## Ohio Child and Adult Care Food Program Monitor Review Form

(Mandatory Form)

Monitoring Requirements: All multi-site sponsoring organizations must adequately train, supervise and review site/facility operations to ensure that CACFP requirements are met. New sites must have a review completed within the first 4 weeks of CACFP operation. Sites must be reviewed at least 3 times per CACFP fiscal year (October 1 thorough September 30). Reviews cannot be more than 6 months apart within a fiscal year and from one fiscal year to the next. At least 2 of the 3 reviews must be unannounced and at least one unannounced review must include a meal service observation. Sponsors may choose to use the Review Averaging Option by indicating so on the application management plan. Sponsors still have to conduct the same number of reviews (3 x number of sites) but some sites could receive 2, 3 or 4 reviews per year. No more than 9 months can elapse between reviews when only 2 are conducted and both must be unannounced and one must include a meal service observation.

If site is not approved and participating on the CACFP for the full fiscal year, use the following chart to determine the number of required reviews.

Number of Months Site is		Number of Required	Number of Required Monitoring
Open and Participating	Number of Required	Monitoring Reviews that must	Reviews to Include Meal Service
during CACFP Fiscal Year	Monitoring Reviews	be Unannounced	Observation
1 – 4	1	1	1
5 - 8	2	2	1
9 - 12	3	2	1

Sponsoring Org	ganization Na	me:								
Site/Facility Na	ame and Addı	ess:								
Name of Monit	tor:			Arı	ival Tim	e:				
Date of Last Re	eview			Dat	te of Rev	iew:				
Is Review Aver	raging option	is used: $\Box$ Ye	es 🗆 No				eview, nur Review, n		1 er: 1	2 2 3 4
Type of Review	v:		onducted wit				☐ F	ollow	-up revi	ew vestigation
Total Number	of Children In	Attendance:					for Child ( ation Date			
Is Attendance V ☐ Yes	Within Licens  No	e Capacity?				_	form havi	ng a	child car	re license
License Capaci	ty (if applical	ole):			alth Inspe					
	nild Care Cen ead Start	ter		Deve	e Inspect clopment At Risk		☐ Out		School F cy Shelte	Hour (Licensed)
		1	A. Meal Sei	rvice	for Chil	ldren				
Was A Meal Se	ervice Observ	ed? 🗖 Yes	□ No	If N	o, Explai	in:				
Circle Meal Obser	ved	Breakfast	AM Snack		Lunch		PM Snack		Supper	Eve Snack
Circle Type of Foo	od Preparation:	On-site	Central/Kitch	en	Vended/C	atered	List vendo	r:		
MEALS MEAL REQUIREMENTS		Food Iter Served/Obse		1-2	List	Amount/Por Served 6-12			Problems Observed Missing Components/Portions	
BREAKFAST	Milk				12		0.12	10		
	Vegetables, fro									
	Grains (oz. eq. rich or enriche cooked/dry cer	d bread,								
	Other Foods									

MEALS	MEAL REQUIREMENTS	Food Item Served/Observed		List An	nount/Porti Served	ion Size	Problems Observed (Missing Components/Portions)
			1-2	3-5	6-12	13-18	
LUNCH OR	Milk						
SUPPER	Meat / meat alternate						
	Vegetables						
	Fruits						
	Grains (oz. eq.) Whole grain rich or enriched bread, cooked/dry cereal, or pasta						
	Other Foods						
SNACK	Milk						
	Meat / meat alternate						
Select 2 of 4	Vegetables						
components	Fruits						
	Grains (oz. eq.) Whole grain rich or enriched bread, cooked/dry cereal, or pasta						

#### **B. Meal Counts**

D. Mean Counts								
		No. of Meals Served to Children						
Name of Classroom	Age Range	1st Meals	2 <sup>nd</sup> Meals					
	Totals							
	101415							

Yes	No	N/A	Meal Counts
			1. The observed meal met CACFP meal pattern requirements. If no, explain in other comments.
			2. Meal counts were recorded at the POINT OF SERVICE.
			3. Meal counts recorded by the center for the observed meal matches monitor's meal counts for each
			classroom.
			4. Meals are claimed only for children meeting the specific program type age limit participation
			requirements.
			5. Excluding this meal, all meal counts for previous meals served in month have been
			completed/recorded on meal count forms.

Complete chart below for any meals disallowed by monitor							
Name of Cl	assroom	Date(s)	Meal Type(s)	No. of Meals Disallowed			
0.1	+						
Other Comments							

# C. Meal Service for Infants

(Infant is defined as being under 1 year of age)

