

SFSP Site Monitoring Form for Vended Sites (check type)

First Week Visit
 Follow-up
 Review (to be completed prior to the end of the 4th week)
 Follow-up

Sponsor Name			Site Name/Location		
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Review Date	Arrival Time	Depart Time	Site Supervisor		
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Approved Site Type (circle one): open, restricted open, enrolled, camp, migrant, NYSP		Approved Dates of Operation Start	End
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Meals approved for (circle): Breakfast, Snack, Lunch, Supper		Approved Meal Service Times:		
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Meal Being Reviewed (circle): Breakfast, Snack, Lunch, Supper		Actual Meal Service Times (if different from above):		
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Day of visit	Breakfast	Lunch/Supper	Snack	Menu/Portion Size
# meals delivered				
# meals/milk from previous day				
Total # meals available				
# first meals served to children				
# second meals served to children				
# meals served to Program adults				
# meals served to Non-Program adults				
# meals disallowed				
Total # meals served				
# meals leftover				

Comments

YES	NO	N/A	EXPLAIN ANY "NO" ANSWERS BELOW
			1. Does the staffing pattern correspond to that listed on the approved site sheet?
			2. Has the site supervisor attended a training session?
			3. Does the site have sufficient food service supervision?
			4. Are meals counted/checked before signing the delivery receipt?
			5. Are accurate counts taken of meals served, at the point of service?
			6. If second meals are served, are they excessive?
			7. If served, are records of adult meals being kept?
			8. Do meals meet the approved menu?
			9. Do meals meet meal pattern requirements?
			10. Are meals checked for quality prior to service?
			11. Is there proper sanitation/ storage?

YES	NO	N/A	EXPLAIN ANY "NO" ANSWERS BELOW
			12. Is the site supervisor following procedures established to make meal order adjustments?
			13. Are meals served during the approved meal service times? If no, indicate actual time served above.
			14. Are meals served and consumed onsite? (It is left to the discretion of the sponsoring agency to allow fruits and vegetables to be taken off-site)
			15. Does the site have a place to serve children meals in case of inclement weather?
			16. Is each meal served as a unit?
			17. Is the meal delivery schedule followed?
			18. Are there provisions for storing or returning excess meals?
			19. Is there a nondiscrimination poster, provided by the sponsor, on display in a prominent place?
			20. Is there documentation of children's income eligibility, if applicable?
			21. Is the site operating in accordance with the approved site type?
			22. Are meals served to all attending children regardless of the child's race, color, national origin, sex, age, or disability?
			23. Do all children have equal access to services and facilities at the site regardless of the child's race, color, national origin, sex, age, or disability?
			24. Is informational material concerning the availability and nutritional benefits of the Program available in appropriate translations?

Corrective Action Plan

No Findings Findings – Corrective Action Required

Violations

- | | |
|--|--|
| <input type="checkbox"/> Meal pattern not met | <input type="checkbox"/> Not following meal order adjustment procedures |
| <input type="checkbox"/> Meals not served as a unit | <input type="checkbox"/> No thermometer in refrigerator |
| (For OVS sites, note if complete meals are not <u>offered</u>). | <input type="checkbox"/> Health or Safety of Children Compromised (site closure warranted) |
| <input type="checkbox"/> No point of service meal count | <input type="checkbox"/> Site staff not trained |
| <input type="checkbox"/> Records not maintained | <input type="checkbox"/> <i>Site Supervisor's Guide</i> not available |
| <input type="checkbox"/> Adult meals included in count of meals served to children | <input type="checkbox"/> Other |
| <input type="checkbox"/> Off-site meal consumption | |
| <input type="checkbox"/> Meals served outside of approved meal service time | |
| <input type="checkbox"/> And Justice for All Poster not displayed | |

Comments

I certify that the above information is correct:

 Monitor's signature Date

 Site supervisor's signature Date

Sponsor Use Only: Follow-up Required Update DPI contract