

NY HPNAP Reporting

Purpose of this document

This document illustrates how to setup the HPNAP in order to comply with the reporting requirements set forth by the state of New York. The HPNAP (Hunger Prevention and Nutrition Assistance Program) reporting system within Ceres provides the ability to comply with the reporting requirements set forth by the state of New York. After some initial setup, Ceres provides the ability to record the required information and export it in a format acceptable to the governing authority. This document is comprised of three sections, Setup, Review, and Reporting

Ceres Object release 5.00.00 is required for the functionality described in this document.

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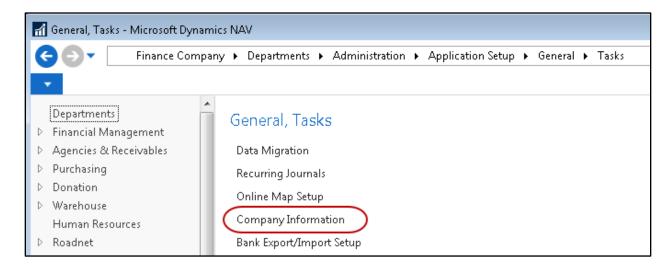
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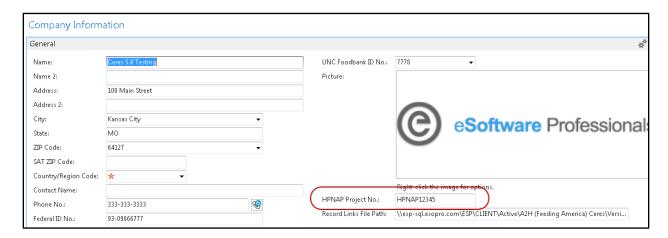
Setup

Company Information Setup

The company information page may be accessed from Departments \rightarrow Administration \rightarrow Application Setup \rightarrow General \rightarrow Tasks



Enter the HPNAP Project Number assigned to the food bank on the General Fast Tab. For example we have entered the project number 'HPNAP12345' on our test company. The HPNAP Project Number is the ID that the State of New York uses to distinguish each food bank. This HPNAP Project Number will print on the header of each report and will be included in all export files.



Agency Setup

The next step is to assign the HPNAP information to each agency participating in the HPNAP program. This is done on the "State Specific" fast tab on the agency card. The agency card may be accessed from Departments \rightarrow Agencies & Receivables \rightarrow Agency Relations. Fill out the information required for HPNAP on the "State Specific" fast tab as shown here.

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HPNAP ID: This field is used to report all HPNAP transactions for this agency to the State of New York.

HPNAP Agency Type: Use this field to classify the type of program this agency is providing.

HPNAP Meal Factor: Use this field to enter the meal factor number as defined by HPNAP. To calculate the meal factor, multiply the number of days open in the week times the number of meals per day. Example: 3 days x 3 meals a day is a meal factor of 9 (3 x 3).

First Name: Enter the first name of the contact at the agency responsible for HPNAP reporting.

Last Name: Enter the last name of the contact at the agency responsible for HPNAP reporting.

Phone No: Enter the HPNAP contact's phone number.

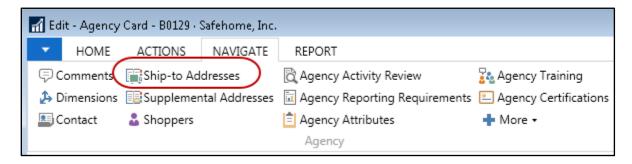
E-mail: Enter the HPNAP contact's email address.

HPNAP Comments: Enter any comments regarding HPNAP that you wish to record about this agency.

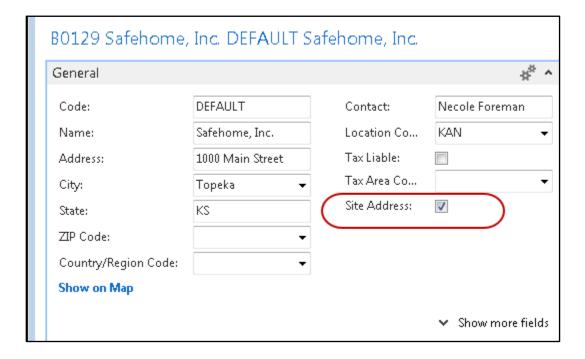
Repeat this process for all agencies participating in HPNAP.

