

Review Forms



Loria Hunter, Education Specialist
2023 New Managers' Training
July 18, 2023
ALSDE CNP School Programs



7CFR 210.8(a)(1)

Every school year, each school food authority **with more than one school** shall perform no less than one on-site review of the counting and claiming system and the readily observable general areas of review cited under [§ 210.18\(h\)](#), as prescribed by FNS for each school under its jurisdiction.

General Areas of Review

- Free and reduced-price process
- Civil Rights
- Competitive foods
- Potable water available
- Food Safety
- Reporting and recordkeeping
- Program outreach
- Professional Standards
- Local School Wellness

7CFR 210.8(a)(1)

The on-site review shall take place prior to February 1 of each school year.

Further, if the review discloses problems with a school's meal counting or claiming procedures or general review areas, the school food authority shall: ensure that the school implements corrective action; and, within 45 days of the review, conducts a follow-up on-site review to determine that the corrective action resolved the problems.


7CFR 210.8(a)(1)

Each on-site review shall ensure that the school's claim is based on the counting system authorized by the State agency under [§ 210.7\(c\) of this part](#) and that the counting system, as implemented, yields the actual number of reimbursable free, reduced price and paid meals, respectively, served for each day of operation.


On Site School Review

Programs Observed

- NSLP (National School Lunch Program) and/or
- SBP (School Breakfast Program)



Alabama Department of Education
Child Nutrition Program



NATIONAL SCHOOL BREAKFAST AND LUNCH PROGRAMS
On-Site School Review for LEAs

According to 7CFR 210.8(a)(1), every school year, prior to February 1, each School Food Authority (SFA) with more than one school (as defined 7 CFR Part 210.2 to include Residential Child Care Institutions (RCCIs)) must perform no less than one on-site review of the lunch counting and claiming system employed by each school under its jurisdiction.

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

If the review discloses problems with a school's meal counting or claiming procedures, 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.

The Alabama Department of Education Child Nutrition Program State Agency encourages schools to begin reviews in a timely manner in order to meet the required deadline of February 1st. The goal is to review SBP and NSLP in the same day.

Program(s) Observed: NSLP SBP

SFA Name _____ Agreement Number _____

School Name _____ School Enrollment _____ Date of Review _____

ADA NSLP: _____ ADA SBP: _____

NSLP Participation %: _____ SBP Participation %: _____
(NOTE: NSLP% and SBP% is the average of the last 3 months percent participation)

	Yes	No	N/A
I. Application Approval			
1. Are applications approved at the central office of Child Nutrition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of approving official: _____			
2. Are all applications on file correctly approved or denied?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II. Direct Certification			
1. Does the school correctly utilize direct certification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If YES, is required documentation maintained at district level?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III. Master Roster			
1. Is a Point of Sale (POS) roster used in the meal count system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do names listed on the master roster match approved applications on file and on the direct certification list?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. If more than one roster is used (i.e. master roster/ticket issuance roster/ food service line roster/ paper rosters), are all rosters the same format?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is a current eligibility list kept up-to-date and used by the meal count system to provide an accurate daily count of reimbursable meals by category (free, reduced price, paid)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the POS roster reconcile with the school's student enrollment roster and reflect eligibility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

On-Site School Review Form for LEAs
August 2016

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Meal Count System

- Accurate counts
- Following approved meal count procedures
- POS counting
- Reimbursable meals/non reimbursable meals
- Prevent overt identification of F/R students
- Back up system/procedures in place
- Meals claimed by category > F/R/P approvals
- Meals claimed > the attendance adjusted eligible by category

	Yes	No	N/A
IV. Meal Count System (as determined by observation of the meal service).			
1. Does the meal count system produce an accurate count of reimbursable meals by category (i.e. free, reduced price, paid) served to eligible children?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are the approved meal count procedures implemented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(a) Are meal counts taken at the point of meal service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Are only meals that meet meal pattern requirements counted and claimed for reimbursement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Does the meal count procedure in use ensure that only one meal per child per meal service is claimed for reimbursement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the meal count system prevent overt identification of children receiving free or reduced price meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the person responsible for monitoring meals correctly identifying reimbursable meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is someone trained as a backup for the monitor and the meal counter (i.e., substitute cashier)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are there procedures for meal counting and claiming when the primary counting and claiming system is not available and do staff know when and how to implement it?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Is the school correctly implementing policies for handling the following (as applicable):			
(a) Incomplete Meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Second Meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Charged and/or prepaid meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Offer vs Serve?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) Adult and non-student meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) A la Carte?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(g) Student worker meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(h) Field Trips?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(i) Lost, stolen, misused, forgotten or destroyed tickets, tokens, IDs, PINs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(j) Visiting student meals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. 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?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
V. Meal Counting, Recording, and Edit Checks			
1. For any day during the review month, does the number of lunches claimed by category (i.e. free, reduced-price, and paid) exceed the number of approved free, reduced-price, and paid eligible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If YES to number 1, is there an acceptable reason why the number exceeded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was documentation maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. For any day during the review month, does the number of lunches claimed exceed the attendance adjusted eligible by category (i.e. free, reduced-price, and paid)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If YES to number 2 is there an acceptable reason why the number exceeded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was documentation maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reimbursable Meal and Production Records

	Yes	No	N/A
3. 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 for reimbursement is made?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the cash reconciliation verified and signed by another staff member? (Two people must sign documenting cash received.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is the end of the day computer generated report or a copy reconciliation sheet attached to this review?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Record today's meal counts by category and compare to the number of students eligible by category.

