

# Health and Nutrition Programs

## Resource Manual



# CACFP

*Building for the Future*

In accordance with Federal law and the United States Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Ave, SW, Washington, DC 20250-9410 or call toll free (866)632-9992 (Voice). Individuals who are hearing impaired 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 05/2014)

# *Welcome*

*To*

# *CACFP Training*

## **Introduction**

This Health and Nutrition Programs (HNP) Child and Adult Care Center Resource Manual addresses frequently asked questions regarding the administration of the Child and Adult Care Food Program (CACFP) funded by the United States Department of Agriculture (USDA). The information provided is based on current Federal laws, regulations and policy issued by USDA.

If there are questions regarding the guidance information, forms or areas that need further clarification please contact:

**Health and Nutrition Programs**  
**P.O. Box 1437, Slot S-155**  
**Little Rock, Arkansas 72203-1437**

**501.320.8959 (local)**

**1.800.482.5850 – extension 2.8869**

**Arkansas Department of Human Services**  
**Updated May 2016**

# Program Intent

The mission of the United States Department of Agriculture's (USDA) Food and Consumer Service (FCS) is to alleviate hunger and to safeguard the health and nutritional well being of the Nation through the administration of nutrition education and domestic food assistance programs. One such program is the Child and Adult Care Food Program (CACFP).

FCS recognizes that maintaining a high quality, nutritious meal service requires a commitment to excellence on the part of the local sponsors and center operators. We applaud the efforts of the many dedicated persons who ensure that the enrolled child and adult participants are served wholesome, appealing and nutritious meals in a sociable environment while meeting the requirements for Federal assistance.

## Legislative History

The earliest Federal meal assistance program for pre-school children in a day care was the Special Food Service Program for Children, a year-round component, established by Public Law 90-302 in 1968. Authorized initially as a three-year pilot program, it provided reimbursement specifically limited to meals served in day care centers, settlement houses and recreation centers that provided child care services in areas with high concentrations of working mothers and where poor economic conditions existed. Congress reaffirmed support for this limited assistance in 1972, when Public Law 92-433 extended this assistance through Fiscal Year 1975.

In 1981, Public Law 97-35 reduced the eligibility age limit from 18 to 12 years, except for migrant workers' children who can participate through age 15, and disabled persons attending eligible facilities. It also set a limit on the maximum number of reimbursable meals at three meals per day (two meals and one supplement (snack) or two supplements and one meal). A 1982 provision of Public Law 97-370 specified that reimbursement claims must be submitted to the administering agency within 60 days following the claiming month to be eligible for payment.

The adult component of the CACFP was authorized on November 10, 1987, when Congress amended the National School Lunch Act with Public Law 100-175 to allow certain adult day care centers to participate in the Child Care Food Program as eligible program institutions.

In general, adult care centers may participate in the Program in much the same manner and under the same terms and conditions as child care centers. The differences between the child care and adult care components of the Program are those necessary by the nature and the ages of the populations they serve or those specifically required by legislation. In developing the adult day care component of the Program, the USDA was influenced by the philosophy and policies of the National Council on Aging. While institutions can participate in both the USDA's CACFP and the Older American Nutrition Programs (Title III of the Social Security Act), reimbursement for the same meal served is allowed under only one of the Programs.

## **Training Requirements**

Training is essential to a good Food Program operation. At least one key person from each institution must be trained in meal pattern and record keeping requirements prior to the approval of the institution's agreement (contract/application) with the CACFP. On-going training must be received at least annually to fulfill program and contract requirements. Health and Nutrition Programs (HNP) will make every effort to ensure that institution personnel are familiar with all aspects of the CACFP.

## **Funding**

Funding for the CACFP is 100% Federal and is made available through a USDA performance-based grant. An approved institution must operate a non-profit food service operation and must be in compliance with all laws, regulations and policies set forth by USDA, HNP and the Arkansas Department of Human Services to earn any meal reimbursement. All food program funding must be fully utilized within the institution's food service operation with a reasonable amount being spent on food-only items. HNP food program records and itemized receipts must be maintained at the institution (or if multiple facilities, in a location stated in the approved agreement) and must be available for review at all times.

## **Initial and Compliance Records Reviews**

CACFP personnel may review an institution's food program records at any time during normal business hours without advance notice. **ALL REVIEWS ARE UNANNOUNCED.** HNP and USDA will determine the frequency of the reviews and the number of reviewers that will be present for each review. All State and Federal reviewers are required to present photo identification. Food program records must be maintained for a period of five (5) years plus the current year. Initial Reviews are designed to provide the institution personnel with additional training and technical assistance.

## **CACFP Goals**

The basic purpose of the CACFP is to ensure that enrolled children and eligible adult participants receive nutritious meals while in day care. USDA meal pattern components must be included in each meal and quantities must be served as outlined in the *Food Buying Guide*. Reducing plate waste may be achieved by serving food items that are preferred; however, a variety of new items in each food group should be introduced to help maintain a healthy and balanced diet.

***Don't be scared!  
It's time to get healthy!***



In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.

To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired 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 03/2011)

# USDA



**United States Department of Agriculture**

# Civil Rights Requirements

The United States Department of Agriculture delineates the civil rights requirements for participants in the Health and Nutrition Programs. The following is required:

## **PUBLIC INFORMATION RESPONSIBILITIES**

1. Ensure that all forms of communication and printed Program information that are disseminated, especially the free and reduced-price notification letters, application forms and public releases contain the following **nondiscrimination statement**.

In accordance with Federal law and the United States Department of Agriculture's policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired 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.

2. Inform parents and/or guardians of enrolled participants in institutions participating in the Health and Nutrition Programs, as well as local minority and grassroots organizations, of the availability of Program benefits and services and the nondiscrimination policy.
3. Display in a prominent location the nondiscrimination poster ("...And Justice For All") developed by USDA.
4. Make available to the public and to participants and potential participants upon request information about Program requirements and the procedures for filing a complaint in English and/or the appropriate translation to non-English speaking persons.

## **DATA COLLECTION**

1. Develop a method for collection of data regarding racial/ethnic breakdown of enrolled participants. Methods include determination of the information by an institution official through observation, personal knowledge, or voluntary self-identification by an applicant on the free and reduced-price meal application form.
2. Maintain information on file for five (5) years.

3. Establish procedures to ensure that the information is made available only to authorized State and Federal personnel during monitoring reviews or as a part of Federal or State approved surveys. The nondiscrimination statement must be included on all forms that institutions send to parents and/or guardians of enrolled participants.

### **CIVIL RIGHTS COMPLAINTS**

1. All written or verbal complaints alleging discrimination on the basis of race, color, national origin, sex, age or disability shall be processed within 90 days of receipt.
2. A preliminary inquiry or an investigation will be conducted on all valid complaints to substantiate or refute the allegations.

### **PROCEDURE FOR FILING COMPLAINTS OF DISCRIMINATION**

1. **Right to File a Complaint.** Any person alleging discrimination based on race, color, national origin, sex, age or disability has a right to file a complaint within 180 days of the alleged discriminatory action.
2. **Acceptance.** All complaints, written or verbal, shall be accepted by HNP then forwarded immediately to USDA Southwest Regional Office in Dallas, Texas, or complaints may be forwarded directly to the Secretary of Agriculture, Washington, DC. It is necessary that the information be sufficient to determine the identity of the agency or individual toward which the complaint is directed, and to indicate the possibility of violation. Anonymous complaints shall be handled as any other complaint.
3. **Verbal Complaints.** In the event that a complainant makes the allegation verbally or through a telephone conversation and refuses or is not inclined to place such allegations in writing, the person to whom the allegations are made shall write up the elements of the complaint for the complainant. Every effort should be made to have the complainant provide the information as outlined on the following page. (**Civil Rights Complaint Filing Procedure**).
4. **Resolution of Non-Compliance Findings.** Immediate steps must be taken to achieve voluntary compliance. Resolution of non-compliance findings must be completed within 60 days of the finding date. If resolution is not achieved, the report must be forwarded to the Department of Justice.



# CIVIL RIGHTS COMPLAINT FILING PROCEDURE

---

1. Name, address and telephone number of complainant (or other means of contacting the complainant):  

---
2. Specific location and name of the entity delivering the service or benefit:  

---
3. The nature of the incident or action that led the complainant to perceive that discrimination was a factor or an example of the method of administration which is having a disparate effect on the public and/or potential participants:  

---
4. The basis on which the complainant perceives discrimination exists (race, color, national origin, sex, age or disability):  

---
5. The names, titles and business addresses of persons who may have knowledge of the alleged discriminatory action:  

---

---

---
6. The date(s) during which the alleged discrimination action occurred, or if continuing, the duration of such actions:  

---

---

**Civil Rights complaints are to be forwarded immediately to**

**Health and Nutrition Programs OR  
PO Box 1437, Slot S-155  
Little Rock, Arkansas 72203-1437**

**USDA, Director, Office of Adjudication  
1400 Independence Avenue, SW  
Washington DC 20250-9410**



*Got Milk? Use only  
Fat Free or 1%*

# Children in Child Care Centers

## Eligibility Requirements



# **Child Care Center Provisions**

7 CFR 226.17

- (a) **Child care centers may participate in the Program either as independent centers or under the auspices of a sponsoring organization.**
- (b) **All child care centers independent or sponsored, shall meet the following requirements:**
  - (1) **Child care centers shall have Federal, State, or local licensing or approval to provide day care services to children.**
  - (2) **Except for proprietary title XX centers, child care centers shall be public or have tax-exempt status under the Internal Revenue Code of 1986.**
  - (3) **Each child care center participating in the Program shall serve one or more of the following meal types: (i) breakfast, (ii) lunch, (iii) supper, and (iv) supplemental food (snack). Reimbursement shall not be claimed for more than two meals and one supplement (or one meal and two supplements), a total of no more than three meals per day per child.**
  - (4) **Each child care center participating in the Program shall claim only the meal types specified in its approved application in accordance with the meal pattern requirements specified in 7 CFR 226.20 (refer to Child Care Meal Pattern and Infant Meal Pattern in this packet). Reimbursement may not be claimed for meals served to children who are not enrolled, or for meals served to children at any one time in excess of the-child care center's authorized capacity, or for any meal served at a proprietary title XX center during a calendar month when less than 25 percent of enrolled children or 25 percent of the licensed capacity, whichever is less, were title XX beneficiaries. Menus and any other nutritional records required by the State agency shall be maintained to document compliance with such requirements.**
  - (5) **A child care center with pre-school children may also be approved to serve meals to school-age children enrolled in an outside-school-hours care program meeting the criteria of 7 CFR 226.19(b) which is distinct from its day care program for preschool-age children.**
  - (6) **A child care center may utilize existing school food service facilities or obtain meals from a school food service facility, and the pertinent requirements of this part shall be embodied in a written agreement between the child care center and school. The center shall maintain responsibility for all Program requirements set forth in this part.**

**(7) Child care centers shall collect and maintain documentation of the enrollment of each child, including information to determine eligibility for free and reduced-price meals (refer to CACFP Reimbursement section of this packet).**

**(8) Each child care center shall maintain daily records of the number of meals by type (breakfast, lunch, supper, and supplements) served to enrolled children, and to adults performing labor necessary to the food service (meals served to staff may not be claimed for reimbursement).**

## Public Law 105-336

Now the Child and Adult Care Food Program is even more valuable because new options enacted by Congress in late 1998 expand eligibility for children in after school tutorial programs and homeless shelters.

### After School Programs

Sections 107 and 108 of Public Law 105-336, the Child Nutrition Reauthorization Act of 1998 enhance nutrition benefits for all children with a special emphasis on older children by authorizing reimbursement for snacks served to children through age 18, (and to individuals, regardless of age, who are determined by the State agency to be mentally or physically disabled), who participate in programs organized to provide after school care. The intent of these provisions is to assist schools and public and private nonprofit organizations to operate organized programs of care which include educational or enrichment activities known to help reduce or prevent children's involvement in juvenile crime or other high risk behavior.

### Homeless and Domestic Violence Shelters

Homeless shelters, including domestic violence shelters and some transitional housing providers, are now eligible to receive reimbursements for up to three meals or two meals and a snack each day for children 12 and under (age 15 and under for children from migrant families and children of any age with disabilities).

Shelters will operate under special rules that take into account the difficult circumstances of families escaping domestic violence. Shelter providers will not have to ask families to disclose their income or fill out any applications for children served through the food program. Instead the shelter will receive a full reimbursement for each child fed who is eligible under the age criteria.

# Adult Participant Eligibility Determination



# Introduction to CACFP Adult Day Care

## **Program Description**

The Health and Nutrition Programs are an outgrowth of the World War II effort to reduce the long-term effects of poor nutrition in America's children. The Government found that many young men were not healthy enough for services in the Armed Forces due to childhood eating patterns deficient in the nutrients for a healthy diet.

The first major endeavor was the National School Lunch Act of 1946 which provided for the use of surplus commodities as a basis for approved luncheon meals in public and private schools.



The original Program evolved to include the Child and Adult Care Food Program (CACFP) which included eligible adult participants.

The purpose of this Program is to help provide nutritious meals in addition to organized day care services provided by adult day care centers. Adult day care centers and eligible adult participants must both meet the criteria for participation set forth in 7 CFR 226.19.

## **New Information**

Periodically you will receive new information in the form of Policy Alerts. These will inform you about any new or revised State and Federal policies. USDA Policy Alerts supersede existing regulations.

## Criteria for Participation

**7 CFR 226.19a (b) (1)**

**“Adult day care centers\* shall provide a community-based group program designed to meet the needs of functionally impaired adults\* through an individual plan of care. Such a program shall be a structured, comprehensive program that provides a variety of health, social and related support services to enrolled adult participants.\*”**

**7 CFR 226.19a (b) (3)**

**“Adult day care centers shall have Federal, State or local licensing or approval to provide day care services to functionally impaired adults\* or individuals who are 60 years of age or older in a group setting outside their home or a group living arrangement\* on a less than 24-hour basis.”**

**\*Definitions**

**The following definitions are contained in the CACFP regulations 7 Code of Federal Regulations (CFR) Part 226.2.**

**Adult Day Care Center: A private nonprofit organization or a for-profit organization (receiving compensation under Title XIX and/or Title XX of the Social Security Act for 25 percent or more of the enrolled adults) which is licensed or approved by Federal, State, or local authorities to provide nonresidential adult day care services to:**

- 1) functionally impaired adults (as defined in this section); or**
- 2) persons 60 years of age or older.**

**Service is performed in a group setting outside the adult participant's homes on a less than 24-hour basis.**

**Such centers provide a structured, comprehensive program that provides a variety of health, social, and related support services to enrolled eligible participants through an individual plan of care.**

**Centers that enter into an agreement with the State agency must assume final administrative and financial responsibility for food program operations.**

**Adult Participant: A person enrolled in an adult day care center who is 18 years of age or older and is functionally impaired (as defined in this section), or 60 years of age or older.**

**Functionally Impaired Adults: Chronically impaired disabled persons 18 years of age or older, including victims of Alzheimer's disease and related disorders with**



neurological and organic brain dysfunction, who are physically or mentally impaired to the extent that their capacity for independence and their ability to carry out activities of daily living is markedly limited. Activities of daily living include, but are not limited to, adaptive activities such as cleaning shopping, cooking, taking public transportation, maintaining a residence, caring appropriately for one's grooming or hygiene, using telephones and directories, or using a post office. Marked limitations refer to the severity of impairment, and not the number of limited activities, and occur when the degree of limitation is such as to seriously interfere with the ability to function independently.

**Group Living Arrangement:** Means residential communities which may or may not be subsidized by Federal, State, or local funds but which are private residences housing an individual or a group of individuals who are primarily responsible for their own care and who maintain a presence in the community but who may receive (occasional) on-site monitoring.

Remember. . . . .

**NOT EVERY INDIVIDUAL WHO ATTENDS AN ADULT DAY CARE CENTER (THAT PARTICIPATES IN THE FOOD PROGRAM) IS *AUTOMATICALLY* ELIGIBLE FOR MEAL REIMBURSEMENT!!**

Individuals who reside in residential facilities (such as nursing homes) that visit your center are not eligible to receive benefits under the adult day care component of the CACFP. As these individuals receive 24-hour care by staff hired to provide that care (including meals), they are said to be "institutionalized" and, therefore, not eligible for meal reimbursement. These individuals should be designated, if included on daily attendance records maintained for the food program, and they should not be included in the monthly reported enrollment on your reimbursement claim (free, reduced, paid)

Individuals for whom the adult day care component is targeted are those who, in general, are the responsibility of family or friends (and in some cases, impaired individuals that have no caretakers and are responsible for themselves). The legislative intent of this component is to assist centers to provide a few hours of respite to family or friends that may make a difference between keeping impaired individuals at home or sending them away to an institution.

# Records and Reviews



USDA Requirements

# CACFP Records

## **7 CFR 226.15 (e) Recordkeeping:**

Each institution shall establish procedures to collect and maintain all necessary Program records.

- \*Attendance Records
- \* Meal Documentation - Production Records
- \*Vendor Menus
- \*Itemized Receipts
- \*Invoices for Contract Meals, if applicable
- \*Copy of Reimbursement Claim (if submitting paper claims)
- \*Disbursement Sheet

These items should be maintained in the monthly Food Program packet using the 'brown envelope' method described in this manual.

## **7 CFR 226.15 (e) (12)**

Maintain (monthly) documentation of non-profit food service to insure that all Program reimbursement funds are used: (i) solely for the conduct of the food service operation; or (ii) to improve such food service operations, principally for the benefit of the enrolled participants.

## **Other Required Documentation:**

- \*Free and Reduced-Price Meal Applications  
aka Income Eligibility Forms  
(SNP-10 for children; SNP-10A for adults)
- \*Enrollment Forms (enroll-2007) – form not required for adult participants; however information must be available to verify birth date/age

These items should be maintained together in a binder or folder, in a confidential manner, and must be renewed annually.



**Remember...All USDA food service records must be maintained for a period of five (5) years – PLUS the current year.**

# Food Service Record Maintenance

## Brown Envelope Method Monthly Record Packet

### I. Centers that prepare any or all meals on-site must maintain the following food service records:

#### **Daily Attendance Records:**

Accurate daily attendance records of all children or adult participants must be maintained separate from the center's meal count records. Suggested attendance forms are included.

Daily attendance records verify the participation of those enrolled at the center. However, because some arrive later than others and some leave early, not all participants in attendance will be served all meals offered every day.

#### **Meal Documentation - Production Records:**

Daily records of menus must contain a listing of the food items served in each meal type to ensure that the requirements of the CACFP meal pattern were met. Daily counts of the number of meals served to enrolled children or participating adults, taken at the point of service, must be recorded in column 7. The total number of meals claimed for reimbursement (by type - breakfast, lunch, snack, supper) must be taken from column 7 - never from attendance records. Daily counts of meals served to "staff" must also be recorded in column 7 to ensure that a sufficient amount of food was prepared for all that are eating; however, "staff" meals should never be claimed for reimbursement. Be sure to include Infant Production Records for all children under one year of age.

