

Name and Address of Center:	Child Care Food Program SITE REVIEW FORM	Name of Sponsoring Organization:
Required Visit: (circle one) 1 2 3 F/U	(For Use by Sponsors of Affiliated and Unaffiliated Centers)	Reviewer's Name:

Refer to Instructions Before Completing the Review						
DCF License #/Religious Accreditation Info:	Exp. Date	Capacity	Enrollment	Date of Review	Arrival Time	Departure Time
Meals Approved to Claim: B MS L AS S ES	Meal Observed: B MS L AS S ES <input type="checkbox"/> Non-Meal Review (U's only)			Date of Last Site Review: _____ Date of Last F/U Review: _____ CAP Required Yes__ No__ Failed 5-Day Test Yes__ No__		

RECORD KEEPING/ELIGIBILITY REQUIREMENTS	YES	NO	N/A	COMMENTS
1. The center has a current license and operates within its licensed capacity, age limits, and staff/child ratios.				
2. The center has a current license/permit/certificate, which allows for operation of food service.				Date of last inspection: _____
3. The center has an up-to-date enrollment roster for this fiscal year.				
4. Copies of completed Free and Reduced-Price applications are on file at the center for every child.				
5. Copies of current and complete Enrollment Forms and CCFP Child Participation Forms are on file at the center for every child.				
6. Copies of complete and accurate Infant Feeding Forms are on file at the center for each child under the age of 12 months, if applicable.				
7. If for-profit, the center has the required number of low-income children enrolled to be eligible for the CCFP.				
8. The center is taking daily attendance on an approved form and copies of attendance records are accurately maintained at the center for all enrolled children.				
9. The center retains program records for the current fiscal year plus the prior three years (or number of years on program if less than three years).				
10. If the center receives catered meal service, a current catering contract is on file that meets DOH policies.				
11. The center followed proper procurement procedures (formal or informal) to secure a catered meal service contract.				
12. If the initial meal service contract totals \$50,000 or more, the center submitted required documents to the sponsor for DOH written approval before signing contract.				

PHYSICAL ENVIRONMENT/FOOD AND NUTRITION	YES	NO	N/A	COMMENTS
13. Employees, volunteers, and/or substitutes handling food do not show signs of communicable disease.				
14. Employees, volunteers, substitutes and children wash their hands properly, frequently, and at appropriate times.				
15. Food is obtained from approved sources that meet federal and state health standards.				
16. Refrigeration units are maintained at 41° F or below and freezers are maintained at 0° F or below.				
17. Cleaning supplies are stored separately from food.				
18. There is no evidence of rodent or insect infestation.				
19. Potentially hazardous foods are maintained, and (if catered), delivered at the proper temperatures.				
20. Prepared food is stored in clean, covered containers that are clearly labeled and marked with date of preparation.				
21. Proper procedures are followed for washing, rinsing, sanitizing utensils, food preparation equipment, and food contact surfaces.				

When observing a meal, answer all questions in the following section. If this is a non-meal review (Sponsors of Unaffiliated Centers only), answer questions marked with an asterisk (*) and mark all others "N/A".

