Michigan Center Handbook

Revised 2017
Welcome

Thank you for choosing the Association for Child Development (ACD) as your sponsor of the Child and Adult Care Food Program (CACFP). We believe that healthy children are this country's greatest resource. By participating in the CACFP, you are promoting high quality nutrition and showing your commitment to healthy children. Together, we will work to ensure that children are given every opportunity to learn sound nutrition practices and healthy eating habits.

We value and support you in your endeavor to operate a successful child care program.

Your reimbursement will begin from the date that the Michigan Department of Education approves your Center Application.

We look forward to working with you to provide the children in your care with nutritious meals and snacks.

Feel free to contact our Michigan Centers Department, toll-free, at (800) 234-3287 ext. 108 any time.

Sincerely,

Association for Child Development
Center Monitor

This Center Handbook contains step-by-step instructions to guide you through your CACFP participation.

Keep this book on hand. Refer to it whenever needed, and store all CACFP related paperwork in this book for easy access and reference.
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Mission Statement
The Association for Child Development (ACD) is a non-profit organization that educates parents and caregivers about nutrition to promote the development of children and establish healthy eating habits to last a lifetime.

A Brief History
During the 1970s, ACD was known for its many child care centers in Michigan. ACD was the first center in the state to have swimming pools and provide progressive programs such as infant swimming classes, gymnastics, and leisure time activities. In 1975, ACD became a non-profit organization. The following year ACD became a statewide Child and Adult Care Food Program (CACFP) sponsor. Since then, the Association for Child Development has grown to include the state of Illinois. Also in 1975, Congress became aware of the need for separate legislation for licensed child care institutions. The CACFP, formerly part of the Special Food Service Program for Children (SFSPC), emerged as a separate program. Since that time, the CACFP has undergone many adjustments, but its underlying purpose remains the same: to assist Child Care Providers in serving nutritious food to children in their care and to provide nutrition education for child care personnel. In 1981, ACD closed the last of its original child care centers.

Today, ACD’s primary responsibility is administering one of the largest CACFP sponsorships in the nation, serving both Michigan and Illinois. By monitoring more than 3,500 child care homes and 120 centers annually and preparing monthly reimbursements for each of these Child Care Providers and Centers, ACD fulfills its mission, ensuring that nearly 42,000 children receive nutritious meals each day!

Abbreviations and Glossary of ACD Terms
CACFP - Child and Adult Care Food Program
Child Enrollment Form - This is the informational form that must be kept on file for each child in your care that you claim on the CACFP. This form must be renewed yearly.
CIF - Claim Information Form. This form lists the children in your care and must be mailed with your Claim each month.
Claim - This is your menu which is referred to as a ‘Claim’ when received at ACD for reimbursement.
CN - Child Nutrition Label - A product statement based on USDA’s Food and Nutrition Service guidelines.
Fiscal Year - The fiscal year for the CACFP is October 1 through September 30.
HM - Homemade
MDE - Michigan Department of Education
Minute Menu - Database for claims
USDA - United States Department of Agriculture
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 Michigan Department of Education (MDE).

### How the CACFP Operates

You, the Director of 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. ACD review your Claim, then apply to MDE 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 in your center by an ACD Monitor who (1) monitors CACFP compliance and understanding, (2) trains you about the nutritional needs of children, and (3) assists you in meeting CACFP requirements.

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

### 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 and Homes 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 Homes, and much more.

**You are periodically reviewed by your Field Monitor.** Your Field Monitor conducts a review of your center 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
Section 1 - CACFP Overview

Field Monitor know if you would like a copy of these or any other handouts published by ACD.

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 Michigan Centers Department at ACD's toll free telephone number. A staff member will be happy to answer questions about completing forms, documenting an acceptable Claim, and a number of other topics by calling (800) 234-3287.

You receive important information and training on nutrition, child development, and participating on the Child and Adult Care Food Program. ACD has a full-time Registered Dietitian on staff who provides valuable trainings and nutrition information.

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.
- Monitoring Child Care Centers for CACFP compliance.

Why is the CACFP 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. The CACFP serves more than 4 million children each day!

Benefits for Children
The CACFP helps children receive healthy meals and snacks and establish healthy eating habits to last a lifetime.

Benefits for Parents
The CACFP ensures parents that their children are served nutritious meals and snacks.

Benefits for Child Care Centers and Providers
The CACFP offers partial meal and snack reimbursement for child care providers.
Section 2 - 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 reimbursements for all of the children in your center’s care regardless of their family’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 Center’s Claims each month, ACD applies to MDE for reimbursement money. As soon as the funds become available to ACD, your reimbursement is mailed to your child care center in the form of a check or directly deposited into your savings or checking account if requested. Claims are processed one month later than when meals are served. 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 MDE. Using this example, this reimbursement will generally be sent to you by the end of June. Claims received after June 5 will be reimbursed within 2-4 weeks of receipt at ACD. This is subject to change based upon MDE/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 the following:
- Family’s Income
- Supplemental Nutrition Assistance Program (SNAP) – The siblings of children receiving this benefit automatically can be claimed in the FREE category.
- Temporary Assistance to Needy Families (TANF) – The siblings of children receiving this benefit automatically can be claimed in the FREE category.
- Head Start – Automatically claimed in FREE category. (You must keep a Head Start 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 National School Lunch Program or NSLP).

• Emergency Shelter – Automatically claimed in FREE category. You must have intake records for all children, but Household Eligibility Applications are not required.

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.
A child in your care whose family receives benefits from Food Stamps; the Family Independence Program (FIP, formerly AFDC); the Food Distribution Program on Indian Reservations (FDPIR); the Supplemental Nutrition Assistance Program (SNAP, formerly WIC); federally funded Head Start (participants who meet the program's low income criteria); Pre-Kindergarten participants of the Even Start Program; the Commodity Supplemental Food Program (CSFP); Temporary Assistance to Needy Families (TANF); The Emergency Food Assistance Program (TEFAP); Medicaid; or the National School Lunch Program and School Breakfast Program will be eligible for FREE category.

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

**Determining Your Reimbursement Rate**

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) 234-3287 and request that a Direct Deposit Authorization Form be mailed, emailed, or faxed to you.

You may also download a form from our website at [www.acdkids.org](http://www.acdkids.org). Complete the form, and then return it to ACD. Requests for direct deposit are processed and become effective immediately.
Section 3 - Claims

The Claim is the form on which you must document CACFP meals/snacks served to children and the meal counts of those children at meals/snacks each month. Meal counts and menus are submitted to ACD via Minute Menu or mailed to the office 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 once a week.

You can use 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 classrooms, 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 the Center’s 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, submit online, mail, or scan a copy to the Association for Child Development, P.O. Box 1491, East Lansing, MI 48823. MDE 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.

For more information about how to enter meal counts directly on Minute Menu, please visit our website www.acdkids.org, go to the “Training” sections, and click on “How to –Training Videos”. 
Section 4 - 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 what 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. Your Center 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 Center’s 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 a new enrollment form documenting a long-term (more than 2 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 infants are cared for in your Center, you must offer to provide, at no additional cost to parents/guardians, at least one type of iron-fortified infant formula as required by CACFP infant meal pattern requirements.

A parent/guardian may accept the formula that you offer or she/he may choose to supply breast milk or other type of formula. Parents/guardians may provide no more than one infant meal component. For example, if the parent provides breast milk, the Center must provide baby food components as developmentally appropriate.

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

Doctor’s Food Substitution Form

When Do You Need a Doctor’s Food Substitution Form?