#### **Itemized Receipts:**

Receipts must be on file for all food items shown as served on the daily production record worksheets. All receipts must be dated and "itemized" to reflect what was purchased. Only "food service" receipts should be in your packet (do not include receipts for other day care items or personal items). If you buy any of your center's food items from a store that the receipts only reflect the cost, you must then list each item purchased on this receipt. Failure to do this may result in a loss of funding as only your itemized receipts on file can verify that a sufficient amount of all required components were purchased. If your organization purchases food in quantity and carries large amounts of unused food from one month into another, in addition to your receipts you may need to include an inventory of food on hand at the end of the month. Be sure to indicate the date that this inventory was taken.

### **Reimbursement Claim:**

Be sure to make a copy of your reimbursement claim before you mail it to the State agency. Sometimes claims are lost in the mail. The reimbursement claim is a permanent record of the number of meals that you requested funding for and verifies the enrollment at your center this month. The claim must include an authorized signature and date. On-line reimbursement claiming is now an option for submitting monthly claims. Basic training is provided during the regular 'new participant' training. You may also contact your Child Care Service Specialist for further information.

### **Disbursement Sheet:**

All reimbursement monies will be dispersed through direct deposit to your financial institution. You can print off the dated itemized statement (or it can be mailed to you) of your funding based on the number of meals claimed and the enrollment you reported this month. When added to your packet, this will complete your organization's food service operational cost and income for this month.

## **II. Centers that purchase meals from a local Public School Food Service or an approved Food Service Management Company must maintain the following food service records:**

### **Daily Attendance Records and Head Count at Point of Service:**

Same attendance requirements as for centers that prepare meals on site.

### **Menu from School or Food Service Management Company:**

A copy of the monthly menu of all meal types that are purchased must be on file. This is required to verify that each meal type delivered contains all required components. It is your responsibility to check for incomplete meals, inadequate portion-sizes and for spoiled food.

### **Statement of Meals Purchased:**

At the end of each month, the school or food service management company must submit a written statement to the center for the number of meals purchased and the cost. This statement must be broken down to meals by type purchased for children, adult participants, and/or staff. Staff meals may never be claimed for reimbursement.

### **Copy of Reimbursement Claim and Disbursement Sheet:**

Same as above. Retain in your packet to complete the monthly food service records.

### **III. Compliance/Monitoring reviews - what to expect:**

#### **Time Frame for Reviews:**

All centers with new CACFP Agreements will have an Initial visit within 90 days. While a review will be conducted, the principal purpose of this visit is to confirm that the food service staff fully understands the requirements of the Program and that adequate records are being maintained. Additional training and technical assistance will be given and, if necessary, a follow-up review will be conducted. After this Initial review is closed, future reviews will be conducted as per USDA Federal Regulations and Arkansas State Policy.

#### **All HNP Compliance Reviews are unannounced, as required by USDA.**

This means that all food service records must always be up-to-date and ready for review. Regulations stipulate that food service records must be available for review on any working day during normal operational hours and that records must always remain on site, at the center (never take your records home). Because all reviews are unannounced, at least one other person (besides the Director or food service person) must have some knowledge of and access to the food service records.

#### **Meal Service Times:**

It is very important that the meal times stated in your Agreement are adhered to. Your Grants Coordinator must observe at least one meal service on the day of the review. Travel is scheduled in order to be at your center during your stated meal service. If the planned schedule reflected in your contract needs to be changed, simply call or write to your Specialist and request a change in meal service times. You can also change your meal times in your on-line application. You may claim three meals per child or adult participant per day - two (2) full meals and one (1) supplement (snack) meal or (2) snack meals and (1) full meal. There must be at least three (3) hours between full meals (such as breakfast or lunch) and at least two (2) hours (may be more) between a snack meal and a full meal. For example, (breakfast at 8:00, lunch at 11:00, and p.m. snack at 2:00) or (a.m. snack at 9:30, lunch at 11:30, and p.m. snack at 1:30).

#### **Review Findings:**

When the review is concluded, an exit conference will be conducted with the Director or food service staff. All areas of the review will be addressed and the findings, if any, will be discussed. Technical assistance will be given on ways for you to correct any noted errors. You may wish to make a copy of the review or one will be mailed to you. Within a few days, a letter from the State office will be forwarded to you, confirming your review. Adverse Action may be required if any deficiencies are considered to be serious or if the same deficiency has been cited during prior reviews. Adverse Action letters will be sent by certified mail return receipt requested.

# **REGULATORY PROCEDURES FOR SERIOUS DEFICIENCY**

## **CORRECTIVE ACTION**

1. Corrective Action may be taken when minor deficiencies are noted during a review.
2. A written Corrective Action Plan (CAP) will be required.
3. A Follow-up Review will be required.

## **DECLARATION OF SERIOUS DEFICIENCY – NOT APPEALABLE**

### **REASONS FOR BEING DETERMINED AS SERIOUSLY DEFICIENT**

1. Submission of false information on institution's application.
2. A lack of business integrity:
  - a. Fraud
  - b. Antitrust violations
  - c. Embezzlement
  - d. Theft
  - e. Forgery
  - f. Bribery
  - g. Falsification
  - h. Destruction of records
  - i. Making false statements
  - j. Receiving stolen property
  - k. Making false claims
  - l. Obstruction of justice
  - m. Any other activity indicating lack of business integrity
3. Permitting an individual who is on the National Disqualified List to serve in a principal capacity with the institution.
4. Failure to operate Program in compliance with performance standards:
  - a. Administrative capabilities
  - b. Appropriate and effective management practices to ensure that the Program operates in accordance with performance standards
  - c. Has adequate number and type of qualified staff
  - d. Program accountability
    1. Board of Directors (if applicable) – adequate oversight of the Program by its governing board
    2. Fiscal integrity and accountability for all funds and properties received, held and disbursed

3. Claims are processed accurately and in a timely manner.
  4. Funds and properties are used and expenses incurred, for authorized Program purposes
  5. A system that safeguards and controls is in place to prevent and detect improper financial activities by employees
5. Recordkeeping – must maintain appropriate records to document compliance with Program requirements
  6. Failure to comply with Civil Rights requirements
  7. Failure to comply with bid procedures and contract requirements, if applicable
  8. Federal procurement regulations
  9. Failure to return to the State Agency any advance payments that exceed the amount earned for serving eligible meals, or failure to return disallowance start-up or expansion payments
  10. Failure to maintain adequate records
  11. Failure to adjusted the number of Contracted Meals with variations to the number of participants.
  12. Claiming reimbursement for meals not served to participants
  13. \*Claiming reimbursement for meals served by a proprietary Title XX child care during a calendar month in which less than 25% of its enrolled children, or 25% of its licensed capacity, whichever is less, were Title XX beneficiaries. (\*For-Profit institutions only)

#### **RESPONSE FROM PARTICIPATING INSTITUTIONS FOR SERIOUS DEFICIENCY**

1. Must submit a written Corrective Action Plan (CAP) outlining what actions have been implemented to correct the Serious Deficiencies
2. The CAP must be submitted and received within the allotted time frame
3. Failure to fully and permanently correct the serious deficiency(ies) within the allotted time frame will result in proposed termination of the institutions agreement with CACFP and the proposed disqualification of the institution and the responsible principals and responsible individuals at which time Appeal Rights will be given
4. The institution's voluntary termination of its agreement with the State Agency after having been notified of the determination of Serious Deficiency will still result in the formal termination of the institution and disqualification of its responsible principals and responsible individuals.

#### **SUCCESSFUL CORRECTIVE ACTION**

If Corrective Action has been taken that fully and permanently corrects the serious deficiency (ies) within the allotted time frame and to the State Agency's satisfaction, the determination of Serious Deficiency can or will be rescinded. If at a future visit/review the serious deficiencies still exist the proposed termination will proceed.



## **Arkansas CACFP Policy for Donated Food Items – CACFP 2008-AR1**

Except as noted below, institutions and facilities participating in the Child and Adult Care Food Program (CACFP) **MAY NOT** use donated food items as part of a reimbursable meal provided through the USDA Child and Nutrition Programs without the prior approval of the Arkansas Department of Human Services, Health and Nutrition Programs. Prior approval is **MANDATORY**, and will require that

- all donated food items, intended to be used as part of reimbursable meals, are handled in accordance with the Arkansas Sanitary Code, and
- all inventory will be maintained including the name of the agency making donations, the food item(s) donated, date received, estimated fair market value.

If a vendor or other source offers to donate food items for use as part of a reimbursable meal in a Child Nutrition Program, such as CACFP, this donation **MUST** be approved by Health and Nutrition Program prior to acceptance of the food item(s) by any Child Nutrition Program Sponsor or Institution.

**Exception:** Emergency Shelters/Homeless Programs, and institutions and facilities using USDA commodities donated from eligible commodity recipients, are exempt from the requirement to obtain prior approval of the acceptance and use of the donated food items.

Institutions using USDA donated commodities obtained from eligible commodity recipients, alone or in combination with other donated foods, **MUST** maintain a letter from the appropriate State Commodity Distribution agency approving the donation/transfer of the specific commodities on file with monthly inventory records, in addition to any other Child Nutrition Program records.

If you have any questions regarding this policy, please contact the HNP office for further assistance.

**CACFP 2008-AR1, effective date August 15, 2008**

# Menu Planning



**Meal Patterns**

**Product Certification**

**Food Buying Guide**

**Meal Documentation**

## ADULT CARE MEAL PATTERN

The meals served to adult participants in the Child and Adult Care Food Program shall contain the indicated meal pattern quantities and food components in order to qualify for reimbursement. Adult centers may choose to implement the “offer vs. serve” option (as described on following page).

Breakfast	Adult Participants
<b>Milk, fluid</b> <b>Juice or fruit or vegetable</b> <b>Bread, bread alternate****</b> enriched or whole grain and/or <b>cereal:</b> Cereal Cold dry or Cereal Cooked / Cooked Pasta	1 cup (8 oz) ½ cup 2 slices or 2 servings the equivalent quantity of 2 oz 1½ cups or 2 oz 1 cup
<b>AM or PM snack (supplement)</b> (select 2 of these 4 components) <b>Milk, fluid</b> <b>Meat or meat alternate</b> <b>Juice or fruit or vegetable</b> <b>Bread, bread alternate****</b> enriched or whole grain and/or <b>cereal:</b> Cereal Cold dry or Cereal Cooked / Cooked Pasta	1 cup (8 oz) 1 oz ½ cup 1 slice or 1 oz ¾ cup or 1 oz ½ cup
<b>Lunch or Supper</b>	1 cup (8 oz) - (none required at supper meal)
<b>Milk, fluid</b> <b>Meat or meat alternate</b> (lean meat or poultry or fish) Cheese Egg Cooked dry beans or peas Peanut butter Yogurt (plain or flavored) (Or an equivalent quantity of any combination of the above meat/meat alternates) <b>Vegetable and/or fruit</b> (total of <u>two</u> or more) <b>Bread or bread alternate*</b> enriched or whole grain	2 oz 2 oz 1 large egg ½ cup 4 tablespoons 1 cup 1 cup 2 slices or 2 servings the equivalent quantity of 2 oz

- Refer to Food Buying Guide “Grains and Breads” for equivalent quantities

## ADULT “OFFER VERSUS SERVE” OPTION

Each adult day care center shall **offer** its adult participants all of the required components (as stated on the Adult Care Food Program Meal Pattern for breakfast, lunch and supper). However, **at the discretion of the adult day care center**, adult participants may be permitted to **decline**:

- a) **One** of the four food items (one serving of milk, one serving of vegetable or fruit and two servings of bread or bread alternate) required at **breakfast**.
- b) **two** of the six food items (one serving of milk, one serving of meat or meat alternate, two servings of vegetable and/or fruit, and two servings of bread or bread alternate) required at **lunch**.
- c) **Two** of the five food items (one serving of meat or meat alternate, two servings of vegetable and/or fruit, two servings of bread or bread alternate) required at **supper**.

The price of a reimbursable meal shall not be affected if an adult participant chooses to decline a food item.

**The “offer vs. serve” option is not applicable to the snack meal. A sufficient quantity of two components must be served for a snack meal to be eligible for reimbursement.**

**Institutions must inform Health and Nutrition Programs during the application process if OVS will be used.**

---

**Meal Planning.** Institutions shall plan for and order meals on the basis of current participation trends, with the objective of providing only one meal per participant at each meal service. Records of participation and of ordering or preparing meals shall be maintained to demonstrate positive action toward this objective. Regardless of amount of food prepared, only one meal per participant may be claimed for reimbursement at any approved meal service (breakfast, lunch, snack, or supper).

**Sanitation.** Institutions shall ensure that in storing, preparing, and serving food, proper sanitation and health standards are met which conform to all applicable State and local laws and regulations. Institutions shall ensure that adequate facilities are available to store food or hold meals.

**Individual Substitutions.** Substitutions of required food components shown in the Child and Adult Care Food Program meal patterns may be made if individual participants are unable, because of medical or other special dietary needs, to consume such foods. Substitutions because of medical needs shall be made only when supported by a statement from a recognized medical authority, which includes recommended alternate foods.

**Additional Food.** To improve the nutrition of children over one year of age or adult participants, additional foods may be served with each meal (breakfast, lunch, snack, or supper); however, these additional foods may never be served in place of any required component.

**Family-Style Meal Service.** Meals may be served in a family-style setting provided that a sufficient amount of all required components are prepared.

## INFANT CARE MEAL PATTERN

Meals served to infants ages birth through 11 months must meet the requirements described in this meal pattern. Foods included in the infant meal must be of a texture and a consistency that are appropriate for the age of the infant being served. Either breast milk or iron-fortified infant formula must be served for the entire first year.

Age	Breakfast	Lunch or Supper	Snack
Birth through 3 months	4-6 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup>	4-6 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup>	4-6 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup>
4 months through 7 months	4-8 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup> , and 0-3 tablespoons of infant cereal <sup>1</sup>	4-8 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup> , and 0-3 tablespoons of infant cereal <sup>1,4</sup> and 0-3 tablespoons of fruit or vegetable or both <sup>4</sup>	4-6 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup>
8 months up to first birthday	6-8 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup> and 2-4 tablespoons of infant cereal <sup>1</sup> and 1-4 tablespoons of fruit or vegetable or both	6-8 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup> and 2-4 tablespoons of infant cereal <sup>1</sup> and / or 1-4 tablespoons meat, fish, poultry, egg yolk, or cooked dry beans or peas, or ½ - 2 oz cheese, or 1-4 ozs. (volume) of cottage cheese, or 1-4 ozs. (weight) of cheese food, or cheese spread, and 1-4 tablespoons fruit or vegetable or both	2-4 fluid oz formula <sup>1</sup> or breast milk <sup>2,3</sup> or fruit juice <sup>5</sup> and 0-1/2 slice bread <sup>4,6</sup> or 0-2 crackers <sup>4,6</sup>

<sup>1</sup> Infant formula and dry infant cereal must be iron-fortified.

<sup>2</sup> Breastmilk or formula, or portions of both, may be served; however, it is recommended that breastmilk be served in place of formula from birth thru 11 months.

<sup>3</sup> For some breastfed infants who regularly consume less than the minimum amount of breastmilk per feeding, a serving of less than the minimum amount of breastmilk may be offered, with additional breastmilk offered if the infant is still hungry.

<sup>4</sup> A serving of this component is required only when the infant is developmentally ready to accept it.

<sup>5</sup> Fruit juice must be full-strength.

<sup>6</sup> A serving of this component must be made from whole-grain or enriched meal or flour.

## **Infant Meal Pattern Changes**

Interim regulation amending the Infant Meal patterns for the Child Nutrition Program became effective on December 15, 1999. This interim rule amends the regulations for the National School Lunch Program, School Breakfast Program and the Child and Adult Care Food Program (CACFP) to eliminate the option of serving whole cow's milk as part of reimbursable meals for infants (children under one (1) year of age). **Instead, schools, institutions and facilities are now required to serve either breast milk or iron fortified formula with all reimbursable meals served to those infants up to their first birthday.** This rule responds to scientific data demonstrating that infants who consume whole cow's milk during their first year receive an inappropriate level of nutrients and experience more nutrition-related health problems than children who are fed breast milk or iron-fortified formula.

The Health and Nutrition Programs will reimburse child care institutions, facilities and family day care homes, emergency shelters, schools and residential child care institutions for the costs of serving nutritious meals, including the cost of preparation and clean up of meals to infants.

Therefore, reimbursable meals for infants, up to their first birthday, must contain either breast milk or iron fortified infant formula, or both, that be supplied by the caregiver or by the parent.

## **Obligation to Offer Infant Meals in the CACFP**

- Purpose:** To ensure that all children, including infants, who are enrolled for child care have access to Child and Adult Care Food Program (CACFP) meals.
- Scope:** All individual and sponsoring institutions, childcare facilities and family daycare homes.
- Description:** Childcare centers (individual and sponsoring institutions), childcare facilities and family day care homes participating the CACFP must offer program meals to all eligible children who are enrolled for care at their facilities.

A facility may not avoid this obligation by stating that the infants are not 'enrolled' in CACFP, or by citing some logistical or cost barrier to offering infant meals. The decision to offer program meals must be based on whether the child (infant) is enrolled for care, not whether the child (infant) is enrolled in CACFP. 7CFR, Section 226.2 of the CACFP regulations defines an enrolled child as "a child whose parent or guardian has submitted to an institution, facility or family day care home a signed document which indicates that the child is enrolled for care."

As long as the child (infant) is in care during the meal service period, the facility must offer the child (infant) a meal and/or snack that complies with program requirements. A child's (infant's) parents or guardian may decline what is offered and supply the meals and snacks instead. The key factor is that the child (infant) be provided access to CACFP meals.

