



## Record Keeping Training FY'2023

*This is a required training for  
Child and Adult Care Food Program (CACFP) participation.*

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### Record Keeping Training FY 2023

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If not attending a “ZOOM” training presentation,  
you must complete all the Home Study Quiz questions on-line at  
[www.yoursforchildren.com](http://www.yoursforchildren.com) within two (2) weeks of receipt  
of this home study.

Yours for Children, Inc. 489 Washington Street Suite 109 Auburn MA 01501  
800-222-2731  
FAX 508-721-0919  
YFCI@yoursforchildren.com  
www.yoursforchildren.com

Yours for Children, Inc.



# Yours for Children, inc.

During the first week of next month, YFCI will email you confirmation of having completed this training.

Keep that email for your records!

Please print out that email and keep it in your  
Yours for Children, Inc. Provider Handbook.

A copy of this training's text will be included in that email for future reference.

# Let's Start

# Current USDA Non-Discrimination Statement

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

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

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

**1. mail:**

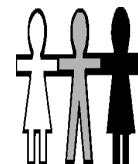
U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410; or

**2. fax:**

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

**3. email:** [program.intake@usda.gov](mailto:program.intake@usda.gov)

This institution is an equal opportunity provider.



The “**Building for the Future**” poster must be displayed in each home so parents are aware that the home is receiving federal assistance for serving meals which meet the nutrition requirements established by USDA. Yours for Children, Inc. has provided the poster for you. If you need another one, a copy may be downloaded and printed from our website: [www.yoursforchildren.com](http://www.yoursforchildren.com) > **providers** > **forms**.

**Good nutrition today means a stronger tomorrow!**

# Building for the Future

with  
**CACFP**

This day care  
receives support  
from the Child and  
Adult Care Food  
Program to serve  
healthy meals to your children.



**Meals served here must meet USDA's  
nutrition standards.**

**Questions? Concerns? Call USDA toll free:  
1-866-USDACND (1-866-873-2263)**

Learn more about CACFP at USDA's website:

<https://www.fns.usda.gov/>

USDA is an equal opportunity provider, employer and lender.

United States Department of Agriculture  
Food and Nutrition Service FNS-317  
October 2019

# Yours for Children, inc.

## *Child and Adult Care Food Program*

### *Record Keeping Training*

*for*

### *Fiscal Year 2023*

*(begins October 1, 2022)*

Yours for Children, Inc. (YFCI) is your sponsor of the Child and Adult Care Food Program (CACFP). The reimbursement you receive from the CACFP supports your ability to provide nutritious foods to your child care. The benefits of the program are many, but to receive these benefits there are record keeping requirements.

#### ***Maintain Daily:***

- 1. Copies of most Current Child Enrollment Forms** completed and signed by parents for all infants and children in care *including participating and non-participating children.*
- 2. Menus that are planned and recorded before each meal service.**  
These menus are to be dated and posted daily or weekly for parents.
- 3. Meal counts, by each meal type claimed,** supported by child enrollment forms, **recorded by the end of your business day.**
- 4. Daily attendance taken with in and out times** that support your meal counts.

***The attendance record alone is not a meal count.***

This training outlines the procedures for you to record information correctly and keep documents to comply with CACFP regulations. ***Failure to maintain required records may result in you being found seriously deficient in your operation of the CACFP and loss of reimbursement dollars.***

Have your assistants complete this training so that they understand the obligations of CACFP record keeping. Assistants must be able to maintain and access CACFP records if you are away from the child care home.

#### *Sources:*

Massachusetts Department of Elementary & Secondary Education "CACFP Family Day Care Policies and Procedures" 2012

USDA Management Improvement Guidance 1997

USDA Crediting Handbook for the Child and Adult Care Food Program 2014

USDA Family Day Care Homes Monitor Handbook—Child and Adult Care Food Program 2012

Yours for Children, Inc. Provider Handbook 2019





**Yours for Children, Inc.**

489 Washington Street, Suite 109  
Auburn, MA 01501  
800-222-2731  
FAX 508-721-0919  
E-Mail: [yfci@yoursforchildren.com](mailto:yfci@yoursforchildren.com)  
[www.yoursforchildren.com](http://www.yoursforchildren.com)

Please check (✓) one option:

**New Child Enrollment**     **Updated Child Enrollment**     **Reactivation for Returning Child**

**Beginning Date of Care/Update**

The effective date can be made retroactive back to the first day the child participates in the CACFP as long as it occurs in the same month this form is received.

**CACFP CHILD ENROLLMENT FORM**

**PLEASE PRINT**

Your Family Day Care Provider participates in the United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP) administered by the Massachusetts Department of Elementary and Secondary Education. Meals served must meet nutrition requirements established by USDA's Child & Adult Care Food Program. In order to participate, your provider has agreed to follow the USDA guidelines. A medical statement from your doctor is necessary if your child cannot eat foods required by the CACFP. In an effort to assess that these requirements are being met, the USDA and CACFP requires providers to annually collect the enrollment information listed below.

Please complete the form and return it to your Family Day Care Provider. Part 1 and Part 3 to be completed by all families or guardians. Part 2 to be completed ONLY if enrolling an infant child (under the age of 12 months).

**PART 1: CHILD ENROLLMENT INFORMATION**

Child's First Name _____		Last Name _____		Date of Birth _____/_____/_____	
Times Child Normally Attends For example 7:30 AM – 5 PM Hours from: _____ to _____		Check (✓) the days your child normally attends: <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday			
✓ Box <input type="checkbox"/> Schedule Varies		✓ Box <input type="checkbox"/> Schedule Varies			
School Age Child – Times Child Attends School. For example 8:00 AM – 3:00 PM School Hours from: _____ to _____		Check (✓) the meals you request that your child receives while in care: <input type="checkbox"/> Breakfast <input type="checkbox"/> AM Snack <input type="checkbox"/> Lunch <input type="checkbox"/> PM Snack <input type="checkbox"/> Supper <input type="checkbox"/> Evening Snack			
Child attends full day during school closures: <input type="checkbox"/> Yes <input type="checkbox"/> No		Check (✓) Child's Relation to Provider: <input type="checkbox"/> Not related <input type="checkbox"/> Related, Non-resident <input type="checkbox"/> Child Resides with Provider			

**PART 2: INFANT MEAL NOTIFICATION (Birth through 11 months)**

Nutritious meals meeting the United States Department of Agriculture guidelines are served to all children enrolled in this program, including children under the age of 12 months. The Provider must meet the meal component requirements based on age and developmental readiness as outlined in the Infant Meal Pattern. Parents/Guardians may supply not more than one (1) required component per meal in the meal pattern (including breast milk or formula) in order for the meal to be reimbursable in CACFP.

