Requirements for Meal Modifications in School Nutrition Programs





Connecticut State Department of Education
Bureau of Health/Nutrition, Family Services and Adult Education
Child Nutrition Programs

Presentation Information

- This presentation provides general guidance regarding the requirements for meal modifications in the U.S. Department of Agriculture's (USDA) school nutrition programs
- Links to relevant resources are indicated in the yellow bar at the bottom of a slide
- For detailed guidance, visit the Connecticut State
 Department of Education's (CSDE) Special Diets in School
 Nutrition Programs webpage at
 https://portal.ct.gov/SDE/Nutrition/Special-Diets-in-School-Nutrition-Programs
- For specific questions or additional guidance, please contact the CSDE (see slides 112-113)

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USDA Meal Patterns

School food authorities (SFAs) that implement the federal school nutrition programs must comply with the USDA's meal patterns for schools



- Grades K-12
- Preschool (ages 3-4)
- However, modifications may be needed for children whose disability restricts their diet

Grades K-12: https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-School-Nutrition-Programs

Preschool: https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-Preschoolers-in-School-Nutrition-Programs

School Nutrition Programs Include

- National School Lunch Program (NSLP)
- School Breakfast Program (SBP)
- Afterschool Snack Program (ASP) of the NSLP
- Special Milk Program (SMP)
- Fresh Fruit and Vegetable Program (FFVP)
- Child and Adult Care Food Program (CACFP) At-risk Supper Program implemented in schools

Meal Modifications

- Federal nondiscrimination laws require meal modifications for children with a disability (physical or mental impairment) that restricts their diet
 - All meal modifications must be made on a case-by-case basis to meet the special dietary needs of each individual child



Meal Modifications

Meal modifications are optional for children without a disability



Federal Nondiscrimination Legislation



Federal Nondiscrimination Legislation

Contain provisions that require schools and institutions to make reasonable meal modifications for children whose disability restricts their diet

- Section 504 of the Rehabilitation Act of 1973
- Individuals with Disabilities Education Act (IDEA)
- Americans with Disabilities Act (ADA) of 1990 and the ADA Amendments Act of 2008
- USDA Nondiscrimination Regulations (7 CFR 15b)

Section 504 of the Rehabilitation Act of 1973

- Prohibits discrimination on the basis of disability in any federal government program that receives *federal financial assistance*
- Entities covered include
 - local educational agencies
 - systems of vocational education
 - other school systems



Individuals with Disabilities Education Act (IDEA)

- Federal grant program that provides financial assistance to states in the provision of *special education* and related services for eligible children
- Requires each public agency to take steps to ensure children with disabilities have an equal opportunity to benefit from extracurricular services and activities, *including meals*

IDEA

- Any nutrition-related services included in a child's individualized education program (IEP) deemed necessary for the child to receive a free appropriate public education must be provided at no cost to the child's family
 - LEA may choose to have SFA handle this responsibility
 - LEA may use IDEA funds to cover costs

ADA Amendments Act

- Expands and clarifies definition of disability
 - Viewed more broadly
 - Encompasses more impairments that limit a major life activity and require an accommodation



- Clarifies that emphasis is on providing reasonable modification
 - Person with disability does not have high burden of proving their disability

Definition of Disability (ADA)

A physical or mental impairment that *substantially limits* one or more *major life activities* of such individual



- A record of such an impairment
- Being regarded as having such an impairment

Definition of Disability (ADA)

ADA Amendments Act

- Revises "substantially limits"
- Includes more "major life activities"



Expanded Definition of Disability

Major life activities

- Caring for one's self
- Performing manual tasks
- Seeing
- Hearing
- Eating
- Sleeping
- Walking
- Standing
- Lifting

- Bending
- Speaking
- Breathing
- Learning
- Reading
- Concentrating
- Thinking
- Communicating
- Working

New category Major bodily functions

- Immune system
- Normal cell growth
- Digestive
- Bowel
- Bladder
- Neurological
- Brain
- Respiratory
- Circulatory
- Endocrine
- Reproductive

Includes Conditions that are not Life Threatening or Severe

- A condition could be a disability even if it does not prevent or severely/significantly restrict a major life activity
- Individualized assessment (case-by-case basis)

Example: A child whose digestion is impaired by a food intolerance may be a person with a disability, even if consuming the food does not cause the child severe distress

Disregards Mitigating Measures

- Determination of disability must be made without regard to ameliorative effects of mitigating measures
 - medications, prosthetic devices, assistive devices, or learned behavioral or adaptive neurological modifications that an individual may use to eliminate or reduce the effects of an impairment

Disregards Mitigating Measures

Example: A child may be able to control an allergic reaction by taking medication

Example: A child may be able to control diabetes through insulin and diet

Includes Episodic Disabilities

- Modification is required if an impairment is *episodic or in remission* but substantially limits a major life activity when active
- Examples
 - mental illness
 - multiple sclerosis
 - Crohn's colitis
 - some forms of cancer

May include Temporary Disabilities

Must consider *duration* (or expected duration) and *extent* to which impairment actually limits a major life activity

Examples

- A child had major oral surgery due to an accident and is unable to consume food for a significant period of time unless the texture is modified
- For several months, a child is on medication that requires avoidance of certain foods

May include Temporary Disabilities

- Modification required if the child's condition is temporary, but severe and lasts for a significant duration
- Must consider *duration* (or expected duration) and *extent* to which impairment actually limits a major life activity
 - Temporary illnesses or injury (cold, flu, minor broken bone) generally do not require reasonable meal modifications

Comparison of Federal Nondiscrimination Laws

Criteria	IDEA	Section 504	ADA Amendments Act
Child has disability	Yes	Yes	Yes *
Child receives special education (public schools)	Yes	No	No
Meal accommodations required	Yes	Yes	Yes *
Federal funding available	Yes	No	No

^{*} If child's medical condition meets the definition of disability under the ADA Amendments Act

Comparison of Federal Nondiscrimination Laws

Criteria	IDEA	Section 504	ADA Amendments Act
Plan on file	 Individualized Education Program (IEP) Individualized Health Care Plan (IHCP) May also have Emergency Care Plan (ECP) 	 Section 504 Plan IHCP May also have ECP 	 IHCP May also have ECP
Required documentation for meal modification	Medical statement signed by recognized medical authority *	Medical statement signed by recognized medical authority *	Medical statement signed by recognized medical authority

^{*} Medical statement is not required if the child's IEP or Section 504 plan includes the same information required in the medical statement (see slide 44)

