SCHOOL FOOD AUTHORITY ON-SITE REVIEW CHECKLIST

ASSESSMENT OF THE MEAL COUNTING AND CLAIMING SYSTEM AND READILY OBSERVABLE GENERAL AREAS FOR THE SBP AND NSLP

According to 7 CFR 210.8(a)(1) and 7 CFR 220.11(d)(1), every school year, prior to February 1, each School Food Authority (SFA) with more than one school (as defined by 7 CFR Part 210.2 to include Residential Child Care Institutions (RCCIs)) must perform no less than one on-site review of the meal counting and claiming system and the readily observable general areas of review identified under 7 CFR 210.18(h) in each school operating the National School Lunch Program (NSLP) and 50% of schools operating the School Breakfast Program (SBP) under its jurisdiction.

Each on-site review must ensure the school's claim is based on the counting and claiming system, as implemented, and yields the actual number of reimbursable free, reduced price, and paid meals, respectively, served for each day of operation.

If the review discloses problems with a school's meal counting and claiming procedures or general review areas, the SFA must ensure that the school implements corrective action, and within 45 days of the review, conduct a follow-up on-site review to determine that the corrective action resolved the problems.

School Name:	Review Date:	
SFA Reviewer:		
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SCHOOL BREAKFAST PROGRAM ON-SITE REVIEW

The following questions are recommended at a minimum to complete the on-site review requirement:

YES	NO	MEAL COUNTING AND CLAIMING SYSTEM						
Δ	Δ							
			point of service requirement? (Meal counts must be taken at the location(s) where					
					are served to children.)			
Δ	Δ	2. I	s the p	oint of s	ervice meal count used to determine the school's claim for			
				rsement				
Δ	Δ				sponsible for monitoring and counting meals correctly identifying			
				rsable m				
Δ	Δ	4. I			rrectly implementing policies for handling the following (as applicable):			
		Yes	No	N/A				
		Δ	Δ	Δ	Incomplete meals?			
		Δ	Δ	Δ	Second meals?			
		Δ	Δ	Δ	Lost, stolen, misused, forgotten or destroyed tickets, tokens, IDs, etc.?			
		Δ	Δ	Δ	Visiting student meals?			
		Δ	Δ	Δ	Adult and non-student meals (and identifying program vs non-program)?			
		Δ	Δ	Δ	A la carte?			
		Δ	Δ	Δ	Student worker meals?			
		Δ	Δ	Δ	Field Trips?			
		Δ	Δ	Δ	Charged and/or prepaid meals?			
		Δ	Δ	Δ	Offer vs Serve?			
		Δ	Δ	Δ	Unpaid meal charges			
Δ	Δ	5. Is there a method of identifying non-reimbursable meals (i.e., not meeting meal pattern requirements, seconds, adult meals, etc.) and distinguishing them from reimbursable						
		meals?						

YES	NO	MEAL COUNTING AND CLAIMING SYSTEM CONT.							
Δ	Δ	6. Is someone trained as a backup for the monitor and the meal counter?							
Δ	Δ	7. Are there procedures for meal counting and claiming when the primary counting and claiming system is not available? Do staff know when and how to implement them?							
Δ	Δ	8. Are daily counts correctly totaled and record							
Δ	Δ	9. If claims are aggregated, are the meal count	s correctly totaled and consolidated?						
Δ	Δ	10. Are internal controls (edits, monitoring, etc.) established to ensure that daily counts do not exceed the number of students eligible or in attendance and that an accurate claim is made? Record today's meal counts by category and compare to the total number of students							
		eligible by category							
		Number of Students Approved by Category	Today's Meal Counts by Category						
		Free:	Free:						
		Reduced Price:	Reduced Price:						
		Paid:	Paid						
Δ	Δ	11. Does the system prevent overt identification of children receiving free or reduced price meals?							
NOTI	E: The	following two questions are for all SFAs excep							
		years, CEP, or RCCIs with only re	esidential children						
YES	NO								
Δ	Δ	12. Is a current eligibility list kept up-to-date and used by the meal counting system to provide an accurate daily count of reimbursable meals by category (free, reduced price, paid)?							
Δ	Δ	paid)? 13. If applicable according to 7 CFR 220.11(d) are comparisons of daily free, reduced price and paid breakfast counts against data which will assist in the identification of breakfast counts in excess of the number of free, reduced price and paid breakfasts served each day to children eligible for such breakfasts completed?							

