Minnesota Department of Education

FOOD AND NUTRITION SERVICE (FNS) PREAPPROVAL VISIT
CHILD AND ADULT CARE FOOD PROGRAM (CACFP) SPONSORS

DATE OF VISIT:	
SPONSOR NAME:	
NUMBER OF SITES:	
SITES NAMES:	
NAME OF CONTACT PERSONS/ POSITIONS:	
STREET ADDRESS/CITY/MN/ZIP:	
PHONE:	

Verification of site address: Does the address of the center match exactly with the address on the site application?
☐ **Yes** ☐ **No** If no, contact FNS.

Center Type:
☐ Child Care Center Regular
☐ Outside School Hours Care
☐ *Special After School Snack Program
☐ *Adult Center
☐ *CCC-FCCH Group License

Special Provisions:
☐ None
☐ Sponsor of Centers Sites:
☐ Alternate Licensing Approval
☐ For Profit (Title XX)
☐ Pricing Program
☐ Serves > Three Meals/Snacks Per Day

A. Check Vended Meal (s):
   ☐ Breakfast
   ☐ Lunch/Supper
   ☐ Snack
   Vendor: _____
   Does sponsor have signed vended meals contract? ☐ Yes ☐ No

B. Does Sponsor serve meals at more than one location/address? ☐ Yes ☐ No
   Do all sites with separate physical addresses have separate site ID numbers? ☐ Yes ☐ No

C. If this Program is operating in a School District, describe cooperation with Food Service/Business Office/Community Education/Child Care Center to ensure no duplicate claiming under NSLP/SBP/SMP.

Other Info/Comments:

The Sponsor has the following resources (either provided at time of preapproval or given at a workshop):
☐ *What's in a Meal?* Excerpts
☐ CACFP Basics Handbook of memo, policies, handouts, etc.

Has sponsor attended a Basics Workshop? ☐ Yes ☐ No Date:
Has sponsor attended a Food Service Workshop? ☐ Yes ☐ No Date:

Check off handouts in notebook explained/issues discussed or indicate not applicable (N/A):

Overall Administration:

- ☐ Listserv form (page 4).
- ☐ User ID/password request form (page 177).
- ☐ Introductory Program Information booklet (page 11-22).
- ☐ Website Links (program regulations, information and resources) (page 3).
- ☐ Recordkeeping requirements for single and multiple-site sponsors (pages 166-167,190-193).
- ☐ Developing a filing system for CACFP records (page 168).
- ☐ Appeal procedure (online).
- ☐ Women, Infants and Children/Building for the Future materials (page 131-134).
- ☐ Child Enrollment forms – must be completed annually (page 136-137).
- ☐ Public release (first year only) (online).
- ☐ Site ID request form (page 176).

Household Income Statement (HIS)/Enrollment List (ABCs):

- ☐ HIS forms for child care center (page 35-36).
- ☐ Memo—Current Income Guidelines and Household Letter (page 26-36).
- ☐ HIS Requirements for Different Household Situations: (page 37).
    - ☐ Food stamps (SNAP)/MFIP/FDPIR (page 38-39).
    - ☐ Case numbers for eligibility (page 50).
    - ☐ Households qualified by income (page 42-44).
    - ☐ "Over-income" households (page 45-46).
    - ☐ Foster child (page 40-41).
    - ☐ Approval and dating of HIS forms (page 14).
    - ☐ Effective time periods for HIS forms (page 14).
    - ☐ Head Start enrolled children are automatic category A with adequate documentation (page 49).
- ☐ Head Start agencies that have child care centers will need to collect HIS forms for their child care centers.
- ☐ Sharing eligibility information between child nutrition program sponsors.

Determining the Rate of Reimbursement and Reporting the ABCs:

- ☐ Determining the enrollment total (page 16).
- ☐ Matching attendance to HIS forms (page 16).
- ☐ Reporting ABCs on claim (page 16).
- ☐ When to report or change the ABCs (page 17).
- ☐ Worksheet for determining rate for reimbursement (online Excel program).
- ☐ Memo—Current reimbursement rates (page 25).

Pricing Programs only: (separate handouts)

- ☐ Maximum meal charges allowed.
- ☐ Must do meal counts by name.
- ☐ No overt identification.
- ☐ Written notification of benefits.
- ☐ Appeal for denial of benefits.
- ☐ Verification process requirements.

I have been trained on the topics marked above, unless marked N/A as non-applicable.

Sponsor Signature: _____

Date: _____

Attendance and Meal Count Forms:

☐ Combined Attendance and Meal Count form (page 53).
☐ Meal count by name (required for pricing or if approved for > three meals/snacks/day) separate attendance records (p.55-56).
☐ Other Sample Meal Count Form (if needed) (page 54).
☐ Meal counts must be recorded at the point of service.
☐ Attendance must be taken at least one time per day.
☐ Claim only for approved meal services (check application).
☐ Claim meals for those served at specific site only.
☐ Claim meals only within attendance.
☐ Claim meals only within license capacity unless there is adequate documentation of split shifts (time in/out, etc.).
☐ Claim meals only within restrictions of license (days, hours, etc.).
☐ Claim meals only for eligible participants (age restrictions, non-residential).
☐ Claim meals only for enrolled participants.
☐ Claim no more than three meals/snacks per day per participant – discuss restrictions on number/types of meals able to claim.

