

**CHILD and ADULT CARE FOOD PROGRAM
FDCH PROVIDER REVIEW FORM (For Sponsor Use)**

Provider: _____

This Review: **New 1st 2nd 3rd Follow-up**

Provider Address: _____

Reviewer: _____

Phone Number: _____

Date of Last Review: _____ Date of Last Follow-up: _____

Hours of Operation: _____ to _____

Failed 5-Day Test Last Review: **Y N**

Days Approved: **S M T W T H F S**

Serious Deficiency Last Review: **Y N**

Holiday Care: **Y N**

If Yes, Type of Serious Deficiency: _____

Refer to detailed instructions before completing this report.

Tier Level of Home	License #:	Licensed Capacity:	Meals Approved to Claim:				Date of Review:	Unannounced <input type="checkbox"/>	Arrival Time:			
	Expiration Date:		B	MS	L	AS		S		ES	Announced <input type="checkbox"/>	Departure Time:
			Meal Observed:									
			B	MS	L	AS	S	ES	Non-Meal Review <input type="checkbox"/>			

Previous Review Findings: _____

Children Enrolled	Date of Enrollment	Provider's Own Child (✓)	DOB	Inf. (✓)	1-2 (✓)	3-5 (✓)	6-12 (✓)	Present (✓)	Claimed (✓)
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

RECORD KEEPING/ELIGIBILITY REQUIREMENTS	YES	NO	N/A	COMMENTS
1. The provider claims only approved meal types.				
2. The provider operates within its licensed capacity/ratios.				
3. Copies of current, complete, and accurate Enrollment Forms and are on file with the provider for all enrolled children.				
4. The provider maintains on file a signed copy of the Sponsor-Provider Agreement.				
5. The provider retains program records for the current fiscal year plus the prior three years (or number of years on program if less than three years).				
6. If a Tier I home, the provider is claiming their own child(ren) only when other children are present and the provider is income eligible.				
7. If a Tier II home, the sponsor has offered to collect income statements from parents.				
PHYSICAL ENVIRONMENT/FOOD AND NUTRITION	YES	NO	N/A	COMMENTS
8. The provider, staff, and children wash their hands properly, frequently, and at appropriate times.				
9. Surfaces are cleaned and sanitized prior to preparing and serving food.				
10. Refrigeration units are maintained at 41° F or below and freezers are maintained at 0° F or below.				

PHYSICAL ENVIRONMENT/FOOD AND NUTRITION (Cont'd.)	YES	NO	N/A	COMMENTS
11. Cleaning supplies are stored separately from food.				
12. There is no evidence of rodent or insect infestation.				
13. Prepared food is stored in clean, covered containers that are clearly labeled and marked with date of preparation.				
MEAL OBSERVATION	YES	NO	N/A	COMMENTS
When observing a meal, answer all questions in the following section. If a non-meal review, answer questions marked with an asterisk (*) and mark all others "N/A".				
14. Posted Menu:	Observed Meal: <input type="checkbox"/> Same as posted menu			
15. The observed meal was served at the proper time.				
16. Any changes to the menu is updated prior to meal service.				
17. The observed meal corresponds to the posted menu.				
18. The observed meal contains all required components, served in the required quantities. If no, list any missing and/or inadequate components:				
19. If applicable, parent notes and/or medical statements are maintained on file authorizing menu substitutions.				
20. All the meals in the posted weekly or monthly menu meet the minimum CACFP meal pattern requirements.				
21. Yogurt (milk or soy) contains no more that 23 g of total sugars per 6 oz.				
22. Ready-to-eat cereal products served contain no more than 6 grams of sugar per dry ounce.				
23. At least one grain serving per day, across all eating occasions, is 100% whole grain or whole grain-rich. This is also clearly identified on posted menu and verified to be WGR.				
24. Grain-based desserts are not served as part of a reimbursable meal.				
25. Juice is served no more than once a day.				
26. Flavored milk is not served to children under 6 years of age.				
27. If served, flavored milk is fat-free (skim) milk or low-fat (1%) and served only to children 6 years and older.				
28. Low-fat (1%) or fat-free (skim) unflavored milk is being served to children age 2 and older and unflavored whole milk is served to children age one.				
29. If using commercially processed/main dish combination foods, the provider follows regulatory guidelines.				
30. The provider complies with all applicable infant-feeding requirements.				
31. An accurate meal count is recorded daily.				
TRAINING AND MONITORING	YES	NO	N/A	COMMENTS
32. Provider has attended required sponsor training.				
33. Issues of non-compliance noted on previous reviews have been fully and permanently corrected.				
CIVIL RIGHTS	YES	NO	N/A	COMMENTS
34. The WIC flier and Building for the Future letter are conspicuously posted or distributed to parents.				
35. The provider allows equal access to its site and provides meals regardless of race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.				
36. If the provider advertises, the non-discrimination statement and complaint procedures are included in any provider advertisements regarding the CACFP.				

