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| **Seamless Summer Option (SSO) Site Review Form** **[ ]** Review  **[ ]  Follow-up (if applicable)**  |
| SFA Name  | Site Name/Location |
| Review Date | Site Supervisor |
|  Check any that apply:**[ ]** The meal site is approved fornon-congregate feeding |
| Approved Dates of Operation (start date – end date): | Meal Service Times**:****Approved Actual** | Approved Site Type**[ ]** Open **[ ]** Restricted Open **[ ]** Closed Enrolled |
| Meals approved**[ ]** Breakfast **[ ]** Lunch **[ ]** Afterschool Snack (ASP) | Meal Being Reviewed **[ ]** Breakfast **[ ]** Lunch **[ ]** Afterschool Snack (ASP) |
| **Day of Review** |
|  | Breakfast | Lunch | ASP |  | Breakfast | Lunch | ASP |
| 1. Total number of meals available
 |  |  |  | 1. Number of meals served to children
 |  |  |  |
| 1. Number of adult meals served
 |  |  |  | 1. Number of meals disallowed
 |  |  |  |
| 1. Number of meals served - Total
 |  |  |  | 1. Number of meals leftover
 |  |  |  |
| 1. Offer verse Serve (OVS) used
 |  |  |  |   |  |  |  |
| **Production Information**(Complete the following or attach the day’s production record)  |
| Food Items | Portion Size | Total Serving Planned |  Amount Prepared | Amount Leftover | Comments |
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| Yes | No | N/A | Complete the following questions: |
|  |  |  | 1. Has the site supervisor been trained on SSO requirements?
 |
|  |  |  | 1. Is the individual responsible for monitoring meals correctly identifying reimbursable meals?
 |
|  |  |  | 1. Is the site operating in accordance with the approved site type (open, restricted open, closed enrolled)?
 |
|  |  |  | 1. Are daily meal counts correctly totaled and recorded?
 |
|  |  |  | 1. Do meals follow the menu as planned?
 |
|  |  |  | 1. Do meals meet the meal pattern requirements?
 |
|  |  |  | 1. Is crediting documentation for items served available?
 |
|  |  |  | 1. Are production records available and properly completed?
 |
|  |  |  | 1. Is food stored, prepared, served, in a safe and sanitary manner?
 |
|  |  |  | 1. Are meals planned and prepared with one meal per child in mind?
 |
|  |  |  | 1. Are accurate counts taken of meals served, at the point of service (POS)?
 |
|  |  |  | 1. Is the meal delivery schedule followed?
 |
|  |  |  | 1. Are unserved meals properly stored and/or disposed of?
 |
|  |  |  | 1. Are special dietary needs being accommodated?
 |
|  |  |  | 1. Are the previous two Health Department Inspection Reports available? If not, has the site requested an inspection from the local health department?
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|  |  |  | 1. Is the “*And Justice for* All” poster on display in a prominent place?

Location(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  | 1. Are meals served to all children regardless of the child’s race, color, national origin, sex, age, or disability?
 |
|  |  |  | 1. Is Informational material concerning the availability and nutritional benefits of the program available in appropriate translations?
 |
|  |  |  | 1. Are invoices for food purchases available?
 |
| Explain any “no” responses: |
| **Corrective Action and Follow-up Plan** |
| [ ]  No Findings [ ]  Findings – Corrective Action Required (see below)Violations[ ]  Meal pattern requirements not met[ ]  For OVS sites, note if complete meals are not offered[ ]  No point of service (POS) or meal count sheet not completed properly.[ ]  Records not maintained (three years and the current year)[ ]  Adult meals included in count of meals served to children[ ]  And Justice for All Poster not displayed[ ]  Other finding (please explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Corrective Action Plan: |
| I certify that the above information is correct:SFA reviewer's signature Date Site supervisor's signature Date  |
|  **SFA Use Only:** [ ]  Follow-up Required [ ]  Update NCDPI SSO application |
|  |