



# WELCOME!

The entire staff of Provider Resources, Inc. would like to welcome you!

This manual was prepared to help you understand the paperwork involved in dealing with the food program. It is meant to supplement your training with your Home Reviewer and answer some questions you may have. Use it as a Reference Guide and keep it in a handy location. Any questions or concerns may be directed to your Home Reviewer or to the office staff by calling 781-939-9292. We are all dedicated to serving the needs of family child care providers and the children with whom they work and play.

From time to time additional information will be made available to you. Please be sure to update your manual immediately to ensure that you are always current with the latest requirements of the program.

*The Staff of Provider Resources, Inc.*

Your Home Reviewer's name is: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please send menus, enrollment forms and all other correspondence to:

**Provider Resources, Inc.  
411 Merrimack St, Suite 100  
Methuen, MA 01844**

**1-781-939-9292**

**FAX: 978-975-1980**

**Office hours: 8am – 4pm**

**Website: <http://ProviderResources.org>**

**411 Merrimack St, Suite 100 • Methuen, MA 01844 • (781)-939-9292**

## **CIVIL RIGHTS NONDISCRIMINATION STATEMENT**

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, audiotope, 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](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 you 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](mailto:program.intake@usda.gov).

This institution is an equal opportunity employer.

This project has been funded at least in part with Federal funds from the U.S. Department of Agriculture

# TABLE OF CONTENTS

<b>Introduction</b>	<b>1</b>
• Mission Statement	1
• What is Provider Resources, Inc.?	1
• What is the Child and Adult Care Food Program	1
• What's Important About Good Nutrition	2
• Does the Nutrition Program in Child Care Homes Make a Difference	2
<b>What Do You Have To Do To Participate in The Program?</b>	<b>3</b>
• How Does the Program Work	3
• Home Reviews	5
• Child Enrollment Forms	6
• Infant Meal Notification	6
• The Guidelines for Claiming Income Eligible Children	7
• Approved Assistants	7
• What are your Responsibilities	7
• Inactive Providers	8
• Moving	8
• How to Terminate	8
• Transferring from Another Program	8
<b>What is the CACFP Meal Pattern</b>	<b>9</b>
• What Foods Contribute to The Meal Pattern?	9
• Following the Meal Pattern	9
• Meal Pattern Requirements	11
• The CACFP Food Pattern	15
• Non- Creditable Foods	15
• Combination Meals	15
• Choking Prevention Guidelines	16
• Non-Creditable Foods for Infants	16
• Claiming Infant Meals	16
• Substitutions	17
• Milk Requirements	18
• Common Questions	19
<b>Good Nutrition</b>	<b>20</b>
• Sources of Vitamin A, Vitamin C and Iron	21
• Nutrients and Foods for Good Health	22
• Getting Kids to Eat	24
• Food Variety	24
• Food Preparation Tips	25
• Making Mealtime a Happy Time	25
• Introducing New Foods	25
• Encouraging Favorable Food Attitudes and Good Eating Habits	26
• Food Service Safety	26
• Food Safety	27

• How to Prevent Food Contamination	28
• How to Prevent Bacterial Growth	29
• How to Cook Foods Thoroughly	29
• Foods That May Cause Choking	30
• Washing Hands	31
<b>Provider Food Program Policies</b>	<b>32</b>
• Menu Choices	32
• Submitting Your Claim	32
• Very Important Information	32
• Payment Policy	32
• Holidays	33
• Bad Weather	33
• Training	33
<b>Other Services</b>	<b>34</b>
• Calendars	34
<b>The Tiering System of Reimbursement</b>	<b>35</b>
<b>Provider Reminder Checklist</b>	<b>38</b>
<b>Claim Information Form</b>	<b>39</b>
<b>Seriously Deficient</b>	<b>41</b>
<b>Forms</b>	<b>42</b>
• Site Agreement	42
• Permanent Agreement	42
• Annual Enrollment Update	42
• CACFP Family Day Care Home Certificate	42
• Child Enrollment Form	42
• Infant Meal Notification	43
• Claim Information Sheet	43
• Scanned Regular and Infant Menus	43
• Direct Deposit	44
• Weekends, Evenings and Double Sessions	44
• Tiering Forms	45
• Building for the Future Poster	45
• Medical Statement for Children	45
• Examples of each form	46 - 67
<b>Glossary</b>	<b>68</b>
<b>Appendix A: Approved Food Charts</b>	<b>72</b>
<b>KidKare Startup Guide</b>	<b>73</b>
<b>Minute Menu HX Directions for Scan Attendance Menus</b>	<b>74</b>
<b>Policies and Procedures Guide</b>	<b>85</b>



## **An Introduction**

### **Mission Statement**

The following Mission Statement expresses the aims and goals of this agency:

Provider Resources, Inc., (PRI) is a federally-funded, non-profit [501(c)(3)], Massachusetts agency that educates children, Family Child Care Providers and parents about good nutrition and administers a Federal Child and Adult Care Food Program (CACFP) to family child care providers. Provider Resources is committed to the philosophy of this federal food program that all children have the right to be well fed, regardless of family income.

This program promotes a lifelong healthy approach to eating for both children and parents and insures that children enrolled in Family Child Care are receiving nutritionally balanced meals. Provider Resources, Inc. was founded on and adheres to these principles:

- Every child is entitled to the best nurturing possible through good nutrition so that the spirit, creativity, and potential of each child can be realized.
- Every Provider is entitled to dependable, timely services and to a program that is responsive to their needs.

### **What Is Provider Resources, Inc.?**

PRI is a tax exempt, non-profit organization governed by a volunteer Board of Directors. PRI was organized as a non-profit agency in 1988.

### **What Is the Child and Adult Care Food Program (CACFP)?**

The CACFP is funded by the United States Department of Agriculture. In this program, licensed Family Child Care Providers and some Informal Child Care Providers (ICC) are trained in the food program pattern and are reimbursed at a fixed rate for serving meals and snacks to their child care children, as well as their own, if they are income eligible.

In Massachusetts, the CACFP is administered by the Massachusetts Department of Elementary and Secondary Education. A contract has been issued to Provider Resources, Inc., as a recognized sponsor qualified to administer the program.

### **What is The Purpose of the CACFP?**

The program is designed to ensure that participating children receive healthy, well-balanced meals. This is achieved by comprehensive training of providers in the basic principles of good nutrition.

At PRI, participating Family Child Care Providers are required to learn the principles of the child care meal pattern and serve foods accordingly. Providers must keep accurate, up to date records and submit them in a timely manner in order to receive reimbursement.

## What's Important About Good Nutrition?

Adequate nutrition is more important than many people realize. Children who are malnourished or merely hungry due to missed meals are listless, nervous, and inattentive. They are not ready to learn and they may disrupt the learning of others. Poor nutritional well-being increases the chances of contracting low-grade infections that leads to increased school absenteeism.

Encouraging children to improve their nutritional well-being is a preventive health measure which saves many tax dollars and increases national productivity.

Today's most prevalent nutritional problems are obesity and ill-advised food choices. Poor nutritional habits have also been linked to the ten "killer diseases", including heart disease, cancer, and high blood pressure. Although symptoms do not usually appear until later in life, these diseases may begin while children are still in school. Good nutritional health in a child's early years can have long-lasting physical and emotional benefits. Good nutrition, or lack of it, knows no social or economic boundaries. All children can suffer from the ill effects of poor feeding. Good nutrition is for all children.

## Does the Nutrition Program in Child Care Homes Make a Difference?

Yes. Many children of working parents do not eat breakfast before leaving home, mainly because of "lack of time". They do not eat an adequate lunch and some skip supper. Some children do not receive the recommended amounts of milk during the 24-hour period; some lack meat or meat equivalent foods; and others lack fruits and vegetables. Quite a few are eating three or more servings of concentrated sweets each day. Meals that follow the required guidelines correct many of the nutritional deficiencies found in today's fast-paced society.

Studies show that children in CACFP receive meals that are nutritionally superior to those served to children in child care settings without CACFP. Children in participating programs have higher intakes of key nutrients and fewer servings of fats and sweets than children in non-participating care. Research cites participation in CACFP as one of the major factors influencing quality care – 87 percent of the family child care homes considered to be providing quality child care participated in CACFP. CACFP also makes child care and afterschool programs more affordable for low-income parents, who rely on these programs to provide a safe and healthy place for their children.

## What Do You Have to Do to Participate in the Program?

If you are a licensed family child care provider, you are entitled to participate in the program. A current license must be maintained through the Department of Early Education and Care (EEC), the State agency responsible for the health and welfare of children in family child care homes. Some providers that are Informal Child Care providers that hold vouchers and do the care in their own home for non-resident children also qualify to be on our program

Providers are approved to participate in the CACFP by the Massachusetts Department of Elementary and Secondary Education. Providers may enroll in only one program at a time. Enrolling in more than one program will result in a penalty and/or serious deficiency.

The enrollment information is obtained at the time of sign-up, by the Home Reviewer representing the Agency, and verified prior to the provider being approved to participate in the program. The Home Reviewer will complete with the provider a Sponsorship Agreement form, Permanent Agreement, Annual Update which consists of the Rights & Responsibilities and Termination procedure, and Child and Adult Care Food Program (CACFP) Family Day Care Home Certificate. A copy of the provider's EEC license will also be needed.

Providers that are transferring from another program will need to provide a copy of their termination notice from their previous sponsor.

All children who are enrolled in a participating child care home are eligible to participate, regardless of family income. This is an educational program designed to teach healthy eating habits.

## How Does the Program Work?

Once a provider has been approved by the Department of Elementary and Secondary Education, they are issued a site number. This site number is important and will be needed when submitting your menus.

Providers enroll child care children (children who have not yet turned 13 years unless having a disability) into the program by asking parents to fill out and sign an enrollment form for each child. Enrollment forms must be on file for a child to be claimed on the program and all enrollment forms must be renewed annually. Children should be enrolled according to the earliest time they might arrive and the latest time they will be picked up, and every meal they might participate in. If a child's schedule changes, an updated enrollment will need to be submitted.

The total number of children that may be claimed for a given meal is called "the approval number". A provider may claim only for the number of child care children as shown on his/her license. An income eligible provider may include his/her own children, but never exceed six children for any given meal for a regular license, 8 children for a plus license, and 10 for a large family child care license.

Providers sign up for meals expected to be served, including Breakfast, AM Snack, Lunch, PM Snack, Supper, and Eve Snack with accompanying times. If a provider wishes to claim for a meal not previously requested, she needs prior approval to do so. This increase for an approved meal can be done by simply informing the main office. If you wish to claim for weekend or evening care, you must submit a "Double Session/weekend" form for pre-approval.

**Providers may claim up to 2 meals and 1 snack OR 2 snacks and 1 meal per child, per day.**

Child Care Providers keep daily menus and meal count attendance records on either scan menus provided by the office, or on Minute Menu's online menu system KidKare. Menus begin on the first day of the month and end on the last day of that month. Menu / attendance records must be submitted on the last day of the month. In order to receive your reimbursement in a timely fashion, all menus must be in the office no later than the 5<sup>th</sup> of each month to make the first bill. Attendance must be recorded by the end of each day.

Providers select food from five food groups (Fluid milk, fruits, vegetables, bread and grain, meat and meat alternates). Selection of foods and where they are purchased is entirely the choice of the provider. Non-creditable or "not acceptable" foods are foods that fail to meet minimum standards of nutrition. Non-creditable foods do not count as a food item on the menu.

The CACFP pattern requirements and minimum serving sizes for the appropriate age group must be observed. *(See the CACFP food pattern section within this manual.)*

**A meal must fit the meal pattern completely in order to receive reimbursement.**

The amount of reimbursement is calculated by adding up all meals in a category and multiplying that figure by a fixed reimbursement rate in that category. The current reimbursement rate can be found in the sleeve of your Provider's Food Program binder and will change yearly. The reimbursement rate is not affected by the age of the child.

PRI is a partnership between staff and providers. The staff is available for consultation and to support your needs. **We pride ourselves on accurate and timely reimbursement.**

Providers do their part by submitting all required paperwork in a timely and accurate fashion, and by making themselves available for home visits. It is the provider's responsibility to keep the agency informed of changes in their licensing status at all times by contacting the main office.

A provider whose license expires must submit all paperwork to EEC. A copy of their new license must be submitted to the main office. Should EEC delay in issuing a license renewal, a letter from EEC must be obtained, and submitted to the main office confirming that the provider is still licensed. Should a lapse of time occur when the provider is not considered licensed by EEC, then that provider is prohibited from claiming with the food program. Providers are strictly prohibited from claiming with the food program without a current license.

## **When must you submit a new copy of your license to the office?**

Anytime you are issued a new license, we will need a copy. The following are examples of why you will be given a new license:

- Renewed License
- Moved to a new address
- Increased or Decrease in Capacity
- Nontraditional license which allows you to provide child care after 8:00 at night.
- Limitations placed on license.

## Home Reviews

We are required to visit every provider a minimum of 3 visits, of which 2 of them must be unannounced. If you do care on weekends, evenings or double sessions we are required to do 4 visits a year, 2 of which must be during the extended hours. If you are a new provider your first visit will occur within the first 30 days. We are required to observe a meal or snack at visits. Meal reviews are conducted for several reasons:

1. To provide support and technical assistance to providers
2. To ensure CACFP requirements are being met
3. To conduct a review of the provider's meal times and any other application changes that have occurred since the last visit.

At the time of the visit we will need to see all menus either scanned or internet. In addition, we will ask for your Provider's Food Program folder to view enrollments, permanent agreements, annual enrollment update, and completed trainings. If you're online menus cannot be accessed because your computer is not in your child care area, your home reviewer will contact the main office and they will check your menus for accuracy.

### What if you do your menus online and Minute Menu/KidKare is Inaccessible?

It is possible that at times providers will be unable to access Minute Menu/KidKare website. This is inevitable because of problems inherent to the Internet- if any connection between your computer and the Minute Menu Internet servers is severed, it can temporarily prevent you from visiting the Minute Menu/KidKare website (not to mention a large number of other sites on the Internet). If this occurs, the best situation is to wait and try again. These kinds of problems are usually resolved in a matter of minutes or hours by the internet companies affected.

In some cases, the Minute Menu/KidKare website will be down for maintenance or upgrades. When possible, you will be given notice of these periods of Minute Menu/KidKare inaccessibility but in some cases, unforeseen technical factors may cause the site to become inaccessible without prior warning. Keep in mind the host of the Minute Menu/KidKare Website is located in Dallas, Texas, which is one hour behind our time. If the server goes down in the evening it may not be fixed until 11am-12pm our time.

If you are unable to record your menus online, you will need to keep a complete record of meals and meal counts on paper.

### A Provider's Computer Stops Working

A provider's computer could get a virus, a power surge, or some other random problem that prevents the use of the computer to record her meals and attendance on Minute Menu/KidKare. Any already entered information is available on the website. If the computer cannot be fixed by the end of the month and the provider has access to another computer, the provider can enter their information into another computer to complete the rest of the month's records and submit from the other computer. The other option is to contact the main office and we will send you bubble menus.

### Other Concerns

Food Safety is a major concern and the food storage, preparation and serving areas will be checked. Refrigerators are required to have a thermometer in the freezer and in the refrigerator even if one is built into the unit.

Food storage is important. Once cereal, crackers and other dry food items are opened that you will not be entirely using, they need to be stored in plastic containers or zip locked bags. Food cannot be stored on the floor or next to any chemicals. In the refrigerator, all food needs to be covered with plastic wrap or placed in a covered container. Meats should be stored on the bottom shelf in case they leak. This will help prevent cross contamination. It is preferred that alcohol not be stored in the refrigerator, but if it is, it should be on the top shelf in the very back. This also applies to any medicine. Another option would be to purchase the Velcro locks to place on your refrigerator to prevent young children from accessing it.

We all love our pets and consider them part of our family, but they are not allowed in the food preparation or serving area. Pets need to be fed in another area.

Meal disallowances occur at the time of meal reviews if:

- The provider is not home and a visit is conducted during the time approved. The meal will be disallowed unless the provider had notified PRI that they would not be home. If two visits are conducted without a provider home, parental contacts are made to verify childcare times, attendance and meals received.
- The meal observed does not meet CACFP requirements.
- The meal service and food prep area do not meet CACFP requirements.
- Any meals for which there is no written record for the month, up to but not including the day of the visit. A written record must include all meal components and the dates served. If the provider uses "cycle menus" (pre-planned menus) and the written meal does not match the meal served, there must be documentation of substitution.
- The children's attendance has not been documented for meals or snacks on any of the previous days.
- A submitted claim does not match the monitor's review of the children recorded as present.
- If a provider is over-capacity during a meal review, reimbursement will not be made for any children over the license capacity. EEC will be notified
- If a provider claims a child not seen by the monitor on their submitted menu.

\*If a meal is disallowed at the time of a meal review this may require an unannounced follow-up visit to be conducted to ensure any issues have been corrected. This visit may not count as one of the required three visits per year. Failure to correct will result in a notice of Serious Deficiency and possible termination. \*See *Serious Deficiencies and Termination*

## Child Enrollment Forms

A form must be on file for each child enrolled in your child care including your own **if income eligible**. This includes full time, part-time or substitute care children. A parent has the right to refuse the program, however an enrollment needs to be completed with the parent checking the box "refused program" on it. The form needs to be complete or it cannot be accepted. Be certain to have the parent fill the child's name, date of birth, date started in child care and both the times and the days that the child will be enrolled in child care. If the child's schedule will vary, check off all days that the child possibly might attend and check the days vary box. When filling out the expected meals, have the parent list every possible meal, even if the child is there only occasionally. If this child is school age please note the times the child in school. If the child will attend your child care on school vacation and no school days, it is very important to list the times they will be there and all the meals they may participate in. Every parent must receive a Building for the Future flyer when they enroll their child in your program. *Examples can be found on pages 53 & 54*

Send the enrollments in prior to the first month's menus. Include a new enrollment any time a new child is enrolled. If an enrollment form has not been received by the Main Office you will not receive reimbursement for that child unless the enrollment form is received within 5 days of processing your menus.

## Infant Meal Notification

This is the last section of Part 1 of the Child Enrollment Form. All children including infants must be offered the food program. Providers must offer 1 type of formula; however a parent has the right to refuse the provider's choice and supply their own. The infant Meal Notification Form informs the office who is supplying the formula - the provider or parent - or if the child is breastfed. It also informs us who is supplying the baby food- the provider or the parent. Please see the section on page 43 to review infant meals.

## The Guidelines for Claiming Children Living in Your Home

1. You need to submit a Meal Benefit form and obtain prior approval.
2. Your family size (all people living in your home) and income (the total of all residents) must meet income guidelines listed on the back of the Meal Benefit Form directions.
3. If you are tier 1 because of school or census, a Meal Benefit form must be on file before you may claim your own children.
4. You may claim for your own children participating in your child care only for meals or snacks served at the same time you are caring for and feeding child care children.
5. All rules for claiming child care children and provider's own children apply through the age of 12 years (18 years with a disability).

**NOTE:** A foster child is generally considered a family of one. Thus, only the income from the State is counted and they become Income Eligible. You will need to fill out a meal benefit form for that child along with the name of the agency that placed them. The other rules for claiming apply.

Please see the section beginning on page 45 for further information.

Any questions may be directed to the main office.

## Approved Assistants

If you have an approved assistant or assistants, we will need a copy of their EEC license or certificate on file. Approved Assistants that are left in the child care in place of the licensed provider must follow all EEC requirements. If any assistant will be feeding the children when the provider is not present, the provider is required to train them how to complete the menus. Assistants may also complete any training offered by PRI.

## What are your Responsibilities?

Providers need to follow all the rules and regulations of the food program. When you are a new provider they might seem overwhelming, however staying organized will keep you on track. Here are the major things to remember:

1. Menus need to be recorded ahead of time. They can be written a day, week or month ahead.
2. Attendance for your meals or snacks needs to be recorded by the end of the day.
3. Any time you are not going to be home for a meal service, notify the main office or your home reviewer.
4. Serve your meals and snacks according to the times you gave to the office. Please notify the office if your meal or snack times have changed.
5. Submit an enrollment form for every child in your program.
6. Mail or submit your menus at the end of every month.
7. Complete 6 hours of training yearly. These trainings are provided to you by PRI as home studies.
8. Keep all your required paperwork in your folder that we supply.

## Inactive Providers

It is the provider's responsibility to notify PRI when they are no longer claiming due to lack of children or if they are no longer caring for children. This is initiated either through a note on their monthly claim or by contacting our main office. It is a USDA policy if a provider goes 3 months without claiming, we must terminate the provider from the program. Once the provider has children again, they can call us and we will re-sign them.

If you have not claimed for reimbursement within 3 consecutive months, PRI will terminate your contract for inactivity. You may rejoin the program at any time.

## Moving

It is the child care provider's responsibility to notify the PRI office when the location of your child care home will be changing. We will need a copy of your new child care license with your new address.

## How to Terminate

If you wish to terminate your contract, you must give written notice to our office at least 30 days in advance. Please be aware that a provider cannot be with two food programs in any one month, therefore your termination date will be at the end of the month following the 30<sup>th</sup> day. (For example: A letter dated February 20<sup>th</sup> will result in a termination date of March 31<sup>st</sup>.)

Upon receiving your letter, our office has 5 days to respond with a Termination Acknowledgement letter. This letter will include:

- Date it was received
- Training hours and training topics
- Your official Termination Date.

## Transferring from Another Program

If you are currently with another food program, you will need to terminate there in order to join our program. At the time of the sign up, we will need a copy of your termination letter from your previous sponsor. **NOTE:** If you are being reviewed for a serious deficiency process, you cannot be terminated by either the sponsor or by your own request.

## What Is the CACFP Meal Pattern?

All providers participating in the food program are mandated by the United States Department of Agriculture to follow the recommended food program meal pattern that draws from five food components with minimum required serving sizes. All components must be present for reimbursement to occur.

### Food Program Pattern

Children Ages 1 year through 12 years

BREAKFAST	MORNING SNACK	LUNCH	AFTERNOON SNACK	SUPPER
Milk Fruit or Vegetable Grain [NOTE: A new option allows serving Meat/Meat Alternate in place of the Grain up to 3 times per week.]	(Serve two of the five components.) Milk Vegetable Fruit Grain Meat or Meat Alternate	Milk Vegetable Fruits (or 2 <sup>nd</sup> Vegetable) Grain Meat or Meat Alternate	(Serve two of the five components.) Milk Vegetable Fruit Grain Meat or Meat Alternate	Milk Vegetable Fruits (or 2 <sup>nd</sup> Vegetable) Grain Meat or Meat Alternate

*Portion Sizes vary according to the child's age.*

### What Foods Contribute to The Meal Pattern?

All foods fall under one of five components:

- Milk
- Vegetables
- Fruits
- Grain/Bread/Alternates
- Meat/Meat Alternates

Some foods have limited nutritional value and therefore do not contribute to the meal pattern. These foods are non-creditable, and should not be listed on the menu.

### FOLLOWING THE MEAL PATTERN

The CACFP can be followed by checking the listing on the left side of the menu. All foods fall under these 5 basic components: Milk, Vegetable, Fruit, Grain (Bread/Alternate), and Meat/Meat Alternate (i.e., beans, peas, yogurt, eggs, cheese, and tofu)

#### Milk:

Only fluid milk is creditable as a milk component. The milk type requirements vary depending on the age of the children.

#### Milk Requirements by age groupings:

- Children age 12-24 months can only have unflavored whole milk
- Children age 24 months-5 years can only have 1% or skim/fat free milk unflavored
- Children age 6-12 years can only have 1% or skim/fat free milk unflavored OR Skim/fat free flavored

#### Other Milk Considerations:

- Dairy items such as whipping cream, sour cream, and ice cream are not creditable
- Though yogurt and cheese are dairy products and are creditable, they count towards a meat alternate.

## Vegetables:

All vegetables are creditable under the CACFP guidelines. Vegetable Juice must be 100%, can only be served at breakfast or snack, and can only be served once per day. Cooked dry beans or peas can be counted as either a vegetable or as a meat alternate. Mixed vegetables such as carrots and peas or Veg-All count only as one (1) component.

### Other Vegetable Considerations:

- Small amounts of vegetables such as peppers, celery and onions, when used in a salad (i.e., tuna, chicken or egg), are not served in sufficient amounts to be considered a whole vegetable component.
- When lettuce and tomato are served on a sandwich, they count as 1 vegetable component.
- Lettuce is not creditable when served alone.
- Carrot & Celery Sticks, Pepper Strips, Cucumber Slices or Spears may be counted as separate vegetable components.
- A Garden Salad is counted as 1 component, regardless of how many vegetables are used.
- Potatoes are vegetables and are not to be served as a bread or written on the Grain/Bread line.

## Fruit:

All fruits are creditable under the CACFP guidelines, some fruits have age restrictions. Fruit juice must be 100%, can only be served at breakfast or snack, and can only be served once per day. Juice cannot be served as a second component at snack if milk is served at snack.

The below foods must be cut into smaller pieces and are allowed only for children over four (4) years of age.

- Dried Fruit (raisins, cranberries, apricots, etc.)
- Grapes, cherries, berries, melon balls, or cherry and grape tomatoes

## Grain/Bread/Alternate:

All bread and bread alternates must be made of whole grain, enriched flour or meal. Corn, rice, wheat and oats are the principle sources of whole grains. The meal pattern requires that one (1) whole grain rich component is served each day during one of the meals/snacks claimed.

All commercial cereals made from whole grain or enriched flour, both cold dry and hot cooked, must meet the WIC Cereal Requirements (cereals that contains less than 6 grams of sugar per dry ounce). Cereals can be served for breakfast and snacks only.

## Meat/Meat Alternate:

The best cuts of meat and fish to serve children are lean, boneless cuts that will reduce the fat intake in their diets. Highly processed meats (such as chicken nuggets, sausages, deli meat, fish sticks, fish nuggets, etc.) requires you to have the CN Label to ensure that it has the full amount required per serving.

Meat Alternates provide very good protein at lower cost, and can also be used for children following vegetarian diets. Highly processed tofu products such as (chicken nuggets, sausage, crumbles, etc.) are not creditable.

See below for a quick list:

- **Nuts and Seeds** – Peanut, Almond, Cashew, Walnuts, Sunflower, Tahini, including related butters (NOTE: These are not creditable for children under 4 years old)
- **Beans** – Beans can be used as either a meat alternate or a vegetable but not as both in the same meal. Black, Kidney, Chickpea, Pinto, etc., also Falafel and hummus, Peas (Green, black-eyed, Split, Lentils)
- **Cheese** – All natural or processed cheeses (Cheddar, Swiss, American, Jack, Fontina, etc.)
  - Serving size must be doubled for: Cottage, Ricotta, Cheese food/spread

- **Yogurt** – Whole, low fat and fat free cow’s milk or soy are all creditable
  - Yogurt is limited to 23 grams of sugar per 6 oz. serving
  - 4 oz. of yogurt = 1 oz. Meat Alternate
- **Tofu** – Firm and Extra Firm with 5 grams of protein per 2.2 oz. (1/4 cup)

### Additional Requirements

- When filling out a menu write the name of the product, (i.e. Ritz Crackers, American Cheese, White Rice, Wheat Pasta, etc.), and the method of preparation, (i.e., scrambled eggs, baked fish, mashed potato, etc.)
- A combination food or meal is a single serving of a food item that contains more than one food component that cannot be separated (soups, casseroles, lasagna, burritos and sandwiches, etc.). USDA’s guidance explains that some combination of foods may be credited for up to three (3) different food components (meat/meat alternate, grains/bread, vegetable or fruit). You must ensure that each serving has the required amount of each component.
- A variety of foods are required to ensure a balanced diet. Providers are urged to introduce new and varied foods whenever possible. Food components should be named specifically so that the variety can be determined.

