

# Early Childhood Education and Care Department

Cabinet Secretary Elizabeth Groginsky

SFSP Meal Counts and Claims



NEW MEXICO

**Early Childhood**

Education & Care Department

# SFSP Meal Counts and Claims Training Agenda:

- Organization of Meal Count Records
- Meal Count Basics
- Questionable Claiming Patterns
  - Block Claiming
- Site Capacity Adjustments
  - Adjusting Meal Counts in EPICS
- Claims in EPICS



# Organization of Meal Count Records

- Meal count forms must be completed for every meal service at every site and maintained for review.
  - Use updated forms from the website ONLY as forms are updated annually with current regulations and policy @ [www.summerfoodnm.org](http://www.summerfoodnm.org)
- Keep meal count records organized
  - By the meal type
  - By the day, from newest to oldest
  - By the month
  - By meal site



# Meal Count Basics

- Use Meal Count form 6.4
  - The official record of meals served and serves as an invoice for payment
  - When serving multiple types of meals keep separate meal counts for breakfast, lunch, supper and snacks
  - Closely review daily meal count forms before they are entered in EPICS
  - Most discrepancies result from forms not properly reviewed prior to inputting to EPICS
- Prior to input into EPICS, look for:
  - Incomplete forms
    - No day or date indicated
    - Meal type not indicated
    - No Site Supervisor signature
    - Abbreviations used and meal sites or other important information not completely spelled out

# Example of Incomplete/Incorrect Meal Count Form

- Missing Information
  - Urban/Rural
  - Congregate/Non-congregate
  - Delivery Time
  - Last Name for Site Supervisor
  - Date
  - Number of Meals
  - Transferred From and To
  - Missing totals for damaged meals, ineligible meals and leftover meals
  - Incomplete signature

No Tick Marks or Circles- this would be a disallowance of **ALL** meals, Point of Service was **NOT** used for this meal service. Point of Service is a Federal Regulation.

Form 6.4 REQUIRED FORM - This Form Must Be Filled Out Daily.

### DAILY MEAL COUNT FORM Summer Food Service Program

CIRCLE ONE: Breakfast  Lunch  Supper  Snack

Site Name: Sunset Park Day and Date: Monday, \_\_\_/\_\_\_/\_\_\_

Check One: \_\_\_ Urban \_\_\_ Rural **NUMBER OF MEALS: Received OR Prepared: +** \_\_\_\_\_  
 Check One: \_\_\_ Congregate \_\_\_ Non-congregate **Transferred in FROM Another Site: +** \_\_\_\_\_

Delivery Time: \_\_\_\_\_ **Transferred out TO Another Site: -** \_\_\_\_\_

Supervisor: Mark **TOTAL MEALS: =** 25

Meal Service Time: 11 : 30 to 12 : 30

**Number of Children Who Were Served ONE Meal:**

<del>1</del>	<del>2</del>	<del>3</del>	<del>4</del>	<del>5</del>	<del>6</del>	<del>7</del>	<del>8</del>	<del>9</del>	<del>10</del>	<del>11</del>	<del>12</del>	<del>13</del>	<del>14</del>	<del>15</del>
<del>16</del>	<del>17</del>	<del>18</del>	<del>19</del>	<del>20</del>	<del>21</del>	<del>22</del>	<del>23</del>	<del>24</del>	<del>25</del>	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70	71	72	73	74	75
76	77	78	79	80	81	82	83	84	85	86	87	88	89	90
91	92	93	94	95	96	97	98	99	100	101	102	103	104	105
106	107	108	109	110	111	112	113	114	115	116	117	118	119	120
121	122	123	124	125	126	127	128	129	130	131	132	133	134	135
136	137	138	139	140	141	142	143	144	145	146	147	148	149	150
151	152	153	154	155	156	157	158	159	160	161	162	163	164	165
166	167	168	169	170	171	172	173	174	175	176	177	178	179	180
181	182	183	184	185	186	187	188	189	190	191	192	193	194	195

**Number of Children Who Were Served a SECOND Meal:**

<del>1</del>	<del>2</del>	<del>3</del>	<del>4</del>	<del>5</del>	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40	41	42	43	44	45

**Number of Adults Who Purchased a Meal (Non-Program Adult):**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

**Number of Site Staff Adults Who Were Served a Meal (Program Adult):**

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

NOTICE: Record each child individually when they receive ALL COMPONENTS by circling the number or placing a slash through the number. EACH number represents a child that has received a complete and utilized meal with the required USDA meal pattern and portion sizes.

Damaged/Incomplete Meals: + \_\_\_\_\_  
 Ineligible Meals: + \_\_\_\_\_  
 Leftover Meals: + \_\_\_\_\_

**TOTAL MEALS ACCOUNTED FOR =** 25  
 (Must match Total Meals on top of page)

Comments:

I certify that the information on this form is true and accurate. I also understand that this information is being given in connection with the receipt of Federal funds, and deliberate misrepresentation may subject me to prosecution under applicable State and Federal statutes. I further understand that the program must be made available to all children regardless of race, color, national origin, sex, gender identity, sexual orientation, age, disability or reprisal or retaliation for prior civil rights activity.

