



JENNIFER KENT  
DIRECTOR

State of California—Health and Human Services Agency  
Department of Health Care Services



EDMUND G. BROWN JR.  
GOVERNOR

May 1, 2017

CHDP Program Letter No.: 17-02

TO: ALL CHILD HEALTH AND DISABILITY PREVENTION (CHDP)  
PROGRAM DIRECTORS, DEPUTY DIRECTORS, PUBLIC HEALTH  
NURSES, NUTRITIONISTS, HEALTH EDUCATORS AND CALIFORNIA  
CHILDREN'S SERVICES (CCS) STAFF

SUBJECT: REVISION OF THE FOOD SCREENING FORM "WHAT DOES YOUR  
CHILD EAT? BIRTH TO 8 YEARS" AND "WHAT DO YOU EAT? AGES  
8-19 YEARS"

Enclosed is Provider Information Notice 17-02 to inform CHDP Program providers of the revised food screening form, the availability of other provider tools and training modules for nutrition and growth assessment, anticipatory guidance, and referral procedures available on the CHDP Training web page.

Please distribute this Provider Information Notice without any revisions to your county CHDP providers, complete and retain the "Report of Distribution" (DHCS 4504). The DHCS 4504 is located at:

<http://www.dhcs.ca.gov/formsandpubs/forms/Forms/ChildMedSvcForms/dhcs4504.pdf>

For questions or concerns, please contact Carol Hazell at (916) 323-8010 or via e-mail at [Carol.Hazell@dhcs.ca.gov](mailto:Carol.Hazell@dhcs.ca.gov).

Sincerely,

**ORIGINAL SIGNED BY PATRICIA McCLELLAND**

Patricia McClelland, Chief  
Systems of Care Division

Enclosure