

GRAY CHARTER SCHOOL-08006665 - Corrective Action Report (Detail)

Note: The corrective action plan is required to correct any violation identified under the Administrative Review and must be applied to all schools in the SFA, as appropriate, to ensure that previously deficient practices and procedures are revised svste

Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Certification and Benefit Issuance	Certification and Benefit Issuance (On-Site Assessment Tool) (124H)	GRAY CHARTER SCHOOL-08006665	126	01/12/2026	CAP Accepted

GRAY CHARTER SCHOOL-08006665 - Corrective Action Report (Detail)

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Corrective Action History	<p>Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:38 PM</p> <p>CAP Accepted</p>
	<p>Corrective Action Plan: Submitted by Martha Sanders 12/11/2025 01:29 PM</p> <p>On December 09, 2025, the SFA reviewed all applications identified with errors and corrected each determination in accordance with USDA and State Agency requirements. All corrections were recorded on the SFA-1 and SFA-2 forms, along with the required date of correction. Updated determinations have been filed, and no student names were included in the SFA comments, per guidance.</p> <p>Measures to Prevent Recurrence:</p> <ol style="list-style-type: none"> 1. Staff Retraining: All determining officials received refresher training on December 12, 2025. Training covered: <ul style="list-style-type: none"> ◦ Completing and reviewing applications for accuracy ◦ Verifying income documentation and case numbers ◦ Properly approving and denying applications ◦ Requirements for documenting corrections on SFA-1/SFA-2 2. Second-Level Review Process: Beginning immediately, the SFA has implemented a second-level review of all approved, reduced, and denied applications before finalizing eligibility status. A trained reviewer verifies accuracy and completeness to reduce errors. 3. Eligibility Determination Checklist: A standardized checklist must now be completed and attached to every application to ensure consistent, accurate review of all required information. 4. Ongoing Monitoring: Monthly internal audits will be conducted by the Food Service Manager to monitor accuracy and identify any patterns or training needs. <p>Independent Review Requirement:</p> <p>Because the certification and benefit issuance error rate was 10% or higher, the SFA acknowledges that an Independent Review of Applications is required for the next school year. The SFA will fully comply with all guidance and instructions provided later in the school year regarding the Independent Review process and expectations.</p> <p>Date of Implementation:</p> <p>December 10, 2025</p> <p>Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website×Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website×</p>
	<p>Flagged by Kaitlyn Matthews 12/10/2025 07:45 AM</p> <p>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 and/or SFA-2.) The SFA must indicate the date of correction for all application errors. Do not identify the students' names when providing the documentation under the SFA comments. *****The number of Certification and Benefit Errors are greater or equal to 10%, therefore an Independent Review of applications must be completed for next school year. More details will be provided later in the school year regarding the process and expectations for the Independent Review.</p>

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Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Certification and Benefit Issuance	Certification and Benefit Issuance (On-Site Assessment Tool) (124H)	GRAY CHARTER SCHOOL-08006665	131	01/12/2026	CAP Accepted
Corrective Action History	Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:38 PM CAP Accepted				
	Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 03:09 PM				
	On December 09, 2025, the SFA reviewed each application identified with errors and corrected all determination mistakes in accordance with State Agency guidance. The corrections were recorded directly on the SFA-2 form, including the date of correction, as required. The Benefit Issuance documentation has been updated to reflect accurate eligibility status for each household.				
	Measures to Prevent Recurrence: <ol style="list-style-type: none"> 1. Retraining of Determining Officials: All staff responsible for processing applications received refresher training on December 12, 2025, covering eligibility determination rules, case number verification, required documentation, and proper denial procedures. 2. Second-Level Review Process: The SFA has implemented a second-level review for all denied applications. A trained reviewer will verify accuracy before the determination is finalized and filed. 3. Use of Eligibility Checklist: A standardized eligibility determination checklist is now required for every application to ensure all criteria are reviewed consistently. 4. Ongoing Monitoring: Monthly audits of a sample of free/reduced/denied applications will be conducted by the Food Service Manager to ensure continued accuracy and compliance. Date of Implementation: December 10, 2025				
Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website×Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website×					
Flagged by Kaitlyn Matthews 12/10/2025 07:45 AM					
During the state agency review of selected denied applications, determination errors were found. Errors were recorded on the Other Eligibility Certification and Benefit Issuance Errors Worksheet (SFA-2). The SFA must record the corrective action and date corrected on the SFA-2.					
Verification		GRAY CHARTER SCHOOL-08006665	207	01/12/2026	CAP Submitted

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Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 09:14 AM

The SFA acknowledges the verification finding. During the verification pull, one of the three selected applications belonged to a student who was later confirmed as Directly Certified. The student registered late, and the parent submitted an income-based meal application on the first day of school. However, when the required Direct Certification report was run soon after enrollment, the student was identified and coded as DC, meaning this application should not have been included in the verification sample.

