South Carolina Department of Social Services Family Nutrition Programs – CACFP PO Box 1520 Columbia SC 29202-1520



The CACFP is administered on the federal level by the Family Nutrition Programs, an agency of the Department of Agriculture. Within individual states, the program is administered by a state agency. In South Carolina, the Department of Social Services administers the CACFP. At the local level, the program is administered by participating institutions or organizations (e.g., emergency shelters).

FOR MORE INFORMATION REGARDING THE CACFP IN EMERGENCY SHELTERS:

Complete the attached information card and return it to: South Carolina Department of Social Services **Child and Adult Care Food Program** P.O. Box 1520 Columbia, South Carolina 29202-1520

Or call the CACFP staff at (803) 898-0959.

Or e-mail one of the two people listed below: **Charlene R. Cobbs, ESP Supervisor** Child and Adult Care Food Program South Carolina Department of Social Services E-Mail: charlene.cobbs@dss.sc.gov

Amanda Goins, ESP Program Assistant Child and Adult Care Food Program South Carolina Department of Social Services E-Mail: amanda.goins@dss.sc.gov

> DSS Brochure 3310 (JUL 11) Edition of JUL 99 is obsolete.

South Carolina Department of Social Services Introduces the Child and Adult Care Food Program in Emergency Shelters

The Child and Adult Care Food Program (CACFP) offers cash reimbursement to help organizations serve free meals and snacks to children in emergency shelters.

The Child and Adult Care Food Program in Emergency Shelters

On October 31, 1998, President Clinton signed the Child Nutrition Reauthorization Act of 1998 (Public Law 105-336). This act expanded the Department of Agriculture's Child and Adult Care Food Program (CACFP) to provide cash reimbursement for meals served to children in emergency shelters. This act demonstrates USDA's commitment to improve the access homeless people have to mainstream programs.

ELIGIBLE EMERGENCY SHELTERS:

- An emergency shelter is defined as "a facility all or part of which is used or designed to be used to provide temporary housing." Temporary residential sites which are operated by an emergency shelter are also eligible for participation.
- This program targets family shelters, shelters for battered women, and other facilities whose primary purpose is to provide temporary shelter to homeless families with children to participate in CACFP. This includes an emergency shelter providing temporary residence to children and their parents or guardians, or a temporary residential site for children and their parents or guardians sponsored by an emergency shelter.
- Shelters may be a public or private nonprofit institution that provides support to at-risk children and their families.

- Emergency shelters do not have to offer formal child care as recognized by a licensing authority. There is also no federal requirement for emergency shelters to have either federal, state, or local child care licensing or approval; however, the shelter must meet all applicable state and local standards and requirements.
- Residential Child Care Institutions (RCCI) which provide temporary shelter for abused or runaway children would remain eligible for participation under the National School Lunch Program (NSLP).

ELIGIBLE CHILDREN:

- The children must be in temporary residence at the shelter and can be with or without their parent(s)/guardian(s).
- Eligible children must be 18 years of age or younger. If the shelter services the migrant community, eligible children may be 18 years of age or younger. Children with disabilities can participate at any age as long as the majority of the participants are 18 years or younger.

REIMBURSEMENT:

- All meals will be reimbursed at the free rate.
- Meals served must meet CACFP meal pattern requirements.
- Shelters may claim up to three meals (breakfast, lunch and supper) or two meals and one snack per child per day, including weekends.



POTENTIAL SPONSOR SURVEY FORM:

Please complete the following form if you wish to receive more information about the CACFP in emergency shelters. After completing, simply detach at the dotted line and return.

Name of Organizat <mark>ion</mark> :
Mailing Address:
County:
Telephone: ()
Fax: ()
Type of Organization: (check one)
Public
□ Private, nonprofit