

# Civil Rights Training for Wildwood Childcare Providers

Civil Right regulations are intended to assure that the benefits of the Child Nutrition Programs (CNP) are made available to all eligible persons. This includes:

- Making every effort in recruitment and enrollment procedures to allow equal participation by all eligible participants and potential participants regardless of race, color, national origin, sex, age, or disability.
- Serving meals in a way that allows equal participation regardless of race, color, national origin, age, sex, or disability.

## **Discriminatory Practices**

Discrimination is when an individual or a group of individuals are:

- Denied a benefit or service that others receive,
- Delayed receiving a benefit or service that others receive, or
- Treated differently than others

When an individual or a group of individuals in a protected class (race, color, national origin, age, sex or disability) complain they have been discriminated against, it is Wildwood's responsibility in assisting the complainants in reporting the alleged incidents(s), investigate the incident in a fair and impartial manner, and to work with the CDPHE and/or the USDA to resolve the complaint.

Examples of discriminatory practices include:

- Refusing the enrollment of an eligible child based on his/her disability
- Failing to provide participants with disabilities reasonable accommodations to receive benefits
- Serving meals at a place, time, or in a manner that discriminates based on race, color, national origin, age, sex, or disability
- Failing to apply the same eligibility criteria to all potential participants
- Failing to provide materials that give non-English speaking persons full and equal opportunity to receive benefits
- Not offering program benefit to all children enrolled and in care.

## **Obligations to Offer Infant Meals in the CACFP**

All child care providers that have infants participating in the Child and Adult Care Food Program (CACFP) must offer meals to all children enrolled for care in their facilities, including infants. A provider may not avoid this obligation by stating that the infants are not "enrolled" in the CACFP, or by citing a logistical or cost barrier to offering infant meals. Decisions on offering meals must be based on whether the child is enrolled at the facility, not whether the child is enrolled in the program. Wildwood will maintain documentation that shows CACFP benefits were offered to parents/guardians of infants in care. The parent/guardian may decline the program participation by writing on a Child Enrollment Form that they refuse participation and date and sign the form. When an infant is in care during the meal service period, the child care provider must offer the infant meals that comply with program requirements.

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***\*I affirm that I have received Civil Rights Training:***

Name: \_\_\_\_\_

License #: \_\_\_\_\_ County: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Monitor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Collecting and Reporting Racial/Ethnic Data**

Collecting racial and ethnic data is required as part of the renewal application. Wildwood will maintain racial/ethnic data for three years plus the current fiscal year. All racial/ethnic data are confidential and should be stored in a way that protects each participant’s privacy. Wildwood uses the Child Enrollment Forms furnished by CDPHE. It is ideal for parent or guardians of the children to self-identify the ethnic and racial categories; however, if the parent or guardian declines to self-identify, the provider is required to make a visual identification of the enrolled children’s ethnicity and race and record it on the CEF. Please select one or more that applies under each category.

**Civil Rights Complaints**

All written or verbal complaints alleging discrimination on the basis of race, color, national origin, sex, age, or disability shall be processed within 90 days of receipt. The Director, Office of Civil Rights (OCR), under the Secretary of Agriculture, is responsible for handling of complaints.

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Name: \_\_\_\_\_

License #: \_\_\_\_\_ County: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Monitor Signature: \_\_\_\_\_ Date: \_\_\_\_\_