Definition of Recognized Medical Authority

A state-licensed health care professional who is authorized to write medical prescriptions under state law and is recognized by the Connecticut State Department of Public Health

- physicians
- physician assistants
- doctors of osteopathy
- advanced practice registered nurses (APRNs), i.e., nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs

CSDE Resource

Summary of Requirements for Accommodating Special Diets in School Nutrition Programs

Summary of Requirements for Accommodating Special Diets in School Nutrition Programs

This document summarizes the requirements for meal modifications in the U.S. Department of Agriculture's (USDA) school nutrition programs, which include the National School Lunch Program (NSLP), Afterschool Snack Program (ASP) of the NSLP, School Breakfast Program (SBP), Seamless Summer Option (SSO) of the NSLP, Special Milk Program (SMP), Fresh Fruit and Vegetable Program (FFVP), and Child and Adult Care Food Program (CACFP) Ar-risk Supper Program implemented in schools. The USDA's regulations require that reasonable modifications for children whose disability restricts their diet, based on a written medical statement signed by a recognized medical authority.

Under the Americans with Disabilities (ADA) Amendment Act of 2008, most physical and mental impairments will constitute a disability. This includes conditions that impair immune, digestive, neurological, and bowel functions, as well as many others. A physical or mental impairment does not need to be life threatening to constitute a disability. It is sufficient that it limits a major life activity. For example, a child whose digestion is impaired by a food intolerance (such as lactose intolerance or gluten intolerance) may be a person with a disability, regardless of whether consuming the food causes the child severe distress. All disability considerations must be reviewed on a case-by-case basis.

The USDA does not require meal accommodations for religious or moral convictions, personal preference, or general health concerns. For example, a parent's preference that a child eats a glutten-free diet because the parent believes it is healthier for the child does not meet the definition of disability, and does not require a modification. Schools and institutions may choose to make accommodations for children without disabilities on a case-by-case basis. All meal modifications for children without disabilities must comply with the USDA's meal patterns for school nutrition programs. For information on the requirements for meal modifications, see the Connecticut State Department of Education's (CSDE) guide, Accommodating Special Diets in School Nutrition Programs, and visit the CSDE's Special Diets in School Nutrition Programs webpage.

Scenario	Determination of disability	Plan on file	Examples of medical conditions ¹	Modification required?	Required documentation	What medical statement must include
Child is determined to have a disability (physical or mental impairment) under Section 504, and the disability restricts the child's diet	Section 504 meeting	504 plan and Individualized Health Care Plan (IHCP) May also have an Emergency Care Plan (ECP) depending on child's medical condition	Medical conditions that substantially limit a major life activity and affect the child's diet, for example: • metabolic diseases, such as diabetes or phenylketonuria (PKU) • food anaphylaxis (lifethreatening food allergy)	Yes	Medical statement signed by recognized medical authority 2,3	Information about how the child's physical or mental impairment restricts the child's diet An explanation of what must be done to accommodate the child The food or foods to be omitted and recommended alternatives, if appropriate

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Prohibited by 7 CFR 15b.4(b)(1)

- Denying a person with a disability the opportunity to participate in or benefit from the recipient's aid, benefit, or services
- Providing a person with a disability an opportunity to participate that is not equal to the opportunity provided to others
- Providing a person with a disability an aid, benefit, or service that is *not as effective* as the aid, benefit, or service provided to others
- Providing a person with a disability a *different* aid, benefit, or service, unless doing so is necessary to provide an aid, benefit, or service that is *as effective* as those provided to others

Disability Discrimination Related to USDA School Meals



Types of Disability Discrimination (violation of civil rights laws)

- Discrimination because of the disability
 - Denying benefits or opportunity to participate
 - Segregating individuals with disabilities
 - Aiding, perpetuating, or contracting with others that discriminate
- Failure to provide a reasonable modification
- Ineffective communication
- Inaccessible facilities



SFAs must ensure that discrimination does not occur

What Constitutes a Disability



What Constitutes a Disability

Based on federal nondiscrimination laws and a recognized medical authority's diagnosis of child's medical condition



Medical statement (or Section 504 plan or IEP, if applicable) indicates if child has a physical or mental impairment that restricts their diet

USDA Nondiscrimination Regulations (7 CFR 15b)

Prohibit discrimination against children with disabilities in any USDA program or activity



Is Meal Modification Required?

Can determine if a child requires a meal modification by reviewing question 10 in section B of the CSDE's Medical Statement for Meal Modifications in School Nutrition Programs form

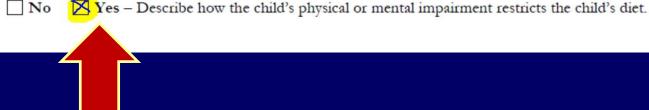
SECTION B – Completed by Child's Recognized Medical Authority
This section must be completed by the child's physician, physician assistant, doctor of osteopathy, or advanced practice registered nurse (APRN). APRNs include nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs.
10. Physical or Mental Impairment: Does the child have a physical or mental impairment that restricts the child's diet? No Yes – Describe how the child's physical or mental impairment restricts the child's diet.

Is Meal Modification Required?

SECTION B – Completed by Child's Recognized Medical Authority

This section must be completed by the child's physician, physician assistant, doctor of osteopathy, or advanced practice registered nurse (APRN). APRNs include nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs.

10. Physical or Mental Impairment: Does the child have a physical or mental impairment that restricts the child's diet?



- If "Yes," school food service must make meal modification
- If "No," school food service can choose, but is not required, to make meal modification

Examples of Disabilities ThatMay Require Meal Modifications *

- Autism
- Cancer
- Celiac disease
- Cerebral palsy
- Diabetes
- Food allergies (including non-life-threatening)
- Food intolerances,e.g., lactose, gluten

- Heart disease
- Metabolic disorders
- Obesity
- Phenylketonuria (PKU)
- Seizure disorder
- Certain temporary disabilities

^{*} This list is not all-inclusive and these conditions might not require meal modifications for all children (case-by-case basis)

Disabilities Do Not Include

- General health concerns
- Personal preferences
- Vegetarianism
- Religious or moral convictions



Examples

- Parents prefer a gluten-free diet for their child because they believe it is healthier
- A child does not eat certain foods for religious reasons

