

SECTION I - OVERVIEW

One of the goals of the Child and Adult Care Food Program (CACFP) is to ensure that children are given every opportunity to learn healthy eating habits through education and sound nutrition practices. The CACFP is federally funded by the United States Department of Agriculture (USDA) and is administered at the state level by the Illinois State Board of Education (ISBE).

HOW THE CACFP OPERATES

You, a licensed Child Care Center enroll children for participation with the CACFP by having their parents/guardians complete a Child Enrollment Form. In order to be reimbursed for meals/snacks served to a child, this form must be submitted to the Association for Child Development (ACD) before or along with the Claim on which the child's name first appears. You provide meals/snacks that meet USDA nutritional requirements. Additionally, you keep daily records of meals/snacks served and each child's attendance at the meals/snacks on the Claim. This is your menu which is referred to as a 'Claim' when received at ACD for reimbursement.

You must submit the completed Claim monthly to ACD, either by mail or electronically. We review your Claim, and then apply to ISBE for your reimbursement money.

Each fiscal year, which is the period between October 1 and September 30, your child care business is reviewed a minimum of three times, by an ACD Field Monitor who: (1) monitors CACFP compliance and comprehension, (2) trains you on the nutritional needs of children, and (3) assists you in meeting CACFP requirements.

As soon as the funds become available to ACD from ISBE, you are mailed a reimbursement check for the qualifying meals/snacks that you served. Or if you choose, the reimbursement is directly deposited into your bank account.

CACFP BENEFITS

Participating with the CACFP is a marketing tool that appeals to parents/guardians. Parents/guardians can be assured that their children receive nutritious meals/snacks while in your care.

You receive nutrition training. The primary goal of the CACFP is to have a positive impact on the health and well-being of children. Therefore, the publications and materials that ACD distributes to Centers are nutrition-focused.

You receive reimbursement for serving nutritious meals/snacks. Monetary reimbursement for partial cost of the food you feed the children in your care is intended to help offset the cost of food.

You receive ACD's monthly nationally-known newsletter. *Potpourri* is tailored to meet the needs of Child Care Centers participating with the CACFP. It contains articles about child nutrition, child development, educational activities, recipes, consumer updates, helpful hints and ideas from other Child Care Centers, and much more. Non-members may subscribe to *Potpourri* each year for a small cost.

You receive ACD's annual desktop calendar and recordkeeping book. In the fall of each year, you can look forward to receiving ACD's calendar and record-keeping book for the upcoming year. The record-keeping charts will help your child care business stay organized and running smoothly, and give you a head start on tax preparation. Plus, the desktop size makes the book easy to take anywhere.

You are periodically reviewed by your Field Monitor. Your Field Monitor conducts a review of your home a minimum of three times a year to ensure that each child is being served nutritious meals/snacks, to monitor CACFP compliance, and to provide nutrition training. These reviews provide an opportunity to ask questions and receive one-on-one assistance with menu planning, documenting an acceptable Claim, and learning more about nutrition and its importance for children.

You receive budgeting ideas. Serving high quality, nutritious meals/snacks that meet budget constraints is challenging. Handouts and articles in *Potpourri*, are resources that ACD offers to assist Centers in making the most of their dollars. Let your Field Monitor know if you would like a copy of these or any other handouts published by ACD.

You have the option of using ACD's time-saving system for recording meals/snacks on your Claims. Master Menu lists breakfast, lunch/dinner, and snack options, along with reference codes. Simply write the reference code of the Master Menu meals/snacks that you serve on your Claim.

You have the option of submitting your monthly claims electronically. ACD offers online claiming software exclusively to the Centers it sponsors. Online Claims eliminate postage costs and handwritten/bubbled Claims and reduce loss of reimbursement.

You have access to assistance by calling the Customer Service Division at ACD's toll free telephone number. A Customer Service Specialist will be happy to answer questions about completing forms, documenting an acceptable Claim, and a

number of other topics. To reach a Customer Service Specialist, call (800) 284-5273.

ACD's objectives as a CACFP sponsor include:

- ✓ providing materials to assist Child Care Centers in introducing children to a variety of foods that help to develop positive attitudes about nutrition and healthy eating habits in an environment that contributes to the children's development and social needs;
- ✓ training Child Care Centers to understand the role of nutrition in children's total physical, cognitive, and social development;
- ✓ providing partial monetary reimbursement for qualifying meals/snacks served to increase Child Care Centers' abilities to meet the children's nutritional needs; and monitoring Child Care Centers for CACFP compliance.

WHY THE CACFP IS IMPORTANT

The USDA's CACFP plays a vital role in improving the quality of Child Care and making it more affordable for low-income families.

SECTION II- REIMBURSEMENT

All licensed public or private nonprofit Child Care Centers may participate in CACFP. For-profit centers serving 25 percent or more low-income children are also eligible. Head Start programs are automatically eligible to receive the highest reimbursement for all the children they serve. If you qualify to participate in the program you will receive reimbursement for all of the children in your care regardless of their household's income.

As a licensed Child Care Center participating with the CACFP, you are reimbursed at a set rate for serving USDA-qualifying meals/snacks to the children in your care. You may be reimbursed for a maximum of two meals and one snack OR one meal and two snacks, per child, per day.

HOW REIMBURSEMENT REACHES YOU

After reviewing your Claims each month, ACD applies to ISBE for your reimbursement money. As soon as the funds become available to ACD, your reimbursement is mailed to your child care business in the form of a check, or directly deposited into your savings or checking account if requested.

Claims are processed one month behind. For example, if you submit your May claim by June 5, reimbursement for CACFP qualifying meals will be mailed to you or deposited in your bank account using direct deposit once the funds are received from ISBE. This is subject to change based upon ISBE/USDA regulations.

REIMBURSEMENT RATES

The USDA sets the reimbursement rates and may adjust them by a small amount annually, on July 1, according to changes in the cost-of-living.

DETERMINING YOUR REIMBURSEMENT RATE

Child eligibility determines the rate of reimbursement: FREE, REDUCED or PAID. Eligibility is determined based on:

- Household's Income
- SNAP – The siblings of children receiving this benefit

- automatically can be claimed in the FREE category.
- TANF – The siblings of children receiving this benefit automatically can be claimed in the FREE category.
- Head Start – Automatically claimed in FREE category.
 - Must keep a Head State Master list with official documentation of Head State Eligibility.
- At-Risk Program – Automatically claimed in FREE category based on area (50% of enrolled children in school qualify for free/reduced under NSLP).
- Emergency Shelter – Automatically claimed in FREE category.
 - Must have intake records for all children.
 - Do not require Household Eligibility Applications.

In order to claim children in the FREE or REDUCED category as a new center, there must be Household Eligibility Applications for all participating children on file. Children are claimed in the PAID category if:

- (1) a parent does not want to complete a Household Eligibility Application,
- (2) information is missing,
- (3) the parent does not return the application, or
- (4) the income is over the income guidelines.

An effective date is required on the application. An application is valid for 12 months from the effective date. The effective date is the first date the child is eligible to participate in the food program.

Effective dates cannot be backdated to a prior month, so it is imperative that the application is submitted to ACD as soon as possible.

Household income information is highly confidential and will be treated as such by ACD staff.

DIRECT DEPOSIT OF REIMBURSEMENT

For your convenience, you may request that ACD deposit your monthly CACFP reimbursement into one checking or savings account of your choice.

ACD will send the direct deposit to the bank and mail a deposit statement to you on the same day that reimbursement checks are mailed.

The deposit statement includes the amount and date of the deposit, the claim period of reimbursement, and the type and

number of meals/snacks being reimbursed. Centers choosing to submit electronic claims will not receive a statement. However, this information may be accessed online the day after the deposit is made to the bank account.

To sign up for direct deposit, please call the ACD office at (800) 284-5273 x 228 and request that a Direct Deposit Authorization Form be mailed or faxed to you.

You may also download a form from our website at www.acdkids.org. Complete the form, and then return it to ACD. Requests for direct deposit are processed and become effective immediately.

