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Sponsoring Organizations of Family Day Care Home (FDCH) providers are required to monitor their FDCH providers participating in the Child and Adult Care Food Program (CACFP) under their sponsorship to ensure they are following the CACFP requirements. Providers must meet the Program requirements to receive CACFP reimbursement for meals served to their enrolled children.

Sponsoring organizations will be referred to as “sponsor” or “agency” throughout this Guidance Memorandum (GM); FDCH providers will be referred to as “providers” or “homes”; and reviews for monitoring providers will be referred to as “home visits (HV)” or “reviews”.

This GM details the CACFP requirements sponsors must follow for monitoring their providers, as specified in the United States Department of Agriculture’s (USDA) Code of Federal Regulations (CFR) 7 Part 226, USDA policy memorandums, Food and Nutrition Services (FNS) Instructions, and the Wisconsin Department of Public Instruction’s (DPI) rules.

HOME VISITS – ALL PARTICIPATING PROVIDERS

A home visit counts as a review when the monitor has assessed the provider’s compliance with all required areas detailed in the [Required Review Elements](#) section in this GM during a home visit. Sponsors must monitor all participating providers by completing on-site reviews during the provider’s hours of operation at least three (3) times per year, unless specified otherwise in this GM.

Frequency and Type of Reviews

Frequency

- Required Number of Reviews per Federal Fiscal Year (FFY) (October 1 – September 30)
All providers must be reviewed three (3) times each unless they operate less than 9 months of the year. If a provider submits a claim for the month, it is an operating month. If a provider operates less than 9 months of the FFY, the required number of reviews can be prorated as follows:

Months of Operation	# of Reviews
1-4	1
5-8	2
9-12	3

Sponsors must make all reasonable efforts to complete the required number of reviews for each provider during each FFY. If a provider’s closure is anticipated in any way (for example, a pregnancy, upcoming planned surgery, indications that they will be closing “soon”), then the sponsor must complete the last review required for the FFY prior to their anticipated closure.

- Time Limit Between Reviews
No more than six months must elapse between reviews, including cross FFYs, factoring in the provider’s months of operation.

Types

Unannounced versus Announced Reviews

Announced Reviews

Announced reviews can be scheduled with the provider. Only one home visit each year may be “announced”.

Unannounced Reviews

An unannounced review is defined as a review **with no prior notification** during the provider’s normal hours of operation. No prior notification means fully unanticipated, without any suggestion of when the monitor will arrive (during the provider’s hours of operation) to complete a home visit.

Aside from the provider knowing the frequency and types of reviews the sponsor is required to complete of their home, monitors should not be making any suggestions or implications of when they will be completing the next home visit (i.e., “See you in three months” or “See you in the fall”, etc.)

- At least two of the three required reviews must be unannounced.
 - The timing of unannounced reviews must vary so they are unpredictable to providers. The sponsor must make deliberate effort to schedule home visits that vary in the months from year-to-year at varying times within the month, on different days of the week, and times of the day.
- Monitors must have photo identification and proof of affiliation with the sponsor when conducting unannounced on-site reviews.

Meal Service Observations

At least one of the unannounced reviews must include an observation of an approved meal service.

Monitors must see the [majority of the meal service](#) with children present and being served the meal for it to count as a meal service observation.

Provider's Advance Notice of Schedule Changes

To enable sponsors to meet the monitoring requirements, providers must give advance notice to their sponsor when:

- They will not be at home during the approved meal service times (*as specified in their signed [Sponsor-Provider Agreement](#)*);
 - If the provider does not give advance notice of their absence, at which time the monitor attempts to complete a home visit, the meals typically served during the attempted visit must be disallowed. Occurrences of unsuccessful attempted home visits must be kept in the provider's records for escalating the consequences if repeated. See the section below on [Reoccurrences of Noncompliance](#) for further guidance.
- No children will be in attendance during the provider's approved meal service times;
 - **Note:** Children are not required to be present during a home visit without a meal service observation for it to count as a review as long as the monitor completes it during the provider's hours of operation and assesses all required review elements specified below.
- They have made changes to their regular meal service times

Oversight of All Meal Types Claimed

Sponsors must provide oversight of all types of meal services and days being claimed by their providers. The percentage of reviews with meal service observations for specific meal types should be roughly proportionate to the percentage claimed by providers.