Monthly Claim for Reimbursement:

☐ Refer to Website CACFP CLiCS Manual, screen shots, etc.
☐ Applications and claims reference information (page 178-179).
☐ FNS processing dates/FNS reimbursement dates (page 180-182).
☐ 60/90 days to submit.
☐ How to calculate Average Daily Attendance (ADA) – Total attendance/number of days served = ADA (always round up).

Fiscal Integrity and Procurement: (page 112-128)

☐ Must have documentation to demonstrate the organization operates a non-profit food service.
☐ Food service operations must operate primarily for the benefit of enrolled participants.
☐ Allowable expenses/non-allowable expenses.
☐ Administrative expenses 15 percent cap– for multiple sites only.
☐ Procurement log/cost comparison – must be documented annually – three items/three vendors (page 123-126).
☐ Procurement procedures for purchases of like items totaling $100,000 or greater and required documentation (online).
☐ Cannot use a “cost plus a percentage of cost” method of procurement/contracting.

Supporting Documents: Keep the following documents on file in sponsor office. Must be available for review.

☐ Must keep copy of CACFP application, program agreement, and policy statement on file.
☐ Management plan for multi-site sponsors.
☐ Vended meals contracts/templates/update and submit when changes needed.
☐ DHS License or alternate licensing standards for each site.
☐ Health Department “Food and Beverage License” – if required.
☐ Health Department inspection reports.
☐ Certified Food Manager requirements if applicable for self-prep sites (www.health.state.mn.us) (page 105-106).
☐ Staff training documentation for all sponsors (date, names, agenda).
☐ All documentation pertaining to the CACFP must be retained on file for a minimum of three years from final payment.

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Sponsor Signature: _____

Date: _____

Civil Rights:

☐ " . . .And Justice for All" Poster must be posted in a public area at all times (extra posters can be obtained through FNS).
☐ Cannot discriminate on basis of race, color, national origin, age, sex or disability.
☐ Translations available for CACFP materials.
☐ Revised Civil Rights statement in center handbook/website (page 138).
☐ Civil Rights Data Collection and Comparison form (page 139).
☐ Parent notification handout—Building for the Future or Child Enrollment Forms (page 134 – 137).
☐ Civil Rights training of "front-line" staff (page 140-165).

Meal Patterns and Food Production Records (FPR): ALL FORMS MUST BE COMPLETED DAILY

☐ CACFP Meal Pattern (components, portion sizes, age groups) (page 59-63).
☐ Special Diet Statements (give the two handouts with a disability and without a disability or if not available, page 99-104).
☐ Must have written, dated menus for each meal/snack served – discuss cycle and seasonal menus.
☐ Substitutions must be listed.
☐ Foods must be identified specifically.
☐ FPR forms—Daily and Weekly versions (page 64-79).
☐ FPRs How-To's (adequate amounts, measurable units, number of servings recorded, milk FPR's if vended meals).
☐ Food Buying Guide (short form) (page 83-87).
☐ Grains/Breads Portions (page 88-89).
☐ Child Nutrition (CN) Labels/Product Fact Sheets (page 90-94).
☐ Common non-creditable foods (separate handout).

Meal Services:

☐ All components served at the same time.
☐ Minimum portion sizes.
☐ Family-style meal service criteria.
☐ Point-of-service meal counts.
☐ Meals consumed with appropriate supervision and on-site, except for approved field trips.
☐ Meals cannot be claimed for participants who brought food from home.
☐ Claiming meals for children in transition from one classroom to another.
☐ Choking poster present in eating areas.

Infants: (Infant Packet)

The CACFP must be offered to all infants. The sponsor intends to offer the following infant formulas: _____

☐ Infant meal pattern charts.
☐ Infant food production records.
☐ Sample infant food production records.
☐ Claiming infant meals.
☐ Creditable and non-creditable infant foods.
☐ Memo—Claiming Parent-Provided Infant Formula.
☐ List of formulas that don't require a medical statement.
☐ Parent decline letter.
☐ Feeding Infants Manual (if available).

I have been trained on the topics marked above, unless marked N/A as non-applicable.

Sponsor Signature: _____

Date: _____

Sanitation:

- ☐ Food stored properly.
- ☐ Thermometers in all storage units at proper temperatures.
- ☐ Maintaining correct temperatures of food during transportation, storage, service.
- ☐ Recording temperatures of food is recommended (page 107-109).
- ☐ Handwashing of participants and staff.
- ☐ Tables washed and sanitized immediately before meal services.
- ☐ Washing dishes in a two or three compartment sink.
- ☐ Washing dishes in a commercial dishwasher.
- ☐ Cleaning supplies stored out of reach of participants.
- ☐ Food service equipment and storage areas clean and maintained.

