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**Results of the Feasibility Study of  
Estimating the Risk of Meal  
Claiming Error in the Child and  
Adult Care Food Program (CACFP)**



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## **Results of the Feasibility Study of Estimating the Risk of Meal Claiming Error in the Child and Adult Care Food Program (CACFP)**

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Measuring erroneous meal claims in the Family Day Care Home (FDCH) component of the Child and Adult Care Food Program (CACFP) poses great difficulty. FDCH providers report meal service counts, by day, at the end of each month but do not submit independent objective documentation to confirm the accuracy of the reports.

Therefore, the Food and Nutrition Service's 2006 Improper Payments Information Act (IPIA) plan for the CACFP proposed to test the feasibility of estimating the *risk* of errors. The Food and Nutrition Service (FNS) proposed to select a random sample of sponsoring organizations and, from each, use a random selection of the sponsor's monitoring visits of FDCHs.<sup>1</sup> Using these data, FNS would compare the number of meals claimed with the number of children observed at the time of the visit.

Although the IPIA requires measurement of both overpayments and underpayments, this approach can only estimate the risk of overpayment errors. Specifically:

- If a FDCH provider claims *more* meals than the number of children observed during the monitoring visit, it suggests there is a risk of overpayment. The number of children observed is an imperfect yardstick – for example, a child could be dropped off at an FDCH after the observer left but before a meal service ended – but for the most part if many more meals are claimed than children observed we know that some of the discrepancy is overpayment.
- On the other hand, if a FDCH provider claims *fewer* meals than the number of children observed during the monitoring visit, it is not an underpayment since neither the government nor the sponsoring organization denied a claim for reimbursement. Fewer meal claims than children present represents irrational behavior on the part of the provider so we assumed that this would be a rare occurrence.<sup>2</sup>

The purpose of the pilot test was to determine the feasibility and accuracy of this approach to estimating the risk of overpayments in the FDCH component of the CACFP.

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<sup>1</sup> We proposed a similar exercise using State monitoring visits. There were difficulties in the coding and cleaning of these data and the database is only half complete. We do not believe the results using State visits would differ from the ones reported here based on sponsor visits.

<sup>2</sup> In a small number of cases, a provider that serves more meals than the CACFP's three meal per child per day limit might not claim a snack so that they could claim the higher reimbursement meals, such as lunch. This is neither an overpayment nor an underpayment (but is a bargain for the taxpayer). It also only makes sense to be seen serving a snack that is not claimed if they are in fact serving the other meals.

## METHOD

FNS staff conducted the study as part of the Child Care Assessment Project (CCAP) in 11 family day care sponsors around the country, seeking to obtain at least 20 sponsor monitoring visit records from each sponsor (target of 220 FDCH sponsor visit records). Altogether, a random sample of 268 FDCH sponsor monitoring visit records was gathered. For each of these records, FNS gathered the FDCH's meal claim data for the month of the monitoring visit and the month before. Further details are in Appendices I and II.

We designed this feasibility study to look at counts of children and meals at specific points in time. That is, we proposed to compare the *number* of children observed during the monitoring visit to the *number* of meals the provider claimed for that same day (preferably for the same meal) or for an earlier day.<sup>3</sup> This approach parallels the intent of the Improper Payment Information Act (IPIA), which is to look at specific transactions and determine whether or not they are in error.

## FINDINGS

To preview our conclusions:

- **Our tested approach is not reliable when calculated at specific points in time.** The comparison of meal claims to the sponsor's report of children observed during the monitoring visit found numerous situations in which fewer meals were claimed than children observed. As described earlier, this is indicative of irrational economic behavior, not underpayment error. Since the level is too big for irrational behavior (22 percent) it indicates that the comparison is unreliable and cannot be used.
- **We also tested the approach calculated on averages over time and over providers. The comparison suggests that there is negligible meal service reporting error – but this conclusion is hampered by a methodological flaw.** A complete test could not be conducted during this effort and would require reconstructing the database to compute averages in a different way<sup>4</sup> as well as the collection of larger samples of monitoring visits. Even if we resolved this flaw it would not resolve the fact that the underlying comparison is unreliable.

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<sup>3</sup> Because the meal claim is submitted after the monitoring visit, a fraudulent provider could ensure that the claim for the day of the visit is correct, while still overclaiming on other days. We look at the day before the visit and the day one week before the visit as a check on this possibility.

