



Food with Care

Child and Adult Care Food Program

Bureau of Nutrition, Health and Transportation Services • Iowa Department of Education

January 2008

Number 11

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Children's Mealtime



In a child's world there are many new experiences: learning about new and familiar foods, learning skills to be independent, and participating in mealtime activities with other children.

What decisions can be made to make mealtime successful and pleasant for children? What will mealtime look like from the child's view?

Mealtime is part of daily activities. Policies and guidelines should be established to create a safe and pleasant mealtime with positive learning experiences for children.

Division of Responsibilities

There is a clear division of mealtime responsibilities for adults and children. When the line is defined and followed, mealtime will be pleasant. A child's mealtime responsibilities include: deciding whether to eat or not, what foods to eat, and how much to eat. It needs to be clear that these decisions are the child's responsibilities to avoid conflict at the table and struggles over food at meal times.

Adult responsibilities include: preparing and serving nutritious and safe foods, providing child size eating utensils, tables and chairs, selecting the type of meal service to use, supervising mealtime, and role modeling desired behaviors.

Adult Support

A successful children's mealtime requires adult support and an understanding of children and their developmental skills. Adults must have appropriate and realistic mealtime expectations for the age and stage of development of the various children. Children should be encouraged and supported to try new foods and use new skills.

Mealtime provides teachable moments. Children learn by doing. Decide topics to teach at mealtime. Some examples are: how to use utensils; how to serve self; how to help your friend serve his/her self; how to pass foods; how to clean up spills; what to do with the dropped utensils, etc.

If the skill requires several steps, initially teach the step that will allow the child to be successful. For example, passing and serving bread requires several steps. The first step to teach may be for the child to select a piece of bread from the basket while the teacher holds the basket.

Teachers need to be aware of their own food experiences and reactions to help them understand children's perspectives. Respect children's reaction to foods, such as today it is their favorite but the next time the same food is served they may not like it. Do not be discouraged by their reaction but rather be consistent in your reaction to their response. Use a calm voice and positive words. Think about what comments/phrases made by adults will encourage or discourage children at mealtime.

Mealtime behavior and manners need to be demonstrated by teachers. Children learn by watching and hearing. Food must not be used as reward or punishment for children's actions, nor should children be forced to eat all their food.

Teachers must be good role models during mealtime by eating the same foods as children, unless there is a medical exception. Maintaining a positive attitude about foods being served, even though it is not a favorite of yours, will be noticed by children.

Mealtime routines should be established so children will know what to expect. Mealtime is a social time. Talk with each child during mealtime to develop social skills. Expectations regarding manners must be appropriate and coincide with the abilities of children. Encourage children to engage each other in conversation. Learn about the child's culture and its impact on their eating habits and mealtime behaviors.

All children and adults need to sit at the table and have eye contact with each other, thus aiding in conversation. Teachers should sit at the center of the table to be accessible to all children and remain seated during meal service, providing guidance when needed. Children should be observed as they eat to determine how they are doing, and to make sure they have finished chewing and swallowing before leaving the table.

Patience is required to allow time for children to make decisions about foods and to practice table skills. Provide mealtime instruction for children. Describe each food and demonstrate serving yourself foods as they are passed: For example: state "we are having roast beef;" take a piece of meat; serve yourself a spoonful of mashed potatoes; take one dinner roll; serve yourself a spoonful of peas; and pour milk in your cup. When meals are served family style, children can decide what food and how much they will serve to themselves. Encourage children to help each other serve themselves. One child can hold the cup while the other one pours his/her own serving of milk.

Some drops and spills are to be expected as children learn self-feeding skills and serve themselves. Guidance and assistance should be given to children, as needed, so they are responsible for cleaning up spills/drops.

Allow sufficient time for children to enjoy conversation and finish their meal. When children are not rushed they can enjoy foods and learn about food tastes.

Evaluate mealtimes to determine if best practices are followed to meet children's growth and development needs. Identify goals for improving your mealtime experience in order to best meet the needs of the children you are serving.

Artificial Sweeteners: Are They Safe for Children?

