

Section 4000

Managing the Program

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Managing the Program

By agreeing to participate in the CACFP (Program), the contracting entity (CE) accepts final administrative and financial responsibility for operating the Program, as well as final administrative and financial responsibility of the operation of the Program in the day care homes it sponsors. These responsibilities are described in federal and state laws, regulations, and policies and in the CE's approved application and Permanent Agreement. The CE must not deviate from its approved budget and application/management plan without TDA's written consent.

Either directly or through its day care home providers, a CE must:

- Prepare and serve reimbursable meals.
- Operate a nonprofit food service.
- Manage Program activities.
- Document the Program activities as required.

4100 Reimbursable Meals and Snacks

CEs and providers must comply with Program requirements, including meal patterns, to receive reimbursement for meals and snacks. A reimbursable meal or snack is one that meets the meal pattern requirements (contains all required components in at least the minimum required portion sizes) and is served to an eligible enrolled child.

4110 Meal Service

The meal patterns guide the preparation of well-balanced and nutritious meals and snacks. The meal patterns are a flexible framework that enables the provider to choose from a wide variety of foods when planning and serving nutritious meals. Variations in the meal patterns can be considered for religious, cultural, and ethnic eating preferences when planning menus.

Providers may not use meals, or components of a meal, as a way to reward or punish a child under any circumstance.

4111 Planning of Meal Service

CEs and providers are encouraged to plan meals at least two weeks in advance of a meal service to assist in food purchasing, cost control and the scheduling of food preparation. Often

children's diets lack sufficient nutrients, such as iron and vitamins A and C; therefore, TDA recommends using foods that are good sources of these nutrients.

Planning menus in advance, incorporating seasonal fruits and vegetables, will help CEs and providers plan menus that will increase nutrient intake and promote healthier eating.

CEs and providers must plan for and prepare or order meals on the basis of current participation trends with the objective of providing only one meal per child at each meal service, and minimizing waste.

Using the appropriate Program meal pattern and Health and Human Services Commission (HHSC) *Child Care Licensing* requirements (if applicable), CEs and providers should vary the form, size, shape, color, texture, flavor, and temperature of foods that they offer. CEs should review providers' menus in advance to reduce the number of disallowed meals.

Links to training and resources to assist CEs and providers in planning and preparing healthy meals can be found at <http://www.squaremeals.org> under F&N Resources, as well as Publications. TDA also provides trainings through the Education Service Centers (ESCs) on topics such as menu planning, feeding infants, planning nutrition snacks, and kitchen math. Classes can be found at <http://www.squaremeals.org> under F&N Resources by selecting the Training link.

Best Practices

The following recommendations are best practices and not required for Program compliance. The use of these best practices is optional and intended to further strengthen the nutritional quality of the meals served.

- Vegetables and Fruits
 - Make at least one of the two required components of a snack a vegetable or a fruit
 - Serve a variety of fruits and choose whole fruits (fresh, canned, frozen, or dried) more often than juice
 - Provide at least one serving each of dark green vegetables, red and orange vegetables, beans and peas (legumes), starchy vegetables, and other vegetables once per week
- Grains
 - Provide at least two servings of whole grain-rich grains per day
 - Serve whole grain-rich foods to infants to promote acceptance of those foods later in life
- Meat and Meat Alternates
 - Serve only lean meats, nuts, and legumes
 - Limit serving processed meats to no more than one serving per week
 - Serve only natural cheeses and choose low-fat or reduced-fat cheeses
 - Serve only low-fat or fat-free yogurt

- Milk
 - Serve only unflavored milk to all participants. If flavored fat-free (skim) milk is served to children 6 years old and older, or adults, use the Nutrition Facts Label and select and serve flavored milk that contains no more than 22 grams of sugar per 8 fluid ounces, or the flavored milk with the lowest amount of sugar if flavored milks within this sugar limit are not available
- Additional
 - Incorporate seasonal and locally produced foods into meals
 - Limit serving purchased pre-fried foods to no more than one serving per week

Avoid serving non-creditable foods that are sources of added sugars, such as sweet toppings (e.g., honey, jam, syrup), mix-in ingredients sold with yogurt (e.g., honey, candy or cookie pieces), and sugar-sweetened beverages (e.g., fruit drinks or sodas)

3E's of Healthy Living

TDA is committed to the 3E's of Healthy Living – Education, Exercise, and Eating Right. As part of that commitment, the CACFP initiative “Promoting Healthy Eating and Physical Activity for a Healthier Lifestyle” is the TDA avenue to promote a healthier lifestyle, including healthy eating and physical activity for children ages 2 – 5 years.

The Healthier Child and Adult Care Food Program Recognition Award (HCACFPRA) is a recognition system that supports the wellness efforts of child care centers participating in the Program. Child care centers taking steps to improve the menus, physical activity, nutrition education, and/or environment for children in their care can apply to win an award in one or more of these categories. Three award levels are offered: Bronze, Silver, and Gold.

In order to participate in the HCACFPRA, CE must complete a request for application (RFA) for the Establishing 3 E's (E3Es) grant. Grant opportunities are released March/April. When the E3Es RFA is released, the CE will complete the RFA based on the level and category(ies) for which they wish to apply. Applicants must choose the Menus category plus one or more of the remaining categories they would like to apply for and at which level.

The grant application awards are based on a competitive scoring process. CEs will be contacted if their application was selected for a grant award. Grantees have one year to complete their plan as stated in the RFA to obtain a recognition award level.

Centers/sponsors will be recognized by TDA at the completion of the grant period. TDA will showcase the child care center's achievements at the CACFP State Conference. Award kits based on the award level achieved will be presented or mailed to the CE.

CEs and providers are valuable partners in the challenge to improve the health of Texans, prevent obesity, and model better eating habits for Texas children.

Pre-planned Pre-printed Menus

CEs must ensure that providers prepare a meal production record for each meal service on a daily basis.

CEs cannot:

- Require the use of pre-planned, pre-printed menus.
- Provide pre-planned, pre-printed menus, except as a training tool.

Individual providers may use pre-planned, pre-printed menus that they have developed for their own use. Each day, they must:

- Verify that the items on the pre-printed menu were served as listed, or that acceptable substitutions were made.
- Identify the individual who recorded the information.
- Record the date.

EXAMPLE: On the first day of a pre-printed 10-day menu, the provider served all of the items listed. Prior to the end of the day, the provider must notate that each item was served and initial and date the menu record.

If a substitution is made, the item must be added to the pre-printed menu record. Providers should record the substitution without obscuring the readability of the original item.

EXAMPLE: A provider served each of the items that were listed on a lunch menu prepared 10 days earlier, except corn was substituted for green beans on the ninth day. Prior to the end of the ninth day, the provider must:

- Strike through the words “green beans.”
- Record “corn”.
- Notate that other items were served as planned.
- Initial the changes.

Providers must use the *Daily Meal Count, Attendance, and Meal Production Record* (H1539) to record their menus, or alternate. CEs must ensure all required information is documented and maintained if an alternate menu is used.

Cycle Menus

A cycle menu is one that is different every day, planned for a specified period of time (e.g., 1 to 2 weeks or 3 – 4 weeks) and then repeated.

Cycle menus can help CEs and Providers save time and labor by:

- Reducing menu planning time
 - The cycle menu is planned weeks in advance thereby cutting menu planning time
- Streamlining purchasing procedures
 - CEs and providers know in advance what items are needed and where they can obtain those items more efficiently and at a cost savings
- Standardizing food production
 - Providers become more familiar with the recipes and more efficient in producing them
- Reducing storage and food waste
 - Providers know through history how much of each component to keep on hand and how much of each items to make

CEs and providers are not required to use cycle menus. If cycle menus are used, CEs and providers are encouraged to evaluate them periodically to ensure they are providing a variety of food options as well as providing cost and time savings.

4112 Meal Pattern Requirements

The meal pattern charts document the *minimum* amounts of each required component as well as any other requirements (i.e., milk types, sugar limits) that must be provided to each child for a meal to qualify for reimbursement. Children may be served larger portions, but at a minimum must be served the quantity specified in the meal pattern charts for each component. Providers may choose to serve additional foods. Serving sizes vary for children of different ages.

For any meal to be eligible for reimbursement all food components in the required minimum serving sizes must be offered at the same time.

CEs and providers should become familiar with the following terms as they will be used throughout:

- A food component is one of the food categories that comprise a reimbursable meal. A provider must always offer all the food components that comprise a reimbursable meal in at least the minimum required amounts. The food components in the CACFP are: grains, vegetables, fruits, meat/meat alternates, and milk.
- A food item is a specific food offered within the food components comprising the reimbursable meal. For example, separate ½ cup servings of broccoli and carrots are two food items that comprise the vegetable component.

- A combination food contains more than one food item from different food components that cannot be separated, such as a vegetable pizza. A vegetable pizza contains three food items from three different food components: a serving of grains (crust), a serving of vegetables (vegetable toppings), and a serving of meat alternate (cheese). Other examples of combination foods are soups, prepared sandwiches, and burritos.

All serving sizes and equivalents must be as specified in the *Food Buying Guide (FBG) for Child Nutrition Programs* as published by USDA. A link to the FBG is located on the TDA website at <http://www.squaremeals.org>, under F&N Resources, Tools & Links. The FBG Calculator and Crediting Handbook for the Child and Adult Care Food Program are also available. The calculator allows users to build shopping lists of foods from the FBG and determine how much of each item to purchase to provide enough servings for participants in their program.

The Crediting Handbook provides crediting information for commonly served foods. Additionally, USDA provides a FBG Mobile App which provides quick access to food yield information for quick purchasing decisions. The mobile app can be downloaded from USDA's website at <https://www.fns.usda.gov/tn/food-buying-guide-for-child-nutrition-programs>.

Foods not listed in the FBG may be served in CACFP using the yield information of similar food or in-house yield with TDA approval. Instructions for developing yield information are available in the introduction section of the FBG. Requests for approval must be submitted to:

Texas Department of Agriculture
Attn: F&N CACFP Nutrition Specialist
P.O. Box 12847
Austin, TX 78701

Fax: (888) 203-6593
Attn: F&N CACFP Nutrition Specialist

Email: Nutrition@TexasAgriculture.gov
Attn: F&N CACFP Nutrition Specialist

4112.1 Meal Pattern Chart – Infants

Meal Type	Birth through 5 Months	6 through 11 Months
BREAKFAST, LUNCH OR SUPPER	4-6 fluid ounces (fl oz) of breastmilk ¹ or formula ²	6-8 fluid ounces of breastmilk ¹ or formula ² and 0-4 tablespoons infant cereal ^{2,3} meat, fish, poultry, whole egg, cooked dry beans, or cooked dry peas; or 0-2 ounces of cheese; or 0-4 ounces of (volume) of cottage cheese; or , 0-4 ounces or 1/2 cup of yogurt ⁴ ; or a combination of the above ⁵ ; and 0-2 tablespoons vegetable or fruit, or a combination of both ^{5,6}
SNACK	4-6 fluid ounces (fl oz) of breastmilk ¹ or formula ²	2-4 fluid ounces of breastmilk ¹ or formula ² ; and 0-1/2 slice of bread ^{3,7} ; or 0-2 cracker ^{3,7} ; or 0-4 tablespoons infant cereal ^{2,3,7} or ready-to-eat breakfast cereal ^{3,5,7,8} ; and 0-2 tablespoons vegetable or fruit, or a combination of both ^{5,6}
¹ Breastmilk or formula, or portions of both, must be served; however, it is recommended that breastmilk be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less than the minimum amount of breastmilk per feeding, a serving of less than the minimum amount of breastmilk may be offered, with additional breastmilk offered at a later time if the infant will consume more. ² Infant formula and dry infant cereal must be iron-fortified. ³ FNS has extended until October 1, 2021 the deadline for implementing ounce equivalents to determine the quantity of creditable grains. The extension allows more time for FNS to develop additional technical assistance materials and for TDA and CEs to provide training and technical assistance to support meal planners. In the interim, CEs are encouraged to transition to using ounce equivalents, rather than household measures such as cups or “servings,” to determine the quantity of creditable grains. Assistance for this transition is available via applicable FNS-sponsored training webinars; tools such as the <i>Recipe Analysis Workbook</i> and <i>Exhibit A Grains Tool</i> sections of the Food Buying Guide for Child Nutrition Programs; and TDA’s meal pattern training modules and Q&As located on the CACFP Meal Patterns page on SquareMeals.org. ⁴ Yogurt must contain no more than 23 grams of total sugars per 6 ounces.		

- ⁵ A serving of this component is required when the infant is developmentally ready to accept it.
- ⁶ Fruit and vegetable juices must not be served.
- ⁷ A serving of grains must be whole-grain rich, enriched meal, or enriched flour.
- ⁸ Breakfast cereals must contain no more than 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).

Providers must offer Program meals to all children who are enrolled for care, including infants. Providers may not avoid this obligation by stating that the infants are not “enrolled” in the CACFP, citing logistical or cost barriers, or by stating they are not claiming infant meals.

Infants must also be served during a span of time consistent with the infant’s eating habits. For example, an infant that was fed at home right before arriving at the center may not be hungry for breakfast when he/she first arrives. The provider may offer the infant breakfast later in the morning when the infant is hungry. Breastfed infants regularly consume less than the minimum amount of breastmilk per feeding so a serving of less than the minimum amount of breastmilk may be offered and additional breastmilk **must** be offered at a later time if the infant will consume more. These meals can still be claimed as the infant was in care during the meal service time.

Iron-Fortified Infant Formulas

Providers must offer at least one infant formula that meets the infant meal pattern requirements. A parent (or guardian) may decline the infant formula that is offered by the provider and supply an alternate infant formula or breastmilk. Refer to Item 4114.4, *Infant Feeding Preference* for required documentation. **NOTE:** A parent may provide infant formula received through WIC for their own infant, but may not donate formula or foods received through WIC for other infants or children.

The Food and Drug Administration (FDA) defines iron-fortified infant formula as a product “which contains 1 milligram or more of iron in a quantity of product that supplies 100 kilocalories when prepared in accordance with label directions for infant consumption.” The number of milligrams (mg) of iron per 100 kilocalories (calories) of formula can be found on the Nutrition Facts Label of infant formulas.

Additionally, to be creditable for reimbursement, infant formula must meet the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and meet the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107.

An *FDA Exempt Infant Formula* and formula that is not iron-fortified (low-iron) is not reimbursable unless it is a substitution due to a disability and supported by a medical statement signed by a licensed physician or a State recognized medical authority. A State recognized

medical authority is a State licensed health care professional who is authorized to write medical prescriptions under State law. Refer to Item 4113.2, *Children/Infants with Disabilities* for additional guidance.

CEs and Providers can check whether a formula is an *FDA Exempt Infant Formula* at:

<http://www.fda.gov/Food/GuidanceRegulation/GuidanceDocumentsRegulatoryInformation/InfantFormula/ucm106456.htm>

CEs and providers may use the following criteria to determine whether or not a formula is eligible for reimbursement without a medical statement:

- Ensure the formula is not an *FDA Exempt Infant Formula*
- Look for “Infant Formula with Iron” or a similar statement on the front of the formula package. All iron-fortified infant formulas must have this type of statement on the package.
- Use the nutrition facts label as a guide to ensure that the formula is iron-fortified. The nutritive values of each formula are listed on the product’s nutrition facts label. To be considered iron-fortified, an infant formula must have a 1 mg of iron or more per 100 calories of formula when prepared in accordance with label directions.

For infants, cow’s milk may be served as a substitute for breastmilk and/or infant formula, and be part of a reimbursable meal, **if** the substitution is supported by a medical statement signed by a licensed physician or a State recognized medical authority. A State recognized medical authority is a State licensed health care professional who is authorized to write medical prescriptions under State law.

Iron-fortified infant formula used in recipes, such as for making pancakes, does not credit toward a reimbursable meal. Iron-fortified infant formula is only creditable when it is served as a beverage.

The American Academy of Pediatrics (AAP) recommends an optimal storage time of 72 hours for refrigerated expressed breastmilk; therefore, Providers may store expressed breastmilk in a refrigerator **no longer than 72 hours**. Refer to USDA’s *Feeding Infants: A Guide for Child Nutrition Programs* for additional guidelines at <https://www.fns.usda.gov/tn/feeding-infants-guide-use-child-nutrition-programs>.

A mother may come onsite and directly breastfeed her child and the meal can be claimed. The provider will document this by noting breastfed (BF) or mother breastfed (MBF) on the meal production record. The provider is not required to record “quantity used” when a mother directly breastfeeds her child onsite. Providers are strongly encouraged to offer a quiet, private area that is comfortable and sanitary for mothers who come to breastfeed. If the provider is

unable to offer a private place and the mother chooses to breastfeed her child in her car the meal can still be claimed for reimbursement, however; if the mother chooses to leave the premises to breastfeed her child, the meal would not be reimbursable.

Meals containing parent or guardian provided expressed breastmilk or creditable infant formula that are served to the infant by the child care provider are eligible for reimbursement, including meals when an infant is only consuming breastmilk or infant formula.

Solid Foods

The gradual introduction of solid foods may begin at six months of age, or before or after six months of age if it is developmentally appropriate for the infant. When an infant becomes developmentally ready for solid foods, the provider must provide those foods.

An infant's readiness to accept solid foods is determined by many factors and the provider should communicate with the infant's parents or guardian about when to serve solid foods.

When talking with parents or guardians about when to serve solid foods to infants in care, the following guidelines from the AAP can help determine if an infant is developmentally ready to begin eating solid foods:

- The infant is able to sit in a high chair, feeding seat, or infant seat with good head control;
- The infant opens his or her mouth when food comes his or her way. He or she may watch others eat, reach for food, and seem eager to be fed;
- The infant can move food from a spoon into his or her throat; and
- The infant has doubled his or her birth weight and weighs about 13 pounds or more.

Providers must follow the eating habits of infants when offering foods, and must serve food of a texture and consistency appropriate for the age and development of the infant being fed. For example, an infant may eat a mashed banana at one meal and not the next, or one week and not the next. If the infant no longer eats mashed banana it does not have to be offered, but if the infant is eating another fruit or vegetable the provider must offer the fruit or vegetable at meals when vegetables and/or fruits are required.

Parent Provided Components

A parent or guardian may choose to provide **one** of the components in a reimbursable infant meal, however; the provider must provide all other required meal components. For example, a parent provides breastmilk or iron-fortified infant formula and the child is developmentally ready for solid foods, the provider **must** provide the solid food in order for the meal to be

reimbursable. Documentation of this choice must be maintained. Refer to Item 4114.4, *Infant Feeding Preference* for required documentation.

CEs and providers are responsible for ensuring that parent provided components such as infant formula are creditable. If a parent provides a non-creditable infant formula (for example, low iron) the CE and provider may not claim the meal unless the parent provides a medical statement signed by a licensed physician or State recognized medical authority that explains the need for the substitution and the recommended infant formula.

Fruits and Vegetables

Commercially prepared baby food vegetables and fruits are reimbursable if they:

- List fruit or vegetable as the first ingredient in the ingredient listing on the label.
- List fruit or vegetable as the first ingredient in the ingredient listing on the label and contain multiple vegetables or multiple fruits.

Commercial baby foods that are NOT reimbursable are:

- Jarred cereals, desserts, or puddings that list a fruit as the first ingredient in their ingredient listing.
- Fruits and vegetables that list water as the first ingredient in their ingredient listing.

NOTE: USDA policy has changed to allow commercial baby foods containing modified food starch to be served in the Infant Meal Pattern. However, most products containing modified food starch and other ingredients will still not be reimbursable because the first ingredient in their ingredient listing is water.

Meat/Meat Alternates

Lean meat and poultry are preferable, such as strained or pureed well-cooked lean beef, pork, lamb, veal, chicken, turkey, liver, and boneless fin fish.

Processed meats and poultry such as chicken nuggets, hot dogs (frankfurters), infant meat and poultry sticks (not dried or semi-dried, not jerky), fish sticks, and sausage may be part of a reimbursable meal. However, they are not recommended. The AAP recommends limiting these foods because they are higher in sodium than other meat products. A Child Nutrition Label or product formulation statement is required for these foods to determine the number of pieces per serving and to document that portions meet the meal pattern requirements.

Once developmentally ready, infants benefit from being introduced to a variety of food textures, aromas, and flavors, including mixed dishes.

When considering food combinations, be sure that the infant has been introduced to all ingredients, that the food is the appropriate texture to prevent choking, and that the food is not high in added sugars, fats, or sodium. Be aware that some mixed dishes may contain foods that do not credit towards the infant meal pattern, such as rice or pasta.

Providers are encouraged to only serve foods with more than one food component to older infants with well-established solid food eating habits.

Commercially prepared infant foods packaged in a jar, plastic container, pouch or any other packaging are creditable in CACFP. The way a food is packaged does not impact whether a food is creditable.

Providers should serve food from a pouch in the same way that it is served from a jar or plastic container, which is by using a spoon. Spoon-feeding is the most appropriate method for feeding pureed or mashed foods to infants. Infants benefit developmentally from the experience of eating from a spoon. Different tongue and lip motions are used for sucking than for eating from a spoon. Additionally, the American Academy of Pediatric Dentistry warns that sucking on baby food pouches may have the same negative effect as the practice of prolonged sucking of juice from bottles or sippy cups.

Whole eggs and yogurt are allowable as meat alternates. To be creditable the whole egg (yolk and white) must be served to the infant. Yogurt must contain no more than 23 grams of sugar per 6 ounces.

NOTE: Tofu and soy yogurt are not allowed as a meat alternate in the infant meal pattern.

Grains and Cereals

Grains must be whole-grain rich, enriched meal, or enriched flour. However, the requirement to *ensure* that at least one meal or snack per day contain a whole grain-rich grain does not apply to infant meals and snacks.

Providers may serve ready-to-eat cereals at snack for infants that are developmentally ready.

Ready-to-eat breakfast cereals must be fortified, or whole-grain rich, or enriched meal, or enriched flour; and must contain *no more than* 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).

Ready-to-eat cereals, or boxed cereals, are a type of breakfast cereal that can be eaten as sold and is typically fortified with vitamins and minerals. Some examples of ready-to-eat cereals are puffed rice cereals and whole grain O-shaped cereal. Oatmeal, steel cut oats, grits (enriched), and instant cereals are not ready-to-eat cereals.

Babies less than 1 year of age should never be fed honey, or foods that contain honey, including cereals. Honey may contain substances that can cause “infant botulism,” a serious type of food-related illness that can make a baby very sick. Honey should not be added to food, water, or formula that is fed to babies, or used as an ingredient in cooking or baking (e.g., yogurt with honey, peanut butter with honey, baked goods that contain honey). This also applies to commercially prepared foods such as cereals sweetened with honey or honey graham crackers.

Infant cereal must be iron-fortified, and whole-grain rich, or enriched meal, or enriched flour. Infant cereal means any iron-fortified dry cereal specially formulated for and generally recognized as cereal for infants that is routinely mixed with breastmilk or iron-fortified infant formula prior to consumption.

There is no minimum standard for how much iron an infant cereal must contain to be considered iron-fortified, to be creditable it must contain some iron. CEs and providers can consider an infant cereal iron-fortified and therefore creditable as long as one of the ingredients listed is “iron”, “ferric fumarate”, “electrolytic iron”, or “iron (electrolytic).”

The following infant cereals are **not** reimbursable:

- Iron-fortified dry infant cereal containing fruit
- Jarred “wet” infant cereals
- Enriched farina, regular oatmeal, and corn grits. They can be fed as additional foods if the parent requests that they be served.

Iron-fortified infant cereal used in recipes, such as for making pancakes, credits toward a reimbursable meal.

Iron-fortified infant cereal served in a bottle is **not** reimbursable unless it is supported by a medical statement.

4112.2 Meal Pattern Chart – Children One Year and Older

BREAKFAST FOOD COMPONENTS Must Serve All Three Components for a Reimbursable Meal		Age 1 - 2	Age 3 - 5	Age 6 – 12	Age 13 - 18 ¹ (at-risk afterschool programs and emergency shelters)
Milk ^{2,3}	Milk, fluid	4 fl oz	6 fl oz	8 fl oz	8 fl oz
Vegetables, Fruits, or portions of both ⁴	Vegetable(s) and/or fruit(s)	1/4 cup	1/2 cup	1/2 cup	1/2 cup
Grains (oz eq) ^{5,6,7}	Whole grain-rich or enriched bread	1/2 slice ¹⁰	1/2 slice ¹⁰	1 slice ¹⁰	1 slice ¹⁰
	Whole grain-rich or enriched bread product, such as biscuit, roll, muffin	1/2 serving	1/2 serving	1 serving	1 serving
	Whole grain-rich, enriched or fortified cooked breakfast cereal ⁸ , cereal grain, and/or pasta	1/4 cup	1/4 cup	1/2 cup	1/2 cup
	Whole grain-rich, enriched or fortified ready-to-eat breakfast cereal (dry, cold) ^{8,9}				
	• Flakes or rounds	1/2 cup	1/2 cup	1 cup	1 cup
	• Puffed cereal	3/4 cup	3/4 cup	1 1/4 cups	1 1/4 cups
	• Granola	1/8 cup	1/8 cup	1/4 cup	1/4 cup

- ¹ Larger portion sizes than specified may need to be served to children 13 through 18 years old to meet their nutritional needs.
- ² Must be unflavored whole milk for children age one. Must be unflavored low-fat (1 percent) or unflavored fat-free (skim) milk for children two through five years old. Must be unflavored low-fat (1 percent), unflavored fat-free (skim) milk or flavored fat-free (skim) or low-fat (1%) milk for children six years old and older. *Texas Health and Human Services Commission (HHSC) Child Care Licensing (formerly TDFPS CCL) does not allow flavored (sweetened) milk, except for special occasions.*
- ³ USDA requires water be made available at all meals and upon request however water does not take the place of milk. *HHSC CCL requires that water is always available to each child and is served at every snack, mealtime, and after active play in a safe and sanitary manner.*
- ⁴ Pasteurized full-strength juice may be used to meet the vegetable or fruit requirement at one meal, including snack, per day.
- ⁵ At least one serving per day, across all eating occasions, must be whole grain-rich. Grain-based desserts do not count toward meeting the grains requirement.
- ⁶ Meat and meat alternates may be used to meet the **entire** grains requirement a maximum of three times a week. One ounce of meat and meat alternates is equal to one ounce equivalent of grains.
- ⁷ FNS has extended until October 1, 2021 the deadline for implementing ounce equivalents to determine the quantity of creditable grains. The extension allows more time for FNS to develop additional technical assistance materials and for TDA and CEs to provide training and technical assistance to support meal planners. In the interim, CEs are encouraged to transition to using ounce equivalents, rather than household measures such as cups or “servings,” to determine the quantity of creditable gains. Assistance for this transition is available via applicable FNS-sponsored training webinars; tools such as the *Recipe Analysis Workbook* and *Exhibit A Grains Tool* sections of the [Food Buying Guide for Child Nutrition Programs](#); and TDA’s meal pattern training modules and Q&As located on the [CACFP Meal Patterns page on SquareMeals.org](#). **NOTE:** CN Labeled items that currently indicate the number of ounce equivalence of grains in a product contribute to the CACFP as declared on the label as an ounce equivalent serving size (16 grams of grains) is slightly heavier than the current serving size for CACFP (14.75 grams of grains).
- ⁸ Breakfast cereals must contain no more than 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).
- ⁹ Beginning October 1, 2019, the minimum serving size specified in this section for ready-to-eat breakfast cereals must be served. Until October 1, 2019, the minimum serving size for any type of ready-to-eat breakfast cereals is 1/4 cup for children ages 1-2; 1/3 cup for children ages 3-5; 3/4 cup for children ages 6-12 and ages 13-18.
- ¹⁰ Slice is not a measurable unit. A measurable amount of each food item prepared must be entered on the Daily Meal Production Record. Examples of how to document a measurable amount for bread slices can be found on the instructions to the *Daily Meal Count, Attendance, and Meal Production Record* (H1539) as well as in the Food Buying Guide.