The Doctor’s Food Substitution Form must be completed when a child care child’s diet deviates from the CACFP Meal Pattern requirements due to a disability or medical condition. The form must be completed by a licensed medical professional. 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 Doctor’s Food Substitution Form is required if the substitution continues beyond the end of the effective date as indicated on the form.

Mail, email, or fax a copy of the completed Doctor’s Food Substitution Form to ACD. Meals/snacks that deviate from the CACFP Meal Pattern requirements will not be reimbursed until the Doctor’s Food Substitution Form prescribing or indicating the deviation is on file with ACD.

Medical Reasons to Make Food Substitutions
- Disability or medical condition that substantially limits one or more major life functions such as a food allergy—you MUST make the food substitution.
- Food allergy that is life threatening—you MUST make the food substitution.
- Food Intolerance or other medical reasons—you are encouraged to accommodate reasonable requests.

Other Food Substitution Requests
- Personal Preference
- Religious Belief
Centers have the option to accommodate other special dietary needs but are not required to make these substitutions. ACD recommends Centers have a written policy on how to handle these requests.
Section 5 - Documenting Expenses

The purpose of 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 can be used only for allowable costs. Any revenue in excess of expenses can be used only to maintain, expand or improve the institution's nonprofit food service for its participants.

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
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 Milk Purchases
Estimate Example
This worksheet is used to estimate the number of gallons of milk you will need to purchase in a given month. This handout can be found in your Introductory Binder.
In order to be reimbursed for feeding children in your care, they must be served according to the CACFP meal pattern requirements listed on page 19.

The required portions listed in the chart 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 as long as you offered the minimum portions and encouraged the child to eat the food item(s). Each component of the CACFP meal pattern requirements is explained below.

**Fluid Milk**
- Milk is required 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. Milk can be regular, lactose-reduced, lactose-free, acidified, or buttermilk.
- Milk requirements vary based on the children's age.
- Flavored milk (commercial or flavored with syrup, powder or straws) is not creditable for children under 6 years.
- Flavored milk claimed for children 6 or older must be fat-free.
- Breast milk provided by the child’s mother is allowed as a fluid milk substitute for children of any age.
- Menus must document milk fat content and if it is flavored.
- At breakfast, milk may be served over cereal, as a beverage or used in part for each purpose as long as the minimum portion 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 is not creditable as an ingredient in cooked cereals, puddings, or other foods except smoothies.
- If children cannot drink cow's milk due to medical or other special dietary needs other than a disability, non-dairy beverages may be served in place of cow's milk. Non-dairy beverages must be nutritionally equivalent to milk according to the nutrition criteria specified in the Milk Substitution Form. If non-dairy beverages do not meet the nutrition criteria, a medical statement signed by a recognized medical authority and an appropriate substitution should be provided.

For additional information about crediting milk, see the *Crediting Handbook for the Child and Adult Care Food Program*.

**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 at snack.
- At lunch/dinner, at least one vegetable and one fruit or two vegetables must be served. During meals, 100 percent juice may be counted to meet only one of the required servings of fruits or vegetables.
- Juice can be served no more than once per day across all claimed meals and snacks.
- 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).
- Only juice that is 100 percent juice is creditable. Fruit drinks, “ades”, punches, nectars, or blends with less than 100 percent juice are not creditable. Juice labels that state “100% Natural” or “100% Vitamin C” may or may not be 100 percent juice.

### Fluid Milk Requirements by Age

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<th>AGE</th>
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<tr>
<td>1 year old</td>
<td>Unflavored, whole milk</td>
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<tr>
<td>2-5 years old</td>
<td>Unflavored fat-free (skim) or low-fat (1%)</td>
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<tr>
<td>6 years and older</td>
<td>Unflavored fat-free (skim) or low-fat (1%) or flavored fat-free (skim)</td>
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• Pureed fruits and vegetables (such as in smoothies) credit as 100% juice.
• Two different forms of the same fruit or vegetable cannot be served in the same meal as two separate components (e.g. carrots and carrot juice).
• Less than 1/8 cup of fruit or vegetable is considered a garnish and is not creditable toward a fruit or vegetable requirement (e.g., pickles on a hamburger).
• Cooked dry beans or cooked dry peas may be credited as a vegetable or a meat/meat alternate, but not both in the same meal/snack. Examples include black beans, kidney beans, pinto beans, and chickpeas. The following beans and peas can only be claimed as vegetables: String, green, or yellow beans, and garden peas.
• Fruit or vegetable dishes that contain more than one fruit or vegetable (e.g., fruit salad or tacos) may be credited toward only one of the two required components at lunch/dinner.
• Home canned juices, fruits, or vegetables are not creditable for health and safety reasons.
• Fruits or vegetables in muffins and breads do not contribute toward a fruit or vegetable requirement because there is less than 1/8 cup in each serving.
• Fruit in grain-based desserts (e.g. pies, cobblers, crisps) can be claimed, but the grain cannot.
• The fruit juice portion of frozen 100 percent juice bars contributes toward a fruit requirement. Only the fruit or 100% juice portion may be counted. Maintain a Child Nutrition (CN) label, Product Formulation Statement, or recipe. If frozen fruit juice bars are served at snack, the second component cannot be a liquid.
• On a homemade pizza, tomato sauce and other fruit or vegetable toppings can be credited as one fruit or vegetable component. On a commercial pizza, tomato sauce and other fruit or vegetable toppings can be credited as one fruit or vegetable component if you add additional sauce and/or fruit or vegetable toppings to the pizza so each serving contains the required portion of fruit or vegetable.
• Potatoes are creditable as a vegetable, not a grain/bread.
• Salsa made of all vegetable ingredients plus minor amounts of spices or flavorings is creditable as a vegetable.
• The fruit in commercially prepared yogurt with fruit contains less than 1/8 cup fruit per serving and does not contribute toward a fruit requirement. Fruit added to yogurt is creditable.

For additional information about the crediting of fruits/vegetables, see the Crediting Handbook for the Child and Adult Care Food Program.

**Grain/Bread**

• A grain/bread serving is required at lunch, and dinner and may be served as a required component at breakfast or as one of the two required snack components.
• To be creditable, a grain/ bread must be enriched or whole grain, or made with enriched whole grain, bran, germ, 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.
• At least one grain/bread per day must be whole grain-rich. Whole grain-rich foods are made from at least 50% whole grains and any remaining grains must be enriched. Whole grain-rich grains/breads have a whole grain as the first ingredient or the second ingredient after water. Whole grain mixed dishes (which contain more than one food group e.g. lasagna or burritos) must contain a whole grain as the first grain ingredient. If a product does not meet this criteria, the food may still be considered whole grain-rich with documentation from a recipe or manufacturer’s statement. Whole grain-rich foods served must be clearly documented on menus as
with documentation from a recipe or manufacturer's statement. Whole grain-rich foods served must be clearly documented on menus as “whole grain-rich”, “whole grain,” “WGR,” or “WG.”

- Grain-based desserts (homemade or store-bought) are not creditable. Grain-based desserts include but are not limited to breakfast bars, brownies, cakes, cereal bars, cookies (including vanilla wafers), doughnuts, granola bars, sweet bread pudding, sweet scones, sweet pie crusts, sweet rolls, sweet rice pudding, and toaster pastries. While grain-based desserts are not creditable, they can be served as an extra or at a meal or snack that is not claimed.

- Breakfast cereals (including ready-to-eat, instant and regular and hot cereals) must contain no more than 6 grams of sugar per dry ounce (21.2 grams of sugar per 100 grams). This can be calculated using the Nutrition Facts label by dividing the amount of sugar per serving by the serving size listed in grams. If the result is 0.212 or less, then the cereal may be creditable. Alternatively, providers can use the chart below to figure out whether cereals are creditable.