The sponsor should plan home visits with the intent of varying meal service observations among all the provider's approved meal types.

Go to the [Integrity Concerns](#) section for complementary options for overseeing meal services less often observed (*less often observed meal types, meals served on weekends and holidays*).

New Providers

The requirements for pre-operational visits and first reviews apply to providers will be participating in the CACFP for the first time, those who change sponsors, and those who re-enter the CACFP after a break in Program participation.

- Refer to [GM A: Provider Eligibility](#) for the requirements on adding new providers to the agency's sponsorship.

Previsits

Sponsors must complete on-site pre-operational visits (pre-visits) at the provider's home before they start CACFP participation. These onsite visits are to confirm the home is regulated to provide care in a private residence (*not a commercial building*) and that the home is equipped to prepare and serve meals and meets sanitation and safety standards.

Previsit Documentation

The sponsor must have some form of signed and dated documentation of their on-site previsit completed prior to approving the provider's Program participation. This can be in a form of an orientation checklist completed, signed, and dated by the monitor and provider at the previsit. A copy of the completed orientation checklist must be retained on file by both parties.

- **Documentation of Required Follow-up:** The monitor must note any corrections and/or further records needed from the provider within the previsit documentation. For example, if they need to enroll infants (*not exclude them from the Program*), submit required special dietary needs documents for a child, etc. Subsequently, the monitor must confirm whether the provider completed the needed follow-up actions prior to or during the first home visit and document it accordingly on the home visit review form.

The First Review

The intent of completing the first review soon after a provider has started participation is to prevent them from making critical errors that could result in serious non-compliance and/or large overclaims. The sponsor must complete the provider's first home visit within the first four weeks of them starting their CACFP participation.

- If a provider has enrolled children as of the sponsor's approval of their participation and starts claiming meals as this date, the sponsor must complete the first home visit within four weeks of their approval date.
- If the provider does not have any children in care as of the sponsor's approval date, the first home visit must be completed within four weeks of the provider notifying the sponsor when they have enrolled children or of the sponsor receiving the provider's first claim, whichever occurs first.

Off-site Home Visits

Currently all home visits must be completed on-site, in the providers' homes. Portions of the review may be completed off-site in preparation for the home visit. However, they cannot be completed off-site in their entirety (i.e., via desk audit or other virtual methods) at this time.

Refer to the appendix attached to [USDA Policy Memorandum CACFP 07-2023 – Oversight and Monitoring of the CACFP – Guidance on On-site and Off-site Strategies and Options](#), issued on April 6, 2023, for further information.

Exceptions to Meeting Home Visit Frequency and Type Requirements

Exceptions to completing the required number of reviews per provider each year are limited to legitimate, unforeseen circumstances such as a provider's unanticipated temporary closure. The sponsor must take precautionary steps to minimize the chance of not being able to complete the required number and type of reviews for each provider. This includes closely monitoring their providers' claim activity and communication as well as the timing of home visits throughout the year; this is critical especially when it gets close to the 9th month of the FFY.

Permissible exceptions must be supported by home visit documentation (successful and attempted), communication with the provider regarding the circumstances, and the reasons for why the monitor was not able to complete the required number of home visits.

- In the case of a provider's unanticipated closure, sponsors may apply discretion and not go through the formal re-enrollment process if the provider begins operating again soon thereafter in the subsequent FFY.

Applying this discretion must be an exception, not the rule.

Review Averaging Option

Sponsors may choose to use the "review averaging" option for completing their home visits, to focus their monitoring efforts on providers more likely to have issues in meeting the Program requirements (i.e., newer providers, those with a history of problems, etc.).

Prior to using this option, the sponsor must provide DPI with their implementation plan on how they will meet the following review averaging requirements for that FFY:

1. If completing one unannounced home visit with a meal service observation and finds no serious deficiencies, the sponsor may choose not to complete a third review of that provider and make the second review announced. This provider's first review in the next FFY must occur no more than nine months after the previous review.
2. The sponsor must complete the same **total** number of required reviews for that FFY (three times the number of approved providers) by reviewing some providers less than three times, as specified in #1 above, and balancing the total number out by reviewing others more than three times.
3. The sponsor must complete an average of two unannounced reviews of all their approved providers.

HOME VISIT (HV) REVIEW FORMS

Sponsors must submit their home visit review forms (both electronic and hard copy) to DPI for approval prior to use, including when they have updated them.