CHILD CARE MEAL PATTERN FOR CHILDREN ONE YEAR OLD OR OLDER (cont.)

LUNCH or SUPPER FOOD COMPONENTS Must Serve All Five Components for a Reimbursable Meal		Age 1 - 2	Age 3 - 5	Age 6 - 12	Age 13-18 ¹ (at-risk afterschool programs and emergency shelters)
Milk ^{2,3}	Milk, fluid	4 fl oz	6 fl oz	8 fl oz	8 fl oz
Vegetables ⁴	Vegetable(s)	1/8 cup	1/4 cup	1/2 cup	1/2 cup
Fruits ^{4,5}	Fruit(s)	1/8 cup	1/4 cup	1/4 cup	1/4 cup
Grains (oz eq) ^{6,7}	Whole grain-rich or enriched bread	1/2 slice ¹²	1/2 slice ¹²	1 slice ¹²	1 slice ¹²
	Whole grain-rich or enriched bread product, such as biscuit, roll, muffin	1/2 serving	1/2 serving	1 serving	1 serving
	Whole grain-rich, enriched or fortified cooked breakfast cereal ⁸ , cereal grain, and/or pasta	1/4 cup	1/4 cup	1/2 cup	1/2 cup
Meat/Meat Alternates Edible portion as served	Lean meat, poultry, or fish	1 ounce	1 1/2 ounces	2 ounces	2 ounces
	Tofu, soy products or alternate protein products ^{9,10,11}	1 ounce	1 1/2 ounces	2 ounces	2 ounces
	Cheese	1 ounce	1 1/2 ounces	2 ounces	2 ounces
	Large egg	1/2	3/4	1	1
	Cooked dry beans or peas	1/4 cup	3/8 cup	1/2 cup	1/2 cup
	Peanut butter or soy nut butter, or other nut or seed butters	2 Tbsp	3 Tbsp	4 Tbsp	4 Tbsp
	Yogurt - plain or flavored unsweetened or sweetened ⁸	4 ounces or 1/2 cup	6 ounces or 3/4 cup	8 ounces or 1 cup	8 ounces or 1 cup
	The following may be used to meet <i>no more than</i> 50 percent of the requirement: Peanuts, soy nuts, tree nuts or seeds ¹³	1/2 ounce = 50% ⁸	3/4 ounce = 50% ⁸	1 ounce = 50% ⁸	1 ounce = 50% ⁸

- ¹ Larger portion sizes than specified may need to be served to children 13 through 18 years old to meet their nutritional needs.
- ² Must be unflavored whole milk for children age one. Must be unflavored low-fat (1 percent) or unflavored fat-free (skim) milk for children two through five years old. Must be unflavored low-fat (1 percent), unflavored fat-free (skim) milk or flavored fat-free (skim) or low-fat (1%) milk for children six years old and older. *Texas Health and Human Services Commission (HHSC) Child Care Licensing (formerly TDFPS CCL) does not allow flavored (sweetened) milk, except for special occasions.*
- ³ USDA requires water be made available at all meals and upon request however water does not take the place of milk. *HHSC CCL requires that water is always available to each child and is served at every snack, mealtime, and after active play in a safe and sanitary manner.*
- ⁴ Pasteurized full-strength juice may be used to meet the vegetable or fruit requirement at one meal, including snack, per day.
- ⁵ A vegetable may be used to meet the entire fruit requirement. When two vegetables are served at lunch or supper, two different kinds of vegetables must be served.
- ⁶ At least one serving per day, across all eating occasions, must be whole grain-rich. Grain-based desserts do not count toward meeting the grains requirement.
- ⁷ FNS has extended until October 1, 2021 the deadline for implementing ounce equivalents to determine the quantity of creditable grains. The extension allows more time for FNS to develop additional technical assistance materials and for TDA and CEs to provide training and technical assistance to support meal planners. In the interim, CEs are encouraged to transition to using ounce equivalents, rather than household measures such as cups or “servings,” to determine the quantity of creditable gains. Assistance for this transition is available via applicable FNS-sponsored training webinars; tools such as the *Recipe Analysis Workbook* and *Exhibit A Grains Tool* sections of the [Food Buying Guide for Child Nutrition Programs](#); and TDA’s meal pattern training modules and Q&As located on the [CACFP Meal Patterns page on SquareMeals.org](#). NOTE: CN Labeled items that currently indicate the number of ounce equivalence of grains in a product contribute to the CACFP as declared on the label as an ounce equivalent serving size (16 grams of grains) is slightly heavier than the current serving size for CACFP (14.75 grams of grains).
- ⁸ Breakfast cereals must contain no more than 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).
- ⁹ Alternate protein products must meet the requirements in appendix A of 7 CFR Part 226.
- ¹⁰ Tofu and soy yogurt products must meet the specifications in Item 4112.4.
- ¹¹ Yogurt must contain no more than 23 grams of total sugars per 6 ounces.
- ¹² Slice is not a measurable unit. A measurable amount of each food item prepared must be entered on the Daily Meal Production Record. Examples of how to document a measurable amount for bread slices can be found on the instructions to the *Daily Meal Count, Attendance, and Meal Production Record* (H1539) as well as in the Food Buying Guide.
- ¹³ As listed in program guidance, or an equivalent quantity of any combination of the above meat/meat alternates (1 ounce of nuts/seeds = 1 ounce of cooked lean meat, poultry or fish)

CHILD CARE MEAL PATTERN FOR CHILDREN ONE YEAR OLD OR OLDER (cont.)

SNACKS Must Serve Two of the Five Components for a Reimbursable Meal		Age 1 - 2	Age 3 - 5	Age 6 - 12	Age 13-18 ¹ (at-risk afterschool programs and emergency shelters)
Milk ^{2,3}	Milk, fluid	4 fl oz	4 fl oz	8 fl oz	8 fl oz
Vegetables ⁴	Vegetable(s)	1/2 cup	1/2 cup	3/4 cup	3/4 cup
Fruits ⁴	Fruit(s)	1/2 cup	1/2 cup	3/4 cup	3/4 cup
Grains (oz eq) ^{5,6}	Whole grain-rich or enriched bread	1/2 slice ¹²	1/2 slice ¹²	1 slice ¹²	1 slice ¹²
	Whole grain-rich or enriched bread product, such as biscuit, roll, muffin	1/2 serving	1/2 serving	1 serving	1 serving
	Whole grain-rich, enriched or fortified cooked breakfast cereal ⁷ , cereal grain, and/or pasta	1/4 cup	1/4 cup	1/2 cup	1/2 cup
	Whole grain-rich, enriched or fortified ready-to-eat breakfast cereal (dry, cold) ^{7,8}				
	• Flakes or rounds	1/2 cup	1/2 cup	1 cup	1 cup
	• Puffed cereal	3/4 cup	3/4 cup	1 1/4 cup	1 1/4 cup
Meat/Meat Alternates Edible portion as served	• Granola	1/8 cup	1/8 cup	1/4 cup	1/4 cup
	Lean meat, poultry, or fish	1/2 ounce	1/2 ounce	1 ounce	1 ounce
	Tofu, soy products or alternate protein products ^{9,10,11}	1/2 ounce	1/2 ounce	1 ounce	1 ounce
	Cheese	1/2 ounce	1/2 ounce	1 ounce	1 ounce
	Large egg	1/2	1/2	1/2	1/2
	Cooked dry beans or peas	1/8 cup	1/8 cup	1/4 cup	1/4 cup
	Peanut butter or soy nut butter, or other nut or seed butters	1 Tbsp	1 Tbsp	2 Tbsp	2 Tbsp
	Yogurt - plain or flavored unsweetened or sweetened ⁸	2 ounces or 1/4 cup	2 ounces or 1/4 cup	4 ounces or 1/2 cup	4 ounces or 1/2 cup
	Peanuts, soy nuts, tree nuts or seeds ¹³	1/2 ounce	1/2 ounce	1 ounce	1 ounce

- ¹ Larger portion sizes than specified may need to be served to children 13 through 18 years old to meet their nutritional needs.
- ² Must be unflavored whole milk for children age one. Must be unflavored low-fat (1 percent) or unflavored fat-free (skim) milk for children two through five years old. Must be unflavored low-fat (1 percent), unflavored fat-free (skim) milk or flavored fat-free (skim) or low-fat (1%) milk for children six years old and older. *Texas Health and Human Services Commission (HHSC) Child Care Licensing (formerly TDFPS CCL) does not allow flavored (sweetened) milk, except for special occasions.*
- ³ USDA requires water be made available at all meals and upon request however water does not take the place of milk. *HHSC CCL requires that water is always available to each child and is served at every snack, mealtime, and after active play in a safe and sanitary manner.*
- ⁴ Pasteurized full-strength juice may be used to meet the vegetable or fruit requirement at one meal, including snack, per day. Juice cannot be the second component of a snack if milk is the other component.
- ⁵ At least one serving per day, across all eating occasions, must be whole grain-rich. Grain-based desserts do not count toward meeting the grains requirement.
- ⁶ FNS has extended until October 1, 2021 the deadline for implementing ounce equivalents to determine the quantity of creditable grains. The extension allows more time for FNS to develop additional technical assistance materials and for TDA and CEs to provide training and technical assistance to support meal planners. In the interim, CEs are encouraged to transition to using ounce equivalents, rather than household measures such as cups or “servings,” to determine the quantity of creditable gains. Assistance for this transition is available via applicable FNS-sponsored training webinars; tools such as the *Recipe Analysis Workbook* and *Exhibit A Grains Tool* sections of the [Food Buying Guide for Child Nutrition Programs](#); and TDA’s meal pattern training modules and Q&As located on the [CACFP Meal Patterns page on SquareMeals.org](#). NOTE: CN Labeled items that currently indicate the number of ounce equivalence of grains in a product contribute to the CACFP as declared on the label as an ounce equivalent serving size (16 grams of grains) is slightly heavier than the current serving size for CACFP (14.75 grams of grains).
- ⁷ Breakfast cereals must contain no more than 6 grams of sugar per dry ounce (no more than 21.2 grams sucrose and other sugars per 100 grams of dry cereal).
- ⁸ Beginning October 1, 2019, the minimum serving size specified in this section for ready-to-eat breakfast cereals must be served. Until October 1, 2019, the minimum serving size for any type of ready-to-eat breakfast cereals is 1/4 cup for children ages 1-2; 1/3 cup for children ages 3-5; 3/4 cup for children ages 6-12 and ages 13-18.
- ⁹ Alternate protein products must meet the requirements in appendix A of 7 CFR Part 226.
- ¹⁰ Tofu and soy yogurt products must meet the specifications in Item 4112.4.
- ¹¹ Yogurt must contain no more than 23 grams of total sugars per 6 ounces.
- ¹² Slice is not a measurable unit. A measurable amount of each food item prepared must be entered on the Daily Meal Production Record. Examples of how to document a measurable amount for bread slices can be found on the instructions to the *Daily Meal Count, Attendance, and Meal Production Record* (H1539) as well as in the Food Buying Guide.

4112.3 Fluid Milk

Fluid milk must be served as a beverage, or on cereal, or a combination of both. Fluid milk must be pasteurized and must meet State and local standards.

Children 1 year old

Children one year of age must be served unflavored whole milk.

Parents that are able and wish to continue feeding their child breastmilk after 12 months of age may request that substitution and provide the breastmilk, or a mother may directly breastfeed her child onsite without providing a medical statement (breastmilk is a substitute for cow's milk for children of any age in the meal pattern). If the amount of expressed breastmilk provided does not meet the minimum serving size of fluid milk in the meal pattern the provider must serve enough fluid milk alongside the breastmilk to meet the minimum milk requirement.

Additionally, if a mother comes on-site to breastfeed her child, the meal is reimbursable and is documented in the same manner as the infant meal documentation. If the mother breastfeeds her child on-site prior to or after the meal service it is counted towards the meals that was closest to when the mother breastfed.

To facilitate the weaning from formula to cow's milk, for a period of one month, when children are 12 to 13 months of age, meals that contain infant formula may be claimed for reimbursement. While weaning, infants should be presented with both types of foods at the same meal service to encourage acceptance of new food. Meals for children 13 months and older that contain infant formula may not be claimed without a statement signed by a licensed physician or a State recognized medical authority.

Children 2 through 5 years old

Children two through five years old must be served either unflavored low-fat (1%) or unflavored fat-free (skim) milk. To make the transition easier providers have a one month transition period, therefore; meals served to children 24 months to 25 months that contain whole milk or reduced-fat milk (2%) may be claimed for reimbursement.

Children 6 years old and older

Children six years old and older must be served unflavored low-fat (1%), unflavored fat-free (skim) or flavored fat-free (skim) or low-fat (1%) milk (applies to pre-packaged flavored milk or milk flavored using syrup, flavored milk powder or straws).

Reimbursable types of milk for children 2 years old and older include:

- Fat-free or low-fat milk
- Fat-free or low-fat lactose reduced milk
- Fat-free or low-fat lactose free milk
- Fat-free or low-fat butter milk
- Fat-free or low-fat acidified milk

Whole milk and reduced-fat (2%) milk may not be served to children ages 2 years and older. Meals served to children 1 through 5 years old that contain flavored milk (including milk flavored with chocolate, strawberry, or other syrups) cannot be claimed for reimbursement.

Smoothies

Milk (fat-free or low-fat) in smoothies can be credited as fluid milk with the following exceptions:

- A yogurt smoothie does not serve as a milk substitute in any meal type.
- Milk in commercially prepared prepackaged smoothies **is not** creditable.

NOTES:

- Commercially prepared smoothies must have a CN label or product formulation statement.
- Smoothies containing dietary and herbal supplements, such as whey protein powder and Ginkgo biloba, are not creditable. However, smoothies made with juice that has been fortified with vitamins and minerals, such as calcium and Vitamin D are creditable if all other requirements are met.
- Concentrated fruit puree and concentrated fruit juice are only creditable when reconstituted to full (original) strength.

Refer to Item 4113.3, *Children/Infants with Medical or Special Dietary Needs* for guidance related to fluid milk substitution requirements.

If a provider experiences temporary unavailability of milk, or conditions exist that cause a continuing unavailability of milk, the Provider should notify the CE and the CE should consult its Community Operations Field office for approval to serve meals without milk (temporary unavailability only) or with equivalent amounts of canned, whole dry or fat-free dry milk (continuing unavailability).

4112.4 Vegetables

Vegetables may be fresh, frozen, or canned vegetables, dry beans and peas (legumes), pasta products made of vegetable flour, or vegetable juice.

All vegetables are credited based on their volume as served, except that 1 cup of *raw* leafy greens (e.g., lettuce, raw spinach, etc.) counts as ½ cup of vegetables.

Cooked leafy greens are credited as the volume served, e.g. ½ cup cooked collard greens credits as ½ cup vegetables.

Pasta products made of vegetable flour credit as follows:

Made of 100 Percent Vegetable Flour(s)

½ cup of pasta made of 100 percent vegetable flour(s) credits as ½ cup of vegetables.

Made of Vegetable Flour(s) and Other Non-Vegetable Ingredients

Pasta products made of vegetable flour and other non-vegetable ingredients may credit as a vegetable with a product formulation statement detailing the actual volume of vegetable flour per serving.

This crediting does not apply to grain-based pasta products that contain small amounts of vegetable powder for color (e.g., spinach, sun-dried tomato).

Pasta Products Made of 100 Percent Legume Flour(s)

½ cup of cooked pasta made of 100 percent legume flour(s) may credit as 2 ounce equivalents of meat alternate. To credit as a meat alternate, pasta made of legume flour(s) must be offered with additional meat/meat alternate, such as tofu, cheese, or meat. At the discretion of the Provider legumes may credit as a vegetable or a meat alternate, but not as both in the same meal.

CEs and providers may credit legume flour pasta using the Bean Flour yield information on page C-1 of Appendix C of the FBG, or by obtaining a product formulation statement.

Food items that are mixtures of vegetables and fruits, such as a carrot-raisin salad, may credit toward both the vegetable component and the fruit component if they contain at least 1/8 cup vegetable and 1/8 cup fruit per serving that are easily identifiable. Similarly, vegetable mixtures may count toward the vegetable component and the fruit component at lunch and supper if they contain at least 1/8 cup of two different kinds of vegetables.

Pureed vegetables may contribute toward the meal pattern requirement as long as the dish also provides an adequate amount (1/8 cup) of recognizable, creditable vegetables. If the dish does not contain at least 1/8 cup of a recognizable component then the blended foods do not contribute to the meal requirements.

Hominy may credit as a vegetable component as follows: ¼ cup of canned, drained hominy credits as ¼ cup vegetable.

Pasteurized full-strength vegetable juice may be used to fulfill the entire vegetable requirement at only one meal, including snack, per day. Regardless of the participants at each meal service, juice may only be served at one meal or snack per day. If a provider serves a meal in shifts, for example lunch, juice may be served at both shifts as lunch is one meal. However, if the provider serves a.m. snack and p.m. snack juice may be served at only one snack time as a.m. snack and p.m. snack are two distinct snacks.

A juice blend that contains both vegetable and fruit juices may only contribute to one component (either vegetable or fruit) in a meal based on which component is the most prominent ingredient. For example, a vegetable/fruit juice blend that contains 60 percent vegetable juice and 40 percent fruit juice could only be credited toward the vegetable component.

NOTE: juice may be served as an extra food item outside of the meal pattern, for example if juice is served at breakfast, juice may be served as an extra at snack (e.g. crackers, cheese, and juice (extra)). Discretion should be used when serving extra food items as they can add extra calories and extra cost. The reimbursement rate for meals with extra food items (including juice) is the same as regular meals.

Cooked or dry beans or dry peas may be used as either a vegetable or a meat alternate, but not as both in the same meal except when two servings of a different beans or peas are served. For example, if legumes are used as part of a salad, and as part of a chili or bean soup, they can count as a vegetable component in the salad and meat alternate component in the chili or soup.

Smoothies

Vegetables in smoothies can be credited as a juice under the following guidelines:

- Vegetables credit in the following forms: fresh, frozen, or canned, 100% vegetable juice and 100% vegetable and fruit juice blends.
- Pureed vegetables and fruits (fresh, frozen, or canned) credit as juice following the same requirements regarding juice.
- Vegetables from the dry beans and peas subgroup may credit as juice when served in a smoothie.

Smoothies credit as a juice and are subject to the limit of one meal, including snack per day. Providers may not serve a pasteurized full strength juice at one meal and a smoothie at another in the same day.

NOTES:

- Commercially prepared smoothies must have a CN label or product formulation statement.
- Smoothies containing dietary and herbal supplements, such as whey protein powder and Ginkgo biloba, are not creditable. However, smoothies made with juice that has been fortified with vitamins and minerals, such as calcium and Vitamin D are creditable if all other requirements are met.
- Concentrated vegetable puree and concentrated vegetable juice are only creditable when reconstituted to full (original) strength.

4112.5 Fruits

Fruit may be fresh, frozen, canned, dried fruits, or fruit juice. All fruits are based on their volume as served except that 1/4 cup dried fruit counts as 1/2 cup fruit. **Exception:** dried coconut, coconut flour and coconut oil are not creditable in any meal type.

Fresh or frozen coconut can be used as a fruit based on volume served. At least 1/8 cup of fresh or frozen coconut must be served to credit toward the fruit component.

Food items that are mixtures of vegetables and fruits, such as a carrot-raisin salad, may credit toward both the vegetable component and the fruit component if they contain at least 1/8 cup vegetable and 1/8 cup fruit per serving that are easily identifiable. Similarly, vegetable mixtures may count toward the vegetable component and the fruit component at lunch and supper if they contain at least 1/8 cup of two different kinds of vegetables.

Pureed fruits may contribute toward the meal pattern requirement as long as the dish also provides an adequate amount (1/8 cup) of recognizable, creditable fruit. If the dish does not contain at least 1/8 cup of a recognizable component then the blended foods do not contribute to the meal requirements.

Pasteurized full-strength fruit juice may be used to fulfill the entire fruit requirement at only one meal, including snack, per day. Regardless of the participants at each meal service, juice may only be served at one meal or snack per day. If a provider serves a meal in shifts, for example lunch, juice may be served at both shifts as lunch is one meal. However, if the provider serves a.m. snack and p.m. snack juice may be served at only one snack time as a.m. snack and p.m. snack are two distinct snacks.

A juice blend that contains both vegetable and fruit juices may only contribute to one component (either vegetable or fruit) in a meal based on which component is the most prominent ingredient.

For example, a vegetable/fruit juice blend that contains 60 percent vegetable juice and 40 percent fruit juice could only be credited toward the vegetable component.

NOTE: juice may be served as an extra food item outside of the meal pattern, for example if juice is served at breakfast, juice may be served as an extra at snack (e.g. crackers, cheese, and juice (extra)). Discretion should be used when serving extra food items as they can add extra calories and extra cost. The reimbursement rate for meals with extra food items (including juice) is the same as regular meals.

Smoothies

Fruit in smoothies can be credited as a juice under the following guidelines:

- Vegetables credit in the following forms: fresh, frozen, or canned, 100% vegetable or fruit juice and 100% vegetable and fruit juice blends.
- Pureed vegetables and fruits (fresh, frozen, or canned) credit as juice following the same requirements regarding juice.
- Vegetables from the dry beans and peas subgroup may credit as juice when served in a smoothie.

Smoothies credit as a juice and are subject to the limit of one meal, including snack per day. Providers may not serve a pasteurized full strength juice at one meal and a smoothie at another in the same day.

NOTES:

- Commercially prepared smoothies must have a CN label or product formulation statement.
- Smoothies containing dietary and herbal supplements, such as whey protein powder and Ginkgo biloba, are not creditable. However, smoothies made with juice that has been fortified with vitamins and minerals, such as calcium and Vitamin D are creditable if all other requirements are met.
- Concentrated fruit puree and concentrated fruit juice are only creditable when reconstituted to full (original) strength.

A vegetable may be used to meet the entire fruit requirement at lunch and supper. The substituted vegetable must be at least the same serving size as the fruit component it replaced. When two vegetables are served at lunch or supper, two different kinds of vegetables must be served. Two different kinds of vegetables does not mean different textures or consistencies, they must be different, for example broccoli and carrots.

4112.6 Grains

Grain is a required component at breakfast, lunch, and supper meals, and is an optional component at snack. All grain products served in the CACFP must be made with enriched or whole grain meal or flour, or bran or germ in order to be creditable.

At least one serving per day must be whole grain-rich. Providers that only serve one meal per day (breakfast, snack, lunch, or supper) must always serve a whole grain-rich grain with the breakfast, lunch, or supper, and must serve a whole grain-rich grain with the snack if a grain is one of the chosen components.

NOTE: If a provider is unable to serve the documented meal with the whole grain-rich grain due to extenuating circumstances, such as being forced to close before serving that meal due to severe weather, meals would not be disallowed on the basis that the whole grain-rich requirement was not met so long as the provider has documentation on file of the circumstances.

Providers will document which meal each day contains the whole grain-rich grains on the meal production records. See item 4114.1, *Meal Production Record*. **NOTE:** Providers with different groups of children at each meal are encouraged to vary the meal in which a whole grain-rich item is served. This will help ensure that all children are served a variety of whole grains and benefit from the important nutrients they provide.

Enriched Grains and Fortified Breakfast Cereals

Enriched grains are refined grains that have been processed to remove the nutrient-rich bran and germ, and then have thiamin, riboflavin, niacin, folic acid, and iron added after processing. Similarly, a food that is fortified has certain vitamins and minerals added to increase the nutritional quality.

Foods made from refined grains that meet at least one of the following are considered creditable:

1. The food is labeled as “enriched.” For example, long grain rice that is enriched will have the product name “enriched long grain rice.”

2. An enriched grain is listed as the first ingredient on the food's ingredient list or second after water. The ingredient list will usually say "enriched flour" or "enriched wheat flour," or there is a sub-listing of nutrients used to enrich the flour, for example, "yellow corn flour {iron, folic acid, riboflavin, niacin, and thiamine}."
3. For breakfast cereals, the product is labeled as "fortified" or the ingredient list names the vitamins and minerals that have been added to the product. If a breakfast cereal is fortified, it does not need to be enriched. For example, the ingredient list of a fortified breakfast cereal may read, "Ingredients: Wheat flour, sugar, contains 2% or less of salt, baking soda, caramel color, BHT for freshness. Vitamins and Minerals: Vitamin C (sodium ascorbate, ascorbic acid), niacin, vitamin B6 (pyridoxine hydrochloride), reduced iron, zinc oxide, folic acid, vitamin B2 (riboflavin), vitamin B1 (thiamin hydrochloride), vitamin A palmitate, vitamin D, vitamin B12."

NOTE: The ingredient list of a non-fortified cereal would not name any added vitamins and minerals. For example, the ingredient list of a non-fortified breakfast cereal may read, "Ingredients: rice flour, corn flour, evaporated cane juice, pomegranate juice concentrate, sea salt." This particular cereal would not be considered a creditable grain because it is not made from whole or enriched grains and is not fortified.

Whole Grain-Rich

A whole grain is a grain that has not had its nutrient-rich germ and bran removed, and therefore does not need enrichment. Foods that meet the whole grain-rich criteria are foods that contain at least 50 percent whole grains and the remaining grains in the food are enriched, or are 100 percent whole grain.

Any one of the following six options may be used to determine if a grain product meets the whole grain-rich criteria. Use of these methods is intended to be flexible so that individual providers who may use different methods to purchase food (such as wholesale or retail), can easily identify creditable whole grain-rich foods.

CEs and Providers must only ensure that a food meets at least one of the following to be considered whole grain-rich:

1. The product is found on any State agency's Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)-approved whole grain food list.

Any grain product found on a State agency’s WIC-approved whole grain food list meets CACFP whole grain-rich criteria. CEs and Providers can obtain a copy of the Texas Health and Human Services (HHSC) WIC Approved Foods List by contacting HHSC at (512) 776-7111 or (888) 963-7111, or online at:

https://www.dshs.texas.gov/wichd/approved_foods/new_foods.shtm

CEs and Providers may also obtain other State agency’s WIC-approved whole grain food list by contacting the WIC State agency. For a list of WIC State agency contacts, go to www.fns.usda.gov/wic/wic-contacts.

2. The product is labeled as “whole wheat” and has a Standard of Identity issued by the U.S. Food and Drug Administration (FDA).

