detailed responses, save, print, sign, and scan/email or mail the signed copy to your Reviewer at the address above by the due date indicated. Thank you.