To ensure this does not reoccur, the following procedures have been implemented: Enable Ginger *Cannot connect to Ginger* Check your internet connection or reload the browser Disable Ginger? How to use Ginger Rephrase Rephrase with Ginger (Ctrl+Alt+E) Edit in Ginger Ginger is checking your text for mistakes... Disable Ginger in this text field Disable Ginger on this website x

1. **Verification Pre-Check of Eligibility Status**
Before selecting the verification sample, the Direct Certification list will be confirmed to ensure that all DC students are excluded prior to pulling applications.
2. **Updated Enrollment and Coding Procedures**
Any student who registers after the start of the school year will have their eligibility re-checked against the updated DC list before accepting an income-based application.
3. **Two-Person Review Process**
Verification selections and documentation will be reviewed and signed off by two trained officials.
4. **Verification Checklist**
A verification checklist has been created to confirm:
 - correct sample pool,
 - exclusion of directly certified households,
 - replacement procedures for ineligible selections,
 - documentation formatting and required dating.
5. **Staff Training and Guidance Updates**
Staff responsible for verification will receive refresher training on:
 - proper identification of DC students,
 - correct verification pool selection,

Corrective Action History

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	Flagged by Kaitlyn Matthews 12/10/2025 07:46 AM				
	<p>The number of applications verified by the SFA must be exactly the same as the sample size number identified in Part 1 of the Verification Collection Report. With the exception of any questionable applications verified for cause, SFAs must not verify more than or less than the sample size calculated.</p> <p>Corrective Action Finding:</p> <p>SFA was required to verify three applications. One application was a Directly Certified student. Another application should have been pulled for verification to replace the DC student.</p> <p>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.</p>				
Verification	Verification (On-Site Assessment Tool) (207H)	GRAY CHARTER SCHOOL-08006665	208	01/12/2026	CAP Accepted

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Corrective Action History	<p>Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:35 PM</p> <p>CAP Accepted</p>
	<p>Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 09:21 AM</p> <p>The SFA acknowledges the finding related to the confirmation review date not being recorded on the Verification Tracker. While the confirmation review was completed, the Confirming Official did not document the date of the review in the designated section. The Verification Tracker has now been updated to include the missing confirmation review date for all applicable applications. The Confirming Official has reviewed all verification documents to ensure the record is complete and properly dated. To ensure this does not reoccur, the following steps have been implemented SFA-wide:</p> <ol style="list-style-type: none"> 1. Revised Verification Checklist The checklist now includes a required step that the Confirming Official must enter and initial the date of the confirmation review directly on the Verification Tracker. 2. Two-Level Verification Documentation Review Both the Confirming Official and Food Service Director will now sign off to verify that dates have been recorded prior to submitting verification documentation. 3. Staff Training Training will be provided to all verification staff outlining: <ul style="list-style-type: none"> ◦ the role of each official, ◦ documentation requirements, ◦ where and when dates must be recorded. 4. Internal Monitoring Procedure A mid-verification review will occur prior to completion to ensure all documentation including confirmation dates is recorded accurately <p>This correction and updated procedures were implemented district-wide effective December 2025.</p> <p>Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website x</p> <p>Flagged by Kaitlyn Matthews 12/10/2025 07:46 AM</p> <p>The Confirming Official must record on the Verification Tracker the date of the confirmation review.</p> <p>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.</p>

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Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Verification	Verification (On-Site Assessment Tool) (207H)	GRAY CHARTER SCHOOL-08006665	214	01/12/2026	CAP Accepted

