



# Guidance Memorandum 10C: CACFP Requirements for Household Contacts

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**Community Nutrition Programs**

**Child and Adult Care Food Program (CACFP)**

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**Applies To: All Sponsoring Organizations ( $\geq$ Two Sites)**

- Group Child Care Centers, Head Start Centers, and Outside of School Hours Care Centers
- Independent Agencies (one site): *For Information Only*

**10.1 Household Contact Definition:**

A household contact is defined as:

“A contact made by a sponsoring organization or a State agency to an adult member of a household of a child enrolled within a child care center for verifying the attendance and enrollment of the child and the specific meal service(s) which the child routinely receives while in care” (7 CFR 226.2).

**The intent of the household contact system is to investigate potentially inflated meal counts or other suspicious CACFP documentation.**

As part of the review and oversight of their sponsored child care centers, sponsoring organizations should follow the household contact system for determining whether completing household contacts would be an effective method for investigating any suspicious documentation submitted by sites and then verifying its accuracy. This household contact system may also be used by the DPI or USDA officials during the review process and oversight of independent child care centers.

**10.2 Reasons for Conducting Household Contacts:**

Sponsoring organizations should complete household contacts when having one or more of the following concerns with their sites' CACFP documentation:

1. Information on the Household Size-Income Statements is not current or has been altered in any fashion, e.g. erased or whited out.
2. A significant number of claimed meals do not correspond to the information on the CACFP enrollment forms.
3. The monitor/reviewer has concerns regarding the validity of the enrollment, attendance, and/or meal service participation of children in care.  
For example:
  - a. Meal counts are inconsistent with attendance records;
  - b. Meal counts and attendance are inconsistent with information on the CACFP enrollment forms,
  - c. A large number of weekend, night, and/or holiday meals and snacks are claimed; and/or
  - d. The prior days' meal counts are much higher than attendance on the day of a review.
4. Written parent/guardian concerns regarding child enrollment, attendance and/or meal service participation in the child care center;
5. Any other claiming pattern(s) and/or Program participation concern(s) as defined by the sponsoring organization, DPI, and/or USDA.

### **10.3 Required Household Contact Procedure**

1. A household contact must be made to the families of each enrolled child. The contacts must allow the parents/guardians to document, for a test month, whether each child was enrolled in the center, the days each child attended the center, and the meals each child received while in care at the center.

Each household must be instructed to submit the information to the sponsoring organization or DPI within two (2) weeks of the request.

2. The household contact may be in writing, by phone, e-mail, fax, or in person, as long as the contact and the information received from the contact are documented.

**The attached sample letter and survey form may be used or adapted.**

→ **If using this letter and form, make sure to enter the specific information in the highlighted fields.**

- If additional follow-up attempts are needed because a household does not respond, it is recommended that this follow-up be by a different mode of contact than used on the first attempt.
3. No more than 45 days may elapse from the start of the household contact procedure (date the letters were originally sent/contact originally made to the households) to the closeout of the procedure. At the end of the 45-day period the sponsoring organization or DPI must determine whether the household contact procedure has been successful.
    - A household contact is defined as successful when there is a household response rate of 50% or more of the surveyed households.
  4. **Unsuccessful Household Contact Procedure:**

If the household contact procedure was not successful, the sponsoring organization must implement a written corrective action plan with the involved site, including an effective date, for resolving the concerns. The sponsoring organization must document all of its subsequent action(s) taken in response to an unsuccessful household contact procedure.

    - If DPI completes the household contact procedure for an independent center and it is unsuccessful, DPI could potentially declare this center as seriously deficient in its CACFP operation.

A household contact is one of many meaningful tools available to sponsoring organizations or DPI when they need to examine questions arising from an onsite monitoring review or by a review of submitted claim documentation. If the household contact procedure has not been successful, as defined above, other approaches (additional unannounced reviews, more detailed review of claims history, etc.) may be used to investigate and resolve the concern(s).

**Sample Household Contact Letter**

***Agency Letterhead***

Date: [Enter Current Date]

Dear [Name of Parent/Guardian]:

The child care center your child attends participates in the Child and Adult Care Food Program.

By federal regulation, we need to complete household contacts for some centers on our program. Your center has been chosen for a household contact at this time. Completing this information helps us ensure the integrity and quality of the food program.

Please complete the enclosed form as accurately as possible. We have provided a return-addressed stamped envelope for you to send the completed form back to us. If there are any discrepancies between the information you submit and what the center reports, the center will be contacted. It is possible we would have to do a follow-up telephone call to you for further information.

If you have any questions about the Child and Adult Care Food Program or the enclosed form, please call our office at [(XXX) XXX-XXXX].

Sincerely,

[Agency Representative's Name]

[Agency Representative's Title]

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- |   |                                |  |
|---|--------------------------------|--|
| (1) Mail: U.S. Department of Agriculture<br>Office of the Assistant Secretary for Civil Rights<br>400 Independence Avenue, SW<br>Washington, D.C. 20250-9410; | (2) Fax:<br>(202) 690-7442; or | (3) Email:<br><a href="mailto:program.intake@usda.gov">program.intake@usda.gov</a> |
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This institution is an equal opportunity provider.

**Sample Household Contact Survey Form**

*Agency Letterhead*

CENTER NAME: \_\_\_\_\_

ENROLLED CHILD'S NAME: \_\_\_\_\_

PARENT'S/GUARDIAN'S NAME: \_\_\_\_\_

PARENT'S/GUARDIAN'S ADDRESS: \_\_\_\_\_

Is your child currently enrolled in the above child care center? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, when was the last date your child attended this center? \_\_\_\_\_

Please circle the dates your child was in care during the month of **[Enter Test Month]**.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

Please circle the hours your child was usually in care during this month.

AM	5	6	7	8	9	10	11	noon	1	2	3	4	5	6	7	8	9	10	11	12
----	---	---	---	---	---	----	----	------	---	---	---	---	---	---	---	---	---	----	----	----

Please circle the meals your child received while in care.

Breakfast	AM Snack	Lunch	PM Snack	Dinner	Evening Snack
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Please describe any variation from the circled meals or times during the month:

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If your child is under 1 year, were you offered formula by the center? \_\_\_\_\_

Do you provide breast milk? \_\_\_\_\_ Who supplies the formula?

\_\_\_\_\_

Are all other infant foods provided by the child care center? \_\_\_\_\_

If not, what foods do you provide for your infant? \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone number where you can be reached during the day: \_\_\_\_\_

Thank you for helping improve the quality of the Child and Adult Care Food Program