#### Missouri Department of Health and Senior Services Summer Food Service Program

# CNPWeb Information Sheet Update Instructions

2017

As of March 1, 2007 the Summer Food Service Program (SFSP) began using a online web-based system – CNP Web. This is intended to serve as a quick start guide and not a comprehensive explanation of the operation of the system.

## **Basic Application Procedures**

- Go to https://dhssweb04.dhss.mo.gov/cnp
- Log in using your User ID and Password. If you do not have one or have forgotten it please contact our office at (888) 435-1464.



## Missouri Department of Health & Senior Services

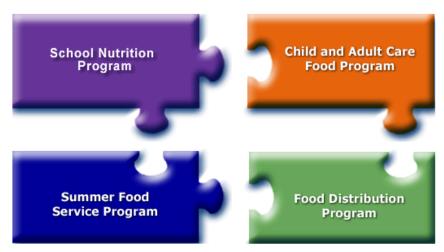
Community Food and Nutrition Assistance



#### **Program Selection**

- After a successful login, you will see four puzzle pieces. Select the blue Summer Food Service Program piece.

Note: If you participate in the Child and Adult Care Food Program, you will have access to either the SFSP or CACFP systems by choosing the appropriate puzzle piece.



Click on a puzzle piece above for the Child Nutrition Program you wish to access!

Exit Web Site

#### **Notification Page**

 This is where important SFSP information will be posted. This page will include links to instructions, forms, program news and updates. After carefully reading this page, click Continue.

## Welcome to the Summer Food Service Program CNPWeb System

Note: It is critical that you review this page each time you log in for current information. This page may be used by SFSP program staff in lieu of sending e-mail updates or reminders to sponsors.

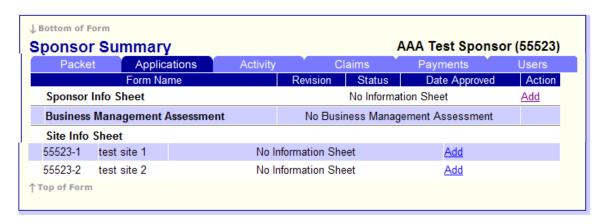
#### **Program Year Selection**

- Choose the appropriate program year (2017).

Program Year	Program Begin Date	Program End Date
2007	October 1, 2006	September 30, 2007
2008	October 1, 2007	September 30, 2008
2009	October 1, 2008	September 30, 2009
<u>2010</u>	October 1, 2009	September 30, 2010
<u>2011</u>	October 1, 2010	September 30, 2011
<u>2012</u>	October 1, 2011	September 30, 2012
<u>2013</u>	October 1, 2012	September 30, 2013
<u>2014</u>	October 1, 2013	September 30, 2014
<u>2015</u>	October 1, 2014	September 30, 2015
<u>2016</u>	October 1, 2015	September 30, 2016
2017	October 1, 2016	September 30, 2017