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<p>Corrective Action History</p>	<p>Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:35 PM</p> <p>CAP Accepted</p>				
	<p>Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 09:30 AM</p> <p>Corrective Action Taken</p> <ul style="list-style-type: none"> • The Verification Tracker has now been updated to include the missing confirmation review date for all applicable applications. • The Confirming Official has reviewed all verification documents to ensure the record is complete and properly dated. <p>Corrective Action Moving Forward</p> <p>To ensure this does not reoccur, the following steps have been implemented SFA-wide:</p> <ol style="list-style-type: none"> 1. Revised Verification Checklist The checklist now includes a required step that the Confirming Official must enter and initial the date of the confirmation review directly on the Verification Tracker. 2. Two-Level Verification Documentation Review Both the Confirming Official and Food Service Director will now sign off to verify that dates have been recorded prior to submitting verification documentation. 3. Staff Training Training will be provided to all verification staff outlining: <ul style="list-style-type: none"> ◦ the role of each official, ◦ documentation requirements, ◦ where and when dates must be recorded. 4. Internal Monitoring Procedure A mid-verification review will occur prior to completion to ensure all documentation including confirmation dates is recorded accurately. <p>Implementation Date</p> <p>This correction and updated procedures were implemented district-wide effective December 10 2025.</p> <p>Enable Ginger<i>Cannot connect to Ginger</i> Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website</p>				
<p>Flagged by Kaitlyn Matthews 12/10/2025 07:46 AM</p> <p>Households for whom benefits were to be reduced or terminated, due to verification, must be given 10 calendar days written advance notice of the change.</p> <p>Explain, in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Corrective Action must be applied SFA-wide. Indicate the date of implementation.</p>					

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Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Meal Counting and Claiming - Day of Review	Meal Counting and Claiming - Day of Review (On-Site Assessment Tool - Site) (317H)	GRAY CHARTER SCHOOL-3405	318	01/12/2026	CAP Accepted

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Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Corrective Action History	Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:36 PM				
	CAP Accepted				
	Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 10:06 AM				
	<p>On December 8, 2025, the district stopped the practice of entering meals into the POS before the student had their reimbursable meal in hand. Interim, temporary procedures were implemented that require staff to verify the reimbursable meal components at the serving line before scanning or entering the student into the POS. All cafeteria staff working breakfast that day were instructed in the corrected procedure, and a follow-up observational check was completed by the Food Service Manager. Point of Service is now defined and documented as the physical location where the final determination that a reimbursable meal has been selected/served (e.g., at the serving line or immediately adjacent cashier station, where the full meal components are visible). All POS entries must occur after visual confirmation that the student has taken a reimbursable meal (correct components and portion sizes for the student's grade group). Entering a meal into the POS prior to that confirmation is prohibited. For alternate service models (grab-and-go, carts, classrooms), establish clear protocols where a designated verifier confirms reimbursable components at distribution and only then authorizes POS entry.</p>				
	<p>All breakfast service staff completed mandatory retraining covering: point of service definition, acceptable meal components, correct POS procedures, and handling of alternate service models. New hires must complete POS and POS verification training during onboarding and shadow experienced staff for their first five breakfast shifts. Food Service Managers or assigned supervisors will conduct daily morning observations during breakfast for the first 14 school days following implementation, then weekly ongoing spot checks. Each observation will be documented on the Breakfast POS Observation Checklist and signed by the Manager. If discrepancies are observed, corrective coaching will be provided immediately and documented in the Staff Remediation Log. All corrective actions and procedures above were implemented district-wide effective December 10, 2025.</p>				
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Flagged by Kaitlyn Matthews 12/10/2025 07:55 AM					
<p>An accurate count of reimbursable meals served, by eligibility category, must be taken at the point of service for breakfast. Point of service means that point in the food service operation where a determination can be made that a reimbursable free, reduced price or paid meal has been served to an eligible child. The State Agency has determined that the inaccurate counting of meals observed at breakfast is an ongoing systemic problem. The meal counting system must be corrected.</p>					
Corrective Action Finding:					
<p>The meal counting and claiming system was inaccurate during the on-site breakfast observation. Students first checked their name on the roster then staff entered students into the electronic POS, before taking a reimbursable meal.</p>					
<p>Explain, in detail how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Corrective Action must be applied SFA-wide. Indicate the date of implementation. Fiscal action will be taken. An over claim may be assessed.</p>					

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Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Meal Components and Quantities - Day of Review	Meal Components and Quantities - Day of Review (On-Site Assessment Tool - Site) (400H)	GRAY CHARTER SCHOOL-3405	401	01/12/2026	CAP Accepted

