

AGENCY MONITORING FORM

Agency Name/ID	Date
Agency Type <input type="checkbox"/> Pantry <input type="checkbox"/> New <input type="checkbox"/> Announced <input type="checkbox"/> Congregate <input type="checkbox"/> Existing <input type="checkbox"/> Unannounced <input type="checkbox"/> Kids Cafe	Code Reference: YES=All Correct NI=Needs Improvement FOS=Fixed On Site N/A=Not Applicable

<u>Compliance</u>	<u>Record Keeping</u>	<u>Comments</u>
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Membership Agreement	Keep on file!
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Four Years of Invoices	Must keep all invoices!
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Health Inspection	Only required for congregated/feeding sites
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Pest Control ___Self ___Prof.	Suggested monthly/Must keep record or log
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Justice For All Poster	Displayed for clients to see
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Prominent Door Sign w/ hours, emergency #	Hours and emergency phone number displayed
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Written Guidelines or Brochures for Services	Copies Available to keep on file
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Client Intake Forms in Secured Location	Copies Available to keep on file
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Sign-in Sheet/Meal Count Procedure	Copies Available to keep on file
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Religious/Political Meeting not required	Cannot require religious/political services

<u>Compliance</u>	<u>Physical Facilities</u>	<u>Comments</u>
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	All Food Stored at Agency Site	If food is kept at additional site OFH must approve it
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	All Products Kept Off the Floor	Must be 4-6 inches with a pallet being the minimum
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	All Food Containers Labeled or Dated	No labeled cans/Date product once it is received.
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	No Unreasonable Reserves or Hoarding	Cannot keep more than a 6 month supply
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	First In/First Out Method, Rotating	Place older product in front of new product
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Cleaning Chemicals Separate From Food	
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Storage Area Adequately Ventilated	Room temperature must be between 50-70°
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Temperature Logs Maintained Monthly	Must log temperatures on all units weekly
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Temperatures below danger zone 0°/40°	Refrigerator 36-40 degrees Fahrenheit
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	___#Refrig ___#Refrig Walk-ins	Freezer -10 and 0 degrees Fahrenheit
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	___#Freezers ___#Freezer Walk-ins	

<u>Compliance</u>	<u>USDA Commodities</u>	<u>Comments</u>
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	FD-6 TEFAP Agreement (On File)	Make sure you always have it on file!
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	FD-19D Distribution Chart (Displayed during Distribution)	Must have all TEFAP items listed for clients to see
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Current Income Guidelines	Visible for clients at each distribution
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	FD-15A Back Page Posted	Visible for clients at each distribution
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	FD-15A Signature Page Complete	Visible for clients at each distribution
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Proxy Slips Available	Available for homebound clients
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Civil Rights Wording (Visible to Clients)	"Justice For All" Poster displayed at distribution
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Food Stamp Applications Available	Optional, but encouraged
<input type="checkbox"/> Yes <input type="checkbox"/> NI <input type="checkbox"/> FOS <input type="checkbox"/> N/A	Commodities Separated from Donated Items	Must be separate from all other food

OFH Monitoring Staff Signature

ADDITIONAL COMMENTS

Does Agency Require Follow-Up Visit?

Agency Representative Signature

yes no