An FDA Standard of Identity is a set of rules for what a certain product (like whole wheat bread) must contain or may contain to legally be labeled with that product name. FDA provides Standards of Identity for certain whole wheat bread products (21 CFR §136.180) and certain whole wheat pasta products (21 CFR §139.138).

Only breads with these exact product names conform to an FDA Standard of Identity and can be considered whole grain-rich using this method:

Whole Wheat	Entire Wheat	Graham
Bread	Bread	Bread
Rolls	Rolls	Rolls
Buns	Buns	Buns

Only pastas with these exact product names conform to an FDA Standard of Identity and can be considered whole grain-rich using this method:

Whole Wheat			
Macaroni product	Macaroni	Spaghetti	Vermicelli

Other grain products labeled as “whole wheat” that do not have an FDA Standard of Identity, such as crackers, tortillas, bagels, and biscuits, must be evaluated for whole grain-rich creditability for CACFP using one of the other methods.

IMPORTANT: Manufacturers may label their products with terms that are similar to, but slightly different from, FDA Standard of Identity terms defined above. Some frequently encountered terms include “whole grain,” “made with whole grains,” “made with whole wheat,” or “contains whole grains.” These terms do not indicate an FDA Standard of Identity for whole wheat products. Foods labeled with these terms must be evaluated for whole grain-rich creditability for CACFP using one of the other methods.

3. The product includes one of the following FDA approved whole-grain health claims on its packaging, exactly as written:

“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 some 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.”

FNS is allowing the FDA whole grain health claims to be sufficient documentation to demonstrate compliance with the whole grain-rich criteria in the CACFP.

4. The food meets the whole grain-rich criteria under the NSLP.

Use of the NSLP whole grain-rich criteria may ease menu planning and purchasing for school CEs that operate CACFP at-risk afterschool programs or CACFP child care programs, as they can use the same whole grain-rich criteria for both programs. The NSLP whole grain-rich criteria apply for all grain products with the exception of grain-based desserts, which are not creditable under CACFP.

5. The food meets FNS’ Rule of Three, a three-step process for identifying whole grain-rich products in the CACFP.

FNS developed the Rule of Three in recognition that CEs and Providers may not have access to manufacturers’ product formulation statements.

To meet the Rule of Three as a whole grain-rich product, the first ingredient (or second after water) must be whole grain, and the next two grain ingredients (if any) must be whole grains, enriched grains, bran, or germ. Any grain derivatives (by-products of grains) may be disregarded. Any non-creditable grain ingredients (e.g., flours that are not enriched or whole) that are labeled as 2 percent or less of product weight are considered insignificant and may also be disregarded (see below for a list of these ingredients).

When applying the Rule of Three to the grain portion of mixed dishes, such as pizza crusts and tortillas for burritos, the first grain ingredient must be whole grain and the next two grain ingredients (if any) must be whole grains, enriched grains, bran, or germ.

When applying the Rule of Three for ready-to-eat breakfast cereals, if the first grain ingredient is a whole grain and the cereal is fortified, the product meets the whole grain-rich criteria. In this situation, the second and third grain ingredients, if any, do not need to be considered.

CEs and providers may wish to refer to the below list of ingredients while reviewing grain product labels when using the Rule of Three. **NOTE:** This list is not meant to be exhaustive, and there may be other items that qualify that are not listed below.

Whole Grains (must be the first grain ingredient; may be the second or third grain ingredient)				
Wheat berries	Wheat groats	Oat groats	Whole grain corn	Brown rice
Wild rice	Buckwheat groats	Rye groats	Whole einkorn berries	Spelt berries
Millet	Triticale	Quinoa	Teff	Cracked wheat
Buckwheat	Amaranth	Sorghum	Bulgur	Whole wheat flour
Whole durum flour	Graham flour	Whole grain corn flour	Whole rye flour	Whole grain oat flour
Whole grain einkorn flour	Whole grain spelt flour	Buckwheat flour	Millet flour	Teff flour
Triticale flour	Amaranth flour	Sorghum flour	Whole grain wheat flakes	Old fashioned oats

Whole Grains (must be the first grain ingredient; may be the second or third grain ingredient), continued				
Steel cut oats	Quick cooking oats	Instant oatmeal	Sprouted whole wheat	Sprouted brown rice
Sprouted whole rye	Sprouted buckwheat	Sprouted einkorn	Sprouted spelt	Whole corn
Corn flour	Corn masa	Cornmeal	Hominy*	Popcorn

*1/2 cup cooked or 1 ounce (28 grams) dry hominy grits credits as 1 oz equivalent grains

Brans and Germs (may be the second or third grain ingredient)					
Wheat bran	Oat bran	Corn bran	Rice bran	Rye bran	Wheat germ

Enriched Grains (may be the second or third grain ingredient)			
Enriched wheat flour	Enriched white flour	Enriched durum flour	Enriched rye flour
Enriched rice or Enriched rice flour	Enriched corn flour	Enriched bromated flour	Enriched durum wheat flour

Disregarded ingredients (may be ignored, as these ingredients are not included in the Rule of Three)	
Any ingredients that are less than 2 percent of product weight (any ingredients listed on the ingredient list after the words “contains 2% or less”).	Any grain derivatives which are generally presented in only small amounts, such as: - wheat gluten - wheat dextrin - corn dextrin - tapioca starch - wheat starch - corn starch - rice starch - modified food starch

Non-creditable Grains or Flours (The following ingredients are not whole or enriched and cannot be one of the first 3 grain ingredients)					
Bromated flour	Durum flour	Malted barley flour		Semolina	Potato flour
Wheat flour	Oat fiber	Barley malt		Farina	Any bean flour
White flour	Corn fiber	Corn	Degerminated corn meal	Rice flour	Any nut flour

Examples of *Rule of Three*:

Example 1: An English muffin's ingredient list reads: "whole wheat flour, water, enriched wheat flour, wheat starch, yeast, sugar, and salt." This product is creditable as a whole grain-rich product in the CACFP using the Rule of Three because the first ingredient (whole wheat flour) is a whole grain, and the second grain ingredient (enriched wheat flour) is an enriched grain. The wheat starch is a grain derivative and therefore does not count as a grain ingredient in CACFP. Therefore, this product meets the Rule of Three based on the only two grain ingredients.

Example 2: A corn chip's ingredient list reads: "whole corn, vegetable oil, salt, cheddar cheese, maltodextrin, wheat flour, Romano cheese, whey protein concentrate." This product is not creditable as a whole grain-rich product for CACFP using the Rule of Three, because although the first ingredient is a whole grain (whole corn), the next grain ingredient is unenriched wheat flour. However, this item is creditable as a grain that is not being served as a whole grain-rich item because the first grain is a whole grain.

Example 3: A cheese pizza's ingredient list reads: "mozzarella cheese, parmesan cheese, white whole wheat flour, brown rice flour, enriched flour, non-fat milk, water, tomato paste, yeast." This product meets the whole grain-rich criteria using the Rule of Three because the first and second grain ingredients are whole grains and the third grain ingredient is enriched.

6. Proper documentation from a manufacturer or a standardized recipe demonstrates that whole grains are the primary grain ingredient by weight.

Documentation from a manufacturer or a standardized recipe is particularly helpful when determining whole grain-rich creditability for grain products that do not have a whole grain as the first ingredient and for mixed products. When a grain product (such as bread) has a first ingredient that is not whole grain, the primary ingredient by weight may still be whole grain if there are multiple whole-grain ingredients and the combined weight of those whole grains is more than the weight of the other grain ingredients. When the grain portion of a mixed product (like a beef enchilada) is not entirely whole grain, it may be whole grain-rich depending upon the proportion of whole grains to other grain ingredients.

Examples of Proper Documentation:

Example 1: Documentation from a manufacturer of a purchased bagel states the product contains enriched wheat flour (40 percent of grain weight), whole-wheat flour (30 percent of grain weight), and whole oats (30 percent of grain weight). The combined weight of the two whole-grain ingredients (whole wheat and whole oats at 60 percent) is greater than the enriched wheat flour (at 40 percent), even though the enriched wheat flour is listed first on the ingredient list.

Example 2: A standardized recipe for homemade bread calls for 2 cups of whole-wheat flour and 2 cups of enriched flour. This recipe meets the whole grain-rich requirement, because it contains 50 percent whole grains and the remaining grains in the food are enriched.

Example 3: The retail package for a frozen breaded chicken patty is labeled “contains whole grains” and lists grain ingredients as “enriched wheat flour, whole wheat flour, and whole grain corn flour.” The Provider understands that “contains whole grains” does not indicate an FDA Standard of Identity and the product does not meet the Rule of Three for determining whole grain-rich creditability because the first grain ingredient is not a whole grain. The Provider contacts the manufacturer and receives documentation that the grain portion of the product contains 50 percent enriched wheat flour, 25 percent whole wheat flour, and 25 percent whole grain corn flour. This product is therefore creditable as whole grain-rich using manufacturer documentation showing that the grain portion contains 50 percent whole grain and the remaining grains are enriched.

IMPORTANT: While the Whole Grain Stamps provide useful information on the amount of whole grains a product contains, they are not sufficient documentation to determine if a food is whole grain-rich. This is because products that display a Whole Grain Stamp may also contain high amounts of non-creditable grains, such as non-enriched, refined flour.

Grain-based Desserts

Grain-based desserts have been identified as sources of added sugars and saturated fats and therefore cannot count towards the grain requirement in any meal or snack.

The following foods, included in Exhibit A: *Grain Requirements for Child Nutrition Programs* in the Food Buying Guide (FBG) are considered grain-based desserts:

Cookies	Sweet pie crusts	Doughnuts
Breakfast bars	Sweet rolls	Toaster pastries
Sweet scones	Sweet Bread puddings	Sweet Rice puddings
Granola bars	Brownies (including black bean brownies*)	Homemade granola bars
Cereal bars	Cake	Coffee Cake

*The black beans in a black bean brownie also do not credit toward the meat/meat alternate or vegetable component.

NOTE: Foods not listed in the FBG may be considered grain-based desserts and would not count toward a reimbursable meal.

It is important to note that cookies do not have a standard of identity, so a food manufacturer may come up with fanciful names that could mislead the menu planner into serving a product that may not be allowed. When determining whether a food is a grain-based dessert, the menu planner should consider whether the food is commonly thought of as a dessert or treat.

Quick breads, such as banana breads and zucchini bread are still allowable as a grain. Crusts on meat/meat alternate (savory) pies, such as a chicken pot pie, may credit towards the grain component if it contains at least ¼ serving grain per portion. **NOTE:** Quick breads credit the same as muffins. Reference group D in Exhibit A of the FBG.

Savory scones, such as one made with cheese and herbs, credit like a biscuit and are not considered a grain-based dessert.

The fruit in a grain-based dessert, such as pies, cobblers, or crisps, can credit toward the fruit component. CEs and Providers are encouraged to use sweetened fruit *in moderation* to help reduce the consumption of added sugars.

It is understood that CEs and Providers may want to occasionally serve grain-based desserts, such as for celebrations or other special occasions, and continue to have the flexibility to serve grain-based desserts as an additional food item that does not contribute to the meal components required for reimbursement. However, non-creditable food items are not allowable costs and must be purchased using non-Program funds.

Breakfast Cereals

Breakfast cereals, as purchased, (including ready-to-eat cereals, instant and hot cereals (such as oatmeal)) must contain no more than 6 grams of sugar per dry ounce (21.2 grams of sugar per 100 grams of dry cereal), and be whole grain-rich, enriched, or fortified to be creditable.

There are several ways to determine if a breakfast cereal is within the sugar limit. A breakfast cereal must meet only one (not all) of the following methods to determine if a breakfast cereal meets the sugar limit:

1. Use any State agency's WIC approved breakfast cereal list. Similar to CACFP, all WIC-approved breakfast cereals must contain no more than 6 grams of sugar per dry ounce (21.2 grams of sugar per 100 grams).
2. Use USDA's Team Nutrition training worksheet *Choose Breakfast Cereals That Are Lower in Added Sugars* (<https://www.fns.usda.gov/tn/cacfp-meal-pattern-training-worksheets>), which includes a chart with common breakfast cereal serving sizes and the maximum amount of sugar the breakfast cereal may contain per serving, which should eliminate the need to perform sugar limit calculations for many Providers.
3. Use one of the following methods to calculate the sugar content per dry ounce.

Standard Method

- First, find the serving size in grams at the top of the Nutrition Facts label, and find the sugars listed towards the middle.
- Next, divide the total sugars by the serving size in grams.
- If the answer is equal to or less than 0.212, then the cereal is within the required sugar limit and may be creditable in CACFP.

Example

Cereal A's Nutrition Facts label shows that the serving size is 55 grams and the amount of sugar per serving is 13 grams. Thirteen grams (sugar) divided by 55 grams (serving size) equals 0.236. Cereal A exceeds the sugar limit because 0.236 is greater than 0.212.

Rounding Method

This is the calculation method used in the Team Nutrition training worksheet *Choose Breakfast Cereals That Are Lower in Added Sugars* (<https://www.fns.usda.gov/tn/cacfp-meal-pattern-training-worksheets>) noted above.

The worksheet uses the standard rules for rounding, which are to round up to the next whole number if the number after the decimal point is 0.5 or greater and to round down if the number is less than 0.5.

- First, find the serving size in grams at the top of the Nutrition Facts label.
- Multiply the serving size in grams by 0.212.
- If the answer in step 2 ends in 0.5 or more, round the number up to the next whole number. If the answer in step 2 ends in 0.49 or less, round the number down to the next whole number. For example, if the answer in step 2 is 4.24, it is rounded down to 4.
- Next, find the Sugars listed towards the middle of the Nutrition Facts label.
- Compare the number from Step 4 with the number in Step 3. If the number from Step 4 is equal to, or less than, the number in Step 3, the cereal meets the sugar limit and may be creditable in the CACFP.

Example

Cereal B's Nutrition Facts label shows that the serving size is 30 grams. 30 grams times 0.212 equals 6.36. This number ends in 0.36, which is less than 0.5, so 6.36 is rounded down to 6 grams. Six grams is the sugar limit for a serving size of 30 grams. The amount of sugar per serving in Cereal B is 5 grams. Five grams is less than the sugar limit of 6 grams calculated for this serving size, so this cereal is under the sugar limit and is creditable in the CACFP.

Both of these methods of calculations are valid ways of demonstrating a breakfast cereal meets the sugar limit, but there may be times when a breakfast cereal is within the sugar limit when using one of these methods, but not the other. As long as a breakfast cereal meets the sugar limit using at least one of the methods described above, it is considered within the sugar limit.

Providers cannot mix a high sugar cereal with a low sugar cereal to meet the sugar limit. Adding toppings to a breakfast cereal is allowed, but Providers are encouraged to offer healthy toppings such as fruit instead of sugar.

Providers that make homemade cereal, such as granola, must calculate the sugar content of the granola based on the recipe used. The Standardized recipe must be on file for review.

Popcorn

Popcorn is a whole grain food and a good source of fiber. Popcorn may now credit as a whole grain in meals and snacks as follows:

- $\frac{3}{4}$ cup (or 0.25 ounces (7 grams)) popped popcorn credits as $\frac{1}{4}$ ounce equivalent of whole grains;
- 1 $\frac{1}{2}$ cups (or 0.5 ounces (14 grams)) popped popcorn credits as $\frac{1}{2}$ ounce equivalent of whole grains; and
- 3 cups (or 1.0 ounce (28 grams)) popped popcorn credits as 1 ounce equivalent of whole grains

The high volume of popcorn required for crediting may be too much for some children, especially young children. Providers are encouraged to pair popcorn with another creditable grain in these situations, using the crediting guidance for $\frac{1}{2}$ and $\frac{1}{4}$ ounce equivalents and servings outlined above. For example, providers could serve popcorn in a trail mix with pretzels and cereal for a snack.

Popcorn also may be used as an ingredient in creditable foods prepared commercially or by the provider. Popcorn must be present in the minimum creditable quantities to credit (that is $\frac{3}{4}$ cup or $\frac{1}{4}$ ounce equivalent). To credit commercially-prepared foods, providers must obtain a product formulation statement. Providers using popcorn as an ingredient in other food prepared in-house by the provider will follow the standards already in place for determining meal contributions for in-house recipes, including creating standardized recipes in the FBG. Additionally, to determine how to credit popcorn that is ground into flour, and made into crackers for example, CEs and providers will follow Exhibit A, found in the appendix of the *Food Buying Guide*.

Providers are encouraged to limit the use of toppings such as salt, caramel, cheese, and butter that add sodium, sugar, or saturated fat. Although these toppings are not prohibited, healthier alternatives are encouraged, including seasoning the popcorn with herb blends or serving fresh, plain popcorn. Providers are to use their discretion in determining if a certain popcorn product or recipe is perceived to be a grain-based dessert and to follow the guidance in place for grain-based desserts accordingly.

In addition, to prevent the risk of choking, providers must consider the developmental readiness of children and the ability of disabled to swallow safely when deciding whether to offer popcorn. This consideration is especially important for providers that serve young children.

4112.7 Meat/Meat Alternates

Meat/meat alternates must be served in a main dish, or in a main dish and one other menu item.

The creditable quantity of meat/meat alternates must be the edible portion as served of:

- Lean meat, poultry, or fish;
- Alternate protein products;
- Cheese, or an egg;
- Cooked dry beans or peas;
- Pasta made of 100 % legume flour(s);
- Peanut butter; or
- Any combination of these foods.

Nuts and seeds and their butters are allowed as meat alternates. Nuts and seeds may only be used to meet one-half of the meat/meat alternates component for lunch and supper and must be combined with other meat/meat alternates to meet the full requirement for a reimbursable lunch or supper. **EXCEPTION:** Acorns, chestnuts, and coconuts cannot be used as meat alternates because of their low protein and iron content.

Nut and seed meals or flours may be used only if they meet the requirements for alternate protein products as specified in Item 4112.7.2, *Alternate Protein Products*.

Cooked and dry beans and peas (legumes) may be used to meet all or part of the meat/meat alternate component. Beans and peas include:

Black beans	Garbanozo beans	Lentils	Kidney beans
Mature lima beans	Navy beans	Pinto beans	Split peas

Cooked or dry beans or dry peas may be used as either a vegetable or a meat alternate, but not as both in the same meal except when two servings of a different beans or peas are served. For example, if legumes are used as part of a salad, and as part of a chili or bean soup, they can count as a vegetable component in the salad and meat alternate component in the chili or soup.

Four ounces (weight) or 1/2 cup (volume) of yogurt equals one ounce of the meat/meat alternates component. Yogurt may be plain or flavored unsweetened or sweetened, and must contain no more than 23 grams of total sugars per 6 ounces.

Providers may not mix a non-creditable yogurt (one with a sugar content that exceeds the allowable sugar limit) with a creditable yogurt (one with a sugar content that meets the allowable sugar limit) to create a yogurt that meets the sugar limit.

Other meat alternates, such as cheese and eggs, may be used to meet all or part of the meat/meat alternates component.

Shelf-stable, dried and semi-dried meat, poultry, and seafood snacks (such as beef jerky or summer sausage) may be used toward the meat component in a reimbursable meal or snack. To credit the product CEs and providers will follow the crediting principles used for all other products made from meat, poultry, or seafood. Product Formulation Statements or CN Labels are the two acceptable formats for documenting meal contributions from dried meat, poultry, and seafood products.

When a product formulation statement is provided for a dried meat product, it should be evaluated to ensure the following crediting principles are followed:

- The creditable meat ingredient listed on the product formulation statement must match or have a similar description as the ingredient listed on the product label (e.g., Ground Beef, Not More Than 30% Fat or Beef Round Roast);
- The creditable meat ingredient listed on the product formulation statement must have a similar description to a food item in the *Food Buying Guide for CNPs*; and
- The creditable amount cannot exceed the finished weight of the product.

Surimi seafood, which is available in many forms and shapes including chunks, shredded, and flaked may also credit as a meat/meat alternate as follows:

Surimi Seafood (ounces)	Meat/Meat Alternate (ounce equivalents)
4.4	1.5
3.0	1.0
1.0	0.25

Surimi seafood may contain as little as one-third seafood ingredient, and can include other creditable food ingredients. The crediting ratio for surimi seafood differs based on portion size due to rounding rules that require crediting down to the nearest 0.25 ounces.

To credit surimi seafood differently than what is listed in the chart above, CEs and providers must obtain a CN label or product formulation statement from the manufacturer. These products may credit based on the creditable ingredient quantities identified in the CN Label or product formulation statement.

Tempeh, a highly nutritious soybean cake, may be served as a meat alternate. This will allow providers to diversify menus to meet the dietary needs of children with vegetarian preferences or dietary restrictions for cultural or religious reasons.

One (1) ounce of tempeh credits as one (1) ounce equivalent of meat alternate. This method of crediting applies to tempeh with ingredients limited to soybeans (or other legumes), water, tempeh culture, and for some varieties, vinegar, seasonings, and herbs.

Varieties of tempeh that include other creditable foods as ingredients, such as brown rice, sunflower seeds, sesame seeds, flax seed, and/or vegetables, may also credit as meat alternates, grains, and/or vegetables. Since foods must be present in the minimum creditable quantities ($\frac{1}{8}$ cup or $\frac{1}{4}$ ounce equivalents) to credit in the Program, documentation must show how much tempeh and other creditable foods these products contain. To credit these varieties of tempeh, CEs and providers must obtain a CN Label or a product formulation statement from the manufacturer. These varieties may credit based on the ingredient quantities identified in the CN Label or product formulation statement.

Pasta Products Made of 100 Percent Legume Flour(s)

$\frac{1}{2}$ cup of cooked pasta made of 100 percent legume flour(s) may credit as 2 ounce equivalents of meat alternate. To credit as a meat alternate, pasta made of legume flour(s) must be offered with additional meat/meat alternate, such as tofu, cheese, or meat. At the discretion of the CE and provider legumes may credit as a vegetable or a meat alternate, but not as both in the same meal.

CEs and providers may credit legume flour pasta using the Bean Flour yield information on page C-1 of Appendix C of the FBG, or by obtaining a product formulation statement.

Seitan and soy cheeses are not creditable as meat alternates.

Smoothies

Yogurt in a smoothie can be credited as a meat/meat alternate. Yogurt is the only creditable meat/meat alternate allowed in a smoothie.

NOTES:

- Commercially prepared smoothies must have a CN label or product formulation statement.
- Smoothies containing dietary and herbal supplements, such as whey protein powder and Ginkgo biloba, are not creditable. However, smoothies made with juice that has been fortified with vitamins and minerals, such as calcium and Vitamin D are creditable if all other requirements are met.
- Concentrated fruit puree and concentrated fruit juice are only creditable when reconstituted to full (original) strength.

The following items cannot be used to satisfy the meat/meat alternates component:

- Frozen yogurt.
- Yogurt bars.
- Yogurt covered fruits or nuts.
- Yogurt flavored products.
- Homemade yogurt.

4112.7.1 Tofu and Soy Yogurt Products

Tofu means a commercially prepared soy-bean derived food, made by a process in which soybeans are soaked, ground, mixed with water, heated, filtered, coagulated, and formed into cakes. Basic ingredients in tofu are whole soybeans, one or more food-grade coagulants, and water.

2.2 ounces (1/4 cup) of commercially prepared tofu, containing at least 5 grams of protein is creditable as 1 ounce equivalent of meat alternate. When purchasing tofu use the following yield information: 1 pound of tofu with 37 grams of protein will have 7.28 quarter-cup servings per pound and provide 7.25 ounces of equivalent meat alternate.

Noncommercial tofu products and soft or silken tofu incorporated into drinks such smoothies or other dishes to add texture or improve nutrition such as in baked desserts, does **NOT** credit toward the meat alternate component.

Firm or extra firm tofu in stir-fries, omelets, and miso soup may credit towards the meat alternate component. Firm or soft tofu cut into cubes and incorporated into a dish, such as a salad, is creditable as the tofu is easily recognizable as a meat alternate. Meat substitute products such as links and sausages made from tofu are also easily recognizable as meat substitutes and can be included in a meal.

Tofu that mimics another food group (such as tofu noodles which mimic a grain noodle) are not creditable because the tofu is not easily recognizable as a meat alternate.

½ cup (4.0 fluid ounces) of soy yogurt is creditable as 1.0 ounce equivalent of meat alternate. Soy yogurt allows day care homes to provide a non-dairy alternative. Soy yogurt must not contain more than 23 grams of sugar per 6 ounces to be creditable.

Noncommercial soy yogurt products do **NOT** credit toward the meat alternate component.

4112.7.2 Alternate Protein Products

Alternate Protein Products (APP) -- formerly referred to as "Vegetable Protein Products" -- can be credited as a meat/meat alternates on an "ounce-for-ounce" basis.

APP, whether used alone or in combination with meat or meat alternates, must meet the following criteria:

- The APP must be processed so that some portion of the non-protein constituents of the food is removed. APPs must be safe and suitable edible products produced from plant or animal sources.
- The biological quality of the protein in the APP must be at least 80 percent that of casein, determined by performing a Protein Digestibility Corrected Amino Acid Score (PDCAAS).
- The APP must contain at least 18 percent protein by weight when fully hydrated or formulated. (When hydrated or formulated refers to a dry APP and the amount of water, fat, oil, colors, flavors or any other substances which have been added).

A Provider may use commercially prepared meat/meat alternate products combined with APP or a product that contains only APP. Examples of combination items include beef patties, beef crumbles, pizza topping, meat loaf, meat sauce, taco filling, burritos, and tuna salad. The APP may be used in a non-hydrated, partially hydrated, or fully hydrated form. The moisture content of a fully hydrated APP, if prepared from a dry concentrated form, must be such that the mixture has a minimum of 18 percent protein by weight or equivalent amount for the dry or partially hydrated form (based on the level that would be provided if the product were fully hydrated).

The CE and provider must maintain documentation from the manufacturer that an APP meets protein quality standards mandated by the Child Nutrition Programs, as indicated above.

Documentation must provide information on the percent of protein contained in the dry alternate protein product and on an as prepared basis and, for an alternate protein mix, must include information on (a) the amount by weight of dry alternate protein product in the package; (b) hydration instructions; and (c) instructions on how to combine the mix with meat or other meat alternates.

Providers must accurately describe the menu items that are served. This will assist the providers when selecting menu items that are consistent with dietary needs.

It is important to remember that the terms meat and protein are not synonymous and that meal pattern requirements specify the meat/meat alternates component in terms of lean cooked meat, not protein. Refer to Section 11000, *Resources*, for the Meat Versus Protein Fact Sheet.

4112.8 Water Availability in the CACFP

Potable (suitable for drinking) water must be made available to children one year and older throughout the day, including mealtimes, to drink upon the child's request. In addition, providers must offer water throughout the day, being especially mindful of those children who may not be able to or know how to request it themselves. Water does not have to be made available for self-serve. Although water must be made available during mealtimes it does not have to be served alongside the meal. Water is not part of the reimbursable meal and cannot be served in lieu of fluid milk.

