

# EARLY HEAD START TIP SHEET

## No. 8

### **Why are Early Head Start programs responsible for providing diapers and formula?**

#### **Response:**

Early Head Start programs are responsible for providing diapers and formula as part of the comprehensive services that Early Head Start provides. Early Head Start programs are responsible for supplying the necessary, age-appropriate materials that meet the needs and facilitate the participation of the children and families. Programs should use information from families and medical personnel, as soon as possible, to best respond to each child's individual needs. For example, allergies and lactose intolerance should be taken into consideration when purchasing and supplying formula. Latex allergies should also be considered when purchasing gloves needed for diapering. Cloth diapers, as well, may be required when a child can not wear plastic/disposable diapers for medical reasons.

As cited below in 1305.9, once a child and family is determined to be eligible for Head Start, a program may not solicit, encourage, or in any other way condition a child's enrollment or participation in the program upon the payment of a fee. Costs incurred by families when purchasing diapers and formula could be considered a fee.

#### ***Is supplying diapers for families the same as providing clothing?***

No, diapers are necessary materials for sanitary and hygienic toileting practices, as are rubber gloves, wipes, toilet paper, and disinfectant.

#### ***Is supplying formula to families who receive supplemental formula from WIC a double-dipping practice?***

Although many families receive supplemental foods for their infants and toddlers for at-home consumption through Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), it is not considered a double dipping practice for EHS programs to provide foods. WIC and EHS support the nutritional needs of the child at home and in the EHS program. A family receiving benefits from both programs is receiving a supplemental food and nutrition education benefit from the WIC program and also receiving as a benefit, the meal service and nutrition education from EHS. As the infants' growth needs increase (for example, infants needing more formula than newborns), the USDA meal requirements used by the EHS program complements both the home feeding and the infants' developmental readiness.

USDA will reimburse for formula fed to young infants receiving both formula and breast milk when programs provide the amounts of formula stated on each infant's meal plan. USDA also reimburses other formulas needed as part of a special diet for toddlers when programs provide medical evidence and documentation of need.

## **Considerations:**

- Does the program's budget include the cost of diapers and formula?
- Is the program looking for opportunities to garner these items through other funding opportunities or in-kind donations?
- Is the program individualizing services when purchasing these items?

## **Performance Standards, Title 45, Code of Federal Regulations:**

- **1304.23(b)(1)(iv)** Each infant and toddler in center-based settings must receive food appropriate to his or her nutritional needs, developmental readiness and feeding skills, as recommended in the USDA meal pattern or nutrient standard menu planning requirements.
- **1304.23(b)(1)(i)** All Early Head Start and Head Start grantee and delegate agencies must use funds from USDA Food and Nutritional Services Child Nutrition Programs as the primary source of payment for meal services.
- **1304.53(b)(1)(iii)** Grantee and delegate agencies must provide and arrange sufficient equipment, toys, materials, and furniture to meet the needs and facilitate the participation of children and adults. Equipment, toys, materials, and furniture owned and operated by the grantee or delegate agency must be age-appropriate, safe, and supportive of the abilities and developmental level of each child server, with adaptations, if necessary, for children with disabilities.
- **1305.9** A Head Start program must not prescribe any fee schedule or otherwise provide for the charging of any fees for participation in the program. If the family of a child determined to be eligible for participation by a Head Start program volunteers to pay for part or all of the costs of the child's participation, the Head Start program may accept the voluntary payments and record the payments as program income. Under no circumstances shall a Head Start program solicit, encourage, or in any other way condition a child's enrollment or participation in the program upon the payment of a fee.
- **1304.20(f)(1)** Grantee and delegate agencies must use the information from the screenings for developmental, sensory, and behavioral concerns, the ongoing observations, medical and dental evaluations and treatments, and insights from the child's parents to help staff and parents determine how the program can best respond to each child's individual characteristics, strengths, and needs.

