

Hastings on Hudson Union Free School District  
Meal Modification Plan  
Accommodating Individuals with  
Disabilities in our Child Nutrition Program

Schools must make substitutions for students who are considered to have a disability under 7 CFR 15b.3 and whose disability restricts their diet. 7CFR 210.10(m).

The Civil Rights Authorities that pertain to this plan are as follows:

- Title VI of the Civil Rights Act of 1964
- Civil Rights Restoration Act of 1987
- Section 504 of the Rehabilitation Act of 1973
- ADA of 1990
- ADA of 2008
- Title IX of the Education Amendments of 1972
- Age Discrimination Act of 1975
- 7 CFR Parts 15, 15a, 15b and 15c
- FNS 113-1
- Executive Order 12250
- Executive Order 13166
- 28 CFR 41
- USDA Departmental Regulation 4330-2
- 2017 Edition of Accommodating Children with Disabilities in the School Meal Programs

ADA Amendments Act of 2008: Implementation

- The term “substantially limits” requires a lower degree of functional limitation than the standard previously applied by the courts. An impairment does not need to prevent or severely or significantly restrict a major life activity to be considered “substantially limiting.” Nonetheless, not every impairment will constitute a disability.
- The term “substantially limits” is to be construed broadly in favor of expansive coverage, to the maximum extent permitted by the terms of the ADA.
- The determination of whether an impairment substantially limits a major life activity requires an individualized assessment, as was true prior to the ADAAA.
- With one exception (“ordinary eyeglasses or contact lenses”), the determination of whether an impairment substantially limits a major life activity shall be made without regard to the ameliorative effects of mitigating measures, such as medication or hearing aids.
- An impairment that is episodic or in remission is a disability if it would substantially limit a major life activity when active.
- In keeping with Congress’s direction that the primary focus of the ADA is on whether discrimination occurred, the determination of disability should not require extensive analysis.

The expanded definition of DISABILITY:

Major Life Activities:

Seeing, hearing, walking, speaking, learning, eating, breathing

Major Bodily Functions:

Digestive immune system, respiratory, circulatory, neurological/brain

Major Life Activities

- Caring for oneself
- Performing manual tasks
- Seeing, Hearing, Speaking
- Eating, Sleeping, Walking
- Standing
- Lifting, Bending
- Bathing
- Reading, Learning, Thinking
- Communicating
- Working

Major Bodily Functions

- Functions of the immune system
- Normal Cell Growth
- Digestive, Bowel, Bladder
- Neurological, Brain
- Respiratory
- Circulatory
- Endocrine
- Reproductive

## **Reasonable Modification**

Definition: A change or alteration in policies, practices and procedures to accommodate a disability which will be determined on a case-by-case basis.

- Program accessibility
- Ensure all food service areas are accessible
- Provide auxiliary aids and services, such as: adaptive feeding equipment, or food service aides

## **Integrated Environment**

- Section 504 contains an integration clause
- Applies to food allergies
- Balance safety versus stigma

NOTE: Health concerns or preferences that a child eat a specific diet because the parent/guardian believes it is healthier for the child are not disabilities and do not require a modification.

## **Modification provided:**

- Should be related to the disability or limitations caused by the disability
- Does not have to be the modification requested
- Must (generally) be free of charge
- Should be implemented even when the person requesting the modification believes more should be done

**Food Allergies:** Many food allergies fall under the definition of disability

In order to be considered for a meal modification plan, a medical statement is required, which can be completed by any State-licensed healthcare professional or Registered Dietician. The form is included in Appendix A of this plan.

#### Medical statement requirements

- Provides information about impairment-DIAGNOSIS NOT REQUIRED
- States how diet is restricted
- States how to accommodate condition

If the medical statement relates to a food allergy, the following are the three essential components:

- The food to be avoided (allergen)
- Brief explanation of how exposure affects the student
- Recommended substitute(s)

#### Food Service **Helpers'** Role

- Tracking Dietary Intake
- Food Safety/Sanitation
- Tracking special circumstances:
  - Portion Sizes
  - Brand Name Requests
  - Offer vs. Serve
  - Procurement of Special Meal

This meal modification plan will be available to all parents/guardians on our district website (<https://www.hohschools.org/>). It will also be provided to any parent upon request made to a teacher or building principal.

Any grievances regarding a meal modification plan can be directed to our Pupil Personnel Office at 914-478-6260 or by emailing our Assistant Superintendent of Pupil Personnel Services and 504 Coordinator, Ms. Jeanne Farruggio, at [farruggioj@hohschools.org](mailto:farruggioj@hohschools.org). A response will be provided, and every attempt will be made to receive a prompt and equitable resolution. If resolution cannot be reached, a parent/guardian may request and participate in an impartial hearing to resolve the grievance, with the opportunity to be represented by counsel and examine the complete record. The appeal request can be made to the Office of the Superintendent at 914-478-6205. Upon resolution, the parent/guardian will receive notice of the final decision and procedure for review.

# APPENDIX A

# Hastings on Hudson UFSD Request for Meal Modifications

_____ Student/Participant Name	_____ Date of Birth
_____ Parent/Guardian Name	_____ Phone
_____ Mailing Address	_____ City/State/Zip
_____ School/Center/Site	_____ Grade/Classroom
_____ Signature of Parent/Guardian	_____ Date

## Meal Modification Medical Statement

Federal law and USDA regulation require nutrition programs to make reasonable meal modifications to accommodate children with disabilities. Under the law, a disability is an impairment that substantially limits a major life activity or bodily function, which can include allergies and digestive conditions, but does not include personal diet preferences.

- 1. Describe the impairment and how it restricts the child's diet** (i.e., how the ingestion/contact with the food impacts the child):
  
- 2. Explain what must be done to accommodate the child's diet** (i.e., specific food(s) to be omitted/avoided from the child's diet):
  
- 3. List food(s) and/or beverages to be omitted or modified and recommended alternatives:**

\_\_\_\_\_  
Signature of State-Recognized Medical Authority\*or Registered Dietician

\_\_\_\_\_  
Date

\_\_\_\_\_  
Clinic Name

\*State-Recognized Medical Authority is a licensed health care professional authorized to write medical prescriptions in New York: Medical Doctor(MD), Doctor of Osteopathy (DO) Physician's Assistant (PA) with prescriptive authority, Advances Registered Nurse Practitioner (ARNP) with certificate of fitness, Podiatrist (DPM), Optometrist (ED), and Dentist (DDS or DMD).