Providers may choose to flavor water with vegetables, fruit, or herbs as long as plain, potable water is also available. Commercially prepared (including bottled) flavored water is not allowed. Fruit or vegetable added to water cannot count toward the vegetable or fruit component of a reimbursable meal, including snacks. Providers that flavor water with cut-up fruit, vegetables, or herbs must ensure they follow all State and local health and sanitation codes.

See below for specific guidelines for infants and children one year and older.

4112.8.1 Water for Infants

USDA recommends that parents consult their infant's health care provider regarding feeding water to infants. However, it is generally recommended that:

- Formula-fed infants in a normal climate should not be fed more water than the quantity found in properly diluted formula.
- Partially breast-fed and formula-fed infants in a hot climate should be fed water (about four to eight ounces per day, unless otherwise indicated by a health care provider).
- Breast-fed and formula-fed infants, in a normal climate who are fed a variety of solid foods, especially high protein foods, e.g., meats, egg yolks, should be fed some water (a total of about four to eight ounces per day, unless otherwise indicated by a health care Provider).
- Exclusively breast-fed infants in hot humid climates should not be fed additional water besides what is in breastmilk.

NOTE: Providers should obtain parental approval before feeding water to an infant. When in doubt, parents should consult their infant's health care provider.

Most fruit juices are diluted with water. Infants should only be provided juice in a cup and the amount should be limited (fewer than four ounces of juice). Parents should consult their infant's health care provider regarding the total amount of fruit juice and water to feed an infant each day.

Plain water and fruit juice are meant to be fed in relatively small amounts to older infants as a source of fluid, which supplements a nutritionally balanced diet. Feeding an excessive amount of water, juice or other diluted liquid, places an infant at risk of water intoxication.

4112.8.2 Water for Children One Year and Older

CEs must ensure that their providers make plain potable water available, upon demand, for children throughout the day, including mealtimes. This can be accomplished by:

- Having cups available next to the kitchen sink faucet;
- Placing water pitchers and cups out in easy to reach areas for children to access as needed;
- Providing water to a child when requested.

Providers are encouraged to provide water during snack meal services when no other beverage is being served and in place of high calorie sweetened drinks (juice drinks, soda, sports drinks) served outside of meal times.

NOTE: See meal pattern chart notes for additional Texas Department of Family and Protective Services Child Care Licensing requirements.

4113 Meal Variations

4113.1 Variations in Meal Pattern Requirements for Religious Reasons

TDA may approve variations in meal patterns to meet religious needs. If a provider wants to serve meals that vary from USDA Meal Patterns, the CE must submit an alternate meal pattern with justification to TDA.

Jewish facilities may be exempted from the enrichment portion of the bread requirement if they choose to substitute unenriched matzo for the required grains/breads component during the observance of Passover. At all other times of the year, matzo served as the grain component must be whole grain rich, whole grain, or enriched in accordance with CACFP meal pattern requirements.

Jewish facilities may also be exempted from the meal pattern requirement that milk be served with all lunches and suppers. This exemption applies only to meals containing meat or poultry since Jewish Dietary Law allows milk to be served with meat alternates such as fish, cheese, eggs, nut and seed butter, and nuts and seeds.

Jewish facilities that request an exemption must choose from the following three options:

- **Option I** – Serve an equal amount of full-strength juice in place of milk with lunch or supper. Juice substituted for milk cannot contribute to the vegetable/fruit requirement.

If the facility operates five days a week, it may substitute juice for milk twice per week for lunches and twice per week for suppers, but is only allowed one substitution per day.

If the facility operates seven days a week, it may substitute juice for milk three times per week for lunches and three times per week for suppers, but is only allowed one substitution per day.

Milk substitutions are limited since milk is a primary source of calcium and riboflavin. When using Option I, Providers should serve other sources of calcium, e.g., broccoli and greens, and riboflavin, e.g., dark green and yellow fruits and vegetables and whole-grain or enriched breads and cereals.

- **Option II** – Serve milk at an appropriate time before or after the meal service period, in accordance with applicable Jewish Dietary Law.
- **Option III** – Serve a snack juice component at lunch or supper. Serve the lunch or supper milk component as part of a snack.

NOTE: An exemption is not necessary for breakfasts.

Providers must notify their sponsor to request an exemption. The CE must obtain approval for an exemption from TDA prior to claiming reimbursement.

4113.2 Children/Infants with Disabilities

Providers are **required** to provide meal component substitutions to a disabled child/infant when supported by a medical statement signed by a licensed physician or a State recognized medical authority. A State recognized medical authority is a State licensed health care professional who is authorized to write medical prescriptions under State law.

As part of its informational packet or orientation documentation, the CE or provider should provide parents/guardians instructions on requesting substitutions.

The medical statement should include a description of the child's/infant's physical or mental impairment that is sufficient to allow the provider to understand how it restricts the child's/infant's diet. It should also include an explanation of what must be done to accommodate the disability.

In the case of food allergies, this means identifying the food or foods that need to be omitted and recommending alternatives. In other cases, more information may be required. For example, if an infant requires the substitution of a Food and Drug Administration exempt infant formula in place of iron-fortified infant formula to accommodate a disability, this information must be included in the statement. Providers may request more information if the medical statement does not contain all necessary information to allow the provider to understand what modification(s) to make, however; providers may not request additional information with the intent of trying to figure out if the child/infant really has a disability. Providers must put into place what is known while waiting on additional information or clarification.

When providers believe the medical statement is unclear, or lacks sufficient detail, they must obtain appropriate clarification so that a proper and safe meal can be provided. Providers may consider using the services of a Registered Dietitian, when available, to assist in implementing meal modifications, as appropriate.

Providers are not required to provide the exact substitution or other modification requested. However, they must work with the parent or guardian to offer a reasonable modification that effectively accommodates the child's/infant's disability and provides equal opportunity to participate in or benefit from the Program. When determining what an appropriate modification is, the age, maturity, mental capacity, and physical ability of the child/infant should be considered. For instance, younger children may need greater assistance with selecting and eating their meals, whereas older children may be able to take a greater level of responsibility for some of their dietary decisions.

Providers may also consider expense and efficiency when choosing the most appropriate approach to accommodate a child's/infant's disability. For example, the parent of a child with an allergy to a specific ingredient found in a menu item may request that the provider supply a particular brand name version as a substitute. Generally, the provider is not required to supply the brand name item identified, but it must offer a substitute which does not contain the specific allergen that affects the child/infant. "No" cannot be the first response to a parent/guardian requesting a specific brand or item.

Providers are not required to make modifications that would result in a fundamental alteration in the nature of the Program. In these situations, some meal modifications may be so expensive that providing the modification would fundamentally alter the nature of the Program.

Modifications that are so expensive that they would make continued operation of the Program unfeasible constitute a fundamental alteration in the nature of the Program and are, therefore, not required. Providers should be aware that the expense of a modification is measured against the total resources available to that particular day care home.

For example, providing an expensive medical infant formula to accommodate an infant's disability may be so financially burdensome for a provider that it would make operating the Program unfeasible, and consequently would fundamentally alter the nature of the Program. In this example, the provider would not be required to supply the requested medical infant formula.

Providers faced with a very expensive request should first consider engaging in further dialogue with the child's/infant's parents or guardian. As discussed above, providers are not required to supply the exact substitution or other modifications requested. However, they must work with the parent or guardian to offer a reasonable modification that effectively accommodates the child's/infant's disability and provides equal opportunity to participate in or benefit from the Program.

CEs concerned that a requested modification would fundamentally alter the nature of day care home's Program should contact their ESC or Community Operations Field office for assistance.

CEs and providers must:

- Keep on file a copy of the licensed physician's or State recognized medical authority's medical statement in both the CE's and the provider's files;
- Provide the meal substitutions at no additional cost to the child's/infant's parent (or guardian); and
- Document meal substitutions.

Day care homes must provide all meal services in the most integrated setting appropriate to the needs of the disabled child/infant. Exclusion of any child/infant from the Program environment is not considered an appropriate or reasonable modification. For example, a child may not be excluded from the area where meals are served and required to sit in another room during the meal service. This is not an appropriate or reasonable modification.

Similarly, while it may be appropriate to require children with very severe food allergies to sit at a separate table to control exposure, it is not appropriate to simultaneously use that table to segregate children as punishment for misconduct.

A parent or guardian may provide one or more of the components of the reimbursable meal as long as the provider supplies at least one required component. CEs and providers may not require a parent/guardian to provide one or more component for a child/infant with a disability.

The reimbursement rate for meals served to children/infants with disabilities is the same standard rate as all other Program meals, however; the added cost of providing meal substitutions is an allowable Program cost in your food budget.

4113.3 Children/Infants with Medical or Special Dietary Needs

Providers may, at their discretion, make substitutions for children/infants who are not disabled but who are unable to consume a food item because of medical or other special dietary needs, such as children/infants with food intolerance(s) (e.g., lactose intolerant or food allergy).

Substitutions must be made on a case-by-case basis, must be provided at no additional cost to the parent/guardian, and must be supported by a written statement signed by a recognized medical authority. The written statement must include the following:

- Identification of the medical or special dietary need that restricts the child's/infant's diet;
- Food or foods to be omitted from the child's/infant's diet; and
- Food or choice of foods to be used as substitutions.

In these cases, recognized medical authority may include physicians, physician assistants, or nurse practitioners. **EXCEPTION:** written requests for non-dairy fluid milk substitutions do not have to be signed by a recognized medical authority. See Non-dairy Fluid Milk Substitutions below.

The decision as to whether or not the provider will provide the substitutions is at the discretion of the provider. A provider is not required to satisfy the unique dietary needs of each child/infant. TDA strongly encourages providers to work closely with the parent (or guardian) to ensure that reasonable accommodations are made to allow children/infants with medical or special dietary needs to participate in the meal service. This is particularly important when accommodating children/infants whose medical or special dietary need requires significant modifications or personal assistance.

A parent or guardian may provide one component of the reimbursable meal as long as the component meets the meal pattern requirements and the provider supplies the remaining components.

Non-dairy Fluid Milk Substitutions

Children who cannot consume fluid milk due to medical or special dietary needs may be served non-dairy beverages in lieu of fluid milk.

Non-dairy beverages must be nutritionally equivalent to milk and meet the nutritional standards for fortification of calcium, protein, vitamin A, vitamin D, and other nutrient levels found in cow's milk as outlined below:

Per Cup					
Nutrient	Weight	Percentage	Nutrient	Weight	Percentage
Calcium	276 mg.*	30	Magnesium	24 mg.*	6
Protein	8 g.*	----	Phosphorus	222 mg.*	20
Vitamin A	500 IU.*	10	Potassium	349 mg.*	10
Vitamin D	100 IU.*	25	Riboflavin	0.44 mg.*	25
Vitamin B-12	1.1 mcg.*	20			

*mg = milligrams; g = grams; IU = international units; mcg = micrograms

If a child is lactose intolerant, providers are encouraged to determine the availability of lactose-reduced or lactose-free milk with their milk supplier. Providers are also encouraged to provide lactose-reduced or lactose-free milk as a fluid milk choice as a creditable part of a reimbursable meal.

Parents or guardians may request in writing non-dairy fluid milk substitutions without providing a statement signed by a recognized medical authority (this does not include a request to substitute whole or reduced-fat (2%) milk). CEs and providers must ensure the substitution meets the requirements as stated above. The written request from the parent or guardian must identify the medical or special dietary need that restricts the diet of the child. For example, a parent who has a child who follows a vegan diet may request soy milk be served to their child instead of cow's milk.

NOTE: If the child's/infant's medical or special dietary need requires only textural modification(s) to the regular Program meal or if a substitution can be made using another creditable food item within the same meal component group, as opposed to a meal pattern substitution, then the medical statement is recommended, but not required.

EXAMPLES: 1) a child cannot swallow whole raw or cooked carrots, but can swallow pureed carrots; 2) a child is allergic to peanuts so the center substitutes ham and cheese for that child on the day the provider serves peanut butter sandwiches for the other children.

The reimbursement rate for meals served to children/infants with medical or special dietary needs is the same standard rate as all other Program meals. Providers cannot require a parent or guardian to pay the difference between fluid milk and the non-dairy substitute if the non-dairy milk substitute costs more than the fluid milk.

4114 Meal Service Documentation

CEs and providers must ensure the food items used to prepare meals meet CACFP requirements as creditable food items. Food labels and other documentation identify the ingredients as well as the contribution towards a reimbursable meal a product contains. CEs must maintain this documentation on file and have it ready for review.

The types of labels and documentation needed in order to identify the food's contribution to the meal pattern requirements are:

- Ingredients listing/nutrition facts label
- A child nutrition (CN) label
- A product formulation statement from the food manufacturer

For menu items in which a CN label or product formulation statement cannot be obtained, it is recommended that additional food items are served that meet the meal pattern requirement to reduce the risk the meal will be disallowed.

4114.1 Meal Production Record

Providers must document the menu and meal production prior to the meal service on the *Daily Meal Production Record – Infants* (H1530 - A) and/or *Daily Meal Count, Attendance, and Meal Production Record* (H1539), or alternate form(s). Food items used must be documented as purchased using the Food Buying Guide.

Additionally, meals that contain fluid milk must specify the type of milk including fat content, for example unflavored fat-free, and meals that contain grains must specify when the grain is whole grain-rich, for example whole grain-rich (WGR) rolls, whole wheat pasta.

When a mother directly breastfeeds her infant on site it must be documented as breastfed (BF) or mother breastfed (MBF) and quantity used would not be completed.

Substitutions due to disabilities, and/or medical or special dietary needs must also be noted on the meal production record.

Changes to the record must be noted and initialed.

4114.2 Leftover/Recycle

Providers that have food remaining after a meal service may use those food items for future meals under the following conditions:

- State and local health department requirements must be met.
- Food must be held at the proper temperature.
- Food can be recycled one time.
- Food that has been served using any meal service style cannot be recycled unless it is individually wrapped or self-contained (for example, apples, oranges, milk packaged as individual servings, etc.).

Providers may use TDA's *Record of Leftover/Recycled Food (H1568)* and/or for infant meals may use *Daily Meal Production Record – Infants (H1530-A)* to document leftover/recycled food or may create their own document to record this information. This documentation must be available during a review or upon request.

4114.3 Donations

CEs that receive donations of food for use in the CACFP nonprofit food service must maintain documentation of such donations to include, at minimum:

1. Date of the donation
2. Description of the item(s) donated (i.e., fat-free milk)
3. Amount of the donation (i.e., gallons, half-gallons, pints)
4. Quantity of the donation (i.e., 10, 20)

Donation documentation could be an individual receipt or donation log or any other method that captures, at minimum the above information.

4114.4 Infant Feeding Preference

The CE and provider must maintain documentation of a parent's/guardian's preference for infant feeding, which allows the parent/guardian to decline the formula offered as well as indicate the infant's developmental readiness for solid foods.

The documentation must include the following elements in order to claim reimbursement for meals that are served to infants:

- Infant's name;
- Infant's date of birth;
- Name of the Provider;
- The name and type of infant formula the provider will supply;
- Whether the parent (or guardian):
 - Will bring the breastmilk;
 - Declines the formula offered and will bring the infant formula. Adequate information must be provided by the parent (or guardian) about the alternate infant formula to determine whether the infant formula meets infant meal pattern requirements (e.g., the name brand of the infant formula and whether the infant formula is iron-fortified);
 - Will bring solid foods that the infant is developmentally ready to accept;
 - Wants the provider to supply the infant formula;
 - Wants the provider to supply infant cereal and other food items that the infant is developmentally ready to accept according to the Infant Meal Pattern;
- Parent's (or guardian's) signature; and
- Date of signature.

Providers may use TDA's *CACFP Infant Feeding Preference* form to document infant feeding preferences or may create their own document to record this information.

NOTE: As situations change, such as a physician or recognized medical authority changing the infant's formula, the CE and provider must update the information in the infant's file. The information must be updated within one month of the infant moving from one age category to the next.

4114.5 Ingredients Listing/Nutrition Facts Label

Ingredients listing and nutrition facts label are found on all food items, whether processed or not, with the exception of fresh fruits and vegetables. This information is used to confirm that the food product meets requirements for use in the CACFP. For example, bread must be whole wheat or enriched. This information is found in the ingredients list on the package of bread.

4114.6 CN Labels

Main dish products that contribute at least ½ ounce to the meat/meat alternates component of the meal pattern (for example cheese or meat pizzas, meat or cheese burritos, breaded fish, chicken nuggets) and juice and juice products containing at least 50% full-strength juice by volume (for example frozen juice bars and sherbet) are the only products eligible for Federal CN Labeling. 100% juice products are **NOT** eligible for a CN label.

Products containing the CN label will have the following information printed on the principal display panel of the label:

- Product name.
- Ingredients listed in descending order by weight.
- Inspection legend for the appropriate inspection.
- Establishment number (for meat, poultry, and seafood items only).
- Manufacturers or distributor's name and address.
- CN label statement. The CN label statement must be an integral part of the product label and include the following information:
 - CN logo, the distinctive border around the CN statement.
 - Six-digit product identification number which will appear in the upper right hand corner of the CN label statement.
 - A statement of the product's contribution toward meal pattern requirements for the Child Nutrition Programs.
 - A statement specifying that the use of the CN logo and label statement is authorized by Food and Nutrition Services (FNS).
 - The month and year the label was approved by USDA FNS.

If a provider purchases and serves a product without a CN label and the product does not meet CACFP requirements, the meal/snack will not be reimbursable, unless the CE has a product formulation statement for the item. See Item 11500, USDA Child Nutrition (CN) Labels, for more information.

CEs and providers must keep:

- The original CN label from the product carton.
- A photocopy of the CN label shown attached to the original product carton; or
- A photograph of the CN label shown attached to the product carton.

Photocopied or photographed CN labels must be visible and legible to be acceptable documentation.

Generally, watermarked CN labels printed from a website are not acceptable documentation. However; if the original, photocopied, or photographed CN Label is not available a CE may provide:

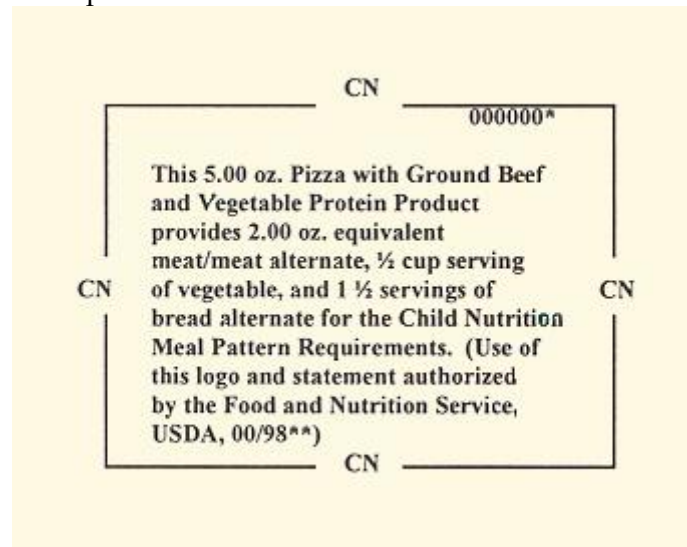
- The bill of lading (invoice) containing the product name; **and**
- A hard copy of the CN Label copied with a watermark displaying the product name and CN number provided by the vendor; or
- An electronic copy of the CN Label with a watermark displaying the product name and CN number provided by the vendor.

CN labels are generally approved for a period of five years; however some approvals are for a shorter period of time such as one year. The list of authorized CN labels includes the CN label expiration date. CEs should frequently check this list to ensure the CN labeled products being used are still authorized and creditable.

To locate a list of authorized CN labels issued to manufacturers go to the USDA FNS CN Labeling website at <http://www.fns.usda.gov/cnd/cnlabeling/authorized.htm>.

Manufacturers may not, under any circumstances, place the CN logo and contribution statement on fact sheets or other product information.

Example of a CN Label:



* CN identification number

** Month and Year of original approval

4114.7 Product Formulation Statements

When purchasing a processed product that does not contain a CN label, the CE or provider may request a product formulation statement from the manufacturer.

A product formulation statement from a food manufacturer must contain:

- A detailed explanation of what the product actually contains.
- The amount of each ingredient in the product by weight or measure, as appropriate.
- A certifying statement as to the contribution of the product to the meal pattern.
- The signature of a high-ranking official employed by the manufacturer.

CEs and providers are responsible for:

- Reviewing the manufacturer's product formulation statement before serving to determine the credibility of information provided by the manufacturer.
- Ensuring the proper documentation is maintained on each commercially prepared product used to meet USDA meal pattern requirements.
- Assuring that the food product meets specifications and has the correct code number.

Sample product formulation statement that have been developed to assist CEs and providers when documenting the creditable amount of food in products to meet meal pattern requirements can be found on the USDA FNS CN Labeling website at:

<http://www.fns.usda.gov/cnd/cnlabeling/foodmanufacturers.htm>.

NOTE: Product formulation statements are sometimes referred to by other names, such as product analysis, specifications, or recipe analysis.

4115 Food Preparation

Providers usually prepare their own meals. Those who do are responsible for their own purchasing, menu planning, cooking, serving, and cleanup. Providers must also keep records of the daily meal production and the number of meals served, and they must comply with all state and local health and sanitation laws.

4115.1 On-site Food Preparation

USDA prohibits the use of deep-fat fried foods that are prepared on-site, in a central kitchen, or satellite kitchen as part of a reimbursable meal. Deep-fat frying means cooking by submerging food in hot oil or other fat. This prohibition does not apply to vended meals that contain deep-fried foods as long as the deep-fried food was prepared by the vendor off-site.

Foods that are pre-fried, flash-fired, or par-fried by a commercial manufacturer may be served, but must be reheated by a method other than deep-fat frying. Providers are strongly discouraged from serving any type of deep-fat fried foods to infants.

4115.2 Vended Meals

A CE may choose to purchase meals for its providers from a food service management company/vendor or school.

CEs may purchase meals in bulk or as units. If a CE purchases meals for its providers it is responsible for ensuring that the meals meet CACFP meal pattern requirements.

CEs purchasing meals must do so according to the procurement policies in this handbook.

Food Service Management Companies

Food service management companies (FSMC) are generally for-profit vendors, e.g., caterers. If a CE to contract with an FSMC, it must follow the procurement guidelines provided in Section 7000, *Financial Management*.

Program Meals Obtained from a School Food Authority that Participates in the NSLP/SBP

CEs that obtain meals through a contract with a school food authority (SFA) must adhere to the following procedures:

- **Meal Production Records** - The CE may use the meal production records provided by the school as documentation for the CACFP meal service.

CEs are required to keep the delivery receipt from the school for each day's meal service as documentation of the meal offered. The delivery receipt must indicate the following:

- Identify the menu items;
 - Amount/quantity of each menu item delivered;
 - Number of servings of each item; and
 - Serving instructions, such as what constitutes a serving and which serving utensil to use. (The serving size is based upon the meal pattern requirements as provided to the school by the CE in the contract.)
- **Food Service Management Company/Vendor Site Review** – CEs do not have to complete an on-site review of the food preparation facility, however; the CE must complete the *Food Service Management Company/Vendor Monitor Review* (H1529), Sections 3 and 5, for an observed meal service.

- **Meal Analysis** – The meals provided by the school are subject to a meal analysis conducted by the TDA department that monitors the NSLP/SBP.

REMINDER: This only applies to CEs that purchase program meals from a SFA that participates in the NSLP/SBP.

4115.2.1 Monitoring FSMC/Vendor Contracts

If a CE contracts with a Food Service Management Company (FSMC) or vendor to provide food service, the CE must conduct an annual on-site monitoring review of each food preparation site used by the FSMC/vendor to provide meals for their contract. The review must be conducted during each CACFP Program Year (October 1 through September 30 of any given year). CEs must use the *Food Service Management Company / Vendor Monitor Review* (H1529), to conduct the monitoring review.

Sponsors may conduct this review in conjunction with the required reviews of their providers, but are not required to do so.

4120 Meal Time Restrictions

CEs and providers must ensure that the following meal time restrictions are observed:

- Two hours must elapse between the beginning of any meal (breakfast, lunch and supper) or snack;
- The duration of a meal service (breakfast, lunch and supper) must not exceed two hours
- The duration of a snack service must not exceed one hour;
- Service of supper must begin no earlier than 4:00 p.m.

Additionally, a meal service cannot begin any later than 30 minutes before the ending time (close of business) indicated as the normal hours of operations on the *Provider Application*

Providers may use a different schedule for infants younger than one year old.

4130 Meal Service Styles

Providers may serve meals:

- As a unit (cafeteria style/pre-plated/unitized).
- Family style.

In either type of meal service, the provider must ensure that the minimum quantities of each meal component are available to each child. In cafeteria style meal service, each child must be served at least the minimum amount of each component.

4131 Cafeteria/Pre-plated/Unitized

Cafeteria style meal service occurs when children are served food components as they proceed down a serving line.

Pre-plated and unitized style meal service occurs when the provider pre-plates all required components of the meal in the minimum serving sizes and serves them as one unit to the child.

4132 Family

In family style meal service:

- A sufficient amount of prepared food must be placed on each table to provide the full, required portions of each of the food components for all children at the table, and to accommodate adults if they eat with the children.
- Children should initially be offered the full required portion of each meal component. The family style meal service allows children to make choices in selecting foods and the size of initial servings.
- It is the responsibility of the provider, during the course of the meal, to actively encourage each child to accept service of the full required portion for each food component of the meal pattern, e.g., if a child initially refuses a food component, or initially does not accept the full required portion of a meal component, the provider should offer the food component to the child again.
- Second meals cannot be claimed for reimbursement.

In line with the nutritional goals of the CACFP, family style meal service encourages a pleasant eating environment, promotes mealtime as a learning experience by allowing children to serve themselves from common platters of food (with assistance as needed) and provides educational activities that are centered around food. Even when a complete family style meal service is not possible or practical, it may be useful to offer one component or multiple components in a family style manner.

When child does not take a food component or the full minimum serving size of a food component during family style meals, the p must encourage the child to serve themselves the full minimum serving size. However, if the child does not serve themselves a food component or take the full minimum serving size of a food component the meal may still be reimbursed.

If a child takes more than the minimum required and the serving dish is emptied before each child is served then the Provider must re-fill the serving dish so each child is offered a complete reimbursable meal.

A meal can be considered reimbursable and marked as received (point-of-service) when

- It is observed that all required components in quantities sufficient to feed each child participating in the meal service the required portion sizes are on the table; and
- The child is observed participating in the meal service.

Although TDA strongly encourages allowing children to serve themselves in a family style meal service, it is not required.

4140 Prohibition of Separation by Sex

Regardless of which meal service style is chosen, providers may not separate children on any protected basis, including sex, during a meal service, whether or not that child is participating in the meal service.

USDA recognizes there are some situations in which separation by sex may be permissible. A CE may request an exemption to the prohibition against separation by sex in the following circumstances:

- Religious institutions – meal service is provided at a religious institution that operates under the dictates of the religion with which they are affiliated.
- Juvenile correctional facilities – meal service is at a correctional facility where combining members of the opposite sex would present a potential safety risk.
- Facilities that separate males and females as normal part of their operations – meal service is at a facility such as a camp that separates males and females.
- Other – those situations that do not meet the criteria above. These types of requests will be reviewed on a case-by-case as must be approved by TDA and the FNS.

