

CHILD AND ADULT CARE FOOD PROGRAM

Site Monitoring Training for Sponsors of Centers





Learning Outcomes

- Discuss the importance of site monitoring
- Discuss monitoring requirements
- Provide instruction on how to conduct a site monitoring review
- Best practices





Why is Monitoring important?

- It ensures that facilities comply with CACFP requirements
- It helps identify potential problems
- It provides oversight and training to site staff





Monitoring Requirements

- What is an active site?
- New sites
- Sites operating 10-12 months
- Sites operating 4-9 months
- Sites operating less than 4 months
- FY 2015 Operational Memo #31
- Contact your Program Analyst
- No more than 6 months between reviews



How to conduct an on-site monitoring review





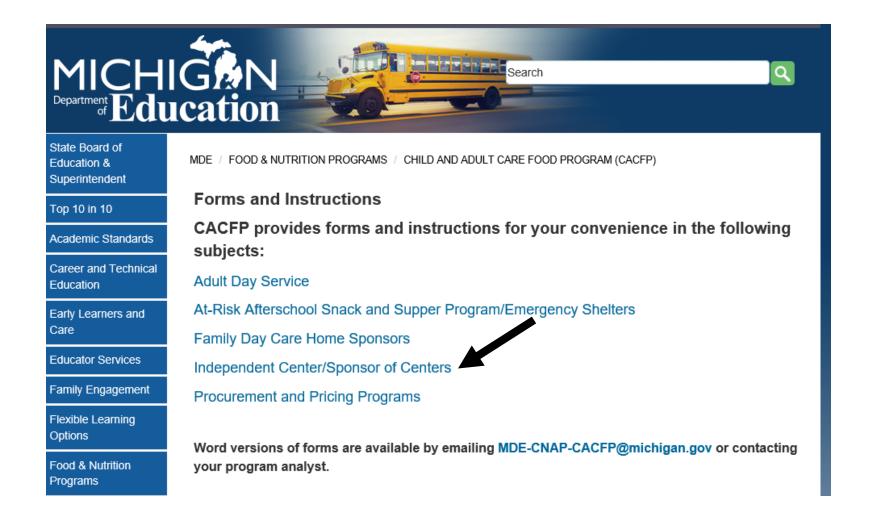
Conducting a Site Monitoring Review Location of Forms







Conducting a Site Monitoring Review







Conducting a Site Monitoring Review

Sponsors of Centers

Permanent Agreement - Sponsor or Unaffiliated Center for CACFP

For questions regarding the following forms, please contact your Program Analyst:

Monitoring Form for Sponsors of Centers

(Use this for the following program or when you have combination programming: Child Care - including GSRP and Head Start, Emergency Shelter, At-Risk Afterschool)

· Monitoring Form for Sponsors of Centers with Adult Day Services

(Use this for the following program or when you have combination programming: Child Care - including GSRP and Head Start, Emergency Shelter, At-Risk Afterschool, Adult Day Services)

Monitoring Form for Sponsors of At-Risk Afterschool Programs ONLY

(If you have a facility that operates both a child care program and at-risk program at the same facillity then you should NOT use this form)

Additional Room Worksheet for Meal Observation

(Use this form if the site you are reviewing has additional rooms that need to be reviewed as part of your monitoring review)

Five-Day Meal Count Reconciliation Attachment A

(Use this form if enrollment is higher than 70 participants)

· Monitoring Tracking Tool is available upon request.





Conducting a Site Monitoring Review General Information

		Chi Monitor This monitor GSRP and H						
□ Anno	unced 🗖 Unar	nnounced			Meal	Obser	ved:	
Approv	ed Meal Service Tir	nes from MEGS	S+ Application:					
BreakfastAM SnackLunchPM Snack						Supper		Evening Snack
Sponsor Name and Agreement #: Date:					Arrival Time:			
Facility Name and Address:					License or MEGS+ Site #:			
			REVIEW A	REAS		'		
	Section	100. Genera	al Information		Yes	No	N/A	Comments
Licensii	ng							Harris and the Harr
The facility's license is current.								License expiration date:
The facility is within its licensed capacity.								License capacity:
Progran	n							
103	The facility offers day.	drinking water	to participants thro	oughout the				





