Child and Adult Care Food Program Household Contact Procedure

Household Contacts Procedure

1. The sponsoring organization may contact households in writing, by phone, e-mail, or in-person. Sponsoring organizations should have parent/guardian contact information on the mandatory enrollment forms.

2. Decide if the household contact will be contacted by telephone or mail (USPS).

3. If the contact will be made via in writing, e-mail, or in-person, complete a copy of the household contact letter and contact survey form (attached) for each household contact.

4. If the contact will be made via telephone, complete a copy of the telephone script (attached) and contact survey form for each household contact.

5. A copy of the script or contact letter and the contact survey will be kept on file and should include the name(s) of all staff that worked on the household contact. Ensure all information received is documented and maintained on file.

6. Household contacts made by mail must be sent via USPS certified mail.

7. Collect and analyze the information submitted by the households.

8. Determine if there is an issue of non-compliance with the site. If so, the site must be assigned corrective action.

9. Send appropriate correspondence to the site, request related corrective action, and ensure all corrective action is timely.

10. If additional follow-up attempts are needed because a household does not respond, it is recommended that the follow-up is made by a different mode of contact than used previously (e.g., if the first attempt was by mail, the second attempt may be by telephone).

11. The attached sample letter, survey, and telephone script is highly suggested to use. Sponsoring organizations may develop contact letters, forms, and scripts, however, the State agency must approve these forms prior to use. If using the sample forms provided by the State agency, make sure to enter the specific information in the highlighted fields.

Sample Household Contact Letter

Organization Name

Date:

Dear:

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

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 note, providing the requested information will not jeopardize your child's current childcare enrollment.

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 (CACFP) or the enclosed form, please call our office at
Sincerely,

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the State or local Agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY). Additionally, program information may be made available in languages other than English.
To file a program discrimination complaint, complete the USDA Program Discrimination

Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Mail Stop 9410, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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Sample Household Contact Survey Form

Organization Letterhead

**Providing the following requested information will not jeopardize your child's current childcare enrollment.*

Center/Provider 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:
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

Please describe any variation from the circled meals or times during the month:

_____

_____

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: _____

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Sample Household Contact Script

Good morning or good afternoon. This is _____ from _____. I work with the Child and Adult Care Food Program and I would like to ask you a few questions about _____'s meal participation and attendance at _____. Is this _____? I would like to mention that providing the requested information will not jeopardize your child's current childcare enrollment.

(Ask the question on the household contact survey form. Make sure to record the date and time of the contact).

Do you have any questions or comments about the Child and Adult Care Food Program?

(Answer questions if necessary).

Thank you for your time and I appreciate your cooperation. Thank you for helping improve the quality of the Child and Adult Care Food Program.