SECTION III – CLAIMS

The Claim is the form on which you must document CACFP meals/snacks served to day care children and the meal counts of those children at meals/snacks daily. Meal counts and menus are submitted to ACD via Minute Menu each month.

For each meal/snack that is served and claimed for reimbursement, you must record the meal/snack components, and meal counts at the point of service. You may not record attendance and meal counts on the claim before the children begin eating.

If your Child Care Center has a computer in each classroom, you can record the meal counts at the point of service directly on the computer through Minute Menu. However, most centers record the point of service meal counts on paper first then transfer them on to the computer.

You can use the ISBE “Meal Participation Record” Form 68-75 or a Minute Menu generated “Weekly Attendance and Meal Count Worksheet” to record meal counts at the point of service in each classroom.

Helpful Tip: *If a child has changed classroom, it is important that you make the changes in Minute Menu before you print out the report. It is a good idea to print the report each Friday, so that each classroom teacher can confirm his/her roster.*

If your Field Monitor conducts a review during the month, you must submit the claim that he/she reviewed and initialed. No other claim will be accepted.

Online claims should be submitted to ACD electronically after the last meal/snack of the month has been served.

After you have served the last meal/snack of the month and your Claim is complete, mail or scan a copy of the month to the Association for Child Development, P.O. Box 7130, Westchester, IL 60154-9932. ISBE may refuse your reimbursement claim if it arrives at ACD more than 30 days after the end of the month claimed. Keep the duplicate copy of your claim for your files.

If your meal/snack service times change, call ACD at (800) 284-5273 extension 228. The schedules of children (as documented on the Child Enrollment Form) claimed at

meals/snacks must fall within your meal/snack service times. Meals/snacks served to children outside their scheduled times in care cannot be reimbursed unless you submit an updated Enrollment Form documenting the long-term scheduled change prior to, or with, the Claim.

TYPES OF MEAL SERVICES

Pre-plated meals:

- All components, including milk, must be served by an adult in the correct portion size for each age group.
- The child must sit at the table for the meal to be claimable. The child does not have to eat.

Family-style meals:

- Serving bowls containing enough food to provide a full portion for all children and any adults eating with the children must be placed on the table at the start or the meal service.
- Children serve themselves as the serving bowls are passed around the table.
- Adults encourage children to take more food when a child does not take a component or when he/she does not take a full portion.
- The child must sit at the table for the meal to be claimable. The child does not have to take or eat any food.

SECTION IV – CHILD ENROLLMENT FORM

The Child Enrollment Form is the document that enrolls children in your care for participation on the CACFP. In order for you to be reimbursed for meals/snacks served to a child, an accurate parent/guardian signed Child Enrollment Form for that child must be received by ACD prior to, or with, the Claim on which the child first appears.

Submit a completed Child Enrollment Form for all children who participate in your child care operation, regardless of reimbursement category (FREE, REDUCED, or PAID). A Child Enrollment form is required when a child first comes into your care. A new Enrollment Form is required for each child in care annually.

Center staff may fill out sections 1-4 on the child enrollment form. The remaining sections of the form should be completed by the parent/guardian ONLY.

The complete Child Enrollment Form must be verified and signed by the child's parent/guardian. You may be terminated from the CACFP for signing this form for the parents/guardians, even if the parents/guardians have granted you permission to do so.

Before submitting a completed Child Enrollment Form to ACD for a new child in your care, review it for complete and correct information. If any information is incomplete or inaccurate, your reimbursement may be delayed or denied. Mail/scan a copy of the form to ACD prior to, or with, the Claim on which the child is first claimed, and retain a copy of the form in this Center Handbook for your records. You can also enter child enrollment information directly onto the computer using Minute Menu's "Enroll Child" function. **However, a signed copy of the enrollment form is needed in order for ACD to approve that child to be claimed.** You may be reimbursed for only the meals/snacks that fall within the child's scheduled times in care as documented on the Child Enrollment Form.

You will not be reimbursed for meals/snacks served outside of a child's scheduled time in care unless an updated enrollment form documenting a long-term (more than two weeks) or permanent schedule change is received by ACD prior to, or along with, the Claim on which the new schedule goes into effect.

INFANT FORMULA & FOOD WAIVER

According to USDA regulations, if you care for infants, you must offer to provide, at no additional cost to parents/guardians, at least one type of iron-fortified infant formula and baby food as

prescribed by CACFP infant meal pattern requirements. A parent/guardian may accept the formula and/or baby food that you offer or she/he may choose to supply another type of infant formula, breast milk, and/or baby food.

If a parent/guardian supplies infant formula and has signed to waive this entitlement on the Child Enrollment Form, you will still be reimbursed for meals/snacks served to infants when developmentally appropriate meals are served, and you provide the other meal components (if any). You must also keep a copy of the signed waiver (which is on the Child Enrollment Form), at your home.

PHYSICIAN STATEMENT FOR FOOD SUBSTITUTION — ISBE FORM (67-48)

When Do You Need a Physician Statement for Food Substitution (March 2012)?

The Physician Statement for Food Substitution must be completed when, for medical reasons, a day care child's diet deviates from the CACFP Meal Pattern requirements. The form must be completed by the child's physician. All areas of the form must be completed. This form does not replace daily records on your Claim of the food served. You must still record on your Claim the meals/snacks served to the child daily.

A new Physician Statement for Food Substitution is required if the substitution continues beyond the end of the effective date as indicated on the form by the physician.

Mail a copy of the completed Physician Statement for Food Substitution to ACD.

Meals/snacks that deviate from the CACFP Meal Pattern requirements will not be reimbursed until the Physician Statement for Food Substitution prescribing the deviation is on file with ACD. File the bottom copy in this Center Handbook.

Medical Reasons to Make Food Substitutions

- Disability that substantially limits one or more major life function—you **MUST** make the food substitution
- Food allergy that is life threatening—you **MUST** make the food substitution
- Food intolerance—you **are not required** to make the food substitution

Other Food Substitution Requests

- Personal Preference
- Religious Belief

You are **not required** to make these substitutions. We recommend you have a written policy on how you will handle these requests.

SECTION V- DOCUMENTING EXPENSES

The purpose for documenting expenses is to demonstrate your operation of a nonprofit food service program.

NONPROFIT FOOD SERVICE

All revenue received or accruing to the food service is restricted and used only for allowable costs. Any revenue in excess of expenses is used only to maintain, expand or improve the institution's nonprofit food service for its participants.

THE INSTITUTION'S RESPONSIBILITY

1. The institution must maintain records identifying all of its food service activities
2. Retain all nonprofit food service revenue in a restricted account
3. Use the nonprofit food service account only for allowable food program costs

CASH DISBURSEMENTS

Used to document goods and services expenses

- Food Costs** – food and beverage items that are included on your menu and consumed by the children in your care as part of a reimbursable meal or snack
- Allowable Non-food Costs** – non-food items used to support the operation of the food program, such as plates, cups, napkins and dishwashing detergent
- Overhead Costs** – rent, utilities and trash may be allocated to the food program at a certain percentage

- Administrative Supplies** – items such as copy paper and printer ink that were used specifically for the operation of the food program
- Unallowable Costs** – items that were included on a food program receipt but were not used in the operation of the food program

PERSONNEL ACTIVITY REPORT – ISBE FORM 76-54

Used to document labor expenses

- Labor is a unique program cost and there are specific federal regulations that govern the tracking of labor costs.
- Personnel Activity Reports must be done in addition to payroll reports.
- Employees should document their own work hours on the Personnel Activity Reports daily.
- Do not track labor using the Cash Disbursements form.
- Administrative Labor
- Operational Labor

MONTHLY PROFIT OR LOSS SUMMARY – ISBE FORM 67-93

1. Used to summarize reimbursement and expenditures
2. Used to document the operation of a non-profit food service program
 - o Meal reimbursement
 - o Cash in lieu of commodities reimbursement
 - o Administrative expenses
 - o Operational expenses
 - o Monthly profit or loss status
 - o Annual profit or loss status

MONTHLY MILK PURCHASE ESTIMATE EXAMPLE – ISBE FORM 68-50

Used to estimate the number of gallons of milk you will need to purchase in a given month

SECTION VI – NUTRITION GUIDELINES FOR CHILDREN

In order to be reimbursed for feeding children in your care, they must be served according to the CACFP meal pattern requirements.

