



University of California
Agriculture and Natural Resources | Nutrition Policy Institute

Also endorsed by: California Department of Education, Nutrition Services Division

The New CACFP Nutrition Standards

Stakeholders' Input and Recommendations for California's Implementation of the New Standards

For the first time in decades the nutrition standards for the Child and Adult Care Food Program (CACFP) have been updated, making a great program even better by strengthening the CACFP's role in safeguarding and supporting the health of all participants. In order to ensure implementation of the new standards in California sustains or even increases participation in the CACFP, California Food Policy Advocates (CFPA) convened a group of child care experts in collaboration with the California Department of Education (CDE), and the Child Care Food Program Roundtable (Roundtable) to make recommendations for an effective and coordinated California implementation plan.

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BACKGROUND ON THE NEW CACFP NUTRITION STANDARDS

On April 22nd, the U.S. Department of Agriculture (USDA) announced the release of new, healthier nutrition standards for foods and beverages served through the CACFP. The *Healthy, Hunger-Free Kids Act of 2010* required USDA to update the CACFP nutrition standards and better align them with the 2010 Dietary Guidelines for Americans. Young children in CACFP child care settings and other CACFP participants will now receive meals with more whole grains, a greater variety of vegetables and fruits, and less added sugars and solid fats. This is the first major update of the CACFP nutrition standards since the program's inception in 1968.

PROCESS FOR IDENTIFYING CALIFORNIA'S IMPLEMENTATION PLAN

Although the new standards do not become effective until October 1, 2017, CFPA, the CDE, the Roundtable, and other CACFP partners are working to develop an effective, coordinated implementation plan for California's child care agencies. In April and May of 2016, CFPA facilitated a series of conference calls with a group of CACFP child care experts who could, in partnership with CDE, provide guidance on enhancing the technical assistance and training support provided to all providers, centers, and sponsors who will be affected by the new standards. The following pages include major themes that surfaced during the calls. The information in this document can be utilized to share recommendations for California's implementation of the new standards.

CALIFORNIA'S RECOMMENDATIONS FOR IMPLEMENTATION

The following recommended implementation strategies were identified collectively and are intended as a framework to maximize the number of providers, centers, and sponsors complying with the new CACFP nutrition standards. The following recommendations may go beyond what is currently feasible for implementation in California.

The CDE and the USDA will take a lead in developing and sharing training resources. It is anticipated that a number of other agencies and organizations including the Roundtable, CFPA, child health organizations, Resource & Referral agencies, California Department of Social Services (CDSS), Emergency Medical Services Authority (EMSA), and CACFP sponsors will also play a role in carrying out the following recommended implementation strategies. Next steps should include the identification of the agencies or organizations that will play a role in ensuring each of these recommended implementation strategies are achieved.

1. A variety of training delivery methods should be utilized to meet the needs of all providers, centers, and sponsors.

California's child care workforce and other CACFP operators and administrators represent a diverse population with varied learning needs and competing work demands that impact their ability to attend trainings. In order to ensure providers, centers, and sponsors have access to effective trainings, a variety of training delivery methods should be offered. For a full list of the delivery methods recommended see Appendix A.

2. Training resources and delivered trainings should reflect the linguistic diversity of our state and be made available in Spanish.

In order to ensure that all training resources are accessible, training opportunities and resources should be provided in Spanish (e.g., handouts available in Spanish, webinars translated into Spanish, offering in-person trainings in Spanish, accompanying in-person trainings with Spanish translation services). Ensuring trainings and training resources are available in Spanish also supports program sponsors who must train Spanish speaking providers about the new standards.

3. Training resources and delivered trainings should be appropriate for individuals with literacy barriers.

Developing materials that are colorful, user-friendly, full of pictures, and are written at appropriate literacy levels will help CDE, sponsors, and centers train staff who have low literacy skills or who do not speak English. Resources designed for training individuals with literacy or language barriers should be shared in a central, public location, such as CDE's webpage.