<sup>4</sup> The analysis computed the average number of reported meals by dividing the number of meals reported by the number of operating days in the month. This yielded an "unconditional" average; a more accurate approach is to compute the average number of meals reported **conditioned** on a meal being served. Computing this would require reconstructing the database from the original paper records.

- **The data we collected, while insufficient to validate a reliable method of estimating the risk of meal claiming error, nonetheless documents that sponsoring organizations have success in reducing provider errors.**

### **Estimating Meal Claiming Error at a Point in Time**

**Missing data is a significant problem that undercuts the reliability of estimates based on comparing counts of children observed during sponsors' monitoring visits to corresponding meal claims:**

1. Meal services are not always observed during monitoring visits: a meal was observed in 192 out of 268 visits (72%).<sup>5</sup>
2. Daily meal count forms were not always available to find and, within the time available for data collection, we were not always able to copy and bring back the forms. In our sample, daily meal count claims were available from 167 of the 192 instances in which a meal service was observed (87% of observed meals, 62% of visits).

**Measurement error is also a significant problem. Specifically, “number of children observed,” as measured during sponsors' monitoring visits, is not a reliable yardstick for assessing “number of meals reported.”** Our assumption underlying this feasibility test is that the comparison of meals claimed to children observed would be unidirectional: providers and sponsors might report *more* meals than served but would rarely report fewer meals than served. As a result, we assumed that we would have an indicator of risk of overpayment error whenever the number of meals claimed exceeded the number of children observed.

The assumption that overpayment errors are unidirectional receives strong support when we examine the difference between meals reported by providers and meals claimed by sponsors (i.e., after the sponsor has reviewed the provider's report for errors). Table 1 shows a unidirectional pattern in which provider and sponsor almost always agree and when differences occur it is 9 times as likely for a provider to report more meals (than the sponsor allows) than fewer.<sup>6</sup>

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<sup>5</sup> We also analyzed data using the two meal services closest in time to the monitoring visit. We do not discuss this information for two reasons: incorporating this data does not change the conclusions based on actual meal observations and it introduces considerable uncertainty into the analysis.

<sup>6</sup> Sponsors reject providers' meal claims for a variety of reasons such as claiming an ineligible child or claiming more meal services than allowed – see Table 5.

Table 1

Reported Number of Meals minus Number of Claimed Meals

Condition	Percent of time condition occurs
Provider reports <i>more</i> meals than allowed by sponsor	5.5%
Provider reports the <i>same</i> number of meals as allowed by sponsor	93.9%
Provider reports <i>fewer</i> meals than claimed by sponsor	0.6%
Total	100.0%
Number of cases	164

The comparison with number of children observed during a sponsor’s monitoring visit, however, is not unidirectional:

- Table 2 shows that both meals as reported (by FDCH provider) and meals as claimed (i.e., as corrected by the sponsoring organization) exceed the number of children observed about 10% of the time.
- However, about 20% of the time, meals reported and claimed are *less* than the number of children observed.

Table 2

Meal Service Counts and Number of Children Observed During Sponsors’ Monitoring Visits

	Reported Number of Meals	Claimed Number of Meals
Meal counts are <b>greater than</b> number of children observed.	12.7%	10.9%
Meal counts are <b>the same as</b> number of children observed.	68.1%	66.7%
Meal counts are <b>less than</b> the number of children observed.	19.3%	22.4%
Total	100.1%	100.0%
Number of cases	166	165

Finding fewer meal claims than observed children is not an underpayment.<sup>7</sup> Moreover, the financial incentives strongly favor over claiming and discourage under claiming. **Therefore these data suggest that “number of children observed” during a sponsor’s monitoring visit is frequently *different* than the number of children who actually consumed a meal. This means our tested yardstick is unreliable and the comparison cannot serve as an indicator of risk.**

There are a number of legitimate (nonfraudulent) reasons why the number of children observed by the sponsor can be different than the number of children who consume a meal. For example:

- The observer can miss children because a participating child or infant was asleep during the visit and not observed or a participating child could have been dropped off after the monitor left but before the meal service was over.
- The observer can count more children than actually ate a reimbursable meal because some of the observed children may not be CACFP participants, or they may be participants who decided not to eat the observed meal service or perhaps were on special diets (including infant formula) provided by their parents or guardians.<sup>8</sup>

**An additional limitation to using number of children observed as part of an indicator of risk of error is that providers report meal claims *after* the monitoring visit.** A fraudulent provider can easily ensure that the number of meals claimed for the day of the monitoring visit equals the number of children observed. We anticipated this in the project design and gathered meal service data for other days than the visit day.

