



Food For Kids Annual CACFP Training

Presented by Haley Zeme





Introductions



- Introduce yourself with the following
 - Name and center you represent
 - How long you have been involved in CACFP
 - Favorite creditable food item to serve to kids



Meet our staff!



Alix Pasillas, Executive
Director, Reno
CMP, CCNP



Kevin Bloem, Assistant
Director, Reno
CCNP



Pam Heisler, Field Monitor/
Homes Processor, Reno
CCNP



Jodi Zollin, Field
Monitor, Las Vegas



Melissa Jones, Field
Monitor, Las Vegas



Amanda Green, Claims
Processor, Reno



Agenda

Overview of CACFP

Meal Patterns, Meal Service, and Child Nutrition

Compliance and Record Keeping

Claims Submission and Reimbursement

Monitoring

Civil Rights Requirements

 Housekeeping



Bathrooms



Snacks and
Water



Breaks



Booklets



Certificates



Questions



Food For Kids Mission Statement

Every child is entitled to the best nurturing possible so that the spirit, creativity, and potentiality of every young child will be advanced.

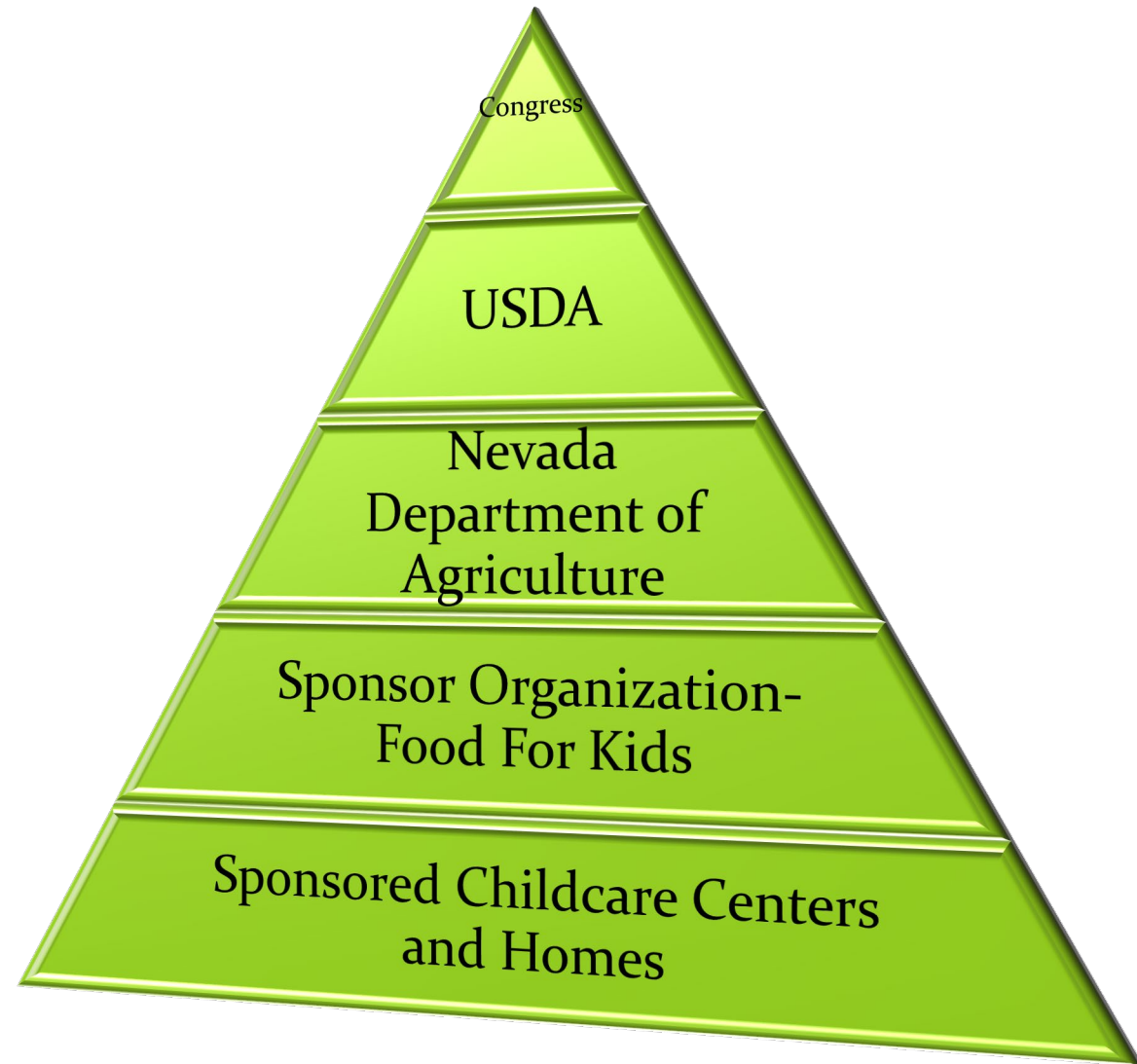
Every child and adult care giver is entitled to dependable and timely service from our program.





CACFP Overview

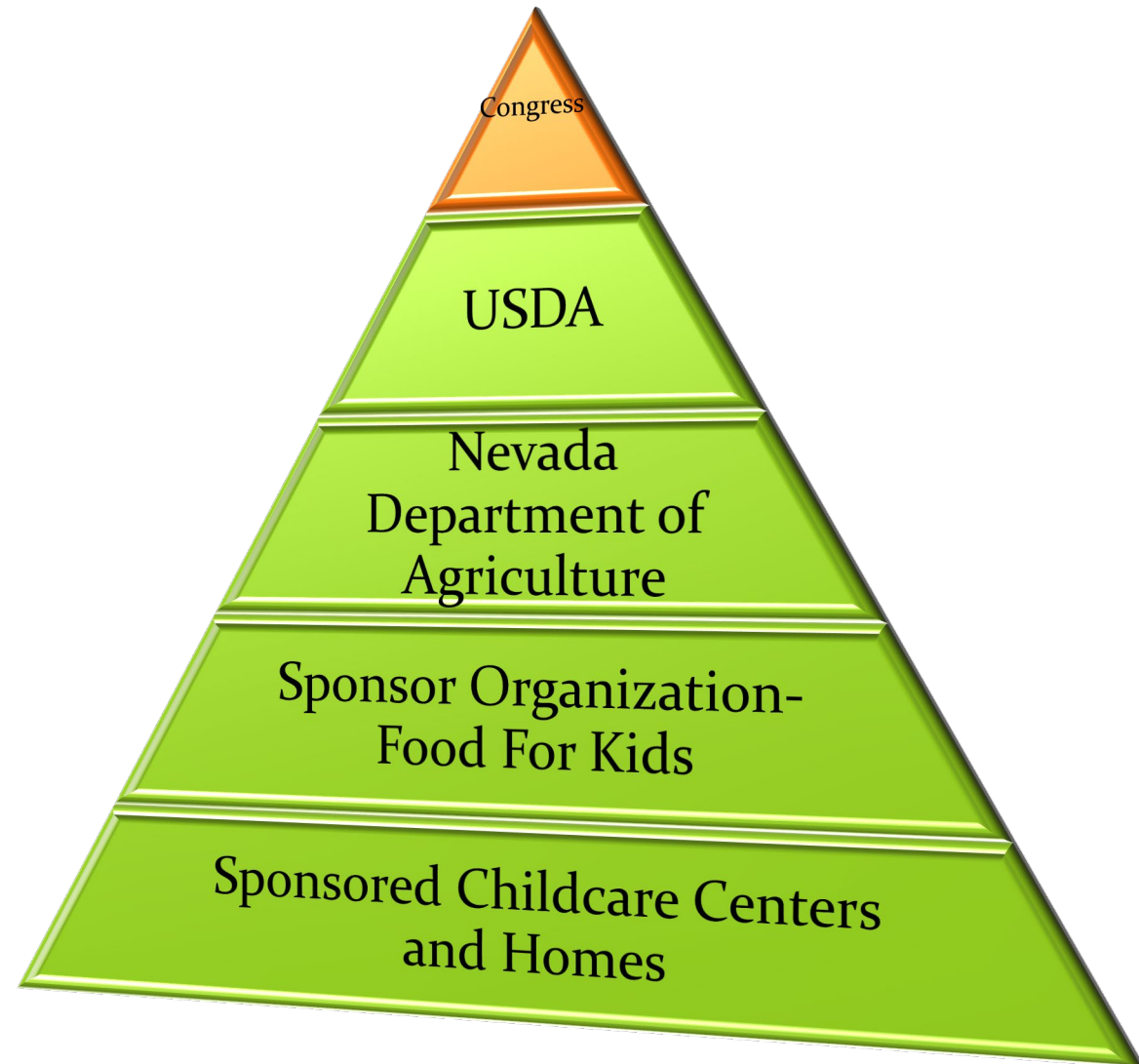
A brief discussion of the responsibilities at each level of CACFP





Congress

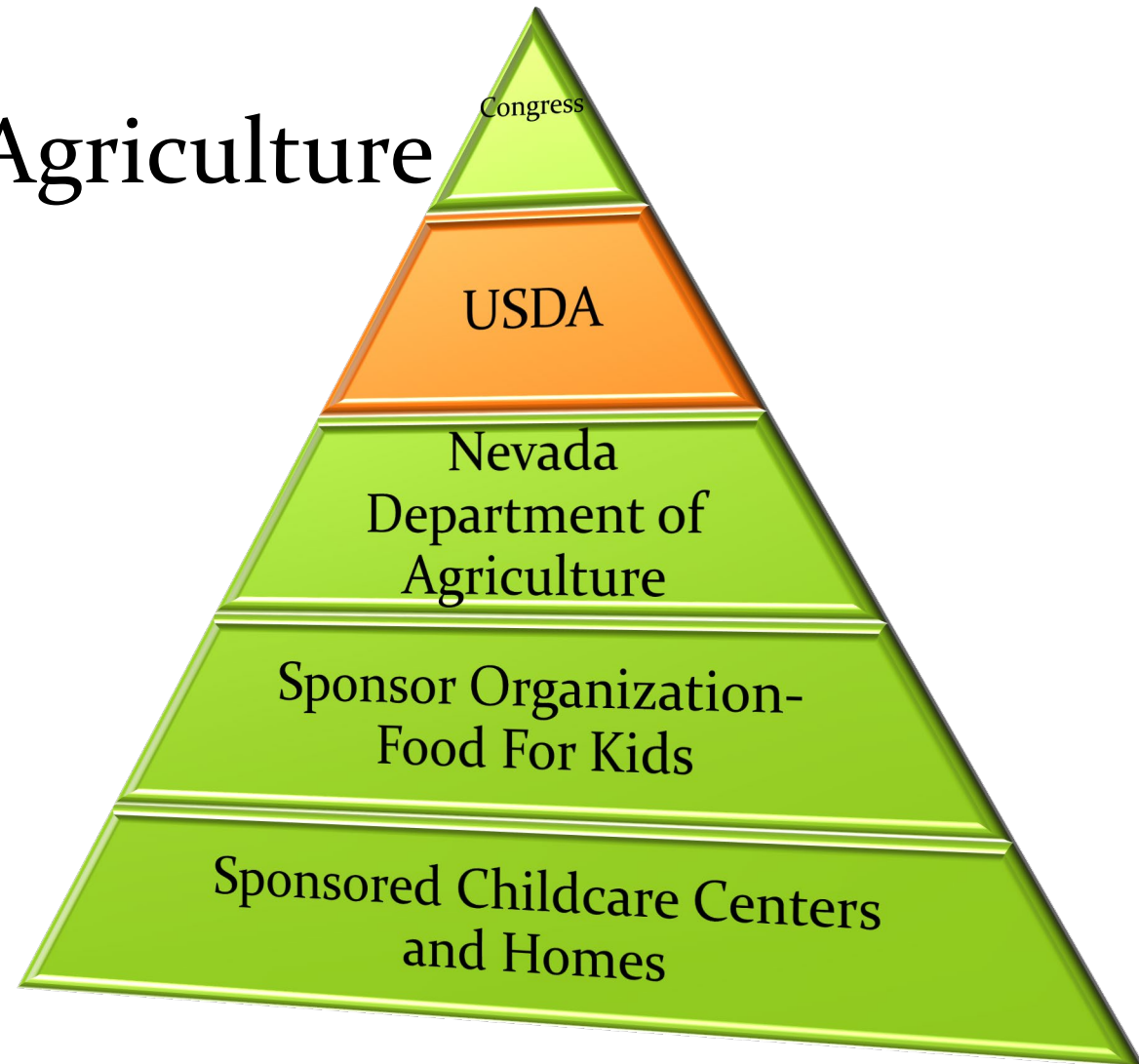
- Passes laws and amendments to implement and regulate the administration of the Child and Adult Care Food Program (CACFP)
- Respond to concerns levied by constituents





US Department of Agriculture

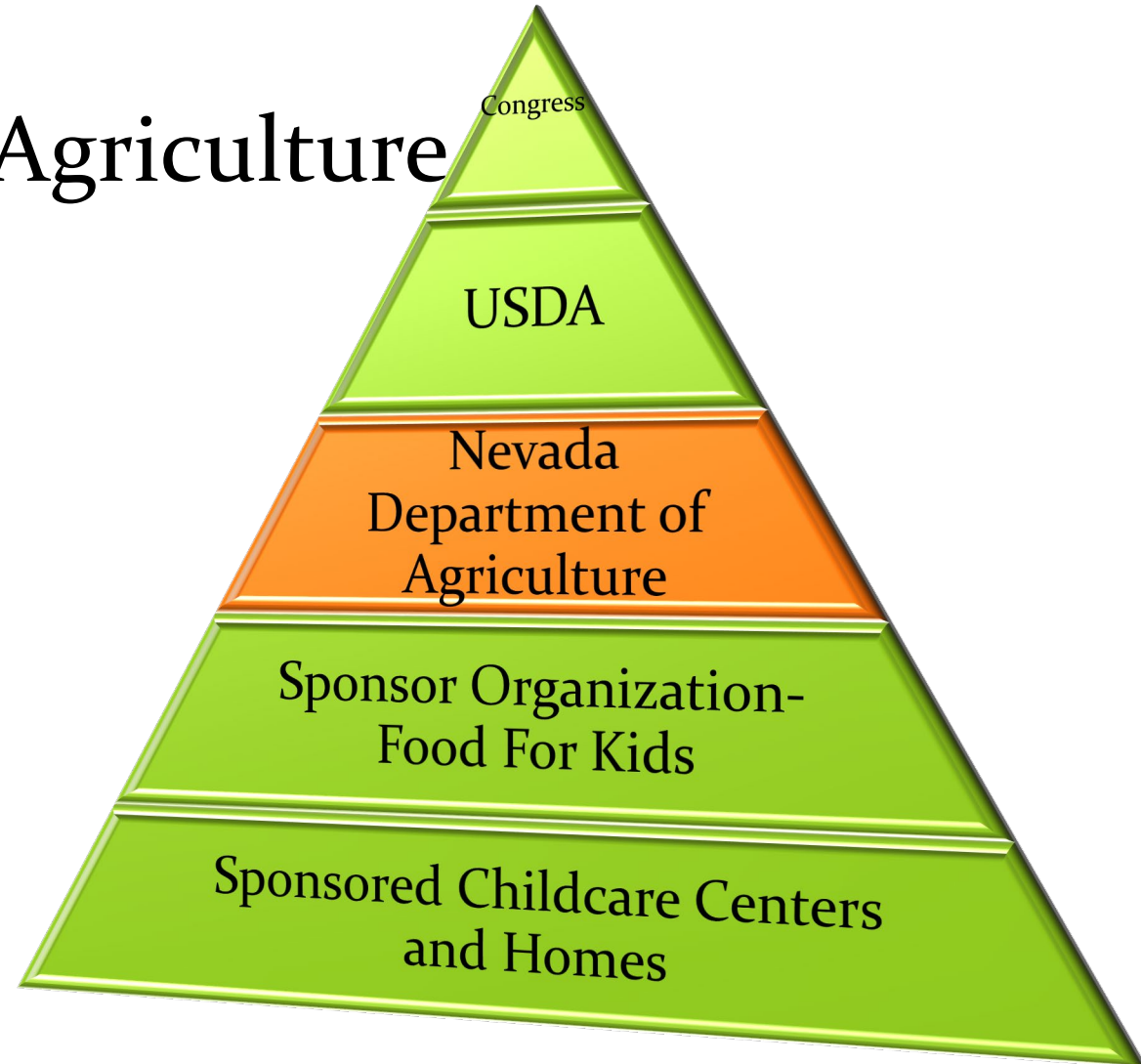
- USDA operates CACFP at the federal level of government
- Disburses funds to the state for reimbursement of claims
- Publishes regulation and resources for the implementation of CACFP within the bounds of laws passed by Congress