I understand that this Family Day Care Provider has available the iron fortified formula \_\_\_\_\_ for my infant while in care.  
(Name of Iron Fortified Infant Formula)

To help provide the best nutritional care for your infant, please complete the following information.

**PLEASE CHECK ONE (1) OPTION (Breast Milk/Formula)**

- I will supply expressed (pumped) breast milk for my infant child and/or breastfeed at the day care home. OR I will supply formula for my infant child.
- I prefer to have the Provider supply the formula offered.

**PLEASE CHECK ONE (1) OPTION (Food Items)**

- I will supply all food items for my infant's meals. I decline food items provided by the Provider.
- I have elected to have the Provider supply the formula and I wish to provide one food item. I will provide the following one creditable food item: \_\_\_\_\_
- I would like the Provider to provide all food items for my infant's meals.

**PART 3: PARENT OR GUARDIAN ACCEPTANCE AND SIGNATURE**

Civil Rights: This information is voluntary and will not affect your children's eligibility. Please indicate ethnic and racial identity of your children by checking (✓) a box in EACH of the categories. This information is being collected only to be sure that everyone receives CACFP benefits on a fair basis.

1. Ethnic Identity:    Hispanic or Latino    Non-Hispanic or Latino
2. Racial Identity:    American Indian or Alaska Native    Asian    Black or African American    Native Hawaiian or Other Pacific Island    White

Parent/Guardian, Please Print Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone Number \_\_\_\_\_ Cell Telephone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

I have read this Child Enrollment Form and request that my child receive the above CACFP benefits. I have received a copy of this completed form.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE SIGNED \_\_\_\_\_

PROVIDER NAME: \_\_\_\_\_ PROVIDER # \_\_\_\_\_

This institution is an equal opportunity provider.

Submit a copy to YFCI for activation    Keep a copy for your records    Give a copy to the parent/guardian    **YFCI 08/2022**

Yours for Children, Inc.

# Child Enrollment Forms

Enroll all children. **Every section of a Child Enrollment Form (CEF) must be completed.** Use a CEF for new or returning children or to update a permanent change.

- **Complete section highlighted in green on previous page. It is critical that YFCI know if the child is new, or if the parent updating information. Write the BEGINNING DATE OF CARE or UPDATE where indicated on the form.**

- You must offer CACFP participation to all children, including infants, by enrolling all children in your care.
- Make sure you are using Child Enrollments Forms dated 08/2022 in the lower right corner. Older, outdated CEF's are not acceptable.

- Write in the name of the Iron Fortified Infant Formula that you offer to all infants. See arrows in the yellow highlighted section on previous page. Ensure that parents complete all information about their infant.

- Parent(s) complete YFCI Child Enrollment Forms or document their choice not to participate. You must submit and keep copies of forms for non-participating children.
- A parent records most typical schedule:
  - Ø the days of week child attends.
  - Ø child's arrival and departure times.
  - Ø meals served in care.
  - Ø school departure and arrival back in child care times, if applicable.
  - Ø their choice of who is to supply the infant formula and infant food for infants.
- Make sure that parents record the schedule on the enrollment form reflects the care the child needs. Only days, times, and meals included in the schedule are eligible for CACFP reimbursement.
- Parent(s) sign and date the enrollment form after completing.
- Review and make sure CEF is completed in full with the correct information. Providers enter parent supplied child data into the KidKare program to ensure accurate meal count records. A "Pending" child is not "Activated" until completed enrollment form is received & reviewed by YFCI
- Give a copy of the completed CEF to the parent with a copy of the "Building for the Future" flyer.
- Retain a parent-signed copy for your current records and have available during Home Reviews.
- Submit a parent-signed copy to the YFCI office as soon as completed **and within the claim month.**
- Submit by fax, email, or mail. If submitted by fax or electronic means, we do not need the original mailed.



**Best Practice: Email the CEF directly to: [YFCI@yoursforchildren.com](mailto:YFCI@yoursforchildren.com).**

**Incomplete, incorrect information, or enrollment forms DATED or RECEIVED after the end of the claim month will not be eligible for reimbursement for that claim month.**

# Do Not Use these Generated from KIDKARE Child Enrollment Forms.

Provider: <b>Abdalian, Endza #001210</b> 26 Langdon Ave. Watertown MA	Phone: (617) 909-7701 Monitor: AmyBemat(55) MA 024720000 Tier:	<b>CHILD ENROLLMENT REPORT</b>	Food Program Sponsoring Agency: <b>Yours for Children, Inc.</b> 303-313 Washington Street Auburn MA 01501 (800) 222-2731
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<b>CHILD INFO:</b>	Status: Active Name: <b>Elijah</b> MI: Last Name: <b>Ryslik</b> Ethnicity: <b>Non Hispanic</b> Address: <b>26 Coolidge Hill Rd</b> State: <b>MA</b> Race: <b>White</b> City: <b>Watertown</b> Zip Code: <b>02472</b> Sex: <b>Male</b> Date of Birth: <b>03/27/2010</b> Enrollment Date: <b>02/19/2020</b> Date of Date Printed: 2y 10m
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<b>PARENT INFO:</b>	Name: <b>Rebecca Woltz</b> Stay Approved: <b>No</b> Address: <b>26 Coolidge Hill Rd</b> Payment Source: City: <b>Watertown</b> Phone: <b>(913) 512-8232</b>
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<b>NORMAL SCHEDULE:</b>	Participating Days: <b>MON TUE WED THU FRI</b> Weekday Times: <b>09:00 AM - 05:00 PM</b> Participating Meals: <b>BRK AMS LUN PMS</b> Weekend Times:
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<b>SCHOOL INFO:</b>	School Type: <b>Unspecified</b> School Name: School Depart/Return Times: -
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<b>SPECIAL INFO:</b>	Participates in CACFP: <b>YES</b> Special Needs: <b>NO</b> Special Diet: <b>NO</b> If either are YES, attach a signed statement.
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Dear Parents:

Your provider has chosen to join the Child and Adult Care Food Program (CACFP). This program extends the National School Lunch Program to family and group child care homes. The USDA has guidelines that your provider has agreed to. In order to participate in the CACFP, your provider may NOT claim reimbursement for meals that are claimed for reimbursement, and they must supply all of the components needed to meet the program's requirements. In an effort to improve our Program, we periodically conduct site visits to provide input and to verify attendance of their children in this child care home.

**I have verified that the above information is correct, and I have received a copy of this completed form.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider's Signature: \_\_\_\_\_ ID#: 001210

**Non-discrimination Statement**

This institution is an equal opportunity provider.