CIVIL RIGHTS (Cont'd.)

37. Race and ethnicity data are collected

38. If any civil rights problems are identified in questions #34-37 above, please provide an explanation. If no problems are identified, leave this section blank or write "N/A".

5-DAY TEST (see instructions)

39. DAY OF REVIEW – MEAL COUNTS: Meal count on day of review: _____

Check if planned non-meal review. This section is N/A. Skip to 5-Day Reconciliation (questions #42-44).

Check if meal review was planned, but no children are present. Conduct review as non-meal review for all other questions EXCEPT this section. Complete question #39 using a meal count of zero (0) and answer questions #40 & 41.

Record meal counts for the same meal type observed on the day of the visit for each of the previous 5 consecutive meal service days. Use meal counts from prior weekend days if doing a weekend review.

$$\boxed{} + \boxed{} + \boxed{} + \boxed{} + \boxed{} = \boxed{} \text{ Meal Count Total} \quad \text{Divided by 5} = \boxed{} \text{ Average} \quad \times .85 = \boxed{}$$

Dates: _____

40. Is the number of meals served on the day of the review equal to or greater than 85% of the average? Yes _____ No _____
If "Yes", provider "passed" the 5-Day test. If "No", obtain an explanation:

41. If #40 was answered "No," was the explanation provided adequate? Yes _____ (Provider "passed" 5-Day Test)
No _____ (Provider "failed" 5-Day Test; CAP and follow-up are required)

5-DAY RECONCILIATION (see instructions)

Date	Enrollment Total	Attendance Total	Total Meal Counts					
			Breakfast	Morning Snack	Lunch	Afternoon Snack	Supper	Evening Snack

42. Do any meal counts for the five consecutive days reviewed exceed the documented enrollment or attendance for those days? Yes _____ No _____

Note: If meal counts, enrollment records and attendance records cannot be reconciled, monitor should expand review to include specific children. A meal disallowance and/or a Notice of Serious Deficiency may be necessary.

REVIEW SUMMARY	YES	NO	N/A	COMMENTS
43. The provider has a good understanding of program rules.				
44. Is a disallowance required?				
45. Is a Corrective Action Plan (CAP) required?				
46. Is a Follow-Up Review required?				
47. Is a Notice of Serious Deficiency required?				

ITEM #	COMMENTS

A Corrective Action Plan (CAP) addressing the deficiencies identified above must be received by the sponsor by close of business on _____ . **The CAP must describe those actions being taken to correct the deficiencies and the date by which each deficiency will be corrected.**

Training Materials Provided: _____

Provider Signature: _____

Date _____

Sponsor Signature: _____

Date _____

Sponsor's Second Party Check: _____

Date _____

INSTRUCTIONS FOR PROVIDER REVIEW FORM **(For Sponsor Use)**

Complete top of form with appropriate information. Use back of page if additional space is needed to list enrolled children, or if an alternate form has been approved by OSPI, a copy of the alternate form must be included with the review and a notation must be added to the section of the review form that the alternate form has replaced. When doing reviews where a meal service is not observed, reviewers should mark "Non-Meal Review" and indicate "N/A" for those portions of the review form related to meal service. Also, for planned non-meal reviews, the 5-Day Test section should be marked "N/A" but the 5-Day Reconciliation must still be completed. If using the form to conduct a Follow-Up Review, complete the portions of the review form related to the deficiencies noted on the previous review; for all other questions, reviewers should mark through and indicate "N/A."