**Comparing the number of children observed during the monitoring visit to meal service reports for different days does not improve accuracy.** Table 3 compares number of children observed to meals reported (a) one day before the monitoring visit and (b) one week before the visit. A fraudulent provider is much less likely to make sure that these claims match the number of children observed during the monitoring visit.

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<sup>7</sup> Not reporting a meal is not equivalent to improper denials of service or under issuances since neither the sponsor nor the State is denying a claim that should have been approved. If meals claimed are less than the number of children observed it is **not** an indicator of the risk of IPIA underpayment errors.

<sup>8</sup> It is also possible that the monitor made a recording mistake when filling out the form or that FNS made a mistake when transcribing the data.

Table 3

Meal Service Counts on Alternate Days and Number of Children Observed During the Visit

	Reported Number of Meals 1 Day Earlier than Visit Day	Reported Number of Meals 1 Week Earlier than Visit Day
Meal counts are <b>greater than</b> number of children observed.	28.7%	36.0%
Meal counts are <b>the same as</b> number of children observed.	40.8%	30.7%
Meal counts are <b>less than</b> the number of children observed.	30.6%	33.3%
Total	100.1%	100.0%
Number of cases	157	150

Table 3, however, continues to show a pattern of both positive and negative differences. *The level of negative differences is too high for irrational behavior and again indicates that the comparison is an invalid way to estimate risk of overpayment error.* In addition, the table suggests that there is substantial variation in reported number of meals over different weeks and days of the week. This introduces additional uncertainty into any comparison of observed children to meals reported on other days.

### Estimating Meal Claiming Error by Use of Averages

The preceding analyses utilize point-in-time information. That is, we compare data from the day of the monitoring visit to data on the same (or an earlier) day. In theory, we can overcome difficulties with the point-in-time accuracy of the two variables (counts of children observed by the monitor, counts of meal services reported by the provider) by looking at averages over time and over monitoring visits. The idea is that despite measurement error in daily numbers, over a large enough sample measurement errors cancel each other out and we can therefore extract useful information from differences in averages.

**Comparing the average number of children observed during monitoring visits to the average number of meal services reported during a month suggests that there is negligible meal service reporting error.** Table 4 below compares the average number of observed participants, overall and by meal service, with the average number of



reported meals. The notion is that the risk of over-reporting increases as the difference between the average number of reported meals and observed participants increases. (Note that positive and negative differences have a reverse meaning from earlier tables: in Table 4 large negative differences are consistent with a hypothesis that providers are serving fewer meals than they report, not that behavior is irrational).

Table 4

Mean Difference Between Observed Participants and Reported Meals, by Meal Service									
	Average Number of Reported Meals			Average Number of Observed Participants <sup>a</sup>	Differences with:			Percentage Difference Both Months	Sample Size
	Visit Month	Prior Month	Both Months		Visit Month	Prior Month	Both Months		
All Meals	4.61	4.76	4.69	4.78	0.17	0.01	0.09	1.95%	189
Breakfast	4.62	4.74	4.68	4.00	-0.62	-0.74	-0.68	-14.48%	23
AM Snack	3.62	3.79	3.70	4.10	0.48	0.32	0.40	10.80%	29
Lunch	4.99	5.14	5.07	5.03	0.04	-0.10	-0.03	-0.61%	86
PM Snack	5.17	5.29	5.23	5.43	0.26	0.14	0.20	3.88%	37
Supper	4.42	4.63	4.52	4.31	-0.11	-0.32	-0.22	-4.78%	13
Eve Snack	2.26	2.53	2.39	2.00	-0.26	-0.53	-0.39	-16.22%	1

Notes: <sup>a</sup> Value based just on records with observed meal services.

Table 4 shows that we have adequate sample size for “All Meals,” for “Lunch,” and (probably) for “PM Snack.” The table shows that the difference for all meals and for PM snack is positive: the average number of observed participants is slightly greater than the average number of reported meals. The difference at lunch is slightly negative but less than one percent. However, the manner in which data were transcribed makes it likely that we are not calculating the comparison correctly. This is described below.

