

ARIZONA DEPARTMENT OF EDUCATION
CHILD AND ADULT CARE FOOD PROGRAM

ADULT DAY CARE

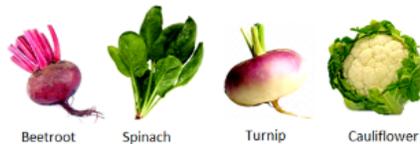
APPLICATION
&
MANAGEMENT PLAN

Application and Management Plan Changes

The first page of the Management Plan now has a Free, Reduced and Paid section for the Adult Centers to complete. This is the number of your enrolled participants.

V169		System Date:																		
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	V
22	B. Enter the number of centers and enrollment count for each center under your administration that provides meal service:																			
24	Child Centers			Adult Centers			Emergency Shelters			At-Risk Centers			Head Start (or Outside School Hrs) Center							
26	Number of Nonprofit Tax-Exempt Centers:			Number of Nonprofit Tax-Exempt Centers:			Number of Nonprofit Tax-Exempt Centers:			Number of Nonprofit Tax-Exempt Centers:			Number of Nonprofit Tax-Exempt Centers:							
27	.....			.....			.....			.....			.....
28	Number of For-Profit Centers:			Number of For-Profit Centers:			Number of For-Profit Centers:			Number of For-Profit Centers:			Number of For-Profit Centers:							
29	.....			.....			.....			.....			.....
30	Number of child participants in each eligibility category:			Number participants that receive Title XIX and/or Title XX benefits:			Number of participants: (all in free category):			Number of participants: (all in free category):			Total number participating (all participants are in the free category):							
31	.....			.....			.....			.....			.....
32	Free			Free			Free			Free			Free							
33	.....			.....			.....			.....			.....
34	Reduced			Reduced			.....			.....			.....
35	.....			.....			.....			.....			.....
36	Paid			Paid			.....			.....			.....
37	.....			.....			.....			.....			.....
38	.....			.....			.....			.....			.....
39	.....			.....			.....			.....			.....
40	.....			.....			.....			.....			.....
41	C. List each of your claimable meal times: Attach additional pages as needed. (format like 11:00 [insert a space] AM)																			
42	Meal Type:	Breakfast:	AM Snack:	Lunch:	PM Snack:	Supper:	Evening Snack:	At-risk Supper:	At-risk Snack:											
43	Begin Claim:											

FY2016



Beetroot Spinach Turnip Cauliflower

Application and Management Plan Changes

On page 3 of the Management Plan, in the Monitoring section you will see that additional information is required for multiple site organizations. You must now include the Free, Reduced, and Paid numbers of each site. This is required to validate that each site meets the eligibility requirement.

Required Topics		Proposed Date (must fall within correct fiscal year)	
Meal Pattern, Meal Count Procedures, Record Keeping, Claims Submission, Civil Rights, and Reimbursement System (if applicable)			
Other Topics (please list):			

6. **Program Requirement - Monitoring:** Organizations with multiples sites and persons that own multiple independent centers must use the **Monitor Evaluation Form** to monitor each site or independent center a minimum of three times per fiscal year with no more than six months between visits.

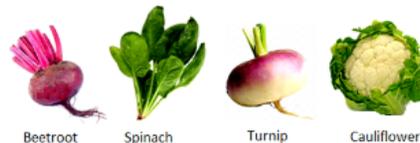
A. Complete the following chart to describe your monitoring plans (attach additional pages as needed):

Single site – not applicable.

Name of Center	(F)	(R)	(P)	F/R Percent	Proposed Monitoring Dates (Month/Year)		
					Visit 1	Visit 2	Visit 3
				#DIV/0!			
				#DIV/0!			
				#DIV/0!			
				#DIV/0!			
				#DIV/0!			

