

# **Orientation & Recordkeeping Workbook**

**for**

***At-Risk After School Care Centers  
and Outside School Hours Care Centers***

*participating in the*

**Missouri Department of Health and Senior Services  
Child and Adult Care Food Program**



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Revised 2014



# **Missouri Department of Health and Senior Services**

## **Child and Adult Care Food Program (CACFP) Orientation & Recordkeeping Workbook for At-Risk After School Care Centers (ASCS) and Outside School Hours Centers (OSHC)**

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1400 Independence Avenue, SW Washington, D.C.  
20250-9410; (2) fax: (202) 690-7442; or  
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# Introduction

## How to Contact the Program

For questions on the Child and Adult Care Food Program (CACFP), requests for technical assistance, or instructions on how to schedule training, please contact:

Missouri Department of Health and Senior Services  
Division of Community and Public Health Bureau of  
Community Food and Nutrition Assistance P.O. Box  
570  
930 Wildwood Dr.  
Jefferson City, MO 65102

**1-800-733-6251**

**1-573-751-6269**

**Fax: 573-526-3679**

**Email: [cacfp@health.mo.gov](mailto:cacfp@health.mo.gov)**



### **Specialty Topic Classroom Training**

Specialty training classes are held in the district locations and include:

- **Missouri MOve Smart Care (Approved for 3.5 Child Care Clock Hours)**

You can register for a specialty class or find additional information on CACFP training opportunities at: <http://health.mo.gov/cacfp/training>

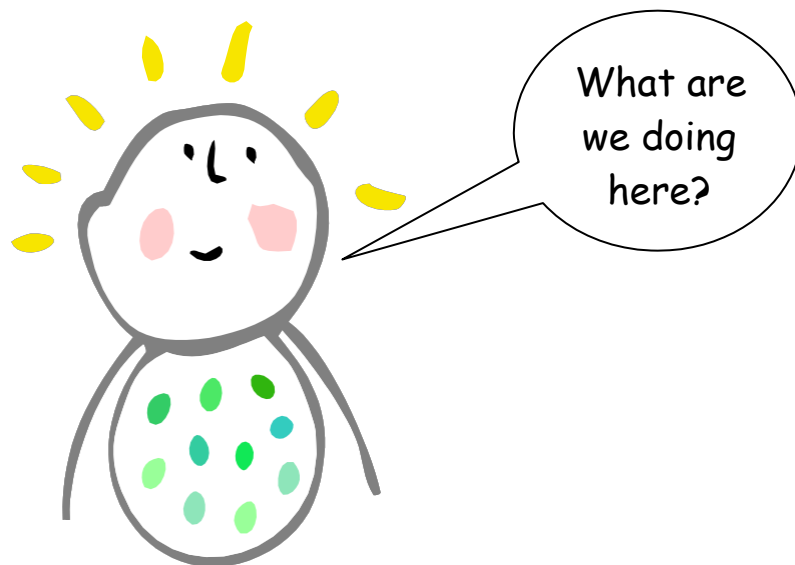
### **On-Line Training Modules: [www.mocacfp.com](http://www.mocacfp.com)**

This website is an on-line education portal for child and adult care providers who take part in the Missouri CACFP. The free, self-directed *CACFP Orientation Series* lessons focus on key topics you need to know in order to submit valid claims for reimbursement from the Missouri CACFP. All registered users will have access to the full catalog of available lessons which currently includes the following training modules:

- Program Integrity and the Serious Deficiency Process
- Income Eligibility Forms
- Recordkeeping
- Claims for Reimbursement
- Civil Rights
- Meal Patterns
- Serving Creditable Foods in the CACFP
- Infant Feeding
- Creditable Foods

# Orientation Objectives

1. Understand the responsibilities of your center, the staff and director for participation in the CACFP.
2. Understand the responsibilities of the Missouri Department of Health and Senior Services (MDHSS) in administering the CACFP.
3. Understand the importance of accurate recordkeeping and its role in verifying the center's claims for reimbursement.
4. Identify the records that must be maintained to meet regulatory requirements. Explain the procedures for completing each record.
5. Use the meal pattern requirements and menu planning process to create nutritious and creditable menus.
6. Explain how to use the *Food Buying Guide* and *Creditable Foods Guide* resources to assist with menu planning.
7. Explain the importance of good nutrition in the at-risk setting.



# Benefits of the Child and Adult Care Food Program

## CACFP can help the center you serve

CACFP plays a vital role in improving the quality of organized afterschool programs, making it more affordable for many low-income families. Benefits include:

- Centers may be approved to claim up to one meal and one snack per participant in attendance each day;
- Training and technical assistance on nutrition, foodservice operations, program management, nutrition education and recordkeeping;
- Improved health and well-being of children through age 18 by providing nutritious, well-balanced meals; and
- Development of good eating habits that will last through their lifetimes.

## Key points to remember about the CACFP

- Providing nutritious meals and snacks is the primary goal;
- CACFP is a supplementary program;
- CACFP requires accurate recordkeeping.
- CACFP is a federally funded program through the United States Department of Agriculture (USDA), and is administered by the Missouri Department of Health and Senior Services, Bureau of Community Food and Nutrition Assistance (CFNA)
- CACFP is regulated by Congress and the USDA.
- MDHSS conducts CACFP monitoring reviews at all participating independent centers and sponsoring organizations pursuant to 7 CFR § 226.



At-risk afterschool care centers provide a much-needed service to their communities. They give children a safe place to go after school and nutritious food that gives them the energy they need to concentrate on homework and join their friends in physical, educational, and social activities. FNS acknowledges the dedication and commitment of sponsors and centers to ensuring that the meals claimed for reimbursement meet CACFP requirements, and that meal time is a pleasant, nutritious, and sociable experience for the children in their care.

# Management Accountability and Control

The owner of the at-risk afterschool center or sponsoring organization must accept final administrative and financial responsibility for management of an effective CACFP that is operated with Program integrity. CFNA establishes rules and procedures and makes decisions regarding an institution's ability to operate the Program. CFNA bases these decisions on information from internal controls at the federal and state levels that includes: information obtained during the application process; information from audits and complaints, results of edit checks, reviews and monitoring; and civil and criminal action.

Each new independent institution (of a single facility) or Sponsoring Organization (of two or more facilities) must demonstrate that it is operating in conformance with three **Performance Standards – Viability, Capability and Accountability (VCA)** pursuant to 7 CFR 226.2(b)(1)

1. The organization must be **Financially Viable**. The institution must have a budget and demonstrate it has adequate financial resources to operate the CACFP on a daily basis, has adequate sources of funds to withstand temporary interruptions in CACFP payments and/or fiscal claims against the institution and can document financial viability through audits or financial statements;
2. The organization must be **Administratively Capable**. The institution must have appropriate and effective management practices in effect to provide program benefits to all participants and adequate number and type of qualified staff to operate the CACFP; and
3. The organization must have **Program Accountability** The institution must have internal controls and other management systems in effect to ensure that the CACFP will operate in accordance with requirements:
  - **Board of Directors** – has adequate oversight of the Program by its governing board;
  - **Fiscal Accountability** - with management controls specified in writing;
  - **Recordkeeping** - maintains appropriate records to document compliance with Program requirements including budgets, accounting records, approved budget amendments, and, if a sponsoring organization, management plans and appropriate records on facility operations;
  - **Sponsoring Organization operations** – documentation in the management plan that it will provide adequate training, perform monitoring, and ensure that administrative costs do not exceed the regulatory limit; and
  - **Meal Service and other operational requirements** - follows practices that result in the operation of the Program in accordance with the meal service, recordkeeping and other operational requirements of the Federal Regulations.



These practices must be documented and must demonstrate the independent center or sponsored facilities will:

- provide meals that meet meal pattern requirements;
- comply with licensure or approval requirements;
- have food service that complies with applicable State and local health and sanitation requirements;
- comply with civil rights requirements;
- maintain complete and appropriate records on file; and
- submit claim reimbursement only for eligible meals.

## **Program Integrity**

The executive director, chairman of the Board of Directors or owner, director or person(s) responsible for the CACFP operation (noted on the Center and/or Sponsor Info Sheets on the Application/Claims database) are considered the “responsible principal(s)” or “responsible individual(s)” of the organization. By virtue of your management position as a “responsible” person, you have administrative and financial responsibility for the oversight, management and integrity of the CACFP and compliance with applicable regulations.

Should your institution ever be classified Seriously Deficient (SD) and terminated due to mismanagement of the CACFP, the name(s) of the “responsible principal(s)” and “responsible individual(s)” will be placed on the United States Department of Agriculture’s (USDA’s) National Disqualified List (NDL). Once on the NDL, the “responsible(s)” named would not be able to work in another organization that participates in the CACFP or in any other Child Nutrition Program for up to seven years.

## **Management Tools and Resources**

At-Risk centers enter into a contract with CFNA to participate in the CACFP. The following management tools and resources are available on the Missouri CACFP website at:

<http://health.mo.gov/cacfp>










- Missouri CACFP Policy and Procedure Manual for At Risk After School Centers
- Orientation and Recordkeeping Workbook for At Risk and Outside School Hours Centers
- “And Justice for All” poster
- Vendor Input/ACH-EFT Application (Direct Deposit Form)
- *Creditable Foods Guide*
- *Food Buying Guide for Child Nutrition Programs*



## Discovering Problems

The following chart is a management assessment tool that describes some of the more common indicators of Program mismanagement identified through federal and state level internal controls. For more information, refer to the At Risk After School Centers Policy and Procedure Manual, Chapter 8, The Monitoring Review Visit, Section 8.2 Deficiencies/Disallowances.

|  |
|--|
| <h3>Child and Adult Care Food Program (CACFP)<br/>Institutions Indicators of Potential or Existing Problems<br/>(Red Flags)</h3> |
|--|

| Indicators  | Independent Centers & Sponsoring Organizations  |
|---|---|
| <b>Budget/Claim for Reimbursement</b>   |   |
| Year-to-date claims do not reflect approved budget  |  |
| Questionable or potentially fraudulent meal claiming practice (e.g. meals claimed when facility is closed)  |  |
| <b>Operational Oversight</b>  |   |
| No qualified accountant or an adequate accounting information system  |  |
| Lack of internal controls (e.g., inadequate separation of duties, position held by family member limits internal control)   |  |
| Related party transactions (e.g., when director or family member is the owner of the catering company used for contracted meals or owner of rented property housing the CACFP facility) |  |
| Absentee management   |  |
| <b>Audits</b>   |   |
| Required audits or monitoring reviews are not performed   |  |
| Management/Board of Directors does not follow-up on corrective action taken   |  |
| <b>Other</b>  |   |
| Health and safety concerns reported from any source   |  |

# Eligibility Requirements

## A. Program Eligibility

To be eligible to participate in the at-risk afterschool meals component of CACFP, either independently (one center) or through a sponsoring organization (responsible for two or more centers), an at-risk after school program must:

- Be organized primarily to provide care for children after school and, with CFNA approval, on weekends, holidays, or school vacations during the regular school year;
- Provide organized regularly scheduled activities (i.e., in a structured and supervised environment);
- Include education or enrichment activities; and
- Be located in an eligible area – the attendance area of a public school with at least 50% of its enrolled students eligible for free or reduced-price meals.

**Activities:** Programs must provide educational or enrichment activities in an organized, structured, and supervised environment. Although there are no specific requirements for the types of educational or enrichment activities that a program can offer, examples include, but are not limited to: Arts and crafts homework assistance; life skills; computers; remedial education (tutoring); and organized fitness activities. **NOTE:** There is no requirement that all children receiving meals participate in the offered activities.

Institutions may contract with another organization to provide enrichment or educational activities for the afterschool program. However, the sponsor or independent center must retain administrative and fiscal responsibility for the meal service.

**Athletic Programs:** Organized athletic programs that *only* participate in interscholastic or community level competitive sports (for example, youth sports leagues such as “Babe Ruth” and “Pop Warner” baseball leagues, community soccer and football leagues, area swim teams, etc.) *may not* be approved as sponsors or independent centers in the Program. However, students who are part of school sports teams and clubs can receive after school snacks or meals *as part of a broad, overarching educational or enrichment program*, but the program cannot be limited to a sports team [Fact Sheet: *Athletic Programs and Afterschool Meals*, October 2, 2012].

**Weekends, Holidays and Vacations:** CACFP At-Risk after school meals and snacks may be reimbursed if they are served on weekends or holidays including vacation periods (for example, spring break) *during the regular school year only* and may be served at any time of day when approved by CFNA.

**Summer Food Service Programs:** CACFP institutions currently in good standing are well positioned to offer summer meals. Although CACFP at-risk afterschool meals may not be served during the summer months, these organizations may be eligible to serve meals through the Summer Food Service Program (SFSP). The Food and Nutrition Service (FNS) encourages participation in both programs so as to establish a *year-round* presence in the communities in which they serve.

Both organizations and communities benefit when meals are offered to children in low-income communities year-round by participating in both At-risk Afterschool Meals and SFSP. Organizations

benefit from having the ability to hire year-round staff, a continuous flow of reimbursements providing additional financial stability, and recognition in the community as a stable source of services. Communities benefit by having a partner that provides year-round nutrition services for children and brings increased Federal funds into the local economy.

## **B. Organization Eligibility**

At risk afterschool programs that meet the requirements above must be operated by an eligible organization to receive reimbursement and are those that: meet State and/or local licensing or health and safety standards; and are operated by public agencies, tax-exempt nonprofit organizations, for-profit organizations that meet the requirements described below, or are currently participating in another Federal program requiring nonprofit status [7 CFR §226.17a(a)].

**For-Profit Child Care Centers:** A for-profit child care center may receive reimbursement for at-risk after school meals and/or snacks if it meets the eligibility requirements discussed above, and is eligible to participate in CACFP through its traditional child care center. This means that at least 25% of the children served by the center through its child care center: are eligible for free or reduced price meals based on their family income; or receive benefits under title XX of the Social Security Act and the center receives compensation under title XX.

**Schools:** A school that operates a school day that is *at least one hour longer* than the minimum number of school day hours required for the comparable grade levels by the local educational agency (LEA) may be eligible for at-risk afterschool meal reimbursement [CACFP 01-2011, January 21, 2011].

## **C. Area Eligibility**

As noted above, to be eligible to participate in the at-risk afterschool meals component of CACFP, a program must be located in an eligible area. This means that the site is located in the attendance area of a public school (an elementary, middle, or high school) where at least 50 percent of the students are eligible for free or reduced price meals under the NSLP. This is referred to as “area eligibility.” State agencies have current area eligibility data for all public schools to help determine if a site is area eligible [7 CFR §226.17a (i)].

Area eligibility determinations must be based on the total number of children approved for free and reduced-price school meals for the preceding October, or another month designated by the National School Lunch Program (NSLP) State agency. CFNA has the discretion to use school data from a more recent month in the school year to establish eligibility for an otherwise ineligible location [CACFP 02-2014, *Use of School and Census Data*, November 12, 2013]. In both cases, the *site’s area eligibility determination made under CACFP is valid for 5 years* [7 CFR §226.17(a)(i)(3)].

If an afterschool program is not area eligible, it may qualify to participate in CACFP as an Outside School Hours Care Center (OSHCC). OSHCCs, like at-risk afterschool care centers, provide organized nonresidential child care services to children during hours outside of school. Refer to the OSHCC and At-risk after school care centers (ASCS) Program comparison chart in the Resources section.

## **D. Participant Eligibility**

At-risk afterschool programs may claim reimbursement only for meals and snacks served to children who participate in an approved afterschool program and who are age 18 or under at the start of the school year. Reimbursement also may be claimed for participants who turn age 19 during the school year. Programs may be *either drop-in or enrolled*.

Federal law has no *minimum* age for at-risk program participants. Meals and snacks served to children who are enrolled in preschool, Even Start, Head start, etc. and who are participating in an eligible afterschool program are eligible for reimbursement. There is no requirement that an at-risk program must serve the full age range of eligible children. For example, a program could operate at a high school and only serve high school age students [CACFP 08-2012, February 17, 2012].

## **E. Licensing and Health and Safety Requirements**

**Determining Applicable Standards** - In order to participate in CACFP, at-risk after school care programs (ASCs) and outside school hours care centers (OSHCCs) must meet Missouri or local public health and safety standards when licensing is not required. Health and safety standards differ across the state and depend, in part on the type of facility involved. In addition, required standards for each type of center may differ, depending on the building or location of the site, the structure of the program, and the type of meal services offered. For example, a site that serves both a snack and a supper may be required to meet different health and safety standards than one that serves only a snack. Similarly, a self-preparation site may be subjected to more stringent health and safety standards than a site that serves vended meals.

**School Participation in CACFP** - Schools that participate in the National School Lunch Program (NSLP) or School Breakfast Program (SBP) are required to obtain a minimum of two food safety inspections per the NSLP and SBP regulations. Therefore, schools that participate in NSLP or SBP and as ASCs or OSHCCs in CACFP do not have to meet any additional health and safety standards.

**Summer Food Service Program (SFSP) Health and Safety Inspections** – Where the State or local health and safety inspection standards for ASCs/OSHCC and SFSP sites are the same, CACFP may accept documentation of a current inspection obtained by a SFSP sponsor pursuant to SFSP regulations as long as the current SFSP inspection has not expired or been revoked [SFSP 06-2014, CACFP 03-2014, *Available Flexibilities for CACFP At-risk sponsors and Centers Transitioning to Summer Food Service Program (SFSP)*, November 12, 2013].

**Public Programs** – Are at-risk after school programs are those owned or operated by city, county, or state governmental entities. Public programs may be licensed or license-exempt and must meet health and safety standards.

**Absence of Health and Safety Standards** – At-risk after school care centers are not eligible to participate in CACFP in areas where State or local health and safety standards do not exist. In such cases, CFNA must work with those authorities to remedy any barriers to participation that existing standards or lack of standards may create.

# Attendance Records

**Documentation of Daily Attendance is a CACFP requirement** – Original documentation of daily attendance records must be maintained for each at-risk participant. Accurate attendance records are very important for the submission of the monthly claim for reimbursement.

