## BAIS REUVEN KAMENITZ-03009688 - Corrective Action Report

| Form Name                      | Section   | Form subsection                                      | Site Name   |  | Question # | Due Date   | Status       |
|--------------------------------|---|--|---|--|------------|------------|--------------|
| On-Site Assessment Tool - Site |   | Meal Counting and<br>Claiming - Review<br>Period     | BAIS REUVEN KAMENITZ  |  | 325        | 01/14/2018 | CAP Accepted |
| Corrective Action History      |   |  | CAP Accepted Corinne Santos-<br>Hernandez 01/03/2018 11:17 AM | CAP Accepted   |            |            |              |
|                                |   |  | CAP Submitted BORVCH<br>GROZOVSKY 12/19/2017 03:24<br>PM      | On 12/12/2017 it was determined that the underclaim was a typo. We will make sure to have another individual review the claim before it is submitted to avoid such mistakes in the future  Breakfast counts by category (free, reduced and/or paid) must be correctly used in the claim for reimbursement. Meal counts for each school should be verified prior to submitting and certifying the claim. 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.             |            |            |              |
|                                |   |  | Flagged Corinne Santos-<br>Hernandez 12/14/2017 04:47 PM      |  |            |            |              |
| On-Site Assessment Tool - Site | Assessment Tool -   | Meal Components<br>and Quantities -<br>Day of Review | BAIS REUVEN KAMENITZ  |  | 403        | 01/14/2018 | CAP Accepted |
|                                | CAP Accepted Corinne Santos-<br>Hernandez 01/03/2018 11:16 AM |  |   |  |            |            |              |
| Corrective Action History      |   |  | CAP Submitted BORVCH<br>GROZOVSKY 12/19/2017 03:25<br>PM      | Beginning 12/13/2017, we are making sure that 2 varieties of milk are sent to each classroom for breakfast  A minimum of two varieties of fluid milk must be offered throughout the breakfast meal service on all reimbursable meal service lines/serving areas. Allowable varieties are flavored or unflavored fat free milk, unflavored low fat (1%) milk, fat free or low fat lactose reduced/lactose free milk. 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. |            |            |              |
|                                |   |  | Flagged Corinne Santos-<br>Hernandez 12/14/2017 04:48 PM      |  |            |            |              |