(PAGE 4 of 12) BELOW

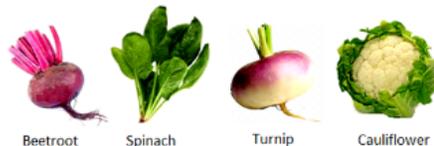
Section II. Management Plan (continued)



Application and Management Plan Changes

On page 4, Section 11, all of your CACFP training materials must now be included with your application. This is to verify that all aspects of the food program have been covered during your CACFP training

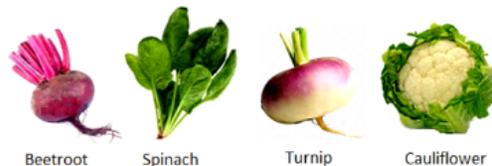
Sponsors with multiple sites/centers must also include the notification that is provided to their sites/centers announcing that reviews will be conducted for inspections, audits or reviews, and may be announced or unannounced by the Sponsoring Organization, ADE, USDA or other statutorily authorized persons.



Application and Management Plan Changes

V169 System Date:

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	
232	Chairman of the Board																				
233	Other (specify)																				
234																					
235	11. Provide the following documents. Please indicate that you have attached the required information by checking each box below (as applicable):																				
236																					
238	REQUIRED TO BE PROVIDED WITH THIS APPLICATION:																				
239	<input type="checkbox"/> Organizational Chart (chain of command) is included with this application [required]																				
240	<input type="checkbox"/> Last three months of bank statements are included with this application [required]																				
241	<input type="checkbox"/> CACFP RENEWAL certificate is included with this application. If new, provide Business, Nutrition, and Computer certificates [required]																				
242	<input type="checkbox"/> Copy of outside employment policy (see draft attached to instructions) is included with this application [required]																				
243	<input type="checkbox"/> Copy of DHS or other current license for each center [required]																				
244	<input checked="" type="checkbox"/> Copy of training materials for current year. This includes; agendas, sign in sheet and presentation materials [required]																				
245	<input checked="" type="checkbox"/> Copy of written notification provided to centers indicating unannounced reviews will be conducted [sponsors of multiple sites only]																				
246	NEXT 6 ITEMS MAY BE REQUIRED UNDER THE FOLLOWING CONDITIONS (indicate checkboxes if included with this application):																				
247	<input type="checkbox"/> IF your organization subcontracts with another business entity for any aspect of food service, provide a copy to ADE (see No. 9 above).																				
248	<input type="checkbox"/> IF your organization is a NON- PROFIT, PROVIDE proof of tax exemption for nonprofit organizations.																				
249	<input type="checkbox"/> IF your organization is a NON- PROFIT, list each member of the Board of Directors with address.																				
250	<input type="checkbox"/> IF you have an "At-Risk After School Snack/Meal Program", PROVIDE facility area eligibility/enrichment activities.																				
251	<input type="checkbox"/> IF you are a Sponsoring Organization with 25 or more facilities, SEND a copy of the policy addressing monitoring FTE's.																				
252	<input type="checkbox"/> IF you checked "Yes" to number 8 (above) , provide an explanation of any expenses that require disclosure.																				
253																					
254	----- (PAGE 5 of 12) BELOW -----																				
255	Section III. Budget																				



Beetroot

Spinach

Turnip

Cauliflower

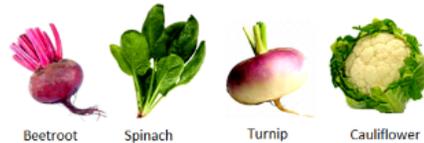
Common Problems with Application and Management Plan

Failure to include the DUNS number

Failure to include and/or sign the checklist

Failure to provide supporting documentation i.e. lease agreement/depreciation schedule, utilities invoices, phone or internet invoices

Two Responsible Principles: must be a non-business address (no P.O. Boxes), must provide entire birthdate (including year)



Common Problems with Application and Management Plan

Claiming labor in appropriate area – Administrative or Operational

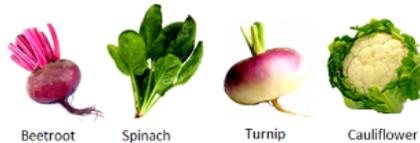
Labor must be reasonable

Bank Statements – Must be able to see all activity in the account

All accounts that money is moved in and out of are required

Copies of checks

Monitoring visits - Varied and unpredictable



ARIZONA DEPARTMENT OF EDUCATION
CHILD AND ADULT CARE FOOD PROGRAM

ADULT DAY CARE

CIVIL RIGHTS DATA COLLECTION FORM

Data Collection

Every sponsor must collect ethnic and racial data of its participants. This is used to determine how effectively your program is reaching potentially eligible children and where outreach may be needed. This information must be collected and documented annually

How is ethnic and racial data collected?