NV Department of Agriculture

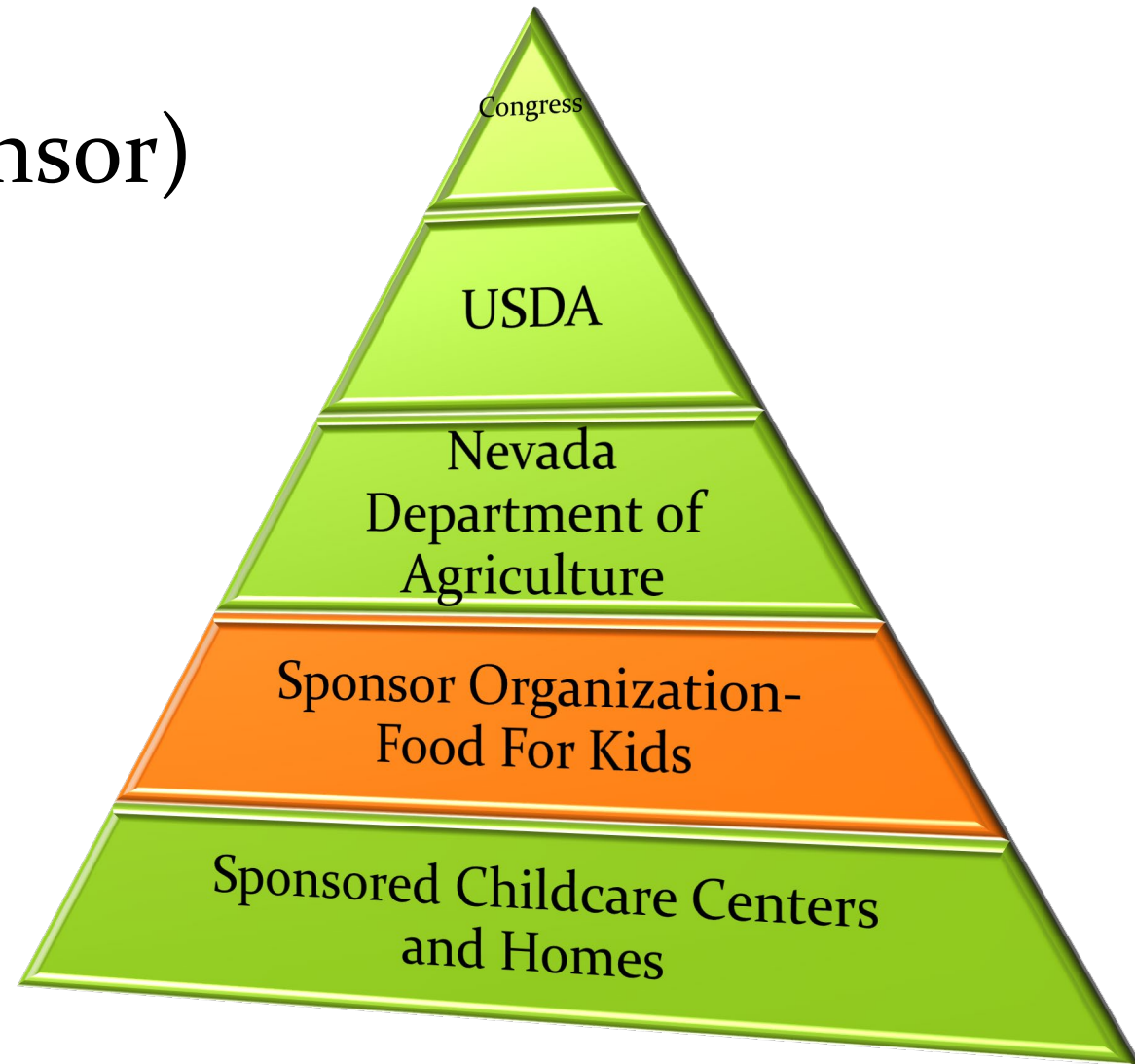
- Implements and monitors CACFP at the state level
- Can pass stricter guidance than what is already published by USDA





Food For Kids (Sponsor)

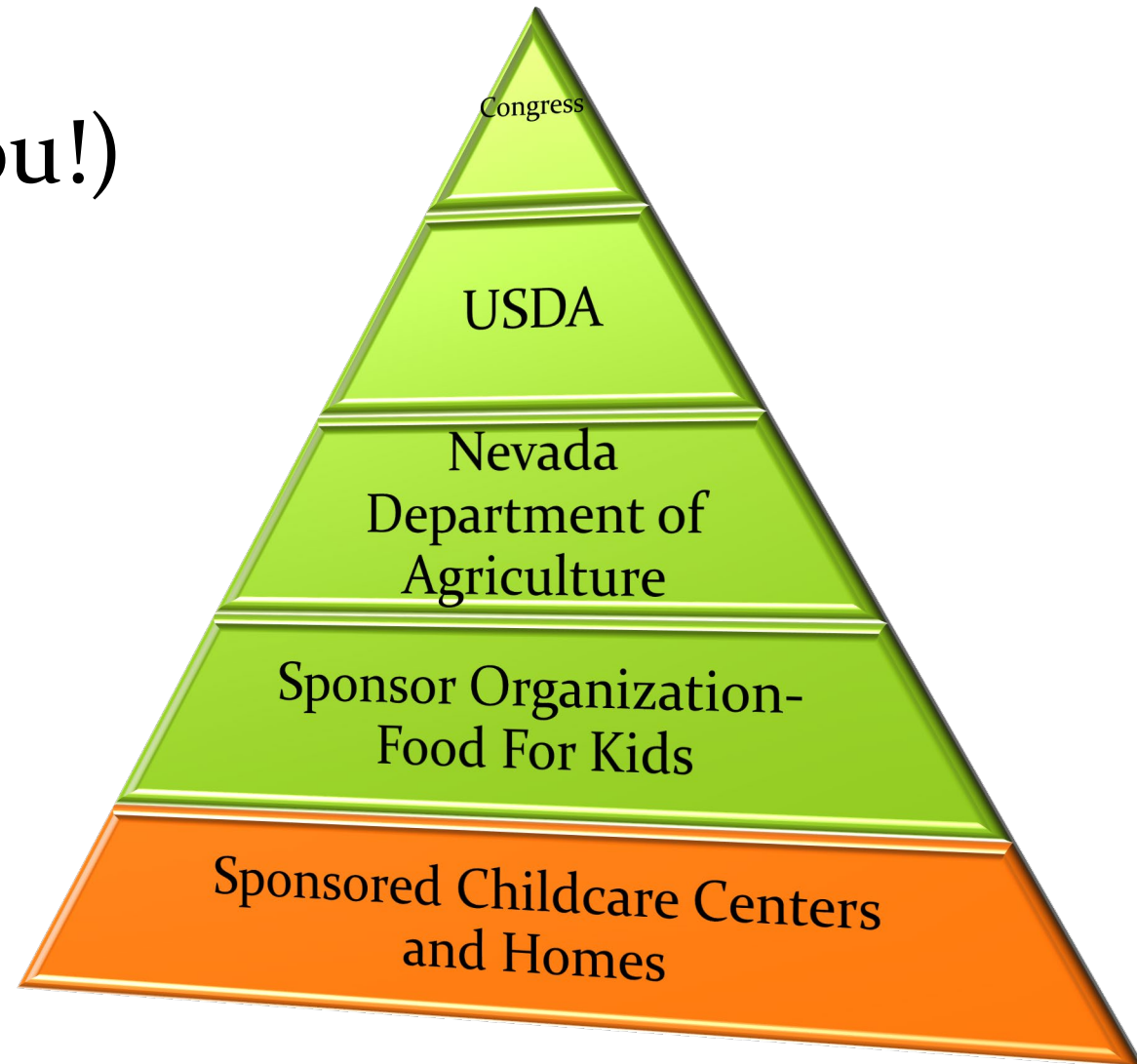
- Ensures compliance with all state and federal CACFP regulations
- Conducts monitoring visits and maintains paper records
- Provides technical assistance and guidance to centers/homes
- Submits claims for reimbursement to the state agency; disburses funds to individual sponsored sites
- A portion of liability is assumed; a portion of reimbursement goes to sponsor to support operations





Sponsored Sites (You!)

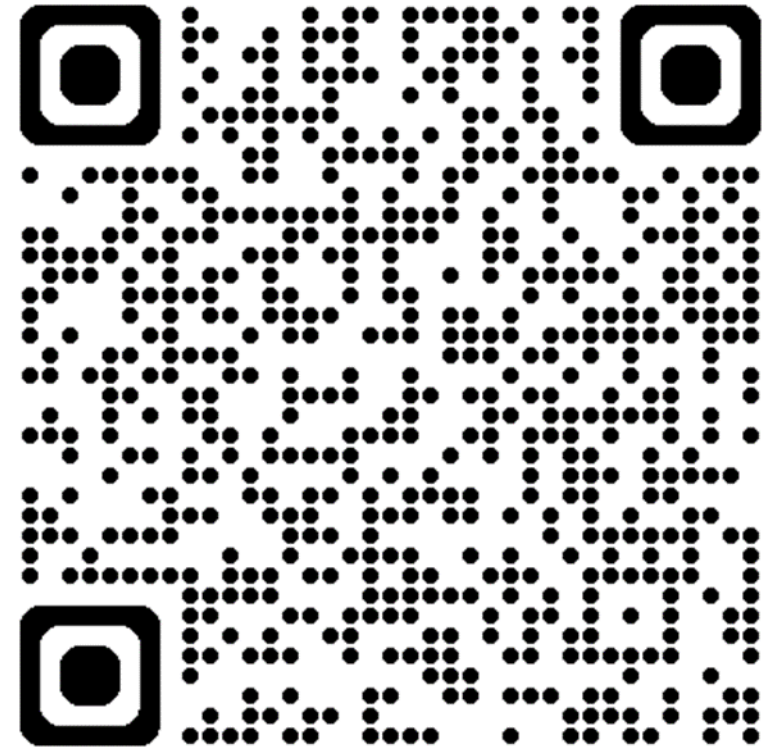
- Serve healthy meals that meet the meal pattern requirements
- Maintain records of purchases, enrollments, meal service and attendance
- Submit claims for reimbursement
- Spend reimbursement on qualified purchases





How to affect change in CACFP Policy?

- Sponsors and sponsored sites abide by regulations made at the federal and state levels to remain compliant
- However, sometimes change is necessary
 - Let us know your concerns!
 - Get involved in policy advocacy
 - 2 pending pieces of legislation
 - Write to your representatives



Scan me to go to the NCA Action Center!

Upcoming Policy Changes in CACFP

Nutrition Facts		
About 11 servings per container		
Serving size 1 Cup (59g)		
	Cereal	with ¾ cup skim milk
Calories	190	250
	% DV*	% DV*
Total Fat	1g 1%	1.5g 2%
Saturated Fat	0g 0%	0g 0%
Trans Fat	0g	0g
Polyunsat. Fat	0.5g	0.5g
Monounsat. Fat	0g	0g
Cholesterol	0mg 0%	<5mg 1%
Sodium	200mg 9%	280mg 12%
Total Carb.	47g 17%	56g 20%
Dietary Fiber	7g 26%	7g 26%
Total Sugars	17g	26g
Incl. Added Sugars	9g 18%	9g 18%
Protein	5g 4%	11g 16%
Vitamin D	0mcg 0%	2.2mcg 10%
Calcium	20mg 0%	240mg 15%
Iron	1.8mg 10%	1.8mg 10%
Potassium	280mg 6%	560mg 10%
Niacin	15%	20%
Phosphorus	10%	25%
Magnesium	15%	20%
Zinc	10%	15%
Selenium	10%	20%
Copper	20%	20%
Manganese	80%	80%

* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

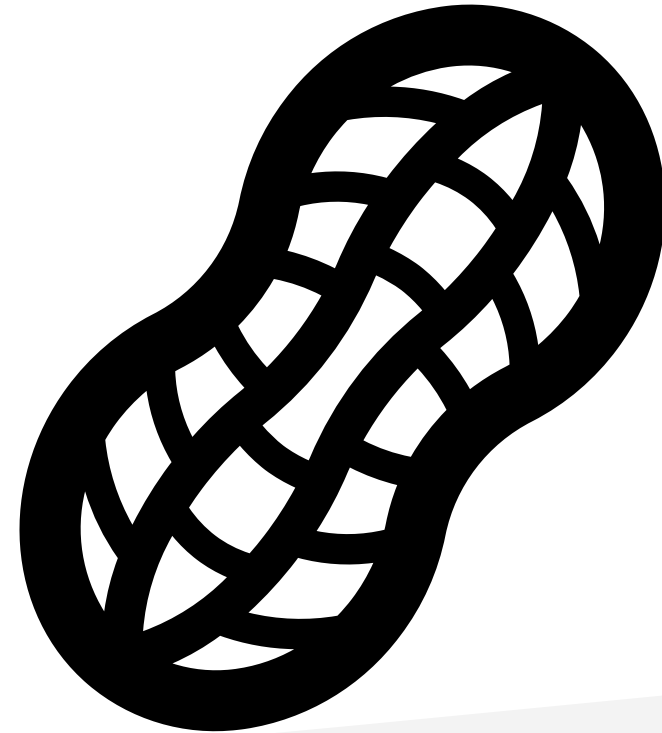
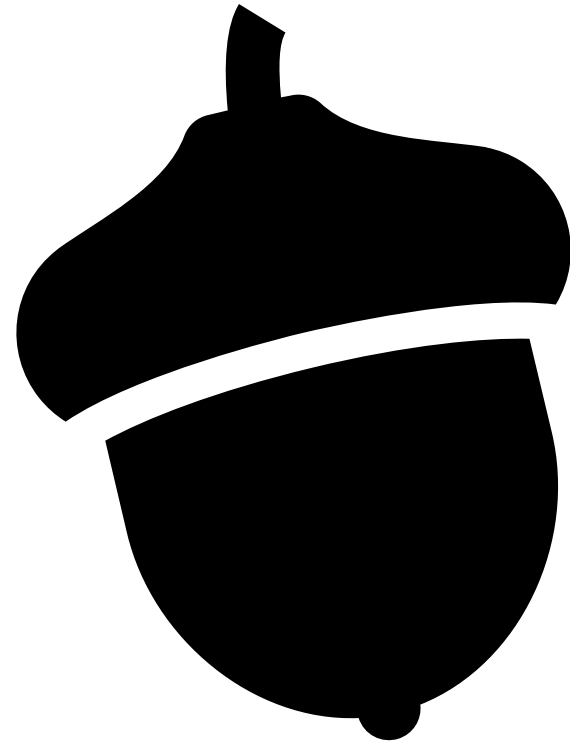
- October 1, 2025- Changes sugar limits in cereal and yogurt from total sugars to added sugars
 - Cereals- no more than 6 g added sugars per dry oz
 - Yogurt- no more than 12 g added sugars per 6 oz
- October 1, 2025- either a licensed healthcare professional or registered dietician can write a medical statement for participants with disabilities





New Menu Planning and Operational Flexibilities for CACFP- Effective July 1, 2024

- Allow nuts and seeds to credit for the full meats/meat alternates component
 - Previously only 50% of MMA could be nuts/seeds for a meal
 - Another option for vegetarian participants





CACFP Meal Pattern Requirements





What are the meal pattern components?





Milk, Milk and more Milk...