**For a current list of foods that fit the requirements please see the Appendix to this guidebook.**

## Child Meal Pattern Requirements

### BREAKFAST

*(Select all three components for a reimbursable meal)*

Components	Age: 1-2 Years	Age: 3-5 Years	Age: 6-12 Years
<b>Fluid Milk<sup>1</sup></b>	4 fluid oz.	6 fluid oz.	8 fluid oz.
<b>Vegetables, Fruits, or portions of both<sup>2</sup></b>	¼ Cup	½ Cup	½ Cup
<b>Grain (oz eq)<sup>3 4</sup></b>			
Whole grain-rich or enriched bread	½ slice	½ slice	1 slice
Whole grain-rich or enriched bread product, such as biscuit, roll or muffin	½ serving	½ serving	1 serving
Whole grain-rich or fortified cooked breakfast cereal, cereal grain <sup>5</sup> , and/or pasta	¼ cup	¼ cup	½ cup
Whole grain-rich or fortified ready-to-eat breakfast cereal, (dry cold) <sup>5 6</sup>			
Flakes or rounds	½ cup	½ cup	1 cup
Puffed cereal	¾ cup	¾ cup	1 ¼ cup
Granola	¾ cup	¾ cup	¼ cup
<b>Meat/Meat Alternate</b> (Up to 3 times per week, in place of grain)	½ oz.	½ oz.	1 oz.

1. Must be unflavored whole milk for children 1-2 years. Must be unflavored low-fat (1%) or unflavored fat-free (skim) milk for children 2-5 years of age. Must be unflavored low-fat (1%) or unflavored fat-free (skim), or flavored fat-free (skim) milk for children 6-12 years of age.
2. Pasteurized full-strength juice may only be used to meet the vegetable or fruit requirement at one meal or snack per day.
3. At least one serving per day, across all eating occasions, must be grain-rich. Grain-based desserts do not count towards meeting the grains requirement.
4. Meat/Meat Alternates may be used to meet the entire grains requirement a maximum of three times per week. One ounce of meat/meat alternate is equal to one ounce of grains.
5. Breakfast cereals must not contain more than 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).
6. Beginning October 1, 2019, the minimum serving size specified in this section for ready-to-eat breakfast cereal must be served. Until October 1, 2019, the minimum serving size for any type of ready-to-eat cereal is ¼ cup for children ages 1-2 years; 1/3 cup for children ages 3-5 years; and ¾ cup for children ages 6-12 years.

## Child Meal Pattern Requirements LUNCH AND SUPPER

*(Select all five components for a reimbursable meal)*

Components	Age: 1-2 Years	Age: 3-5 Years	Age: 6-12 Years
<b>Fluid Milk<sup>1</sup></b>	4 fluid oz.	6 fluid oz.	8 fluid oz.
<b>Meat/Meat Alternate</b>			
Lean Meat, poultry, or fish	1 ounce	1 ½ ounce	2 ounces
Tofu, soy product, or alternate protein products <sup>2</sup>	1 ounce	1 ½ ounce	2 ounces
Cheese	1 ounce	1 ½ ounce	2 ounces
Large Egg	½	¾	1
Cooked dry beans or peas	¼ cup	3/8 cup	½ cup
Peanut butter or soy nut butter or other nut/seed butter <sup>3</sup>	Not Creditable	3 Tbsp. (In MA-only 4-5 years)	4 Tbsp.
Yogurt, plain or flavored, sweetened or unsweetened <sup>4</sup>	4 ounces or ½ cup	6 ounces or ¾ cup	8 ounces or 1 cup
The following may be used to meet no more than 50% of the requirement: Peanuts, soy nuts, tree nuts, or seeds, as listed in program guidance, or an equivalent quantity of any combination of the above meat/meat alternates (1 ounces of nuts/seeds=1 ounce of cooked lean meat, poultry, or fish) <sup>3</sup>	Not Creditable	¾ ounce = 50% (In MA-only 4-5 years)	1 ounce = 50%
<b>Vegetable<sup>5</sup></b>	⅓ cup	¼ cup	½ cup
<b>Fruit<sup>5,6</sup></b>	⅓ cup	¼ cup	½ cup
<b>Grain (oz eq)<sup>7,8</sup></b>			
Whole grain-rich or enriched bread	½ slice	½ slice	1 slice
Whole grain-rich or enriched bread product, such as biscuit, roll or muffin	½ serving	½ serving	1 serving
Whole grain-rich or fortified cooked breakfast cereal, cereal grain <sup>5</sup> , and/or pasta	¼ cup	¼ cup	½ cup

1. Must be unflavored whole milk for children 1-2 years. Must be unflavored low-fat (1%) or unflavored fat-free (skim) milk for children 2-5 years of age. Must be unflavored low-fat (1%) or unflavored fat-free (skim), or flavored fat-free (skim) milk for children 6-12 years of age.
2. Alternate protein products must meet the requirements in Appendix A to Part 226
3. To be in compliance of the State of Massachusetts EEC Licensing Policy, children under 4 years CANNOT be served these products
4. Yogurt must contain no more than 23 grams of total sugars per 6 ounces.
5. Pasteurized full-strength juice may only be used to meet the vegetable or fruit requirement at one meal or snack per day.
6. A vegetable may be used to meet the entire fruit requirement. When two vegetables are served at lunch or supper, two different kinds of vegetables must be served.
7. At least one serving per day, across all eating occasions, must be whole grain-rich. Grain-based desserts do not count towards the grains requirement.
8. Breakfast cereals must not contain more than 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).

## Child Meal Pattern Requirements SNACK

*(Select two of the five components for a reimbursable snack)*

Components	Age: 1-2 Years	Age: 3-5 Years	Age: 6-12 Years
<b>Fluid Milk<sup>1</sup></b>	4 fluid oz.	6 fluid oz.	8 fluid oz.
<b>Meat/Meat Alternate</b>			
Lean Meat, poultry, or fish	½ ounce	½ ounce	1 ounce
Tofu, soy product, or alternate protein products <sup>2</sup>	½ ounce	½ ounce	1 ounce
Cheese	½ ounce	½ ounce	1 ounce
Large Egg	½	½	½
Cooked dry beans or peas	⅓ cup	⅓ cup	¼ cup
Peanut butter or soy nut butter or other nut/seed butter <sup>3</sup>	Not Creditable	1 Tbsp. (In MA-only 4-5 years)	2 Tbsp.
Yogurt, plain or flavored, sweetened or unsweetened <sup>4</sup>	2 ounces or ¼ cup	2 ounces or ¼ cup	4 ounces or ½ cup
The following may be used to meet no more than 50% of the requirement: Peanuts, soy nuts, tree nuts, or seeds, as listed in program guidance, or an equivalent quantity of any combination of the above meat/meat alternates (1 ounces of nuts/seeds=1 ounce of cooked lean meat, poultry, or fish) <sup>3</sup>	Not Creditable	¾ ounce = 50% (In MA-only 4-5 years)	1 ounce = 50%
<b>Vegetable<sup>5</sup></b>	½ cup	½ cup	¾ cup
<b>Fruit<sup>5 6</sup></b>	½ cup	½ cup	¾ cup
<b>Grain (oz eq)<sup>7 8</sup></b>			
Whole grain-rich or enriched bread	½ slice	½ slice	1 slice
Whole grain-rich or enriched bread product, such as biscuit, roll or muffin	½ serving	½ serving	1 serving
Whole grain-rich or fortified cooked breakfast cereal, cereal grain, and/or pasta	¼ cup	¼ cup	½ cup
Whole grain-rich or fortified ready-to-eat breakfast cereal, (dry cold) <sup>5 6</sup>			
Flakes or rounds	½ cup	½ cup	1 cup
Puffed cereal	¾ cup	¾ cup	1 ¼ cup
Granola	⅓ cup	⅓ cup	¼ cup

1. Must be unflavored whole milk for children 1-2 years. Must be unflavored low-fat (1%) or unflavored fat-free (skim) milk for children 2-5 years of age. Must be unflavored low-fat (1%) or unflavored fat-free (skim), or flavored fat-free (skim) milk for children 6-12 years of age.
2. Alternate protein products must meet the requirements in Appendix A to Part 226
3. To be in compliance of the State of Massachusetts EEC Licensing Policy, children under 4 years CANNOT be served these products
4. Yogurt must contain no more than 23 grams of total sugars per 6 ounces.
5. Pasteurized full-strength juice may only be used to meet the vegetable or fruit requirement at one meal or snack per day.
6. A vegetable may be used to meet the entire fruit requirement. When two vegetables are served at lunch or supper, two different kinds of vegetables must be served.
7. At least one serving per day, across all eating occasions, must be whole grain-rich. Grain-based desserts do not count towards the grains requirement.
8. Breakfast cereals must not contain more than 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).

## Child Care Infant Meal Pattern

MEAL	Birth through 5 months	6 through 11 months
<b>BREAKFAST</b>	4-6 fluid ounces Breastmilk <sup>1</sup> or Formula <sup>2</sup>	6-8 fluid ounces Breastmilk <sup>1</sup> or Formula <sup>2</sup> ; AND  0-4 tablespoons Infant Cereal <sup>2,3</sup> Meat, Fish, Poultry, whole Egg, cooked dry Beans, or cooked dry Peas; or 0-2 ounces of Cheese; or 0-4 ounces (volume) of Cottage Cheese; or 0-4 ounces or ½cup of Yogurt <sup>4</sup> ; or a combination of the above <sup>5</sup> ; AND  0-2 tablespoons vegetable or fruit or a combination of both <sup>5,6</sup>
<b>LUNCH and SUPPER</b>	4-6 fluid ounces Breastmilk <sup>1</sup> or Formula <sup>2</sup>	6-8 fluid ounces Breastmilk <sup>1</sup> or Formula <sup>2</sup> ; AND  0-4 tablespoons Infant Cereal <sup>2,3</sup> Meat, Fish, Poultry, whole Egg, cooked dry Beans, or cooked dry Peas; or 0-2 ounces of Cheese; or 0-4 ounces (volume) of Cottage Cheese; or 0-4 ounces or ½cup of Yogurt <sup>4</sup> ; or a combination of the above <sup>5</sup> ; AND  0-2 tablespoons vegetable or fruit or a combination of both <sup>5,6</sup>
<b>SNACK</b>	4-6 fluid ounces Breastmilk <sup>1</sup> or Formula <sup>2</sup>	2-4 fluid ounces Breastmilk <sup>1</sup> or Formula <sup>2</sup> ; AND  0-1/2 slice Bread <sup>3,7</sup> ; or 0-2 crackers <sup>3,7</sup> ; or 0-4 tablespoons Infant Cereal <sup>2,3,7</sup> or ready-to-eat breakfast cereal <sup>3,5,7,8</sup> ; AND  0-2 tablespoons vegetable or fruit; or a combination of both <sup>5,6</sup>
<ol style="list-style-type: none"> <li>1. Breastmilk or formula, or portions of both, must be served; however, it is recommended that breastmilk be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less than the minimum amount of breastmilk per feeding, a serving of less than the minimum amount of breastmilk may be offered, with additional breastmilk offered at a later time if the infant will consume more.</li> <li>2. Infant formula and dry infant cereal must be iron-fortified.</li> <li>3. Beginning October 1, 2019, ounce equivalents are used to determine the quantity of creditable grains.</li> <li>4. Yogurt must contain no more than 23 grams of total sugars per 6 ounces.</li> <li>5. A serving of this component is required when the infant is developmentally ready to accept it.</li> <li>6. Fruit and vegetable juices must not be served.</li> <li>7. A serving of grains must be whole grain-rich, enriched meal, or enriched flour.</li> <li>8. Breakfast cereals must contain no more than 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).</li> </ol>		

## The CACFP Food Pattern

Providers make their own food choices while following the required balance of food components.

MEAL	Food Component	EXAMPLE
<b>BREAKFAST</b> (serve 3 components)	Grain* (Bread/Bread Alternate) Vegetable/ Fruit Fluid Milk**	Cheerios Strawberries UFL*** Whole, UFL 1%, FL Fat-free
*A meat/meat alternate may be served in place of the grain up to 3 times per week ** Type of milk must be identified by age group of participating children (UFL Whole 1-2 years, UFL 1% or Skim 3-5 years, FL Fat-free etc.), UFL = Unflavored, FL = Flavored milk.		
<b>LUNCH and SUPPER</b> (serve 5 components)	Meat/Meat Alternate Grain* (Bread/Bread Alternate) Vegetable Vegetable or Fruit Fluid Milk**	Ground Beef Brown Rice Green Beans Apple Slices UFL Whole, UFL 1%, FL Fat-free
*One serving of grain per day must be whole grain rich ** Type of milk must be identified by age group of participating children (UFL Whole 1-2 years, UFL 1% or Skim 3-5 years, FL Fat-free etc.), UFL = Unflavored, FL = Flavored milk.		
<b>SNACKS AM/PM</b> (serve 2 of 5 components)	Fruit Vegetable Meat/Meat Alternate Grain (Bread/Bread Alternate) Fluid Milk	Apple Slices Colby Cheese

### Non-Creditable Foods

Foods failing to meet minimum standards for nutrition

COMPONENT	NON-CREDITABLE FOODS		
<b>Dairy</b>	Cream Cheese Sour Cream Parmesan Cheese Romano Cheese	Frozen Yogurt Pudding (all types) Ice Cream Sherbet	Evaporated Milk Nonfat Dry Milk
<b>Meat/Meat Alternative</b>	Bacon (all types)	Silken Tofu	
<b>Grain (Bread/Bread Alternative)</b>	All Grain-based Desserts (cookies, brownies, cake, sweet rolls, doughnuts, etc.)	Rice Pudding Tapioca Pudding Bread Pudding	Popcorn
<b>Vegetable /Fruit</b>	Veggie Chips or Straws	Fruit Roll-ups/Snacks	Potato Chips
<b>Other</b>	Jello		

### Combination Meals

A combination meal is a meal that has several food components combined to make a casserole type meal (lasagna, beef stew, shepherd's pie, etc.). These combination meals can count towards three (3) meal components. The provider must ensure that there is enough quantity of each component in the combination meal so that the children receive the proper amounts of each component.

When writing the combination meal out on your menu, you should separate the meal components out and write them on the appropriate menu line. For some combination meals, you may still need to add a second vegetable or fruit, grain, and milk to complete the meal. Please see the examples below:

LASAGNA	TACOS
Noodles*	Ground Beef/Cheese*
Ground Beef/Cheese*	Lettuce/Tomato*
Tomato Sauce*	WG Corn Taco Shell*
Garden Salad	Apple Slices
UFL Whole/ 1% Milk	UFL Whole/ 1% Milk
* Food Components in the combination Meal count towards three (3) meal components.	

## As per EEC Choking Prevention Guidelines and the CACFP Requirements, children under four (4) years old cannot have the following foods:

- Raisins
- Grapes
- Dried Fruit
- Melon Balls
- Whole Olives
- Hotdogs
- Sausages
- Meat Sticks
- Large chunks of meat or cheese
- Fish with bones
- Raw Vegetables
- Hard Pretzel Rods
- Peanut Butter/Nut Butter
- Nuts and seeds

### Also Important:

- Jams or jellies, salad dressing, ketchup or other condiments never count as a meal component.
- Potatoes are a vegetable.
- Lettuce cannot be served alone.
- Cooked dry Beans and Peas are creditable as a meat alternative or a vegetable but not in the same meal.

### Non-Creditable Foods for Infants:

- Vegetable and Fruit "Puffs"
- Baby hotdogs or meat sticks
- Jarred combination infant/toddler foods
- 100% vegetable or fruit juice
- Infant fruit desserts

### Claiming Infant Meals

#### Infants 0-5months

- Meals for infants 0 through 5 months can be claimed regardless of who supplies the formula, or if the parent supplies breastmilk, as long as the infant is enrolled. Formula/Breastmilk amounts must meet minimum guidelines and the amounts offered must be written on the menus.
- Providers can claim infant meals for ages 0 through 5 months when an infant is direct-breastfed by the mother, if the breastfeeding takes place onsite and the infant is enrolled. This type of meal must be written as "Direct Breastfed" on the menus.

#### Infants 6-11 months

- Meals for infants 6-11 months are now required to have infant food added as the infant becomes developmentally ready to eat. The family childcare provider should discuss this with the parent before feeding an infant food. Provider should have some type of written notification to ensure that the parent is always the first person to introduce a new food to an infant, in case the infant has an allergic reaction to a food.
- If the parent is supplying either the formula or breastmilk, then once an infant is eating solid baby food, the provider must supply all food.
- If a parent wants to supply all nutrition (formula/breastmilk, and all solid baby food), the provider must have the child enrollment filled out and have the parent check off the box that states, "I have read this child enrollment form and I DO NOT request that my child receive the above CACFP benefits." This box is in the lower right-hand corner above the signature and date section.
- Combination dinners that include two food components, such as turkey vegetable, chicken noodle, are not creditable for reimbursement. Infant foods must be single ingredient foods (such as Turkey, Carrots, Peas, etc.) which providers can mix themselves to ensure that the infant is receiving the required amount of each food component.
- To minimize deductions when feeding infants always refer to the creditable food list for serving infants. Though the stores sell many products for infants, not all are creditable.

**A CACFP participating provider cannot refuse to provide formula/food to an infant**

**Provider Resources, Inc. • 411 Merrimack St, Suite 100 • Methuen, MA 01844 • (781)-939-9292**

## Substitutions

Providers may make food substitutions when one allowable food item from the planned menu is replaced by another food from the same food component category. For example, cottage cheese may replace hamburger or peaches replace citrus sections. These substitutions are permitted to meet a child's food preferences, food allergies, or other health concerns, or when a menu item is not available. Substitutions must be documented on menus when the provider decides to make the substitution [7 CFR §226.20(h)].

Providers are required to make substitutions to the meal patterns for children whose disability restricts their diet; they *may* make substitutions for other participants who are not disabled but are unable to eat regular meals because of medical or other special dietary needs. Only a licensed physician, or recognized medical authority, can determine whether or not a participant has a disability that restricts a child's diet. A licensed medical professional is someone who is recognized by the State licensing board where the provider lives and has the authority to issue medical orders.

A medical statement is required for all substitutions, except milk, and has to describe:

1. the child's disability,
2. how the disability limits the child's diet,
3. the food(s) the child may not have, and;
4. the food(s) that must be substituted.

Monitors must make sure providers understand the difference between food intolerance and a medical disability. Providers may make substitutions (except for milk) because of intolerance or preference (see below for exceptions regarding milk substitutions). Providers must make substitutions because of a disability. Food intolerance is when there is a reaction to a food, such as a stomachache. A medical professional might recommend that the food is avoided, but does not order that the child cannot have it. A disability is condition where a medical professional finds that an impairment limits a life activity (such as breathing) to the extent that the food should not be eaten at all by the child, and orders it by addressing the above points.

Parents or guardians may ask for non-dairy milk substitutions without providing a medical statement. For example, if a parent has a child who follows a vegan diet, the parent can submit a written request to the child's caretaker asking that soy milk be served in lieu of cow's milk. The written request must identify the special dietary need that restricts the diet of the child. Providers need to make sure all appropriate documentation for all substitutions is on file. If the provider does not have a proper parent note on file, PRI will have to disallow those meals that do not meet the meal pattern requirements.

**NOTE: Substitutions must still meet the nutritional guidelines set by USDA**

## MILK REQUIREMENTS

On April 25, 2016 USDA published the final rule "Child and Adult Care Food Program: Meal Pattern Revisions Related to the Healthy, Hunger-Free Kids Act" (81 FR24338). This final rule added the fluid milk requirements and allowance of non-dairy beverages outlined in memorandum CACFP 21-2011-REVISED to the CACFP regulations under 7 CFR 226.20(a)(1) and 226.20(g)(3), respectively. The final rule also established additional nutrition requirements and flexibilities for fluid milk served in the CACFP.

Milk is a critical component of the CACFP meal patterns because it provides nutrients that are vital for health and maintenance of the body. These nutrients include calcium, potassium, vitamin D, and protein. Consuming dairy products, such as milk, is especially important to bone health during childhood and adolescence when bone mass is built.

### Fluid Milk -

#### One-year-old children-

Beginning October 1, 2017, one-year old children must be served unflavored whole milk (7 CFR 226.20(a)(1)(i)). This is consistent with recommendations from the National Academy of Medicine. There may be some cases when a one-year old child's physician recommends low-fat milk if the child's growth and weight is appropriate, or for other medical reasons. If it is medically and nutritionally appropriate for a one-year old child to consume low-fat milk, or any type of milk other than whole milk, a meal accommodation may be made by submitting a medical meal substitution form that the child's doctor fills out. Additionally, breastmilk is considered an allowable fluid milk substitute for children of any age if a mother chooses to breast feed her child past 1 year of age.

#### Children two years old and older-

**Two to five-year-old children** -Reimbursable milks for children of these ages include all unflavored low-fat or fat-free milk, low-fat or fat-free lactose reduced milk, low-fat or fat-free lactose free milk, low-fat or fat-free buttermilk, or low-fat or fat-free acidified milk (7CFR 226.20(a)(1)). Milk must be pasteurized fluid milk that meets State and local standards.

**Six to twelve-year-old children-** The milk guidelines for this age group are the same requirements as the two to five-year-old age group with the exception that six-twelve-year-old children may also have flavored fat-free milk. Flavored milk contains all of the major nutrients found in unflavored milk. Flavored milk also contains added sugars and the Dietary Guidelines recommends that all Americans reduce their consumption of added sugars, therefore it is best practice not to serve flavored milk.

### Non-dairy Beverages

For children who cannot consume fluid cow's milk due to non-disability medical or other special dietary needs, non-dairy beverages may be served in place of fluid milk. Non-dairy beverages must meet the same nutritional standards as cow's milk with regards for fortification of calcium, potassium, vitamins A & D, protein and other nutrients. Parents or guardians must submit a written request for the non-dairy milk substitution that is nutritionally equivalent, stating the reason for the request. Non-dairy beverage substitutions are served at the option and the expense of the child care home.

## COMMON QUESTIONS

### **What Do I Do About Birthday Parties and Holiday Events?**

Ice cream and candy are not creditable on the program. We suggest you plan your celebrations for after meals (desserts).

### **What About Food Allergies?**

Some children are allergic to different foods. A statement from a physician or recognized medical authority must be on file for a child to not be served a required component such as milk.

### **Can A Vegetarian Participate in The Program?**

Yes, but it takes planning to meet the meat alternate requirement. Cheeses, including natural, processed, cheese food, cheese spreads, cottage cheese and ricotta cheese as well as peanut butter, cooked dry beans, peas, yogurt, and Tofu are acceptable substitutes.

### **What If the Parent Wants Me to Serve Something Different Than the Pattern?**

Only a doctor or recognized medical authority can excuse a child. If a parent does not wish his/her child to be fed according to CACFP guidelines, then that child cannot participate in the program, and his meals are not reimbursable. Every child must be offered the program and have an enrollment on file. The parent has the option to accept or decline. If the parent refuses the program then you may not claim any meals or snacks for that child.

### **What About Picnics and Field Trips?**

As long as food is prepared in the home, and the provider or approved licensed assistant is present to supervise when the food is eaten, excursions are fine and should be encouraged. Food served must always meet the CACFP pattern. If you are planning a field trip you must notify the office or home reviewer in advance that you will not be home for the meal service. If the office or your home reviewer isn't notified and a visit occurs, you will be disallowed for that meal.

### **Can A Provider Keep a Kosher Home and Still Participate?**

Yes. Although religious custom prohibits the serving of milk and meat at the same meal, there are alternatives such as cheese, peanut butter, beans as well as fish that can be served with milk. The provider can also serve the required milk at a different time of day.

## Good Nutrition

Eating habits develop at an early age therefore it is very important to provide young children with food experiences that promote good nutrition. The staff here at Provider Resources wishes to promote the following principles of good nutrition.

- Foods Low in Sugar

Research has shown that sugar is linked to tooth decay, hyperactivity, and obesity therefore, highly sugared foods should be limited.

- Foods High in Fiber

Fiber keeps our digestive system working properly and prevents constipation. Fruits, vegetables, beans, whole grain breads and cereals are good sources of fiber and should be served regularly.

- Foods Low in Fat and Salt

Some meat substitutes are high in salt and fat and can also contain sodium nitrate, a questionable preservative and are not the best choice for young children.

- Homemade Meals

Beef stew, lasagna, pizza and other homemade meals taste better and are lower in salt and other additives. For these reasons, we recommend making as many dishes as possible yourself.

- A Variety of Foods

One of the simplest rules to good nutrition is to eat a wide variety of healthy foods. Given a positive environment, children will experiment with and eat raw broccoli, brown rice, and pumpkin bread.

Each year we spend millions of dollars treating health problems and very little on helping to prevent them. You can begin to make a difference by helping the children establish healthy eating habits and preferences. It is a fact that the greater the variety of wholesome foods one consumes the more likely one is to be well nourished. Since nutrients work in the body as a team, it is easier to get the right team members together at the right time when a variety of foods from the various food groups are chosen.

Information on nutrition was obtained through the United States Department of Agriculture.

## Sources of Vitamin A, Vitamin C and Iron

### VITAMIN A

<u>Vegetables:</u>		<u>Fruits:</u>
Asparagus	Spinach	Apricots
Broccoli	Squash (Winter)	Cantaloupe
Carrots	Sweet Potatoes	Cherries (red sour)
Chili Peppers (red)	Tomatoes	Peaches (not canned)
Kale	Tomato Juice	Plums, Purple
Mixed Vegetables	Tomato Paste or Puree	Prunes
Peas and Carrots	Turnip Greens	Pumpkin
Vegetable Juice		

### VITAMIN C

<u>Vegetables:</u>		<u>Fruits:</u>
Asparagus	Peppers (Sweet)	Cantaloupe
Broccoli	Potatoes (white/red)	Grapefruit
Brussels Sprouts	Spinach	Grapefruit Juice
Cabbage	Sweet Potatoes	Oranges
Cauliflower	Tomatoes	Orange Juice
Chili Peppers	Tomato Juice	Raspberries
Collards	Tomato Paste or Puree	Strawberries
Kale	Turnip Greens	Tangerines
Okra	Turnips	

### IRON

<u>Vegetables:</u>	<u>Grains:</u>	<u>Fruits:</u>
Asparagus (canned)	Rice Bran	Apples
Beans – Green, Wax	Iron Fortified Pasta	Apricots (canned)
Lima (canned)	Bran Flakes	Cherries
Bean Sprouts	Wheat Bran	Dried Fruits*
Beets	Enriched Cream of Wheat	Apricots
Broccoli		Dates*
Parsnips		Peaches
Peas, Green	Meat:	Prunes*
Potatoes (canned)	Liver	Raisins*,
Sauerkraut (canned)	Poultry	Figs*
Squash (Winter)	Beef	Grapes*
Sweet Potatoes		
Tomato Juice		
Tomato Paste or Puree		
Spinach, cooked		
Turnip Greens		
Mustard Greens		
Tomatoes		

\* Can only be served to children 4 years of age and older

**Foods rich in Vitamin A, C and Iron are often rich in other nutrients as well.**

## Nutrients and Foods for Good Health

Nutrition is the food you eat and drink, and how the body uses it. Food provides many different substances called nutrients. The body needs nutrients to build, maintain and repair tissues. Altogether, there are 45 nutrients necessary for growth, development and good health.