Self-identification / self-reporting or
Visual identification

The data must be maintained using safeguards which prevent its use for discriminatory purposes. Safeguards include only allowing authorized personnel access to records containing ethnic and racial data



Ethnicity and Race

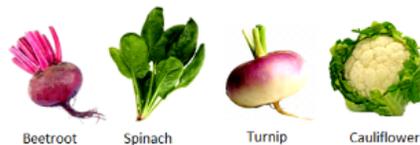
Ethnicity and race must be documented as two separate categories;
collect ethnic data first, then racial data

Ethnic Categories

Hispanic or Latino or Non-Hispanic or Non-Latino

Racial Categories

White, Black or African American, American Indian or Alaskan Native, Asian, Native Hawaiian or other Pacific Islander, Some Other Race, Two or More Races



Beetroot

Spinach

Turnip

Cauliflower

Sample Data Collection

Ethnic Categories (Sociological)	Enrolled #	Enrolled %	Service Area %
Hispanic or Latino (Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.)	3	11	10
Non-Hispanic or Non-Latino (All others, Irish, French, German, etc.)	25	89	90
Total	28	100	100

4. Take the Total Enrolled # above (shaded) and break the # down by placing everyone into a Racial Category Below. Ensure that the Total row above is the same amount as the Total row below and I.B. of your Mgt Plan.

Ethnic Categories (Sociological)	Enrolled #	Enrolled %	Service Area %
Hispanic or Latino (Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.)	3	11	10
Non-Hispanic or Non-Latino (All others, Irish, French, German, etc.)	25	89	90
Total	28	100	100

4. Take the Total Enrolled # above (shaded) and break the # down by placing everyone into a Racial Category Below. Ensure that the Total row above is the same amount as the Total row below and L.B. of your Mgt Plan.

Sample Data Collection

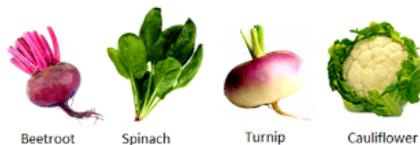
Racial Categories (Biological)	Enrolled #	Enrolled %	Service Area %
White	15	54	55
Black or African American	8	29	28
American Indian or Alaska Native	2	7	8
Asian	3	10	9
Native Hawaiian or Other Pacific Islander	0	0	0
Some Other Race	0	0	0
Two or More Races	0	0	0
Total	28	100	100

Racial Categories (Biological)	Enrolled #	Enrolled %	Service Area %
White	15	54	55
Black or African American	8	29	28
American Indian or Alaskan Native	2	7	8
Asian	3	10	9
Native Hawaiian or Other Pacific Islander	0	0	0
Some Other Race	0	0	0
Two or More Races	0	0	0
Total	28	100	100

Annual Civil Rights Training

Subject matter must include, but not be limited to:

- Collection and use of data
- Effective public notification systems
- Complaint procedures
- Requirements for reasonable accommodation of persons with disabilities
- Requirements for language assistance
- Conflict resolution
- Customer service



Annual Civil Rights Training

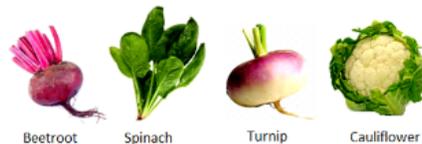
All CACFP agencies must provide civil rights training to staff who interact with program participants, and those persons who supervise them. This is an annual requirement.

What needs to be documented

- Staff who received civil rights training
- The civil rights topics covered and
- The date the training was completed

Keep this information on file for five years. It will be reviewed by your Specialist during reviews.

Refer to CACFP website to access the Civil Rights training that may be used to complete the required civil rights training with agency staff.



Complaint Procedures

Any person alleging discrimination has a right to file a complaint within 180 days of the alleged discriminatory action. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.”

For more information visit: <http://www.azed.gov/health-nutrition/civil-rights/>

ARIZONA DEPARTMENT OF EDUCATION
CHILD AND ADULT CARE FOOD PROGRAM

ADULT DAY CARE

COMMON REVIEW FINDINGS

WITH TIPS & BEST PRACTICES

Uh oh,
error!