Resources for What Constitutes a Disability

- CSDE Guide: Accommodating Special Diets in School Nutrition Programs (see slide 102)
- CSDE Handout: Guidance and Instructions: Medical Statement for Meal Modifications in School Nutrition Programs (see slide 47)
- CSDE Operational Memorandum No. 13-17 (see slide 103)
- USDA Policy Memos SP 26-2017 and SP 59-2016 (see slide 108)

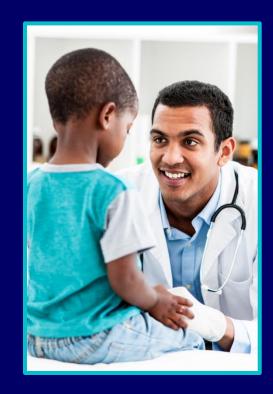
Meal Modifications for Children with Disabilities



USDA Requirements for Meal Modifications

General Guideline

Children with disabilities must be able to participate in and receive benefits from programs that are available to children without disabilities



USDA Requirements for Meal Modifications

- USDA requires reasonable modifications if a disability restricts the child's diet
- Must be documented with a medical statement signed by a recognized medical authority



Definition of Reasonable Modification

A change or alteration in policies, practices, and/or procedures to accommodate a disability that ensures children with disabilities have equal opportunity to participate in or benefit from a program



Definition of Recognized Medical Authority

A state-licensed health care professional who is authorized to write medical prescriptions under state law and is recognized by the Connecticut State Department of Public Health

- physicians
- physician assistants
- doctors of osteopathy
- advanced practice registered nurses (APRNs), i.e., nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs

USDA Requirements for Medical Statement



Medical Statement Must Include

- Information about child's physical or mental impairment (disability) that is sufficient to allow the SFA to understand how the impairment restricts the child's diet
- An explanation of what must be done to accommodate the child's disability
- If appropriate, the food or foods to be omitted and recommended alternatives

Appropriate Medical Statement

- Recommendation: Use the CSDE's form (see slide 46)
- If SFA uses an alternate form, it must contain the *same* information required by USDA (see slide 44)
- To protect children's privacy and confidentiality, the SFA's medical statement cannot require a specific diagnosis by name or use the term "disabled" or "disability"

CSDE Resource

Medical Statement for Meal Modifications in School Nutrition Programs

- English
- Spanish

Medical Statement for Meal Modifications in School Nutrition Programs

This form applies to requests for meal modifications for children participating in the U.S. Department of Agriculture's (USDA) school nutrition programs. School nutrition programs include the National School Lunch Program (NSIP), School Breakfast Program (SBP), Afterschool Snack Program (ASP), Seamless Summer Option (SSO) of the NSLP, Special Milk Program (SMP), Fresh Fruit and Vegetable Program (FPVP), and Child and Adult Care Food Program (CACFP) At-risk Supper Program implemented in schools. Schools and institutions are required to make reasonable meal modifications for children whose physical or mental impairment restricts their det. For guidance on meal modifications and instructions for completing this form, see the Connecticut State Department of Education's (CSDE) document, Guidance and Instruction: Medical Stateogree for Medical Medication in 5-box Nutrition Program.

Note: The USDA requires that the medical statement includes: 1) information about the child's physical or mental impairment that is sufficient to allow the school food authority (SFA) to understand how the physical or mental impairment restricts the child's diet; 2) an explanation of what must be done to accommodate the child's disability; and 3) if appropriate, the food or foods to be omitted and recommended alternatives. Schools and institutions should not deay or delay a requested meal modification because the medical statement does not provide sufficient information. When necessary, schools and institutions should work with the child's parent or guardian to obtain the required information.

	Name of child:		2. Birth date:		
3.	Name of parent or guardian:				
4.	Phone number (with area code):	5. E-mail addre	188:		
6.	Address:	City:	State:	Zip:	
	In accordance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Family Educational Rights and Privacy Act (PERPA), I hereby authorize				
			name of child's recognized medic	al authority	
	to release such protected health information of my child as is necessary for the specific purpose of special diet information to				
	and I consent to allow the recognized medical authority to freely				
	name of school district				
	exchange the information listed on this form and in my child's records with the school district as necessary. I understand that I may refuse to sign this authorization without impact on the eligibility of my mquest for a special diet for my child. I understand				
	that I may reacind permission to release this information at any time, except when the information has already been released.				
			0		
5.	Signature of parent or guardian:		9. Date:		
Se	ection B - Completed by child's recognic	zed medical authority			
	his section must be completed by the child's phy		of outconathy, or advanced r	ractice registered murse	
	PRN). APRNs include nurse practitioners, clini				
	Physical or mental impairment: Does the	Add have a chested or most line	naire and distribution design	Mr. E.O	
	No Yes: Describe how the chi			ad 8 caeer	
	_ rec Decide now the cir	ac a physical of mental imparation	nostrice the china's tact.		
11	. Diet plan: Explain the meal modification for	the child. Attach a specific diet pl	lan, if needed.		
11	. Diet plan: Explain the meal modification for	r the child. Attach a specific diet pl	lan, if needed.		
11	. Diet plan: Explain the meal modification for	r the child. Attach a specific diet p	lan, if needed.		
11	. Diet plan: Explain the meal modification for	r the child. Attach a specific diet pi	lan, if needed.		
11	. Diet plan: Explain the meal modification for	the child. Attach a specific diet pl	lan, if needed.		

https://portal.ct.gov/-/media/SDE/Nutrition/NSLP/SpecDiet/MedicalStatementSNP.pdf

https://portal.ct.gov/-/media/SDE/Nutrition/NSLP/SpecDiet/MedicalStatementSNP_Spanish.pdf

CSDE Resource

Instructions: Medical Statement for Meal Modifications in School Nutrition Programs

- English
- Spanish

Guidance and Instructions

Medical Statement for Meal Modifications in School Nutrition Programs

The Connecticut State Department of Education's (CSDE) Medical Statement for Meal Modifications in School Natrition Programs applies to requests for meal modifications for children participating in the U.S. Department of Agriculture's (USDA) school nutrition programs, including the National School Lunch Program (NSLP), School Breakfast Program (SEP), Afterchool Snack Program (ASP) of the NSLP, Special Milk Program (SMP), Fresh Fruit and Vegetable Program (FFVP), and Child and Adult Care Food Program (CACFP) At-risk Supper Program implemented in schools. School food authorities (SFAs) for schools and institutions that participate in the USDA school nutrition programs:

- are required to make reasonable meal modifications for children whose physical or mental
 impairment (disability) restricts their diet; and
- have the option to make meal modifications for children whose special dietary needs do not
 constitute a disability, if the requested modification compiles with the USDA meal patterns.