Agency Site Address

From the agency card, you can enter related ship-to addresses for the agency. One of these ship-to addresses can be designated as the site address which is the physical site address. Only one address per agency can be marked as the Site Address. To access Ship-To information for an agency select Navigate \rightarrow Agency \rightarrow Ship-to Addresses.



On the Ship-to Address card, you can designate the site-address by checking the Site Address box as shown here.



Agency Days and Hours Setup

This form is used to record the hours of operation for each agency. The agency days and hours page may be accessed from Departments \rightarrow Agencies & Receivables \rightarrow Agency Relations



Fill out the required information for each agency.

Agency [Days and H	ours *							
Agen No.	Day of Week	Morn Open	Morning Closing	Afternoon Opening	Afternoon Closing	Frequency	Comments	24/7	Meal Types
1011A	Monday	8:30:00 AM	11:30:00 AM	1:30:00 PM	4:00:00 PM				
1011A	Tuesday	8:30:00 AM	11:30:00 AM	1:30:00 PM	4:00:00 PM		Please contact Ronaldo.		
A0440	Monday	8:00:00 AM	11:00:00 AM	2:00:00 PM	4:00:00 PM				
A0442	Sunday	10:00:00 AM	1:00:00 PM				Copy to Test		
A0442	Monday	8:00:00 AM	12:00:00 PM	1:00:00 PM	5:00:00 PM				
A0442	Tuesday	8:00:00 AM	12:00:00 PM	1:00:00 PM	5:00:00 PM				
A0442	Wednesday	8:00:00 AM	12:00:00 PM						
A0442	Thursday	10:00:00 AM	1:00:00 PM	2:00:00 PM	6:00:00 PM				
A0442	Friday	8:00:00 AM	12:00:00 PM	1:00:00 PM	5:00:00 PM				

Agency No.: Enter a valid agency number or use the assist-button to choose from available agencies.

Day of Week: Use the assist button to select the correct day of the week.

Morning Opening Hour: Enter the time the agency begins morning service.

Morning Closing Hour: Enter the time the agency closes morning service.

Afternoon Opening Hour: Enter the time the agency begins the afternoon service.

Afternoon Closing Hour: Enter the time the agency closes afternoon service.

Frequency: Enter the frequency for this day of the week, for example if the agency is only open on the 1st and 3rd Tuesdays of the month, you could enter 1st & 3rd if on the Tuesday entry for this agency.

Comments: Enter any comments about this entry, for example, if the agency closes on Monday holidays, you may enter this information in the comments field.

24/7: Check this box if the agency is open 24 hours a day, 7 days a week.

Meal Types: This is a free form field where you can indicate the type of meals served. For example, using B for breakfast, L for lunch, and D for dinner, indicate what meals are served on this day. B/L/D could be used to indicate that all 3 are served on this particular day, whereas B/L would indicate that only breakfast and lunch are served.

Last Modified Date: This field is updated automatically by Ceres when the entry is modified.

Last Modified By: This field is updated automatically by Ceres recording the user that last modified this record.

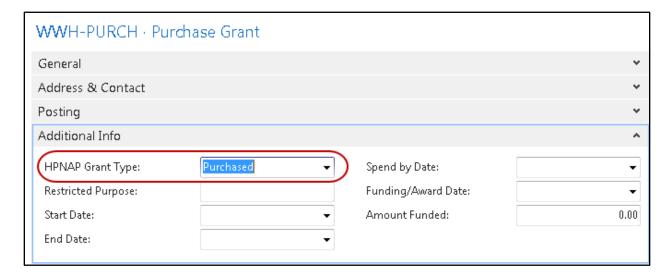
Agency HPNAP ID: This field is updated automatically by Ceres when the agency number is entered. It is used here for reporting purposes.

Grant Setup

The grant page may be accessed from Departments → Financial Management → Cash Management



On all HPNAP grants you must indicate the type of HPNAP Grant as shown here below.



HPNAP Grant Type: Specifies what the grant covers.