Conducting a Site Monitoring Review Training and Civil Rights

	Section 200. Training	YES	NO	N/A	Comments
201	NEW FACILITIES/NEW STAFF: Staff have received training from the sponsor prior to CACFP operations/responsibilities.				
202	The facility conducted annual CACFP training for all key staff.				₹
203	Sponsor training documentation includes:				
	date(s)location(s)topicsnames and/or signatures ofparticipant(s)				
	Section 300. Civil Rights	YES	NO	N/A	Comments
301	The sponsor has ensured there is no separation by race, color, sex, age, disability or national origin in the classroom, eating areas, seating arrangements, program administration, or instructional records.				
302	Potentially eligible persons and households have an equal opportunity to participate in CACFP.				
303	The current USDA "And Justice for All" poster is displayed in a conspicuous location.				
304	The current USDA nondiscrimination statement is on all materials such as applications, pamphlets, forms or other program materials distributed to the public and on websites.				
305	Front-line facility staff have been trained on civil rights requirements and can verbalize action to take if a parent/guardian/participant desires to file a complaint against the food program.				





Conducting a Site Monitoring Review Records and Record keeping

	Section 400. Records and Recordkeeping	YES	NO	N/A	Comments
401	A daily count is maintained for all meals served to adults who work in the program.				
402	The facility claims no more than 2 meals/1 snack or 1 meal/2 snacks per participant per day. (Does not apply to emergency shelters or at-risk programs)				
403	Emergency Shelters only: The shelter claims no more than 3 meals (breakfast, lunch, supper) or 2 meals/1 snack per participant per day.				
404	At-Risk Programs: The program claims no more than one snack and one meal per participant per day.				
405	Meals are only claimed for a participant within the CACFP age requirements: 12 years old or younger in licensed childcare facilities 15 years old or younger if the children are migrant 18 years old or younger for At-Risk programs No age restrictions for persons with mental or physical handicaps enrolled in a facility serving a majority of 18 years of age or younger.				
406	Facility daily attendance records are maintained.				
407	Meal attendance is taken at the point of service.				
408	Meal attendance records are available and up to date.				





Conducting a Site Monitoring Review Menus

Review	Section 500. Menus the current menu and answer the following questions:	Yes	No	N/A	Comments
501	Menu(s) meet program requirements and include: month, date and specific components.	-			-
502	Menu(s) are available for meals claimed.				
502a	Infants (0-5 months, 6-11 months)		3		
502b	Children 1 year of age or older				
503	Nutritional labels and/or product formulation statements have been verified to support meal pattern requirements.				
504	There is a procedure in place for site staff to record menu substitutions. Provide simple explanation of procedure in the comments.				
505	100% juice is limited to one meal/snack service per day, even when serving different participants.				
506	At least one serving of grains per day is whole grain or whole grain-rich.				
507	Grain based desserts are not served as creditable components at meals/snacks.				
508	A meat/meat alternate was not served more than 3x weekly to replace the entire grain component at breakfast.				
509	Yogurt contains no more than 23 grams of sugar per 6 ounces.				
510	Breakfast cereals contain no more than 6 grams of sugar per dry ounce.				
511	At lunch and supper at least 1 vegetable and 1 fruit or 2 vegetables are served.				
512	Unflavored whole milk is served to children ages 1-2 years old.				
513	Unflavored low-fat milk is served to children ages 2-5 years old.				
514	CACFP Request for Special Dietary Needs Accommodations forms are available to participants with medical or other special dietary needs.				
515	CACFP Request for Special Dietary Needs Accommodations forms are available to participants receiving nutritionally equivalent milk substitutions.				
516	The facility offers formula and developmentally appropriate foods to infants.				
517	An Infant Formula/Food Sign-off form is on file for each child when the parent provides formula, breast milk or infant foods.				



