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| **STEPS** | **ITEMS REQUIRED** |
| 1 | * Complete New Sponsor Form
* Provide HCNP with general information and submit requested documents
 |
| 2 | * Plan and create a cycle menu
* Submit to HCNP the cycle menu along with production record templates, menu planning templates, and the USDA certification of compliance worksheets
 |
| 3 | * Review SFA Online Application Instructions
* Complete online application in HCNP Systems
* Sign and submit Permanent Single Agreement
 |
| 4 | * Complete and submit general program documents such as:
	+ Food Safety Plan
	+ Local Wellness Policy
	+ Procurement Plan
 |
| 5 | * Pre-operational visit to the SFA and Vendor (if applicable)
 |
| 6 | * Attend HCNP Training
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**Hawaii Child Nutrition Programs**

Steps to becoming a new SFA

**Hawaii Child Nutrition Programs**

**New Sponsor Form**

**-STEP ONE-**

**INSTRUCTIONS**: This form is **required** for all new school food authorities (SFA) in the Child Nutrition Programs. Complete and return this form along with the additional requested documentation to [assigned specialist email].

Name, Title, Phone Number, Email Address of person filling out this document:

Name Title Phone Number Email Address

School Name

School Address Island

Business Name (DBA) Business Phone Number

Business Address

1. Indicate the meal programs of interest: (For more information on each program, visit: <https://www.fns.usda.gov/school-meals/child-nutrition-programs>)

* National School Lunch Program (NSLP)
* School Breakfast Program (SBP)
* Afterschool Snack Program (ASP)
* Fresh Fruit and Vegetable Program (FFVP)

2. Select all grades served:

🞎 Preschool 🞎 Kindergarten 🞎 1 🞎 2 🞎 3 🞎 4 🞎 5 🞎 6 🞎 7 🞎 8 🞎 9 🞎 10 🞎 11 🞎 12

3. Do you plan to self-prep meals or receive vended meals?

* Self-prep (If self-prep, skip to question #8)
* Vended

4. Name and address of company/organization from which you plan to purchase school meals:

5. Vendor contact name, phone number, and email address:

6. Did you use a Request for Proposal (RFP), Invitation for Bid (IFB), or Intergovernmental Agreement (IGA) to procure this contract?

 🞎 RFP 🞎 IFB 🞎 IGA 🞎 Unsure, request for additional information

7. What year is the vended meal contract in?

8. What system will you use to count meals?

* Manual
* Electronic; name of program:
* Combination of manual and electronic

9. Will the program be pricing or non-pricing? (A pricing agency charges for meals. A non-pricing agency does not charge for meals.)

 🞎 Pricing 🞎 Non-pricing 🞎 Both Pricing and Non-pricing 🞎 Unsure

**Submit the following documents to [assigned specialist email]:**

* HCNP Systems User Authorization Request Form
	+ <https://hcnp.hawaii.gov/wp-content/uploads/2016/06/20160617-User-Auth-Form-revised.pdf>
	+ At a minimum, sponsors must have two users; one user to perform sponsor administrative tasks, and one user to perform fiscal/claim related tasks.
	+ User Authorization form must be signed by the executive contact.
* Roster of all current students including their date of birth
* W-9
* 501(c)(3) Documentation
* DUNS # (print out formal documentation from <https://fedgov.dnb.com/webform>)
* Hawaii Tax ID #
* Federal Employer Identification (EIN) Number