**No one food contains all nutrients in the exact amount required by the body.  
A good diet will include a variety of foods that together will supply all nutrients needed.**

The following is a list of some of the most important nutrients you need, what they do for you, and some foods that supply them. The important thing to remember is: **VARIETY**.

**CALCIUM** - Helps build strong bones and teeth, clot blood, and help muscles and nerves function normally. Calcium activates certain enzymes that help change food into energy. Good sources are milk and milk products such as cheese, sardines and shellfish, green leafy vegetables such as turnip greens, spinach and mustard greens.

**CARBOHYDRATES** – Supplies food energy and helps the body make the best use of other nutrients. Good sources are cereal, grains, rice, pastas, selected fruits such as bananas and dried fruits, and selected vegetables like potatoes, corn and lima beans.

**FAT** - Supplies a large amount of energy in a small amount of food. Fats transport vitamin A, D, E, and K. Needed for healthy skin. Helps delay hunger feelings. Many medical authorities recommend that no more than 35% of the calories eaten in a day come from fat. Good sources are oil, shortening, and butter.

**FOLIC ACID** - Important for protein metabolism. Liver, yeast, leafy vegetables and legumes are good sources of folic acid. Women who are pregnant and lactating have increased needs for folic acid.

**IODINE** - Necessary for proper functioning of the thyroid gland. Prevents some forms of goiter. Good sources are seafood and iodized table salt.

**IRON** - Combines with protein to make hemoglobin, the red substance in the blood that carries oxygen from lungs to cells and myoglobin, which stores oxygen in muscles. Iron helps prevent anemia. Good sources are liver, red meat, shellfish, egg yolk, dark green leafy vegetables, dried peas and beans, dried prunes, raisins, and apricots, black strap molasses, and whole grain and enriched bread and cereal.

**MAGNESIUM** - Stored in the muscles, soft tissue and bones. High concentrations of magnesium are found in whole seeds such as nuts, legumes and whole grains.

**NIACIN** - Promotes normal appetite and digestion. Necessary for healthy nervous system. Needed in certain enzymes that help change food into energy. Good sources are liver, meat, fish, poultry, green vegetables, nuts (don't give to small children – especially peanuts), whole grain bread and cereal and enriched bread and cereal.

**PHOSPHORUS** – Helps build strong bones and teeth. Needed by certain enzymes that help change food into energy. Good sources are meat, fish, poultry, dried peas and beans, milk and milk products, egg yolk and whole grain breads and cereal.

**PROTEIN** - Builds and repairs all body tissues – skin, bone, hair, blood, muscle, etc. Helps form antibodies to fight infection. It is a part of hormones and enzymes that are responsible for regulating body functions such as digestion and growth. May be used to furnish energy (calories). Good sources are meat, fish, poultry, eggs, dried peas and beans (especially soybeans), milk and milk products, peanut butter and nuts.

**RIBOFLAVIN** - Helps cells use oxygen. Helps maintain good vision. Needed for smooth skin. Helps prevent scaling or cracking of the skin around mouth and nose. Needed in certain enzymes that help change food into energy. Good sources are liver, milk, milk products and cheese, green leafy vegetables, meat, eggs, whole grain and enriched bread and cereal.

**THIAMIN** - Promotes normal appetites and digestion. Necessary for a healthy nervous system. Needed in certain enzymes that help change food into energy. Good sources are liver, meat (especially pork), dried peas and beans, wheat germ and whole grain and enriched bread and cereal.

**VITAMIN A** - Helps keep the skin healthy. Protects against night blindness. Needed for normal vision. Promotes growth and development. Helps build resistance to infection. Good sources are liver, oils, dark green leafy vegetables, deep yellow fruits and vegetables (carrots, sweet potatoes, winter squash), egg yolk, whole milk and vitamin A fortified milk.

**VITAMIN B12** - Essential for the functioning of all cells, but especially those of the GI Tract, the nervous system, and the bone marrow. Meat, poultry, fish and milk products are good sources of vitamin B12. Plant foods do not supply vitamin B12.

**VITAMIN B6** - Involved in protein metabolism. The richest sources of vitamin B6 are chicken, fish, kidney, liver, pork and eggs.

**VITAMIN C** - (Ascorbic Acid) - Helps bind cells together and strengthens walls of blood vessels. Needed for healthy gums. Helps the body resist infection. Promotes healing of wounds and cuts. Good sources are certain fruits and vegetables such as citrus fruits and juices, broccoli, strawberries, tomatoes, cauliflower, cabbage, melons, green leafy vegetables and potatoes.

**VITAMIN D** - Helps the body absorb calcium and phosphorus, which build strong bones and teeth. Good sources are vitamin D fortified milk, liver, fish, liver oil, and egg yolks.

**VITAMIN E** – Is an antioxidant and helps maintain the integrity of cell membranes. Required to synthesize a factor essential in the respiratory chain that releases energy from carbohydrates and fats.

The requirement for vitamin E increases with increasing body weight until adulthood. Vegetable oils, wheat germ, dark green leafy vegetables, nuts and legumes are good sources of vitamin E.

**VITAMIN K** - Can be synthesized by the bacteria of the lower intestinal tract. Involved in blood clotting. Spinach, kale, cabbage, and cauliflower are good sources.

## Getting Kids to Eat

The intent of the CACFP is to provide healthier nutrition options to young children by introducing them to new foods at an early age. Studies show that food habits and attitudes formed during the preschool years remain with most people throughout life. Pleasant eating experiences are as important as nutritious foods, as they provide healthy associations with food.

There are a few different ways to achieve this:

- The best method is to introduce a new food along with familiar, liked foods so that the children are more likely to try it.
- Ask the children questions about the food (such as the color, shape, taste{salty/sweet}, or texture {smooth/firm}, etc.)
- Allow plenty of time for the children to look at and examine the new food.
- Discuss why the food is good for their bodies and how it helps them grow.
- Allow children to eat at their own pace, some children eat quickly, and others eat slower, if the slower children are rushed it can create stress and a battle over eating.
- Try to understand each child's personality and reaction to foods. Some children have sensory issues with certain types of textures, they may like the food but not the texture.
- Children should be encouraged to feed themselves, this encourages skill building, self-control and decision making, which are all important parts of a child's development.
- Show the children that you also are willing to try or eat the food. Children will look to the providers lead, so try to sit and eat lunch with the children.
- Work with the parents while you are introducing a new food by suggesting they also try serving it at home.
- Consider regional, cultural, and personal food preferences of children when planning menus.

Do not try to introduce new foods when children do not feel well, are irritable, or are new to the program.

If you offer a new food and they turn it down, don't make it a problem just consider retrying it another day. Remember, that each child is different, and it can take up to 15-20 times of introducing a new food before a young child will try it or accept it. Children should never be forced or shamed into eating, but gently persuaded to try a new food.

### Food Variety

Children are very much like adults in that if they see something that looks appealing or inviting to eat they are more likely to try it. Serving a wide variety of different foods including vegetables and fruits is the best way to ensure that children are receiving balanced nutrition throughout the day. This can be accomplished in several ways:

- Serve foods that offer a variety of color on the plate (Carrot or Green Peas along with Watermelon or Plums) as part of a lunch or dinner.
- Use a variety of crisp or firm foods along with some soft creamy foods (Whole Grain Cracker with a Soft Cheese) at snack.
- Strong-flavored vegetables, such as broccoli, cabbage, and kale, may not be accepted by young children. Make them part of a combination meal so that they are mixed in with other food components.
- Plan to use foods in season, this will help keep your costs down. However, remember that vegetables are creditable whether they are fresh, frozen or canned.

## Food Preparation Tips

Keeping mind, the intent of the CACFP is to provide healthier nutrition options to young children, the tips below will help you achieve this:

- Trim fresh fruits and vegetables carefully to conserve nutritional value. Remove damaged leaves, bruised spots, skins, and inedible parts. Nutrients are lost when tissues are bruised. To avoid bruising, use a sharp blade when trimming, cutting, or shredding.
- Cook vegetables only until they are tender using a little water or a steam basket.
- Once fully scrubbed, cook root and tubular vegetables in their skins to help retain their nutritional value.
- Use the liquid from canned vegetables in soups, and gravies to add nutritional value.
- Cook meat, fish, and poultry according to the cut or type that you purchased. The less expensive cuts and grades of lean meat contain as much food value as higher priced cuts.
- When roasting meat and poultry, skim all the fat from drippings before using them to make gravies. When you are stewing meat, skim the fat from the broth before thickening the stew.

## Making Mealtime a Happy Time

Feeding young children can be fun if you know what foods children should have, and how to bring children and foods together happily.

Pleasant eating experiences are as important as nutritious foods. They provide pleasant associations with food and eating. Food habits and attitudes that form during the preschool years remain with most people throughout life.

- Try to understand each child's personality and reaction to foods.
- It is important to encourage children to feed themselves. Provide lots of finger foods like cooked vegetables, crackers, etc. First efforts with a spoon may be awkward, but encourage them. These efforts are a step toward growth.
- Most one-year-old children can handle bite-sized pieces of food with their fingers. Later they can handle a spoon by themselves. Since they are growing slower than infants, they might be less hungry. They may be choosy and refuse to eat certain foods. Don't worry or force them to eat. Keep offering different foods.
- Children may be in no hurry to eat once the first edge is taken off their hunger. They do not have adults' sense of time. Urging them to hurry may spoil their pleasure in eating.
- Sometimes children 3 to 6 years old go on food "stages". They may want two or three servings of one food at one meal. Given time they will settle down and eat a normal meal. The overall pattern from week to week and month to month is more important.

## Introducing New Foods

Introduce only one new food at a time. Offer a very small variety at first, at the beginning of the meal, so that the children may become accustomed to new flavors and textures. Allow plenty of time for children to look at and examine the foods.

Do not try to introduce a new food when children do not feel well or are cross or irritable. If you offer a new food and children turn it down, don't make a fuss. Offer the food again a few days later. If children do not accept a new food, let them try it again soon so they can become familiar with it.

It may take up to three months of repeated exposure to new foods before children readily accept them.

## Encouraging Favorable Food Attitudes and Good Eating Habits

Many factors can go into creating a healthy food attitude and good eating habits, this section will hopefully give you some extra tips:

- Avoid delays in serving the meal/snack so that children do not have to sit and wait.
- Serve the meal/snack before they get too tired or irritable to enjoy the process.
- Provide a bright, well-ventilated area that has enough space per child so that they are not crowded at the table.
- Use tables, chairs, dishes, cups and eating utensils that are made for young children usage.
- Provide a quiet time just before meals so that the atmosphere can be relaxed and friendly at mealtime.
- Depending on children's age and skill level, have "helpers" to set the table or clean the table after the meal.
- Set a good example. Young children are very observant towards adult's attitudes about food.
- During mealtime, create an atmosphere of acceptance and respect for each child so that the meal will be both nutritionally and emotionally satisfying.
- Use new foods frequently, but introduce them one at a time at different meals. Always serve new foods with well-liked foods so that if the children don't eat the new one they will still have plenty to eat of the other foods.
- Consider serving meals family style and eat at the table with the children. This allows the children to make for choices, try new foods or take a second helping. Most children know when they have been satisfied and will stop eating at that point.
- If you are not serving family style meals, arrange food on plates to make the meals nutritious, interesting, and attractive by offering foods with different color, texture, flavor, and temperature.
- Place all meal components (Milk, Meat/Alternate, Vegetable, Fruit and Grain {bread/Alternate}) that are required for the meal/snack on the table at the time of seating.
- Young children prefer more moderate temperatures to food, stay away from extreme cold or hot foods.
- De-emphasize the "clean-plate" rule. Make sure that you are knowledgeable of serving sizes for each age group and serve the minimum amounts required, children can always go back for a second-helping if still hungry. If a provider puts double portions on a child's plate it may overwhelm the child and they may not eat at all, or they may get comfortable overeating which could lead to childhood obesity.

## Food Service Safety

Being aware of the environment that you provide for young children is the first step to reducing the risk of an accident or injury. It is good practice to do a walk through the childcare area at either the end or the beginning of each day to make sure you eliminate any potential hazards.

Do you currently practice these safety procedures?

- Keep all poisonous materials, including cleaning products, stored safely and out of the reach of children.
- Do not store any poisons or cleaning products near food products or dishes/utensils used for eating.
- When cooking, make sure that the stove is not accessible to children or make sure that pot handles are turned toward the back of the stove so that pots cannot be accidentally pulled off.
- When drinking a hot drink (coffee, tea, etc.), make sure that the drink is well out of the reach of a child, tea and coffee pots should be out of reach when in use. Scalding burns in young children are very serious and can cause lasting damage or death.
- Kitchen knives must be stored in a safe place, preferably in a locked drawer and kept well out of reach of children when in use for food prep.
- Consider age appropriateness when using a high chair for a young child. The child should be the correct size and weight for the high chair, and a safety strap should be used to prevent the child falling out. Young children should not be kept in the high chair for long periods of time, it is meant for short containment during the time it takes to eat or for short activities.
- Once a child is old enough to remain sitting in a regular chair through a meal time, they should be transitioned to a regular chair.

## Food Safety

Another area to pay particular attention to is food safety. The main concern is the prevention of illness caused by eating contaminated food. Bacteria, parasitic worms and chemicals can cause food borne illnesses.

Food borne illnesses are preventable! Remember, food that can cause illness may not taste, look or smell bad. Therefore, it is essential that you observe the following guidelines.

### How to Prevent Food Contamination

- Wash hands, utensils and cutting surfaces thoroughly and often between jobs. This prevents spreading bacteria from one food to another.
- Keep food covered.
- Keep food dry.
- Wash fresh fruits and vegetables before cooking or serving.
- Store food separately from non-food items. Store food only in containers designed for food storage. Do not store poisons or cleaning products in food containers.
- Store old and new batches of the same food in separate containers.
- Keep Utensils, Equipment and Work Storage Areas Clean
- Wash can opener with soap and water at least once a day after use.
- Wash, rinse, and wipe tops of cans before opening.

Use plastic or ceramic cutting boards. Wood cutting boards are very difficult to clean and sanitize properly. When something has been sanitized the bacteria living on it is killed. Kitchen surfaces that come in contact with food, like cutting boards, can and should be cleaned often. One way of doing this is by using a bleach solution of 1 Tbsp. of bleach to one gallon of water. Use this sanitizing solution on all surfaces and equipment after it has been washed. Follow the three-step plan.



**CAUTION!** Never mix bleach and ammonia together as a poisonous gas is produced.

- Use paper towels or disposable wipes for cleaning storage areas. Sponges and cloths will spread bacteria.
- Keep pets and pet food out of work and storage areas.
- Keep garbage in covered containers.
- If you use plastic gloves, remember they can become as dirty as your hands. Gloves for handling food should only be used once.

## How to Prevent Bacterial Growth

There are two age groups that can be seriously affected by bacterial growth in food, infants/young children and the elderly or anyone with a compromised health issue. It is necessary to keep foods at correct temperatures to prevent any bacterial growth that can cause a foodborne illness.

- Hot foods must be kept about 140°F and keep cold food below 40°F.
- Keep food out of the Danger Zone between 40°F and 140°F.
- Do not allow food to remain at room temperature for more than 2 hours.
- Refrigerate leftover food promptly. To cool food rapidly, large amounts of leftover food should be divided into smaller, shallow containers.
- Check your refrigerator's temperature regularly to assure its proper operation. The freezer should be able to maintain an operating temperature below 0° - 5°F. The refrigerator should be able to maintain a temperature of 35°-40°F.
- It is important to avoid overcrowding in both the refrigerator and freezer so that the cold air can circulate and keep all food equally cool.
- Food must be thawed either in the refrigerator or in cold water that is changed every 15 minutes. DO NOT thaw food at room temperature. Foods defrosted in the microwave should be cooked immediately.

## How to Cook Foods Thoroughly

Use a meat thermometer to be sure that meat is cooked thoroughly. Poultry should be cooked to at least 165°F, pork to 150°F, and beef to at least 140°F. These are the minimum recommended temperatures. Many experts recommend higher temperatures of 180°F for poultry, 170°F for pork, and 160°F for beef.

Leftovers should be reheated to 165°F.

Gravies and meat sauces should be brought to a rolling boil.

Do not interrupt cooking times. Partial cooking can raise temperatures to the danger zone without becoming hot enough to kill bacteria.

## Choking Prevention

**Sit with Children During Meals and Snacks to Make Sure They:**

- Eat slowly
- Chew food well before swallowing
- Eat small portions at one time

**Fix Table Foods so they are Easy to Chew by:**

- Grinding tough foods up
- Cut food into small pieces or thin slices
- Cut round foods, like hot dogs, into short strips rather than round pieces  
(Note: Hotdogs are only allowed for children ages 4 and older).
- Take out all bones from fish, chicken, and meat
- Cook food until it is soft
- Take out seeds and pits from fruits

Many foods popular with children are often a potential hazard for choking.

**Foods That May Cause Choking:**

Firm, smooth, or slippery foods that slide down the throat before chewing like:

- Hot dogs
- Peanuts
- Grapes
- Hard Candy\*

*\* Not Creditable*

Small, dry or hard foods that are difficult to chew and easy to swallow whole like:

- Popcorn\*
- Nuts and Seeds
- Small pieces of raw carrots
- Potato Chips\*

*\* Not Creditable*

Sticky or tough foods that do not break apart easily and are hard to remove from the airway like:

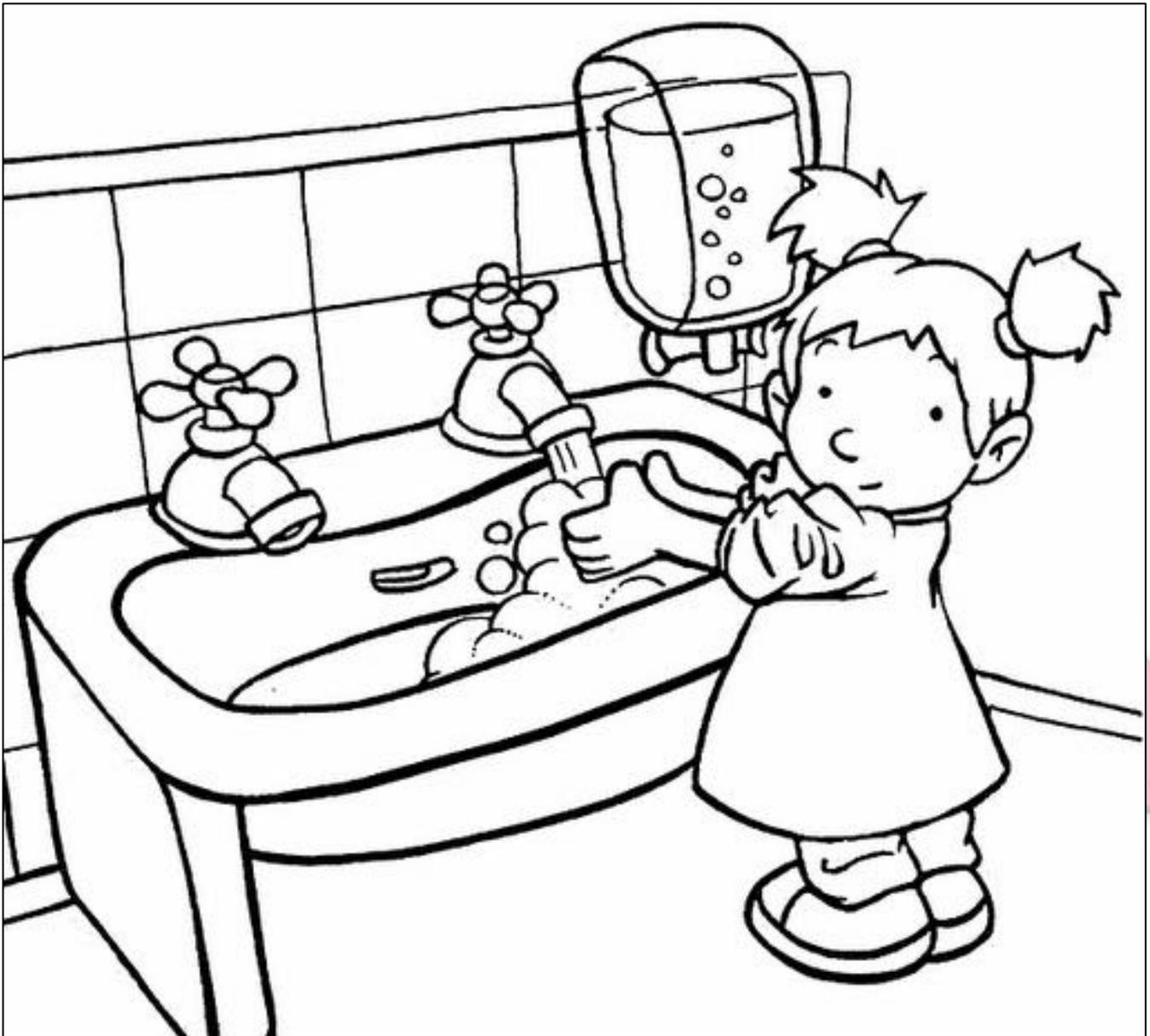
- Peanut Butter
- Tough Meat
- Raisins or other Dried Fruits

**DO NOT serve these foods to children under 4 years of age!**

Hot Dogs	Sausage
Chunks of Meat or Cheese	Whole Grapes
Fish or Meat with Bones	Raisins
Marshmallows/Marshmallow Fluff	Popcorn
Hard, Gooney, or Sticky Candy	Chewing Gum
Chunks of Peanut Butter	Lollipops
Raw Vegetables	Nuts and Seeds
Whole Olives	Ice Cubes
Potato/Corn Chips	Pretzels

## WASHING HANDS

In order to keep meal time sanitary and safe, each child must wash their hands before eating.



### Remember these handwashing instructions:

- use warm running water and soap
- wash for 10-20 seconds
- rinse
- dry with paper towel

## Provider Resources - Food Program Policies

### Menu Choices

Providers can choose the method of claiming that is best for them.

1. Internet –Our Internet claiming system Minute Menu/KidKare is web based. Providers do not need any special software to participate. KidKare can be accessed from any device with Internet access. Minute Menu/KidKare is an excellent way to manage and submit your claim. It requires no envelopes, stamps, or trips to the post office. For information on how to claim on the internet, ask your home reviewer or call our office.
2. Scannable Menus - A provider writes in the foods served, assigns each child a number and bubbles in (pencil in the circle) the meal counts. A more accurate method for claiming requiring no totals for meals served (training manual found in back of this manual).

### Submitting Your Claim

For Internet claims submit your menus electronically on the last day of each month. If you are mailing your menus be sure to have the correct postage. It is always best to have them weighed at the post office. We are not responsible for menus that arrive after the 5<sup>th</sup> of the month thus missing the first claim to the state. To ensure that menus arrive in time, we suggest that you use our online menu system.

### Very Important Information

If you are approved for less than all five standard meals/snacks a day, for example, Breakfast, AM Snack, Lunch and PM Snack and you wish to serve supper, you need to inform the main office **before** claiming the extra meal to obtain approval.

Should your meal times change, you need to inform the main office.

### Payment Policy

Menus received in the main office by the **5<sup>th</sup> of each month** will be submitted on the first bill to the Massachusetts Department of Elementary and Secondary Education. Checks /direct deposits will be issued immediately when funds are received from the state. Providers may take advantage of receiving their reimbursement through:

- Check
- Direct Deposit

Menus that arrive after the 5<sup>th</sup> of the month will be placed on the 2<sup>nd</sup> bill to Massachusetts Department of Elementary and Secondary Education and will be paid when funds become available.

## Adjustments

You have 5 days from the time you receive your claim error summary to request an adjustment.

## Deductions

The intent of the program is to ensure children are receiving nutritious meals. When all meal components are not present, you cannot be reimbursed.

Most mistakes are careless errors in recording food served. To avoid mistakes:

1. Fill out your menus prior to each meal service as required.
2. Review your menus for accuracy before mailing.

### Federal Regulation

Reimbursement may not be claimed  
for any menu that does not meet the meal pattern.

## Holidays

A letter from you is required if you will be open and claiming for any of the following major holidays:

**New Year's Day**

**Labor Day**

**Memorial Day**

**Easter**

**Thanksgiving Day**

**Christmas Day**

**July 4<sup>th</sup>**

This note must include the reason why any child/children will be in care.

If a letter is not present, the meals will be deducted for the holiday. If the holiday falls on the weekend the letter is required for the legal holiday.

Additionally, on the Menu itself, you **MUST** indicate that you did in fact work that holiday. Both the letter and this note **MUST** exist to be reimbursed for meals on these holidays.

## Bad Weather

Parents usually go to work even when local schools are closed due to inclement weather. If the Governor calls a state of emergency, but you are caring for children anyway, please note this on the menu.

## Training

Providers are required to have 6 training hours per year for the food program that has been pre-approved by the Department of Elementary & Secondary Education for the food program. PRI will offer training through home study courses offered online or handed out at home reviews. All PRI home study courses are free. The training course requirements may change yearly. Typical subjects include Record Keeping, Nutrition, Health & Safety, & Physical Education.

All 6 training hours must be completed  
between October 1<sup>st</sup> and September 30<sup>th</sup>!

Failure to complete the required trainings will affect your  
reimbursement.

## Other Services

### Calendars

Each year, PRI produces a Calendar that is designed to be used by Providers. This calendar contains information regarding the dates for submitting paperwork throughout the year. Included in the calendar are sections for keeping Attendance records and financial information to use for your tax return at the end of the year.



# The Tiering System of Reimbursement

## What is the Tiering System of Reimbursement?

It is the system for reimbursing family child care providers at different rates based on:

- The location of the child care home;
- Income of the child care provider's household; or
- Income of an individual child's household

This system of reimbursement went into effect July 1, 1997; a result of the Personal Responsibility and Work Opportunity Reconciliation Act passed by Congress in July 1996 and signed into law by President Clinton. The law identified the Tiering System upon which the United States Department of Agriculture then published the regulations to implement the law.

## Definitions

**Tier 1 Reimbursement** – The higher rate of reimbursement. Starting with a base of 1997 Fiscal Year reimbursement rates, you will receive a yearly rate increase as determined by The Department of Agriculture.

**Tier 2 Reimbursement** – This is a substantially lower rate than Tier 1, in many cases approximately half. (See appendix for current year's income guidelines).

**Low-Income** – When the combined income of those living within the household is on or below 185% of poverty. (See appendix for current year's income guidelines).

**Mixed Homes** – This is a Tier 2 home where the provider elects to give all her/his child care families a meal benefit form to see if any of his/her child care children qualifies as low income. If a child qualifies for Tier 1 the provider will be reimbursed the higher rate for that child.

**Means Test** – Forms completed by providers and/or parents listing all members living in the household and all gross income.

## The Tier System

The following are the requirements of the Tiering system for reimbursement:

### **Tier 1 Eligibility**

A provider may receive Tier 1 eligibility based on:

**School Data** – A family child care home located in an area served by an elementary, middle or high school in which at least 50% of the total number of children enrolled receives free or reduced-price school meals.