Eligibility Errors - 24%

Attendance sheets for some of the claimed participants missing - use sign in/out sheets to check participant names on the claiming rosters

Not reporting all eligible participants on the claim under the total number enrolled. Cannot eliminate certain groups from meals or claims. Must report all attendees; even if in attendance only for one day

CACFP Enrollment Forms not current/updated - Emergency Cards must be replaced every other year.



Antonelli/News



Best Practices

What would you do to eliminate these
Eligibility and Meal Benefit errors?
Share some of your Best Practices





ELIGIBILITY DETERMINATION TIP

Create highlighted templates for a quick visual comparison against the completed forms to ensure that all required fields were filled in.

Use a yellow highlighter to mark all of the sections required when a case number is being used to determine eligibility.

Use a green highlighter to mark all of the sections required when income is being used to determine eligibility.

Use a pink highlighter to mark all of the sections required when no income is used to determine eligibility.

Miscategorized participants will result in costly errors.

ELIGIBILITY DETERMINATION TIP

Create highlighted templates for a quick visual comparison against the completed forms to ensure that all required fields were filled in:

Use a yellow highlighter to mark all of the sections required when a case number is being used to determine eligibility

Use a green highlighter to mark all of the sections required when income is being used to determine eligibility

Use a pink highlighter to mark all of the sections required when *no* income is used to determine eligibility

Miscategorized participants will result in costly errors

Oops!!

Menu Recordkeeping Errors - 15%

Child Nutrition (CN) Labels/recipes not available or outdated

Substitutions not reflected on menus; items on receipts did not match menus



MENU RECORDKEEPING BEST PRACTICE

Cut CN Labels from the package when the item is served and place it in a plastic bag in the kitchen. At the end of the month file the actual CN Labels that were used along with a copy of the menu





Any other ideas?
How would you eliminate
Menu Substitution errors?

No, not again!



Meal Count Errors – 15%

Meal Count sheets contain partial and faded slash marks in pencil

Slash mark extended outside of the square – sometimes counted twice when totaling the column

Total columns on Monthly Meal Count Sheets miscalculated



MEAL COUNT BEST PRACTICE

Assign a second employee to edit check all meal count totals prior to submitting your claim

WHAT IS YOUR BEST PRACTICE?

Have you discovered a good practice which helps you avoid costly mistakes? Please share



What do the first 3 slides have in common?

Eligibility Errors - 24%

Attendance sheets for some of the claimed participants missing - use sign in/out sheets to check participant names on the claiming rosters

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Substitutions not reflected on menus; items on receipts did not match menus

Infant components missing from Infant Production Records



Meal Count Errors – 15%

Meal Count sheets contain partial and faded slash marks in pencil

Slash mark extended outside of the square – sometimes counted as two meals when totaling the column

Total columns on Monthly Meal Count Sheets miscalculated





Costly errors - resulting in fiscal action



What were the percentages of these common findings?

What do the first 3 slides have in common?

Eligibility Errors - 24%

Attendance sheets for some of the claimed participants missing - use sign in/out sheets to check participant names on the claiming rosters

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Meal Count sheets contain partial and faded slash marks in pencil

Slash mark extended outside of the square – sometimes counted as two meals when totaling the column

Total columns on Monthly Meal Count Sheets miscalculated





As of May 1, 2015, CACFP had conducted 67 reviews. 54% of those reviews had at least one of these 3 common findings

How many common findings were identified in FY2015?
A total of 8

Which common finding had the least number of occurrences?
Milk Audits - only 6% of the reviews had insufficient quantities of milk. This was a significant decrease from FY2014

Monthly Costs – 13%

Monthly Expense Reports and Food Cost Reports had not been completed

Supporting documentation for rent not available

Reported food costs included taxes

Less than 50% of monthly reimbursement spent on food

Profiting from CACFP - 100% of the Reimbursement not fully expended on allowable CACFP costs





MONTHLY COSTS BEST PRACTICE

Create designated CACFP folders or binders for each month of the year, then fill them with a blank copy of the Monthly Food Cost Report, Monthly Expense Report and Time Distribution Reports

**CACFP Training
+
Civil Rights Training
=
Annual Training Requirement**



Training/Monitoring – 11%

Training did not occur/no documentation available

Conducted Civil Rights Training only

Sponsors did not conduct required monitoring visits

More than 6 months lapsed between required monitoring visits



Knowledge is **POWER!**

Turnover? TRAIN NEW EMPLOYEES

www.nfsmi.org is a great training resource



REQUIRED TRAINING TOPICS:

Meal Pattern, Meal Count Procedures,
Record Keeping, Claims Submission, Civil Rights, and
Reimbursement System

Keep copies of the agenda, sign in sheet, and presentation for
evaluation during Reviews or Audits



Many NFSMI, USDA, and State Agency videos are available on Youtube, and are very useful training tools

LET'S SAMPLE A FEW...