CEs requesting this exemption will use the *Male/Female Separation Exemption Request* form located in the Application Module, Download Forms page in TX-UNPS.

Refer to Section 6000, *Civil Rights* for further information on discrimination and protected classes.

4150 Counting Meals and Snacks

CE's and provider's meal count system must:

- Provide accurate counts of reimbursable meals served to eligible children; and
- Ensure the child/children received all required components in the correct quantities or it is not counted. A meal is reimbursable if an eligible child receives all required components in the correct quantities.

Limit on Quantity of Reimbursable Meals

Providers may serve any or all of the following:

Meals	Snacks
Breakfast	A.M.
Lunch	P.M.
Supper	Evening

Meals and snacks must meet meal pattern requirements and must be:

- Served to children who are enrolled for child care.
- Eaten in the day care home (congregate feeding).
- Served to children who meet CACFP age requirements.
- Supplied by the provider (Refer to Item 4112, *Meal Pattern Requirements*, for exceptions concerning infant meals provided by the parent/guardian).
- Served at a time that TDA has approved.
- Served by a provider that TDA has approved for participation in the CACFP.
- Prepared by a source (self-prep or vended) that TDA has approved.

Providers cannot claim reimbursement for meals or snacks that are provided by a child's parent/guardian, e.g., a sack lunch. Additionally, meals or snacks cannot be claimed that are served to:

- Adults.
- Children in excess of the day care homes licensed capacity.
- Children not properly enrolled.
- The children of one provider in the care of another provider unless substitute care is being offered and the child is enrolled with the substitute provider. (The provider for whom substitute care is offered cannot claim reimbursement for any meals during the period of substitute care).

- The provider's school-age children (during regular school hours), unless the children are home schooled and all CACFP requirements are met.
- The provider's own child, unless the child is eligible for free or reduced-price meals AND a nonresident child enrolled for child care is participating in the meal service.

4151 Meal Service Record

Providers must record meal counts and attendance on a daily basis. It is recommended providers record meal counts at the point of service where they observe that an eligible child receives a creditable meal. A meal is creditable when a child receives all required components in the correct quantities.

Providers must record meal counts on the *Daily Meal Count, Attendance, and Meal Production Record* (H1539), or an alternate form.

CEs must ensure that all items on the form are completed, including the:

- Date of food service.
- Day of the week.
- Names of all children enrolled in day care.
- Age of each child.
- Meal counts, by meal type, for each child.
- Attendance.

The *Daily Meal Count, Attendance, and Meal Production Record* (H1539) contains a certification statement that must be signed and dated by the provider.

4152 Second Meals During One Meal Service

CEs and providers must plan and prepare meals with the intent of serving no more than one of each approved meal type per child per day.

Second meals may be claimed only if the second meals were served due to an unanticipated fluctuation in participation resulting in conditions beyond the provider's control; and

- The meals were served cafeteria/pre-plated/unitized style. CEs and providers may not claim second meals under any condition when the meals are served family style.
- The second meals complied with meal pattern requirements.
- The second meals were served to eligible program participants.
- The CE submits documentation justifying the second meals.
- TDA approves the justification for serving second meals due to reasons beyond the provider's control.

Menu records, or other documentation, must show that the quantity of each prepared component was adequate for each meal served (including any second meals) and contained the minimum of each required component.

4153 Field Trips

The Texas Health and Human Services Commission (HHSC_ Child Care Licensing (formerly DFPS) consider organized activities directly related to the provision of child care, e.g., field trips, to be an “extension of the day care home and subject to regulation.”

Therefore, providers may claim reimbursement for meals that are served during a field trip if:

- The activity is directly related to child care.
- All program requirements are met.

Program requirements include, but are not limited to, the following:

- Meals must meet meal pattern requirements for the appropriate age group and must be served to eligible children.
- All state and local health department standards, including maintaining food at proper temperatures, must be followed.
- Meal counts for meals served to eligible children must be documented on the *Daily Meal Count, Attendance, and Meal Production Record* (H1539), or alternate form.
- Meals must be provided by the approved source (self-preparation or vended). Meals purchased from restaurants or “fast food” outlets are not reimbursable without a product formulation statement from the food manufacturer.
- Meals that are served to children who are in transit to the provider’s or their homes cannot be claimed as reimbursable meals.

CEs are not required to obtain prior approval from TDA to claim meals served on a field trip. However, CEs may require that providers obtain prior approval for field trips as a condition of reimbursement for meals served off-site.

Occasionally, field trips will include a visit to a Summer Food Service Program (SFSP) site. CEs and providers cannot claim reimbursement for meals that are provided and served by SFSP sites.

4200 Two-Tiered Reimbursement Provisions

Reimbursement for meals is based on a two-tiered rate structure. Providers receive reimbursement for meals served to enrolled children based on economic need as determined by one of the following:

- The location of the day care home.
- The income of the Provider.
- The household income of each participating child.

CEs must determine if a provider can receive Tier I or Tier II reimbursement. CEs will use school data, census data, or the provider's household income information to determine if the day care home can be classified as Tier I and receive Tier I reimbursement for all eligible meals served. A provider that does not qualify as Tier I will receive Tier II reimbursement.

A provider may qualify as either Tier I or Tier II for any given month. However, no provider may be claimed in both categories for an individual month.

CE's determination of a provider's Tier status is provided through TX-UNPS on the provider application screen. CEs must maintain documentation that supports a provider's Tier I determination.

4210 Tier I and Tier II Providers

4211 Tier I Providers

Providers qualify as Tier I if:

- Their homes are located in geographic areas shown to be low-income by school data or by census data.
 - A Tier I determination based on school data or census data is valid for five years from the effective date of the determination, e.g. if, on July 1, 2013, the provider is determined to be Tier I, the determination is valid through July 31 2018.
- They are determined to be low-income based on income information obtained from the provider.
 - A Tier I determination based on the provider's household income is valid for one year from the effective date of the determination. For example, if on July 1, 2016, you determine that a provider qualifies as Tier I, the determination is valid through July 31, 2017.

Refer to Items 4220 and 4230 below for information on making Tier I determinations.

4212 Tier II Providers

Providers will receive Tier II reimbursement if they do not qualify as Tier I. However, Tier II providers that choose to have the CE determine eligibility of the enrolled children for Tier I or Tier II can receive Tier I reimbursement for meal served to those children who qualify for Tier I.

Refer to Item 4240 for information on Tier II providers.

NOTE: CEs must inform Tier II providers annually that they can request reclassification based on new census data.

4220 Area-Eligible Tier I Providers

A provider who is eligible for Tier I reimbursement based school or census data, i.e. an area-eligible Provider, will receive Tier I reimbursement for all nonresident enrolled children. The provider will not complete a *CACFP Meal Benefit Income Eligibility Form* for the nonresident children.

Area eligibility is based on the geographical location of a provider. Therefore, if an area-eligible provider changes location, the CE must reassess the provider's eligibility.

4221 Area-Eligible Tier I Providers Based on School Data

Each year TDA publishes a list of schools in which 50% or more of the enrolled children are eligible for free or reduced-price meals. This list includes individual campuses and the percentage of students at each campus that qualify for free or reduced-price meals. The list of schools is located at <http://www.squaremeals.org> under CACFP Administration and Forms.

The percentage of income-eligible children for the school in whose attendance area the provider is located must be equal to or greater than 50 percent in order for the provider to qualify for Tier I based on school data.

CEs must use the free and reduced-price percentages provided on the current list when determining eligibility. If no school in the attendance area in which the provider is located meets the 50 percent or greater percentage, the provider cannot be qualified as Tier I based on school data.

EXCEPTION: If a CE can obtain from the school in the attendance area in which the provider is located documentation for a more recent month that demonstrates that the school meets the 50 percent or greater percentage, that documentation may be used to qualify the provider as Tier I.

NOTE: CEs may not round up a percentage. A percentage such as 49.94 cannot be rounded up and would not qualify the provider as area-eligible.

CEs must verify with the school, by written or verbal verification, that the day care home is located in the school's attendance area. CEs must also verify with the school, by written or verbal verification, that the school in whose attendance area the day care home is located draws its attendance from a specific neighborhood.

EXCEPTION: Some rural areas or small towns will have a single school that serves the entire town or ISD. In this case, it is acceptable for the "specific neighborhood" from which the school draws attendance to be the entire town or ISD.

Written documentation may include a map with school boundaries, a letter confirming school boundaries, etc. Verbal documentation may include a telephone conversation with an ISD official knowledgeable in school boundaries.

NOTE: CEs may not use data for magnet schools, charter schools, or alternate schools that serve the entire ISD, in determining a provider's eligibility.

CEs must verify, by written or verbal verification from the ISD, which the school in whose attendance area the day care home is located, does not target its attendance to children with special needs. Schools such as alternate schools and schools that primarily or only serve children with disabilities, etc., may not be used.

CEs must retain documentation of all school data used in a tier determination. Documentation includes, but is not limited to, the list of schools, copies of all written information that you receive from school officials (i.e., maps of school boundaries, letters confirming school boundaries, etc.), and written documentation of all verbal information received from school officials.

Documentation of verbal contacts with school officials must include:

- The name of the school being used for the tier determination and the district in which the school is located;
- The name of the school official who was contacted;
- The date the school official was contacted;
- The phone number for the school official contacted; and
- The specific information you were given by the school official.

Failure to retain the required documentation could result in denial of a provider's Tier I eligibility and adverse action against the CE.

School data may not be used if any of the following occurs:

- The school in whose attendance area the provider is located is not on the current list of schools provided by TDA;
- The CE is unable to obtain written documentation or verbal verification from the school that the provider lives in an eligible attendance area;
- The school in whose attendance area the provider is located does not draw its attendance from a specific neighborhood (for example, the school is a magnet school, charter school, or alternate school);
- The school in whose attendance area the provider is located targets its attendance to children with special needs (for example, the school is an alternate school or serves primarily or only children with disabilities, etc.);
- The percentage of eligible children for the school in whose attendance area the provider is located is not equal to or greater than 50 percent.

4222 Area-Eligible Tier I Providers Based on Census Data

Area eligibility of a provider for Tier I reimbursement can also be determined by using Census data.

Current census data is available by utilizing FNS Area Eligibility Mapper or the Food Research and Action Center (FRAC) mapping website.

Links to both are located at <http://www.squaremeals.org>, select Child and Adult Care Food Program and a link to the website is located on the home page. A link is also located on the far right side of the CACFP Administration & Forms page.

FRAC provides links to CACFP mapping and SFSP mapping. Day care homes may receive Tier I reimbursement if they are located in an eligible area based on either the CACFP data or the SFSP data.

Updated Census data is provided annually in October. CEs may re-determine a Tier II day care homes' eligibility when new data is made available.

Tier I determinations based on census data are valid for five years from the effective date of determination. CEs must print the page that proves the day care home is located in an eligible area. CEs may use census block group, census tracts, or up to three adjacent census block groups to determine eligibility. Reference the information available on TDA's website located at the link above for specific instructions on obtaining census data.

4223 Resident Children in Area-Eligible Tier I Homes

Area-eligible Tier I providers who want to claim their own resident child(ren) must complete a *CACFP Meal Benefit Income Eligibility Form*.

"Provider's own children" includes all residential children in the household who are part of the economic unit of the family (See Section 9000 for definitions of economic unit and family). Children whose parents or guardians have made a contractual agreement, whether formal or informal, with a provider for residential care, and whose relationship with the provider is defined primarily by the child care situation, are not considered the "Provider's own."

When the CE receives the *CACFP Meal Benefit Income Eligibility Form*, the CE must verify whether it contains:

- Name of child(ren) and all household members;
- A signature of an adult household member;
- The date of signature;
- The last four digits of the social security number of the adult household member who signs the form, if part 4 is completed. If the adult household member signing the form does not have a social security number, the box "I do not have a Social Security Number" must be checked.

In addition, the CE must determine if the form contains categorical eligibility information or household size and income information for use in determining if the household qualifies for free or reduced-price meals.

The determining official must sign and date *the CACFP Meal Benefit Income Eligibility Form* acknowledging receipt, review, and completion of the form.

Categorical eligibility is based on a household's receipt of federal or state financial assistance:

Temporary Assistance of Needy Families (TANF)

- TANF Number –
 - a nine-digit EDG number beginning with any number "0 - 9"; or
 - an eight-digit EDG number beginning with any number "1-9" ,but not a zero

Supplemental Nutritional Assistance Program (SNAP)

- SNAP number –
 - a nine-digit Eligibility Determination Group (EDG) number beginning with any number "0 - 9"; or
 - an eight-digit EDG number beginning with any number "1-9" ,but not a zero

Food Distribution Program on Indian Reservation (FDPIR)

- FDPIR case number.

NOTES:

- Electronic Benefits Transfer (EBT) or Lone Star Card account numbers are not acceptable SNAP numbers on the application. If this occurs, contact the applicant to obtain the valid SNAP or TANF eligibility number.
- A copy of the award letter (Form H1009) is not acceptable documentation for eligibility.

If an appropriate TANF, SNAP, or FDPIR number is not provided, the CE or provider must verify whether the form contains the current income of each household member by source of income, (including the child(ren) enrolled for child care if they have income).

Family size and income standards change each July 1. TDA posts the updated information at <http://www.squaremeals.org>. CEs must use the income standards posted here to determine income eligibility.

If income is received in different frequencies (such as one household member receives income weekly while another receives income monthly), use the following calculations to obtain the **annual income** to determine the resident child's eligibility for free or reduced-price meals:

- Multiply monthly income by 12.
- Multiply bi-weekly income by 26.
- Multiply weekly income by 52.
- Multiply bi-monthly income by 24.
- Do not round the result.

CEs are not required to verify the income information that an area-eligible provider reports for a resident child.

The provider can be reimbursed at the Tier I rate for the resident child's meals if the CE determines the household to be categorically eligible for free meals; or income eligible for free or reduced-price meals. **NOTE:** Resident child(ren) must also be properly enrolled in the day care home in order to be claimed.

The effective date of a resident child's Tier I eligibility may be made retroactive to the first of the month in which the resident child's Tier I eligibility determination is made.

Tier I eligibility based on categorical or income eligibility is valid for the entire 12 months from either the:

- Signature date of the determining official **or**
- Signature date of the provider.

For example, a form signed October 5, 2016 is valid through October 31, 2017.

CEs must decide which date they will use as the effective date and apply that date to all eligibility determinations made. This decision must be documented in the CEs processes and procedures for determining eligibility.

Exception: If the date of the provider's signature is not within the month of determination or the immediately preceding month the effective date *must be* the signature date of the determining official.

4223.1 Annual Renewal of Eligibility

A new *CACFP Meal Benefit Income Eligibility Form* must be completed for a resident child(ren) every 12 months from either the signature date of the determining official or the signature date of the provider.

4223.2 Letter to Provider

CEs must give providers the *CACFP Meal Benefit Income Eligibility Form Letter to Provider – Tier I or Provider's Own Children*, along with the *CACFP Meal Benefit Income Eligibility Form* and the *Income Standards for Determining Child Nutrition Program Eligibility* (H1625-A). The *Income Standards for Determining Child Nutrition Program Eligibility* (H1625-A) contains only the family size and income standards for reduced-price meals.

The letter is in Spanish and English. It advises providers that, if their household income is at or below the levels indicated on Form H1625-A, meals served to their own children may be eligible for CACFP reimbursement.

4223.3 Automatic Eligibility for Head Start/Early Head Start/Even Start Participants

An area-eligible Tier I provider's resident child is automatically eligible for free meals if the child is enrolled as a participant in the:

- Head Start Program.
- Early Head Start Program.
- Even Start Family Literacy Program (Even Start) and the child has not yet entered kindergarten.

Therefore, the provider will receive Tier I reimbursement for meals served to the child.

To document that an area-eligible Tier I provider's resident child is categorically eligible based on Head Start, Early Head Start, or Even Start participation, the provider must furnish you with a letter from the:

- Head Start Program which states that the child is currently enrolled as a participant in the Head Start Program;
- Early Head Start Program which states that the child is currently enrolled as a participant in the Early Head Start Program;
- Even Start Program which states that the child is currently enrolled as a participant in the Even Start Program and that the child has not yet entered kindergarten.

The letter must be signed and dated by the local Head Start/Early Head Start/Even Start project director or an employee who is authorized to make the certification on behalf of Head Start/Early Head Start/Even Start.

CEs may assume that the person signing the letter on behalf of Head Start/Early Head Start/Even Start is authorized to provide the certification.

A copy of the Head Start/Early Head Start/Even Start certification letter is sufficient documentation and CEs would not need to obtain a *CACFP Meal Benefit Income Eligibility Form* for the provider's child.

Head Start/Early Head Start/Even Start certification letter must be retained as part of the CACFP records and must be available for inspection during a CACFP review, audit, or other official visit.

A resident child's categorical eligibility based on participation in Head Start/Early Head Start/Even Start must be updated annually. Therefore, every 12 months the provider must provide the certification again. Categorical eligibility based on enrollment in a HSP does not extend to all children in the same household or to the Provider.

If the provider does not submit a copy of a current Head Start/Early Head Start/Even Start certification letter to annually renew eligibility, or if at any time during the year the provider's child continues to participate in Even Start but enters kindergarten, and the provider wants to continue claiming the resident child the provider must complete a *CACFP Meal Benefit Income Eligibility Form*. The CE would be required to determine eligibility using the criteria and instructions provided in section 4223.

4223.4 State-Funded Pre-Kindergarten

Children that participate in a state-funded pre-kindergarten program at a school that participates in the National School Lunch Program are categorically eligible for free meals. The Provider must obtain documentation of the child's enrollment in the state-funded pre-kindergarten program from the school.

4230 Income or Categorical Eligible Tier I Providers

Providers who wish to demonstrate income or categorical eligibility for Tier I reimbursement must complete a *CACFP Meal Benefit Income Eligibility Form*. Income information reported by the provider must be compared to the current income eligibility guidelines to determine if the provider is income-eligible.

When the CE receives the *CACFP Meal Benefit Income Eligibility Form*, the CE must verify whether it contains:

- Name of provider and all household members;
- A signature of an adult household member;
- The date of signature;
- The last four digits of the social security number of the adult household member who signs the form, if part 4 is completed. If the adult household member signing the form does not have a social security number, the box "I do not have a Social Security Number" must be checked.

In addition, the CE must determine if the form contains categorical eligibility information or household size and income information for use in determining if the household qualifies for free or reduced-price meals.

The determining official must sign and date the *CACFP Meal Benefit Income Eligibility Form* acknowledging receipt, review, and completion of the form.

Categorical eligibility is based on a household's receipt of federal or state financial assistance:

Temporary Assistance of Needy Families (TANF)

- TANF Number –
 - a nine-digit EDG number beginning with any number "0 - 9"; or
 - an eight-digit EDG number beginning with any number "1-9" ,but not a zero

Supplemental Nutritional Assistance Program (SNAP)

- SNAP number –
 - a nine-digit EDG number beginning with any number "0 - 9"; or
 - an eight-digit EDG number beginning with any number "1-9" ,but not a zero

Food Distribution Program on Indian Reservation (FDPIR)

- FDPIR case number

NOTES:

- Electronic Benefits Transfer (EBT) or Lone Star Card account numbers are not acceptable SNAP numbers on the application. If this occurs, contact the applicant to obtain the valid SNAP or TANF eligibility number.
- A copy of the award letter (Form H1009) is not acceptable documentation for eligibility.

If an appropriate TANF, SNAP, or FDPIR case number is not provided, the CE must verify whether the form contains the current income of each household member by source of income, (including the child(ren) enrolled for child care if they have income).

Family size and income standards change each July 1. TDA posts the updated information at <http://www.squaremeals.org>. CEs must use the income standards posted here to determine income eligibility.

If income is received in different frequencies (such as one household member receives income weekly while another receives income monthly), use the following calculations to obtain the **annual income** to determine the Provider's eligibility for Tier I reimbursement:

- Multiply monthly income by 12.
- Multiply bi-weekly income by 26.
- Multiply weekly income by 52.
- Multiply bi-monthly income by 24.
- Do not round the result.

CEs must verify the income information or categorical eligibility information prior to determining a provider eligible for Tier I reimbursement. CEs may verify the income/categorical eligibility information by comparing it to written documents e.g. pay stubs, letters from employers, IRS tax information such as Form 1040, award letters, or through collateral contacts. CEs must keep a copy of the written documentation used to verify a provider's income/categorical eligibility.

A written record of collateral contacts made to verify a provider's income eligibility, including the name and telephone number of the person who verified the provider's income and the date of contact must also be maintained.

Tier I eligibility based on categorical or income eligibility is valid for the entire 12 months from either the:

- Signature date of the determining official **or**
- Signature date of the provider.

For example, a form signed October 5, 2016 is valid through October 31, 2017.

CEs must decide which date they will use as the effective date and apply that date to all eligibility determinations made. This decision must be documented in the CEs processes and procedures for determining eligibility.

EXCEPTION: If the date of the provider’s signature is not within the month of determination or the immediately preceding month the effective date *must be* the signature date of the determining official.

The determining official must sign and date the *CACFP Meal Benefit and Income Eligibility Form* acknowledging receipt, review, and determination of eligibility.

The following types of “income” must not be included when determining a household’s total income for Tier I eligibility:

Excluded Income from Federal Programs	
Category	Description
SNAP, WIC, Child Nutrition Benefits	Value of assistance to children and their families under the Richard B. Russell National School Lunch Act (NSLA), the Child Nutrition Act (CNA) of 1966, and the Food and Nutrition Act of 2008.
Housing assistance	• Reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970. • Payments received under the Cranston-Gonzales National Affordable Housing Act, P.L. 101-625. • Payments received under the Housing and Community Development Act of 1987.
Volunteer payments	• 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 the Act.

	• Payments to volunteers under section 8(b)(1)(B) of the Small Business Act (SCORE and ACE). • Payments and allowances to individuals participating in AmeriCorps to the extent excluded by the National and Community Service Act of 1990.
Child care	• The value of any child care provided or arranged, or any payment or reimbursement for costs incurred for such care, under the Child Care and Development Block Grant Act, as amended by section 8(b) of P.L. 102-586, 106 Stat. 5035. • Value of any “at-risk” block grant child care payments made under section 5081 of P.L. 101-508, which amended section 402 of the Social Security Act.
Old age assistance	Payments received under the Old Age Assistance Claims Settlement Act, except for per capita shares in excess of \$2,000.
Student financial aid	• Student financial assistance received under Title IV of the Higher Education Act of 1965, including the Pell Grant, Supplemental 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 the Act. • Payments received under the Carl D. Perkins Vocational Education Act, as amended by the Carl D. Perkins Vocational and Applied Technology Act Amendments of 1990, P.L. 101-392.
Disaster assistance	• National Flood Insurance Program (NFIP) payments received by property owners. • Payments under the Disaster Relief Act of 1974, as amended by the Disaster Relief and Emergency Assistance Amendments of 1989, P.L. 100-707.
Utility assistance	Payments under the Low-income Home Energy Assistance Act, P.L. 99-125.

Military compensation	• Payments under the Agent Orange Compensation Exclusion Act, P.L. 101-201. • Family Subsistence Supplemental Allowance (FSSA). • Privatized housing allowances to service members living in housing covered under the Military Housing Privatization Initiative. (See: Department of Defense (DOD) Military Housing Privatization, http://www.acq.osd.mil/housing/).
Combat pay	• Deployment Extension Incentive Pay (DEIP), which is given to active-duty service members who agree to extend their military service by completing deployment with their units without re-enlisting. This exemption applies only until the service members return to their home station. DEIP payments provided to service members who are not considered deployed are not exempt. • Also exclude combat pay when it is: ○ Received in addition to the service member's basic pay; ○ Received as a result of deployment to or service in an area that has been designated as a combat zone; and ○ Not received by the service member prior to deployment to or service in the designated combat zone*. *A combat zone is any area that the President of the United States designates by Executive Order as an area in which the U.S. Armed Forces are engaging or have engaged in combat.
Land payments	Income derived from certain sub-marginal land of the U.S. that is held in trust for certain Indian tribes.
Institutionalized child's income	Payments from any source directly received by a Residential Child Care Institution or institution on a child's behalf are not considered as income to the child.
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.

	NOTE: 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.
In-kind benefits	In-kind benefits (housing for clergy, cars for salespersons, employee medical or dental benefits, etc.) are not cash payments and, therefore, are not considered as income for the purpose of determining free and reduced price eligibility. School officials are not in a position to determine the value of in-kind benefits.
Other Excluded Income	
- Payments received from a foster care agency or court for the care of foster children - Loans, such as bank loans, since these funds are only temporarily available and must be repaid - Infrequent earnings received on an irregular basis, such as payment for occasional babysitting or yard work.	

The above list is not all inclusive as legislation is periodically enacted that excludes income. CEs should periodically check Appendix to *Subpart K of Part 416 – List of Types of Income Excluded under the SSI Program as Provided by Federal Laws Other Than the Social Security Act*: http://www.socialsecurity.gov/OP_Home/cfr20/416/416-app-k.htm

The income of a provider who is associated with a corporation will differ from other providers in that the provider will likely have wages from the corporation rather than self-employment income. In addition, if the provider is a shareholder of the corporation, the provider may also receive dividends from the corporation. The provider must include both the wages and dividends received from the corporation as household income.

Providers are not required to keep records of their operating costs for CACFP activities. However, if they want to claim reimbursement for meals served to their own children (based on family size and income standards) they must report the entire amount of CACFP reimbursement received as income unless they choose to keep records of operating costs to justify an adjusted income.

4231 Resident Children in Income/Categorically Eligible Tier I Homes

Provider's determined to be income or categorically eligible for Tier I reimbursement may claim and receive Tier I reimbursement for meals served to the provider's own child(ren) without further application on behalf of the provider's child. Additionally, meals for all nonresident children will be claimed at the Tier I rate without need for individual determinations for each nonresident child's eligibility.

4240 Tier II Providers

Provider's that do not qualify as Tier I will receive Tier II reimbursement. Tier II status does not have an expiration date and at any time during the provider's participation the CE can re-determine eligibility based on new school data as released by TDA, or updated census data, or if the provider experiences a change in household circumstance. A provider can also request a re-determination.

4241 Resident Children in Tier II Homes

Meals that are served to resident children (excluding resident foster children) in Tier II homes cannot be claimed for reimbursement.

4242 Nonresident Children in Tier II Homes

Tier II providers must be allowed to choose whether or not they want to receive Tier II reimbursement for all meals or if they want the CE to make eligibility determinations for the households of the children enrolled in their care.

The *Provider Application* is where the provider designates his/her choice for reimbursement option.