- Required component at Breakfast, Lunch, and Dinner for all age groups
 - Optional component at snack
- Milk audit in CX/Kidkare is a useful tool to keep track of your milk inventory
- Milk shortages are automatic disallows for the whole meal



...and even more milk

Age Group	Creditable Milk
Newborn- <1 year old	Breastmilk* and iron fortified infant formula
Between 12-13 months- transition period	Can continue to feed mixture of iron fortified infant formula and whole milk during transition
12 mo-24 mo	Unflavored whole milk
Between 24-25 months- transition period	2% milk CAN be used to help child transition from WM to LF/Skim
2-5 years old	Unflavored skim or low fat (1%) milk
6 years through adulthood	Unflavored skim or 1% milk Flavored skim or 1 % milk (max 1x per week)

*Breastmilk is creditable as the fluid milk component at any age in CACFP





Milk Substitute in CACFP

- Certain exceptions to the meal pattern can be made
- A medical statement signed by a parent is sufficient for milk substitute that is nutritionally equivalent to cow's milk or for lactose-free milk
 - Soy milk is the only milk substitute that is currently nutritionally equivalent to cow's milk
- For any other milk substitute, a medical professional must provide a signed statement specifying the child's disability, foods to be omitted, and appropriate substitutes for those foods





Vegetables

- Veggies are an important source of vitamins and minerals as well as dietary fiber
- At least one serving of vegetables must be served at lunch and dinner
- Can serve at breakfast if not serving a fruit
- Raw leafy veggies credit for half the amount served and cooked leafy veggies credit for the entire amount served
- Dried vegetables credit for twice the amount served





Vegetables Examples

Creditable

- Leafy greens
- Carrots
- Avocado
- Tomatoes
- Squash
- Corn
- Pumpkin
- Cucumber
- Beans and peas
- Canned vegetables
- Potatoes

Not Creditable

- Condiments- ketchup, jelly
- Cornbread
- Rice (as a veg)
- Home-canned vegetables
- Any veggie served in an amount smaller than 1/8th cup
- Vegetables that are blended for serving in a smoothie credit as juice, and juice can only credit 1 time per day

this is not an exhaustive list; check the crediting handbook if you are unsure how an item credits in the CACFP





Fruit

- Fruits are an important part of a balanced diet and provide many nutrients
- Fruits are served at lunch and supper
- Can serve at breakfast instead of vegetable
- Fruits are an optional for snack





Fruit Examples

Creditable

- Apples
- Bananas
- Papaya
- Cherries
- Grapes
- Mango
- Peaches
- Pears
- Plums
- Berries- all kinds!
- Kiwi
- Star fruit
- Coconut

Not Creditable

- Jelly
- Home-canned fruit
- Fruit as dessert (example-fruit pie-grain based dessert)





Grains

- Grains are a great source of vitamins, minerals, carbohydrates, and fiber
- You must serve at least 1 grain per day that is whole grain rich even if only one meal/snack is served that contains a grain
 - Best practice is to serve 2 whole grain items per day
 - WGR can be determined by Rule of Three, WIC Shopping Guide, a CN Label, FDA Whole Grain Health claims, or if a pasta/bread has “Whole Grain” in the name





Identifying Whole Grain Rich Foods

- 1) The Rule of Three
 - Look at the nutrition label
 - first ingredient needs to be whole grain
 - second and third ingredients need to be either whole grain, enriched, bran, or germ
- 2) Nevada WIC Shopping Guide
- 3) Documentation- a CN label showing that whole grains are the primary main ingredient in the food item
- 4) FDA Whole Grain Health Claims on the package
- 5) Labels- if a bread or pasta says “whole wheat” in the name, it is WGR





FDA Whole Grain Health Claims

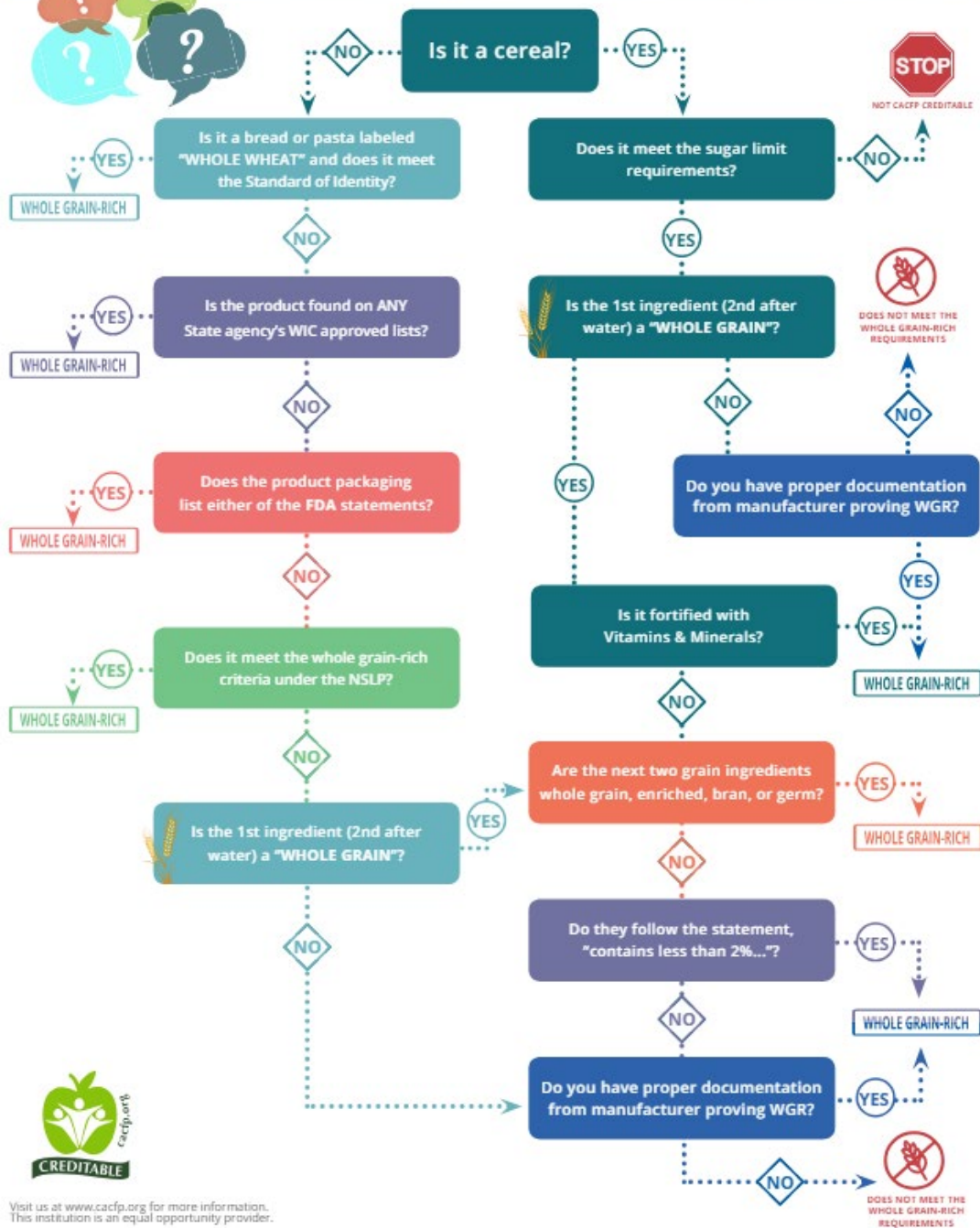
“Diets rich in whole grain foods and other plant foods and low in total fat, saturated fat, and cholesterol may reduce the risk of heart disease and certain cancers”

OR

“Diets rich in whole grain foods and other plant foods, and low in saturated fat and cholesterol, may help reduce the risk of heart disease”



Wondering if your food is **WHOLE GRAIN-RICH**?



Visit us at www.cacfp.org for more information. This institution is an equal opportunity provider.

Whole Grain Rich Flow Chart

- Great tool to ensure you check all the boxes when crediting a whole grain rich item
- Simply follow the flow chart through all the questions to find if an item is whole grain rich



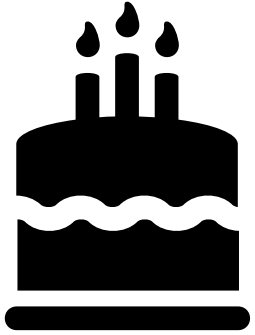
Grain Ounce Equivalents- What are those?

Grains Measuring Chart for the Child and Adult Care Food Program			
 Grain Item and Size	Age Group and Meal		
	1- through 5-year-olds at Breakfast, Lunch, Supper, Snack Serve at Least ½ oz. eq., which equals about...	6- through 18-year-olds at Breakfast, Lunch, Supper, Snack Adults at Snack only Serve at Least 1 oz. eq., which equals about...	Adults at Breakfast, Lunch, Supper Serve at Least 2 oz. eq., which equals about...
Bagel (entire bagel) at least 56 grams*	¼ bagel or 14 grams	½ bagel or 28 grams	1 bagel or 56 grams
Bagel, Mini (entire bagel) at least 28 grams*	½ bagel or 14 grams	1 bagel or 28 grams	2 bagels or 56 grams
Biscuit at least 28 grams*	½ biscuit or 14 grams	1 biscuit or 28 grams	2 biscuits or 56 grams
Bread (whole grain-rich or enriched) at least 28 grams*	½ slice or 14 grams	1 slice or 28 grams	2 slices or 56 grams
Bun or Roll (entire bun or roll) at least 28 grams*	½ bun/roll or 14 grams	1 bun/roll or 28 grams	2 buns/rolls or 56 grams
Cereal Grains (barley, bulgur, quinoa, etc.)	¼ cup cooked or 14 grams dry	½ cup cooked or 28 grams dry	1 cup cooked or 56 grams dry
Cereal, Ready-to-Eat: Flakes or Rounds	½ cup or 14 grams	1 cup or 28 grams	2 cups or 56 grams
Cereal, Ready-to-Eat: Granola	¼ cup or 14 grams	¼ cup or 28 grams	½ cup or 56 grams
Cereal, Ready-to-Eat: Puffed	¾ cup or 14 grams	1 ¼ cup or 28 grams	2 ½ cups or 56 grams
Corn Muffin at least 34 grams*	½ muffin or 17 grams	1 muffin or 34 grams	2 muffins or 68 grams
Cracker, Animal (about 1 ½" by 1")**	8 crackers or 14 grams	15 crackers or 28 grams	30 crackers (~1 cup) or 56 grams
Cracker, Bear-Shaped, Sweet (about 1" by ½")**	12 crackers (~¼ cup) or 14 grams	24 crackers (~½ cup) or 28 grams	48 crackers (~1 cup) or 56 grams
Cracker, Cheese, Square, Savory (about 1" by 1")**	10 crackers or 11 grams	20 crackers (~⅓ cup) or 22 grams	40 crackers (~⅔ cup) or 44 grams
Cracker, Fish-Shaped or Similar, Savory (about ¾" by ½")**	21 crackers (~¼ cup) or 11 grams	41 crackers (~½ cup) or 22 grams	81 crackers (~1 cup) or 44 grams

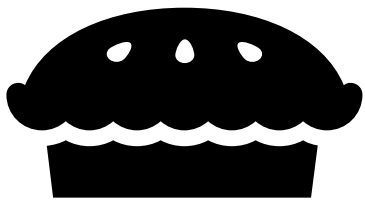
- Grain ounce equivalents are a unit of measurement used in CACFP to ensure that participants are served enough grains at each meal
- Resource- Grains Measuring Chart



Grain-Based Desserts



- Grain-based desserts are not creditable in the CACFP
- This includes granola bars, cereal bars, sweet pies, cupcakes, vanilla wafers, cookies, brownies, etc.
- Animal crackers and graham crackers are the only grain-based dessert items that are creditable
- You can serve treats for special occasions outside of your CACFP mealtimes





Meat and Meat Alternate

- Required component at lunch and dinner
- Can serve instead of grains component at breakfast up to 3 times per week
- Best to choose lean meats lower in saturated fat and salt as a best practice





Meat and Meat Alternate Examples

Creditable

- Chicken
- Beef
- Pork
- Fish
- Beans
- Whole eggs
- Cheese
- Nut Butters
- Yogurt

Creditable with a CN Label

- Chicken nuggets with breading
- Hot dogs
- Fish sticks
- Jerky
- Turkey bacon
- Vegetable patties/burgers
- Deli meats
- Canadian bacon
- Tofu

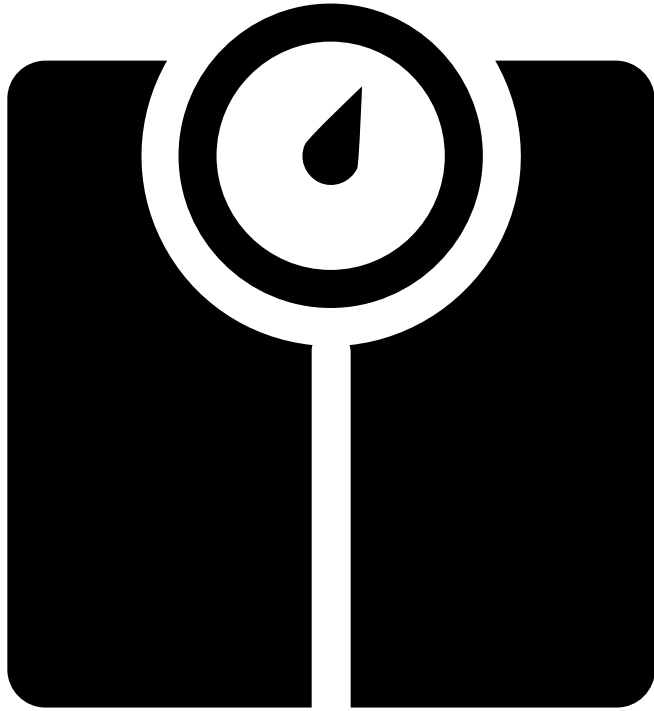
Not Creditable

- Bacon
- Processed meat without a CN Label
- Egg substitute
- Egg components (just whites or yolks)
- Imitation cheeses or cheese product
- Deep-fried meats prepared onsite
- Cream cheese*
- Pepperoni*





Meat ounce equivalents



- For lean meats, poultry, and fish →
 - Ounce eq = Ounces served
- CN labels/product formulation statements will list the ounce equivalents of creditable meat in a serving of a product
- For all other M/MA, reference the serving size tables provided by NCA

Meat Ounce Equivalents at Breakfast

	Ages 1 - 2 years and 3 - 5 years	Ages 6 - 12 years and 13 - 18 years	Adults
Minimum amount of meats/meat alternates required when served instead of grains at breakfast	½ ounce equivalent	1 ounce equivalent	2 ounce equivalents
Meats/Meat Alternates:	is equal to:	is equal to:	is equal to:
Beans or peas (cooked)	⅛ cup	¼ cup	½ cup
Natural or processed cheese	½ ounce	1 ounce	2 ounces
Cottage or ricotta cheese	⅛ cup (1 ounce)	¼ cup (2 ounces)	½ cup (4 ounces)
Eggs	¼ large egg	½ large egg	1 large egg
Lean meat, poultry, or fish	½ ounce	1 ounce	2 ounces
Peanut butter, soy nut butter, or other nut or seed butters	1 tablespoon	2 tablespoons	4 tablespoons
Tofu (store-bought or commercially prepared)	⅛ cup (1.1 ounces) with at least 2.5 grams of protein	¼ cup (2.2 ounces) with at least 5 grams of protein	½ cup (4.4 ounces) with at least 10 grams of protein
Yogurt (including soy yogurt)	¼ cup of yogurt (2 ounces)	½ cup of yogurt (4 ounces)	1 cup of yogurt (8 ounces)



Meat Ounce Equivalents at Lunch and Supper

Minimum Required Amounts at Lunch/Supper				
Meats and/or Meat Alternates	Ages 1 through 2	Ages 3 through 5	Ages 6 through 18	Adults
	1 oz eq is equal to:	1½ oz eq is equal to:	2 oz eq is equal to:	2 oz eq is equal to:
Beans, peas, or lentils	¼ cup (4 tablespoons)	⅜ cup (6 tablespoons)	½ cup (8 tablespoons)	½ cup (8 tablespoons)
Cheese, natural or processed	1 oz	1½ oz	2 oz	2 oz
Cottage or ricotta cheese	¼ cup (2 oz)	⅜ cup (3 oz)	½ cup (4 oz)	½ cup (4 oz)
Eggs (whole)	½ large egg	¾ large egg	1 large egg	1 large egg
Fish (cooked, with skin or skinless)	1 oz	1½ oz	2 oz	2 oz
Lean beef, chicken, pork, or turkey (cooked, with skin or skinless)	1 oz	1½ oz	2 oz	2 oz
Nut and seed butters (e.g., peanut butter, sunflower butter, etc.)	2 tablespoons	3 tablespoons	4 tablespoons	4 tablespoons
Nuts and seeds	½ oz = ½ oz eq*	¾ oz = ¾ oz eq*	1 oz = 1 oz eq*	1 oz = 1 oz eq*
Surimi	3 oz	4.4 oz	6 oz	6 oz
Tempeh**	1 oz	1½ oz	2 oz	2 oz
Tofu (store-bought/ commercially prepared)	¼ cup (2.2 oz) with at least 5 grams of protein	⅜ cup (3.3 oz) with at least 7.5 grams of protein	½ cup (4.4 oz) with at least 10 grams of protein	½ cup (4.4 oz) with at least 10 grams of protein
Yogurt*** (including Greek and soy yogurt)	½ cup of yogurt (4 oz)	¾ cup of yogurt (6 oz)	1 cup of yogurt (8 oz)	1 cup of yogurt (8 oz)