The attendance records **cannot** be used as a basis for completing the meal count records; however, the attendance records must support the meal count records. For example, the October 17 meal count cannot exceed the total number of participants documented in attendance on October 17. For CACFP compliance, centers *may* choose **Daily Attendance Record (CACFP-213)** for documentation of attendance:

## **Documentation of Daily Attendance Guidelines:**

1. The center may use daily rosters, sign in/out sheets, classroom roll books (if applicable) or other methods **which results in accurate recording of daily attendance**.
2. Optional - Type or print names alphabetically, last name first – *information must be legible*.
3. Require participants to sign-in as they arrive. Or, if staff takes attendance, do so the same time each day so it becomes routine. **NOTE:** *If attendance is only based on participant provided attendance documentation (full name), the name must be legible.*
4. Count the number of children each day. Keep a running total of the number of participants in attendance for the monthly claim (line 6 of the online claim for meal reimbursement).
5. File completed Attendance Records (originals) in the monthly folder with other CACFP documents for the claim month.

## **Instructions for Completing “Daily Attendance Record” (CACFP-213)**

This form uses *one page for each month*.

1. Enter the month and year on the heading.
2. Either have the staff list the “participant’s name” (in alphabetical order with last name first) OR have the participant legibly enter their complete name.
3. The center may use its own method to record attendance, but some common notations include: X = in attendance; A = absent, etc.
4. Total the number of children in daily attendance on the bottom of each form.
5. On the last work day of each month: add the total daily attendance to arrive at the monthly grand total. Add all ‘grand total’ amounts from each attendance record to get the center total attendance. This number is entered on line 6 when the monthly claim is submitted.

**Enrollment Records** – are **not required** for at-risk programs. Participation in an at-risk after school program is permitted on either a drop-in or enrolled (tutoring, for example) basis.



# Meal Count Record

**Completion of a daily Meal Count (tally) Record is a required Program record.** Each monthly claim for reimbursement must be supported by daily dated meal count records for each meal (snack and/or supper) served during the month. The meal must be recorded at the time the meal is served to each participant. **NOTE:** The meal count form for the Summer Food Service Program (SFSP) cannot be used to document meal counts for the At-Risk program.

Instructions for completing the daily **Meal Count Record:**

1. **Name of Program** - Enter the at-risk name.
2. **Date** – Enter the complete date (mm/dd/yy) for which the meal count is being completed.
3. **Meal Served** – Circle the meal for which the count is being completed.
4. **Meal Service time** – enter the time the meal service starts and ends as approved on the Center Info Sheet in the CNP database.
5. **Meals Prepared/Delivered** – count and record the total meals available to serve; circle if meals are “prepared” on site or “delivered”
6. **Total Meals Available** – enter the total meals available. If this number is different than the meals documented as prepared/delivered, note the discrepancy. For example: damaged meal or leaky milk.
7. **Meal Tally** – As meals are served to children (i.e. at the point of service), put a slash mark through each consecutive number. Only count *complete* meals (containing all required components) served to children.
8. **Adult Meal Tally** – After all children have been served (and only with prior approval), put a slash mark through the number of adult meals served. **Adults are individuals 19 years\* and older and may *not* be claimed for meal reimbursement.**
9. **Total Meals Served to Eligible Participants** – Enter the total number of meals from the “Meal Tally”, individuals through age 18. \*NOTE: Reimbursement may also be claimed for participants who turn 19 during the school year.
10. **Total Meals Served to Adults** – Enter the total number of meals from the “Adult Meal Tally”. **Adult meals are not reimbursable.**
11. **Total Meals Left Over** – Enter the number of meals leftover after the meal service. Meals leftover is figured by taking the Total Meals Available minus the number of meals served to eligible participants and meals served to adults (if applicable).
12. **Signature of After-School Program Representative** – Enter signature and date of signature by Program representative.



# CACFP At Risk Meal Count Record

|  |    |    |    |    |                          |    |    |    |     |                       |     |     |  |     |
|--|----|----|----|----|--------------------------|----|----|----|-----|-----------------------|-----|-----|--|-----|
| Name of Program  |    |    |    |    |                          |    |    |    |     | Date                  |     |     | Meal Served*<br>Circle type of meal<br><br>SNACK    SUPPER |     |
| Meal Service time  |    |    |    |    | Meals Prepared/Delivered |    |    |    |     | Total Meals Available |     |     |  |     |
| Meal Tally (make a slash mark through the numbers for each meal/snack served.) |    |    |    |    |                          |    |    |    |     |                       |     |     |  |     |
| 1  | 11 | 21 | 31 | 41 | 51                       | 61 | 71 | 81 | 91  | 101                   | 111 | 121 | 131  | 141 |
| 2  | 12 | 22 | 32 | 42 | 52                       | 62 | 72 | 82 | 92  | 102                   | 112 | 122 | 132  | 142 |
| 3  | 13 | 23 | 33 | 43 | 53                       | 63 | 73 | 83 | 93  | 103                   | 113 | 123 | 133  | 143 |
| 4  | 14 | 24 | 34 | 44 | 54                       | 64 | 74 | 84 | 94  | 104                   | 114 | 124 | 134  | 144 |
| 5  | 15 | 25 | 35 | 45 | 55                       | 65 | 75 | 85 | 95  | 105                   | 115 | 125 | 135  | 145 |
| 6  | 16 | 26 | 36 | 46 | 56                       | 66 | 76 | 86 | 96  | 106                   | 116 | 126 | 136  | 146 |
| 7  | 17 | 27 | 37 | 47 | 57                       | 67 | 77 | 87 | 97  | 107                   | 117 | 127 | 137  | 147 |
| 8  | 18 | 28 | 38 | 48 | 58                       | 68 | 78 | 88 | 98  | 108                   | 118 | 128 | 138  | 148 |
| 9  | 19 | 29 | 39 | 49 | 59                       | 69 | 79 | 89 | 99  | 109                   | 119 | 129 | 139  | 149 |
| 10   | 20 | 39 | 40 | 50 | 60                       | 70 | 80 | 90 | 100 | 110                   | 120 | 130 | 140  | 150 |
| Adult Meal Tally   |    |    |    |    |                          |    |    |    |     |                       |     |     |  |     |
| 1  | 2  | 3  | 4  | 5  | 6                        | 7  | 8  | 9  | 10  | 11                    | 12  | 13  | 14   | 15  |
| Total Meals Served to Eligible Participants                                    |    |    |    |    |                          |    |    |    |     | _____                 |     |     |  |     |
| Total Meals Served to Adults   |    |    |    |    |                          |    |    |    |     | _____                 |     |     |  |     |
| Total Meals Left Over  |    |    |    |    |                          |    |    |    |     |                       |     |     |  |     |
| Signature of After-School Program Representative                               |    |    |    |    |                          |    |    |    |     | Date                  |     |     |  |     |

\*Use a separate form for each meal served (snack or supper).



**NOTE:** It is permissible for different clubs and groups that make up the school's after school program to eat in different locations on the school grounds. For example, the band members may eat the meal in the band room with just the band members while the football team eats outside (on school premises).

# Claim for Reimbursement

Claims for meal reimbursement are filed via the Internet at: <https://dhssweb04.dhss.mo.gov/cnp> Each user of the CACFP web-based system must have a personal user ID and password, called User Access. User ID's and passwords may not be shared. It is recommended that two key people from your center have access to submit claims and make systems changes. If you want to add User access or change current access (when User is no longer employed), you must submit a *Network User Access Request* form available under Applications and Forms at: <http://www.health.mo.gov> Scroll down to "CACFP Network User Access Request Form" [MO 580-1854E (2/07) – CACFP].

**NOTE:** – In this web-based system, each independent center is considered a **Sponsor** of one center!



## **Basic Claiming Steps**

Please read all instructions before entering your first claim.

**Make sure you follow all steps of the instructions. You must complete 2 separate online forms each month. If the sponsor claim is not in "pending approval" status, you have not submitted your claim!**

1. Enter the web address: <https://dhssweb04.dhss.mo.gov/cnp>
2. Enter your personal user ID and password, and click Login.
3. Click on the orange puzzle piece that says "Child and Adult Care Food Program".
4. Read the Notice page (for announcements and program information); scroll down and click "Continue".
5. Choose the correct program year. **Note:** *The Program (fiscal) Year begins October 1.*
6. Click on the Claims tab.
7. Click the word Add to the right of the appropriate month.
8. This is your Sponsor level claim. To Activate the claim, scroll down to the bottom and click Save. **Do NOT checkmark the certification statement at this time.**
9. You now see the Sponsor Claim Summary with zeros.
10. Scroll down to the bottom of the page and click the word here in the lower left corner to return to the Sponsor Summary Sheet.
11. Click the yellow folder with a plus sign (to the left of the month you are claiming). The folder opens and the name of your center appears below the words Sponsor Claim.
12. Click Add by the name of the center.
13. Enter the claim information, and click Save. **(See instructions for center claim at the end of this section).**
14. Click here in lower left corner of the Post Confirmation Sheet.
15. **If** there were errors detected, click Edit by the center's name to make corrections.
  - On the claim, the errors will be highlighted in red.
  - Correct all errors.
  - Save the claim again. (Repeat if needed, until the Post Confirmation shows the center's claim as *Complete*.) **Even though the page says the center claim is complete, you are not finished yet!**
  - **If you get the following error message, this means your license info needs to be updated under the application tab, center info sheet in fields (38) & (39). After you update those**

**fields, make sure to put it in “pending approval” status. You will not be able to finish submitting your claim until the update gets approved by someone in our office. This could take up to one business day.**

| Section 1 - Validation Errors |          |  |
|-------------------------------|----------|--|
| Field No.                     | Severity | Description  |
| 7                             | 1        | The center's online application must be updated. The claim date must fall between the center application's License Effective date and License Expiration date. |

16. When you are finished entering the center claim and it is in *Complete* status, click [here](#) to return to the Sponsor Summary page. (*Remember, even though the page says the center claim is complete, you are not finished yet!*)
17. This page will show the center claim is *Complete*, but the sponsor claim is Pending Submission. Click [Edit](#) by the Sponsor Claim for that month.
18. Scroll down to field (34). Read and checkmark the certification statement at the bottom of the sponsor-level claim, and submit the sponsor claim by clicking Save. (NOTE: Do not enter a dollar figure into the FDCH Administration Costs field.)
19. Make sure the sponsor-level claim is in *Pending Approval* status.
20. Return often to the Sponsor Summary-Claims page to see when the claim has been *Approved* and *Paid*. **NOTE:** *Claims may be returned to the Sponsor for Corrections.*

### **Instructions for Center Claim**

Fields (1-3) Enter the number of participants enrolled in the center during this claim period by income group (Free, Reduced, Paid).

Field (4) Add Free, Reduced and Paid enrollment numbers and enter total enrollment.

Field (5) Enter the number of days you served meals to participants this month. Do NOT include holidays or other days center was closed.

Field (6) Figure total attendance by adding the daily center attendance for all operating days.

Field (7) This information fills in automatically from the application.

Fields (8-10) Enter the total number of meals by income category (free, reduced, paid) and meal type actually served to participants in the center.

Field (11) Enter the sum for each meal type claimed.

Field (12) This field will calculate information automatically.

Fields (13 **OR** 14) Complete only if this center is for-profit. Enter the number of eligible Title XX or Title XIX participants **OR** the total number of free and reduced-price eligible participants in this center.

Field (15) For-profit centers check appropriate certification statement. Click Save.

### **Tips for Getting Around the Web-Based System**

1. Do not use the “Back” button. Use the menu (in the orange section) on the top left of the screen, or use the "breadcrumb trail," (under the orange bar) to navigate from screen to screen.
2. Each time you save the claim, no matter if it has errors, it is saved on the server, and will be there if you need to leave or logoff and come back.
3. Use the Tab key to navigate from field to field, or use your cursor to click into the field you want to fill out. Try not to use your Enter key. If you do, the claim will save (in an error status).
4. If you are in View mode, changes won't be saved. If you want to make changes, make sure you are in Edit or Revise mode
5. Claims are saved at the site level or center level before saving a sponsor level or “umbrella” claim.
6. Revisions can only be filed after the original (or previous revision) is in *Paid* status.

### User Notes

1. Click the Users tab to view individuals who have access to submit application and claim information for your organization.
2. User Access (IDs and passwords) are assigned to individuals only, and may not be shared.
3. Inform the state office immediately if an individual with access is leaving your organization so that access may be revoked.
4. Submit a Network User Access Request form to request online access for new employees.

### Payment Notes

1. Click the Payments tab to view upcoming and past payments for CACFP claims.
2. If a claim has been approved, but not yet processed for payment, the payment information will show in the Open Balance Transactions section. All other payments are shown in the next section.
3. Click the + (plus sign) by a batch number to see details for that payment.
4. When checking the payments, the processed date shown is approximately 3-4 business days prior to the actual electronic funds deposit date. (It is the date the batch was processed and information was sent to the State of Missouri payment system.)
5. Deductions—if any—made from claim reimbursements due to downward revisions are reflected in information under the Payments tab only, not in the estimates shown in the Claims tab.

### Filing a Claim for Reimbursement

- ✓ A center has 60 calendar days from the end of a claim month to file a claim for reimbursement. If a claim is filed online more than 60 days past due, the center may not be paid for that month.
- ✓ Submit the completed claim online after you have reviewed your entries and are satisfied that the claim is completed accurately. The system has built in edit checks that should decrease the chance of the claim being submitted with errors.
- ✓ You cannot save a claim before the first day of the next month. (For example, an October claim cannot be saved until November 1.)

MDHSS processes claims on the 10<sup>th</sup> of each month for payment by check or automatic deposit by around the 28<sup>th</sup> of the month. A second processing for claims is done on the 25<sup>th</sup> of the month for claims received the 11<sup>th</sup> through the 25<sup>th</sup>. The second payment is made around the 13<sup>th</sup> of the following month.

**MDHSS Receives Claim by:**

**Projected Payment Date:**

10<sup>th</sup> of the month  
25<sup>th</sup> of the month



28<sup>th</sup> of the month  
13<sup>th</sup> of the next month

CACFP payments are direct deposited. This avoids payment delays and lost checks. If you have not received your payment within 15 days of the projected payment date, please contact MDHSS.



### Additional Meal Claim Information:

- Creditable meals may be claimed for participants through 18 years of age when in attendance each day of operation as follows: one meal and/or one snack per participant per day.
- **Adults may never be claimed for CACFP meal reimbursement in at-risk centers.**

- There may be a fee for the care provided or a “tuition” charge, **but there can be no separate charge for the food service.**
- Federal law has no minimum age for at-risk program participants\*. Meals and snacks served to children enrolled in preschool, Head Start, Even Start, etc. are who are participating in an eligible after school program *are eligible* for reimbursement.
- Meals or meal components purchased at a fast food establishment or any restaurant may not be claimed for reimbursement when served to children. Even with documentation, meals or individual food items, such as pizza, purchased at restaurants and fast food establishments may not be claimed for reimbursement.
- Meals prepared/packed at the center and served off the center grounds (a picnic, for instance) **and supervised by center personnel** may be claimed; however
- Meals prepared/packed at the center and sent with a participant to eat at another location, *without the supervision of center personnel*, are not eligible to be claimed for CACFP reimbursement.
- Food items provided by parents or other unapproved food sources cannot be counted as fulfilling any of the CACFP required meal or snack components.



### **Meal Service Times and Duration\*:**

There are no Federal requirements regarding the timing of meal service and no specific amount of time has to pass between meal services. In addition, there is no federally mandated time limit between the end of school and the service of a meal or snack. Also, there are no requirements for the order of the meal and snack service, but the service of a meal or snack must occur during the operation of the school’s afterschool care program. *On school days, after school snack and/or supper meals may be served at any time after the children’s school day has officially ended* and the snack or the supper can be served in any order. Refer to Section 7.8 of the Policy Manual for At-Risk After School Programs for additional information and 2014 policy updates.



### **Type of Meals Eligible for Reimbursement**

- ✓ At-risk sites may serve up to one snack and one meal per child per day times the free rates for meals and snacks respectively. This could be any meal and you may serve a different meal to different groups of children. For example, a site could serve lunch and a snack to children who attend half-day kindergarten and then serve a snack and supper to older children who attend a full day of school.

#### **Snack**

- ✓ May be approved for after school or after early supper service.

#### **Supper**

- ✓ Supper may be approved for after school or after early snack service;

### **Weekends, Holidays and Vacations**

- ✓ With CFNA approval, meals (breakfast or lunch) and snacks may be served in lieu of supper on weekends, holidays or during school vacation periods (e.g., spring break) during the regular school year only. [7 CFR 226.179(b)]. The institution may vary which meal and/or snack will be served; however, may claim a maximum of one snack and one meal per child per day.

\*Outside School Hours Care Center (OSHCC) requirements are different; refer to the OSHCC and At-Risk comparison chart in the Appendix.