The required portions listed in the “Meal Chart for Children” chart in the **Crediting Food Guide** (enclosed in the Center’s Handbook) are minimum CACFP required servings that must be offered to all children in your care. We encourage you to serve more than the required portions if the children want or need more food. Occasionally, children may refuse to eat the minimum portions. In these instances, you will be reimbursed for the meal/snack provided you offered the minimum portions and encouraged the child to eat the offered food item(s). Each component of the CACFP meal pattern requirements is explained below.

NEW REGULATION REQUIREMENTS

Child Nutrition Reauthorization

- Low Fat (1%) or Skim Milk—for children 2 years and older
- Drinking water must be made available to children upon request

FLUID MILK

- Milk is a required component at breakfast, lunch, and dinner, and may be served as one of the two required components at snack.
- Milk must be pasteurized and meet state or local standards for fluid milk.
- **Fat-free or low fat (1%) milk, Fat-free or low fat (1%) lactose reduced milk, Fat-free or low fat (1%) lactose free milk, Fat-free or low fat (1%) buttermilk, or Fat-free or low fat (1%) acidified milk are creditable.**
- **Whole milk and reduced-fat (2%) milk may not be served to participants over two years of age.**
- Milk must contain vitamins A and D at levels specified by the FDA.
- At breakfast, milk may be served over cereal, as a beverage, or used in part for each purpose as long as the minimum portion requirement is served.
- If milk is one of the two components at snack, the second component cannot be a liquid (e.g., 100 percent juice) but must be a solid (e.g., crackers).
- Milk as an ingredient in cooked cereals, puddings, or other foods is not creditable as a milk component.
- Milkshakes containing the minimum required quantity of

fluid milk per serving for the age of the children being served are creditable as a milk component.

- Hot chocolate made with pasteurized, fluid milk is creditable as a milk component.

In the case of children who cannot consume fluid milk due to medical or other special dietary needs, other than a disability, non-dairy beverages may be served in lieu of fluid milk. However, they must be nutritionally equivalent to milk and meet the nutritional standards for fortification of calcium, protein, vitamin A, vitamin D, and other nutrients to levels found in cow’s milk. A Physician Statement for Food Substitution form must be submitted for approval to ACD in order to be claimed.

JUICE OR FRUIT OR VEGETABLE

- A serving of fruit, vegetable, 100 percent juice, or an equivalent quantity of any combination of these is required at breakfast, and may be served as one of the two components at snack.
- At lunch/dinner, two separate servings of fruits or vegetables must be served. At either of these meals, 100 percent juice may be counted to meet only one of the two (2) required servings.
- If 100 percent juice is one of the two components served at snack, the second component cannot be a liquid (e.g., milk) but must be a solid (e.g., crackers).
- Less than ½ cup of fruit/vegetable is considered a garnish and is not creditable toward a fruit/vegetable requirement (e.g., pickles on a hamburger).
- Cooked dry beans or cooked dry peas may be credited as a fruit/vegetable or a meat/meat alternate, but not as both in the same meal/snack. Examples include black beans, kidney beans, pinto beans, and chickpeas. String, green, or yellow beans, and garden peas are a fruit/vegetable, not a meat/meat alternate.
- Fruit or vegetable dishes that contain more than one fruit or vegetable (e.g., fruit cocktail) may be credited toward only one of the two required components at lunch/dinner.
- Store-bought canned fruit filling will contribute toward a fruit/vegetable requirement if the first item in the list of ingredients is fruit. Divide the amount of filling by two to determine the creditable amount. For example, ½ cup fruit filling is creditable as ¼ cup fruit. Homemade fruit filling will contribute to a fruit/vegetable requirement based on the amount of fruit placed in the product, divided by the number of servings.
- Home-canned juices, fruits, or vegetables are not creditable due to health and safety reasons.
- Only juice that is 100 percent juice is creditable. Fruit drinks, “ades,” punches, nectars, or blends containing less than 100 percent juice are not creditable. Juice labels that state “100% Natural” or “100% Vitamin C” does not mean it is 100 percent juice.

- Apple cider is creditable if it is undiluted, unsweetened and pasteurized.
- Fruits/vegetables in muffins and breads do not contribute toward a fruit/vegetable requirement because less than ½ cup fruit/vegetable is in each serving.
- The fruit/vegetable in cobblers, turnovers, and gelatins may contribute toward a fruit/vegetable requirement if each serving contains at least ½ cup fruit.
- The fruit juice portion of frozen 100 percent juice bars contributes toward a fruit/vegetable requirement. Only home-made frozen fruit juice bars made of 100 percent juice or commercial frozen fruit juice bars whose labels state “100% juice” are creditable. Read labels carefully to ensure that the product is 100 percent juice and not “made with 100 percent juice” this may indicate that the product is also comprised of other ingredients. If frozen fruit juice bars are served as one of the two snack components, the second component cannot be a liquid (e.g., milk) but must be a solid (e.g., crackers).
- On a homemade pizza, tomato sauce and other fruit/vegetable toppings can be credited as one fruit/vegetable component. On a commercial pizza, tomato sauce and other fruit/vegetable toppings can be credited as one fruit/vegetable component if you add additional sauce and/or fruit/vegetable toppings to the pizza so each serving contains the required portion of fruit/vegetable.
- The fruit/vegetable in gelatin salads or desserts may be credited toward the fruit/vegetable requirement if each serving contains a minimum of ½ cup fruit or ½ cup vegetable, or is 100 percent juice. If gelatin salads or desserts are served as one of the two snack components and are made with 100 percent fruit juice, the second component cannot be a liquid (e.g., milk) but must be a solid (e.g., crackers).
- Potatoes are creditable as a fruit/vegetable, not a grain/bread.
- Salsa made of all vegetable ingredients plus minor amounts of spices or flavorings is creditable as a fruit/vegetable component.
- The fruit in commercially prepared yogurt with fruit contains less than ½ cup fruit per serving and does not contribute toward a fruit/vegetable requirement. Fruit added to yogurt is creditable toward a fruit/vegetable requirement.

GRAIN/BREAD

- A grain/bread serving is required at breakfast, lunch, and dinner, and it may be served as one of the two required components at snack.
- To be creditable, a grain/bread must be enriched or whole grain, made with enriched or whole grain meal and/or

flour. Bran and germ are credited the same as enriched or whole grain meal or flour. Cereal must be whole grain, enriched, or fortified.

- The grain/bread must serve the customary function of bread in a meal. At lunch/dinner, the item must be served as an accompaniment to the main dish (e.g., dinner rolls) or as a recognizable integral part of the main dish (e.g., taco shells).
- Dessert-type grain/breads (e.g., cookies, cakes) may be served at snack only, and it is recommended that no more than two dessert-type items be served at snack each week.
- Potatoes are not creditable as a grain/bread; they are a fruit/vegetable.
- Potato pancakes are not creditable as a grain/bread because they contain a minimal amount of flour.
- Breeding and batter-type coating may be credited when served as part of the main dish of the meal. To claim the breeding or batter-type coating, 0.4 ounce or 10 grams (3 tablespoons dry) breeding or batter-type coating must be served to 1-5 year olds. It is recommended that another grain/bread item be served with the meal.