CIRCLE N/A AND SKI	P THIS PAGE IF	THERE ARE NO I	NFANTS UND	DER 1 YEAR OF A	GE AT THIS CE	NTER: N/A
Was An Infant Meal Se	rvice Observed?	☐ Yes ☐	No If No	o, explain:		
Circle Meal Observed	Breakfast	AM Snack	Lunch	PM Snack	Supper	Eve Snack
Meal/Age	Port	ion Size		Food	Served	
Breakfast 0-5 months	4-6 oz. Breastmilk Formula	or Iron Fortified Infant				
6-11 months	6-8 oz. Breastmilk Fortified Infant Fo and 0-4 Tbsp. Iron Fort Infant Cereal, meat poultry, whole egg, dry beans, or cooked dry peas or 0-2 ounces of chees 0-4 ounces (volume cottage cheese; or 0-4 ounces or ½ cuj yogurt; or a combir the above; And 0-2 tablespoor vegetable or fruit or combination of both	rmula  ified fish, cooked  se; or e) or of nation of				
<b>Lunch</b> 0-5 months	4-6 fluid ounces by Fortified Infant For					
6-11 months	6-8 oz. Breastmilk Fortified Infant Fo and 0-4 Tbsp. Iron Fort Infant Cereal, meat poultry, whole egg, dry beans, or cooked dry peas or 0-2 ounces of chees 0-4 ounces (volume cottage cheese; or 0-4 ounces or ½ cuj yogurt; or a combin the above; And 0-2 tablespoor vegetable or fruit or combination of both	rmula  ified fish, cooked  se; or e) or of nation of				
Snack 0-5 months	4-6 fluid ounces br	eastmilk or Iron				
	Fortified Infant Fo	rmula				
6-11 months	2-4 fluid ounces by Fortified Infant for And 0-1/2 slice bread; o 0-2 crackers; or 0-4 Tbsp. vegetabl combination of bo	rmula; or e or fruit or a				

Yes	No	N/A	Infant Meal Service and Menus
			1. Daily infant menus which reflect dates served, food items served and portion sizes are on file for
			infants whose meals are claimed for CACFP reimbursement.
			2. Infant menus meet CACFP meal pattern requirements. If no, explain in other comments.
			3. <i>Infant Meals – Parent Preference Letters</i> are on file for all infants enrolled at the center.
			4. Bottles and formula are properly labeled, stored and prepared in a sanitary manner in accordance with health and licensing regulations.

	5. Foods for infants are prepared in an age-appropriate manner to avoid choking. (pureed, ground, small slices, mashed)
	6. Commercial baby-jar foods are single product. (no combination meals such as chicken with noodles and desserts like Cherry Delight)
	7. When infants are developmentally ready to eat solid foods, meals claimed contain at least one center-provided required meal component.
	<ul> <li>8. Infant meals are claimed no matter who provides the formula (parent or center) if the infant is not developmentally ready for solid foods (center can claim meal if infant isn't ready to eat solid foods)</li> <li>9. Meal counts are recorded by individual name at the POINT OF SERVICE.</li> </ul>
Other Comments	

#### D. 5-DAY RECONCILIATION OF MEAL COUNTS FORM FOR CENTER-BASED PROGRAMS

Circle meal type observed or last meal/snack served prior to monitoring review: Breakfast AM Snack Lunch PM Snack Supper Evening Snack

#### **INSTRUCTIONS:**

- Leave shaded areas blank
- To calculate 5-day meal count average (if more than one classroom) add day #1 #5 meal count total and divide by 5. Insert answer in block B.

LIST TODA	Y'S DATE F	LUS THE FI	VE MOST RI	ECENT DAYS	CLAIMED	FOR MEAL T	YPE CIRCL	ED ABOVE.				
	Today's Da	te:	Date:		Date:	Date:		Date:			Date:	
Classroom	Today's	Today's	Day # 1	Attendance	Day # 2	Attendance	Day # 3	Attendance	Day # 4	Attendance	Day # 5	Attendance
	Meal Count	Attendance	Meal									
1	Count		Count		Count		Count		Count		Count	
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
A.Today's Meal Count Total		Attendance Total		Attendance Total		Attendance Total		Attendance Total		Attendance Total		Attendance Total
B. 5-Day Meal Count Average		Divide = By	Day # 1 Total	+	Day # 2 Total	+	Day # 3 Total	+	Day # 4 Total	+	Day # 5 Total	+

Yes	No	N/A	5 – Day Reconciliation of Meal Counts
			1. Is today's meal count total (A on chart) different than the 5-Day meal count average (B on chart)?
			If yes, explain any significant discrepancy.
			2. Is today's total attendance reasonable in comparison to the other 5 days total attendance?
			3. Are any meal counts over claimed when compared to daily attendance? If so, circle and make any needed adjustments/disallowances to classroom meal
			count records.
Other			
Comm	nents		