Review previous monitoring results and write findings in the Previous Review Findings section and complete Q. 33 based on monitoring observations. Evaluate whether provider should be assessed seriously deficient when corrections have not been maintained.

RECORD KEEPING/ELIGIBILITY REQUIREMENTS:

1. Refer to the Provider records to ensure only approved meals are claimed on the Meal Count and Attendance Worksheets.
2. Compare the number of children present to the licensed capacity and allowable ratios. If overcapacity or out of ratio, disallow any meals in excess of the capacity and/or ratio and notify the proper licensing authority.
3. Copies of E/IEA's must be on file with the provider for each child. Review forms for accuracy and completeness. If a provider has claimed meals for reimbursement for a child(ren) who does not have a E/IEA on file, then the sponsor must disallow meals.
4. Ensure there is a signed copy of the Sponsor-Provider Agreement on file. (This could be verified at the sponsor's office.)
5. Providers must maintain copies of all records supporting CACFP claims for three fiscal years after the fiscal year to which they pertain. Only those records for the current month and the previous twelve months must be maintained on-site. Providers may store the remaining two years of records off-site or electronically but must be accessible within five days of request.
6. In order for a Tier I provider to claim their own children, other children must be enrolled and present. Also, an eligible income statement must be approved and on file in the sponsor's office. Tier II providers are not eligible to claim their own children.
7. A Tier II provider may choose to be paid the low rate for all children present. However, the provider has the option to distribute Income Statements to the parents of enrolled children. Completed Statements would be sent directly to the sponsor or returned to the provider with written consent allowing the provider to collect the form and transmit it to the sponsor. The sponsor would make all eligibility determinations and the provider would be reimbursed the high or low rate per child depending on the eligibility level of each child.

PHYSICAL ENVIRONMENT/FOOD AND NUTRITION:

8. Observe whether staff preparing meals are washing hands prior to food preparation. Observe whether children are washing their hands before the meal service. Verify that hand washing sinks in the kitchen and the bathrooms are supplied with hand soap, disposable towels, or hand drying devices.
9. Ensure that surfaces where food is prepped and served have been cleaned and sanitized before use.
10. Verify that the provider has thermometers in refrigerators and freezers and that the correct temperature is maintained at 41°F or below in refrigerators and the correct temperature is maintained at 0° F or below in freezers.
- 11-12. Self-explanatory.
13. Observe the handling of food. Any unused foods must be discarded or stored properly. Self-prep foods may be refrigerated and stored for up to seven days in properly covered containers or bags that are clearly labeled and marked with date of preparation.

MEAL OBSERVATION:

Note: When observing a meal, answer all questions in the following section. If conducting a non-meal review, answer questions marked with an asterisk (*) and mark all others "N/A".