Donated – This indicates if the grant money may be applied to donated products shared maintenance fees

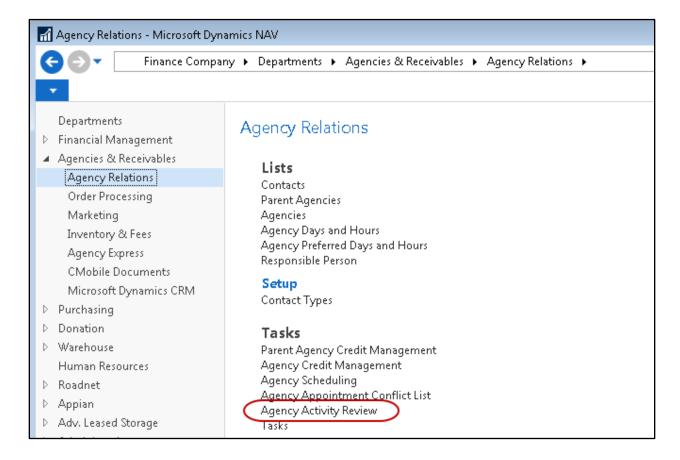
Purchase - This indicates if the grant money may be applied to only for purchased products.

Both - This indicates if the grant money may be applied to donated products shared maintenance fees, only for purchased products, or for both.

Review

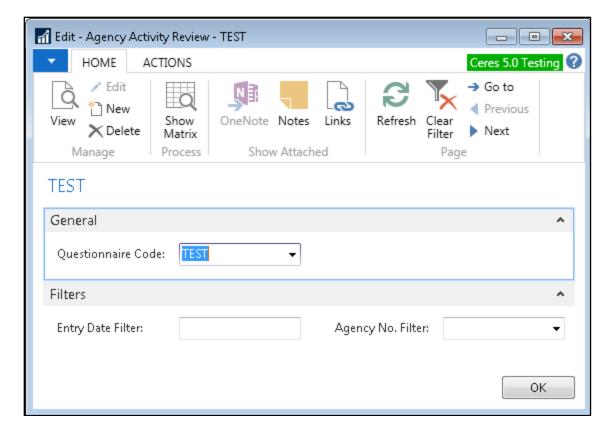
Agency Questionnaires must be setup to enter the monthly review HPNAP information. Information for setting up questionnaires can be found in this document "Agency Questionnaires".

Agency Activity Review may be accessed from Departments → Agencies & Receivables → Agency Relations



Choose the correct review to perform. We used the code HPNAP in this example. Then click on "Show Matrix" to open the review form.

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The Activity Review Matrix will open where you can edit an existing review that has not been exported or enter a new review. Answer the questions in each column and if the entry is ready for export to HPNAP, remember to check the Ready to Export box. Do not check the box if the entry is not complete.

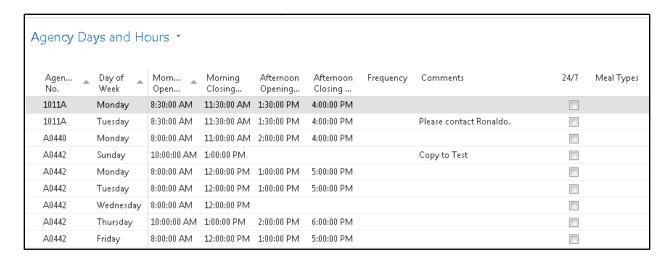
Note: Only reviews marked as "Ready To Export" will be sent to HPNAP.

Reporting

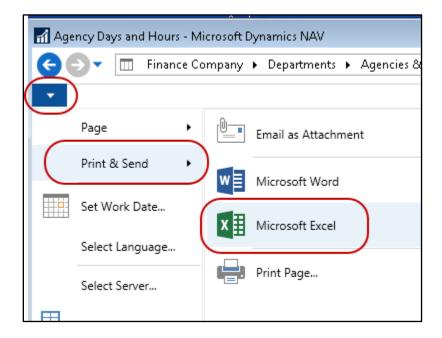
Agency Days & Hours

This report is different than the other HPNAP reports in that it is created by using the standard send-to-Excel feature of Ceres. To create the report for HPNAP, you must open the Agency Days & Hours page. It may be accessed from Departments → Agencies & Receivables → Agency Relations.

Note: Be sure to show all the fields required by HPNAP on the page before sending to Excel, including the Agency HPNAP ID field.



Choose the send-to-excel option from the ribbon by choosing Dropdown \rightarrow Print & Send \rightarrow Microsoft Excel.