## Is This Infant Meal Reimbursable?

<b>Birth – 3 Months</b>			
	Parent provides formula - served by facility staff	Parent provides breast milk - served by facility staff	Center/provider provides and serves formula
Breakfast	YES	YES	YES
Lunch or Supper	YES	YES	YES
Snack	YES	YES	YES
<b>4 Months – 7 Months</b>			
	Parent provides formula – served by facility staff	Parent provides breast milk – served by facility staff	Center/provider provides and serves formula
Breakfast	YES*	YES*	YES*
Lunch or Supper	YES*	YES*	YES*
Snack	YES	YES	YES
*For infants 4-7 months who are developmentally ready for other others foods, facilities MUST provide at least one of the components in at least the minimum quantity as specified in the Infant Meal Pattern.			
<b>8 Months through 11 Months</b>			
	Parent provides formula – served by facility staff	Parent provides breast milk – served by facility staff	Center/provider provides and serves formula
Breakfast (facility must provide infant cereal and fruit/vegetable)	YES**	YES**	YES**
Lunch or Supper (facility must provide infant cereal, or meat, fish, egg, cheese, and fruit/vegetable)	YES**	YES**	YES**
Snack (facility must provide bread or crackers and 100% juice in lieu of formula or breast milk)	YES**	YES**	YES**
**For infants 8-11 months, facilities MUST provide the required components in at least the minimum quantities as specified in the Infant Meal Pattern			
Note: The Infant Meal pattern contains serving sizes that indicate ‘0’, such as 0-3T, 0-1/2 slice, etc. This does not mean the facility has the option to serve or not to serve this component. It means that when an infant is developmentally ready for the component, a measurable amount of food must be served in order for the meal to be reimbursable.			

## **You Can Help Prevent Choking**

Young children have the highest risk of choking and remain at high risk until they can chew better. Choking kills more young children than any other home accident. How can you make eating safer for young children?

### **Watch children during meals and snacks to make sure they:**

- \* Sit quietly
- \* Eat slowly
- \* Chew food well before swallowing
- \* Eat small portions and take only one bite at a time

### **Prepare table foods so they are easy to chew:**

- \* Cut foods into small pieces or thin slices
- \* Cut round foods, like hot dogs, into short strips rather than round pieces
- \* Remove all bones from fish, chicken and meats
- \* Cook food until it is soft

### **The foods that are popular with young children are often the ones that have caused choking. Foods that may cause choking are:**

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

- \* hot dog rounds
- \* hard candy (not a creditable food item)
- \* whole pieces of canned or fresh fruit
- \* peanuts

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

- \* popcorn (not a creditable food item)
- \* small pieces of raw vegetables – like carrots
- \* nuts and seeds
- \* corn chips
- \* pretzels

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

- \* spoonfuls or chunks of peanut butter or other nut/seed butters
- \* meat
- \* marshmallows (not a creditable food item)



## CHILD CARE MEAL PATTERN

Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc. shall be made with whole grain or enriched meal or flour; cereal shall be whole grain or enriched or fortified.

<b>Breakfast</b>	<b>Children 1 and 2 yrs</b>	<b>Children 3 through 5 yrs</b>	<b>Children 6 through 12 yrs</b>
<b>Milk, fluid</b>	½ cup (4 oz)	¾ cup (6 oz)	1 cup (8 oz)
<b>Juice or fruit or vegetable</b>	¼ cup	½ cup	½ cup
<b>Bread, bread alternate****</b> enriched or whole grain and/or <b>cereal:</b>	½ slice (½ oz)	½ slice (½ oz)	1 slice (1 oz)
Cereal Cold dry or	¼ cup or 1/3 oz*	1/3 cup or ½ oz**	¾ cup or 1 oz****
Cereal Cooked / Cooked Pasta	¼ cup	¼ cup	½ cup
<b>AM or PM snack (supplement)</b>			
(select 2 of these 4 components)			
<b>Milk, fluid</b>	½ cup (4 oz)	½ cup (4 oz)	1 cup (8 oz)
<b>Meat or meat alternate</b>	½ oz	½ oz	1 oz
<b>Juice or fruit or vegetable</b>	½ cup	½ cup	¾ cup
<b>Bread, bread alternate****</b> enriched or whole grain and/or <b>cereal:</b>	½ slice (½ oz)	½ slice (½ oz)	1 slice (1 oz)
Cereal Cold dry or	¼ cup or 1/3 oz*	1/3 cup or ½ oz**	¾ cup or 1 oz****
Cereal Cooked / Cooked Pasta	¼ cup	¼ cup	½ cup
<b>Lunch or Supper</b>			
<b>Milk, fluid</b>	½ cup (4 oz)	¾ cup (6 oz)	1 cup (8 oz)
<b>Meat or meat alternate</b> (lean meat or poultry or fish)	1 oz	1 ½ oz	2 oz
Cheese	1 oz	1 ½ oz	2 oz
Egg	½ large egg	¾ large egg	1 large egg
Cooked dry beans or peas	¼ cup	3/8 cup	½ cup
Peanut butter	2 tbsp.	3 tbsp.	4 tbsp.
Yogurt (plain or flavored) (Or an equivalent quantity of any combination of the above meat/meat alternates)	½ cup	¾ cup	1 cup
<b>Vegetable and/or fruit</b> (total of <u>two</u> or more)	¼ cup Total		
<b>Bread or bread alternate****</b> enriched or whole grain	½ slice (½ oz)	½ cup Total ½ slice (½ oz)	¾ cup Total 1 slice (1 oz)

\* ¼ cup (volume) or 1/3 oz (weight)

\*\* 1/3 cup (volume) or ½ oz (weight)

\*\*\* ¾ cup (volume) or 1 oz (weight)

\*\*\*\* Refer to Food Buying Guide "Grains and Breads" for equivalent quantities

## DON'TS

1. Don't serve fruit flavored drinks and punches. Serve only 100% real juice.
2. Don't serve juice for the supplement (snack) when milk is the only other component.
3. Don't use syrup from canned fruit to count as a fruit juice.
4. Don't confuse two items with two components (apples and oranges - two items but not two components).
5. Don't count extras such as catsup, a slice of pickle or onion, jams or jellies, etc. that are used as garnishes to meet the fruit/vegetable component requirement.
6. Don't serve popcorn, potato chips, pudding, or jello as a required component.
7. Don't use cookies or cake to meet the bread/bread alternate requirement for breakfast, lunch, or supper (only counts at the snack meal).
8. Don't serve cookies (or "sweet" bread alternates such as cake or brownies) more than two (2) times per week. To be eligible, a cookie (or any bread/bread alternate) must have as the first ingredient, enriched flour.
9. Don't count mixed fruit or mixed vegetables as two (2) fruits or vegetables any mixture of fruits or vegetables counts as one (1) component.
10. Don't serve powdered or dry milk. Only liquid milk is eligible to be used as the milk component. **Only fat-free (skim) or low-fat (1%) milk may be served to participants aged 2 through adults.**
11. Don't repeat the same menu more than once every ten days. Using a cycle menu insures that a variety of all required components will be offered.

# Cycle Menus

It is recommended that you plan your menus in advance. One way to do this is to develop a cycle menu. A cycle menu is a set of planned daily meals (breakfast, lunch and snack) that are repeated in the same order for a period of time (no less than 10 days but may be for four to six weeks). The menu is different every day during the cycle. A cycle menu offers variety and is flexible to allow for substitutions. It is the master plan of meal planning

## **Advantages to having a cycle menu:**

- \* Helps in serving a variety of food because you can see all weeks of the cycle at one time. If you are repeating one food item too often, you can realize it on paper.
- \* Helps in identifying nonperishable food items that can be purchased in larger quantities or at special prices, resulting in lower food cost.
- \* Helps in anticipating food orders to avoid being out of menu ingredients
- \* Helps in meeting meal pattern requirements because recipes become standardized.
- \* Saves time!

## **Adjustments for cycle menus:**

- \* To replace food not available.
- \* To observe holidays or special occasions.
- \* To introduce new foods and try new recipes.
- \* To take advantage of seasonal foods or best buys.
- \* To replace food items that are not accepted (after being offered three to five times).

## **Introducing New Foods**

Introduce only one new food at a time. Teachers can discuss the new item and let the children perform some nutrition education activities to help satisfy their curiosity about the new food item. Some children may be choosy and refuse to eat certain foods. Do not force them to eat but do encourage them to taste the new item. Do not be discouraged if the reception is not favorable. Try the food item again at a later date

Young children master many skills during their first six years and learning to eat a variety of foods is one of the most important ones. Thus, personnel who are responsible for food service in child care centers should provide children the opportunity to learn to eat and enjoy a variety of nutritious foods. Since no one food contains all the nutrients in amounts children need for good health, it is important to select a variety of foods to supply all the nutrients children need each day. Meal pattern requirements provide a framework for planning menus that contribute to the nutritional well-being of young children. MAKE MEALTIME A HAPPY TIME!!

# How to Read the New Food Labels

The new nutrition labels called "Nutrition Facts" are appearing on almost all food products. You may not see them on institutional packs. Foods packaged in large size containers for food service are currently exempt. Inserts or fact sheet information may be provided.

The nutrition label gives standard serving sizes for adults. Be aware that the amounts would have to be adjusted for child size portions, according to meal pattern minimum quantity requirements. Therefore, the number of servings and the number of calories per serving along with the number of calories per fat would be similarly adjusted.

Nutrient information on the new labels include: total calories, calories from fat, total fat, saturated fat, cholesterol, sodium, total carbohydrates, including dietary fiber and sugars, and protein based on an established serving size. "Daily Values" to percents are based on an adult's daily intake of 2,000 calories. Keep in mind that the average energy allowance for children 6 through 12 years old is about 2,600 calories per day.

Included on the label are percentages of Vitamins A and C, calcium, and iron. Again these are based on daily requirements for adults, not children.

By using the product information from the nutrition label along with the minimum serving size information provided in the following "Grains and Breads" section, you can determine the number of chips, cookies, crackers, etc. that must be served to meet the food program requirements for both children and adult participants.

## How many make a serving?





# Grains and Breads\*

in the

## Child and Adult Care Food Program

### Group A

<b>1 serving</b>	<b>= 20 grm or 0.7 oz</b>
<b>¾ serving</b>	<b>= 15 grm or 0.5 oz</b>
<b>½ serving</b>	<b>= 10 grm or 0.4 oz</b>
<b>¼ serving</b>	<b>= 5 grm or 0.2 oz</b>

Breeding type coating  
 Bread sticks (hard)  
 Chow mein noodles  
 Crackers (saltines and snack crackers)  
 Croutons  
 Ice cream cones\*\* (waffle, sugar, plain)  
 Pretzels (hard)  
 Rice cakes  
 Stuffing (dry) Note: weights apply to bread in stuffing

### Group B

<b>1 serving</b>	<b>= 25 grm or 0.9 oz</b>
<b>¾ serving</b>	<b>= 19 grm or 0.7 oz</b>
<b>½ serving</b>	<b>= 13 grm or 0.5 oz</b>
<b>¼ serving</b>	<b>= 6 grm or 0.2 oz</b>

Bagels  
 Batter type breading  
 Biscuits  
 Breads (white, wheat, whole wheat, French, Italian)  
 Buns (hamburger and hot dog)  
 Crackers (graham-all shapes, animal crackers)  
 Egg roll skins  
 English muffins  
 Pita bread (white, wheat, whole wheat)  
 Pizza crust  
 Pretzels (soft)  
 Rolls (white, wheat, whole wheat, potato)  
 Tortillas (wheat or corn)  
 Tortilla chips (wheat or corn)  
 Taco shells

### Group C

<b>1 serving</b>	<b>= 31 grm or 1.1 oz</b>
<b>¾ serving</b>	<b>= 23 grm or 0.8 oz</b>
<b>½ serving</b>	<b>= 16 grm or 0.6 oz</b>
<b>¼ serving</b>	<b>= 8 grm or 0.3 oz</b>

Cookies (plain)  
 Cornbread  
 Corn muffins  
 Cream puffs (served as entrée)  
 Croissants  
 Dumplings  
 Graham crackers (thinly glazed/iced)  
 Hush puppies  
 Pancakes  
 Pie crust (dessert pies\*\*, fruit turnovers\*\*\*, and meat/alternate pies)  
 Popovers  
 Puff pastry (served as entrée)  
 Puff pastry\*\*\* (served as fruit turnover)  
 Sopapillas\*\*  
 Waffles

### Group D

<b>1 serving</b>	<b>= 50 grm or 1.8 oz</b>
<b>¾ serving</b>	<b>= 38 grm or 1.3 oz</b>
<b>½ serving</b>	<b>= 25 grm or 0.9 oz</b>
<b>¼ serving</b>	<b>= 13 grm or 0.5 oz</b>

Boston brown bread  
 Cookies\*\* (plain, thinly glazed/iced)  
 Doughnuts \*\*\* (cake and yeast raised, unfrosted)  
 Fruit or vegetable breads (banana-zucchini, etc.)  
 Granola bars\*\*\* (plain)  
 Muffins (all except corn)  
 Sweet roll\*\*\* (unfrosted)  
 Toaster pastry\*\*\* (unfrosted)

## Grains and Breads ...continued

### Group E

<b>1 serving</b>	<b>= 63 grm or 2.2 oz</b>
<b>¾ serving</b>	<b>= 47 grm or 1.7 oz</b>
<b>½ serving</b>	<b>= 31 grm or 1.1 oz</b>
<b>¼ serving</b>	<b>= 16 grm or 0.6 oz</b>

Cookies\*\* (with nuts, raisins, chocolate pieces and/or fruit purees)  
 Doughnuts\*\*\* (cake or yeast raised, frosted or glazed)  
 French toast  
 Grain fruit bars\*\*\*  
 Granola bars\*\*\* (with nuts, raisins, chocolate pieces, and/or fruit)  
 Sweet rolls\*\*\* (frosted)  
 Toaster pastry\*\*\* (frosted)

### Group F

<b>1 serving</b>	<b>= 75 grm or 2.7 oz</b>
<b>¾ serving</b>	<b>= 56 grm or 2.0 oz</b>
<b>½ serving</b>	<b>= 38 grm or 1.3 oz</b>
<b>¼ serving</b>	<b>= 19 grm or 0.7 oz</b>

Cake\*\* (plain, unfrosted)  
 Coffee cake \*\*\*

### Group G

<b>1 serving</b>	<b>= 115 grm or 4.0 oz</b>
<b>¾ serving</b>	<b>= 86 grm or 3.0 oz</b>
<b>½ serving</b>	<b>= 58 grm or 2.0 oz</b>
<b>¼ serving</b>	<b>= 29 grm or 1.0 oz</b>

Brownies\*\* (plain)  
 Cake\*\* (all varieties, frosted)

### Group H

<b>1 serving</b>	<b>= ½ cup cooked (or 25 grms dry)</b>
------------------	--

Barley  
 Breakfast cereals (cooked)\*\*\*\*  
 Bulgur (cracked wheat)  
 Macaroni (all shapes)  
 Noodles (all varieties)  
 Pasta (all shapes)  
 Ravioli (noodle only)  
 Rice (enriched white or brown)  
 Wild rice

### Group I

<b>1 serving</b>	<b>= ¾ cup or 1 oz, whichever is less</b>
------------------	---

Ready to eat breakfast cereal (cold, dry)

\* So many of these foods, or their accompaniments may contain more sugar, salt and/or fat than others. This should be a consideration when deciding how often to serve them.

\*\* Allowed only for desserts in the NSLP under the enhanced food-based menu planning system and supplements (snacks) served under the NSLP, SFSP and CACFP.

\*\*\* Allowed only for desserts in the NSLP under the enhanced food-based menu planning system and supplements (snacks) served under the NSLP, SFSP and CACFP and for breakfasts served under SBP, SFSP and CACFP.

\*\*\*\* refer to appropriate handbook for the correct serving size for supplements served to children age 1 through 5 in the NSLP; breakfasts served under the SBP; and meals served to children ages 1 through 5 and adult participants in the CACFP. Breakfast cereals are traditionally served as a breakfast menu item but may be served in meals other than breakfast.

# Product Certification

There are many food items on the market today that are commercially prepared products. Most are pre-cooked and some contain more than one component. Participants in the food program may only use these products if the manufacturer provides certification of component quantity through a CN Label or Product Analysis. Please be advised that while many of these products appear to meet program nutrition guidelines, some, in fact, do not.

## Child Nutrition Label (CN Label)

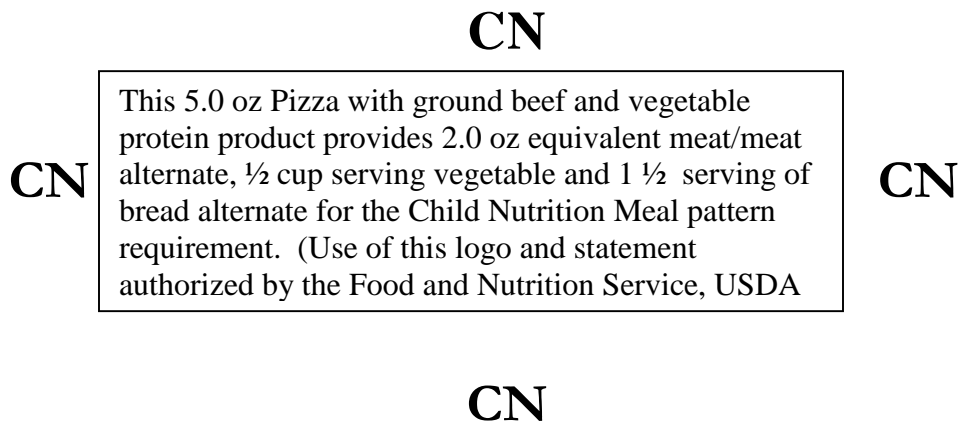
Child Nutrition Labeling is a voluntary Federal-labeling program for the Child Nutrition Programs. It provides a warranty for CN Labeled products and allows manufacturers to state a product's contribution to the meal pattern requirements on their labels. Many of these products are excellent for the Adult Care Program.

## How to Identify a CN Label

A CN Label will always contain the following information:

- 1) **The CN logo which has a distinct border**
- 2) **The meal pattern contribution statement**
- 3) **A 6-digit product identification number (in upper right corner)**
- 4) **The USDA Food and Nutrition Service authorization statement**
- 5) **The month and year of approval**

## Sample CN Label:





# Product Analysis

## What to Look for on a Product Analysis

### A Manufacturers' Product Analysis must include:

- 1) Product name as written on the label
- 2) Crediting statement as to how much the cooked portion of the component(s) contributes to the USDA meal pattern
- 3) A certifying statement, i.e. "a 3.25 oz serving of the above product contributes 2 oz of meat/meal alternative when prepared according to instructions"
- 4) Manufacturer's representative's signature written on Company letterhead

#### XYZ BURRITO FACTORY

Effective Date November 1 1988 Product No.: 9(U9 Total

Weight of precooked product: 4.00

Total of raw meat: 0.50 oz

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

Weight of dry VPP: 0.0a4 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 wit VPP: 0.544 oz

Total weight of filling 2.25 oz

Total wt of enriched flour tortilla: 1.75 oz 1.59 serv

I certify that the above information is true and correct and that the product (ready for serving) contributes 1.14 ounces of equivalent meat/meat alternate 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 analysis will supersede all previously issued sheets.

Suggested Bid Specifications: \_\_\_cases-Red Chili Beef, Bean & Chicken Burrito, 4.00 ounces 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

XYZ Burrito Factory

November 01, 2011

## Sources of Nutrients:

Plan menus to include good sources of nutrients. The following fruits and vegetables are good sources of Vitamins A and C.