- All WIC program breakfast cereals are creditable.

- Potatoes are not creditable as a grain/bread; they are a vegetable.

- Breading and batter-type coating may be credited when homemade or when the serving size is documented by a Child Nutrition (CN) label. To claim the homemade breading or batter-type coating, 0.4 ounce or 10 grams (3 tablespoons dry) breading 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.

For additional information about the crediting of grains/breads, see the Crediting Handbook for the Child and Adult Care Food Program.

**Meat and Meat Alternate**

- A meat/meat alternate serving may be served at breakfast up to three times per week in place of the entire grains/breads component.
- A meat/meat alternate serving is required at lunch/dinner and may be served as one of the two components at snack.
- Meats includes lean beef, lamb, pork, chicken, turkey, fish and other seafood.
- Meat alternates include cheese, cottage cheese, yogurt, soy yogurt, tofu, egg, cooked dry beans or 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 its 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.

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<th>Breakfast Cereal Chart</th>
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<td><strong>Grams of Cereal per serving</strong></td>
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Section 6 - Nutrition Guidelines for Children

- When serving peanut butter, or other nut or seed butters it is recommended that another meat/meat alternate (e.g., cheese, yogurt, meat chunks, etc.) be served along with it, 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.
- Peanut or other nut or seed spread (a spread made with less than 90 percent peanuts, tree nuts, or seeds) is not creditable as a meat/meat alternate because it does not meet the Food and Drug Administration's standard of identity for nut or seed butters.
- If cooked dry beans or cooked dry peas are served as a meat/meat alternate, they may not be counted as a vegetable at the same meal or snack. Examples are black beans, kidney beans, pinto beans, and chickpeas. The following beans and peas can only be claimed as vegetables: String, green, or yellow beans, and garden peas.
- Tofu or processed tofu products must contain 5 grams of protein per 2.2 ounces or 1/4 cup as documented by a Child Nutrition (CN) label or manufacturer’s statement. Tofu must be recognizable, not blended into drinks or desserts.
- 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 Formulation Statement from 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.
- Dip is reimbursable if the base ingredient is a reimbursable food (e.g., beans, cheese, cottage cheese, peanut butter, 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.
- Yogurt must contain no more than 23 grams of sugar per 6 ounces of yogurt or equivalent.

For additional information about the crediting of meat/meat alternates, see the Crediting Handbook for the Child and Adult Care Food Program.

<table>
<thead>
<tr>
<th>Oz yogurt per serving</th>
<th>Grams sugar per serving</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 oz (56 g)</td>
<td>7 g or less</td>
</tr>
<tr>
<td>2.5 oz (70 g)</td>
<td>9 g or less</td>
</tr>
<tr>
<td>3 oz (85 g)</td>
<td>11 g or less</td>
</tr>
<tr>
<td>3.5 oz (99 g)</td>
<td>13 or less</td>
</tr>
<tr>
<td>4 oz (113 g)</td>
<td>15 g or less</td>
</tr>
<tr>
<td>5.3 oz (150 g)</td>
<td>20 g or less</td>
</tr>
<tr>
<td>6 oz (170 g)</td>
<td>23 g or less</td>
</tr>
<tr>
<td>8 oz (227 g)</td>
<td>31 g or less</td>
</tr>
</tbody>
</table>

Cooking Methods
On-site deep frying is not allowed as a way to prepare creditable foods. Deep frying is defined as submerging foods in hot oil. This does not include stir-frying or pan frying foods in small amounts of oil. Foods pre-fried by the manufacturer or prepared offsite are creditable.

Non-Creditable Foods
The following foods are NOT creditable on the CACFP. While the foods in this list do not count toward meal pattern requirements, they may be served as additional components after all required components have been served.
Consult the *Crediting Handbook for the Child and Adult Care Food Program* for more information about some of these foods.

- Acorns
- Apple butter
- Bacon rinds
- Bacon, pork
- Bacon, imitation
- Barbecue sauce
- Bean noodles (cellophane noodles)
- Beef jerky
- Bread pudding, sweet
- Breakfast bars
- Brownies
- Cakes
- Caramel corn
- Canned, pressed luncheon meat (potted/deviled)
- Caramel corn
- Cereal bars
- Cereals (ready-to-eat, instant, or hot) with more than 6 grams of sugar per dry ounce of cereal (21.2 grams of sugar per 100 grams of dry cereal)
- Ceviche
- Cheese, imitation
- Cheese, products Cheese, powdered (in boxed macaroni and cheese)
- Chestnuts
- Chili sauce
- Chitterlings
- Coconut
- Commercial soup other than clam chowder, tomato, minestrone, vegetable, vegetable with other basic components, or split pea as a vegetable.
- Commercial soup other than split pea, bean, or lentil as a meat/meat alternate.
- Cookies (including vanilla wafers)
- Corn syrup
- Crab, imitation
- Cream
- Cream cheese
- Cream sauce
- Cream soup
- Custard
- Doughnuts
- Dry spice mixes
- Egg nog, commercial
- Eggs, substitutes
- Eggs, whites only
- Eggs, yolks only
- Evaporated milk
- Fig bar cookie filling
- Fish, home pickled
- Fish, noncommercial/home caught flavored milk for children 5 years old and younger
- Foods deep-fried on-site
- Frozen fruit flavored bars, commercial
- Fruit in commercial yogurt
- Fruit juice bases
- Fruit or vegetable drinks containing less than 100 percent fruit or vegetable juice
- Fruit-flavored waters, powders, and syrups
- Fruits and vegetables in breads, muffins, and cakes
- Fruit snacks, commercial
- Game (e.g., venison, squirrel, and rabbit) that are not slaughtered and inspected by an approved state or federal facility
- Grain/bread products that are not whole grain, bran, germ, or enriched, or not made with whole grain, bran, germ, or enriched ingredients
- Granola bars
- Gravy
- Half and half
- Ham hocks
- Home-canned foods
- Home slaughtered meat
- Homemade queso blanco or queso fresco
- Hominy
- Honey
- Ice cream
- Ice milk
- Imitation crab
- Imitation hot dogs
- Imitation milk
- Imitation seafood
- Jam, jelly, preserves
- Ketchup
- Kool-aid
- Lemonade
- Lemon pie filling
- Maple syrup
- Mayonnaise
- Mustard
- Neufchatel cheese
- Non-dairy milk substitutes that are not nutritionally equivalent to milk
- Nonfat dry milk, reconstituted
- Nut or seed meal or flour as a grain/bread
- Peanut spread or other nut or seed spread
- Pickle relish
- Pig’s feet, neck bones, or tails
- Popcorn
- Popsicles not made with 100 percent fruit juice
- Posole
- Potato chips
- Potted or deviled meats
- Pudding
- Pudding pops
- Raw milk
- Rice pudding, sweet
- Salad dressing
- Salt pork
- Scones, sweet
- Scrapple
- Shellfish, imitation
- Sherbet/Sorbet
- Shoestring potatoes
- Sour cream
- Soy beverages
- Soy drinks
- Sushi (raw seafood and sashimi)
- Sweet rolls
- Sweetened condensed milk
- Syrup
- Tapioca
- Tempeh
- Toaster pastries
- Toaster pastry filling
- Vegetable or fruit chips
- Vinegar
- Yogurt products other than low-sugar, commercial yogurts (homemade yogurt, frozen yogurt, liquid yogurt, yogurt bars, and yogurt coating on fruits and/or nuts)
- Yogurt with more than 23 grams of sugar per 6 ounces

Please see the next page for CACFP meal pattern requirements.