This document provides general guidance on the requirements for meal modifications (pages 1-7) and instructions for completing the CSDE's Medical Statement for Meal Modifications in School Nutrition Programs form (pages 3-9). For detailed guidance on the requirements for modified meals, review the CSDE's guide, Accommodating Special Distr in School Nutrition Programs.

Determining if a meal modification is required

SFAs can determine if a child requires a meal modification by reviewing question 10 in section B of the CSDE's Medical Statement for Meal Modifications in School Natrition Programs form. Question 10 asks if the old has a physical or mental impairment that restricts their diet. If the recognized medical authority's answer is "Yes," the SFA must make the meal modification. If the recognized medical authority's answer is "No," the SFA can choose, but is not required, to make the meal modification. For more information, see "What constitutes a disability" on page 3.

Meal Modifications for Children with Disabilities

Federal laws and USDA regulations require that SFAs make reasonable meal modifications on a case-by-case basis to accommodate children whose disability restricts their diet. A "reasonable modification" is a change or alteration in policies, practices, and/or procedures to accommodate a disability that ensures children with disabilities have equal opportunity to participate in or benefit from a program.

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https://portal.ct.gov/-/media/SDE/Nutrition/NSLP/SpecDiet/MedicalStatementSNPinstr.pdf

https://portal.ct.gov/-/media/SDE/Nutrition/NSLP/SpecDiet/MedicalStatementSNPinstr_Spanish.pdf

Handling Missing Information

- SFA cannot deny or delay a requested meal modification with insufficient information
 - Must obtain appropriate clarification
 - Must work with parent/guardian to obtain amended medical statement
- While obtaining additional information, SFA must follow the portion of the medical statement that is clear and unambiguous to greatest extent possible

Updates to Medical Statements

- Changes to diet orders must be in writing on a medical statement signed by a recognized medical authority
- Schools should develop a plan for ensuring that dietary information on file is current



USDA recommends that SFAs maintain documentation when ending a meal accommodation

Good Communication is Important

- USDA encourages inclusive team approach to provide appropriate meal modifications
 - school nurse and other medical personnel
 - school food service personnel
 - school administrators
 - parents/guardians
 - children (when age appropriate)
 - other school officials with relevant experience,
 e.g., school dietitians



Good Communication is Important

identifying children with special dietary needs and providing applicable information to school food service personnel



 Share copies of medical statements with school food service personnel, as appropriate

Sharing of Medical Statements

Family Educational Rights and Privacy Act (FERPA) allows sharing of confidential student information when there is a legitimate educational interest, such as making meal modifications for special dietary needs



SFA's Obligations for Reasonable Meal Modifications



SFA's Obligations for Reasonable Meal Modifications

General Guideline SFA must offer a *medically* appropriate and reasonable modification that effectively accommodates the child's disability and provides equal opportunity to participate in or benefit from the school nutrition program



SFA's Obligations for Reasonable Meal Modifications

- Modification must be related to disability based on child's medical statement
- Must assess each request on a case-by-case basis to determine appropriate modification
- Can consider cost, efficiency, and age of child

General Guideline: SFA must offer a medically appropriate and reasonable modification that effectively accommodates the child's disability and provides equal opportunity to participate in or benefit from the school nutrition program

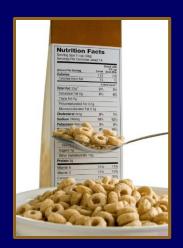
Food Substitutions

- Not required to provide the same meal
- Not required to provide a *specific* number of alternate meals
- Generally not required to provide a specific brand of food, unless medically necessary

General Guideline: SFA must offer a medically appropriate and reasonable modification that effectively accommodates the child's disability and provides equal opportunity to participate in or benefit from the school nutrition program

Nutrition Information

SFA must make nutrition information for school meals available to students, families, school nurses, and others as needed



- Not required for all meals
- Best Practice: Develop cycle menus for specific diets, e.g., five-day gluten-free diet cycle menu or two-week cycle menu for a specific food allergy
 - Check with parents/guardians to ensure cycle menu meet their child's specific dietary requirements

Texture Modifications

Meals modified for texture (chopped, ground or pureed) consist only of regular menu items, unless otherwise specified



- Medical statement not required but recommended
 - CSDE recommends medical statement to ensure clear communication between parents/guardians and school staff about appropriate meal modifications

Meal Services Outside USDA Programs

SFA not required to provide meal services, special foods, or supplements to children with disabilities when the meal service is not normally available for the general student body



There are two exceptions

Meal Services Outside USDA Programs

Two Exceptions

- educational agency (LEA) does not provide, or special foods or nutrition supplements outside of the normal school meal periods, the *LEA's* administration is responsible for providing them and allocating the cost of making these accommodations
- If child resides in a *residential child care institution* (RCCI), the RCCI must provide the required meal service in the child's medical statement or IEP



A school participates in the NSLP and SBP. The medical statement for a child with a disability requires 6 cans of a nutrition supplement during the school day. Is the SFA required to provide and pay for all 6 servings?



A school participates in the NSLP and SBP. The medical statement for a child with a disability requires 6 cans of a nutrition supplement during the school day. Is the SFA required to provide and pay for all 6 servings?



Depends on whether child has IEP



Maal	Is supplement required?		
Meal	No IEP	IEP	
Breakfast (SBP): 2 cans	Yes		
AM Snack: 1 can	No		
Lunch (NSLP): 2 cans	Yes		
PM Snack: 1 can	No		



	Is supplement required?				
Meal	No IEP	IEP			
Breakfast (SBP): 2 cans	Yes	Yes			
AM Snack: 1 can	No	Yes*			
Lunch (NSLP): 2 cans	Yes	Yes			
PM Snack: 1 can	No	Yes*			
* LEA must provide and may choose to have SFA cover cost					

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SFA versus LEA Responsibility

SFA (food service)

Responsible for providing the necessary meal modifications for children participating in school nutrition programs

LEA (district/governing authority)

- Overall responsibility for accommodating children with disabilities
- May have additional obligations under federal law, beyond the scope of USDA guidance





- LEA's policies and practices must protect the privacy of children who have a disability and maintain the confidentiality of each child's medical condition
- LEAs cannot outwardly identify students whose disability requires a meal modification

Unacceptable practices

- Posting student lists in public areas
- Asking students or their parents to consent to a physical designation, such as wearing a lanyard, bracelet, pin, sticker, or similar item

