



CACFP Site Pre-operational Visit Form

For Sponsoring Organizations of Adult Day Care Centers

A CACFP pre-operational visit must be completed by the agency's monitor at the site prior to the start of CACFP operation when it is a new site, is at a new location, or has not operated for more than one month.

Site Name _____ Date _____

Address _____ City _____

Start Date-CACFP Operation: _____ Check One: New Site New Location (site moved) No CACFP Operation for > 1 month

Regulatory Information (From Adult Day Care License or Certification):

Capacity _____	Hours of Operation _____
Functionally impaired adults served? Yes No	Months of Operation _____
Number of enrolled eligible adults _____	Expiration Date _____

Meal Services (Check Meal Services requested)

Meal Type	Time of Service	Estimated Average Daily Participation
<input type="checkbox"/> Breakfast	_____	_____
<input type="checkbox"/> AM Snack	_____	_____
<input type="checkbox"/> Lunch	_____	_____
<input type="checkbox"/> PM Snack	_____	_____
<input type="checkbox"/> Supper	_____	_____
<input type="checkbox"/> Evening Snack	_____	_____

Location of Meal Preparation (Check one):

- | | |
|---|---|
| <input type="checkbox"/> Self preparation (on-site)
<input type="checkbox"/> Central kitchen (At another site's kitchen) | <i>Through Vendor Agreements:</i>
<input type="checkbox"/> School District
<input type="checkbox"/> Food Service Management Company
<input type="checkbox"/> Health Care Facility
<input type="checkbox"/> Other (<i>specify</i>) _____ |
|---|---|

Answer all questions for this specific site on the day of the pre-operational visit. A "No" response may indicate a problem that requires attention prior to participating on the CACFP.

1. Compliance with Sanitation and Safety Requirements

The site is equipped for and the site staff is trained on the following sanitation and safety requirements:

	Yes	No	N/A	If N/A, explain:
a. Kitchen storage and counters are clean				
b. Refrigerator clean and maintained at temp of 40°F or below				
c. Freezer clean, defrosted and maintained at temp of 0°F or below				
d. Dishwashing and sanitizing procedures will be followed				
e. Foods will be maintained at proper temps (≤40°F or ≥135°F)				
f. Garbage and waste will be covered and removed daily				
g. Food handling procedures will meet all sanitation requirements				
h. Food will be properly stored in refrigeration/freezer units and dry areas. All open reusable food will be labeled, dated, & properly stored				
i. Cleaning supplies and other toxic materials will be safely stored out of the reach and away from food				
j. Food will be stored at least 6" off floor (8" if in basement)				

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2. CACFP Records and Requirements

Is there a plan for completing and maintaining the following records and requirements at the start of the site's CACFP operation?

	Yes	No	N/A	Comments
a. Daily, Dated Menus for all meals/snacks				
b. Daily, Dated Production Records for all meals/snacks (self-prep or central kitchen sites)				
c. Vended or meals delivered from another location: daily records of all food amounts delivered and/or production records				
d. Time of Service Meal Count Records for each meal type claimed				
e. Meal service method and compliance with the meal pattern				
f. Daily Attendance Records				
g. Invoices/receipts for purchases for food service				
h. Adult participant files include individual plans of care				
i. Household Size-Income Statements				
j. USDA Nondiscrimination statement included where USDA/CACFP mentioned				

3. Has all site staff with CACFP responsibilities been adequately trained on Program requirements?

Prior to operation, site staff must at minimum be trained on points listed under #2 CACFP Records and Requirements and all sanitation and safety requirements listed in #1 Compliance with Safety and Sanitation Requirements, as pertinent to their responsibilities.

Yes Give date _____ **No** If no, when will the sponsor provide training?

4. List corrections, changes, or information needed prior to starting the CACFP:

Provide the date and method of follow-up for verifying that the corrections or changes listed above were made and/or the listed information was received:

Program materials left on site:

- "...And Justice For All" Poster
- _____
- _____

Signature of Monitor (Sponsoring Organization Representative)

Date

Signature of Site Staff Person (if present during this pre-operational visit)

Date

Please note if a site staff person is not present to sign this form.