

On-Site Review Checklist
 Assessment of the SFA's Meal Counting and Claiming System

Attachment I: 2019-20

SFA: _____ Site: _____ Reviewer: _____

According to USDA regulations, 7 CFR 210.8(a)(1) and 7CFR 220.11(d)(1), a School Food Authority (SFA) with two or more feeding sites is required to perform an on-site review of the meal counting and claiming system and the readily observable general areas of review under 7CFR 210.18(h) by completing the following checklist for each site that offers lunch and 50% of all sites that offer breakfast by **February 1** each year.

The on-site review must ensure the school's claim is based on the counting system, as implemented, and yields the actual number of reimbursable free, reduced and paid meals served for each day of operation. If the review discloses problems with a school's meal counting or claiming procedure, the SFA must ensure that the school implements corrective action. Within 45 days of the review, a follow-up on-site review must be conducted to determine that the corrective action resolved the problems. Completed checklists are to be kept on file at the school district or Residential Child Care Institution (RCCI).

Review Date: _____

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Breakfast:	Point of Service (POS) Meal Count Method used at this site:	Lunch:																																																								
<input type="checkbox"/> Roster <input type="checkbox"/> Ticket <input type="checkbox"/> Electronic		<input type="checkbox"/> Roster <input type="checkbox"/> Ticket <input type="checkbox"/> Electronic																																																								
YES NO _____ _____		YES NO _____ _____																																																								
_____	1. Is the POS meal count taken at the end of the serving line after all food items contributing to a reimbursable meal have been offered? (This includes the end of salad bars and/or food bars.)	_____																																																								
_____	2. If <u>no</u> , does the SFA have an approved waiver on file from NDE-Nutrition Services? If a waiver is not on file, contact Nutrition Services immediately.	_____																																																								
_____	3. Is the POS meal count used to determine the school's meal count for the day and claim for reimbursement at the end of the month? (Morning meal counts or tray counts cannot be used.)	_____																																																								
_____	4. Is the person who is responsible for the POS meal count correctly identifying reimbursable meals?	_____																																																								
	5. Is the school correctly implementing policies for handling the following situations, if applicable (answer this question one time only):																																																									
<table border="0" style="width:100%;"> <tr> <th style="width:10%;">YES</th> <th style="width:10%;">NO</th> <th style="width:10%;">NA</th> <th style="width:50%;">Situation</th> <th style="width:10%;">YES</th> <th style="width:10%;">NO</th> <th style="width:10%;">NA</th> <th style="width:50%;">Situation</th> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>A la carte sales?</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Selling second meals?</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Field trip meals?</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Offer Versus Serve?</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Incomplete student meals?</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Claiming student worker meals</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Adult and non-enrolled student meals?</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Feeding students from another school district?</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Lost, stolen or forgotten, misused or destroyed tickets, cards or IDs?</td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Charging meals or prepayment of meals?</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td>Unpaid meal charges?</td> </tr> </table>	YES	NO	NA	Situation	YES	NO	NA	Situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A la carte sales?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Selling second meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Field trip meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Offer Versus Serve?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incomplete student meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Claiming student worker meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Adult and non-enrolled student meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Feeding students from another school district?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lost, stolen or forgotten, misused or destroyed tickets, cards or IDs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Charging meals or prepayment of meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unpaid meal charges?		
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_____	6. Is there a method of identifying non-reimbursable meals (i.e. not meeting meal pattern requirements, seconds, adult meals, etc.) distinguishing them from reimbursable meals?	_____																																																								
_____	7. Is someone trained as a backup for the person responsible for determining reimbursable meals and the POS meal count	_____																																																								
_____	8. Is there a procedure in place if the primary counting and claiming system goes down or is unavailable and do staff know when and how to implement it	_____																																																								
_____	9. Are daily meal counts correctly totaled and recorded by category on a daily basis?	_____																																																								
_____	10. Are internal controls (edit checks, monitoring, etc.) established to ensure that daily meal counts do not exceed the number of eligible students by category or attendance in school? Complete the following chart for today's review:	_____																																																								

Breakfast:	Meal Counts	Lunch:
Free Reduced Paid		Free Reduced Paid
_____	# Students Approved by Category	_____
_____	Today's Meal Count by Category	_____
_____		_____
_____	11. Does the system prevent overt identification of children receiving free or reduced price meals?	_____

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Breakfast:		Recordkeeping	Lunch:	
YES	NO		YES	NO
___	___	12. If the school prepares food on-site, are Production Records completed daily <u>OR</u> if the school receives their food from another location, are Delivery Tickets completed daily?	___	___
___	___	13. Are all school lunch records (Production Records, Delivery Tickets, Meal Count Sheets, Edit Check Worksheets, etc) kept on file for at least three years plus the current school year and available for review, if requested?	___	___
NOTE: The next two questions are for all SFAs <u>except</u> for SFAs on Provision 2 in non-base years, CEP or RCCIs that serve only residential children.				
___	___	14. Is the list of eligible students kept up-to-date and used to provide an accurate daily count of reimbursable free, reduced and paid meals? Check box if not applicable.	___	___
	<input type="checkbox"/> NA			<input type="checkbox"/> NA
___	___	15. Does each feeding site complete an edit check worksheet that compiles monthly meal counts by eligibility category and compares attendance-adjusted eligible figures to daily meals counts on a monthly basis? Are any discrepancies accounted for? Check box if not applicable.	___	___
	<input type="checkbox"/> NA			<input type="checkbox"/> NA

YES	NO	Readily Observable General Areas	YES	NO
<i>Were any issues readily observed in any of the following areas:</i>				
___	___	16. Maintenance of the Nonprofit School Food Service Account?	___	___
___	___	17. Paid Lunch Equity?	___	___
___	___	18. Revenue from non-program foods?	___	___
___	___	19. Indirect costs?	___	___
___	___	20. Free/reduced price process including verification, notification & other procedures?	___	___
___	___	21. Civil Rights?	___	___
___	___	22. Reporting and recordkeeping?	___	___
___	___	23. Food safety?	___	___
___	___	24. Competitive food service?	___	___
___	___	25. Water available at both breakfast and lunch?	___	___
___	___	26. Professional standards	___	___
___	___	27. SBP and SFSP outreach?	___	___
___	___	28. Local school wellness policies?	___	___
___	___	29. Other	___	___

<u>CORRECTIVE ACTION</u> NOTE: Required ONLY for questions answered "NO" or if problems are identified during the review.			
Corrective Action Plan:			
Specify date corrective action(s) will be implemented:			
By whom: _____ Title _____			
Signature _____			
School Representative	Title	Date	
<u>CORRECTIVE ACTION 45 Day Follow Up:</u> NOTE: Required for all Corrective Action outlined above.			
Record observations of corrective action implementation:			
Signature _____			
School Representative	Title	Date	
Signature _____			
SFA Reviewer	Title	Date	

This institution is an equal opportunity provider.