**Example – ASCS Claim**

April 2014

Pending Submission

Original Claim

↓ Bottom of Form

**Center Operating and Enrollment Data (Must reflect the claiming period)**

|                        |                      |   |                      |
|------------------------|----------------------|---|----------------------|
| (1) Free Enrollment    | <input type="text"/> | (5) Number of Operating Days            | <input type="text"/> |
| (2) Reduced Enrollment | <input type="text"/> | (6) Total Attendance for Month          | <input type="text"/> |
| (3) Paid Enrollment    | <input type="text"/> | (7) License Capacity (from Application) | 120                  |
| (4) Total Enrollment   | <input type="text"/> |   |                      |

**Meal Count Data**

|                          | (A)                  | (B)                  | (C)                  | (D)                  | (E)                  | (F)                  |
|--------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Meal Type                | Breakfast            | AM Snack             | Lunch                | PM Snack             | Supper               | Night Snack          |
| (8) Free                 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (9) Reduced              | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (10) Paid                | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (11) Total Meals         | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Average                  |                      |                      |                      |                      |                      |                      |
| (12) Daily Participation | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    |

**For-Profit Centers Only**

| Total TitleXX / XIX Beneficiaries | Free/Reduced-Price Eligible Children | Eligibility % |
|-----------------------------------|--------------------------------------|---------------|
| (13) <input type="text"/>         | (14) <input type="text"/>            | 0.0           |

- (15)  This organization certifies that 25% of the enrollment or licensed capacity (whichever is less) are Title XX Beneficiaries or Free/Reduced Priced Eligible Children for sites being claimed.
- This organization realizes that the Center does not meet the 25% Eligibility for For-Profit Centers, and that this claim will not be reimbursed and no meals will be reported. **Note: Once this button is checked and the claim has been submitted, the claim can only be modified by a state agency representative.**

Created By: \_\_\_\_\_ Date Created: \_\_\_\_\_ Modified By: \_\_\_\_\_ Date Modified: \_\_\_\_\_

Top of Form

# Fiscal Management and Non-Profit Documentation

**Meal Reimbursement Information:** At-risk after school programs are reimbursed at the Free meal rate. The reimbursement rates are effective from July 1 through June 30. The reimbursement rate for the supper meal (or lunch, if approved to serve on weekends, holidays and school breaks during the school year) includes the USDA established cash-in-lieu of commodity rate. The current meal reimbursement rates are located on the CACFP website under After School Programs located at: <http://health.mo.gov/cacfp>

**Fiscal Management:** The purpose of the financial management review is to verify all financial information related to the non-profit meal service. Whether an independent center or a sponsoring organization of multiple facilities is reviewed, the purpose is the same: assure costs charged to the non-profit food service are used to meet CACFP meal requirements and that costs claimed for reimbursement under CACFP are allowable, meaning they are necessary and reasonable for the effective and efficient operation of the food service.

**Non-profit food service** operations must account for all income attributable to the food service including CACFP reimbursement. “Non-profit food service is *defined* as food service operations conducted by the institution principally for the benefit of enrolled participants, from which all of the Program reimbursement funds are used solely for the operations of improvement of such food service.” **Reference:** December 2013 USDA-FNS *Monitoring Handbook for State Agencies*

**OPERATING COSTS** represent *allowable expenses* incurred by the institution for the preparation and service of meals under CACFP. Allowable operating costs include, but are not limited to: *food costs; food service labor costs; costs for certain non-food supplies; and costs for purchases services.*

**Food Costs:** are expenditures for the food used in all meals under CACFP. **Original itemized food and milk records/receipts** must be maintained to support monthly claims for reimbursement and to document non-profit food service operations. Receipts must be machine generated, dated, itemized, and legible\*. If meals are provided by a caterer or food service management company, the center must maintain original expense documentation of catered meals as well as any incidental food and non-food purchases.

CFNA reviewer(s) will examine original food and milk receipts and invoices to determine whether or not the center has purchased adequate amounts of food and milk to meet the minimum meal pattern requirements and that the receipts support the menu for the review month. Key food items of interest that are easily tracked through the monitoring review process are perishable foods such as bread, milk and the purchase of fresh produce. These items must be purchased or delivered on a regular basis due to their limited shelf life. Receipts should verify purchase of menu items prior to the date the menu items are on the daily, dated menu.

Fluid milk is a required meal component at the supper meal (and breakfast or lunch if approved for weekend, holiday or school vacation service). Program regulations require that at least the minimum amount of all components be served to allow the meals to be claimed for reimbursement. ***Children two years of age and older must be served low-fat (1%) or fat-free***



*(skim) milk.* Per Sections 7.1 and 7.2 of the *At-Risk Centers Policy & Procedure Manual*, inadequate milk purchase amounts and non-compliant milk purchase types (2% or whole milk for children two and older) will result in meal disallowances at CACFP monitoring reviews. Minimum milk purchase requirements for supper (and breakfast or lunch, if applicable) are:

| Amount         | Servings per Gallon | Age of Participants |
|----------------|---------------------|---------------------|
| 8 oz. or 1 cup | 16 servings         | 6 through 18        |
| 6 oz. or ¾ cup | 21 servings         | 5 and younger       |

**Food Service Labor Costs** – Independent centers must document the cost of food service labor needed for the operation of the CACFP. This may include wages, salaries, employee benefits and the share of taxes paid by the independent center necessary to perform the following tasks:

- ✓ Menu planning and purchasing;
- ✓ Meal preparation, serving, and clean-up of Program meals;
- ✓ Supervision of day-to-day food service operations, including supervision of children during the meal service; and
- ✓ On-site preparation of daily Program meal service records.

**Costs of Non-Food Supplies** include small kitchen equipment, paper goods such as napkins and straws and cleaning supplies used directly for the food service operation. Itemized receipts must be kept on file as documentation.

**Cost of Purchased Services (indirect costs)** are items such as prorated utilities (shared services), equipment rental, rental of facilities, and minor repairs. Refer to the Sponsor’s Budget tab on the Application/Claims database for indirect expenses approved for your center. Independent centers are required to update the budget every three fiscal years during the CACFP renewal process. Sponsoring Organizations must submit updated budgets annually. CFNA will provide assistance on what records are needed to support these costs.

**ADMINISTRATIVE COSTS** are expenses (*allowable costs*) incurred by an institution in planning, organizing, and managing the foodservice operation under CACFP. These costs may include labor for management, fringe benefits, traveling, and other costs necessary to manage and implement the Program [FNS Instruction 796-2, Rev. 4 (VII D 2)].



**CACFP-214**, *Documentation of Non-Profit Food Service* form documents monthly food service costs, the amount of labor and indirect costs (if needed) attributable to the food service refer to page 49 for a “correct example.

Compare the total amount of food cost expenditures to the CACFP monthly reimbursement. If the food cost expenditures for the month **are greater than** the monthly CACFP reimbursement, **the center does not need to document other operating costs.** If the food costs for the month are less than the monthly CACFP reimbursement, the center must document food service labor costs (+ non-food supplies, if needed) on form CACFP-214.

***NOTE: The total food, non-food and labor cost total typically exceeds the reimbursement and no further action needs to be taken; however, if the food costs + labor costs + non-food costs***



are less than the monthly CACFP reimbursement, then expendable and non expendable must be calculated. **Expendable food service equipment** has a durability of less than two years with a cost of \$500 or less. **Non-expendable food service equipment** has a durability of two years or more with a cost exceeding \$500. Add total labor cost, total food costs, non-food costs and total indirect costs (if applicable) on CACFP-214 to get the “Grand Total” sum. Compare this amount to the monthly CACFP reimbursement plus income to the program (if applicable).

**Income/Funds:** Sources of funding can vary by organization type, size, and structure. In addition to the reimbursement from CACFP, some institutions fund their operation from tuition fees and fund raising activities while others may have other funding streams generated by activities outside of the CACFP. *Program income* is the gross income generated from activities supported by the CACFP. Income sources includes all monies received from State, Federal, or local government sources, any center funds used to subsidize the food service program, any payments for adult meals, and any other income including loans and donations to the food program. Regardless of the source, all of these types of income must be maintained in the non-profit food service account and be used for only approved costs. Refer to your center’s budget on the Application/Claims database for “other income” sources or contact CFNA for guidance.



#### **MISCELLANEOUS FOOD PURCHASING INFORMATION:**

\***CACFP food purchased with a Supplemental Nutrition Assistance Program (SNAP,** formerly called Food Stamps) electronic benefit transfer (EBT) card is not allowed and demonstrates a lack of business integrity. SNAP Regulation program violations consist of having intentionally used, presented, transferred, acquired, received, possessed or trafficked authorization cards. The Family Support Division (Social Services) will be notified when CACFP purchases are made using an EBT card.

**Food Sources** - To claim reimbursement for meals or snacks, centers must supply all of the CACFP meal components and the food must originate from a source in compliance with Missouri Food Code laws. These **Traditional** (approved) food sources include food purchased from food service distributors, supermarket chains, convenience stores, local grocers and other retail stores selling food and non-food items in compliance with Missouri Food Code laws. Some examples of **Non-traditional** (approved) food sources that may be used as part of a reimbursable meal include but are not limited to:

**Center Gardens** – food that is grown from seed or plant can be harvested and used for meals claimed in the CACFP. The center must maintain documentation of the cost (itemized receipt) of the seeds and/or plants.

**Farmers Market or Roadside Produce Stands** – is limited to purchase of fresh and not packaged unprepared (whole, uncut) locally grown fruits, vegetables, in-shell nuts and fresh herb sprigs. **Garden donations** of fresh produce grown in gardens other than the center garden may be used as part of a reimbursable meal and include these same items.

**Unapproved food sources**, such as home canned/packaged/butchered foods cannot be used in the CACFP. Refer to Appendix B in the *Creditable Foods Guide* for additional information prior to purchasing items from non-traditional sources at: [www.health.mo.gov/cacfp](http://www.health.mo.gov/cacfp)



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 COMMUNITY FOOD AND NUTRITION ASSISTANCE  
 CHILD AND ADULT CARE FOOD PROGRAM

**DOCUMENTATION OF NON-PROFIT FOODSERVICE**

# Correct Example

| FACILITY NAME<br>ANN'S ANGELS DAY CARE CENTER |                 |   |                                      |   |                       | CLAIM MONTH<br><b>MARCH CLAIM - \$2,450.10</b> |                   |
|---|-----------------|---|--------------------------------------|---|-----------------------|--|-------------------|
| POSITION TITLE/EMPLOYEE                       | SALARY PER HOUR | X | HOURS WORKED PER DAY ON FOOD SERVICE | X | DAYS WORKED PER MONTH | =  | SUB TOTALS        |
| <i>Program director</i>                       | 10.00/hour      | X | 1 hour/day = 10.00                   | X | 20 days/month         | =  | \$200.00          |
| <i>Staff assistant</i>                        | 8.50/hour       | X | 2.5 hours/day = 21.25                | X | 20 days/month         | =  | 425.00            |
| <i>Cook</i>                                   | 7.50/hour       | X | 6 hours/day = 45.00                  | X | 20 days/month         | =  | 900.00            |
|   |                 | X |                                      | X |                       | =  |                   |
|   |                 | X |                                      | X |                       | =  |                   |
|   |                 | X |                                      | X |                       | =  |                   |
|   |                 | X |                                      | X |                       | =  |                   |
|   |                 | X |                                      | X |                       | =  |                   |
| <b>TOTAL LABOR COST</b>                       |                 |   |                                      |   |                       | =  | <b>\$1,525.00</b> |

| INDIRECT COSTS              | AMOUNT   | X | PERCENT OF FOODSERVICE USEAGE OR PERCENT OF FOODSERVICE SQUARE FOOTAGE | = | SUB TOTALS |  | GRAND TOTAL SPENT ON CACFP      |
|-----------------------------|----------|---|--|---|------------|--|---------------------------------|
| <i>Waste disposal</i>       | \$48.00  | X | _____  | = | \$48.00    | TOTAL FOOD COSTS (MAINTAIN RECEIPTS)     | \$1,225.00                      |
| <i>Utilities</i>            | \$240.00 | X | 15%  | = | 36.00      | TOTAL NON-FOOD COSTS (MAINTAIN RECEIPTS) |                                 |
|                             |          | X |  | = |            | TOTAL LABOR COSTS                        | \$1,525.00                      |
|                             |          | X |  | = |            | TOTAL INDIRECT COSTS (IF APPLICABLE)     | 84.00                           |
| <b>TOTAL INDIRECT COSTS</b> |          |   |  |   | =          |  | <b>GRAND TOTAL = \$2,834.00</b> |



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 COMMUNITY FOOD AND NUTRITION ASSISTANCE  
 CHILD AND ADULT CARE FOOD PROGRAM

**DOCUMENTATION OF NON-PROFIT FOODSERVICE**

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| FACILITY NAME           |                 |   |                                      |   |                       | CLAIM MONTH |            |
|-------------------------|-----------------|---|--------------------------------------|---|-----------------------|-------------|------------|
| POSITION TITLE/EMPLOYEE | SALARY PER HOUR | X | HOURS WORKED PER DAY ON FOOD SERVICE | X | DAYS WORKED PER MONTH | =           | SUB TOTALS |
|                         |                 | X |                                      | X |                       | =           |            |
|                         |                 | X |                                      | X |                       | =           |            |
|                         |                 | X |                                      | X |                       | =           |            |
|                         |                 | X |                                      | X |                       | =           |            |
|                         |                 | X |                                      | X |                       | =           |            |
|                         |                 | X |                                      | X |                       | =           |            |
|                         |                 | X |                                      | X |                       | =           |            |
|                         |                 | X |                                      | X |                       | =           |            |
| <b>TOTAL LABOR COST</b> |                 |   |                                      |   |                       | =           |            |

| INDIRECT COSTS              | AMOUNT | X | PERCENT OF FOODSERVICE USEAGE OR PERCENT OF FOODSERVICE SQUARE FOOTAGE | = | SUB TOTALS |  | GRAND TOTAL SPENT ON CACFP |
|-----------------------------|--------|---|--|---|------------|--|----------------------------|
|                             |        | X |  | = |            | TOTAL FOOD COSTS (MAINTAIN RECEIPTS)     |                            |
|                             |        | X |  | = |            | TOTAL NON-FOOD COSTS (MAINTAIN RECEIPTS) |                            |
|                             |        | X |  | = |            | TOTAL LABOR COSTS                        |                            |
|                             |        | X |  | = |            | TOTAL INDIRECT COSTS (IF APPLICABLE)     |                            |
| <b>TOTAL INDIRECT COSTS</b> |        |   |  | = |            | <b>GRAND TOTAL</b>                       | =                          |

# CACFP Annual Training

**Documentation of annual CACFP Training is required.** Independent center and sponsor organization (of multi facility) management is responsible for **annual Program training and must include instruction, appropriate to the level of staff experience and duties, on the following CACFP required topics:**

CACFP meal pattern requirements;  
Meal count procedures;  
Recordkeeping requirements;  
Reimbursement system  
Claim submission and review procedures; and  
Civil Rights

This training is in addition to the orientation training provided by CFNA. Your training can be formal or informal; however, it must be documented with the following information:

- a. Training date and length (minutes or hours);
- b. Training topic(s) covered;
- c. Trainer name and position/title
- d. Training location
- e. Attendees must provide their signature, a legible printed name and position title

The CACFP Training Documentation form (CACFP-222) may be used to document your CACFP training or you may develop a form to include the training requirements. CACFP-222 form is located on page 25 and can be downloaded under Applications & Forms at: <http://health.mo.gov/cacfp>



**Self-Directed On-Line Training Modules:** [www.mocacfp.com](http://www.mocacfp.com)

This website is an on-line education portal for child and adult care providers who take part in the Missouri CACFP. The free, self-directed lessons focus on key topics you need to know in order to submit valid claims for reimbursement and to enhance your knowledge of nutrition and menu planning. All registered users will have access to the full catalog of available lessons which currently includes these training modules:

## **CACFP Orientation Series**

Program Integrity and the Serious Deficiency Process  
Meal Patterns  
Recordkeeping  
Claims for Reimbursement  
Civil Rights  
Serving Creditable Foods in the CACFP  
Infant Feeding (not applicable for At-Risk)  
Income Eligibility Forms (not applicable for At-Risk)

## **Nutrition Series**

Nutrition 101  
Menu Planning  
Food Purchasing – Part I  
Food Purchasing – Part II  
Food Purchasing – Part III



# Civil Rights Compliance

At-risk centers participating in the CACFP are required to comply with the following civil rights obligations:

REQUIRED – Annual Beneficiary Data Report form CACFP-226. Complete the racial/ethnic category of enrolled participants in attendance at each site and *determine the child's racial/ethnic category visually using your best judgment.* This form is found in this workbook and is available under Applications & Forms at: <http://health.mo.gov/cacfp>

REQUIRED - Display the “And Justice for All” poster in a prominent location visible to the public. This poster is available under Publications at: <http://health.mo.gov/cacfp>



REQUIRED – Federal Relay phone information. The 2011 “And Justice For All” poster shown above includes the Federal Relay numbers and replaces the need for the Federal Relay Poster. A flyer listing the six (6) Federal Relay services is available at:

<http://www.federalrelay.us/sites/default/files/PDF/Federal+Relay+flyer.pdf>

REQUIRED – Annual Civil Rights training for CACFP sponsors and staff. This on-line, self-directed training module is located at: [www.mocacfp.com](http://www.mocacfp.com)

REQUIRED – the USDA nondiscrimination statement and civil rights complaint information required on Program material directed to the parents/guardians. If the center has a parent handbook or a policy booklet which indicates that the center is participating in the CACFP, the nondiscrimination statement and procedure for filing a complaint (**updated May 24, 2013**) must be included and is available at: <http://health.mo.gov/living/wellness/nutrition/foodprograms/cacfp/usdastatement.php>

Forward complaints of alleged discrimination to CFNA. All complaints of discrimination, written or verbal, including anonymous complaints, must be forwarded to MDHSS-BCFNA within four days of receipt. Provide all available information and details.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF COMMUNITY FOOD AND NUTRITION ASSISTANCE  
 CHILD AND ADULT CARE FOOD PROGRAM  
**BENEFICIARY DATA REPORT**

A Beneficiary Data Report must be completed once a year to report the racial/ethnic category of participants enrolled in your center. Determine the participant's racial/ethnic category visually using your best judgement. A participant may be included in the category to which he or she appears to belong, identifies with, or is regarded as a member of by the community.

NAME OF CENTER/FACILITY:

ADDRESS:

| <b>Ethnic Category</b><br>(Evaluate all participants for ethnicity first)   | <b>Number of Participants</b> |
|---|-------------------------------|
| <b>Hispanic, Latino or Spanish origin</b> – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.  |                               |
| <b>Racial Category</b><br>(Evaluate all participants for race. Individuals may be counted in one or more categories)  | <b>Number of Participants</b> |
| <b>American Indian or Alaskan Native</b> – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.   |                               |
| <b>Asian</b> – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. |                               |
| <b>Black, African American or Haitian</b> – A person having origins in any of the black racial groups of Africa.  |                               |
| <b>Native Hawaiian or Other Pacific Islander</b> – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.   |                               |
| <b>White</b> – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.  |                               |
| <b>Total number of participants evaluated.</b>  |                               |
| SIGNATURE OF DIRECTOR<br><br>▶  | DATE                          |

# CACFP Monitoring Reviews

Federal and state regulations require at-risk after school programs to maintain complete and accurate original CACFP records. The USDA requires program participants to account for each dollar they receive in meal reimbursement. MDHSS is required to ensure that centers are accountable for all money they receive and are in compliance with Program regulations. A CFNA representative will review each at-risk after school program every three years or more frequently to conduct fiscal and meal service monitoring.