# Menu Recording

It is your responsibility to accurately record the food to be served to the children participating in the CACFP to meet the meal pattern **prior** to the meal service.

- √ **Post a dated pre-planned menu for each day or by the week.**
- √ In KidKare use Meals > Schedule Menus. Once you have planned menus you may generate a report by selecting Reports > Menu Planning > Schedule Meal.
- √ Any pre-planned menus must be updated on the day of meal service if the foods served that day change from your pre-planned menus.

**Menus that are not in compliance with the meal patterns will be assessed a fiscal disallowance.**



- √ Fruits and vegetables are separate meal components
- √ A vegetable serving is required at lunch and/or supper
- √ 100% fruit or vegetable juice can be served only once per day at either breakfast or snack. YFCI policy does not credit juice as part of lunch or supper to limit the overconsumption of Sugar.
- √ Tofu may be credited as a meat/meat alternate, must be firm and extra firm with 5g of protein per 2.2 oz. and easily recognizable to children. Soft tofu in smoothies/baked desserts is NOT creditable.
- √ Yogurt is limited to 23 grams of sugar per 6 ounces
- √ **At least one serving of bread/grains per day must be 100% whole grain or whole grain rich**  
I Be sure to code as whole grain.  
Use the slide button to code as whole grain only when applicable.



- √ Grain-based desserts are **not creditable**: cookies, cake, pop-tarts, granola bars, dessert pie crust, doughnuts, etc.—including home made dessert items.
- √ Fluid milk served to children must be unflavored. Children age 1-2 years are required to be served whole, unflavored milk. **Children age 2 and older are required to be served 1% low fat or fat-free skim unflavored milk, per YFCI policy to limit overconsumption of sugar. See page 11.**
- √ Breakfast cereals may contain no more that 6 grams of sugar per dry ounce
- √ Graham crackers and animal crackers **are creditable**. Limit use of these sweet crackers to no more than two (2) time per week and serve at snack only.
- √ Meat/meat alternate may be served in place of the grain component up to **3 times per week at breakfast**

- √ **Choking food restrictions apply to children under the age of 4 years. See page 12.**

## Important Whole Grain Reminders- Updated 7/11/22

Note: One Meal per Day must include a Whole Grain

### Creditable WHOLE GRAIN List

- Kodiak Cakes Pancakes or Kodiak Cakes Waffles- Frozen & Kodiak Cakes Pancake/Waffle Mix
- Aunt Jemima Whole Wheat Blend Mix or Maple Grove Whole Wheat Pancake/Waffle Mix
- Trader Joes Multi Grain Toaster Waffles- Eggo Thick & Fluffy Whole Grain Waffles
- Kashi BRAND Frozen Waffles: Go Protein Waffles, 7 Grain Waffles & Gluten Free Original Waffles
- Vans Whole Grain Waffles
- Fit & Active Whole Grain Frozen Waffles
- HM Pancakes or Waffles made with 100% Whole Wheat Flour
- Thomas Mini Bagels, Bagels & English Muffins - 100% Whole Wheat
- Annie's Whole Wheat Shells & White Cheddar Box Mac & Cheese
- Cream of Wheat Whole Grain ONLY
- Nature's Own 100% Whole Wheat Bread or Sara Lee 100% Whole Wheat Bread or Freihofer's 100% Whole Wheat Bread
- Martins 100% Whole Wheat Potato Rolls or Potato Bread
- Pepperidge Farm FARMHOUSE Whole Grain White Bread & Pepperidge Farm 100% Whole Wheat Swirl Raisin Bread & Pepperidge Farm Whole Grain Oatmeal Bread
- 100% Whole Grain Pasta or Spaghetti
- HM Fruited Muffins or Bread (blueberry, zucchini, banana etc.) made with 100% Whole Wheat Flour
- 100% Whole Wheat or Whole Grain On Front Label of Package
- Great Value (Walmart Brand) Whole Wheat Egg Noodles
- Whole Grain Goldfish Crackers & Whole Grain Goldfish Pretzels- Label must say Whole Grain
- Scooby-Doo Baked Graham Crackers - Whole Grain Goldfish Graham Crackers- Natures Promise Organic Animal Crackers
- Note: All three above are Sweet Grains - Only claim 2 times per week



**NOT Creditable WHOLE GRAIN List-** 1<sup>st</sup> Ingredient is Enriched Flour or 2<sup>nd</sup> or 3<sup>rd</sup> Grain isn't creditable as a WG. These are common Errors that Providers Code YES as a WG that are NOT.

- Eggo Nutri-Grain Whole Wheat Frozen Waffles
- Earth's Best Organic Frozen Mini Waffles (3<sup>rd</sup> grain is wheat Flour)
- Whole Wheat Ritz & Whole Wheat Saltines
- Whole Wheat Club Cracker - Whole Wheat Cheez-it Crackers
- Farina
- Kraft Whole Grain Box Mac & Cheese
- Corn Starch, Corn Meal or Corn Muffins
- Cream of Wheat or Cream of Rice
- White Rice, Rice Pilaf
- Ramen Noodles
- No Yolks Whole Grain Egg Noodles (2<sup>nd</sup> Grain corn Flour)
- Couscous is made with Semolina- NOT WG
- Polenta is made with de-germinated Corn – NOT WG



# Milk Policy

Milk served in the Child and Adult Care Food Program (CACFP) must meet the following requirements:

- Unflavored, **whole milk** must be served to children **one (1) year of age**.
- Unflavored\* **low-fat (1%) milk or fat-free (skim) milk** must be served to children **two (2) years of age and older**.

*\* Yours for Children policy omits the serving of flavored milk to children age six (6) and older to limit the amount of sugar consumed.*

*Milk served must be pasteurized fluid milk that meets state and local standards and contains vitamin A and D as specified by the Food and Drug Administration. Evaporated milk does not meet the definition of milk. Milk may be lactose-free milk, lactose reduced milk, cultured buttermilk, or acidified milk.*

Non-dairy milk substitutes that are nutritionally equivalent to milk may be served in place of milk to children with medical or special dietary needs. Parents must supply the provider with medical documentation for any substitutions.

Fluid Milk Alternatives 			
	Parent Note	Medical statement Medical Condition	Medical statement Disability
Lactaid			
Soy milk (nutritionally equivalent to cow's milk)			
Rice Milk			
Almond Milk			



Documentation  
supplied is  
**ACCEPTABLE!**

You may print a copy of a medical statement at [www.yoursforchildren.com](http://www.yoursforchildren.com)

# Choking Foods Policy

Children under 4 years of age are at the greatest risk of choking. Almost 90% of children who die from choking are under 4 years old. Children this age are still learning how to chew, often have not developed the “grinding” motion with molars, and may swallow foods whole. As we know, they like to put things in their mouth, but have small airways that may become easily blocked.