**Census Tract Data** – A family child care home is located in a geographic area as determined by census data, in which at least 50% if the children residing in that given area are eligible to receive free or reduced-price school meals.

**Provider's Household Income** – Provider's own personal family income.

## Qualification

Providers can qualify either by:

**Personal Household Eligibility** – If the family size and the income of all wage-earning members of the household are equal to or less than the guidelines set by the United States Department of Agriculture of 185% of poverty. Provider income eligibility status is determined at the time of sign up. Income renewal packets for providers are mailed directly to them in May for a June 30th ending date.

**Categorical Eligibility** – A provider receives funds or benefits through a recognized program or agency that is serving the low-income community. Such programs include Food Stamps, WIC, TANF, or families who already qualify for free and reduced meals through school lunch, pre-school or federally funded Head Start centers.

All child care children enrolled in that home will receive Tier 1 reimbursement rates.

## How to Apply for Tier 1 Eligibility Due to Family Income

To apply, providers must fill out the meal benefit form listing the income of all members living in the household before taxes. A provider needs to show proof of all income within the house.

**Note: In the case of the provider or any other self-employed member of the household, income should be listed after expenses have been taken out.**

## How to Fill Out the Forms

A provider qualifying for income eligibility needs to fill out a Meal Benefit form for herself and listing all income within the household.

When school or census qualified, a provider must submit the meal benefit form for their house, if they wish to claim their own on the program. For complete instructions see "Meal Benefit Instructions."

**REMEMBER!! When writing down income, state whether it is WEEKLY, MONTHLY, etc.**

If a provider is not Tier 1 by school or census, they must fill out a Meal Benefit form with documentation. The most common documentation to submit is the IRS Forms 1040 and Schedule C submitted for the previous year. If a provider receives food stamps or TANF they can include that as their documentation.

## Tier 2 Eligibility

Tier 2 is for all other licensed providers who do not qualify for Tier 1 reimbursement.

Providers who are Tier 2 but whose income declines can be reclassified. Contact the main office immediately to have forms sent to you.

## Mixed Home Eligibility

### MIXED HOME

A family child care home that does not meet the criteria for Tier 1 reimbursement is classified as Tier 2

Tier 2 family child care homes have the option to receive Tier 1 rates for children enrolled in their child care whose household's income meets the Income Eligibility Guidelines

Once the parent's meal benefit forms have been distributed to a child care household, the packets **MUST** be distributed to all families enrolling in the child care home.

This information is Confidential.

## Reimbursement and Income Eligibility

If you qualify for Tier 1 eligibility due to school area data or census data, and you wish to claim your own children on the food program, you must fill out a Meal Benefit Form and follow guidelines for claiming income eligible children on the following page.

**You do not have to submit income verification such as tax returns if you already qualify for Tier 1 status based on school or census data.**

If your family meets income eligibility guidelines and has been approved, you may claim your own children. The eligibility amounts change each year.

You must meet the income guidelines. This is determined by taking the income of all people living in the household and comparing it to the USDA income guidelines. The USDA requires that you update this form yearly in order to continue claiming your own children. In determining income for the self-employed, take the gross receipts and subtract all expenses related to your business to arrive at a figure. Remember Child Care Providers are self-employed. Income from your child care business must be included.

## PROVIDER REMINDER CHECKLIST

### Preparing Your Scanned Menu

- Begin your menus on the first day of the month and end on the last day of the month.
- Claim for no more child care children than the capacity that appears on your license.
- Claim for no more than 2 meals/one snack or 2 snacks/one meal per child per day.
- Have an enrollment form on file for each child.
- Send any new enrollment forms for new children in your child care to the main office as soon as the child enrolls.
- Check that all bubbles are darkened and filled in completely. If you can see the number through the bubble, the scanner might misread your menu.
- Sign all menus submitted.
- Check over your menu to make certain you wrote in all required components.
- Menus need to be recorded prior to the meal service.
- Meal counts need to be recorded by the end of each business day.

### Sending Out Your Scanned Menus

- Did you send your menus to the main office?
- Did you attach sufficient postage?
- Did you keep your copies?

### Preparing Your Internet Menu

- Begin your menus on the first day of the month and end on the last day of the month.
- Enroll any new children into your minute menu system. Have the child's parents fill out a paper Child Enrollment form provided at your home reviews. **We cannot accept the enrollment forms printed from minute menu.**
- If you had a school age child present for AM snack or lunch on a school day, did you check the "school out" child sick box plus the attendance box?
- Review your menus and attendance prior to submitting. To view what you have inputted go to reports and access the menus and attendance that you will be submitting.
- Send any new enrollments to the main office prior to submitting your menus.
- Submit your menus on the last day of care of that month.

### General Checklist

- Send in any license renewal or capacity increase, or any other change in license, immediately upon receipt of new license.
- Send in any double session or weekend approval forms prior to claiming.
- Did you notify the office if you were **NOT** going to be home for a meal/snack service?
- Did you notify the office if you were closed for a day, week, or longer?

## Claim Information Form (CIF)

We've referred to the Claim Information Form, or CIF, several times in this workbook and for good reason: the CIF is a very useful quick-reference form that we'll send you every month. Take a quick look at your Claim Information Form (CIF) to familiarize yourself with its content.

The CIF contains a list of all your currently active children and their child numbers. Each child is listed along with the child's age and date of birth (DOB). Pay close attention to the Age category, especially for Infants, as the CIF will indicate the child's age as of the 1<sup>st</sup> of the month. If a child turns 1 year old within the month, make sure to start recording the child on the Regular Menu on the child's birthday.

The CIF also lists several other pieces of information of relevance to your children:

- each child's status (Active or Pending)
- each child's date of enrollment (DOE)
- each child's relationship to the provider
- an indication as to whether each child is a special needs child
- an indication as to whether each child requires a special diet
- the school level of the child
- if the child is an infant, the parent's preference as to who is responsible for supplying formula

You'll notice on the sample CIF that there are several blank spaces between some of the children, indicating several unused child numbers. This is fine! Feel free to skip as many numbers as you like. But make sure you never use the same number for two different children that are in your care at the same time. Each CIF should contain one child per child number – never double up.

### Enrolling New Children

You'll use the Child Enrollment form to enroll a new child with the Food Program. But you should also add that child to the CIF so you can keep track of that child and the child's number when filling out forms during the rest of the month. After you send your monthly claim forms into our offices, we'll send you out a CIF with the newly-enrolled child printed on it.

Take some time to review the example Claim Information Form on page 54 or review the one given in your packet with your name and provider ID#.

## Recording Special Information on the CIF

Each month, when you send in your Regular and Infant Menu forms (and any Child Enrollment forms that may have been filled out), you must also send in the CIF to our offices. On this CIF, make any notes as to any information you think we should know. Also, after we review your claim information each month, we'll send you a new CIF for use during the next month. In most cases, it takes up to 2 months for a new child to show up on your pre-printed CIF, so keep this in mind when assigning numbers to new children.

### Telling PRI: You Are Open on Holidays

Record any holiday dates that you were open for business in the space provided. Check the Holidays listed on p. 33. To claim for holidays, you must submit a letter stating that you occasionally work on holidays, then be sure to note on the menu that you worked on the holiday.

### Telling PRI: When Children Start School

If you have a child who is starting Kindergarten or School, you should let us know. Write the child number for any child starting school at a particular level, and indicate which School Level the child is attending (using a code from the Legend).

### Telling PRI: When Children Withdraw from Care

If a child withdraws from your care during the month, indicate the child number, the last date in care, and the reason for the withdrawal in the space provided.

### Telling PRI: Why School Aged Children Attend AM Snack or Lunch

School-aged children should typically be attending school when AM Snack or Lunch is being served. Occasionally, children stay out of school when they are sick but will still attend care in your home. Other times, a child doesn't go to school because school isn't in session that day.

If you serve a school-aged child during AM Snack or Lunch at any time during the month (and it's not during the summer holidays), provide a reason why that child wasn't in school along with the relevant date(s).

### Using the CIF your first two months

When you get started using this paperwork, PRI won't know the children that are enrolled in your care, so PRI won't be able to issue you a pre-printed CIF with all of your children already on it. You should have a couple of blank CIFs for use during the first two months. Fill them out so that they both contain a list of your children with their corresponding child numbers. (There's no need to supply any of the other child-specific information within the list itself). Make sure they both contain the exact same list of children.

You'll send one copy of these hand-written CIFs into our offices after your first month, and the other after your second month. By that time, you'll have received the pre-printed CIF for your next month, and we'll continue to send you a new CIF every month from then on. And don't forget to write any notes on those CIFs that you think necessary to tell us, just as you would any other month.

## Serious Deficiency

Serious deficiency is a serious matter which we all hope will never happen. Providers are required to follow the rules and regulations of the food program and the staff of PRI will make every effort to train and reinforce information given to you.

The CACFP regulations at 226.6(c) as defined by the USDA states the following “serious deficiencies” for family child care homes that, if not corrected, would result in a provider’s termination for cause:

- Misrepresentation of information submitted on the application;
- Submission of false claims for reimbursement;
- Simultaneous participation under more than one sponsor;
- Non-compliance with the Program meal pattern;
- Failure to keep required records; or
- Any other circumstance related to non-performance under the sponsor-provider agreement, as specified by the sponsoring organization or the State Agency.

If during routine food reviews, parent contact, or claim processing, PRI finds that a provider is not following the policies and regulations of the CACFP program, an initial letter and corrective action plan will be sent to the provider to help fix the non-compliance. Should the provider fail to meet or follow the corrective action plan, they will be declared seriously deficient.

During the serious deficiency process the Massachusetts Department of Elementary & Secondary Education’s, Office for Food and Nutrition Programs will be informed and the process begins. Once the process begins, a provider who is declared seriously deficient cannot terminate from PRI. The steps are as follows:

### Step 1:

The initial “Serious Deficiency” letter is sent to the provider and a copy is sent to the state agency. At this point the provider has the opportunity to respond to the serious deficiency with how they will fix the non-compliance.

- 1.1. If PRI accepts the providers corrective action a food review will be done to validate the corrective action is being followed, then the serious deficiency is temporarily deferred.
- 1.2. If PRI does not accept the providers corrective action, PRI must move to step 2.
- 1.3. If the provider ignores the first letter or does not respond, PRI must move to step 2.

### Step 2:

A “Propose to Terminate” letter is sent to the provider along with instructions on the appeal process, a copy is also sent to the state agency. The provider has a timeframe to respond requesting an appeal.

- 2.1 If the provider responds within the timeframe and requests an appeal, the provider’s file is given to an impartial person for the hearing.
- 2.2 The appeal person will review the provider file, talk to the provider and then decide either in favor of the provider or PRI.
- 2.3 If the appeal is in favor of the provider the “Propose to Terminate” is temporarily deferred, pending proper following of CACFP regulations.
- 2.4 If the appeal is in favor of PRI, the agency must move to step 3.

### Step 3:

A “Termination” letter is sent to the provider and a copy is also sent to the state. At this point the provider is placed by the state agency on the “National Disqualification List” and is banned from CACFP participation for 7 years and/or money is paid back if there were false claims.

Should the licensing agency “EEC” pull a provider’s license for health or safety reasons the food program is required to declare the provider seriously deficient with the same consequences.

## FORMS

PRI uses a number of forms, which are critical to its ongoing communication system.

**Please note:** Forms can change without prior notice. Information supplied on outdated or discontinued forms may need to be re-submitted.

Remember:

When filling out any form to be as neat and concise as possible. The food program is funded through a U.S. Government Agency; therefore, all documents become the legal records of the agency, which is audited on a regular basis for accuracy and thoroughness as mandated by federal regulations.

The following pages provide an explanation on the uses of the required forms. Examples of each form can be found at the end of this section.

**Site Agreement Form** - When a provider joins our program we fill out a site agreement form which contains the provider's name, address, birth date, tier status, hours of operations, license information, and meal times. Example can be found on p. 47

**Permanent Agreement** - When a provider initially joins our program she signs the permanent agreement. This Agreement specifies the rights and responsibilities of the sponsoring organization and the provider as participants in the United States Department of Agriculture's (USDA) Child and Adult Care Food Program. This form is required to be kept as long as the provider is in our program and shown at every home visit. Example can be found on p. 48 & 49

**Annual Enrollment Update - Rights and Responsibilities/ Termination Procedure** - At the time a provider signs up, and every year thereafter, the Rights and Responsibilities are signed. This agreement specifies the additional rights and responsibilities of the provider as a participant in the United States Department of Agriculture's (USDA) Child and Adult Care Food Program. This is to be available for every home visit. Example can be found on p. 50 & 51

**CACFP Family Day Care Home Certificate** - This form is signed when the provider is joining our program. The provider is verifying that she is aware that she can only change sponsors 1 time during our fiscal year. Also, it asks the provider has she ever received a letter from EEC regarding Order to protect, Cease and Desist Order, Notice of Action or Voluntary Surrender of License. Example of form can be found on p. 52

### Child Enrollment Form

A form must be on file for each child enrolled in your child care including your own **if income eligible**.

This includes full time, part-time or substitute care children. Be certain to have the parent fill the child's name, date of birth, date started in child care and both the times and the days that the child will be enrolled in child care. When filling out the expected meals, have the parent check off every possible meal during the time frame that the child is present, even if the child is there only occasionally. If this child is school age please note the times the child is in school. If the child will attend your child care on school vacation and no school days, it is very important to list the times they will be there and all the meals they may participate in. Every parent must receive a Building for the Future flyer when they enroll their child in your program. Example can be found on p. 53

Enrollment forms are required to be renewed annually,  
and must be submitted to the Main Office on April 1<sup>st</sup> of each year

Submit enrollments prior to the first month's menus any time a new child is enrolled. If an enrollment form has not been received by the Main Office, you will not receive reimbursement for that child unless the enrollment form is received within 5 days of your menus being processed.

### Infant Meal section

All children including infants must be offered the food program. Providers must offer one type of formula; however, a parent has the right to refuse the provider's choice and supply their own. The Infant Meal section of the Enrollment informs the office who is supplying the formula- the provider or parent- or if the child is breastfed. It also informs us who is supplying the baby food- the parent or the provider. Please see the sample on page 54 to review infant meal enrollments.

### Claim Information Form

Providers that submit their menus using the scanned menus will receive a claim information form (CIF) each month. This form contains the names and numbers of all the children presently enrolled in your child care, the time your meals and snacks are served and your training hours to date. Providers are asked to only return this form with their menus if:

- If you wish to terminate a child from the food program.
- If you are adding a new child, write their name next to the number you have assigned them.
- If a school age child was present for AM snack or lunch on a school day. We need the date, the child's name and number and the reason. This allows the provider to be paid for that child.
- Your meal times have changed.
- Any other corrections that might be necessary.

Example can be found on p. 55

### Scanned Regular and Infant Menus

Follow the CACFP Pattern as listed on the left side of the sheet. When filling out menus, describe each meal so that the reader can "visualize" what has been served. Examples can be found on p. 56 & 57.

Note the method of preparation:

Examples:

**Eggs:** scrambled eggs, fried eggs, hard-boiled eggs

**Potatoes:** mashed potatoes, baked potatoes, French fried potatoes

**Chicken:** baked chicken, fried chicken, broiled chicken, chicken nuggets

**Meat:** Roast, steak, hamburger, pork chops,

Note the type of cheese:

Examples:

**Cheese:** American cheese, Swiss cheese, cheddar cheese

Note the name of the product for crackers, juices, and cereals

Examples:

**Crackers:** Ritz Crackers, Wheat Thins

**Cereal:** Cheerios, Rice Krispies

**Juices:** Apple Juice, Cherry Juicy Juice (See the Creditable Food Listing for a list of approved juices).

Fill in all the lines except "other" which is designated for listing additional foods served, of any kind. These foods are not required. Each food served must be recorded at each meal. For example, write the word "milk" whenever required (B/L/S). Do not draw a line or make ditto marks anywhere on your menu.

**Remember to Write It All Out**

## **INFANT MENUS-**

If you have 2 more infants that are in the same age group on your menus, you must record each infant's menus separately. The attendance for the infants will be recorded all on one menu. You can turn the menu over and record the additional meals on the other side, or record them on a separate piece of paper and send in with your menus.

Please see the directions for scanned menus included with this manual.

## **Direct Deposit Form**

PRI offers their providers the opportunity to have their reimbursement automatically deposited into their checking or savings account. If you wish to do this, please send in the direct deposit form included with this manual. Please attach either a voided check or a bank verification letter with the direct deposit form. (Example can be found on p. 59)

## **Weekends, Evening Snacks, and Double Sessions**

- **Weekends-** You must receive prior approval to claim for children on weekends. Request the Weekend, Evenings, and Double Session Form from the main office. While you are doing weekend care, your home visitor will be required to do two unannounced visits during the weekend hours within the year. (Example can be found on p. 62)
- **Evenings-** Providers must receive prior approval to claim children for evening snacks. You will be approved for only the number that you have applied for. If at any time your number increases or decreases, you must reapply. Your home monitor will visit you 4 times a year, 2 of which must be during your evening snack. In addition, you must send your EEC licenser a note or e-mail informing them that you are doing evening care, and send a copy to our office. If your license already states non-traditional hours you do not have to write a note or e-mail EEC. (Example can be found on p. 60)

- **Double Sessions-** The occasion can arise where you serve the maximum number of children that appears on your license for a given meal. Providers who care for different children throughout the course of the day may find it necessary to serve a meal or snack more than once. For example, assume four children come to your home at 7:00 am and you serve them breakfast at 7:30 am. They leave at 8:00 am for school, but four more children arrive at 8:15 am. You serve them the same breakfast at 8:30 am. Therefore, you have served breakfast twice. This scenario is referred to as double sessions. (Example can be found on p. 61)

**Provider's claiming double sessions will receive 4 visits a year, 3 of which will be unannounced. Two of the visits will be during the double session meal /snack.**

There are many variations on how double sessions work. Call the main office if you have any questions about filling out your form.

PRI needs to observe both shifts of your pre-approved double session. Providers claiming double session will receive an extra unannounced visit yearly. Should a provider stop the double session situation, she would inform the main office.

You are required to reapply by July 1<sup>st</sup> each year. If at any time you are no longer offering double sessions, please inform the main office immediately. (See example of the double session form on page 61.)

**IMPORTANT-** EEC Regulations state that a provider cannot work more than 12 hours per day. If you are open more than 12 hours, you will need to have an approved license assistant. We will need a copy of their license.

**You must receive prior approval for double sessions, weekends and evening snacks before claiming for the extra meals.**

**Tiering Forms and Parent Packets-** Please refer to the section on Tiering beginning on page 35 for information on these subjects.

- Income Eligibility for Providers Example can be found on p. 63-64
- Meal Benefit form for Provider's Foster Child

**Building for the Future poster-** Is to be posted in your home. Example can be found on 65

**Medical Statement for Children Requiring Special Meals** – Any time a child cannot eat certain foods due to allergy or a disability, we need a medical statement from a Doctor stating what the child cannot have and which food to offer in its place. Example can be found on p. 66-67

## Form Examples Used in Provider Resources, Inc. – Food Program

<b>Form</b>	<b>Example on page #</b>
1 Site Agreement	47
2 Permanent Agreement	48-49
3 Annual Enrollment Update - Termination Procedure	50
4 Annual Enrollment Update - Rights and Responsibilities	51
5 CACFP Family Day Care Home Certificate	52
6 Child Enrollment Form - School Age Child Example	53
7 Child Enrollment Form - Infant Example	54
8 Claim Information Form (CIF)	55
9 Scanned Menus - Regular	56
10 Scanned Menus - Infant	57
11 Internet Claim Filing Agreement	58
12 Direct Deposit	59
13 Weekends, Evenings & Double Session approval form - Evening Snack Approval	60
14 Weekends, Evenings & Double Session approval form - Double Sessions Approval	61
15 Weekends, Evenings & Double Session approval form - Weekend Approval	62
16 Tiering Forms for Providers – Income Eligibility	63-64
17 Building the Future Poster	65
18 Medical Statement for Children requiring Special Meals	66-67

# Site Agreement

MA CFP-1B July 2015

<p><b>COMMONWEALTH OF MASSACHUSETTS</b>                  Department of Elementary and Secondary Education  <b>OFFICE FOR NUTRITION HEALTH &amp; SAFETY PROGRAMS</b>                  75 Pleasant Street                  Malden, MA 02148                  781-338-6499  <b>SITE INFORMATION</b>  <b>CHILD AND ADULT CARE FOOD PROGRAM (CACFP)</b>                  Family Day Care (FDC) Home</p>	<p><b>1. Agreement Number:</b> <u>09-314-CF-75</u></p> <p><b>2. Site Number:</b> _____</p> <p><b>3. Name and Address of Sponsor:</b> Provider Resources Inc,                  360 Merrimack St                  Suite 44                  Lawrence Ma 01843</p>																												
<p><b>4. Name of Provider &amp; Street Address of FDC Home</b></p> <p>Name: <u>Pocket Polly</u>                  (Last) (First) (Middle)</p> <p>Address: <u>123 Main St</u></p> <p>City/St/Zip: <u>Boston, MA 02119</u></p> <p>Telephone number: <u>617-101-1001</u></p> <p>E-mail: <u>Polly@yahoo.com</u></p> <p><b>5. Days of week that formal care is provided: If care is provided on weekends, complete &amp; retain the Provider Schedule Form.</b></p> <p><input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> T <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> TH <input checked="" type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun</p> <p><b>6. Number of operating weeks per year:</b> <u>52</u></p> <p><b>7. Age Range of Enrolled Children: (Birth through 12 years)</b></p> <p>From: <u>Birth</u> Through: <u>12 yrs</u></p> <p><b>8. Hours of Care: (Daily hours of formal day care)</b></p> <p>From: <u>7:00 AM</u> To: <u>9:00 pm</u></p> <p><b>9. Has Provider Contracted With Any Sponsor for CACFP Reimbursement Within the Past 12 Months?</b>                  (Failure to disclose prior participation may result in denial of CACFP approval. Please be advised that you may change sponsor one time per year and only be in one Food Program during any month.) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes                  If "Yes", give the name of the sponsor, date provider was terminated and include termination letter from previous sponsor:</p> <p><b>10. Has the provider ever been determined Seriously Deficient in Massachusetts or any other state?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  If "Yes", when and by whom? _____</p>	<p><b>11. Verified Provider Information:</b></p> <p>Provider's Date of Birth: <u>1-1-64</u></p> <p><b>12. Current number of eligible children enrolled in the daycare home program:</b> <u>3</u></p> <p><b>13. License/Voucher Information</b></p> <p>A. EEC License/Certificate #: <u>9123456</u>  <u>9-1-15</u></p> <p>B. EEC License Expiration Date: <u>6</u></p> <p>C. EEC License Capacity _____ E. ICC Voucher Expiration Date _____</p> <p>D. EEC Letter Date _____ F. ICC # of Children _____</p> <p><b>G. Does Provider live at licensed address?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                  If "No", complete Form FDC - PI</p> <p><b>14. Meals to be served to eligible children:</b>  <i>A maximum of three meals, including one snack may be claimed per child per day. For double sessions, complete and retain Provider Schedule Form for approval by this office. Please indicate which meal services have double session meals by checking the appropriate box below.</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Type</th> <th>Time meal service begins</th> <th># of eligible children served</th> <th>Double Session</th> </tr> </thead> <tbody> <tr> <td>A. Breakfast</td> <td><u>7-8 AM</u></td> <td><u>6</u></td> <td></td> </tr> <tr> <td>B. A.M. Snack</td> <td><u>10:00-10:30</u></td> <td><u>6</u></td> <td></td> </tr> <tr> <td>C. Lunch</td> <td><u>12:00-1:00</u></td> <td><u>6</u></td> <td></td> </tr> <tr> <td>D. P.M. Snack</td> <td><u>2:30-3:00</u></td> <td><u>6</u></td> <td></td> </tr> <tr> <td>E. Supper</td> <td></td> <td></td> <td></td> </tr> <tr> <td>F. P.M. Snack</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p><b>15. Home Eligibility Status</b></p> <p>Tier I: <input checked="" type="checkbox"/> Area <input type="checkbox"/> Income Eligibility <input type="checkbox"/> Census <input type="checkbox"/> Food Stamps</p> <p>Tier II: _____</p>	Type	Time meal service begins	# of eligible children served	Double Session	A. Breakfast	<u>7-8 AM</u>	<u>6</u>		B. A.M. Snack	<u>10:00-10:30</u>	<u>6</u>		C. Lunch	<u>12:00-1:00</u>	<u>6</u>		D. P.M. Snack	<u>2:30-3:00</u>	<u>6</u>		E. Supper				F. P.M. Snack			
Type	Time meal service begins	# of eligible children served	Double Session																										
A. Breakfast	<u>7-8 AM</u>	<u>6</u>																											
B. A.M. Snack	<u>10:00-10:30</u>	<u>6</u>																											
C. Lunch	<u>12:00-1:00</u>	<u>6</u>																											
D. P.M. Snack	<u>2:30-3:00</u>	<u>6</u>																											
E. Supper																													
F. P.M. Snack																													
<p>I HEREBY CERTIFY that all of the above information is true and correct. I understand that this information is being given in connection with the receipt of Federal funds; that Department officials may for cause, verify information; and that deliberate misrepresentation may subject me to prosecution under applicable State and Federal criminal statutes. Reimbursement will be claimed only for meals served to eligible enrolled children during the hours they are in attendance at the institution and that any sizeable changes in the above enrollment figures will be reported immediately.</p>																													

2-1-16 Polly Pocket  
 Date Signature of Provider

2-1-16 Denise Helo  
 Date Signature of Agency Representative completing this form

Date \_\_\_\_\_ Signature of Authorized Sponsor Representative

**TO BE COMPLETED BY SPONSOR**

Income Eligible Provider Children	Foster Children	Non-Residential Children		Total Children	
		Tier I	Tier II	Tier I	Tier II

In accordance with Federal law and U. S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, D. C. 20250-9410 or call (800) 795-3272 or (202) 720-6382 (TTY).

USDA is an equal opportunity provider and employer

July 2015

# Permanent Agreement – page 1

MA CFP-1B July 2016

## PERMANENT SPONSOR/FAMILY DAY CARE HOME AGREEMENT

This agreement is made and entered into by and between the PROVIDER RESOURCES, INC. and \_\_\_\_\_  
 \_\_\_\_\_ Sponsor  
 \_\_\_\_\_ whose address is \_\_\_\_\_ MA \_\_\_\_\_  
 Family Day Care Provider \_\_\_\_\_ Street \_\_\_\_\_ City/Town \_\_\_\_\_ Zip \_\_\_\_\_

### The family day care provider named above shall agree to:

1. Maintain enrollment forms completed annually for all children.
2. Serve and record daily meals by type and attendance at meal service, to those children enrolled in the Family Day Care Program (inclusive of the provider's income eligible enrolled children) and submit by the 5<sup>th</sup> of the next month.
3. Claim no more than three meals served per child per day, one of which must be a snack, of the following meal types; Breakfast, Lunch, Supper or Snack. Meals claimed are based on actual meals served during times specified on the Site Information form and per the parent/guardian signed enrollment form.
4. Serve meals that meet the Child and Adult Care Food Program meal pattern, including a variety of nutritious foods.
5. Provide adequate supervision during the meal service and report to the sponsor any meal service related problems.
5. Record and maintain menu of the meal as planned prior to the meal service.
7. Report to the sponsor any changes in the meal times and in the number of enrolled children, as attendance fluctuates.
3. Report to the sponsor any changes in the licensing status of the family day care home including any action taken by licensing authority.
7. **Sign NO agreement to participate with any other sponsor in the Child and Adult Care Food Program without prior termination of the sponsor-site agreement with this sponsor. (VIOLATION OF THIS CLAUSE WILL RESULT IN FORFEITURE OF THE RIGHT TO CACFP PARTICIPATION FOR A PERIOD OF TIME TO BE DETERMINED BY THE STATE AGENCY.)**
10. **Understand procedure for terminating participation with the sponsor and the one time per year opportunity to change sponsoring agencies.**
11. Maintain no separate meal charge to those enrolled children who receive meals.
12. Claim NO meal reimbursement for those children who are not enrolled in the family day care home, or for meals served at any one time to children in excess of the home's licensed authorized capacity.
13. Report meals served to provider's income eligible children (or foster children) living in the provider's home, only if the enrolled children who live outside the provider's home are also served that meal, and only if the provider has met USDA Income Eligibility requirements.
14. Allow authorized Program related personnel to visit, with or without prior notification, to review provider's records and meal service during the hours of Program operation.
15. Receive and complete required training as specified by the sponsor.
16. Notify sponsor in advance whenever the provider and children will be out of the home during the meal service.
17. If so instructed by the sponsor, the provider is responsible to distribute to parents a copy of the sponsoring organization's notice to parents.