Required Information on HV Review Forms

The sponsor's HV review forms must include, at minimum, the following information (1-7):

1. Date of review (home visit)
2. Start and end time
3. Type of review
 - Announced or unannounced; and
 - If/what type of meal service observation
4. Assessment of whether the provider has corrected findings identified during prior home visits
5. Assessment of the provider's compliance with the Program requirements outlined in the [Required Review Elements](#) section below.
6. **Required Documentation of HV Results**

The monitor must record the HV results on the HV Review Form, discuss them with the provider, and upon departure, leave a signed copy of the completed form with the provider. This must include, at minimum, a-d as follows:

 - a. Detail of findings and any resulting meal disallowances;
 - b. Required corrective action and when it must be implemented;
 - c. Any Technical Assistance (TA) provided;
 - d. Any required follow-up (i.e., submission of missing special dietary needs documents, enrollment forms, etc.)
7. Signature of provider and monitor

A copy of each completed HV review form must be given to the provider and retained in the sponsor's provider files.

REQUIRED REVIEW ELEMENTS

Monitors must assess the provider's compliance with the following Program requirements at each HV:

CACFP meal pattern

Sponsors (monitors) must use DPI's meal pattern resources and instructions for determining whether the provider is meeting the meal pattern requirements, as follows (*not all inclusive*):

- [GM L: CACFP Meal Requirements](#)
 - 1-12 Years
 - Infant Meal Requirements
 - Special Dietary Needs
- The [DPI-FDCH Sponsor Agreement](#) (*CACFP Meal Pattern Documentation and Monitoring Requirements*) – attachment to this GM
- The *Required Home Visit Findings, Disallowances, and Follow-up* attachment to this GM for detail on findings of noncompliance, required disallowances and follow-up due to noncompliance with meal pattern.

Menu review for both 1-12 year-old children and infants:

Each meal/snack that the provider has recorded or entered on their menus from the first of the current month to the HV date met all meal pattern requirements.

The provider's menu for each meal shows that:

- Creditable foods are recorded for all required meal components
- At least one Whole-Grain Rich (WGR) food item each day for 1-12 year-olds
 - If at least one grain item is not identified as WGR on the provider's menus each day, the monitor must disallow the lowest reimbursed meal that served a grain item for that day. The provider must record grains as WGR for those they served by the end of the day.
- All other [CACFP Child Meal Pattern: 1-12 Year Olds](#) and [Infant Meal Pattern](#) requirements specific to each meal component are met.

Review of foods on-hand (*their product packaging/documentation*) for meeting crediting criteria:

1-12 Year-Olds:

Monitors must verify whether the following foods are on-hand for items the provider has submitted on their menus for the most recent claim and current month up to the HV date and whether they meet their respective crediting criteria:

- Grains served as WGR
 - Breakfast cereals meet the sugar limits
 - Yogurt meets sugar limits
 - Store-bought combination items served are either Child Nutrition (CN) labeled or the provider has obtained a Product Formulation Statement (PFS) from the manufacturer for serving the correct portions (*i.e., chicken nuggets, fish sticks, pizza, heat-n-serve pasta dishes containing more than one component*)
 - Processed meat/meat alternates, including pre-cooked meats, are either Child Nutrition (CN) labeled or the provider has a PFS (unless they are allowable without a CN label/PFS if having 100% creditable meat/meat alternate ingredients)
 - Cheese – cannot be cheese product, imitation cheese, and cheese sauce (without CN label/PFS)
 - Tofu meets protein level
- Sponsors must use the *HV Menu and Product Documentation Log* ([Version 1](#) or [Version 2](#)) to document this process for each HV.
- Monitors must follow the [Instructions for Completing Home Visit Review Logs \(CACFP Meal Pattern Compliance\)](#) for correctly completing this log.

Infants

Monitors must verify whether the provider:

- Has on-hand and serves creditable formula and infant foods to each infant according to their developmental readiness;
 - Submits infant menus that have the same components recorded as those on-hand and served to each infant;
 - Claims meals that served no more than one family-supplied component and all developmentally appropriate foods while in care
- Sponsors must use the [Home Visit Infant Review Log](#) to monitor infant menus and foods on-hand and being served to each infant.
- Monitors must follow the *Instructions for Completing Home Visit Review Logs (CACFP Meal Pattern Compliance)* for correctly completing this log.