SBP CORRECTIVE ACTION PLAN (for any "NO" answers above):

SPECIFY DATE SBP CORRECTIVE ACTION(S) WILL BE IMPLEMENTED: $_$	
BY WHOM:	

YES	NO	READILY OBSERVABLE GENERAL AREAS				
Δ	Δ	1. Were any issues readily observed in relation to resource management?				
		YES	NO			
		Δ	Δ	Maintenance of the Nonprofit School Food Service Account? (7 CFR 210.2,		
				210.14, 210.19(a), 210.21)		
		Δ	Δ	Paid Lunch Equity? (7 CFR 210.14(e))		
		Δ	Δ	Revenue from Nonprogram Foods? (7 CFR 210.14(f))		
		Δ	Δ	Indirect Costs? (2 CFR Part 200 and 7 CFR 210.14(g))		
Δ	Δ	2. W	ere an	y issues readily observed in other general areas?		
		YES	NO			
		Δ	Δ	Free and Reduced Price Process – including verification, notification, and		
				other procedures (7 CFR Part 245)		
		Δ	Δ	Civil Rights (7 CFR 210.23(b))		
		Δ	Δ	Reporting and Recordkeeping (7 CFR Parts 210, 220, and 245)		
		Δ	Δ	Food Safety (7 CFR 210.13)		
		Δ	Δ	Competitive Food Service (7 CFR 210.11 and 220.12)		
		Δ	Δ	Water (7 CFR 210.10(a)(1)(i) and 220.8(a)(1))		
		Δ	Δ	Professional Standards (7 CFR 210.30)		
		Δ	Δ	SBP and SFSP Outreach (7 CFR 210.12(d))		
		Δ	Δ	Local School Wellness Policies (7 CFR 210.30)		
		Δ	Δ	Other		

SBP CORRECTIVE ACTION PLAN (for any "YES" answers above):

SPECIFY DATE SBP CORRECTIVE ACTION(S) WILL BE IMPLEMENTED:					
BY WHOM:					
SIGNATURE: School Representative	Title	Date			
SFA Reviewer	Title	Date			

SBP FOLLOW-UP VISIT (must be conducted within 45 days if corrective action was required):				
Date(s) of Follow-Up:				
Observations of corrective action implementation:				
SIGNATURE: School Representative	Title	Date		
SFA Reviewer	Title	Date		

The following questions are recommended at a minimum to complete the on-site review requirement:

YES	NO	MEAL COUNTING AND CLAIMING SYSTEM					
Δ	Δ	14. Is the method used for counting reimbursable meals in compliance with the approved					
			point of service requirement? (Meal counts must be taken at the location(s) where				
		co	complete meals are served to children.)				
Δ	Δ	15. Is t	15. Is the point of service meal count used to determine the school's claim for				
				sement?			
Δ	Δ		-	son resp	onsible for monitoring mea	als correctly identifying reimbursable	
			eals?				
Δ	Δ	 			rectly implementing policie	s for handling the following (as applicable):	
		Yes	No	N/A			
		Δ	Δ	Δ	Incomplete meals?		
		Δ	Δ	Δ	Second meals?		
		Δ	Δ	Δ		gotten or destroyed tickets, tokens, IDs, etc.?	
		Δ	Δ	Δ	Visiting student meals?		
		Δ	Δ	Δ	Adult and non-student me program)?	als (and identifying program vs non-	
		Δ	Δ	Δ	A la carte?		
		Δ	Δ	Δ	Student worker meals?		
		Δ	Δ	Δ	Field Trips?		
		Δ	Δ	Δ	Charged and/or prepaid m	neals?	
		Δ	Δ	Δ	Offer vs Serve?		
		Δ	Δ	Δ	Unpaid meal charges?		
Δ	Δ	18. Is t	here a	method	of identifying non-reimbur	sable meals (i.e. not meeting meal pattern	
						d distinguishing them from reimbursable	
		meals?					
YES	NO	MEAL COUNTING AND CLAIMING SYSTEM CONT.					
Δ	Δ	19. Is someone trained as a backup for the monitor and the meal counter?					
Δ	Δ					claiming when the primary counting and	
						now when and how to implement them?	
Δ	Δ				correctly totaled and record		
Δ	Δ					s correctly totaled and consolidated?	
Δ	Δ		23. Are internal controls (edits, monitoring, etc.) established to ensure that daily counts do				
		not exceed the number of students eligible or in attendance and that an accurate claim is					
		m	made?				
		Record today's meal counts by category and compare to the total number of students					
			eligible by category				
			er of S	students	S Approved by Category	Today's Meal Counts by Category	
		Free:	- 1 D'			Free:	
		Reduce	ed Pric	e:		Reduced Price:	
		Paid:	/1	4		Paid	
Δ	Δ			system	prevent overt identification	of children receiving free or reduced price	
		m	eals?				