Acceptable practices

- Point-of-sales (POS) cash register system
- Different colored plates or trays to identify meals that meet specific dietary criteria
- Colored tags or labels, placards, or similar signage near each food item on the serving line to identify each food item's dietary criteria

Acceptable practices

Providing regular cafeteria updates for each child whose disability requires a meal modification and posting this information in locations that are only visible to school food service staff, such as the kitchen and behind counters and serving lines

Acceptable practices

Providing ongoing communication with parents, such as parent forums or meetings, to explain the district's procedures for meal modifications, menus, and how the cafeteria ensures allergen-free meals

Appropriate Eating Areas



Appropriate Eating Areas

- Must accommodate children with disabilities in least restrictive and most integrated setting
 - Children with disabilities must participate with children without disabilities to the maximum extent appropriate
- Ensure food service areas are accessible
- Provide auxiliary aids and services, if needed
 - food service aides
 - adaptive feeding equipment
 - meal tracking assistance
 - other effective methods

Appropriate Eating Areas

- Separate table for children with certain special needs may be appropriate under some circumstances
 - Must always be based on what is appropriate to meet children's needs
 - Cannot segregate as a matter of convenience or for disciplinary reasons



Example: Appropriate Eating Areas



A child requires a large degree of assistance from an aide in order to consume their meals. During the meal service, is it appropriate for the child and the aide to be at a separate table that has more space?



If in best interest of meeting child's needs

Example: Appropriate Eating Areas



A school designates a separate table in the cafeteria where children with severe food allergies can safely consume their meals. Is this an appropriate practice?



- If in best interest of meeting child's needs
- Must be cleaned according to food safety guidelines to eliminate possible crosscontamination of allergens on tables and seating

Example: Appropriate Eating Areas



A school designates an area away from the cafeteria where children with severe food allergies can safely consume their meals. Is this an appropriate practice?



- If in best interest of meeting child's needs
- Must be cleaned according to food safety guidelines to eliminate possible crosscontamination of allergens on tables and seating

Separate Eating Areas for Food Allergies

- School should determine if special seating arrangement is truly necessary
 - Get input from child's parent/guardian and recognized medical authority
- Allow other children to join children with food allergies, provided they do not bring any foods that are potentially dangerous to those children

Food Bans

- Universal exclusion of specific foods (or food groups) is not USDA policy
 - Could be appropriate depending on local circumstances
- If a school enacts a universal ban, the specific allergen must never be present in the school
 - Family will assume the school is a safe place for their child based on the stated ban

Food Service Management Company (FSMC) Contracts



FSMC Contracts

- Federal regulations specifically prohibit disability discrimination in vended contracts
- SFAs must make reasonable modifications for children with disabilities, regardless of whether the SFA operates the food service or contracts with a FSMC
- As applicable, must include modifications for children with disabilities in the FSMC contract

FSMC Contracts

- SFAs must make certain the FSMC is aware that dietary modifications may be required during the term of the contract
- Review USDA Memo SP 40 CACFP 12 SFSP 14-2016, Updated Guidance: Contracting with Food Service Management Companies



See page 6 of Operational Memorandum 13-17

- LEAs must establish a procedural safeguards process that provides *notice* and information to parents/guardians regarding
 - how to request a reasonable meal modification
 - their procedural rights for grievance procedures

- LEAs must work with school food service personnel to implement procedures for parents/guardians to request meal modifications for children with disabilities and to resolve grievances
 - May meet this requirement by using existing procedures to address requests to accommodate students with disabilities in the classroom, in compliance with Section 504 or the IDEA

- At a minimum, the LEA must
 - notify parents/guardians of the process for requesting meal modifications to accommodate a child's disability
 - arrange for an impartial hearing process to resolve grievances related to requests for meal modifications based on a disability

- LEAs employing at least 15 individuals must ensure their procedural safeguards process provides for a prompt and equitable resolution of grievances, and must designate at least one person to coordinate compliance with disability requirements
 - often referred to as the Section 504
 Coordinator



Do you know your Section 504 Coordinator?

Section 504 Coordinator

- In many cases, the Section 504 Coordinator is responsible for addressing requests for accommodations in the school in general
- May also be responsible for ensuring compliance with disability requirements related to meals and the meal service

Section 504 Coordinator

- LEAs are not required to have a separate 504 Coordinator who is only responsible for meal modifications
- LEAs should ensure that school food service personnel *understand the procedures* for handling requests for meal modifications and *know how to contact the Section 504 Coordinator*

Requirements for Procedural Safeguards for Meal Modifications in School Nutrition Programs

Requirements for Procedural Safeguards for Meal Modifications in School Nutrition Programs

Under the Individual with Disabilities Education Act (IDEA), procedural safeguards protect the rights of parents and their child with a disability, and provide families and school systems with processes to secole disputes. The U.S. Department of Agriculture (USDA) requires that local educational agencies (IEAs) include procedural safeguards for meal modifications to accommodate a child's disability in the school nutrition programs. These requirements are part of the USDA's monodiscrimination regulations and civil rights protections. The USDA's vehool nutrition programs include the National School Lunch Program (NSLP), School Breakfast Program (SBP), Afterschool Sanck Program (ASP) of the NSLP, Senalest Summer Option (SSO) of the NSLP, Special Milk Program (SAP), Fresh Fruit and Vegetable Program (FFVP), and Child and Adult Care Food Program (CACFF) Article Supper Program implemented in schools.

School food authorities (SFAs) must work with their LEA's 504 Coordinator to ensure that the LEA's procedual rafeguards process includes the provisions required by the USDA's nondiscomination regulations (7 CFR 189). LEAs must establish a process for proceedural safeguards that provides notice and information to parents and grazedians regarding how to request a reasonable modification and their procedural rights for grievance procedures.

Requirements for Meal Modifications for Children with Disabilities

The USDA's nondiscrimination regulations (7 CFR 15b) and regulations for velocol nutrition programs (7 CFR 210.10m) and 7 CFR 220.8(m)) require that 5FAs make reasonable modifications on a case-by-case basis for children whose disability settincts their diet, when a recognized medical authority certifies the need. The USDA defines a "reasonable modification" as a change or alteration in policies, parctices, and/or proceedures to accommodate a disability that ensure children with disabilities, have equal opportunity to participate in or benefit from a program. The general guideline in making accommodations is that children with disabilities must be able to participate in and receive benefit from a program: that are available to children without disabilities.