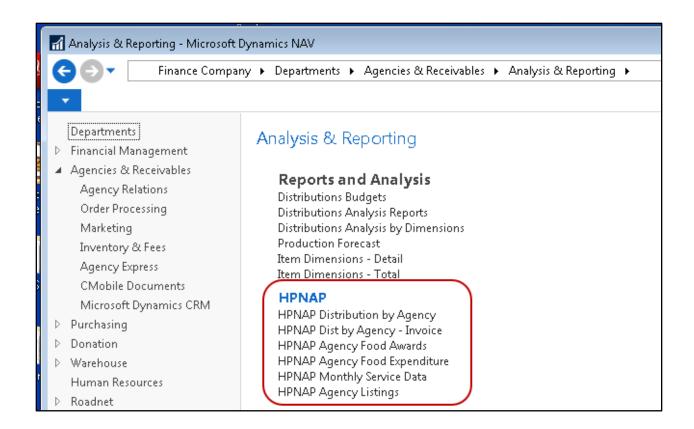
Once the information has been loaded into Excel, it may be saved as a CSV file for transmission to HPNAP.

HPNAP Reports

All the HPNAP reports may be accessed from Departments \rightarrow Agencies & Receivables \rightarrow Reports and Analysis.

Note: If exporting the information to HPNAP it is important that the fiscal year be entered on all reports as it is required for submission.

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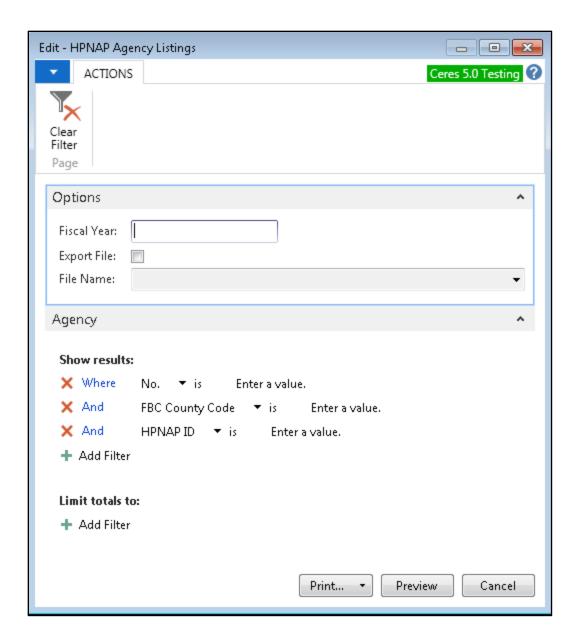


HPNAP Agency Listings

The Agency Listing report will show the name and address of the agency along with all the pertinent HPNAP fields. The HPNAP ID field is required on the agency record in order for the agency to be included on this report. If a site-address has been setup for the agency, this address will be used otherwise the general address from the Agency Card will be used.

The report has the option to create both a printed report and a CSV export of the Agency Information.

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Example HPNAP Agency Listings Report:

ΗΡΝΔΡ Δα	ency Listing				3/26/2020 9:36 Al
Ceres 5.0 Te	-				Page
00103 0.0 10	oung				ESOPRO\RX
Agency:					
HPNAP Proje	ect No.: HPNAP12	345			
Fiscal Year:					
HPNAP ID	Agency No.	County \Program Type \Meal Factor	Name \Address \City - ZIP	Contact \Phone \Email	HPNAP Comments
10011	A0440	Platte	Synergy Services-+	David Collins	These are HPNAP comments####################################
		This Type	101 Test Street+q+	222.123.1456	
		3	Boise - 78954	me@email.com	
					These are HPNAP
10011	A0441	Platte	Synergy Services-TEST	David Collins	commentsffffffffffffffffffffffffffffffffffff
		This Type	101 Test Lane	222.123.1456	
		3	Portland - 78954	me@email.com	
1002	A0442	Lafayette	Synergy Services-2		
		-	Do Not Disclose		
		0	Do Not Disclose		

Agency Food Expenditures

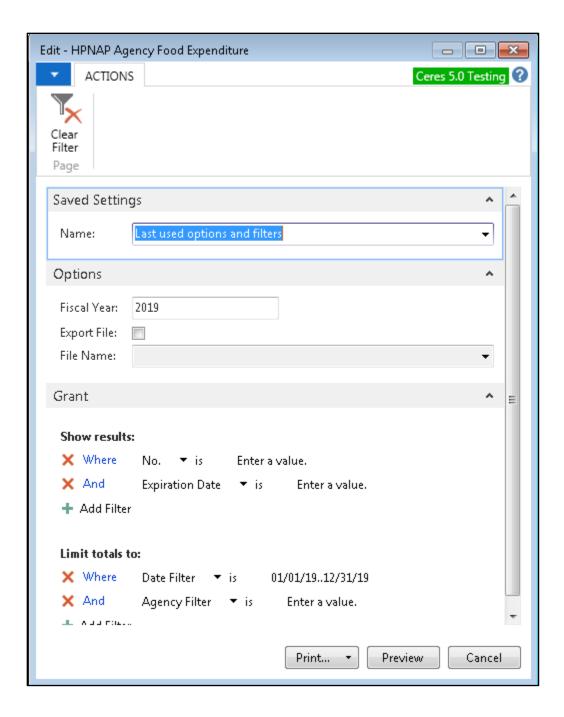
The Agency Food Expenditures report requires that the Grant functionality is used to track the HPNAP grant monies.