NOT	NOTE: The following two questions are for all SFAs <u>except</u> for SFAs on Provision 2 or 3 in non-base years, CEP, or RCCIs with only residential children						
YES	NO						
Δ	Δ	25. Is a current eligibility list kept up-to-date and used by the meal counting system to provide an accurate daily count of reimbursable meals by category (free, reduced price, paid)?					
Δ	Δ	26. If applicable according to 7 CFR 210.8(a)(3), are edit checks completed and documented which compare the daily counts of free, reduced price, and paid meals against the product of the number of children currently eligible for free, reduced price, and paid meals, respectively, times an attendance factor (and any discrepancies accounted for)?					

NSLP CORRECTIVE ACTION PLAN (for any "NO" answers above):

SPECIFY DATE NSLP CORRECTIVE ACTION(S) WILL BE IMPLEMENTED:	
BY WHOM:	

YES	NO	READILY OBSERVABLE GENERAL AREAS			
Δ	Δ	3. Were any issues readily observed in relation to resource management?			
		YES NO			
		Δ	Δ	Maintenance of the Nonprofit School Food Service Account? (7 CFR 210.2,	
				210.14, 210.19(a), 210.21)	
		Δ	Δ	Paid Lunch Equity? (7 CFR 210.14(e))	
		Δ	Δ	Revenue from Nonprogram Foods? (7 CFR 210.14(f))	
		Δ	Δ	Indirect Costs? (2 CFR Part 200 and 7 CFR 210.14(g))	
Δ	Δ	4. W	ere an	y issues readily observed in other general areas?	
		YES	NO		
		Δ	Δ	Free and Reduced Price Process – including verification, notification, and	
				other procedures (7 CFR Part 245)	
		Δ	Δ Civil Rights (7 CFR 210.23(b))		
		Δ	Δ	Reporting and Recordkeeping (7 CFR Parts 210, 220, and 245)	
		Δ	Δ	Food Safety (7 CFR 210.13)	
		Δ	Δ	Competitive Food Service (7 CFR 210.11 and 220.12)	
		Δ	Δ	Water (7 CFR 210.10(a)(1)(i) and 220.8(a)(1))	
		Δ	D 0 : 10 1 1 (7 CED 010 00)		
		Δ Δ SBP and SFSP Outreach (7 CFR 210.12(d))			
		Δ	Δ	Local School Wellness Policies (7 CFR 210.30)	
		Δ	Δ	Other	

NSLP CORRECTIVE ACTION PLAN (for any "YES" answers above):

SPECIFY DATE NSLP CORRECTIVE ACTION(S) WILL BE IMPLEMENTED:							
BY WHOM:							
SIGNATURE:School R	Representative	Title	Date				
SFA Reviewer		Title	Date				

NSLP FOLLOW-UP VISIT (must be conducted within 45 days if corrective action was required):		
Date(s) of Follow-Up:		
Observations of corrective action implementation:		
SIGNATURE:	Tid	D. (
School Representative	Title	Date
SFA Reviewer	Title	Date