*MP*  
Site Supervisor's Signature





## Site Capacity Adjustments

- Each meal site has an approved capacity that reflects the approved level of meal service
- Insufficient site capacities will prevent you from entering correct meal counts
- CAPs cannot be adjusted upward, once claim is submitted
- Please call SFSP staff for assistance at anytime

# Entering Meal Counts in EPICS

- When entering meal counts into EPICS, you are looking at the last tick mark, NOT numbers that have been written down on the 6.4 meal count form.
- Do NOT add the different meal tick marks together. For example, 1<sup>st</sup> meals and 2<sup>nd</sup> meals cannot be combined, as well as any other combination of meal counts. There are specific boxes for approved meals where you will enter meal count numbers into EPICS.
- Not entering the correct numbers into EPICS have been the reason sponsors may have had meal disallowances during administrative reviews.
- Remember, Tick Marks tell the Story, not the numbers.

		Sunday, 05/26/2019		Monday, 05/27/2019		Tuesday, 05/28/2019		Wednesday, 05/29/2019	
La Luz Elementary		BRK	LUN	BRK	LUN	BRK	LUN	BRK	LUN
1 <sup>st</sup> Meals	➔	1st	Original	-	-	-	-	-	-
2 <sup>nd</sup> Meals	➔	2nd	Original	-	-	-	-	-	-
Non-Program Adults	➔	NPA	Original	-	-	-	-	-	-
North Elementary									
		1st	Original	-	-	-	-	-	-
		2nd	Original	-	-	-	-	-	-
		NPA	Original	-	-	-	-	-	-

# Adjusting Meal Counts in EPICS

## EXAMPLE

The number of meals that were entered into Epics was 30, BUT according to the tick marks on this meal count form, only 23-1st meals were served on this day AND 3-2nds. The actual number of meals served that should have been entered into Epics should have been 23-1st meals and 3-2nds meals.

Form 6.4 REQUIRED FORM - This Form Must Be Filled Out Daily.

### DAILY MEAL COUNT FORM Summer Food Service Program

CIRCLE ONE: Breakfast  **Lunch**  Supper  Snack

Site Name: Sunset Park Day and Date: Tuesday, 6/12/2025

Check One:  Urban  Rural  **NUMBER OF MEALS: Received OR Prepared: + 30**  
 Check One:  Congregate  Non-congregate **Transferred in FROM Another Site: + 0**

Delivery Time: 11 : 50 **Transferred out TO Another Site: - 0**  
 Supervisor: Frank Quintana **TOTAL MEALS: = 30**

Meal Service Time: 12 : 00 to 1 : 00

**Number of Children Who Were Served ONE Meal:**

<del>1</del>	<del>2</del>	<del>3</del>	<del>4</del>	<del>5</del>	<del>6</del>	<del>7</del>	<del>8</del>	<del>9</del>	<del>10</del>	<del>11</del>	<del>12</del>	<del>13</del>	<del>14</del>	<del>15</del>	<del>16</del>	<del>17</del>	<del>18</del>	<del>19</del>	<del>20</del>	<del>21</del>	<del>22</del>	<del>23</del>	<del>24</del>	<del>25</del>	<del>26</del>	<del>27</del>	<del>28</del>	<del>29</del>	<del>30</del>
31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90
91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120
121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150
151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180
181	182	183	184	185	186	187	188	189	190	191	192	193	194	195															

**Number of Children Who Were Served a SECOND Meal:**

<del>1</del>	<del>2</del>	<del>3</del>	<del>4</del>	<del>5</del>	<del>6</del>	<del>7</del>	<del>8</del>	<del>9</del>	<del>10</del>	<del>11</del>	<del>12</del>	<del>13</del>	<del>14</del>	<del>15</del>
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40	41	42	43	44	45

**Number of Adults Who Purchased a Meal (Non-Program Adult):**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

**Number of Site Staff Adults Who Were Served a Meal (Program Adult):**

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

NOTICE: Record each child individually when they receive ALL COMPONENTS by circling the number or placing a slash through the number. EACH number represents a child that has received a complete and unitized meal with the required USDA meal pattern and portion sizes.

Damaged/Incomplete Meals: + 0  
 Ineligible Meals: + 0  
 Leftover Meals: + 4

**TOTAL MEALS ACCOUNTED FOR = 30**  
 (Must match Total Meals on top of page)

Comments:

I certify that the information on this form is true and accurate. I also understand that this information is being given in connection with the receipt of Federal funds, and deliberate misrepresentation may subject me to prosecution under applicable State and Federal statutes. I further understand that the program must be made available to all children regardless of race, color, national origin, sex, gender identity, sexual orientation, age, disability or reprisal or retaliation for prior civil rights activity.