RIDE Child Nutrition Programs

Adult Care Meal

Adult Lunch Meal Pattern | Four Food Groups

Food Components # of servings	Size of each serving
1 milk fluid milk	1 cup
2 fruits whole	1 cup total
2 grains/bread bread or cornbread or biscuit or roll or muffin or cold dry cereal or hot cooked cereal or pasta or noodles or grains	2 servings - 2 slices 2 servings 1 1/2 cup or 2 oz 1 cup 1 cup
1 meat/meat alternate meat or poultry or fish or alternate protein product or cheese or eggs or cooked dry beans or peas or peanut or other nut or seed butters or nuts and/or seeds or yogurt	2 oz. 2 oz. 2 oz. 1" 1/2 cup 4 Tbsp. 1 oz. = 50% of ref. 1/2 cup 8 oz. or 1 cup

YouTube

Sanitation - 9%

Food Handlers Cards expired

Food not labelled and dated

Missing thermometers





SANITATION BEST PRACTICE

Each month, ask different staff member to conduct a quick kitchen inspection for you

Choose someone that is not typically in your kitchen

Create a questionnaire with few questions such as; are food handler cards current, foods labeled and dated, thermometers the proper temperature, kitchen generally clean, any corrections necessary?



Does this look familiar?

Recordkeeping - 7%

Yes, CACFP requires significant supporting documentation for the funding you receive

Recordkeeping policies not being followed - records not available upon arrival for a review

CACFP Job descriptions missing



RECORDKEEPING BEST PRACTICE

Update your recordkeeping policy and organize your records with monthly binders, file folders, boxes, what ever it takes!



Make sure that you create a small binder for CACFP Permanent Records to hold your Recordkeeping Policy, Complaints of Discrimination, Administrative Review Procedures, Permanent Agreement, and Job Descriptions. These are commonly lost due to being stored away in old Renewal Application files

Milk Audit – 6%

Not enough milk purchased for the number of meals claimed





got milk?



MILK TIP

Ensure adequate amounts of milk are available and encourage or remind the participants that it is available

We want you to succeed!

Please call your specialist to discuss any technical assistance needs or tools that would help you achieve successful operation of the Child and Adult Care Food Program



ARIZONA DEPARTMENT OF EDUCATION

CHILD AND ADULT CARE FOOD PROGRAM

ADULT DAY CARE

**ACCEPTABLE
CORRECTIVE
ACTION**

Corrective Action

- Institutions must submit a **Corrective Action Plan (CAP)** when deemed non-compliant with program rules and regulations.



Why is it necessary?

- **Corrective Action Plans (CAP)** help ensure that institutions understand why they were non-compliant.
- Help identify the measures needed to permanently correct the issue(s).



What must a Corrective Action Plan Include?

- CAP must provide sufficient detail and be specific to individual finding
- Must be typed on business letterhead
- Must include effective implementation date
- Must be signed by each person responsible for carrying out the procedure and by the authorized CACFP Designated Official

What must a Corrective Action Plan Include?

- A CAP must clearly address each of the identified problems and outline the steps the provider will take or has taken to fully and permanently correct each of the deficiencies.
- CAP **must** address the following questions:
 - **What**
 - **Who**
 - **When**
 - **Where**
 - **How**

Corrective Action Plan Template

Child and Adult Care Food Program

Corrective Action Plan

Instructions: Complete one form for each finding/deficiency identified. Please answer each question clearly to ensure your Corrective Action Plan (CAP) response is accepted.