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Corrective Action History	Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:37 PM CAP Accepted				
	Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 10:20 AM				
	On December 10, 2025, the Food Service Manager completed a corrective count and claim adjustment for the review month to remove the five non-reimbursable breakfasts from the claim and documented the correction. Moving forward, breakfast meals will be pre-assembled to ensure students receive all required components and cannot select only individual items, similar to the current lunch setup.				
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	Flagged by Kaitlyn Matthews 12/10/2025 07:49 AM Students must take the required number of components for breakfast in order for their meals to be claimed for reimbursement. If the SFA has offer versus serve, students must select at least 3 food items in the proper quantities. One item selected must be 1/2 cup fruit and/or vegetable. Food service staff/cashiers must receive training on how to accurately recognize a reimbursable meal under offer versus serve. If the SFA does not have offer versus serve, students must take all 3 components in the proper quantities. Food service staff/cashiers should receive training on how to accurately recognize a reimbursable breakfast. Corrective Action Finding: Day of review observation, 12/8/2025: Five students did not take a complete meal during breakfast. Five meals are non-reimbursable due to missing component(s). -Two students took cereal, a graham cracker and milk -One student took cereal and milk -One student took cereal and a graham cracker -One student took a graham cracker and juice Explain in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Corrective Action must be applied SFA-wide. Indicate the date of implementation.				

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Meal Components and Quantities - Day of Review	Meal Components and Quantities - Day of Review (On-Site Assessment Tool - Site) (400H)	GRAY CHARTER SCHOOL-3405	402	01/12/2026	CAP Accepted
<p>Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:36 PM</p> <p>CAP Accepted</p> <p>Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 09:46 AM</p> <p>Immediate Correction (already completed):</p> <ul style="list-style-type: none"> Upon identification of the finding, staff were immediately instructed to offer an additional ½ cup fruit component (additional serving of juice or an alternate fruit item such as a ½ cup fruit cup or ½ cup of whole fruit pieces) to all students who received the under-portioned juice on 12/8/2025 so that each student would receive at least the required 1 cup fruit/vegetable. Production records for the affected breakfast day were reviewed and updated to reflect the corrected portioning and any additional food offered. The Food Service manager notified the lunch assistants and feeding our Children the same day (incident logged) and confirmed corrective steps were taken. <p>SFA-Wide Corrective Actions and Preventive Measures (effective December 10, 2025):</p> <ol style="list-style-type: none"> Menu & Recipe Review <ul style="list-style-type: none"> All breakfast menus for grades K–8 have been reviewed and adjusted where necessary to ensure every planned menu provides the daily and weekly minimum component and portion sizes per USDA meal patterns. Creditable contribution for each menu item is documented using available authoritative resources (USDA Food Buying Guide, Child Nutrition (CN) labels, Manufacturer Product Formulation Statements (PFS), USDA Foods information). Documentation is attached to each recipe or menu line. Production Records & Daily Verification <ul style="list-style-type: none"> Daily production records will show planned portion sizes, projected servings, and actual servings offered. Kitchen staff must initial production records verifying the correct portioning was served each meal period. The Food Service Manager will conduct a daily morning check for breakfast service for the first two weeks after implementation, then weekly thereafter as part of routine monitoring. Staff Training 					

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Corrective Action History

- All food service staff will receive mandatory training covering: current breakfast meal pattern requirements; how to measure and serve correct portions; how to document creditable portions; and how to use the Food Buying Guide/CN/PFS to determine crediting. Attendance rosters and training materials are maintained in the office.
- New hires will receive portioning and meal pattern training during onboarding.

3. Menu Documentation & Crediting Files

- A centralized Crediting & Resources binder (electronic and paper) has been created for the school kitchen containing CN labels, PFS, and USDA Foods info for items used on menus. Staff are instructed to consult this binder when planning or substituting menu items.

4. Internal Monitoring & Corrective Tracking

- A monthly menu compliance audit will be completed by the Food Service Director or designee to confirm portion sizes and crediting documentation match production records and point-of-service practices. Audit results will be documented on a Menu Compliance Form and maintained for review.
- Any non-compliance will trigger immediate corrective action and a follow-up audit within 30 days.

5. Communication to Stakeholders

- Principals and school site administrators were notified of the corrective measures and the expectation that menus meet meal pattern requirements.
- Families will be advised (via usual district communication channels) that menus meet federal meal pattern requirements and that portioning protocols have been strengthened.

