

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

Sponsoring Organization Name:	
Site/Facility Name and Address:	
Name of Monitor:	Arrival Time:
Date of Last Review	Date of Review:
Is Review Averaging option is used: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Announced Review, number: 1 2 <input type="checkbox"/> Unannounced Review, number: 1 2 3 4
Type of Review: <input type="checkbox"/> New site, review conducted within first 4 weeks <input type="checkbox"/> Follow-up review <input type="checkbox"/> Regular review <input type="checkbox"/> Block claim investigation	
Total Number of Children In Attendance:	<input type="checkbox"/> Site Licensed for Child Care License Expiration Date:
Is Attendance Within License Capacity? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Site is exempt from having a child care license  Health Inspection Date:
License Capacity (if applicable):	Fire Inspection Date:
Site Type	<input type="checkbox"/> Child Care Center <input type="checkbox"/> Youth Development <input type="checkbox"/> Outside School Hour (Licensed) <input type="checkbox"/> Head Start <input type="checkbox"/> After School At Risk <input type="checkbox"/> Emergency Shelter

### A. Meal Service for Children

Was A Meal Service Observed? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Explain:						
Circle Meal Observed	Breakfast	AM Snack	Lunch	PM Snack	Supper	Eve Snack
Circle Type of Food Preparation:	On-site	Central/Kitchen	Vended/Catered: List vendor:			
MEALS	MEAL REQUIREMENTS	Food Item Served/Observed	List Amount/Portion Size Served			Problems Observed (Missing Components/Portions)
			1-2	3-5	6-12	
BREAKFAST	Milk					
	Fruit /Vegetable/ Juice					
	Bread./alternate and/or cereal					
	Other Foods					

MEALS	MEAL REQUIREMENTS	Food Item Served/Observed	List Amount/Portion Size Served			Problems Observed (Missing Components/Portions)
			1-2	3-5	6-12	
LUNCH OR SUPPER	Milk					
	Meat and/or meat alternate					
	Vegetable and/or fruit					
	Vegetable and/or fruit					
	Bread or alternate					
	Other Foods					
SNACK  Select 2 of 4 components	Milk					
	Meat and/or meat alternate					
	Vegetables and/or fruits					
	Bread or alternate					

### B. Meal Counts

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

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 Classroom	Date(s)	Meal Type(s)	No. of Meals Disallowed

Other Comments	
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### C. Meal Service for Infants

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

<b>CIRCLE N/A AND SKIP THIS PAGE IF THERE ARE NO INFANTS UNDER 1 YEAR OF AGE AT THIS CENTER: N/A</b>						
Was An Infant Meal Service Observed? <input type="checkbox"/> Yes <input type="checkbox"/> No    If No, explain:						
Circle Meal Observed	Breakfast	AM Snack	Lunch	PM Snack	Supper	Eve Snack
<b>Meal/Age</b>	<b>Portion Size</b>		<b>Food Served</b>			
<b>Breakfast</b> 0-3 months	4-6 oz IFIF or Breast Milk					
4-7 months	4-8 Oz IFIF or Breast Milk 0-3 Tbsp IFIC					
8-11 months	6-8 oz IFIF or Breast Milk 2-4 Tbsp IFIC 1-4 Tbsp Fruit/Vegetable					
<b>Lunch</b> 0-3 months	4-6 oz. IFIF or Breast Milk					
4-7 months	4-8 oz IFIF or Breast Milk 0-3 Tbsp IFIC 0-3 Tbsp Fruit/Vegetable					
8-11 months	6-8 oz IFIF or Breast Milk and 2-4 Tbsp IFIC and/or 1-4 Tbsp Meat, Fish, Poultry, egg yolk or cooked dry bean or peas or ½ -2 oz cheese or 1-4 oz cottage cheese or cheese food or spread 1-4 Tbsp Fruit/Vegetable					
<b>Snack</b> 0-3 months	4-6 oz IFIF or Breast Milk					
4-7 months	4-6 fl. Oz. IFIF or Breast Milk					
8-11 months	2-4 oz IFIF or Breast Milk or Full Strength Juice 0-2 Enriched or Whole Grain or Crackers					

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.
			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)
			9. Meal counts are recorded by individual name at the POINT OF SERVICE.
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 TODAY'S DATE PLUS THE FIVE MOST RECENT DAYS CLAIMED FOR MEAL TYPE CIRCLED ABOVE.												
	Today's Date:		Date:		Date:		Date:		Date:		Date:	
Classroom	Today's Meal Count	Today's Attendance	Day # 1 Meal Count	Attendance	Day # 2 Meal Count	Attendance	Day # 3 Meal Count	Attendance	Day # 4 Meal Count	Attendance	Day # 5 Meal Count	Attendance
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
<b>A. Today's Meal Count Total</b>		Attendance Total		Attendance Total		Attendance Total		Attendance Total		Attendance Total		Attendance Total
<b>B. 5-Day Meal Count Average</b>		<b>Divide = By 5</b>	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 Comments			

### E. Meal Service and Menus

Yes	No	N/A	<b>General Record Keeping and Meal Service</b>
			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.
<b>Family-style Meal Service: Yes or No If no, check N/A for questions # 13 - # 15</b>			
			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.
<b>Vended Meals: Yes or No If no, check N/A for questions # 16 - # 19</b>			
			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.
<b>Adult Meals</b>			
			20. The number of center-provided adult meals served are recorded and kept on file.
			21. Adult meals are not claimed for reimbursement.
Other Comments			

### 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 Comments			

### 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			

### H. Staff Training

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

Yes	No	N/A	
			1. 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.
Other Comments			

### 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 enrollment 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			



**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

*I certify the above information is correct. The monitor discussed the contents of this report with the site director.*

\_\_\_\_\_  
 Signature of Sponsor Monitor                      Date

\_\_\_\_\_  
 Signature of Site Director                      Date

Time of Departure: \_\_\_\_\_

<b>FOLLOW – UP REVIEW</b>		
<input type="checkbox"/> No Follow-up Review Needed	<input type="checkbox"/> Follow-Up Review Needed	Date of Follow-Up Review: _____
Comments Regarding Follow-up Review:		

**Revised 8/2015**