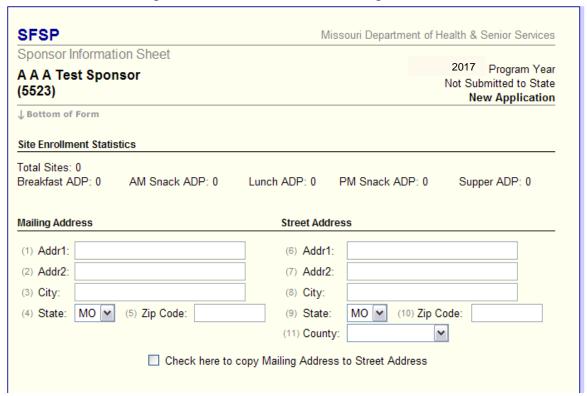
## **Sponsor Summary Page**

Select the Applications Tab



## **Sponsor Information Sheet**

- Click on Add next to Sponsor Information Sheet and complete



**NEW!** Responsible Individual (Formerly Authorized Representative)

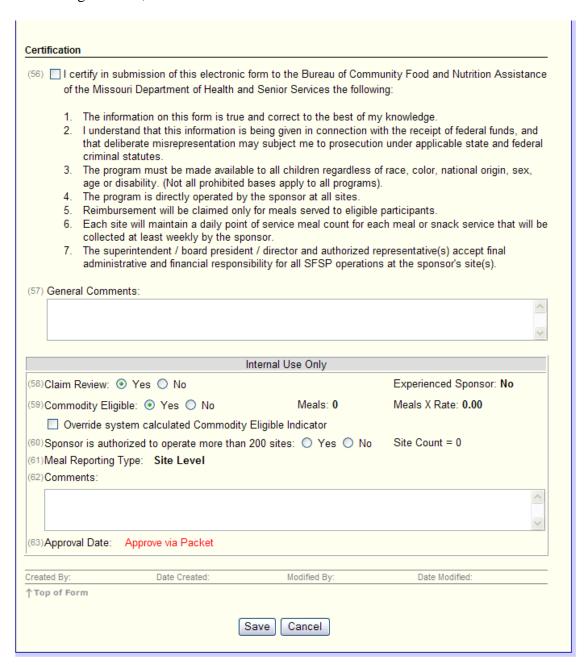
The <u>Responsible Individual</u> is an individual who has <u>final administrative and financial</u> <u>responsibility</u> for operating the Federal program under agreement with the Missouri Department of Health and Senior Services (MDHSS). This individual has signature authority for Summer Food Service Program (SFSP) operations and will be held responsible for any determination of serious deficiency in the operation of the Program.



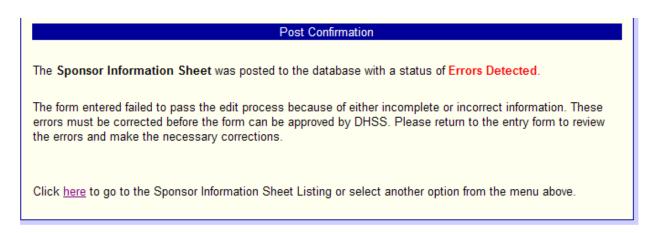
#### **Sponsor Information Sheet**

(Continued)

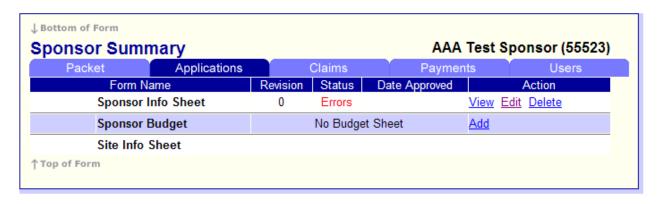
- You *must* check the Certification box (54) to submit your Sponsor Information Sheet. After checking that box, click save.



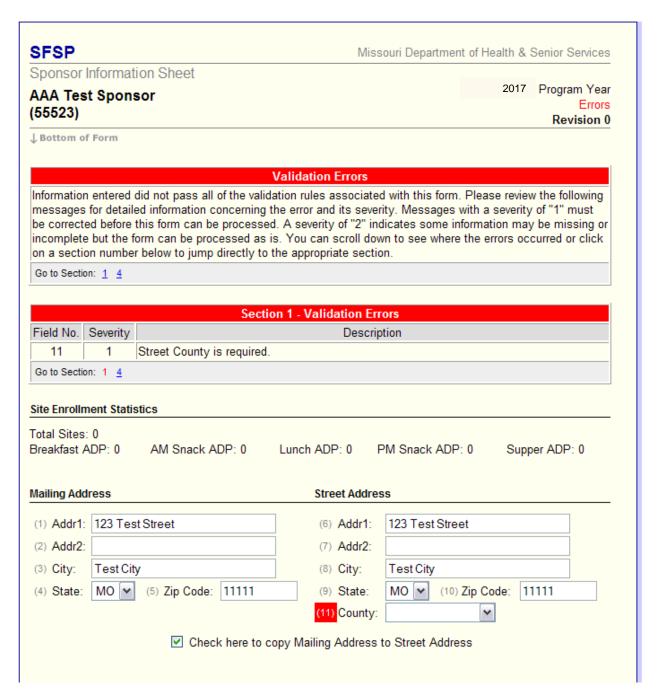
- If there are sponsor application errors, an error message will be generated with the error(s) highlighted.



- If there are errors click <u>here</u> on the Sponsor Info Sheet then click on Edit under the Action heading to the right of Sponsor Info Sheet.



- There will be a screen similar to the following, with the errors highlighted, will appear.



- Correct any errors, check the certification box and click Save

- At this point, you should see a Post Confirmation message that indicates that the Sponsor Information Sheet is in *Not Submitted to State* Status
- Click here to return to the Sponsor Summary

#### Post Confirmation

The Sponsor Information Sheet was posted to the database with a status of Not Submitted to State.

When you have completed entering all of the forms required, please submit them to DHSS for final approval.

Click here to go to the Sponsor Information Sheet Listing or select another option from the menu above.