For more information on creditable and non-creditable foods, see the *Crediting Handbook for the Child and Adult Care Food Program.*

**Combination Dishes**

A combination dish is a single serving of food containing at least the minimum credible portion, per serving, of two or more of the required meal components. More food may need to be added to fill the whole requirement.

The minimum portion for...

- **meat/meat alternates** in a combination dish is 1/4 ounce by weight, or the equivalent
- **fruits or vegetables** in a combination dish is 1/8 cup
- **grains/breads** in a combination dish is 1/4 slice of bread, or the equivalent.

An amount of food less than the minimum portion used as a garnish, seasoning, or breading does not contribute to CACFP meal pattern requirements. Examples include, but are not limited to, less than 1/8 cup of raisins sprinkled on a serving of oatmeal, less than 1/8 cup of pickles on top of a hamburger, or less than 1/8 cup of bread crumbs sprinkled on top of a casserole.

Extra food in addition to the combination dish may be required to make a full portion of each meal component. For example, if one slice of quiche contains ½ an egg (which equals half of the required meat/meat alternate component at lunch/dinner for a 6-12 year old) the Provider could serve 4 ounces of yogurt to fulfill the rest of the requirement.

Multiple fruits and vegetables in a combination dish contribute towards one fruit or vegetable requirement but not both at lunch, dinner, or snack. For example, if the beef stew served contains stew meat, potatoes, carrots, and onions, the stew could only count for one vegetable component and an additional fruit or vegetable would need to be served. However, a chef salad or a fruit salad (with a meat/meat alternate) may be creditable as two servings of fruit or vegetable because the two or more fruits or vegetables are identifiable as individual servings and are served as part of an entrée.

Remember that when serving an item such as pizza, it must be homemade with quantities that meet CACFP meal pattern requirements, or if commercially purchased, must contain components to meet appropriate CACFP portion requirements. To claim the meat/meat alternate in commercial combination dishes such as pizzas, pot pies, and raviolis, make sure these products 1) have a Child Nutrition (CN) label or 2) obtain a Product Formulation Statement signed by the manufacturer.
When recording combination dishes, list only the foods that contribute toward CACFP meal patterns requirements. Do not list non-creditable components.

**EXAMPLE:** Chili made with ground beef, kidney beans, tomatoes, green peppers, and onions
1. Chili—indicate either Ground Beef or Kidney Beans
2. Cornbread
3a. Tomatoes
3b. Pineapple
4. Milk

### Section 6 - Nutrition Guidelines for Children

#### Ages:

<table>
<thead>
<tr>
<th></th>
<th>1-2</th>
<th>3-5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Breakfast</strong> (select fluid milk, fruit/vegetable, AND grain/bread OR meat/meat alternate)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fluid Milk</td>
<td>4 fluid oz</td>
<td>6 fluid oz</td>
<td>8 fluid oz</td>
</tr>
<tr>
<td>Fruit/Vegetable</td>
<td>1/4 cup</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>Grain/Bread</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bread or bread product</td>
<td>1/2 serving</td>
<td>1/2 serving</td>
<td>1 serving</td>
</tr>
<tr>
<td>Cooked cereal, grains, or pasta</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>Cold cereal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flakes or rounds</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
<td>1 cup</td>
</tr>
<tr>
<td>Puffed cereal</td>
<td>3/4 cup</td>
<td>3/4 cup</td>
<td>1 1/4 cup</td>
</tr>
<tr>
<td>Granola</td>
<td>1/8 cup</td>
<td>1/8 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Meat/Meat Alternate</td>
<td>1/2 oz</td>
<td>1/2 oz</td>
<td>1 oz</td>
</tr>
<tr>
<td><strong>Lunch/Dinner</strong> (select all five components)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fluid Milk</td>
<td>4 fluid oz</td>
<td>6 fluid oz</td>
<td>8 fluid oz</td>
</tr>
<tr>
<td>Meat/Meat Alternate</td>
<td>1 oz</td>
<td>1 1/2 oz</td>
<td>2 oz</td>
</tr>
<tr>
<td>Meat, poultry, fish, tofu, soy product, alternate protein products, cheese, large egg</td>
<td>1/2</td>
<td>3/4</td>
<td>1</td>
</tr>
<tr>
<td>Cooked dry beans or peas</td>
<td>1/4 cup</td>
<td>3/8 cup</td>
<td>1 1/2 cup</td>
</tr>
<tr>
<td>Peanut or other nut or seed butter</td>
<td>2 tablespoons</td>
<td>3 tablespoons</td>
<td>4 tablespoons</td>
</tr>
<tr>
<td>Peanuts, soy nuts, tree nuts, or seeds</td>
<td>1/2 oz = 50% of requirement</td>
<td>3/4 oz = 50% of requirement</td>
<td>1 oz = 50% of requirement</td>
</tr>
<tr>
<td>Yogurt</td>
<td>4 oz (1/2 cup)</td>
<td>6 oz (3/4 cup)</td>
<td>8 oz (1 cup)</td>
</tr>
<tr>
<td>Vegetables</td>
<td>1/8 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Fruits or Vegetables</td>
<td>1/8 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Grain/Bread</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bread or bread product</td>
<td>1/2 serving</td>
<td>1/2 serving</td>
<td>1 serving</td>
</tr>
<tr>
<td>Cooked cereal, grains, or pasta</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td><strong>Snacks</strong> (select two of the following five components)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fluid Milk</td>
<td>4 fluid oz</td>
<td>4 fluid oz</td>
<td>8 fluid oz</td>
</tr>
<tr>
<td>Fruit</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>Vegetable</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>Meat/Meat Alternate</td>
<td>1/2 oz</td>
<td>1/2 oz</td>
<td>1 oz</td>
</tr>
<tr>
<td>Meat, poultry, fish, tofu, soy product, alternate protein products, cheese, peanuts, soy nuts, tree nuts, or seeds</td>
<td>1/2 oz</td>
<td>1/2 oz</td>
<td>1 oz</td>
</tr>
<tr>
<td>Peanut or other nut or seed butters</td>
<td>1/2</td>
<td>1/2</td>
<td>1/2</td>
</tr>
<tr>
<td>Large egg</td>
<td>1/8 cup</td>
<td>1/8 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Cooked dry beans or peas</td>
<td>2 oz (1/4 cup)</td>
<td>2 oz (1/4 cup)</td>
<td>4 oz (1/2 cup)</td>
</tr>
<tr>
<td>Yogurt</td>
<td>1 tablespoon</td>
<td>1 tablespoon</td>
<td>2 tablespoons</td>
</tr>
<tr>
<td>Grain/Bread</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bread or bread product</td>
<td>1/2 serving</td>
<td>1/2 serving</td>
<td>1 serving</td>
</tr>
<tr>
<td>Cooked cereal, grains, or pasta</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Cold cereal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flakes or rounds</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
<td>1 cup</td>
</tr>
<tr>
<td>Puffed cereal</td>
<td>3/4 cup</td>
<td>3/4 cup</td>
<td>1 1/4 cup</td>
</tr>
<tr>
<td>Granola</td>
<td>1/8 cup</td>
<td>1/8 cup</td>
<td>1/4 cup</td>
</tr>
</tbody>
</table>
In order for Child Care Providers and Centers to be reimbursed for feeding infants, they must be served according to the CACFP Infant Meal Pattern Requirements as listed in the chart on page 22. Infants have special dietary needs due to their rapid rate of growth and development. The required portions listed in the chart are minimum servings that must be offered to the infants in your care as infants are developmentally ready. If infants in your care want or need more food, we encourage you to serve more than the required portions. Occasionally, children may refuse to eat the minimum portions. In these instances, you will be reimbursed for the meal/snack provided if 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 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. Soy-based, lactose-free milk-based, and specialized formulas are prescribed for a baby by a doctor and are used specifically for a medical problem.
- **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. There is no single way to determine if an infant is developmentally ready for solid foods, but these are a few helpful signs:
  - Sitting up with good head control;
  - Opening his/her mouth when food is coming;
  - Watching others eat;
  - Reaching for food;
  - Seeming eager to be fed;
  - Moving food from a spoon into his/her throat; and
  -Doubling his/her weight since birth or weighing 13 pounds or more.