### Vitamin A:

Fruits	Vegetables	
Apricots	Broccoli	Peppers (sweet, red)
Cantaloupe	Carrots	Pumpkin
Honeydew Melon	Chard	Romaine
Mandarin Oranges	Collards	Spinach
Mango	Endive	Squash (winter)
Plums	Escarole	Sweet Potatoes
Nectarines	Kale	Tomatoes
Watermelon	Mustard Greens	Tomato-Vegetable Juice
	Peas and Carrots	Turnip Greens

### Vitamin C:

Fruits		Vegetables	
Bananas	Papaya	Artichokes	Okra
Blackberries	Peaches	Asparagus	Onions
Blueberries	Pears	Beans (green)	Parsnips
Cantaloupe	Pineapple	Beans (lima)	Peas
Grapefruit	Pineapple Juice	Bean Sprouts	Peppers
Grapefruit Juice	Plums	Broccoli	Potatoes
Honeydew Melon	Pomegranates	Cabbage	Pumpkin
Kiwi Fruit	Raspberries	Cauliflower	Snow peas
Mandarin Oranges	Strawberries	Chicory	Spinach
Mangos	Tangelos	Collards	Romaine
Nectarines	Watermelon	Endive	Rutabagas
Oranges		Escarole	Tomatoes
		Kale	Tomato Juice
		Kohlrabi	Turnip Greens
		Mustard Greens	Turnips

Iron is needed in the diet. The following are sources of iron from a variety of foods.

### Iron:

Meat/Meat Alternates	Grains and Breads (whole-grained or fortified)	Fruits and Vegetables
Beef	Bagels	Apricots (dried)
Liver	Muffin (bran)	Dates
Liverwurst	Oatmeal (fortified)	Lima Beans
Turkey, dark meat	Pretzel (soft)	Spinach
Black-eyed Peas (cowpeas)	Ready-to-eat Cereals	Broccoli
Chickpeas (garbanzo beans)	Farina	
Kidney Beans (red or white)	Noodles	
Lentils	Pita Bread	
Soybeans	Rice (white)	
Shellfish		
Trout (use caution with bones)		

# Food Buying Guide

## for Child and Adult Nutrition Programs

U.S. Department of Agriculture Food and Nutrition Service

**The Food Buying Guide Calculator is available on-line at HNP website.**



## FOOD BUYING GUIDE

1 Food as Purchased AP	2 Purchase Unit	3 Servings per Purchase Unit, AP	4 Serving Size per Meal Contribution	5 Purchase Units for 100 servings	6 Additional information
------------------------	-----------------	----------------------------------	--------------------------------------	-----------------------------------	--------------------------

### Additional details on each of these columns include:

Column 1- Food As Purchased, AP: tells you the name of the food item and the form(s) in which it is purchased. Individual foods are arranged in alphabetical order by type of food. For instance, ham is listed under *Pork, mild cured*. Within each type, foods are listed according to the forms in which they appear in the market - fresh, canned, frozen, or dehydrated.

Where appropriate, Column 1 also includes a detailed description of the form in which items are purchased. For example, one listing for canned, boned chicken, reads: *Chicken, canned: Boned poultry with broth*. The listing for fresh beets reads: *Beets, fresh: Without tops*.

Column 2 - Purchase Unit: tells you the basic unit of purchase for the food. For most foods, the guide lists "Pound" as the purchase unit.

For some processed foods, the guide lists an institutional pack and, in many cases, a smaller pack, along with the net weight of the pack's contents. For example, the listing for canned asparagus cuts and tips, includes information on two can sizes: No. 10 can (103 oz) and No. 300 can (14-1/2 oz).

You can use data on the 1-pound unit of purchase, together with Table 2 Common Can and Jar Sizes, to determine the number of servings for any size purchase unit available in the market. (Table 2 is on page 1-30.)

Column 3 - Servings per Purchase Unit, EP (Edible Portion): shows the number of servings of a given size (found in Column 4) from each purchase unit (found in Column 2). It is based on average yields from good quality foods prepared in ways that result in a minimum of waste.

For example, the purchase unit for fresh cranberries is listed as 1 pound. Column 3 indicates 15.6 servings per purchase unit if 1/4 cup raw, chopped fruit (Column 4) is served. This tells us we can expect to obtain 15.6 1/4-cup servings from 1 pound of good quality fresh cranberries. Where applicable, numbers have been carried to one decimal, such as 15.6 in this example, because fractions become significant when figuring large numbers of servings. (It is for this reason, and not because the figures represent this degree of accuracy, that they have been reported to the nearest 0.01 of a serving for less than 10 servings per purchase unit.)

Numbers reported in this column have sometimes been rounded down in order to help ensure enough food for the desired number of servings. In other words, 15.65 became 15.6 instead of 15.7 so that more, rather than less, food will be purchased.

Column 4 - Serving Size per Meal Contribution: describes a serving by weight, measure, or number of pieces or slices. Sometimes both measure and weight are given, or the measure and number of pieces or slices.

Items such as a piece of cooked chicken are given an approximate serving size in measure, with weight in parentheses. For example, for 3.7 oz raw chicken drumsticks, Column 4 reads: 1 drumstick (about 1.8 oz cooked chicken with skin).

For foods specified in the meal patterns, the serving size given in this column can be credited toward meeting the meal pattern requirements. For many fruits and vegetables, both pieces and 1/4-cup servings are included.

Column 5 - Purchase Units for 100 Servings: shows the number of purchase units you need for 100 servings. This number was calculated using the purchase unit listed in Column 2 and the serving size (by weight) listed in Column 4. Numbers in Column 5 have been rounded up to help ensure enough food is available for one hundred servings.

Column 6 - Additional Information: provides other information to help you calculate the amount of food you need to purchase and/or prepare.

For many food items, this column shows the quantity of ready-to-cook or cooked food you will get from a pound of food as purchased. For instance, it tells you 1 pound of fresh, whole, 125-138 count apples will yield 0.78 pounds of raw, cored, peeled, ready-to-cook or -serve apples.

For many processed foods, this column also gives the weight or number of cups of drained vegetable or fruit from various can sizes. For example, for carrots, canned, sliced, No. 10 can, Column 6 tells you that one No. 10 size can provides about 9-1/4 cups of heated, drained sliced carrots.

### How can you use the Yield Data?

The data in the yield tables can help you in a variety of ways as you plan menus, make purchasing decisions, and check to make sure meals will meet Child Nutrition Program requirements.

On the following pages is an easy-to-follow guide. Through a variety of practical examples, it shows you how to:

- \* Determine number of purchase units needed to obtain the desired number of servings of a particular food.
- \* Adjust portion sizes and calculate servings to meet the basic minimum requirements.
- \* Calculate the quantity of food to buy to obtain the correct amount of ready to-cook food for a recipe.
- \* Determine correct yields for foods purchased prepared and ready-to-cook or -use. This is especially useful for fresh fruits and vegetables.
- \* Make cost comparisons.

## Working with the Food Buying Guide

## Calculating how much food you need for a given number of servings

The methods and examples on the following pages illustrate how you might use the yield data tables for a particular purpose.

\*Foods are most often purchased in case lots. Keep in mind that the purchase amount may differ from the calculated amount to prepare a menu item.

\*Always round up when calculating how much food to buy.

\*Always round down when calculating the *creditable component* towards meeting a meal pattern requirement.

To calculate how much of any food to purchase you should begin by asking yourself the following questions:

\*How many servings will I need?

\*Will different serving sizes be used for various age/grade groupings?

\*What is my planned serving size for this food?

\*In what form will I purchase this food? What serving size is listed in Column 4?

\*Is the listed serving size the same as my planned serving size?

\*How many purchase units of the food will I need to buy?



## Examples Description

Method 1- Using Column 3

### *Variation 1 -No conversion of serving size needed*

- A. Carrot slices, cooked
- B. Ground beef, commodity

### *Variation 2 - Conversion of serving size required*

- C. Roast beef - round, without bone
- D. Baked beans, vegetarian, canned
- E. Crinkle cut fries, ovenable
- F. Nut butters (including peanut butter)
- G. Eggs, large, shell, fresh
- H. Cereals and cereal grains

Method 1- Using Column 3

***General Procedure. Divide the number of servings you need by the number of servings you will get from one purchase unit (pound, can, etc.) (Column 3).***

Examples A and B show you how to calculate the number of purchase units needed to obtain the desired number of servings of a particular food. The serving size you are planning to serve is the same as the serving size listed in Column 4 of this *Food Buying Guide*. No conversion of the serving size is needed.

Examples C through H show you how to calculate the number of purchase units needed to obtain the desired number of servings of a particular food. The serving size(s) you are planning are not the same as the serving size(s) listed in the *Food Buying Guide*. Conversion of the serving size is required.

### Method 1 Example A: Carrot Slices, Cooked

You are planning to serve  $1/4$ -cup servings of steamed carrot slices. You will be purchasing frozen, sliced carrots. How many pounds of frozen, sliced carrots will you need to buy?

**1. Estimate the number of servings of the prepared food you will need.**

You estimate that you will need 195  $1/4$ -cup servings of cooked carrot slices.

**2. Locate the food in the *Food Buying Guide* in the form you intend to serve.**

**For the listing *carrots, frozen, sliced* (found in Column 1, page 2-31) you look for:**

Cooked vegetable (found in Column 4)

**3. Check the serving size listed in Column 4. Compare this to your planned serving size.**

Column 4 reads:  $1/4$  cup cooked, drained vegetable

This is the same as your planned serving size to all students, so no conversion is needed. (Examples C through H show what to do when conversion is needed.)

**4. Refer to Column 2 to find the purchase unit. Refer to Column 3 for the number of servings you will get per purchase unit.**

Column 2 reads: Pound

Column 3 reads: 9.87

**5. Divide the number of servings needed by the number of servings you will get per purchase unit (Column 3.)**

Number of servings needed = 195

Servings per purchase unit = 9.87

195 divided by 9.87 = 19.75

**6. Round up to 20.0 lb to ensure enough food is available.**

ANSWER: You will need 20.0 pounds of frozen, sliced carrots for 195  $1/4$ -cup servings of cooked, sliced carrots.



**Method 1 Example B: Ground Beef, USDA Commodity** (not more than **16%** fat)

You are planning to serve 1-1/2 ounce portions of cooked ground beef. How many purchase units of frozen ground beef, USDA Commodity, not more than 16% fat, do you need to buy?

**1. Estimate the number of servings of the prepared food you will need.**

You estimate that you will need 60 1-1/2 ounce servings

**2. Locate the food in the *Food Buying Guide* in the form you intend to purchase (Column 1), then locate the form of the food you intend to serve (Column 4).**

For the listing *Ground Beef, USDA Commodity, not more than 16%fat*, you will need to use the yield data for ground beef, not more than 20% fat (found in Column 1, page 1-16) you look for:

Cooked lean meat (*found in Column 4*)

**3. Check the serving size listed in Column 4. Compare this to your planned serving size.**

Column 4 reads: 1-1/2 ounces cooked lean meat

This is the same as your planned serving size, so no conversion is needed. (Examples C through H show what to do when conversion is needed.)

**4. Refer to Column 2 to find the purchase unit. Refer to Column 3 for the number of servings you will get per purchase unit.**

Column 2 reads: Pound

Column 3 reads: 7.89

**5. Divide the number of servings needed by the number of servings you will get per purchase unit.**

Number of servings needed = 60

Servings per purchase unit = 7.89

60 divided by 7.89 = 7.60

**6. Round up to 7.75lb to ensure enough food is available.**

ANSWER: You will need 7-3/4 pounds of USDA Commodity ground beef, not more than **16%** fat, for **60** 1-1/2 oz servings of cooked ground beef.

For multiple serving sizes of meat, poultry, fish, or cheese multiply the number of people to be served times each serving size in ounces to get the ounces needed. Add the results to get the total ounces needed.

## Method 1 Example C: Beef Round Roast, without bone

You are planning to serve boneless, cooked roast beef to 75 students of different grade levels. How many pounds of raw beef round roast, without bone, will you need?

### 1. Estimate the number of servings and the serving size of the prepared food for each age/grade.

You estimate that of the 75 planned servings, 45 will be served 1-1/2 ounces each and 30 will be served 2 ounces each.

### 2. Locate the food in the *Food Buying Guide* in the form you intend to purchase (Column 1), then locate the food in the form you intend to serve (Column 4).

For the listing "Beef, round roast, without bone" (found in Column 1 on page 1-18) you look for:

Cooked lean meat (found in Column 4)

### 3. Check the serving sizes listed in Column 4. Compare this to your planned serving sizes.

Column 4 reads: 1 ounce cooked lean meat *and* 1-1/2 ounce cooked lean meat  
Since there is no serving size for 2 ounces of cooked lean meat, a conversion is needed.

### 4. Calculate the total ounces of cooked lean meat needed.

45 servings X 1.5 oz = 67.5 ounces  
30 servings X 2.0 oz = 60.0 ounces  
127.5 ounces total cooked lean meat

You need a total of 127.5 ounces of cooked lean meat. Since this total is in units of 1 ounce, you can now use the serving size of 1 ounce cooked lean meat as found in Column 4.

### 5. Refer to Column 2 to find the purchase unit. Refer to Column 3 for the number of servings you will get per purchase unit.

Column 2 reads: Pound

Column 3 reads: 9.76

**6. Divide the total number of ounces needed by the number of servings you will get per purchase unit. (Column 3)**


Number of total ounces needed = 127.5

Servings per purchase unit = 9.76

127.5 divided by 9.76 = 13.06

**7. Round up to 13.25 lb to ensure enough food is available.**

ANSWER: You will need 13-1/4 pounds of raw beef round roast without bone, for the required serving sizes for 75 people.



Additional information and exercises in using *The Food Buying Guide* are in the Introduction section of the *FBG* – pages I 47 through I 66.

Common can and jar sizes – pages I 30 and I 31.

Templates for determining can sizes - pages I 32 and I 33.

Guide to metric conversions (ounces to grams) – page I 40.

Volume equivalents for liquids – page I 42

Sizes and capacities of serving utensils – pages I 43 through I 45.

# Fruits and vegetables: how much is a serving?

*Note these serving sizes and yields are approximate*

<b>Vegetable</b>	<b>Serving Size and Yield</b>
Carrot sticks	1 stick is 4 inches long and 1/2 inch wide 12 sticks = 1/2 cup 6 sticks = 1/4 cup 3 sticks = 1/8 cup
Baby carrots	1/4 c = 8.5 baby carrots
Cauliflower	1 medium head = about 6 cups florets
Celery sticks	1 stick is 3 inches long and 3/4 inches wide 8 sticks = 1/2 cup 4 sticks = 1/4 cup 2 sticks = 1/8 cup
Cucumber slices	Each slice is 1/8 inch thick 8 slices = 1/2 cup 4 slices = 1/4 cup 2 slices = 1/8 cup
Lettuce head	Each piece is 4 1/4" x 4 1/4" 2 pieces = 1/2 cup 1 piece = 1/4 cup 1/2 piece = 1/8 cup
Leaf lettuce	1 large leaf= 1/4 cup 2 medium leaves = 1/4 cup 3 small leaves = 1/4 cup
Radishes	8 small radishes = 1/2 cup 4 small radishes = 1/4 cup 2 small radishes = 1/8 cup
Tomato wedges	Each tomato is 3 inches in diameter 1/2 tomato = 1/2 cup 1/4 tomato = 1/4 cup 1/8 tomato = 1/8 cup
Tomato slices	Each slice is 1/4 inch thick 4 slices = 1/2 cup 2 slices = 1/4 cup 1 slice = 1/8 cup
Cherry tomatoes	8 tomatoes = 1/2 cup 4 tomatoes = 1/4 cup 2 tomatoes = 1/8 cup



## About Yogurt

Commercially prepared yogurt may be served and credited:

\* at lunch, supper or snack

\* for its full amount even if the commercially prepared yogurt has fruit already in it. (There's usually very little fruit and that fruit cannot be credited toward meeting the fruit/vegetable component.)

\* 8 ounces is the minimum creditable amount for lunch and supper and 4 ounces is the minimum creditable amount for snack



Remember... it takes 4 ounces of yogurt to equal 1 ounce of meat/meat alternate

AND



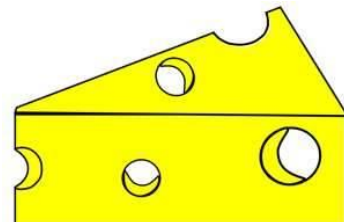
8 ounces of yogurt to equal 2 ounces of meat/meat alternate

---

## What about Cheese?

Natural or pasteurized cheese can be counted ounce for ounce as a meat/meat alternate –

2 ounces of cheese equals 2 ounces of meat/meat alternate



More About Cheese...

Cottage cheese is made with milk solids, so you must serve 2 ounces of cottage cheese as the equivalent of 1 ounce of meat/meat alternate.



**2 ounces equals 1 ounce meat/meat alternate**

You can also serve: Cheese foods and Cheese spreads like you serve cottage cheese.

**2 ounces equals 1 ounce meat meat/alternate**



**Remember... ‘cheese products’ is a non-standardized category name. These products are not creditable. “Imitation” cheese is not creditable. ‘Powdered’ cheese mix, such as in macaroni and cheese products is not creditable. Canned cheese sauces are not creditable.**

# Meal Documentation

## What is a Production Record?

The term "production record" refers to the daily written documentation of each meal type served at your center that you are claiming for reimbursement on the food program. It is a required part of your record keeping as a food program participant. Production record worksheets (menu planning forms) are provided for your use annually when your CACFP application is approved or renewed. While some sections of the worksheet may be completed to advance of the day that the meal is to be served, at the end of each working day, a completed production record worksheet must be on file at your center. DO NOT TAKE YOUR RECORDS OFF SITE. The foods actually prepared, the amount of food prepared, and the number served (take a head count at each meal service) must be documented daily as the meal is being prepared and served.

WORKSHEET SECTIONS THAT MAY BE COMPLETED IN ADVANCE: (see illustration on next page)

Column(1)	Date
Column (2)	Menu
Column (3)	Size of serving
Column (4)	Estimated to be served

This side of the production record worksheet is intended to be a tool to assist you in planning your menus and purchasing a sufficient amount of all components needed for each meal type that you are approved to claim.

- (1) Each worksheet must be dated to indicate the day these meals were served. You can either date the worksheet when the menu is being planned or date the worksheet on the day that the meals are actually served.
- (2) The menu should reflect all items to be served at each meal. Planning a "cycle" menu is highly suggested. A cycle menu is a set of different menus that are used during a two to four week time period and then repeated at the end of the cycle. To ensure variety in foods served, you are asked to not repeat any menu more than once during a ten-day period. This will also enable you to introduce new foods and include a larger variety of fresh fruits and vegetables in your menus.
- (3) The size of the serving is based on the age of those in your care (refer to the CACFP meal pattern for infants, children or adults).
- (4) The estimated number to be served should include all (participants and staff) who could be present during this meal service. This is only a projection (made when your menu is being planned) for you to base your food order on. All of this number may not be present on the actual day that the meal is served. During each meal service a head count must be taken. Only meals actually served to children or participating adults (never staff) may be claimed for reimbursement.