4. Creation of a consistent and unified message that positively communicates the nutrition standards changes should be developed to reduce perceived burden and to establish a culture of support.

Some CACFP providers may perceive the new standards as overly burdensome and too complicated to follow. A strategic communications plan is critical for minimizing the perceived difficulty and encouraging participation. Effective branding of the new standards can build a movement of positivity and support. The key messages, taglines, and social media strategies developed from branding can be embedded into training and communication resources and shared statewide. The branded messages and materials would benefit from focus groups and pilot-testing to ensure effectiveness.

5. Licensed non-CACFP providers need information about the new standards and training resources should be made available to them so they can follow the standards correctly.

The new CACFP nutrition standards will not only affect CACFP providers, centers, and sponsors; California's licensed child care centers who do not participate in the program are still required by state licensing to follow the CACFP nutrition standards. The California Department of Social Services (CDSS), the Emergency Medical Services Authority (EMSA), and Preventive Health and Safety Practices trainers will be instrumental in directing those centers to appropriate training resources. Coordination across CDE, CDSS, and EMSA should occur in order to ensure that licensed child care centers have access to the wealth of training opportunities and resources that CDE will be providing and to ensure appropriate messaging about the new standards is consistent across agencies.

6. Efforts to publicize the new nutrition standards and training opportunities need to be coordinated and include outreach to partner agencies, organizations, and regional or statewide networks in which providers participate.

Many child care providers are English learners, have low-literacy skills, or do not utilize computers on a regular basis. These providers would benefit from coordinated communications. Sending out postcards to every provider in California, making phone calls, or sending text messages may not be financially feasible for one state agency. However, appropriate partners can be identified who are best suited to get the word out through multiple modes of communication. See Appendix A for a full list of the organizations and entities identified by this group with whom outreach efforts should be coordinated and conducted.

APPENDIX A

Delivery methods recommended for training providers, centers, and sponsors:

- Utilize a Train-the-Trainer model
- Contract with Cal Pro NET to develop web-based and face to face trainings
- Provide additional opportunities for web-based and face to face trainings
- Ensure in-person trainings occur in multiple regions of the state and maximize efforts to ensure that individuals living in mountainous and rural areas can access them
- Tap into upcoming conferences and regional meetings to provide in-person trainings (e.g. the Roundtable Conference; the California Child Care Resource & Referral Network Annual Conference; First 5 Annual Child Health, Education and Care Summit; Roundtable meetings; Resource & Referral agencies regional meetings; and Head Start's regional clusters)
- Make trainings and recorded webinars available on YouTube or via video format including short and specific videos as well as recorded webinars.
- Share PowerPoints that can be used to train child care providers and staff
- Share or develop a one-page cheat sheet that lays out changes to the nutrition standards
- Utilize coaching or other on-site, individualized professional development strategies
- Share or develop resources to address potential increases in cost (e.g., financial trainings to assist with developing menus on a budget; building procurement strategies, such as shopping in bulk and utilizing seasonal food items)
- Share or develop recipes and/or resources to conduct food tastings or cooking demos that highlight nutritious CACFP meals and/or snacks

Recommended agencies and organizations to whom outreach efforts about the new CACFP nutrition standards should be conducted and coordinated:

- 2017 California Childhood Obesity Conference
- California Breastfeeding Coalition
- California Child Development Administrators Association
- California Child Care Resource & Referral Network
- California Food Policy Advocates
- Child Care Food Program Roundtable
- California Department of Public Health
- California Department of Education, Child Developmental Division
- California Department of Education, Nutrition Services Division
- California Department of Developmental Services
- California Department of Social Services, Child Care Licensing Division
- California Health and Human Services Agency
- California Preschool Network
- County Departments of Public Health
- County Offices of Education

- California School Nutrition Association
- Emergency Medical Services Authority
- First5 Commission
- Foster Care
- Head Start
- K-12 Schools with pre-schools
- Local Resource & Referral Agencies
- Minute Menu
- Tribal organizations
- University of San Francisco California Childcare Health Program
- Women Infants Children (WIC)

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