Meal Service Observations

To count as a meal service observation:

- Monitors must view a significant portion of the meal service.
At minimum, the monitor must see that all required food components are served in at least the minimum portion size requirements to all children present, in accordance with the meal service method the provider is using (pre-plated or family style dining). *Monitors will have most success in verifying the provider is serving the minimum portion sizes required if they see the beginning of the meal.*
- At least one enrolled non-residential child must be present and participating in the meal

The monitor must assess whether the provider is meeting the CACFP meal service requirements for claiming the observed meal. The children must:

- Eat the meal while under provider's care (*children cannot take home meals*);
- Be "present and participating" in the meal service;
- Be served all meal components together at the same time;
- Be served the required minimum portion sizes for each component in accordance with the meal service method (*pre-plated versus family-style dining*) the provider is using.

Meal Preparation Methods:

During meal observations, the monitor must check on how the provider is preparing foods for their meals. Meals serving deep-fat fried foods are not reimbursable.

→ Go to the *Meal Service* section in [GM L: CACFP Meal Requirements](#) for more detail on these requirements.

Noncompliance

If the provider is serving meals that do not meet the meal pattern requirements, the monitor should immediately attempt to give TA to the provider to prevent the monitor from having to disallow meals. Even if the monitor was able to prevent the provider from making the meal pattern error, they must record the non-compliance as findings and require corrective action. If the monitor was not able to intercede to correct the meal pattern error before the meal service ended, they must disallow meals.

→ Refer to the *Required Home Visit Findings, Disallowances, and Follow-up* attachment to this GM for more detail.

Meal Service Times:

Sponsors should not restrict providers from serving and claiming meals/snacks outside of their scheduled meal service times **when reasonable variations occur** (i.e., children's schedules vary because of doctor appointments, their hunger needs, and the provider's flow of activities for the day). Monitors are not required to disallow meals served outside of the provider's scheduled meal service times if the variation is reasonable and the child is served that specific meal type.

Special Dietary Needs (SDNs)

→ Go to the FDCH Sponsor Requirements section in [GM L: Special Dietary Needs Requirements](#) for detail on the FDCH sponsor responsibilities for overseeing meal accommodations, SDN documentation, and meal reimbursement for children with SDN at both the claim processing and home visit monitoring level.

Water

Providers must make drinking water available to children upon request, including at meal times. They must directly offer water throughout the day to young children who may not be able to or know how to request it themselves.

→ Go to DPI's [Drinking Water](#) webpage for further information and resources.

Menu and Meal Count Records

Menu Records

Providers must record their menus by the end of each day for all meals and snacks they will be claiming for reimbursement.

- It is acceptable for the provider to record their menus in advance so long as this practice is strictly used for planning purposes; if changes are made, the provider must update the foods served on the menus by the end of that respective day.
- Meals must be disallowed when menus are not up-to-date or complete from the first of the current month through the day prior to the HV.

Meal Count Records

Providers must record the children served at each meal and snack, by child's name or assigned number, by the end of the day for the meals they will be claiming for reimbursement.

- Meal counts that have been recorded in advance must be erased or deleted before the end of the HV and the monitor must cite this as a finding and require corrective action.
 - Meals must be disallowed when meal counts are not up-to-date or complete from the 1st of the current month through the day prior to the HV.
- Go to [GM B-Criteria for Meal Reimbursement](#) and/or [GM K-Recordkeeping Requirements](#) for additional information maintaining menus and meal count records.

Five-Day Reconciliation

Sponsors must complete a five-day reconciliation at every HV by comparing meal counts with enrollment and child care attendance records for five consecutive days.

- Follow the instructions for completing the five-day reconciliation (attachment to this GM): [Required Procedure for Completing the Five-Day Reconciliation During Family Day Care Home Visits](#)

Enrolling Children

- Providers must enroll all children without discrimination (i.e., not enrolling infants to circumvent the infant requirements, not enrolling children with special dietary needs etc.).
 - All enrolled children must have a current and complete CACFP enrollment form on file by both the provider and sponsor; furthermore, they must annually collect updated CACFP enrollment forms.
- Go to [GM O: Child Enrollment](#) for more detail.