## Sample Production Record 'A' - Meal Planning:

Date (1) \_\_\_\_\_

Meal Pattern	(2) Menu	(3) Size of Serving	(4) No. to be Served	(5) Food Items Used	(6) Amounts Used	(7) Number Served
<b>Breakfast:</b> 1. Fluid milk 2. Vegetable and/or fruit or 100% juice 3. Bread or bread alternate	<i>Milk</i> <i>Applesauce</i> <i>Cinnamon toast</i>	$\frac{3}{4}$ cup $\frac{1}{2}$ cup $\frac{1}{2}$ slice	12	1. _____ 2. _____ 3. _____	_____ _____ _____	1-2 _____ 3-5 _____ 6-12 _____ Staff _____
<b>Lunch or Supper:</b> 1. Fluid milk 2. Meat/meat alternate 3./4. Vegetable and/or fruit (two or more) 5. Bread or bread alternate	<i>Milk</i> <i>Meat loaf</i> <i>Green beans</i> <i>Peaches</i> <i>Hot roll</i>	$\frac{3}{4}$ cup 1.5 ounces $\frac{1}{4}$ cup $\frac{1}{4}$ cup $\frac{1}{2}$ slice or $\frac{1}{2}$ ounce	25	1. _____ 2. _____ 3. _____ 4. _____ 5. _____	_____ _____ _____ _____ _____	1-2 _____ 3-5 _____ 6-12 _____ Staff _____
<b>Snack (supplement)*:</b> 1. Fluid milk 2. Meat/meat alternate 3. Vegetable and/or fruit or 100% juice 4. Bread or bread alternate	<i>Crackers</i> <i>Cheese</i>	4 each .5 ounce	25	1. _____ 2. _____	_____ _____	1-2 _____ 3-5 _____ 6-12 _____ Staff _____
* Select two (2) of the four (4) components listed. Juice may not be served when milk is served as the only other component.						



# Notes on Production Records Documentation

WORKSHEET SECTIONS THAT MUST BE COMPLETED DAILY: (see illustration on next page)

- Column (5) Food items used
- Column (6) Amounts of food used
- Column (7) Number served

When a review is conducted at your center, this is the side of the production record worksheet that will be analyzed to verify that the meals served met the requirements of the food program Information documented on this side of the worksheet must be specific and complete. A sufficient amount of each required component must be prepared and then documented daily. Itemized receipts on file verify that sufficient amounts of all required components were purchased.

- (5) In the food items used column, document only the required components served to make the meal eligible for reimbursement (milk, meat/meat alternate, vegetables or fruits, bread/bread alternate). Be specific (corn flakes, cooked oats, ground beef, chicken legs, sliced peaches, frozen fries, instant potatoes, cut green beans, hamburger buns, cornbread). It is not necessary to document the extra food items served (such as jelly, catsup, mustard, pudding, jello). These items add to the pleasure of the meal and should be included in the menu section but cannot be counted as a required component.
- (6) The amount of food used must be documented in a measurable, pre-cooked quantity as illustrated in the Food Buying Guide. Again, please be specific when giving the amount of food prepared. For example, milk may be shown in gallons or ounces, or if purchased in cartons, the total number of cartons used. Meat or fresh fruit/vegetables should be documented by the pound. Canned items (fruit and vegetables, some meat) should be documented by indicating the number of cans opened and the size of the can used (for example, 3 # 10 cans, 5 #303 cans, 9 - 15 oz cans). Indicate the type of bread or bread alternate served (for example, 15 bagels, 9 slices of bread, 20 hot dog buns, 15 squares cornbread, 21bs. spaghetti, 3 lbs. rice).
- (7) The number served column must reflect the exact number eating. This number should never be taken from the attendance records A head count must be taken at each meal service. The infant group includes children who are too young for table food (refer to Infant Meal Pattern). Children can be claimed in the age group according to their age; however many centers prefer to give all children at the center who are age one to five the same plate portions. You may do this if all plates contain the 3-5 age group portions. Of course, school age children must always be served the portions required for the 6-12 group. Adult programs should document the number of "eligible" participants in the adult section. At the end of each month, the total number of meals by type (breakfast, lunch, supper or snack) that are to be claimed for reimbursement must be taken from column 7 of this worksheet. The total number of staff eating must be reflected in this column, however, meals served to staff may never be claimed for reimbursement. Any other documentation (head count) of meals is secondary to this production record column 7 count of meals served.

## Sample Production Record 'B' - Meal Documentation:

Date (1) \_\_\_\_\_

Meal Pattern	(2) Menu	(3) Size of Serving	(4) No. to be Served	(5) Food Items Used	(6) Amounts Used	(7) Number Served
<b>Breakfast:</b> 1. Fluid milk 2. Vegetable and/or fruit or 100% juice 3. Bread or bread alternate	<i>Milk</i> <i>Applesauce</i> <i>Cinnamon toast</i>	$\frac{3}{4}$ cup $\frac{1}{2}$ cup $\frac{1}{2}$ slice	12	1. <u>Milk</u> 2. <u>Applesauce</u> 3. <u>Bread (16 oz loaf)</u>	<u>60 ounces</u> <u>3 - 16 oz. cans</u> <u>5 slices</u>	1-2 _____ 3-5 <u>10</u> 6-12 _____ Staff _____
<b>Lunch or Supper:</b> 1. Fluid milk 2. Meat/meat alternate 3./4. Vegetable and/or fruit (two or more) 5. Bread or bread alternate	<i>Milk</i> <i>Meat loaf</i> <i>Green beans</i> <i>Peaches</i> <i>Hot roll</i>	$\frac{3}{4}$ cup 1.5 ounces $\frac{1}{4}$ cup $\frac{1}{4}$ cup $\frac{1}{2}$ slice or $\frac{1}{2}$ ounce	25	1. <u>Milk</u> 2. <u>Ground beef</u> 3. <u>Green beans (cut)</u> 4. <u>Peaches (sliced, w/ juice)</u> 5. <u>Hot rolls</u>	<u>25 - 8 oz cartons</u> <u>4 lbs</u> <u>2 - #2.5 cans</u> <u>2 - #2.5 cans</u> <u>25 ct</u>	1-2 _____ 3-5 <u>24</u> 6-12 _____ Staff <u>1</u>
<b>Snack (supplement)*:</b> 1. Fluid milk 2. Meat/meat alternate 3. Vegetable and/or fruit or 100% juice 4. Bread or bread alternate	<i>Crackers</i> <i>Cheese</i>	4 each .5 ounce	25	1. <u>Saltine crackers</u> 2. <u>Cheese</u>	<u>96 ct</u> <u><math>\frac{3}{4}</math> lb.</u>	1-2 _____ 3-5 <u>24</u> 6-12 _____ Staff _____
* Select two (2) of the four (4) components listed. Juice may not be served when milk is served as the only other component.						

# Hand Washing



## When to Wash Hands....

Wash hands whenever hands are soiled and before

- \* beginning food preparation
- \* putting on disposable gloves
- \* serving food items



## How to Wash Hands....

- \* Use the hand washing sink with running water at approximately 100 F and liquid soap.
- \* Lather hands and arms up to the elbow.
- \* Rub hands together for at least 20 seconds.
- \* Clean between fingers.
- \* Rinse in clean, running water. Turn off faucet with paper towels in your hands.
- \* Dry hands using a paper towel or air dryer.

# CACFP Reimbursement

100% USDA Federal Funding

- \$ Reimbursement Rates
- \$ Blended Rate Method
- \$ Reimbursement Claim Form
- \$ Electronic Claiming
- \$ Direct Deposit



Reimbursement Rates and Income Eligibility Guidelines change every year on July 1<sup>st</sup>.

The current rates and guidelines are available through the CACFP office or online at [www.fns.usda.gov/fns/](http://www.fns.usda.gov/fns/)



Contact your Child Care Service Specialist by email:

[Cindy.Dennis@dhs.arkansas.gov](mailto:Cindy.Dennis@dhs.arkansas.gov)  
[Perry.Hunter@dhs.arkansas.gov](mailto:Perry.Hunter@dhs.arkansas.gov)  
[Eric.Hickson@dhs.arkansas.gov](mailto:Eric.Hickson@dhs.arkansas.gov)

**Reimbursement Claim Form**

1. Name and Address

HNP Agreement # \_\_\_\_\_

Place an 'X' on this line if  
this is an Adjusted Claim \_\_\_\_\_

2. Month & Year of this Claim      3. Number of Days of Food Service      4. Average Daily Attendance\*  
a. Child/Adult Centers      b. Outside School Hours

\* Largest **single** meal service divided by the number of days food service, Item #3.  
**Always** round UP to the next whole number.

5. Total Number of Meal Services Claimed	Child and/or Adult Centers	Outside School Hours Centers
a. Breakfast	_____	_____
b. Lunch	_____	_____
c. Supplements		
AM Snack	_____	
PM Snack	_____	
Late Snack	_____	
Total Snacks (AM+PM+Late)	_____	_____
d. Supper	_____	

**Note: All multi-facility Institutions must include CACC-5 (FP-1 for-profit Institutions) or equivalent supporting data.**

6. Total of Enrolled Children or Adult Participants for this month      7. Number of Centers Operating this Month

NOTE: (1) Total of all participants receiving at least one meal service.  
(2) A current, signed and dated Income Eligibility Form (HNP-10) must be on file for each participant in the 'Free' or 'Reduced' category.

8. Food-only Costs for this Month  
\$ \_\_\_\_\_

Free      \_\_\_\_\_  
Reduced      \_\_\_\_\_  
Paid      \_\_\_\_\_

(Itemized receipts must be on file)

I certify to the best of my knowledge and belief that this claim is true and correct in all aspects. Records are available to support this claim and that it is in accordance with the terms of any and all existing Agreements. I recognize that I will be fully responsible for any excess amounts that may result from erroneous or neglectful reporting. I understand that this information is being given in connection with the receipt of Federal funds. I fully understand that deliberate misrepresentation may subject me to prosecution.

**Please check all entries for accuracy and completeness before submission of this claim.**

9. Original Signature of Authorized Representative      Title      Date

For HNP Office Use Only

Processed by \_\_\_\_\_ Date \_\_\_\_\_

CFS 2115 (AR-HNP2/05)

# INSTRUCTIONS CFS- 2115

REIMBURSEMENT: Mail original to address below

AGREEMENT NO: The number must be correct One Alpha and four Numeric characters are required, i e , A0001

- 1 NAME AND ADDRESS OF SPONSOR: Self-explanatory
- 2 MONTH AND YEAR CLAIMED: Claim must be submitted within sixty (60) days, i e, January claim must be submitted by March 31.
3. NUMBER OF DAYS FOOD SERVICE PROVIDED: The number of days meals were served to enrolled children or adult participants.
- 4 AVERAGE DAILY ATTENDANCE: Obtained by dividing the largest number of meals served by the number of days food service provided. Adjust upward for any percentage, i e , 601 meals served in 20 days equals 30.05, therefore, ADA would be 31.
5. TOTAL NUMBER OF MEALS SERVED: Must maintain production records, attendance records, etc., to document claim. Write the total number of meals served to children or adult participants in billing month beside the proper meal category (i.e., breakfast). Meals served to adult staff are not eligible for reimbursement.
6. ENROLLMENT:
  - (a) Enrolled children or adult participants - all enrolled children or adult participants who were in attendance at your center and participated in at least one meal service during this month must be included in this reported enrollment. The center must have current free and reduced price applications on file to verify the category of all children and adult participants reported in these categories. Improperly reported enrollment data may result in an over claim, or administrative and/or judicial action being initiated by DHS (DCCECE).
  - (b) Title XX Proprietary Centers - This section is to be used by for-profit centers that have a current enrollment of 25% Title XX children Place the number of enrolled Title XX children who were in attendance during this month in the space provided.
7. NUMBER OF CENTERS OPERATING THIS MONTH: Institutions closed for 30 days or more may not be considered operational
8. COST OF FOOD FOR THIS MONTH: Each month you must now report the amount that you spend for food items only (this is food prepared and served to children or adult participants only). Itemized receipts must be on file to verify the amount. Your claim cannot be processed unless this section is completed.
9. SIGNATURE OF AUTHORIZED REPRESENTATIVE: Self-explanatory

**INCOMPLETE OR INCORRECT REIMBURSEMENT FORMS WILL BE RETURNED FOR CORRECTION. THIS WILL DELAY PAYMENT. THEREFORE IT IS TO YOUR ADVANTAGE TO CAREFULLY REVIEW THIS CLAIM BEFORE SUBMITTING IT FOR PAYMENT.**

## FOR STATE USE ONLY

**FRAUD PENALTY** Whoever embezzles, willfully misapplies, steals, or obtains by fraud any funds, assets, property that are the subject of a grant or other form of assistance under this part, whether received directly or indirectly from the Department or whoever receives, conceals, or retains such funds, assets, or property to his use or gain, knowing such funds, assets, or property have been embezzled, willfully misapplied, stolen, or obtained by fraud shall, if such funds, assets, or property are of the value of \$100 or more, be fined not more than \$10 00 or imprisoned not more than five years, or both, or, if such funds, assets, or property are of value of less than \$100 shall be fined not more than \$1,000 or imprisoned for not more than one year, or both.

Health and Nutrition Programs

PO Box 1437, Slot S-155

Little Rock, AR 72203-1437



## How Reimbursement Payments are Calculated

### **Blended Rate Method of Payment:**

Reimbursement for meals served in child and adult care centers is computed by using the Blended Rate Method of payment. You will be reimbursed for the total number of approved meals by type served to eligible Program participants. The amount you will receive depends upon the number of participants enrolled at your center and the category of each participant (free, reduced, paid). A higher reimbursement is given for those who are eligible for free or reduced-price meals. All others must be claimed in the paid category.

### **Estimating your reimbursement:**

You may request that a Blended Rate Worksheet be emailed to you. If you have **Excel** software on your computer you can calculate your reimbursement before submitting your paper claim.

If you submit your reimbursement claim electronically (on-line) the blended rate will be calculated automatically.

**Reimbursement rates change each year on July 01.** The current reimbursement rates are available through the CACFP office or online at [www.fns.usda.gov/fns/](http://www.fns.usda.gov/fns/).



Provider's Initial: \_\_\_\_\_

Date \_\_\_\_\_

CHILD CARE FOOD PROGRAM  
ENROLLMENT FORM  
(to be completed by parent or guardian)

You have chosen a daycare that participates in the USDA Child and Adult Care Food Program (CACFP). It is our goal to assist in providing your child with nutritious meals/snacks. This enrollment information may be verified. The meal times, the meal pattern and the daily menus should be posted and available for parents at all times. If you have questions or comments, or would like to learn more about CACFP, contact our office at 501 682 8869.

**The following information is required by USDA Federal Regulation CFR 226.15(e)(2).**

I wish to enroll my child(ren), whose names and enrollment information are given below, in the USDA Child and Adult Care Food Program. I understand this program reimburses day care facilities for serving nutritious, well balanced meals/snacks to day care children.

My child(ren) will be served the following meals:

**(Please Circle)** Breakfast AM Snack Lunch PM Snack Other \_\_\_\_\_

Child(ren) Information (please print)

First Name	Last Name	Age	Birthdate	Hrs of Care	Days of Week (circle)	Gender
			/ /	from to	SAT - SUN M - T - W - TH - FR	M F
			/ /	from to	SAT - SUN M - T - W - TH - FR	M F
			/ /	from to	SAT - SUN M - T - W - TH - FR	M F

Note here any food allergies or special needs your child(ren) have: \_\_\_\_\_

\_\_\_\_\_  
Doctor's Name: \_\_\_\_\_

I understand my child(ren) will receive meals at no extra charge to me when they are in care during any scheduled meal service. I understand that the day care facility cannot and will not discriminate for reasons of race, color, national origin, sex, or disability. There is to be no discrimination in admission policy, meal service, or use of facility. Any complaints should be addressed to: USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.

In case of emergency, please call: HOME # \_\_\_\_\_ WORK # \_\_\_\_\_

Parent Address: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(enroll-2007)

# FREE AND REDUCED PRICE MEAL APPLICATION FOR CENTERS AND HOMES

Please see the instructions on the reverse side if you have questions, or you may call the childcare center at # \_\_\_\_\_

## 1. PRINT: Child Information

> \_\_\_\_\_  
 CHILD/CHILDREN'S NAME(S)                      AGE                      NAME OF CENTER/PROVIDER

> \_\_\_\_\_

> \_\_\_\_\_                      **Number of children claimed on this application** \_\_\_\_\_

> \_\_\_\_\_                      **2. List the family SNAP Case number (Food Stamp), if any, then skip to #5**

> \_\_\_\_\_                      # \_\_\_\_\_

**3. FOSTER CHILD:** List the child's monthly personal use income. Write "0" if the child has no personal income. \$ \_\_\_\_\_

**4. HOUSEHOLD MEMBERS AND MONTHLY INCOME:** If you gave a SNAP case number for the child PART 2, skip to PART 5.

### Gross MONTHLY Earnings (before deductions)

NAMES OF HOUSEHOLD MEMBERS	JOB 1	JOB 2	Monthly Welfare Payments, Child Support, Alimony	Monthly Pension/Retirement Payments, SS Income	Any other Monthly Income
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

**5. SIGNATURE AND SOCIAL SECURITY NUMBER:** I certify that all the above information is true and correct and that all income is reported. I understand that this information is being given for the receipt of Federal Funds; that center officials may verify the information on the application; and that deliberate misrepresentation of the information may subject me to prosecution under applicable State and Federal laws.