## **Sponsor Budget**

- Click on <u>Add</u> next to Sponsor Budget, complete and press Save. <u>NOTE</u>: Public Schools are now exempt from entering a budget.

ponsor Summary				AAA Test Sponsor (55523)			
Packet Application Form Name Sponsor Info Sheet		ations Claims		Payments	Users		
		Revision 0	Status	Date Approved	Action		
			Not Submitted to State		<u>View</u> <u>Edit</u> <u>Delete</u>		
Sponsor Bud	dget	0	Not Submitted to State		<u>View</u> <u>Edit</u> <u>Delete</u>		
Site Info Sh	eet						
Top of Form							

- If there is a budget error, the error will be highlighted, similar to the Sponsor Info Sheet.
- Correct and Save
- At this point the Budget should be in *Not Submitted to State* Status as indicated above

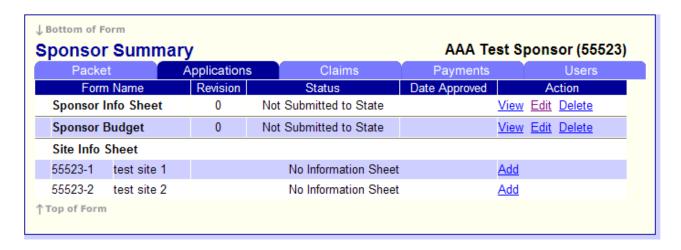
#### Post Confirmation

The Sponsor Budget was posted to the database with a status of Not Submitted to State.

When you have completed entering all of the forms required, please submit them to DHSS for final approval.

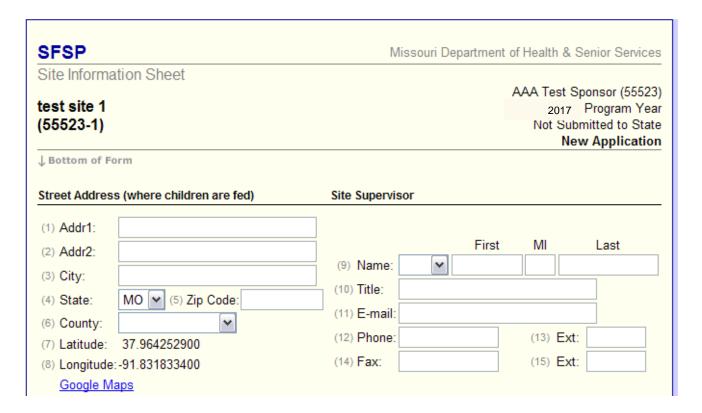
Click here to go to the Sponsor Budget Listing or select another option from the menu above.

- Click <u>here</u> to return to Sponsor Summary
- Your Sponsor Summary should now look like this:



## **Site Information Sheet**

- Click on Add next to Site Info Sheet and complete it.

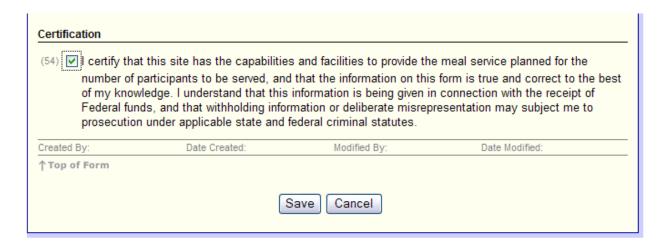


For each meal you are serving at your site, you must identify *which* vendor, FSMC or Central Kitchen is providing that meal. This is especially beneficial for those sponsor who may have multiple sources for single sites *AND* those have multiple sites with different food sources.

In the first drop-down box, select whether the meal is Self-Prep (S), Vended (V), or Central Kitchen (C).

Meal Service		(A)	(B)		(C)		(D)	(E)	(F)
Meal Type S - Self-Prep V - Vended C - Central Kitchen		Begin Time	End Time		s Meals		Estimated Attendance	Est. # Eligible (Camps Only)	CAP
(37) Breakfast	~								
	/	ect Vendor, F	SMC or Centr	al Kitche	en 🔽				
(38) AM Snack C									
V	المح	ect Vendor, F	SMC or Centr	al Kitche	en 🔽				
(39) Lunch	~								
	Sel	ect Vendor, F	SMC or Centr	al Kitche	en 🕶	$\triangleright$			
(40) PM Snack	~								
<b>/</b>	Sel	ect Vendor, F	SMC or Centr	al Kitche	en 🔽				
(41) Supper	~								
/	Sel	ect Vendor, F	SMC or Centr	al Kitche	en 🔽				

- If you selected Vended or Central Kitchen, you are required to select one of the food sources that you have entered on your *Sponsor Information Sheet*. You select that from the list in the drop-down list.
- Check certification box and click save.