Licensing and Certification Rules

([DCF 250 for Licensing Rules](#)) ([DCF 202 for Certification Rules](#))

Current Regulation

The monitor must check the posted regulation in the provider's home and/or the provider's regulatory information in the Department of Children and Family's (DCF) [Child Care Provider Portal](#) for whether the sponsor has the most current regulation on file and entered into their system.

Capacity Requirements

- If the provider is over-capacity or over the staff-to-child ratio, as defined by their applicable regulation, during the home visit or identified within the [5-Day Reconciliation](#), the monitor must cite the over-capacity or over-ratio incident as a finding and require corrective action.
→ Refer to [GM B: Criteria for Meal Reimbursement](#) for more information on group size requirements
- The difference between the number of meals served and the authorized capacity must be disallowed, as applicable.

Compliance with Sanitation and Safety Standards

Providers must be monitored during home visits by the sponsor for compliance with DCF licensing and certification regulations for sanitation and safety standards regarding storing, preparing, and serving food.

Health and Safety Issues that are not an Imminent Threat

Sponsors are not required to monitor providers for compliance with state or county regulation or to report violations to the regulating agencies. It is in the children's best interest, however, to report to DCF any substantial noncompliance with sanitation and safety requirements regarding storing, preparing, and serving food; in general, these issues do not rise to be an imminent threat to health and safety.

Monitors are required to identify and report to the appropriate authorities situations posing imminent threat to health and safety.

→ Go to the [Imminent Threat to Health or Safety](#) section for more information on identifying and acting on those situations.

Also refer to [USDA's Family Day Care Homes Monitoring Handbook](#).

Civil Rights Requirements ([GM H](#))

Providers must:

- Serve meals to all children equally without regard to race, color, national origin, sex (including gender identity and sexual orientation), age, disability, or receiving government financial assistance;
 - All children are enrolled, including infants and children with special dietary needs
- [Building for the Future Flier](#): Either distribute copies (*completed with the sponsor's contact information*) to families or post it in a visible location;
- USDA Child Nutrition Program's [Nondiscrimination Statement with Complaint Filing Procedure](#): Include the most current version in any publications/webpages referencing the CACFP.

[WIC \(Women, Infants, and Children\) Information \(posted under GM K\)](#)

Providers must distribute copies with the program's most current Income Eligibility Guidelines to families or post it in a visible location.

Record Retention Requirements

→ Refer to [GM K: Recordkeeping requirements](#)

Training requirements

→ Refer to [GM E: Training Requirements](#)

FINDINGS OF NONCOMPLIANCE

If the provider is not meeting any of the CACFP requirements detailed in the [Required Review Elements](#) section of this GM, they are considered to be findings of noncompliance and require some form of corrective action and possibly include meal disallowances.

Beyond the [Required Review Elements](#), the provider must also give advance notice to their sponsor of schedule changes that may affect the monitor's capability to complete a meal service observation during an unannounced HV. Failure to do so must be cited as a finding and the meals typically served during the attempted visit must be disallowed.

- Go to the [Provider's Advance Notice of Schedule Changes](#) section in this GM for more information.
- Go to DPI's [Required Home Visit Findings, Disallowances, and Follow-up](#) resource to this GM for an overview of the CACFP requirements detailed above. It includes a chart that delineates findings, required disallowances, and required follow-up related to each of the requirements that must be reviewed during each HV.
- Go to the section [Required Documentation of HV Results](#) in this GM for further information on required HV documentation.

MONITORING OVERSIGHT

Requirements for Reoccurring Noncompliance

All sponsors must consistently hold providers accountable to maintaining their corrective action for each finding of noncompliance **for no less than a 24-month period.**

- This includes any finding listed in DPI’s [Required Home Visit Findings, Disallowances, and Follow-up](#) resource for each of the requirements that must be reviewed at every HV.

Staff policies/procedures should include the following for consistently addressing reoccurring noncompliance:

1. Definition of Terms
2. Chain in Staff Communication
3. Tracking System of Reoccurrences

Definition of Terms

The sponsor’s policies and procedures for both providers and their staff must define the terms and standards they have established for everybody to understand and consistently use when identifying incidents of noncompliance.

Specify what each occurrence in the series of re-occurrences entails:

- The steps of enforcement monitors and managers must take when identifying an incident of non-compliance;
- What the consequence is for each re-occurrence;
- What each consequence means. i.e.:
 - “Being put on probation”,
 - “Being on a corrective action plan”

number of reoccurrences, severity, and the respective escalating recourse the sponsor will take for enforcement.