MEAT AND MEAT ALTERNATE

- A meat/meat alternate serving is required at lunch/dinner, and it may be served as one of the two components at snack.
- Meat includes beef, lamb, pork, fish, chicken, and turkey.
- Meat alternates include cheese, cottage cheese, yogurt, egg, cooked dry beans or cooked dry peas, peanut butter, soy nut butter, other nut or seed butters, peanuts, soy nuts, tree nuts, and seeds.
- To be credited toward the meat/meat alternate requirement, a menu item must provide a minimum of ¼ ounce cooked meat or an equivalent. The rest of the required serving must be met by adding other meats/meat alternates.
- Nuts and seeds may be credited as a serving of meat/meat alternate for snack, but may contribute toward no more than one-half serving of the meat/meat alternate at lunch/dinner. Nuts and seeds are a choking hazard for children under the age of 4 years.
- If cooked dry beans or cooked dry peas are served as a meat/meat alternate, they may not be counted as a fruit/vegetable at the same meal/snack. Examples are black beans, kidney beans, pinto beans, and chickpeas. Garden peas and string, green, or yellow beans are a fruit/vegetable, not a meat/meat alternate.
- Cottage cheese and ricotta cheese must be served at double the portion of regular cheese to contribute toward a meat/meat alternate requirement. A two-ounce (¼ cup) serving of these products is equivalent to a one-ounce

serving of meat/meat alternate.

- Any meat/meat alternate labeled “imitation” is not creditable (e.g., imitation cheese, imitation crab).
- A processed, canned, or frozen product (e.g., ravioli, macaroni and cheese, spaghetti) is creditable as a meat/meat alternate if the package has a Child Nutrition (CN) label, a product analysis sheet signed by an official of the manufacturer, or if you add extra meat/meat alternate to the product.
- Home-caught fish and game (e.g., venison, squirrel, and rabbit) are not creditable due to health and safety reasons unless inspected and approved by the appropriate Federal, State, or local agency. Home-slaughtered meat is not creditable.
- Peanut butter spread (a spread made with less than 90 percent peanuts) is not creditable as a meat/meat

alternate because it does not meet the FDA’s standard of identity for peanut butter.

- When serving peanut butter, it is recommended that another meat/meat alternate (e.g. cheese, yogurt, meat chunks, etc.) be served as well, since the required serving size may be too large for children Note: Peanut butter is a choking hazard for children under the age of 4 years.
- Dip is reimbursable if the base ingredient is a reimbursable food (e.g., beans, cheese, cottage cheese, peanut butter, yogurt, etc.).
- Commercial split pea, bean, and lentil soups are the only commercial soups that contribute toward a meat/meat alternate requirement. Other commercial soups (e.g., chicken noodle) contain insufficient quantities of a meat/meat alternate.

SECTION VII – NUTRITION GUIDELINES FOR INFANTS

In order to be reimbursed for feeding infants-children from birth through 11 months old, they must be served according to the CACFP Infant Meal Pattern Requirements.

Due to their rates of growth and development, infants have special dietary needs. The required portions listed in the “infant Meal Patten” chart in the *Crediting Food Guide* (enclosed in the Center’s Handbook) are minimum servings that must be offered to the infants in your care. We encourage you to serve more than the required portions if the infant(s) in your care wants or needs more food. Occasionally, children may refuse to eat the minimum portions. In these instances, you will be reimbursed for the meals/snacks provided you offered the minimum portions.

USDA DEFINITIONS

- *Infant:* A baby from birth through 11 months (any child less than one year of age)
- *Infant Formula:* Any iron-fortified infant formula, including soy-based, intended for dietary use solely as a food for normal, healthy infants served in liquid state according to manufacturer’s recommended dilution. Infant formula labeled low-iron or those specifically formulated for infants with inborn errors of metabolism or digestive or absorptive problems do not meet the infant meal pattern requirements.
- *Infant Cereal:* Any iron-fortified dry cereal specially formulated for and generally recognized as cereal for infants that is routinely mixed with breast milk or iron fortified infant formula prior to consumption.
- *Developmentally Ready:* An infant’s developmental readiness determines which foods should be fed, what texture the foods should be, and which feeding styles to use.

All infants develop at their own rate. Although age and size often correspond with developmental readiness, these should not be used as sole considerations for deciding what and how to feed infants. It is important to be aware of the infants rapidly developing mouth patterns and hand and body control so you know the appropriate food and texture to serve them and the appropriate feeding style to use at each stage of their

development.

On the Infant Meal Pattern Charts for ages 4 months through 11 months, you will see foods listed under the category *When Developmentally Ready*. If an infant is developmentally ready, you must offer these foods to the infant.

RESPONSIBILITIES OF CHILD CARE CENTERS

All Child Care Centers participating in the CACFP must purchase and provide all the infant foods appropriate for the age of the infant according to the Infant Meal Pattern Chart.

PARENT PROVIDING INFANT FORMULA/BREAST MILK

The decision of whether to breast-feed an infant or which type of infant formula is best for the infant is for the infant’s doctor and parent/guardian to make together. Therefore, parents or guardians may elect to decline the offered infant formula and supply their own iron-fortified formula or breast milk.

REIMBURSABLE INFANT MEALS

- *Feeding the Infant:* the Child Care Center staff must personally feed the infant to receive reimbursement. When a parent comes to the Child Care Center to feed the infant, the meal cannot be claimed for reimbursement.
- *Infant Formula:* An infant’s meal containing **only** formula, as specified on the Infant Meal Pattern, can be claimed for reimbursement regardless of who purchases the formula.
- *Breast Milk:* An infant’s meal containing **only** breast milk (expressed by the mother), as specified on the Infant Meal Pattern, can be claimed for reimbursement. It is acceptable to serve the infant less than the stated minimum portion of breast milk.
- If the full portion is not initially offered but the infant drinks all that is offered, additional breast milk must be provided if the infant is still hungry.
- A meal served to an infant that contains some amount of breast milk (and some amount of infant formula) is reimbursable as long as the total number of ounces offered to the infant meets, or exceeds, the minimum amount for breast milk/formula as specified on the Infant Meal Pattern.
- *Solid Infant Foods:* The decision to begin offering an infant solid food should be made by the infant’s doctor and parent/guardian. When the infant is 4 months through 7 months old and developmentally ready for solid foods, those foods listed on the Infant Meal Pattern under *When Developmentally Ready* must be served to the infant. Infants 8 through 11 months are able to eat a wider variety of solid

foods as listed on the Infant Meal Pattern. If a parent brings in solids foods for the infant the meal can be claimed **only** when the meal meets the Infant Meal Pattern requirement and the Child Care Center purchases and serves at least one of the food items according to the Infant Meal Pattern.

- A Child Care Center may puree/grind regular food to the appropriate consistency for infants. If commercial baby food is purchased, it must meet the specified requirements.
- *Medical Statement:* If the parent provides an infant formula that does not meet the USDA definition of infant formula, or the parent wants the infant to receive cow's milk before one year of age, a medical statement signed by a physician is required in order to receive reimbursement. The medical statement must be kept on file at ACD and at the Center's home.

RECORD KEEPING REQUIREMENTS

- **Menus and Claims:** Menus and Claims designating food items served to infants must be maintained within the Center's records for four years (the current year plus the three previous years).
- **Meal Participation Records:** meals served to infants must be recorded on the Claim.
- **Infant Formula/Food Waiver Notification:** It is required to have written notification of the type of infant formula provided by the Child Care Center and to allow parents to accept or decline the infant formula purchased by the Child Care Center. Infant Formula/Food information is required for each infant – regardless of who supplies the formula or food (i.e., Center or parent).

AGE CATEGORIES

- **Birth through 3 months** means from the day an infant is born until the day before the infant turns 4 months old (e.g., John was born on January 13. He should be fed from the "birth through 3 months" category from January 13 through the last meal/snack served on May 12).
- **4 months through 7 months** means from the first day of an infant's fourth month of life until the day before the infant turns 8 months old (e.g., John should be fed from the "4 months through 7 months" category from May 13 through the last meal/snack served on September 12).
- **8 months through 11 months** means from the first day of an infant's eighth month of life until the day before the infant turns 12 months old (e.g., John should be fed from the "8 months through 11 months" category from September 13 through the last meal snack served on January 12).
- On a child's first birthday, she/he must be served according to the CACFP Meal Pattern Requirements for 1-2 year olds.