Sugar Limits- Yogurt and Cereal

- Yogurt and cereal are both subject to sugar limits in the CACFP
- A lot of cereals marketed as healthy have a lot of sugar!
- Identifying yogurts/cereals that meet the limits can be done by:
 - Using WIC Shopping Guide
 - Using the calculator on FFK Website
 - Resources → Sugar Calculator
 - Look at Nutrition Facts and reference USDA's sugar content tables or calculate sugar concentration
 - Cereals- must not have more than 6 grams of sugar per dry ounce
 - Yogurts- must not have more than 23 g of sugar per 6 ounces



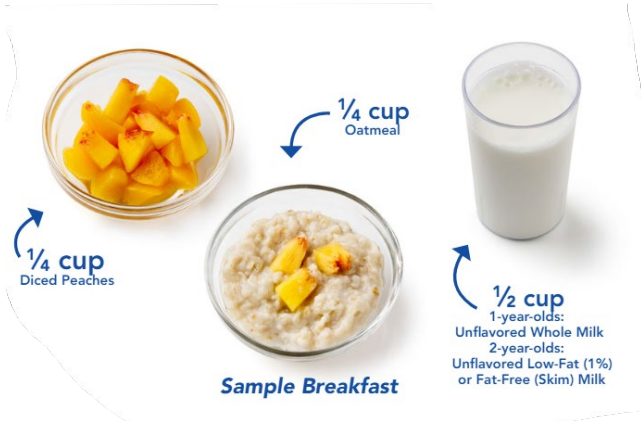
Breakfast Meal Pattern

Component	Ages 1-2	Ages 3-5	Ages 6-18	Adults
Milk	½ c	¾ c	1 c	1 c
Vegetable, Fruit, or both	¼ c	½ c	½ c	½ c
Grain	½ oz eq	½ oz eq	1 oz eq	2 oz eq
Meat/Meat alt*	½ oz eq	½ oz eq	1 oz eq	2 oz eq

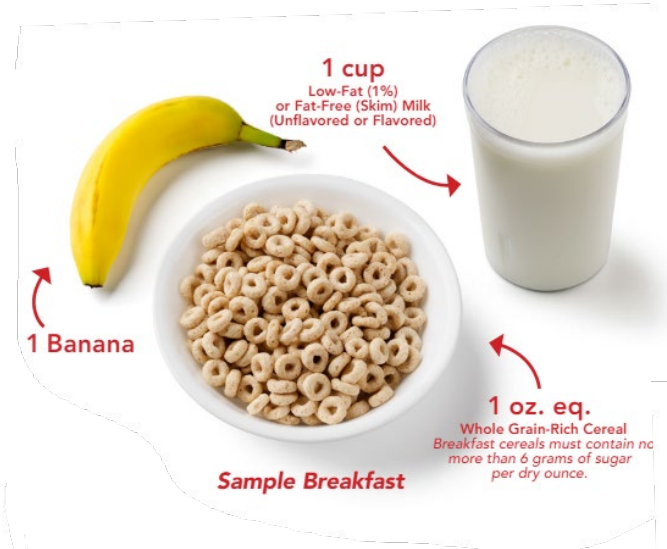
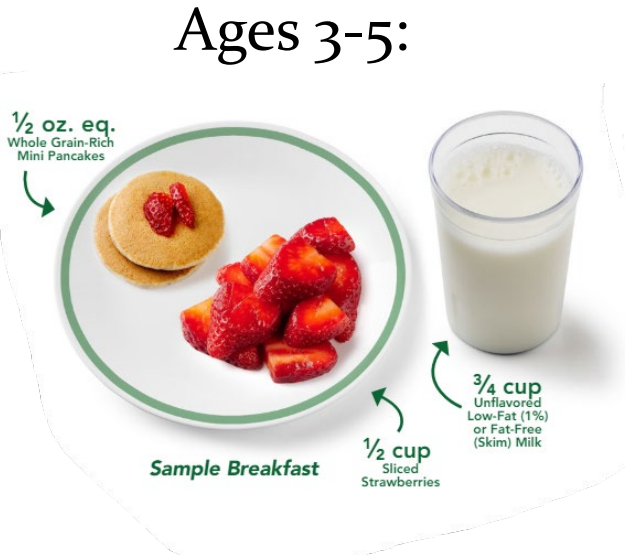
- Meat and meat alternates can be served instead of the grain component at breakfast a maximum of 3 times per week and be creditable
- Can still serve a meat/MA on other days; but it will not credit, and will have to be in addition to the grain component



Sample Breakfast Options

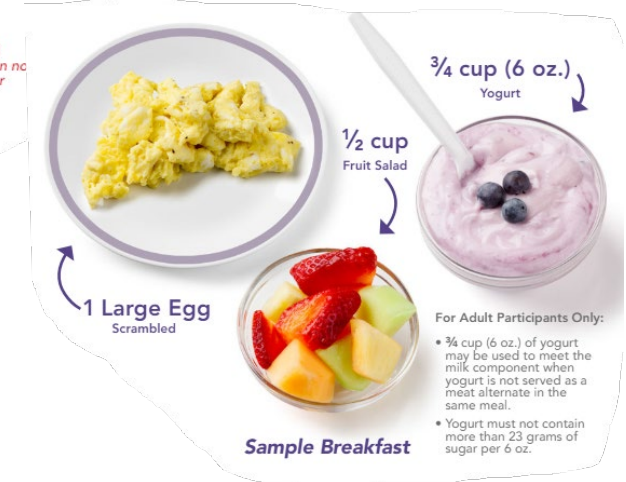


Ages 1-2:



Ages 6-12; 13-18:

Adults:



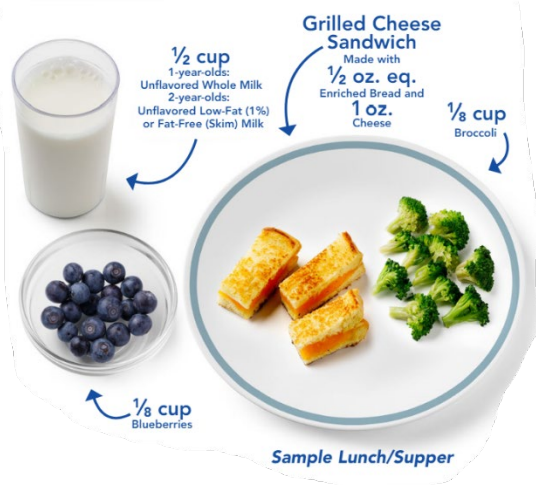


Lunch/Supper Meal Pattern- Serve all 5 components at each meal

Component	Ages 1-2	Ages 3-5	Ages 6-18	Adults
Milk	½ c	¾ c	1 c	1 c
Vegetable	1/8 c	¼ c	½ c	½ c
Fruit	1/8 c	¼ c	¼ c	½ c
Meat/Meat Alternate	1 oz	1.5 oz	2 oz	2 oz
Grain	½ oz eq	½ oz eq	1 oz eq	2 oz eq

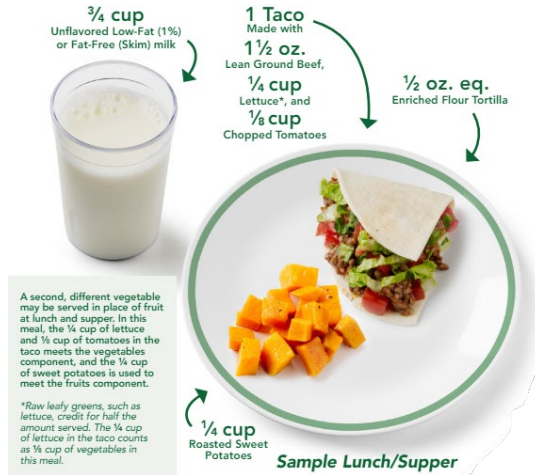
- Can serve a second, different vegetable in place of the fruit component at lunch and supper

Sample Lunch/Supper Options



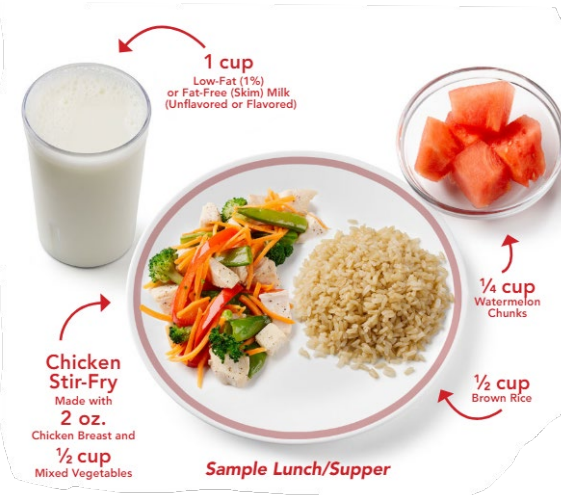
Ages 1-2

Ages 3-5



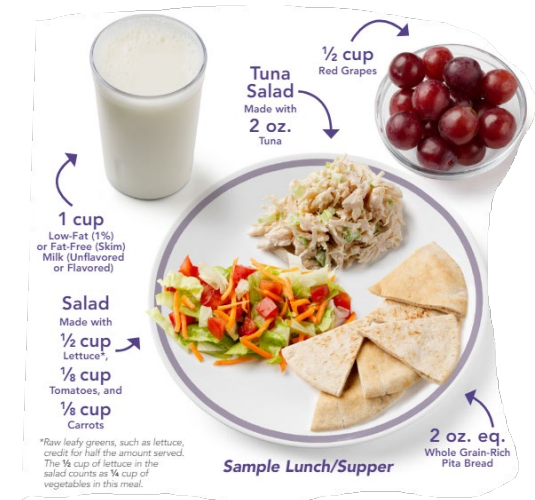
A second, different vegetable may be served in place of fruit at lunch and supper. In this meal, the 1/4 cup of lettuce and 1/8 cup of tomatoes in the taco meets the vegetables component, and the 1/4 cup of sweet potatoes is used to meet the fruits component.

*Raw leafy greens, such as lettuce, credit for half the amount served. The 1/4 cup of lettuce in the taco counts as 1/8 cup of vegetables in this meal.



Ages 6-12; 13-18

Adults



*Raw leafy greens, such as lettuce, credit for half the amount served. The 1/2 cup of lettuce in the salad counts as 1/4 cup of vegetables in this meal.

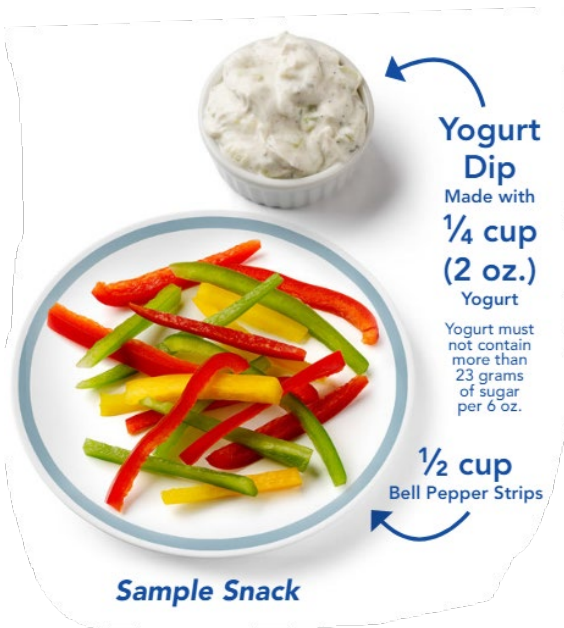
Snack Meal Pattern

Component	Ages 1-2	Ages 3-5	Ages 6-18	Adults
Milk	½ c	½ c	1 c	1 c
Vegetable	½ c	½ c	¾ c	½ c
Fruit	½ c	½ c	¾ c	½ c
Meat/Meat Alternate	½ oz	½ oz	1 oz	1 oz
Grain	½ oz eq	½ oz eq	1 oz eq	1 oz eq

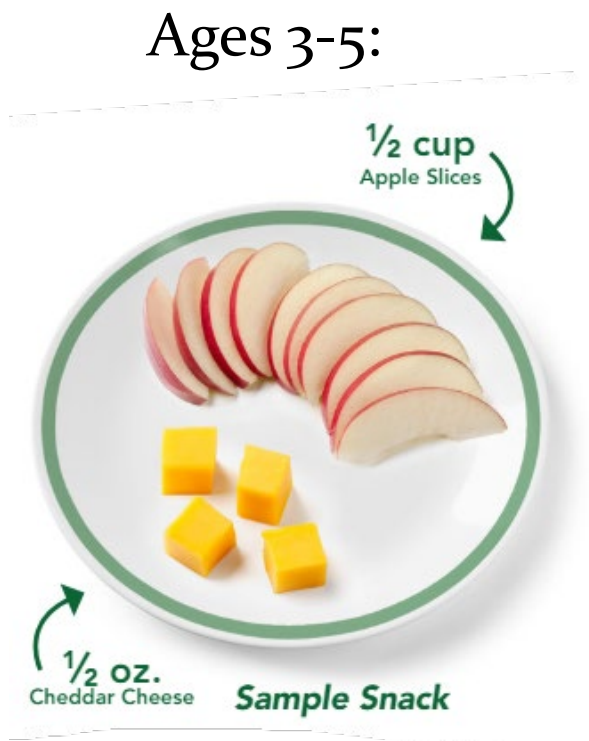
*Select 2 out of the 5 components to serve at each snack



Sample Snack Options



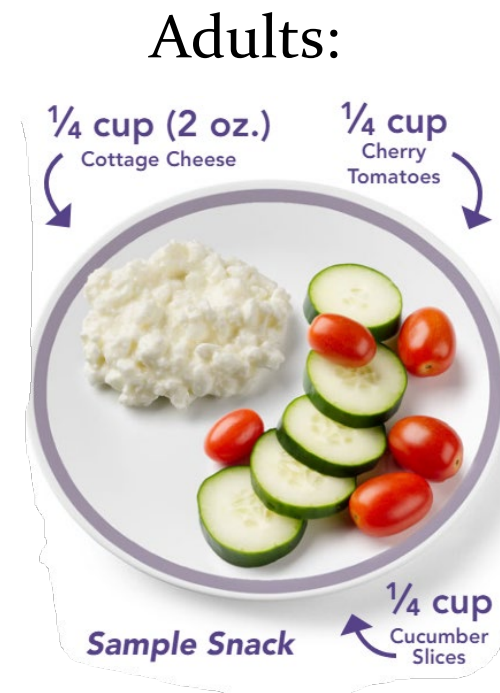
Ages 1-2:



Ages 3-5:



Ages 6-12; 13-18:

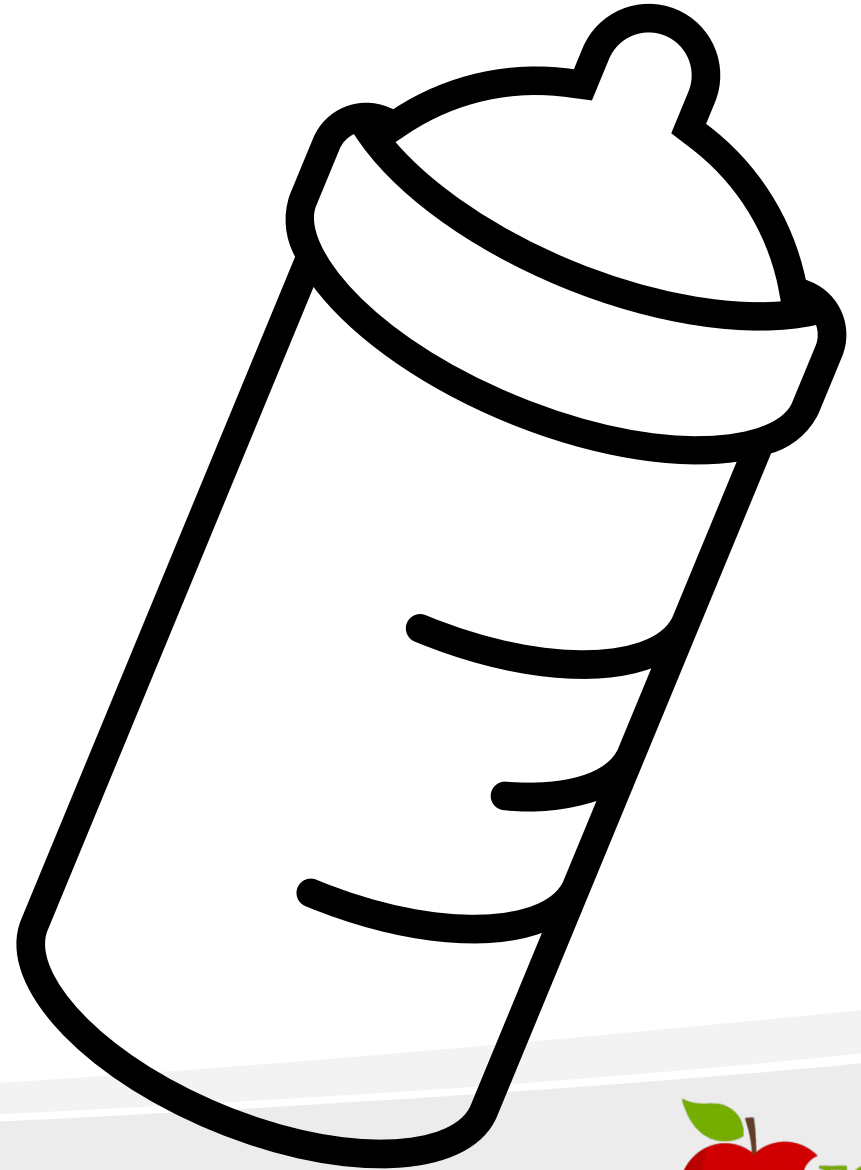


Adults:



Infant Meal Pattern

- Breastmilk or iron-fortified infant formula is required to be served to infants through 1 year of age
- Serve on demand
- As foods are introduced, communicate regularly with the parents to see what their baby is eating!
- Parents can only provide 1 component for the meal to still credit
- Infant feeding form section of enrollment form
- Document meals on an Infant Meal Record



Ages birth- 5 months- All meals		
4-6 oz		Breastmilk or formula
Ages 6-11 months- Breakfast, Lunch, and Supper		
Milk	6-8 oz	Breastmilk or formula
Grain/Meat/Meat Alternate	0-1/2 oz eq	Infant Cereal OR
	0-4 tbsp	Meat, fish, poultry, whole egg, or cooked dry beans OR
	0-2 oz	Cheese OR
	0-4 oz	Cottage cheese or yogurt
	0-4 oz	A combination of above
Fruit or vegetable	0-2 tbsp	Vegetable or fruit or a combination of both
Ages 6-11 months- Snack		
Milk	2-4 oz	Breastmilk or formula
Grain/Meat/Meat Alternate	0-1/2 oz eq	Sliced bread OR
	0-1/4 oz eq	Crackers
	0-1/2 oz	Infant cereal
	0-1/4 oz eq	Ready to eat breakfast cereal
Fruit or vegetable	0-2 tbsp	Vegetable or fruit or a combination of both



Flexibilities in the Meal Pattern for Adult Participants Only

At supper, milk is optional and not required

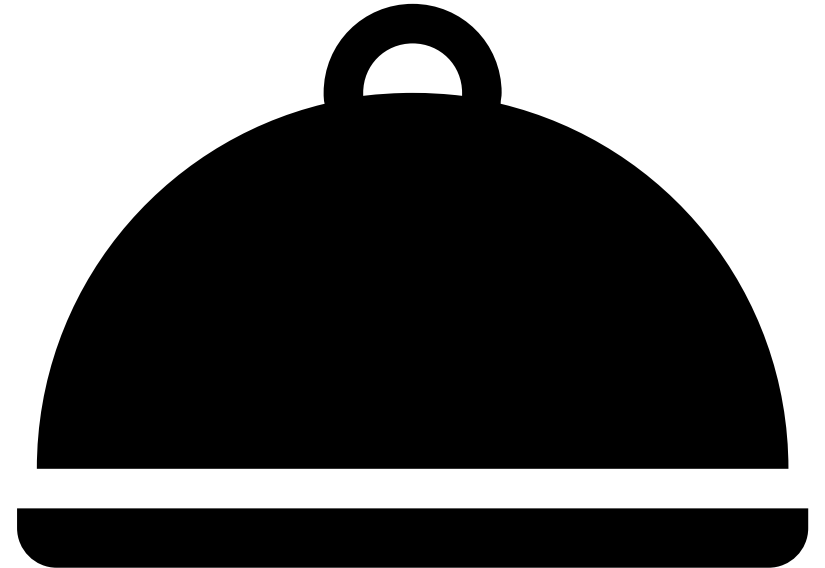
Can do offer versus serve meal service

$\frac{3}{4}$ c or 6 oz of yogurt can be served instead of a fluid milk serving once per day



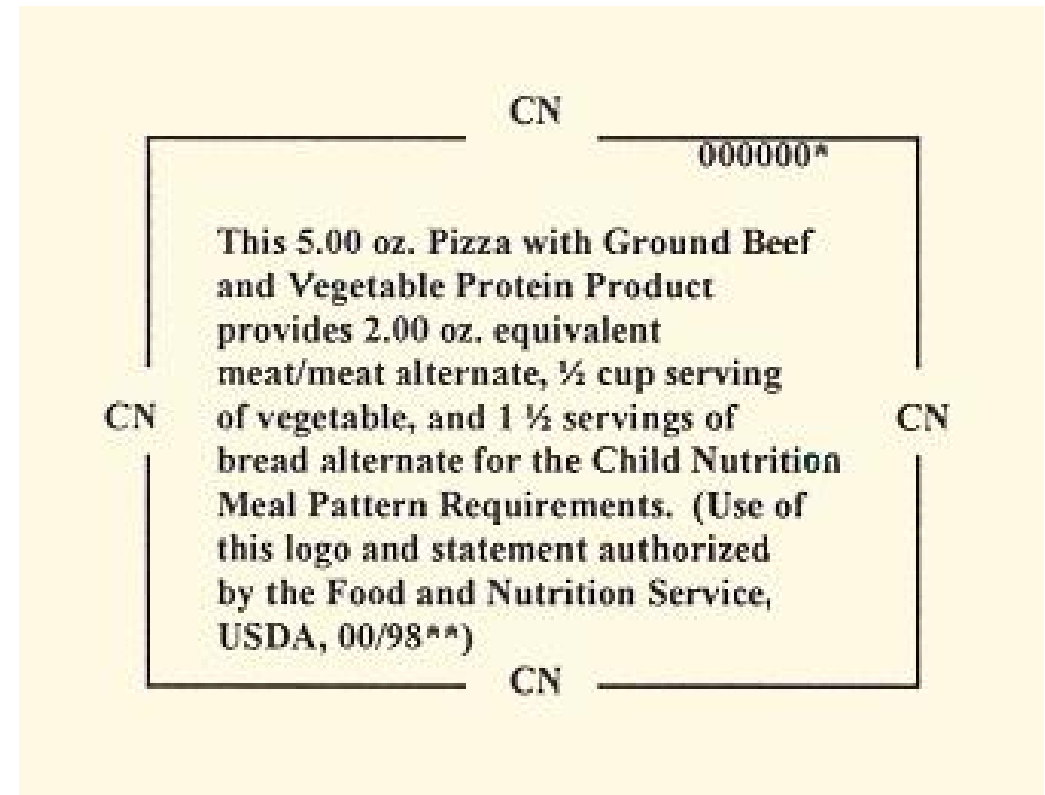
Meal Service

- Must serve meals during your approved mealtimes
- Can only claim meals approved on application
- Can serve either plated meals or do family style meal service
- All participants must wash their hands with soap and water before mealtime
- Point of service meal counts taken



Child Nutrition (CN) Labels and Product Formulation Statements (PFS)

- Required for all processed, combination foods
- List the amount of creditable component that is found in the food item
- Used to calculate an appropriate serving size so that the minimum serving size can be met for individual components





What's the difference between PFS and CN?

CN labeled products are subject to meet rules, regulations, and inspections for standardized manufactured food items put forth by the USDA, who approves all CN labels

PFS also break down the actual amount of creditable components found in the food, but are not regulated by the USDA

Where to look for CN Labeled Foods?

- Our website, foodforkidsnevada.org!
 - Resources → Child Nutrition (CN)
- If you want to serve an item not listed, reach out with a picture of the item package so that we can get a CN label **before** you purchase that item



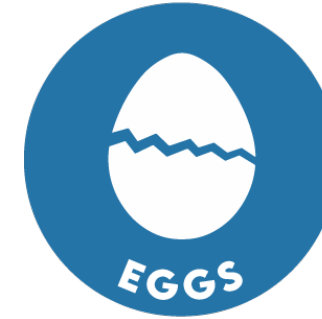
All Serving sizes are the minimum serving sizes to meet CACFP requirement of a creditable product (i.e. Meat/Meat Alt, Whole Grain)

Food	Serving Size 1 – 2 Years	Serving Size 3 – 5 Years	Serving Size 6 – 18 Years	Serving Size Adults	Whole Grain Creditable	Meat/Meat Alt Creditable	Can be purchased at
Bush's Baked Beans Original	1/4 Cup	1/2 Cup	1/2 Cup	1/2 Cup	NO	YES	Any Store
Dennison's Chili Con Carne	1/4 Cup	3/8 Cup	1/2 Cup	1/2 Cup	NO	YES	Any Store
El Monterey Bean & Cheese Burrito	1 1/4 Burritos	2 Burritos	2 1/2 Burritos	2 1/2 Burritos	NO	YES	Any Store
Eckrich Natural Casing Smoked Sausage	3 oz.	5 oz.	7 oz.	7 oz.	NO	YES	Walmart
Farmland Cooked Diced Ham	4 oz.	6 oz.	8 oz.	8 .oz	NO	YES	Walmart
Foster Farms Turkey Franks	1/2 of a Serving	3/4 of a Serving	1 Serving	1 Serving	NO	YES	Any Store
Foster Farms Breaded Chicken Breast Patties	1/3 of a Patty	1 Patty	1-1/4 of a Patty	1-1/4 of a Patty	NO	YES	Any Store



Food Allergies

- Allergic reactions to food can be life threatening
- Imperative to keep record of known allergens and avoid serving foods to children with allergies
- If a child has an allergic reaction while in your care, call 911 immediately and administer epi pen if applicable





Meal Planning Tools in CX/Kidkare

- Meal production records will give you the serving sizes for each age group for each meal planned
 - Based off your menu
 - Generate in CX/Kidkare: Reports → Menus → Menu Production Records
- Weekly Quantities Required Report
 - Based off menu and attendance
 - Helps with inventory and shopping lists
 - Generate in CX/Kidkare: Reports → Menus → Weekly Quantities Required Report





Meal Planning Resources

- USDA Food Buying Guide
 - Can download as an app on your smartphone or access online
 - Can also download a PDF
 - Search foods, determine serving sizes, find WGR options, build shopping lists and more
- USDA Training Tools
 - Training worksheets, posters, powerpoints on individual topics
 - Templates- Menu planning, Point of Service Meal Count Sheets
 - Crediting Handbook
 - Let's Make a Snack- Snack Menu Planner and It's Breakfast time- Breakfast Menu Planner
 - Feeding Infants Guide
- National CACFP Sponsors Association (NCA)
 - Training sheets and resources
 - Pre-built menus- Cycle menus, Budget Savvy Cycle Menu, Seasonal Menus





Compliance Requirements



Compliance Requirements

- Building for the Future Flyer- posted conspicuously

Building for the Future Flyer - English Division of Food and Nutrition



<p>This facility participates in the Child and Adult Care Food Program (CACFP), a federal program that provides healthy nutritious meals and one snack, or two snacks and one meal to eligible children and adults.</p> <p>Each day 4.2 million children and 130,000 adults participate in the CACFP across the country. Providers are reimbursed for serving nutritious meals and snacks which meet USDA requirements. The CACFP plays a vital role in improving the quality of programs and making it more affordable for low-income families.</p>			
<p>Meals - CACFP meals and snacks must follow meal requirements established by USDA</p>			
<p>Breakfast</p> <p>Milk Fruit or Vegetable Grains or Meat or meat alternate (Three times/week)</p>	<p>Lunch or Supper</p> <p>Milk Meat or meat alternative Grains Fruits Vegetables</p>	<p>Snacks (Two of the groups)</p> <p>Milk Meat or meat alternative Grains Fruit Vegetables</p>	
<p>Participating Facilities – Many different programs operate CACFP and share the common goal of bringing nutritious meals and snacks to participants. Participating facilities include:</p> <ul style="list-style-type: none"> • Child Care Centers: Licensed or approved nonprofit and some for-profit childcare centers, Head Start programs and before and after school programs. • Day Care Homes: Licensed or approved family and group homes. • At-Risk Afterschool Programs: Programs with learning and enrichment activities in low-income areas that provide one free meal and/or snack per day to school-age children and youth. • Homeless Shelters: Emergency shelters that provide meals to temporarily displaced or homeless children and youth. • Adult Day Care Centers: Licensed and some non-profit and some for-profit adult care centers which provide structured, comprehensive services. <p>Eligibility – State agencies reimburse facilities that offer non-residential day care to the following:</p> <ul style="list-style-type: none"> • Children aged 12 and under • Migrant children aged 15 and younger. • Children and youth through age 18 in emergency shelters or/and in low-income afterschool programs • Adults who are functionally impaired or aged 60 or older. <p>Contact Information – If you have questions about CACFP, please contact one of the following:</p>			
<p>Sponsor:</p> <p>Food For Kids, Inc. 140 Washington St., Suite 250 Reno, NV 89523</p> <p>Phone Number: 775-337-9121</p>		<p>State Agency:</p> <p>Nevada Department of Agriculture Division of Food and Nutrition CACFP Community Nutrition Specialist 2300 E. St. Louis Ave Las Vegas, NV 89104-4211 (702) 668-4585</p>	



Compliance Requirements

- Building for the Future Flyer- posted conspicuously
- WIC Flyer- posted



The flyer is titled "NEVADA WIC WOMEN, INFANTS & CHILDREN". It is divided into several sections: "What is WIC?" (providing nutritious foods, nutrition education, breastfeeding support, and referrals to health and other social services at no charge), "Who Can Qualify for WIC?" (listing criteria for pregnant/postpartum/breastfeeding women, infants under 5, and families with low income or TANF/Medicaid/SNAP benefits), "WIC food packages include:" (listing fresh fruits and vegetables, milk and cheese, eggs, peanut butter, beans, whole grains, and cereal), "Starting healthy habits, growing brighter futures" (with a photo of a baby), "WIC Services Include" (Nutrition Education, Nutritious Food, Breastfeeding, Community Referrals, Counseling, and Health Screening), and contact information (1-800-8-NEV-WIC, www.nevadawic.org). The bottom of the flyer features a photo of a woman breastfeeding a baby and a basket of fresh produce.

What is WIC?
WIC provides nutritious foods, nutrition education, breastfeeding support, and referrals to health and other social services to participants at no charge.

Who Can Qualify for WIC?
Women who are pregnant, postpartum or breastfeeding
Infants or children up to the age of 5
Families who have a moderately low income or are already receiving TANF, Medicaid or SNAP benefits
A variety of families can qualify for WIC:
Single and Married families
Working or not working
Mothers and Fathers
Grandparents
Foster parents
Legal Guardians

WIC food packages include:

- Fresh fruits and vegetables
- Milk and Cheese
- Eggs
- Peanut Butter
- Beans
- Whole grains
- Cereal

Starting healthy habits, growing brighter futures

WIC Services Include

Nutrition Education
We will help your family create healthy habits and reach your family's nutrition goals with helpful tips, recipes and support.

Nutritious Food
We will show you how to create healthy, affordable meals with the WIC Food Package by focusing on whole grains, fruits, vegetables and low-fat dairy.

Breastfeeding
Breastfeeding is the best way to feed your newborn. We offer breastfeeding support, education and counseling.

Community Referrals
We want you to have the community and healthcare assistance you need. We provide referrals for immunizations, health care and other programs.