Potential Benefits

In light of the obesity crisis you may be asking, “Can artificial sweeteners help solve the problem?” and if so, “Are they safe for children?” Another concern is that the number of products containing artificial sweeteners has increased and they may be hard to avoid.

Artificial or “non-nutritive” sweeteners have a fraction of the calories that “nutritive” sweeteners, such as sugar and high fructose corn syrup, provide so it would be reasonable to conclude that using artificial sweeteners would reduce calorie intake. Since nutritive sweeteners provide calories with few nutrients, another advantage of using artificial sweeteners is to potentially increase the nutrient density of the diet; in other words, to provide more nutrients while consuming fewer calories.

Five Approved Sweeteners

The Food and Drug Administration (FDA) has approved five non-nutritive sweeteners: Aspartame-Nutrisweet, Acesulfame-K, Saccharin, Sucralose-Splenda, and Neotame. Neotame is so new that it hasn’t yet appeared in any foods. Another sweetener called stevia is on the market as a *supplement*, but has *not* been approved as a sweetener. Stevia is an extract from a shrub that grows in South America. While it is a natural product, little research has been done on stevia and the available studies point to possible concerns regarding control of blood sugar, and effects on the reproductive, cardiovascular and renal systems. The evidence available has led the FDA and WHO to conclude that stevia, may *not* be used as a food ingredient.

Another category of sweeteners are those that still provide calories, but fewer than traditional sweeteners. Examples include sugar alcohols such as sorbitol, xylitol, and tagatose. These products are considered safe; but large amounts can cause gas, nausea, and diarrhea.

Safety for Children

Approved non-nutritive sweeteners can be used by children if amounts consumed are within the Acceptable Daily Intake (ADI), which is the estimated daily amount that a person can safely consume over a lifetime without risk. The ADI is a conservative amount, 100 times less than the maximum dose where no-observed-effect is seen (primarily in animal studies). Use levels for artificial sweeteners are set to assure that intakes are below the ADI. Estimated daily intakes are monitored in light of ADIs. If estimated daily intakes exceed the ADI, there may be limitations on use of the sweetener.

According to the American Dietetic Association, the estimated intakes of non-nutritive sweeteners in children are below the ADI for all approved sweeteners.

According to the Pediatric Nutrition Handbook published by the American Academy of Pediatrics, the FDA approved non-nutritive sweeteners are an acceptable alternative for children with diabetes. While the approved non-nutritive sweeteners appear to be safe for most people, some may have individual intolerances. For example, the most common complaint associated with Aspartame is headache. In addition, it has been suggested by some that caregivers may want to limit the intake of Saccharin and Acesulfame-K by young children until they can be more thoroughly researched.

New Year! New You! Bright Ideas for Using Eat Smart. Play Hard.™ Materials

Start the New Year out smart. Visit Eat Smart. Play Hard.™ Healthy Lifestyle at <http://www.fns.usda.gov/eatsmartplayhard/> for recipes, menus, tips, and other tools to help adults make healthy eating and physical activity choices while being role models for kids.

This site contains information and resources to:

- Help you get started,
- Help you make smart choices,
- Prepare quick, easy, and healthy meals that taste good, and
- Provide you with tips on how to increase physical activity in your life.

You'll also find a Calorie Burner Chart, My Pyramid Tracker and the ESPH Tracking Card—all the tools you need to begin eating healthier and be more active every day.

Try Carrots in New Ways



Carrots are in season during winter months. They are good sources of important vitamins and minerals and can be served in many different ways. Below are ideas and recipes.

Carrots are great

- cooked and served as a side dish or in soups and stews
- grated in salads, sandwiches, muffins, quick breads, and cakes
- included in soups such as the **10 Minute Veggie Soup** recipe below or pureed and combined with chicken broth
- served raw, boiled, steamed, microwaved, or blanched.