Example				
Occurrences of Findings	1 st occurrence	2 nd Occurrence	3 rd Occurrence	4 th Occurrence
Incident	1 st time identified during HV (If severe, monitor informs manager; depending on level of severity, go to recourse for 2 nd , 3 rd , or 4 th occurrence)	1 st repeat: Manager factors in substance level compared to 1 st time; if minimal, repeat 1 st occurrence’s recourse	2 nd repeat: Manager factors in substance level/ severity for implementing recourse for 3 rd occurrence.	Repeat during probationary period
Escalating Recourse level (subject to discretion depending on severity)	<ul style="list-style-type: none"> • Monitor provides TA (trains on meeting requirement, refer to resources etc.); • Records incident & TA on HV form; • Initiates tracking of finding 	<ul style="list-style-type: none"> • Monitor notes as repeat finding & repeated TA given on HV form; • Manager sends written notice of required corrective action (reiterates TA on requirement) 	Manager: <ul style="list-style-type: none"> • Places on probation (i.e., 6 month period of close monitoring / FU HVs) • Sends notice of additional required action & circumstances of repeat during probationary period 	Declares SD

Sponsor’s Chain in Communication

The sponsor’s internal policies and procedures must establish a clear chain of communication by which staff must abide for enabling Program managers to have effective oversight of findings cited during HVs. A new finding of noncompliance identified by the monitor during a HV should trigger a “flag” to begin tracking the incident as a first occurrence. *Not identifying a new finding as a first occurrence impedes the sponsor’s capability for tracking the severity and frequency of future potential occurrences.*

The sponsor’s ability to hold providers accountable relies on the monitor’s HV documentation.

Tracking Systems of Reoccurrences

Sponsors must have a clear system for tracking providers' findings, required corrective action, and follow-up.

- If using the sponsor's software system for maintaining information on a provider's findings, the sponsor **must be capable of running a report showing the information below.**
 - If not, the sponsor must have a system for tracking findings outside of their software system, i.e., an Excel spreadsheet.

Occurrences of Findings/Issues Tracking Tool

Sponsors' tracking system:

- a. Must have the following information (but not limited to):
 - Provider's name;
 - Home visit date when finding was identified;
 - Description of the **specific** finding;
 - Disallowances (*if any*);
 - Required corrective action;
 - Any follow-up required of the provider;
 - Occurrence # within last 24-month period
 - Sponsor's recourse
- b. Must be able to track across Federal Fiscal Years (FFY)

Sponsor's Policies and Procedures for Providers – Discretionary Clause

Sponsors should include a discretionary clause allowing them flexibility on escalating consequences for providers with repeat findings depending on the severity & circumstances.

For example, sponsors may:

- Extend accountability period beyond 24-months
- Modify # of repeats permitted before escalating consequences, e.g., requiring formal improvement plan, declaring SD etc.

INTEGRITY CONCERNS

Integrity concerns may be any one or more of the following (not all-inclusive):

- Meal types (i.e., dinners, evening snacks), weekend days, holidays etc. not proportionately represented by HVs
- Meal count/attendance discrepancies found during HVs
- Dramatic changes in enrollment and meal counts claimed
- Discrepancies between foods served during meal observations and submitted menus
- Complaints (i.e., from a parent, licensing specialist, certifier, etc.)
- Discrepancies, duplicate claiming of children etc. detected through software claim edit check reports

When identified, sponsors are required to take some kind of follow-up investigative action to determine whether the concern is valid and if so, subsequent steps to address the provider's non-compliance.

Investigation Methods of Integrity Concerns

The sponsor may investigate these integrity concerns by various methods, any one or more of the following ways (not all-inclusive):

- Additional HVs (announced or unannounced);
- Expanded five-day reconciliation during HV;
- Comparison of foods to be served for meals less frequently observed to the foods reported on menus submitted by the provider for the claim (per requesting to see these foods during HV)
(*This comparison does not count as a meal service observation, but may prompt the sponsor to complete one during the meal in question*)
- Verification of submitted claims by requested support documentation from provider;
- Detailed analysis of monthly claims;
- Completion of household contacts
(Go to the attachment *Household Contact Requirements* for the required procedures for completing household contacts)

Documentation of Integrity Concerns Investigations

Sponsors must maintain a record of the information:

- How the integrity concern was detected or what prompted the investigation;
- The investigation method used to validate or invalidate the concern;
- The results of the investigation;
- Any further action taken to address a validated integrity concern; and
- Record of the timeline from detection to conclusion

SERIOUS DEFICIENCIES

If one or more serious deficiencies are identified when assessing a provider's compliance with the CACFP requirements, the next review of that provider must be unannounced.