On the Infant Meal Pattern for ages 6 months through 11 months, you will see foods listed under the category **When Developmentally Ready**. If an infant is developmentally ready, you must gradually introduce solid foods.

Age Categories
- **Birth through 5 months** means from the day an infant is born through the last day of the infant’s fifth month of life (e.g., John was born on January 13. He should be fed from the “birth through 5 months” category from January 13 through the last meal/snack served on July 12).
- **6 months through 11 months** means from the first day of an infant’s sixth month of life through the last day of the infant’s eleventh month of life (e.g., John should be fed from the “6 months through 11 months” category from July 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.

Responsibilities of Child Care Providers & Centers
All Child Care Providers and 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. Parents/guardians can provide up to one component of creditable infant meals and snacks.
Section 7- Nutrition Guidelines for Infants

Parent Providing Infant Formula/Breast Milk
The decision 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. This must be documented on the Child Enrollment Form pertaining to infants.

Reimbursable Infant Meals and Snacks

Breast Milk
- Breast milk is the best food for a baby because it provides all the right vitamins and minerals in the appropriate amounts. Breast milk contains antibodies that protect the infant’s digestive tract from infection, is easy to digest, ready to feed, and cost efficient.
- Meals/Snacks containing only breast milk and no solid foods are creditable when served to infants from birth through 6 months of age, and must be served in the liquid state at the manufacturer’s recommended preparation.
- Around 6 months of age, parents/guardians and providers should gradually introduce solid foods as developmentally appropriate.
- 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 until around 6 months of age, and must be served in the liquid state at the manufacturer’s recommended preparation.
- FDA Exempt Infant Formulas may only be claimed when prescribed by a licensed health professional due to a disability 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.”
- If there are infants in your care, 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 who decline the Provider’s formula or food must complete and sign an Infant Formula & Food Waiver contained in 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.
- 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.
- 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. 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.
**Infant Meal Patterns Requirements**

<table>
<thead>
<tr>
<th>Birth through 5 months</th>
<th>6 through 11 months</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Breakfast, Lunch, and Dinner</strong></td>
<td></td>
</tr>
<tr>
<td>4-6 fluid ounces breast milk or formula</td>
<td>6-8 fluid ounces breast milk or formula; and</td>
</tr>
<tr>
<td></td>
<td><strong>When developmentally ready</strong></td>
</tr>
<tr>
<td></td>
<td>0-4 tablespoons infant cereal, meat, fish, poultry, whole egg, cooked dry beans, or cooked dry peas; or</td>
</tr>
<tr>
<td></td>
<td>0-2 ounces of cheese; or</td>
</tr>
<tr>
<td></td>
<td>0-4 ounces (volume) of cottage cheese; or</td>
</tr>
<tr>
<td></td>
<td>0-4 ounces or ½ cup of yogurt; or a combination of the above; and</td>
</tr>
<tr>
<td></td>
<td>0-2 tablespoons vegetable or fruit or a combination of both</td>
</tr>
<tr>
<td><strong>Snack</strong></td>
<td></td>
</tr>
<tr>
<td>4-6 fluid ounces breast milk or formula</td>
<td>2-4 fluid ounces breast milk or formula; and</td>
</tr>
<tr>
<td></td>
<td><strong>When developmentally ready</strong></td>
</tr>
<tr>
<td></td>
<td>0-½ slice bread; or</td>
</tr>
<tr>
<td></td>
<td>0-2 crackers; or</td>
</tr>
<tr>
<td></td>
<td>0-4 tablespoons infant cereal or ready-to-eat breakfast cereal; and</td>
</tr>
<tr>
<td></td>
<td>0-2 tablespoons vegetable or fruit, or a combination of both</td>
</tr>
</tbody>
</table>

**Milk**
- Because the American Academy of Pediatrics does not recommend serving cow’s milk to children under the age of 1, whole cow’s milk is not creditable when served to children birth through 11 months.
- 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 licensed health professional is required in order to receive reimbursement. The medical statement must be kept on file at ACD and at the center.

**Solid Foods**
- The decision to begin offering an infant solid foods should be made by the infant’s parent/guardian and doctor. When the infant is around 6 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. Centers may not ask parents to supply food or formula. It must be the choice of the parents/guardians. Parents/guardians may only provide one component of a reimbursable infant meal (including breast milk or infant formula), and the Child Care Center provides all other food items according to the Infant Meal Pattern.
- A Child Care Center may puree/grind/chip regular food to the appropriate consistency for infants.
Section 7- Nutrition Guidelines for Infants

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.
- Infant cereal should never be offered in a bottle.
- Iron-fortified infant cereal may be served around 6 months as developmentally appropriate.
- Iron-fortified dry infant cereal containing commercially-added fruit is not creditable.
- Jarred commercial infant cereal, with or without fruit, is not creditable.

Ready to Eat Cereal
- Ready-to-eat adult breakfast cereals such as Cheerios are creditable for infants 6 through 11 months as developmentally appropriate. They must contain no more than 6 grams of sugar per dry ounce (21.2 grams of sugar per 100 grams of cereal).

Fruits and Vegetables
- Fruits and vegetables served to infants must be solid (e.g., applesauce, peaches, etc).
- Fruit and vegetable juices are not creditable for infants of any age.
- 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 are not creditable.

Meat & Meat Alternates
- Meats/Meat alternates may be served to infants 6 through 11 months as developmentally appropriate. This allows for the gradual introduction of new solid foods to infants.
- Creditable meats/meat alternates in the “6 months through 11 months” category are meat, fish, poultry, whole egg (white and yolk), cooked dry beans, cooked dry peas, cheese, cottage cheese, and yogurt. Foods labeled cheese food, cheese spread, and cheese product are not creditable for infants.

Breads and Crackers
- Crusty breads and crackers are an option as a snack component for infants in the “6 months through 11 months” category.
- Breads and crackers must be made from whole grain or enriched meal or flour.

Combination Baby Foods
- Combination, commercial baby foods or dinner (baby foods containing more than one food group) are not creditable.

Record Keeping Requirements:
- Claims – Claims designating food items served to infants must be maintained within the Provider’s records for four years (the current year plus the previous three 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 Provider and to allow parents to accept or decline the infant formula purchased by the Child Care Provider. Infant formula information is required for each infant whose parent/guardian supplies the infant formula. This information must be documented in the Child Enrollment Form.
**Breast Milk Storage Guidelines**

Store expressed breast milk in sterilized plastic or glass feeding bottles, or special breast milk storage bags.

Label containers of breast milk with the date and the infant’s name.

Containers of breast milk should be stored in the refrigerator or the freezer. Leave enough room in the container for the milk to expand and use the milk within three months.

Thaw frozen breast milk by placing it in warm water or defrost it in the refrigerator overnight. Never defrost frozen breast milk at room temperature, or in the microwave which can cause uneven heating and may damage the quality of the milk. Use breast milk that has been frozen and thawed within 24 hours, and do not refreeze it.

