

**Steve Sisolak** Governor



**Richard Whitley** Director

State of Nevada

### Department of Health and Human Services Division of Public and Behavioral Health

**Obesity Prevention and Control Program** Child and Adult Care Food Program for Early Care and Education Centers: Gap Analysis



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### **Child and Adult Care Food Program (CACFP)**

#### Purpose, Role, and Impact

- Federal Nutrition Program for incomeeligible individuals
  - Child and adult care institutions
  - Family/group day care homes
- Early Care and Education Centers (ECE) generally qualify
- Strategy for addressing food insecurity and preventing childhood obesity



### **Analysis: Objectives**

- 1. Determine factors affecting Nevada's ECE program participation in CACFP, and
- 2. Identify opportunities to enhance Nevada's participation in CACFP based on data obtained from the ECE program community



# **Analysis Methodology: Summary**



✓ Collect relevant statistics, service data, and financial information



✓ Conduct key informant interviews to identify strengths and weaknesses, and recommendations to increase participation in CACFP



✓ Survey ECE providers to map participation and gain their perspective and insights to promote participation in CACFP

# **Analysis Steering Committee**

### **Composition**

• Comprised of cross-sector members

### Roles

- Provided information and data
- Reviewed materials
- Identified key informants
- Provided ongoing support



### **Key Informant Interviews**

#### **Purpose**

- Gather insight regarding critical issues
- Identify barriers/challenges, strengths, and weaknesses

Eleven key informant interviews were conducted.

Four environmental health professionals were also interviewed.



# Results: Key Informant Interviews

### **Challenges/Barriers**

- Paperwork/Administration
- Rural challenges
- Financial issues
- Lack of knowledge about CACFP
- Lack of training/technical assistance (TA)
- Food preparation/regulations/ permits

#### **Food Service Permit Costs**

Carson City Health and Human Services	\$ 75
Southern Nevada Health District	\$ 121
State of NV, Division of Public and Behavioral Health	\$ 166
Washoe County Health District Support Kitchen (non-commercial)	\$ 401

# **ECE Survey Engagement**

Postcard Email/Paper Survey Letter Phone Call

# **Survey Distribution**

#### **Distribution and Responses**

- 1,013 surveys issued statewide
- 212 completed surveys returned
- Response rate: **20.9%**

Figure 1: Respondents by County		
Clark	47.64%	101
Washoe	37.26%	79
Lyon	3.77%	8
Elko	2.83%	6
Douglas	2.36%	5
Carson City	1.89%	4
Humboldt	1.42%	3
Churchill	0.94%	2
Lander	0.47%	1
Lincoln	0.47%	1
Nye	0.47%	1
Pershing	0.47%	1
Esmeralda	0.00%	0
Eureka	0.00%	0
Mineral	0.00%	0
Storey	0.00%	0
White Pine	0.00%	0

# **Survey Results**

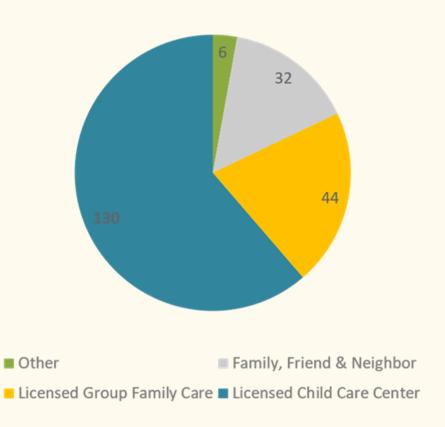
### **ECE Setting Type**

- 93% licensed centers
- 7% unlicensed centers

### Food Service

- 87% served snacks/food
- 13% did not provide snacks/food

#### Type of ECE Setting



### **Survey Results**

#### **CACFP Awareness**

- 78% were aware of CACFP
- 22% were not aware of CACFP

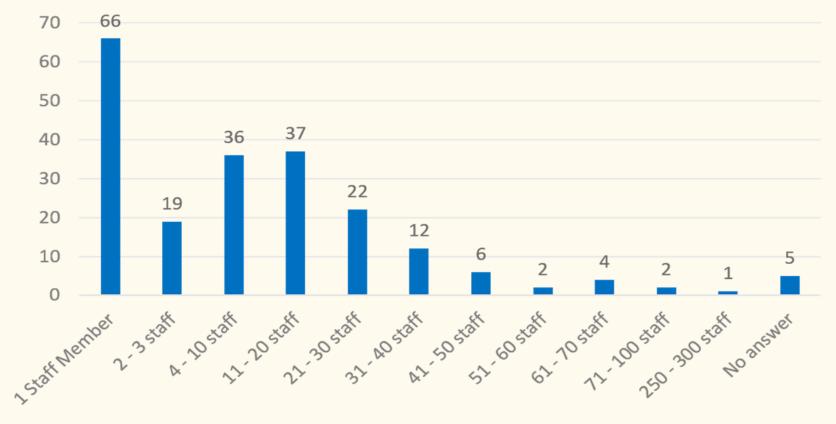
### **CACFP Participation**

- 43% had participated in CACFP
- 57% had never participated in CACFP



# **Survey Results**

#### **Total Number of Staff**



■ Programs by Total Number of Staff

# **Survey Results: Programs Participating in CACFP**

Major Challenges Challenges	96	#
Reimbursement/payment rate too low to cover costs	44.00%	33
Reimbursement/payment is not timely	37-33%	28
Too many rules to follow	17.33%	16
Too much paperwork to complete	24.00%	18
Not enough staff to operate the program	8.00%	6
Staff lack the skills or training to operate CACFP program	6.67%	5
Not enough children in area qualify for the CACFP program	5.33%	4
Lack the facilities for serving food	8.00%	6
Need to receive more support, guidance, training or technical assistance from state agency administering CACFP	14.67%	11
Other (please specify)	4.00%	3

