**Prototype Letter 22-Termination and Disqualification for Providers - Combined Notice for Imminent Threat to Health and Safety**

[*Note: Send this letter by certified mail/return receipt, an equivalent private delivery service (such as FedEx), fax, or e-mail as required by 7 CFR 226.2, definition of “notice” in the regulations.*]

**To Be Placed on Sponsoring Agency Letterhead**

Date

Provider Name

Provider Street Address

Provider City, State 00000

Dear [Provider]:

This letter concerns the [brief description of the basis for the serious deficiency determination – review, audit, etc. and date] of your operation of the Child and Adult Care Food Program (CACFP).

**SERIOUS DEFICIENCY DETERMINATION**

Based on the [*review/audit/etc*.], [*sponsoring organization*] have determined that you are seriously deficient in your operation of the CACFP.

**SUSPENSION**

The serious deficiency identified is the imminent threat to the health or safety of CACFP participants or the public (for details, see the description of the serious deficiencies later in this letter). Because of this imminent risk, the sponsoring organization is suspending your CACFP participation (including all Program payments).

The suspension of CACFP participation (including all Program payments) will take effect on the date of this letter. This action is being taken pursuant to 7 CFR 226.16(l)(4).

**PROPOSED TERMINATION AND PROPOSED DISQUALIFICATION**

As a result, effective [*date*], we propose to:

• Terminate your agreement to participate in the CACFP for cause and

• Disqualify you from future CACFP participation effective [*date*].

(*The effective date for the termination and disqualification must be after the deadline for requesting an appeal.*)

If you voluntarily terminate your agreement after receiving this letter, we will propose to disqualify you from future CACFP participation. If disqualified, you will be placed on the National Disqualified List (NDL). While on the list, you will not be able to participate in the CACFP as a day care home provider. In addition, you will not be able to serve as a principal in any CACFP institution or facility.

You will remain on the list until the USDA’s Food and Nutrition Service, in consultation with Montana DPHHS Child and Adult Food Program, determines that the serious deficiencies have been corrected or until seven years after your disqualification. However, if any debt relating to the serious deficiencies has not been repaid, you will remain on the list until the debt is repaid. These actions are being taken pursuant to 7 CFR 226.16(l).

**SERIOUS DEFICIENCIES**

The following paragraphs detail each serious deficiency. [*Insert discussion of serious deficiencies. Each serious deficiency discussed must include a citation for the relevant serious deficiency in the regulations at 7 CFR 226.16(l)(2). If the serious deficiency is not specifically listed, cite*: *7 CFR 226.16(l)(2)(ix), any other circumstance related to non-performance under the sponsoring organization-day care home agreement.]*

**APPEAL OF SUSPENSION, PROPOSED TERMINATION AND DISQUALIFICATION**

You may appeal the suspension, the proposed termination of your Program agreement for cause, and your proposed disqualification. A copy of the appeal procedures is enclosed. If you choose to appeal the proposed actions, follow the appeal procedures exactly as failure to do so may result in the denial of your request for an appeal.

**SUMMARY**

[*Name of sponsoring organization*] is suspending your CACFP participation (including all Program payments). In addition, [*name of sponsoring organization*] is proposing to terminate your agreement for cause and to disqualify you.

The suspension will remain in effect during the period of any appeal. However, if you request an appeal and the hearing official overturns the suspension all valid claims for reimbursement submitted by you for the period of the suspension will be paid. As always, the sponsoring organization will deny any portion of a claim that is determined to be invalid.

If you appeal the proposed termination and disqualification, these actions will not take effect until the hearing official issues a decision. If you do not make a timely request for an appeal, your agreement will be terminated for cause on [*date*]. You will be disqualified from future CACFP participation and your name placed on the NDL.

Sincerely,

Sponsoring Organization Employee Name & Title

Address and other contact information

Enclosure: Appeal Procedures

cc: Montana DPHHS Child and Adult Food Program