Interpretation of Table 4 is hampered by the manner in which data were transcribed. During data collection, we extracted information on the total number of days a provider was open in both the visit and the prior month. We also extracted the total number of meals reported during the month, by meal service. The average number of reported meals in table 4 is computed by dividing the number of meals reported by the number of operating days in the month. This

yields an “unconditional” average, when what we need is the average number of meals reported **conditioned** on a meal being served.<sup>9</sup>

Because we are comparing reported meals to observed children at an observed meal, we need the conditional average number of reported meals. Because we did not transcribe that information our estimates of average number of reported meals are biased downward, and this—in turn—biases our difference calculations upward. **It is likely that this methodological error causes us to miscalculate the comparisons when using an approach based on averages.**

*Summary.* The pilot approach appears flawed when used at specific points in time. Testing whether an averages-based calculation has merit requires two additional steps. The first is that we calculate conditional averages to ensure that we are not underestimating errors. The second step – which has large implications for the ongoing costs of implementing this type of method – is that we must *substantially* increase the sample of monitoring visits used in the analysis. The amount of day-to-day variability in reported meals is surprisingly large and this means that large sample sizes are required for a meaningful analysis.

### **Contact Approach to Estimating Meal Claiming Error**

The preceding analyses are based on monitoring counts: they compare the count of children observed with the count of meals reported. There might be potential to address limitations of the monitoring-count approach if we assume that:

1. Providers should normally report the same average number of meals from one month to the next – although there may be increases or decreases (for a variety of reasons), most of the time one would expect the average number of meals reported to stay the same;
2. Monitoring visits are not important for the *number* of children observed during the visit; rather it is the occurrence of a monitoring visit that is important because *the contact* alerts the provider that they are under official scrutiny; and
3. Fraudulent providers respond to scrutiny by reporting more accurately in the month of the sponsor visit than at other times.

We therefore computed the average number of meals reported during the month of the monitoring visit as well as during the month prior to the monitoring visit. (These averages are unconditional; they are calculated for each record as the total number of

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<sup>9</sup> An example should illustrate the problem. Suppose a provider is open 20 days during a month, but she serves breakfast on only 15 days. When a breakfast is served, the number of children served is 3. The provider correctly reports 45 breakfasts served during the month (15\*3). We calculate an (unconditional) average of only 2.25 breakfasts served per day, however, because we divide 45 breakfasts by 20 operating days.

reported meal services for a month divided by the number of days the provider was open.) Table 5 compares the average number of meals reported in the visit month with the average number of meals reported the month prior.

**Over all providers, the average number of meals reported during the visit month was about 3 percent less than the average number reported the month before.** This *may* indicate that some providers are claiming more meals than they should.

Table 5

Difference in Meals Reported During the Contact (Visit) Month and the Prior Month

Average Number of Reported Meals						Visit Month Sample Size	Percent of Providers Reporting Meal	Prior Month Sample Size	Percent of Providers Reporting Meal
	Visit Month	Prior Month	Difference	Percentage Difference	Both Months				
All Meals	4.61	4.76	-0.16	-3.3%	4.69	192		192	
Breakfast	4.62	4.74	-0.12	-2.4%	4.68	165	85.9%	166	86.5%
AM Snack	3.62	3.79	-0.17	-4.5%	3.70	92	47.9%	91	47.4%
Lunch	4.99	5.14	-0.15	-2.9%	5.07	186	96.9%	187	97.4%
PM Snack	5.17	5.29	-0.12	-2.3%	5.23	175	91.1%	175	91.1%
Supper	4.42	4.63	-0.20	-4.4%	4.52	91	47.4%	90	46.9%
Eve Snack	2.26	2.53	-0.27	-10.6%	2.39	27	14.1%	25	13.0%

**While the contact approach appears promising, it is premature to assume that it is valid.** Using data on the impact of a monitoring contact was not anticipated when the feasibility study was planned. As a result, we do not have some critical pieces of information:

1. What is the normal month-to-month variation in average number of reported meals? The differences in Table 4 may fall within the normal range of variation, in which case we cannot use these comparisons as an estimate of risk. This would require data that go further back in time than we have.
2. What is the change in the absence of a monitoring visit? We only have data on monitoring visits. If the month-to-month change is indicative of over claiming, a decrease in average number of reported meals should occur in the presence of a monitoring visit *and disappear in the absence of a monitoring visit.*

3. What is the distribution of differences between the prior month and the visit month? When a monitoring contact occurs, it is unlikely that *every* provider would have reporting error. Some, but not all, of the providers should be contributing to the pattern.