Total Number of Students Approved by Category	Today's Total Meal Counts by Category
Free: _____	Free: _____
Reduced Price: _____	Reduced Price: _____
Paid: _____	Paid: _____

VI. Reimbursable Meals and Production Records, Signage			
1. Does the school follow the menu plan as approved and published?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the menu as planned meet all of the meal requirements for a reimbursable meal?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are all food items and condiments listed on the production record?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Do all production records include:			
(a) serving size?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) amounts planned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) amounts prepared?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) amounts used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) leftovers (if any)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) how leftovers were handled or dispersed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are production records accurate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Do production records document sufficient amounts of prepared food to meet the requirements for reimbursable meals for the number of meals claimed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the school have proper signage displayed? (menus, required OVS signage, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VII. Civil Rights			
1. Based on observation, was meal service provided without separation by age, race, color, national origin, sex or disability in the eating area, serving line, and assignment of eating periods?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the 'and Justice for All' poster prominently displayed in the dining/serving area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VIII. Competitive Foods/Wellness Policy			
1. Are only allowable foods sold during the meal service in the food service area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are vending machines available for students outside the cafeteria? If yes, where?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is school in compliance with the State Board of Education's policy on competitive foods?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the exempt fundraising form signed by the principal and on file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Following menu
- Meal requirements met
- Food and condiments listed on production record
- Production record complete and accurate
- Signage displayed (menus, OVS, CR)
- Competitive Foods/Wellness Policy

Meal Service Observation

- Serving line set up
- TCS
- Overall appearance of cafeteria and serving line
- Menu items last throughout meal service
- Batch cooking
- Use of standardized recipes
- Correct serving utensils
- OVS

HACCP/Equipment

- Storage areas clean and organized
- Temperature log
- Food/supplies 6" off floor
- Health inspection reports
- Pest/rodent free

	Yes	No	N/A
IX. Observation of Meal Service			
1. Is serving line set up properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the food aesthetically appealing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are serving lines clean and well maintained throughout meal service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are hot foods served hot and cold foods served cold?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is the overall appearance of the cafeteria clean and inviting; and does it encourage participation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are students offered all menu items from first to last student served?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Are food items batch cooked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are standardized recipes being followed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Are correct serving utensils used to ensure required portion sizes for each age group?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. If OVS, are students allowed to decline items?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
X. HACCP/Equipment			
1. Is HACCP manual available and being followed by staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is dry storage area clean and organized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is dry storage temperature log maintained and indicative of proper temperatures? Record today's dry storage temperature: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does inventory indicate FIFO method is being used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are coolers clean and organized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are cooler temperature logs maintained and indicative of proper temperatures? Record today's cooler temperature(s): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Is freezer clean and organized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Is freezer temperature log maintained and indicative of proper temperatures? Record today's freezer temperature: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Is food in all storage areas being stored at least 6 inches from the floor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Have there been 2 health inspections within the last 12 months? Record scores of 2 most recent inspections: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Do food service areas, storage areas and kitchen area appear to be pest free?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Is all equipment in good working order?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Is equipment being used and cleaned properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Is Equipment Replacement Plan developed and on file for this site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments/Concerns Based on Observation:			

_____ Manager's Signature		_____ Principal's Signature	
_____ Director's Signature		_____ Date	

Results of Review and Corrective Action

- Identify issues and actions needed to bring in compliance
- Follow up within 45 days

	Yes	No	N/A
VII. Results of Review			
1. Is a corrective action plan required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is a follow-up review required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VIII. Comments, Notes, and Observations During the Review			
<hr/> <hr/> <hr/>			
IX. Required Corrective Action (follow up within 45 days)			
<hr/> <hr/>			
Specify date by which corrective action(s) will be implemented: _____			
_____	Signature of Reviewer	_____	Date
_____	Signature of Manager	_____	Date
X. Follow Up Visit (must be conducted within 45 days if corrective action was required):			
Observation of corrective action implementation:			
<hr/> <hr/> <hr/>			
_____	Signature of Reviewer	_____	Date
_____	Signature of Manager	_____	Date
_____	Signature of Principal	_____	Date
Keep with your program documents. Do not send to the state agency.			
If you have more than one site, please remember on-site reviews must be completed annually by February 1st.			
On-Site School Review Form for LEAs August 2016			

USDA Non-Discrimination Statement

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This institution is an equal opportunity provider.

*This language was added pursuant to the May 5, 2022, USDA memorandum. However, the inclusion and applicability of this language is currently under challenge in the matter of *The State of Tennessee, et al. v. USDA, et al.*, Case No. 3:22-cv-00257, and may be subject to change.