**Assurances:**

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| **\_\_\_** | We are aware that there are hiring standards for new school nutrition program directors hired on or after July 1, 2015. If the individual does not meet the hiring standards, we understand we are to seek prior approval from Hawaii Child Nutrition Programs before hiring the individual. <https://fns-prod.azureedge.net/sites/default/files/cn/profstandards_flyer.pdf> |
| **\_\_\_** | We are aware that when a new foodservice staff member is hired we are responsible to ensure this person is properly trained in the federal child nutrition programs. Training materials can be located at <http://hcnp.hawaii.gov/training-resources/>. |
| **\_\_\_** | We are aware that meal counts must be taken at the Point-Of-Service and that other meal count methods are unacceptable.  |
| **\_\_\_** | We are aware that we must also document non-reimbursable meals, second meals, adult meals and a la carte items in order to have accurate records of non-program costs. <https://fns-prod.azureedge.net/sites/default/files/resource-files/SP20-2016.pdf>  |
| **\_\_\_** | We are aware that we are responsible for filing monthly claims for reimbursement in HCNP Systems. |
| **\_\_\_** | We are aware that claims must be filed in a timely manner in order to receive federal reimbursement, and that failing to place our claims in a timely manner will jeopardize our reimbursement. Initial claims must be filed no later than 60 calendar days after the last day of the service month.  |
| **\_\_\_** | We are aware that a One-Time Exception (OTE) may only be used once every three years. If a claim is not submitted or corrected by the due date, an OTE will need to be submitted and approved by the USDA Western Regional Office.  |
| **\_\_\_** | We are aware that there are federal menu planning requirements that we must meet when planning, purchasing or preparing our school meals, and that not following the pattern will jeopardize our meal reimbursements. |
| **\_\_\_** | We are aware that school meal program records must be maintained for three years plus the current school year. |
| **\_\_\_** | We are aware that student’s eligibility for free and reduced price meals is confidential as is all information on the students’ meal application. |
| **\_\_\_** | We are aware that as a sponsor we are responsible for complying with all state and federal regulations and that failing to do so can result in fiscal action during administrative reviews. <https://fns-prod.azureedge.net/sites/default/files/resource-files/NSLPFactSheet.pdf> |
| **\_\_\_** | We are aware that an Administrative Review will be conducted to assess program compliance during our first year of NSLP operation.  |

Sponsor Signature Date

Once this form has been completed, please submit to your assigned specialist:

[Assigned Specialist]

[Specialist Email]

**-STEP TWO-**

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|  | **Menu planning and meal requirements:** |
| **□** | Refer to the Hawaii Child Nutrition Programs website for training materials on the meal pattern requirements - <http://hcnp.hawaii.gov/training-resources/>. Sponsor should also review training materials on the whole grain rich requirements and the crediting of menu items. Additional training materials can be found at <https://www.fns.usda.gov/school-meals/child-nutrition-programs>.  |
| **□** | Create a cycle menu that meets the meal pattern requirements for each grade group served. For example, if the SFA serves an elementary, middle, and high school menu for lunch and one menu for breakfast, the SFA must submit four cycle menus. *A cycle menu is defined as a menu that offers different foods every day and repeats itself after multiple weeks.*  * Menus must be created based on grade groups. For breakfast, you may have a Preschool, K-5, 6-8, 9-12, or a K-12 menu. For lunch, you may have a Preschool, K-5, 6-8, K-8, and/or a 9-12 menu.
* Please note that you must follow the preschool meal pattern requirements if creating a preschool menu. <https://fns-prod.azureedge.net/sites/default/files/cn/SP01-2018os.pdf>
* If your site serves preschool at the same time as grades K-5, in a setting in which preschoolers cannot be distinguished from elementary students, your site may choose to serve the K-5 meal pattern to preschoolers. This situation is referred to as co-mingling. <https://fns-prod.azureedge.net/sites/default/files/cn/SP37-2017os.pdf>
 |
| **□** | Maintain all recipes, labels, child nutrition labels, and product formulation statements that correspond to the cycle menu(s).  |
| **□** | Input each week of the cycle menu(s) for breakfast and/or lunch into HCNP’s Menu Planning Template. You may find the template at <http://hcnp.hawaii.gov/overview/nslp/> > Meal Pattern tab.  |
| **□** | Check that your cycle menu(s) is in compliance with the meal pattern requirements by inputting each week into USDA’s Certification of Compliance Worksheet. <https://www.fns.usda.gov/school-meals/certification-compliance>. Be sure to select the correct worksheet for the number of days of meal service per week and for the grade groups served.  |
| **□** | Create production record templates for each day of the cycle menu(s). Please use HCNP’s production record template located at <http://hcnp.hawaii.gov/overview/nslp/> > Program Resources tab > Production Record and Transport Daily Record. * Training on how to complete the production record can be found at <http://hcnp.hawaii.gov/training-resources/>.
 |
| **□** | Submit to your assigned specialist a copy of your cycle menu(s), menu planning templates, certification of compliance worksheets, and production records along with copies of the corresponding recipes and labels.  |