Program monitoring reviews may or may not be announced in advance. If announced in advance, the sponsor will receive a letter and the review should be conducted within 45 days from the date of the letter. For unannounced visits, no advance notification will be given. The center may contact our office if there are days that they know they will not be available; however, another responsible individual should be designated to be in charge of the facility in the absence of the site director.

For all monitoring visits/reviews, all Program records must be made available to the Nutritionist within one hour of Program reviewer's arrival. Failure to make any and/or all records available within the required time may result in findings and corrective action and CFNA has the authority to request (and disallow) up to 12 months of claims for reimbursement. At-risk programs must maintain all required original records (not copies) on file for a period of **three full fiscal years** after the final claim for reimbursement for the fiscal year was submitted or longer if audit findings have not been resolved. The federal fiscal year begins October 1 and ends September 30. The Monitoring Review Checklist on the next page is provided to help prepare for the review. For specific Program requirements, refer to Chapter 8 "The Monitoring Visit", in the At-Risk After School Programs Policy and Procedure Manual under Laws, Regulations & Manuals at: <http://health.mo.gov/cacfp>

**Sponsoring Organization Additional Review Requirement** - A sponsoring organization (SO) is a CACFP contractor responsible for two or more sites (facilities). **SOs must conduct three monitoring reviews\*\* for each facility every year:**

- At least one of the three reviews must be unannounced; however, it is recommended that all monitoring visits be unannounced.
- At least two of the three monitoring visits must be conducted during a meal service.
- When a site operates in the evening and/or on weekends or holidays, one review must be conducted each year on weekends, holidays or during the supper meal when claiming meals under these conditions.
- No more than six months may elapse between monitoring visits.
- The SO must review all *new sites* within the first four weeks of Program operation.
- All monitoring visits must be documented on form CACFP-404.
- The sponsor must follow-up when problems are noted during monitoring visits.
- The follow-up visit must be conducted not less than one week after the initial finding and the visit must be documented.

**\*\*Sponsors that operate SFSP and CACFP at-risk meals may follow the CACFP monitoring schedule year round.** If sponsors choose to follow the CACFP monitoring schedule year round, one of the three annual reviews must occur during the summer, review for SFSP requirements, include the review of a meal service, and be unannounced; and two reviews must occur during the school year, review for CACFP requirements, at least one must include the review of a meal service, and at least one must be unannounced. [CACFP 12-2013, SFSP 14-2013, *Transitioning from the SFSP to CACFP At- Risk Afterschool Meals*], May 31, 2013.



**CACFP Monitoring Review Checklist for At-Risk After School Care Centers. Original records are required within one hour of reviewer's arrival.** Failure to make any/all records within the required time will result in findings and corrective action and CFNA has the authority to request (and disallow) up to 12 months of claims for reimbursement. **Original records must be retained for 3 fiscal years plus the current year in every independent center or in the location noted in the Management Plan for Sponsoring Organizations (2 or more facilities).** CACFP website: [www.health.mo.gov/cacfp](http://www.health.mo.gov/cacfp)

- ☐ **Daily dated attendance records** (CACFP-213)
- ☐ **Daily dated menus** that meet CACFP requirements (CACFP-218, 218A or 218AA)
- ☐ **Daily dated meal count record (tally) for at-risk**
- ☐ **Structured and regularly scheduled education or enrichment activities**
- ☐ **Documentation of Non-Profit Foodservice** includes verification of **income** to your food program and food service **expenditures** including: food and milk purchase receipts, food service labor documentation and indirect costs (CACFP-214)
- ☐ **Annual CACFP training** documentation (CACFP-222) of all required topics conducted by the center management staff, which includes dates, locations, topics, and names of staff participants
- ☐ **Current sanitation inspection report** conducted by the state or local health department and current fire inspection, if applicable
- ☐ **“And Justice for All” poster** placed in a location visible to the public and CACFP information that you provide to parents in a prominent location
- ☐ **Annual Beneficiary Data** report (CACFP-226) completed by visual identification of racial/ethnic category
- ☐ **Commercially processed food documentation:** CN labels, manufacturer’s product analysis or facility documentation
- ☐ **Catered/vended meals - required records:** food service contract, current sanitation inspection, production records, **and** daily dated record of the number of snacks and/or meals prepared or delivered for each meal service.
- ☐ for all catered meals (CACFP-223)
- ☐ **Medical food substitution record** (CACFP-227), if applicable
- ☐ **Current child care License**, issued by Missouri Department of Health & Senior Services, Section for Child Care Regulation (SCCR), if applicable
- ☐ **For-Profit centers** must provide a current contract with Family Support Division (FSD, aka Social Services, State vendor) and billing invoices for participants who are Title XX beneficiaries
- ☐ **Sponsoring Organizations** (two or more facilities), documentation of site **Monitoring** visit reports (CACFP-404)



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 COMMUNITY FOOD AND NUTRITION ASSISTANCE  
 CHILD AND ADULT CARE FOOD PROGRAM  
**SPONSORED CENTERS SITE VISIT REPORT – REVIEW BY SPONSOR**

| SECTION I GENERAL INFORMATION  |  |                         |                 |                           |                                      |                  |   |
|--|--|-------------------------|-----------------|---------------------------|--------------------------------------|------------------|---|
| Name of center   |  |                         | Date            |                           | Announced _____<br>Unannounced _____ |                  |   |
| SO Reviewer  |  |                         | Time of arrival |                           | Time of departure                    |                  |   |
| License number   |  | License expiration date |                 | Center hours of operation |                                      |                  |   |
| SECTION II MEAL OBSERVATION  |  |                         | COMMENTS        |                           |                                      |                  |   |
| Meal Observed  |  |                         |                 |                           |                                      |                  |   |
| Meat/Meat _____ Alt _____  |  |                         |                 |                           |                                      |                  |   |
| Fruit/Vegetable _____  |  |                         |                 |                           |                                      |                  |   |
| Fruit/Vegetable _____  |  |                         |                 |                           |                                      |                  |   |
| Grains/Bread _____   |  |                         |                 |                           |                                      |                  |   |
| Milk (1% or Skim OR Disallowances _____)   |  |                         |                 |                           |                                      |                  |   |
| Other _____  |  |                         |                 |                           |                                      |                  |   |
|  |  |                         | Yes             | No                        | Previous Finding Yes/No              | Corrected Yes/No | COMMENTS  |
| Did meal meet requirements?  |  |                         |                 |                           |                                      |                  |   |
| Did serving sizes appear adequate?   |  |                         |                 |                           |                                      |                  |   |
| Was food served at appropriate temperature? (hot foods 135 degrees+ & cold food at 41 degrees or less) |  |                         |                 |                           |                                      |                  |   |
| Did children wash hands before eating?   |  |                         |                 |                           |                                      |                  |   |
| Was meal served at time stated on application?   |  |                         |                 |                           |                                      |                  |   |
| Was meal count recorded at point of service?   |  |                         |                 |                           |                                      |                  |   |
| Are meal substitutions recorded on menus?  |  |                         |                 |                           |                                      |                  |   |
| Are preserved, processed and higher fat meats limited to one serving/week?                             |  |                         |                 |                           |                                      |                  |   |
| Are sweets limited to no more than two times/week?   |  |                         |                 |                           |                                      |                  |   |
| Do menus offer a variety of colors, flavors, textures, shapes, temperatures, familiar and new foods?   |  |                         |                 |                           |                                      |                  |   |
| SECTION III SANITATION   |  |                         | Yes             | No                        | Previous Finding Yes/No              | Corrected Yes/No | COMMENTS  |
| Is food properly labeled, dated, and covered in refrigeration and dry storage areas?                   |  |                         |                 |                           |                                      |                  | Report any imminent health/safety threats to local sanitarian, Child Care Regulation or CA/N hotline 800-392-3738 |
| Is food stored at least 6" off floor in dry storage area?  |  |                         |                 |                           |                                      |                  |   |
| Are refrigerator & freezer units clean & operating properly?   |  |                         |                 |                           |                                      |                  |   |
| Are dishes and tables properly washed and sanitized?   |  |                         |                 |                           |                                      |                  |   |
| Are cleaning supplies stored away from food and out of the reach of children?                          |  |                         |                 |                           |                                      |                  |   |
| Did food preparer maintain good personal hygiene and wash hands prior to meal preparation and service? |  |                         |                 |                           |                                      |                  |   |
| Did the kitchen and all equipment appear clean?  |  |                         |                 |                           |                                      |                  |   |

| SECTION IV RECORDS  |  |  |  |  | Yes                       | No    | Previous Finding Yes/No          | Corrected Yes/No | COMMENTS                                  |          |
|---|--|--|--|--|---------------------------|-------|----------------------------------|------------------|---|----------|
| Current CACFP enrollment records for all participants   |  |  |  |  |                           |       |                                  |                  |   |          |
| Enrollment records are updated annually   |  |  |  |  |                           |       |                                  |                  |   |          |
| Daily attendance records  |  |  |  |  |                           |       |                                  |                  |   |          |
| Accurate meal count records   |  |  |  |  |                           |       |                                  |                  |   |          |
| Daily dated menus   |  |  |  |  |                           |       |                                  |                  |   |          |
| All food purchase receipts  |  |  |  |  |                           |       |                                  |                  |   |          |
| Verification of 25% Title XX or Free/Reduced (if center is for profit)  |  |  |  |  |                           |       |                                  |                  |   |          |
| SECTION V INFANT MEALS  |  |  |  |  | Yes                       | No    | Previous Finding Yes/No          | Corrected Yes/No | N/A                                       | COMMENTS |
| Is there an Infant Feeding Preference form for each infant (Birth-11 months)?   |  |  |  |  |                           |       |                                  |                  |   |          |
| Is there an accurate Infant Meal Record (menu) for each infant?   |  |  |  |  |                           |       |                                  |                  |   |          |
| Are all required infant meal components offered by the center?  |  |  |  |  |                           |       |                                  |                  |   |          |
| SECTION VI CIVIL RIGHTS   |  |  |  |  |                           |       |                                  |                  |   |          |
| INDICATE THE RACIAL/ETHNIC MAKEUP OF THE CENTER'S ATTENDANCE AT THE TIME OF THIS REVIEW.                              |  |  |  |  | Black or African American | White | American Indian or Alaska Native | Asian            | Native Hawaiian or other Pacific Islander |          |
|   |  |  |  |  |                           |       |                                  |                  |   |          |
| Within the above racial categories, indicate how many are of Hispanic or Latino ethnicity. _____                      |  |  |  |  |                           |       |                                  |                  | Yes                                       | No       |
| Is the poster "And Justice For All" posted in a conspicuous place?  |  |  |  |  |                           |       |                                  |                  |   |          |
| Are all meals served equally to all participants regardless of race, color, sex, age, disability and national origin? |  |  |  |  |                           |       |                                  |                  |   |          |
| SECTION VII FINDINGS  |  |  |  |  |                           |       |                                  |                  |   |          |
| <b>LAST REVIEW:</b> List any required changes from the last review and describe corrective action taken to address:   |  |  |  |  |                           |       |                                  |                  |   |          |
| Have previous Findings been corrected? _____  |  |  |  |  |                           |       |                                  |                  |   |          |
| Date of last review by sponsor _____ Who did review? _____  |  |  |  |  |                           |       |                                  |                  |   |          |
| <b>THIS REVIEW:</b><br>Good management practices observed:  |  |  |  |  |                           |       |                                  |                  |   |          |
| Findings & Recommendations:   |  |  |  |  |                           |       |                                  |                  |   |          |
| Corrective Action Plan required to address changes?   |  |  |  |  |                           |       |                                  |                  |   |          |

|                            |       |      |
|----------------------------|-------|------|
| SPONSOR REVIEWER SIGNATURE | TITLE | DATE |
| CENTER SIGNATURE           | TITLE | DATE |

Name of Center \_\_\_\_\_

| 5 DAY RECONCILIATION OF ATTENDANCE / ENROLLMENT / MEAL COUNT VERIFICATION*              |                       |  |  |   |
|---|-----------------------|--|--|---|
| PARTICIPANT'S NAME<br>(FROM MEAL COUNT)   | ENROLLMENT<br>DATE    | MEALS CLAIMED PER<br>ENROLLMENT RECORD | DAYS IN ATTENDANCE PER<br>ENROLLMENT   | ENROLLED AND IN<br>ATTENDANCE WHEN<br>CLAIMED |
| 1. <b>AT-RISK: THIS SECTION IS<br/>NOT REQUIRED</b>                                     |                       |  |  |   |
| 2.  |                       |  |  |   |
| 3.  |                       |  |  |   |
| 4.  |                       |  |  |   |
| 5.  |                       |  |  |   |
| 6.  |                       |  |  |   |
| 7.  |                       |  |  |   |
| 8.  |                       |  |  |   |
| 9.  |                       |  |  |   |
| 10.   |                       |  |  |   |
| 11.   |                       |  |  |   |
| 12.   |                       |  |  |   |
| 13.   |                       |  |  |   |
| 14.   |                       |  |  |   |
| 15.   |                       |  |  |   |
| DATES REVIEWED  | MEAL TYPE<br>REVIEWED | TOTAL # FROM MEAL COUNT                | Are meal counts on these 5 days consistent with<br>meal count on day of review?<br>YES _____ NO _____<br><br>Are meal counts on these 5 days consistent with<br>claim average?<br>YES _____ NO _____ |   |
| 1. <b>AT-RISK: VERIFY THAT<br/>ATTENDANCE DOES NOT<br/>EXCEED DAILY MEAL<br/>COUNTS</b> |                       |  |  |   |
| 2.  |                       |  |  |   |
| 3.  |                       |  |  |   |
| 4.  |                       |  |  |   |
| 5.  |                       |  |  |   |

\*RANDOM VERIFICATION THAT PARTICIPANTS LISTED WERE ENROLLED AND IN ATTENDANCE WHEN MEALS ARE CLAIMED. MUST REVIEW AT LEAST 10% OF ENROLLMENT (OR AT LEAST 5 PARTICIPANTS IF LESS THAN 50 ENROLLED)

If meal counts do not match attendance, how is problem reconciled? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Appeal Procedure

An institution may appeal adverse action taken by CFNA by requesting an administrative review **within 15 calendar days** of receiving the written notice of adverse action from CACFP. Actions which may be appealed are those that affect your participation or claim for reimbursement including, but not limited to:

- Denial of an institution's application for participation;
- Denial of an application submitted by a sponsoring organization on behalf of a facility;
- Notice of proposed termination of the participation of an institution or facility;
- Notice of proposed disqualification of a responsible principal or responsible individual;
- Suspension of an institution's contract;
- Denial of all or part of a claim for reimbursement;
- Demand for the remittance of an overpayment;
- Denial by MDHSS to forward to the Food and Nutrition Service an exception request by the institution or sponsoring organization for payment of a late claim or a request for an upward adjustment to a claim, or demand for remittance of an overclaim; and
- Any other action of the state agency affecting an institution's participation or its claim for reimbursement.

There are two types of appeals which are conducted before a duly appointed administrative hearing officer:

- Hearing (**in person**); and
- Abbreviated administrative (**written**) review

Instructions on how to appeal are included in all correspondence concerning any actions taken by the CACFP. **The appeal request must state whether the sponsor/center wants a hearing or an abbreviated (written) administrative review and must be submitted to the address below.**

Missouri Department of Health and Senior Services  
Bureau of Community Food and Nutrition Assistance  
P.O. Box 570, Jefferson City, MO 65102  
Fax 573-526-3679

Appeals submitted according to policy are then held by the administrative review official. The official must inform CFNA, the institution's executive director, and the chairman of the board of directors, and the Responsible Principals/Responsible Individuals of the administrative review's outcome within 60 days of the CFNA's receipt of the request for an administrative review [7CFR 22.6(k)].

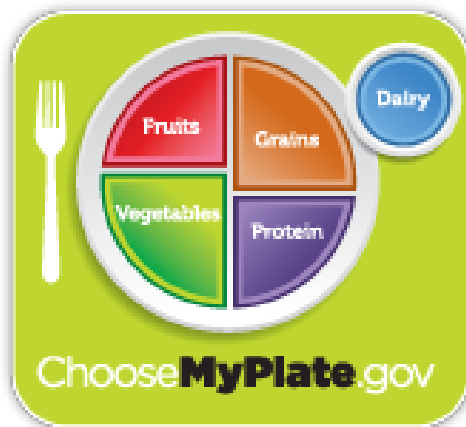
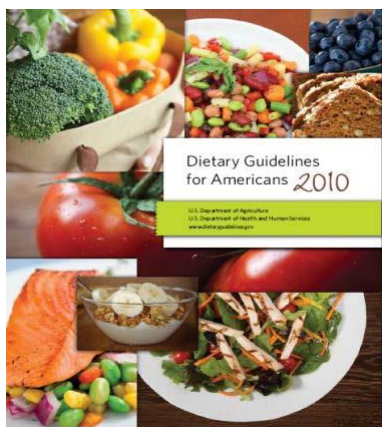
The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and, where applicable, political beliefs, marital status, familial 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 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. Revised July 2014.

# Healthy Meals & Nutrition Environment

At-risk after school care centers provide a much-needed service to their communities. They give children a safe place to go after school and nutritious food that gives them the energy they need to concentrate on homework and join their friends in physical, educational, and social activities. At-risk after school programs and Outside School Hours Care Centers serve an important role in helping young children develop good eating and physical activity habits.

The CACFP meal patterns require at-risk after school centers to serve meals that meet the nutritional needs of children and are consistent with the Dietary Guidelines for Americans, and are appetizing. Meal pattern requirements assist the menu planner in providing well-balanced meals and snacks that provide the appropriate amount of energy and nutrients a child needs during critical stages of growth. The At-Risk meal pattern lists the requirements for children 6 to 12 years old. Children ages 13 through 18 must be served minimum or larger portions specified for ages 6 to 12.