X \_\_\_\_\_ # \_\_\_\_\_  
 Signature of Adult Household Member                      (last 4-digits only) Social Security Number\*

Home telephone # \_\_\_\_\_ Work telephone # \_\_\_\_\_ Printed name \_\_\_\_\_

Street/apt # \_\_\_\_\_ City/state/zip \_\_\_\_\_ Date \_\_\_\_\_

**6. RACE:** Please check the racial or ethnic identity of your child. You are not required to answer this question.  
 WHITE    BLACK, OR AFRICAN AMERICAN    HISPANIC or LATINO    ASIAN    HAWAIIAN NATIVE or OTHER PACIFIC ISLANDER  
 AMERICAN INDIAN or ALASKA NATIVE    NOT HISPANIC OR LATINO

**\* PRIVACY ACT STATEMENT:** Section 9 of the National School Lunch Act requires that, unless your child's Food Stamp case number is provided, you must include the Social Security number of the adult household member signing the application or indicate that the household member does not have a Social Security number. Provision of a Social Security number is not mandatory, but if a Social Security number is not given or an indication is not made that the signer does not have such a number, the application cannot be approved. The Social Security number may be used to identify the household member in carrying out efforts to verify the correctness of the information stated on the application. These verification efforts may be carried out through program reviews, audits, and investigations and may include contacting employers to determine income, contacting a food stamp or welfare office to determine current certification for receipt of food stamps, contacting the state employment security office to determine the amount of benefits received and checking the documentation produced by household members to prove the amount of income received. These efforts may result in a loss of reduction of benefits, administrative claims, or legal actions if incorrect information is reported. The social security number may also be disclosed to programs as authorized under the National School Lunch Act and the Child Nutrition Act, the Comptroller General of the United States, and law enforcement officials for the purpose of investigating violations of certain Federal, state and local education, health, and nutrition programs.

### FOR CENTER/PROVIDER USE ONLY DO NOT WRITE BELOW THIS LINE

MONTHLY INCOME CONVERSION: WEEKLY X 4.33    EVERY TWO WEEKS X 2.15    TWICE A MONTH X 2  
 TOTAL HOUSEHOLD SIZE \_\_\_\_\_    MONTHLY INCOME \_\_\_\_\_    CHECK IF SNAP PARTICIPANT \_\_\_\_\_  
 Eligibility Determination: APPROVED FREE \_\_\_\_\_ APPROVED REDUCED PRICE \_\_\_\_\_ DENIED \_\_\_\_\_ Temporary: FROM \_\_\_\_\_ TO \_\_\_\_\_  
 REASON FOR DENIAL: INCOME TOO HIGH \_\_\_\_\_ INCOMPLETE APPLICATION \_\_\_\_\_ OTHER: \_\_\_\_\_  
 CHANGE IN STATUS: \_\_\_\_\_ REASON: \_\_\_\_\_ DATE: \_\_\_\_\_ DATE WITHDRAWN: \_\_\_\_\_  
 SIGNATURE OF DETERMINING OFFICIAL: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICATION INSTRUCTIONS

To allow this center to receive Federal Funds to subsidize the provision of nutritious meals, one application must be completed and on file for each child or adult participant. Complete the front using the instructions for your household. You must sign the application and return it to your center immediately.

Call # \_\_\_\_\_ if you need help.

PART 1 - ALL HOUSEHOLDS COMPLETE PART 1.

1. Print the name of the child/participant you are applying for.
2. List the child/participant's age and the name of the center.

PART 2 - FOOD STAMPS HOUSEHOLDS COMPLETE PART 2 AND PART 5.

1. List a current food stamp case number for the child/participant.
2. Skip Part 4. You do not have to list names of household members or income if you list a food stamp case number for the child/participant. Sign the application in Part 5. An adult household member must sign.

PART 3 - FOSTER CHILD'S HOUSEHOLDS COMPLETE PART 3 AND PART 5. A foster child is the legal responsibility of a welfare agency or court.

1. List the foster child's monthly "personal use" income. Write "0" if the foster child does not get "personal use" income. Skip to Part 4. Do not list any other children, household members or income.
2. A foster parent or other official representing the child must sign the application in Part 5.
3. Personal Use income is (a) money given by the welfare office identified by category for the child's personal use, such as for clothing, school fees, and allowances; and (b) all other money the child gets, such as money from his/her family and money from the child's full or part-time jobs.

PART 4 - ALL OTHER HOUSEHOLDS COMPLETE PART 4 AND PART 5.

1. Write the name of everyone in your household, whether they get income or not; include yourself, the children you are applying for, all other children, your spouse, grandparents, and other related and unrelated people in your household. Use another piece of paper if you need more space.
2. Write the amount of income each household member got last month, before taxes or anything else is taken out, and where it came from, such as earnings, welfare, pensions, and other income. If any amount last month was more or less than usual, write that person's usual monthly income.
3. An adult household member must sign the application and give his/her social security number in Part 5.

\*To figure monthly income multiply: Weekly x 4.33, every 2 weeks x 2.15, twice a month x 2.

PART 5 - ALL HOUSEHOLDS COMPLETE PART 5. SIGNATURE AND SOCIAL SECURITY NUMBER.

1. All applications must have the signature of an adult household member.
2. The application must have the social security number of the adult who signs. If the adult does not have a social security number, write "none" or something else to show that the adult does not have a social security number. If you listed a food stamp number for each child or if you are applying for a foster child, a social security number is not needed.

PART 6 - RACIAL/ETHNIC IDENTITY: Complete the racial/ethnic identity question if you wish. You are not required to answer this question 374-8811 to get meal benefits. We need this information to make sure that everyone is treated fairly.

INCOME TO REPORT

<u>Earnings from Work</u>	<u>Pensions/Retirement/Social Security</u>	<u>Other Income</u>
Wages/salaries/tips	Pensions	Disability benefits
Strike benefits	Supplemental Security Income	Cash withdrawn from savings
Unemployment compensation	Retirement income	Interest or Dividends
Workers compensation	Veteran's payments	Income from estates/trusts investment
owned	Regular contributions from persons not	living in the household
business or farm income	Social Security	Net royalties/annuities/rental income
		Any other income

FOR VERIFICATION PURPOSES ONLY. DO NOT WRITE BELOW THIS LINE.

DATE VERIFICATION NOTICE WAS SENT: \_\_\_\_\_ RESPONSE DUE FROM HOUSEHOLD: \_\_\_\_\_ SECOND NOTICE SENT: \_\_\_\_\_ VERIFICATION RESULT:

NO CHANGE \_\_\_\_\_ FREE/REDUCED PRICE \_\_\_\_\_ FREE/PAID \_\_\_\_\_ REDUCED PRICE/FREE \_\_\_\_\_ REDUCED RICE/PAID \_\_\_\_\_

REASON FOR ELIGIBILITY CHANGE: INCOME \_\_\_\_\_ HOUSEHOLD SIZE \_\_\_\_\_ REFUSED TO COOPERATE \_\_\_\_\_ CHANGE IN FOOD STAMP/AFDC \_\_\_\_\_ OTHER: \_\_\_\_\_

DATE NOTICE OF CHANGE SENT: \_\_\_\_\_ VERIFYING OFFICIALS SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

# Adult Participant Income Eligibility Application Child and Adult Care Food Program

## PART 1

Adult Participant Name:

\_\_\_\_\_  
 Last First M.I.

**PART 2A - HOUSEHOLDS GETTING SNAP (FOOD STAMPS), SSI, MEDICAID OR FDPIR:** Complete this part and sign the statement in Part 3 - DO NOT complete Part 2B.

Food Stamp Case Number \_\_\_\_\_ SSI Identification Number \_\_\_\_\_

Medicaid Assistance Identification Number \_\_\_\_\_ FDPIR Identification Number \_\_\_\_\_

**PART 2B - ALL OTHER HOUSEHOLDS:** If you did not provide a Food Stamp, SSI, Medicaid, or FDPIR number or if you did not complete Part 2A, complete this part and sign the statement in Part 3.

NAMES CURRENT INCOME				
Names of all Household Members (participant, spouse, dependent children)	Gross Monthly Earnings (before deductions)	Welfare Payments, Child Support, Alimony	Payments from Pensions, Retirement, Social Security	Earnings from Job 2 or Other Income
1	\$	\$	\$	\$
2	\$	\$	\$	\$
3	\$	\$	\$	\$
4	\$	\$	\$	\$
5	\$	\$	\$	\$

**PART 3 - SIGNATURE:** An adult household member must sign the statement before it can be approved.

**PENALTIES FOR MISREPRESENTATION** I certify that all of the information is true and correct and the Food Stamp, SSI, Medicaid, or FDPIR number is correct that all income is reported. I understand that this information is being given for the receipt of Federal funds, that institution officials may verify the information on the statement and the deliberate misrepresentation of the information may subject me to prosecution under applicable Federal and state laws

Signature of Adult \_\_\_\_\_ Social Security Number (last 4 digits only) \_\_\_\_\_ Date Signed \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Home Address \_\_\_\_\_

**PART 4 - RACIAL/ETHNIC IDENTITY:** You are not required to answer this question.

- WHITE  BLACK, OR AFRICAN AMERICAN  HISPANIC or LATINO  ASIAN  HAWAIIAN NATIVE or OTHER PACIFIC ISLANDER  
 AMERICAN INDIAN or ALASKA NATIVE  NOT HISPANIC OR LATINO

**PRIVACY ACT STATEMENT** Section 9 of the National School Lunch Act requires that, unless the adult participant's Food Stamp, SSI, Medicaid, or FDPIR number is provided, you must include the Social Security number of the household member signing the statement or an indication that the household member signing the statement does not possess a Social Security number. Provision of a Social Security number is not mandatory, but if a Social Security number is not provided or an indication is not made that the adult household member signing the statement does not have such a number, the application cannot be approved. The Social Security number may be used to identify the household member in carrying out efforts to verify the correctness of information stated on the application. These verification efforts may be carried out through program reviews, audits, and investigations and may include contacting employers to determine income, contacting a Food Stamp, SSI, Medicaid, or FDPIR office to determine current certification for receipt of Food Stamps, SSI, Medicaid, or FDPIR benefits, contacting the State Employment Security office to determine the amount of benefits received and checking the documentation produced by the household member to prove the amount of income received. These efforts may result in a loss or reduction of benefits, administrative claims, or legal actions if incorrect information is reported. The Social Security number may also be disclosed to programs as authorized under the National School Lunch Act and the Child Nutrition Act, the Comptroller General of the United States, and law enforcement officials for the purpose of investigation violations of certain Federal, state, and local education, health, and nutrition programs.

For Institution Use Only: Food Stamp/SSI/Medicaid/FDPIR household categorically eligible Free: \_\_\_\_\_ Family Income \_\_\_\_\_ Free Reduced Paid

Signature of Determining Official \_\_\_\_\_ Date (expires one year from this date) \_\_\_\_\_  
 (HNP 10A Revised 10/05)

## Income Eligibility Application Instructions

Please complete the Child and Adult Care Food Program Income Eligibility Application using the instructions below. Sign the statement and return completed form to the center. You may call the center at phone # if you need help.

**PART 1 - PARTICIPANT'S INFORMATION:** All households complete this part. (1) Print the name of the adult enrolled at the center.

**PART 2A - HOUSEHOLDS GETTING SNAP (FOOD STAMPS), SUPPLEMENTAL SECURITY INCOME (SSI), MEDICAID, OR FOOD DISTRIBUTION PROGRAM ON INDIAN RESERVATIONS (FDPIR):** Complete this Part and Part 3.

- (1) Indicate the current Food Stamp case number, SSI identification number, Medicaid number, or FDPIR number for the adult participant. Do not complete Part 213.
- (2) An adult household member must sign the statement in Part 3.

**PART 2B - ALL OTHER HOUSEHOLDS:** Complete this Part and Part 3.

- (1) List the names of everyone to the household. "Household means the adult participant and, if residing with the participant, the spouse and dependents of the adult participant"
- (2) Write the amount and the frequency of income (i.e. weekly, every two weeks, twice a month, or monthly) received last month for each household member. This income is the amount before taxes or anything else is taken out and where it came from such as earnings, welfare, pensions, and other income (refer to examples below for types of income to report). If any amount last month was more or less than usual, write that person's usual income.
- (3) An adult household member must sign the statement and give his/her Social Security number in Part 3.

**PART 3 - SIGNATURE AND SOCIAL SECURITY NUMBER:** All Households Complete this Part. (1)

All Income Eligibility Applications must have the signature of an adult household member.

- (2) The adult household member who signs the statement must include his/her social Security number. If he/she does not have a Social Security number, write "none" or state that he/she does not have a Social Security number. If you listed a Food Stamp, SSI, Medicaid, or FDPIR number, a Social Security number is not needed.

**PART 4 - RACIAL/ETHNIC IDENTITY:** Complete the racial/ethnic identity question if you wish. You are not required to answer this question to get meal benefits. However, this information will help ensure that everyone is treated fairly.

Earnings from Work	<b>INCOME TO REPORT</b> <u>Pensions/Retirement/Social Security</u>	Other Income
Wages/salaries/tips	Pensions	Disability benefits
Strike benefits	Supplemental Security Income	Cash withdrawn from savings
Unemployment compensation	Retirement income	Interest/Dividends
Worker's compensation	Veteran's payments	Income from Estates/trusts/investments
Net income from self-owned business or farm	Social Security	Regular contributions from persons not living in the household
		Net royalties/annuities/net rental income
<u>Welfare/Child Support/Alimony</u>		Any other income
Public assistance payments		
Welfare payments		
Alimony/child support payments		

# CACFP

## FREE AND REDUCED PRICE

## APPLICATION INSTRUCTIONS



## **INTRODUCTION**

This section contains information on determining participants' eligibility for free and reduced priced meals in the Child and Adult Care Food Program.

Child and Adult Care Food Program centers that claim reimbursement for free, reduced price, and paid meals under USDA Programs must ensure that they have adequate documentation on file to support the claim.

It is the intent of Congress that nutritious meals be available to all eligible participants. USDA regulation (7CFR Part 226) outlines this intention. State agencies and center authorities enter into agreements to operate meal programs and to comply with these USDA regulations. However, state agencies may institute additional State Policies that do not conflict with the Federal requirements.

## **GENERAL REQUIREMENTS**

All centers participating in the federally assisted Child and Adult Care Food Program's nonpricing program must make meals available to all eligible participants in attendance. The center may not charge a fee for the meal service to enrolled participants. Non-pricing programs are not required to distribute letters of approval or denial to parents, as the reimbursement is not a direct benefit to the family.

Child and Adult Care Food Program center's pricing programs must provide free and reduced price benefits in accordance with the provisions explained in this Manual. Authority for these requirements is found in the Code of Federal Regulations (7CFR Part 226), and other applicable Food and Nutrition Service and Departmental Regulations.

Pricing centers must issue free and reduced price policy guidance to parents to ensure that they are aware of Federal and State requirements pertaining to free, paid, and reduced price meals.

## **FREE AND REDUCED PRICE POLICY STATEMENT**

Policy Statement. To be eligible to receive reimbursement for meals served, each center participating in the Child and Adult Care Food Program must have an approved free and reduced price policy statement on file at the State Agency (SA) prior to October 1.

Once a center's Policy Statement is approved, the Policy Statement is considered part of its SA Center Agreement to operate the program.

## **PUBLIC RELEASE**

Near the beginning of each fiscal year, the public must be notified that the Child and Adult Care Food Program is available in your center. This notice must include the eligibility criteria for free and reduced price meals. It must be provided to the local news media, the employment office, and any mayor or employers who are contemplating large layoffs in the attendance area of the center.

The Public Release must contain the same information supplied in the letter or notice to households, except that the Public Release must contain both the free and reduced price income eligibility guidelines (IEGs). Copies of the Public Release must be made available upon request to any interested person.



## **LETTERS TO HOUSEHOLDS**

Also, at the beginning of each fiscal year, letters or notices must be distributed to the households of children attending the pricing center. This letter or notice should tell the household that meals may be available free or at a reduced price. An application form must be included with the letter or notice. Applications do not have to be distributed by nonpricing programs; however, children without an application must be claimed in the paid category.

The letter or notice should be sent to households of all CACFP participants as early as possible in the fiscal year so that eligibility determinations may be made and free and reduced price benefits provided as soon as possible.

New participants enrolling in a center should be provided a letter or notice and an application form when they enroll. The letter or notice must contain the following information:

In centers, the Notice to Households must contain only the reduced price guidelines, with an explanation that households with income at or below the reduced price limits, are eligible for either free or reduced price meals.

An explanation that an application for free or reduced price benefits cannot be approved unless it contains complete eligibility information.

An explanation that households with children who are members of currently certified food stamp households, may submit applications for these children with the abbreviated information.

An explanation that the information submitted on the application for pricing centers may be verified at any time.

An explanation that households categorized as free or reduced, based on income and household size information, must notify center officials during the Fiscal year, of any changes in household size and any increases in income over \$50 per month or \$600 per year. Households that provide a food stamp case number, in lieu of income information, must notify the center of any termination of certification for receipt of benefits for such children under the Food Stamp Program. Households may then complete another application listing income information.

## **APPLICATION FORM**

The Application Form must contain:

\* A Privacy Act Statement. That Statement must address the following:

- (1) the disclosure of a social security number is voluntary, however, a social security number is required for approval of the Application.
- (2) the social security number is required under provisions of the National School Lunch Act; and
- (3) what uses will be made of the social security number.

\* A Statement directly above the Signature Block to certify that:

- (1) the person signing is furnishing true information and to advise that the application is being made in connection with the receipt of Federal funds.
- (2) SA officials may verify the information on the application.
- (3) deliberate misrepresentation of the information may subject the applicant to prosecution under State and Federal Statutes.

Additionally, the center may wish to include a racial/ethnic identification question if the application is the only source of this data. If the application is not used for racial/ethnic data, an alternative method for collecting this information should be provided.

## **FOREIGN LANGUAGES**

When a significant number or proportion of the population eligible to be served in the CACFP needs information in a language other than English, centers must make reasonable efforts, considering the size and concentration of such population, to send appropriate non-English language households letters or notices and application forms to such households.

Centers are encouraged to provide households with assistance in completing applications through the use of personnel proficient in Foreign Languages.

## **QUESTIONS AND ANSWERS ABOUT APPLICATIONS**

1. QUESTION: How do I handle the distribution of applications?

ANSWER: Applications should be distributed on or about August 1, or soon thereafter so that households are provided with current eligibility criteria and so that eligibility determinations are based on the current income eligibility guidelines (IEGs). Applications are valid for 12 months.

2. QUESTION: May I distribute the applications to the children, or do I have to mail them to the parents? May I announce that applications are available in the Director's Office for any child or parent who wants one?

ANSWER: The center may distribute the application and a letter or notice to the children. They do not have to be sent in the mail. For example, the center could include the application in a packet of center-related information addressed to the parent, but carried home to the parent by the child. Applications must be distributed in the same manner by pricing programs. A public announcement that applications are available and that interested parties may pick one up is not sufficient.

3. QUESTION: May I send applications to children who were approved last year?

ANSWER: Centers are required to distribute applications at least once per year to parents of all children in attendance at the center. This requirement is designed to ensure that current income and household size are correctly represented each year.

## **FREE AND REDUCED PRICE REIMBURSEMENT**

The Center must have a valid application on file for each participant served a meal meeting program requirements that is claimed for Federal reimbursement at the free or reduced price rate. A valid application is one that is complete and has been currently and correctly approved for free or reduced price benefits. An application must not be more than 12 months old.