MEAL OBSERVATION			YES	NO	N/A	COMMENTS		
22. Posted Menu:			Observed Meal: <input type="checkbox"/> Same as posted menu					
23. The observed meal was served at the proper time.								
24. The observed meal corresponds to the posted menu.								
25. The observed meal contains all required components, served in the required quantities. If no, list any missing and/or inadequate components:								
26. If catered, the observed meal meets all requirements of the Catering Contract, including delivery, receipt and service. (Refer to Catering Contract Checklist).								
27. If using commercially processed/main dish combination foods, the center is following regulatory guidelines.*								
28. Ready-to-eat cereal products served contain no more than 10 grams of sugar, per serving.*								
29. The center is following CCFP policy pertaining to sweet grain/bread products on the posted menu.*								
30. Juice is served no more than once a day.*								
31. Fresh, frozen, or canned fruits and/or vegetables are served at least twice a week at breakfast and twice a week at snack.*								
32. Low-fat (1%) and/or fat-free (skim) milk is being served to children age 2 and older.*								
33. The observed meal contains a variety of colors, textures, etc.								
34. The center follows regulatory requirements for feeding infants.*								
35. If applicable, parent notes and/or medical statements are maintained on file authorizing menu substitutions.*								
36. An accurate meal count is taken at the point of service and recorded within one hour of meal service.*								
37. If required, the center records meal counts by name.*								
38. If taking meal counts by name, or by individual classrooms, the site consolidates them on the Monthly Meal Count Record form on a daily basis.*								
TRAINING AND MONITORING			YES	NO	N/A	COMMENTS		
39. Program staff has attended required sponsor training.								
40. Issues of non-compliance noted on previous reviews have been completely and permanently corrected.								
CIVIL RIGHTS			YES	NO	N/A	COMMENTS		
41. The organization allows equal access to its site and provides meals regardless of race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.								
42. The "And Justice for All" poster is posted in a conspicuous place.								
43. The WIC flyer and Building for the Future letter are posted in a conspicuous place or distributed to parents.								
44. Record meal count by child's racial/ethnic categories below:								
Ethnicity (Combined ethnicity total should equal the observed meal count)			Race (Children can be counted in more than one race category; combined race total can be more than combined ethnicity total but cannot be less)					
HISPANIC OR LATINO	NOT HISPANIC OR LATINO	ETHNICITY TOTAL =	AMERICAN INDIAN or ALASKAN NATIVE	WHITE	BLACK or AFRICAN AMERICAN	ASIAN	NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER	RACE TOTAL =
45. If any civil rights problems are identified in questions #41-44 above, please provide an explanation in the Review Summary. <input type="checkbox"/> N/A								

5-DAY TEST

46. Meal count on day of review _____ Do not complete for a non-meal review (U's only)

Record meal counts for the same meal type observed on the day of the visit for each of the previous 5 consecutive meal service days. Use the 5 previous weekend day meal counts for weekend reviews.

$$\boxed{} + \boxed{} + \boxed{} + \boxed{} + \boxed{} = \boxed{} \text{ Meal Count Total} \text{ Divided by } 5 = \boxed{} \text{ Average} \text{ X } .85 = \boxed{}$$

Dates: _____

47. Is the number of meals served on the day of the review equal to or greater than 85% of the average? Yes _____ No _____
If "Yes", the center "passed" the 5-Day test. If "No", obtain an explanation.

48. If #47 was answered "No," was the explanation provided adequate? Yes _____ (Center "passed" 5-Day Test)
No _____ (Center "failed" 5-Day Test; CAP and follow-up are required)

5-DAY RECONCILIATION

49.

Date	Enrollment Total	Attendance Total	Total Meal Counts					
			Breakfast	Morning Snack	Lunch	Afternoon Snack	Supper	Evening Snack

50. Do any meal counts for the five consecutive days reviewed exceed the center's licensed capacity or ratio limits? Yes _____ No _____
If yes, is the center approved to provide the same meal type(s) during different shifts? Yes _____ No _____

51. Do any meal counts for the five consecutive days reviewed exceed the documented enrollment or attendance for those days? Yes _____ No _____

Note: If meal counts, enrollment records and attendance records cannot be reconciled, a meal disallowance may be necessary.

REVIEW AND SUMMARY	YES	NO	N/A	COMMENTS
52. Is a disallowance required?				
53. Is a Corrective Action Plan (CAP) required?				
54. Is a Follow-Up review required?				
55. Is a Warning Letter being issued? (Sponsors of Unaffiliated Centers only)				

<u>ITEM #</u>	<u>REVIEW SUMMARY</u>

A corrective action plan (CAP) addressing the issues of noncompliance identified above must be received by the sponsor by close of business on _____. **The CAP must describe those actions being taken to correct each issue of noncompliance and the date by which each issue of noncompliance will be corrected.**

TRAINING MATERIALS PROVIDED: _____

Center Representative: _____

Date _____

Sponsor Representative: _____

Date _____

Sponsor's Second Party Check: _____

Date _____