The Dietary Guidelines for Americans are jointly issued and updated every 5 years by the Department of Agriculture (USDA) and the Department of Health and Human Services (HHS). They provide authoritative advice for Americans ages two and older about consuming fewer calories, making informed food choices, and being physically active to attain and maintain a healthy weight, reduce risk of chronic disease, and promote overall health.

## What is a "Healthy Diet"?

The Dietary Guidelines for Americans describe a healthy diet as one that:

- Emphasizes fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products;
- Includes lean meats, poultry, fish, beans, eggs, and nuts; and
- Is low in saturated fats, *trans* fats, cholesterol, salt (sodium), and added sugars.

The recommendations in the *Dietary Guidelines* and in *MyPlate* are for children and adults two years of age and older. *MyPlate* is not a special diet for individuals with specific health conditions. Individuals with a chronic health condition should consult with a health care provider to determine what dietary pattern is appropriate for them.

## **Missouri Eat Smart Child Care:**



The Missouri *Eat Smart Child Care Initiative* challenges child care facilities to improve their meal service by following recommended standards that are above the minimum CACFP requirements. The *Guidelines* also include environmental factors that relate to nutrition habits and meal service.

Adopting the *Eat Smart Guidelines* in your child care center may: help prevent childhood obesity; show you care about the health of the children in your care; and attract parents who care about the food their children eat while away from home.

**On-Line Training Modules** are available for the **Eat Smart Guidelines** at: [www.mocacfp.com](http://www.mocacfp.com)

The free, self-directed *Eat Smart Series* lessons are intended for child care and adult care providers who have contracts with the Missouri Department of Health and Senior Services or have submitted a program application to participate in the CACFP. All registered users will have access to the full catalog of available lessons which currently includes the following training modules:

- **Eat Smart: A Call to Action**
- **Eat Smart: A Healthy Nutrition Environment**
- **Eat Smart: Nutrition Overview**



## **Water Availability**

Drinking water must be made available to children throughout the day, including at meal times. While water must be made available to children during meal times, it is not part of the reimbursable meals and cannot be served in lieu of milk.

Water can be made available to children in a variety of ways, including simply providing water to a child when it is requested. Contact CFNA for questions pertaining to this requirement [CACFP 20-2011 *Child Nutrition Reauthorization 2010: Water Availability in the Child and Adult Care Food Program, May 11, 2011*].



# Menu Planning Guidelines

The CACFP Meal Pattern Requirements and *Creditable Foods Guide* resources assure that children participating in the CACFP are served foods that supply the nutrients they need. The *Creditable Foods Guide* is a reference list of foods that can be “credited” to the CACFP meal pattern requirements and is available at: <http://www.health.mo.gov/cacfp>. At-risk after school center menus have a major influence in development of children’s eating habits. It is important that menus help establish patterns for healthy eating. These guidelines may help children to develop healthy eating habits:

1. Select a form for documenting your daily menus. The “Snack and Supper Menus” 7-day template is recommended; this form lists the food components required for each meal and snack (supplement). Other menu versions are available under Applications and Forms at: <http://www.health.mo.gov/cacfp>
2. Choose the type of menu format you will use - 2 to 3 week cycle menu format is recommended. A cycle menu is a set of menus that are repeated in the same order for a period of time, typically 2, 3, or 4 weeks. Cycle menus provide variety by offering different foods and/or different food combinations each day during the cycle.
3. When there are substitutions from the planned menu, mark through the original menu item and enter the substituted item(s). **The original daily dated menu that notes substitutions must be retained with the monthly records.**
4. Know the cooking abilities of the person(s) preparing the meals. Review the menu and recipes with the cook and provide training as necessary. Select or develop standardized recipes for menu items.
5. Plan menu items based on the equipment available in the center’s kitchen. The center’s menu should not include baked chicken, baked potatoes and hot biscuits if there is not adequate oven space.
6. Include all food components in at least the minimum portion sizes specified on the Food Chart – At-Risk After School. It is usually easiest to start by planning the main dish or entrée.
7. Plan menus that keep the nutritional needs of young children in focus. Be sure to include a good source of iron and Vitamins A and C.
  - Vitamin C sources include: citrus fruit and juice, broccoli, asparagus, brussels sprouts, cauliflower, snow peas, peppers (green & red), cantaloupe, honeydew melon, mango, papaya, kiwi and strawberries
  - Vitamin A sources include: apricots, cantaloupe, cherries, plums, egg yolk, asparagus, broccoli, carrots, kale, peas and sweet potatoes
8. Serve foods high in iron.
  - Iron sources include: asparagus, lima beans, sweet potatoes, squash, vegetable juice, turkey, tuna, apricots, cherries, dried fruit, dried peas, eggs, meat, green beans

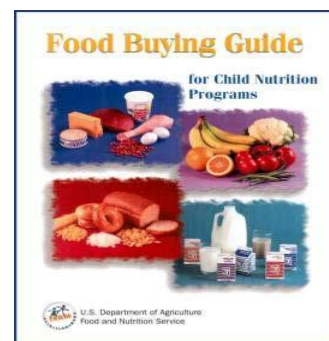


9. Meats such as hot dogs, sausage, and lunchmeat (bologna, salami and others) are high in fat and sodium. Do NOT serve more than one time per week.
10. Sweet type grain/breads may not be a dessert at supper (or lunch). Items such as brownies and cookies are creditable only at snacks and should be served no more than two times per week.
11. Sweet type Breakfast items, such as sweet rolls and doughnuts should be served no more than one time per week at breakfast (when applicable).
12. Specify the type of fruit, juice or vegetables on your menus to assure a variety of food is served and to document the nutritional value of the meal.
13. Make sure that meals look and taste good! Introduce new foods along with familiar foods that children already like.
14. Include foods that are different shapes - round, square, rectangular.
15. Choose foods that are different colors - yellow, orange, red, bright green.
16. Combine foods that have different textures - soft, crunchy, crisp, creamy and smooth.
17. Include foods with different tastes - sweet, sour, tart, salty, spicy and mild.
18. Consider the different ethnic and cultural food habits and preferences of the children.
19. Low fat (1%) or fat free (skim) milk is required at each meal for participants two years of age and older.
20. Use fats and oils sparingly in food preparation and limit the use of salt and high sodium foods.
21. Eat slowly, sitting down at the table.



**Standardized Recipes** - A standardized recipe is one that has been tried several times using the same method and equipment. A standardized recipe produces consistency in product quality and yield (same number of servings) every time it is used as long as the same procedures, equipment, and ingredients are used. Because standardized recipes specify exact amounts of ingredients, it is easier to manage the cost and storage of foods. *USDA Recipes for Child Care* is available at: <http://www.nfsmi.org/Templates/TemplateDefault.aspx?q=cEIEPTYzJmlzTWdyPXRydWU=>

**The Food Buying Guide (FBG)** – is a USDA resource that helps determine the right amount of food to purchase and the specific meal contribution each food makes towards the meal pattern requirements as well as information on recipe analysis. A copy of the FBG is available on CDAs noted in the Resources section of this workbook and an online “FBG calculator for Child Nutrition Program” is also available at: <http://teamnutrition.usda.gov/Resources/foodbuyingguide.html> .



# Four Components in Menu Planning

## Meat/Meat Alternates (m/ma)

Includes lean meat, poultry, fish, cheese, egg, cooked dry beans/peas, Nuts and seeds, nut and seed butters, alternate protein products, Yogurt (creditable at lunch, supper and snack only)

### Specifics

- Required at Lunch and Supper as main dish; m/ma may be served as an extra food item at breakfast, but it is not required
- Nuts/seeds/nut butters can meet only ½ of m/ma at lunch/supper - an additional m/ma is required. Meets full m/ma requirement at snacks
- A combination food served as an entrée (main dish) may be credited as the m/ma plus up to 2 other meal components (3 total) provided *each* component meets the *minimum* meal pattern requirement
- Lunch meat/cold cuts, hot dogs and sausage products may be served *no more than 1 time per week*
- Commercially processed food must have processed food documentation (CN label, product formulation or center product analysis) to be creditable
- No more than 2 different m/ma items are creditable at 1 meal

## Milk

Participants 2 years of age & older must be served **fat-free (skim) or low-fat (1%) milk**, lactose-reduced (1%), lactose-free (skim), 1% or skim buttermilk, or 1% or skim acidified milk. Whole & Reduced fat (2%) may NOT be served to participants two years of age and older.

### Specifics

- Must be pasteurized fluid milk, flavored or unflavored
- Is a required component at breakfast, lunch and supper\*
- Milk may be served as a beverage, on cereal or used for some of both at breakfast and snack
- Milk used in cooking may not be credited
- Infants birth through 11 months must be provided breast milk or iron-fortified formula
- Whole milk is recommended for children 12 months through 23 months but any milk type may be served (2%, 1%, skim, etc.)
- Milk may not be served for snacks when juice is served as the second component
- \*Milk is not a required supper component in adult day care centers

## Vegetables/Fruits

Includes fresh, canned, frozen, dried fruit, juice and vegetables, Juice must be 100% full strength fruit or vegetable juice

### Specifics

- One serving is required at Breakfast
- At least 1/8 cup (2 tablespoons) must be served to meet the minimum creditable portion; an additional fruit/vegetable must be served to meet the total requirement by age
- Cooked dry beans/peas may be counted as a vegetable OR a meat alternate, but not as both in the same meal
- Juice may count up to ½ of the total requirement for lunch or supper
- Juice may not be served at snack meal when milk is served as the second component
- Two *different* fruits and/or vegetables must be served at lunch/supper.
- Combinations such as fruit cocktail, mixed vegetables or fruit salad may be credited to meet one of the two required components at lunch or supper

## Grains/Breads

All grains/breads must be whole grain or enriched or made from whole grain or enriched flour or meal, bran or germ. Cereal must be whole grain, enriched or fortified

### Specifics

- Required at Breakfast, Lunch, and Supper
- Minimum creditable amount is one quarter (¼) of a serving
- Ready – to - eat cereal may be served at breakfast and snack only
- Grain-based chips are creditable and may be served up to 2 times a week at lunch and snack only; however puffed snack products (Cheetos, Funyuns, etc.) are NOT creditable
- Sweet bread items such as coffee cake, muffins, granola bars, doughnuts or sweet rolls are creditable at breakfast and snack only and can be served *no more than 1 time per week at breakfast*
- At lunch and supper, the grains/breads may not be a dessert. Cookies and other dessert grains are creditable only at snacks and *no more than 2 times per week*

# Food Chart – At-Risk After School Program

| Meal                   | Food Component   | Minimum Serving Size <sup>1</sup>   |                        |
|------------------------|--|---|------------------------|
| <b>Supper</b>          | Fluid Milk <sup>2</sup>  | 8 fluid ounces (1 cup)  |                        |
|                        | Meat, Poultry, Fish, Cheese, <b>or</b><br>Egg (large), <b>or</b><br>Cooked Dry Beans, Peas, <b>or</b><br>Peanut Butter or other Nut Butters <sup>4</sup> , <b>or</b><br>Peanuts, Soy Nuts, Tree Nuts or Seeds <sup>5</sup> , <b>or</b><br>Yogurt, plain or sweetened, flavored or unflavored | 2 ounces<br>1 egg<br>½ cup<br>4 tablespoons<br>1 ounce = 50%<br>8 ounces or 1 cup |                        |
|                        | Vegetables and/or Fruits <sup>6</sup> (must serve at least two different varieties)  | ¾ cup total   |                        |
|                        | Bread, <b>or</b><br>Cornbread, Biscuits, Rolls, Muffins, etc., <b>or</b><br>Cold Dry Cereal <sup>3</sup> , <b>or</b><br>Cooked Cereal or Cereal Grains <b>or</b><br>Pasta, Cooked Noodles  | 1 slice<br>1 serving<br>¾ cup or 1 ounce<br>½ cup<br>½ cup                        |                        |
|                        | <b>Snack<sup>7</sup></b><br>Serve 2 of 4 components  | Fluid Milk <sup>2</sup>   | 8 fluid ounces (1 cup) |
|                        |  | Juice or Fruit or Vegetable   | ¾ cup                  |
| Meat or Meat Alternate |  | 1 ounce   |                        |
| Grains/Breads          |  | 1 serving   |                        |

<sup>1</sup>Children ages 13 through 18 must be served minimum or larger portions specified for children 6 through 12.

<sup>2</sup>All milk served to children two years of age and older must be low-fat (1%) or fat-free (skim). Milk must be served as a beverage at supper and may be served as a beverage and/or on cereal at snack.

<sup>3</sup>Dry cereal portion is either volume (cup), or weight (ounces), whichever is less. Cold dry cereal is ONLY creditable at snack.

<sup>4</sup>At supper, must serve an additional meat/meat alternate with peanut butter.

<sup>5</sup>No more than 50% of the requirement can be met with nuts or seeds. Nuts or seeds must be combined with another meat/meat alternate to fulfill the requirement.

<sup>6</sup>Serve two or more kinds (1/8 cup minimum). Full-strength juice may be counted to meet not more than one-half of the requirement.

<sup>7</sup>Serve two food items - each must be from a different food component. Juice may not be served at snack when milk is served as the second component.

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# Snack and Supper Menus

| Meal Pattern for Snack<br>Choose two of four components | Date: | Date: | Date: | Date: | Date: | Date: | Date: |
|---|-------|-------|-------|-------|-------|-------|-------|
| Milk (fluid)  |       |       |       |       |       |       |       |
| Juice* or fruit or vegetable                            |       |       |       |       |       |       |       |
| Grain/bread   |       |       |       |       |       |       |       |
| Meat/meat alternate                                     |       |       |       |       |       |       |       |
| Meal Pattern for Supper                                 | Date: | Date: | Date: | Date: | Date: | Date: | Date: |
| Milk (fluid)  |       |       |       |       |       |       |       |
| Fruit or vegetable**                                    |       |       |       |       |       |       |       |
| Fruit or vegetable                                      |       |       |       |       |       |       |       |
| Grain/bread   |       |       |       |       |       |       |       |
| Meat/meat alternate                                     |       |       |       |       |       |       |       |

\*Juice may not be served when milk is the only other component of the snack.

\*\*Serve at least two different varieties.

After-school programs may claim reimbursement for snacks served on weekends, holidays, and other vacation periods during the regular school year. Programs may not claim reimbursement through this provision when school is not in session (i.e., when school is closed for the summer).

# Snack and Supper Menus – Week of 5/15

*Good Example*

| Meal Pattern for Snack<br>Choose two of four components | Date: 5/15<br>Mon.          | Date: 5/16<br>Tues.  | Date: 5/17<br>Wed.      | Date: 5/18<br>Thurs        | Date: 5/19<br>Fri.            | Date: | Date: |
|---|-----------------------------|----------------------|-------------------------|----------------------------|-------------------------------|-------|-------|
| Milk (fluid)  | 1%<br>Chocolate<br>milk     |                      |                         |                            |                               |       |       |
| Juice* or fruit or vegetable                            |                             | Strawberries         | Cantaloupe              |                            | Apple juice                   |       |       |
| Grain/bread   | Animal<br>crackers          |                      | Wheat<br>crackers       | Oatmeal<br>raisin cookie   | Bread stick                   |       |       |
| Meat/meat alternate                                     |                             | Yogurt               |                         | Mozzarella<br>cheese stick |                               |       |       |
| Meal Pattern for Supper                                 | Date: Mon.                  | Date: Tues.          | Date: Wed.              | Date: Thurs                | Date: Fri.                    | Date: | Date: |
| Milk (fluid)  | 1% milk                     | 1% milk              | 1%<br>chocolate<br>milk | 1% milk                    | 1%<br>chocolate<br>milk       |       |       |
| Fruit or vegetable**                                    | Peas                        | Tossed salad         | Mashed<br>potatoes      | Tater tots                 | Baby carrots                  |       |       |
| Fruit or vegetable                                      | Pineapple<br>tidbits        | Watermelon           | Broccoli                | Green beans                | Whole apple                   |       |       |
| Grain/bread   | Spaghetti<br>noodles        | Pizza crust          | Wheat Roll              | Hot dog bun                | Whole wheat<br>bread          |       |       |
| Meat/meat alternate                                     | Ground beef<br>(meat sauce) | Cheese (HM<br>pizza) | Chicken<br>nuggets (CN) | Beef hot dog               | Deli turkey &<br>Swiss cheese |       |       |

\*Juice may not be served when milk is the only other component of the snack.

\*\*Serve at least two different varieties.

After-school programs may claim reimbursement for snacks served on weekends, holidays, and other vacation periods during the regular school year. Programs may not claim reimbursement through this provision when school is not in session (i.e., when school is closed for the summer).

# Snack and Supper Menus – week of June 4

# Exercise - Find the Errors

| Meal Pattern for Snack<br>Choose two of four components | Monday<br>June 4 | Tuesday<br>June 5 | Wednesday<br>June 6 | Thursday<br>June 7 | Friday<br>June 8 | Date: | Date: |
|---|------------------|-------------------|---------------------|--------------------|------------------|-------|-------|
| Milk (fluid)  |                  | Cheese cubes      | Chocolate pudding   |                    | Sherbet          |       |       |
| Juice* or fruit or vegetable                            | Apple juice      |                   |                     | Strawberries       | Celery sticks    |       |       |
| Grain/bread   | Carrot sticks    | Pretzels          | Vanilla wafers      | Biscuit            |                  |       |       |
| Meat/meat alternate                                     |                  |                   |                     |                    |                  |       |       |
| Meal Pattern for Supper                                 | Monday<br>June 4 | Tuesday<br>June 5 | Wednesday<br>June 6 | Thursday<br>June 7 | Friday<br>June 8 | Date: | Date: |
| Milk (fluid)  | Milk             | Milk              | Milk                | Milk               | Milk             |       |       |
| Fruit or vegetable**                                    | Potato chips     | Pizza crust       |                     | Ketchup, pickles   | Pineapple chunks |       |       |
| Fruit or vegetable                                      | Fruit            | Banana            | Coleslaw            | Baked beans        | Shredded lettuce |       |       |
| Grain/bread   | Bun              |                   | Mashed potatoes     | Fries              | Corn chips       |       |       |
| Meat/meat alternate                                     | Hot dog          | HM sausage pizza  | CN chicken nuggets  | Hamburger patty    | Refried beans    |       |       |

\*Juice may not be served when milk is the only other component of the snack.