Sponsoring Organization Name:

Address:

CAP Due Date:

Name of Site Reviewed:

Date Reviewed:

A. Finding/Deficiency – Which finding or deficiency are you correcting? Please identify:

B. Correction – What processes and/or procedures have been implemented to permanently correct the finding/deficiency? Explain **how you will ensure that the processes and/or procedures are followed consistently to prevent a reoccurrence:**

Child and Adult Care Food Program

Corrective Action Plan

Instructions: Complete one form for each finding/deficiency identified. Please answer each question clearly to ensure your Corrective Action Plan (CAP) response is accepted.

Sponsoring Organization Name:

Address:

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Corrective Action Plan Template

Child and Adult Care Food Program

Corrective Action Plan

C. Responsibility – Who? List the name, title, and responsibility of the individuals involved in permanently correcting the finding/deficiency:

D. Implementation – When will the process or procedure to correct the finding/deficiency begin? List the date and the occurrence of the process or procedure; i.e. daily, weekly, monthly, etc.:

E. Supporting Documentation – Identify all supporting documentation included with this CAP which verifies corrections have been made or will be implemented. This may include copies of training materials, attendance sheets, eligibility determinations, receipts, invoices, meal count documentation, specific policies and procedures, etc.:

Print CACFP Authorized Signer Name - as listed on the Permanent Agreement

Signature of CACFP Authorized Signer

Date

TO BE COMPLETED BY CACFP ONLY:

CACFP Director Signature: _____

Date CAP approved: _____

Child and Adult Care Food Program

Corrective Action Plan

C. Responsibility – Who? List the name, title, and responsibility of the individuals involved in permanently correcting the finding/deficiency:

D. Implementation – When will the process or procedure to correct the finding/deficiency begin? List the date and the occurrence of the process or procedure; i.e. daily, weekly, monthly, etc.:

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Date

TO BE COMPLETED BY CACFP ONLY:

CACFP Director Signature: _____

Date CAP approved: _____



ARIZONA DEPARTMENT OF EDUCATION

CHILD AND ADULT CARE FOOD PROGRAM

ADULT DAY CARE

COMPLIANCE MANUAL CREDITABLE FOOD GUIDE SIMPLIFIED BUYING GUIDE



Arizona Department of Education
Tom Horn, Superintendent of Public Instruction

Simplified Buying Guide

Revised September 2006



**Child & Adult Care
Food Program
Health & Nutrition Services**



Arizona Department of Education
Diane Douglas, Superintendent of Public Instruction

Simplified Buying Guide



Child and Adult Care Food Program
Health and Nutrition Services
Revised April 2015

FOOD ITEM: CHEESE, NATURAL OR PROCESSED

SERVING SIZE: 1 OZ.

MARKET UNIT: POUND

NUMBER OF MEALS	AMOUNT REQUIRED	NUMBER OF MEALS	AMOUNT REQUIRED	NUMBER OF MEALS	AMOUNT REQUIRED
1	0.06	10	0.63	100	6.25
2	0.13	20	1.25	200	12.50
3	0.19	30	1.88	300	18.75
4	0.25	40	2.50	400	25.00
5	0.31	50	3.13	500	31.25
6	0.38	60	3.75	600	37.50
7	0.44	70	4.38	700	43.80
8	0.50	80	5.00	800	50.00
9	0.56	90	5.63	900	56.25
				1000	62.50

Cheese

Food Item: American (includes Cheddar, Mozzarella and Swiss)

Serving Size: 1 oz.

Purchase Unit	Single Serving Requirement
Pound	.063

Additional Information: includes reduced fat, low fat, nonfat, and lite versions.

1 lb. = about 4 cups shredded cheese

**ARIZONA DEPARTMENT OF EDUCATION
CHILD AND ADULT CARE FOOD PROGRAM
MENU PRODUCTION WORKSHEET**

LUNCH/SUPPER

Date **June 25th**

MENU: MEAT/MEAT **Cheese**
ALTERNATE

Number Planned For:

Age 1	Age 2	Age 3 to 5	Age 6 up to 12 + Adult
10	3	2	5

VEGETABLE/
FRUIT

VEGETABLE/
FRUIT

GRAINS/BREADS

MILK

Component Requirements	Age	FOOD ITEMS Factor	No. of Servings	Market Unit	Amount Needed	Amount to Purchase
1. MEAT OR MEAT ALTERNATE	1-2	13 x 1 = 13 +	1 oz.	Obtain from Buying Guide	Obtain from Buying Guide	Round up
	3-5	2 x 1.5 = 3 +				
	6-Adt	5 x 2 = 10 = 26				
		Cheese	26	pound	1.6	2