Conducting a Site Monitoring Review Meal Observation

Section 600. Meal Observation											
Check meal observed:											
601 1 to 1	3 Year Olds	60	2	Infants							
Required Components	Specific Food Item	ıs	Required	Components	0-5 months specific food items	6-11 months specific food items					
Milk (specify: Milk % and flavor)				fortified∑ Breast Milk							
Meat/Meat Alternate				ed Infant Cereal eat Alternate							
Vegetable			*Veget	able/Fruit							
Fruit or 2 nd Vegetable (lunch and supper only)			*(Grain							
Grain			0	ther							
Other				*Items required a	as developmentally ap	propriate					

Record the number	ecord the number of participants observed at meal service:										
Room									Comments		
Participants											
Program Adults											
Point of Service											
Milk Variety-%											
	*If there are more than 8 classrooms complete the Additional Classroom Worksheet										

	Section 600. Meal Observation (continued)	YES	NO	N/A	Comments
Based o	on the meal(s)/snack(s) observed:				
603	Minimum portion served met meal/snack requirements for age groups. If no, the meal/snack cannot be claimed.				
604	Procedures are in place to ensure minimum portions are served. Please explain in comments. Ex. measuring cups, single serve portions, productions records, etc.				List procedure(s) used at site to ensure minimum portions are served:
605	Meal/snack served met the appropriate meal pattern for food components and for age served. If no, the meal cannot be claimed.				
606	Meal/snack served was the same as indicated on posted menu for the day.				
606b	If no, the change was documented.				1
607	The meal/snack served is within the approved meal service times approved in the MEGS+ application.				
608	Meal attendance was taken at the point of service during meal observed. If no, the meal cannot be claimed.				
609	Was the appropriate variety of milk served to each age group?				
	Birth to age 1: formula or breast milk				
	 Children age 1-2: Unflavored whole milk 				
	Children 2-5: Unflavored 1%, ½%, or fat free (skim)]
	 Children 6 and older: Unflavored or flavored 1%, ½% or fat free (skim) 				
610	At-Risk After School programs: Offer vs. serve option used correctly. (At-Risk and Adult Day Service Programs Only)				





Conducting a Site Monitoring Review Health and Safety

	Section 700. Health and Safety	YES	NO	N/A	Comments
701	Were imminent threats to the health and safety of participants observed? If a threat was observed, describe in comments. Immediately notify the appropriate state of local licensing and health authorities and take action that is consistent with the recommendations and requirements of those authorities. Attach documentation of the agency contacted and the date of contact.				





Overcapacity and Health and Safety Issues

Complaints? Who to contact	For Unlicensed	For Licensed	
For Neglect & Abuse	Call Centralized Intake for Abuse & Neglect at 855-444-3911 and complete DHS-3200 form	Call Centralized Intake for Abuse & Neglect at 855-444-3911 and complete DHS-3200 form	
For Overcapacity/Health & Safety Issues	Email the complaint to MDE @ mde-cnap- cacfp@michigan.gov	Complete the Online Complaint Form @ www.michigan.gov/bcalcompla ints	
	vive Services (CPS) and Adult Protective Se 6) has established this to ensure consistenc ays per year lect is 855-444-3911.		ocumented and assigned for investiga
To file a complaint for licensed fa 1. go to www.michigan.gov/bealcomplaint 2. Scroll down to the section on how to fil 3. Complete the form, print before submis 4. Submit the complaint	s le a complaint and click into "on line compla	int form'	
To file a complaint for unlicensed 1. Send an email to mde-cnap-cacfp@micl	facilities involving over capacity: higan.gov		
To complete the DHS-3200: 1. Go to www.michgian.gov/dhs 2. Click into Forms and instructions and of the complete the DHS-3200 form 4. Mail, Fax for Email the completed form at Mail to: Centralized Intake for Abuse & 5321 28th Street, S.E. Grand Rapids, MI 49546 b. Fax to: 616-977-1154 or 616-977-1158			



Conducting a Site Monitoring Review Enrollment

	Section 800. Enrollment (Not applicable for At-Risk programs and emergency shelters)	YES	NO	N/A	Comments
If not	applicable, check N/A and skip this section				
801	Current enrollment documentation is on file for each participant.				
802	Enrollment forms are updated annually.				
803	Participant Name Dated participant, parent, or legal guardian's signature Normal days and hours in care Meals normally received while in care Explain in comments if a form requirement is missing.				poster pamphlet_letter
804	Are enrolled participants informed of WIC benefits? If yes, provide how they are informed in the comments section.				other:
805	The Parent Information Sheet is distributed to enrolled participants.				