\*\*Serve at least two different varieties.

After-school programs may claim reimbursement for snacks served on weekends, holidays, and other vacation periods during the regular school year. Programs may not claim reimbursement through this provision when school is not in session (i.e., when school is closed for the summer).

# Offer versus Serve Meal Service Option

Regulation permits the use of offer versus serve (OVS) meal service option for supper (and breakfast and lunch, if applicable). OVS is available **only** to schools or facilities sponsored by or receiving meals from schools. At-risk centers that serve meals prepared by a school food authority (SFA) that participate in the National School Lunch Program (NSLP), whether they are located in the school or in another location, have the option of using OVS in their at-risk center for the **supper** meal. Offer versus serve may *not* be used with snacks.

Offer versus serve is a meal service option (supper and breakfast/lunch, if applicable) where participants are “offered” all of the components of the meal pattern, but are not required to take them all. Offer versus serve can help teach children to make choices and is a way to decrease food waste because participants choose only those foods they wish to eat. **SFAs may choose to use the NSLP and SBP meal pattern or the CACFP meal pattern.**

Assistance with meal selection may be necessary in order to provide well-balanced meals. Participants are not required to decline foods that are offered, but may do so if they choose. OVS is not considered appropriate for preschool children participating in at-risk after school programs because it may interfere with Program nutrition goals and the institution’s efforts to introduce new foods to children.

The centers must notify the MDHSS-BCFNA for approval to use OVS. The institution’s option to participate in offer vs. serve must be noted under “General Comments” box (line 65) in the Center Info Sheet in the on-line applications/claims database. MDHSS-BCFNA must also be notified if the center changes the OVS option.

## **Supper – Meal Component Requirements:**

**For participants ages 6 through 12 the supper meal shall include five required food components: **one** serving (2oz.) of meat/meat alternate, **two** servings (3/4 cup total) of different vegetable/fruit/juice; **one** serving of grain/breads; and **one** serving (1 cup) low-fat (1%) or fat-free (skim) milk. NOTE: Meal patterns for children younger than 6 may follow the CACFP *Food Chart – Children*. Children ages 13 through 18 must be served minimum or larger portions specified for children 6 through 12 in the *Food Chart – At-Risk After School Program*.**

**Under OVS, up to 2 of the 5 required components may be declined.**

**Snacks – Both snack components must be served.** Offer versus serve may *not* be used with snacks.

Adequate food and milk purchases will be verified at CACFP monitoring reviews in compliance with the offer vs. serve meal option. The center must demonstrate that they “offer” all Program meal components in the regulatory amounts. If the center is ordering milk based on previous consumption patterns, they should have a plan on how to ensure that enough milk will be provided should the demand increase for any given day of operation.

The amount of milk purchased should correlate with the food preference of participants that routinely choose to drink milk in the 8 oz. (1/2 pint) minimum serving size offered. It is the responsibility of Program personnel to *offer* milk as a beverage choice to participants according to the *At-Risk After School Food Chart*. The at-risk after school program should document daily portions served to justify that adequate milk is purchased for the number of participants who choose to drink milk.

## Food Substitutions and Variations

If the institution serves children that have disabilities or special dietary needs that lead to alterations of the meal pattern, ensure that these children are being served meals in accordance with their needs and confirm that the appropriate documentation has been obtained and retained to support claiming the meals.

**Medical Statements** – In order to claim a meal that does not conform to the regulatory meal pattern, there must be a medical reason or a special dietary need and a signed statement on file. Use of *CACFP-227 Medical Statement to Request Special Meals and/or Accommodations* form is recommended; however, an equivalent medical provided form which documents the requirements is acceptable. Refer to the instructions for completing form CACFP-227 in the Appendix (page 70) for additional information.

**Disabilities** – If an institution is serving a child with a disability and that disability directly affects which food(s) the child can consume, the parent and/or guardian must submit a medical statement signed by a licensed physician. The medical statement (medical food substitution record) must be kept on file, handled confidentially, and must describe:

- The participant’s disability and an explanation of why the disability restricts the participant’s diet;
- The major life activity affected by the disability;
- The food or foods to be omitted from the participant’s diet, and;
- The appropriate food substitutions.

Child care centers participating in the CACFP are required to make substitutions or modifications to the meal pattern for a participant with a disability that restricts his/her diet. Substitutions must be made only when supported by a written statement signed by a recognized medical authority (licensed physician, physician’s assistant or nurse practitioner).

**NOTE:** Reimbursement for meals served with documented food substitutions are claimed at the same reimbursement rate as meals which meet the meal pattern. The center may not charge for the substituted food item – substitutions that exceed program reimbursement are at the center’s expense.

**Reference:** CACFP 10-2013 policy memo (April 26, 2013) – describes disabilities that affect “major life activities” and “major bodily function”.

**Special Dietary Need** – If an institution is serving a child with special dietary needs that are not a disability, the parent/guardian may request substitutions by submitting an accurately completed “Medical Food Substitution Record” (CACFP-227 is recommended) signed by a recognized medical authority (licensed physician, physician’s assistant or nurse practitioner), listing the food(s) to be omitted and appropriate substitutions.

Substitutions *may* be made on a case by case basis, at the discretion of the center, for a participant who is unable to consume a **food item** because of a non-disability medical or other special dietary need.



**Fluid Milk (Non-Dairy) Substitutions** – Milk substitutions that are made due to special dietary needs that are not a disability must be nutritionally equivalent to milk, even if accompanied by a medical statement. The institution *may* make such substitutions at its discretion (not required). A written request for a fluid milk substitute must be made by a medical authority, parent or guardian and *must identify the medical or other special dietary need that restricts the diet of a child*. Prior to this rule, centers were only able to accept a substitution statement signed by a recognized medical authority.

Fluid milk substitutes must contain all nutrients in the minimum quantities specified to be considered nutritionally equivalent to fluid cow’s milk:

**Fluid Milk Substitute - Minimum Nutrient Requirements**

| Nutrient     | Per one (1) cup (8 ounces) |
|--------------|----------------------------|
| Calcium      | 276 mg.                    |
| Protein      | 8 gm.                      |
| Vitamin A    | 500 IU.                    |
| Vitamin D    | 100 IU.                    |
| Magnesium    | 24 mg.                     |
| Phosphorus   | 222 mg.                    |
| Potassium    | 349 mg.                    |
| Riboflavin   | 0.44 mg.                   |
| Vitamin B-12 | 1.1 mcg.                   |

**Non-Dairy Beverages meeting USDA Substitution criteria per 8 fluid ounces include:**

***8<sup>th</sup> Continent*** - Original Soymilk and Light Chocolate Soymilk;

***Pacific Natural*** - 2 varieties of Ultra Soymilk: Plain and Vanilla;

***Kikkomon*** - 2 varieties of Pearl Organic Soymilk: Creamy Vanilla and Chocolate;

***Great Value*** (WalMart) – Original soymilk; and

***Sunrich Naturals*** – 2 varieties: Original and Vanilla

*Any reasonable parent or guardian written request for a non-dairy milk substitution could be accepted at the discretion of the center, as described above, without providing a medical statement. As an 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 medical or other special dietary need that restricts the diet of the child. Non-dairy milk substitutions are at the option and expense of the facility. Other examples that may be considered a reasonable written request would be for religious, cultural or ethical reasons. However, a request which only states that a child “does not like milk” would *not* be a reasonable request for a fluid milk substitute.*

**For additional information**, Sections 7.4A and 7.4B in the At-Risk After School Programs Policy Manual; FNS Instruction 783-2 *Accommodating Children with Special Dietary Needs*; and, CACFP 21-2011 *Revised-Child Nutrition Reauthorization 2010: Nutrition Requirements for Fluid Milk and Fluid Milk Substitutions*, September 15, 2011.

## MEDICAL STATEMENT TO REQUEST SPECIAL MEALS AND/OR ACCOMMODATIONS

|  |                                     |                                   |          |
|--|-------------------------------------|-----------------------------------|----------|
| 1. SPONSOR Name  | 2. Site Name, if different from #1. | 3. Site Telephone Number          |          |
| 4. Name of Participant   |                                     | 5. Date of Birth                  |          |
| 6. Name of Parent or Guardian  |                                     | 7. Telephone Number               |          |
| <b>8. Check One:</b><br><input type="checkbox"/> Participant has a disability or a medical condition and <i>requires</i> a special meal or accommodation. (Refer to instructions.) CACFP, 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><br><br><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. CACFP, 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><br><br><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. CACFP, schools and agencies participating in federal nutrition programs are encouraged to accommodate reasonable requests. <b>A licensed physician, physician's assistant, nurse practitioner or 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. Foods to be omitted and substitutions: <i>(please list specific foods to be omitted and required substitution; attach a sheet with additional information as needed)</i></b>  |                                     |                                   |          |
| <b>A. Foods To Be Omitted</b>  |                                     | <b>B. Foods to be Substituted</b> |          |
| _____  | _____                               | _____                             | _____    |
| _____  | _____                               | _____                             | _____    |
| _____  | _____                               | _____                             | _____    |
| <b>13. Indicate texture:</b><br><input type="checkbox"/> Regular <input type="checkbox"/> Chopped <input type="checkbox"/> Ground <input type="checkbox"/> Pureed  |                                     |                                   |          |
| 14. Adaptive Equipment:  |                                     |                                   |          |
| 15. Signature of Preparer*   | 16. Printed Name                    | 17. Telephone Number              | 18. Date |
| 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.

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CACFP-227 Revised 6-2014

## Non-Creditable Foods

The foods listed below are non-creditable in the CACFP because they **do not** meet the requirement as a component in the meal pattern. Non-creditable foods **cannot** be counted toward meeting the requirements for a reimbursable meal. The alphabetical list is **not all-inclusive**. Use of a product brand name is not an endorsement but is used for clarity. Refer to the *Creditable Foods Guide* for a more comprehensive list of creditable and non-creditable food available at: <http://health.mo.gov/living/cacfp>.

|                              |                            |   |
|------------------------------|----------------------------|---|
| Acorns                       | Fruit leather, commercial  | Popcorn                                   |
| Baco-bits                    | Fruit roll-ups             | Pop Tart filling                          |
| Bacon                        | Fruit spreads              | Pork skins                                |
| BBQ sauce                    | Frozen yogurt              | Potato chips                              |
| Beef Jerky                   | Fudgsicles                 | Potted meats                              |
| Candy                        | Funyuns                    | <b>Powdered</b> cheese                    |
| Carmel corn                  | Gatorade                   | Pringles                                  |
| Carob                        | Gelatin                    | Pudding                                   |
| Catsup                       | Goat's milk Half           | Pudding pops                              |
| Certified raw milk           | & Half Ham                 | <b>Puffed cheese snacks</b> (ex. Cheetos) |
| Cheese, imitation            | hocks Hawaiian             | Reconstituted Non-fat dry milk            |
| Cheese powder in             | Punch Hi-C                 | Sherbet or sorbet                         |
| boxed mac & cheese           | Home-canned foods          | Shoe string potatoes                      |
| <b>Cheese Products</b>       | Hominy                     | Sizzalean                                 |
| Chestnuts                    | Honey                      | Soft drinks                               |
| Chili sauce                  | Hot chocolate, with        | Sour cream                                |
| Chitterlings                 | water                      | Soy milk                                  |
| Chocolate bars               | Ice cream                  | Surimi                                    |
| Chocolate covered raisins    | Iced tea                   | Syrup                                     |
| Coconut                      | Infant dinners, commercial | Tang                                      |
| Crab, imitation              | <b>Imitation</b> cheese    | Tapioca                                   |
| Cracker Jacks                | Jam, jelly, preserves      | Tofu                                      |
| Cranberry juice cocktail     | Jell-O                     | Velveeta cheese <b>product</b>            |
| Cream                        | Kool-aid                   | Vienna sausage                            |
| Cream cheese                 | Lemonade                   | Vitamite                                  |
| Cream soups                  | Low-iron infant formula    | Water, bottled                            |
| Cream sauces                 | Marshmallows               |   |
| Custard                      | Milk, imitation            |   |
| Dairy Substitutes            | Molasses                   |   |
| Dairy whip                   | Mustard or mayonnaise      |   |
| Drinkable yogurt             | Nectar                     |   |
| Egg nog, made with           | Neufchatel cheese          |   |
| raw eggs                     | Non-fat dry milk           |   |
| Egg substitutes              | Nut or seed meal/flour     |   |
| Evaporated milk              | Oxtails                    |   |
| Fiddle Faddle                | Pickle relish              |   |
| Five Alive                   | Pig's feet                 |   |
| Fruit drinks for fruit punch |                            |   |

# Commercially Processed Food Documentation

Some centers choose to purchase commercially processed meat/meat alternate products rather than prepare these main dish items on site (homemade or “cooked from scratch”). Some reasons a center may purchase these “convenience” items is due to lack of skilled labor or inadequate kitchen preparation equipment. The quality of commercially processed foods varies greatly from manufacturer to manufacturer and from product to product. Because the meal pattern contribution(s) for commercially processed foods cannot be verified, all at-risk centers are required to maintain documentation to verify the meal pattern contribution to the Child and Adult Care Food Program. *Three types* of processed food documentation can be used in the CACFP: Child Nutrition (CN) label; center product analysis; or manufacturer’s product formulation statement.

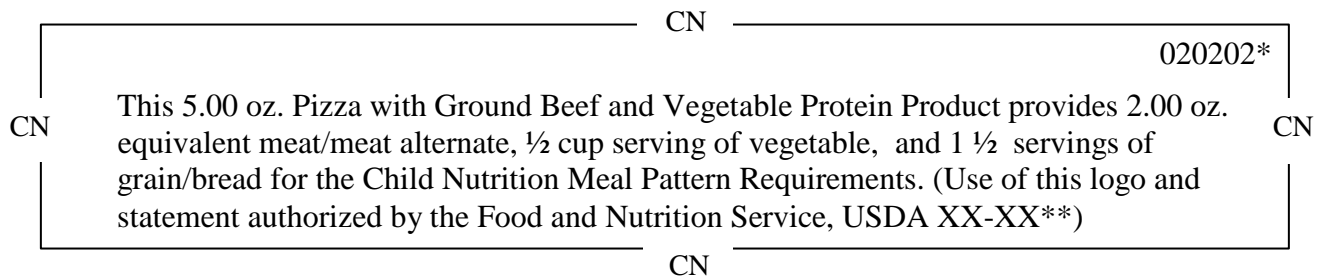
It is not enough just to have the CN label, product formulation statements or center analysis documentation. The product information (product yield) must be used to determine the portion size/amount you must serve in order to provide enough meat/meat alternate for the age groups in the center. Processed food documentation must be maintained at the center to verify that creditable meals are served.

**All documentation regarding processed foods must be maintained in the center files. If no information is available at the time of a monitoring review, meals containing the processed foods may be disallowed.**

**Child Nutrition Label (CN Label)**- The Child Nutrition Labeling Program is a voluntary federal labeling program. CN Labeled products ensure that the food provides the stated contribution toward the CACFP meal pattern requirements. These foods are processed under a Quality Control plan using guidelines provided by USDA’s Food and Nutrition Service (FNS). CN Label documentation provides information on how the purchased product contributes to the meat/meat alternate and any other component(s) (grain/bread and fruit/vegetable, if applicable) in frozen products such as: breaded beef patties, breaded chicken nuggets, breaded fish sticks, pork tenderloin/fritter, pizza, burrito, BBQ rib patty, egg rolls and canned ravioli.

**The CN label will must contain the following information:**

- The CN logo has a distinct border
- USDA authorization
- A 6 - digit product identification number\*
- The month and year of approval\*\*



**Center Product Analysis** - The center may separate breading from *whole pieces* of breaded meat products, such as fish sticks (not minced fish). Follow the procedure below to obtain proper center analysis documentation:

1. Prepare the product according to manufacturer's direction;
2. Let cool; then remove (separate) the breading from the cooked product;
3. Weigh the cooked meat only (not the breading). Weigh a minimum of 3 samples individually. Add the individual weights together and divide by the number of samples to get an average weight of a single item.
- 4. Document the item and manufacturer name, product code and date of analysis\*;**
5. Document the amount of creditable cooked meat provided by each piece of product;
6. List the number of product pieces required to meet the serving sizes for each age group (example: 3 pieces for ages 1 through 2, etc).
7. Maintain this documentation with your monthly CACFP records.

**\*NOTE:** Whenever you purchase a different brand or product number, you need to document the information as described above.

Example:

ABC Crunchy Fish Sticks – Product Code #1234

5 fish sticks with baked; the breading was removed and weighed on May 2, 2014.

**Each ABC Crunchy Fish Stick contain ¼ ounce of fish.**

The following lists the number of fish sticks needed by each age group for the meat component at lunch or supper.

| <b>Age Group</b>   | <b>Min. Serving Size</b> | <b>Number of Fish Sticks</b> |
|--------------------|--------------------------|------------------------------|
| 1 through 2 years  | 1 oz.                    | 4                            |
| 3 through 5 years  | 1 ½ oz.                  | 6                            |
| 6 through 12 years | 2 oz.                    | 8                            |

**Product Formulation Statement (Product Analysis)** – The Product Formulation Statement is documented on the manufacturers’ letterhead and signed by a company representative. The product statement (example on next page) documents how the processed product contributes to the child nutrition meal pattern requirement(s) and is not commonly used by centers. It is the institution’s responsibility to request and verify that the processed food documentation is accurate prior to purchasing processed products. A *Reviewer’s Checklist* ([www.fns.usda.gov/tn/resources/smi\\_checklist.pdf](http://www.fns.usda.gov/tn/resources/smi_checklist.pdf)) and an updated sample *Product Formulation Statement template* ([www.fns.usda.gov/tn/resources/smi\\_appendixl.pdf](http://www.fns.usda.gov/tn/resources/smi_appendixl.pdf)) for a meat/meat alternate (M/MA) product can be used as resources. It should be noted that a Product Formulation Statement does not provide any warranty against audit claims.