**Sponsor Organizations Are Successful in Reducing Reporting Error**

Although our focus is on the behavior of the provider and associated reporting error, the data allow us to learn a bit about reporting error by looking at **sponsor processing of the reported meals**. Table 1 showed that sponsors identify and disallow some reported meals in about 1 out of every 20 monitoring visits. Table 6 examines the issue in greater detail by calculating differences in aggregate monthly counts of reported versus claimed meals.

According to the data in Table 6, sponsors disallow about 3 percent of all reported meals. This does not estimate the risk of an IPIA error, since errors in reported meals become overpayments only if the sponsor fails to catch them. However, it does give an estimate of the extent to which CACFP rules governing sponsor responsibilities lead to a reduction in the percentage of meals reimbursed by the program.

Table 6

Comparison of Reported and Claimed Meal Services – Aggregated Values								
Visit Month – Totals					Prior Month – Totals			
	Reported	Claimed	Difference	Percent Difference	Reported	Claimed	Difference	Percent Difference
All Meals	98,506	95,360	3,146	3.2%	99,423	96,195	3,228	3.2%
Breakfast	22,661	22,168	493	2.2%	23,015	22,388	627	2.7%
AM Snack	10,341	9,580	761	7.4%	10,537	9,930	607	5.8%
Lunch	26,668	25,938	730	2.7%	27,247	26,606	641	2.4%
PM Snack	25,577	24,925	652	2.5%	25,095	24,377	718	2.9%
Supper	11,493	11,127	366	3.2%	11,714	11,189	525	4.5%
Eve Snack	1,766	1,622	144	8.2%	1,815	1,705	110	6.1%

In some instances, one can tell from the forms why meals are being disallowed, leading to the analysis in Table 7.

Table 7

Reasons for Disallowing Reported Meal Counts			
	Visit Month	Prior Month	Combined
On average, sponsors disallow	3.2%	3.2%	3.2%
Of all <i>disallowed</i> meals:			
Violation of "three-meals a day" policy	16.56%	14.47%	15.5%
Menu did not meet standards	7.60%	7.19%	7.4%
Possible sponsor error (net)	-2.86%	-2.14%	-2.5%
Child should be in school	1.37%	2.54%	2.0%
Invalid child number on form	6.87%	0.06%	3.4%
Holiday or weekend not documented	4.83%	5.67%	5.3%
<b>Subtotal</b>	<b>34.36%</b>	<b>27.79%</b>	<b>31.03%</b>
Ineligible child	41.29%	40.02%	40.6%
Child not seen by monitor	0.12%	NA	0.12%
<b>Subtotal</b>	<b>41.41%</b>	<b>40.02%</b>	<b>40.77%</b>
Reason not determined (net)	<b>24.22%</b>	<b>32.19%</b>	<b>28.19%</b>
<b>Total</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>

The “possible sponsor error” line is likely to translate into IPIA errors and implies a potential “floor” on the risk of IPIA meal claiming errors in the program. Both the shakiness of this assumption and the fact that the reason for the disallowance could not be determined in roughly 30% of the cases gives some pause to using sponsor corrections as an estimate of the risk of error. However, **the data do show that sponsors are taking their program obligations seriously and that there are built in checks on the level of error in the program.**

## CONCLUSIONS

**The feasibility study indicates that the central assumption underlying this approach to measuring the risk of IPIA errors is invalid.** The approach assumes that sponsors’ reports of the number of children observed during a monitoring visit should correspond with the number of meals claimed by the provider that day. If meals counts are greater than the number of children observed, the approach assumes it is indicative of fraud. The approach assumes that situations in which meal counts would be less than the number of children observed should be rare.

The feasibility test found that situations in which meal counts are less than the number of children observed are common and that these situations occur more frequently than

situations in which meal counts are greater than the number of children observed. The degree to which we found fewer meal claims than observed children is too high to attribute to irrationality – it means that the comparison itself is invalid.

A variant of the tested approach – comparison of averages over time – may have some potential (but requires substantial additional effort to re-code and re-analyze data). If the effort were made, averaging a flawed variable would still leave the agency with a weak estimate. Moreover, the result would not be an estimate *of* improper payments; it would only be an estimate of *the risk of* improper payments.