The PROVIDER RESOURCES, INC. shall:  
 Sponsor

1. With or without prior notification, exercise the right to visit the home, either alone or with State agency and/or USDA personnel. As part of the visit, as a minimum, provider records and meal services during the hours of program operation will be reviewed and parents of enrolled children may be contacted.
2. Notify and train the family day care providers of all pertinent changes in the regulations of the Child and Adult Care Food Program and State agency policies and procedures including but not limited to procedures for termination of this agreement. Guarantee that each family day care provider will receive the required hours of mandated annual training.
3. Forego charging the family day care home any fee for administration of the program.
4. Provide family day care provider with prompt payment of food service monies in accordance with CACFP regulations, state and agency policy.
5. Agree to reimburse the family day care provider according to current rates for a Tier I home, a Tier II home or a Tier II home with income eligible children as applicable. (rates to be adjusted annually)
5. Inform providers about the opportunity to request an administrative review if the sponsoring organization issues a notice of proposed termination of the day care home's Program agreement, or if the sponsoring organization suspends participation due to health and safety concerns.
7. Limit recruitment to providers who are not participating currently with another CACFP sponsor. If a provider is contacted but is already enrolled in the CACFP, cease conversation immediately.

Program applicant hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and all requirements imposed by the regulations of the Department of Agriculture (7 CFR Part 15), DOJ (28) CFR Parts 42 and 50) and FNS directives or regulations issued pursuant to that Act and the regulations, to the effect that, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability, be excluded from participation in, be denied the benefits of, or be otherwise subject to discrimination under any program or activity for which the Program applicant received Federal financial assistance from USDA; and hereby gives assurance that it will immediately take any measures necessary to fulfill this agreement.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant, or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use Federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient, or any improvements made with Federal financial assistance extended to the Program applicant by USDA. This includes any federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

White – Office's Copy

Gold – Provider's Copy

# Permanent Agreement – page 2

MA CFP-1B July 2016

By accepting this assurance, the Program applicant agrees to compile data, maintain records, and submit reports as required, to permit effective enforcement of nondiscrimination laws and permit authorized USDA personnel during hours of program operation to review such records, books, and accounts as needed to ascertain compliance with the nondiscrimination laws. If there are any violations of this assurance, the Department of Agriculture, FNS, shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Program applicant, its successors, transferees, and assignees as long as it receives assistance or retains possession of any assistance from USDA. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the Program applicant.

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](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](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.

July 2016

THE SPONSOR AND THE FAMILY DAY CARE PROVIDER AGREE TO COMPLY WITH ALL RESPONSIBILITIES AND REQUIREMENTS AS SET FORTH IN THE PROGRAM POLICIES AND REGULATIONS 7 CFR PART 226. REIMBURSEMENT WILL BE DISALLOWED AND/OR PROGRAM PARTICIPATION WILL BE TERMINATED IF THE PROVIDER OR SPONSOR DOES NOT COMPLY WITH THE PROVISIONS OF THIS AGREEMENT. UNLESS A SERIOUS DEFICIENCY DETERMINATION IS IN PROCESS OR PENDING, EACH RESERVES THE RIGHT TO TERMINATE THE AGREEMENT FOR CONVENIENCE UPON 30 DAY WRITTEN NOTIFICATION BY EITHER PARTY. ALL PROVISIONS HAVE BEEN REVIEWED AND EXPLAINED TO THE PROVIDER PRIOR TO SIGNATURE.  
THE PROVIDER AGREES THAT THIS AGREEMENT WITH **PROVIDER RESOURCES, INC.** IS EFFECTIVE

Signature of Family Day Care Provider _____	Date _____
Signature of Sponsor Representative _____	Date _____

**THIS AGREEMENT IS BINDING UPON SIGNATURE OF BOTH PARTIES**

White – Office’s Copy

Gold – Provider’s Copy

# Annual Enrollment Update -Termination Procedure

## ANNUAL ENROLLMENT STATUS UPDATE

### CHILD AND ADULT CARE FOOD PROGRAM (CACFP)

**(Instructions: Please review with each new provider during sign-up. Both parties must sign and date where indicated. This form must be reviewed, signed and dated by both parties annually.)**

### Child and Adult Care Food Program Termination Procedures

**In order to terminate your agreement with your Food Program Sponsor, the following steps must be taken:**

- 1) You must give your sponsoring agency at least a written 30-day notice of your intent to terminate your Food Program agreement.
- 2) Your sponsoring agency will issue a termination confirmation letter to you within 5 working days of receiving your termination letter. This letter will state the date your termination letter was received and the date you will be terminated from that Food Program and that **you may continue to claim with that agency until that termination date**. This letter will also contain a record of your year-to-date training hours and topics done with that agency.
- 3) Review the letter for accuracy. Contact your sponsoring agency if there is a discrepancy between what the letter states and what you expected to see. If you do not receive a termination confirmation letter from your sponsoring agency it is your responsibility to contact them.
- 4) If you intend to contract with another Food Program, a copy of the termination confirmation letter must be attached to your sign-up form/agreement in order for your approval to proceed. Once your agreement has been terminated with your previous sponsor, you can contract with any sponsoring agency **once** during a fiscal year. **You may only be enrolled in one Food Program during any month.**
- 5) If you intend to contract with another Food Program, the new agency will need to immediately provide you with any training that may be missing to ensure that you are current with training requirements. This information will be available in the letter from your previous sponsor.

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and, where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov) Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish). Persons with disabilities, who wish to file a program complaint, please see information above on how to contact us by mail directly or by email. If you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). USDA is an equal opportunity provider and employer.

July 2015  
Page 1 of 2

## Annual Enrollment Update -Rights & Responsibilities

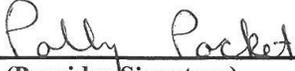
### Additional Provider Rights and Responsibilities

- 1) In order for timely payment, you must submit to your sponsoring agency by the 5th day of the following month your menus and counts of meals served by type to children. If you miss this deadline, you will be subject to a delay in payment as determined by the written policy of your sponsoring agency.
- 2) Record and maintain menus of meal service prior to meal service and have available at each meal for sponsor monitors and/or State or Federal reviewers to evaluate the menu as planned with the actual meal served.
- 3) As of October 1 of each year, you must have completed all the required training for the previous Fiscal Year in order to continue to claim. You are required to receive six (6) hours of CACFP training a year in order to claim reimbursement in the Food Program. If you are a new provider, depending on when your effective date is, your training requirements may be pro-rated. Your sponsoring agency will be monitoring the training hours you accumulate. As of June 1, you will receive notification of your accumulated CACFP training hours credited by the sponsor for the current fiscal year. In order to renew your CACFP participation, you must have completed all the required training as of September 30, of the current fiscal year. The sponsor may also determine that you are Seriously Deficient for not obtaining the required CACFP training.
- 4) Your sponsoring agency is required to conduct reviews of your Food Program. Providers must receive three (3) reviews during the fiscal year. Two (2) of the reviews must be unannounced and conducted at an approved meal service. Providers approved for extended hours of care or approved for double session meal service must receive an additional unannounced monitoring review for a total of four (4) reviews within the fiscal year. Three (3) of the reviews must be unannounced and conducted at an approved meal service, and two of these must be during the approved extended hours of care or during the approved double session meal services.
- 5) You may not contract with more than one Food Program simultaneously. If you do, both contracts will be considered null and void. You will have to sit out one month without claiming before being eligible to contract with an agency. Contracting with more than one agency is cause for a Serious Deficiency determination.
- 6) You must notify your sponsoring agency in advance whenever you are planning to be out of your home with the day care children during the reported meal service period. If you fail to notify the sponsor, the sponsor will assess a disallowance for those meals. You must notify your sponsor of any changes in meal times.
- 7) You must maintain the annual enrollment form signed by the parent or guardian in the family day care home.
- 8) The provider must contact **Field Director, Denise Hulse at 978-458-6577** if he/she feels that any of these procedures or terms and conditions of his/her Program Agreement have not been met by the sponsoring organization.

*I have reviewed these requirements with the provider at the time of sign-up, and again annually.*

  
 \_\_\_\_\_  
 (Sponsoring Agency Representative Signature) 2-1-16  
(date)

*I have read and understood these requirements.*

  
 \_\_\_\_\_  
 (Provider Signature) 2-1-16  
(date)

# CACFP Family Day Care Home Certificate



## Child and Adult Care Food Program (CACFP) Family Day Care Home Certificate

Sponsor Name: Provider Resources, INC (PRI)

Sponsor Address: 360 Merrimack St, Suite 44 Lawrence, MA 01843

**I have been told that I can only sign up with one CACFP Sponsor at a time. I have been told that I may change sponsors only one time during the Fiscal Year between October 1, 2015 and September 30, 2016.**

Has the provider ever been issued a letter from the Department of Early Education and Care (EEC), including but not limited to: Order to Protect (for example-Notice of Revocation of License, Notice of Sanctions, or Notice of Emergency Suspension), Cease and Desist Order, Notice of Action, or Voluntary Surrender of License?

Yes  No

If the answer is yes, please provide further details including the date(s) of the letter, nature of the circumstances, and how the issues were resolved. Attach a separate sheet of paper if necessary.

**I certify that I have received ninety (90) minutes of CACFP training for new providers.**

Provider Name (printed): Polly Pocket

Provider Signature: Polly Pocket Date: 2-1-16

Sponsor Representative Name (printed): Denise Hulse

Sponsor Representative Signature: Denise Hulse Date: 2-1-16

USDA is an equal opportunity provider and employer

July 2015

# Child Enrollment Form -School Age Child Example



## Provider Resources Inc. CACFP Child Enrollment Form

For questions please contact: Provider Resources Inc. 360 Merrimack St Suite 44, Lawrence, MA. 01843 781-939-9292

New  Updated

PROVIDER'S NAME Polly Pocket SITE # 9001

Dear Parent/Guardian:

Your Family Day Care Provider participates in the United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP) administered by the Massachusetts Department of Elementary and Secondary Education.

Meals served must meet nutrition requirements established by USDA's Child & Adult Care Food Program. In order to participate, your Provider has agreed to follow the USDA guidelines. The Provider will give you a copy of the minimum meal components and portion requirements to be served according to the child's age. A medical statement from your doctor is necessary if your child cannot eat foods required by the CACFP. In an effort to assess that these requirements are being met, the USDA and CACFP requires providers to annually collect the enrollment information listed below. **Please complete the form and return it to your Family Day Care Provider.**

PART 1: CHILD ENROLLMENT INFORMATION			
Child's First Name	MI	Last Name	Child's Date of Birth & Age
<u>John</u>		<u>Smith</u>	<u>9-2-08</u>
<b>Normal times in care</b> For example 7:30 AM – 5 PM Earliest drop off and latest pick up		<b>Hours from:</b> <u>7:00 to 4:00</u>	<b>Check the days your child normally attends</b> <input checked="" type="checkbox"/> Monday <input checked="" type="checkbox"/> Tuesday <input checked="" type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input checked="" type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday
<b>Check meals your child receives while in normal times in care</b>		<input checked="" type="checkbox"/> Breakfast <input type="checkbox"/> AM Snack <input type="checkbox"/> Lunch	<input checked="" type="checkbox"/> PM Snack <input type="checkbox"/> Supper <input type="checkbox"/> Evening Snack
<b>School Age Child ★</b> <b>Times child attends school</b> For example 8:00 AM – 3:00 PM		<u>8:00 to 2:30</u>	<b>Sex:</b> <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
<b>Times in care during Vacation or No School days</b> Earliest drop off and latest pick up		<u>7:00 to 4:00</u>	<b>Relation: Child's relation to the provider</b> <input checked="" type="checkbox"/> Not Related <input type="checkbox"/> Related –Non Resident <input type="checkbox"/> Provider's Foster child* <input type="checkbox"/> Provider's Own child**
<b>Check meals your child receives on school vacation or no school day</b>		<input checked="" type="checkbox"/> Breakfast <input checked="" type="checkbox"/> AM Snack <input checked="" type="checkbox"/> Lunch	<input checked="" type="checkbox"/> PM Snack <input type="checkbox"/> Supper <input type="checkbox"/> Evening Snack
(Complete this row IF enrolling an infant [Birth – 11 months old])			
<b>This child is:</b> <input type="checkbox"/> Formula-fed <input type="checkbox"/> Breast-fed; I will supply expressed breast milk.		<b>If the infant is formula-fed:</b> <input type="checkbox"/> Provider will supply formula <input type="checkbox"/> I will supply formula	<b>Name of Iron Fortified Infant Formula:</b>
		<b>Regarding food, I prefer that:</b> <input type="checkbox"/> The Provider supplies infant cereal/foods. <input type="checkbox"/> I supply infant cereal/foods.	

Nutritious meals meeting the United States Department of Agriculture guidelines are served to all children enrolled in this program, including children under the age of 12 months. The Provider must meet the meal component requirements based on age and development outlined in the Infant Meal Pattern. The Provider will give you a copy of the minimum meal components and portion requirements to be served according to the child's age. I understand that this Family Day Care Provider will serve a USDA approved formula (listed above) to my infant while in care.

## PART 2: PARENT OR GUARDIAN ACCEPTANCE AND SIGNATURE

PARENT OR GUARDIAN NAME Sara Smith HOME PHONE: 617-001-1001

MAILING ADDRESS: 456 ABCD St CELL PHONE: 617-201-1001

CITY Dorchester STATE: MA ZIP CODE 01129 WORK PHONE: 781-101-2001

I have read this child enrollment form and I DO request that my child receive the above CACFP benefits. I have received a copy of this completed form and the "Building For The Future" Flyer. Also, as applies, I understand that this Family Day Care Provider will supply infant cereal and infant foods for infants 4 months and older as they are developmentally ready according to the CACFP requirements.

I have read this child enrollment form and I DO NOT request that my child receive the above CACFP benefits.

Sara Smith 2-1-16

**PARENT OR GUARDIAN SIGNATURE** **DATE (must be renewed annually)**

<small>CIVIL RIGHTS: This information is voluntary and will not affect your children's eligibility. Please indicate the ethnic and racial identity of your children by checking a box in each of the categories. This information is being collected to assure that everyone receives CACFP benefits on a fair basis.</small>			
1. Ethnic Identity	<input type="checkbox"/> HISPANIC OR LATINO	<input type="checkbox"/> NOT HISPANIC OR LATINO	
2. Racial Identity	<input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE	<input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	<input type="checkbox"/> ASIAN
	<input type="checkbox"/> BLACK OR AFRICAN AMERICAN	<input type="checkbox"/> WHITE	

The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.asc.usda.gov/complaint\\_filing\\_cust.html](http://www.asc.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866)632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202)690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800)877-8339; or (800)845-6136 (Spanish). USDA is an equal opportunity employer.

The effective date can be made retroactive back to the first day the child participates in the CACFP as long as it occurs in the same month this form is received.

**FOR SPONSOR OFFICE USE ONLY** Effective Date of this Enrollment Form: \_\_\_\_\_  
Fiscal Year: \_\_\_\_\_

White (Office) Yellow (Provider)

1/2014

# Child Enrollment Form -Infant Example



## Provider Resources Inc. CACFP Child Enrollment Form

For questions please contact: Provider Resources Inc. 360 Merrimack St Suite 44, Lawrence, MA. 01843 781-939-9292

New  Updated

PROVIDER'S NAME Polly Pocket SITE # 9001

Dear Parent/Guardian:

Your **Family Day Care Provider** participates in the United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP) administered by the Massachusetts Department of Elementary and Secondary Education.

Meals served must meet nutrition requirements established by USDA's Child & Adult Care Food Program. In order to participate, your Provider has agreed to follow the USDA guidelines. The Provider will give you a copy of the minimum meal components and portion requirements to be served according to the child's age. A medical statement from your doctor is necessary if your child cannot eat foods required by the CACFP. In an effort to assess that these requirements are being met, the USDA and CACFP requires providers to annually collect the enrollment information listed below. **Please complete the form and return it to your Family Day Care Provider.**

PART 1: CHILD ENROLLMENT INFORMATION			
CHILD # ASSIGNED <u>2</u>			
Child's First Name <u>Cherry</u>	MI	Last Name <u>Pops</u>	Child's Date of Birth & Age <u>10-18-15</u>
Normal times in care For example 7:30 AM – 5 PM Earliest drop off and latest pick up		Hours from: <u>8:00 to 5:00</u>	Check the days your child normally attends <input type="checkbox"/> Monday <input checked="" type="checkbox"/> Tuesday <input checked="" type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input checked="" type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday
Check meals your child receives while in normal times in care		<input checked="" type="checkbox"/> Breakfast <input checked="" type="checkbox"/> AM Snack <input checked="" type="checkbox"/> Lunch	<input type="checkbox"/> PM Snack <input type="checkbox"/> Supper <input type="checkbox"/> Evening Snack
School Age Child Times child attends school For example 8:00 AM – 3:00 PM		Sex: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	
Times in care during Vacation or No School days Earliest drop off and latest pick up		Relation: Child's relation to the provider <input checked="" type="checkbox"/> Not Related <input type="checkbox"/> Related – Non Resident <input type="checkbox"/> Provider's Foster child* <input type="checkbox"/> Provider's Own child**	
Check meals your child receives on school vacation or no school day		* If enrolling your foster child, please call the office ** If enrolling your own child, submit Income Eligibility Form	
(Complete this row IF enrolling an infant [Birth – 11 months old])			
This child is: <input checked="" type="checkbox"/> Formula-fed <input type="checkbox"/> Breast-fed; I will supply expressed breast milk.		If the infant is formula-fed: <input checked="" type="checkbox"/> Provider will supply formula <input type="checkbox"/> I will supply formula	Name of Iron Fortified Infant Formula: <u>Enfamil</u>
		Regarding food, I prefer that: <input checked="" type="checkbox"/> The Provider supplies infant cereal/foods. <input type="checkbox"/> I supply infant cereal/foods.	

### PART 2: PARENT OR GUARDIAN ACCEPTANCE AND SIGNATURE

PARENT OR GUARDIAN NAME Nola Pops HOME PHONE: 781-222-0000  
 MAILING ADDRESS: 001 A to Z St CELL PHONE: \_\_\_\_\_  
 CITY Medford STATE: MA ZIP CODE 00216 WORK PHONE: 781-002-1001

I have read this child enrollment form and I **DO** request that my child receive the above CACFP benefits. I have received a copy of this completed form and the "Building For The Future" Flyer. Also, as applies, I understand that this Family Day Care Provider will supply infant cereal and infant foods for infants 4 months and older as they are developmentally ready according to the CACFP requirements.

I have read this child enrollment form and I **DO NOT** request that my child receive the above CACFP benefits.

Nola Pops \_\_\_\_\_ DATE 2-1-16  
 PARENT OR GUARDIAN SIGNATURE DATE (must be renewed annually)

**CIVIL RIGHTS:** This information is voluntary and will not affect your children's eligibility. Please indicate the ethnic and racial identity of your children by checking a box in each of the categories. This information is being collected to assure that everyone receives CACFP benefits on a fair basis.

1. <b>Ethnic Identity</b> <input type="checkbox"/> HISPANIC OR LATINO	<input type="checkbox"/> NOT HISPANIC OR LATINO
<input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE	<input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
<input type="checkbox"/> BLACK OR AFRICAN AMERICAN	<input type="checkbox"/> ASIAN
<input type="checkbox"/> WHITE	

The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866)632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202)690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800)877-8339; or (800)945-6136 (Spanish). USDA is an equal opportunity employer.

The effective date can be made retroactive back to the first day the child participates in the CACFP as long as it occurs in the same month this form is received.

**FOR SPONSOR OFFICE USE ONLY** Effective Date of this Enrollment Form: \_\_\_\_\_  
Fiscal Year: \_\_\_\_\_

# Claim Information Form (CIF)

**Claim Information Form (CIF) - September 2012**  
 Provider, Test ID: 9111  
 123 Palmer St. License: Plus  
 Mattapan, MA 02126 License Exp: 03/11/2015  
 Phone: (855) 555-5555 Payment Method: Check

*You must return this with your claim forms each month*

Monitor: Palmer, Jill (97) Tier: 1S  
 County: Suffolk Capacity: 8  
 IE Exp: / /

	Child Name	Status	DOB	DOE	Age	Rela tion	Sp Needs	Sp Diet		Sch Lv]	Formula	Food	Sex
1	Moran, Tyler	A	05/09/2009	08/01/2012	3Y 3M	N	[ ]	[ ]					F
2	Bobbins, Daniel	A	08/03/2011	07/01/2012	1Y	N	[ ]	[ ]					M
3							[ ]	[ ]					
4	Diaz, Mary	A	01/12/2005	04/01/2012	7Y 7M	R	[ ]	[ ]					F
5	Mathews, Rosa	A	07/03/2012	08/01/2012	1M	R	[ ]	[ ]			Parent Formula	Provider Food	F
6							[ ]	[ ]					
7							[ ]	[ ]					
8	Estrada, Elizabeth	A	12/01/2009	04/01/2012	2Y 9M	N	[ ]	[ ]					F
9	Fernandez, Jose	A	05/03/2006	04/01/2012	6Y 3M	R	[ ]	[ ]					M
10							[ ]	[ ]					
11							[ ]	[ ]					
12	Goodwin, Jeremy	A	11/12/2011	04/01/2012	9M	N	[ ]	[ ]			Parent Formula	Provider Food	M
13							[ ]	[ ]					
14							[ ]	[ ]					
15	Cassamiris, Blake C	A	06/10/2010	04/01/2012	2Y 2M	N	[ ]	[ ]					M
16	Cassamas, Hunter	A	07/06/2011	04/01/2012	1Y 1M	R	[ ]	[ ]					M
17							[ ]	[ ]					
18							[ ]	[ ]					
19							[ ]	[ ]					
20							[ ]	[ ]					
21							[ ]	[ ]					
22							[ ]	[ ]					
23	Porter, Stephanie	A	01/04/2012	04/01/2012	7M	N	[ ]	[ ]			Provider Formula	Provider Food	
24	Moran, Ashley	A	01/07/2012	04/05/2012	7M	N	[ ]	[ ]			Parent Formula	Provider Food	M
25							[ ]	[ ]					
26							[ ]	[ ]					
27							[ ]	[ ]					
28							[ ]	[ ]					
29							[ ]	[ ]					
30							[ ]	[ ]					
31							[ ]	[ ]					
32							[ ]	[ ]					

Open on Holiday: Date(s) : \_\_\_\_\_ Holiday(s) : \_\_\_\_\_ Child(ren) now w/Doctor's Statement: # \_\_\_\_\_  
 Children Starting Kindergarten/1st Grade: # \_\_\_\_\_ Grade : \_\_\_\_ # \_\_\_\_\_ Grade : \_\_\_\_ # \_\_\_\_\_ Grade : \_\_\_\_

Children leaving your care:  
 Name: \_\_\_\_\_ # \_\_\_\_\_ Last Day in Care : \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Name: \_\_\_\_\_ # \_\_\_\_\_ Last Day in Care : \_\_\_\_/\_\_\_\_/\_\_\_\_

List all school aged children who attended AM Snack or Lunch: (or schedule varies from enrollment)  
 # \_\_\_\_\_ Reason : \_\_\_\_\_ Date : \_\_\_\_/\_\_\_\_/\_\_\_\_  
 # \_\_\_\_\_ Reason : \_\_\_\_\_ Date : \_\_\_\_/\_\_\_\_/\_\_\_\_  
 # \_\_\_\_\_ Reason : \_\_\_\_\_ Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

**Meal Times**  
 Breakfast: 8:00am to 8:30am  
 AM Snack: 10:00am to 10:15am  
 Lunch: 12:00pm to 12:30pm  
 PM Snack: 3:00pm to 3:15pm  
 Dinner: 5:00pm to 5:30pm  
 EV Snack: 7:00pm to 7:15pm

**Training**  
 Session Date    Session Name    Total Hours    FY

Day(s) Provider Closed: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Use back of this form for additional notes or comments.

**Total Hours this Fiscal Year:** \_\_\_\_\_

Provider Resources Inc.



### INFANT FORM: FOOD SERVED, ATTENDANCE & MEAL COUNT

MINUTE MENU SYSTEM

MENU MONTH: JAN FEB MAR APR MAY JUN JUL AUG SEP **NOV** DEC

SCANTRON EM-249091-6854321

DAY 8

DAILY ATTENDANCE: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28

DAY 3

DAILY ATTENDANCE: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28

DAY 4

DAILY ATTENDANCE: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28

PROVIDER #	MEAL TIME	FOOD CATEGORY	FOOD SERVED		SERVED TO	
			DESCRIPTION	QUANTITY	CHILD ID	STATUS
1111	BREAKFAST	0-5 MOS FORMULA/BREASTMILK	Direct Breastfed	1	3 4	5 6 8
		6-11 MOS INF CEREAL	3 Tbsp Rice IFIC	9 10 11 12	13 14 15 16	17 18 19 20
		FRUIT/VEG	2 Tbsp Banana	21 22 23 24	25 26 27 28	
		FORMULA/BREASTMILK	8oz IFIF			
	LUNCH	0-5 MOS FORMULA/BREASTMILK	6oz Breastmilk	1 3 4	5 6 8	
		6-11 MOS INF CEREAL	4oz Yogurt	9 10 11 12	13 14 15 16	17 18 19 20
		FRUIT/VEG	2 Tbsp Peaches	21 22 23 24	25 26 27 28	
		FORMULA/BREASTMILK	6oz IFIF			
	SNACK	0-5 MOS FORMULA/BREASTMILK	6oz Breastmilk	1 3 4	5 6 8	
		6-11 MOS BREAD/ALT	3 Tbsp Cheerios	9 10 11 12	13 14 15 16	17 18 19 20
		FRUIT/VEG	2 Tbsp Applesauce	21 22 23 24	25 26 27 28	
		FORMULA/BREASTMILK	4oz IFIF			
DINNER	0-5 MOS FORMULA/BREASTMILK	6oz Breastmilk	1 3 4	5 6 8		
	6-11 MOS INF CEREAL	4oz IFIF	9 10 11 12	13 14 15 16	17 18 19 20	
	FRUIT/VEG	2 Tbsp Applesauce	21 22 23 24	25 26 27 28		
	FORMULA/BREASTMILK	4oz IFIF				

age and served the correct amount to each child.  
 Provider Signature: *X* **Fally Packet**

# Internet Claim Filing Agreement

## Internet Claim Filing Agreement

Between Family Child Care Home Provider and Provider Resources, Inc.

