Florida Department of Agriculture and Consumer Services Division of Food, Nutrition and Wellness

VII. School Breakfast Program On-Site School Review

DOACS requires this review be completed annually by February 1st.

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Sponsor Name: Miami-Dade County Public Schools	Site Name:	DANTE B. FASCELL ELEMENTARY		
Location Number 1811				
Sponsor Number: 01-0013	Date of Review:	10/2	23/2018	■ ✓
I. Master Roster				
1. Is a master roster used in the meal count system	n?	Yes	ONo	O N/A
2. Do names listed on the master roster match apprecrification list?	proved applications on file and on the direct	Yes	○ No	O N/A
3. If more than one roster is used (e.g. master ros roster), are all rosters the same format?	ter / ticket issuance roster / food service line	○Yes	○ No	● N/A
4. Are all rosters updated as required reflecting cur	rrent eligibility status?	Yes	ONo	O N/A
II. Meal Count System (as determined by obse	ervation of the meal service)			
1. Does the meal count system produce an accurat free, reduced price, paid) served to eligible children	te count of reimbursable meals by category (i.e. n?	Yes	ONo	O N/A
2. Are the approved meal count procedures implemented?			Yes	
3. Does the meal count system prevent overt ident	tification?	Yes	ONo	O N/A
4. Does the school have a trained substitute cashie	er?	Yes	ONo	O N/A
5. Does the school have a backup counting system system?	in case of mechanical failure of an automated	Yes	○ No	O N/A
III. Meal Counting, Recording, and Edit Checks	s			
1. For any day during the review month, does the reduced price, and paid) exceed the number of app		○Yes	● No	O N/A
2. If Yes, is there an acceptable reason why the nu	imber exceeded?	○Yes	ONo	● N/A
3. Was documentation maintained?		○Yes	ONo	● N/A
IV. Reimbursable Meals and Production Record	ds			
1. Does the school follow the menu plan as approve	ed and published?		Yes	○ No
2. Does the menu as planned meet all of the meal	requirements for a reimbursable meal?		Yes	○ No
3. Do infant and pre-k meals meet the updated infa	ant and pre-k meal pattern requirements?	○Yes	ONo	● N/A
4. Are production records accurate?			Yes	○ No
5. Do production records document sufficient amounts of prepared food to meet the requirements for reimbursable meals for the number of meals claimed?			Yes	
6. Does the site display the current "Justice for All" poster?			Yes	
V. Results of Review				
1. Is a corrective action plan required?		○ Yes		● No
2 Is a follow-up review required?			Ovas	

1. Does the Sponsor part Review.	icipate in USDA	Foods? If YES, please complete	the Annual Storage Fa	cility	• Yes O N	
Comments, notes and obs	ervations during	g this review.				
As of today al	l procedu	res are being foll	owed.		^	
					~	
Required Corrective Action	n (followup with	in 45 calendar days)				
					^	
					\vee	
Satisfactory	O off-	Site Visitation Required	On-Site Visitation	on Required	Required By Date	
Principal or Designee		Food Service Manager/Satel	lite Assistant			
MARGARET FERRARONE		VIRGINIA JIMENE/		JAIRO GA	Service Administrator	
Select	~	Select	~	JUNIO GA	WI COIN	

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 $[\]ensuremath{^{*}}$ Keep with your program documents. Do not send to the State Agency.