Meal modifications must be related to the disability of imitations caused by the disability, and require a medical precopious under state-licensed healthcare professional who is authorized to write medical precopious under state law. The Connecticut State Department of Public Health (DPH) defines recognized medical authorizes as physicians, physician assistants, doctors of osteopathy, and advanced practice registered nurses (APRNs), i.e., nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs. For detailed guidance on the requirements for meal modifications in the school nutrition programs, see the Connecticut State Department of Education's (CSDE) guide, Astronomolating Special Diets in School Nutrition Programs webspace.

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https://portal.ct.gov/-/media/SDE/Nutrition/NSLP/SpecDiet/ProceduralSafeguardsSNP.pdf

Meal Modifications for Children without Disabilities



Meal Modifications for Children without Disabilities

- Optional
- Must always comply with the USDA meal patterns



- Medical statement not required
 - CSDE recommends medical statement to ensure clear communication between parents/guardians and school staff about appropriate meal modifications

Milk Substitutes for Children without Disabilities (Grades K-12)

- USDA meal patterns require a serving of milk, which must be low-fat (1%) or fat-free (unflavored or flavored)
- SFAs may choose to offer one or more allowable milk substitutes including
 - low-fat (1%) or fat-free
 lactose-reduced or lactose-free milk
 - a nondairy beverage that meets the USDA's nutrition standards for fluid milk substitutes



Milk Substitutes for Children without Disabilities (Preschoolers)

- USDA meal patterns require a serving of milk, which must be whole unflavored milk for age 1, and unflavored low-fat (1%) or unflavored fat-free milk for ages 3-4
- SFAs may choose to offer one or more allowable milk substitutes including
 - lactose-reduced or lactose-free milk (meet fat requirements for appropriate age group)
 - a nondairy beverage that meets the USDA's nutrition standards for fluid milk substitutes

Milk Substitutes for Children without Disabilities

Without a disability, cannot offer juice or water as a substitute for milk, even if specified on a medical statement



Summary of Allowable Milk Substitutes for Children with and without a Disability

Beverage	Allowable Substitute?		
Develage	Disability	No Disability	
Juice	Yes *	No	
Water	Yes *	No	
Nondairy beverage that meets USDA standards	Yes *	Yes	
Nondairy beverage that does <i>not</i> meet USDA standards	Yes *	No	

^{*} If specified by the recognized medical authority in the child's medical statement

Allowable Milk Substitutes for Children without Disabilities

Allowable Milk Substitutes for Children Without Disabilities in School Nutrition Programs

Public schools, private schools, and residential child care institutions (RCCIs) participating in the U.S. Department of Agriculture's (USDA) school institution programs must follow the federal requirements for meal modifications for children without disabilities who cannot daink milk. School institution programs include the National School Linach Program (NSLP), School Breakfast Program (SEP), Afterschool Sanck Program (ASP) of the NSLP, Seamless Summer Option (SEO) of the NSLP, Special Milk Program (SMP), and Child and Adult Care Food Program (CACFF) At-risk Supper Program implemented in schools.

Each school food authority (SFA) has the option to make this accommodation by offering one or more allowable fluid milk substitutes for children without disabilities. If a SFA chooses to make allowable milk substitutes available, they must be available for all children when requested by their parent or guardian. These substitutions are at the expense of the SFA. The USDA does not provide additional reimbursement.

For children without disabilities, SFAs cannot claim reimbursement for meals that contain any other beverages in place of milk, such as juice, wrater, or nondairy beverages that do not meet the USDA's mutition standards for fluid milk substitutes.

Note: The following criteria apply only to milk substitutes for children without disabilities. Meal modifications for children with disabilities must comply with the USDA's requirements. For more information, see the Connecticut State Department of Education's (CSDE) guide, Accommodating Special Diet in School Nutrition Programs.

Allowable Milk Substitutes

SFAs may choose to offer one or more allowable milk substitutes for children whose special dietary meeds do not constitute a disability. The two types of allowable substitutes for children without disabilities include:

- nondairy milk substitutes that meet the USDA's nutrition standards for fluid milk substitutes (see table 1), such as certain brands of soy milk; and
- lactose-reduced or lactose-free milk with the appropriate fat content for each grade group, i.e., low-fat milk (unflavored or flavored) and fat-free milk (unflavored or flavored) for grade: K-12; whole unflavored milk for age 1; and unflavored low-fat or fat-free milk for age: 2-4.



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Summary of USDA Requirements



Summary of USDA Requirements for Meal Modifications

Criteria	Disability	No Disability
Meal modification	Required *	Optional
Medical statement signed by recognized medical authority	Required (unless the same information is in child's IEP or Section 504 Plan)	Recommended
Modified meals must meet USDA meal patterns	No	Yes

^{*} If disability restricts child's diet

Determining if Meal Modifications Are Required

Does the child have a physical or mental impairment that meets the definition of *disability* under any of the federal nondiscrimination laws (Section 504, the ADA and ADA Amendments Act, the IDEA, and the USDA nondiscrimination regulations 7 CFR 15 b)?



NO

Does the physical or mental impairment restrict the child's diet?



School or institution is *not required* to make the meal modification

Did the child's family provide a *medical statement* signed by a recognized medical authority that indicates:

- how the child's physical or mental impairment restricts the child's diet;
- an explanation of what must be done to accommodate the child; and
- if appropriate, the food or foods to be omitted and recommended alternatives?



School or institution is *not required* to make the meal modification



School or institution is *required* to make the meal modification



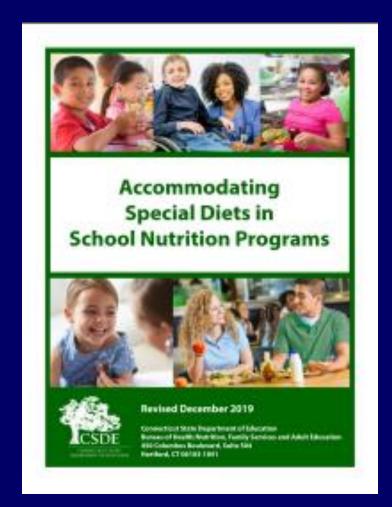
School or institution is *required* to make the meal modification and must work with child's family to obtain a medical statement

Resources



Accommodating Special Diets in School Nutrition Programs

Detailed information and guidance on the federal and state requirements for meal modifications in the USDA's school nutrition programs



CSDE Operational Memorandum

Operational
Memorandum No. 13-17
(August 4, 2017)
Requirements for Meal
Modifications in the
School Nutrition
Programs



