

SEAMLESS SUMMER OPTION (SSO) ON-SITE REVIEW

Every Seamless Summer Option (SSO) site must be reviewed. Nationwide waiver allows this monitoring form to be completed as a desk review for 21-22 SY. Best practice is to monitor on-site.

Site Name _____

Review Date: _____

Name of Reviewer: _____

Meal observed: _____

Site Type: Open Restricted Open Closed Enrolled Migrant Camp

Number of meals prepared for site: _____

Number Served on day of review: _____

Offer versus Serve: Yes No

| Meal Counting and Claiming | Yes | No | N/A | Comments |
|---|-----|----|-----|----------|
| 1. Is the method used for counting reimbursable meals in compliance with the approved point of service requirement? (Meal counts must be taken at the location where complete Meals are served to children.) | | | | |
| 2. Is the point of service meal count used to determine the site's claim for reimbursement? | | | | |
| 3. Is the person responsible for monitoring meals correctly identifying reimbursable meals and distinguishing them from non-reimbursable meals? | | | | |
| 4. Is the site correctly implementing policies for handling the following (as applicable): | | | | |
| • Ala Carte? | | | | |
| • Adult and non-student meals? | | | | |
| • Field Trips? | | | | |
| • Incomplete meals? | | | | |
| • Offer vs. Serve? | | | | |
| • Second meals? | | | | |
| 5. Are only meals that meet meal pattern requirements counted and claimed for reimbursement? | | | | |
| 6. Are the meal counts on the day of review similar to the meal counts from the previous 5 days? | | | | |
| • Average meal count from the previous 5 days: _____ | | | | |
| 7. Is someone trained as a backup for the monitor and the meal counter? | | | | |
| 8. Backup System: | | | | |
| • Does the site have a backup counting system in case of mechanical failure of an automated system? | | | | |
| • Do staff know when and how to implement it? | | | | |
| 9. Are daily meal counts correctly totaled and recorded? | | | | |
| 10. If claims are combined, are the meal counts correctly totaled and consolidated? | | | | |
| Meal Planning/Food Production | | | | |
| 11. Do meals offered meet the meal pattern requirements for the age/grade group being served? | | | | |
| 12. Do meals follow the menu as planned and are production records available and properly completed? | | | | |
| 13. Are Special Dietary Needs forms on file for modified meals? | | | | |

| Food Safety | Yes | No | N/A | Comments |
|---|-----|----|-----|----------|
| 14. If the site is a school, were two food safety inspections conducted? | | | | |
| <ul style="list-style-type: none"> If "Yes", is the most recent food safety inspection report posted in a location available to the public (front office, drop off area, etc)? | | | | |
| 15. Are required temperature logs available and up to date? | | | | |
| 16. Is a copy of the Sponsor food safety plan available at each meal service site? | | | | |
| Compliance with Civil Rights Requirement | | | | |
| 17. Is the "And Justice for All" poster posted in a prominent location and visible to all program participants? | | | | |
| Multiple Meal Distribution | | | | |
| 18. Does this site provide multiple meal distribution? (If "Yes", please complete questions 19-24) | | | | |
| 19. Does site have edit checks in place to make sure children are not getting duplicate meals? (Students can only receive one meal per meal type, per day) | | | | |
| 20. Are time temperature controls in place for outdoor distribution? | | | | |
| 21. Are multiple meals distributed with ALL food components in the minimum amount required? | | | | |
| 22. Are multiple meals being counted at the point of service? | | | | |
| 23. Are the number of meals per distribution correctly calculated on meal count form? | | | | |
| 24. Are meals claimed in the month they are intended for? (If a meal distribution overlaps two months, the meals must be claimed separately in each month they are intended for) | | | | |

Seamless Summer Option (SSO) Corrective Action Plan

Corrective Action Plan (for all "no" answers):

Corrective Action Plan Due Date:

Sponsor Reviewer Signature, Title, Date:

Site Representative Signature, Title, Date:

SSO Follow-Up Visit (must be conducted within 45 days if corrective action was required)

Observations of corrective action implementation:

Sponsor Reviewer Signature, Title, Date:

Site Representative Signature, Title, Date:

This institution is an equal opportunity provider.