## **Resources:**

**Early Head Start Tip Sheet (No. 3) *Providing Formula at Socializations***

**Issues Related to Feeding Infants in the Child and Adult Care Food Program (CACEFP)**, April 20, 2000. [See attached document.](#)

**Special Supplemental Nutrition Program for Women, Infants, and Children Program**, A Federal grant program for which Congress authorizes a specific amount of funds each year to provide nutritious foods to supplement diets, information on healthy eating, and referrals to health care for participating low-income women, infants, & children up to age 5.

In English <http://www.fns.usda.gov/wic/ProgramInfo/WICataglance.htm>

In Spanish <http://www.fns.usda.gov/wic/ProgramInfo/sp-WICataglance.htm>

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*The Tip Sheet is not a regulatory document. Its intent is to provide a basis for dialogue, clarification, and problem solving among the Head Start Bureau, Regional Offices, T & TA consultants, and grantees.*

**April 20, 2000**

**Issues Related to Feeding Infants in the Child and Adult  
Care Food Program (CACFP)**

**Regional Director  
Child Nutrition Programs  
All Regions**

We know that dietary needs during an infant's first year of life are individually prescribed and more complicated than those for toddlers and older children. Recent changes in the requirements for infant meal service have raised questions regarding reimbursable meals and snacks for infants in CACFP.

The interim rule, [Amendments to the Infant Meal Pattern](#) (PDF), published in the Federal Register on November 15, 1999 (64 FR 61770), announced important changes in meal services to infants in CACFP. The rule eliminates whole cow's milk from the infant meal pattern by requiring that all meals and snacks served to infants, up to one year of age, include breast milk or iron fortified infant formula. The rule also allows reimbursement for meals served to infants, from birth through seven months, that exclusively contain breast milk.

Since publication of the interim rule, we have received a number of questions from you related to feeding infants in CACFP. We answered some of them in the [December 14, 1999, memorandum](#), "Effective Date for Implementation of Interim Regulation Amending the Infant Meal Patterns for the National School Lunch Program, School Breakfast Program and Child and Adult Care Food Program." We also included some technical corrections to the infant meal pattern in the CACFP final rule, [Overclaim Authority](#) (PDF), published on December 27, 1999 (64 FR 72257).

Attached are [answers to other questions](#) that we have been asked. We thought it would be helpful to share these questions, and our responses, with you. For purposes of this memorandum, we will use the term "infant" to refer to babies under 12 months of age and will use the term "child" or "children" to refer to those over 12 months of age.

Please share this information with your State agencies.

**STANLEY C. GARNETT**  
**Director**  
**Child Nutrition Division**

## Questions and Answers

**1. When an infant receives both breast milk and formula, is the meal eligible for reimbursement?**

Yes, a meal served to an infant under 12 months of age and under which contains some amount of breast milk (and some amount of formula ) is reimbursable 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.

**2. Are meals served to children, 12 months and older, reimbursable if they contain infant formula?**

Yes, for a period of one month, when a child is weaning from infant formula to whole cow's milk (i.e., transitioning), meals that contain infant formula may be reimbursable. When a child is weaned from formula (or breast milk) to cow's milk, it is a common practice to provide the infant with both foods at the same meal service, to gradually ease the infant to accept some of the new food. However, unlike breast milk, infant formula is not an alternative type of milk which can be substituted to meet the fluid milk requirement for the CACFP meal pattern for children over the age of one year. (See FNS Instruction 783-7, rev. 1, Milk Requirement—Child Nutrition Programs.) Thus, for a child 13 months of age and older who is not in this transitional stage, a statement from a recognized medical authority is needed for a meal containing infant formula to be eligible for reimbursement (See FNS Instruction 783-2, rev 2, Meal Substitutions for Medical or Other Special Dietary Reasons).

**3. If a physician prescribes whole cow's milk as a substitute for breast milk for an infant under 12 months of age, is the meal reimbursable?**

Yes, a meal or snack containing whole fluid cow's milk and served to an infant under 12 months of age is eligible for reimbursement if the substitution is authorized, in writing, by a recognized medical authority. Similarly, if a recognized medical authority prescribes a formula such as low-iron formula, which is not currently listed as a formula for CACFP, the meal is eligible for reimbursement.