**Infant Non-Creditable Foods**

The following foods are not creditable when served to infants (birth through 11 months).

- Adult Cereals with more than 6 grams of sugar per dry ounce of cereal (21.2 grams of sugar per 100 grams of cereal)
- Baby food desserts
- Cheese food
- Cheese product
- Cheese spread
- Chocolate
- Combination commercial baby foods or dinners
- Cow’s milk
- Fish sticks
- Foods with water listed as the first ingredient
- Fruit juice
- Home-canned infant foods
- Honey
- Hot dogs
- Infant cereal containing commercially-added fruit
- Infant cereal served in a bottle
- Jarred cereal (with or without fruit)
- Low iron formula (unless prescribed by a Doctor’s Food Substitution Form)
- Meat sticks
- Nuts
- Peanut butter or other nut and seed butters
- Raw milk
- Seeds
- Shellfish
- Vegetable juice
- Yogurt with more than 23 grams of sugar per 6 ounces of yogurt
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 the 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 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 that will expire before you will be able to use it.
- 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.

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. Also, marinate in the refrigerator.
- Wash all fruits and vegetables before cooking or serving. Use a small amount of soap and warm water and scrub with a vegetable brush.
- Prepare food on food grade surfaces that have been cleaned and sanitized.
- Keep raw meat, poultry, fish, and their juices away from other food. Wash your hands, in addition to utensils, in hot, soapy water after cutting up meat; 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 29.)
- 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. To keep bacteria in check, the refrigerator should run at 40°F, the freezer unit at 0°F. See the “Cold Storage” reference chart on page 31.
- Keep the refrigerator and freezer clean. Do not crowd or completely cover the shelves—air must be able to circulate throughout. Keep the coils, motor area, and underneath dusted and clear of obstruction.
- When you return to your center from the grocery store, put perishables away first.
- 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.

• Store canned goods in a cool, dry place—never over the stove, under the sink, in the garage, or in a damp basement.

• 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 poisonous mold can form 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. “First in, First out.”

Cooking Food

• Cook food to the proper temperature. It takes thorough cooking to kill harmful bacteria. See the “Cooking Temperatures” reference chart on page 32.

• Use a meat thermometer to make sure that meat and poultry are cooked all the way through.

• Visually checking foods is not an accurate way to decide if meat, poultry, and fish are done.

• 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, a 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 the 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 in 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

• Keep cold food cold (below 40° F) and hot food hot (above 140° F).

• 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.

Handling Leftovers

• Throw away foods served to children individually or family style that have not been eaten by the end of the meal.

• Prepared food that has not been served to individuals or placed in family-style containers shall be promptly covered after preparation and stored appropriately.

• Leftover fresh foods should be served within 24 hours.
• Discard foods that have been left more than two hours at unsafe temperatures or more than one hour when temperatures are above 90° F.
• 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.
• When reheating sauce, soup, or gravy, bring to a boil. Heat other leftovers 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. Use frozen food within 30 days.
• 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!

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, or use a dishwasher.
• Sanitize tables, chairs, and the floor of the eating and food preparation areas.
• Sanitize counter tops and keep them uncluttered.

(See “Clean and Sanitize; Practices to Follow” on page 29.)

If the Power is Out

Freezer
• Without power, a full 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.

Refrigerator-Freezer Combination
• Without power, the refrigerator section will keep food cool 4-6 hours depending on the kitchen temperature.
• A full, well functioning freezer unit should keep food frozen for 2 days. A half-full freezer unit should keep foods frozen for 1 day.
• Block ice can keep food on the refrigerator shelves cool. Dry ice can be added to the freezer unit. Do not touch dry ice and do not breathe its fumes; follow handling directions carefully.
• If power is out during cold winter months, place food outdoors until power returns.

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 2 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 Handwashing**
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 tissue.
6. before prepping, 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**
1. Turn water to a comfortable temperature (to avoid burns, water should not exceed a maximum temperature of 115° F).
2. 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.
3. 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.
4. Dry hands with a clean paper towel.
5. Turn off faucet with paper in hand, then discard.

**Wash the Hands of Infants and Toddlers:**
1. Wipe hands with damp paper towel moistened with liquid soap.
2. Wipe hands with paper towel moistened with clean water.
3. Dry hands with paper towel.
4. Turn off faucet with paper in hand, 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 food and food-preparation areas.
- Keep work surfaces clean. Pay special attention to cracks 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 can bring unwelcome pests.
Section 8- Food Safety and Sanitation

• 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 the surface, even if the surface looks clean. When you sanitize, you must use a sanitizing solution.

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

1. Clean surface with warm, soapy water.
2. Rinse with clean water.
3. Spray surface with sanitizing solution (See “Sanitizing Solution for Surfaces” below).
4. Wipe the spray solution over the surface with a clean paper towel.
5. Air dry. Do not rinse off solution.

Sanitizing Solution for Surfaces:
1 tablespoon bleach (do not use scented bleach) to 1 gallon of lukewarm (not hot) water. Mix bleach and warm water.

To Sanitize Items: Items such as dishes, glassware, cutting boards, utensils, pots, and pans should be sanitized using the immersion method, or use a dishwasher.

1. Wash items in warm, soapy water.
2. Thoroughly rinse items to remove all soap or detergent.
3. Half fill your sink with water. Add 1/2 tablespoon of bleach for every gallon of water your sink can hold.
4. Immerse items in the solution for at least one minute.
5. Air dry items in drying rack. Do not rinse off sanitizing solution.

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.

1. 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.)

2. Put about 1/4 cup of lukewarm water in one dish, boiling water in a second, and ice water with an ice cube in a third.

3. 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.

For more information on food safety visit www.fsis.usda.gov or www.foodsafety.gov.
# Cold Storage Reference Chart

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>FOOD</th>
<th>REFRIGERATOR (40° F OR BELOW)</th>
<th>FREEZER (0° F OR BELOW)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salads</td>
<td>Egg, Chicken, Ham, Tuna, &amp; Macaroni Salads</td>
<td>3 to 5 Days</td>
<td>Does Not Freeze Well</td>
</tr>
<tr>
<td>Hot Dogs</td>
<td>Opened Package</td>
<td>1 Week</td>
<td>1 to 2 Months</td>
</tr>
<tr>
<td></td>
<td>Unopened Package</td>
<td>2 Weeks</td>
<td>1 to 2 Months</td>
</tr>
<tr>
<td>Luncheon Meat</td>
<td>Open Package or Deli Sliced</td>
<td>3 to 5 Days</td>
<td>1 to 2 Months</td>
</tr>
<tr>
<td></td>
<td>Unopened Package</td>
<td>2 Weeks</td>
<td>1 to 2 Months</td>
</tr>
<tr>
<td>Bacon &amp; Sausage</td>
<td>Bacon</td>
<td>7 Days</td>
<td>1 Month</td>
</tr>
<tr>
<td></td>
<td>Sausage raw- from chicken, turkey, pork, beef</td>
<td>1 to 2 Days</td>
<td>1 to 2 Months</td>
</tr>
<tr>
<td>Hamburger &amp; Other Ground Meats</td>
<td>Hamburger, ground beef, turkey, veal, pork, lamb, &amp; mixtures of them</td>
<td>1 to 2 Days</td>
<td>3 to 4 months</td>
</tr>
<tr>
<td>Fresh Beef, Veal, Lamb, &amp; Pork</td>
<td>Steaks</td>
<td>3 to 5 Days</td>
<td>6 to 12 Months</td>
</tr>
<tr>
<td></td>
<td>Chops</td>
<td>3 to 5 Days</td>
<td>4 to 6 Months</td>
</tr>
<tr>
<td></td>
<td>Roasts</td>
<td>3 to 5 Days</td>
<td>4 to 12 Months</td>
</tr>
<tr>
<td>Fresh Poultry</td>
<td>Chicken or Turkey, whole</td>
<td>1 to 2 Days</td>
<td>1 Year</td>
</tr>
<tr>
<td></td>
<td>Chicken or Turkey, pieces</td>
<td>1 to 2 Days</td>
<td>9 Months</td>
</tr>
<tr>
<td>Soups &amp; Stews</td>
<td>Vegetable or Meat added</td>
<td>3 to 4 Days</td>
<td>2 to 3 Months</td>
</tr>
<tr>
<td>Leftovers</td>
<td>Cooked Meat or Poultry</td>
<td>3 to 4 Days</td>
<td>2 to 6 Months</td>
</tr>
<tr>
<td></td>
<td>Chicken Nuggets or Patties</td>
<td>3 to 4 Days</td>
<td>1 to 3 Months</td>
</tr>
<tr>
<td></td>
<td>Pizza</td>
<td>3 to 4 Days</td>
<td>1 to 2 Months</td>
</tr>
<tr>
<td>Eggs</td>
<td>Fresh Eggs, in shell</td>
<td>3 to 5 Weeks</td>
<td>Do Not Freeze</td>
</tr>
<tr>
<td></td>
<td>Raw Egg Yolks, Whites</td>
<td>2 to 4 Days</td>
<td>12 Months</td>
</tr>
<tr>
<td></td>
<td>Hard Cooked</td>
<td>1 Week</td>
<td>Does Not Freeze Well</td>
</tr>
</tbody>
</table>