14. **Posted Menu:** List all foods planned to be served to the children during the meal service. **Observed Meal:** If foods are different than posted menu, list all foods served to the children during the meal service, on the day of the review. Check the box if the observed meal is the same as the posted menu. Items served must match the posted menu. (See instruction #16-18)
15. The provider should be serving meals during the times indicated on that have been reported to Sponsor..
- 16-18. Ensure that every meal on the posted menu for the week or month has the required components. Compare the meals served and observed with the posted menu; the menu must reflect the actual meal served. If an item has been substituted, discuss the importance of planning menus in advance. Menus must be noted to reflect any changes made to the menu prior to the meal service. Observe the served meal and determine if all required components are included and if the required quantities of all components are served.
19. If you identify any children with special diet restrictions and exceptions to the meal pattern are being made, check the enrollment files to see if there is a signed statement from a recognized medical authority. If a milk substitute is provided, ensure it is an approved brand. Modifications to the meal pattern for religious reasons or food preferences that still meet the minimum meal pattern requirements may be made by parent request. Meals with substitutions that meet all meal pattern requirements are reimbursable. However, when a substitution is made and the meal pattern is not met, a medical statement is required and must contain the following three elements: a description of the child's physical or mental impairment that restricts the diet; what must be done to accommodate the child (foods to be omitted and foods to be substituted); and signature of a licensed physician, physician's assistant, or nurse practitioner. For children with a documented disability, parents may supply one or more components of the reimbursable meal as long as the provider provides at least one component. For non-disability meals, parents may supply no more than one component of the reimbursable meal.
20. Disallow all meals on the posted menu that do not meet the minimum meal pattern requirements (for meals that have already been served and recorded). For future meals, provide technical assistance and allow providers to correct the menu.
21. Appropriate documentation must be maintained for meals eaten away from the site, such as field trip menus, point-of-service meal count records, etc. Meals must adhere to all program requirements and must be eaten under the supervision of appropriate site staff.
22. Ensure the menu lists cereals by name; ready-to-eat cereals (cold and hot) must contain no more than 6 grams of sugar per dry ounce (see WIC-Approved Cereal List).
23. Ensure that at least one grain serving per day, across all occasions, is 100% whole grain or whole grain-rich. The menu must clearly identify the whole grain or whole grain-rich item, such as "WG bread" or "WGR crackers."
24. Ensure that grain-based desserts (e.g., granola bars, cookies) are not served as part of a reimbursable meal. Grain-based desserts may be served as an "extra." Note: Graham crackers and animal crackers are creditable.
25. Fruit juice must not be served more than once a day.
26. Ensure that flavored milk is not served to children under 6 years of age. Flavored powder/liquid may not be added to milk (cow or soy) for children ages 1-5.
27. Ensure that flavored milk, if served, is fat-free (skim) milk or low-fat (1%) and served only to children 6 years and older.
28. Between a child's first and second birthday, it is required that unflavored whole-milk be served. However, after the child's second birthday, it is required that low-fat (1%) or fat free (skim) unflavored milk be served. If this requirement is not met, disallow any meals on the Meal Count and Attendance Worksheet. Reminder: A parent's note must be provided for non-dairy milk substitutions (i.e. soy milk). The note must state the medical or special dietary condition that restricts the diet of the child.
29. Ensure that a CN label or Product Formulation Statement is available for all processed/main dish combination products. If corrections are made during the meal service (i.e. another creditable ingredient is added in sufficient quantity) a disallowance is not required. If the meal does not meet the requirements, a disallowance should be issued.
30. If the provider is claiming infant meals, observe the meal to determine if the infant meal pattern is being followed. Infant meals containing foods provided by the parent and served to infants, birth through 11 months, may include no more than one component provided by parent. Meals containing only breastmilk (expressed by mother and fed by

provider or fed directly by mother), may be claimed for reimbursement. Refer to the Infant Feeding handbook for additional guidance. Check to ensure that Infant Feeding Forms are completed by the parents and are on file.

31. Meal counts must be recorded daily; attendance records may not be used to determine the number of meals served. If infants are present and claimed, be sure to note the number (#) and how it may change the total number of meals claimed since they may eat at another time.

TRAINING AND MONITORING:

32. Check to see if the provider or other responsible individual(s) has attended required sponsor training. Check your records or speak with the provider to obtain documentation – agendas and sign-in sheets. At a minimum, training must include the following topics: meal patterns, meal counts, claims submission and review procedures, record keeping requirements, and the reimbursement system.
33. Check previous reviews for issues of non-compliance. Also review submitted Corrective Action Plans. Check to ensure that previously identified issues of noncompliance have been corrected according to the plan outlined in the CAP.