This report is intended to be submitted at the end of the year right after all of the allocations have been made to the Agencies to show how much each Agency spent throughout the year. (The initial allocation amounts are submitted at the beginning of the year via the Agency Food Awards report.)

This report prints all agencies that meet the criteria entered in the report filters as long as the Agency has been allocated money from a HPNAP grant.

The report has the option to create both a printed report and a CSV export of the Agency Information.

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Example HPNAP Agency Food Expenditure Report:

Safehome, Inc.

PNAP Agency	Food Expenditures						3/26/2020 9:38 AM
nance Company							Page 1
							ESOPRO\RXF
Grant: Date Filter: 0	1/01/1912/31/19						
HPNAP Project No.	is HPNAP12345						
Fiscal Year is 2019							
Only Used to Date a	amounts are exported. Amount on Orders	and Total Expenditures are	for information	only (they are i	not exported).		
Grant No.	Grant Description	HPNAP Grant Type	Agency HPNAP ID	Last Exp. Date	Used to Date	Amt. On Orders	Total Expenditure
Grant No.	Grant Description			Date			Total ExpenditureNot Exported
Grant No. 2500	Grant Description HN County Grant FY10: Apr/M.	Туре		Date	Date		Not
	·	Туре		Date	Date		Not
	HN County Grant FY10: Apr/M:	Туре	HPNAP ID	Date	Date -Exported-	Orders	Not Exported
	HN County Grant FY10: Apr/M Synergy Services-2	Type ay A0442	HPNAP ID 1002 1006	Date 6/18/2019	Date -Exported- 16.20	Orders 817.83	Exported 834.03
	HN County Grant FY10: Apr/M Synergy Services-2	Type ay A0442 B0129	HPNAP ID 1002 1006	Date 6/18/2019	Date -Exported- 16.20 24.72	817.83 619.52	Not Exported 834.03 644.24

1006

7/12/2019

49.94

49.94

434.00

456.88

483.94

506.82

B0129

Grant 9032 Totals:

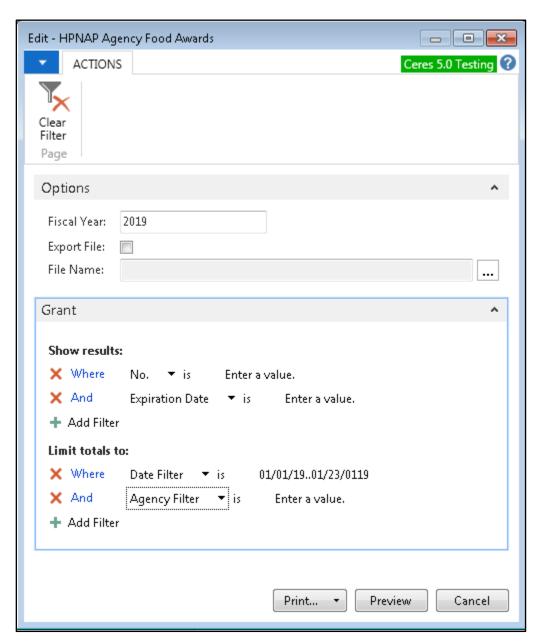
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HPNAP Agency Food Awards Report

This report requires that the Grants functionality is used to track the HPNAP grant monies.

This report is intended to be submitted at the beginning of the year right after the initial allocations have been made to the Agencies, to show how much each Agency was granted. The report prints all Agencies that meet the criteria entered in the report filters as long as the Agency has initially been allocated money from a HPNAP grant.

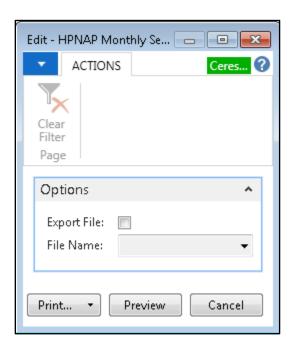
The report has the option to create both a printed report and a CSV export of the Agency Information.



