



## Seamless Summer Option (SSO) On-Site Review Form

This form must be completed ***within the first three weeks*** of operation for each site approved to operate. You will need to observe staff in action, e.g. cashiers, managers, servers. Answer the following questions by checking the appropriate response. For “No” responses, describe technical assistance provided and corrective action required.

<b>Sponsor:</b>	<b>Contact Person:</b>	<b>Site:</b>	<b>Type of Site:</b>
<b>Monitor:</b>	<b>Date of Review:</b>	<b>Meal:</b>	<b>Meal Time:</b>
<b>Approved Dates of Operation:</b> <input type="checkbox"/> <b>First Review</b> <input type="checkbox"/> <b>Second Review</b>			<b>Area Eligible?</b>

Meal Count System			
Yes	No	N/A	Monitor Area
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are meals counted and recorded at the point of service?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are only meals that contain the required number of items/components recorded for reimbursement?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are a la carte items excluded as a reimbursable meal even if together they comprise a complete meal?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the site following procedures to ensure that only one reimbursable meal per child per meal category is claimed? (Procedures must be in place to prevent claiming of second meals)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are non-reimbursable meals (adults/volunteers/etc.) recorded as such at the point of service?

Meal Pattern Compliance & Food Safety			
Yes	No	N/A	Monitor Area
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are only reimbursable meals (meals meeting meal pattern requirements) recorded for reimbursement?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Offer vs. Serve at Breakfast: Are at least four items offered, with the child instructed to take at least three items, including a minimum of ½ cup of fruit and/or vegetables?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Offer vs. Serve at Lunch: Are all five components offered, with the child instructed to take at least three components, including a minimum ½ cup of fruit and/or vegetables?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are printed menus and production records available for review?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the site have a HACCP plan in place?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are food safety inspections current?

Meal Claiming Procedures			
Yes	No	N/A	Monitor Area
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are procedures followed to ensure enrolled sites meet the 50% free and reduced-price eligibility criteria?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are written procedures in place to describe the meal count system to staff?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do the meals claimed for reimbursement match the meal type and operating dates that were approved by NJDA on the site application?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are daily meal count forms correctly consolidated on a regular basis (minimum of weekly)?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Area eligible sites: Are meal counts claimed in the “free” category?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sites which are not area eligible: Is documentation of eligibility available for all students?

Civil Rights			
Yes	No	N/A	Monitor Area
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the "And Justice for All" poster displayed in a visible location?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are meals served to all attending children regardless of the child's race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are non-discriminatory practices evident in the eating area, serving line, seating arrangements, and assignment of eating periods?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are appropriate program materials updated with the most current non-discrimination statement?

<b>Total number of children in attendance:</b>	
<b>Total number of meals/snacks observed on the day of review:</b>	
<b>Total number of meals/snacks claimed on the day of review:</b>	
<b>Total number of observed meals/snacks that are incomplete:</b>	

Summary of Findings & Recommended Corrective Action:

Corrective Action Taken & Date Completed:

Monitor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Site Representative's Signature: \_\_\_\_\_ Date: \_\_\_\_\_