The choices are:

- Have CE attempt to identify all income and categorically eligible children enrolled and receive Tier I rates for those children identified.
 - If a provider chooses this option the CE must ensure all households receive a
 - *CACFP Meal Benefit Income Eligibility Form*;
 - *Income Eligibility Guidelines for Determining Free and Reduced-Price Benefits (H1625-A)*;
 - *List of Eligible Federal/State Funded Programs (H1660)*; and
 - *CACFP Meal Benefit Income Eligibility Form Letter to Households – Tier II Day Care Homes*.
- Have CE attempt to identify only categorically eligible children enrolled and receive Tier I rates for those children identified.
 - If a provider chooses this option the CE must ensure all households of enrolled children who the CE or Provider have identified as categorically eligible receive a:
 - *CACFP Meal Benefit Income Eligibility Form*;
 - *Income Eligibility Guidelines for Determining Free and Reduced-Price Benefits (H1625-A)*;

- *List of Eligible Federal/State Funded Programs (H1660)*; and
- *CACFP Meal Benefit Income Eligibility Form Letter to Households – Tier II Day Care Homes* provider.
- Receive Tier II rates for all enrolled children.
 - If a Provider chooses this option the CE does not have to distribute the above forms to households.

NOTE: The *List of Eligible Federal/State Funded Programs (H1660)* can only be used for households of nonresident children enrolled in Tier II homes.

The provider may change his/her choice at any time during the program year.

The CE or the provider may distribute these forms and the households may return a completed *CACFP Meal Benefit Income Eligibility Form* to either the CE or the Provider. If the household returns a completed form to a provider, the provider must submit the form to the CE and the CE must make the determination of whether or not the child is eligible for Tier I reimbursement.

Tier I eligibility is valid for the entire 12 months from either the:

- Signature date of the determining official **or**
- Signature date of the parent or guardian.

For example, a form signed October 5, 2016 is valid through October 31, 2017.

CEs must decide which date they will use as the effective date and apply that date to all eligibility determinations made. This decision must be documented in the CE's processes and procedures for determining eligibility.

Exception: If the determination of eligibility is not made within the same month or the month preceding the parents or guardians date of signature the effective date *must be* the signature date of the determining official.

The determining official must sign and date the *CACFP Meal Benefit and Income Eligibility Form* acknowledging receipt, review, and determination of eligibility.

The determination of whether or not the child is eligible for Tier I reimbursement may be retroactive to the first day of the month in which the eligibility determination is made.

CEs may tell a provider how many of the children in his/her care are Tier I and Tier II, but must not tell the provider which children are Tier I and Tier II.

CEs must review the *CACFP Meal Benefit Income Eligibility Form* to verify that it contains:

1. Name of all household members;
2. A signature of an adult household member;
3. The date of signature;
4. TANF or SNAP number:
 - a nine-digit EDG number beginning with any number “0 - 9”; or
 - an eight-digit EDG number beginning with any number “1-9” ,but not a zero
5. FDPIR case number; or a
6. Case number from an eligible program as listed on the *List of Eligible Federal/State Funded Programs* (H1660).

NOTE: Electronic Benefits Transfer (EBT) or Lone Star Card account numbers are not acceptable SNAP numbers on the application. If this occurs, contact the applicant to obtain the valid SNAP or TANF eligibility number.

If a TANF, SNAP or FDPIR or eligible case number from the *List of Eligible Federal/State Funded Programs* (H1660) is not provided, or if incomplete or incorrect numbers are provided, the application must include:

- Names of all household members.
- Last four digits of the social security number of the adult household member who signs the form (or check the “I do not have a Social Security Number” box, if the adult household member signing the form has no social security number).
- Current income of each household member, by source of income.

Family size and income standards change each July 1. TDA will post on the TDA website, and send via email the current standards. If income is received in different frequencies, use the following calculations to obtain the annual income to determine eligibility:

- Multiply monthly income by 12.
- Multiply bi-weekly income by 26.
- Multiply weekly income by 52.
- Multiply bi-monthly income by 24.
- Do not round the result.

If a nonresident child in a Tier II home is enrolled as a participant in the Head Start Program, Early Head Start Program or the Even Start use the procedures and guidelines outlined in Item 4223.3 above.

A nonresident child's eligibility must be updated annually. Therefore, documentation used to determine the nonresident child's eligibility must be obtained again, or the provider will receive Tier II reimbursement for that child.

4250 Foster Children in Tier I and Tier II Homes

Foster children are considered categorically eligible, and a provider will receive Tier I reimbursement for a foster child (including a resident foster child) if the household or provider submits:

- A copy of Form 2085FC, *Placement Authorization Foster Care/Residential Care* from DFPS; or
- Documentation that the foster child is enrolled in a Head Start Program, Early Head Start Program or Even Start (see Item 4223.3 above); or
- A *CACFP Meal Benefit Income Eligibility Form* for the foster child.

Area eligible Tier I Homes

Any of the above information can be submitted by the provider to establish a resident foster child's eligibility so the provider can receive the Tier I rate for meals served to the resident foster child.

Tier II Homes

Any of the above information can be submitted:

- By the provider to establish a resident foster child's eligibility so the provider can receive the Tier I rate for meals served to the resident foster child.
- By the household of an enrolled foster child so that the provider may receive the Tier I rate for meals served to the nonresidential foster child (for those providers who chose to have eligibility determined by the CE).

The following requirements must also be met in order for a Tier II provider to claim reimbursement for meals served to a **resident** foster child:

- The foster child must be officially enrolled and participating with the provider.
- At least one nonresidential child, enrolled for and receiving child care in the provider's home must be in attendance and participating in the meal service.

NOTE: Resident foster children who meet these requirements are the only resident children for whom a Tier II provider may claim meal reimbursement. A Tier II provider may not claim reimbursement for meals served to resident foster children who do not meet these requirements.

Households, including providers, may include foster children on the *CACFP Meal Income Eligibility Form* if doing so will help the household meet the income criteria for free or reduced-price meals (Tier I reimbursement).

4260 Notification of Tier I/Tier II Determinations

CEs are required to use TDA's *Notice to Providers of Tier Determination* (H1659) form, to notify providers of their tier status.

A determination that a provider is Tier II is an adverse action that the provider may appeal. Notices of adverse action must be sent by certified mail - return receipt requested.

However, CEs that want to use an alternate method to notify providers of Tier II determinations other than sending the notices certified mail - return receipt requested, may submit a written request for an alternate method of notifying providers of Tier II determinations to their Community Operations Field office for approval.

NOTE: CEs that currently use an alternate method to notify providers of meal disallowances that has been approved by TDA may also use the same alternate method to notify providers of Tier II determinations, without submitting another request for approval.

4270 Documentation and Reporting

CEs must maintain and submit information related to the number of Tier I and II providers and the number of children enrolled by Tier I and II providers.

CEs must also maintain all documentation used in determining day care homes' Tier I or Tier II.

No later than April 1st of each year, CEs must submit to their TDA Community Operations Field office a list of providers claiming categorical eligibility based on the provider's eligibility for SNAP.

The list must contain the following information:

- Categorically eligible Tier I providers, who claim eligibility for Tier I reimbursement for all children in care based on the provider's SNAP eligibility.

- Area-Eligible Tier I providers, who have established their child’s eligibility for Tier I reimbursement based on the provider’s SNAP eligibility.
- The name of the provider.
- The address of the provider.
- The SNAP number for each provider.

4280 Sharing Eligibility Information

Contracting entities (CEs) operating other Child Nutrition Programs (CNP), such as School Food Authorities (SFAs) operating the National School Lunch Program/School Breakfast Program (NSLP/SBP) **may** disclose children’s names and all eligibility information, including eligibility status (whether they are eligible for free or reduced price meals or free milk), to **persons directly connected** with the administration of other Federal Child Nutrition Programs authorized under the National School Lunch Act (NSLA) and the Child Nutrition Act of 1966, which includes the Child and Adult Care Food Program (CACFP).

Because CEs are not required to give prior notice or receive consent from the household before sharing this information, the information obtained is subject to the same confidentiality and disclosure requirements as information obtained directly from a household on an application for eligibility.

The term “**persons directly connected**” with the administration of another Child Nutrition Program can include CEs of the CACFP. Not all employees of a CE are entitled access to eligibility information. “**Persons directly connected**” with the administration of the CACFP must legitimately “need to know” the eligibility information in order to carry out their program responsibilities. The CE providing the information must ensure that the requestor has a genuine “need to know” before providing the information.

EXAMPLE: The individual responsible for documenting the eligibility of a child would have clear need to access eligibility information, while an individual serving meals or conducting recreation programs would not.

There is specific information that CEs must obtain and use as documentation to determine that a child is eligible for Tier I meals.

The CE would need to obtain information to:

- Document that the eligibility information applies to the specific child in question; and
- Verify the source/validity of the information. For example, the name of the CNP and the person providing the information, the date the information was obtained and the person at the CEs office who obtained the information.

The CEs should share information that would minimally identify the child, however, it is understood that in some cases, it may be necessary to share more than the child's name to ensure that the eligibility determination applies to a specific child.

Example: A CE attempting to document the income eligibility of a child named "John Smith" may need to provide the child's date of birth to the CNP so that the CNP can verify that the information being provided applies to the "John Smith" in question.

Obtaining eligibility information from another CE would only apply if a Tier II provider chooses to have the CE determine the individual eligibility of the enrolled children for Tier I or Tier II meals.

Eligibility information received from another CE should be documented in writing; however, verbal documentation is sufficient to verify the information.

TDA has developed a *Shared Eligibility Form*, located at <http://www.squaremeals.org> under CACFP Administration and Forms for CEs to use to document eligibility information received from another CE. CEs can either provide the form to the other CE for completion or may complete the template based on verbal information received.

CEs may use the TDA form or develop a form of their own to document the eligibility information. CEs must ensure all required elements are captured to document eligibility.

The following are the required elements:

- Name of CE providing the information;
- Telephone number of CE providing the information;
- Date information is obtained;
- Name of CE representative providing the eligibility information;
- Name of child;
- Child's eligibility category; and
- Printed name, title, signature, and date of signature of CE's representative.

NOTE: The disclosure of information by another CE is that CE's option and not required by regulations.

CEs must maintain control over the use of all eligibility information and guard against improper disclosure, no matter how the information was obtained.

4290 Confidentiality

The privacy and confidentiality of personal data must be protected and it must be made clear that the CE staff receiving eligibility information, either directly from a household or from another CE, cannot share the information with any other entity. CEs must also ensure that the information is securely stored and the number of individuals that have access to it is limited.

CEs and providers must not release any information that contains a program participant's name or other individual information (except as outlined above in Item 4280). Summary information, such as number of program participants eligible for benefits can be released except when disclosure of the information would allow children to be identified, such as release of information for one particular day care home since there are a small number of children in each home and individual identities could be deduced.

4300 Program Administration

If a CE creates, develops, or produces materials with federal funds, USDA FNS may reproduce or publish the material. USDA FNS may also authorize others to reproduce, use, or publish the material. CEs may reproduce any material developed by TDA or USDA as long as the reproduction is:

- Used in an FNS program.
- Not used for profit.

4310 Management and Monitoring

CEs are responsible for the management and monitoring of the day care homes it sponsors.

These responsibilities include:

- Making pre-approval visits.
- Adding, submitting changes for, and terminating day care homes.
- Ensuring Providers maintain a current license/registration
- Ensuring Providers maintain current enrollment documents.
- Conducting training.
- Conducting reviews.
- Providing technical assistance.
- Distributing payments to providers.
- Ensuring providers submitted for participation are not disqualified from participation in any Child Nutrition Program (see Section 1000, *Introduction* for a list of other Programs).

4311 Pre-Approval Visits

Before a day care home can begin participation, the CE must conduct a pre-approval visit. During the visit, program benefits and requirements, including meal pattern requirements, must be discussed and the CE must determine whether the provider can provide food service in accordance with CACFP requirements.

CEs must use TDA's *Pre-Approval Visit* (H1607-P), or alternate, to document pre-approval visits.

4312 Parental Notification

CEs must notify the households of all children enrolled in the day care homes they sponsor that their provider participates in the CACFP. The *Building for the Future* flyer located at <http://www.squaremeals.org> under CACFP Administration and Forms must be used to satisfy this requirement.

The flyer presents the information in English and Spanish and provides:

- A brief statement about the CACFP.
- Notice of the provider's participation in the CACFP.
- The USDA and TDA toll free telephone numbers for households with questions or concerns about the CACFP.
- The name and telephone number of the CE with administrative oversight of the day care home (CEs must enter this information before distributing the flyer to the provider or households).

CEs must retain documentation of its method of distribution. This flyer must be distributed annually by the beginning of each CACFP Program Year and must also be provided to households who enroll children for child care during the CACFP Program Year.

CEs must ensure that each provider posts the English and Spanish versions of this flyer in their day care home where it can be easily seen. Additionally, CEs must also post the English and Spanish versions of this flyer in their administrative offices.

4313 Distribution of Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Materials

CEs are required to distribute information regarding the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) annually to the households of each enrolled child.

TDA provides the updated WIC information in English and Spanish each year on the TDA website at <http://www.squaremeals.org> under CACFP Administration & Forms.

CEs may distribute the WIC materials to the households directly or may provide the material to the day care homes and instruct the providers to distribute the materials. CEs must document the process used to distribute the materials and retain this documentation with its Program records.

4314 Enrollment of Children

CEs and providers must maintain proof of proper enrollment for all children who receive meals that are claimed for reimbursement.

The following information must be included on an enrollment form, in enrollment documentation, or in alternate documentation if a child is to be considered properly enrolled:

- Child's name;
- Child's date of birth;
- Meals/snacks normally served to the child while in care;
- Days and hours the child is normally in care;
- Enrollment and withdrawal dates;
- Parent's or guardian's signature; and
- Date of signature.

The enrollment documentation must be completed and submitted by the parent/guardian, and the parent/guardian must sign the enrollment documentation upon completion. The enrollment documentation must provide the means for the parent/guardian to indicate or enter each of the required enrollment elements.

Providing lines to write on, check boxes, instructions to circle the applicable information, can do this.

FOR EXAMPLE:

Meals/snacks normally served to the child while in care (circle all that apply):						
Breakfast	AM Snack	Lunch	PM Snack	Supper	Evening Snack	
Days and hours the child is normally in care:						
Days:		M	T	W	TH	F
		Hours: _____ am to _____ pm				

In the above examples the parent/guardian will complete the required information. The CE or provider must not complete any of the information after the parent/guardian has signed and dated the document.

The CE or provider can include on the enrollment documentation the day care homes hours of operation and the meals provided by the day care home, thereby informing the parent/guardian of the provider's normal hours and meals.

EXCEPTION: Providers that have a means to electronically collect enrollment information and print a document or documents for parents to sign, after the documentation is completed, may use that method. For example, the provider inputs the required information as the parent or guardian relays it to them, or provides a computer for the parent or guardian to enter the information, then prints and has the parent or guardian sign the form.

Enrollment information must be updated annually (that is, at least every 12 months). The provider can give the previous enrollment documentation to the parent/guardian to indicate changes and re-sign and re-date; or they can obtain all new enrollment documentation. The provider **may not** give the parent/guardian a statement to sign saying the information had not changed and attach it to the previous enrollment documentation. The parent/guardian must be given the opportunity to review the information, make any changes and re-sign and re-date.

The *CACFP Meal Benefit Income Eligibility Form* can be used to document some of the required enrollment information, but the remainder of the required information would have to be captured on other enrollment documentation and maintained with the child's file.

The Texas Department of Family and Protective Services (DFPS) have a Form 2935, *Admission Information – Centers*, that contains all the required elements for enrollment. CEs and providers are responsible for ensuring the currently posted version of the form continues to contain all required elements for enrollment prior to use.

The form can be obtained from the DFPS website at www.dfps.state.tx.us, select "Child Care Licensing" in the menu on the left hand side of the screen, scroll approximately half way down the screen and choose "All child care forms."

4315 Policy Statement

The Contracting Entity Management Plan contains the *Free and Reduced-Price Policy Statement* which CEs must agree to in order to participate in the CACFP. CEs must sign this statement with their initial application and with the renewal (continuing) application, if needed.

4316 State Government Privacy Policy

State Government Privacy Policy legislation stipulates that an individual has the right to review their personal information as maintained by a state agency. An individual also has the right to request the correction of inaccurate information. TDA is required to consider the request, but reserves the right to determine whether the requested correction is appropriate.

A privacy statement is written at the bottom of all TDA forms that requests personal information about a specific individual, and at the bottom of the TX-UNPS logon page under TDA Disclaimer.

4320 Adding, Terminating, or Making Changes to Day Care Homes

Day care homes must be located in the providers' private residence, the residence of another person, or a rented or unoccupied private residence. As a result, day care homes that are located in commercial properties, for example, churches, schools, corporations, are ineligible to participate in the CACFP. Providers are limited to one private residence when participating in the CACFP.

While some providers have incorporated, or formed limited liability corporations (LLCs), a corporation may not participate as a day care home in the CACFP, therefore to participate in the CACFP, the sponsor and provider must comply with these requirements:

- Each home must be operated by a different provider.
- The CE must enter into the Agreement (*Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)*) with the provider, **not** the corporation or LLC.

HHSC allow licensed day care homes to provide the "operation name" on the license. This name can be the name of the corporation, LLC, or the name of the provider. If the license is not issued in the name of the provider the CE must submit, with the license, a copy of the HHSC print screen that displays the Administrator/Director Name. This must be the person(s) named on the Agreement. See Section 11000, *Resources* for a sample HHSC print screen.

In cases where more than one provider operates from a single home, all providers who are licensed at the same residence must care for different children and must participate under the sponsorship of a single CE.

CEs must submit all information and documentation to TDA by the last day of the month for the request to be effective for that same month. In some cases, TDA may be able to approve participation or changes to participation with an effective date in the month prior to submission.

If the information and/or documentation submitted by the CE is incorrect or incomplete, TDA will return the incomplete information and request incomplete documentation before approval. Submitting incomplete or incorrect information or documentation could result in the effective date being a month or months **after** the initial submission, so TDA recommends requests are submitted as early in the month as possible to allow for corrections to be made during the same month.

REMINDERS:

- Providers disqualified or excluded from participation in a Child Nutrition Program may not participate in the CACFP.
- Providers that lose their license/registration may not be claimed or participate in the CACFP. It is the sponsor's responsibility to ensure each provider is licensed or registered before submitting an application for participation or a claim each month.

Add New Day Care Homes

To add a new day care home, CEs may complete the provider application and the budget detail in TX-UNPS and mail, fax or email the remaining required documentation to TDA.

The following information must be submitted:

- *Monitoring Staff Information* (in TX-UNPS) (applies to sponsors of 50 or more homes, including homes being added);
- *Contracting Entity Budget* (in TX-UNPS) amending the CE's budget as the addition of homes will increase the budget;
- *Provider Application* (in TX-UNPS) for each home; and
- A copy of the day care home's license/registration.

CEs must maintain on file a copy of the original *Provider Application* and *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)*, for each home they sponsor and will enter the dates of signature for both the sponsor representative and provider(s) from the agreement in the spaces indicated on the provider application. Sponsors must provide each day care home a copy of the original provider application and *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)*.

These documents must be provided, upon request, to TDA. In addition, the completeness and accuracy of these documents will be evaluated during administrative and provider reviews.

Making Changes to Provider Application (Revisions)

To make a change (such as changing meal times), CEs may complete the provider application in TX-UNPS and mail, fax or email the remaining required documentation to TDA.

The following information must be submitted:

- *Provider Application* (in TX-UNPS); and
- Any additional documentation needed dependent on the change. For example, if the change is an address change for a licensed day care home, the CE must submit a copy of the new license that reflects the address change and proves the home is licensed to operate at that location.

CEs do not have to obtain the provider's signature on the provider application for changes the CE makes on behalf of the provider, however; the CE must give the provider a copy of the provider application with the changes indicated and maintain a copy on file. The CE can print the provider application from TX-UNPS to accomplish this. TDA will verify compliance with this requirement.

Terminating a Day Care Home

To terminate (close) a day care home, CEs may complete the process in TX-UNPS and mail, fax or email any required documentation to TDA.

The following information must be submitted:

- *Monitoring Staff Information* (in TX-UNPS) (applies to sponsors of 50 or more homes, this is not needed if the termination of homes decreases the CE's sponsorship to below 50); and
- *Contracting Entity Budget Detail* (in TX-UNPS) amending the CE's budget as the termination of homes will decrease the budget.

NOTES:

- CEs cannot submit day care homes for participation until the home has at least one non-residential child in attendance. CEs can begin the application process with the provider, but must wait until the provider submits enrollment documentation for a non-residential child to submit an application and documentation to TDA.
- Submitting additions, terminations, and changes via paper may delay the approval process. TDA highly recommends CEs use TX-UNPS.

TDA will not approve a day care home's participation, and CEs cannot claim reimbursement or administrative payments for meals served, before the latest of the following dates:

- Effective date of the day care home's license/registration.
- Date of the pre-approval visit.

- Beginning effective date on the *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* between the provider and CE.
- Latest date that the *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* is signed by the provider(s) or CE representative.
- Date of participation that TDA assigns.

Example: The beginning effective date on the *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* is February 21, 2017; the day care home's license is effective March 1, 2017, the pre-approval visit was conducted March 10, 2017. The earliest the Provider could begin claiming would be March 10, 2017, the date of the pre-approval visit.

Additionally, CEs may not claim meals for a provider who is not in compliance with meal pattern or other program requirements, regardless of the date TDA has approved the provider for participation and claiming.

CEs may not allow a new provider a “grace period” to meet meal pattern or other program requirements. CEs must disallow any meals that do not meet requirements from the beginning of the provider’s participation. CEs that make special provisions for new providers may be placed in the serious deficiency process for failure to perform administrative and financial responsibilities.

4321 Denials

A day care home’s participation will be denied if:

- The provider is already participating with another sponsor.
- The provider requested a good cause transfer, but the transfer letter from TDA is not submitted with the application.
- The provider has been declared seriously deficient and is on the National Disqualified List (NDL) or the Texas Excluded SFSP List (TEXSL).
- The provider is currently participating in the Program and signs a *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* prior to June 1 or after September 30.
- The provider signed an application and *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* with multiple CEs between June 1 and September 30. The CE with a *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* with the earliest signature date of both the provider(s) and the sponsor representative has the legally binding application and agreement.
- A copy of the provider’s license/registration was not submitted.
- The provider is otherwise ineligible to participate.

4322 Resuming Provider Participation

A provider whose *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* has been terminated by mutual consent that wants to resume participation in the same Program Year must participate with the same sponsor, unless:

- The provider has "good cause" for a transfer and TDA approves the transfer to another CE. Reference Item 4324, *Transfers*, for more information.
- The provider signs a *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* for the next program year during the open enrollment period (June 1 through September 30 of each program year).

CEs must submit the same items as required in Item 4320, *Adding, Terminating, or Making Changes to Day Care Homes*, to resume a Provider's participation.

4323 Open Enrollment

Providers may select a new sponsor, without prior approval from TDA, between June 1 and September 30 of each program year. *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* signed during the open enrollment period are effective October 1 of the following program year.

A new provider can sign a *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* with a CE at any time during the program year. If the *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* is signed between June 1 and September 30, the provider may choose another CE before the end of the open enrollment period to be effective October 1 of the following program year.

If a provider signs an application and *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* with more than one CE during open enrollment, the *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* that was signed earliest by both the sponsor representative and the provider(s) is legally binding. Once a provider has selected a CE, the provider may not transfer to another CE without prior approval from TDA. Under no condition may a provider participate under the sponsorship of two CEs during a given month.

Sponsors may not obtain a newly signed *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* during the open enrollment period from existing providers in an attempt to prevent the providers from transferring to another sponsor during open enrollment.

A newly signed *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* signed by a sponsor and its existing provider will not be considered as “signed earliest by both the sponsor representative and the provider” if the provider signs with another sponsor during the open enrollment period.

4324 Transfers

Prior to open enrollment, CEs cannot recruit nor enter into a *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* for the next program year with providers who are currently participating in the CACFP.

Providers who can document good cause for transferring may, with prior approval from TDA, enter into an agreement with another CE at any time during the program year.

If a provider wants to transfer, he or she must:

- Request in writing, and receive, prior approval for the transfer.
- Demonstrate good cause for the transfer request.
- Submit a letter to his/her current CE stating the intention to terminate the agreement, and the effective date of termination.

"Good cause" for transferring from the sponsorship of one CE to another during the Program year is limited to the following conditions:

- A CE denies a day care home access to the Program.
- A CE reduces the level of benefit a day care home receives under the Program, for example, the CE will not allow providers to claim suppers or weekend meals because the CE does not want to monitor those meal services.
- The day care home moves out of the CE's service area.
- Any other good cause as determined by TDA.

It is the provider's responsibility to demonstrate that such condition exists.

When approving a transfer based on good cause, TDA will specify the earliest dates on which a new *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* may be signed or become effective. Transfers may be approved any time throughout the program year when there is good cause. The approval granted by TDA to transfer is only effective one time. A provider may not use the same transfer letter to transfer between multiple CEs.

Occasionally, a CE will cease participation in the CACFP prior to the end of the Program year. When this happens, TDA notifies the providers that they are approved to transfer to another CE. No CE may execute a *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* with a provider who has been approved for transfer, prior to the date of notification.

CEs adding a provider that was previously under the sponsorship of another CE during the same program year must submit the termination letter/approval to transfer letter with all other required documentation when adding the home.

Any costs CEs incur while recruiting a current or former CE's providers, prior to June 1 or prior to the date that TDA has approved a provider's transfer, are unallowable. At a minimum, records must include:

- Itemized accounts of recruiting costs.
- The first date of contact with the provider.

Failure to properly request a transfer may delay the processing of your claim or result in a reduced reimbursement.

4330 Training

CEs must train their administrative staff on CACFP requirements before staff assumes CACFP duties and again during each program year thereafter. CEs must also train day care homes on CACFP requirements before the home begins participating in the CACFP and again during each program year thereafter.

CEs must retain documentation of the CACFP training provided to homes and staff.

Documentation must include:

- Date of training.
- Location of training.
- Training topic(s).
- Name(s) of participant(s).
- Written or electronic signature of the participant(s).
- Name(s) of trainer(s), if applicable.

CEs must plan trainings that are appropriate to the experience level of the CE's staff and providers. Experienced and inexperienced staff and providers should not get the same training year after year. Repetition of some information may be necessary to ensure continued Program compliance.

Although all topics must be included in the annual training, CEs may provide more information on some topics than others. Training should always address areas in which staff and providers have problems.

There is no requirement for the amount of time spent on training. Therefore, CEs may only need a short review on some topics, while other topics require a longer period of time. Training may be conducted in a variety of ways to meet the needs of the staff and providers.

CEs may use classroom style, on-site, distance learning (with the exceptions listed below), or other innovative training techniques, provided the training is properly documented and the training accomplishes the regulatory requirements for training content and frequency.

However, CEs may not fulfill the training requirement by providing a training video to staff and providers and requiring them to certify that they watched it. Training on video, web-based training, and/or other independent learning approaches are only permitted to fulfill the requirement if there are methods to verify that each trainee has actually received the training, i.e., pre- and post-tests, activities, exercises, etc. CEs may use electronic signatures to verify that staff and providers have completed electronic training.

Training can also assist CEs and providers in improving all aspects of Program operations, through educating staff, providers, children, and parents on the importance of physical activity and limiting the use of electronic media thereby improving the health and well-being of our children and fighting childhood obesity. Integrating this information into required training sessions is one way to meet this effort.