HPNAP Monthly Service Data Report

This report will export the information gathered though agency questionnaires. Each record in the agency questionnaire that has been flagged as ready to export that has not already been exported will be included in the submission file.

The report has the option to create both a printed report and a CSV export of the Agency Information.

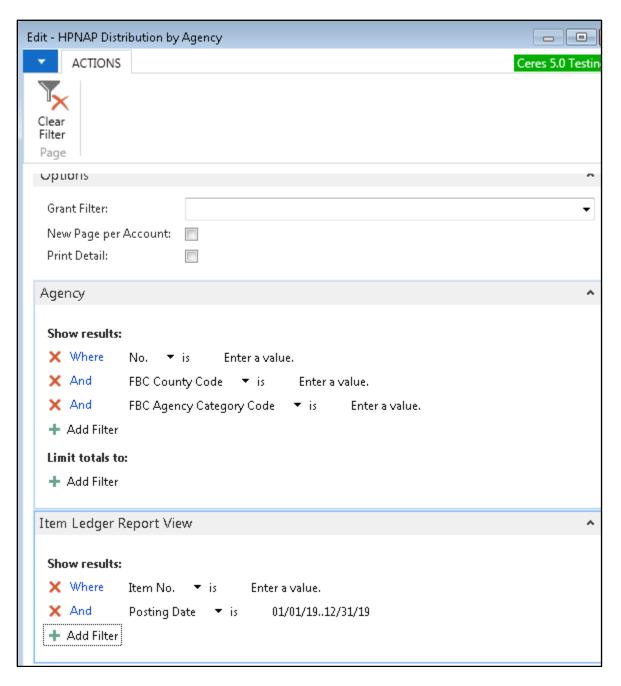


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HPNAP Distribution by Agency Report

This report will show activity for the HPNAP agency during a specified period of time. It will show the number of pounds distributed to the agency along with all associated fees charged to the agency, the amount of fees and pounds covered by the HPNAP grant. The summary version lists one line for each agency and its totals while the detailed version will show the actual items distributed to the agency with a subtotal by agency.

These reports are not exportable.



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Example Detailed HPNAP Distribution by Agency Report

HPNAP Distrib Geres 5.0 Testing	ution by Agency							3/2	6/2020 9:46 AI Page ESOPRO\RX
osting Date: 01/01	1/1912/31/19					Cover	ed by Grant Mo		
Agency No.	Agency Name				Shared Ma		ed by Grant mo	ney	
Item No.	Item Description	Lbs Distributed	Cost of Lbs Distributed	Total Fees Charged	Donated	Wholesale	Wholesale Cost	Total Fees Covered	Total Lbs Covered
KS-JOHNSON C	County:								
A0592	TLC For Children and								
10040	Napkins 24 / 6 packs of 16	52	0.00	22.88	0.00	0.00	0.00	0.00	
	A0592 Agency Total:	156	0.00	68.64	22.88	0.00	0.00	22.88	5
Fotal for County	y: KS-JOHNSON	156	0.00	68.64	22.88	0.00	0.00	22.88	5
KS-LEAVENW C	County:								
B0129	Safehome, Inc.								
10018	Chocolate Sryup 12 / 22 oz	36	0.00	3.24	3.24	0.00	0.00	3.24	3
10040S	Napkins 24 / 6 packs of 16	390	0.00	171.6	0.00	0.00	0.00	0.00	(
10576	Sausage 12 / 16 oz chubs	840	350.00	434	434.0 0	0.00	0.00	434.00	84
90003	Beverage dist by the lb vsa supersorted	5	0.00	0.5	0.00	0.00	0.00	0.00	
FA-KIT-APR19	April 2019 Box CASE	143.75	0.00	0	0.00	0.00	0.00	0.00	(
	B0129 Agency Total:	238.75	-300.00	-213.30	443.7 2	0.00	0.00	443.72	94
Total for County	y: KS-LEAVENW	238.75	-300.00	-213.30	443.7	0.00	0.00	443.72	948
MO-JACKSON (County:								
1050-A	Uplift Organization								
10018	Chocolate Sryup 12 / 22 oz	360	0.00	32.4	0.00	0.00	0.00	0.00	(
	1050-A Agency Total:	1,206	0.00	108.54	0.00	0.00	0.00	0.00	
30310	Newhouse, Inc.								
10256	Snacks 18 / 12 ct cartons	130	0.00	19.5	0.00	0.00	0.00	0.00	
	B0310 Agency Total:	130	0.00	19.5	0.00	0.00	0.00	0.00	
0416	The Salvation Army								
20010	Non Food Items	50	0.00	0	0.00	0.00	0.00	0.00	(
	C0416 Agency Total:	200	0.00	0	0.00	0.00	0.00	0.00	
Fotal for County	y: MO-JACKSON	1,536	0.00	128.04	0.00	0.00	0.00	0.00	(