STATE OF CONNECTICUT DEPARTMENT OF EDUCATION



TO: Sponsors of the National School Lunch and Breakfast Programs

FROM: John D. Frassinelli, Chief

Bureau of Health/Nutrition, Family Services and Adult Education

DATE: August 4, 2017

SUBJECT: Operational Memorandum No. 13-17

Requirements for Meal Modifications in the School Nutrition Programs

On April 25, 2017, the U.S. Department of Agriculture (USDA) issued policy memo SP 26-2017, Accommodating Disabilities in the School Meal Programs: Guidance and Questions and Answers (Q&As), as a follow-up to policy memo SP 59-2016, Policy Memorandum on Modifications to Accommodate Disabilities in the School Meal Programs. On July 25, 2017, the USDA released the guide, Accommodating Children with Disabilities in the School Meal Programs. These USDA memos and guide significantly change the requirements and process for meal modifications for children with disabilities in the school nutrition programs, including the National School Lunch Program (NSLP), Afterschool Snack Program (ASP) of the NSLP, School Breakfast Program (SBP), Special Milk Program (SMP), and Fresh Fruit and Vegetable Program (FFVP).

This operational memorandum provides an overview of the key requirements for meal modifications, including relevant legislation and definitions, and summarizes the Connecticut State Department of Education's (CSDE) special diets implementation resources for school food authorities (SFAs). For detailed guidance, review the CSDE's guide, Accommodating Special Diets in School Nutrition Programs.

REVISED RESOURCES

The CSDE has recently revised the following documents to reflect the USDA's policy guidance in SP 26-2017 and SP 59-2016:

- · Accommodating Special Dietary Needs in School Nutrition Programs
- · Allowable Milk Substitutes for Children without Disabilities
- · Medical Statement for Meal Modifications in School Nutrition Programs
- Guidance and Instructions for the Medical Statement for Meal Modifications in School Nutrition Programs
- Self-assessment of Local Practices for Special Diets in School Nutrition Programs
- Summary of Requirements for Accommodating Special Diets in School Nutrition Programs

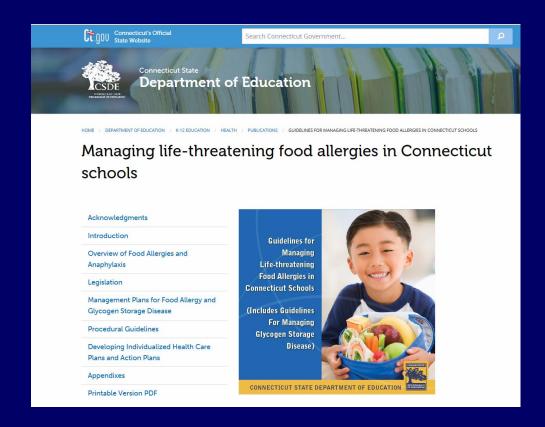
Please discard any old versions of these documents and replace with the revised versions. SFAs must carefully review these resources to ensure compliance with the USDA requirements for meal modifications for children with disabilities in the school nutrition programs.

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https://portal.ct.gov/-/media/SDE/Nutrition/NSLP/Memos/OM2017/OM13-17.pdf

Guidelines for Managing Life-threatening Food Allergies in Connecticut Schools

Includes roles and responsibilities for school nurse and school food service staff



https://portal.ct.gov/SDE/Publications/Managing-Life-Threatening-Food-Allergies-in-Connecticut-Schools

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Summary of Requirements for Accommodating Special Diets in School Nutrition Programs

Summary of Requirements for Accommodating Special Diets in School Nutrition Programs

This document summarizes the requirements for meal modifications in the U.S. Department of Agriculture's (USDA) school nutrition programs, which include the National School Lunch Program (NSLP), Afterschool Snack Program (ASP) of the NSLP, School Breakfast Program (SBP), Seamless Summer Option (SSO) of the NSLP, Special Milk Program (SMP), Fresh Fruit and Vegetable Program (FFVP), and Child and Adult Care Food Program (CACFP) At-risk Supper Program implemented in schools. The USDA's regulations require that reasonable modifications for children whose disability restricts their diet, based on a written medical statement signed by a recognized medical authority.

Under the Americans with Disabilities (ADA) Amendment Act of 2008, most physical and mental impairments will constitute a disability. This includes conditions that impair immune, digestive, neurological, and bowel functions, as well as many others. A physical or mental impairment does not need to be life threatening to constitute a disability. It is sufficient that it limits a major life activity. For example, a child whose digestion is impaired by a food intolerance (such as lactose intolerance or gluten intolerance) may be a person with a disability, regardless of whether consuming the food causes the child severe distress. All disability considerations must be reviewed on a case-by-case basis.

The USDA does not require meal accommodations for religious or moral convictions, personal preference, or general health concerns. For example, a parent's preference that a child eats a gluten-free diet because the parent believes it is healthier for the child does not meet the definition of disability, and does not require a modification. Schools and institutions may choose to make accommodations for children without disabilities on a case-by-case basis. All meal modifications for children without disabilities must comply with the USDA's meal patterns for school nutrition programs. For information on the requirements for meal modifications, see the Connecticut State Department of Education's (CSDE) guide, Accommodating Special Diets in School Nutrition Programs, and visit the CSDE's Special Diets in School Nutrition Programs webpage.

Scenario	Determination of disability	Plan on file	Examples of medical conditions ¹	Modification required?	Required documentation	What medical statement must include
Child is determined to have a disability (physical or mental impairment) under Section 504, and the disability restricts the child's diet	Section 504 meeting	504 plan and Individualized Health Care Plan (IHCP) May also have an Emergency Care Plan (ECP) depending on child's medical condition	Medical conditions that substantially limit a major life activity and affect the child's diet, for example: • metabolic diseases, such as diabetes or phenylketonuria (PKU) • food anaphylaxis (lifethreatening food allergy)	Yes	Medical statement signed by recognized medical authority 2,3	Information about how the child's physical or mental impairment restricts the child's diet An explanation of what must be done to accommodate the child The food or foods to be omitted and recommended alternatives, if appropriate

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Self-assessment of Local Practices for Special Diets in School Nutrition Programs

Self-assessment of Local Practices for Special Diets in School Nutrition Programs

This tool is intended to help local educational agencies (LEAs) assess current practices for accommodating special diets in school meals and identify areas in need of improvement. For information on the requirements for meal modifications for children with special dietary needs, see the Connecticut State Department of Education's (CSDE) guide, Accommodating Special Diets in School Nutrition Programs.

