



Infant Formula Selection & Solid Foods Parent Instruction Guide

Nebraska Child and Adult Care Food Program
Revised March 2020



Dear Parent:

The **Infant Formula Selection & Solid Foods Form** is intended to be a living document shared between the child care provider and families to ensure that breastmilk/formula/solid baby foods (texture appropriate) are served at the discretion of the parents. **As new foods are introduced at home, the form should be updated.** This allows the child care provider to know what and when to serve solid foods.

Section Instructions:

- A. Infant Formula Selection:** This section is completed upon enrollment. Child care providers are required to offer an iron-fortified formula to all infants in their care. This section will state which iron-fortified formula is provided. Parents must either **accept or decline** the formula offered. If the parent declines the formula provided by the child care provider, an approved formula and/or breastmilk must be provided by the parent.
- B. Infant Meals:** Once texture appropriate foods have been introduced at home, this section must be updated. The parent must identify which texture appropriate foods and which meals and snacks they wish their child to be offered. An approval date must be entered into the box next to the meals and snack as well as next to the foods the parent wishes be offered. This form should be updated as foods are introduced at home or as the feeding schedule changes. Once an infant is regularly consuming a variety of foods, the child care provider must offer the child meals/snacks consistent with the CACFP Infant Meal Pattern (shown below).

CACFP Infant Meal Pattern

Meal	Birth through 5 months	6 through 11 months*
Breakfast, Lunch, Supper	4-6 fluid oz of breastmilk ¹ or iron-fortified infant formula	6-8 fluid oz of breastmilk ¹ or iron-fortified infant formula -AND-² *0-4 Tbsp iron-fortified infant cereal, meat, fish, poultry, whole eggs, cooked dry beans, cooked dry peas -OR- 0-2 oz cheese -OR- 0-1/2 cup cottage cheese -OR- 0-4 oz or 1/2 cup yogurt ³ -OR- A combination of the above -AND- *0-2 Tbsp vegetables or fruit or a combination of both ⁴
Snacks	4-6 fluid oz of breastmilk ¹ or iron-fortified infant formula	2-4 fluid oz breastmilk ¹ or iron-fortified infant formula -AND-² *0-1/2 oz eq bread ⁵ -OR- 0-2 crackers ⁵ -OR- 0-4 Tbsp iron-fortified infant cereal ⁵ -OR- 0-4 Tbsp ready-to-eat breakfast cereal ⁵⁻⁶ -AND- *0-2 Tbsp vegetable or fruit, or a combination of both

*Foods should be introduced when the infant is developmentally ready. Once parent has approved baby/solid foods (texture appropriate), these components must be provided
¹Breastfeeding on site is creditable as part of a reimbursable meal or snack. For infants who regularly consume a smaller amount of breastmilk, a smaller amount can be served as long as the full serving is available and offered. ²Foods from the following components are required when developmentally ready. ³Yogurt must contain no more than 23 grams of sugar per 6 ounces. ⁴Juice is not creditable for infants. ⁵A serving of grains must be whole grain-rich, enriched meal, or enriched flour. ⁶Breakfast cereals must contain no more than 6 grams of sugar per dry ounce.

This institution is an equal opportunity provider.



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Dear Child Care Provider:

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Instructions:

1. **Infant Formula Selection:** This section is completed upon enrollment. Child care providers are required to offer an iron-fortified formula to all infants in their care. This section must state which iron-fortified formula the child care provider is providing. Parents must either **accept or decline** the formula offered. If the parent declines the formula provided by the child care provider, an approved formula and/or breastmilk must be provided by the parent.
2. **Solid Foods:** Once texture appropriate foods have been introduced at home, this section must be updated. The parent must identify which texture appropriate foods and which meals and snacks they wish their child to be offered. An approval date must be entered into the box next to the meals and snack as well as next to the foods the parent wishes be offered. This form should be updated as foods are introduced at home or as the feeding schedule changes.
 - a. If the parent/guardian is unable to complete the date of each new solid food but verbally states to the child care provider the infant has begun a new solid food, the child care provider may document on the Solid Foods portion of the Infant Formula Selection & Solid Foods Form the date and meals the new food(s) may be served. The child care provider must initial next to the dates of those new foods.
 - b. Once an infant is regularly consuming a variety of foods, the child care provider must offer the child meals/snacks consistent with the CACFP Infant Meal Pattern. (All three components must be offered for all meals including snacks) All infants must be served at least the minimum portion of each required component.
 - c. The child care provider should write in the type of "ready to eat" breakfast cereal being offered on the Infant Formula Selection & Solid Foods form. (All ready to eat breakfast cereal must meet the sugar limit requirement of no more than 6 grams of sugar per dry ounce.)
 - d. If an infant normally eats solids foods for all meals but the parent requests no solid foods due to special circumstances (i.e. child has had an upset stomach) then the child care provider needs to document the parent/guardian's statement, initial, and date on page 2 of the Infant Formula Selection & Solid Foods form or directly on the infant meal production record.
3. **Infant Meal Production Records:** All required components and quantities prepared of those components must be documented on the infant meal production records at the time of each infant's meal preparation. This is considered the point of service for infant meals.
4. **Infant Meal Count Records:** Once the infant has a complete meal production record for each meal, the meal count sheet (the blue/white sheet) must be marked to claim that meal for reimbursement.

For more information, please contact:
Nebraska Department of Education
Office of Nutrition Services
P.O. Box 94987
Lincoln, NE 68509
Telephone: 402-471-2488
Web site: <http://www.education.ne.gov/NS>

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Infant Name: _____ **Date of Birth:** _____

A. **Infant Formula Selection:** This center provides _____ (brand) iron fortified infant formula to all infants under one year of age. I **ACCEPT** or **DECLINE** (Please circle one) the center's formula. If declined, please identify what will be provided **BREASTMILK** (circle) or **FORMULA** (list brand) _____.

Approximate Feeding Times: _____ **Approximate Quantity (Ounces):** _____

Parent Signature: _____ **Date:** _____

B. **Infant Solids Permission:** My infant is ready for solid foods to be served, in addition to formula or breast milk, according to the CACFP Infant Meal Pattern. Please insert date (month/yr) each food may be served and check all meals those foods may be served:

Food	Date (Month/Yr)	Meals (Please check)			Food	Date (Month/Yr)	Meals (Please check)			Food	Date (Month/Yr)
		BK	LU/SU	SN			BK	LU/SU	SN		
Iron-Fortified Infant Cereals					Fruit/Vegetables				Ready-to-eat Breakfast Cereal (SNACK ONLY)		
Rice					Applesauce				Cereal:		
Oat					Apricots				Cereal:		
Barley					Avocados				Grains (SNACK ONLY)		
Mixed					Bananas				Bread/Rolls		
Wheat					Carrots				Biscuits		
Meat & Meat Alternatives					Corn				Saltine Crackers		
Beef					Green Beans				Pancakes		
Dry Beans					Mango				Waffles		
Cheese, Natural					Melon				Tortillas soft		
Chicken					Peaches				Other:		
Cottage Cheese					Pears						
Dry peas					Peas						
Fish					Plums/Prunes						
Pork					Potatoes						
Tuna					Squash						
Turkey					Sweet Potatoes						
Whole Egg					Other:						
Yogurt					Other:						
Other:					Other:						

Please note changes to infant's feeding schedule on the back of this page.