BREAST MILK

- Meals/Snacks containing only breast milk are creditable when served to infants from birth **through 7 months** when you serve the breast milk by bottle. Meals/snacks containing only breast milk will not be reimbursed when the infant's mother breast feeds the infant in your Child Care Center. The only exception is if you, the Center, are income-eligible to claim your own infant.
- Beginning on the day an infant turns 8 months old, breast milk must be supplemented with the other required or optional components provided by you for meals/snacks to be creditable.
- You may serve less than the minimum regulatory serving of breast milk to infants who regularly do not consume the required amount of breast milk; however, additional breast milk must be offered if the infant is still hungry.

IRON-FORTIFIED INFANT FORMULA

- Formula served must be iron-fortified infant formula. It must be intended as the sole source of food for healthy infants, and must be served in the liquid state at the manufacturer's recommended dilution.
- Formula may be milk-based or soy-based.
- Low-iron infant formula may be served as a dietary substitute only when prescribed by a medical doctor as documented on a Doctor's Food Substitution Form on file with ACD.
- According to the American Academy of Pediatrics, iron-fortified infant formula is the only acceptable alternative to breast milk during the first year of life because it is specially formulated to have the right balance of nutrients and can be easily digested by infants.
- The label on infant formula must state "with iron" or "iron-fortified."
- According to USDA regulations, if you care for infants you are required to offer at least one type of iron-fortified infant formula. A parent/guardian may elect to accept the formula you offer or she/he may choose to supply another type of infant formula. All parents/guardians of infants must complete and sign an Infant Formula & Food Waiver contained in Section 7 of the Child Enrollment Form. File a copy of the Child Enrollment Form in this Center Handbook or in another designated area. The original Child Enrollment Form must be submitted to ACD.
- If the parent/guardian supplies the infant formula, and an Infant Food & Formula Waiver contained on the Child Enrollment Form is on file in your home, and at ACD, you will be reimbursed for meals/snacks served to the infant when developmentally appropriate meals are served.
- For a period of one month, when a child is weaning from

infant formula to whole cow's milk, meals/snacks that contain infant formula may be reimbursable. When a child is weaned from formula to cow's milk, it is a common practice to provide the infant with both foods at the same meal/snack service to gradually ease the infant to accept some of the new food. Thus, for a child 13 months of age and older who is not in this transitional stage, a Doctor's Food Substitution Form is needed for a meal/snack containing infant formula to be eligible for reimbursement.

MILK

- Since the American Academy of Pediatrics does not recommend serving cow's milk to children under the age of 1 year, whole cow's milk is not creditable when served to children under the age of 12 months.

SOLID FOODS

- Solid foods are optional components for infants beginning in the "4 months through 7 months" category.
- You are encouraged to consult parents/guardians before introducing optional solid foods.

IRON-FORTIFIED INFANT CEREAL

- Cereal served to infants must be iron fortified, dry infant cereal such as Infant Rice Cereal, Infant Oatmeal, Infant Barley Cereal, or Infant Mixed Cereal.
- Infant cereal may be mixed with either breast milk or iron-fortified infant formula.
- Adult cereal, such as Cheerios and oatmeal, is not creditable as infant cereal; however, it may be offered as additional food after all required components have been served.
- Iron-fortified infant cereal is an optional component for infants beginning in the "4 months through 7 months" category. It becomes a required component on the first day of the infant's eighth month of life.
- Iron-fortified dry infant cereal containing commercially-added fruit is not creditable.
- Jarred commercial infant cereal, with or without fruit, is not creditable.
- There is no substitution for iron-fortified cereal at breakfast.

FRUITS AND VEGETABLES

- Fruits and vegetables served to infants must be solid (e.g.,

applesauce, peaches, etc.). The only exception is that 100 percent full strength fruit juice may be served to infants in the "8 months through 11 months" category at snack only.

- Vegetable juice is never creditable when served to infants.
- Commercial infant fruits and vegetables that contain single or multiple fruits or vegetables and list fruit or vegetable as the first ingredient on the label are reimbursable as a fruit/vegetable component.
- Commercial infant fruits and vegetables with water listed as the first ingredient are not creditable.
- Commercial infant fruit desserts (e.g., Hawaiian Delight, Tutti Fruitti) are not creditable.

MEAT AND MEAT ALTERNATES

- Meats/Meat alternates may be substituted for infant cereal in the "8 months through 11 months" category at lunch/dinner only. This allows for the gradual introduction of new solid foods to infants.
- Creditable meats/meat alternates in the "8 months through 11 months" category are meat, fish, egg yolk, cooked dry beans or cooked dry peas, cheese, and cottage cheese.

BREADS & CRACKERS

- Crusty breads and crackers are an optional snack component for infants in the "8 months through 11 months" category.
- Breads and crackers must be made from whole grain or enriched meal or flour.

SECTION VIII – FOOD SAFETY AND SANITATION

Bacteria and germs are present all around us—in the air, on kitchen surfaces, on utensils, and in most foods. To grow, bacteria need warmth, moisture, and a food source. Some bacteria are harmless, some are even helpful, but many cause serious illness. Bacteria and germs multiply rapidly. One germ can produce 281 trillion more germs in 24 hours. By adhering to good food safety and sanitation practices, you can take necessary steps to avoid food borne illness and help keep the children in your care healthy. Food that is contaminated may look perfectly fine, so be sure to follow these guidelines.

GROCERY SHOPPING

- Make the grocery store your last stop when running errands. Take food straight home to the refrigerator or freezer. Never leave food in a hot car!
- Pick up perishables (i.e., foods that will spoil if they are not refrigerated) last.
- Check the “use-by” date to ensure that you do not buy anything you will not be able to use in time.
- Do not buy food that is in poor condition. Make sure refrigerated food is cold to the touch. Frozen food should be rock-solid. Do not purchase a product if there are dribbles, leakages, or odors. Canned goods should be free of rust, dents, cracks, and bulging lids, which can indicate a serious food poisoning threat.
- In the summer, keep a cooler in your car. Pack foods that must be refrigerated in the cooler.
- At the grocery store check-out, ask that foods that must be frozen or refrigerated be put in a bag separate from the other foods. Also, have meat and poultry products double packaged in plastic bags to keep them cold when transporting them home.

PREPARING FOOD

- Wash hands in hot soapy water before preparing food, and after using the bathroom, changing diapers, and handling pets.
- Thaw food in the microwave or refrigerator, NOT on the kitchen counter. Bacteria can grow in the outer layers of food before the inside thaws. Marinate in the refrigerator too.
- Wash all fruits and vegetables before cooking or serving. Use a little soap and warm water and scrub with a vegetable brush.
- Keep raw meat, poultry, fish, and their juices away from other food. For example, wash your hands, in addition to

utensils, in hot, soapy water after cutting up chicken and before dicing produce.

- Use separate cutting boards for meat and produce to avoid cross-contaminating foods as you prepare them.
- Clean all appliances (e.g., can opener, blender, food processor, etc.) after each use. (See “Clean and Sanitize: Practices to Follow” on page 17.)
- Before opening canned goods, wash the lid first. When opening vacuum-sealed jars, listen for the “pop.”

STORING FOOD

- Check the temperature of your refrigerator with an appliance thermometer (available at a hardware store). To keep bacteria in check, the refrigerator should run at 40°F, the freezer unit at 0°F. See the “Cold Storage” chart on page 28.
- Keep the refrigerator and freezer clean. Do not crowd or completely cover the shelves—air must circulate throughout. Keep the coils, motor area, and underneath dusted and clear of obstruction.
- When you return home from the grocery store, put perishables (foods that will spoil if they are not refrigerated) away first.
- Repeated handling introduces bacteria. Whenever possible, leave food in its original container.
- Freeze fresh meat, poultry, or fish immediately if you cannot use it within 2-3 days.
- Put packages of raw meat, poultry, or fish on a plate before refrigerating so their juices will not drip on other food. Place on the bottom rack of the refrigerator.
- Do not wash fruits and vegetables before storing. Wait to wash them until just before serving to ensure that they are as clean as possible.
- Store canned goods in a cool, dry place—never over the stove, under the sink, in the garage, or in a damp basement. Choose products that have “use-by” dates.
- Never taste food that looks or smells strange to see if you can still use it. “When in doubt, throw it out.”
- Is food moldy? The mold you see is only the tip of the iceberg. The poisons mold can form are found under the surface of the food. All moldy food should be discarded immediately.
- Label and date foods you place in the refrigerator and freezer; always use the oldest first.