Provider Name: Polly Pocket Provider #: 9001  
Family Child Care Home Provider

Doing Business as: (optional) \_\_\_\_\_

Street address: 123 Main St

City: Boston County: Suffolk Zip code: 02119

Phone: 617-101-1001 Email: Polly@yahoo.com

Birth date: 1-1-64 License #: 9123456

I acknowledge that I have been provided with training materials in the use of the Minute Menu WebHX Internet claiming program and as of the date of this Agreement, the following will be my responsibility:

1. I will inform Provider Resources, Inc. in writing, of my desire to discontinue using Minute Menu WebHX.
2. Before submitting my monthly CACFP claim information to Provider Resources, Inc. I will verify:
  - a. All new child enrollments have been finalized
  - b. All child sick days or school out days have been entered
  - c. Any days in the month when I have been closed have been specified (assuming I'm normally open those days).
  - d. All meal and attendance information has been accurately entered.
3. I will record my meal and attendance information daily at meal service. If I'm not doing so directly in the computer, I will keep paper records of this meal and attendance information for review.

I acknowledge that the menu and attendance information stored in the Minute Menu WebHX system must be made available immediately for review by any Sponsor or State Agency staff when requested. I certify that the information entered into Minute Menu WebHX is accurate in all respects. I certify that my login and password information is not to be shared with anyone other than the staff of Provider Resources, Inc. I also understand that the information I enter into Minute Menu WebHX is provided in connection with the receipt of federal funds and that deliberate misrepresentation may result in state or federal prosecution.

I, the undersigned, CERTIFY that the above information is true and correct to the best of my knowledge and that my signature here serves in lieu of any monthly signature requirement for all Internet claimed meal and attendance information.

Polly Pocket Date: 2-1-16  
Family Child Care Home Provider's Signature

Dennis Hulse Date: 2-1-16  
Provider Resources, Inc. (Representative)

# Direct Deposit Authorization



## DIRECT DEPOSIT AUTHORIZATION FORM

This form must be completed and returned to Provider Resources, Inc. before direct deposit of your food program reimbursements may occur. **This form MUST be accompanied with some form of proof of your routing and account numbers for the given account.** It must be a pre-printed form of proof. Nothing handwritten will be accepted. For a checking account, this should be a voided check. For a savings account, this may be a Pre-Printed savings deposit slip. A "Direct Deposit Application" can also be obtained from your bank and can be used, but you must fill this form out as well. This form may also be used to change your direct deposit, or to cancel your direct deposit account. Before completing this form, please make sure you understand the terms and conditions of the agreement. Fill in the boxes below and sign the form. When completed, please mail the form to the address above. Please allow one month from submitting the form for the direct deposit to take affect.

Last Name: P O C K E T      First Name: P O L L Y      MI:

Social Security Number: 0 0 0 - 0 0 - 0 0 0 0      Phone Number: 6 1 7 - 1 0 1 - 1 0 0 1

New     Change     Cancel       Effective Date: 0 2 / 0 1 / 1 6  
Month      Day      Year

Name of Bank: S A N T A N D E R

Account Number: 0 1 2 3 4 5 6 7 8 9 1 1      Type of Account:  Checking     Savings

Routing/Transit Number: 9 8 7 6 5 4 3      (All 9 digits must be filled in. The first two numbers must be 01 through 12 or 21 through 32)      Ownership of Account:  Self     Joint     Other

**TIP** Call your financial institution to make sure they will accept direct deposits.

**TIP** Verify your account number and routing transit number with your financial institution.

**TIP** Do not use a deposit slip to verify the routing number.

Account Number: 1234 1234

Routing/Transit Number: 1234 5678

Note: The account and routing number may appear in different places on your check.

I authorize Provider Resources, Inc. to pay my food program reimbursements by direct deposit to the financial institution designated above, and also for the financial institution to credit the deposit to my account. I also authorize Provider Resources, Inc. to obtain information from my financial institution pertaining to this direct deposit agreement, and to debit my account if the payment was credited in error and corrections need to be made. I recognize that if I fail to provide complete or accurate information on the direct deposit authorization form, the processing of this form may be delayed and/or my payments may be erroneously transferred. In the event that funds are erroneously transferred due to my failure to provide complete or accurate information on this form, I do not hold Provider Resources, Inc. responsible for the recovery of such erroneous transfers, not withstanding any reasonable attempts made by Provider Resources, Inc. to correct such errors.

I certify that I have read and understand the terms and conditions of this form. By signing this agreement, I authorize Provider Resources, Inc. to initiate credit and/or debit entries to the account indicated above for the purpose of payment of my food reimbursement.

Signature: Polly Pocket      Date: 2-1-16

If the account is a joint account or in someone else's name, that individual must also agree to the terms stated above by signing below.  
Signature: \_\_\_\_\_      Date: \_\_\_\_\_

360 Merrimack Street, Suite 44 • Lawrence, MA 01843 • (781)-939-9292

# Weekends, Evenings and Double Session Approval Form - Evening Snack Approval

Provider's Signature: Polly Packet Date: 2-1-16  
 License No.: 9123456 Town: Rosston

Evening Snack  
 Double Sessions  
 Weekend Care

## PROVIDERS FOOD PROGRAM CHILD AND ADULT CARE MEAL PLAN

For Office Use Only  
 APPROVAL NO. \_\_\_\_\_  
 SITE NO. \_\_\_\_\_  
 DATE: \_\_\_\_\_

ENROLLED CHILDREN	Age	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		Time In	Time Out
		B	A	P	S	E	B	A	L	P	S	E	B	A	L		
Gabe Conway	8y															3:00 PM	5:00 PM
Kevin Morone	9y															4:00 PM	5:00 PM
Totals: <span style="float: right;">5:00</span>																	

ENROLLED CHILDREN	Age	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		Time In	Time Out
		B	A	P	S	E	B	A	L	P	S	E	B	A	L		
Totals: <span style="float: right;">5:00</span>																	

\* INDICATES INCOME ELIGIBLE PROVIDER CHILD      \* INDICATES INCOME ELIGIBLE PROVIDER CHILD

Label:  Truss  Servid

WHITE - OFFICE COPY      A NON-PROFIT SERVICE ORGANIZATION EOE, M/F      YELLOW - PROVIDER COPY

PRIVIDER RESOURCES, INC.



# Weekends, Evenings and Double Session Approval Form -Weekend Approval

Provider's Signature: Polly Pocket Date: 2-1-16  
 License No.: 5123456 Town: Boston  
**CHILD AND ADULT CARE MEAL PLAN**

For Office Use Only  
 NAME: \_\_\_\_\_ APPROVAL NO.: \_\_\_\_\_  
 DOUBLE SESSION: \_\_\_\_\_ SITE NO.: \_\_\_\_\_  
 APPROVAL NO.: \_\_\_\_\_ DATE: \_\_\_\_\_

INDICATES NON-ELIGIBLE PROVIDER CHILD

ENROLLED CHILDREN	Age	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		Time In	Time Out
		B	A	P	S	B	A	P	S	B	A	P	S	B	A		
Sally Smooth	6yrs											X	X	X		8:00 Am	3:00
John Tales	4yrs											X	X	X		8:00	3:06
Totals: Meal Times Served 8:15 10:00 12:00																	

INDICATES NON-ELIGIBLE PROVIDER CHILD

ENROLLED CHILDREN	Age	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		Time In	Time Out
		B	A	P	S	B	A	P	S	B	A	P	S	B	A		
Totals: Meal Times Served																	

WHITE - OFFICE COPY      ANONPROFIT SERVICE ORGANIZATION EOE M/F      YELLOW - PROVIDER COPY

# Tiering Forms for Providers -Income Eligibility (page 1)



## CACFP MEAL BENEFIT INCOME ELIGIBILITY FORM (Family Day Care)

<b>Part 1. All Household Members</b>		
Name of Enrolled Child(ren): <u>Judy Jones</u>		
<b>Names of all household members</b> (First, Middle Initial, Last)	CHECK IF A FOSTER CHILD (THE LEGAL RESPONSIBILITY OF A WELFARE AGENCY OR COURT) * IF ALL CHILDREN LISTED BELOW ARE FOSTER CHILDREN, SKIP TO PART 4 TO SIGN THIS FORM.	CHECK IF NO INCOME
<u>Judy Jones</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>John Jones</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Peggy Jones</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Mary Jones</u>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Wyatt Jones</u>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

**Part 2. Benefits:** If any member of your household received SNAP or TAFDC cash assistance, provide the name and case number for the person who receives benefits or indicate Head Start or homelessness. **If no one receives these benefits, proceed to part 3.**  
 NAME: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

<b>Part 3. Total Household Gross Income—You must tell us how much and how often</b>				
<b>B. Gross income and how often it was received</b>				
<b>A. Name</b> (List only household members with income) <i>(Example)</i> <u>Jane Smith</u>	1. Earnings from work before deductions	2. Welfare, child support, alimony	3. Pensions, retirement, Social Security, SSI, VA benefits	4. All Other Income
<u>Mary Jones</u>	<u>\$ 300 / weekly</u>	<u>\$ 150 / twice a month</u>	<u>\$ 100 / monthly</u>	<u>\$ / /</u>
<u>Wyatt Jones</u>	<u>\$ 700 / weekly</u>	<u>\$ / /</u>	<u>\$ / /</u>	<u>\$ / /</u>
	<u>\$ / /</u>	<u>\$ / /</u>	<u>\$ / /</u>	<u>\$ / /</u>
	<u>\$ / /</u>	<u>\$ / /</u>	<u>\$ / /</u>	<u>\$ / /</u>

**Part 4. Signature and Last Four Digits of Social Security Number (Adult must sign)**  
 An adult household member must sign this form. **If Part 3 is completed, the adult signing the form must also list the last four digits of his or her Social Security Number or mark the "I do not have a Social Security Number" box.** (See Privacy Act Statement on the back of this page.)

*I certify that all information on this form is true and that all income is reported. I understand that the day care home will get Federal funds based on the information I give. I understand that CACFP officials may verify the information. I understand that if I purposely give false information, the participant receiving meals may lose the meal benefits, and I may be prosecuted.*

Sign here: Mary Jones Print name: Mary Jones  
 Date: 2-1-16  
 Address: 2 Sesame St Phone Number: 781-888-8888  
 City: Boston State: MA Zip Code: 02124  
 Last four digits of Social Security Number: \* \* \* - \* \* - 0 0 0 0  I do not have a Social Security Number

## Tiering Forms for Providers -Income Eligibility (page 2)



### CACFP MEAL BENEFIT INCOME ELIGIBILITY FORM (Family Day Care)

<b>Part 5. Participant's ethnic and racial identities (optional)</b>			
Mark one ethnic identity:		Mark one or more racial identities:	
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Asian	<input type="checkbox"/> American Indian or Alaska Native	
<input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> White	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	
	<input type="checkbox"/> Black or African American		
<b>Don't fill out this part. This is for official use only.</b>			
Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice A Month x 24, Monthly x 12			
Total Income: _____	Per: <input type="checkbox"/> Week, <input type="checkbox"/> Every 2 Weeks, <input type="checkbox"/> Twice A Month, <input type="checkbox"/> Month, <input type="checkbox"/> Year	Household size: _____	
Categorical Eligibility: _____	Eligible: _____	Not Eligible: _____	Tier I _____ Tier II _____
Reason: _____			
Determining Official's Signature: _____			Date: _____
Confirming Official's Signature: _____			Date: _____

**The participant in the day care facility may qualify for free or reduced price meals if your household income falls within the limits on this chart.**

<b>Effective July 1, 2015 to June 30, 2016</b>	
Household size	Yearly
1	21,775
2	29,471
3	37,167
4	44,863
5	52,559
6	60,255
7	67,951
8	75,647
Each additional person:	+ 7,696

**Privacy Act Statement:** The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve the participant for free or reduced price meals. You must include the last four digits of the Social Security Number of the adult household member who signs the application. The Social Security Number is not required when you apply on behalf of a foster child or you list a Supplemental Nutrition Assistance Program (SNAP), Transitional Aid to Families with Dependent Children (TAFDC) Program or Food Distribution Program on Indian Reservations (FDPIR) case number for the participant or other (FDPIR) identifier or when you indicate that the adult household member signing the application does not have a Social Security Number. We will use your information to determine if the participant is eligible for free or reduced price meals, and for administration and enforcement of the Program.

**Non-discrimination Statement:** The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and, where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish). Persons with disabilities, who wish to file a program complaint, please see information above on how to contact us by mail directly or by email. If you require alternative means of communication for program information (e.g., Braille, large print, audiotope, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). USDA is an equal opportunity provider and employer.

## **Building for the Future Poster**

# ***Building for the Future***

This child care receives  
Federal cash assistance to  
serve healthy meals to your children.  
Good nutrition today means  
a stronger tomorrow!

Meals served here must meet  
nutrition requirements established by USDA's  
**Child and Adult Care Food Program.**

Questions? Concerns?

Call USDA toll free: **1-866-USDA CND**  
**(1-866-873-2263)**

Visit USDA's website: **[www.fns.usda.gov/cnd](http://www.fns.usda.gov/cnd)**



United States Department of Agriculture  
Food and Nutrition Service  
FNS-317  
June 2000  
Revised June 2001

USDA is an equal opportunity provider and employer.



**MEDICAL STATEMENT TO REQUEST  
CHILD NUTRITION PROGRAMS  
SPECIAL MEALS AND/OR ACCOMMODATIONS**

1. School/Agency Name	2. Site/Provider Name	3. Site Telephone Number	
4. Name of Participant		5. Age or Date of Birth	
6. Name of Parent or Guardian		7. Telephone Number	
<b>8. Check One:</b> <input type="checkbox"/> Participant has a disability or a medical condition and <i>requires</i> a special meal or accommodation. (Refer to definitions on reverse side of this form.) Schools and agencies participating in federal nutrition programs must comply with requests for special meals and any adaptive equipment. <b>A licensed physician must sign this form.</b> <input type="checkbox"/> Participant does not have a disability, but is requesting a special meal or accommodation due to food intolerance(s) or other medical reasons. Food preferences are not an appropriate use of this form. Schools and agencies participating in federal nutrition programs are encouraged to accommodate reasonable requests. <b>A licensed physician, physician's assistant, or nurse practitioner must sign this form.</b> <input type="checkbox"/> Participant does not have a disability, but is requesting a special accommodation for a <b>fluid milk substitute</b> that meets the nutrient standards for non-dairy beverages offered as milk substitutes. Food preferences are not an appropriate use of this form. Schools and agencies participating in federal nutrition programs are encouraged to accommodate reasonable requests. <b>A licensed physician, physician's assistant, nurse practitioner, parent, or guardian may sign this form.</b>			
9. Disability or medical condition requiring a special meal or accommodation:			
10. If participant has a disability, provide a brief description of participant's major life activity affected by the disability:			
11. Diet prescription and/or accommodation: <i>(please describe in detail to ensure proper implementation-use extra pages as needed)</i>			
<b>12. Indicate texture:</b> <input type="checkbox"/> Regular <input type="checkbox"/> Chopped <input type="checkbox"/> Ground <input type="checkbox"/> Pureed			
<b>13. Foods to be omitted and substitutions: <i>(please list specific foods to be omitted and suggested substitutions. you may attach a sheet with additional information as needed)</i></b>			
<b>A. Foods To Be Omitted</b>		<b>B. Suggested Substitutions</b>	
_____		_____	
_____		_____	
_____		_____	
_____		_____	
14. Adaptive Equipment:			
15. Signature of Preparer*		16. Printed Name	17. Telephone Number
19. Signature of Medical Authority*		20. Printed Name	21. Telephone Number
			22. Date

\* Physician's signature is required for participants with a disability. For participants without a disability, a licensed physician, physician's assistant, or nurse practitioner must sign the form. Parent/legal guardian signature is acceptable for fluid milk substitution for a child with special medical or dietary needs other than a disability.

The information on this form should be updated to reflect the current medical and/or nutritional needs of the participant.

USDA is an equal opportunity provider and employer

MA ESE July 2015/USDA February 2015

**360 Merrimack St, Suite 44 • Lawrence, MA 01843 • (781)-939-9292**

**MEDICAL STATEMENT TO REQUEST SPECIAL MEALS AND/OR ACCOMMODATIONS  
CHILD NUTRITION PROGRAMS**

**INSTRUCTIONS**

**Note:** According to 7 CFR, part 226.20 and FNS Instruction 783-2, Rev.1, food substitutions for medical reasons can be made only when there is a written statement from a medical authority. This written statement must include the medical reason and recommended alternate foods.

1. **School/Agency:** Print the name of the school or agency that is providing the form to the parent.
2. **Site:** Print the name of the site where meals will be served (e.g., school site, child care center, community center, etc.)
3. **Site Telephone Number:** Print the telephone number of site where meal will be served. See #2.
4. **Name of Participant:** Print the name of the child or adult participant to whom the information pertains.
5. **Age of Participant:** Print the age of the participant. For infants, please use Date of Birth.
6. **Name of Parent or Guardian:** Print the name of the person requesting the participant's medical statement.
7. **Telephone Number:** Print the telephone number of parent or guardian.
8. **Check One:** Check (✓) a box to indicate whether participant has a disability or does not have a disability.
9. **Disability or Medical Condition Requiring a Special Meal or Accommodation:** Describe the medical condition that requires a special meal or accommodation (e.g., juvenile diabetes, allergy to peanuts, etc.)
10. **If Participant has a Disability, Provide a Brief Description of Participant's Major Life Activity Affected by the Disability:** Describe how physical or medical condition is affected by the disability. For example: "Allergy to peanuts causes a life-threatening reaction."
11. **Diet Prescription and/or Accommodation:** Describe a specific diet or accommodation that has been prescribed by a physician, or describe diet modification requested for a non-disabling condition. For example: "All foods must be either in liquid or pureed form. Participant cannot consume any solid foods."
12. **Indicate Texture:** Check (✓) a box to indicate the type of texture of food that is required. If the participant does not need any modification, check "Regular".
13. **A. Foods to Be Omitted:** List specific foods that must be omitted. For example, "exclude peanut butter."  
**B. Suggested Substitutions:** List specific foods to include in the diet. For example, "sunflower seed spread."
14. **Adaptive Equipment:** Describe specific equipment required to assist the participant with dining. (Examples may include a sippy cup, a large handled spoon, wheel-chair accessible furniture, etc.)
15. **Signature of Preparer:** Signature of person completing form.
16. **Printed Name:** Print name of person completing form.
17. **Telephone Number:** Telephone number of person completing form.
18. **Date:** Date preparer signed form.
19. **Signature of Medical Authority:** Signature of medical authority requesting the special meal or accommodation.
20. **Printed Name:** Print name of medical authority.
21. **Telephone Number:** Telephone number of medical authority.
22. **Date:** Date medical authority signed form.

The American with Disabilities Act Amendment Act defines a "disability," in part, as a physical or mental impairment that substantially limits a major life activity or major bodily function of an individual.

**(For additional information on the definition of disability, please refer to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act Amendments Act of 2008)**

Information regarding the ADAAA, which expanded the definition of disability, can be found at:

<http://www.law.georgetown.edu/archiveada/documents/ComparisonofADAandADAAA.pdf>

USDA is an equal opportunity provider and employer

MA ESE July 2015  
USDA February 2015

**Provider Resources, Inc. • 360 Merrimack St, Suite 44 • Lawrence, MA 01843 • (781)-939-9292**

**Provider Resources, Inc. • 411 Merrimack St, Suite 100 • Methuen, MA 01844 • (781)-939-9292**

# GLOSSARY

**Annual Enrollment Update and Rights & Responsibilities Form:** These two forms are combined into one form and are signed both at the initial contracting appointment and annually thereafter. The forms outline the providers rights & responsibilities of their contract, as well as the proper termination procedures should a provider wish to terminate.

**Approved Assistants:** An approved assistant is a person who has been given approval to work in the family childcare program by the Department of Early Education and Care (DEEC).

**Child and Adult Food Program (CACFP):** The comprehensive program that encompasses Family Childcare Sponsors, Center-based Sponsors, School Lunch Program, Summer Feeding Program, and Adult Day Care Sponsors.

**CACFP Family Day Care Home Certificate:** This form is signed when a provider contracts with the food program. It is used to verify that the provider does not have an EEC Sanction Letter regarding "Order to Protect, Cease & Desist Order, or Notice of Action or Voluntary Surrender of License." It also verifies that the provider is aware that they can only sign with one food program during the fiscal year and that they have received the 90-minute training at the point of sign on.

**Child Enrollment Form:** This is a child specific form for the CACFP. Each child attending the childcare program must have a child enrollment form filled out and kept on file with both your food program sponsor and your CACFP records. This enrollment form is updated annually.

**Civil Rights Nondiscrimination Statement:** This is a written statement given by USDA that outlines the prevention of discrimination of several areas, as well as that USDA funded programs must be an equal opportunity employer. This statement also includes the process to file a complaint if someone feels that they have been discriminated against.

**Claim:** This is the process of reviewing and processing submitted menus and meal attendance in preparation of submitting the bill to the state.

**Claim Information Sheet (CIF):** This is a form used by providers who use scannable paper menus. It contains the names and numbers of all enrolled children. This form must be sent in with the scannable menus any time there are changes made to children's meal schedules.

**Combination Meal:** A combination meal is a meal that combines several main food components to create a dish (Examples: Lasagna, Sheppard's Pie, Taco's, Beef Stew, etc.). These types of combination meals will count towards three (3) food components in that meal.

**Creditable:** Food items that may be counted toward meeting the meal pattern requirements for a reimbursable meal.

**Direct Breastfed:** When a mother comes to the FCC home during the hours of operation and directly breastfeeds her infant, this meal can be claimed and marked on the menu as “direct breastfed”.

**Food Item:** A specific food offered within the meal components containing the reimbursable meal (Meat/Meat Alternate=chicken/beef/fish/cheese/egg, AND Vegetable=carrots, potato, green beans).

**Home Food Review:** The 3-4 home food review visits that are performed by your food monitor annually as part of your CACFP agreement. The home food reviews are a requirement by USDA and our state agency to validate the programs paperwork and food claims.

**Income Eligible:** The method which is used to identify a Tier 2 provider’s qualification based on income for the qualification of either Tier 1 status, claiming your own children, or childcare children in a tier 2 childcare home.

**Infant Fruit Desserts:** Jarred infant food that is considered a dessert than an actual fruit (Peach Cobbler, Tutti-Frutti, Dutch Apple, Blueberry Buckle, etc.) despite containing fruit.

**Infant Meal Component:** One of the food groups that is contained in a reimbursable meal (Iron Fortified Infant Formula or Breast Milk, Meat/Meat Alternate, Vegetable, Fruit, and Bread/Bread Alternate).

**Infant Menu:** The infant menu is used for documenting food items and quantities served for children birth through 11 months.

**Infant Meal Notification:** This is part of the infant’s enrollment and is used to inform the office who is supplying the formula, the parent or FCC provider, or if the child is breastfed. It also identifies who is supplying the infant food.

**Jarred Combination Infant Food:** Jarred infant food that has more than one food item (Turkey Vegetable, Mixed Vegetables & Beef, & Lamb Rice).

**KidKare Internet Claim Method:** KidKare is Minute Menus provider portal to enter their claim using the internet, manage their child enrollments and other beneficial functions to assist in their recordkeeping.

**Meal Component:** One of the food groups that contains a reimbursable meal (Milk, Meat/Meat Alternate, Vegetable, Fruit, and Bread/Bread Alternate).

**Meal Counts:** Meal counts are a means to identify which children were served particular meals each day. Meal counts are required to be documented by the end of each day.

**Meal Pattern:** This is a guide to creating and documenting creditable meals based on USDA and CACFP requirements.

**Medical Statement:** A medical form that a child's doctor must fill out if a child has an allergy, medical condition or disability that requires an adaptation on the required meal pattern.

**Non-Creditable Food:** Any food that does not meet USDA standards toward a creditable meal component.

**Non-Traditional Hours Care:** Non-traditional hours care is care given to children between the hours of 8:00pm to 11:30pm, overnight care and on Saturday or Sunday. FCC providers approved for non-traditional hours care will have it noted on their EEC license.

**Permanent Agreement:** This form is signed upon joining the program, it outlines the rights and responsibilities of both the agency and provider as participants in a USDA-CACFP program. This is to be kept in the providers home file and available for every visit.

**Program Tiering:** Is the state guided system for reimbursing FCC providers at either Tier 1 or Tier 2. The tier designation is determined by either location of the childcare home, income of the childcare provider's household, or income of an individual child's household.

**Regular Menu:** The regular menu is used for documenting meals and meal attendance for children ages 1 year through 12 years.

**Reimbursable Meal:** A meal that meets the minimum meal pattern requirements and is eligible for reimbursement when served in the CACFP.

**Scannable Regular and Infant Menus:** Scannable menus are menus in a paper format that requires the FCC providers to write in the names of the food items for each meal component to complete a creditable meal. It also includes documenting the daily meal attendance for each child by filling in the correct numbered bubble for attending children (which is scanned) to process the FCC providers claim.

**Serious Deficiency:** A process that begins when it is determined that an FCC provider is not operating their program according to CACFP requirements.

**Single Item Jarred Infant Food:** Jarred infant food that has a single ingredient (Carrots only, squash only, bananas only, peaches only, etc.)

**Site Agreement:** A permanent form that is filled out at the initial sign-on which contains the provider information such as, provider's name, address, birth date, tier status, hours of operation, all licensing information and meal times.

**Sponsor Organization:** The Sponsor Organization or (SO) is your CACFP program, Provider Resources, Inc. (PRI). The state uses the term sponsor organization to identify the contractual relationship with the state agency.

**State Agency:** The state agency which oversees all CACFP's is the Office of Food and Nutrition Program. This state agency come under the larger State of MA, Elementary and Secondary Education Department.



# APPENDIX A

## Approved Food Lists





# KidKare Start-Up Guide

Welcome to KidKare! These quick instructions should help you get started.

## Step 1 - Log In

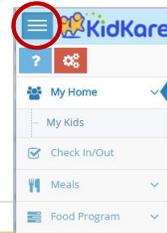
Go to [kidkare.com](http://kidkare.com) and click **LOG IN**. Enter the **login ID** and **password** that has been provided to you by your Sponsor. *If you're on a smartphone or tablet, tap the menu icon (three blue lines at the top right corner) to display the LOG IN screen.*



## Step 2 - Decide what you would like to do next.

You can access all of the KidKare features from the menu icon.

Click the question mark icon to access **Help** online.



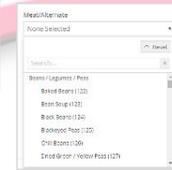
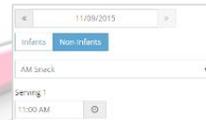
**Verifying Enrollment** - To verify all children are enrolled, go to **My Home >> My Kids**.

- Click the gear shift icon and select **"Pending."**
- Scroll down past the active kids to view those with a "Pending" status.
- If any children are missing, enroll them by tapping the **Add Child** button.