Before applications are processed, the center may only claim and be reimbursed for paid price meals. Prior to processing applications, the center cannot claim or be reimbursed for free and reduced price meals. Therefore, centers are encouraged to expedite eligibility determinations for all participants.

Applications should be reviewed and an eligibility determination made within 10 working days of the receipt of the application. Whenever possible, applications should be processed immediately, particularly for new participants who do not have approved applications on file.

**ELIGIBILITY CRITERIA** For a child to be categorized for free or reduced price meals, the household must have submitted a complete application and be either categorically eligible or income eligible. The determining official must review each income application to ensure that the household has submitted a complete application. If the application is complete, the official must then determine whether the household is categorically or income eligible. U.S. Citizenship is not a condition of eligibility for free and reduced price benefits. Centers must apply the same eligibility criteria for citizens and non-citizens. A complete application must include all the following required information before the determining official can make an eligibility determination:

## **CURRENT INCOME**

If a child is not a member of a food stamp household, but resides in a larger household with other children who are food stamp recipients, the application for that child must include all information to establish income eligibility for that child, i.e., the names of all household members, the social security number of the adult who signs the application or an indication that the household member does not have a social security number, the amount of income received by each household member identified by the individual who received it, the source (including any welfare grant), and the signature of an adult household member. Food Stamp benefits are not counted as income. The center must not delay approval of the application if the household fails to provide any information that is not required.

EXAMPLE: If the household does not complete the racial/ethnic identify question, that must not delay approval. Each household must provide the amount of income received during the month before applying. Income must be identified with the individual who received it, and where it comes from (such as wages, welfare, etc.). It is the responsibility of the determining official to compute the household's total current income and compare the total amount to the IEGs.

## **APPLICATION APPROVAL OR DENIAL**

If only one income is given, compare that income to the relevant IEG for that time frame.

EXAMPLE: For a household of five that receives one paycheck each month, compare their income to the monthly IEG for a five person household.

If all incomes are received for the same time frame, add all the incomes together and compare the total income to the IEG for that time frame.

EXAMPLE: If both parents in a family of three receive paychecks each week, add the two incomes together and compare the total to the weekly IEG for a household of three

However, households may report incomes for different time periods (e.g., one monthly, one bi-weekly, one weekly); the determining official should convert all reported incomes to the same time period (such as all to a monthly amount), and total the incomes to determine total household income. The official must then compare this figure and the household sizes to the IEGs and determine the eligibility of the household.

## **CATEGORICALLY ELIGIBLE – SNAP (Food Stamp)**

Households that submit a complete application including a valid food stamp number for the child for whom application is made, must be approved for free benefits.

Center officials should familiarize themselves with valid Food Stamp numbers used in their areas before beginning application approval. If there is any doubt concerning the validity of the case number submitted on an application, the center official should contact local Food Stamp officials. Applications with invalid case numbers may not be approved.

## **APPROVAL**

### **Income Eligible (Non-food stamp):**

Households that submit a complete application indicating total household income at or below the income limits for free or reduced price benefits, must be approved for free or reduced price benefits, as appropriate.

Households that submit an incomplete application cannot be approved. If any required information is missing, the information must be obtained before an eligibility determination can be made.

To get the required information, the center may return the application to the household or contact the household, either by phone or in writing. The determining official should document the details of the contact, then date and initial the entry.

EXCEPTION: If the application is missing the signature of an adult household member, the application must be returned to the household. In signing the application, the household member is certifying that the information on the application is true and correct.

Every reasonable effort should be made to obtain the missing information prior to denying the application.

If there are any inconsistencies or questions concerning the required eligibility information provided, the household's application must be denied unless the inconsistencies or questions are resolved. For instance, if it is unclear whether the household provided weekly or monthly income, this issue must be resolved before an eligibility determination can be made. The official may contact the household prior to denial, document the details of the contact, and date and initial the entry.

If the application form specifies a frequency of income such as monthly, then a center may, in most cases, assume that the income listed on the face of the application is received for that frequency, unless the household has cited otherwise. If the amount appears to be inconsistent with the frequency, the determining official should follow up.

## **TEMPORARY APPROVAL**

When a household reports zero income or a temporary reduction in income, eligibility must be determined based on the present rate of income, rather than on regular annual income. However, the approving official should issue temporary approval of the application. The time-frame for a temporary approval may vary depending on the households' circumstances.

**EXAMPLE:** If the primary wage earner expects to return to work in 2 weeks, the temporary approval may be for a shorter time than if the primary wage earner has lost his or her job and has no prospects for a new one.

In general, a suggested time limit for a temporary approval is 45 calendar days. At the end of the approval period, the center should contact the household to determine if the household's circumstances have changed. If there has been no change, the center should document the contact and extend the temporary approval. If the household's circumstances have changed, the center should send a new application to the household.

**EXCEPTIONS:** Zero income on an application for a foster child or institutionalized child is acceptable, and may be approved for a year.

## **NOTIFICATION TO ELIGIBILITY DETERMINATION:**

If eligibility is based on income and household size, the household must report increases in income of over \$50 per month or \$600 per year and any decreases in household size. When a household reports such changes, the center must review the information and make any appropriate change in eligibility.

If eligibility is based on receipt of Food Stamps, the household must report when it no longer receives benefits for the child. A household that reports such a change must complete a new application and provide information to allow a determination of eligibility based on income, i.e., household size and income and a social security number for the adult household member who signs the application. The determining official must review the information, and make an eligibility determination.

All current income applications, including applications from households denied benefits, and inactive applications, must be kept on file for a minimum of 5 years after the end of the Fiscal Year to which they pertain, and they must be readily retrievable. Files must be kept longer if they are required by an audit. If audit findings have not been resolved, the applications must be maintained as long as required for resolution of the issues raised by the audit.

For applications from households approved for free and reduced meals, the determining official should indicate the date each application is approved, and the category for which each child is approved, and sign or initial the application. For applications from households denied benefits, the determining official must identify and retain on file the reasons for the denial. Records should also include the date of the denial, and the name of the determining official. These may be noted directly on the application.

Applications may be maintained either at the center or at a central location. If a center elects to maintain applications at a central location, applications must be readily retrievable.

## **QUESTIONS AND ANSWERS:**

1. **QUESTION:** How much judgment or discretion may a center exercise in determining whether a household does or does not meet the eligibility criteria?

**ANSWER:** Frequently questions arise concerning what is to be included as income and what constitutes a household. The Eligibility Guidance is intended to provide guidelines for those individuals making eligibility determinations. The guidance cannot, however, address each individual situation. Determining officials will occasionally have to apply the broad concepts set forth in this guidance to some individual situations. If unusual situations, unlike any example in the guidance arise, the determining official should contact the State Agency (SA), as appropriate.

2. **QUESTION:** How quickly should I process applications?

**ANSWER:** Applications for new participants should be processed as quickly as possible.

3. **QUESTION:** If a migrant or other household member leaves the center late in the year, in March, for example, and returns in May, may the child be fed based on the prior application approval?

**ANSWER:** Yes, if the application is less than one year old.

4. QUESTION: If any item of required information is missing from the free and reduced price application, may the determining official make an eligibility determination on the basis of a sibling application or must he/she consider the application incomplete and take follow-up action?

ANSWER: A determining official may look to a complete sibling application for any item of required information, except Food Stamp information. Since Food Stamp categorical eligibility is on an individual basis, the determining official must either contact the household for that information or consider the application incomplete. The official may staple the incomplete and complete applications together. In lieu of stapling the two applications together, the official may either photocopy the complete application and staple the photocopy to the incomplete application, or transfer the information from the complete application, initial it, and note the source of the information. The complete application must be readily available for review.

5. QUESTION: If any item of required information is missing from the free and reduced price application, may the determining official complete the application for the household using information derived from other records available?

ANSWER: No item of required information may be derived from a source other than the household or a sibling application.

6. QUESTION: A household voluntarily provided pay stubs that conflict with the income information on the application. According to the income information on the application, the household is eligible. However, from the pay stubs, it appears that the household is not eligible. What should the determining official do?

ANSWER: The submission of eligibility information that does not support the content of the application must not affect the initial eligibility determination. The determining official must approve or deny the application on face value. However, whenever the household submits eligibility information, either voluntarily or as required by the SA, which does not confirm the level of benefits for which the household has been approved, the center official must take appropriate action. Center officials are in the best position to determine the appropriate action to take. However, the inconsistency must be resolved.

7. QUESTION: A household voluntarily provided pay stubs with the application but did not write the amount of each person's income on the application. All other items were completed. According to the pay stubs, the household is eligible for benefits. What should the determining official do?

ANSWER: Rather than denying the application or returning the application to the household, the determining official may contact the household, by phone or in writing, to ensure that the household submitted all documentation of income. The official should document the contact, enter the information on the application, and initial and date the action.

8. QUESTION: What is acceptable as an adult signature?

ANSWER: Any printed name or cursive signature appearing in the space following the certification statement is an acceptable signature. We cannot expect all legal signatures to be cursive.

9. QUESTION: When using a single child application, if the adult signature is missing, can a sibling's application be photocopied and/or stapled to the application missing the signature to make a complete application?

ANSWER: Yes. If the remainder of the information is the same and if the child whose application is missing information is listed as a household member on the sibling application.

10. QUESTION: Several applications, none of which is complete, are submitted from the same household for different children. How many sibling applications can be used to generate a complete application?

ANSWER: There must be at least one complete application in which the household member has certified the information to be correct from which information may be obtained to complete one or more sibling applications.

11. QUESTION: May the approval of applications be delegated to a food service management company along with other management responsibilities?

ANSWER: No. The determination of eligibility for free and reduced price meals is a center responsibility and may not be assigned to a food service management company. Center officials are directly responsible for determining eligibility and maintaining the confidentiality of the information on the application.

12. QUESTION: If a sibling was not listed on last year's application, but comes from a family with children, who were eligible for free meals last year, can I claim free reimbursement for that child before applications are processed.

ANSWER: Yes. The center may claim the same level of benefits for new children from households with children who were approved for benefits last year.

## COMPLETE APPLICATION

1. QUESTION: Does an emancipated child sign his/her own application? Is a social security number required?

ANSWER: An emancipated child who lives alone as a household of one or as a member of a household with no adult household members must sign his/her own application. No social security number is required since the emancipated child is not an adult.

2. QUESTION: Who signs the application for a foster child?

ANSWER: The foster parent or guardian or other official representative for the child must sign the application for a foster child; however, the foster parents' or guardians' income, household size, and social security number are not needed on the application.

3. QUESTION: Does income have to be indicated on the application for a foster child?

ANSWER: Yes. The child's income must be considered for the eligibility determination. A foster child's income includes funds provided by the welfare agency that are specifically identified by category for the personal use of the child, such as for clothing, school fees, and allowances. In addition, other funds received by the child are included as income, i.e., income a child earns for full time or regular part time employment, and money provided by the child's family for personal use. If funds are not specifically identified for personal use, income should be listed as "0", and the application should be approved for a full year.

4. QUESTION: What if there is no income listed on an application? Do I consider it as zero or should I go back to the household for more information?

ANSWER: If no income is listed on the application, the determining official should contact the household for additional information. If the determining official is unable to contact the household, the application must be denied because it is incomplete.

5. QUESTION: What is the racial/ethnic data collection question is not completed?

ANSWER: Parent's provision of this information is voluntary, and failure to provide the information must not affect the child's eligibility.

Centers are required to develop alternative means of obtaining racial and ethnic data for applicant when such information is not voluntarily provided by parents on the application.

6. QUESTION: What applications should be considered for temporary approval?

ANSWER: Applications that may receive temporary approval include those from households affected by temporary layoffs, strikes, temporary receipt of public assistance, and zero income. Zero income, however, may be acceptable for a foster child or institutionalized child. Determining officials should use their own judgement and consider temporary approval for other questionable situations.

## MAINTENANCE OF APPLICATIONS

**QUESTION:** If I have temporarily approved an application, and if after the temporary approval period I know that circumstances have not changed, do I have to contact the household, or may I automatically extend the temporary approval?

**ANSWER:** After each temporary approval period, each household should be contacted again to offer the household an opportunity to report changes in household size and income information.

## INCOME ELIGIBILITY

**General:** To determine if a household meets income eligibility requirements, center officials must compare the household size and the total household income to the income eligibility guidelines (IEGs). Center officials may be asked by households for guidance on whom to include as a household member or what to include as income on the application for benefits. Although center officials may have to use their own discretion in some instances, the following guidelines are intended to provide assistance in answering questions from households and in making income eligibility determinations.

### **Determining Household Size - Special Situations:**

**Adopted Child:** An adopted child for whom a household has accepted legal responsibility is considered to be a member of that household.

**Child Attending an Institution:** A child who attends, but does not reside in an institution, is considered a member of the household in which he/she resides.

**Child Away at School:** A child who is temporarily away at school (e.g., attending boarding school or college) should be counted as a member of the household.

### **Determining Household Income:**

**Child Living with One Parent, Relative or Friends:** In cases where no specific welfare agency or court is legally responsible for the child or where the child is living with one parent, other relatives or friends of the family, the child is considered to be a member of the household with who he/she resides. Children of divorced or separated parents are generally part of the household that has custody.

**Emancipated Child:** A child living alone or as a separate economic unit is considered to be a household of one. In some cases, an emancipated child may be living with relatives or friends, none of whom is an adult. If the household is one economic unit, all income and household members must be included to determine eligibility. Age is not a factor in defining an emancipated child.

**Foreign Exchange Student:** A foreign exchange student is considered to be a member of the household in which he/she resides, i.e., the household hosting the children.

**Foster Child:** A foster child is a child who is living with a household but who remains the legal responsibility of the welfare agency or court. Such a child is considered a household of one.

**Joint Custody:** In cases where joint custody has been awarded and the child physically changes residence, the child is part of the household where he/she resides. Therefore, the child's eligibility could change monthly, weekly or even daily, depending on the rotating time periods at each household.

**Family Members Living Apart:** Family members living apart on a temporary basis are considered household members. Family members not living with the household for an extended period of time are not considered members of the household for purposes of determining eligibility, but any money made available by them or on their behalf for the household is included as income to the household.

**Reportable Income:** Income is any money received on a recurring basis, including gross earned income, unless specifically excluded by Legislation. Specifically, gross earned income means all money earned before such deductions as income taxes, employee's social security taxes, insurance premiums and bonds.

**Income includes the following:**

Households must report current income on a free and reduced price application. Current income means income received by the household during the month prior to application. If this income is higher or lower than usual and does not fairly or accurately represent the household's actual circumstances, the household may project its annual rate of income based on the guidelines identified below.

**Special Situations:**

**Projected Income for Seasonal Workers and Others:** Seasonal workers, such as migrants, and others, whose income fluctuates, usually earn more money in some months than in other months. Consequently, the previous month's income will commonly distort the household's actual circumstances. In these situations, the household may project its annual rate of income and report this amount as its current income. If the prior year's income provides an accurate reflection of the household's current annual rate of income, the prior year may be used as a basis for the projected annual rate of income.

**Income for the Self-Employed:** Self-employed persons may use last year's income as a basis to project their current year's income, unless their current net income provides a more accurate measure.

Gross receipts include the total income from goods sold or services rendered by the business. Deductible business expenses include the cost of goods purchased, rent, utilities, depreciation charges, wages and salaries paid, and business taxes (not personal, Federal, State or local income taxes).

Non-deductible business expenses include the value of salable merchandise used by the proprietors of retail businesses.

Net income for self-employed farmers is figured by subtracting the farmer's operating expenses from the gross receipts.

Gross receipts include the value of all products sold; money received from the rental of farmland, buildings, or equipment to others; and incidental receipts from the sale of items such as wood, sand, or gravel.

Operating expenses include cost of feed, fertilizer, seed, and other farming supplies; cash wages paid to farmhands; depreciation charges; cash rents; interest on farm mortgages farm building repairs; and farm taxes (but not local, State and Federal income taxes).

**Income from Wages and Self-Employment:** For a household with income from wages and self-employment, each amount must be listed separately. When there is a business loss, income from wages may not be reduced by the amount of the business loss. If income from self-employment is negative, it should be listed as zero income.

**Income Exclusions:**

Income not to be reported or counted as income in the determination of a household's eligibility for free and reduced price benefits include:

- any cash income or value of benefits a household receives from any Federal program that excludes such income by legislative prohibition, such as the value of Food Stamps provided under the Food Stamp Program;

- student financial assistance provided for the costs of attendance at an educational institution, such as grants and scholarships, awarded to meet educational expenses and not available to pay for meals;

- loans, such as bank loans, since these funds are only temporarily available to pay for meals;

- the value of in-kind compensation, such as military on-base housing or any other non-cash benefits;

- occasional earnings received on an irregular basis, e.g., not recurring, such as payment for occasional baby-sitting or mowing lawns.

**Special Situations:**

**Military Benefits:** Military benefits received in cash, such as housing allowances for military households living off base and food and clothing allowances, must be considered as income. An in-kind benefit, such as on-base housing is not counted.



**Foster Child's Income:** Only the child's income is considered for eligibility purposes. The child's income include:

funds provided by the welfare agency that are specifically identified by category for the personal use of the child, such as clothing, school fees, and allowances;

welfare funds paid to the foster parents identified by category for shelter and care, and those identified as special needs funds, such as those for medical and therapeutic needs, are not considered as income. Where welfare funds cannot be identified by category, no portion of the provided funds is considered as income; and

other funds received by the child, including any income the child earns for full time or regular part time employment, and money provided by the child's family for personal use.

**Institutionalized Child's Income:** Payments from any source directly received by the institution on a child's behalf are not considered as income to the child. Only the income a child earns from full time or regular part time employment and/or personally receives while in residence at the institution is considered as income.

**Child's Income:** The earnings of a child who is a full time or regular part time employee must be listed on the application as income. However, occasional earnings, such as income from occasional baby-sitting or mowing lawns, should not be listed on the application as income.

**Alimony and Child Support:** Any money received by a household in the form of alimony or child support is considered as income to the receiving household. However, any money paid out for alimony or child support may not be deducted from that household's reported gross income.

**Lump Sum Payments:** Lump sum payments or large cash settlements are not counted as income since they are not received on a regular basis. These funds may be provided as compensation for a loss that must be replaced, such as payment from an insurance company for fire damage to a house. When lump sum payments are put into a savings account and the household regularly draws from that account for living expenses, the amount withdrawn is counted as income.

**Garnished Wages and Bankruptcy:** Income is the gross income received by a household before deductions. In the case of garnished wages and income ordered to be used in a specified manner, the total gross must be considered regardless of whatever portions are garnished or used to pay creditors.

## INCOME QUESTIONS AND ANSWERS

1. QUESTION: Why is the off base housing allowance provided to service personnel counted as income when the value of on base housing is not?

