

## **CACFP Centers Questionnaire**

Complete this form and upload into CNP Web with your other review documents. For questions that require narrative answers, please ensure that your answers are as thorough and detailed as possible.

- 1. CACFP Contact Person for the Administrative Review** (the contact person should be available throughout the review process via e-mail to answer questions about the submitted documents and to submit extra documents if the CACFP Nutrition Consultant discovers that some required documents were not submitted):

- a. Name/Title: \_\_\_\_\_
- b. Email address: \_\_\_\_\_
- c. Phone number: \_\_\_\_\_

- 2. Does the center site being reviewed have wireless internet that state staff can access while on-site?**    Y    N

- 3. How do you advertise your daycare services (include website address and social media link):**

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\_\_\_\_\_

- 4. Are you updating your online agreement as needed with program changes?**    Y    N

- 5. Where/how are you keeping CACFP related emails/memos/correspondence from us?**

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\_\_\_\_\_

\_\_\_\_\_

- 6. Are Program records maintained for 3 years + current after submitting the final claim for the fiscal year to which they pertain or, if an audit is outstanding, until the audit is closed?**

Y    N

- 7. Where is your “And Justice for All” poster located?**

\_\_\_\_\_

\_\_\_\_\_

8. Do all publications/other forms of communication (such as websites and social media) that mention "CACFP" or "USDA" contain the updated Non-Discrimination statement or a link to it? Y N

9. What method does your institution use to annually collect Racial/Ethnic Data for participants?

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10. Do any participating families require program materials in other translations? Y N

a. If yes, do you provide informational materials in the appropriate translations?

Please explain:

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11. Where is WIC information made available to parents of enrolled children? [N/A Adult/AR]

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12. Is the 'Building for the Future' notice made available to parents of enrolled children? Y N

a. If no, how do you notify parents about CACFP and its benefits?

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13. Do you ever release any personal information regarding participants' households? Y N

a. If yes, does your institution have an internal policy detailing the entities with whom you may release information? Please explain:

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14. What edit checks are implemented to assure compliance with meal component requirements and meal count accuracy?

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a. Who makes menu?

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b. Who double checks menu for compliance?

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c. What resources are used to check new food items for compliance?

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d. Who takes 1st POS meal counts? When? \_\_\_\_\_

e. Who adds daily totals? \_\_\_\_\_

f. Who double checks meal counts for accuracy? \_\_\_\_\_

g. Who compiles information for monthly claim? Do they re-check counts?

h. Does someone compare attendance to meal counts? Who? \_\_\_\_\_

i. Who enters claim data into the online system? \_\_\_\_\_

15. What type of recordkeeping system does the institution use (please circle or highlight)?

Cash Accrual Both

16. Is monthly CACFP reimbursement spent on CACFP staff payroll? Y N

a. If yes, does institution document staff time and attendance to separate CACFP time and non-CACFP time and update agreement staffing plan hours as needed? Y N

17. Is the agreement budget reviewed on a regular basis? Y N If yes, how often and by whom?

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18. Have there been any changes in CACFP staff or CACFP staff responsibilities during the current fiscal year? Y N

19. Did new/reassigned staff receive adequate training before assuming CACFP-related duties? Y N

20. Which staff member(s) is/are responsible for providing required CACFP training to new/reassigned staff member(s) [names and titles]?

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21. How/when is potable water offered to children several times throughout the day?

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22. Is food deep-fat fried on-site?    Y    N

23. Are parental requests on file for substitutions related to special dietary needs?    Y    N

a. If yes, please describe:

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24. Are medical statements on file for substitutions related to medical disabilities?    Y    N

a. If yes, please describe:

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25. Describe the meal delivery process [Serve or Family Style? Who makes food? Who serves food to kids?]:

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26. \*For programs that serve infants:

a. Are you maintaining infant portion menus?    Y    N

b. Do you provide at least 1 brand of iron-fortified infant formula?    Y    N

If yes, Brand(s): \_\_\_\_\_

27. \*For Programs with more than 1 physical site. Regarding your monitoring practices, describe method(s) of corrective action taken for instances of non-compliance [What

procedures are followed on-site? How are issues reported to supervisors? How do you decide if follow up is necessary? When do follow up measures take place? Who makes that decision?]:

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**28. \*For Adult Center Programs:**

- a. Does program meet the needs of functionally impaired adults through an individualized plan of care? Y N
- b. Does program offer daily organized activities? Y N
- c. Is documentation on file to verify participants are age 60 or older or, if under age 60, to verify participants meet the definition of a functionally impaired adult? Y N
- d. Is documentation on file to verify participants reside in their own home or a group living arrangement? Y N

**29. \*For At Risk Afterschool Programs:**

- a. Is documentation on file to verify that participants are within regulatory age limits? Y N
  - i. Who is responsible? When is this done? How do they determine this?

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- b. What educational and/or enrichment activities do you offer?

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**c. Do children take 1 component off-site? Y N**

**i. If yes, is the component a grain, fruit or vegetable? Y N**

**ii. If yes, how is the off-site component flexibility monitored to prevent any food safety or integrity issues from arising?**

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