CIVIL RIGHTS:

- 34-37. Ask the provider about his/her enrollment policy and the method used to collect race and ethnicity data. Self-identification and self-reporting are the preferred method to collect this information. The Building for the Future letter and the WIC flier must be displayed in conspicuous locations. Monitors should carry a supply and provide them as necessary.
38. Discuss any possible civil right problems identified with the staff and include any explanations provided. If, in the opinion of the reviewer, any kind of discrimination is present, notify the state CACFP office immediately.

5-DAY TEST:

- 39-41. The 5-Day Test is a screening tool to compare the prior days' meal counts to the meal count observed during the day of review. Record the prior consecutive 5-day meal counts. **[Note: do not include days provider was closed or days where no meal counts were recorded. Zero meal counts can only be used if the provider was open and had no children present for the meal]**. Using the formula, calculate the 5-day meal count average and multiply it by 85% (.85). If the resulting number is a decimal, use normal rounding procedures to round to the nearest whole number (i.e. round up if the decimal is .5 or greater; round down if the decimal is less than .5). If the number of meals served on the day of the review is less than this number, the day care home provider will need to give a (documented) plausible explanation. If a plausible explanation is given, the provider is considered to have "passed" the 5-Day Test. If a plausible explanation is not given, the provider is considered to have "failed" the 5-Day Test. A Corrective Action Plan is required, a follow-up review must be conducted, and the provider should be informed of the consequences of program fraud and abuse. If the provider fails the 5-Day Test on subsequent reviews, including follow-up reviews, the provider is subject to household contacts and/or audits that could result in termination from the program and possible pay back of significant sums of money.

5-DAY RECONCILIATION:

42. Refer to the Meal Count and Attendance Worksheet to complete the 5-Day Reconciliation and answer questions.
 - ♣ Choose any 5 consecutive days prior to the day of review from the Meal Count and Attendance Worksheet (if early in the month, the monitor may need to refer to the Meal Count and Attendance Worksheet from the prior month to get 5 consecutive days). **Note:** These can be the same 5 days as used in the 5-Day Test.
 - ♣ Evaluate enrollment and attendance records to ensure that they are current and accurate.
 - ♣ Compare the provider's total enrollment to its recorded daily attendance for the five days to ensure that the number of children in attendance does not exceed the number of children enrolled.
 - If attendance does exceed enrollment for any day, the monitor must determine the source of the error (e.g., inaccurate attendance records, missing enrollment forms) before a five-day reconciliation can be completed.
 - ♣ Compare the provider's total daily attendance to its meal counts using five consecutive days of total meal counts for each approved meal type to ensure that meal counts do not exceed the number of participants in attendance on any day.

Note: If meal counts, enrollment records and attendance records cannot be reconciled, monitor should expand review to include specific children. A meal disallowance and/or a Notice of Serious Deficiency may be necessary.

REVIEW SUMMARY:

Comments - use this section primarily to list any deficiencies noted. This section may also be used to identify any program areas that deserve commendation

After the review is conducted and the monthly claim has been filed, the sponsor's designated Point of Contact should perform a second party check of the review form. This is to ensure that it is completely and correctly filled out. The second party check should not be performed by the same person who has conducted the review.

A Corrective Action Plan (CAP) is required when significant issues of noncompliance are found during a monitoring review, including meal disallowances, failure of the 5-Day Test and/or if a *Notice of Serious Deficiency* is issued. The sponsor must receive a written CAP by the required date. Two weeks should generally be an adequate amount of time; failure to meet this deadline may result in a *Notice of Serious Deficiency* being issued and may lead to termination or disqualification. Sponsors have the option of not requiring a CAP for deficiencies that are not systemic or process-related errors and that can be permanently fixed at the time of the review, or shortly thereafter. If a CAP is not required, the sponsor must provide technical assistance and must record all actions taken on the Site Review Form.

Upon receipt of the CAP, the sponsor must review the plan against the report to ensure all noted deficiencies are addressed and that the description of the corrective action is adequate and appropriate. If any responses are inadequate, the sponsor must follow-up with the provider until an adequate response has been received.

A Follow-up review must be conducted within 30 days of an approved CAP.