Based on guidance from the USDA, foods that pose the highest risk for choking are foods that "are round, tube-shaped, small, hard, thick and sticky, smooth, slippery, or easily molded to stick to the airway."

In order to align with Massachusetts state licensing and USDA's recommendations, Massachusetts Office for Food and Nutrition Programs' (FNP) policy restricts the serving of the following foods to children under 4 years of age:

- Hot dogs, sausages, sausage links or similar shaped processed food items
- Fish or meat with bones
- Grapes, cherries, melon balls, cherry and grape tomatoes
- Specific berries – kiwi berries , raspberries, blackberries, goji berries
- Peanuts, nuts, and seeds (for example sunflower or pumpkin seeds)
- Peanut butter and nut/seed butters
- Dried fruit such as raisins or cranberries
- Shelf stable, dried and semi-dried meat, poultry, and seafood snacks (such as beef jerky or summer sausage)
- Popcorn

There are many other items that are not included in the above list which may still pose a choking hazard due to their shape (tube-shaped, round, small) or texture (hard, thick and sticky, smooth, slippery, or easily molded). FNP asks that providers consider these characteristics when feeding children under the age of 4 years, and recommends altering any food item which may pose a risk.

Providers should consider altering food items so that they can be served in manageable bites. The information about alternate food preparation methods relates only to other foods not specifically identified in the above list. **The foods listed above are not to be served to children under the age of 4 years.**

***When recording one of the above foods into KidKare you must also record the alternate food being served to children under the age of 4 years in the “COMMENT” BOX!! (If applicable.)***



## MEDICAL STATEMENT TO REQUEST SPECIAL MEALS AND/OR ACCOMMODATIONS CHILD NUTRITION PROGRAMS

Note: According to 7 CFR, part 226.20 food substitutions for medical reasons can be made only when there is a written statement from a medical authority. This written statement must include the medical reason and recommended alternate foods.

**This form can be found at [www.yoursforchildren.com](http://www.yoursforchildren.com)**

MEDICAL STATEMENT TO REQUEST CHILD NUTRITION PROGRAMS SPECIAL MEALS AND/OR ACCOMMODATIONS			
1. School/Agency Name	2. Site Name	3. Site Telephone Number	
4. Name of Participant		5. Age or Date of Birth	
6. Name of Parent or Guardian		7. Telephone Number	
8. Check One: <input type="checkbox"/> Participant has a disability, which may include a food allergy, and requires a special meal or accommodation. Schools and agencies must make reasonable modifications to the meal to accommodate a disability which restricts a participant's diet. Modifications during and for food service may be required. Schools and agencies participating in federal nutrition programs must comply with requests for special meals. <b>A licensed physician, physician's assistant, or nurse practitioner must sign this form.</b>  <input type="checkbox"/> Participant does not have a disability, but is requesting a special accommodation for a fluid milk substitute that meets the nutrient standards for non-dairy beverages offered as milk substitutes. <b>Food preferences are not an appropriate use of this form.</b> Schools and agencies participating in federal nutrition programs are encouraged to accommodate reasonable requests. <b>A licensed physician, physician's assistant, nurse practitioner, parent, or guardian may sign this form.</b>			
9. If participant has a disability, provide a brief description of participant's major life activity affected by the disability:			
10. Diet prescription and/or accommodation: <i>(please describe in detail to ensure proper implementation-use extra pages as needed)</i>			
11. Indicate texture: <input type="checkbox"/> Regular <input type="checkbox"/> Chopped <input type="checkbox"/> Ground <input type="checkbox"/> Pureed			
12. Schools and agencies are not required to provide the exact substitution or other modification requested. However, must offer a reasonable modification that effectively accommodates the participant's disability and provides equal opportunity to participate in or benefit from the federal nutrition programs.  Foods to be omitted and available/acceptable substitutions: <i>(please list specific foods to be omitted and suggested substitutions, you may attach a sheet with additional information as needed)</i> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>A. Foods To Be Omitted</b>            _____            _____            _____         </div> <div style="width: 45%;"> <b>B. Available/Acceptable Substitutions</b>            _____            _____            _____         </div> </div>			
13. Modifications to meal service:			
14. Signature of Preparer*	15. Printed Name	16. Telephone Number	17. Date
18. Signature of Medical Authority**	19. Printed Name	20. Telephone Number	21. Date

\*Parent/legal guardian signature is acceptable for fluid milk substitution for a child with dietary needs other than a disability.  
 \*\*Medical Authority's signature is required for participants with a disability.  
 The information on this form should be updated to reflect any changes to the current medical and/or nutritional needs of the participant, and updated annually.

This institution is an equal opportunity provider.

MA ESE February 2016/USDA June 2017



## ***Infant Menu Recording***

### **CACFP benefits must be offered to infants. (Children under 1 year old)**

- ☑ Providers are required to offer parents of infants an iron fortified infant formula (IFIF). You decide what formula to offer.
- ☑ Providers: You must write the name of the formula you offer to parents on the Child Enrollment Form for all infants.
- ☑ Parents decide whether to accept the formula you offer or to supply breast milk or a different iron fortified infant formula.
- ☑ REMINDER: Record the amount of Breastmilk/Formula /Solids Foods served.

### ***INFANT MEAL PATTERN***

- \* Two infant age groups: 0-5 months, 6-11 months
- \* Only breastmilk or iron fortified infant formula required for infants 0-5 months
- \* If a mother breastfeeds her child at the family child care home this component is creditable. Document on your infant menus "directly breastfed". Note: This meal is reimbursable for infants 0-5 months. For infants 6-11 months the meal is reimbursable if you are providing all other components that the child is developmentally ready to receive.
- \* Solid food should be introduced around 6 months, when the infant is developmentally ready
- \* Fruits/vegetables and a bread/grain are now required at snack when the infant is having solid foods
- \* 100% juice and cheese foods/spread are not creditable infant foods
- \* Whole eggs and yogurt are creditable infant meat/meat alternates
- \* Yogurt cannot contain more than 23 grams of sugar per 6 ounces



*When the infant is developmentally ready for solid foods, they should be slowly introduced. As infants may have different preferences each day, a solid food does not need to be offered as part of every meal pattern until the infant has developed a tolerance for it. Meals are not going to be disallowed simply because a food was offered one day and not the next if that is consistent with the infant's eating habits. It is important for the provider and parents to have very good communication about when and what solid foods to serve the infant while the infant is in the provider's care. Each item offered to an infant should be recorded and documented daily even if they do not consume all of it or even any of it.*

*Per FNP email guidance 2/2/2018*

- \* Parents/Guardians may supply no more than one required component per meal in the meal pattern (including breastmilk or formula in order for the meal to be reimbursable in CACFP).

