

At-Risk Afterschool Programs Monitoring Visit Form

Site Name:		Da	ate of Revie	:W:			
Unannounce	ed Review: 🗆 Y 🔻 🗎 N	Follow-	up Review:	□ Y □	N		
	Licensing Re	equiremen	ts				
Is the licensing or alternate ap		-					
☐ DHS License expiration:	☐ Child Care Sta	ndards Date:	□ N/A	A (NSLP-partici	pating	scho	ol)
·			ı				
	Observe	ed Meal					
Meal Service Type: ☐ Offer	vs. Serve Pre-Plated	Meal type:	Snack	☐ Supper			
Meal Service Start Time:		Meal Service	End Time:				
Meal Component	Food Item(s) \$	Served		Posted Me	nu		
Milk							
Meat or Meat Alternate							
Vegetable							
Fruit or Vegetable							
Grains							
Extra(s)							
CACFP Meal Requir	rements: Meals must compliance.	be disallov	ved whe	n not in	Yes	No	N/A
Does the time of the meal/sna	ack correspond with the appro	oved meal time	on the CA0	CFP Site			
Application?					<u> </u>		
Is the menu posted in view of	participants?						
Are menu substitutions noted	?						
Are meal delivery receipts sig	ned and dated?						
Do the food items served mat	tch what is listed on the poste	d menu?					
Did participants wash their ha	ands prior to the meal service?	?					
Is enough food prepared, ava component?	ailable, and offered to meet the	e required serv	ing size for	each			
Are all components served at	the same time?						
Are meal counts recorded at t	the point of service?						
Approved non-dairy milk subs	stitutions are served to childre	n needing the	substitute.				
Does the observed meal mee	t the meal pattern? If no, the	meal cannot be	e claimed.				
Flavored milk is served to chil	ldren ages 6 and older ONLY	. If no, then me	eals for age	s 5 and under			
must be disallowed.							
If meals are prepared on-site,		-					
Yogurt served has 23 g of sug							
Cereal served has 6 g of suga			be disallowe	d.			
Is at least one of the grains se							
Is juice served 100% juice an					ļ		
CN labels or product formulat	ion statements are on tile for	toods requiring	i this dociim	entation	1 '	1 '	

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Nutrition Facts labels, product labels, and/or ingredients lists are on file for yogurts, cereals, and		
whole grain-rich foods.		
Is appropriate documentation on file for participants that require menu modifications?		
If offer vs. serve is used, is it being implemented correctly (i.e. lunch/supper only, child must take at		
least 3 of the 5 components offered). If no, then meals must be disallowed.		

Meal Counts	Yes	No	N/A
Meal counts are taken at the time the meal was served.			
Meal counts are based on attendance.			

			ivil Right	s Data C	ollection				
		hnic egories				Racial tegorie	S		
	Hispani c/ Latino	Non- Hispanic / Non- Latino	White/ Caucasian	Black/ African American	American Indian/ Alaskan Native	Asian	Native Hawaiian / Other Pacific Islander	Some Other Race	Two or More Races
Racial/Ethnic data									
from # of									
Participants at Meal Observed									
Current Enrollment Ethnic/Racial data									
from <u>Approved Mgt</u> <u>Plan</u>									

Civil Rights	Yes	No	N/A
The 'And Justice for All' poster is on display.			
Is there any separation by race, color, national origin, sex, or disability?			
Are staff able to explain the process for making a civil rights complaint?			
If a civil rights complaint has been made, does the facility have a civil rights complaint log?			
Does the facility have a copy of the Procedure for Complaints of Discrimination on file?			
Is the nondiscrimination statement on all printed materials available to the public that mention			
USDA and/or the CACFP, including websites?			
Is the institution capable of reasonably accommodating participants with disabilities? If not, explain why.			
Sapan My.			
Based on the Civil Rights Data Collection conducted during the meal service, does the enrollment			
reflect the population statistics for the area?			

Training	Yes	No	N/A
Staff has attended CACFP training within the past year.			
Staff has attended Civil Rights training within the past year.			

5-Day Meal Count Reconciliation: Choose 5 consecutive operating days from the current or previous month.

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Date	Meal/Snack Counts	Attendar	nce Tot	tal	
The number of meals served during the meal observation is reflective of the meal counts for the five preceding serving days. If no, document the reason: The meal counts for one or more of the days exceeds the number of children in attendance during one or more of the five preceding serving days. afety, Sanitation, and Food Storage Is the floor, refrigerator, stove, cabinets, and working areas sanitary and in good condition? If no, explain. Is the refrigerator at 41°F or below (as verified by a thermometer)? Record Temperature: Is the freezer at 0°F or below (as verified by a thermometer)? Record Temperature: Are stored dry foods, refrigerated foods, and frozen foods labeled and dated? Review the most recent health inspection report. If problems were noted, have they been corrected? If a county requirement, is there a Food Protection Manager available? If a county requirement, do staff handling food have food handler certificates? Does staff follow best practices of logging temperatures prior to serving food? Is there an imminent threat to health or safety? (If yes, notify Sponsor and State Agency					
The mark and for all a control during the					
		lear counts for		⊔ Y	\square N
and the processing conting anyon in the,					
The meal counts for one or more of the	e days exceeds the number of children i	n	□ Y [_ N [□ N/A
	•				
			Yes	No	N/A
	s, and working areas sanitary and in go	od condition? If no,			
explain.					
•	<u> </u>	•			
-		ature:			
·		thoy boon			
corrected?	ion report. If problems were noted, have	; tiley been			
	d Protection Manager available?				
·	<u> </u>				
Does staff follow best practices of logg	ing temperatures prior to serving food?				
Is there an imminent threat to health or	r safety? (If yes, notify Sponsor and Sta	te Agency			
immediately.)					
					N1/0
	• ,		Yes	No	N/A
l echnical assistance was provided for:	:				

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Corrective Action (attach additional sheets if	fnecessary)	Yes	No	N/A
Prior review findings were corrected. If no, list the	e follow-up that is required.			
Is a follow-up review required to ensure findings a	are corrected?			
Corrective action is required. If yes, list as follows	5:			
Monitor's Full Printed Name	Signature			Date

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In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410;

fax: (833) 256-1665; or (202) 690-7442

email: program.intake@usda.gov.

This institution is an equal opportunity provider.