Timeline & Implementation Date:

All corrective actions described above were implemented district-wide effective December 2025.

Responsible Parties:

- Food Service Director — oversight, training, audits.
- School Kitchen Managers — daily portioning, production records, staff supervision.
- Certifying Official/Director — documentation retention and CAP submission.

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	<p>Flagged by Kaitlyn Matthews 12/10/2025 07:47 AM</p> <p>Portion sizes offered for each required breakfast component must meet daily and weekly minimum requirements for the appropriate grade group (K-5, 6-8, K-8, 9-12). When planning menus, refer to the Lunch Meal Pattern Charts, available on the Department of Agriculture Forms web site for specific requirements. To determine the creditable amount for each menu item's contribution to the meal pattern, refer to the following resources: Child Nutrition (CN) Labels, Signed Manufacturers Product Formulation Statements, USDA Food Buying Guide, Whole Grain Rich (WGR) Resource, USDA Foods Information Sheets. Failure to fix identified issues may also lead to fiscal action/repeat violations in subsequent reviews as these are Performance Standard 2 (PS2) violations.</p> <p>Corrective Action Finding:</p> <p>Day of review observation, 12/8/2025: 1/2 cup orange juice was served during breakfast (insufficient quantities). Per the Breakfast Meal Pattern, grades K-8, a minimum of one cup of fruit and/or vegetable is required daily.</p> <p>Explain, in detail how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Corrective Action must be applied SFA-wide. Indicate the date of implementation.</p>				
Meal Components and Quantities - Day of Review	Meal Components and Quantities - Day of Review (On-Site Assessment Tool - Site) (400H)	GRAY CHARTER SCHOOL-3405	403	01/12/2026	CAP Accepted

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Corrective Action History	Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:37 PM CAP Accepted				
	Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 11:13 AM During the breakfast service on December 8, 2025, only one variety of milk was placed on the serving line. Although the SFA routinely offers two allowable varieties each day, the second option (chocolate milk) was on-site and available, but the manager inadvertently failed to place it on the breakfast line. The chocolate milk was served later that day during lunch. On December 09, 2025, the Food Service Manager corrected the issue by ensuring both milk varieties were placed on the breakfast line and documented the correction. Staff were reminded that both varieties must be displayed and available for the entire breakfast meal service. A required step has been added to the Breakfast Line Checklist to confirm that both milk varieties are physically placed on the line before breakfast begins. On December 12, 2025, all food s1. Morning setup procedures have been updated to require verification that both milk types are pulled from storage and stocked in the cooler prior to service. Service staff, including the manager, will receive a refresher training on USDA milk variety requirements and proper meal service setup procedures. The Food Service Manager will conduct weekly line checks, followed by monthly spot checks, to ensure both milk varieties continue to be offered consistently at breakfast. Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website Flagged by Kaitlyn Matthews 12/10/2025 07:49 AM 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 or flavored low fat (1%) milk, fat free or low-fat lactose reduced/lactose free milk. Failure to fix identified issues may also lead to fiscal action/repeat violations in subsequent reviews as these are Performance Standard 2 (PS2) violations. Corrective Action Finding: Day of review observation, 12/8/2025: at breakfast only one variety of milk was served (low-fat white milk). Explain in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Corrective Action must be applied SFA-wide. Indicate the date of implementation.				
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Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Corrective Action History	Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:33 PM CAP Accepted				
	Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 08:18 AM To address the findings, we have implemented proper reimbursable breakfast & Lunch signage at the beginning of every serving line across the district. New signage clearly identifies all required meal components for a reimbursable breakfast, in compliance with USDA guidelines. The signage has been posted in a visible location at the point of service, so students are informed before making selections. This corrective action was completed district-wide and went into effect on December 10, 2026. To ensure this does not reoccur, the following procedures have been put in place: <ul style="list-style-type: none"> All serving areas will maintain permanent laminated signage listing the breakfast components (fruit/vegetable, grains, milk, entrée, etc.). Food Service Managers will verify signage is posted daily during morning opening procedures. Monthly self-monitoring will be conducted using our breakfast checklist, documenting signage placement and visibility. Any new cafeteria staff will be trained on the importance of component signage during onboarding. Annual food service training will include review of USDA signage requirements. These measures ensure continued compliance program-wide and prevent recurrence of this issue in future reviews. Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephraseDisable Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website Flagged by Kaitlyn Matthews 12/10/2025 07:43 AM Signage must be posted at or near the beginning of the serving line/serving area identifying the components of the reimbursable breakfast. Posting only a monthly menu does not meet this requirement. Explain in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Corrective Action must be applied SFA-wide. Indicate the date of implementation.				
Meal Components and Quantities - Review Period	Meal Components and Quantities - Review Period (On-Site Assessment Tool - Site) (409H)	GRAY CHARTER SCHOOL-3405	410	01/12/2026	CAP Accepted