## ***Meal Counts***

**Each day's meal counts must be recorded by the end of the business day.**

Record in KidKare or use a KidKare Weekly Attendance Worksheet.

- ☑ **Meal counts may NOT be recorded before you serve meals.** For example, you cannot complete/enter meal counts for the day when children first arrive.
- ☑ **Attendance logs, showing in and out times for children are *not* a substitute for meal count records.** Attendance records are used to validate your meal counts. You may use the KidKare In-Out attendance feature, YFCI calendar, your Agency Attendance log, or your own Sign-in Sign-out records.
- ☑ Meal counts are compared during claims processing to each child's enrollment data, your license capacity, and any documentation/findings from home reviews before reimbursement.

### ***Meal count recording:***

- \* If you cannot enter your meal counts daily in the computer, use a KidKare Weekly Attendance Worksheet to record meal counts by the end of each business day.
- \* Claim each child for no more than 3 meal services per day of which 1 meal must be a snack. You may claim a maximum of 2 meals and 1 snack OR 2 snacks and 1 meal per child.
- \* Notify YFCI of a temporary change in a child schedule to avoid disallowances. (Email: [yfci@yoursforchildren.com](mailto:yfci@yoursforchildren.com)).
- \* **Document when claiming a school age child when school is closed or when a child is too sick to go to school and is in your care.** KidKare providers do this using *No School* or *Sick* codes.
- \* Informal In-home Relative Child Care providers are limited to claiming only the meals that are supported by the non-residential child's voucher information. Forward any new vouchers to YFCI upon receipt.
- \* Always make sure that you are operating within your Department of Early Education and Care (EEC) license capacity and that YFCI has a copy of your current license.

***Any appeal of a meal disallowance must be made by contacting the YFCI office within 5 days of receiving your reimbursement check.***



**EACH DAY'S MEAL COUNTS MUST BE RECORDED  
BY THE END OF EACH BUSINESS DAY.**



**BEST PRACTICE: Record your Meal directly into KidKare DAILY.**



If unable to record your meal counts DAILY in KidKare you must write in your meal counts DAILY using a **KidKare Weekly Attendance Worksheet**.  
You can then enter your Meal Counts later into KidKare.

**IMPORTANT!**

Only KidKare Worksheets are acceptable as validation for non-daily entries into KidKare.  
Keep your written KidKare Worksheets for claim validation.  
You may be asked to produce them for claim validation.  
Missing/incomplete KidKare Weekly Attendance worksheets may cause fiscal disallowances.

To print out KidKare "Weekly Attendance Worksheets" go to "Reports" then

- Category - "Worksheets"
- Report - "Weekly Attendance Worksheet"

**Weekly Attendance Worksheet**

00999 Provider, Practice

Claim Month: August 2022

Name Birthdate	DOE	#	Date:		Date:		Date:		Date:		Date:																											
			B	A	L	P	D	E	B	A	L	P	D	E	B	A	L	P	D	E	B	A	L	P	D	E	B	A	L	P	D	E						
Child, New 12/14/2017	02/01/2021	1-5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>																									
Eight month, Baby 12/11/2021	10/01/2021	1-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>																									
Infant, 10 months 10/10/2021	10/01/2021	1-18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>																									
Infant, 3 month 05/04/2022	10/01/2021	1-17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>																									
Q, Susie 02/02/2018	10/01/2021	1-32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>																									
School-age, Joe 04/28/2014	10/01/2021	1-4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>																									
School-Age, Sam 01/31/2011	10/01/2021	1-6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>																									
Toddler, Tiny 12/27/2018	10/01/2021	1-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>		Attended: <input type="checkbox"/>																									



**EACH DAY'S MENUS MUST BE PRE-PLANNED AND POSTED FOR PARENTS TO SEE. PRE-PLANNED MENUS MUST BE DATED AND HAVE ALL COMPONENTS LISTED.**



**BEST PRACTICE: Pre-plan your Menus directly into KidKare Weekly.**



Provider Name : Provider, Practice (009999)

Meals	Mon - 08/01	Tue - 08/02	Wed - 08/03	Thu - 08/04	Fri - 08/05
Breakfast	Cheerios (WG) Mandarin Oranges 1%(over 2)/Whole(under 2)	French Toast Strawberries 1%(over 2)/Whole(under 2)	breakfast Pancakes / Waffles (WG) Cantaloupe 1%(over 2)/Whole(under 2)	Whole Wheat Bread (WG) Bananas 1%(over 2)/Whole(under 2)	Egg All Bran Wheat (WG) Flakes Blueberries 1%(over 2)/Whole(under 2)
Lunch	Beef Meatballs Brown Rice (WG) Broccoli Carrots 1%(over 2)/Whole(under 2)	Chicken Breasts Rice with beans Red / Kidney Beans Avocado 1%(over 2)/Whole(under 2)	Chicken Soup Chicken Soup Parts Bread Sticks Mixed Vegetables Apples 1%(over 2)/Whole(under 2)	Beef Ground Hamburger Buns French Fries (Baked) Fresh Tomatoes 1%(over 2)/Whole(under 2)	Fish Fillets Pilaf Rice Peas and Carrots Applesauce 1%(over 2)/Whole(under 2)
PM Snack	Yogurt for children 1 year and older Strawberries	Hummus Pita Bread	Cheddar Cheese Blueberries	American Cheese Graham Crackers	Banana Muffins Orange Juice

Your pre-planned menus will then automatically “pop-up” when you enter your daily meal counts. Any changes to your pre-planned menus can then be made at that time.

To pre-plan your menus in KidKare go to: “Meals” then “Schedule Meals”. Go to [Help.KidKare.com](http://Help.KidKare.com) for further tips in using this feature.

**By pre-planning your menus in KidKare, you can easily review your menus for:**

- \* Daily serving of Whole Grains
- \* Missing components
- \* Variety of foods

*Don't lose money! Can you find the error in the above menus?*

Menus can then be printed and posted for your parents to see.

**IMPORTANT!!** Pre-planned menus in KidKare will support your claim validation if you are not entering your meal counts and menus daily into KidKare.



***Did you find the Error???***

There was no Whole Grain served and coded on 08/02.  
Don't lose money! Review your pre-planned menus!