10 Minute Veggie Soup

Preparation time: 10 minutes; allow to rest for 5 minutes before serving



Serves: 24 - ¾ cup servings: ¼ cup vegetable and ¼ grain/bread per serving

4-29-oz.cans low-sodium chicken broth

2-14.5-oz. cans diced tomatoes – no salt added

2 tsp. dried basil

1 tsp. onion powder

1 ½ cups macaroni, dry

6 cups froz. mixed broccoli, cauliflower, and carrots

¼ tsp. salt

Combine chicken broth, diced tomatoes, basil, and onion powder. Bring to a simmer and add pasta and frozen vegetables. Cook for 6 minutes and remove from heat. **Note:** Pasta will not be cooked all the way through. Let soup sit for 5 minutes and pasta will become soft. Soup will then be ready to serve.

From the Cool Fuel for Kids Cookbook, a Fruits & Veggies—More Matters™ recipes developed for Produce for Better Health Foundation by Chef Mark Goodwin, CEC, CNC.

For a creditable lunch for 3-5 year olds, serve with 2 whole grain saltines, 3/8 c. cottage cheese, 1/4 c. diced peaches and ¾ c. milk.

Orange Glazed Carrots I-12A*

Number of servings: 25

Serving size: 1/3 cup (No. 12 scoop) provides 1/4 cup of vegetable.

1 Tbsp Cornstarch

1/2 cup Water, cold

1 qt + 3 cups Canned sliced carrots, drained OR

2 qt frozen sliced carrots

1/4 cup Margarine or butter

1/4 cup + 2 Tbsp Brown sugar, packed

1/4 cup + 2 1/2 Tbsp Frozen orange juice concentrate

1/2 tsp Ground nutmeg (optional)

1/2 tsp Ground cinnamon



Combine cornstarch with cold water until dissolved and set aside to be used in preparing glaze.

Place carrots in pan (9" x 13" x 2"). For glaze, combine margarine or butter, brown sugar, orange juice concentrate, nutmeg (optional), cinnamon, and dissolved cornstarch. Stir to blend. Bring to a boil.

Remove from heat. Pour glaze over pan of carrots.

Bake: Conventional oven: 375° F for 20-30 minutes;

Convection oven: 325° F for 15-20 minutes. Heat to

135° F or higher for at least 15 seconds. Hold for hot service at 135° F or higher. Portion with No. 12 scoop (1/3 cup).

From the USDA Recipes for Child Care at

http://www.nfsmi.org/Information/cc_recipe_index_alpha.htm.

Cultural and Religious Special Diets

Some dietary restrictions are closely related to religious or cultural practices. Particular cultures and religions restrict certain foods and may have annual observations where a variety of special dietary practices are observed. These special dietary practices may vary between families. It is important to find out family policy and practice concerning their religious and cultural diets at the time of enrollment. The center is encouraged to work with the family to accommodate cultural and religious dietary requests; however, it is the center's decision if they choose to accommodate the special religious or cultural dietary request. It is important to substitute an acceptable meal component that is also a reimbursable component in order to claim that individual meal or snack.

Offer Vs. Serve Option for Adult Day Cares

Your adult day care program may choose to use the “offer vs. serve” option. With this option, you must offer each participant meals that meet CACFP component and quantity requirements. Your program may allow participants to decline a certain number of items without affecting the price or CACFP reimbursement for the meal. This option is not available for snacks since the snack has only two food items. Participants may be permitted to decline:

- **BREAKFAST:** Participants may decline one serving of the four required meal items.
- **LUNCH:** Participants may decline two servings of the six required meal items.
- **SUPPER:** Participants may decline two servings of the five required meal items.

Using the “offer vs. serve” option is a way to increase food consumption and decrease waste because participants in your adult day care center choose only those foods they wish to eat. Assistance with meal component selection may be necessary in order to provide well-balanced meals. Additional servings of required meal components may be provided to increase food intake and decrease plate waste.

Emergency Shelter Meal Counts

Emergency shelters may only receive CACFP meal reimbursement for eligible residents age birth-18 years (children) and disabled adults of any age. Therefore, rules regulating emergency shelters require emergency shelters to maintain records showing eligibility for shelter services of the persons they serve. Since CACFP assumes all emergency shelter resident children and disabled adults are low-income, CACFP emergency shelter meal count records require only the list of shelter residents and the daily meal count, by name, for each type of meal served. All meals are reimbursed at the free rate.