COOKING FOOD

- Cook food to the proper temperature. It takes thorough cooking to kill harmful bacteria.
- Use a meat thermometer to make sure that meat and poultry are cooked all the way through.
- To check visually, red meat is done when it is brown or gray inside; poultry is done when the juices run clear; fish is done when it flakes easily with a fork.
- Never partially cook foods and then store for later cooking. If you microwave foods, transfer immediately to the grill or oven and cook until done.

- Cook eggs until the yolk and white are firm, not runny. Scramble eggs to a firm texture. Do not use recipes in which eggs remain raw or only partially cooked. Salmonella, bacteria that causes food poisoning, can grow inside fresh, unbroken eggs.
- Use a clean spoon whenever you want to taste or sample food, and never place that spoon back in the food.
- Keep animals, cages, feeding dishes, and litter boxes out of the kitchen.

MICROWAVING FOOD

- Cover food with a lid or paper product designed for use in the microwave so steam can aid thorough cooking.
- Stir and rotate your food for even cooking. If your microwave does not have a turntable, rotate the dish by hand once or twice during the cooking process.
- Observe the “standing time” called for in a recipe or on package directions. The food finishes cooking during this time.
- Use an oven temperature probe or a meat thermometer to ensure that food is done. Insert it at several spots. Sometimes a microwave leaves cold spots in food where bacteria can survive.
- Do not heat infant bottles in the microwave. Infants may be burned by liquid that is too hot.

SERVING FOOD

- Use clean dishes and utensils to serve food, not those used in preparation. Serve grilled food on a clean plate, not on the one that held raw meat, poultry, or fish.
- Never leave perishable food out of the refrigerator for more than two hours. Bacteria that can cause food poisoning grow quickly at warm temperatures.
- Pack lunches in insulated carriers with a cold pack. Caution children never to leave lunches in direct sunlight or on a warm radiator.
- Carry picnic food in a cooler with a cold pack. When possible, put the cooler in the shade. Keep the lid on as much as possible.
- Keep cold food cold (below 40° F) and hot food hot (above 140° F).

HANDLING LEFTOVERS

- Do not leave leftovers out for more than two hours before freezing or refrigerating.
- Divide large amounts of leftovers into small, shallow containers for quick cooling in the refrigerator or freezer.
- Do not over pack the refrigerator or freezer. Cool air must circulate to keep food at a safe temperature.

- Remove stuffing from poultry or other meats, and refrigerate in separate containers.
- When reheating sauce, soup, or gravy, bring to a boil. Heat other leftovers thoroughly to 165° F.
- For thorough heating, microwave leftovers using a lid or paper product designed for use in the microwave.
- Freezer burn does not make food poisonous. However, it does make food tasteless and tough.
- Label and date foods you place in the refrigerator and freezer; always use the oldest first.
- Do not return baby food or milk to its original container.
- Discard formula or breast milk that remains in the bottle after a feeding. Do not reheat!
- Throw away foods that have been partially eaten; for example, a plate of macaroni and cheese, a jar of baby food, the remains of a sandwich.

CLEANING UP

- Use paper towels to clean up, and throw them away after each use. Bacteria can live in cloth towels and sponges.
- Give each child her/his own wash cloth or disposable wipe to clean herself/himself up after meals. Never use a dishcloth.
- Wash, rinse, then soak dishes for 1 minute in 1 tablespoon bleach per two gallons water, then air dry. Do not dry dishes with a towel.
- Sanitize tables, chairs, and the floor of the eating and food preparation areas.
- Sanitize countertops and keep them uncluttered. (See “Clean and Sanitize; Practices to Follow” on page 17.)

IF THE POWER IS OUT

Freezer

- Without power, a full upright or chest freezer will keep food frozen for about 2 days. A half-full freezer will keep food frozen 1 day.
- If power will be restored soon, keep the door shut as much as possible.
- If power will be off for an extended period, take food to friends’ freezers, a commercial freezer, use dry ice, or, if power is out during the winter when it is very cold, set the food outdoors.

REFREEZING THAWED FOODS

- Foods still containing ice crystals or foods that feel refrigerator-cold can be refrozen.
- Discard any thawed food that has warmed to room temperature and remained there for two hours or more.

- Immediately discard any food with a strange color or odor. Be aware, however, not all spoiled food has an odor. “When in doubt, throw it out.”

IS IT FOOD POISONING?

If you, a family member, or a child in your care develop nausea, vomiting, diarrhea, fever, or cramps, it may be food poisoning. Unfortunately, it is not always easy to detect since, depending on the illness, symptoms can appear anywhere from 30 minutes to 2 weeks later.

Most often, though, people get sick within 4 to 48 hours after eating contaminated food. In more serious cases, food poisoning victims may have nervous symptom problems such as paralysis, double vision, or difficulty swallowing or breathing. If symptoms are severe, or if the victim is very young, an older adult, pregnant, or already ill, call a doctor or go to the hospital immediately.

PERSONAL SANITATION

Many health experts consider hand washing to be the single most important way to reduce the spread of infectious diseases such as colds and flu and the germs that transmit them. Hand contact is the most common way that children pick up germs and spread them from surface to surface, and to other children and adults. Children should be taught how to properly wash their hands at a very young age.

THE 12 COMMANDMENTS OF HAND WASHING

It is important for everyone to wash their hands...

- (1) after using the restroom;
- (2) after playing outdoors;
- (3) before each meal and snack;
- (4) after playing with pets; and,
- (5) after coughing or sneezing into hands or a tissue.

In addition to the above situations, adults should wash their hands...

- (6) before preparing, serving, or feeding food to children;
- (7) after caring for a sick child;
- (8) after helping a child in the restroom;
- (9) after cleaning up spills;
- (10) after changing diapers;
- (11) after any other cleaning activities; and,
- (12) after handling raw meat.

TEACH CHILDREN THESE STEPS FOR HAND WASHING

- Turn water to a comfortable temperature (to avoid burns, water should not exceed a maximum temperature of 115° F).
- Moisten hands with water and squirt a drop of liquid soap on hands. Rub hands together to make a soapy lather. The rubbing motion helps pull dirt, grease, and oil free from the skin so that germs can be washed away. Pay particular attention to the backs of the hands, areas between fingers, around nail beds, and under fingernails. Continue washing for 20 seconds, or while singing the entire alphabet song.
- Rinse hands thoroughly under warm, running water, directing flow from wrist to fingertips. Never fill a basin with water and have several children wash their hands together. Hands must be washed under running water to ensure that germs are washed away. By sharing water, children will also share germs.
- Dry hands with a clean paper towel.
- Turn off faucet with paper in hand, then discard.

WASH THE HANDS OF INFANTS AND TODDLERS:

- Wipe hands with damp paper towel moistened with liquid soap.
- Wipe hands with paper towel moistened with clean water.
- Dry hands with paper towel.
- Turn off faucet with the paper towel in hand, and then discard.
- **Germs can be discouraged from becoming permanent residents in your Child Care Center. Be aware of these key factors.**
 - Do not allow children to share tissues. Shared tissues will spread germs from child to child.
 - Set aside a separate place in your Child Care Center to change diapers. The location should be away from food and food-preparation areas.
 - Keep work surfaces clean. Pay special attention to cracks, joints, and edges where food particles may collect.
 - Teach children to cover their mouths with tissue when coughing and/or sneezing, or direct coughs and/or sneezes into the shoulder or arm to help prevent germs from spreading.
 - Wipe all food service areas (i.e., tables, chairs, and floors) when children are finished eating. Food left behind results in bacterial growth and becomes a breeding ground for unwelcome pests.
 - Open cuts, sores, boils, or rashes must not come in contact with food. Wash cuts thoroughly and cover with a clean bandage.