Provider Name : Provider, Practice (009999)

Meals	Mon - 08/01	Tue - 08/02	Wed - 08/03	Thu - 08/04	Fri - 08/05
Breakfast	Cheerios (WG) Mandarin Oranges 1%(over 2)/Whole(under 2)	French Toast Strawberries 1%(over 2)/Whole(under 2)	breakfast Pancakes / Waffles (WG) Cantaloupe 1%(over 2)/Whole(under 2)	Whole Wheat Bread (WG) Bananas 1%(over 2)/Whole(under 2)	Egg All Bran Wheat (WG) Flakes Blueberries 1%(over 2)/Whole(under 2)
Lunch	Beef Meatballs Brown Rice (WG) Broccoli Carrots 1%(over 2)/Whole(under 2)	Chicken Breasts Rice with beans Red / Kidney Beans Avocado 1%(over 2)/Whole(under 2)	Chicken Soup Chicken Soup Parts Bread Sticks Mixed Vegetables Apples 1%(over 2)/Whole(under 2)	Beef Ground Hamburger Buns French Fries (Baked) Fresh Tomatoes 1%(over 2)/Whole(under 2)	Fish Fillets Pilaf Rice Peas and Carrots Applesauce 1%(over 2)/Whole(under 2)
PM Snack	Yogurt for children 1 year and older Strawberries	Hummus Pita Bread	Cheddar Cheese Blueberries	American Cheese Graham Crackers	Banana Muffins Orange Juice



**EACH DAY'S MENUS MUST BE PRE-PLANNED  
AND POSTED FOR PARENTS TO SEE**



**BEST PRACTICE:** Pre-plan your menus using the KidKare  
“Scheduled Meals” feature.



*If unable to pre-plan your Menus in KidKare you must write your menus in advance and post them.  
Written menus must be dated and have all components listed.*

YFCI offers you these Menu forms which are acceptable for claim validation. You may then enter your Menus later into KidKare. These forms are available at [www.yoursforchildren.com](http://www.yoursforchildren.com).

**IMPORTANT!**

Keep these written records.

You may be asked to produce them for claim validation. Missing/incomplete written pre-planned menus may cause a fiscal disallowance.

The image shows two menu forms. The first is an 'INFANT MENU' form with columns for 'Date' and rows for 'Breakfast', 'AM SNACK', 'LUNCH', 'PM SNACK', and 'DINNER'. Each row has a grid for listing menu items and their dates. The second is a 'TEMPORARY MENU' form with a yellow header and footer, and a grid for listing items and dates. The header and footer contain the text 'TEMPORARY MENU' and 'YOUR DATE SINCE YOU HAVE YOUR BA LOGIN' respectively.

## ***Notify YFCI***

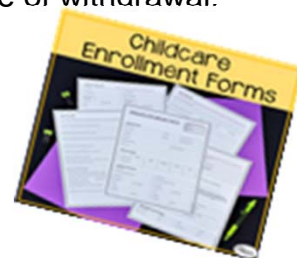
### **We need current information to process your claim quickly and accurately.**

- ▲ Explain a reason you are **temporarily** claiming a child outside the schedule we have on file. (**Email: [YFCI@yoursforchildren.com](mailto:YFCI@yoursforchildren.com)**)
- ▲ Update any changes to your scheduled meal times.  
(**Email: [YFCI@yoursforchildren.com](mailto:YFCI@yoursforchildren.com)**)

In KidKare withdraw children no longer in your program. Go to HOME > My Kids. Select the child then click on the red “withdraw” box and enter the date of withdrawal.

A new Child Enrollment Form must be completed by the parent for any permanent changes to a child's schedule.

KidKare generated Child Enrollment Forms are **NOT** acceptable.



**Notify YFCI in advance if closed or away from premises during a meal service.**

- KidKare - use the Calendar feature.

***Keep copies of all changes and updates to child schedules filed with your CACFP documents in your YFCI Provider Handbook.***

### ***Changes to your Early Education and Care (EEC) License***

- You must send us a copy of any new license for you or an assistant within five (5) business days of receiving your new license from EEC.
- ***A license capacity change must be received by the YFCI office by the 25th day of the claim month.***
- Submit to YFCI a copy of **all** current assistant licenses or approval letters.
- Make sure your **YFCI** number is on these copies.
- Notify YFCI when an approved assistant leaves your child care.