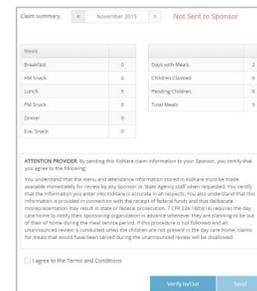
**Recording Meals** - To start recording meals, go to **Meals >> Meal Service**.

- Verify the correct date is displayed.
- Select Infant or Non-Infant.
- Select a meal from the list, and record the serving time.
- Select the foods from the list.  
*(You can type all or part of the word to search for a specific food.)*
- Tap the name of each child that was present during the meal time.
- The names will turn **green**.
- When all required fields have been entered and at least one child is marked in attendance, KidKare will *automatically* save the meal. There is no save button.



## Sending the Claim to Your Sponsor

At the end of the month, go to **Food Program >> Send to Sponsor** to send the claim to your Sponsor. Once the claim has been sent, you can view it in the **View Claims** screen.



## Check out the many other features of KidKare!

- **Calendar:** Review meals, school out days, closed for business, and more!
- **Messages:** Read important information.
- **Reports:** Generate child enrollment reports, claim reports, etc.
- **In/Out Times:** Tap children in and out, or let the parents do it!

## Learn more!

The KidKare Knowledge Base has **training videos** and **helpful information** to learn more about KidKare. *You can even sign up for a free webinar.* Just click your name at the top right corner of the screen, and choose the **Get Help** option. That will connect you to [help.kidkare.com](http://help.kidkare.com).







**Minute Menu™ HX**

# **Provider Training Workbook**

**For Providers Using Scannable  
Attendance Menus**

The Minute Menu system has been designed so that you can quickly and easily record every piece of information required by the USDA Food Program. With a bit of practice you'll soon be able to record an entire meal in only a minute.

© 2017 Minute Menu Systems, LLC  
Last updated 8/28/2017



## FORM OVERVIEW

- **Child Enrollment Forms** – filled out and then signed by the parents of each new child you enroll into your care (and subsequently into the food program).
- **Menu Forms**
  - Infant Form – use for all infants **less than one year** of age to record daily attendance, foods, and meal counts.
  - Child Forms – use for all children **one year and up** to record daily attendance, foods, and meal counts.
- **Claim Information Forms (CIF)** – A new CIF will be provided to you monthly. Use this form to track child numbers and communicate information regarding your claim.

## GENERAL FORM INSTRUCTIONS



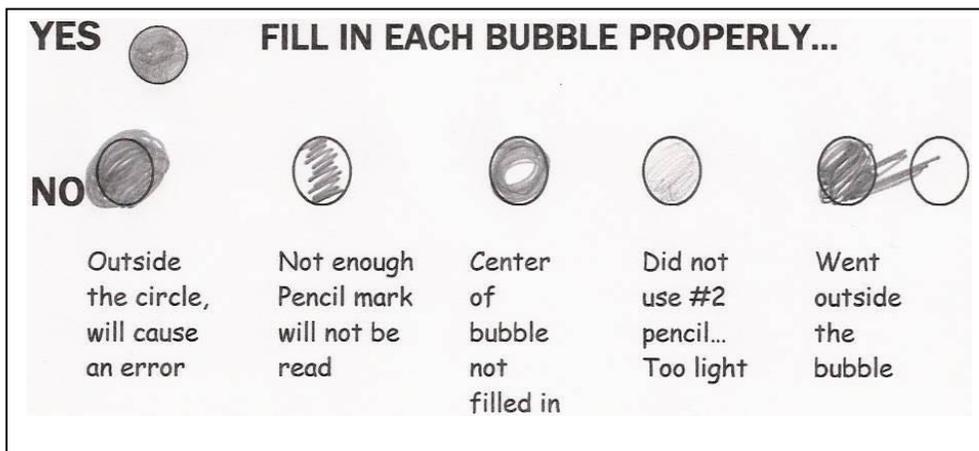
### Do...

- Use a **#2 pencil** to fill out your forms.
- Keep the **carbon copy** of every scannable form you send in.
- Always **sign and date** your forms.
- **Completely** fill in each bubble and stay within the lines.



### Do Not...

- Leave smudges or tear the form when erasing.
- Strike through areas of a form that you want to leave blank. Just leave it blank.
- Write notes on the scannable forms. Instead, write notes on the CIF.
- Staple, fold, or wrinkle a scannable form.





# CHILD ENROLLMENT FORMS

The child Enrollment Form is used to enroll new children or update an existing child. A parent must review and sign the form in order for you to receive reimbursements from the Food Program for a child. Send the signed original to us. Be sure to keep the carbon copy for your records.

To fill out the form, go step by step through each corresponding numbered section:

## 1. PROVIDER #:

Write your Provider # in the white boxes before you bubble it. Then, in each column, bubble the number for that column. Your provider number is listed on the CIF.

1. PROVIDER #										
2	0	1	●	3	4	5	6	7	8	9
4	0	1	2	3	●	5	6	7	8	9
3	0	1	2	●	4	5	6	7	8	9
0	●	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

Provider # shown is an example. This is not *your* Provider #.

## 2. CHILD'S BIRTHDATE

The child's birthday is filled in using two digits for the month, two digits for the day, and two digits for the year (EX: 02/06/17 for February 6, 2017).

**Birthdate:** February 6, 2017

2. CHILD'S BIRTHDATE											
M	0	●	1								
O	2	0	1	●	3	4	5	6	7	8	9
D	0	●	1	2	3						
A	6	0	1	2	3	4	5	●	7	8	9
Y	1	0	●	2	3	4	5	6	7	8	9
R	7	0	1	2	3	4	5	6	●	8	9

**Reenrollment/Update Bubble:** fill in this bubble only when renewing or reenrolling an existing child.

REENROLLMENT/UPDATE

## 3. FIRST DAY IN CARE

Record the date the child first attended care in your home OR the 1<sup>st</sup> day of the current month, whichever date is closer to today's date. The date should also be marked with two digits for the month, two for the day, and the last two digits of the year.



#### **4. CHILD'S NUMBER and GROUP**

You must assign each child a number. This number is used on all other forms. You should assign a unique number from 1 to 28 to each child you enroll. Quickly look at your CIF and find a blank row next to a number that has not been used. If you run out of new numbers and need to reuse an old child number, choose the number that has been inactive--unused--for the longest amount of time.

**Write the child's name on a blank line on the CIF.** This way, you can look at the CIF when filling out menus the remainder of this month, and you'll know what number to use for this child. The number you choose is permanently assigned to this child and cannot be changed until the child has been withdrawn for two months.

Then **mark the child number bubble** as shown below: *note the format: child group – child number*

4. CHILD'S NUMBER					
1	2	3	4	5	6
7	8	9	10	<input checked="" type="radio"/>	12
13	14	15	16	GROUP Use only if instructed.	
17	18	19	20	1	
21	22	23	24	2	
25	26	27	28	3	

Child Number: 1-11

4. CHILD'S NUMBER					
1	2	3	4	5	6
7	8	9	10	<input checked="" type="radio"/>	12
13	14	15	16	GROUP Use only if instructed.	
17	18	19	20	<input checked="" type="radio"/>	
21	22	23	24	2	
25	26	27	28	3	

Child Number: 1-11

4. CHILD'S NUMBER					
1	2	3	4	5	6
7	8	9	10	11	<input checked="" type="radio"/>
13	14	15	16	GROUP Use only if instructed.	
17	18	19	20	1	
21	22	23	24	<input checked="" type="radio"/>	
25	26	27	28	3	

Child Number: 2-12

*Unless you care for more than 28 children, you should always leave the GROUP option blank.*

The prefix of the child number is referred to as the child Group. Note: Group left blank assumes the child should be in the 1<sup>st</sup> group of children. Each month, we will send you a new CIF that lists all of your enrolled children along with their child numbers.

#### **5. CHILD'S NAME**

The child's name box should be filled in from the top down with the first name, the middle initial, and the last name. Make sure to write name in the boxes to fill in the appropriate bubble for that row. Don't forget to write the child's name on the CIF next to the assigned child number.

#### **6. CHILD'S SCHEDULE**

Choose the most applicable times, days and meals of attendance.

#### **7. INFANTS**

If the child being enrolled is an infant (defined as under 1 year of age), you must fill out this section. In the space provided, please write in the brand name of the iron fortified infant formula (IFIF) that you offer to parents – even if the parent is supplying their own formula or breast milk.

#### **8. SCHOOL INFO**

Only fill in this section if the child is attending some type of school.

**School Type:** Mark only one bubble for the type of school most appropriate for the child. If the child is a toddler or preschooler not enrolled in any sort of kindergarten you can leave this section blank.



**Times:** For times in school, put the normal school depart & return time, based on when the child leaves your home to go to school and returns from school to your home.

**Days:** You only need to mark the child’s daily school attendance schedule if the child doesn’t normally attend school every day of the week from Monday thru Friday.

**9. ETHNICITY:** Ethnicity & Race is always optional for a parent to indicate, and the categories are defined by federal law.

**10. RACE:** Ethnicity & Race is always optional for a parent to indicate, the categories are defined by federal law. Parents can choose more than one Race.

**11. RELATION:** Please make a note of how the child is related to you. If the child is an unrelated day care child, don’t mark anything in this section.

**12. SPECIAL INFORMATION:**

*Special Diet:* If the child requires a special diet as prescribed by a doctor, mark the “Special Diet” bubble. Also bear in mind that if the child does require a special diet, you should send us a copy of the parent/doctor statement on that special diet along with the Enrollment Form.

*Special Needs:* If the child has a disability or special needs, mark the “Special Needs” bubble. Send documentation of the child’s special needs with the child enrollment form.

*Non-Participating:* Any child where this bubble is marked will **not** be paid as part of the Food Program.

**13. PAY SOURCE:** Unless you are told by one of our staff to fill this section out, you can ignore it.

**14. PARENT PHONE #:**

Write the phone number in spaces provided. Fill in corresponding numbered bubbles in the row below spaces.

Additional information (such as address) may be written in the notes section on the **back** of the form.

**Make sure the parent has signed the form.** You cannot be paid for a child if we haven’t received an accurately filled-out and signed Child Enrollment form!

14. PARENT PHONE #											
AREA CODE			FILL IN ONLY ONE								
			<input type="radio"/> HOME <input type="radio"/> WORK								
0	0	0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9	9





## Daily Attendance

You must record child attendance each day. Bubble the child number for any child who was in your care for the day, whether they have eaten a meal or not.

<b>DAILY ATTENDANCE</b>							
<input type="checkbox"/>							
<input type="checkbox"/>							
<input type="checkbox"/>							

Do this by marking each numbered bubble that corresponds to the child numbers. Look at your CIF to determine each child's number, and then bubble in all the numbers needed.

Infants **under** 1 year of age should always be recorded on the Infant Menu  
 Children **over** 1 year of age should always be recorded on the Regular Menu.

*Children should be switched to regular menus on their first birthday.*

## Whole Grains

Bubble each meal at which a whole grain-rich item was served.

<b>WHOLE GRAIN SERVED AT:</b>	<input type="checkbox"/>					
-------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

## Meal Counts

For each meal served, you must record every child who attended that meal. Do this by marking each numbered bubble that corresponds to the numbers of the children served. Look at your CIF to determine any child's number, and then bubble in all the numbers needed.

<b>SERVED TO</b>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

We've bubbled in child numbers 1, 3, 7, 8, and 9. Each one of those numbers represents a child, and names of these children should be listed next to their child number on the CIF.

## Foods

Write the name of the food served on the line appropriate for that type of food.

**Fill in the circle in the top left corner of each meal served.** If the meal circle is not filled in, our scanner will not recognize that the meal is being claimed. Do not mark any of the bubbles in the shaded column to the right of Food Served spaces – these bubbles are for office use only.



### Correct

B R E A K F A S T	MEAT OR ALT	<input checked="" type="checkbox"/>		(M)
	BREAD OR ALT		Bagel	(B)
	FRUIT OR VEG		Apple	(FV)
	MILK		1% milk	(MM)
A M S N A C K	MEAT OR ALT	<input checked="" type="checkbox"/>	Pinto Beans	(M)
	BREAD OR ALT		Whole Wheat Tortilla	(B)
	VEG		2	(V)
	FRUIT		0	(F)
	MILK		5	(MM)
				(MK)

Note that each food component is listed on its own line.

Also note that the bubble in the upper left of this meal was marked.

For this snack, at least two components were served – a meat alternate and bread. Each food component was indicated on the appropriate row.



And since the bread served at AM snack was whole grain-rich, the A bubble in the Whole Grain Served At section should be marked for this day.

WHOLE GRAIN SERVED AT: (B)  (L) (P) (D) (E)

### Not Correct

B R E A K F A S T	MEAT OR ALT	<input type="checkbox"/>		(M)
	BREAD OR ALT		Bagel	(B)
	FRUIT OR VEG		Applesauce	(FV)
	MILK		1% milk	(MM)

In this example, the components “1% Milk” and “Applesauce” were written outside the appropriate space. “Applesauce” was even written on top of a bubble in the blue column. This could result in a loss of reimbursement.



A M S N A C K	MEAT OR ALT	<input type="checkbox"/>	Pinto Beans	<input checked="" type="checkbox"/>
	BREAD OR ALT		Whole Wheat Tortilla	<input checked="" type="checkbox"/>
	VEG		2	(V)
	FRUIT		0	(F)
	MILK		5	(MM)
				(MK)

This provider mistakenly marked the bubbles in the blue column for each food, rather than the top left bubble. The Provider would not receive reimbursements for this meal because the menu was filled out improperly.



## Infant Menu Foods

On the Infant Menu, each meal is broken down into two age groups:

- 0-5 month olds
- 6-11 month olds

A 0-5 month old Infant is only to be served Breast Milk or Formula, no matter what the meal is (i.e., Breakfast, Snack, Lunch or Dinner). A 6-11 month old can be served other foods, depending upon the meal being served.

To record this, the Infant Menu form is designed so that each food component that is relevant to the particular age range of a child can be recorded. And 6-11 month olds can receive Infant Cereal, Meat, Fruit or Vegetable along with Breast Milk / Formula. So each food component as recorded is only relevant to certain children. Here are some examples:

Infants **under** 1 year of age should always be recorded on the Infant Menu  
 Children **over** 1 year of age should always be recorded on the Regular Menu.

*Children should be switched to regular menus on their first birthday.*

## Correct



B R E A K F A S T	0-5 MOS FORMULA/ BREASTMILK	Iron Fortified Infant Formula	<input checked="" type="checkbox"/> (F)
	6-11 MOS INF CEREAL	Infant Oatmeal	(C)
	MEAT/ALT		(M)
	FRUIT/VEG	Banana	(F) (V)
	FORMULA/ BREASTMILK	Iron Fortified Infant Formula	(F)

Record the formula/breastmilk for infants 0-5 months on the top row.

Record the foods for infants 6-11 months in the following rows.

Fill in the bubble at the top, right area of the 0-5 months section, to indicate you are claiming this meal. If the bubble is NOT filled in, the meal will not be reimbursed.

## Not Correct



B R E A K F A S T	0-5 MOS FORMULA/ BREASTMILK	Iron Fortified Infant Formula	<input type="checkbox"/> (F)
	6-11 MOS INF CEREAL		(C)
	MEAT/ALT	Infant Oatmeal	<input checked="" type="checkbox"/>
	FRUIT/VEG	Banana	<input checked="" type="checkbox"/> (V)
	FORMULA/ BREASTMILK	Iron Fortified Infant Formula	<input checked="" type="checkbox"/>

DO NOT WRITE OR FILL IN THE BUBBLES IN THE SHADED AREA.

In this example, the provider wrote the 0-5 month formula in the shaded area and filled in the bubbles for the 6-11 month section. This could result in a disallowance.

Infant oatmeal was recorded in the wrong section. Record each food in the correct field.

*Hint! If infants within the same age group were served different foods, indicate each food that was served and write the child number next to the foods that were served to each child.*



## CLAIM INFORMATION FORM (CIF)

The CIF contains a list of all active children and their child numbers and other relevant information.

Make sure you never use the same number for two different children that are in your care at the same time. Each CIF should contain one child per child number – never double up.

### **Enrolling a New Child and using the CIF,**

Write the new child's name next to an unused number on the CIF. This will help you keep track of that child and the child's number when filling out forms during the rest of the month. After you send your monthly claim forms into our offices, we'll send you out a CIF with the newly-enrolled child printed on it.

### **Recording Special Information on the CIF**

- Open on Holidays: Record any holiday dates that you were open for business in the space provided.
- Children Starting School: If you have a child who is starting school, please communicate that to us here. Write the child number for any child starting school at a particular level, and indicate which School Level the child is attending (using a code from the Legend).
- Children Withdraw from Care: If a child withdraws from your care during the month, indicate the child number, the last date in care, and the reason for the withdrawal in the space provided.
- School Aged Children Attend AM Snack or Lunch: School-aged children should typically be attending school when AM Snack or Lunch is being served. If you serve a school-aged child during AM Snack or Lunch at any time during the month (and it's not during the summer holidays), provide a reason why that child wasn't in school along with the relevant date(s).

### **Using the CIF your first two months**

If new to the food program, we won't know the children that are enrolled in your care and will not be able to issue you a pre-printed CIF with all of your children listed. Have a couple of blank CIF for use during the first two months. Fill them out or make a copy, Make sure they both contain the exact same list of children.

Send one copy of these hand-written CIFs into our offices with your first claim, and the other for the second month. By then, you should have received the pre-printed CIF for your next month's claim. We will continue to send you a new CIF every month from then on. Don't forget to write any notes on those CIFs that affects your claim.



## Monthly Checklist

Before mailing your claim for reimbursement to your sponsor:

- ✓ Did you include your **CIF** (Claim Information Form)?
  - Note children withdrawn
  - Note school aged children out of school and attending during school hours
  - Note anything else we should know
- ✓ Is your **provider #** filled in on every form page?
- ✓ Is the **menu month** filled in on each menu form page?
- ✓ Have you filled in each day column with the **correct date** on your menus?
- ✓ Have you filled in **daily attendance** for each day?
- ✓ Have you filled in every **food item** on each meal you served?
- ✓ Have you indicated which meals had a **whole-grain** on non-infant menus?
- ✓ Have you filled in **meal counts** for each meal you served?
- ✓ Have you **signed** all the menu forms?
- ✓ Did you have any **new child enrollment forms**? If so, did you write the child's name and number on your CIF and have the parent sign the form?
- ✓ Did you **keep the carbon copies** of every page for your records?

Place all claim paperwork in a large manila envelope in the following order each month:

- Claim Information Form (CIF)
- Any new child enrollment forms
- Infant Attendance Menus
- Regular Attendance Menus





# **POLICIES & PROCEDURES**

Revised January 2019

411 Merrimack Street, Suite 100 • Methuen, MA 01844 • (781)-939-9292

## TABLE OF CONTENTS

PROVIDER APPROVALS & PROVIDER REVISIONS POLICY.....	2
EXTENDED HOURS OF CARE POLICY .....	3
PROVIDER AGREEMENTS & PRE-APPROVAL TRAINING POLICY .....	4
LICENSING AND INFORMAL CHILD CARE POLICY .....	6
TIER STATUS DETERMINATION POLICY .....	7
PROVIDER TRANSFER POLICY .....	9
PROVIDER TERMINATION POLICY .....	10
CHILD ENROLLMENT FORM POLICY .....	11
INFANT MEAL POLICY .....	12
FOOD SAFETY AND SANITATION POLICY .....	13
CREDITABLE FOOD AND NUTRITION POLICY .....	14
MEAL SERVICE DOCUMENTATION .....	15
CLAIM PROCESSING POLICY .....	16
SPONSOR TRAINING POLICY .....	17
TRAINING MATERIALS POLICY .....	18
SPONSOR MONITORING REQUIREMENTS POLICY .....	19
HOUSEHOLD CONTACT POLICY .....	21
SERIOUS DEFICIENCY POLICY .....	22
MEDICAL EXCEPTION POLICY .....	23
CIVIL RIGHTS POLICY .....	23

### **CIVIL RIGHTS NONDISCRIMINATION STATEMENT**

The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department.

(Not all prohibited bases will apply to all programs and /or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html) or at any USDA office, or call (866) 632-9992 to request the form.

You may also write a letter containing all of the information requested in the form.

Send your completed complaint form or letter to us by mail at:  
U.S. Department of Agriculture, Director, Office of Adjudication,  
1400 Independence Avenue, S.W., Washington, D.C. 20250-9410,  
by fax: (202) 690-7442  
or email at: [program.intake@usda.gov](mailto:program.intake@usda.gov).

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

USDA is an equal opportunity provider and employer

This was produced with 100% USDA funding

## **PROVIDER APPROVALS & PROVIDER REVISIONS POLICY**

1. Request for new provider approvals
  - a. Complete sign-ups will be entered on the ESE web portal upon approval and then sent to the Mass Department of Elementary & Secondary Education Nutrition Program & Services twice a month, approximately on the 15<sup>th</sup> and the last day of every month
  - b. All sign-ups will be reviewed by the Office Manager to ensure all information has been filled out correctly and that the license is valid.
  - c. Census data will be checked on each sign up to see if they qualify for Tier 1. If they do not qualify, their address will be checked for school area qualification. If the provider does not qualify for either census or school, she will be given the meal benefits form with instructions as part of the sign-up packet. Any provider that submits their meal benefit form with the required documentation will be given to the Office Manager in charge of Tiering. (see Tier Status Determination)
2. Organization Management
  - a. Provider records such as site sheet, permanent agreement and current license will be placed in the License & Permanent Agreement Binder alphabetically.
  - b. Provider records such as Annual Enrollment Update, CACFP Program Sign Up Verification, new enrollments, trainings, termination letters and any notes from the provider will be placed in their office file. At the end of the year files will be boxed and placed in storage for a total of 3 years plus the year we are currently in.
  - c. Provider's scanned menus will be placed in a box each month and placed in storage for a period of 3 years plus the year we are currently in.
3. Provider Standard Administration and Operations
  - a. Providers will be given a manual and this Policies & Procedures manual upon joining the program
  - b. Any new regulations or changes to the program will be given out as an addendum to the manual or Policies & Procedures. These will be handed out and reviewed with the provider during their home visit and any questions will be answered.
4. Instructions Guidance
  - a. All information submitted on the letters to Mass Department of Elementary & Secondary Education Nutrition Program & Services monthly will be reviewed at the end of the month to verify that the information in our computer system matches.

## **EXTENDED HOURS OF CARE POLICY**

1. Providers can apply for double sessions, evening snack, or weekend care by filling out the Extended Hours form and showing a need for the request if they are extending their child care hours. A copy of the new license must be submitted showing approval for “Non-Traditional Hours”.
2. The Office Manager will be assigned to review their request. He/she will check that there are enrollments to verify that the provider has children enrolled during the time frame of extended care.
3. The Office Manager will send a letter to the provider verifying that they have been approved with the names of the children approved for the extended meal.
4. If the Office Manager cannot prove a need, a letter of denial will be mailed to the provider.
5. All extended-hours request forms, approval and denial letters will all be kept in the Extended Care Approval Binder.
6. Providers that are approved for extended hours will receive an additional unannounced monitoring review, totaling 4 during the fiscal year.
7. Two of the unannounced visits must be during the extended hours.
8. A Provider working more than 12 hours is required to have an assistant and a copy of the assistant’s license must be on file in the main office.

## **PROVIDER AGREEMENTS & PRE-APPROVAL TRAINING POLICY**

### 1. New sign-ups

- a. Any provider that contacts the office or is contacted by us from the EEC list, and is not on any other food program, who wishes to join the program will be asked if she /he currently have non-residential children enrolled (signed up to start) in his/her program.
- b. If a provider has non-residential children enrolled an appointment will be made.
- c. If a provider does not have children enrolled then his/her name will be placed on a waiting list and will be called on a monthly basis.
- d. At the set appointed time, a staff member will meet with the provider and review and explain the program including but not limited to these details:
  - i. What is the CACFP
  - ii. Food requirements that meet the meal patterns for reimbursement.
  - iii. How to record their attendance daily
  - iv. How to enroll a child including what information is required if the child is an infant or school age.
  - v. How to fill out menus.
  - vi. How to submit your menus.
  - vii. Deadlines for submitting your menus.
  - viii. When you receive your error report and you believe the office has made a mistake on your reimbursement, what do you do?
  - ix. Tiering options.
  - x. Extended hours of care.
  - xi. What we expect from the provider when we do a home review.
  - xii. The minimum number of reviews required
  - xiii. Annual Training requirements.
  - xiv. Reviewing the Permanent Agreement and Rights and Responsibilities line by line with the provider and answering any concerns or questions he/she might have.
- e. The home monitor will fill out all the required paperwork with the provider if he/she decides to join the food program, including asking the provider for a copy of their childcare license.

- f. Prior to completing and signing a permanent agreement with the Sponsor, a new family child care provider must receive a pre-approval monitoring review and pre-approval training, for not less than 90 minutes, covering all aspects of CACFP participation requirements.
- g. The provider will be given a binder with Provider Resources, Inc. manual, PRI's Policy and Procedures and the blue "Building for the Future Poster" to display. Also "Building for the Future" fliers, WIC, and CACFP meal pattern packets for the provider to give to her child care parents.
- h. If a new provider does not submit her menus for 3 months in a row, the home monitor will do another 90 minute training visit.
- i. If a provider has only 1 non-residential child enrolled at the time of the sign up that terminates shortly after starting, Provider Resources, Inc. will do a 90 minute training with the provider if he/she goes 3 months without claiming or the provider will be terminated.
- j. A provider who re-contracts with us after 12 months of termination will receive a 90-minute pre-approval training.
- k. All new sign-ups will receive a monitoring review within the first 4 weeks of CACFP participation.

## 2. Organization Management

- a. Provider Resources Inc. will submit the following to the Mass Department of Elementary & Secondary Education Nutrition Program & Services:
  - i. The white and yellow copy of the site sheet,
  - ii. The Permanent Agreement
  - iii. The CACFP sign up verification form for any provider signed up during that month.
- b. Once the provider has been issued a site agreement number, Provider Resources, Inc. will place its copy of the provider's site sheet and permanent agreement in the License & Permanent Agreement Binder with their current license or voucher for Informal Care
- c. Prior to signing up the provider, Provider Resources, Inc. will provide a 90 minute training (with handouts) and conduct a pre-approval home review.

## **LICENSING AND INFORMAL CHILD CARE POLICY**

1. All child care licenses are kept in a plastic sleeve in the License & Permanent Agreement Binder.
2. Any provider required to have an assistant must send a copy of all their assistants' licenses and certificates. These will be entered in the computer and filed with the provider's license.
3. Any of ICC providers whose voucher is expiring needs to submit a copy of their new voucher in order to keep claiming.
4. All providers with changes in their license have 5 days from receipt of their new license to submit a copy to the main office.
5. All licenses that have been renewed or changed for capacity, name, or address will have that information submitted to Mass Department of Elementary & Secondary Education Nutrition Program & Services.
6. A provider with a capacity increase will not go into effect unless that license is received and the info sent to Mass Department of Elementary & Secondary Education Nutrition Program & Services during the present month.
7. Any provider that cannot show he/she is in the process of renewal (or if he/she cannot provide a new voucher in the case of an ICC provider) will be placed on hold and a claim will not be processed past the expiration date. After 3 months the provider will be terminated if a license, EEC letter or voucher has not been received.
8. When out on visits, Home reviewers are to make sure the licenses are posted, including those for any assistants, and that the information matches what is in our computer.
9. A copy of the assistant's license needs to be submitted to the office every time a change is made to the license. During the home review any home licensed for 10 will require recording the license information for all assistants.