**-STEP THREE-**

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|  | **After the sponsor receives access to HCNP Systems:** |
| **□** | Log into HCNP Systems at <https://www.cnpweb.org/hawaii/Login>. |
| **□** | Follow the attached instructions on how to complete the online application.  |
| **□** | Complete both the Sponsor Application and Site Application(s) under the Applications Tab.  |
| **□** | Upload all required documents into the corresponding blue folder under the Checklist Tab. Required documents are indicated with a red check mark. Input the date each document is uploaded into the system.  |
| **□** | Once applications are completed and documents are uploaded, click on the button under the Checklist Tab that states ‘Submit Application to State Agency for Approval’. This places your application in *Pending Approval* status. A specialist will then review your application and notify you if changes are needed.  |
| **□** | Contact your assigned specialist with any questions at 808-587-3600. |

**-STEP FOUR-**

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|  | **Additional requirements prior to approval:** |
| **□** | Contact the Department of Health and obtain a sanitation inspection and food establishment permit.  |
| **□** | Create and implement a food safety plan and standard operating procedures. It is encouraged to use HCNP’s food safety template located at <http://hcnp.hawaii.gov/overview/nslp/> > Food Safety tab. |
| **□** | Create and implement a Local Wellness Policy using the requirements set forth by the USDA - <https://fns-prod.azureedge.net/sites/default/files/tn/LWPsummary_finalrule.pdf>. |
| **□** | Create and maintain a Civil Rights binder that includes a copy of HCNP’s civil rights complaint procedures, complaint form, and complaint log. Documents located at <http://hcnp.hawaii.gov/overview/nslp/> > Civil Rights tab.  |
| **□** | Create and implement a meal charge policy. Policy must be distributed to all households and school staff at the start of the school year. <https://fns-prod.azureedge.net/sites/default/files/cn/SP46-2016os.pdf>.  |
| **□** | Prior to the start of the school year, prepare and distribute a public release to all households notifying them of the school’s meal program(s). It is encouraged to use HCNP’s public release template located at <http://hcnp.hawaii.gov/overview/nslp/> > Program Resources tab > Free and Reduced Price Applications. (For pricing schools only) |
| **□** | Develop a procurement plan, code of conduct, and vended meals contract (if applicable). Refer to <http://hcnp.hawaii.gov/overview/nslp/> > Procurement tab.  |
| **□** | Complete and submit the Civil Rights Preaward Review.  |
| **□** | Establish and maintain a nonprofit school food service account to be used for allowable revenues and expenses only. Resource Management information may be found at <http://hcnp.hawaii.gov/training-resources/> > NSLP. |
| **□** | Submit a copy of each of the above documents to your assigned specialist for review. |

**-STEP FIVE-**

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| **□** | Your assigned specialist will schedule a date to visit your site and your vendor, if applicable. The purpose of this visit is to ensure program compliance and to provide technical assistance if needed.  |

**-STEP SIX-**

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|  | **Training:** |
| **□** | Register and attend HCNP annual training. If applying to the program after annual training is conducted, the Sponsor will be responsible for scheduling a one-on-one training with a NSLP specialist. |
| **□** | Each nutrition program staff member is required to obtain a set amount of training hours each school year. For the training requirements, refer to <https://fns-prod.azureedge.net/sites/default/files/cn/profstandards_flyer.pdf>. |
| **□** | Create and maintain a training log for each nutrition program staff member. You may use HCNP’s Training Tracker Tool template located at <http://hcnp.hawaii.gov/overview/nslp/> > Program Resources tab > Professional Standards > HCNP Training Tracker Tool. |
| **□** | Staff member(s) that attend HCNP’s training will be responsible for training the nutrition program staff members that did not attend the training. |

Once steps 1-6 are completed, your assigned specialist will approve your application in HCNP Systems and you may begin conducting the meal program(s). Mahalo for your efforts in feeding our keiki wholesome, nutritious meals!