GRAY CHARTER SCHOOL-08006665 - Corrective Action Report (Detail)

Note: The corrective action plan is required to correct any violation identified under the Administrative Review and must be applied to all schools in the SFA, as appropriate, to ensure that previously deficient practices and procedures are revised svst

Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Corrective Action History	Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:37 PM CAP Accepted				
	Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 10:51 AM On December 8,- 9, 2025, the SFA notified <i>Feeding Our Children</i> of the missing documentation and requested all required nutrition materials for the above products. Feeding Our Children has been formally notified that incomplete documentation will result in the temporary removal of affected menu items. They must maintain updated records for all products provided to the SFA. On December 12, 2025, all food service staff involved in menu planning and record keeping will complete refresher training on documentation requirements, including CN labels, recipes, and crediting statements. Staff will be retrained annually and as needed.Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website×				
	Flagged by Kaitlyn Matthews 12/10/2025 07:50 AM At lunch, portion sizes planned for each component must meet both daily and weekly minimum requirements for each appropriate grade group. When planning menus, refer to the Lunch Meal Pattern Charts, available on the Department of Agriculture's Form web site for specific component and minimum quantity requirements. Failure to fix identified issues may also lead to fiscal action/repeat violations in subsequent reviews as these are Performance Standard 2 (PS2) violations. Corrective Action Finding: Insufficient nutrition documentation (recipes, nutrition labels, product formulation statements, child nutrition labels) for the review week for taco beef meat sauce, whole wheat pasta, turkey ham and cheese sandwich, and brown rice. Unable to determine meal quantities. Explain in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Corrective Action must be applied SFA-wide. Indicate the date of implementation.				
Food Safety, Storage and Buy American	Food Safety, Storage and Buy American (On-Site Assessment Tool - Site) (1404H)	GRAY CHARTER SCHOOL-3405	1408	01/12/2026	CAP Accepted

GRAY CHARTER SCHOOL-08006665 - Corrective Action Report (Detail)

Note: The corrective action plan is required to correct any violation identified under the Administrative Review and must be applied to all schools in the SFA, as appropriate, to ensure that previously deficient practices and procedures are revised svst

Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Corrective Action History	Corrective Action Plan: Accepted by Kaitlyn Matthews 12/11/2025 01:33 PM				
	CAP Accepted				
	Corrective Action Plan: Submitted by Martha Sanders 12/10/2025 09:00 AM				
	<p>The temperature logs were current and up to date at the time of the review; however, they were being maintained in the Food Service Manager's office rather than located near the corresponding appliances. Logs were available upon request, but we recognize that they were not positioned in the immediate area of use.</p> <p>Corrective Action Moving Forward:</p> <p>Effective immediately, all temperature logs have been relocated and posted directly near each appliance (refrigerators, freezers, milk coolers, etc.) so staff can document temperatures at the point of monitoring. The Food Service Manager will complete a daily verification to ensure logs are being completed on-site. Additionally, a monthly internal review checklist has been implemented to ensure that logs remain posted near equipment and are updated daily.</p> <p>These measures have been applied school-wide to ensure ongoing compliance and prevent recurrence of this issue.</p> <p>Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website×Enable GingerCannot connect to Ginger Check your internet connection or reload the browserDisable Ginger?How to use GingerRephraseRephrase with Ginger (Ctrl+Alt+E)Edit in GingerGinger is checking your text for mistakes...Disable Ginger in this text fieldDisable Ginger on this website×</p>				
Flagged by Kaitlyn Matthews 12/10/2025 07:43 AM					
SFA did not have temperature logs on the day of review. Temperature logs must be completed, maintained and filed for each school service site.					
Explain in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Corrective Action must be applied SFA-wide. Indicate the date of implementation.					

Report Selections

Flagged, CAP Submitted, CAP Rejected, CAP Accepted, CAP Removed, Problem resolved, Re-Flagged