Outside School Hours Care Center (OSHCC) Meal Counts

Vs.

At-Risk Afterschool Snack Program (ARASP) Meal Counts

OSHCCs and ARASPs are similar in some ways because they both serve children only part of the day (compared to full day child care), but they are also very different and have different CACFP recordkeeping requirements for meal counts.

OSHCCs may operate in any geographic area year around (even when the school year is over) and generally serve meal types traditionally served before school starts in the morning, such as breakfast and after school such as pm snack or supper. Each meal is reimbursed based on the income eligibility of the child who eats the meal. Therefore, OSHCC meal count records must include each type of meal recorded for each child, by name, and eligibility level (free, reduced-price, or paid).

ARASPs may operate only in low-income areas identified by the State agency, serve only one snack daily (generally in the afternoon) and only during the school year. Since snacks are probably served to only low-income children, because of the location of the ARASP, all snacks are reimbursed at the free rate. Therefore, ARASP meal counts only record and report total snacks.

In both cases, meal counts must be done at point of service and be accurate. A separate record of attendance must be kept. A good edit check for accuracy is to ensure that total daily meal counts for each type of meal never exceed the number of children in attendance.



CACFP Training Opportunities

“Steps to CACFP Success” • 2/12/08 • 4/22/08 •
8:00 a.m. - 4:30 p.m.



This workshop includes basic requirements for CACFP participation with sections on menu planning, food production records, income

application approval, claims submission, financial documentation, administrative and supervision requirements, civil rights, and infant feeding. You may attend one or more sections.

Attendance at the “Steps to CACFP Success” workshop is highly encouraged when CACFP staff responsibilities change or when there are new staff members with CACFP responsibilities. All key staff with CACFP responsibilities must be trained prior to Program operations and receive at least 1½ hours of CACFP related training annually thereafter (or as much as needed to complete CACFP duties correctly). The entire “Steps to CACFP Success” workshop or selected sessions is one way to fulfill this training requirement. Other state-sponsored trainings or center-based CACFP trainings also meet staff training requirements. All CACFP training must be documented. See Chapter 7 of the CACFP Recordkeeping Manual for Centers for acceptable documentation and forms.

Board members of non-profit centers are encouraged to attend “Steps to CACFP Success” to learn responsibilities for CACFP participation, and to provide support and assistance for center staff personnel. Board members are also responsible for continuity of CACFP operations and compliance with CACFP federal requirements when there is a change in center directors. Registration materials and session descriptions are available online at: <http://www.iowa.gov/educate/content/view/410/866/> Please register using the registration form by mail, fax, or e-mail. ICN site locations are subject to change. An ICN site will be cancelled if there are no registrations for the ICN site 8 days prior to the workshop.

Mark Your Calendar--“Infant Nutrition” • 6/26/08
and “Preschool Nutrition” • 6/27/08

Held at DMACC in conjunction with the Iowa Department of Health WIC Program and

CACFP Summer Short Course • 7/9/08 thru 7/11/08
(tentative dates and location)

Held at Scheman Auditorium at Iowa State University in Ames.

Early Civil Rights Training Announcement

Watch your mail for the notice for training opportunities for train-the-trainer sessions on civil rights. USDA requires annual training in civil rights for all front line staff and supervisors of front line staff. This training is designed to equip administrative staff and supervisors to provide the annual training. It is also appropriate for front line staff.

The training will be held April 3 from 2-4 p.m. and it will focus on the needed actions to meet USDA civil rights requirements. It will be broadcast over the ICN or *K-12 Connections*. **You will receive in the mail a notice, sign up information, and guidance in February.**

Web Resources

Resources for Cultural and Religious Special Diets

Healthy Meals Resource System (HMRS)

Providing information to persons working in the USDA's Child Nutrition Programs. The Special Diets resources tab is located on the left side column on this web page. The resources listed inside have informational websites dealing with various types of cultural and religious special diet information.

http://healthymeals.nal.usda.gov/nal_display/index.php?info_center=14&tax_level=1