Conducting a Site Monitoring Review Meal Count Reconciliation

	Section 900. Meal Count Reconciliation	YES	NO	N/A	Comments					
Select w	hich Five-Day was completed for this monitoring review:									
	Complete the Five-Day Aggregate Reconciliation form to determine whether the reported meal counts are consistent with daily attendance and enrollment for all meal types for the selected five-day operating period. **Pick either the 5 previous days of consecutive food service from the monitoring review or 5 consecutive days from the previous month**									
	Complete the Five-Day Meal Count Reconciliation-Attachment A form if meal counts cannot be reconciled with enrollment or attendance data easily (too many classrooms at the facility) OR there are unexplained discrepancies. Select a random sample of at least 10% of the total enrollment, with a minimum of five participants to reconcile. This alternate reconciliation can only be done if there are enrollment documents and the meal attendance is taken by participant name. **Pick either the 5 previous days of consecutive food service from the monitoring review or 5 consecutive days from the previous month**									
	Total enrollment:10% or 5, whichever is greater:									
	If enrollment is higher than 70 participants, the Five-Day Meal C CACFP website must be used, instead of the Attachment A below would be required to be completed.									
901	Do enrollment, daily center attendance, and meal attendance reconcile? If there are discrepancies between the number of participants present and the number of participants claimed, explain.									
902	Compare the number of participants present during the meal observation to the number of meals claimed during the five days in the reconciliation. Do the numbers compare? If not, is there a reasonable explanation?									
**A	completed 5-Day Meal Count Reconciliation (Aggrega at each site monitoring rev			r Atta	chment A) is <u>required</u>					





Conducting a Site Monitoring Review Five- Day Aggregate Reconciliation

	Fiv	e-Day	Aggrega	te Mea	Count	Recon	ciliation			
Instructions: Complete each field in chart below. The site's total enrollment includes all participants who have documentation of enrollment at the site and have attended at least once during the current month.										
The monitor will complete the fields for the meal viewed on the day of the monitoring review. If no meal is observed during the monitoring review, complete the fields with the meal served closest to the time of review. To complete the five-day reconciliation chart, review the previous 5 consecutive days of programming where food service was provided (DO NOT include the day of the monitoring review). List the total number of children in attendance (daily/program) under # of participants in attendance, and the total number of children marked for a specific meal under each meal count (MC).										
Note whether there are discrepancies and provide detail in Section 900 of the review form. If discrepancies are identified and there are not verifiable explanations, a Five-Day Reconciliation (Attachment A) MUST be completed.										
Sponsor Name: Agreement #:										
Provider Nan	ne:				License	#:		License Ca	pacity:	
Site's Total E	inrollment:	Observed N	1eal Date:	Observed Meal Type:			Attendance	Monitor MC	Site MC	
Date	# of participants in attendance	Breakfast MC	A.M. Snack MC	Lunch MC	P.M. Snack MC	Supper MC	Evening Snack MC	Discrepancies		
								Yes	□ No	
								Yes	□ No	
								Yes	□ No	
								Yes	□ No	
								Yes	☐ No	

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Discrepancies/Disallowances:



Conducting a Site Monitoring Review Attachment A

Five-Day Meal Count Reconciliation-Attachment A																			
														1	Page	<u> </u>	of	·	
© Today's Date:	3 D	ate	3 Day of Week					Complete Page Number. Complete today's date, sponsor name, provider name and license number.											
Sponsor:								 Φ Insert the days of the week and corresponding dates chosen for the five-day reconciliation (day of monitoring review cannot be included Θ Insert each participant's name from the meal attendance. 								luded).			
Provider's Name:								five-day reconciliation (day of monitoring review cannot be include O Insert each participant's name from the meal attendance. O Mark the meal types recorded for each participant from the mea attendance records for the five-day reconciliation period. O Check if participant was in attendance for those five days. List fidaily attendance records the participant's time in and time out. The include if the participant left and came back (ex. school, doctor ap O Using each participant's enrollment form, compare the days, the								st from			
License #:								Ins	include if the participant left and came back (ex. school, doctor appt.). © Using each participant's enrollment form, compare the days, the meals, and the times the parent/guardian indicated the participant should participate with their meal attendance records to see if they match for the five-day reconciliation.). eals,					
		⑤ Meal Attendance ⑥						6	Daily Attendance					② Enrollment Form					
⊕ Participant	t Day		Day ts g	£	ا الله الله ا	Snack		411		me in a					n match attendance?				
Name	Day	Breakfast	AM Snack	Lunch	PM Snack	Supper	X. Sng	Yes	No No	In A	AM Out	In F	Out	Yes	ay No	Me Yes	eal No	Yes	me No
	Day 1																		
	Day 2																		
	Day 3																		
	Day 4																		
	Day 5																		
	Day 1																		
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	Day 4	<u> </u>						_						_					
	Day 5																		





Meal Count Reconciliation

	Section 900. Meal Count Reconciliation	YES	NO	N/A	Comments					
Select which Five-Day was completed for this monitoring review:										
	Complete the Five-Day Aggregate Reconciliation form to determine whether the reported meal counts are consistent with daily attendance and enrollment for all meal types for the selected five-day operating period. **Pick either the 5 previous days of consecutive food service from the monitoring review or 5 consecutive days from the previous month**									
	Complete the Five-Day Meal Count Reconciliation-Attachment A form if meal counts cannot be reconciled with enrollment or attendance data easily (too many classrooms at the facility) OR there are unexplained discrepancies. Select a random sample of at least 10% of the total enrollment, with a minimum of five participants to reconcile. This alternate reconciliation can only be done if there are enrollment documents and the meal attendance is taken by participant name. **Pick either the 5 previous days of consecutive food service from the monitoring review or 5 consecutive days from the previous month**									
	Total enrollment:10% or 5, whichever is greater:									
	If enrollment is higher than 70 participants, the Five-Day Meal Count Reconciliation-Attachment A, found on the CACFP website must be used, instead of the Attachment A below. This has additional participant name fields that would be required to be completed.									
901	Do enrollment, daily center attendance, and meal attendance reconcile? If there are discrepancies between the number of participants present and the number of participants claimed, explain.									
902	Compare the number of participants present during the meal observation to the number of meals claimed during the five days in the reconciliation. Do the numbers compare? If not, is there a reasonable explanation?									
A completed 5-Day Meal Count Reconciliation (Aggregate and/or Attachment A) is <u>required</u> at each site monitoring review										





Conducting a Site Monitoring Review

	Section 1000. Previous Reviews and Findings	YES	NO	N/A		
1001	There were findings from previous review. If yes, list:					
Previou	s findings:					
1002						
	Finding from previous review were corrected.	\perp				
1003	Has there been a change to the facility's administrative staff? rize all findings and recommendations for corrective a					
Summa	rize all findings and recommendations for corrective a	CLION	-			
	*Attach any documentation/procedures put in place	to co	rrect	findir	ngs.	
N	Finding(s) Technical Assistance provided to staff		Corre	ctive	action by site is	s required
Monitor S	ignature:				Date:	
Site Representative Signature:Date:						
Monitorin	g Review form has been checked for completeness by:				Date:	
						Rev. 6/2019





Best Practices

- Designate staff member to oversee monitoring reviews
- Monitoring tool recommended
- Complete all reviews unannounced
- Include a meal observation during all reviews
- Review forms for accuracy and completeness





Operational Memos

- FY 2015 Operational Memo #31- Monitoring Requirements for Sponsors of Centers and Homes
- FY 2015 Operational Memo #27 Household Contacts
- FY 2013 Operational Memo #35 Monitoring of License Requirements in The Child and Adult Care Food Program
- FY 2011 Operational Memo #7 Varied Timing of Unannounced Reviews in the Child and Adult Care Food Program





Questions?

Contact the Michigan Department of Education Child and Adult Care Food Program

Phone: 517-241-5353

Email: MDE-CNAP-CACFP@michigan.gov

Website: www.michigan.gov/cacfp