## TIER STATUS DETERMINATION POLICY

1. All new and transferring providers to the Program.
  - a. When a staff person is doing a pre-training and sign up, they are to explain the three ways a provider may qualify for Tier 1. The staff person will leave with the provider the meal benefit form and directions along with the contact person's name and number at the main office if they may have any question.
  - b. When a new provider signs up with Provider Resources, Inc. it is the responsibility of the staff person in charge of compiling the letter to the Mass Department of Elementary & Secondary Education Nutrition Program & Services to check the census data website to see if he/she qualifies for Tier 1 by census data.
  - c. If a provider's address shows it is at 50% or higher (185% Poverty under 13) for the tier section for Tier 1 census on the site agreement will be completed. A copy of the census map for the provider will be made and put into the Tiering file cabinet.
  - d. If a provider does not qualify for Tier 1 by census data, they will proceed with the School listing to see if they qualify by School area.
  - e. If they do, they will complete the tier section on the sign up for Tier 1 School and will make a copy of the school listing for the provider's file in the Tiering file cabinet.
  - f.
  - g.
  - h. If the provider does not qualify for census or school, the office will check with the office manager assigned to handle Tier 1 income eligibilities to see if this provider has sent in any paperwork for income qualification. If the provider has not, the office manager will classify the provider as Tier 2 on the sign up. If he/she does qualify for Tier 1 based on income that will be checked off on her site agreement form. If the provider is Tier 2, he/she may then request Income Eligibility packets for all enrolled children. The provider will then distribute the packets to the families in her care.
  - i. All new providers will receive notification of their Tier status through the mail.
2. Existing provider
  - a. Once a year in March, or when the new information is released for Tier 1 school, Provider Resources Inc. will check each provider living in any town or city where new schools have been added as Tier 1 against the provider's street listing.
  - b. Tier status is valid for 5 years. Any existing provider whose Tier status is expiring will be re-qualified if they live within an updated Tier 1 school area. Any provider

who no longer qualifies will be reclassified as Tier 2. A letter will be sent to the provider informing her of the change in Tier status. The provider then has the option of applying for Tier 1 based on income or means testing of their child care parents.

- c. Any existing provider found to be Tier 1 school qualified will receive a letter stating that she is now Tier 1 for school and will be put on the current letter to Mass Department of Elementary & Secondary Education Nutrition Program & Services.
  - d. A copy of the Street listing and Approved School Tier List will be placed in the providers file in the locked file cabinet for Tiering.
  - e. Their Tiering status will be changed in the computer on the providers screen allowing her to be reimbursed as Tier 1
  - f. An updated census list is compiled annually. However, a provider approval for Tier 1 by census is good for 5 years unless the provider moves. If the provider moves then the Tiering level must be re-determined.
  - g. Every provider that is Tier 2 or a provider that is expiring will be checked against the new map.
  - h. Any provider to be found Tier 1 census classified will be sent a letter stating that they are Tier 1 for census and then put on the ESE letter.
  - i. A copy of the census map (showing their address and percentage of 50% or more) will be placed in her folder in the locked file cabinet specifically for Tiering.
  - j. Any provider that is Tier 1 based on Census or School and will be expiring will be notified in writing if they no longer qualify based on census or school. They will be told of the option to qualify based on income or the option means test their child care parents.
3. When a provider is seeking approval for Tier 1 based on income they are required to return their meal benefit form, completely filled out, and tax form 1040 and Schedule C as well as any other paperwork such as pay stubs to show all others household income when applicable.
  4. When a provider is denied Tier 1 because of income they are sent a letter of denial and a written Appeal Procedure.
  5. Any MEDICAID/SC HIP forms that are returned are kept in the provider's tier file.
  6. Any provider that is currently Tier 2 that wishes to have their homes means tested will have parents packets sent to them. They are to be distributed to the parents of all the

child care children in their care. These packets will include a self addressed stamped envelope to be mailed back to the office directly.

### **PROVIDER TRANSFER POLICY**

1. Providers can only be with one food program during a month.
2. If a provider contracts simultaneously with two programs, both contracts are null and void.
3. Providers must give a 30-day written notice to terminate.
4. Provider Resources, Inc. will take a transferring provider when they have terminated with their previous program and have not been on any another program within the current fiscal year.
5. The provider must supply a copy of their letter of termination from their previous sponsor showing the date they terminated and the training name and hours they have completed.
6. The provider's termination letter will accompany their sign up and is sent to the Mass Department of Elementary & Secondary Education Nutrition Program & Services.
7. All transfers will be reassessed for their Tier Status based on school or census.
8. Prior to completing and signing a permanent agreement with the Sponsor, a transferring family child care provider must receive a pre-approval monitoring review and pre-approval training, for not less than 90 minutes, covering all aspects of CACFP participation requirements and will receive a monitoring review within the first 4 weeks of CACFP participations.
9. Providers transferring are required to complete the training hours for that fiscal year.

## **PROVIDER TERMINATION POLICY**

1. When a provider joins Provider Resources, Inc. they will receive in writing the procedures for terminating and annually thereafter.
2. A provider may be terminated as long as they are not being reviewed as part of the parent contact or serious deficiency process.
3. Providers must give a 30-day written notice requesting to terminate. Within 5 working days of receipt of the provider's request for termination we will issue a termination letter that states the date the letter was received by the sponsor and the date the agency is officially terminating the provider from the CACFP. It shall also explain that the provider may claim with that agency through the established termination date. It must also provide a record of the provider's training hours and training topics completed since the start of the fiscal year.
4. If a provider has not claimed for 3 months we will send them a letter with the last month they claimed listed. The letter will explain that the provider will be terminated by the specific date listed unless we hear back from the provider.
5. All terminations will be sent each month to the Mass Department of Elementary & Secondary Education Nutrition Program & Services.

## **CHILD ENROLLMENT FORM POLICY**

1. Providers must submit a completed enrollment form signed by the parent for each child in their child care.
2. Providers must keep a copy of the signed enrollment form in their Provider Resources, Inc. Folder. It must be available at home reviews.
3. Every April each provider will be sent two re-enrollment packets. The child care parents are to review all the information, make any changes, corrections or additions in both packets. They are to also sign both packets. One packet is to be returned to the main office, the other packet will be placed in the Provider Food Program folder.
4. For Infants, enrollments must show the type of iron-fortified formula the provider offers.
5. All enrollments are required to have the days of care, the hours of care for the child, meals served while in care and school attendance information.
6. The main office will make any changes on the re-enrollments into the computer.
7. If an enrollment is not returned or is not signed, the child will be withdrawn and the provider will not be able to claim the child for reimbursement until a new enrollment is received.
8. Anytime a provider passes out an enrollment form for a new child care child or at the time of annual renewal, the parent must be handed a copy of the USDA's "Building for the Future" flyer, WIC and CACFP meal pattern.
9. Any provider supplying substitute care must supply an enrollment form within 24 hours. If the provider is providing substitute care for a provider within our agency, we can make a copy of the child's enrollment to send to the substitute provider and place another copy in her file.
10. A temporary change in days/meals served to a child requires a written notice from the parent. This notice must be mailed to the Provider Resources office before the end of the month.

## **INFANT MEAL POLICY**

1. Family childcare providers participating in CACFP must offer program meals to all eligible children enrolled in their child care home. Infants must have access to the CACFP.
2. All providers must offer a brand of infant iron fortified formula approved by USDA.
3. Parents can accept the provider's formula or choose to supply their own. They must record their choice on the infant menus. The provider can claim the child either way, however once the child is developmentally ready the provider must supply all solid food, when developmentally ready.
4. Providers can claim for infants (0-12 months) that are on breast milk when the mother expresses breast milk and leaves it at the child care home.
5. Separate and individualized menus for all infants in care will be recorded on the menus with the food served and amount offered.
6. Infant menus must meet the CACFP requirements including, but not limited to, any adult cereal including cheerios, meat sticks and no combination meals
7. All children under the age of 1 must be maintained on the Infant menu. The child must be placed on the Regular menu on the date of their first birthday.

## **FOOD SAFETY AND SANITATION POLICY**

1. During home reviews, the monitor will validate that the provider's compliance with the safety and sanitation requirements related to the CACFP.
2. The reviewer will make sure the provider practices appropriate sanitation practices while preparing and serving food.
3. The reviewer will observe that the children have washed their hands prior to helping with any food preparation and eating.
4. The reviewer will check the refrigerator and freezer for thermometers and cleanliness, and will check to make sure food is properly stored and covered.
5. All refrigerated medicine will be kept out of the reach of children.
6. The reviewer will check dry food storage.
7. The reviewer will make sure that chemicals and medicine are stored out of the reach of children and away from any food.
8. The reviewer will make sure no pets or pet dishes are allowed in the food service area.
9. Childcare equipment is to be cleaned and sanitized on a regular basis.
10. The reviewer is to observe that there are no obvious health, fire or safety issues.
11. The reviewer is to look to make sure there is no sign of rodent or insect infestation.
12. If the reviewer observes any food safety or sanitation problems, they are to be written on the home review form and a corrective action plan will be discussed. Immediately after finishing the visit the monitor will contact the Field Supervisor to determine the next step.
  - i) If the finding is of a serious nature then the Field Supervisor may direct immediate action to occur to resolve the problem.
  - ii) If the finding is of a less serious nature a follow up visit will be required within 10 days to see that the corrective action was implemented. If the problem is not resolved on the follow-up, the provider will be found serious deficient.
13. Any problems that are not corrected on the follow up the provider will be found serious deficient.

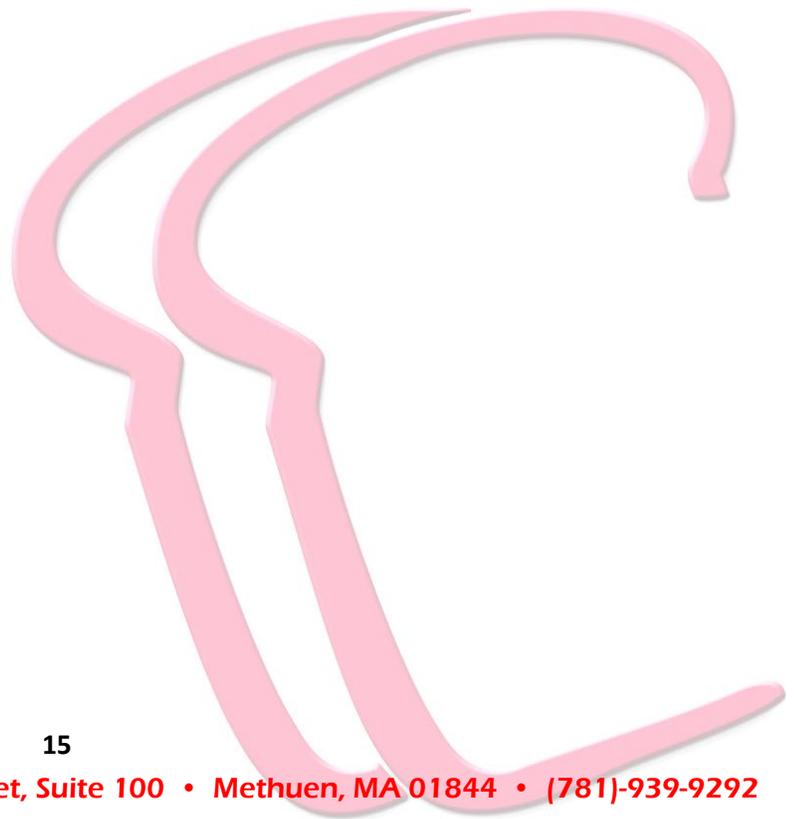
## **CREDITABLE FOOD AND NUTRITION POLICY**

1. Provider Resources, Inc. will ensure that the provider implements nutritional standards when planning menus by serving foods that offer a variety of vitamins, minerals, whole grains, colors, and textures at each meal.
2. Providers are to incorporate low fat, low sodium, and low sugar foods throughout the menu cycles.
3. Commercially purchased processed foods such as ravioli, chili, spaghetti with meat sauce, beef stew, chicken entrée (nuggets, patties, stick, fingers and popcorn), fish sticks, pocket sandwiches, and pizza rolls may not count as meat/meat alternative, unless one of the following is available: extra cheese or meat is added, the product is CN labeled, a product analysis sheet is available stating the amount of cooked lean meat/meat alternative or documentation stating the required amount of lean meat.
4. Vegetables and fruits used for flavoring or as optional ingredients, such as garnishes, may not be counted to meet the vegetable/fruit component, such as pickles, onions, peppers and lettuce. These amounts are generally not controlled, and it is hard to determine the contribution to the meal.
5. Vegetables and fruits served as a combination item (such as fruit cocktail, succotash, peas and carrots, lettuce/tomato in a taco, mushroom/green peppers on pizza) may be credited to meet only one of the two required components.
6. Breading on items such as processed chicken and processed fish is insufficient to meet the grain requirement.
7. Although some meat/meat alternates are creditable foods, the protein percentage in the product is difficult to determine. The composition of the processed meats must be known to properly credit the meat/meat alternate. Therefore, in order to provide a creditable portion only all meat or all poultry processed products may be served.
8. For combination dishes such as soups, stews, pot-pies, casseroles, lasagna, or pizza – no matter how many food groups are in the dish, they may only count as 2 components. The reason for this is due to the unpredictable nature of the serving as to what food and what quantities are on the plate.
9. No home canned food can be used in the CACFP. This requirement stems from the concern over the safety of all children being served in the program. Home canned food that is not properly processed can spoil. This includes homemade jams and jellies.
10. If an allergy or condition is severe and life threatening a signed doctor's note must be given stating the condition and the food that may be substituted.

11. Young children can choke on numerous foods that are creditable in the CACFP. Developmental consideration omits the serving of frankfurters, grapes, nuts, nut butters and dried fruit for children under the age of three (3).

### **MEAL SERVICE DOCUMENTATION**

1. Menus must be recorded prior to the meal service.
2. Providers must document their meal counts by the close of the business day being claimed. Meal counts not documented on the actual day of the service cannot be claimed.
3. The actual meal service times must correspond to the actual meal service times on file with Provider Resources, Inc.
4. Providers must notify the agency or home monitor when there is change in their mealtimes.
5. Providers that will not be home during the scheduled mealtimes are to call the main office.
6. If at the time of a home review no children are present, the reviewer will conduct a paper review as long as the home is open for business that day.



## **CLAIM PROCESSING POLICY**

1. All menus must be received or submitted into the main office of each month.
2. Every morning a data transfer will be taken to retrieve any Internet menus and to update all Internet providers to provide them with their most recent information.
3. Menus will be stamped in when received in the office.
4. Menus will be read by Provider Resources, Inc. staff for accuracy in food documentation. Any mistakes will be deducted. The staff member will initial the back of the menu.
5. Scanned menus will go through the scanner and 4 reports will be printed out
  - a. Office error report
  - b. Provider error report
  - c. Meal counts
  - d. Child Information Form "CIF" forms which lists all the children currently enrolled and the providers training information to date.
6. A staff member will review every error report for accuracy and initial next to each error.
7. If the scanner did not read the menu accurately, it will be rescanned.
8. Within 2 days of completion of the claim, all error reports are sent out to the provider along with their CIF form.
9. They have 5 days to contact the office if they believe an error has been made.
10. Menus received by the 5<sup>th</sup> will be reviewed and processed for payment on the first bill. Providers will be paid when funds become available from the state.
11. Menus received by the 3<sup>rd</sup> will qualify for guaranteed reimbursement by the 20<sup>th</sup> of the month even if the state reimbursement is late.
12. The Claims Manager will produce an outstanding claims report weekly.
13. Providers that miss the first billing will be called every week by the office staff. Their menus need to be received no later than the 22<sup>nd</sup> of the following month when Provider Resources, Inc. submits the final bill. These providers will experience a significant delay in payment.
14. The staff assigned to make the calls for the late claims are to return the list back to the Claims Manager for monitoring. The Claims Manager will report each Monday to the Director the total number of outstanding menus.
15. Menus that had a review during that month will be matched to their home review form and checked for accuracy. The remaining menus will be placed in alphabetical order.

## **SPONSOR TRAINING POLICY**

1. Provider Resources, Inc. is required to monitor and ensure that their personnel and each provider obtain a minimum of six CACFP related training hours annually. Personnel training shall include topic areas related to the administration and operation of the CACFP and as outlined the current management plan.
2. The staff is trained as follows:
  - a. Full time staff has a meeting each month. During that time, policies and procedures are reviewed.
  - b. Part time employees have 2 area meetings a year each lasting 3 hours. During that time we review policy and procedures on all monitoring duties including sign ups, home reviews, health and safety, food safety, record keeping, tiering, and review the trainings that will be given to the providers.
  - c. Once a year a 6-hour annual meeting is held for the entire staff where a review is given on all areas of the program.
  - d. Staff must sign in for all meetings.
3. Child Care Providers are required to receive the following training:
  - a. 2 hours of training in record keeping including meal counts and menus
  - b. 2 hour of training in food safety and sanitation
  - c. 2 hour of training in nutrition education and physical Activity.
4. If a provider joins mid-year the training will be pro-rated.
  - a. Providers that join between October and January need 6 hours of CACFP training. See section 3 for the details.
  - b. Providers that join between February and May need 4 hours of CACFP training as follows
    - i. 2 hours in record keeping
    - ii. 1 hour of nutrition
    - iii. 1 hour of food safety and sanitation
  - c. Providers that join June through September need 2 hours of CACFP training:
    - i. 1 hour of CACFP record keeping training and
    - ii. 1 hour of food safety and sanitation
5. In addition, the providers receive a monthly newsletter covering topics from issues we have seen. Some of topics discussed include Tiering, Over-claiming meals, health and safety, license issues, claim procedure for receiving your reimbursement in a timely

manner, creditable foods. These are sent to the provider and staff as well as posted monthly on our web site.

6. In order to renew their CACFP participation, the provider must have completed all the required training as of September 30, of the current fiscal year. If a provider does not complete the required training before Sept 30, she will be considered Non-Compliant with the contract and will be Seriously Deficient. The provider will not be able to submit any claims until completing the Serious Deficiency process.
7. Training materials will be made available to the providers each October. During the first round of home reviews, monitors will check the number of completed trainings. Any paper answer sheets should have been mailed to the office. Unfinished trainings will then need to be completed before the second round of reviews and any paper answer sheets mailed in before the 2<sup>nd</sup> review. Any remaining uncompleted training hours will be noted by the monitor at the time of the second review and should be completed and submitted before June 1<sup>st</sup>.
8. Providers with access to the Internet will be able to log into the website and take trainings directly on-line. Upon successful completion of the on-line exam, the training hours will be logged on the provider's account and will be reflected in the June 1<sup>st</sup> Training Status letter.
9. Providers will receive a training letter on June 1st telling them how many hours they currently have completed. This information is also noted each month on their CIF form.

### **TRAINING MATERIALS POLICY**

1. Prior to use or implementation, all training materials will be sent to Mass Department of Elementary & Secondary Education Nutrition Program & Services for approval.
2. All training developed with CACFP funds will be identified as such.
3. All training developed with private funding will be identified.

## **SPONSOR MONITORING REQUIREMENTS POLICY**

Provider Resources, Inc., with or without prior notification, exercises the right to review the home either alone or with State agency and/or USDA personnel. As part of the review the provider records and meal services during the hours of program operation will be reviewed and parents of enrolled children may be contacted.

### **Scheduling:**

1. All providers must receive a minimum of three visits per fiscal year of which two or all are unannounced and conducted during the approved meal service.
2. The state agency or Provider Resources, Inc. may determine that additional monitoring reviews are required for a provider.
3. Providers that have been approved for extended hours of care (double sessions, weekends, and/or evenings) must have 4 visits a year. Three of these visits must be unannounced and conducted during the approved meal service. Out of the 4 visits, two of the visits must be unannounced and completed during the extended hours during the approved meal service.
4. Any time a provider requires a follow-up visit, it must be unannounced. Necessary follow-up visits must be approved or assigned by a supervisor.

### **Review Requirements:**

1. Provider Resources Inc. will train the provider to maintain their menus prior to the meal service and to have copies available at the time of the review.
2. At the first review of every year, the provider will be given a folder to keep all the paperwork in that is required to be viewed by the monitor at every review. During the first review, the monitor will move the permanent agreement, license and assistant license if applicable from the old folder to the new one. The monitor will make sure that the re-enrollments are signed and are in the new folder. The monitor will review the Annual Enrollment Status Update with the provider and both will sign both copies. The provider will verify the review sheet information and sign off on it.
3. The monitor will review all the menus for the month to ensure the provider is following the meal pattern and claiming creditable foods. The provider will be deducted for incomplete meals, meals missing, or non-creditable food.

4. Reviewers that visit providers using scannable forms will initial off on the meal observed and then record the number of children being claimed for that meal on the menu as well as the number claimed for the 5 previous days.
5. Reviewers will verify each child being claimed has a signed enrollment form.
6. Reviewers will record each child present on the review worksheet including those enrolled and those that are not. They will also list all absent enrolled children.
7. The reviewer will have the provider review the “review worksheet” for accuracy verifying in particular their phone number, meal service times, and children enrolled. The provider will sign off on any changes.
8. If a provider served a meal or snack prior to the reviewer’s arrival, that visit will not apply to the meal service review.
9. If a provider is not home when the monitor arrives, she must wait a minimum of 15 minutes but not longer than 30. If the provider does not arrive, she is deducted for that meal or snack. The monitor will contact the Field Supervisor before leaving the home.
10. Health and safety problems viewed at the home review will have a corrected action plan made at the visit. Within 10 days an unannounced follow up will occur to make sure the problems have been corrected. If the follow up does not see the corrected action implemented on any health and safety issue a serious deficiency notice with the corrective action will be mailed to the provider and they will have a minimum of one follow up.
11. Menus not up to date will be deducted and an unannounced follow up review to make sure the provider is keeping her menus up daily. If the follow up does not see the corrected action implemented on the menus being completed daily a serious deficiency notice with the corrective action will be mailed to the provider and they will have a minimum of one follow up.
12. Low attendance (without a logical reason) compared to the 5 previous days will require an unannounced follow-up visit within 10 days. If a low attendance has not been corrected at the 10-day follow up, a parent contact will be conducted.
13. Providers are to keep their records for 3 years plus the current year.
14. Throughout the year all new policies and procedures and any addendums made to the manual are passed out at the home visit and explained to the provider. They are also sent out monthly in the newsletter and posted on the website.
15. If no children are present but the Provider is open for business then a paper review will be conducted.

## **HOUSEHOLD CONTACT POLICY**

1. Provider Resources, Inc. will make household contact when a discrepancy (without a logical reason) of 2 more children are absent at the home review comparing it to the past 5 days attendance for the same meal unless a follow up is completed within 10 days and found no attendance discrepancies.
2. Provider Resources, Inc. will request an updated enrollment for that child from the provider in order to claim that meal or day.
3. We will make household contact when we declare a provider Seriously Deficient for discrepancies with meal counting and claiming and/or with child enrollment documentation.
4. Household contact will be made to validate the following:
  - a. Child's or children's enrollment in a provider's family child care or
  - b. Claim submitted by a provider.
5. We will pay the valid portion of the provider's claim during the household contact process.
6. We will make parent contact by phone or letter. If a parent fails to respond to the parent contact letter or phone call, a 2<sup>nd</sup> letter will be sent.
7. If the parent fails to respond to all attempts the child will be withdrawn and we will assess a fiscal disallowance against the provider's claim for the reimbursement.
8. The child will be reinstated when a new enrollment is received.
9. We will assess a fiscal disallowance when the household contact documentation received does not support the provider's claim submitted.
10. We will give written notification to the provider on the fiscal disallowance based on the outcomes of the household contacts.
11. Parent contacts are made when a claim is in question of its accuracy.

### **HOUSEHOLD CONTACT WILL CONTAIN:**

1. A phone call or letter will be sent to every child enrolled in the provider's home.
2. Parents will be requested to verify enrollment or withdrawn date, attendance, regular hours of care and meals the child received each day of the review/claim month.
3. A request for the parent/guardian to return documentation within 5 days. A self-addressed stamped envelope will be included. A 2<sup>nd</sup> letter if necessary will be mailed to verify the information.
4. Our phone number for parents to call if they have any questions or concerns.

## SERIOUS DEFICIENCY POLICY

The CACFP regulations at 226.6(c) as defined by the USDA states the following serious deficiency for family child care homes that, if not corrected, would result in a provider's termination for cause:

- Misrepresentation of information submitted on your application.
- Submission of false claims for reimbursement.
- Submitting claims to more than one sponsor.
- Failure to keep required records.
- Noncompliance with the program meal pattern
- EEC license revoked for health and safety of the children.
- Completion of required training each year

If any of the above situations occurs, a serious deficiency notification will be mailed out to the child care provider and also notification to the State Agency. The sponsor will at that point create a corrective action plan for the provider. The provider will respond to the sponsor, on how he/she will implement the corrective action plan. A response is required to be in writing and received by the sponsor within five business days.

The sponsor will conduct an unannounced follow-up review, to verify that the corrective action plan has been implemented. The sponsor will also conduct another unannounced review, to make sure that the corrective action is permanently corrected, the provider will then receive a rescind letter. If at any time, the provider receives a second serious deficiency notice the provider will then be terminated and put on the national disqualifying lists.

If the sponsor conducts an unannounced review and finds that the corrective action has not been implemented, the sponsor will then send the provider a notice of proposed termination and also send notification to the state agency.

With the proposed termination notice the provider will receive an appeals procedure; the provider will **then** have the opportunity to request a hearing in writing within the timeframe that the appeals procedure has stated. The provider can have her record and documentation reviewed by a Hearing Officer either in person or a review of the record. If the provider wins the appeal the provider will be mailed a rescind letter on the serious deficiency determination and notification sent to the state agency. If the sponsor wins the appeal then a termination notice will be mailed to both the state agency and the provider. The provider will then be put

on the national disqualifying list, which will not allow him/her to participate in a Child and Adult Care Food Program for the next seven years or until all debts are clear.

### **MEDICAL EXCEPTION POLICY**

1. A child that is unable to consume a food item because of medical or other dietary needs must have supporting documentation on file signed by a recognized medical authority which includes:
  - a. An identification of the medical or other special dietary needs and restrictions of the participant's diet
  - b. The food or foods to be omitted from the participant's diet, and the food or foods that may be substituted.
2. A provider may not claim for meals that a food or foods were substituted without a Doctor's medical note.

### **CIVIL RIGHTS POLICY**

1. We will make sure the civil rights statement is on all printed materials and public statements pertaining to the Child and Adult Care Food Program. The full statement will read: "In accordance with Federal law and U.S. Department of Agriculture policy. This institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights 1400 Independence Ave. S.W., Washington D.C. 20250-9410 Or call (800) 795-3272 (voice) or (202) 720 6382 (TTY). USDA is an equal opportunity provider and employer
2. If the material is too small to permit the full statement to be included, the material will at minimum include the statement, in print size no smaller than the text, that "This institution is an equal opportunity provider"
3. Providers will be given "Building for the Future" fliers to pass out to the parents of all their child care children.
4. Providers will display the blue "Building for the Future" poster.