

From: [SM.FN.CACFP-SummerResponses](#)
To: [Mary Ann Liby](#)
Subject: Summer Food Service Program Waiver Request Receipt
Date: Monday, February 14, 2022 3:07:38 PM
Importance: High

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Hello,

Thank you for submitting your Summer Food Service Program waiver via the 2022 Summer Food Service Program Waiver Request Form. Here's a summary of your request. If you see that any details are not correct or if you wish to change your submission, please contact your Food and Nutrition Service Regional Office.

Regards,

The Food and Nutrition Service Waiver Team

Region:
WRO

State:
Idaho State Department of Education

Name of State director:
Lynda Westphal

State agency mailing address:
650 W State St. Boise, ID 83702

Name and title of person completing this form:
Mary Ann Liby, SFSP/CACFP Coordinator

Do you have authority to complete this waiver request on behalf of the State director?
Yes, I have the authority.

Email address of person completing this form:
mliby@sde.idaho.gov

Email address for each State agency staff for FNS to include on the waiver response:
LJWestphal@sde.idaho.gov; dayarra-sykes@sde.idaho.gov

Waiver type:
Meal Service Time Restrictions requirements under 7 CFR 225.16(c)(1) and (c)(2)

Statewide or specific service provider:
Statewide

Name of service provider, if applicable:

Is the service provider in good standing, if applicable:

What challenges would sponsors face without the waiver?

["Increase in administrative burden", "Increase in labor costs", "Exacerbation of staffing shortages", "Negative impact on the ability to meet the needs of children and at-risk youth.", "Revision of monitoring or training materials."]

How will the waiver benefit sponsors?

["Control costs", "Streamline processes", "Allow sponsors to schedule meal service times that align with community activity programs and resources."]

Regulations and statute to be waived:

I agree with waiving the regulations at 7 CFR 225.16(c)(1) and 225.16(c)(2), only.

Describe the program procedures that will be in place under the waiver:

No additional Program procedures and no anticipated impact on Program operations as sponsors have been operating under the policy waivers for several years and granting the waiver would require no changes to current sponsor program operations.

Describe any anticipated challenges under the waiver:

There are no anticipated challenges by either the State or eligible service providers with the waiver implementation as it would enable sponsors to continue operating programs without adjusting current operations.

Waiver period:

I agree to the waiver period of May 1, 2022 to April 30, 2023.

Describe the steps the State agency of service provider will take to successfully implement the waiver:

During annual program renewal, sponsors are required to indicate the intended meal service times for each meal service at each site of proposed operation and any variations to the scheduled meal times. If there is need for a mealtime schedule change, the Health Department must be notified and the State agency must approve the change. This must be approved by the State agency prior to program operations.

Please provide a link to the public notice:

<https://www.sde.idaho.gov/cnp/>

Signature and title of requesting official:

Mary Ann Liby, SFSP/CACFP Coordinator.

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