# E. Meal Service and Menus

Yes	No	N/A	General Record Keeping and Meal Service
			1. Current menus are posted in at least one place at the center.
			2. Dated menus are kept on file for all approved meal types.
			3. Menu substitutions are recorded on the menus.
			4. The food served was the same as listed on the planned menu.
			5. Written menus are in compliance with the CACFP meal pattern requirements.
			6. Portion sizes were in compliance for the age groups served.
			7. All CACFP meal components are available to all participants at the beginning of the meal. If no, explain:
			8. Adult staff sits with children to model behavior, try new foods and talk together.
			9. Adults seated with children eat the same creditable foods as the children.
			10. A medical statement is on file to verify any medical condition of a child requiring variation from the CACFP meal pattern.
			11. A valid food service license is posted.
Fan	nily-st	tyle Mo	eal Service: Yes or No If no, check N/A for questions # 13 - # 15
			13. Each child is offered all meal components.
			14. Enough food is available/served at each table to provide minimum portions of all meal components for the children at the table.
			15. All children are encouraged to take the minimum serving size of each component.
Ven	ded N	<b>Aeals:</b>	/ <u>1</u>
			16. Meals are delivered in a timely manner and delivery time recorded.
			17. Upon delivery, staff checks to see if the food is at a safe temperature (hot and cold).
			18. Vended meals are checked for correct quantity and quality upon delivery.
			19. Daily delivery slips provided by the vender are signed by center staff.
Adu	lt Me	eals	<del>,</del>
			20. The number of center-provided adult meals served are recorded and kept on file.
			21. Adult meals are not claimed for reimbursement.
Othe Con	er nment	s	

# F. Sanitation

Yes	No	N/A		
			1. Working thermometers are in each refrigerator to maintain temperature between 32 and 41 degrees.  List refrigerator(s) temperature(s):	
			2. The freezer(s) is clean and in good repair to maintain correct temperature to keep food at appropriate frozen state (zero degrees or below).	
			3. Cleaning supplies are stored separately from food.	
			4. Food and supplies are stored off of the floor.	
			5. The center is free of rodent and insect infestation.	
			6. The center uses methods to assure hot and cold foods are served at correct temperatures.	
			7. Proper hand washing procedures are followed by children before meals and after restroom use.	
			8. Proper hand washing procedures are followed by staff.	
			9. Proper dishwashing methods are used (wash, rinse, sanitize).	
			10. Sanitary procedures are followed during meal preparation including wearing disposable gloves when appropriate.	
			11. All eating surfaces are properly sanitized prior to meal service.	
			12. Sanitary procedures are followed during meal service.	
			13. Food is properly disposed of after meal service.	
			14. Disposable tableware and/or utensils are discarded after each meal service.	
			15. In general, the center is clean and conducive to meal service.	
Other		•		
Con	nment	nts		

# G. Civil Rights

Yes	No	N/A				
			1. The "Justice for All" poster is on display in a public place.			
		2. The parent handbook or other written information describing meals that is provided to the public contain the CACFP Non-discrimination statement.				
			3. All site services are offered without regard to race, color, national origin, sex, age or disability.			
			4. All children receive the same food and meal service without any separation by race, color, national origin, sex, age or disability,			
Other Comments		s				

**H. Staff Training** (Key Staff is defined as center staff with any assigned CACFP responsibility or duties)

Yes	No	N/A	() while the control of the cont
			The sponsor has conducted CACFP related training to key site staff.  List date of last training:
			2. Records are on file at the center or sponsor's office to show staff training was conducted within the last 12 months.
			3. List any training topics that need to be provided to this site.
Othe	er		
Comments		S	

# I. Record Keeping

Yes	No	N/A			
			1. Site distributes and collects income eligibility applications (kept on file at site or sponsor's office).		
			2. Enrollment forms are collected on an annual basis and kept on file for all children.		
			3. Nonfood supplies costs are separated from food costs.		
			4. Itemized receipts or invoices for food, milk and supplies are on file for each month.		
			5. The site has distributed WIC information to families during the current fiscal year.		
			6. The site has a system in place to check that recorded meal counts are accurate.		
		7. The <i>Parent Notification - Building For The Future Fact Sheet</i> is included in the site's enrolling packet.			
			8. CACFP records are kept on file for three years plus the current fiscal year.		
			9. Staff follows established procedures for maintaining and sending records to sponsor's main office.		
		10. Site is keeping daily records of number of participants in attendance.			
		11. Site is maintaining daily meal counts by type of meal service served to participants.			
Other Comments		S			

### J. RECORD KEEPING - NON PROFIT FOOD SERVICE - FINANCIAL DOCUMENTATION

#### K. SUMMARY OF FINDINGS

1. What are the center's strengths in operating the CACFP:			
FINDINGS:			
☐ No findings were observed			
☐ Findings from last monitor review were corrected and were not evident during this review.			
☐ Findings were observed but were resolved during the visit. Findings and Corrective Action are			
listed below.			
Findings were observed during this visit. Findings and Corrective Action are listed below.			
- I manigs were observed during this visit. I manigs and confective retion are fisted below.			

# L. FINDINGS AND CORRECTIVE ACTION REQUIRED (If more space is need, insert additional page)

FINDING/PROBLEM	REQUIRED CORRECTIVE ACTION (specific steps to be taken)	DUE DATE	DATE COMPLETED				
	(specific steps to be taken)	DATE	COMILETED				
I certify the above information is correct.	. The monitor discussed the contents of this	report with t	the site director.				
Signature of Sponsor Monitor D	ate Signature of Site I	Director	Date				
Time of Departure:							
FOLLOW – UP REVIEW  Description: Needed Descri							
☐ No Follow-up Review Needed ☐ Follow-Up Review Needed ☐ Date of Follow-Up Review:							
Comments Regarding Follow-up Review:							

Revised 10/2017