ANSWER: Income is defined as all cash received on a recurring basis. In-kind benefits, by definition, are not cash payments, and therefore, are not considered as income for the purpose of determining free and reduced price eligibility. Center officials are not in a position to determine the value of in-kind benefits, such as housing for clergy, cars for salespersons, employee medical or dental benefits, etc. The income exclusion for in-kind benefits is uniform throughout the meal programs. The benefits provided to the general population would create an inequity. The fact that the value of military on-base housing is more readily identifiable than other sources of in-kind benefits would not lessen the inequity.

2. QUESTION: What payments from Federal programs are excluded from consideration as income by legislative prohibition?

ANSWER: (1) The value of assistance to children and their families under the National School Lunch Act, the Child Nutrition Act of 1966, and the Food Stamp Act of 1977; (2) reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970; (3) any payment to volunteers under Title I (VISTA and others) and Title II (RSVP, foster grandparents, and others) of the Domestic Volunteer Service Act of 1973 to the extent excluded by that Act; (4) payments to volunteers under Section 8(b)(1)(B) of the Small Business Act (SCORE and ACE); (5) income derived from certain sub marginal land of the U.S. that is held in trust for certain Indian tribes; (6) payments received under the Job Training Partnership Act; (7) income derived from the disposition of fund to the Grand River Band of Ottawa Indians; (8) payments received under the Alaska Native Claims Settlement Act; (9) payments by the Indian Claims Commission to Tribe of the Mescalero Reservation; (10) payments to the Passaquoddy Tribe and the Penobscot Nation or any of their members received pursuant to the Maine Indian Claims Settlement Act of 1980; (11) student financial assistance received under Title IV of Higher Education Act of 1965, including the Pell Grant, Supplement Education Opportunity Grant, State Student Incentive Grants, National

Direct Student Loan, PLUS, College Work Study, and Byrd Honor Scholarship Programs, to the extent excluded by that ACT; (12) Agent Orange Settlement payments to Veterans, that have been excluded under Public Law 101-201; and (13) payments received under the Civil Liberties Act of 1988

3. QUESTION: If the household indicates \$0 for income, is that sufficient?

ANSWER: "Zero Income" is sufficient for a temporary approval. Center officials should confirm the continued eligibility of a zero income application every 45-calendar days. However, some circumstances may warrant approval of a zero income application for the Fiscal Year, such as for the foster or institutionalized child.

4. QUESTION: If one household owns a housing unit and rents living space to another household, does the household receiving the rental fee have to report this amount as income?

ANSWER: Yes. Income includes money derived from rent of room(s), apartment(s), etc. If a household receives rental income from another household, it must be included as income. The treatment of rental income would be similar to the treatment of self-employment income.

#### **Household Size:**

1. QUESTION: When foster parents apply for benefits for their own children, do they include their foster children as household members, and do foster parents include the payments provided by the welfare agency for care of the foster children as income to the household?

ANSWER: No. Since each foster child, including a preschool foster child, is a household of one, foster children are not included in the foster parents' household. Payments received by the household for care of the foster child are not included as part of the foster parents' income.

2. QUESTION: What if a child lives with his/her parents and is required to pay for room and board? Is the child a separate household?

ANSWER: The child is considered to be a separate household only in those cases where the child is living alone or as a separate economic unit. Separate economic units are usually characterized by the prorating of most household expenses. Most students paying room and board are usually paying a token amount and are not economically independent of their parents and are therefore not considered to be emancipated.

3. QUESTION: If two separate households rent living space (e.g., an apartment or house), and one household gives its portion of the rent to the other household which, in turn, transmits the full rent to the landlord, does the rental income given to the transmitting household count as rental income?

ANSWER: No. The transmitting household has not received income; rather it is performing a simple financial transaction that does not provide it with additional income.

#### **CATEGORICAL ELIGIBILITY:**

A child from a household currently certified to receive Food Stamps is categorically eligible. When a household submits a complete application that contains: (1) the name of the child; (2) a current food stamp case number, and (3) an adult signature, the determining official must categorize the child as free. No further application information is required.

#### **ADULT PARTICIPANT:**

An eligible adult participant is considered the head of a household of one. If the adult participant is a member of a Food Stamp household or is a SSI or Medicaid participant, the adult participant is automatically eligible to receive free Program meal benefits, subject to the completion of the application. The Food Stamp number, the SSI number, or the Medicaid number must be indicated on the application; otherwise, income of the adult participant will be required to determine the category of reimbursement.

## GLOSSARY

**Adult** means, for the purposes of the collection of social security numbers as a condition of eligibility for free or reduced-price meals, any individual 21 years of age or older.

**Adult Participant** means a person enrolled in an adult day care center who is functionally impaired (as defined in this section) or 60 years of age or older.

**Categorical Eligibility** means that any child who is a member of a Food Stamp household is automatically eligible for free meals. Such households must provide current Food Stamp case numbers on the application for free and reduced price meals to establish their categorical eligibility.

**CFR** stands for Code of Federal Regulations. Child Nutrition Regulations are contained in Title 7 of the Code of Federal Regulations.

**Food and Nutrition Service (FNS)** is the agency within the U.S. Department of Agriculture that is responsible for administering the Child and Adult Care Food Program, National School Lunch Program, School Breakfast Program, Special Milk Program, Commodity School Program, and other food assistance programs.

**FNSRO** is the Food and Nutrition Service Regional Office.

**Food Stamp Household** refers to any individual or group of individuals currently certified to receive benefits under the Food Stamp Program.

**Free Meal** is a meal served under the Child and Adult Care Food Program, National School Lunch Program, or School Breakfast Program to an individual from a household eligible for such benefits under 7 CFR Part 245 and for which neither the participant nor any member of the household pays for or is required to work in the center, school, or in the school's food service.

Functionally Impaired Adult means chronically impaired disabled persons 18 years of age or older, including victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction, who are physically or mentally impaired to the extent that their capacity for independence and their ability to carry out activities of daily living is markedly limited.

**Income Eligible** means that any child from a household whose current income is at or below the household size/income limits set forth in the income eligibility guidelines (IEGs) is eligible for either free or reduced price meals. Such households must provide household size and income information on the application for free and reduced price meals to enable center officials to compare the household information to the IEGs.

**Income Eligibility Guidelines (IEGs)** are the household size and income levels prescribed annually by the Secretary of Agriculture for determining eligibility for free and reduced price meals and for free milk. The free guidelines are 130 percent of Federal poverty guidelines and the reduced price are 185 percent of poverty guidelines.

**Overt Identification** means any act that openly identifies individuals as eligible for free or reduced price benefits in the Child and Adult Care Food Program, National School Lunch Program, School Breakfast Program, or Special Milk Programs.

**Reduced Price Meal** is a meal served under the Child and Adult Care Food Program, National School Lunch Program, or School Breakfast Program to a participant from a household eligible for such benefits under 7 CFR Part 245. The price of this meal must be less than the full price of the meal and no more than 40 cents per lunch and 30 cents per breakfast. Neither the child nor any household member can be required to work in the center, school, or in the school's food service to supplement the cost of the meal.

**School Food Authority (SFA)** is the governing body that is responsible for the administration of one or more schools and which has the legal authority to operate the program in these schools or is otherwise approved by FNS to operate the program.

**7 CFR Part 245** is the regulation governing the determination of eligibility for free and reduced price meal benefits in the Child and Adult Care Food Program, National School Lunch, and School Breakfast Programs and for free milk in the Special Milk Program.

**State Agency (SA)** is either (1) the State Education Agency, or (2) any other agency of the State designated by the Governor or other appropriate executive or legislative authority of the State and approved by USDA to administer the nutrition programs.

**United States Department of Agriculture (USDA)** is the Federal Agency designated by Congress to administer the Child and Adult Care Food Program, National School Lunch, School Breakfast, Special Milk, and Commodity Programs.

## Remember...



Income forms must be renewed in a timely manner –  
at least once every year.

# *APPEAL PROCEDURES*

for

*USDA NUTRITION PROGRAMS*



# **Appeal Procedures For USDA Nutrition Programs Administered by The Health and Nutrition Programs**

## **REQUIREMENTS**

Each State Agency shall establish an appeal procedure to be followed by an institution requesting a review of adverse action taken by Health and Nutrition Programs (HNP). The procedures contained in the following sections comprise the official hearing procedures to be followed for hearings relative to the Child and Adult Food Program (CACFP), the National School Lunch Program (NSLP), and the Summer Food Service Program (SFSP). The review or hearing procedures outlines below apply both to sponsoring organizations and institutions.

## **REASONS FOR REQUESTING A REVIEW**

The Appeals and Hearings Section of the Office of Chief Counsel has been delegated the responsibility for conduction reviews of institutions aggrieved by the following actions:

- |      |                   |   |
|------|-------------------|---|
| (1)  | CACFP, SFSP       | Denial of an institution's/sponsoring organization's application on behalf of a facility/site for participation.                        |
| (2)  | CACFP, SFSP       | Termination of participation of an institution or facility.   |
| (3)  | CACFP             | Suspension of an institution's Agreement.   |
| (4)  | CACFP, SFSP       | Denial of an institution's application for start-up payments.   |
| (5)  | CACFP, SFSP       | Denial of an advance payment, if applicable.  |
| (6)  | CACFP, SFSP, NSLP | Denial of all or part of the claim for reimbursement (except for late submission which is not an appealable issue).                     |
| (7)  | CACFP             | Denial by HNP to forward to FNS an exception request by the institution or sponsoring organization for an upward adjustment to a claim. |
| (8)  | CACFP, SFSP       | Denial for the remittance of an overpayment.  |
| (9)  | CACFP             | Any other action of HNP that affects the participation of an institution in the Program or the institution's claim for reimbursement.   |
| (10) | SFSP              | Denial of a Food Service Management Company's (FSMC) application for a site.  |
| (11) | SFSP              | Denial of a FSMC application for registration.  |
| (12) | SFSP              | The revocation of a FSMC's registration.  |

**NOTE:** In the event that the hearing process was not invoked or the State Agency's action was upheld, requests for repayment by HNP do not constitute grounds for a review or hearing.

## **INSTITUTION'S RIGHT TO APPEAL**

At the time of any adverse action, the institution/sponsoring organization must be advised in writing by a notice of action, sent by certified mail, return receipt requested, and must contain the following:

- (1) CACFP, SFSP The basis for the adverse action.
- (2) CACFP, SFSP A statement indicating the right to appeal.
- (3) CACFP, SFSP The address to which to route the appeal.
- (4) CACFP, SFSP A copy of the appeal procedures.
- (5) CACFP, SFSP The right to legal counsel or to be represented by another person.
- (6) CACFP, SFSP The right to file written information and the right to request a hearing (appellant must state specifically if he/she wished to have a hearing).
- (7) CACFP, NSLP The right to file written information to be considered by the Review or Hearing Official within 30 calendar days from the date of the notice of action.
- (8) SFSP The right to file written information to be considered by the Review or Hearing Official within seven days after the submission of the appeal for appeals Relative to the SFSP.
- (9) SFSP The requirement that SFSP appeals must include a photocopy of the notice of action issued by HNP.

## **REQUESTING THE HEARING**

A request for a review or hearing must be submitted in writing to the **Appeals and Hearings Section, P.O. Box 1437, Slot N-401, Little Rock, Arkansas, 72203**, within the time frames set out below.

## **TIME FRAMES FOR REQUESTING A REVIEW**

- (1) CACFP, NSLP The written request for a review or hearing must be filed no later than fifteen (15) calendar dates from the date of receipt of the notice of action (established by the certified mail receipt). The letter requesting review must specify if the appellant wishes to have a hearing in lieu of a review of written information submitted by the appellant and HNP.
- (2) SFSP The written request for review must be filed no later than seven (7) days from the date in which the notice of action is received) established by the certified mail receipt).

## **DENIAL OR DISMISSAL OF A REQUEST FOR REVIEW**

The Appeals and Hearings Sections will not deny or dismiss a request for a review except under the following circumstances:

- (1) The request was not received within the specified time frame for requesting a review.
- (2) The request was withdrawn in writing by appellant or its representative.

When the appellant has requested a hearing in lieu of written information and fails to appear for the scheduled hearing, the decision will be based solely on the written information unless the appellant requested and is granted a rescheduling date by the Appeals and Hearings Section prior to the hearing date. There is no extension of time frames granted in completing final administrative action on a case, and due to the stringent time frames mandated by Federal regulations, a hearing will not be rescheduled except in the most unusual circumstances. Discretion for rescheduling a hearing lies solely with the Appeals and Hearings Section.

# **The Administrative Review Process**

## **BEGINNING THE ADMINISTRATIVE REVIEW PROCESS**

When a request for a review is received, the Appeals and Hearings Section will request the Administrator of HNP to verify whether or not the request has been filed timely. If not, the appellant or representative will be notified by letter from the Appeals and Hearings Section that the request for review is being denied.

## **THE ADMINISTRATIVE REVIEW OR HEARING FILE**

Upon notice by the Appeals and Hearings Section that a request for a review has been filed and after a determination that the request was timely, HNP will prepare and forward a copy of the following documentation to the Appeals and Hearings Section:

- (1) The notice of action.
- (2) All documentary evidence used to support the notice of action upon which the request for review is based.
- (3) A complete summary of the action taken, the basis for the action, and the CACFP, SFSP or NSLP regulation used in the decision to take adverse action.

## **ACKNOWLEDGMENT OF RECEIPT OF REQUEST FOR REVIEW**

CACFP, NSLP                      Within ten (10) calendar days of the receipt of request for review of the adverse action in The Nutrition Programs, except the SFSP, the Appeals and Hearings Section must acknowledge the receipt of the request for either a review of the written information or a hearing.

## **STATUS OF ADVERSE ACTION DURING REVIEW OR HEARING PROCESS**

CACFP, SFSP                      The action taken by HNP remains in effect during the appeal process. However, unless participation has been suspended, the institution may continue to participate and receive Program reimbursement for eligible meals served and allowable administrative costs incurred until its administrative review is completed.

## **PROCEDURE RESULTING FROM REQUEST FOR REVIEW OF WRITTEN INFORMATION**

An appellant is afforded the right to an impartial review of the record and may submit written information to be considered by the Review Official.

## **PROCEDURE RESULTING FROM REQUEST FOR A HEARING**

An appellant may choose to attend a hearing before an impartial hearing official and be represented by legal counsel at the appellant's expense.

## **SUBPOENA OF WITNESSES**

When the Acknowledgment of Receipt of Request for a Review is sent to the appellant who has requested a hearing, he/she will be sent a form on which to subpoena witnesses and a copy of the hearing file. This packet of information is sent certified mail, return receipt requested.

Following a review of the hearing file, the appellant's representative must notify the Appeals and Hearings Section of any witnesses he/she wishes to subpoena.

HNP also has the right to subpoena witnesses and must advise the Appeals and Hearings Section at the time that the hearing file is submitted of any witnesses it wishes to subpoena.



## **SCHEDULING THE HEARING**

For CACFP and NSLP, the hearing must be scheduled ten (10) calendar days in advance. The advance written notice is sent by certified mail, return receipt requested, indicating the time and place of the hearing.

If a hearing has been requested for the SFSP, the appellant and the HNP shall be provided with at least five (5) advance written notice sent by certified mail, return receipt requested, indicating the time and place of the hearing.

## **THE HEARING OFFICER**

The Appeals and Hearings Section will designate all Hearing Officers. The Hearing Officer must not have any personal interest in the case or have had any involvement in the contested action which resulted in the request for a hearing.

## **CONDUCT OF THE HEARING**

The hearing will be conducted by a designated Hearing Official. The appellant may be represented by legal counsel or a designated representative. HNP will be represented by legal counsel only if the appellant has legal counsel or a designated representative.

The representative from HNP will explain the basis for the adverse action and present any documentation (including witnesses) to support this action.

The appellant or representative will be given the opportunity to present witnesses, advance arguments, offer additional evidence and to questions or refute any testimony or evidence. If the appellant is unable to present his evidence in a logical manner, the Hearing Official will assist her/him. All parties will be given the right to cross-examine witnesses. Questioning of all parties will be confined to the issue(s) involved. The Hearing Official has the right to question participants any time during the proceedings.

## **THE REVIEW OR HEARING DECISION**

For the CACFP and NSLP, prompt, definitive and final administrative action must be taken within 120 days of the receipt of a request for a review or hearing. The hearing decision is based upon documentary evidence at the hearing, if requested.

For the SFSP, prompt, definitive and final action must be taken within 14 days of the receipt of the request for review, but where applicable, not before the appellant's written documentation is received in accordance with this section or the policy entitled **"Institution's Right to Appeal"**. Within 5 working days after the hearing or within 5 days after receipt of written documentation if no hearing is conducted, a decision must be rendered.

The Review or Hearing Officer will prepare the decision in accordance and in compliance with appropriate State and Federal regulations. The decision will be signed by the Administrator, Appeals and Hearings Section, or a designated representative. The decision represents final administrative action by the Department and is binding on the Health and Nutrition Programs of the Division of Child Care and Early Childhood Education. The decisions will be sent certified mail, return receipt requested.

## **NOTIFICATION OF HEARING DECISIONS**

Once a hearing decision is rendered, both the appellant and HNP will be notified in writing on the decision sent certified mail, return receipt requested. HNP will notify the Appeals and Hearings Section within 10 days of any action taken by this unit as a result of the hearing action.

## **JUDICIAL REVIEW**

Appellants not satisfied with an administrative hearing decision have the right to pursue judicial review through the Administrative Procedure Act.

A petition must be filed in the Circuit Court of the county of residence of the petitioner or in Pulaski County within 30 days from the date of the administrative hearing decision was received. Copies of the petition are served in DHHS and other parties by personal delivery or mail.

Within 30 days from the date of the service of the petition on DHHS (or additional time granted by the Court not to exceed 90 days total), the Office of Chief Counsel must transmit to the Court the original or certified copy of the entire records of the hearing under review.

Judicial Review is conducted by the Court without jury and is confined to the record.

*In*

## *Conclusion:*

While reviews are required by USDA to ensure recordkeeping and meal pattern compliance, we hope that all of our monitoring visits will be a pleasant, learning experience for you. If deficiencies are noted, you will be given every opportunity to correct the problems. If the findings of your review are considered to be serious, an over claim may be assessed. If you do not agree with the HNP decision to take adverse action against your organization, you have the right to appeal; however, this appeal must be submitted in a timely manner. Using the Appeal Procedures for guidance, the appeal must be requested within fifteen (15) calendar days from the day you receive your written correspondence from the State agency. Your request for an appeal must be submitted in writing to:

The Office of Chief Counsel Appeals and Hearing Section P.O. Box  
1437, Slot N-401 Little Rock, Arkansas 72203-1437

**APPEAL REQUESTS SUBMITTED TO THE HEALTH AND NUTRITION PROGRAMS OFFICE WILL BE RETURNED TO YOU.**