CLEAN AND SANITIZE: PRACTICES TO FOLLOW

Clean: When you clean, you remove dirt, food, and grease from a surface by using soap or detergent and water.

Sanitize: When you sanitize, you kill harmful bacteria and viruses that may be on a surface, even if the surface looks clean. When you sanitize, you must use a sanitizing solution.

Sanitizing Surfaces: Items such as countertops, sinks, highchair trays, tables used for eating, plastic-coated placemats, and plastic-coated bibs should be sanitized using the spray method.

- Clean surface with warm, soapy water.
- Rinse with clean water.
- Spray surface with sanitizing solution (see “Sanitizing Solution for Surfaces” below.)
- Wipe the sprayed solution over the surface with a clean paper towel.
- Air dry. Do not rinse off the sanitizing solution.

Sanitizing Solution for Surfaces: Use 1 tablespoon bleach (do not use scented bleach) to 1 gallon of warm (not hot) water. Mix bleach and warm water. Store mixture in a labeled spray bottle. Solution can be used for up to one week.

Sanitizing Items: Items such as dishes, glassware, cutting boards, utensils, pots, and pans should be sanitized using the immersion method.

- Wash items in warm, soapy water.
- Thoroughly rinse items to remove all soap or detergent.
- Half fill your sink with water. Add ½ tablespoon of bleach for every gallon of water your sink can hold.
- Immerse items in the solution for at least one minute.
- Air dry items in a drying rack. Do not rinse off sanitizing solution.
- Store clean and sanitized items in a clean area. Never store items on the floor.

ACTIVITIES

Pepper Run Experiment

This activity demonstrates how soap affects germs. The pepper represents germs. Children will be able to see how soap keeps the germs (pepper) away.

Fill a bowl or pan with water. Shake pepper into the water. Dip a finger into the water; notice how the pepper sticks to the finger. Remove finger and wipe clean. Rub a bar of soap on the finger, then dip the finger into the water. This time the pepper will “run” to the sides of the bowl, away from the finger. The water has surface tension much like skin. Pepper lies on the water, just like germs lie on the skin. The soap breaks the water’s surface, just like soap breaks the skin’s surface. When children wash with soap and water, germs are sent running—much like the “pepper on the run.”

Petroleum Jelly Experiment

This activity shows children why it is important to use warm water, soap, and scrubbing motion when washing hands.

Put petroleum jelly on the children’s hands. Ask the children to predict if the petroleum jelly will wash off:

- When they hold their hands under cold running water. ***The water will just run off.***
- When they hold their hands under warm running water. ***Only a little petroleum jelly will be removed.***
- When they add soap and warm water and just hold their hands under the running water. ***A little more petroleum jelly is removed.***
- When they add soap, warm water, and rub their hands. ***The petroleum jelly will quickly wash away.***

Bacteria Temperatures Experiment

To demonstrate how fast bacteria can spread and grow, and the ease with which it can be slowed by temperature, use active dry yeast.

- Place a packet of dry yeast in each of three small dishes. The yeast represents bacteria. (Read the label to see if you need to add a teaspoon of sugar to each dish to help the yeast grow.)
- Put about ¼ cup of lukewarm water in one dish, boiling water in a second, and ice water with an ice cube in a third.
- In a few minutes, you should have dramatic evidence of the growth of the yeast at room temperature, but not in the bowls containing hot and cold water. This is what happens to bacteria at room temperature, when they are exposed to heat through cooking, and when they are exposed to cold through refrigerating and freezing.

FOOD SAFETY & SANITATION QUIZ

Test your knowledge about food safety and sanitation by taking this short quiz.

1. To grow, bacteria need which of the following conditions (circle all that apply)?

- a. Warmth
- b. Moisture
- c. A food source
- d. Cool temperatures

2. Food that is contaminated may look perfectly fine; but when in doubt, throw it out. True or False?

3. When washing hands...

- a. Use cold water.
- b. Use hot water.
- c. Vigorously scrub hands with soap under warm, running water.
- d. Dip hands in a sink full of hot water

4. When preparing ground beef, you know that it is thoroughly cooked when...

- a. Its internal temperature is 150° F.
- b. It is just a little pink in the middle.
- c. You have cooked it according to the recipe directions.
- d. The center of the beef is brown or gray, not pink.

5. Wash fruits and vegetables after you get home from the grocery store and before you store them in the refrigerator.

True or False?

6. Which of the following illnesses are caused by improper food safety and/or improper personal sanitation practices?

(circle all that apply)

- a. E. Coli
- b. Salmonella
- c. Hypertension
- d. Botulism

ANSWERS

1. a, b, c: To grow, bacteria need a warm, moist environment and a food source. That is why perishable foods (foods that will

spoil if they are not refrigerated or frozen) must be kept out of the “danger zone” - temperatures between 40° F and 140° F. Cool temperatures (below 40° F) stop growth; hot temperatures (above 140° F) kill bacteria.

2. True: Even food that looks perfectly fine may be contaminated. For example, after removing a spot of mold from a piece of cheese, the remainder of the cheese may appear mold-free, however, poisons formed by the mold may have branched out under the surface. All moldy food should be discarded.

3. c: The most effective method to remove germs from your hands is to moisten them with warm water, squirt a drop of liquid soap on them, rub them together to make a soapy lather, then rinse them under warm, running water. Cold water will just run off hands without removing dirt and germs. Hot water may burn hands. A sink full of water is a breeding ground for bacteria, so always wash hands under running water and not in standing water.

4. d: Red meat is thoroughly cooked when the center is brown or gray in color. Pink indicates that the meat is undercooked and may harbor bacteria that cause E. coli, a food-borne illness that can result in death. To ensure that meat is thoroughly cooked, use a meat thermometer to check that its internal temperature is 160° F.

5. False: Even if you wash fruits and vegetables before storing them in the refrigerator, you must wash them right before preparing them to ensure that any food drippings, dirt, germs, and bacteria are washed away.

6. a, b, d: E. coli is caused by eating raw or rare ground beef or drinking unpasteurized milk that is contaminated. Salmonella is caused by eating raw or undercooked food (such as eggs and poultry) that is contaminated, or food that has come in contact with infected or raw food, or was contaminated by an infected person who did not properly wash her/his hands before handling the food. Botulism is caused by eating food that is contaminated because it was improperly canned in the home or not refrigerated or frozen within two hours of when it was taken from the oven.

SECTION IV – REVIEWS AND COMPLIANCE

REVIEW TYPES

Introductory Visit: When you seek information about joining the CACFP under the sponsorship of ACD, an ACD Field Monitor will schedule a Review to explain the program to you, review the Center Handbook, complete the Site Information sheet, review all policies and instruct you on claim documentation.

Trimester Review: The CACFP fiscal year is divided into three trimesters of four months each. Your Field Monitor must review your Child Care Center at least once each trimester.