Child and Youth Health Website

Provides an explanation for children on religious and cultural special diets. <http://www.cyh.com/HealthTopics/HealthTopicDetailsKids.aspx?p=335&np=284&id=2286>

Vegetarian Nutrition Resource List

This publication offers websites and information on the vegetarian diet <http://www.nal.usda.gov/fnic/pubs/bibs/gen/vegetarian07.pdf>



Common Question When Submitting a Claim



The most frequent question/issue when submitting a claim for CACFP reimbursement is “I have a message that says ‘Submit for Processing button is disabled due to Sponsor Claim errors.’ on my Reimbursement Claim Menu screen.”

This message (see Example A) will appear when you first add your claim. It is an automatic error message built into the system. If you ignore this message and continue your steps for submitting your claim without error, this message will disappear and the **Submit for Processing** button will be activated for processing.

Please refer to the form download CACFP Manual Chapter 6 On-line instructions.

The screenshot shows the Iowa Department of Education Child and Adult Care Food Program website. The main heading is "CACFP Reimbursement Claim(s) Menu". Below this is a "Monthly Claim Form" table with columns for Sponsor Name, Agreement Number, Month Claimed, and Revision. The data row shows "CHILD CARE", an empty Agreement Number, "Oct 2007", and "0". Below the form is a table with columns for Action, Title, Status, Errors, and Last Updated. The rows are: "Institution Financial Report" (Status: , Errors: 0), "Center Claim" (Status: , Errors: Number of Center Claims: 0), and "Reimbursement Statement" (Status: , Errors:). At the bottom, a yellow error message box states "Submit for Processing button is disabled due to Sponsor Claim errors." Below the message are three buttons: "< Back", "Cancel", and "Submit for Processing". Red arrows point from the error message to the "Submit for Processing" button.

(Example A)

Please send us questions you have about using our website(s) and we will attempt to answer them via email, newsletter or both. Please send your questions to ellen.miller@iowa.gov.

USDA Nondiscrimination Statement

"In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability.

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If you have questions or grievances related to compliance with this policy by the Iowa Department of Education, please contact the legal counsel for the Iowa Department of Education, Grimes State Office Building, Des Moines, IA 50319-0146, telephone number 515/281-5295; or the Director of the Office for Civil Rights, U.S. Department of Education, Citigroup Center, 500 W. Madison Street, Suite 1475, Chicago, IL 60661, telephone number 312/730-1560, fax 312/730-1576, email: OCR.Chicago@ed.gov.

New Infant Feeding Resource

InfaNET Nutrition for Child Care Providers is a new web site developed by Colorado State University located at:
<http://www.infanet.caahs.colostate.edu/moreinformation.htm>

The role of child caregivers is to provide good nutrition for infants in a safe and appropriate feeding environment.

Although USDA's **Feeding Infants: A Guide for use in the Child Nutrition Programs** should be your primary resource, this web site includes additional handouts for parents and infant caregivers available in English and Spanish. Three infant feeding topics are included: Breastmilk, Bottle Feeding and Introducing Solid Foods. Examples of handouts from the infant feeding topics are:

- Parents' Guide to Breastfeeding and Child Care Centers
- 10 Ways to Create and Promote a Breastfeeding Friendly Environment in Your Center
- Breastmilk: Guidelines for Child Care Providers
- Storage and Preparation of Breastmilk and Formula
- Bottle Do's and Don'ts
- When, What, Why and How: Introducing Solid Foods
- I'm Hungry – Watching Infant's Feeding Cues

The handouts may be used for staff providing infant care as part of their CACFP infant feeding training. They may also be useful to share with parents when there is a question about infant feeding.



USDA Feeding Infants Guide— Ham and Cured Meats

The CACFP meal pattern for infants' age 8–11 months includes the option to serve 1-4 tablespoons meat, fish, and poultry at lunch/supper. Lean meats and poultry are healthy choices. Meats high in fat and/or sodium and low in protein are not reimbursable, including hot dogs, bologna, bacon, luncheon meats, fried meats, and cured meats.