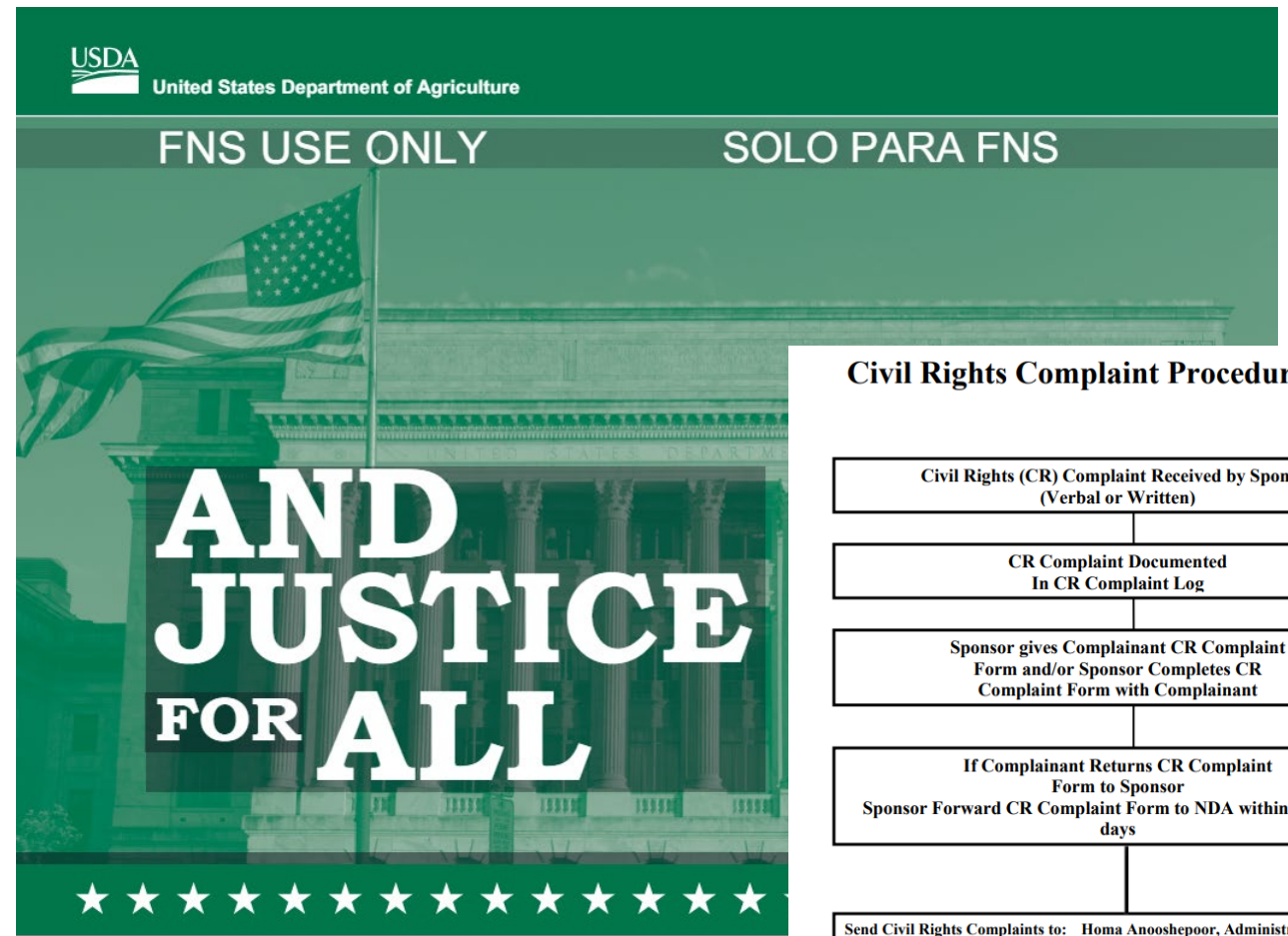
Counseling
Parents often worry about their child's eating habits. Our qualified nutritionists and staff can give you professional nutrition and wellness advice.

Health Screening
Tracking your child's growth will help you understand their health and development.

For more information
1-800-8-NEV-WIC
www.nevadawic.org

Compliance Requirements

- Building for the Future Flyer- posted conspicuously
- WIC Flyer- posted
- Civil Rights information must be readily available
 - “And Justice for All” poster
 - Complaint form and log
 - Found in FFK Childcare Handbook and Resource Manual on website



Civil Rights Complaint Procedure

Civil Rights (CR) Complaint Received by Sponsor (Verbal or Written)
CR Complaint Documented In CR Complaint Log
Sponsor gives Complainant CR Complaint Form and/or Sponsor Completes CR Complaint Form with Complainant
If Complainant Returns CR Complaint Form to Sponsor Sponsor Forward CR Complaint Form to NDA within working 3 days
Send Civil Rights Complaints to: Homa Anooshepoor, Administrator Food and Nutrition Division Nevada Department of Agriculture 405 S. 21 st Street Sparks, NV 89431-5557

NDA is an equal opportunity provider.



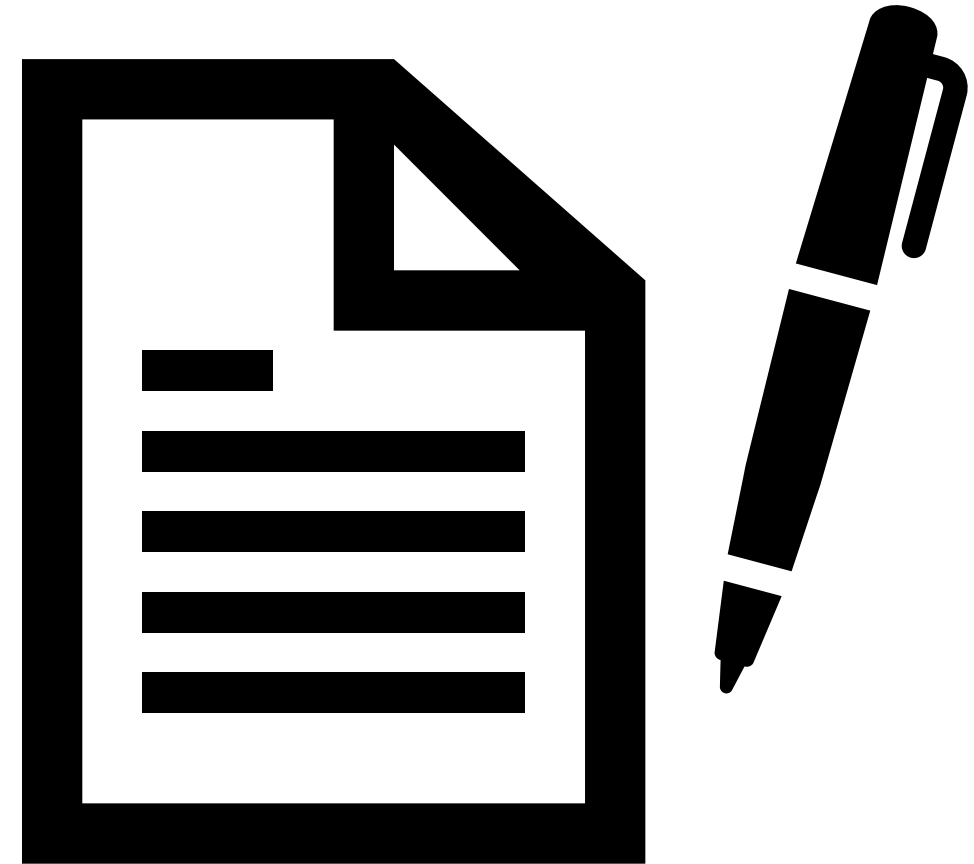


Record Keeping



Recordkeeping Requirements

- Enrollment packets
- Medical Statement forms
- Menus and Menu Substitution logs
- Nutrition Labels- Yogurt, Cereals, and Grains
- Infant Meal Records
- Daily Attendance (Sign in and outs)
- Point of Service sheets
- Receipts
- Time Distribution Logs and Financial Backup
- License, Health Permits, and Fire Permits/Inspections





Enrollment Packets

- Consist of an enrollment form + meal benefit income eligibility form (MBIE)
 - Siblings will have 1 enrollment form per child plus one shared MBIE
- Generated from CX/Kidkare after you enroll a child into the system
- Completed by the parent/guardian
- Submitted to FFK for us to activate child and determine reimbursement level
- Maintained annually
- Will not be reimbursed for meals served for a pending/expired child- imperative that these are maintained!



Completing an Enrollment Form

Dear Parent/Guardian,

Your day care facility participates in the U.S. Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP). The enrolled participant will receive nutritious meals and snacks at no cost to you. CACFP needs verification of enrollment for each participant in this facility. Please fill out the parent/guardian section of this form, sign it and return it to the above facility/provider. Provide information for one participant per section. **(In order for the institution to receive reimbursement for meals served/claimed, this form must be completed for each enrolled participant annually.)**

Parent/Guardian Please Complete:

Parent checks top section for completeness/accuracy

Participant's (Child) Name: Delilah Duck Date of Birth: 01/29/2015 Age: 9y 0m
Sex: Male Female Date participant enrolled in the facility: 02/13/2024
Food Allergies: Yes No If "yes" specify: Allergic to dairy and soy; substitute oat milk

(If the participant cannot be served the CACFP Meal Pattern, a statement from the participant's Health Care Provider must be provided.)

Check Days of Normal Care at facility: Sunday Monday Tuesday Wednesday Thursday Friday Saturday
Check meals normally eaten at facility: Breakfast AM Snack Lunch PM Snack Supper Evening Snack
Please list the normal times of arrival and departure (check AM or PM) Arrive: 8:00 am pm Depart: 5:00 am pm
School Times: Depart: am pm Return: am pm





Infant Feeding Form Section

If participant is an infant (0-11 months), please complete this box below, Check all applicable choice(s):

This institution/ facility offers Name of iron-fortified infant formula offered formula for infants through CACFP. It is our choice
(To be completed by facility/provider)

whether or not to use this formula based on your infant's needs. Baby foods provided by the institution/facility must be in compliance with the infant meal pattern as required by 7CFR 226.20.

- I will use the formula offered by this facility. I give permission for the formula to be mixed and/or bottles to be prepared for my infant by this facility's staff.
- I will not use the formula offered by this facility.
If not, which formula will you send for your infant? Name of different iron-fortified infant formula that parent would like to provide
If the formula you provide is a special formula, a medical statement must be submitted.
- I will provide breastmilk for my infant.
- My infant is four (4) months old and older and is developmentally ready for baby foods. I want the institution/facility to provide the following baby food(s) for my infant, which is/are allowed under 7CFR 226.20 (b)(2)(3)(4).

Parent can elect to accept formula offered by the center, bring their own iron-fortified formula or expressed breastmilk, or a combination of these options

Must still indicate formula or breastmilk even if infant is ready for baby foods

Note to parents who are getting formula through the WIC Program: Your baby is eligible to get formula from this child care institution/facility as well as from the WIC Program. It is your decision which formula you want your baby to use when she/he is at child care. If you find you are getting more formula than your baby needs, you may wish to talk with your WIC nutritionist or your child care provider.

Bottom of Enrollment Form

Parent/Guardian Signature: Parent or Guardian Must Sign here Date: Date Required
Print Name: Daphne Duck *Verify all contact info accurate
Address: 100 Disney St City: Reno State: NV Zip Code: 89503
Home Telephone Number: (555) 555-5555
Work Telephone Number: _____ Check Work Shift: 1st 2nd 3rd Other (Specify) _____

For Facility/Provider Use Only:

Signature of Facility Representative/Provider: Center Staff Sign Here Date: Date Required
Date the Participant Withdrew: _____ Fill out when you withdraw a child from the program

Non-Discrimination Statement: This explains what to do if you believe you have been treated unfairly. 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, D.C. 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.



MBIE- Step 1 and 2

STEP 1 | List ALL Household Members who are infants, children, and students up to and including age 18 (if more spaces are required for additional names, attach another sheet of paper)

Definition of Household Member: "Anyone who is living with you and shares income and expenses, even if not related."

Children in Foster care and children who meet the definition of Homeless, Migrant or Runaway are eligible for free meals. Read How to Apply for Free and Reduced Price School Meals for more information.

Child's First Name

D	e	l	i	l	a	h														
D	o	n	a	l	d															
L	i	t	t	l	e															
B	i	g																		

MI

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Child's Last Name

D	u	c	k																	
D	u	c	k																	
D	u	c	k																	
D	u	c	k																	

Age

9y	0m

Enrolled?

Yes No

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Foster Child Homeless, Migrant, Runaway

Check all that apply

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

STEP 2 | Do any Household Members (including you) currently participate in one or more of the following assistance programs: SNAP, TANF, or FDPIR?

If NO > Go to STEP 3.

If YES > Write a case number here then go to STEP 4 (Do not complete STEP 3)

Case Number:

Write only one case number in this space.

- Check foster box and provide foster placement letter for foster children
- Provide case number if family receives government assistance
- If either of these 2 cases is met, have the family skip step 3



MBIE- Step 3

STEP 3 Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

Are you unsure what income to include here?

Flip the page and review the charts titled "Sources of Income" for more information.

The "Sources of Income for Children" chart will help you with the Child Income section.

The "Sources of Income for Adults" chart will help you with the All Adult Household Members section.

A. Child Income

Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Members listed in STEP 1 here.

B. All Adult Household Members (including yourself)

List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write '0'. If you enter '0' or leave any income fields blank, you are certifying (promising) that there is no income to report.

Skip this step if child is a foster child or if family participates in one of the assistance programs listed above

List ALL adult HH members+income

Name of Adult Household Members (First and Last)	Earning from Work	How often?				Public Assistance/ Child Support/Alimony	How often?				Pensions/Retirement/All Other Income	How often?			
		Weekly	Bi-Weekly	2x Month	Monthly		Weekly	Bi-Weekly	2x Month	Monthly		Weekly	Bi-Weekly	2x Month	Monthly
Daphne Duck	\$ 1 0 0 0	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Donald Sr	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Child income

Child income	How often?			
	Weekly	Bi-Weekly	2x Month	Monthly
\$	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Total Household Members (Children and Adults) *

6

Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member

X X X X X X 5 5 5 5

Check if no SSN

* Please ensure this number matches total members listed



MBIE- Step 4

- Parent signature and date required
- Verify contact information
- Step 4 is required for all families

STEP 4 | Contact information and adult signature

I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that determining officials may verify (check) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.

<input type="text" value="100 Disney St"/> Street Address (if available)	<input type="text" value=""/> Apt #	<input type="text" value="Reno"/> City	<input type="text" value="NV"/> State	<input type="text" value="89503"/> Zip	<input type="text" value="(555) 555-5555"/> Daytime Phone and Email (optional)
<input type="text" value="Daphne Duck"/> Printed name of adult signing the form	<input type="text" value="Parent or Guardian Must Sign here"/> Signature of adult			<input type="text" value="Date Required"/> Today's date	



Refusals

- Completion of an enrollment packet by the family is **voluntary**
 - If a family does not wish to fill out an enrollment packet, write “Refused” over step 3 and submit packet regardless
 - All refusals will be activated and reimbursed at the “Paid” level

STEP 3 Report Income for ALL Household Members (Skip this step if you answered 'Yes' to STEP 2)

Are you unsure what income to include here?

Flip the page and review the charts titled "Sources of Income" for more information.

The "Sources of Income for Children" chart will help you with the Child Income section.

The "Sources of Income for Adults" chart will help you with the All Adult Household Members section.

A. Child Income
Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Members listed in STEP 1 here.

Child income		How often?			
		Weekly	Bi-Weekly	2x Month	Monthly
\$					

B. All Adult Household Members (including yourself)

List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write '0'. If you enter '0' or leave any income fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Member (First and Last)	Earning from	How often?	Public Assistance/Support/Alimony	Child Support	Pension/Retirement/Other Income
	\$				
	\$				
	\$				
	\$				
	\$				

Total Household Members * Last Four Digits of Social Security Number (SSN) of Primary Wage Earner or Other Adult Household Member Check if no SSN

* Please ensure this number matches total members listed

REFUSED



Common Enrollment Packet Errors

- Missing signatures/dates
- Missing SSN
- Income listed as hourly or missing the income frequency
- Not all household members listed on the form
 - All children, even if not enrolled, need to be listed
 - All adults, even if they do not earn income, need to be listed
 - The **more household members listed** the higher the threshold is for the 'Paid' level → **higher reimbursement!**





Correcting Errors on Paperwork

- Avoid whiteout or scribbling out
- Instead- cross out with a straight line and
- Should be able to still see what the original said
- White out can be a red flag in an audit





Meal Modifications

Documentation included with enrollment

Disability Related

Allergy or Medical Limitation

Required to provide reasonable accommodation for medical conditions and disabilities for CACFP participants

If Modification Meets Meal Pattern Requirements:
Parent signing medical statement sufficient

If modification does not meet meal pattern requirements: **Need a medical statement signed by a medical authority**

Non-Disability Related

Personal Preference, Religious Accommodation, etc.