Source: [www.foodsafety.gov](http://www.foodsafety.gov)
<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>FOOD</th>
<th>TEMPERATURE (°F)</th>
<th>REST TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ground Meat &amp; Meat Mixtures</strong></td>
<td>Beef, Pork, Veal, Lamb</td>
<td>160</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td>Turkey, Chicken</td>
<td>165</td>
<td>None</td>
</tr>
<tr>
<td><strong>Fresh Beef, Veal, Lamb</strong></td>
<td>Steaks, roasts, chops</td>
<td>145</td>
<td>3 Minutes</td>
</tr>
<tr>
<td><strong>Poultry</strong></td>
<td>Whole and pieces</td>
<td>165</td>
<td>None</td>
</tr>
<tr>
<td><strong>Pork and Ham</strong></td>
<td>Fresh pork or fresh ham (raw)</td>
<td>145</td>
<td>3 Minutes</td>
</tr>
<tr>
<td></td>
<td>Precooked ham (to reheat)</td>
<td>140</td>
<td>None</td>
</tr>
<tr>
<td><strong>Eggs &amp; Egg Dishes</strong></td>
<td>Eggs</td>
<td>Cook until yolk and white are firm</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td>Egg Dishes</td>
<td>160</td>
<td>None</td>
</tr>
<tr>
<td><strong>Leftovers &amp; Casseroles</strong></td>
<td>Leftovers &amp; Casseroles</td>
<td>165</td>
<td>None</td>
</tr>
<tr>
<td><strong>Seafood</strong></td>
<td>Fish or shellfish</td>
<td>145</td>
<td>None</td>
</tr>
</tbody>
</table>

Source: [www.foodsafety.gov](http://www.foodsafety.gov)
### Food Borne Illness Reference Guide

<table>
<thead>
<tr>
<th>FOOD-BORNE ILLNESS</th>
<th>SOURCE</th>
<th>SYMPTOMS</th>
<th>PREVENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salmonella</td>
<td>Raw or under-cooked foods such as poultry, eggs, and meat. Cooked foods that have come in contact with infected or raw food, or were contaminated by an infected person.</td>
<td>Stomach pain, diarrhea, nausea, chills, fever, and headache that normally appear 6 to 48 hours after eating and may last 4 to 7 days.</td>
<td>Thoroughly cook all meat, poultry, fish, and eggs. Avoid contaminating cooked foods with juices from raw foods. Do not drink unpasteurized milk.</td>
</tr>
<tr>
<td>Staphylococcus Aureus (Staph)</td>
<td>Staph bacteria are found on skin, in infected cuts, and in noses and throats. They are spread by improper food handling. Staph can multiply rapidly at warm temperatures. Susceptible foods are meat, poultry, meat and poultry salads, cheese, egg products, starchy salads (e.g., potato, macaroni, pasta), custards, and cream-filled desserts.</td>
<td>Nausea, vomiting, and diarrhea that usually appear 1 to 6 hours after eating and may last 1 to 2 days.</td>
<td>Cooking will not destroy the Staph poison. Wash hands and utensils before preparing and serving foods. Refrigerate cooked foods that will not be served immediately in shallow, covered containers. Do not let prepared foods sit at room temperature for more than 2 hours.</td>
</tr>
<tr>
<td>Clostridium Botulinum (Botulism)</td>
<td>Home-canned foods (not creditable with the CACFP), foods left out overnight such as baked potatoes in foil.</td>
<td>Symptoms appear 12 to 72 hours after eating. Dry mouth, double vision, difficulty focusing, droopy eyelids, trouble speaking, swallowing, and breathing; nausea, vomiting stomach cramps and diarrhea. Can be deadly without treatment.</td>
<td>Do not eat foods from dented or damaged cans. Divide large portions of cooked foods (such as beef, turkey, gravy, stews, and casseroles) into smaller portions for serving and cooking. Keep cooked foods hot (above 140° F) or cold (below 40° F). Reheat leftovers to an internal temperature of at least 165° F.</td>
</tr>
<tr>
<td>Escherichia coli 0157:H7 (E. Coli)</td>
<td>Raw or rare ground beef, unpasteurized milk.</td>
<td>Severe abdominal cramps, diarrhea, nausea, vomiting, and occasionally a low-grade fever. Symptoms generally begin 1 to 3 days after food is eaten and last up to 10 days. May require hospitalization.</td>
<td>Thorough cooking and reheating, proper sanitation, and refrigeration below 40° F.</td>
</tr>
<tr>
<td>Clostridium Perfringens</td>
<td>Often called the “cafeteria” germ. Sources are roasts, meat, products, and poultry left at room temperature longer than 2 hours.</td>
<td>Diarrhea, stomach pains, vomiting, and fever within 8 to 16 hours after eating.</td>
<td>Keep cooked food above 140° F during serving. Cool cooked foods below 40° F within 2 hours after removing from the oven.</td>
</tr>
</tbody>
</table>
Section 8- Food Safety and Sanitation

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 warm water
   c. Vigorously scrub hands with soap under warm, running water.
   d. Dip hands in 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 of gray, not pink.

5. Which of the following illnesses are caused by improper food safety and/or improper personal sanitation practice? (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 must be kept out of the temperature range between 40° F and 140° F. Temperatures below 40° F stop growth; temperatures above 140° F kill bacteria.

2. True: Even food that looks fine may be contaminated. For example, after removing mold from a piece of cheese, the rest of the cheese may appear to be fine, 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 wet hands with warm water, squirt with a drop of liquid soap, lather and then rise under warm, running water. Cold water will not remove dirt and germs. 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. To ensure that meat is thoroughly cooked, used a meat thermometer to check that the internal temperature is 160°F.

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 or 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 from improperly canned in the home or not refrigerated or frozen within two hours of when was taken from the oven.
When you begin participating with the CACFP, the USDA requires an ACD Center Monitor to review your Child Care Center within your first 4 weeks (i.e., 28 days) of claiming and approximately every 4 months thereafter.