- If there is a Site Info Sheet error(s), it will be highlighted. Correct and resave.
- The form must be in *Not Submitted to State* Status, then to continue, click <u>here</u> to return to Sponsor Summary

#### Post Confirmation

The Site Information Sheet was posted to the database with a status of Not Submitted to State.

When you have completed entering all of the forms required, please submit them to DHSS for final approval.

Click here to go to the Site Information Sheet Listing or select another option from the menu above.

- Repeat above steps for additional sites.
- If there is a site not listed on the Sponsor Summary please submit a paper Site Information Sheet for each site you would like to add.
- If there is a site listed that needs removed please call 888-435-1464 for assistance.

sponsor Summary					31.0	ponsor (5552	
Packet		Applications	Claims	Payments		Users	
Form Name		Revision	Status	Date Approved		Action	
Sponsor Info Sheet		0	Not Submitted to State		<u>View</u>	Edit Delete	
Sponsor Budget		0	Not Submitted to State		<u>View</u>	Edit Delete	
Site Info	Sheet						
55523-1	test site 1	0	Not Submitted to State		<u>View</u>	Edit Delete	
55523-2	test site 2		No Information Sheet		Add		

## **Packet**

Once the Sponsor Information Sheet, Business Management Analysis, Sponsor Budget Form, and Site Information Sheet (for each site) are all complete:

	Pack	et Applications	Activity	Claims	Paymer	nts	Users
tem	Req	On-Line F	orms Description		Count/Date	S	tatus
1	*	Sponsor Information Sheet					bmitted to State
2	*	Site Information Sheet			1 of 1		bmitted to State
tem	Req	Off-Line F	orms Description		Date Sent	Date Received	Date Complete
3		Documentation of 501(c)(3)	Status				
4		Vendor Input/Direct Deposit	Form	Ż	ł		
5		Policy Statement		Ż	ł		
6		Food Service Contract		<u>.</u>	}		
7		Nutritionist Pre-approval Visi	t				
8		Program Services Contract					
9		E-Verify Notarized Affidavit a 3)	nd Box B (Exhibit A,	Pages 2-	ł		
10		Sponsor Training Attendance	•				
11		E-Verify Memorandum of Un	derstanding	Q	)		
12	*	Business Management Asse completed on the DHSS site		t be	3/1/2016		
13		DUNS Information		陸	ŀ		

- Select the Packet tab on the Sponsor Summary page
- Verify all On-Line Forms are in Not Submitted to State status
- Any Form with the asterisk (\*) beside it must be completed and returned to our office.
- Then click <u>here</u> to Update Dates on Off-Line Forms that are required (forms required for each sponsor will be highlighted by an asterisk (\*).

em	Req	Form Description	Date Sent	Date Received	Date Complete
1		Documentation of 501(c)(3) Status			
2		Vendor Input/Direct Deposit Form			
3		Policy Statement			
4		Food Service Contract			
5		Nutritionist Pre-approval Visit			
6		Program Services Contract			
7		E-Verify Notarized Affidavit and Box B (Exhibit A, Pages 2-3)			
8		Sponsor Training Attendance			
9		E-Verify Memorandum of Understanding			
10	*	Business Management Assessment (BMA) (must be completed on the DHSS site)			
11		DUNS Information			

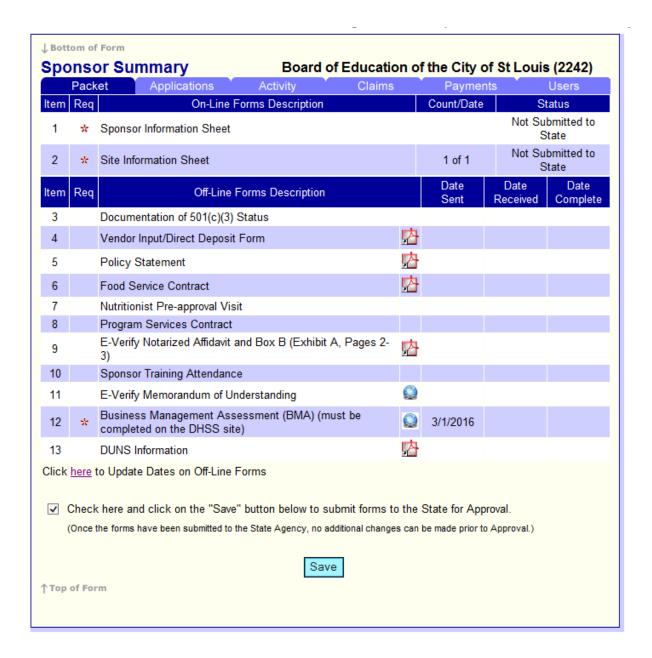
- Enter the date the document was submitted to CFNA in Date Sent box.
- Click Save

#### **BMA**

Again this year, all SFSP Sponsors are required to complete the Business Management Assessment (BMA) to be eligible to participate in the program. Last year, this form was completed within CNPweb. *Beginning in 2016* the form must be accessed on the Department of Health and Senior Services home page at <a href="https://health.mo.gov/atoz/bma/index.php">https://health.mo.gov/atoz/bma/index.php</a>.

