

At-Risk Afterschool Meals Monitor Review
Kentucky Department of Education
Child and Adult Care Food Program

Sponsoring organizations of multiple affiliated and/or unaffiliated sites must conduct monitor reviews of each site. Monitoring provides an opportunity to ensure compliance with CACFP regulations and also allows the sponsor to provide technical assistance when needed.

Frequency and Type of Required Reviews

Sponsors must adhere to the following review schedule:

- Review each facility three times per year.
- At least two of the reviews must be unannounced.
- At least one unannounced review must include observation of a meal service.
- At least one review must be during each new facility's first four weeks of operations.
- No more than 6 months may elapse between reviews.
- If during a facility review, a sponsor finds one or more serious deficiencies, that facility's next review must be unannounced [7 CFR 226.16(d)(4)(v)].

Sponsors must ensure that the timing of unannounced reviews is varied in a way that would ensure they are unpredictable to the facility (CACFP 16-2011: Child Nutrition Reauthorization 2010: Varied Timing of Unannounced Reviews in the Child and Adult Care Food Program, April 7, 2011). For example, the sponsor should not make unannounced reviews at the same time and day of week for each review so that the facility can predict when the review will take place.

Sponsors that operate both SFSP and CACFP At-Risk Meals are not required to monitor their sites following the SFSP requirements during the summer and then monitor those same sites again following the CACFP requirements during the school year. Instead, such sponsors may follow the CACFP monitoring schedule year-round. If sponsors choose to follow the CACFP monitoring schedule year-round, one of the three annual reviews must occur during the summer, review for SFSP requirements, include the review of a meal service, and be unannounced; two reviews must occur during the school year, review for CACFP requirements, at least one must include the review of a meal service, and at least one must be unannounced (CACFP 12-2013: Transitioning from the Summer Food Service Program to Child and Adult Care Food Program At-Risk Afterschool Meals, May 31, 2013).

For schools (SFA) that operate NSLP, you may streamline and perform at-risk monitoring in conjunction with NSLP monitoring for the same site. This is completed using your NSLP monitoring tool and at-risk tool together. Questions on the at-risk form denoted with **are marked as such to avoid answering duplicate questions when completing monitoring in conjunction with NSLP.

If a sponsor conducts two unannounced reviews of a facility in one year and finds no serious deficiencies, the sponsor may choose not to do a third review of that facility that year. However, the first review in the next review year must occur no more than nine months after the previous review 7 CFR 226.16(d).

Reviews must:

- Determine whether a facility has corrected problems noted on prior reviews (if any)
- Include a reconciliation of the facility's meal counts with attendance records for a five day period
- Assess the facility's compliance with Program requirements related to:
 - Program meal patterns
 - Licensing or approval
 - Attendance at annual training
 - Meal counts
 - Menu and meal records
 - Health and Safety

At-Risk Afterschool Meals Monitor Review Form

FOR SFAs streamlining monitoring with NSLP, you do not have to answer ** questions and a completed NSLP on-site review should be attached.

Sponsor/Site Information:					
1. Name and Address of Sponsor					
2. Site Name					
3. Site Address					
4. Site Program Contact/Title					
Site Phone Number					
5. At-Risk Program Operating Hours	Opens:		Closes:		
6. Reviewer** (if same as NSLP reviewer)		Review Date		<input type="checkbox"/> Announced <input type="checkbox"/> Unannounced <input type="checkbox"/> Follow-up	
7. Arrival Time		Departure Time			
8. License Information			License ID		
<input type="checkbox"/> Exempt from State or Local Licensure (Public School, Emergency Shelter)			Capacity		
			Expiration Date		
9. Did site staff attend annual CACFP training?		<input type="checkbox"/> Yes <input type="checkbox"/> No		Date of Training:	
10. Were appropriate enrichment activities offered on day of review?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
11. List enrichment activities offered on day of review:					