Reviews are broken down into the following types:

- 1. Four-Week Review:** No later than four weeks (28 days) after you have been approved by ISBE to participate with the CACFP and have begun claiming, your Field Monitor will schedule a Review with you. The monitor will provide technical assistance and nutrition training, review the Claim, review copies of the Child Enrollment Forms, and distribute training materials. Allow a minimum of 2-4 hours for this review.
 - 2. Unannounced Review:** To ensure your claiming pattern is consistent with past Claims, that attendance and meals are recorded daily, and that your Claims are up-to-date, your Field Monitor will review your Child Care Center a minimum of two times each fiscal year without giving you prior notification. One of these reviews will be conducted during a scheduled meal service time. Allow a minimum of 2-4 hours for this review.
 - 3. Announced Review:** Your Field Monitor may schedule a with you by contacting you in advance. Announced reviews are not required by ISBE.
 - 4. Meal Observation Review:** A minimum of two times each fiscal year, your Field Monitor will review your Child Care Center during the service of a meal/snack at the time listed on your Research Page. The Field Monitor must observe the day care children as they eat components of the meal/snack that are recorded on the claim.
- designated area. **Make sure to review all information on the Review for accuracy prior to signing it.**
 - At all times, this Center Handbook and all ACD paperwork must be accessible and up-to-date. This includes copies of current CACFP-related paperwork, including copies of your last three Review Forms, receipts, and Personnel Activity Reports.
 - Your Claim must be up-to-date with meals/snacks and attendance recorded daily (before midnight). You will not be reimbursed for meals/snacks if you have not recorded a meal/snack or attendance on the day it was served.
 - Your Claim must be on the premises of your Child Care Center and available for review by your Field Monitor during the hours that your Child Care Center is open for business. Failure of you or your assistant to produce a Claim during the hours that your Child Care Center is open for business will result in lost reimbursement.
 - All center staff should be knowledgeable about CACFP participation and knows where the Claim and all CACFP paperwork is kept so that they may participate in a Review in your absence. Failure to produce a Claim during the hours that your Child Care Center is open for business will result in lost reimbursement for meals/snacks served that month up to the day of the review.
 - Your current child care license must be posted in a visible spot in your Child Care Center. Always mail license renewal information immediately to the Association for Child Development, PO Box 7130; Westchester, IL 60154-7130.
 - You must notify ACD, in advance, when or if your Child Care operation will be closed, or if you will be out of the home during the meal/snack service period without an Assistant present.
 - If you or your staff refuses an ACD Field Monitor entry into your center during the hours that your Child Care operation is open for business, you cannot be reimbursed for any meals/snacks back to the last review or to the beginning of the fiscal year, whichever is most recent.
 - If not claiming on-line you must submit the Claim reviewed and signed by your Field Monitor when he/she conducted your Reviews. Failure to do so will result in loss of reimbursement for the entire month.
 - Always keep your copies of all Claims, all Child Enrollment Forms, Household Eligibility Forms, Site Information Sheet, Permanent Agreement, receipts, Personnel Activity Reports and Review Forms.
 - You must post in a clearly visible area (usually on the refrigerator) a copy of the CACFP/USDA “Building for the Future” brochure, Women, Infants, and Children (WIC) information, and Justice for All Poster.

GENERAL INFORMATION ABOUT HOME REVIEWS

- Topics discussed with your Field Monitor during a Review will be documented by her/him on the Review Form. You must read and sign the Review Form at the end of the review and file your copy in this Center Handbook or other

As a sponsor of the CACFP, ACD has a responsibility to ISBE and the USDA to ensure that all Child Care Centers remain in compliance with state and federal regulations. To do this, ACD's Compliance Department regularly conducts reviews and audits of Center files as well as household contacts.

REVIEW

A Center review is an all-encompassing picture of a Center's CACFP participation during the current fiscal year (Oct. 1-Sept. 30). It is prompted by Field Monitor documentation, information gathered during claim processing, complaints or concerns from parents/guardians, complaints or concerns from the Department of Children and Family Services (DCFS), the Illinois Department of Human Services (DHS) or ISBE, or by random selection by ACD.

All paperwork in a Center's file is reviewed by ACD to ensure it supports the Center's reimbursement claims (e.g., Child Enrollment Forms, Household Eligibility Applications, Menus, and Review Forms).

List of non-compliance findings:

1. Submission of false information on the application (sponsor/provider agreement). 7CFR Part 226.16(l)(2)(i).
2. Submission of false claims for reimbursement. 7CFR Part 226.16(l)(2)(ii).
3. Simultaneous participation under more than one sponsoring organization. 7 CFR Part 226.16(l)(2)(iii).
4. Serving meals that do not meet the USDA meal pattern. 7 CFR Part 226.16(l)(2)(v).
5. Failure to keep required records (meals, meal participation, attendance, etc.). 7 CFR Part 226.16(l)(2)(v).
6. Conduct or conditions that threaten the health or safety of the children in care, or the public health or safety. 7CFR 226.16(l)(2)(vi).
7. A determination that the center has been convicted of any activity that occurred during the past seven years and indicated a lack of business integrity. A lack of business integrity includes fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, receiving stolen property, making false claims, obstruction of justice, or any other activity indicating a lack of business integrity as defined by the agency, or the concealment of such a conviction. 7CFR 226.16(l)(2)(vii).
- a. *NOTE: When this non-compliance finding is discovered, ACD will immediately suspend the Center's participation.*
8. Failure to participate in training. 7CFR 226.16(l)(2)(viii).
9. Any other circumstance related to non-performance under the sponsor/provider agreement as specified by the sponsor or the State agency. 7CFR 226.16(l)(2)(ix).
10. Failure to abide by the ACD "Code of Conduct" as a Center on the CACFP.

Procedure: In any event that a non-compliance finding is discovered during a review of the child care center, conducted by an ACD, ISBE, or USDA representative, the following compliance procedure will be followed:

1. When any non-compliance finding(s) is discovered by an ACD Field Monitor, it is documented on the review form.
2. Next, the Center is provided CACFP training by the ACD Field Monitor to correct and avoid future instances of the non-compliance finding(s) detected. All training provided is also documented on the review form. Any meal disallowances that need to be deducted by ACD as a result of the non-compliance finding(s) will also be noted on the review form. The ACD Field Monitor must also verbally orate the entire review form information documentation to the Center, and request a signature acknowledging and accepting the review form documentation. This serves as confirmation of acceptance to the review and reconfirms the responsibility the Center must ensure to maintain with ACD to ensure successful compliance performance while participating in the CACFP.
3. All completed review forms must be submitted to the ACD office. The review form and any compliance finding(s) discovered will be documented by the Principal Auditor in the Minute Menu CX database.
4. Once the review form and non-compliance finding(s) are entered in the database, the Principal Auditor creates a non-compliance notice letter to be sent to the Provider. This letter will contain the sequence of events during the

time the non-compliance finding(s) was detected (e.g., date/time of review, meal observed, etc.);

- a. All non-compliance finding(s) discovered;
- b. Any documentation of meal disallowances taken by ACD as a result of a non-compliance finding (i.e., false claiming, failure to keep accurate and daily records, etc.);
- c. All training provided at the time of the review; and,
- d. Re-confirmation of training and future tips to avoid future non-compliance occurrences, ensuring satisfactory compliance and participation with the CACFP under ACD's sponsorship.

Tracking / Monitoring Compliance Performance: The Principal Auditor will be responsible for tracking and monitoring the compliance performance of all Centers under ACD's sponsorship, with the assistance of the Minute Menu CX database.

- Reports will be generated by the Principal Auditor on a (monthly) basis to review and evaluate all Centers' compliance performance status.
- If consecutive occurrences of the same non-compliance finding is discovered the Principal Auditor will investigate in detail the Centers' CACFP records (e.g., meal and attendance records, claim reimbursement history, enrollment forms on file, household contacts, etc.).

The Principal Auditor may also conduct a file audit to determine the need or type of action ACD may take in order to assist in resolving the non-compliance performance with the Center or move towards termination of agreement.

File audit may include: household contact questionnaires, phone contact with parent/guardians of children enrolled in care.

- Follow-up reviews can also be conducted as a tool to monitor compliance performance with the Center, in instances where additional monitoring and technical assistance is required.

Termination of agreement: In the event a termination of a Center's agreement with ACD is a possibility due to consecutive occurrences of the same non-compliance finding, at the

discretion of ACD the following criteria must be considered, reviewed, and evaluated:

1. **Review history** – detailed results and documentation of all reviews conducted by ACD.
2. **Non-compliance history** – details and documentation of any non-compliance finding(s) discovered by ACD, ISBE, and USDA and the Center's response to correct the finding(s).
3. **Training history** – details and documentation of all training received by ACD.

Additional notations or documentation of such discretion shall be archived in the Provider's permanent and compliance records at the ACD office.