We have always recognized the unique dietary needs of infants and that decisions concerning diet, during this first year of life, are for the infant's health care provider and parents or guardians to make together. Therefore, to support the request, a medical statement which explains the food substitution or modification is needed. The statement must be submitted and kept on file by the facility or institution.

**4. A mother would like her 5-month old infant to receive breast milk which she provides and solid foods, which are listed as options in the meal pattern. Because the infant is developmentally ready for solid foods, whose responsibility is it to provide them?**

If an infant is developmentally ready for one or more solid food items and the parent or

guardian requests that the infant be served solid foods, the center or provider is responsible for purchasing and serving them to the infant.

The CACFP infant meal patterns takes into consideration that infants develop at different paces. Some food items such as fruit and cereal are listed as options in the infant meal pattern to account for an infant's "readiness" to accept these foods (i.e., some infants are developmentally ready for solid foods earlier than others). This occurs in the breakfast and lunch/supper meal service for infants 4-7 months of age, and for the snack meal service for infants 8-11 months of age. A child care center or provider must serve a complete meal to every infant or child enrolled in the meal service. Therefore, if a child is developmentally ready for these solid foods, 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 to provide her with the optimal nutrition she needs to develop and grow.

**5. Is a meal reimbursable if the parent or guardian provides the majority of the meal components for infants older than three months?**

In addition to medical or special dietary needs, parents may *choose* to provide one or several of the meal components under the CACFP infant meal pattern for infants older than three months, as long as this is in compliance with local health codes. Because we recognize that parents or guardians are often most in touch with their child's individual dietary preferences, we believe the CACFP infant meal pattern can accommodate these preferences. In such a case, the center or provider would still be required to provide at least one of the components in at least the minimum quantities specified in the meal pattern in order for the meal to be reimbursable. Centers and sponsoring organizations also need to ensure that the parent or guardian is truly choosing to provide the preferred component(s), and that the center or 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 center or provider.

**6. If a mother comes to the day care home or center to nurse her infant, is the meal reimbursable?**

No. Although we strongly support all efforts for mothers to breastfeed their infants, we believe that the caregiver must provide some type of service in order to be reimbursed for a meal. CACFP reimburses child care facilities for the cost of preparing and serving nutritious meals and snacks to infants and children receiving day care. In the case of breastfed infants, CACFP reimburses the facility for the cost of preparing the bottle and feeding the infant. When a parent nurses her own child, the services for which the center or the provider would receive reimbursement are not being performed.

However, the meal would be reimbursable for infants over 3 months of age who are developmentally ready for solid foods, if at least one other component is furnished by the center or provider. For example, if a mother comes to the day care home for lunch meal service to breastfeed her 5 month old infant and the provider supplies a serving of vegetables (listed as options in infant meal pattern for lunch for infants aged 4-7 months), the meal is reimbursable.

**7. If a day care home provider breastfeeds her own infant, is the meal eligible for reimbursement?**

Yes, a day care 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. In this case, the meal is reimbursable because the mother (provider) is actively engaged with the child. Thus, unlike a mother who comes into a center or home to breastfeed an infant, the provider is being reimbursed for her services—the time and effort she expends breastfeeding her own infant.

As with any other claim for meals served to the provider's own child, the infant must be eligible for free and reduced price meals, enrolled in the day care program, and participating in the program during the time of the meal service. At least one other nonresident child must also be enrolled in the day care program and present during meal service.

**8. Cottage cheese is a meat alternate in the lunch and supper meal pattern for infants aged 8 through 11 months. How much cottage cheese must be offered to fulfill the meat/meat alternate meal pattern requirement?**

Cottage cheese, cheese food, and cheese spread are acceptable meat alternates in the CACFP infant meal pattern. An error in the meal pattern tables in sections 210.10(m)(2)(iii)(C), 210.10a(h)(3), and 226.20(b)(4) incorrectly measures the amount of cheese in tablespoons. The correct amount which may be offered as a meat alternate to infants, aged 8 through 11 months, is 1 to 4 ounces.

**9. Is yogurt an allowable meat alternate in the infant meal pattern?**

The Office of Analysis, Nutrition and Evaluation plans to issue a memorandum on the use of yogurt in the CACFP infant meal pattern in the future.