USDA has provided informational materials related to physical activity and limiting electronic media use as well as others which are free to CEs and can be downloaded and printed for use in trainings and other setting. To obtain these materials visit the USDA website at:

<http://healthymeals.nal.usda.gov/cacfp-wellness-resources-child-care-providers>

CEs are encouraged to use these free resources before developing or purchasing others, however under certain circumstances CEs may be able to develop and distribute their own materials related to physical activity and limiting electronic media use and use CACFP funds to pay for those materials.

CEs must ensure:

- The materials (e.g., training curricula, toolkits, newsletters, pamphlets, etc.) emphasize the link between nutritious meals and physical activity and/or limiting the use of electronic media; and
- Costs for these materials are reasonable, necessary, and allocable as to their content in relationship to CACFP requirements.

Reference Item 7400, *Nonprofit Food Service*, and FNS Instruction 796-2, *Financial Management – Child and Adult Care Food Program* for further information.

4331 Contracting Entity Training

CEs must train staff that performs key CACFP activities in the following areas and subtopics before staff assumes the duties and annually thereafter:

- Program Meal Pattern
 - Infant and child meal pattern
 - Serving sizes for age groups
 - Creditable foods
 - Meal service styles
 - Accommodating special needs diets
 - Menu planning
- Meal Counts
 - Daily
 - Weekly
 - Monthly
- Claims Submission
 - Due date
 - Late claims
 - Adjusted claims
- Claims Review Procedures
 - Review elements
 - Serious deficiency process
 - Appeal rights
- Recordkeeping Requirements
 - Daily, weekly, monthly forms
 - Child Nutrition Program Application
 - Annual enrollment information
 - Meal production records

- Attendance records
- Financial Records
- Record retention
- Reimbursement System
 - Tiering structure
 - Rates
 - Payment schedule
- Civil Rights

TDA provides Civil Rights training materials on the TDA website at <http://www.squaremeals.org>, click on F&N Resources, then “Training,” select “Online Education and Self Study,” and finally choose the English or Spanish course.

TDA may require CEs to attend additional training during the program year. CEs will be notified if and when mandatory training is scheduled.

Key CACFP activities include:

Budget	Procurement	Enrollment	Eligibility Determination
Attendance Records	Meal Preparation	Meal Service	Meal Counting
Claim Preparation	Monitoring	Civil Rights	Training

NOTE: Failure to comply with mandatory training requirements will result in placement of your organization and responsible principals and individuals in the Serious Deficiency Process.

4332 Provider Training

CEs must train their providers in the following areas and subtopics before the providers begin participation, and annually thereafter:

- Program Meal Pattern
 - Infant and child meal pattern
 - Serving sizes for age groups
 - Creditable foods
 - Meal service styles
 - Accommodating special needs diets
 - Menu planning
- Meal Counts
 - Daily
 - Weekly
 - Monthly

- Claims Submission
 - Due date
 - Late claims
 - Adjusted claims
- Claims Review Procedures
 - Review elements
 - Serious deficiency process
 - Appeal rights
- Recordkeeping Requirements
 - Daily, weekly, monthly forms
 - CACFP Meal Benefit Income Eligibility Form
 - Annual enrollment information
 - Meal production records
 - Attendance records
 - Record retention
- Reimbursement System
 - Tiering structure
 - Rates
 - Payment schedule
- Civil Rights

TDA provides Civil Rights training materials on the TDA website at <http://www.squaremeals.org>, click on F&N Resources, then “Training,” select “Online Education and Self Study,” and finally choose the English or Spanish course.

4333 Training Documentation

CEs must maintain documentation of all training sessions that include the following:

- Date of training,
- Location of training,
- Training topics,
- Names of participants, and
- Written or electronic signature of the participants.

When a provider completes a required training course, the CE must present the provider with written documentation acknowledging p completion of the training.

The documentation must include the:

- Name of the provider
- Title of the training
- Date that the training was completed
- Name of the CE
- Name of the trainer who provided the training
- Written or electronic signature of an authorized representative of the CE

NOTE: TDA materials are produced using federal funds for TDA-sponsored training events and as a tool for attendees to reference and use for training their own staff and providers. No part of TDA's publications may be reproduced in any form or by any means for profit or for any purpose other than use in USDA FNS programs.

TDA cannot guarantee that non-TDA sponsored program training will contain current or correct information. CEs should contact TDA if there are any questions about information received during training.

NOTE: HHSC may or may not recognize self-instructional trainings, based on TDA materials, for hours of training required for day care licensing.

4340 Reviews

CEs must conduct reviews of each of its day care homes to determine compliance with all Program requirements.

Any member of the CE's organization who enters a provider's home must carry photo identification that includes the name of the individual and the name of the organization. A Texas Driver's License or Texas ID card is not sufficient to meet this requirement because it does not identify the individual as an employee of the CE's organization.

CEs are required to review each of their day care homes:

- At least three times per year (based on the 12-month review period of each home), unless the CE is averaging its reviews.
- Once within the first four weeks of Program operations with the sponsor.
- At least once every six months (unless averaging reviews).

NOTE: See Item 4341, *Review Averaging*, for procedures and requirements for review averaging.

Two of the reviews conducted must be unannounced (unscheduled); the third review may be announced or unannounced at the CE's discretion, during each home's 12 month review period.

Prior to conducting an announced review, CEs must notify the provider in writing.

When planning unannounced reviews CEs must ensure that the planning of the reviews does not allow for the unannounced review of a specific home to be conducted at the same time each year. For example, reviews that always occur during the third week of any given month, or never occur during the first week of a month when claims are being processed.

Unannounced reviews are designed to help CEs ensure providers are operating the Program in accordance with regulations and policies, and unannounced reviews that are always scheduled at the same time, therefore are known to be expected by a provider, are less likely to uncover management deficiencies and Program abuse, and undermine the intent of unannounced reviews.

CEs must observe an entire meal service at each required review. The duration of the meal service is designated on the *Provider Application* (beginning and ending times). Only one review during the home's 12-month review period may include the observation of a snack rather than a meal. If a provider participates on Saturday or Sunday, at least one of the reviews must be conducted on a Saturday or Sunday.

NOTE: If the monitor has observed that all enrolled children were offered a meal or the provider confirmed enrolled children not in attendance are not expected at the day care home during the meal service being reviewed, the monitor does not have to remain for the entire meal service.

A CE must provide oversight of all types of meal services being claimed by its providers. In order to provide adequate oversight, the CE must review all meal service types being claimed by all of its providers, including weekend meals.

Reviewing all meal service types does not require a CE to annually conduct reviews of all meal services being claimed at each day care home. As long as, in the total of all reviews conducted, the CE provides oversight of all meal service types being claimed, the CE has met their responsibility. Meal service types include: breakfast, lunch, supper, snacks (am/pm/eve) and/or weekend meals.

CEs may not observe the same meal service type at all reviews conducted for the same provider.

EXCEPTION: If a provider only serves one meal type, each review must include the observation of that meal service.

CEs must conduct an unannounced follow-up review of a provider within two weeks of any review at which the CE is unable to confirm the provider's Program participation.

CEs cannot count as a required review one in which the CE was unable to observe a meal service (for example, the monitor arrives late or the provider has already served the meal), or if the monitor arrives at the home and the provider is absent. However, CE must make an unannounced follow-up review within two weeks of the attempted review.

If during a review it is observed that a meal is only being served to resident children, the review may count as one of the required reviews, but the CE must make an unannounced follow-up review within two weeks to confirm the provider's Program participation.

CEs must complete TDA's *Review* (H1607) form, or alternate, during each visit. All questions on the *Review* (H1607) form are considered critical. However, each entry on the *Review* (H1607) form, in and of itself, does not ensure that an organization fulfills its fundamental management responsibilities.

Some entries are essential to ensuring that the Program's intent is being met with integrity. Other entries denote that technical federal and state requirements are being met. CEs that fail to complete all elements on the *Review* (H1607) form will be subject to serious deficiency.

If it is determined during a review that a provider has not complied with Program requirements, the CE must require corrective action to achieve compliance and/or place the provider in the serious deficiency process (Reference Section 10000, *Serious Deficiency*).

Additionally, any meals that do not meet Program requirements must be disallowed. CEs must not allow new providers a "grace period" to come into compliance with meal pattern or other Program requirements in lieu of disallowing ineligible meals. CEs that fail to properly monitor providers, including disallowance of ineligible meals, may be placed in the serious deficiency process.

CEs must place a provider in the serious deficiency process who knowingly claimed meals for a child who is not enrolled for child care, or knowingly claimed meals for a child who was not in attendance on a day that meals were claimed for the child, or refused to enter into or comply with a corrective action plan. (Reference Section 10000, *Serious Deficiency*).

Providers must be notified in writing of their appeal rights whenever there is adverse action (for example, disallowances are taken).

CEs are responsible for using reviews as an opportunity to also provide technical assistance and training.

If non-compliances are identified during a review corrective action must be required and follow up reviews must be conducted to ensure that the problems are corrected.

TDA expects reviews of providers that are experiencing difficulty operating the program to exceed the minimum number and frequency required.

4341 Review Averaging

CEs may choose to average reviews as a means to better utilize resources by conducting only two reviews of their best day care homes (those with few or no program non-compliances or findings at the last 2-3 reviews), three reviews for the bulk of their day care homes, and four reviews of those day care homes that need closer oversight and technical assistance.

CEs are not required to obtain approval from TDA to implement review averaging however; CEs are responsible for informing TDA of their intent to utilize the option and to provide their implementation plan.

If a CE decides to implement or to stop averaging during renewal (continuing) application processing, or during the program year, it must submit a revised *Contracting Entity Management Plan* to TDA via TX-UNPS. If the request is to begin using review averaging, the CE must also submit its implementation plan.

A CE's plan must include the criteria it will use to determine which day care homes will receive two, three, or four reviews and review procedures for its organization. TDA will evaluate and approve the plan to ensure that all reviews will be conducted and performed according to Program regulations.

Regardless of the CE's review schedule, TDA will review and monitor the CE's operation for compliance to determine if reviews are being conducted as required.

NOTE: If a sponsor conducts one unannounced review of a day care home and finds no serious deficiencies the sponsor may choose not to conduct a third review of the day care home that year and may make the second review announced or unannounced at its discretion. However, the sponsor must ensure that it conducts an average of three reviews of all its day care homes in the year, and that it conducts an average of two unannounced reviews of all its day care homes that year. If a sponsor uses this provision, and a day care home or day care homes receive only two reviews in one year, it must ensure that the first review of the provider(s) in the next review year occur no more than 9 months after the previous review.

Review Averaging Exceptions

CEs that average their reviews must include the review requirements found in Items 4340 and 4341 with the following exceptions:

1. There can be no more than 9 months between reviews if a day care home is receiving two reviews.
2. The minimum number of reviews a day care home may receive is two per year.
3. A day care home declared seriously deficient during the PY must receive four reviews, and the review after the serious deficiency determination must be unannounced.

How to Establish Your Averaging Cycle

In order to implement review averaging successfully, the review cycle must correspond with the CACFP PY (October 1 – September 30).

CEs that have been conducting reviews on a schedule other than the CACFP PY (for example, day care homes' approved participation date, calendar year, etc.), must have a new review cycle beginning date of October 1 for all participating day care homes.

Step 1. Calculate the number of total reviews that must be conducted

Number of participating day care homes as of Oct. 1 multiplied by 3 equals the total number of required reviews.

EXAMPLE: 75 day care homes x 3 = 225 total number of required reviews that must be conducted during the PY (October 1 – September 30).

Step 2. Construct a profile to determine which day care homes need more or fewer reviews

The following is an example of how CEs may determine which day care homes would require more frequent review and which would require less frequent review.

Day care homes that need only two reviews:

- Day care homes that had no findings at their last 2-3 reviews.
- Day care homes that have participated for several years and had only minor findings at their last review.

Day care homes that need three reviews:

- New day care homes that have previously participated with another sponsor.
- Day care homes that had findings at their last 2 reviews.
- Day care homes that are doing well, but need additional technical assistance in a particular area.
- Day care homes that had serious deficiencies identified at their last review.

Day care homes that need four reviews:

- New day care homes.
- Day care homes that are having difficulties.
- Day care homes that have a combination of the above.
- Day care homes in the serious deficiency process.

Fluctuations due to adding and deleting day care homes will affect the review averaging plan. To help manage the total number of required reviews, a separate averaging plan may be beneficial for new day care homes added during the PY. New Day care homes added during a PY will then be added to the total reviews for the following PY.

Example:

FOR NEW DAY CARE HOMES BEGINNING WITHIN A PY	
Day Care Home Beginning Participation Date	Minimum Number of Reviews in PY
October 1 – December 30	3
January 1 – March 31	3
April 1 – June 30	2
July 1 – September 30	1

NOTE: If a new day care home begins participation on December 3, three reviews must be conducted for the PY. If a new day care home begins participation on May 2, two reviews are required.

Step 3. Determine exactly how many day care homes will get two, three, or four reviews

In order to get the total number of reviews required, CEs will need to have the same number of day care homes receiving two reviews as receiving four reviews.

EXAMPLE: If 300 reviews are required, the schedule might have:

- 10 day care homes receiving 2 reviews.
- 80 day care homes receiving 3 reviews.
- 10 day care homes receiving 4 reviews.

Step 4. Develop a plan to track reviews

Tracking reviews shows the timing of reviews for each day care home throughout the year, and identifies which reviews will be announced and unannounced.

The tracking plan should keep a running tally, by month and by year-to-date, of:

- The total number of reviews conducted.
- The number of those that were unannounced; and
- The number of those that were announced.

Step 5. Frontload reviews

Conducting a majority of reviews (“frontloading”) early in the PY allows for more flexibility if circumstances occur later in the year that forces a revision of the review plan.

Step 6. Revise your schedule

The review plan will need to be reassessed periodically. The more day care homes, the more times the schedule will need to be assessed.

Anticipate changes such as:

- The number of day care home changes due to new, terminated, or temporarily inactive day care homes.
- The CE loses a monitor position.
- Bad weather prohibits the review.
- The monitor has car problems and all reviews for the day cannot be conducted.

Averaging will work differently for each CE, depending on how the day care home profile is developed, the organization is structured, and other factors. CE’s that implement review averaging should remember it is a tool to use to focus more technical assistance and oversight on problematic and new day care homes.

4342 Meal Counts and Attendance

Documented daily attendance must be maintained. The daily attendance is not the same as the meal count and the two must be indicated separately. The attendance must be compared to the meal count to determine if any discrepancies exist. For example, the provider could have an attendance that is larger than the meal count but should not have a meal count that is greater than the number of infants or children in attendance.

NOTE: An unanticipated fluctuation in participation resulting in the service and claiming of second meals would be the only reasonable explanation for meal counts to exceed attendance. Claiming second meals requires prior approval. Refer to Item 4152, *Second Meals During One Meal Service*, for additional information.

Sponsors' Action: Sponsors must require corrective action and disallow any meals claimed in excess of attendance unless the provider has requested approval for second meals and the CE has obtained that approval from TDA. Corrective action should include requiring the provider(s) to:

- Develop and implement (step-by-step) processes/procedures to ensure:
 - Meal counts and attendance will be documented and reported accurately
 - Meals will only be claimed for those children/infants who are documented in attendance

The process/procedure must include:

- The date the process/procedure was or will be implemented
- How often the process/procedure will be done, e.g., daily, weekly, monthly, etc.
- Submit:
 - The process/procedure developed
 - Any additional supporting documentation required by the sponsor to demonstrate successful corrective action

Sponsors should also provide additional training and technical assistance.

4343 Meal Service

Review of the meal service encompasses a wide range including compliance with the meal pattern requirements, meal service times, and documentation.

Meal pattern

To determine a provider's compliance with the meal pattern requirements a sponsor would need to review documentation including, but not limited to:

- Meal production records
- Donation logs
- Leftover/Recycle logs
- CN labels
- Product formulation statements

The sponsor must determine if the provider has complied with the required meal components and portion sizes for each meal type.

NOTE: If a provider was unable to serve the documented meal with the whole grain-rich grain due to extenuating circumstances, such as being forced to close before serving that meal due to severe weather, the sponsor would not have to call a finding and disallow meals on the basis that the whole grain-rich requirement was not met.

To determine compliance with the components and portion sizes the sponsor must perform a meal analysis.

Ensuring compliance with the meal pattern requirements is not only done during a review, but each month when the providers submit documentation for a claim.

Substitutions due to Disabilities or Medical or Special Dietary Needs

Sponsors must also review the meal production records to determine if there have been substitutions due to disabilities and/or medical or special dietary needs. If there are, sponsors must ensure documentation to support the substitutions is on file and that the substitutions have been made correctly. Refer to Items 4113.2, *Children/Infants with Disabilities* and 4113.3, *Children/Infants with Medical or Special Dietary Needs* for additional information.

Meal Service Times

Sponsors must ensure providers are serving meals during the meal service times as indicated on the last approved *Provider Application*. Meals served outside of the approved meal service times may not be claimed for reimbursement.

Common meal service non-compliances include, but are not limited to:

- Meal production record does not contain all required information to allow the reviewer to determine a credible meal was prepared for each infant/child
- Meal production record contains documentation which indicates the food prepared was not sufficient (measurable amount) to feed the number of infants/children/adult participants claimed for the meal service
- Meal production record contains documentation which indicates not all required food components were prepared for the meal (missing a component such as fruit or vegetable, etc.)
- Meal production records are not available for the month(s)/day(s) being reviewed
- Meal production records do not contain substitutions as appropriate
- Meal being observed does not comply with meal pattern requirements (does not contain required food items and/or sufficient portion sizes)
- Meal being observed is served outside of the approved meal serving times

Sponsors' Action: Sponsors must require corrective action and may disallow any meals that do not meet meal pattern requirements or for which there is not sufficient documentation.

Corrective action should include requiring the provider(s) to:

- Develop and implement (step-by-step) processes/procedures to ensure:
 - Meals claimed meet meal pattern requirements;
 - Meal production records are documented accurately;
 - Meal production records and all records to support the claim (receipts, invoices, recycle logs, etc.) are maintained and available for reviewers;
 - Only meals that comply with the meal pattern requirements will be claimed
 - Meals will be served during the approved meal service times

The process/procedure must include:

- The date the process/procedure was or will be implemented
- How often the process/procedure will be done, e.g., daily, weekly, monthly, etc.

- Submit:
 - The process/procedure developed
 - Any additional supporting documentation required by the sponsor to demonstrate successful corrective action

Adverse action is to be taken as follows:

- Insufficient quantity of food for a specific meal served - claim the number of meals for which sufficient quantities were available. **EXAMPLE:** Six children were present during a meal service. The main dish was spaghetti and enough meat was prepared for a total of 5 servings. Assume that all six attendees were fed, resulting in insufficient quantities for each of the children, however, allow the provider to claim 5 meals.
- Completely missing one or more of the required components – all meals for that meal service must be disallowed.
- CN label/product formulation statement not maintained/available – disallow meals that contained products which required this documentation.

Sponsors should also provide additional training and technical assistance.

4344 Civil Rights

Sponsors must ensure providers are in compliance with civil rights requirements as detailed in Section 6000, *Civil Rights*, of this handbook. Sponsors will use observation, conversation and documentation to make this determination.

Sponsors' action: Providers that are in violation of civil rights requirements must be required to take immediate corrective action as well as develop corrective action to ensure future compliance.

Corrective action should include requiring the provider(s) to:

- Develop and implement (step-by-step) processes/procedures to ensure:
 - {enter specifics related to noncompliance observed}

The process/procedure must include:

- The date the process/procedure was or will be implemented
- How often the process/procedure will be done, e.g., daily, weekly, monthly, etc.

- Submit:
 - The process/procedure developed
 - Any additional supporting documentation required by the sponsor to demonstrate successful corrective action

Sponsors should also provide additional training and technical assistance.

4345 Record Keeping

Providers must comply with all record keeping requirements specified in this handbook. This includes not only retention, but the manner in which records are maintained and completed.

Sponsors will review the providers' records to determine if the records are 1) available according to record retention requirements; 2) completed accurately according to policy and record instructions; and 3) current according to policy and record instructions.

Sponsors' Action: Sponsors must require corrective action, disallow any claims/meals or reduce reimbursement, if applicable, for which there is not sufficient documentation. Corrective action should include requiring the provider(s) to:

- Develop and implement (step-by-step) processes/procedures to ensure:
 - All required documentation will be maintained according to record keeping requirements
 - {enter specifics to the documentation in question, such as enrollment documentation}

The process/procedure must include:

- The date the process/procedure was or will be implemented
- How often the process/procedure will be done, e.g., daily, weekly, monthly, etc.
- Submit:
 - The process/procedure developed
 - Corrected/updated documentation (for example, enrollment)
 - Any additional supporting documentation required by the sponsor to demonstrate successful corrective action

Example of potential adverse action due to record keeping is as follows:

- Incomplete enrollment - All meals for the children listed for the time period {enter time period – this will go back to the initial date of incomplete enrollment} are disallowed and the child/children cannot be claimed until correct forms are received

Sponsors should also provide additional training and technical assistance.

4346 Training

Providers must receive training prior to beginning key CACFP activities and annually thereafter in all required areas and sub-topics. Sponsors are responsible for ensuring each provider is in compliance with the requirement through the review of training documentation, etc.

Sponsors' Action: Sponsors must require corrective action for any provider not in compliance with training requirements. Corrective action should include requiring the provider(s) to:

- Provide a description of the circumstances that resulted in the noncompliance
- Develop and implement (step-by-step) processes/procedures to ensure:
 - Participate in training prior to beginning key CACFP activities and annually thereafter

The process/procedure must include:

- The date the process/procedure was or will be implemented
- How often the process/procedure will be done, e.g., daily, weekly, monthly, etc.
- Submit copies of the following documents:
 - The process/procedure developed

Sponsors must also provide training to those providers that have not received the required training.

4347 Five-day Reconciliation

During each review sponsors must conduct a reconciliation of meal counts to enrollment and attendance records for five consecutive operating days, including weekends and holidays, during the current and/or prior claiming period. **NOTE:** a comparison of meal counts to licensed capacity is not required as part of the five-day reconciliation process but is a best practice to help identify and resolve problems in the claiming process.

Reconciliation is expected to involve records from the current or previous month, or some combination of days from the current and previous months if the review is conducted early in a month. However, if there are circumstances that warrant the review of a five-day period from an earlier month (for example, the provider was closed for vacation or the monitor is trying to establish a pattern), the sponsor may look at the earlier month's records.

The five-day reconciliation is done by comparing enrollment, attendance and meal counts by meal type. Use the information obtained from the meal count, attendance, and enrollment records to complete the five-day reconciliation portion of the *Review* (H1607) form.

Before beginning the reconciliation, the sponsor must:

- Review the enrollment and attendance records to ensure they are current and accurate.
- Compare the provider's total enrollment to the recorded daily attendance to ensure the number of children in attendance does not exceed the number enrolled. If attendance does exceed enrollment, for any day or for any shift (if shift care is provided), the sponsor must determine the source of the error (for example, inaccurate attendance records, missing enrollment forms) before the five-day reconciliation can be performed.

To perform the five-day reconciliation, compare the enrollment forms, meal counts and attendance records to the five-days chosen during the current and/or prior claiming period to determine the number of children in care during each meal service and attempt to reconcile those numbers to the numbers of breakfasts, lunches, suppers, and/or snacks recorded for that day. Based on that comparison, determine whether the meal counts were accurate. If there is a discrepancy between the number of children enrolled or in attendance on the day of review and prior meal counting patterns, the sponsor must attempt to reconcile the difference and determine whether the establishment of an over claim is necessary.

The monitor will:

- Choose five consecutive operating days from the meal count record.
- For this five-day period, gather records of:
 - Meal counts,
 - Current enrollment forms, and
 - Attendance.
- Identify the number of children in attendance during the five-day period.

- Compare total meal counts to daily attendance to ensure that meal counts for each approved meal type did not exceed the number of children in attendance on any day.
- Compare total enrollment to daily attendance to ensure that the number of children in attendance did not exceed the number who were enrolled.
- If meal counts cannot be reconciled with enrollment or attendance data, determine the source of the error and appropriate corrective action.

If the provider is unable to provide a reasonable explanation, or the sponsor is unable to reconcile the discrepancies, the sponsor must use the household contact procedure to verify the validity of the meal counts, attendance, and enrollment records. Upon completion of the household contact process, if the sponsor is still unable to reconcile the difference between meal counts, attendance and enrollment, the sponsor must determine whether meals must be disallowed.

To resolve discrepancies and determine the source of errors and determine disallowances, the CE may reconcile the meal counts to attendance and enrollment by each individual child. The CE would:

- Identify, by name, each child in attendance during the five-day period;
- For each child, compare the date of enrollment to dates that meals were recorded;
- For each child, compare meals recorded to typical hours and days in care as recorded on the child's enrollment form; and
- Compare meal counts to attendance to ensure that, for each meal type, meals were recorded only for children who were in attendance.

Sponsors that use automated systems that routinely check all of the critical elements, enrollment, attendance, and meal counts, for the entire claim period may use this as an alternative to the five-day reconciliation. The sponsor would have to demonstrate that the system has the capability to:

- Collect enrollment, attendance, and meal count data;
- Separate attendance or "in and out times" from meal counts; and

- Perform comparisons of enrollment, attendance, and meal counts that would detect potential problems in the claiming process.

The five-day reconciliation may be conducted in the office prior to the review if the monitor has access to all current enrollment forms and daily attendance and meal count records for the current or previous month. If this information is available, the monitor could conduct reconciliation in the office prior to arriving at the day care home, then complete any necessary follow-up work while onsite. The monitor could also conduct a desk review if the comparison of meal counts to attendance and enrollment records is for the purpose of a follow-up review.

If the monitor determines that enrollment data are either not current or not accurate, the monitor may use attendance sheets to conduct reconciliation until the enrollment forms are updated.

Sponsors' Action: Sponsors must require corrective action appropriate to the non-compliance identified during the reconciliation, if applicable and require the provider(s) to:

- Develop and implement (step-by-step) processes/procedures to ensure:
 - {enter specifics to the non-compliance identified}
 The process/procedure must include:
 - The date the process/procedure was or will be implemented
 - How often the process/procedure will be done, e.g., daily, weekly, monthly, etc.
- Submit:
 - The process/procedure developed
 - Corrected/updated documentation, if applicable (for example, enrollment)
 - Any additional supporting documentation required by the sponsor to demonstrate successful corrective action

Adverse Action:

- Meals served to children whose enrollment documents are more than a year old or are not complete are not eligible for reimbursement and must be disallowed.
- Meals claimed for children not in attendance must be disallowed.

Sponsors should also provide additional training and technical assistance.

4348 Meal Edit Checks

CEs must use monthly edit checks to review meal counts submitted by each provider to ensure the accuracy of each claim.

The edit checks will:

- Check that providers are reimbursed only for approved meal types.
- Check that providers are not reimbursed for more meals than they could have served during the claiming period.

Edit checks can reveal problems with providers' meal data that need to be resolved before the CE submits its claim to TDA. A failed edit check must always result in further investigation or follow-up by the CE.

