**SY 2022 Administrative Review Checklist**

**Requested Documents to Submit as part of the Desk Audit Process**

**Instructions: Please submit the following documents electronically through CNPWeb:** [https://me.cnpus.com/cnp/Login](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fme.cnpus.com%2Fcnp%2FLogin&data=04%7C01%7CMichele.Bisbee%40maine.gov%7C823c55845c7849a1c67b08d973336e0c%7C413fa8ab207d4b629bcdea1a8f2f864e%7C0%7C0%7C637667487002859242%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=fNFdnEPL%2FBQPt2wMxzTlPdIFCou2hlQh5zYc1eeRDBI%3D&reserved=0). **“Review period” requests information for the review period indicated. The “week of review” pertains to the week chosen for menu documentation. All timeframes will be communicated by your reviewer.**

**District Information**

* Documentation of annual civil rights training for SY 2022 (including date, agenda, sign in sheets) for all staff with responsibilities in the school nutrition program.
* Copies of most current on-site monitoring forms for all schools, for all programs operated (breakfast, lunch, FFVP and After School Snack Service, if applicable) *On Site Monitoring is not required for a District with only one school.*
* A copy of the district’s most recent assessment of the Wellness Policy (if available)

**Meal Access and Reimbursement -** *For confidentiality reasons please blackout any student information before sending*

* Verification notification letters – initial notification, follow up (if needed), final notification
* Meal counts by day, for the **review period** for all schools. *If using tic sheets all tic sheets for the review period will need to be submitted to validate the claim.*
	+ One additional month of meal counts will be requested from the reviewer. For this month only the monthly consolidated form will be requested.
* Documentation to verify the most recent claim for reimbursement. This includes all back up documentation used to file the claim for reimbursement. One additional month will be selected. This will be communicated by your reviewer.

**Meal Pattern**

* Breakfast and lunch menus for the **week of review** and all supporting documentation. This includes completed production records for 5 consecutive days, along with corresponding recipes, Child Nutrition (CN) labels and other product labels. Labels must be photocopies or photographs of the original, not printed labels from the manufacturer or distributor. Labels must also show the nutrition facts and ingredients.

**Resource Management**

* Documentation of itemized program revenues (subsidies received, a la carte, meal sales and town appropriation if applicable) for the **review period**
* Documentation of itemized program expenses (food, labor and other costs) for the **review period**.

**General Areas**

* Photo of “And Justice for All” poster in its location at all reviewed school(s)
* Photos of reimbursable meal signage for breakfast and lunch at reviewed school(s) in display location
* Copies of the Standard Operating Procedures (SOP’s) requested in the Desk Audit Questionnaire
* Photo of recent health inspection report at reviewed school(s) in display location
* Copies of temperature logs for the **review period**- refrigerators, milk coolers, freezers, and food temperatures (if not recorded on production record)
* Photos of all storage areas in reviewed schools- dry storage, coolers and freezers
* Photos of vending machine items and a la carte in all reviewed schools (if applicable)
* Photos of calories posted for all prepackaged items
* Food fundraiser example (if applicable)
* FFVP menu for the **review period** (if applicable)
* Afterschool Snack menu for the **review period** (if applicable)
* Production records for Afterschool snacks served during the first week of the **review period** (if applicable)

*Your reviewer my request additional documentation that is needed to complete the Administrative Review*

**Verification**

1. Did the SFA attempt to directly verify any applications? *This is when an application is verified on the DC list.*
* Yes
* No
1. Is documentation maintained to demonstrate that a confirmation review took place? *A confirmation review is when a second person verifies that the selected applications were approved correctly.*
* Yes
* No
* N/A: SFA uses an electronic system for verification
1. Were the applications selected based on the Error Prone method, or other approved method? If another method was used please describe.

**Meal Components and Quantities**

1. Are you utilizing Offer vs. Serve? *Offer vs. Serve is the process that allows students to decline a specific number of food components or food items.*
* Yes
* No

If yes, please describe the process for breakfast and lunch.

1. Have School Nutrition staff been trained in Offer vs. Serve?
* Yes
* No
1. How is the potable water requirement being met? *Please note, potable water is required for lunch, and only for breakfast if served in the cafeteria.*

**Food Safety**

1. Please upload the following Standard Operating Procedures (SOP’s) into CnpWeb:
* Personal Hygiene
* Cleaning and Sanitizing Food Contact Surfaces
* Using and Calibrating Thermometers
* Washing Hands
* Hot and Cold Holding for Time/Temperature Control for Safety Foods

Please also include any new SOP’s that have been developed as a result of COVID-19.

1. Describe how often SOP’s are reviewed with all staff members
2. Where are copies of the SOP’s kept?
3. List the dates of the two most recent health inspections at the reviewed school(s):

**School 1 Name:**

Date 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School 2 Name (if applicable):**

Date 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are program foods stored at each individual school or a central kitchen? *Program foods are any foods served as part of the reimbursable meal.*
2. Review your storage areas for Buy American compliance. Are there any food components in your storage areas that do not meet the Buy American provision (not grown or processed in the United States)?
* Yes
* No

If yes, please list all foods not Buy American compliant and submit documentation to your reviewer to show that domestic alternatives were considered.

**Recordkeeping**

1. How long are program records retained for? This includes production records, meal counts, etc. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Afterschool Snack Service** [ ]  **N/A**

1. Does the SFA operate the Afterschool Snack Service through the NSLP?
* Yes
* No (if no, skip questions 34-37)
1. Describe how eligibility was determined to participate in the After School Snack Service.
2. Describe in detail the accountability system used
3. Describe how the enrichment requirement is being met.

**Fresh Fruit and Vegetable Program** [ ]  **N/A**

1. Does the SFA operate the Fresh Fruit and Vegetable Program?
* Yes
* No (if no, skip questions 39-42)
1. Describe when and how FFVP is offered to students, including times and locations (for example 10:00am in classrooms).
2. How and where is FFVP produce prepped?
3. Is the FFVP widely publicized in the school? If so, please explain how.
4. Were only allowable FFVP costs claimed for reimbursement during the **review period**?
* Yes
* No

**Special Milk Program** [ ]  **N/A**

1. Does the SFA operate the Special Milk Program?
* Yes
* No

**Smart Snacks** [ ]  **N/A**

1. Are smart snacks available for sale? This includes a la carte, vending machines, school stores, fundraisers, etc. when food is sold during the school day.
* Yes
* No (if no, skip questions 45-46)
1. Please complete the chart below. Indicate where smart snacks are available for sale (i.e. a la carte in cafeteria, vending machine in school lobby) and the entity responsible.

|  |  |
| --- | --- |
| **Location of Available Smart Snacks** | **Responsible Entity** |
|  |  |
|  |  |
|  |  |
|  |  |

1. Does the SFA hold fundraisers during the school day, where students may purchase food or beverages?
* Yes
* No

If yes, do the food or beverage fundraisers meet Smart Snacks guidelines? \_\_\_\_\_\_\_\_\_\_\_\_\_\_