Modifications are allowed if the substituted components are creditable

At center discretion to accommodate; but strongly encouraged

Document meal modification on **enrollment form**

MEDICAL STATEMENT TO REQUEST
SPECIAL MEALS AND/OR ACCOMMODATIONS

Medical Statements

- Only needs to be provided for a **medical condition**
- If child can still participate in CACFP with no changes to the meal pattern requirements, a parent/guardian can fill out this form
- If changes to the meal pattern requirements are required, then a medical professional will need to sign this form
- Submit with a child's enrollment packet

1. School/Agency Name	2. Site Name	3. Site Telephone Number
4. Name of Participant		5. Age or Date of Birth
6. Name of Parent or Guardian		7. Telephone Number
8. Check One: <input type="checkbox"/> Participant has a disability or a medical condition and <i>requires</i> a special meal or accommodation. (Refer to instructions on reverse side of this form.) Schools and agencies participating in federal nutrition programs must comply with requests for special meals and any adaptive equipment. A licensed physician, a nurse practitioner (APN) or physician's assistant (PA) must sign this form. <input type="checkbox"/> Participant does not have a disability, but is requesting a special meal or accommodation due to food intolerance(s) or other medical reasons. Food preferences are not an appropriate use of this form. Schools and agencies participating in federal nutrition programs are encouraged to accommodate reasonable requests. A licensed physician, registered dietitian, registered nurse, physician's assistant, or nurse practitioner must sign this form. <input type="checkbox"/> Participant does not have a disability, but is requesting a special accommodation for a fluid milk substitute that meets the nutrient standards for non-dairy beverages offered as milk substitutes. Food preferences are not an appropriate use of this form. Schools and agencies participating in federal nutrition programs are encouraged to accommodate reasonable requests. A licensed physician, registered dietitian, registered nurse, physician's assistant, nurse practitioner or parent or guardian may sign this form.		
9. Disability or medical condition requiring a special meal or accommodation: <i>Indicate a diagnosis requiring accommodation- ex; Milk Allergy</i>		
10. If participant has a disability, provide a brief description of participant's major life activity affected by the disability:		
11. Diet prescription and/or accommodation: <i>(please describe in detail to ensure proper implementation-use extra pages as needed)</i>		
12. Foods to be omitted and substitutions: <i>(please list specific foods to be omitted and suggested substitutions. you may attach a sheet with additional information as needed)</i>		
A. Foods To Be Omitted		B. Suggested Substitutions
<i>Cow's Milk</i>	_____	<i>Need to indicate a milk substitute</i>
_____	_____	<i>Example- almond milk, coconut milk, oat milk, etc</i>
_____	_____	<i>Parent can sign for nutritionally equivalent milk. Soy- or lactaid</i>
<i>Allergy such as peanuts, shellfish etc</i>	_____	<i>No sub needed- parent can sign</i>
13. Indicate texture: <input type="checkbox"/> Regular <input type="checkbox"/> Chopped <input type="checkbox"/> Ground <input type="checkbox"/> Pureed		
14. Adaptive Equipment:		
15. Signature of Preparer*	16. Printed Name	17. Telephone Number
19. Signature of Medical Authority*	20. Printed Name	21. Telephone Number
<i>Signed by MD, APN, or PA</i>		<i>Dr's phone #</i>
		22. Date

Menus

- Menus are required to be entered into CX/Kidkare
- Post a menu at childcare site
 - Export directly from CX/Kidkare
 - Transfer into a menu template
- Posted menu must say “This institution is an equal opportunity provider” at the bottom
- Whole grain items must be designated with “WG” - at least 1 WG offered per day
- Serving sizes notated

CACFP is an indicator of quality care.

CACFP Weekly Menu

MEAL	COMPONENT	AGES 1-2	AGES 3-5	AGES 6-18	ADULTS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
BREAKFAST	Milk	1/2 cup	3/4 cup	1 cup	1 cup					
	Fruit/Vegetable	1/4 cup	1/2 cup	1/2 cup	1/2 cup					
	Grain/Meat*	1/2 oz eq	1/2 oz eq	1 oz eq	2 oz eq					
LUNCH & SUPPER	Milk [^]	1/2 cup	3/4 cup	1 cup	1 cup					
	Vegetable	1/8 cup	1/4 cup	1/2 cup	1/2 cup					
	Fruit*	1/8 cup	1/4 cup	1/4 cup	1/2 cup					
	Grain	1/2 oz eq	1/2 oz eq	1 oz eq	2 oz eq					
	Meat/Meat Alternate	1 oz	1 1/2 oz	2 oz	2 oz					
SNACK	Milk	1/2 cup	1/2 cup	1 cup	1 cup					
	Fruit	1/2 cup	1/2 cup	3/4 cup	3/4 cup					
	Vegetable	1/2 cup	1/2 cup	3/4 cup	1/2 cup					
	Grain	1/2 oz eq	1/2 oz eq	1 oz eq	1 oz eq					
	Meat/Meat Alternate	1/2 oz	1/2 oz	1 oz	1 oz					

* Meat and meat alternates may be served in place of the entire grains component at breakfast a maximum of three times per week. ^ The fruit component at lunch may be substituted by a second vegetable. ^ A serving of milk is optional at supper meals for adults. oz eq = ounce equivalents



Age 1 serve whole milk
Ages 2-18 serve 1% or fat-free



At least one serving of grains per day
must be whole grain-rich.



One 8 oz. glass of water per year of
age until 8 years old.
8 yrs old + | 6-8 8 oz. glasses per day.



cacfp.org | This institution is an equal opportunity provider.





Menu Substitution Logs

- If you run out of an item that you have planned to serve, that is okay!
- Document change on a Menu Substitution log
- Serve the same component and make sure serving size is met

Centers Name: _____

Month and Year: _____

Site	Date	Meal	Planned Menu Item	Menu Item Substitution	Approved By	Reason for Substitution (Optional)



Nutrition Labels



Keep a folder of nutrition labels for yogurts, cereals, and grain items that you serve



Helps to keep notes on serving size calculations, sugar limit calculations, and WGR determination



Used to verify that items meet the crediting requirements and serving size in the CACFP

Example Nutrition Label Record



- Notes:
 - Sugar limits- On WIC list/Calculator
 - WGR- On WIC list
 - Serving sizes- from Grains Measuring Chart or calculator on FFK's website:
 - 1-5 yo- 1/2 c
 - 6-18 yo- 1 c

Ingredients: Whole Grain Oats, Corn Starch, Sugar, Salt, Tripotassium Phosphate. Vitamin E (mixed tocopherols) Added to Preserve Freshness.

Vitamins and Minerals: Calcium Carbonate, Iron and Zinc (mineral nutrients), Vitamin C (sodium ascorbate), A B Vitamin (niacinamide), Vitamin B₆ (pyridoxine hydrochloride), Vitamin A (palmitate), Vitamin B₁ (thiamin mononitrate), A B Vitamin (folic acid), Vitamin B₁₂, Vitamin D₃.

Nutrition Facts			
About 13 servings per container (age 4+ years) About 25 servings per container (age 1-3 years)			
Serving size 1 1/2 cup (39g) (age 4+ years) 3/4 cup (20g) (age 1-3 years)			
	Cheerios	with 1/2 cup skim milk	Age 1-3 years
Calories	140	190	70
	% DV**	% DV**	% DV***
Total Fat 2.5g*	3%	4%	4%
Saturated Fat 0.5g	3%	4%	0%
Trans Fat 0g			
Polyunsaturated Fat 1g			
Monounsaturated Fat 1g			
Cholesterol 0mg	0%	2%	0%
Sodium 190mg	8%	11%	7%
Total Carbohydrate 29g	11%	13%	10%
Dietary Fiber 4g	14%	14%	14%
Soluble Fiber 1g			
Total Sugars 2g			
Incl. Added Sugars 2g	4%	4%	3%
Protein 5g			8%
Vitamin D 2mcg	10%	15%	6%
Calcium 130mg	10%	20%	8%
Iron 12.6mg	70%	70%	90%
Potassium 250mg	6%	8%	4%
Vitamin A	10%	20%	15%
Vitamin C	10%	10%	30%
Thiamin	20%	25%	20%
Niacin	10%	10%	10%
Vitamin B ₆	20%	20%	30%
Folate (45mcg folic acid)	20%	20%	25%
Vitamin B ₁₂	20%	30%	25%
Phosphorus	10%	20%	15%
Magnesium	15%	15%	35%
Zinc	20%	20%	35%

* Amount in cereal. A serving of cereal plus skim milk provides 3g Total Fat (1g Saturated Fat), less than 5mg Cholesterol, 250mg Sodium, 35g Total Carbohydrate (6g Total Sugars), 9g Protein, 3mcg Vitamin D, 260mg Calcium, 12.6mg Iron, and 450mg Potassium.

** Amount in serving size for age 4+ years. A serving of Cheerios for children 1-3 years of age provides 1.5g Total Fat (0g Saturated Fat), 0.5mg Poly Fat, 0.5mg Mono Fat, 100mg Sodium, 15g Total Carbohydrate (2g Dietary Fiber, <1g Soluble Fiber, 1g Total Sugars, 1g Added Sugars), 2g Protein, 0.9mcg Vitamin D, 60mg Calcium, 6.3mg Iron, and 130mg Potassium.

*** The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

**** The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 1,000 calories a day is used for general nutrition advice for children 1-3 years.



Infant Meal Records

Nevada Department of Agriculture
09/27/2017 vig

Individual Infant Meal Record
Child and Adult Care Food Program

Infant Formula Type: SIMILAC
 Breastmilk Yes No Formula Form on File Yes No
 Allergies according to medical statement: none
 Child's Name: Andre Adams
 Age 6 (Months) Date of birth 01/22/19
 Center/Provider: Diane's Busy Bees

Plan to serve the component(s) and amount(s) appropriate for the age of each infant. Place "P" by each item the parent brings

	Food Components	0-5 mo.	6-11 mo.	Date: 7/15/19	Date: 7/16/19	Date: 7/19/19	Date: 7/18/19	Date: 7/19/19
Breakfast	Iron Fortified Formula or Breastmilk	4-6 fluid oz.	6-8 fluid oz.	IFF 7oz	IFF 6oz	IFF 7oz	IFF 7oz	IFF 6oz
	Infant Cereal or meat, or fish, or poultry, or whole egg or cooked dry beans or cooked dry peas or cheese or cottage cheese or yogurt or combination of above		0-4 tbsp. 0-4 tbsp. 0-2oz 0-4oz 1/2 cup	IFC 2TBSP	(P) cottage cheese 2TBSP	(P) cottage cheese 2TBSP	IFC 2TBSP	IFC 2TBSP
	Fruit or vegetable or both		0-2 tbsp.	Banana 1TB	Peaches 2TB	Banana 2TB	Peaches 1TB	Banana 1TB
Lunch	Iron Fortified Formula or Breastmilk	4-6 fluid oz.	6-8 fluid oz.	IFF 7oz	IFF 8oz	IFF 6oz	IFF 7oz	IFF 8oz
	Infant Cereal or meat, or fish, or poultry, or whole egg or cooked dry beans or cooked dry peas or cheese or cottage cheese or yogurt or combination of above		0-4 tbsp. 0-4 tbsp. 0-2oz 0-4oz 1/2 cup	egg 3TBSP	IFC 2TBSP	chicken 2TBSP	egg 3TBSP	(P) cottage cheese 3TBSP
	Fruit or vegetable or both		0-2 tbsp.	peas 1TB	carrots 1TB	peas 1TB	carrots 1TB	peas 1TB
Supper	Iron Fortified Formula or Breastmilk	4-6 fluid oz.	6-8 fluid oz.					
	Infant Cereal or meat, or fish, or poultry, or whole egg or cooked dry beans or cooked dry peas or cheese or cottage cheese or yogurt or combination of above		0-4 tbsp. 0-4 tbsp. 0-4 tbsp. 0-2oz 0-4oz 1/2 cup					
	Fruit or vegetable or both		0-2 tbsp.					
Snack	Iron Fortified Formula or Breastmilk	4-6 fluid oz.	2-4 fluid oz.					
	Grain slice of bread crackers Infant cereal or ready to eat breakfast cereal		1-1/2 slice bread 1-2 crackers 0-4 tbsp. 0-4tbsp					
	Fruit or vegetable or both		0-2 tbsp.					

*Parent may only supply one meal item (per meal service) for a reimbursable meal to be claimed

NDA is an equal opportunity provider

- Required to maintain an infant meal record for every infant under 1 year of age in your center
- Can keep on Procure
- Keep in infant room to be updated throughout the day
- Infants are fed on demand in the CACFP





Daily Attendance- Sign in and out

FOOD FOR KIDS, INC.
Sponsor of the USDA Child & Adult Care Food Program
PARENT SIGN-IN/SIGN-OUT SHEET

Provider's ID #: _____ Claim Month: _____

Name of Child Enrolled on the Food Program	Daily Meal Count					Child #	Sign In	Depart Time	Name of Parent or Guardian of Child Printed Name	Signature of Parent or Guardian	Date Signed
	B	A	L	P	D						

- Children must be signed **in and out** by their parent or guardian daily
- Either paper or in a system like Procure
- Attendance records need to be available upon request and should back up claiming in Kidkare





Spending CACFP Reimbursement Money

- Must spend reimbursement on qualified purchases and maintain documentation supporting those purchases
- Documentation requirements- Receipts and TDLs
- Can spend money on:
 - Food (Must spend 50% of reimbursement on food)
 - Supplies for CACFP Operations (food service, cleaning)
 - Labor relating to the operations of CACFP
 - Not administrative labor





Receipts

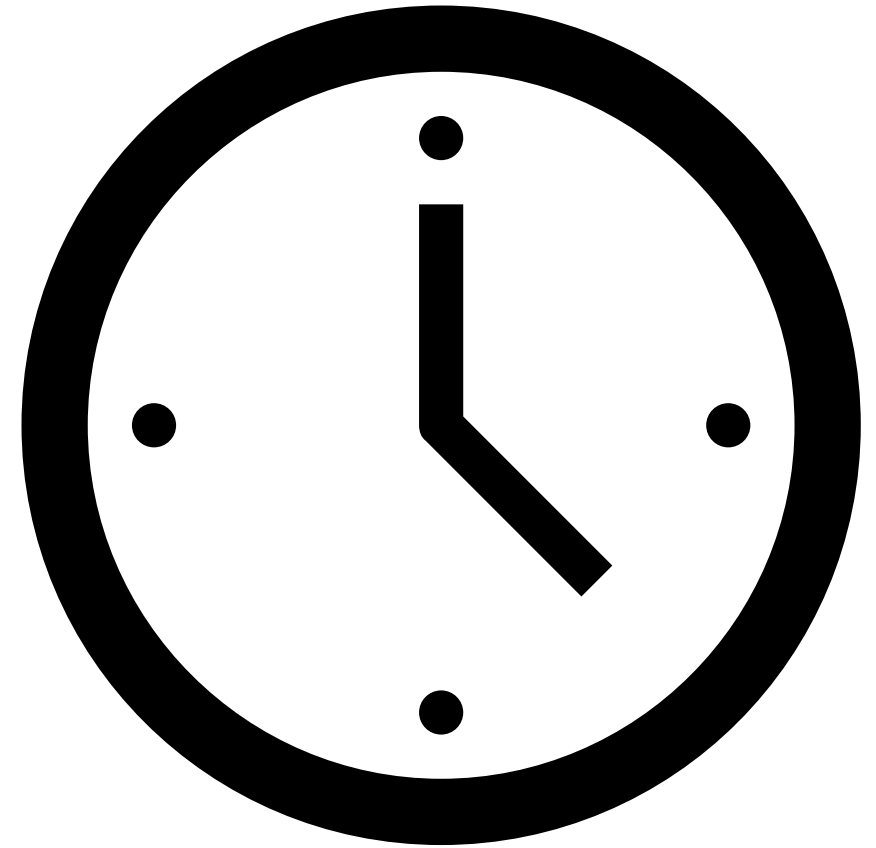
- All receipts for CACFP-related purchases must be submitted to us
- Submit via email as a PDF format
 - Make sure scan is clear and entire receipt is visible
- Sent throughout the month
 - Milk audit up to date to manage milk
- View in CX/KidKare
- Large items, such as kitchen appliances and equipment, must undergo a bid process prior to purchase





Time Distribution Logs

- TDLs are a record of how an employee's time is split between CACFP and other duties
- Administrative labor- Time spent on administrative activities in CACFP, such as paperwork
- Operational labor- Time spent on CACFP operations, such as the preparation or serving of a meal





Filling out TDLs



RV 2/4/21

Nevada Child and Adult Care Food Program

Time Distribution Report Log

Month/Year May 2024

Employee Name: Employee Name

Employee Position: Director/Cook/Teacher/etc

Sponsor/Site Name: Childcare Center Name

INSTRUCTIONS: This form is for employees who spend part of their day working on the Food Program. Each month, indicate the number of hours per day spent on administrative and/or operational activities related to the CACFP. Examples of CACFP administrative activities include, but are not limited to: monitoring, record keeping, compiling data and completing the claim for reimbursement and attending training related to nutrition and food safety. Examples of CACFP operational activities include, but are not limited to: menu planning, grocery shopping, cooking and serving meals and clean up after meals. This form will be used in documenting a nonprofit food service operation.