Meal Observation					
12. Meal Observed: <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Supper <input type="checkbox"/> Snack 1 <input type="checkbox"/> Snack 2 <input type="checkbox"/> Meal not observed					
13. Is the meal served at the approved time as indicated on the site application?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Observed Meal Menu					
Milk: <input type="checkbox"/> Fat-free <input type="checkbox"/> Fat-free flavored <input type="checkbox"/> 1% Low fat <input type="checkbox"/> Whole	M/MA: Serving Size:	Veg: Serving Size:	Fruit/Veg: Serving Size:	Grain: Serving Size:	
14. Does the meal meet the meal pattern(s) requirements?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
15. Do the minimum portions served meet the meal requirements for each			<input type="checkbox"/> Yes <input type="checkbox"/> No		
16. If Offer vs. Serve is used, is it used correctly?			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
17. Is an adequate supply of all food components available?			<input type="checkbox"/> Yes <input type="checkbox"/> No		
18. Are medical statements on file for participants with special dietary			<input type="checkbox"/> Yes <input type="checkbox"/> No		
19. Explain site's system for tracking attendance and meal counts:					

20. Are the daily meal count and attendance records correct, complete and up-to-date?		If no, _____			
21. Does the site have completed delivery tickets on file?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
22. Do menus meet all requirements of CACFP?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
If no, explain: 					
23. For the five previous serving days, record the attendance and meal counts for each meal served					
Date	Total Attendance	Breakfast Total	Lunch/Supper Total	Snack 1 Total	Snack 2 Total
1.					
2.					
3.					
4.					
5.					
5-Day Average					
<i>Note: To determine 5-day average, total each column, divide by 5 and round up if needed.</i>					
Today's Count					
24. Do the meal counts for the prior five days for all meals claimed appear reasonable when compared to each approved meal service's averages? If no, explain: _____					<input type="checkbox"/> Yes <input type="checkbox"/> No

Has Civil Rights Data been collected on this site during the past year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If "NO", complete the Data Collection Chart Below for questions 25A and 25B:			
*Line one is percentage data collected from the Ethnic/Racial Profile of the Area the Center is located in can be completed using the link below.			
*Line two is the actual number collected from the participants in the Center.			
http://education.ky.gov/federal/SCN/Documents/Public%20School_Ethnicity%20Report_%20SY%202012-2013.pdf			
25A.	Ethnicity	25B.	Race
	Hispanic or Latino	Not Hispanic or Not Latino	Black or African American
			White
			Native Hawaiian or Pacific Islander
			American Indian or Alaskan Native
			Asian
1			
2			

26. Answer the following questions related to Safety and Sanitation and Civil Rights:**	
a. Are adequate staff available to prepare and serve meals?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Is dining space adequate for the number of participants?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Is the site free of health/safety hazards?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are the food prep and dining areas cleaned and sanitized?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Is food stored/held at required temperatures?	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Is storage adequate for dry food items, refrigerated and frozen foods?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
g. Are potentially harmful items such as knives, cleaning supplies, toxic & hazardous materials stored away from food and participants?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
h. Is there evidence of rodent or insect infestation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
i. Date of most recent health inspection	
j. Were any health inspection violations noted? If yes, were they corrected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
k. Is the food permit posted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Food Permit Expiration Date:
l. Are thermometers available in all refrigerators and freezers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
m. Are refrigerators and freezers clean and maintained at required temperatures? <i>Note: Refrigerator temperatures must be maintained between 33 and 38 degrees. Freezer temperatures must be maintained between 0 and -10 degrees. If temperatures are not within acceptable ranges, give reason and plan for correction.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Temps: _____ _____ _____
n. Are sanitary procedures followed in all aspects of food service?	<input type="checkbox"/> Yes <input type="checkbox"/> No
o. Does the site accept all children regardless of race, color, age, sex, disability, and national origin?	<input type="checkbox"/> Yes <input type="checkbox"/> No
p. Is the "...And Justice for All" poster visibly displayed to the general public?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous Review and Findings	
Were there findings from the previous review? If yes, list: _____ _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were the findings from the previous review corrected? If no, explain: _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Provide a summary of today's monitor review strengths and findings. If a follow-up review is necessary, it must be documented on a separate monitor review form. Serious problems indicating imminent health and safety issues must have a follow-up immediately—within 24 hours.

Strengths:	
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Review Item #	Corrective Action (CA) Needed	CA Due Date	Follow-up Visit Due Date

Signature of Reviewer	Date

Signature of Site Director/Supervisor	Date

Signature of Sponsoring Organization Representative	Date