**Meal Modification Procedures**

Requests

To request a meal modification, a child’s parent, adult participant, or participant’s guardian shall submit the below information to:

*Enter name*, Anna Wasierski, RD, LD

*Enter email address* *HSHealth@headstartesj.onmicrosoft.com*

For a request related to a medical special dietary need, submit a medical statement to the 504 Coordinator that includes:

* Description of the impairment
* Foods to be avoided/dietary restrictions
* Appropriate substitutes/needs

The medical statement must be signed by licensed physician, physician’s assistant or nurse practitioner

For a request related to a special dietary need that is not medical, submit the following information to the 504 Coordinator, signed by a parent:

* Description of the impairment
* Foods to be avoided/dietary restrictions
* Appropriate substitutes/needs

Updates to an existing accommodation require a new request.

Determinations

All requests for reasonable accommodations that relate to a disability will be approved as required by USDA regulation. Prior to denying any request related to a disability, the request will be reviewed by the Indiana Department of Education and United States Department of Agriculture’s Regional Civil Rights Director.

While requests that are unrelated to a disability are not required to be accommodated, our institution will consider them on a case by case basis to provide accommodations to the best of our ability.

A prompt written final decision will be provided to the child’s parent, adult participant, or participant’s guardian

Grievances

A child’s parent, adult participant, or participant’s guardian may submit a written complaint with any supporting documentation for consideration to: Anna Wasierski, RD, LD, *HSHealth@headstartesj.onmicrosoft.com*

A meeting will be scheduled with the complainant to discuss the complaint and possible resolutions. Following the meeting, a written decision will be rendered with an explanation of the position of our institution.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

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 [USDA Program Discrimination Complaint Form](http://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, 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](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.