

INSTRUCTIONS FOR DAILY MEAL PRODUCTION RECORD – INFANTS(H1530-A)

Contracting entities and sites that care for infants must plan for and provide meals that comply with the Child and Adult Care Food Program (CACFP) meal patterns as required by the United States Department of Agriculture (USDA).

Contracting entities may develop their own meal production form but must ensure it contains all required elements.

The *Daily Meal Production Record – Infants* is provided to document planning and serving of those meals daily to demonstrate they are eligible for reimbursement. All items on the *Daily Meal Production Record – Infants* must be completed prior to the meal service, with the exception of quantity prepared and leftover food from the day of the meal service which can be completed at the end of the meal service. Changes and substitutions must be recorded and initialed prior to the meal service (do not use white out or mark completely through the menu item, simply line through and write in the change).

- A food component is one of the food categories (milk, grains, fruit, vegetable, meat/meat alternate) that comprise a reimbursable meal.
- A food item is a specific food offered within the food components comprising the reimbursable meal.
- A combination food contains more than one food item from different food components **and are not reimbursable in infant meals.**

Required elements for CONTRACTING ENTITY (CE) INFORMATION

Name of Contracting Entity (CE) – Enter the name of the contracting entity.

CE ID – Enter the five-digit CE ID that has been assigned to the organization by the Texas Unified Nutrition Programs System (TX-UNPS).

Name of Site – Enter the name of the site where the meal is being served.

Site # – Enter the four-digit site number that has been assigned to the site by TX-UNPS.

Date – Enter the date the meal(s) were served.

Required elements for MEAL PRODUCTION INFORMATION

Food Components – The required food components and serving sizes for each meal type are listed. Infant cereal and infant formula must be iron-fortified.

Menu – Enter the menu item for each meal service. It is recommended that the menu be recorded prior to the day of the meal service for planning and purchasing purposes.

Food Items Used –

Enter each food item used as follows:

- Specify the brand of infant formula used, or specify breast milk (BM)
- If a mother comes on-site to directly breastfeed her child indicate this meal as breastfed (BF) or mother breastfed (MBF), and leave the quantity used blank
- If serving yogurt, maintain documentation, such as the product label containing nutrition facts to demonstrate the yogurt met the sugar restriction
- If serving ready-to-eat breakfast cereal maintain documentation, such as the product label containing nutrition facts to demonstrate the ready-to-eat breakfast cereal met sugar restrictions.
- When an infant is developmentally ready to accept other components the CE or site **must** provide those components and **must** document the specific components in the menu.

NOTE: For guidance on types of labels and documentation reference CACFP Handbooks Section 4000, *Managing the Program*, Item 4114, *Meal Service Documentation*.

Quantity Prepared – Enter the **measurable amount** of each food item prepared opposite the category name. The measurable amount may not equal the amount needed for planned participation, if the actual participation is obtained prior to preparation of the meal and it is determined more or less of each item is required to ensure a reimbursable meal for each person participating in the meal service.

Refer to the CACFP Handbooks, Section 4000, *Managing the Program*, for additional information on infant meal patterns.

Planned Participation – Enter the planned number of participants for each meal service, by age group. It is recommended planned participation be completed prior to the day of service to aid in purchasing. (Program adults and non-program meals must be accounted for but may not be claimed)

Leftover/Recycled Food – (if applicable) Enter the date the food item was first served and the date it was re-served. Enter the food item and quantity that was leftover and the quantity that was recycled. This information can provide an additional source of documentation (i.e. in addition to receipts) that sufficient food was available to prepare the amount needed for the number of meals claimed.

Substitutions due to Medical or Special Dietary Needs or Disability (if applicable) – Note the substitutions due to disabilities and/or medical or special dietary needs. **NOTE:** For additional guidance on substitutions due to Medical or Special Dietary Needs or Disability reference CACFP Handbooks Section 4000, *Managing the Program*, Item 4113, *Meal Variations*

Comments (if applicable) – Record any other meal modifications or special instructions to document changes made to the meal planned.

Contracting Entity Name:		CE ID # (Five Digit):		Date Meal was Served:		
Name of Site:		Site # (Four Digit):				
Planned Participants:		Meal Service: <input type="radio"/> Breakfast <input type="radio"/> Lunch <input type="radio"/> AM Snack <input type="radio"/> PM Snack <input type="radio"/> Supper <input type="radio"/> Evening Snack				
Required Food Components - Birth through 5 months		Required Food Components - 6 months thru 11 months		Leftover/Recycled Food		
Breakfast, Lunch/Supper, and Snack	Breakfast, Lunch, and Supper	Snack		Date First Served	Date Re-Served	Food Item and Quantity
4-6 fluid ounces breastmilk or infant formula	6-8 fluid ounces breastmilk or infant formula and 0-4 tbsp infant cereal, or 0-4 tbst meat, fish, poultry, whole egg, or 0-4 tbsp cooked dry beans or dry peas, or 0-2 oz cheese or 0-4 oz cottage cheese, or 0-4 oz or 1/2 cup of yogurt, or a combination of the above* and , 0-2 tbsp vegetable or fruit or a combination of both	2-4 fluid ounces breastmilk or infant formula and 0-1/2 slice bread, or 0-2 crackers, or 0-4 tbsp infant cereal* and 0-2 tbsp vegetable or fruit or a combination of both.*				
*Required component when infant is developmentally ready						
Infant Name and Age		Menu		Food Items Used (Enter each food item used)		Quantity Prepared (measurable amount)
Substitutions due to Medical or Special dietary needs or disability						
Name of Infant		Substitution(s) Made			Item/Component Provided by Parent/Guardian-Y/N	

Comments (Record any other meal modifications or special instructions here) :