All 4 Time Columns- Admin, Oper, Non-CACFP, and Total- should be filled out

Date	Hours Worked on CACFP		Non-CACFP Hours Worked	Total Hours Worked	Date	Hours Worked on CACFP		Non-CACFP Hours Worked	Total Hours Worked
	Admin.	Oper.				Admin.	Oper.		
1	2	3	3	8	17	3	2	3	8
2	5	1	2	8	18				0
3	2	3	3	8	19				0
4				0	20	2	1	5	8
5				0	21	3	3	2	8
6	3	3	2	8	22	1	6	1	8
7	2	2	4	8	23	2	2	4	8
8	5	3	0	8	24	0	4	4	8
9	0	4	4	8	25				0
10	2	3	3	8	26				0
11				0	27				0
12				0	28	1	1	6	8
13	1	1	6	8	29	2	2	4	8
14	1	2	5	8	30	1	1	6	8
15	1	3	4	8	31	1	3	4	8
16	2	3	3	8	TOTAL	42	56	78	176

I certify that this is an accurate record of the number of hours worked on the CACFP. **Total All Columns**

Employee Signature Enter Date Signed (end of month usually)

Employee's Signature Date



TO BE COMPLETED BY CENTER DIRECTOR/AUTHORIZED REPRESENTATIVE

A. (HOURLY PAID STAFF) - Example based off of \$20 per hour

Total administrative hours worked on CACFP 42 x \$ 20 (hourly wage) = \$ 840 (Total admin. CACFP salary)

Total operational hours worked on CACFP 56 x \$ 20 (hourly wage) = \$ 1120 (Total oper. CACFP salary)

B. (SALARIED STAFF) - Example based off salary of \$4000 per month

Total administrative hours worked on CACFP 42 ÷ Total hours worked 176 = 23 %

Total Salary for month \$ 4000 x 0.23 % = \$ 920 (Total admin. CACFP salary)

Total operational hours worked on CACFP 56 ÷ Total hours worked 176 = 31 %

Total Salary for month \$ 4000 x 0.31 % = \$ 1240 (Total operational CACFP salary)

I certify that payroll records are on file that verify the total wages as listed above.

Signature of Center Director/Authorized Representative Director Signature

Date: Date Signed

Only fill out EITHER Hourly or Salary Section, depending on how this employee is compensated

DO NOT FILL OUT BOTH





Financial Back Up

- We may need to add labor costs to your claim to show your reimbursement money is being used for CACFP-related expenses
- If that is the case, we will request financial documents, such as pay stubs, to back up TDLs
- Financial backup needs to include the following information:
 - Employee name
 - Pay period (pay periods should cover the entire claim month)
 - Amount of compensation- gross wage, hourly rate, salary, and net pay
 - Hours worked during the pay period
- You can redact social security numbers and bank account information to protect employee privacy





License, Health Permits, and Fire Permits

- Know the licensing and other requirements for your area
- Up to date licenses submitted to FFK (including provisional licenses)
- If required for your county, will also request:
 - Fire Department Inspection
 - Fire Permit
 - Health Inspection
 - Health Permit



Submitting documents to FFK

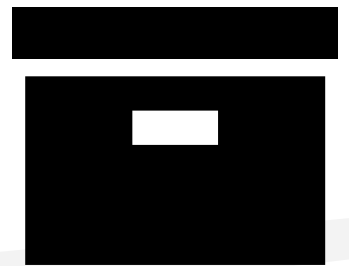
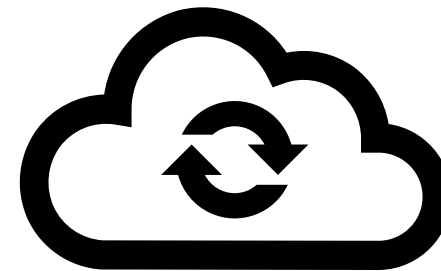
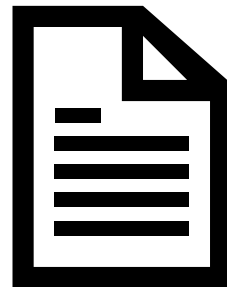
- All documentation should be scanned or saved as a PDF document
- Email to centers@ffknevada.org
- Avoid responding to an unrelated thread with documents
- Include description in the subject line and/or body of your email
 - If you are submitting enrollment packets, include the names of the children that you are submitting
 - All other emails with documents should state what is attached





Storage and Maintenance of CACFP Records

- CACFP Records must be kept for 3 years, plus the current operating year
- Establish an organizational system to keep records secure and accessible
- Can keep either electronic or paper records, or both





Claims Submission and Reimbursement



Submitting Claims to Sponsor

- Enter claiming daily and maintain records throughout the month
- Must “Submit Claim to Sponsor” in either CX or Kidkare on the 1st of each month
- Also due by the first:
 - Final receipts and enrollments
 - Menus
 - Menu Substitution List
 - Updated Medicaid List (for Adult Day Care Centers)
 - TDL’s- and then financial backup as requested





OERs and Correcting Errors

- After we receive each claim, we review for errors and will reach out with an email requesting corrections
- Prompt responses to these emails are imperative, so that we can submit to the state
- After we submit your claim to the state, errors can no longer be fixed
- Some common errors that can be fixed:
 - Missing enrollments
 - Milk Shortages
 - Missing Menu
 - Menu errors (whole grain box, missing item)





Reimbursement Rates and Process

- State reviews claims from sponsor, and distributes funds to the sponsor
- Sponsor distributes funds down to individual centers
- Timeline
 - Once the state submits the claim to federal level, they have 45 days to pay the state
 - Once the state pays FFK, we have 5 business days to disburse funding to all homes and centers

2024-2025 Reimbursement Rates- Daycare Centers				
	Paid	Reduced	Free	Cash in Lieu
Breakfast	\$0.39	\$2.07	\$2.37	N/A
Lunch/Supper	\$0.42	\$4.03	\$4.23	\$0.30
Snack	\$0.11	\$0.60	\$1.21	N/A

In addition to the base rate, also receive \$0.30 Cash in Lieu per Lunch or Supper served with your reimbursement





Monitoring Visits and Serious Deficiency Process



Monitoring Process

- FFK conducts monitoring visits to all sponsored providers to evaluate compliance and provide technical assistance
- Unannounced visits at least 3x per year
- Usually observe a meal; sometimes a non-meal review
- Corrective actions and serious deficiencies may result for repeated non-compliance





What Monitors Look For

- ✓ Overall CACFP Compliance
- ✓ Attendance for the past 5 days- Compare to children claimed in CX/Kidkare
- ✓ Meal service
 - ✓ Menu matches items served, point of service conducted, all components are served in correct portion sizes, meal is served at the approved meal service time
- ✓ Accurate recordkeeping
- ✓ Kitchen and foodservice safety and sanitation
- ✓ Any areas where technical assistance may be warranted





After a Monitoring Visit



You will receive a copy of the
Child Review Form

Review and sign with monitor during visit
Ask any questions about things they noted
Keep a copy for your reference and records



If the monitor noticed overclaiming or errors in meal service,
meals may be disallowed



If applicable, you may receive a corrective action notice or
serious deficiency notice with instructions on how to proceed



Corrective Actions



- If there are findings during a monitoring review, it may result in a corrective action
- A corrective action is an opportunity to improve CACFP operations
- Received in writing, and you will have to create an action plan to remedy the findings and prevent further non-compliance
- A follow up visit will be conducted to evaluate whether the action plan was followed and problems remedied



Serious Deficiencies



Serious deficiencies may be issued in cases of fraud, serious mismanagement, or recurrent unresolved findings



Failure to remedy the cause of a serious deficiency can result in termination from the program and placement on the National Disqualified List (NDL)



Being listed on the NDL prevents individuals from being involved in CACFP program operations for 7 years following the placement



Civil Rights Training

Who is required to have Civil Rights training, Goals of Civil Rights, and Responsibilities

Define Federal Financial Assistance, Assurances, and Protected Classes

Discuss types of discrimination and non-discrimination statements

Accommodation Requirements- Reasonable Accommodation and Language Assistance

Faith and Community Based Organizations

Racial and Ethnic Data Collection and Procedures

Complaint Procedures and Requirements

Conflict Resolution and Customer Service



Program Authorities and Regulations

- USDA Regulations at 7 CFR 15, 15a, and 15c
- USDA Regulations at 7 CFR 16
- CACFP Regulations at 7 CFR 226.6
- Executive Order 12250 (Disability) and 13166 (LEP)
- FNS Instruction 113-1, including Appendix B





Who is required to receive Civil Rights training?

- “Frontline staff” who interact with applicants and participants and supervisors of “frontline staff” must be trained annually
- This includes day care operators and their staff members



Civil Rights Responsibilities of Daycare Centers

- No disparity in meal service due to race, color, national origin, age, disability, sex
- Post “Building for the Future” flyer and “And Justice for All” Poster
- Have procedures in place for language assistance
- Handle and report Civil Rights complaints appropriately
- Provide reasonable accommodation for persons with disabilities
- Non-discrimination statement- on website and menus
- Racial and ethnic data collection





Goals of Civil Rights

- Equal treatment for all applicants and beneficiaries under the law
- Knowledge of rights and responsibilities
- Elimination of illegal barriers that prevent or deter people from receiving benefits
- Dignity and respect for all





Federal Financial Assistance

- Federal financial assistance is anything of value received from the Federal government and can include cash, commodities, training, excess, computers, and more
- Accepting Federal financial assistance requires compliance with Civil Rights rules in all aspects of operations – not just in the program being funded





Assurances

- To receive Federal funding, agencies/providers must sign assurances that they will abide by Civil Rights requirements in program delivery.
- Assurances are promises
 - No discrimination toward a protected class
 - Program will be operated in compliance with all nondiscrimination laws, regulations, instructions, and guidelines
 - Compile data and maintain records
 - Allow reviews and access





What is a protected class?

- Any person or group of people who have characteristics for which discrimination is prohibited based on a law, regulation, or executive order
- Protected classes in CACFP are **race, color, national origin, age, sex** (including gender identity and sexual orientation) **and disability**





Disability Definition

- A person with a physical or mental impairment that substantially limits one or more major life activities
 - Major Life Activities: Seeing, Hearing, Walking, Speaking, Learning, Reading, Eating, Breathing
 - Major Bodily Functions: Digestive, Immune System, Respiratory, Circulatory, Neurological/Brain, etc
- A person who has a record of such an impairment
- A person who is regarded as having such an impairment





Types of Disability Discrimination

- Denying benefits or opportunity to participate
- Segregating individuals with disabilities
- Aiding, perpetuating or contracting with others that discriminate
- Failing to provide a reasonable modification





Types of Discrimination

- **Disparate Treatment** - Someone is treated differently or less favorably due to being part of a protected class; the intent is the matter at issue.
- **Disparate Impact** – Policies, practices or actions that have discriminatory results that disproportionately negatively affect a protected class.
- **Reprisal/Retaliation** – Punishing someone for engaging in legally protected activity, e.g., negative treatment, intimidation, harassment, etc. due to prior civil rights activity by an individual or his/her family, for cooperating with an investigation, etc.





Non-Discrimination Statement

- The long version of the Nondiscrimination Statement (next slide) has changed to include gender identity and sexual orientation discrimination
- New *And Justice for All* posters now reference gender identity and sexual orientation discrimination
 - Posters should be posted where participants are traditionally served meals or in the main entrance
 - Posters can also be included on carts that go to multiple classrooms or areas where food is served





Non-Discrimination Statement (Long)

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

fax:

(833) 256-1665 or (202) 690-7442; or

email:

program.intake@usda.gov

This institution is an equal opportunity provider.





Non-Discrimination Statement (Short)

“This institution is an equal opportunity provider”

- May be used in small flyers or brochures where the longer statement does not fit
 - This is the verbiage required on posted menus
- Must be in the same font size that is used in the rest of the of publication
- Should not be used where information on rights is provided





Reasonable Accommodations

- A public entity shall make reasonable modifications in policies, practices, or procedure when the modifications are necessary to avoid discrimination based on disability
- Unless the public entity can demonstrate that making the modifications would fundamentally alter the nature of the service, program, or activity
- Ensure access for people with disabilities



Food Accommodations

- Accommodations will need to be tailored to meet individual situations
- Basic Requirements:
 - Medical Plan of Care for Special Diets- Statement to Request Special Meals and/or Accommodation
 - Type of disability or medical condition
 - Type of accommodation needed
 - Do not second guess doctor





Language Assistance

- People with Limited English Proficiency (LEP) need to be served in other languages
- Provide reasonable, timely, appropriate and competent language services at no cost to individuals with LEP
- Outreach in other languages is important
- Generally, service must be provided, however there is flexibility in how it is provided





How language assistance service is provided depends on:

- Number & proportion of LEP persons served or encountered in eligible population
- Frequency of LEP persons' contact with program
- Nature & importance of program, activity, or service, and
- Resources available and costs
- **SHORTAGE OF RESOURCES DOES NOT ELIMINATE REQUIREMENT EXCEPT IN CASES OF EXTREME HARDSHIP.**





Language Assistance Cont.

- Volunteers may be used as interpreters, but make sure they understand interpreter ethics – particularly confidentiality!
- Children should not be used as interpreters
- See www.lep.gov for resources & information





Faith and Community Based Organizations

- Equal opportunity required for Faith Based Organizations (FBOs) and Community Based Organizations (CBOs)
- Discrimination is prohibited against an organization based on religion, religious belief or character in the distribution of funds
- FBOs can use space in their facilities without removing religious art or symbols
- No organization that receives direct assistance from the USDA can discriminate against a beneficiary or prospective beneficiary based on religion or religious belief
- FBOs retain their independence and carry out their mission if USDA funds or activities do not support worship, religious instruction or proselytization
- FBOs can consider religion in their admissions practices and impose religious attendance or curricular requirements at their schools





Purpose of Racial and Ethnic Data Collection and Analysis



Collected to help determine if there are disparities between potentially eligible and participating populations



Allow for targeting outreach efforts- target underserved populations



Aggregate data is used for the analysis



Kept confidential



How to collect racial and ethnic data

- Obtain from parents and guardians
 - On the second page of the MBIE
- Identifying race and ethnic groups should be explained
 - Provide information to ensure compliance with USDA Nondiscrimination
 - Failure to report will not impact participant eligibility for meals
- Visual observation and identification is not an acceptable practice
- Data is collected yearly





Complaint Procedures

- Complete the USDA Program Discrimination Complaint Form (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form.
- To request a copy of the complaint form, call (866) 632-9992.
- Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.





Complaint Procedures

- Be aware of the basis for which complaints may be filed: race, color, national origin, age, sex (including sexual orientation and gender identity) and disability
- Never discourage groups or individuals from filing complaints or from voicing allegations of discrimination
- Keep Complaint Procedures in a binder at each site
- FNS Instruction 113-1 outlines complaint investigation procedures





Conflict Resolution and Customer Service

- Have a written and posted policy for dealing with unacceptable behavior and conflicts
- Explain the situation and try to remain calm
- Get help if needed, especially if there are threats or if violence is possible
- Use alternative dispute resolution (ADR) methods such as arbitration or mediation
- Be empathetic. Understand that people may not know the rules or understand how programs work. They may feel uncomfortable coming to ask for help
- Explain the policy and let them know you are unable to violate the rules





Thank you for joining us!