Once this has been completed, you are required to enter the date of completion in the *Date Sent* column for the appropriate line in the Off-line Form Update portion of the packet.

For complete instructions go to the **DHSS Contractor Resources Page**.



- Check the box to "Save" and Save forms to the State for Approval and click Save.

	Pac	ket Applications	Claims	Payments	Users	
em	Req	On-Line Forms Descrip	tion	Count/Date	Si	tatus
1	*	Sponsor Information Sheet			Pendin	g Approval
2	*	Sponsor Budget Form			Pending Appro	
3	*	Site Information Sheet		2 of 2	Pending	g Approval
4		Forms Submitted to State for Approval		2/9/2011	Pending	g Approval
em	Req	Off-Line Forms Descrip	otion	Date Sent	Date Received	Date Complet
5	*	Geographical Boundary Map		3/1/2011		
6		Documentation of 501(c)(3) Status				
7	*	Food Service Contract		3/1/2011		
8		Enrollment Form				
9		Contract				
10	*	Notarized Affidavit		3/1/2011		
11		Business Entity Certification				
12	*	E-Verify Memorandum of Understanding		3/1/2011		
13	*	Nutritionist Pre-approval Visit		3/1/2011		
14	*	New Sponsor Training Attendance		3/1/2011		
15	*	Policy Statement		3/1/2011		
16	*	Direct Deposit Form		3/1/2011		
17	*	Vendor Input Form		3/1/2011		

- Status of Information Sheets and Budget should now be *Pending Approval*. At this point your application has been properly submitted to the state.

NOTE: Screenshot of example was changed to show different status information.

	Pac	or Summary  ket Applications Claims	Payments	U:	sers	
tem	Req	On-Line Forms Description	Count/Date	S	tatus	
1	*	Sponsor Information Sheet		Ар	proved	
2	*	Sponsor Budget Form		Ар	proved	
3	*	Site Information Sheet		Ар	Approved	
4		Forms Submitted to State for Approval	2/9/2011	Ар	proved	
5		Forms Approved by the State	2/9/2011	Ар	proved	
tem	Req	Off-Line Forms Description	Date Sent	Date Received	Date Complete	
6	*	Geographical Boundary Map	3/1/2011	3/5/2011	3/5/2011	
7		Documentation of 501(c)(3) Status				
8	*	Food Service Contract	3/1/2011	3/5/2011	3/5/2011	
9		Enrollment Form				
10		Contract				
11	*	Notarized Affidavit	3/1/2011	3/5/2011	3/5/2011	
12		Business Entity Certification				
13	*	E-Verify Memorandum of Understanding	3/1/2011	3/5/2011	3/5/2011	
14	*	Nutritionist Pre-approval Visit	3/1/2011	3/5/2011	3/5/2011	
15	*	New Sponsor Training Attendance	3/1/2011	3/5/2011	3/5/2011	
16	*	Policy Statement	3/1/2011	3/5/2011	3/5/2011	
17	*	Direct Deposit Form	3/1/2011	3/5/2011	3/5/2011	
18	*	Vendor Input Form	3/1/2011	3/5/2011	3/5/2011	

Please feel free to check back on the Sponsor Summary page to review your application status. When the Status is *Approved*, your application has been approved by the state. Please note that your update will not be considered complete and will not be approved until all off-line (i.e., paper) forms, if any are required, have been received by the Bureau of Community Food and Nutrition Assistance.

## **Tips for Navigating the Web-Based System**

- 1. Do not use your Internet Explorer's Back button. Use the menu (in the blue section) on the top left of the screen, or use the "breadcrumb trail," (under the blue bar) to navigate from screen to screen.
- 2. Each time you submit the info sheet or 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 mouse to point and click into the field you want to complete. Try not to use your Enter key. If you do, the info sheet or claim will submit (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. Claim revisions are 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. Inform the Bureau of Community Food and Nutrition Assistance <u>immediately</u> if an individual with access to the SFSP web-based system is leaving your organization so that access may be revoked.
- 3. Submit a Network User Access Request form to request online access for new employees.
- 4. User IDs and passwords are assigned to individuals only, and may not be shared.