

Question and Answer on Infant Feeding in Family Day Care Homes

Refer to the U.S. Department of Agriculture (USDA) memo from May 17, 2002 titled Obligations of Child Care Centers and Day Care Homes to Offer Infant Meals in the Child and Adult Care Food Program (CACFP) for question 1. [View the Obligations of Child Care Centers and Day Care Homes to Offer Infant Meals in the Child and Adult Care Food Program \(CACFP\) memo on the USDA website.](#)

Q1: Do all infants in care need to be provided access to CACFP meals and snacks?

A1: Yes.

All children, including infants, who are enrolled in family day care homes participating in CACFP must be offered access to CACFP meals and snacks. The daycare home may not avoid this obligation by stating infants are not “enrolled.” Section 226.2 of the CACFP regulations defines an enrolled child as “a child whose parent or guardian has submitted to an institution a signed document which indicates that the child is enrolled for child care.” As long as the infant is in care during the meal service period, the daycare home must offer the infant a meal that complies with program requirements.

Refer to the USDA memo from May 9, 2000 titled FY00 Child and Adult Care Food Program Policy Memorandum #11 Issues Related to Feeding Infants in the Child and Adult Care Food Program (CACFP) for questions 2-6. [View the Issues Related to Feeding Infants in the Child and Adult Care Food Program \(CACFP\) memo on the USDA website.](#)

Q2: When an infant receives both breast milk and formula, is the meal or snack eligible for reimbursement?

A2: Yes.

A meal served to an infant less than 12 months of age can contain both iron-fortified infant formula and breast milk as long as the total number of ounces offered to the infant meets, or exceeds, the minimum amount for the milk component as specified in the CACFP infant meal pattern. Remember cow’s milk is NOT an acceptable substitution for an infant unless accompanied by a special diet statement from a recognized medical authority.

Q3: Are meals or snacks served to children, 12 months and older, reimbursable if they contain infant formula?

A3: Yes, for a period of one month.

Children can be provided infant formula for a transition period of one month (until 13 months) when they are weaning to cow’s milk. Since breast milk meets the fluid milk requirement it is creditable and does NOT need a special diet statement if continued beyond a year.

Q4: Solid foods are listed as optional for infants aged 4-7 months of age. Does this mean that they do not need to be offered any foods other than iron-fortified infant formula or breast milk until turning eight months of age?

A4: No.

If an infant is developmentally ready for one or more solid food items, and the parent or guardian requests that the infant is served solid foods, the components are no longer considered as options and should be served to the infant.

Q5: Is the provider responsible for providing all the required meal components for infants or can the parent provide certain components?

A5: Providers are responsible for providing all the required meal components; however parents may *choose* to provide one or several of the meal components, as long as this is in compliance with local health codes. In such a case, the provider is required to provide at least one of the components of the meal pattern in at least the minimum quantities for the meal to be reimbursable. The sponsoring organizations needs to ensure that the parent or guardian is truly choosing to provide the preferred component(s), and that the provider has not solicited (requested or required) the parent or guardian to provide the components in order to complete the meal and reduce cost to the provider.

Q6: If a mother comes to the daycare home to nurse her own infant, is the meal reimbursable? What if the provider, co-provider or helper is nursing her own infant?

A6: If an infant is 0-3 months old and the mother nurses her own infant on site the meal would not be reimbursable since the CACFP caregiver must provide some type of service in order to be reimbursed for a meal. However, the meal would be reimbursable for infants four months of age and older who are developmentally ready for solid foods, if at least one other component is furnished by the provider.

A provider or co-provider who nurses her own infant may claim reimbursement for the meal as long as she is eligible to claim reimbursement for meals and snacks served to her own child (i.e. income eligible). At least one other nonresident child must also be enrolled in the day care program and be present during the meal service. On the other hand, a helper who is considered an employee of the provider does not need to be income eligible for the provider to claim reimbursement for meals of the helper's infant who is breast fed on-site.

Q7: What infant formulas are approved for CACFP?

A7: The USDA is no longer providing a list of approved iron-fortified infant formulas that do not require a medical statement because new and re-formulated infant formula products are continually developing making the list not all-inclusive. Therefore consider the following guidelines when determining if an infant formula is creditable without a medical statement:

- Ensure that the formula is not a Food and Drug Administration (FDA) Exempt Infant Formula. Certain formulas are specially designed for infants with inborn errors of metabolism, low birth weight or other unusual medical or dietary problem (21 CFR 107.3). [View the list of Exempt Infant Formulas Marketed in the United States By Manufacturer and Category on the FDA website.](#) These formulas require a special diet statement from a licensed physician if an infant has a disability OR from a recognized medical authority if an infant has a medical or other special dietary need.
- Look for the statement "Infant Formula with Iron" or a similar statement on the front of the formula package. All iron-fortified infant formulas must have this type of statement on the package.
- Use the nutrition facts label as a guide to ensure that the formula is iron-fortified. To be considered iron-fortified an infant formula must have 1 milligram (mg) of iron or more per 100 kilocalories (calories) of formula when prepared in accordance with label directions.

All infant formulas sold in the United States must meet the nutrient specifications outlined by the FDA. If a formula is purchased outside of the U.S. it is likely that the formula is not regulated by the FDA and therefore may not be credible under the CACFP.