

Maryland State Department of Education
Child and Adult Care Food Program (CACFP)

SELF SITE REVIEW for SPONSORING ORGANIZATIONS

A sponsoring organization is an agency that operates more than one site in the CACFP.

CCC = Child Care Center, **ADC** = Adult Day Care, **LEA** = Local Educational Agency

Instructions:

- **ADCs and CCCs:** Review sites three times each year. Two reviews must be unannounced, and one must include meal observation. At least one review must occur during each new site's first four weeks of operations, and not more than six months should elapse between reviews.
- **LEAs operating CCCs or At-Risk Afterschool Meals:** Review sites two times each year. Both visits must be unannounced, and one must include meal observation. At least one review must occur during each new site's first four weeks of operations. The second review must be within six months of the first review.

I. SITE INFORMATION		Today's date:	
Type of Visit:	<input type="checkbox"/> Announced	<input type="checkbox"/> Unannounced	
Site Name :		Site Address:	
Today's Attendance:		Food Service:	<input type="checkbox"/> Self -Preparation <input type="checkbox"/> Vended
Current Month's Enrollment:		Current Month's Avg. Daily Attendance: (total attendance ÷ operating days)	

II. MEAL PATTERN REQUIREMENTS AND MENU: check (✓) the meal(s) observed and write in the menu.			
<input type="checkbox"/>	Breakfast	Menu	Infant Menu, if applicable
	Fluid milk (or breast milk/formula)		
	Juice/Fruit/Vegetable		
	Bread/Bread Alternate (2 for ADC)		
<input type="checkbox"/>	<input type="checkbox"/> Lunch/ <input type="checkbox"/> Supper/ <input type="checkbox"/> At-Risk Afterschool Supper	Menu	Infant Menu, if applicable
	Fluid milk (or breast milk/formula)		
	Fruit/Vegetable (at least 2)		
	Bread/Bread Alternate (2 for ADC)		
	Meat/Meat Alternate		
<input type="checkbox"/>	<input type="checkbox"/> Snack (2 of 4 components) <input type="checkbox"/> At-Risk Afterschool Snack	Menu	Infant Menu, if applicable
	Fluid milk (or breast milk/formula)		
	Fruit and/or Vegetable		
	Bread/Bread Alternate		
	Meat/Meat Alternate		
			YES NO
	A. Does the observed meal meet CACFP meal pattern requirements for meal type and age group?		
	B. Is there a posted dated menu for all meal types with substitutions noted?		
	C. Are proper food safety and handling procedures followed in the preparation and service of meals?		
	D. Are medical statements on file for participants with special needs?		
	E. Is infant formula/breastmilk selection information on file for enrolled infants?	N/A:	

III. LICENSING	YES	NO
A. Does the site have a current license or for at-risk afterschool meals, health and safety permits?		
B. Is the site complying with the license or permits?		

IV. ANNUAL STAFF TRAINING	YES	NO
A. Does the site have documentation of annual staff training that indicates instruction was provided on meal patterns, meal counts, claims submission and review procedures, and reimbursement system?		

B. Does the documentation indicate that key staff attended?		
V. POINT OF SERVICE/MEAL COUNTS	YES	NO
A. Are daily point of service meal counts:		
1. recorded only for reimbursable meals/snacks?		
2. distinct from attendance records?		
3. recorded only for those actively participating in the meal/snack service?		
B. Is a participant's reimbursement category identified using a code <u>other than</u> Free, Reduced, or Paid or F, R, P? <u>Note</u> : Overt identification is prohibited. N/A for At-Risk Afterschool Meals		

VI. PROGRAM RECORDS	YES	NO
A. Is there a <u>current and correct</u> Meal Benefit Application or collateral contact documentation on file for each participant claimed in the free or reduced-price meal category? N/A for At-Risk Afterschool Meals		
B. Are the following records on file:		
1. current enrollment information for each participant? N/A for At-Risk Afterschool Meals		
2. eligibility information for withdrawn participants? N/A for At-Risk Afterschool Meals		
3. point of service/meal counts for each meal type served to program and nonprogram staff or ineligible participants?		
4. daily attendance records/sign-in sheets?		
5. dated menus?		
6. invoices, receipts, or delivery slips for purchased food and non-food supplies on file?		
7. documentation of previously conducted site reviews?		

VII. CIVIL RIGHTS	YES	NO
A. Is the "And Justice for All" nondiscrimination poster displayed in a prominent location?		

VIII. RECONCILIATION OF MEAL COUNTS									
Complete the chart below for one meal type: (circle) breakfast, lunch, supper, snack for five (5) consecutive days during the current or prior claiming period. <u>Compare</u> meal counts to enrollment and attendance records.									
Date									
Meal Count									
Enrollment									
Attendance									
Based on the comparison, do the meal counts reflect the site's attendance and enrollment? If No, investigate difference to determine whether an overclaim has occurred and if a claim revision is necessary.					<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> <tr> <td></td> <td></td> </tr> </table>	YES	NO		
YES	NO								

VIII. COMMENTS/RECOMMENDATIONS	
Items site does well:	
Items that need improvement:	
Resources provided:	

Contact a CACFP Specialist at 410-767-0214 if you have questions or concerns as a result of the review.

Signature of Site Reviewer

Date