### **Survey Results: Programs Participating in CACFP**

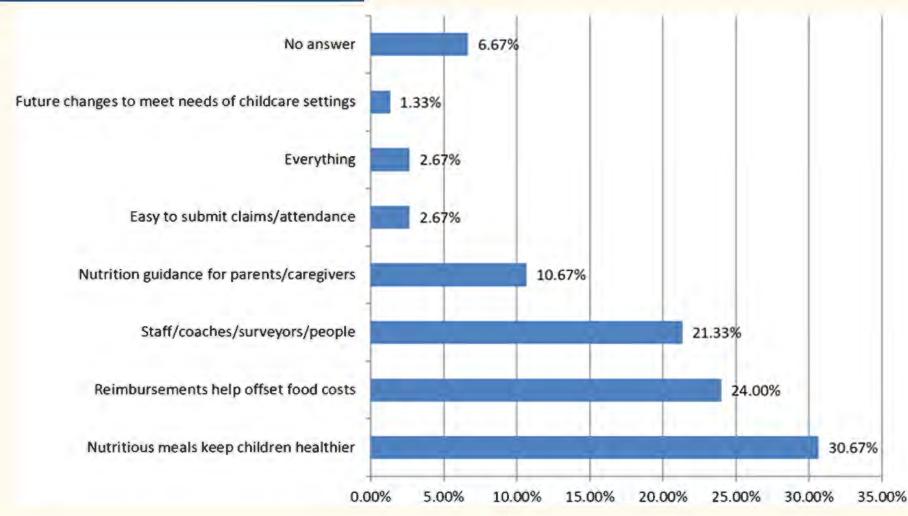
### **Barriers/Challenges**

- Daily paperwork
- Lack of equipment and capacity for storage
- Following a menu, food costs, acquiring food, food waste
- Financing and eligibility
- Program administration
- Staff training



### **Survey Results: Programs Participating in CACFP**

### **CACFP Program Benefits**



### Survey Results: Programs Not Participating in CACFP

### **Reasons For Not Participating**

- No knowledge or not enough knowledge about CACFP (51)
- No interest in CACFP (23)
- Do not have enough children to qualify (21)
- Program requirements (19)

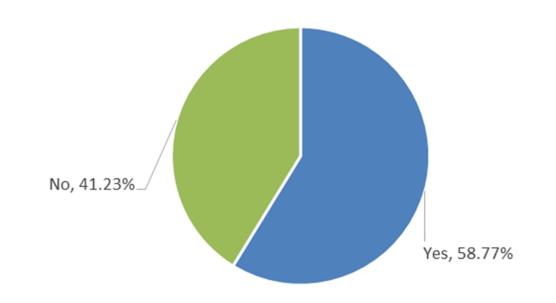
70% of ECE programs indicated CACFP reimbursement rates were not adequate to cover food and administration costs.

### Survey Results: Programs Not Participating in CACFP

### **Recommended Changes**

- Enhance public awareness and support
- Reduce program requirements
- Increase reimbursement rates
- Update nutrition standards
- Provide online application

If this change were made, would your center participate in the CACFP program?



### **Results: Critical Issues**

### **Administrative Requirements**

- Lack of staff and resources
- Rigid program rules
- Restraints on financial viability
- Intrusive home inspections

### **CACFP Knowledge**

- Lack of knowledge/confusion
- Lack on ongoing training/TA



### **Results: Critical Issues Cont.**

#### **Food Permitting Regulations**

• Lack of alignment statewide

#### **Financial Concerns**

- Low reimbursement rates
- Need for start-up funds
- Dislike collecting parental income statements



### **Results: Critical Issues Cont.**

### **Food Preparation**

• Lack of equipment and space

#### **Rural Issues**

- Low-access to healthy food
- Low reimbursement rates do not cover rural food costs



# **Strategies for Improvement**

#### **Streamline Administrative Requirements**

• Assess feasibility; pursue resources for ECE CACFP support and TA

#### **Promote Community Education Campaigns**

• Conduct public awareness campaign; enhance training and TA

#### **Review and Standardize Food Permitting Regulations**

• Create working group to review regulations and make recommendations as needed

#### <u>Implement Innovative Approaches to Incentivize CACFP use</u>

• Create start-up fund; research shared services model; encourage sponsorship in high-need areas; assist rural sites with bulk ordering and TA

# Thank you!

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