The product analysis/formulation statement is a detailed information sheet from the product manufacturer. It identifies the weight of the food components and the product’s contribution to the meal pattern. The analysis sheet contains:

- Product name and effective date
- Food components in the product that contribute to the meal pattern
- Product’s total contribution towards the meal pattern
- Statement of vegetable protein product contained in the product
- Original signature of a company official and date

*Examples of Commercially Processed food items commonly used in centers:*



*Breaded Chicken Nuggets*



*Burrito*



*Breaded Fish Sticks*



*Canned Ravioli*



*Pizza*

Product Formulation Statement (Product Analysis) - *Example:*

**XYZ Burrito Factory (Manufacturer's Letterhead)**

Effective Date: August 23, 2014 Product No. 9999

Total weight of precooked product: 4.00

Total of raw meat: 0.650 oz.

Percent of fat of raw meat: Not to exceed 30%

Weight of dry Volume Per Package (VPP): 0.094 oz.

Weight of liquid used to hydrate VPP: 0.176 oz.

Percent of Protein in dry VPP: 52%

Weight of raw meat and hydrated VPP: 0.920

Type of VPP used: XX Flour: \_\_\_\_\_ Isolate: \_\_\_\_\_

Weight of other ingredients: 1.005 oz.

Weight of pinto beans: 0.325 oz. Factored Wt. 0.503

Weight of cheese: none

Weight of cooked meat with VPP: 0.644 oz.

Total weight of filling: 2.25 oz.

Total weight of enriched flour tortilla: 1.75 oz. 1.59 serving

I certify the above information is true and correct and that the product (ready for serving) contributes 1.14 ounces of equivalent meat/meat alternative toward the meal pattern when prepared according to direction. I understand that the above named product will be used as a meal component for which Federal reimbursement will be claimed, and that records are available to support the information indicated above. The VPP used conforms to Food and Nutrition Service regulations. This product formulation will supersede all previously issued sheets.

SUGGESTED BID SPECIFICATIONS: \_\_\_\_\_ cases - Red Chili Beef, Bean and Chicken Burrito, 4.00 oz. **Each, unfried, packed 3/24 count. Must meet 1.00 ounces of meat/meat alternate and 1.50 bread servings.**

\_\_\_\_\_ James Smith \_\_\_\_\_ Director of Manufacturing *This is the important*

**James Smith**

**Title**

XYZ Burrito Factory

August 23, 2014



# Recordkeeping

Maintaining accurate records is vital to making sure CACFP reimbursement accurately reflects the center's Program operations. **CACFP forms are available under Applications and Forms and posters are available under Publications at: <http://health.mo.gov/cacfp>**

## **A. RECORD RETENTION**

CACFP **original** records (not photocopies) must be maintained on site (for independent facilities), be accessible during licensed business hours and be available for review within one hour of a state representative's arrival (policy 8.1). Sponsoring Organizations (two or more facilities) must maintain original records during (licensed) business hours at the location identified in the Management Plan and be available for review within one hour of a state representative's arrival (policy 6.2). CFNA reviewer(s) will request CACFP records for one month or more and have the authority to disallow up to 12 months of claims. Program records must be retained for three full fiscal years (October 1 through September 30) after the final claim for the fiscal year was submitted and for longer than three years if audit findings have not been closed [7 CFR 226.10(d)].

## **B. MEAL SERVICE RECORDS**

### **Daily Meal Count Records**

Daily meal count (tally) records are **required** and must be recorded at the time of service (point of service) for each meal and/or snack the center is approved to claim for reimbursement. **Keep active (current month) record(s) on a clipboard or in a binder. File these records with the daily attendance records. File completed records in a binder or envelope labeled with month and year.**

**Daily Menu Records** for each approved Meal Type (Snack, Supper and Breakfast and Lunch, if applicable). Daily dated menus are required to verify that the CACFP meal pattern requirements are in compliance with Regulation. The original menu noting menu substitutions must be retained. (Use of the "Snack and Supper Menu for at-risk programs" forms are recommended but not required).

**Keep the current active menu on a clipboard or in a folder. When completed, file the menu in the folder or envelope for the month.**

### **Medical Food Substitution Record** - (CACFP-227)

Required when food substitutions are necessary and authorized by a medical authority for children with a diagnosed disability and with medical or special dietary needs.

**File in individual participant's file or in a location where record is kept confidential.**

### **Commercially Processed Food Documentation**

If your center uses commercially processed foods (such as chicken nuggets, fish sticks, ravioli, etc.) documentation of meal pattern contribution(s) is required to include: Child Nutrition (CN) labels; manufacturer's product formulation statement; or facility product analysis documentation.

**File in folder or notebook.**



### **C. PARTICIPANT RECORDS**

**Daily Attendance Records** - (CACFP-213); **Monthly Time In/Time Out Record** (CACFP-224); or **Time In/Time Out Record** - (CACFP-221)

A daily attendance record of each child is **required** for completing reimbursement claims. Keep an active record on a clipboard or in a folder.

**Keep current month attendance on a clipboard(s) or in a binder. File completed monthly records in a manila envelope or folder labeled with the appropriate month and year.**

**Title XX Documentation** - For Profit centers only

Documentation includes Family Support Division (FSD) vendor invoices, a copy of the contract with FSD for vendor children and an enrollment roster with names of vendor children marked.

**File in folder or notebook.**

**D. RECORDS PERTAINING to FISCAL MANAGEMENT** – refer to “Fiscal Management and Non-Profit Documentation for specific requirements

**Operating Costs** – allowable expenses for the preparation and service of meals and include, but are not limited to: *food costs; food service labor costs; costs for certain non-food supplies; and costs for purchased services.*

- **Food Costs** – Food costs are expenditures for the food used in all meals. Original itemized food and milk receipts and invoices for food service supply purchases (non-food) must be kept to verify that CACFP funds are used to support the food service. Handwritten receipts are not accepted. **Place in a folder or envelope labeled with month and year.**
- **Food Service Labor Costs** – independent centers must document

**Documentation of Non-Profit Foodservice** - (CACFP-214)

This form must be completed monthly when total food total less than the CACFP claim. **Place in a folder or envelope labeled with month and year.**

### **E. TRAINING REQUIREMENTS and RECORDS**

**CACFP Annual Training Documentation** - (CACFP 222) - Documentation of **annual** CACFP training for the center staff is required. Use of the CACFP provided form is not required but training must include CACFP required topics. **File in folder or notebook.**

### **F. OTHER REQUIRED RECORDS**

**Beneficiary (racial/ethnic) Data** - (CACFP-226)

Documentation of **annual** completion of this form is required. **File in folder or notebook.**

**The following items must be posted in an area that is visible to the public:**

- “And Justice for All Poster” with current Federal Relay Service contact information
- Current Child Care License **or** License Exempt Letter (DC-100)

**Sanitation and Fire Inspection Records** (if applicable) - **File in folder or notebook.**

**Catered or Vended Meals, if applicable** - sponsor must maintain:

- Food service management company **contract or agreement**,
- Current state or local **health certification** and
- Production Records** (CACFP -223)
- Daily record of **snack and/or meals prepared or delivered** for each meal service
- Evidence that the contractor was obtained using fair and competitive practices.



**Additional Records required for SPONSORING ORGANIZATIONS (SOs)**

SOs are contractors responsible for two or more facilities, either under the sponsor’s jurisdiction (affiliated) or not under the corporate umbrella (unaffiliated). The SO must maintain all center records (originals) at a central location identified in the Management Plan during licensed business hours and be available for review within one hour of a state representative’s arrival.

**Site Visit Monitoring Reports** – (CACFP 404)

The SO must monitor each center for Program compliance at least three times every year (within a 12 month period).

**Records documenting attendance at training of each staff member with Monitoring responsibilities.**

**Documentation of Disbursements**

The SO must have documentation of the dates and amount of disbursement made to each facility within 5 working days from the CACFP claims processing date (unaffiliated centers only).



# Organizing CACFP Records



- 3 - ring binder(s)
- File box or cabinet
- 3 hole punch
- 12 large envelopes - 1 for each month
- Clipboard(s)
- File folders
- Colored highlight markers

**DAILY RECORDS** – Complete these records daily and maintain (original documents) on a clipboard or in a folder. At end of month file original records with monthly records (in a labeled binder or notebook):

- Daily Attendance records and/or sign - in/out records
- Daily Meal count records – documented at point of service
- Daily Dated Menus – meals served that meet Program requirements
- Daily Meal Delivery – daily number of snacks and/or meals prepared or delivered (if vended) for each meal service
- Food Production records – required for centers using a caterer or contract food service management company

**MONTHLY RECORDS** - Retain these original records:

- Program activities documentation – each site must have documentation of organized, regularly scheduled enrichment or educational activities (structured and supervised)
- Original machine generated dated and itemized CACFP food and milk receipts
- Original machine generated dated and itemized non-food Program supplies
- Documentation of Program labor cost
- Documentation of non-profit foodservice
- Commercially processed food documentation (CN labels)

**YEARLY RECORDS** - Maintain these original (not photocopies) records yearly:

- CACFP training documentation
- Medical food substitution records
- Sanitation and fire inspection reports
- For contracted/catered(vended) meals, original contract or agreement and annual renewal with Food Service Management Company (FSMC)
- Beneficiary data report (racial/ethnic)
- Site Visit Monitoring Reports – for Sponsoring Organizations (SOs)

Additional guidance can be found in the At Risk After School Program Policy and Procedure Manual available under Laws, Regulations & Manuals at: [www.health.mo.gov/cacfp](http://www.health.mo.gov/cacfp)

All required records must be maintained on location during (licensed) hours of business and available for review within **one hour** of arrival by state officials. CFNA reviewer(s) will request CACFP records for one month or more and have the authority is disallow up to 12 months of claims. CACFP records must be retained for three years after the end of the fiscal year to which they pertain. The fiscal year is October 1 through September 30.

# Meal Preparation & Contracting for Food Services

The best system of meal preparation in a given situation will depend upon such factors as the type of menu desired, the availability of food service equipment, space and personnel, and the budget of the organization.

Institutions participating in the CACFP who plan to purchase meals served for Program participants from outside sources must follow proper procedures in purchasing these services. Institutions that will expend \$150,000 or more per year on CACFP meals must follow a *formal competitive bid process* to obtain meals located in Sub-paragraph A of the “Contracting for Food Services” document at:

[http://health.mo.gov/living/wellness/nutrition/foodprograms/cacfp/pdf/Contracting\\_Food\\_Svc.pdf](http://health.mo.gov/living/wellness/nutrition/foodprograms/cacfp/pdf/Contracting_Food_Svc.pdf) .

Institutions that will expend less than \$150,000 per year on CACFP meals must follow an *informal competitive bid process* to obtain meals located in Sub-paragraph B of the “Contracting for Food Services”. Both the formal and informal bid processes are described in Chapter 9- Procurement in the Policy and Procedure Manual for At-Risk After School Programs.

The *non-competitive* is used by institutions who obtain their meals through a public or private school participating in the National School Lunch or Breakfast Program(s) and institutions who receive meal services obtained through a competitive process by another department of the same organization (sub-paragraph C). The following list includes the types of food service systems

## **MEAL PREPARATION SYSTEMS:**

- 1. On Site:** On Site preparation, commonly called “self prep” is the most commonly used food service system. The meals are prepared at the same physical location (kitchen) where they are to be served. This is usually the most economical method when the center has a kitchen, sufficient food preparation equipment, and available staff. *The institution will follow the basic recordkeeping requirements of the CACFP.*

All or part of the food may be prepared on site and the remainder purchased by the institution from an outside source, such as a school, hospital, or commercial vendor or farmers market. The FNS Instruction 796-2, Rev. 4 provides guidance for funding food grown by and used in the child care center’s meals. This option offers education opportunities and may decrease food costs.

**Central Kitchen:** meals are prepared in a kitchen at one of the institution’s physical locations by the institution’s employee(s) and delivered to another one of the institution’s physical locations. *The institution will follow the basic recordkeeping requirements of the CACFP plus daily meal delivery tickets, where applicable.* Contact CFNA for specific requirements for your circumstances.

- 2. Purchasing from a School:** Meals may be purchased from *public or private non-profit school* that participates in the National School Lunch Program (NSLP), either in bulk or as individual packaged units. An independent center that receives meals

from a school must enter into a written **agreement** with that school/district. An example of this type of agreement is when a school provides meals to a Head Start center.

This annual agreement must contain the basic provisions of the Program requirements (*non-competitive* bid process). Use the prototype Non-Competitive Process “*Sample Agreement*” located under Section C (Non-Competitive Process). Federal regulations exempt organizations from having to competitively bid for catered meals when those meals are purchased through schools participating in the NSLP or School Breakfast Programs. Signing an agreement with a school to provide meals does not relieve the independent center of its Program responsibilities for monitoring and recordkeeping. Additional recordkeeping is required when an institution obtains meals from a school [7 CFR 226.19(a)(b)(7)].

Organizations who receive meal services obtained through a competitive process by another department of the same organization, such as a university child care center whose meal services are provided by the campus dining hall or campus student union may also use a *non-competitive* process to obtain their meals. Such organizations may sign an *agreement* with the food service caterer contracted by the organization to provide meals for the entire organization. This type of situation is common in large organizations such as hospitals, nursing homes, schools, governmental entities and universities, where food services are centralized. As long as the meals provided to the centralized food service were obtained in a competitive manner through a formal bid process, those same services may be used by the CACFP organization. Use the sample agreement provided by MDHSS-CFNA when obtaining meals in this manner.

- 3. Purchasing From a Food Service Management Company:** Food service management companies are organizations that prepare and deliver meals. An independent center that purchases meals from a food service management company (FSMC) must enter into a written contract with the company. The bid prototypes and CACFP guidance on meeting procurement standards are located on the website at: Signing a contract with a FSMC does not relieve the center of its Program responsibilities for monitoring and recordkeeping. Regulations require that a copy of the contract be submitted to CFNA before the beginning of Program operations under the contract; and all bids totaling \$150,000 or more shall be submitted for State agency approval before the institution accepts and signs any contract. In addition, all bids shall be submitted to the State agency for approval before accepting a bid which exceeds the lowest bid. CFNA shall respond to any request for approval within 10 working days of receipt [7 CFR 226.21(a) and (c)].
- 4. Purchasing from a Commercial Vendor:** Commercial vendors are public organizations (hospitals, college cafeterias, etc.), private commercial enterprises (caterers), or individuals that provide non-food items or individual food items but not complete meals. An independent center that purchases from a commercial vendor must enter into a written contract with the vendor following the guidelines for the formal or informal bid competitive process, depending on annual meal expenditures.



**Additional recordkeeping is required** when a CACFP institution obtains meals from a school. The **school/district** that provides meals to institutions under an *agreement* must provide the following documentation to the CACFP contractor on a weekly, or no less than a monthly basis:

- Food costs to substantiate the reimbursement
- Daily dated menus using a minimum of a two week menu cycle
- Daily meal delivery tickets to verify the amount of food and/or number of meals provided to the center
- Production records - refer to Section 7.7 in the Policy and Procedure Manual for At-Risk After School Programs

**In addition to the records required under an Agreement**, meals obtained from a **commercial vendor/caterer** to institutions must provide the following documentation to the CACFP contractor on a daily, a weekly, or no less than a monthly basis:

- Documentation of paid invoices to verify contractual accountability
- Meals per labor hour recordkeeping to document staff allocation



**Federal regulations prohibit institutions from contracting out the management responsibilities of the CACFP, including but not limited to:**

- Ordering meals
- Maintaining program records
- Submitting claims for meal reimbursement
- Training and monitoring
- Determining eligibility for free or reduced-price meals

The institution must monitor the conditions set forth in the food service contract and compliance with CACFP requirements. The MDHSS-BCFNA will not intervene in contract disputes.



It is the responsibility of the institution to monitor the requirements of the agreement for compliance with the CACFP requirements. First occurrence meal disallowances will be taken at the CACFP monitoring reviews in the following instances when:

- There is no or inadequate processed food documentation (such as CN labels)
- There are no production records or
- The production records indicate that the caterer did not provide enough food to meet the minimum portion requirement

Daily Production Record – Meal \_\_\_\_\_ Week of \_\_\_\_\_

| Menu Name (ex. “Hamburger on bun” is the menu name) | Number to be Served | Food items used (ex. “3.2 oz. ground beef patty” and “hamburger bun” are the food items used) | Amount of each item prepared or delivered | Number of servings Used | Number of servings leftover (optional) |
|---|---------------------|---|---|-------------------------|--|
|   |                     |   |   |                         |  |
|   |                     |   |   |                         |  |
|   |                     |   |   |                         |  |
|   |                     |   |   |                         |  |
|   |                     |   |   |                         |  |
|   |                     |   |   |                         |  |

Milk served for all Supper meals is either low-fat (1%) or fat-free (skim); CN labels for commercially processed menu items is required and correct portion size must be used to be creditable. See policy 7.7 – At-Risk manual for more information.  
 Revised 7-2014

# Daily Production Record – Meal Supper Week of May5

| Menu Name (ex. "Hamburger on bun" is the menu name)                                    | Number to be Served | Food items used (ex. "3.2 oz. ground beef patty" and "hamburger bun" are the food items used)                           | Amount of Food prepared or delivered  | Number of servings Used | Number of servings leftover (optional) |
|--|---------------------|---|---|-------------------------|--|
| Turkey & Cheese Sub<br>HM Vegetable Soup<br>Watermelon cubes<br>Milk                   | 40                  | 1 ½ oz. Deli turkey<br>1, ½ slice Swiss cheese<br>¾ C soup<br>½ C. watermelon<br>Deli bun<br>Milk                       | 3.75 # turkey<br>40, ½ oz slices Swiss<br>~ ½ C vegetables<br>14# watermelon<br>2 oz. bun<br>45, ½ pints              | 35                      | 5*                                     |
| CN Chicken Nuggets<br>Baby Carrots<br>Strawberries<br>Breeding from CN nuggets<br>Milk | 45                  | 5 Chicken Nuggets<br><br>Fresh baby carrots (¼ C)<br>½ C. Frozen Sliced Strawberries<br>Milk                            | 9 pounds (5, .7 oz nuggets = 2 oz meat & 1 ½ grain/bread)<br>3.5 # carrots<br><br>13# strawberries<br><br>45, ½ pints | 45                      | 0                                      |
| Hamburger on a bun<br>French Fries<br>Mixed Fruit Cup<br>Milk                          | 35                  | Ground beef patty<br><br>¼ C. Crinkle Cut Fries<br>½ C. Fruit Cocktail<br>Hamburger Bun<br>Milk                         | 35 – 3.2 ounce patties<br>3 pounds<br>2 #10 cans<br>3, 12 count pkgs.<br>35, ½ pints                                  | 32                      | 3                                      |
| Baked Fish Fillets<br>Macaroni and Cheese<br>Green Beans<br>Peach Slices<br>Milk       | 40                  | 2 oz Cod Fillet<br>¼ C. Cooked Macaroni<br>2 oz. American cheese<br><br>¼ C. Green Beans<br>½ C. Sliced Peaches<br>Milk | 5 pounds<br>1 pound<br><br>5 # American Cheese Food<br>1 #10 can<br>2 #10 cans<br>40, ½ pints                         | 35                      | 5                                      |
| <i>Sample - *center does Not use Offer vs. Serve</i>                                   |                     |   |   |                         |  |

Milk served for all Supper meals is either low-fat (1%) or fat-free (skim); CN labels for commercially processed menu items is required and correct portion size must be used to be creditable. See policy 7.7 - At-Risk manual for more information.