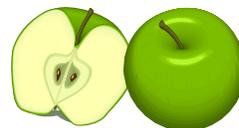
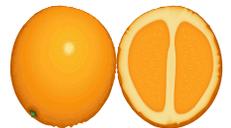
Second Foods™ Ham and Gravy, Chicken and Gravy, and Beef and Gravy are reimbursable foods. A question was asked: if cured meats are non-reimbursable, why is the Ham and Gravy product reimbursable? The ingredients on the Ham and Gravy product label are Fresh Ham, Water and Corn Starch. Fresh ham is not a cured meat product, thus allowing this product to be reimbursable.



Exploring Foods Workbook

A CACFP goal is to help young children establish good eating habits by being introduced to new foods or familiar foods prepared in new ways. Children can be guided to learn about foods by using their senses.

The Exploring Foods workbook provides questions to ask children to help them explore the inside and outside of fruits and vegetables using their senses: seeing, hearing, smelling, feeling and tasting. Examples of questions to ask children about the inside and outside of fruits and vegetables include:



- What color is it?
- What does it feel like?
- What does it smell like?
- Is it noisy when you chew it?

Does it taste like another food you like?

Consider planning the next children's food activity or mealtime discussion using this resource. For a copy of the Exploring Foods workbook contact Janelle Loney at 515-281-5356 or janelle.loney@iowa.gov

Julia's Tidbits

The Bureau of Nutrition, Health and Transportation Services periodically offers training for the School Nutrition Programs in conjunction with Iowa Public Television over the Iowa Communications Network (ICN) through programming called K-12 Connections. With this programming, the ICN site locations for viewing are determined at the time of registration. Only limited types of content are eligible for this type of programming. Training on three topic areas are upcoming that the Bureau Staff feel would have applicability for Child Care as well and so would like to invite CACFP participants to consider attending. Because the majority of the audience will be school personnel, CACFP participants will have to understand that the language used may focus on schools, however it is felt the translation to the CACFP environment is something that participants could do easily on their own. The three workshop topics are Dealing with Norovirus, Special Dietary Needs, and Civil Rights (see article elsewhere).

Norovirus School Prevention and Management

Iowa Communications Network (ICN)

Monday, January 28, 2008, 2:00 p.m. – 3:00 p.m.

Register for session and site at Iowa Public TV K-12 Connections: <http://www.k12connections.iptv.org/>

As a result of confirmed cases of norovirus in Iowa, schools have been identified as potential sites for norovirus outbreaks.

This ICN session will identify measures that can significantly reduce that risk. The session will:

- Explain the epidemiology of norovirus
- Describe key steps in managing an outbreak of norovirus within a school setting,
- Discuss recommended environmental cleaning steps used during a norovirus outbreak, and
- Identify additional resources for school officials.

Intended audience: School nurses; administrators; school personnel; food service personnel; environmental management personnel; local public and environmental health staff, athletic directors, coaches, and others.

Presenters: Kenneth Soyemi, MD, MPH, Deputy State Epidemiologist/Medical Director, Center for Acute Disease Epidemiology, Iowa Department of Public Health and Sarah M Brend, MPH, Epidemiologist, Center for Acute Disease Epidemiology, Iowa Department of Public Health
Meeting Special Dietary Needs in Child Nutrition Programs - Information and Guidance -Presented in two ICN sessions:

March 4, 2008, 2:00-4:00 PM

Introduction: *Meeting Special Dietary Needs in Child Nutrition Programs*

Legal requirements: Lesson 1

Children with diabetes: Lesson 2

April 8, 2008, 2:00-4:00 PM

Children with allergies: Lesson 3

Children with inborn metabolism errors: Lesson 4

Intended participants: Child nutrition programs personnel and partners including: school food personnel; child care personnel; school nurses, occupational therapists, school personnel, and others.

Overview

Children with special food and nutrition needs are increasing. Serving these children with special food and nutrition needs presents challenges and rewards. The required food services to meet the children's special food and nutrition needs necessitate personnel know, understand, and provide reasonable accommodations.

Check the Bureau website and warrant inserts for more information on registering for these classes.

