2019 SFSP Program Assessment Form   New York State Education Department

Please complete and submit this Summer Food Service Program (SFSP) Program Assessment Form by June 1, 2019. If you operate multiple sites, and the food service systems vary from site to site, complete and attach additional sheets of paper describing each site's systems.

Sponsor Name:
Sponsor LEA code:

Sponsor Responsibilities:
1. Where are the following records maintained on site and available for immediate review?

Income Applications/Roster (if applicable)	
Menu	
Meal Count Records	
Production Records	
Health Inspection Reports	

2. How does the sponsor ensure at least one trained supervisor is present during the entire meal service for all approved meals?

3. How will the sponsor update SED/CNMS of meal time changes by 2pm the day prior to the change taking place? Who will do this?

4. How will the sponsor ensure SED is notifeid of all field trips 48 hrs. prior to meal service? Who will complete this online in CNMS or send the completed form to SED?

Meal Service:
1. Attach the sponsor's menus for July.

2. What is the method for serving meals at your site (s)? [Note: Buffet style is not an allowable meal service style]

      Tray Line   Pre-plate   Family Style   Pre-set

3. Describe the point of service meal count procedure and who will be overseeing this at your site(s).

4. How will the sponsor ensure meals are prepared prior to meal service and children have all required components available and are served complete reimbursable meals? How does the sponsor enure incomplete meals are subtracted from the daily meal counts and not claimed for reimbursement?

5. What types of meals are served and counted?

    First meals served to children   Leftovers (for use the next day)   Disallowed meals served
    Non-program adult meals   Program adult meals   Second meals served to children

6. Does the sponsor charge non-program adults for meals?   Yes   No
    If yes, what is the cost? _____ How many adults are served at each meal? _____

7. How many program adults are served meals at no charge? _____

8. How does the sponsor collect the site's meal count records?

9. How does the sponsor ensure that all meals are consumed on site in a congregate setting?

Food Safety
1. What procedures does the site(s) have in place for safe food preparation ie; HACCP and or Serv Safe trained staff, gloves, thermometers, temperature logs?

2. What procedures does the site(s) have in place for safe food holding?

3. What procedures does the site(s) have in place for safe food serving?

4. What procedures does the site(s) have in place for safe food storing?

Civil Rights

1. How does the sponsor ensure Civil Rights compliance (i.e. equal access, appropriate translation of Program information, nondiscrimination statement, etc.)?

2. What is the sponsor's plan to make open site(s) truly open to the community?(if applicable)

3. Have all staff received Civil Rights training?   Yes   No

    If **No** provide the date of the planned training: _____

4. Have there been any requests to provide information about the SFSP translated into another language?   Yes   No
      If YES, explain:

    Explain how the request was resolved by the sponsor:

Vended Sites Only (N/A for Universities):

1. What is the system for receiving, documenting and validating meal delivery at the site(s)?

2. What is the procedure for a breakdown in meal delivery?

3. What is the sponsor's system to monitor the participation levels at the vended site to ensure that you are not over/under ordering meals?

Closed Enrolled and Camp Sites Only:

1. Describe the regularly scheduled programming enrolled children participate in at each closed enrolled/camp site.

2. What is your system to maintain a roster and eligibility documentation of children attending the program?

3. Complete the table below (for camps only):

# of children 6 years old and younger	
# of children 7-18 years old	
# of persons 19 years or older with a disability and enrolled in a school program	

I _____ (PRINT NAME)
CERTIFY that the information on this form is true and correct and that the sponsor is aware that deliberate misrepresentation or withholding of information may result in prosecution under applicable State and federal criminal statutes.

_____
Signature of Authorized Official/Designated Representative
Date_____

Print the complete form, sign, and return to:

New York State Education Department
Child Nutrition Program/Summer Food Service Program
89 Washington Avenue, 375 EBA
Albany, New York 12234-0055 or;
email: cnsfsp@nysed.gov

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture
        Office of the Assistant Secretary for Civil Rights
        1400 Independence Avenue, SW
        Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.