*Frank Quintana*  
Site Supervisor's Signature

# Adjusting Meal Counts in EPICS after claim submission

Go into Meal Counts



Food Program Summer Food Search Reports Hide Quick-Nav

User Accounts FNB Approvals SFSP Meal Counts SFSP Claims

Meal Counts [Go To Dashboard](#)

Select Sponsor  
Appletree Education Center

FFY 2019

Month	Last Modified	Operational Days	Action
Mar - 2019	03/13/2019 01:00 PM	2	<a href="#">Open Meal Counts</a>

FFY 2018



Then click on Open Meal Counts

**Meal Counts/Claim Details**

		Sunday, 03/10/2019	Monday, 03/11/2019	Tuesday, 03/12/2019	Wednesday, 03/13/2019	Thursday, 03/14/2019	Friday, 03/15/2019	Saturday, 03/16/2019	
		BRK	BRK	BRK	BRK	BRK	BRK	BRK	
<b>AppleTree Educational Center</b>									
1st	Original	-	-	75	75	-	-	-	
2nd	Original	-	-			-	-	-	
NPA	Original	-	-			-	-	-	

24 - 2    3 - 9    10 - 16    17 - 23    24 - 30    31 - 6

BRK: Breakfast    AMS: AM Snack    LUN: Lunch    PMS: PM Snack    SUP: Supper  
 1st: 1st Meal    2nd: Actual 2nd Meal    NPA: Non Program Adult

Click wrench for the meal type  
 Needing adjustment



**Meal Counts Summary**

Meal Type	1st Meal	Actual 2nd Meal	Non Program Adult
Breakfast	150	0	0
AM Snack	0	0	0
Lunch	0	0	0
PM Snack	0	0	0
Supper	0	0	0

**Certify Meal Counts Information**

- I hereby certify that the information submitted on this form is true and correct and that the organization is aware that deliberate misrepresentation or withholding of information may result in prosecution under applicable State and Federal statutes.
- I certify that all sites for which the initial administrative budget has been approved, have operated, and projected administrative costs do not differ significantly from the initially approved budget

Save Adjustment Meal Counts

Meal Counts/Claim Details

		Sunday, 03/10/2019	Monday, 03/11/2019	Tuesday, 03/12/2019	Wednesday, 03/13/2019	Thursday, 03/14/2019	Friday, 03/15/2019	Saturday, 03/16/2019	
		BRK	BRK	BRK	BRK	BRK	BRK	BRK	
<b>AppleTree Educational Center</b>									
1st	Original	-	-	75	75	-	-	-	
	Adj	-	-	<input type="text" value="3"/>	<input type="text"/>	-	-	-	
2nd	Original	-	-			-	-	-	
NPA	Original	-	-			-	-	-	

Box will open and you enter meal count adjustment needed.

- 24 - 2
- 3 - 9
- 10 - 16
- 17 - 23
- 24 - 30
- 31 - 6

BRK: Breakfast   AMS: AM Snack   LUN: Lunch   PMS: PM Snack   SUP: Supper  
 1st: 1st Meal   2nd: Actual 2nd Meal   NPA: Non Program Adult

Meal Counts Summary

Meal Type	1st Meal	Actual 2nd Meal	Non Program Adult
Breakfast	150	0	0
AM Snack	0	0	0
Lunch	0	0	0
PM Snack	0	0	0
Supper	0	0	0

Certify Meal Counts Information

- I hereby certify that the information submitted on this form is true and correct and that the organization is aware that deliberate misrepresentation or withholding of information may result in prosecution under applicable State and Federal statutes.
- I certify that all sites for which the initial administrative budget has been approved, have operated, and projected administrative costs do not differ significantly from the initially approved budget

Save Adjustment Meal Counts

\*When making changes in Epics, remember to always Certify and Save

# Claims in EPICS

- Reminders:

- Claims are being completed as meal counts are being entered
- Claim submission is a separate process

Summer Food Admin Search Reports Hide Quick-Nav

SFSP Approvals SFSP Meal Counts SFSP Claims User Accounts

Claims Select Sponsor Appletree Education Center [Go To Dashboard](#)

Claim	Is Submitted to CYFD?	Is PM Approval Granted?	Is First Approval Granted?	Is Final Approval Granted?	Submission Due In	Action
Mar, 2019 - Original	Yes	Yes	Yes	Yes	--	<a href="#">View Claim</a>
Mar, 2019 - Adjustment 1	NA	NA	NA	NA	59 Days	<a href="#">View Claim</a>

FFY 2019

FFY 2018

Click View Claim

To submit claim, scroll to bottom of page, certify and click “Save and Send to FNB”  
If assistance is needed, contact your assigned SFSP Compliance Officer.

# FNB Summer Food Service Program Contacts

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## Program Resources for SFSP Sponsors-

[https://summerfoodnm.org/sponsors/  
program-resources](https://summerfoodnm.org/sponsors/program-resources)

More information about the New Mexico  
Early Childhood Education and Care  
Department-*Programs for Parents  
and Professionals*

<https://nmececd.org>