FNS is continuing to test other ways of measuring improper payments in the FDCH component of CACFP. The CACFP Data Collection Pilot Project is testing and evaluating the feasibility of three different methods for validating meal reimbursement claims submitted by FDCHs to their sponsors. These include:

1. Compare meal reimbursement claims by FDCHs to the recollections of parents/guardians on their children's attendance at the FDCH during the days and times of the claims.
2. In homes where sign in/sign out logs are kept; compare meal reimbursement claims by FDCHs to both the logs and the recollections of parents.
3. Compare meal reimbursement claims by FDCHs to estimates based on statistical projections derived from a probability sample of FDCHs observed across their scheduled breakfast, lunch, supper and snack serving times.

The project is in the field now and results should be available in July 2009.

## Appendix I

### Data Collection and Cleaning

During FY 2007, staff from FNS' Child Nutrition Division (CND) and the Office of Research, Nutrition, and Analysis (ORNA) accompanied regional FNS staff on eleven CCAP visits, using these visits as opportunities to mimic the data collection envisioned in the "State" and "Sponsor" model approaches. The goal was to collect records on 20 monitoring visits for each model in each CCAP site, yielding totals of 220 records per model approach and 440 records overall. Sampling of providers piggybacked on the sampling that was already being conducted for the CCAP visits. The State Model samples comprise the home visits that the CCAP teams were able to complete by Wednesday of each trip, and the Sponsor Model samples are a subset of the samples of FDCH provider records that the CCAP team reviewed at each sponsor's office. Thus, the State Model data were collected by FNS staff and are meant to mimic the provider monitoring visits already being conducted by State CACFP staff each year. The Sponsor Model data were extracted from data on the most recent monitoring visit listed in sponsors' sampled files, thereby representing data that have been collected by sponsor staff.

FNS staff sought the following information for each monitoring visit:

- **Identifying and general information:**
  - CCAP identification number
  - name of State Agency
  - sponsor name
  - provider name
  - sponsor's identifier number for the provider
  - meal service times as documented in the provider's file
  
- **Monitoring visit information:**
  - date of visit
  - arrival and departure times
  - whether or not visit was announced
  - number of program participants observed
  - whether or not a meal service was observed
  - which meal service was observed
  
- **Provider reporting information:**
  - aggregate number of meals reported, by meal service, for both the "visit" month<sup>10</sup> and the "prior" month

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<sup>10</sup> "Visit" month for the State Model is the month of the CCAP visit; for the Sponsor Model it is the month of the most recent monitoring visit documented in the sponsor's provider file.

- the number of meals or snacks reported for both the observed meal service and for the same meal service on prior days (day before the visit, seven days before the visit, one month before the visit, and one month plus one day before the visit)
- if a meal service was not observed, the number of meals or snacks reported for the meal services immediately preceding and following the time of the monitoring visit
- **Sponsor claiming information:**
  - aggregate number of meals claimed, by meal service, for both the “visit” month and the “prior” month
  - the number of meals or snacks claimed by the sponsor for the observed meal service on the date of the monitoring visit or, if no meal service was observed, for the meal services immediately preceding and following the time of the monitoring visit

The locations and dates of the eleven CCAP site visits are listed in Appendix II.

Data entry and cleaning were unusually time consuming for many reasons, including:

- the variety of meal reporting and claiming forms encountered in the field, each with its own vagaries in terms of what and how information is recorded;
- the need to verify aggregated counts, by meal service, of both reported and claimed counts for two different months;
- the frequent difficulty encountered in determining whether a meal service that had been crossed off on the reporting form was crossed off by the provider prior to end-of-month submission or by the sponsor during form review; and
- efforts to capture as much information from the collected forms as possible, even when key data elements were missing.



## Appendix II

### CCAP Sponsor Visits in FY 2007

Louisiana Housing Assistance Corporation, Alexandria, LA	Nov 27 – Dec 1, 2006
Day Care Resources, Morton, IL	December 4-8, 2006
Child Development Association, Inc., Chula Vista, CA	January 22-26, 2007
Noah's Ark Christian Day Care, Chanute, KS	February 19-23, 2007
Central Valley Children's Services Network, Fresno, CA	March 19-23, 2007
Eastern Kentucky Child Care Coalition, Berea, KY	March 26-30, 2007
Association for Child Development, East Lansing, MI	May 7-11, 2007
City of Industry, Public Health Foundation, Chula Vista, CA	May 14-18, 2007
Child Care Choices, Inc., St. Cloud, MN	June 11-15, 2007
Olympic Children's Foundation, Bremerton, WA	April 23-27, 2007
Child Care Development Services, Gresham, OR	August 13-17, 2007