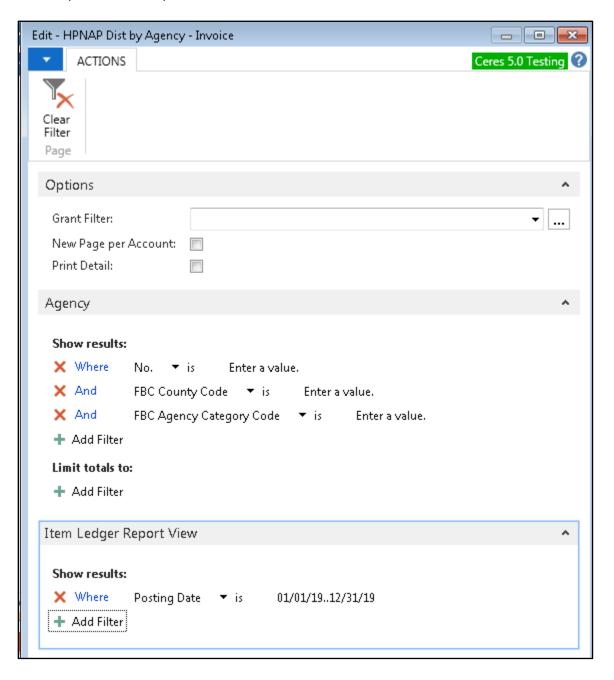
Example Summary HPNAP Distribution by Agency Report

HPNAP Dis Ceres 5.0 Testi	tribution by Agency ng							3/2	Page 1 ESOPRO\RXF
osting Date: 0	1/01/1912/31/19					Cover	ed by Grant Mor		
Agency No.	Agency Name				Shared Ma		eu by Grant Mor	ney	
Item No.	Item Description	Lbs Distributed	Cost of Lbs Distributed	Total Fees Charged	Donated	Wholesale	Wholesale Cost	Total Fees Covered	Total Lbs Covered
KS-JOHNSO	N County:								
A0592	TLC For Children and								
	A0592 Agency Total:	156	0.00	68.64	22.88	0.00	0.00	22.88	52
Total for Co	unty: KS-JOHNSON	156	0.00	68.64	22.88	0.00	0.00	22.88	52
KS-LEAVEN	W County:								
B0129	Safehome, Inc.								
	B0129 Agency Total:	238.75	-300.00	-213.30	443.7 2	0.00	0.00	443.72	948
Total for Co	unty: KS-LEAVENW	238.75	-300.00	-213.30	443.7	0.00	0.00	443.72	948
MO-JACKS	ON County:								
1050-A	Uplift Organization								
	1050-A Agency Total:	1,206	0.00	108.54	0.00	0.00	0.00	0.00	0
B0310	Newhouse, Inc.								
	B0310 Agency Total:	130	0.00	19.5	0.00	0.00	0.00	0.00	0
C0416	The Salvation Army								
	C0416 Agency Total:	200	0.00	0	0.00	0.00	0.00	0.00	0
Total for Co	unty: MO-JACKSON	1,536	0.00	128.04	0.00	0.00	0.00	0.00	0
MO-LAFAYE	T County:								
A0442	Synergy Services-2								
	A0442 Agency Total:	180	0.00	16.2	16.20	0.00	0.00	16.20	180
Total for Co	unty: MO-LAFAYET	180	0.00	16.20	16.20	0.00	0.00	16.20	180
	Report Total	2,110.75	-300.00	-0.42	482.8	0.00	0.00	482.80	1,180

HPNAP Distribution by Agency Invoice Report

This report will show activity for the HPNAP agency during a specified period of time. It will show the number of pounds distributed to the agency along with all associated fees charged to the agency, the amount of fees and pounds covered by the HPNAP grant. The summary version lists one line for each agency and its totals while the detailed version will show the actual invoices to the agency with a subtotal by agency.

These reports are not exportable.