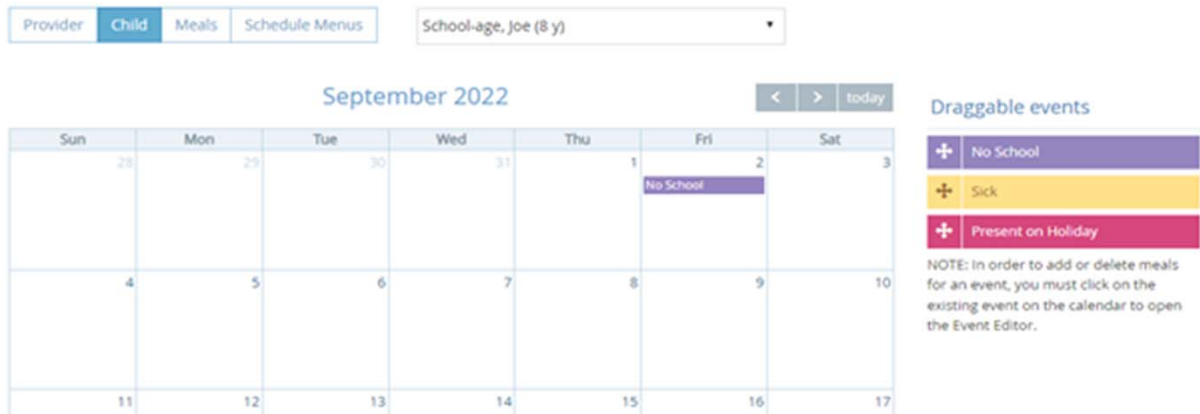


## School Out Codes

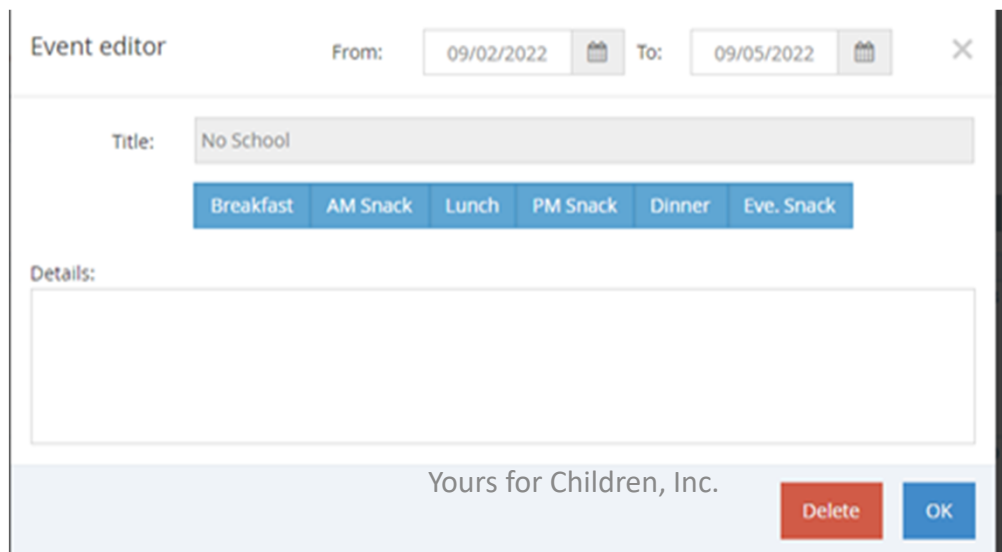
**Notify us if a school-aged child is in your care at a time he/she would normally be in school.**

These codes will validate those meals/snacks and allow reimbursement.

- Here's a trick to easily code "School Out"....especially if you know in advance when a school will be closed.
- Click on "Calendar", then "Child".
- Select the child.
- Drag the "No School" icon to the calendar to the first day of "No School."



- Then click on the dragged "No School". An "Event Editor" will appear to allow you to enter a range of "No School" dates.
- Then forget about it...the "No School" codes will automatically appear when you enter the meal counts for those dates



## Home Reviews

As per your CACFP **Permanent Agreement** you are to “Allow authorized Program related personnel to visit, with or without prior notification, to review provider’s records and meal service during the hours of Program operation”.

As per your CACFP **Annual Status Update**, “Your sponsoring agency is to conduct reviews of your Food Program. Providers must receive three (3) reviews during the fiscal year. Two (2) of the reviews must be unannounced and conducted at an approved meal service.”

**In anticipation of the end of the COVID-19 pandemic, YFCI will be transitioning from Off-Site/Virtual “desk audits” and returning to In-Home Reviews.**

This means that YFCI Monitors may be coming to your home for an in-person Home Review. All authorized Program related personnel (YFCI/USDA/DESE) will be wearing identification.

For a sample of a Home Review Form, please go to [www.yoursforchildren.com](http://www.yoursforchildren.com).



### **Best practice for a successful Home Review:**



- \* Enter meal counts **daily** into KidKare
- \* Pre-plan menus **weekly** into KidKare
- \* Have all CACFP records accessible for review:
  - \* Permanent Agreement
  - \* Annual Status Update
  - \* Current Child Enrollment Forms
  - \* Attendance Record showing in/out times of each child
  - \* Current EEC license for you and any Assistants

- *By entering your KidKare Menu and Meal Counts **DAILY**, your YFCI Monitor can complete the Home Review Form with minimal interference to you and your Day Care activities!!*
- Have your YFCI Handbook organized with copies of your:
  - o Permanent Agreement - in plastic sleeve.
  - o Annual Status Update - **dated 10/01/2022 or after.**
  - o Current Child Enrollment Forms—**dated 10/01/2022 or after.**

# Home Reviews



**In anticipation of the end of the COVID-19 pandemic, YFCI will be transitioning from Off-Site/Virtual “desk audits” and returning to In-Home reviews.**

The information on this page pages 21— 23 will help you be prepared for either type of Home Review.

**The meal service times we have on file must reflect the beginning of your scheduled meal service.** Your Monitor plans Home Reviews according to your meal service schedule.

**You are responsible for notifying YFCI in advance whenever you and the children will be away from home during a scheduled meal time.** Using your KidKare Calendar, notify YFCI in advance if you will be away during a meal service, on vacation, or closed for any reason. These notifications eliminate your Monitor traveling to your home to find you are not there.

Email [YFCI@yoursforchildren.com](mailto:YFCI@yoursforchildren.com) anytime to notify us of meal service time changes.

Your adherence to meal service times and closure notifications allows YFCI to monitor your participation in the CACFP as per your Permanent Agreement. Non-compliance with CACFP Home Review requirements may find you Serious Deficient in your operation on the Child and Adult Care Food Program.

## **What you can expect during an Off-Site/Virtual Home Review:**

- Your YFCI Monitor will call you 10-15 minutes prior to your scheduled meal service time.
- She will ask you a few questions regarding your meal service. This will only take a few minutes.
- Then she will schedule a follow-up time to complete the off-site/virtual Home Review at a time of your convenience.
- This part of the Review will be completed via your choice of FaceTime or ZOOM.  
Note: As a last resort, if no type of video conferencing is available, then a telephone call will be scheduled.
- During this part of the Review your Monitor will ask you questions similar to the ones discussed and observed in previous Home Reviews. See page 23.
- The completed Home Review form will be emailed to you and posted in your KidKare Messages.





## During an Off-Site/ Virtual Review and/or In-Home Review, your Monitor will:



- See that your daily or weekly dated menu(s) are posted.
- View your parent signed copies of most current Child Enrollment Forms for all children in your child care.
- Review current month's menus, recorded **prior** to meal service, and verify that the meal observed matches your menu.
- Review current meal counts entered to date in KidKare.
- Review KidKare Weekly Worksheets for any meal counts not already entered into KidKare.
- View your copy of your CACFP "Permanent Agreement".
- View your copy of your current fiscal year "Annual Enrollment Status Update".
- Check that your "Building for the Future" poster is placed in view for parents.
- See EEC licenses posted for you and current assistants working in your child care.
- Check your kitchen and food storage areas for general sanitation.
- Check the temperature of your thermometers in refrigerators & freezers used for child care.
- Check the expiration dates of refrigerated and dry storage foods.
- Record all the children's names present. Children that are present and claimed are validated during claims processing. Children listed as absent are not eligible for reimbursement for the observed meal.
- Reconcile the past 5 days' meal counts to your attendance records and enrollment information.
- Record any assistants present.
- Verify that you are within your EEC license capacity.
- Check if either 1% or fat-free milk is being served to children over age 2, and whole milk to children ages 1-2, if part of meal service. 2% milk is not creditable for any age group. *Per YFCI policy, serve only unflavored milk to all children to limit the overconsumption of sugar. (See page 11)*
- Give you technical assistance or corrective actions on any menu or other CACFP compliance issues.
- Give you a due date if corrections need to be made.
- Answer questions and provide resources as needed.
- Check that you are current on CACFP training requirements.
- Ask if you have specific training needs.
- Ask you to check information recorded, including attendance information, is accurate, before confirming the Home Review Report.