Calculation:

$26 \times .063 = 1.638$

round 1.638 to 2 pounds

National Food Service Management Institute (NFSMI)

Food Buying Guide Calculator for Child Nutrition Programs

Link: <http://fbg.nfsmi.org/>



ARIZONA DEPARTMENT OF EDUCATION

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ADULT DAY CARE

**GARDENING WITH
ADULTS IN CARE**





What are the benefits of gardening for seniors?

- **A form of low impact exercise for senior citizens**
 - **Can be therapeutic and calming**
 - **Fosters a sense of community**
- **It is rewarding and provides a sense of accomplishment**



Successes and Challenges



Tolmachoff Farms

5726 N. 75th Avenue

Glendale, Arizona 85303

(602) 999-3276

All tours are by appointment only and must have a group of 20 or more to schedule a tour. Approximate time of a guided tour is 45 minutes and the average time of a field trip at the farm is 2-3 hours, (add 1 hour extra for fall tours if group goes through the family corn maze). **Tours start October 1st.**

ENJOY YOUR FARMERS' MARKET



- Opportunity to support local economy
- Teach about purchasing fresh produce
- **FUN**

Activity

ARIZONA DEPARTMENT OF EDUCATION

CHILD AND ADULT CARE FOOD PROGRAM

ADULT DAY CARE

PHYSICAL ACTIVITY

Why Physical Activity is Important!

Being physically active can help you continue to do the things you enjoy and stay independent as you age. Regular physical activity over long periods of time can produce long-term health benefits. That's why health experts say that older adults should be active every day to maintain their health.

In addition, regular exercise and physical activity can reduce the risk of developing some diseases and disabilities that develop as people grow older. In some cases, exercise is an effective treatment for many chronic conditions. For example, studies show that people with arthritis, heart disease, or diabetes benefit from regular exercise. Exercise also helps people with high blood pressure, balance problems, or difficulty walking.

When is exercise not appropriate?

It is important to exercise only as much as your current physical condition allows. Over-exercising may be bad for your health. If someone experiences pain or feels unwell while taking part, or after increasing their activity levels, they should stop the exercise and seek medical advice.



Physical Activities

There are four types of exercise for adults:



Endurance activities will make it easier for you to:

- Push grocery boxes on the strings
- Vacuum
- Rake leaves



Flexibility or stretching exercises make it possible for you to:

- Stand over your shoulder to see what's behind you both the car and the driveway
- Make the bed
- Bend over to get a shoe



Strength training can make it easier for you to:

- Carry a full laundry basket from the basement to the second floor
- Unload groceries and packages from the car
- Lift bags of mulch or the garden



Balance exercises can help you:

- Stand on tiptoe to reach something on the top shelf
- Walk up and down the stairs
- Walk on an uneven sidewalk without falling





Endurance activities will make it easier for you to:

- Push grandchildren on the swings
- Vacuum
- Rake leaves

Flexibility exercises help stretch muscles, protect against injury and allow the maximum range of motion for joints



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Flexibility, or stretching, exercises make it possible for you to:

- Look over your shoulder to see what's behind you as you back the car out of the driveway
- Make the bed
- Bend over to tie your shoes



Strength training can maintain your ability to:

- Carry a full laundry basket from the basement to the second floor
- Unload groceries and packages from the car
- Lift bags of mulch in the garden



Balance exercises can help you:

- Stand on tiptoe to reach something on the top shelf
- Walk up and down the stairs
- Walk on an uneven sidewalk without falling

Physical Activities

These activities are dependent on the ability of the adult, which must be assessed prior to beginning any activities



ARIZONA DEPARTMENT OF EDUCATION

CHILD AND ADULT CARE FOOD PROGRAM

ADULT DAY CARE

**SENIOR NUTRITION & MEALTIME
Webinar - Molly Carpenter**

HYDRATION GUIDELINES FOR SENIORS

- Fluids at each meal & snack
- Keep water within reach
- Enhance water
- Water-based fruits
- Water-friendly snacks



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