

STATE AGENCY ADMINISTRATIVE REVIEW SUMMARY

School Food Authority Name: E Stem

Date of Administrative Review (November B, 2022): Date review results were provided to the School Food Authority: 12/5/22

General Program Participation

1. What Child Nutrition Programs does the School Food Authority participate in? (Select all that apply)
 - School Breakfast Program
 - National School Lunch Program
 - Fresh Fruit and Vegetable Program
 - Afterschool Snack
 - Seamless Summer Option
2. Does the School Food Authority operate under any Special Provisions? (Select all that apply)
 - Community Eligibility Provision
 - Special Provision 2

Review Findings

3. Were any findings identified during the review of this School Food Authority?
 - Yes
 - No

REVIEW FINDINGS				
A. Meal Access and Reimbursement – Performance Standard 1				
YES	NO		Technical Assistance	Corrective Action
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Certification and Benefit Issuance	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Verification	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Meal Counting and Claiming	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Charge Policy and Unpaid Meal Procedures	<input type="checkbox"/>	<input type="checkbox"/>
Findings: 1)				
B. Meal Patterns and Nutritional Quality				
YES	NO		Technical Assistance	Corrective Action
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Meal Components and Quantities	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Offer versus Serve	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dietary Specifications and Nutrient Analysis	<input type="checkbox"/>	<input type="checkbox"/>
Findings: 1)				
C. General Program Areas				
YES	NO		Technical Assistance	Corrective Action
<input type="checkbox"/>	<input type="checkbox"/>	Resource Management	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Civil Rights	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	SFA On-Site Monitoring	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Local School Wellness Policy	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Smart Snacks in Schools	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Professional Standards	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Water	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food Safety, Storage, and Buy American	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Reporting and Record Keeping	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	School Breakfast Program and Summer Meals Outreach	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	After School Snack	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Seamless Summer	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Fresh Fruit and vegetable Program	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>
Findings: 1) Justice for All Poster was the wrong size. Corrected posters are were provided. ‘ 2) Wellness policy needed updating. 3. Needs to keep updated Buy American justification forms rather than a list from the vendor.				

Buy American Justification Form

This form is required for each foreign food product that is being served in the school child nutrition programs. The purpose of this form is to assist the district in compliance with federal documentation necessary to purchase foreign food products with child nutrition funds.

PRODUCT NAME		
PURCHASE UNIT (Example: case)		
ESTIMATED ANNUAL USAGE (How many purchase units?)		
BID COST PER PURCHASE UNIT FOR DOMESTIC FOOD PRODUCT		
BID COST PER PURCHASE UNIT FOR FOREIGN FOOD PRODUCT		
COUNTRY OF ORIGIN OF FOREIGN FOOD PRODUCT		
ESTIMATED ANNUAL COST DOMESTIC FOOD PRODUCT (Annual Usage X Bid Cost per Purchase Unit)		
ESTIMATED ANNUAL COST FOREIGN FOOD PRODUCT (Annual Usage X Bid Cost per Purchase Unit)		
IS DOMESTIC HIGHER THAN FOREIGN?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
IF YES, IS COST DIFFERENCE SIGNIFICANT?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
IF YES, WHAT OTHER ALTERNATIVES TO USING FOREIGN FOOD PRODUCTS WERE CONSIDERED?		
AFTER CONSIDERING ALTERNATIVES TO FOREIGN PRODUCT, WERE FOREIGN FOOD PRODUCTS USED?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
IF YES, EXPLAIN WHY FOREIGN FOOD PRODUCT WAS USED AND AN ALTERNATE PRODUCT WERE NOT USED		

Child Nutrition Director Signature

Date