

CHILD NUTRITION PROGRAM

IL CNP Waiver 21-004 Special Milk Program Non-Congregate

Waiver Request to Allow Non-Congregate Feeding at Sites that Participate the Special Milk Program

1. State agency submitting waiver request and responsible State agency staff contact information:

Illinois State Board of Education
 100 N First Street (W-270)
 Springfield, IL 62777-0001

Mark Haller, Director
 Nutrition Department
mhaller@isbe.net
 217-782-2491

2. Region:

Midwest

3. Eligible service providers participating in waiver and affirmation that they are in good standing:

The Illinois State Board of Education (ISBE) is requesting the waiver on behalf of all Special Milk Program sponsors determined to be in good standing in the State of Illinois operating during the ongoing COVID-19 outbreak.

4. Description of the challenge the State agency is seeking to solve, the goal of the waiver to improve services under the Program, and the expected outcomes if the waiver is granted. [Section 12(l)(2)(A)(iii) and 12(l)(2)(A)(iv) of the NSLA]:

This request is to waive the regulatory requirement to maintain children on site while milk is consumed for the Special Milk Program. This will allow non-congregate meal service during this school year to minimize potential exposure to the COVID-19 in the event of off-site distance learning.

Requirement under the Richard B. Russell National School Lunch Act at 42 USC 1769f(b)(1)(D) and 7 CFR 215.7(d), 215.13a (Special Milk): Child Nutrition Program meals must be served in a congregate setting and must be consumed by participants on site.

5. Specific Program requirements to be waived (include statutory and regulatory citations). [Section 12(l)(2)(A)(i) of the NSLA]:

NSLA Citations	7 CFR Citations	Requirement
42 USC 1769f(b)(1)(D)	7 CFR 215.7(d), 215.13a	Maintain children on site while meals are consumed.

6. Detailed description of alternative procedures and anticipated impact on Program operations, including technology, State systems, and monitoring:

There are no expected impacts on technology, State systems, or monitoring.

7. Description of any steps the State has taken to address regulatory barriers at the State level. [Section 12(l)(2)(A)(ii) of the NSLA]:

There are no regulatory barriers at the State level to provide the requested waiver.

8. Anticipated challenges State or eligible service providers may face with the waiver implementation:

There are no challenges anticipated at the State and sponsor level.

9. Description of how the waiver will not increase the overall cost of the Program to the Federal Government. If there are anticipated increases, confirm that the costs will be paid from non-Federal funds. [Section 12(l)(1)(A)(iii) of the NSLA]:

The waiver will not increase the overall cost of the Program to the Federal Government.

10. Anticipated waiver implementation date and time period:

Implementation date requested: July 1, 2020.

Time period requested: June 30, 2021.

11. Proposed monitoring and review procedures:

Current NSLP monitoring of sponsors is included in the administrative review. This practice will continue as it is consistent with 7 CFR 210.18 requirements.

The State Agency will monitor Special Milk Program sponsors in accordance with 7 CFR 215.11(b)

12. Proposed reporting requirements (include type of data and due date(s) to FNS):

No later than December 31, 2021, ISBE will report to USDA the number of sponsors and sites that used this waiver.

13. Link to or a copy of the public notice informing the public about the proposed waiver [Section 12(l)(1)(A)(ii) of the NSLA]:

<https://www.isbe.net/Documents/CNP-State-Waiver-Request.pdf>

14. Signature and title of requesting official:



Title: Mark Haller, Director
Nutrition Department
Illinois State Board of Education

Requesting official's email address for transmission of response: mhaller@isbe.net

TO BE COMPLETED BY FNS REGIONAL OFFICE:

FNS Regional Offices are requested to ensure the questions have been adequately addressed by the State agency and formulate an opinion and justification for a response to the waiver request based on their knowledge, experience and work with the State.

Date request was received at Regional Office:

- Check this box to confirm that the State agency has provided public notice in accordance with Section 12(l)(1)(A)(ii) of the NSLA**

- **Regional Office Analysis and Recommendations:**