If a meal was observed during the preapproval visit, list any issues about the meal service or sanitation to be discussed:

Multi-site Sponsors: Monitoring and Training (page 206-207)

- ☐ Outside employment policy.
- ☐ Any changes to the Management Plan must be submitted to FNS.
- ☐ Monitoring Requirements and Sample Site Monitoring form (page 190-193).
  - ☐ New sites need a preapproval visit prior to starting CACFP operations (sample form pages 188-189).
  - ☐ New sites need a monitoring visit documented within four weeks of starting operations (page 190-193).
  - ☐ All approved sites need three monitoring visits documented per year (unless qualify for less with special approval).
    - ☐ No more than six months between visits.
    - ☐ Two of the three visits must be unannounced.
    - ☐ One of the unannounced visits must be a quality meal visit.
    - ☐ Monitor all types of approved meal services (breakfasts, suppers, weekends, etc.).
  - ☐ Review the Monitoring Form for sponsor conducted monitoring visits (page 190-193).
    - ☐ Five-day reconciliations must be done at each monitoring visit (page 194).
    - ☐ Corrective action for problems must be documented on monitoring form.
  - ☐ Sponsor must maintain administrative control for monitoring visits – cannot be contracted out.
- ☐ Claims Editing (page 206).
  - ☐ Verify each site is approved to serve the type of meals claimed.
  - ☐ Numbers of meals served do not exceed number of participants enrolled times number of days served for month.
  - ☐ Check for blocked claims (same number of meals claimed for 15 or more consecutive days).
  - ☐ Follow-up and documentation required for blocked claims (page 199-205).
- ☐ Household contact procedures (page 195-198).
- ☐ Staff training requirements/documentation (page 185-187 and 207).
  - ☐ Requirement to identify key staff (menu planning, meal service, meal counts, claims submission, recordkeeping).
  - ☐ Key staff must receive training prior to program operations/duties – new sites, new staff.
  - ☐ Key staff must receive annual training – documentation must include training date, names of staff trained, agenda.
  - ☐ Annual Civil Rights training for staff that work with the public.

I have been trained on the topics marked above, unless marked N/A as non-applicable.

Sponsor Signature: _____

Date: _____

For-Profit Sponsors (separate handout)

☐ Explained 25 percent Title XX Claiming Percentage OR Percentage of A's and B's compared to total enrollment OR licensed capacity that can be used to support claim submission for child care centers only. Adult centers can only use Title XIX/XX and enrolled numbers to determine 25 percent eligibility.

List month/year(s) verified: _____

Methods used:

☐ A's and B's

☐ Title XX

☐ Licensed Capacity

☐ Total Enrollment

List percentage verified:_____

☐ During this pre-approval visit it was determined by reviewer that Sponsor could not reach 25 percent level needed to submit a first monthly claim.

Comments:

Adult Day Care Centers: (separate handouts and adult meal pattern food chart)

☐ Public release (adult center).

☐ Adult Center HIS and household letter.

☐ Adult Meal Pattern sheet/OVS option.

☐ Meals cannot be claimed for participants who reside in an institution.

☐ Meals cannot be claimed for Title III funds (congregate or home-delivered elderly nutrition programs).

☐ Written individual care plans must be on file for all participates, documenting impairment for those under age 60.

Emergency/Homeless Shelters: (separate handouts)

☐ Shelter handout.

☐ Shelter Sample Meal Count sheet.

☐ Can claim participants through age 18.

☐ Can claim breakfast, lunch and supper; or two meals and one snack; or two snacks and one meal per participant, per day.

After-School Meal Program: (page 5-8)

☐ Eligibility requirements (census or school area eligible, must have enrichment or educational activities).

☐ Age requirements of participants.

☐ Regular CACFP meals vs. after school meal claiming (page 7-8).

☐ Must keep separate attendance **and** meal counts for After-School Meal Program from regular CACFP for those of school age (discuss school release days, etc.).

☐ Do not claim children who only attend for the After-School Meal Program in the A, B, C eligibility numbers.

☐ Must claim those of school age who attend before school or on school release days in the A, B, C eligibility numbers.

☐ After-School Meal Program can only be claimed during the school year, not summer.

☐ After-School Meal Program menu requirements and portion sizes.

I have been trained on the topics marked above, unless marked N/A as non-applicable.

Sponsor Signature: _____

Date: _____

The Sponsor has started keeping CACFP records:

Activity	Yes	Dates	No	Comments
Collected HIS forms			*	
Approved HIS forms			*	
Menus for regular meals/snacks				
Menus/FPRs for infants				
Point-of-service meal counts				
Attendance records				

*If sponsor has not collected and approved HIS forms for the current month, may be able to claim at the “all Cs” rate of reimbursement. (Shelters, Head Starts, and After-School Snack program centers do not need to collect HIS forms.)

If the sponsor has not kept menus or counts, list probable first day meals could be claimed:

_____

Other Resources/ Materials Given to Sponsor:_____

Comments:

Approved to begin claiming on: _____(Month/Year) or as determined by FNS applications team policy.

Hold application approval until Sponsor:_____

_____ _____

Center/Sponsor Representative Signature and Date FNS Staff Signature and Date