**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.

Reviews are broken down into the following types:

- **Four-Week Review:** No later than 4 weeks (28 days) after you have been approved by MDE to participate with the CACFP and have begun claiming, your Center Monitor will schedule a Review with you. The monitor will provide technical assistance and nutrition training, review the Claim and copies of the Child Enrollment Forms, and distribute training materials. Allow a minimum of 2-4 hours for this review.

- **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 Center 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.

- **Announced Review:** Your Center Monitor may schedule a meeting in your Center by contacting you in advance. Announced reviews are not required by MDE.

- **Meal Observation Review:** A minimum of two times each fiscal year, your Center Monitor will review your Child Care Center during the service of a meal/snack at your listed time. The Center Monitor must observe the child care children as they eat components of the meal/snack that are recorded on the claim. One of the unannounced reviews must observe a meal.

- **Shift Review:** If your Center is approved for shifts and claim meals/snacks in shifts, your Center Monitor will review your Child Care Center (unannounced) to observe a shifted meal/snack being eaten by both the first and second shift of children. Your Center Monitor will not leave your center until he/she has observed the entire shift.

- **Dinner/Evening Snack Reviews:** If you claim dinners or evening snacks, your Center Monitor will review your Child care center (announced or unannounced) to observe the children in your care eating dinner or evening snacks.

**General Information about Center Reviews**

- Topics discussed with your Center 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 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.

- Your Claim must be up-to-date with meals/snacks and attendance recorded at Point of Service. 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 Center Monitor during the hours that you Child Care Center is open for business. Failure to produce a Claim during the hours that your Child Care Center is open for
for business will result in lost reimbursement for meals/snacks served that month up to that meal/snack on the day of the review.

- All Center staff should be knowledgeable about CACFP participation and know where the Claim and all CACFP paperwork are 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 1491; East Lansing, MI 48823.

- You must notify ACD, in advance, when or if your Child Care operation will be closed, or if you will be out of the Center during the meal/snack service period without an Assistant present.

- If you or your staff refuses an ACD Center 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 from the first day of the month to the day of the refusal.

- Always keep your copies of all Claims, all Child Enrollment Forms, Household Eligibility Forms, Site Information Sheet, Permanent Agreement, and Review Forms.

- You must post in a clearly visible area a copy of the CACFP/USDA “Building for the Future” brochure; Women, Infants, and Children (WIC) information; and Justice for All Poster.

As a sponsor of the CACFP, ACD has a responsibility to MDE 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. Results of Center reviews and household contacts serve to protect and support all participating Child Care Centers nationwide.

**Center Review**

A Center review is an all-encompassing picture of a Center’s CACFP participation during the current fiscal year (October 1-September 30). It is prompted by Center Monitor documentation, information gathered during claim processing, complaints or concerns from parents/guardians, complaints or concerns from Department of Health and Human Services (DHHS) or MDE, 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).

The termination of the agreement and placement on the National Disqualified List is not appealable.

Within 10 days of receipt of termination and disqualification notice, MDE shall provide USDA-CACFP, Midwest Regional Office a copy of the notice. This will be forwarded to the Food and Nutrition Service Headquarters to add to the National Disqualified List.
Section 10 - Resources

Academy of Nutrition and Dietetics  
www.eatright.org

American Heart Association  
(800) 242-8721  
www.heart.org

Americans with Disabilities Act Information Line  
(800) 514-0301  
www.ada.gov

Association for Child Development (ACD)  
(800) 234-3287  
www.acdkids.org

Asthma and Allergy Foundation of America  
(800) 727-8462  
www.aafa.org

Autism Society of America  
(800) 328-8476  
www.autism-society.org

Autism Speaks  
(888) 288-4762  
(888) 772-9050 (español)  
www.autismspeaks.org

Centers for Disease Control and Prevention  
(800) 232-4636  
www.cdc.gov

Centers for Medicare & Medicaid Services  
www.cms.gov

Child Abuse Hotline  
(800) 422-4453  
www.childhelp.org

Child Care Aware of America  
(703) 341-4100  
www.childcareaware.org

Choose My Plate  
www.choosemyplate.gov

Council for Professional Recognition  
www.cdacouncil.org

Food Allergy Research & Education (FARE)  
www.foodallergy.org

Food and Drug Administration  
(888) 463-6332  
www.fda.gov

Food and Nutrition Information Center  
www.nal.usda.gov/fnic

Food Safety  
www.foodsafety.gov

Healthy Child Care America  
www.healthychildcare.org

Healthy Children  
www.healthychildren.org

Institute of Child Nutrition  
800-321-3054  
www.nfsmi.org

Internal Revenue Service (IRS) Forms & Publications  
(800) 829-3676  
www.irs.gov/forms-pubs

Michigan Breastfeeding Network  
http://www.mibreastfeeding.org/

Michigan Department of Education (MDE) CACFP  
(517) 373-7391  
www.michigan.gov/CACFP

Michigan Department of Education (MDE) Child Development  
www.michigan.gov/childcare

Michigan Department of Licensing and Regulatory Affairs  
Day care information line: 866-685-0006  
To report child abuse: (855) 444-3911  
www.michigan.gov/lara

Michigan Farm to School  
www.mifarmtoschool.msu.edu

Michigan Women, Infants, & Children (WIC)  
(800) 262-4784  
www.michigan.gov/WIC

MIChild and Healthy Kids  
(888) 988-6300  
www.michigan.gov/mibridges

National Healthy Mothers, Healthy Babies Coalition  
(703) 838-7552  
www.hmhb.org

National Association for the Education of Young Children  
(800) 424-2460  
www.naeyc.org

National Association for Family Child Care (NAFCC)  
(801) 886-2322  
www.nafcc.org
### Section 10- Resources

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<tr>
<th>Resource</th>
<th>Contact Information</th>
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<tbody>
<tr>
<td>National Fire Protection Association</td>
<td>(800) 344-3555 www nfpa org</td>
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<tr>
<td>National Health Information Center</td>
<td><a href="http://www.health.gov/">www.health.gov/</a></td>
</tr>
<tr>
<td>National Resource Center for Health &amp; Safety in Child Care &amp; Early Education</td>
<td>(888) 227-5125 www nrckids org</td>
</tr>
<tr>
<td>Safe to Sleep</td>
<td>www nichd nih gov/sts</td>
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<tr>
<td>USDA Child and Adult Care Food Program</td>
<td>(202) 720-2791 www fns usda gov/CACFP</td>
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<tr>
<td>USDA Meat and Poultry Hotline</td>
<td>(888) 674-6854</td>
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<tr>
<td>USDA Team Nutrition</td>
<td>www fns usda gov/tn/</td>
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<tr>
<td>What’s Cooking? USDA Mixing Bowl</td>
<td>whatscooking fns usda gov</td>
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<tr>
<td>Whole Grains Council</td>
<td>(617) 421-5500 www wholegrainscouncil org</td>
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**Tips for Building Your Child Care Business**

Get involved in your local Child Care association to make valuable contacts with other Child Care Providers. Let them know you are looking for children to care for in your center. Perhaps they can refer parents and children to your business.

Post signs/flyers in your neighborhood grocery stores, libraries, schools, community centers, dentist offices, churches, laundromats, etc., advertising your child care business. Always get permission before posting your flyer in these places. Be sure to include:

- That you are licensed
- That you provide nutritious meals
- The hours that your child care business is open, and
- Weekend care or late night care if available.

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This project is funded at least in part by USDA funds through the Michigan Department of Education and/or the Illinois State Board of Education.

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