Non-compliance with CACFP record-keeping requirements may find you Serious Deficient in your operation on the Child and Adult Care Food Program.

## ***Documents to Display/Keep on File***

The “**Building for the Future**” poster must be displayed in each home so parents are aware that the home is receiving federal assistance for serving meals which meet the nutrition requirements established by USDA. Yours for Children, Inc. has provided the poster for you. If you need one, a copy may be downloaded and printed from our website: [www.yoursforchildren.com](http://www.yoursforchildren.com) > providers > forms.

### ***You must also display:***

- ◆ Your daily or weekly dated pre-planned menu
- ◆ Your child care license
- ◆ License/approval of all assistants who are working in your child care

The following documents must be on file for immediate review by your monitor, or representatives from the Department of Elementary and Secondary Education (DESE), and/or the U.S. Department of Agriculture (USDA). These records must be kept in the child care home and available during your business hours:

- Copy of the Permanent CACFP Agreement
- Copy of the Annual Enrollment Status Update for the current year
- Current month Menus, Meal Counts, and Child Enrollment Forms
- Completed KidKare worksheets for current claim month, if applicable
- Copies of Child Enrollment Forms for the past twelve months
- Copies of Menus and Meal Counts for the past twelve months
- Copies of Home Review Reports for current fiscal year
- Tier Status documentation
- Medical Statement, if applicable
- Any correspondence regarding the CACFP
- Copies of any approval letters for income eligibility or capacity changes
- Training certificates from YFCI for you and any assistants

USDA regulations require that providers maintain the current fiscal year and the three prior years of CACFP records. Current year’s records are listed above; you may store the remaining years of records in a manner that is accessible within a reasonable amount of time and under your control. Records may be stored in hard copy or electronic format.

Records available in both your home and the YFCI office allow DESE or USDA the ability to confirm the accuracy of records at both locations.

Any advertising of your child care that references the CACFP must have the USDA non- discrimination disclaimer included. The disclaimer is included on the back of this training and at [www.yoursforchildren.com](http://www.yoursforchildren.com). If the material is too small to print the full statement, you may include, in the same print size as the text: ***“This institution is an equal opportunity provider”***.

## ***Training Requirements***

You are required to complete six (6) hours of CACFP training each fiscal year that begins on October 1 and ends September 30. The following shows the training categories that must be completed each fiscal year:

- **Two (2) of the six (6) hours must be devoted to CACFP record keeping, which includes meal counts and menu recording.**
- **Two (2) of the six (6) hours must be devoted to food safety and sanitation.**
- **Two (2) of the six (6) hours will include at least one (1) hour of nutrition education and one (1) hour of another CACFP related subject. Yours for Children, Inc. chooses to prepare a two (2) hour nutrition home study each year to complete this category.**
- **Civil Rights training**

Yours for Children, Inc. provides you with Home Study training that meets the above requirements. All current YFCI trainings are available on-line via ZOOM presentations and at [www.yoursforchildren.com](http://www.yoursforchildren.com).

**Yours for Children expects that you complete each Home Study within 2 weeks of receipt.** All Required training must be completed each fiscal year to remain eligible for reimbursement. Late or incomplete training may find you Serious Deficient in your operation on the Child and Adult Care Food Program.

**You will be emailed confirmation after each particular Home Study is completed. Keep that email for your records.**

A copy of the Home Study text will be included with that email for future reference.



# It's the last business day of the month. Now what???



## #1 Claim Review

- ✓ Review your Claim Reports for accuracy before submitting. **Don't lose \$\$\$!**
- ✓ Review **Foods Served Report** before submitting to avoid reimbursement disallowance for recording errors that can be corrected
- ✓ Review the **Claimed Attendance Detail** report for meal count accuracy.
- ✓ To get these reports in KidKare:
  - \* Reports
  - \* Category Meals and Attendance
  - \* Report Food Served
  - Claimed Attendance Detail

Need more help? Click on "Get Help" in KidKare for more helpful tips!

- ✓ Did you send in Child Enrollment Form for any new children?  
We cannot pay you for "Pending" children.  
Email new Child Enrollment Forms to [YFCI@yoursforchildren.com](mailto:YFCI@yoursforchildren.com)



# It's the last business day of the month Now what???



## #2 Claim Submission

√ Submit your claim as soon as you serve and record the last meal for the month.

√ *If you have been entering your Menus & Meal Counts daily you're all set!  
There's nothing left for you to do!*

√ *Just hit that "Submit" button!*

- √ We will submit validated claims received by 12 noon on the 5th of the month following service in the first request to the state for funds.
- √ Claims received after 12 noon on the 5th of the month following service are considered to be "Late Claims" and are submitted in the second/final billing to the state. This can cause a significant delay in your reimbursement.
- √ "Late claims" are also subject to submission of written records to validate your claim. Lack of written records will cause financial disallowances.
- √ Repeated Late Claims may find you Serious Deficient in your operation of the CACFP.

You can see the status of your claim for reimbursement in KidKare.  
Go to: Reports>Claim Statements>Claimed Summary and Error>select month>RUN

*Upon receipt of CACFP funds,  
we immediately direct deposit your reimbursement.  
You will be notified via email, FaceBook, and KidKare Messages.*

*If you "Like" us on FaceBook  
you will get automatic notification of payments.*



***Be sure to review your "Claims Summary and Errors Report"***  
***Any appeal of a meal disallowance must be made by contacting the YFCI office within 5 days of receiving your reimbursement check.***





**Congratulations!**  
You have completed your  
FY'23 Annual Record Keeping Training\*.

During the first week of next month, YFCI will email you confirmation of having completed this training.

**Keep that email for your records!**  
**Please print out that email and keep it in your**  
**Yours for Children, Inc Provider Handbook.**

\*Training completed on-line or on paper requires submission of the training Quiz for credit.

**Thank you for your dedicated service to the children in your care**  
**and**  
**Thank you for your continued commitment to the Child and Adult Care Food**  
**Program as sponsored by Yours for Children Inc.**

For additional resources go to [www.yoursforchildren.com](http://www.yoursforchildren.com).



**Yours for Children, inc.**

Yours for Children, Inc  
489 Washington Street Suite 109  
Auburn MA 01501  
800-222-2731  
FAX 508-721-0919  
YFCI@yoursforchildren.com  
[www.yoursforchildren.com](http://www.yoursforchildren.com)