→ Refer to the [Serious Deficiency Procedures](#) posted under [GM M – Serious Deficiency Requirements](#), for the list of serious deficiencies specified in USDA regulations, 7 CFR Part 226, and their respective regulatory citations.

IMMINENT THREAT TO HEALTH OR SAFETY

Sponsors must train their monitors to recognize conditions that pose an imminent threat to the health and safety of the participants, child care staff, and/or the public and to respond to these conditions appropriately.

The source of the following list of circumstances that could rise to the level of imminent threat is from [USDA's Serious Deficiency, Suspension, & Appeals for State Agencies & Sponsoring Organizations Handbook](#)

Circumstances that rise to the level of imminent threat include:

- Lost or missing child;
- Suspected maltreatment of a child;
- Suspected sexual, physical, or emotional abuse of staff, volunteers, or family members occurring while on the premises of the child care facility;
- Injuries to children requiring medical or dental care;
- Illness or injuries requiring hospitalization or emergency treatment;
- Mental health emergencies;
- Health and safety emergencies involving parents or guardians and visitors to the child care facility;
- Death of a child or staff member (including a death that occurred outside of child care hours that had resulted from serious illness or injury at the child care facility);
- The presence of a threatening individual who attempts or succeeds in gaining entrance to the facility;
- The presence of accessible firearms;
- Inadequate or incompetent supervision;
- Unsanitary conditions for food service or unsanitary water;
- Inadequate light, ventilation, sanitation, or heating;
- Failure of the home's fire detection and prevention system.

Required Action by the Sponsor

- The sponsor must notify the relevant child care regulator (DCF license specialist and/or County certifier) and/or health or law enforcement authorities whenever a sponsor representative observes an imminent threat to the health or safety of children, child care staff, or to the public in the provider's home. If a monitor determines that a child is in imminent danger, they must immediately contact the proper authorities and stay at the provider's home until the authorities have arrived. Subsequently, the monitor must take action that is consistent with the recommendations and requirements of those authorities.
- The event of the imminent threat and notification to the regulators/authorities must be documented and retained within the provider's file.

- Sponsors must initiate the suspension and serious deficiency process; immediate action must be taken to stop payments, suspend the provider's CACFP participation, and declare the provider as seriously deficient regardless of any formal procedures pending or underway by the licensing authorities to revoke the provider's regulation.
 - Refer to [GM M: Serious Deficiency Requirements](#) for the suspension and serious deficiency procedures.

AUTOMATED CLAIM ERRORS AND DEDUCTIONS

The sponsor generally should not consider automated claim errors, warnings, and deductions as part of the HV assessment process for citing non-compliance, requiring corrective action, and/or requiring the provider to submit support documentation for verifying claim accuracy. As best practice, monitors should discuss claim errors with the provider during HVs for giving TA and training in these problem areas.

- **Over-Capacity/Exceeding Child to Provider Ratio Requirements:**

Monitors should only treat claim deductions for these errors as findings when observed and identified during HVs and/or when validated using other investigation methods for [integrity concerns](#).
- **School-Agers claimed for A.M. Snacks and Lunches:**

The burden of proof should not be on the provider to submit justification for why school-agers are claimed for these meals or otherwise be automatically deducted by the sponsor's claim processing system. Monitors should assess this concern during HVs to determine whether further action is needed (i.e., disallowances, investigating it further as an integrity concern etc.).
- **Discrepancies between Children's Enrollment Information (*days, hours, and meals*) and Claimed Meals**

These discrepancies should not result in automatic deductions from the provider's claims. They also should not result in disallowances when identified during HVs without obtaining further documentation or information verifying the children were not present during the claimed meals.

 - Per [GM O: Child Enrollment](#), the CACFP enrollment information is only required to be updated annually by the families. The monitor should note any changes within the children's schedules on their review forms when completing the [5-Day Reconciliation](#) to justify discrepancies between the children's meal attendance and their schedule information on the CACFP Enrollment Form.