Sponsor Name and/or Logo

Street Address

City, State, Zip

Phone

Email

Date

Provider Name

Street Address

City, State, Zip

Email Address

VIA: Select Method of Notice Delivery

RE: Notice of Serious Deficiency, Suspension, and Proposed Termination and Disqualification due to Imminent Threat to Health and Safety

Dear Provider Name**:**

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

**SERIOUS DEFICIENCY DETERMINATION**

Based on the review/audit/etc. mentioned aboveSponsor name has 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 DISQUALIFICATION**

As a result, effective Date [The effective date for the termination/disqualification must be after the deadline for requesting an appeal], we propose to:

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

• Disqualify you from future CACFP participation.

If you voluntarily terminate your agreement after receiving this letter, we will propose to disqualify you from future CACFP participation. If disqualified, youwill be placed on the National Disqualified List (NDL). While on the NDL, 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 NDL until USDA’s Food and Nutrition Service, in consultation with the Georgia Department of Early Care and Learning, 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 has been repaid.

These actions are being taken pursuant to 7 CFR 226.16(l).

**SERIOUS DEFICIENCIES**

The following finding led to the serious deficiency determination:

* 7 CFR 226.16(l)(2)(vi) - Conduct or conditions threaten the health or safety of a child(ren) in care, or the public health or safety.

For details regarding this serious deficiency, see the attached Order for Intended Emergency Closure issued by Georgia Department of Early Care and Learning’s Child Care Services Division.

**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**

Sponsor Nameis suspending your CACFP participation (including all Program payments). In addition, Sponsor Nameis proposing to terminate your CACFP agreement for cause and to disqualify you from future Program participation.

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 [The effective date for the termination/disqualification must be after the deadline for requesting an appeal]. You will be disqualified from future CACFP participation, and your name placed on the NDL.

COMMENTS

Sincerely,

Sponsor Employee Name and Title

Sponsoring Organization Name

Enclosure: Sponsor Appeal Procedures

Order of Emergency Closure

cc: GA DECAL