Revised 7-2014



Missouri Department of Health and Senior Services  
Community Food and Nutrition Assistance Child  
and Adult Care Food Program

**Agreement to Furnish Food Service**

THIS AGREEMENT is made and entered into between (school) \_\_\_\_\_  
\_\_\_\_\_ and the (independent center or sponsoring organization)  
\_\_\_\_\_.

WHEREAS the facilities of the (center or sponsor) \_\_\_\_\_  
are not adequate for preparing and serving meals to enrolled children, while the facilities of  
the (school) \_\_\_\_\_ are adequate to serve  
meals to participants. The (school) \_\_\_\_\_  
agrees to supply meals (inclusive/exclusive) of milk to (center or sponsor) \_\_\_\_\_  
\_\_\_\_\_ with and for the rates herein listed:

|                              |                           |
|------------------------------|---------------------------|
| Breakfast..... \$ _____ each | Lunch..... \$ _____ each  |
| Snacks..... \$ _____ each    | Supper..... \$ _____ each |

It is further agreed that the (school) \_\_\_\_\_,  
pursuant to the provisions of the Child and Adult Care Food Program (CACFP) regulations,  
attached copy of which is part of this agreement, will assure that said meals meet the minimum  
meal pattern requirements as to nutritive value and content, and will maintain full and accurate  
records that the (center or sponsor) \_\_\_\_\_  
will need to meet its responsibility including menu records containing the amount of food  
prepared and daily number of mails delivered by type.

These records must be reported to the (center or sponsor) \_\_\_\_\_  
\_\_\_\_\_ promptly at the end of the month. (School) \_\_\_\_\_  
\_\_\_\_\_ agrees also to retain records required under the preceding clause for a  
period of three years after the end of the fiscal year to which they pertain (or longer, if an audit is  
in progress); and upon request, to make all accounts and records pertaining to the CACFP  
available to representatives of the Missouri Department of Health and Senior Services, the U.S.  
Department of Agriculture, and the General Accounting Office for audit or administrative review  
at a reasonable time and place.

This agreement shall be effective as of (date) \_\_\_\_\_. It may be terminated by  
notice in writing given by any party hereto to the other parties at least 30 days prior to the date of  
termination.

IN WITNESS WHEREOF, the parties hereto have executed this agreement as of the dates  
indicated below:

\_\_\_\_\_  
School Official

\_\_\_\_\_  
Center/Sponsor Official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

# DOCUMENTATION OF VENDOR CONTACT

## FOOD CONTRACTS LESS THAN \$150,000

Instructions: Completed form to be sent to the State agency with the Food Service Management Contract

|          | Vendor Name<br>Address<br>Telephone<br>Contact Person | Date of Contact | Method of Contact<br>(phone, fax,<br>in person,<br>etc.) | Meal      | Price Per Meal |                            |                          | Total Price Quote |
|----------|---|-----------------|--|-----------|----------------|----------------------------|--------------------------|-------------------|
|          |   |                 |  |           | Unit Price     | Estimated Servings per Day | Estimated Number of Days |                   |
| VENDOR 1 |   |                 |  | Breakfast |                |                            |                          |                   |
|          |   |                 |  | Lunch     |                |                            |                          |                   |
|          |   |                 |  | Snack     |                |                            |                          |                   |
|          |   |                 |  | Supper    |                |                            |                          |                   |
| VENDOR 2 |   |                 |  | Breakfast |                |                            |                          |                   |
|          |   |                 |  | Lunch     |                |                            |                          |                   |
|          |   |                 |  | Snack     |                |                            |                          |                   |
|          |   |                 |  | Supper    |                |                            |                          |                   |
| VENDOR 3 |   |                 |  | Breakfast |                |                            |                          |                   |
|          |   |                 |  | Lunch     |                |                            |                          |                   |
|          |   |                 |  | Snack     |                |                            |                          |                   |
|          |   |                 |  | Supper    |                |                            |                          |                   |





## Outside School Hours Care Centers and At-risk Afterschool Care Centers Comparison Chart

The chart below highlights the differences between two components of the Child and Adult Care Food Program that provide reimbursement for meals served in Outside School Hours Care Centers and At-risk Afterschool Care Centers

| Requirement                                     | OSHCC  | At-risk Afterschool Centers  |
|---|--|--|
| <b>Eligible Institutions</b>                    | Public, private nonprofit, or qualifying for-profit centers [7 CFR §226.19(a)].  | Public, private nonprofit, or qualifying for-profit centers [7 CFR §226.17a(a)].   |
| <b>Licensing</b>                                | Licensing not required unless there is a State or local requirement for licensing. If there is no State or local requirement for licensing, then centers must meet State or local health and safety standards [7 CFR §226.6(d)]. | Licensing not required unless there is a State or local requirement for licensing. If there is no State or local requirement for licensing, then centers must meet State or local health and safety standards [7 CFR §226.6(d)].             |
| <b>Determination of Reimbursement</b>           | Program may operate in any area. Individual free and reduced-price applications are collected to determine level of reimbursement (free, reduced price, and paid) [7 CFR§226.19(b)(7)(i)].                                       | Program must be located in a geographic area served by a school in which 50 percent or more of the children enrolled are eligible for free or reduced price meals. All meals and snacks are reimbursed at the free rate [7 CFR §226.17a(i)]. |
| <b>Age of Participants</b>                      | 12 years of age and under, children age 15 and under who are children of migrant workers, and persons of any age who meet the definition of “Persons with disabilities”[7CFR§226.19(b)(3)].                                      | School-age children through age 18 (or 19 if the individual turns 19 during the school year) and persons of any age who meet the definition of “Persons with disabilities” [7CFR §226.17a(c)].   |
| <b>Type of Meals Eligible for Reimbursement</b> | Breakfast, snack, and supper. Lunch may be served during school vacations during the regular school year [7 CFR§226.19(b)(4)].   | Snack and supper. Breakfast or lunch may be served in lieu of supper on weekends, holidays, or during school vacations during the regular school year [7 CFR §226.17a(k)].   |
| <b>Number of Reimbursable Meals</b>             | Maximum of two meals and one snack or two snacks and one meal per child per day [7 CFR §226.19(b)(5)].   | Maximum of one snack and one meal per child per day [7 CFR §226.17a(k)].   |
| <b>Meal Patterns</b>                            | CACFP meal patterns [7 CFR §226.20(c)].  | CACFP meal patterns [7 CFR §226.20(c)].  |
| <b>Meal Service Periods</b>                     | School days, weekends, and holidays; no weekend-only programs [7 CFR §226.19(b)(4)].   | School days, weekends, and holidays during the regular school year [7 CFR §226.17a(b)].  |
| <b>Time Restrictions for Meal Service</b>       | None.  | Meals must be served after school, except on weekends and holidays, when meals may be served at any time of day, as approved by the State agency [7 CFR §226.17a(m)].  |

Reference: *At-Risk Afterschool Meals for CACFP A Handbook*, USDA, FNS revised July 2013

## **At-Risk After School and Outside School Hours Care Center Resources**

The internet has a vast amount of information that can assist providers with their Foodservice operation and with education of staff and participants – resources include:



### **Missouri Department of Health and Senior Services CACFP**

<http://health.mo.gov/cacfp> - Access to online claims filing; Downloadable copies of Missouri CACFP forms; and Link to information on other Missouri nutrition programs and activities

**The College of Human Environmental Sciences Outreach and Extension of the University of Missouri-Columbia** <http://outreach.missouri.edu/hes/food.htm> Food & Fitness at Missouri Families; Food Safety; Nutriteach – teacher resources; Food & Nutrition Guides; and Healthy Start preschool curriculum,

**Building for the Future Notice** - This notice describes CACFP, its eligibility requirements, and the types of meals that can be served.

English version: <http://www.fns.usda.gov/cnd/care/Publications/pdf/4Future.pdf>.

Spanish version: <http://www.fns.usda.gov/cnd/care/Publications/pdf/Build4Future.pdf>.

**CACFP At-risk Afterschool Meals Best Practices, 2011 Final Report** - The CACFP At-risk Afterschool Meals Best Practices Report identifies best practices that pilot State agencies and their sponsors used to implement and administer the at-risk afterschool meals component of the CACFP.

[http://www.fns.usda.gov/cnd/care/Publications/pdf/Best\\_Practices\\_Report.pdf](http://www.fns.usda.gov/cnd/care/Publications/pdf/Best_Practices_Report.pdf)

**CACFP Required Meal Patterns** -

[http://www.fns.usda.gov/cnd/care/programbasics/meals/meal\\_patterns.htm](http://www.fns.usda.gov/cnd/care/programbasics/meals/meal_patterns.htm)

**Code of Federal Regulations** - <http://www.gpoaccess.gov/cfr/>

**Dietary Guidelines for Americans** - The Dietary Guidelines for Americans are the cornerstone for Federal nutrition policy and nutrition education activities -

[www.dietaryguidelines.gov](http://www.dietaryguidelines.gov)

**Food and Nutrition Service (FNS)** - The Food and Nutrition Service administers the Child and Adult Care Food Program on the federal level - [www.fns.usda.gov](http://www.fns.usda.gov)

**MyPlate** - MyPlate was developed as an effort to promote healthy eating to consumers. The MyPlate icon is easy to understand and it helps to promote messages based on the 2010 Dietary Guidelines for Americans.

[www.choosemyplate.gov](http://www.choosemyplate.gov)

**National Food Service Management Institute** - [www.nfsmi.org](http://www.nfsmi.org) or <http://nfsmi.org/Templates/TemplateDivision.aspx?qs=cELEPTc> order or download CACFP and other foodservice resources or request training presentations; all are free.

**Reimbursement Rates**

[www.fns.usda.gov/cnd/care/ProgramBasics/Rates/ReimbursementRates\\_Current.htm](http://www.fns.usda.gov/cnd/care/ProgramBasics/Rates/ReimbursementRates_Current.htm)

**State Agency Contact Information**

[www.fns.usda.gov/cnd/Contacts/StateDirectory.htm](http://www.fns.usda.gov/cnd/Contacts/StateDirectory.htm).

**Team Nutrition** - Team Nutrition is an initiative of the USDA Food and Nutrition Service to support the Child Nutrition Programs through training and technical assistance for foodservice, nutrition education for children and their caregivers, and school and community support for healthy eating and physical activity. Users can download recipes, activity sheets and other nutrition related materials - <http://teamnutrition.usda.gov/>

**The Healthy Meals Resource System** - The Healthy Meals Resource System is an online information center for USDA Child Nutrition Programs (CNP) and has been delivering resources to CNP staff since 1995. <http://healthymeals.nal.usda.gov>.

**Memoranda Issued by FNS Relating to the At-risk Afterschool Meals Component of CACFP**

November 12, 2013 CACFP 02-2014 – Use of School and Census Data

November 12, 2013 CACFP 03-2014 – Available Flexibilities for CACFP At-risk Sponsors and Centers Transitioning to Summer Food Service Program (SFSP)

July 26, 2013 CACFP 14-2013 – Monitoring of Licensing Requirements in the Child and Adult Care Food Program

July 26, 2013 CACFP 13-2013 – Health and Safety in the Child and Adult Care Food Program

May 31, 2013 CACFP 12-2013 - Transitioning from the Summer Food Service Program to the Child and Adult Care Food Program At-risk Afterschool Meals

April 26, 2013 - Guidance Related to the ADA Amendments Act

March 29, 2013 - Additional State Agency Requirements in the Child and Adult Care Food Program

January 24, 2013 - Tax Exempt Status for Private Nonprofit Organizations and Churches in the Child & Adult Care Food Program and the Summer Food Service Program

November 28, 2012 - Streamlining At-risk Meal Participation of School Food Authorities

November 23, 2012 - Determining Area Eligibility Based on School Data

October 2, 2012 - Federal Small Purchase Threshold Adjustment

July 24, 2012 - Tribal Participation in the CACFP & the SFSP

July 11, 2012 - Smoothies Offered in Child Nutrition Programs

May 1, 2012 - Health and Safety Standards for Outside-School-Hours Care Center and At-Risk Afterschool Care Centers

February 17, 2012 - The At-Risk Afterschool Meals Component of the Child and Adult Care Food Program, Questions and Answers

January 25, 2012 - Changes to the FNS-44, Report of the CACFP

September 15, 2011 - Child Nutrition Reauthorization 2010: Nutrition Requirements for Fluid Milk and Fluid Milk Substitutions in the Child and Adult Care Food Program, Questions and Answers.

May 17, 2011 - Clarification on the Use of Offer vs Serve & Family Style Meal Service

May 11, 2011 - Child Nutrition Reauthorization 2010: Water Availability in the Child and Adult Care Food Program

January 21, 2011 - Eligibility of Expanded Learning Time Programs for Afterschool Snack Service in the National School Lunch Program (NSLP) and the Child and Adult Care Food Program (CACFP)

December 17, 2010 - Child Nutrition Reauthorization 2010: Elimination of Block Claim Edit Checks in the Child and Adult Care Food Program

December 17, 2010 - Child Nutrition Reauthorization 2010: Nationwide Expansion of At-Risk Afterschool Meals in the Child and Adult Care Food Program

July 3, 2007 - Accommodations for Non-Traditional Program Operators

June 3, 2003 - Review Requirements for At-risk Afterschool Care Centers Participating in the Child and Adult Care Food Program

**Reference:** *At-Risk Afterschool Meals A Child and Adult Care Food Program Handbook*; U.S. Department of Agriculture, Food and Nutrition Service, Revised July 2014 - <http://www.fns.usda.gov/cnd/care/Publications/pdf/Handbook.pdf>



# ***Exercise from Pg 42 - Menu Answer Key***

## **Snack and Supper Menu Exercise**

Problems with the menu include:

1. **Monday Snack** – Menu is not creditable since apple juice and carrot sticks are both fruit/vegetable components. You need a second food item from another component.
2. **Monday Supper** – Menu is not creditable since the second fruit/vegetable is missing. Potato chips are not creditable. Also, the type of fruit served should be specified and the hot dog must be all meat with no binders, extenders or fillers to be creditable.
3. **Tuesday Snack** – Menu **is** creditable; however, cheese cubes are not creditable as fluid milk and must be listed under meat/meat alternate component.
4. **Tuesday Supper** – Menu is not creditable since the meal needs a second fruit/vegetable component. Pizza crust is a bread/grain component.
5. **Wednesday Snack** – Menu is not creditable since pudding is not creditable. Another component must be served.
6. **Wednesday Supper** – Menu *may* be creditable if the CN label or manufacturer's product statement credits the breading on the chicken nugget as a grain/bread in addition to the meat/meat alternate contribution. Mashed potatoes are a vegetable, not a grain/bread.
7. **Thursday Snack** – Menu **is** creditable.
8. **Thursday Supper** – Menu is not creditable since the bread/grain component is missing. Baked beans and fries should be listed as the two fruit/vegetable components. Ketchup and pickles are not vegetables; they should be listed as an 'other' item.
9. **Friday Snack** – Menu is not creditable since sherbet is not creditable. This meal needs a second component from any group other than fruit/vegetable.
10. **Friday Supper** – Menu **is** creditable.

Another menu error – two high fat meats (hotdog & sausage on pizza) were served more than the once a week maximum requirement.

Milk is required at every supper meal; however, you need to note (footnote) or specify the milk type at meals. Note: only low-fat (1%) or fat-free (skim) milk are approved (creditable) for children two years and older.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
COMMUNITY FOOD and NUTRITION ASSISTANCE  
CHILD and ADULT CARE FOOD PROGRAM  
**INSTRUCTIONS for COMPLETING CACFP-227**

**REQUEST for SPECIAL MEALS AND/OR ACCOMMODATIONS**

1. **Center/School/Agency:** Print the name of the center, school or agency that is providing the form to the parent/guardian.
2. **Site:** Print the name of the site where meals will be served (e.g., child care center, school site 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 participant 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, peanut allergy, 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 affects disability. For example: "Allergy to peanuts causes a life-threatening reaction affecting the respiratory system."
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 fluid milk."  
**B. Foods to Be Substituted:** List specific foods to include in the diet. For example, "calcium fortified juice."
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>

For more information, refer to the subject information in the Program specific Policy and Procedure Manual at:  
[www.health.mo.gov/cacfp](http://www.health.mo.gov/cacfp)