Example Detailed HPNAP Distribution by Agency Invoice Report

IPNAP Geres 5.0	Distribution by Agency Testing	- Invoice							3/26	5/2020 9:50 AM Page 1
										ESOPRO/RXF
osting Dat	e: 01/01/1912/31/19									
							Covered	by Grant Mo	ney	
Agency N	No Agency Name		Lbs			Shared	d Maintenance			
	Document No.	Agency Name		Cost of Lbs Distributed		Donated	Wholesale	Wholesale Cost	Total Fees Covered	Total Lbs Covered
	NSON County:									
A0592	TLC For Children and									
	AO-01117-1S		52		22.88	0.00	0.00	0.00	0.00	0
	AO-01118-1S		52	0.00	22.88	0.00	0.00	0.00		0
	AO-01119-1S		52	0.00	22.88	22.88	0.00	0.00	22.88	2
A0592	TLC For Children and	Agency Total	156	0.00	68.64	22.88	0.00	0.00	22.88	2
Total for	County: KS-JOHNSON		156	0.00	68.64	22.88	0.00	0.00	22.88	2
KS-LEA	VENW County:									
30129	Safehome, Inc.									
	AO-01102-1S		5		0.50	0.00	0.00	0.00	0.00	0
	AO-01104-1S		36	0.00	3.24	18.24	0.00	0.00	18.24	3
	AO-01122-1S		36	0.00	3.24	3.24	0.00	0.00	3.24	2
	AO-01123-1S		18	0.00	1.62	1.62	0.00	0.00	1.62	1
	AO-01124-1S		18	0.00	1.62	1.62	0.00	0.00	1.62	1
	AO-01137-1S		840	350.00	434.00	434.00	0.00	0.00	434.00	70
	AO-01138-1S		144	0.00	0.00	0.00	0.00	0.00	0.00	0
	AO-01149-1S		180	50.00	16.20	0.00	0.00	0.00	0.00	0
	AO-01167-1S		390	0.00	171.60	0.00	0.00	0.00	0.00	0
	AO-01168-1S		0	0.00	0.00	0.00	0.00	0.00	0.00	0
	AO-01168-2S		0	0.00	0.00	0.00	0.00	0.00	0.00	0
	AO-01168-3S		126	0.00	11.34	0.00	0.00	0.00	0.00	0
	AO-01186-1S		126	0.00	11.34	0.00	0.00	0.00	0.00	0

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Example Summary HPNAP Distribution by Agency Invoice Report

HPNAP Distribution by Agency - Ceres 5.0 Testing	Invoice								/2020 9:49 AM Page 1
Posting Date: 01/01/1912/31/19									ESOPRO/RXF
						Covered	by Grant Mor	ney	
Agency No Agency Name					Shared	d Maintenance			
Document No. KS-JOHNSON County:	Agency Name	Lbs Distribut ed	Cost of Lbs Distributed		Donated	Wholesale	Wholesale Cost	Total Fees Covered	Total Lbs Covered
A0592 TLC For Children and	Agency Total	156	0.00	68.64	22.88	0.00	0.00	22.88	2
Total for County: KS-JOHNSON		156	0.00	68.64	22.88	0.00	0.00	22.88	2
KS-LEAVENW County:									
B0129 Safehome, Inc.	Agency Total	238.75	-300.00	-213.30	458.72	0.00	0.00	458.72	77
Total for County: KS-LEAVENW		238.75	-300.00	-213.30	458.72	0.00	0.00	458.72	77
MO-JACKSON County:									
1050-A Uplift Organization	Agency Total	1,206	0.00	108.54	0.00	0.00	0.00	0.00	0
B0310 Newhouse, Inc.	Agency Total	130	0.00	19.50	0.00	0.00	0.00	0.00	0
C0416 The Salvation Army	Agency Total	200	0.00	0.00	0.00	0.00	0.00	0.00	0
Total for County: MO-JACKSON		1,536	0.00	128.04	0.00	0.00	0.00	0.00	0
MO-LAFAYET County:									
A0442 Synergy Services-2	Agency Total	180	0.00	16.20	16.20	0.00	0.00	16.20	10
Total for County: MO-LAFAYET		180	0.00	16.20	16.20	0.00	0.00	16.20	10
	Report Total	2.110.75	-300.00	-0.42	497.80	0.00	0.00	497.80	89

Related Topics

- 1. Agency Overview
- 2. Agency Questionnaires
- 3. Item Overview
- 4. Agency Days and Hours Setup