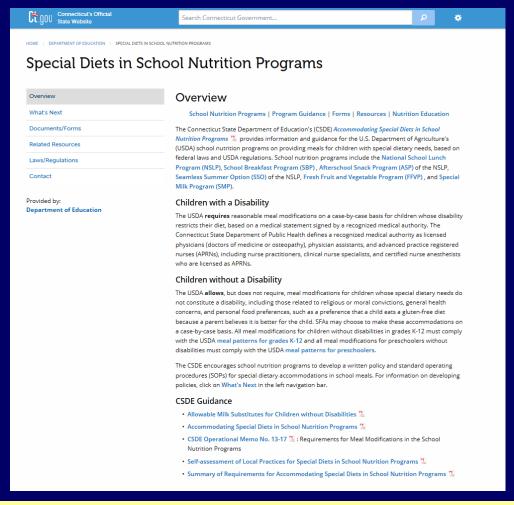
Step 1 — Assessment. Check the appropriate box to indicate whether each recommendation is fully implemented, partially implemented, or not implemented by the LEA. Refer to the LEA's policies, guidelines, and procedures for special diets, and the LEA's food allergy management plan.

		Implem	entatio	n
Federal and state requirements	Full	Partial	None	Don't know
 The LEA follows all federal and state requirements for accommodating children with special dietary needs, including the Connecticut General Statutes (Section 10-212c), the U.S. Department of Agriculture (USDA) school meals regulations (7 GFR 210 and 7 GFR 220) and nondiscrimination regulations (7 GFR 15b), Section 504 of the Rehabilitation Act of 1973, the Individuals with Disabilities Education Act (IDEA), the Americans with Disabilities Act (ADA), the ADA Amendments Act, and the Family Educational Rights and Privacy Act (FERPA). 				
2. The LEA makes meal modifications on a case-by-case basis for students whose disability restricts their diet, based on the prescription in the medical statement signed by a recognized medical authority, i.e., physician, physician assistant, doctor of osteopathy, or advanced practice registered murse (APRN). The medical statement identifies: how the child's physical or mental impairment restricts the child's diet; an explanation of what must be done to accommodate the child; and the food or foods to be omitted and recommended alternatives, if appropriate. Note: The CSDE's form, Medical Statement for Meal Modifications in School Nutrition Programs, is available on the CSDE's Special Diets in School Nutrition Programs webpage.				
 For students without a disability that restricts their diet (such as religion, personal preference, or general health concerns), the LEA makes modifications to school meals on a case-by-case basis. Note: LEA: can choose, but are not required, to make these accommodations. 				
 Modified meals for students without a disability comply with the USDA meal patterns for school nutrition programs. For more information, wisit the CSDE's Meal Fatterns for Grades K-12 in School Nutrition Programs and Meal Patterns for Preschoolers in School Nutrition Programs webpages. 				
5. The LEA maintains medical statements on file for students requiring meal accommodations due to disabilities or other special medical needs.				
 School food service personnel take the necessary steps to prevent overt identification of students with special dietary needs. 				
7. The LEA takes appropriate precautions to prepare and serve safe meals for children with food allergies. Procedures are in place to:				
 develop a food allergy action plan for each child with life-threatening food allergies; 		-		-
check ingredients labels for all foods served to children with food allergies;		-		-
 designate an area in the kitchen for allergy-free meals and use separate equipment and utensils during preparation, cooking, and serving. 		-		
 develop cleaning procedures that avoid cross-contamination; and as required by C.G.S. Section 10-212a, provide annual and ongoing training for staff, including management of students with life-threate food allergies and administration of epinephrine autoinjectors. 	ening			

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CSDE Webpage

Special Diets in School Nutrition Programs



https://portal.ct.gov/SDE/Nutrition/Special-Diets-in-School-Nutrition-Programs

USDA Policy Memos

USDA Memo SP 26-2017 (April 25, 2017) Accommodating Disabilities in the School Meal Programs: Guidance and Q&As

https://www.fns.usda.gov/school-meals/accommodating-disabilities-school-meal-programs-guidance-and-qas

USDA Memo SP 59-2016 (September 26, 2016) Policy Memorandum on Modifications to Accommodate Disabilities in the School Meal Programs

https://www.fns.usda.gov/policy-memorandum-modifications-accommodate-disabilities-school-meal-programs

USDA Resource

Accommodating Children with Disabilities in the School Meal Programs

USDA-FNS

Accommodating
Children with
Disabilities in the
School Meal Programs

Guidance for School Food Service Professionals

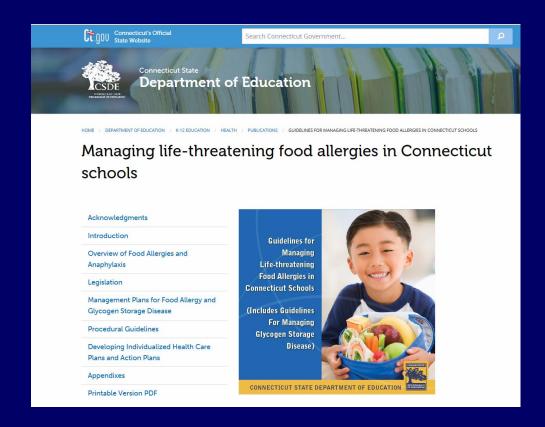


Connecticut General Statute 10-212c: Life-threatening food allergies and glycogen storage disease: Guidelines; district plans

- CSDE developed guidelines
- Board of education must implement a plan for the management of students with life-threatening food allergies and glycogen storage disease, based on CSDE guidelines

Guidelines for Managing Life-threatening Food Allergies in Connecticut Schools

Includes roles and responsibilities for school nurse and school food service staff



CSDE Child Nutrition Programs

CSDE School Nutrition Programs Staff

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New London County Tolland County (includes Regions 8 and 19) Windham County (includes Region 11)	Susan Alston susan.alston@ct.gov ● 860-807-2081



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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 Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the <u>USDA Program Discrimination Complaint Form</u>, (AD-3027) found online at: <u>How to File a Complaint</u>, 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
 Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

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Inquiries regarding the Connecticut State Department of Education's nondiscrimination policies should be directed to: Levy Gillespie, Equal Employment Opportunity Director/Americans with Disabilities Coordinator (ADA), Connecticut State Department of Education, 450 Columbus Boulevard, Suite 607, Hartford, CT 06103, 860-807-2071, levy.gillespie@ct.gov.