The edit checks required are:

- Approved Meal Types: Compare the meal types claimed to the meal types for which the day care home has been approved. This basic edit check can detect obvious claiming errors. It ensures, for example, that a day care home approved to serve breakfast, lunch, and PM snacks does not receive reimbursement for AM snacks and suppers.

CEs must follow their own procedures for handling invalid documentation submitted by a provider. However, all meal types claimed that are not approved must be disallowed. CEs *may not* retroactively amend the approved meal types in order to reimburse the provider for those meals already claimed.

- Maximum Number of Meals: Identifies the total reported counts that exceed the maximum number of meals that a provider could claim. This maximum number equals the day care home's total enrollment, times the number of approved meal types, times the number of operating days in the claiming period.

EXAMPLE: If a day care home has 6 enrolled children, and there are 20 operating days in the claim month, and the provider serves breakfast, AM snack, and lunch, the provider can claim a maximum of 120 for each meal type, and a maximum of 360 total meals ($6 \times 20 \times 3 = 360$).

Before submitting a claim, the CE must compare each provider's total meals/snacks submitted with the enrollment figure for that month. CEs must develop a procedure to ensure that the most current information on enrollment is being used each claim month to conduct this edit check.

If the meals/snacks count submitted by the provider for reimbursement fails the maximum number of meals edit check, CEs must follow up with a more complete review to determine whether the meal count is accurate. If the meal count is incorrect, the CE must follow its own procedures for handling inaccurate meal counts.

NOTE: Although the block claim (submission of the same meal count for 15 or more consecutive days) edit check is not required, CEs may perform edit checks to identify block claiming as a first alert to potential training or claiming concerns.

4348.1 Household Contacts

Household contacts is an oversight tool that must be used as a means to check the accuracy of meal counts when there are unusual CACFP participation/claiming patterns detected at a review or during the consolidation of meal count data.

Household contacts will help verify that claimed meals in question were:

- Served to children enrolled in care.
- Served to children in attendance when the meal was served.

At a minimum, CEs must call parents/guardians of children whose attendance/enrollment is in question when one or more of the following situations occur:

- There is an unexplainable difference in the number of meals claimed from what verified or observed at a review.
- There is no acceptable explanation for a significant variation (10% or more) in the attendance on the day of the review to what is normally claimed.
- Maximum capacity is claimed consistently except on the day of the review.
- There is a suspicious claiming pattern discovered during review of the monthly meal count data submitted.
- Children are only absent on the day of the review.
- Complaints are received that indicate meals are claimed fraudulently.
- Enrollment form and/or attendance record appears to be completed or altered without parental consent.
- Any other claiming pattern and/or program participation concerns identified.

Contacting Households

- Do not notify the provider prior to initiating household contacts.
- Households may be contacted by written correspondence, email, phone, personal visit, or any other means the CE chooses. Letters are strongly encouraged as families may be hesitant to share this type of information with a stranger over the phone. When using letters, include a self-addressed stamped envelope to increase the chances the household will respond.

A minimum of three documented attempts must be made to contact the household.

If all attempts to contact the household fail, verify that the contact information is the most current by using the secondary verification process. Secondary verification of participation is only acceptable when you can document compliance with the requirement to make a minimum of three attempts to contact the parent/guardian.

Examples of secondary verification are:

- Itemized deposit slips or receipts showing the child-care payments were received for the child during the time period in question.
- Collateral contact such as a member of the child's family other than the parent/guardian, or the parent or family member of another child in care who can verify that the child was enrolled for care and received meals during the time in question.
- Sign in/out sheets that show that the child was present during the meal service during the time in question.
- Trip sheets and/or field trip permission forms that show the child was present during the meal service time in question.

Initiate the household contact within 30 calendar days from the date of the review, or the date the claim in question was processed. No more than 45 calendar days may elapse from the start of the household contact process to the end.

A response rate of 50% or more of the households contacted is considered successful. If contact cannot be made with at least 50% of the selected households, meaning the household contact procedure was unsuccessful, CEs may use other approaches (additional unannounced reviews, more detailed review(s) of claim history, etc.) to investigate and explain the program concern. Regardless of other approaches used, CEs must document all subsequent actions taken to an unsuccessful household contact.

Contact Documentation

Document household contact and attempts; including the following data:

- Name of provider(s).
- Name of person conducting the household contact.
- Name of child/children in household in question.
- Name of household contact.
- Circumstances that initiated the household contact.
- Date of household contact or attempted household contact.
- Method of household contact.
- Circumstances for unsuccessful household contact.
- Information obtained from household contact.
- Any additional information you want to include.

CEs must establish their own written policies and procedures regarding corrective action and reimbursement when discrepancies are verified.

A sample household contact form is located under CACFP Administration & Forms at <http://www.squaremeals.org>.

4349 Health and Safety

When conducting a review of a day care home, the CE must ensure that noted or suspected instances of conduct or conditions that pose an imminent threat to the health or safety of the children in care or the public are reported to the proper authorities. CEs must exercise judgment in making a determination of imminent threat.

CEs should have guidance in place for monitors to respond consistently and fairly to an imminent threat, and a plan to report, manage, and train staff on determining incidents that pose an imminent threat.

Examples of incidents that rise to the level of imminent threat include:

- Lost or missing child;
- Suspected maltreatment of a child;
- Suspected sexual, physical, or emotional abuse of staff, volunteers, or family members occurring while they are on the premises of the day care home;
- Injuries to children requiring medical or dental care;
- Illness or injuries requiring hospitalization or emergency treatment;
- Mental health emergencies;

- Health and safety emergencies involving parents or guardians and visitors to the day care home;
- Death of a child or staff member (including a death that occurred outside of child care hours that had resulted from serious illness or injury at the day care home); or
- The presence of a threatening individual who attempts or succeeds in gaining entrance to the day care home.

If, during a review, a circumstance such as one of those listed above is suspected or occurs, the monitor must:

- Contact the proper authorities
 - Which authority(ies) to contact (HHSC (formerly DFPS), 911, etc.) will depend on the actual circumstances, CEs should have a procedure/process in place to aide monitors in making this determination
- Stay at the home until the authorities have arrived
 - Staying on-site will depend on the actual circumstances, CEs should have guidelines in the procedures/process to aide monitors in making this determination
- Initiate serious deficiency including suspension of participation (if it is determined to be an imminent threat to health or safety) following the procedure outlined in Section 10000, *Serious Deficiency*.

Caring for Our Children, located at <http://cfoc.nrckids.org/> is a resource that provides additional guidance on managing, reporting, and documenting incidents of imminent threat.

4350 Claims for Reimbursement

A CE's claim is its actual participation report submitted for the purpose of receiving reimbursement for costs associated with food service. TDA reimburses claims depending on the availability of funds.

The maximum numbers of meals CEs and providers may claim per child per day are:

- Two meals and one snack; or
- One meal and two snacks.

When submitting the claim for reimbursement CEs will enter the meals served to children in:

- Tier I homes by provider and by meal type.
- Tier II homes by provider and by Tier status as follows:
 - Meals served to children that qualified for Tier I will be entered under the Tier II High column by meal type

- Meals served to children that did not qualify for Tier I will be entered under the Tier II Low column by meal type
- All meals served by providers who did not choose to have the CE determine eligibility of enrolled children will be entered under the Tier II Low column by meal type

Reimbursement Based on Tier Determination

NOTE: TDA reimburses the CE based on actual meal counts, by type and Tier, for each provider as entered by the CE on its claim.

CEs will determine Tier II day care homes reimbursement based on one of the following:

- Actual meal counts.
- Claiming percentages.
- Blended rates.

"Actual meal counts" – CEs would require providers to submit the number and type of meals served each day to each enrolled child by name. This information is used to pay the provider for actual meals served by type and by Tier I or Tier II category.

"Claiming percentages" - CEs would establish the day care homes' claiming percentage using the enrollment/attendance data from the first month of a Tier II provider's participation in the CACFP.

The claiming percentage would be applied to meals served during that first month and for the next five months thereafter. CEs must recalculate the percentages of children who are income-eligible and those who are not income-eligible at least once every six months. The percentages may be calculated more frequently, but recalculations must be done with the same frequency for every day care home. Additionally, CEs must have a consistent policy for making more frequent recalculations, and the policy must account equally for changes that increase or decrease a day care home's reimbursement.

"Blended rates" – CEs would establish the day care homes' blended rate based on the percentage of income-eligible children and the percentage of children who are not income-eligible. A "blended" rate of reimbursement is calculated for each meal type.

The first month of the Tier II provider's participation in the CACFP would be the month of enrollment/ attendance data collection, and the resulting blended rate would be applied to meals served during that first month and for the next five months thereafter. CEs must recalculate the percentages of children who are income-eligible and those who are not income-eligible at least once every six months.

Blended rates may recalculate more frequently, but recalculations must be done with the same frequency for every day care home. Additionally, CEs must have a consistent policy for making more frequent recalculations, and the policy must account equally for changes that increase or decrease a provider's reimbursement.

Sponsors will complete the *Documentation of Meals Claimed* (H1534) monthly when preparing their claim for reimbursement and maintain the form(s) with their Program files.

In order to process a CE's claims, TDA must have an approved *Certificate of Authority for External Users* (FND-101), for the CE's staff member submitting the claim via TX-UNPS. Each authorized representative will receive an email with a user ID and temporary password. Once logged into the system, the user will be prompted to change the password. A user manual is available on-line at <http://TXUNPS.TexasAgriculture.gov>.

The user manual gives instructions on how to:

- Access/log on to TX-UNPS;
- Submit a claim for reimbursement; and
- Obtain help if they are having trouble with their user ID or password, or with accessing TX-UNPS.

NOTE: The purchase of a computer and Internet Service Provider (ISP) support is considered an allowable administrative cost. If a CE uses the automation equipment and ISP for any activity, personal, or business, other than the administration of their nonprofit food service, the CE must prorate the cost. The only allowable cost is the portion used in the administration of the CE's nonprofit food service.

4351 Filing Claims and Submittal Deadline

CEs submit claims electronically via the Internet, through the Texas Unified Nutrition Programs System (TX-UNPS). TDA will set up a TX-UNPS account for each authorized representative indicated on the *Certificate of Authority for External Users* (FND 101).

Claims must be received no later than the 60th day after the last day of the claim month. Refer to Item 4352, *Late Claims*, below for information on claims received after the 60th day.

Once the CE's claim has been successfully submitted, a confirmation number will appear, and the claim status will be "accepted." CEs can print the screen, which contains a confirmation number, to reference when calling to confirm or ask questions about the claim. If the 60th day is on a weekend or Federal holiday, the claim must be postmarked or received no later than midnight on the following workday.

CEs that call to confirm the receipt of their claim or make inquiries about their claim must have the confirmation number available. TDA office hours are 8:00 a.m. to 5:00 p.m. Central Standard Time (CST).

If TX-UNPS is unavailable on the last day of the filing deadline (“the system is down”), CEs may submit a paper claim via fax, mail, or by personal delivery to the TDA office in the Stephen F. Austin Building in Austin. However, the claim must be postmarked or received by TDA before close of business on the 60th day or it will be received as a late claim. CEs must attach a cover letter explaining why they could not submit their claim electronically via TX-UNPS.

If a CE waits until the 60th day to submit a claim electronically and then is unable to access TX-UNPS due to any problem other than TX-UNPS being down, the CE must:

- Find an alternate site to access TX-UNPS and submit its claim before the deadline, or
- Submit its claim via the paper process as a late claim. See Item 4352, *Late Claims* for information on the processing of late claims.

NOTES:

- CEs should not mail their claim if they fax it or submit it electronically.
- It may take up to 45 days to process valid claims, no matter the method of submittal.

TDA recommends that CEs always have a back-up person designated to submit claims. Doing so could lessen the chance of submitting a late claim that may be denied for payment. If a CE receives advance payments, it should submit the claim as early as possible after the end of the claim month, as a delay in submitting the claim could affect receipt of advance payments.

When submitting a claim for reimbursement the CE certifies that the claim is accurate and documentation is on file to support that claim. A CE that submits an inaccurate claim may be required to repay funds and will be required to submit corrective action.

Inaccurate claims include:

- Over claiming –
 - claiming more meals than were actually served
 - claiming meals that did not meet meal pattern requirements
 - claiming meals for ineligible children
- Under claiming –
 - claiming fewer meals than were served

4352 Late Claims

Claims postmarked or received by TDA later than 60 days after the last day of the claim month (i.e. late claim) will be processed in the following manner:

Corrective Action Plan (CAP)

The submission of a late claim is a program noncompliance; therefore, CEs must submit an approvable CAP that includes the:

- Reason for submitting a late claim;
- Actions to be taken to avoid repetition of the situation linked to the late claim submission;
- Actions to be taken to avoid any future late claim submission from the same or other causes; and
- Signature of an Authorized Representative designated to act on the organization's behalf per the *Certificate of Authority for External Users* (FND 101).

Once a CE has submitted an approvable CAP, TDA will determine if it are eligible for the one-time exception payment provision.

NOTE: TDA will accept as proof of submission of a claim a postmark affixed by the U.S. Postal Service or equivalent documentation from a private postal service showing when the item was mailed. TDA will not accept as proof of submission of a claim a postmark affixed by a postage meter.

4352.1 One-Time Exception

A one-time exception may only be used once within a 36-month time period for each USDA Child Nutrition Program (CNP) in which the CE participates. The CACFP is one CNP, regardless of whether a CE participates in only DCH or if they also participate in Adult Day Care and/or Child Care Centers.

A one-time exception granted to a CE does not eliminate the CE from consideration for a one-time exception for another CNP claim, for example, the Summer Food Service Program.

If the CE has ...	Then the CE may ...
Not used the one-time exception provision within the 36-month time period,	Choose or request to use the one-time exception payment or receive no payment for the late claim. If the CE submits claims for more than one month at the same time, then the CE may choose the claim month for which to apply the one-time exception.
Already used the one-time exception provision within the 36-month time period,	Request a good cause exception.

4352.2 Good Cause

Requesting a Good Cause Exception

If a CE ...	Then TDA ...						
Requests a good cause exception,	Will consider each request on a case-by-case basis. The CE must demonstrate that the noncompliance occurred due to circumstances beyond its control (i.e., Good Cause).						
	<table><tr><th>If TDA...</th><th>Then TDA...</th></tr><tr><td>Approves the request,</td><td>Will forward the request to USDA for approval.</td></tr><tr><td>Does not approve the request,</td><td>Will deny payment of the late claim.</td></tr></table>	If TDA...	Then TDA...	Approves the request,	Will forward the request to USDA for approval.	Does not approve the request,	Will deny payment of the late claim.
	If TDA...	Then TDA...					
Approves the request,	Will forward the request to USDA for approval.						
Does not approve the request,	Will deny payment of the late claim.						
Does not request a good cause exception,	Will deny payment of the late claim.						

Examples of good cause beyond a CE's control may include, but are not limited, to:

- A catastrophic incident such as a tornado, flood, or fire; or
- A life-threatening injury or illness to the person responsible for submitting the claim.

NOTE: Catastrophic incidences and life-threatening injuries or illnesses **do not** automatically entitle a CE to be granted a good cause exception. The responsibility is upon the CE to demonstrate how the catastrophic incident or life-threatening injury or illness caused a situation that made submitting the claim within 60 days unreasonable/impossible.

Examples of reasons that would **not** be considered good cause beyond a CE's control include, but are not limited to:

- Absence of personnel on the 60th day, for reasons other than a life-threatening injury or illness;
- TX-UNPS is down or inaccessible for electronic filing;
- A malfunction of power or equipment at the CE's facility; or
- Failure to get the claim in the mail in time to get it postmarked on the 60th day.

If USDA determines that a CE's request for a good cause exception does not demonstrate that the noncompliance occurred due to good cause, payment of the late claim will be denied. CEs cannot appeal USDA's denial of a claim. However, CEs may appeal TDA's denial to submit the CE's request for a good cause exception to USDA for consideration of payment.

4353 Adjusted Claims

A CE may have a reason to submit an adjusted claim (that is, make a change to an already submitted claim) to amend any of the information submitted. An adjusted claim that results in TDA owing the CE money (an upward adjustment), will be included in the CEs next regular reimbursement payment. If the adjustment results in the CE owing TDA money (a downward adjustment), the amount will be deducted from the CEs next claim or claims until the funds have been repaid.

A CE that needs to adjust an already submitted claim may do so by following the instructions in the TX-UNPS user manual located at <http://TXUNPS.TexasAgriculture.gov>.

Occasionally, an adjusted claim as the result of disallowances taken during an administrative review or as the result of claim validation will be required. If this occurs, TDA will notify the CE in writing and provide appeal rights.

4354 Upward Adjusted Claims

The corrective action procedures stated in Item 4352, *Late Claims*, also apply to any upward adjusted claim postmarked or received by TDA more than 60 days after the last day of the adjusted claim month.

4400 Operation of Child Nutrition Programs During a Disaster

Disasters, such as hurricanes, tornadoes, and floods, and an outbreak of a pandemic disease can cause situations that are not typical of the day to day operation of a CE or Day Care Home. Below is guidance for handling CACFP operations in the event of a disaster or pandemic.

Eligibility for Tier I Meals

Children residing in or evacuated from disaster areas may be determined homeless and are categorically eligible for Tier I meals. CEs can get verification of the child's homeless status from the:

- School district homeless coordinator,
- Homeless liaison (in cases where a liaison assisted the family in moving in with another household),
- Application from the Health and Human Services Commission with case number showing receipt of Disaster Supplemental Nutrition Assistance Program (D-SNAP) ,or
- Adult member of the child's household
 - The adult member would complete the *CACFP Meal Benefit Income Eligibility Form* and designate the child or children "homeless."

Host families can include the displaced family members and any income provided to them when applying for Tier I meals.

In cases where an evacuated family or child is not categorically eligible and an application cannot be completed or obtained, the CE may request shared income information from the school in which the child is enrolled (if applicable) and for whom a school official completed an application on the child's behalf.

Children determined eligible for Tier I meals as a result of a disaster remain eligible for 12 months.

Designated Emergency Shelters

TDA may designate as "temporary emergency shelters" organizations that provide:

- Temporary shelter and meals to displaced families, and
- Meals to displaced families though not providing actual shelter (for example, organizations that are serving meals to those sheltered in locations not providing meals).

These designated emergency shelters will not be required to complete the entire application process to participate in the CACFP and may serve and claim up to three meals (breakfast, lunch, and supper) each day for children through age 18.

Meal Components and Meal Service

Modifications to time of meal service and use of offer versus serve may be made with TDA approval. Additionally, changes to meal components, such as using canned or dry milk in the event that fluid milk is unavailable may be approved by TDA.

Any other modifications to the required meal pattern must be submitted to TDA and will be approved or denied in consultation with FNS.

Record Keeping

CEs must maintain required records. When required records have been destroyed due to a disaster CEs should consult with their Community Operations office for guidance.

Other Exceptional Emergency Situations or Man-made Disasters

Other exceptional emergency situations or man-made disasters, such as human pandemic or chemical plant explosions, may impact the ability of schools, institutions, and sponsors to continue normal program operations (for example, congregate feeding, review requirements, etc.).

In the event of such exceptional emergency situation or man-made disaster, flexibilities may be approved by USDA on a case-by-case basis to accommodate the needs of severely impacted areas. CEs in these situations should contact their Community Operations office for assistance.

Resources

The following resources are available to assist in planning for and responding to disasters:

FNS Disaster Resources website at: <https://www.fns.usda.gov/disaster/disaster-assistance>

National Center for Homeless Education: McKinney-Vento Toolkit at:
https://nche.ed.gov/pr/liaison_toolkit.php

FEMA: Guide for Developing High-Quality School Emergency Operations Plans at:
<https://www.fema.gov/media-library/assets/documents/33599>

4500 Program Documentation

4510 Record Retention

CEs must keep the Permanent Agreement and any amendments for at least three years from the end of the CE's final program year. CEs must retain all documents relating to their participation in the program, such as claims and supporting documents that are specific to a particular program year, for at least three years from the end of that program year. For example, all documents specific to the CACFP 2016 program year must be retained until September 30, 2019.

NOTES:

- Tier I determinations based on school data or census data are valid for five years. The records related to these determinations must be maintained for three years from the fifth year, for a total of at least eight years of retention, unless a new determination is made before the expiration.
- Records that have not been revised and are still in effect at the end of a program year will be considered current and cannot be archived or destroyed until three years from the end of the program year in which they are finally superseded. For example, budgets, management plans, organizational charts, etc.

EXCEPTION: If audit findings, claims, or litigation have not been resolved, all forms and records must be retained beyond the required time period until all issues are resolved.

In addition, records relating to providers who have been placed on the National Disqualified List (NDL) by the CE are considered to pertain to the entire period that the provider remains on the NDL. Those records must be retained for three years after the day care home provider has been **removed** from the NDL.

Records relating to any serious deficiency for which a CE placed a provider into the serious deficiency process that was corrected before the provider was disqualified, must be retained for three years from the date the CE accepted the corrective action and temporarily deferred the serious deficiency. This allows the CE to conduct one or more follow-up reviews to ensure that the serious deficiency has been fully and permanently corrected, and will provide the necessary back-up documentation for proposed termination should the CE discover that the corrective action was not permanently implemented.

Providers must maintain records relating to the Program as required in Item 4530.1, *Provider Record Keeping Requirements*, for three years from the end of their final program year. In order to minimize the burden of space and storage, providers may maintain and have on hand for immediate review all records that support their Program activities for the current month and the previous twelve months of operations.

The remaining two years of program records may be stored offsite; however, they must still be in control of the provider and accessible within a reasonable amount of time. If no offsite storage is used, the provider must retain three years of records at his or her home.

Records can be kept in hard copy or electronic format, provided they are readily available to reviewers. Failure to maintain such records will be grounds for denial of reimbursement.

4520 Availability of Records

CEs, and providers, must allow TDA, USDA, Government Accountability Office, and representatives of other appropriate agencies to inspect facilities and records and to audit, examine, and copy records during normal business hours, which at a minimum are 8:00 a.m. to 5:00 p.m., Monday through Friday.

CEs must maintain separate records for each day care home, and the CACFP records must be maintained separately from records of other programs.

4530 Types of Records

CEs must keep complete and accurate records of the Program including, but not limited to, the following:

- Copies of applications and supporting documents submitted to TDA, including but not limited to
 - Budget Detail, all versions submitted
 - Direct Deposit Authorization
 - Application for Texas Identification Number
 - Contracting Entity Management Plan
 - Pre-Award Civil Rights Compliance Review form
 - Documentation of license or registration, for all day care homes
 - Proof of tax-exempt status (501(c)(3))
 - Organizational chart
 - Articles of Incorporation, Certificate of Formation, Assumed Name Certificate

- Governing Body Awareness
- Government Issued Identification and proof of residential mailing address
 - Drivers' license or personal identification card issued by the Texas Department of Public Safety, or a similar document issued by an agency of another state, regardless of whether the card or license has expired,
 - Military identification,
 - Valid US Passport
 - Current, valid voter registration card,
 - Official mail addressed to the person's current address, by name, from a utility provider or government agency or bank,
 - A lease (that has not expired) executed by the individual,
 - Any other proof approved by TDA.
- Census data
- School data
- Provider applications
- Copies of financial documents, including but not limited to
 - Cash register tapes, invoices, delivery slips, and receipts
 - Receiving reports from vendors signed by authorized staff
 - Itemized purchase invoices
 - Records showing costs of processing, distributing, transporting, storing, and handling food (if these costs are in addition to the cost on the purchase invoice)
 - Credits - if they are not shown on invoices
 - Canceled checks or other forms of receipts for payments
 - Inventory records (including records of major inventory adjustments)
 - Records of insurance claims and collections
 - Mileage logs to support transportation costs
 - Payroll records (such as payroll ledgers, IRS Form W-2, IRS Form 941, and cancelled payroll checks, time distribution reports)
 - Records of all income to the Program
 - Records of donations to the Program, such as food, services, supplies or labor
 - Bank statements
 - General ledgers
 - Copies of audits
 - Records of dates and amounts of food service payment to each Provider
- Enrollment records for each child

- Procurement records, including the basis for the cost or price and the reason for selecting a particular
 - Method
 - Contract type
 - Contractor
- Field trip documentation, if applicable
- Daily records of
 - Menus for each meal type claimed
 - The names and number of children in attendance (H1539)
 - The number of meals, by type, served to enrolled children (including names)
 - The number of meals served as second meals, if any
 - Documentation sufficient to justify the service of second meals (if claimed for reimbursement)
- Copies of medical statements with prescribed substitutions for children with disabilities or who require special diets
- Copies of CACFP claims and receipts for payment from TDA
- Child eligibility documentation
 - *CACFP Meal Benefit Income Eligibility Form*
 - Early Head Start letter
 - Head Start letter
 - Even Start Literacy Program letter
- Documentation of training
 - Documentation of training provided to staff prior to beginning key CACFP activities and annually thereafter
 - Documentation of attendance at training provided by TDA or the ESC
 - Documentation of training provided to providers
- Records of day care home reviews (locations, dates, problems noted, corrective action prescribed, and technical assistance provided), including completed Reviews (H1607)
- Records of pre-approval visits (H1607-P)
- Agreements
 - Copy of organization's Permanent Agreement with TDA
 - Copies of *Permanent Agreement Between Sponsoring Organization and Day Care Home Provider(s)* for all day care homes
 - Lease/rental agreements
 - Subcontractor agreement
 - *Invitation for Bid and Contract for Purchased Meals* (IFB)

CEs that scan original documents for storage must maintain the original (source) documentation on file if that documentation contains signatures. For example enrollment records, *Daily Meal Count, Attendance, and Meal Production Record* (H1539), *CACFP Meal Benefit Income Eligibility Forms*, etc.

Additionally, all other copied or scanned documentation must copy or scan completely and must be legible when viewed or printed. Failure to maintain acceptable documentation could result in disallowances or unallowable costs.

4530.1 Provider Record Keeping Requirements

A Provider must keep complete and accurate records of their program operation to include:

- Enrollment records for each child;
- Daily attendance records;
- Daily record of the number of meals, by type, served to enrolled children (including names); and
- Daily menus.

These records must be available for review and maintained as required by Item 4520, *Availability of Records*.

4540 Required Forms

CEs and providers must use forms provided by TDA to administer and operate the CACFP with the exception of the forms listed below.

The forms listed below are provided for CE and provider use in documenting compliance with the operation of the Program.

CEs may develop their own forms or documentation, in lieu of using the forms listed below, to capture the information contained in these forms. CEs must ensure that they maintain this information as required and that it is available for review.

Failure to capture all required information on alternate documentation, including certification statements and signatures (as applicable), could result in Program non-compliances, including disallowances and/or placement in the serious deficiency process.

- *Governing Body Awareness*
- *Daily Meal Production Record for Infants (H1530-A)*
- *Documentation for Meals Claimed (H1534)*
- *Daily Meal Count, Attendance, and Meal Production Record (H1539)*
- *Record of Leftover/Recycled Food (H1568)*
- *Review (H1607)*
- *Pre-Approval Visit (H1607-P)*