

**DATE:**

December 21, 2021

**AGENDA ITEM (ACTION ITEM):**

**Consider/Approve** Disclosure of Free and Reduced Agreement with the Diocese of Covington to ensure that any information disclosed by the Diocese of Covington School Lunch Program to Kenton County School District, about children eligible for free and reduced price meals or free milk will be used only for purposes of determining equitable services to non-public schools.

**APPLICABLE BOARD POLICY:**

**01.1 Legal Status of the Board**

**HISTORY/BACKGROUND:**

“To calculate the proportional share for equitable services, the LEA would determine the overall number of children from low-income families who reside in participating Title I public school attendance areas and who attend public schools and private schools. Using the proportion of children from low-income families who attend private schools, the LEA would determine the amount of funds available for equitable services based on that proportional share of the LEA’s total Title I allocation.”

Excerpt from U.S. Department of Education, Office of Elementary and Secondary Education, Non-Regulatory Guidance: Title I, Part A of the Elementary and Secondary Education Act of 1965, as Amended by the Every Student Succeeds Act: Providing Equitable Services to Eligible Private School Children, Teachers, and Families, Washington, DC, October 7, 2019, page 15

**FISCAL/BUDGETARY IMPACT:**

N/A

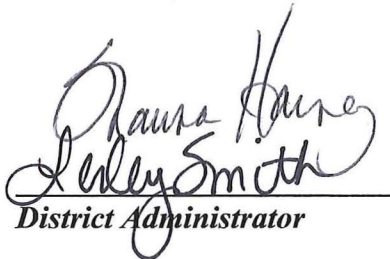
**RECOMMENDATION:**

**Approval to** enter into agreement via Disclosure of Free and Reduced Agreement with the Diocese of Covington to ensure that any information disclosed by the Diocese of Covington School Lunch Program to Kenton County School District, about children eligible for free and reduced price meals or free milk will be used only for purposes of determining equitable services to non public schools.

**CONTACT PERSON:**

Ellen Zimmer

  
Principal/Administrator

  
District Administrator

  
Superintendent

Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda. Principal –complete, print, sign and send to your Director. Director –if approved, sign and put in the Superintendent’s mailbox.

## DISCLOSURE OF FREE AND REDUCED PRICE INFORMATION

### *I. PURPOSE AND SCOPE*

Diocese of Covington School Lunch Program and Ellen Zimmer, Kenton County School District, acknowledge and agree that children's free and reduced price meal and free milk eligibility information obtained under provisions of the Richard B. Russell National School Lunch Act (42 USC 1751 et seq.) (NSLA) or Child Nutrition Act of 1966 (42 USC 1771 et seq.) (CNA) and the regulations implementing these Acts is confidential information. This Agreement is intended to ensure that any information disclosed by the Diocese of Covington School Lunch Program to Ellen Zimmer, Kenton County School District about children eligible for free and reduced price meals or free milk will be used only for purposes specified in this Agreement and that the Diocese of Covington School Lunch Program and Ellen Zimmer, Kenton County School District recognize that there are penalties for unauthorized disclosures of this eligibility information.

### *II. AUTHORITY*

Section 9(b)(6)(A) of the NSLA (42 USC 1758(b)(6)(A)) authorizes the limited disclosure of children's free and reduced price meal or free milk eligibility information to specific programs or individuals, without prior parent/guardian consent. Except that, the parent/guardian must be provided the opportunity to decline to share eligibility information prior to the disclosure for identifying children eligible for benefits under or enrolling children in the State Medicaid Program and the State children's health insurance program. Additionally, the statute specifies that for any disclosures not authorized by the statute, the consent of children's parents/guardians must be obtained prior to the disclosure.

The requesting agency certifies that it is currently authorized to administer the following program(s) and that information requested will only be used by the program(s) indicated.

Check all that apply	Program	Information Authorized
	<p><i>Medicaid or the State children's health insurance program (SCHIP), administered by a State or local agency authorized under titles XIX or XXI of the Social Security Act.</i></p> <p>Specify Program:</p>	<p>All eligibility information unless parents elect not to have information disclosed.</p>
	<p><i>State health program other than Medicaid/SCHIP, administered by a State agency or local education agency.</i></p> <p>Specify Program:</p>	<p>Eligibility status only; Prior consent not required.</p>
	<p><i>Federal health program other than Medicaid/SCHIP</i></p> <p>Specify Program:</p>	<p>No eligibility information unless prior parental consent is obtained.</p>
	<p><i>Local health program</i></p> <p>Specify Program:</p>	<p>No eligibility information unless prior parental consent is obtained.</p>
	<p><i>Child Nutrition Program under the National School Lunch Act or Child Nutrition Act</i></p> <p>Specify Program:</p>	<p>All eligibility information; consent not required.</p>
	<p><i>Federal/State or local means tested nutrition program with eligibility standards comparable to the National School Lunch Program</i></p> <p>Specify Program:</p>	<p>Eligibility status only; consent not required.</p>
<p>x</p>	<p><i>Federal education program</i></p> <p>Specify Program: Title I Part A</p>	<p>Eligibility status only; consent not required.</p>

	<p><i>State education program</i> administered by a State agency or local education agency</p> <p>Specify Program: KEES</p>	<p>Eligibility status only; consent not required.</p>
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Note: Section 9(b)(6)(A) specifies that certain programs may receive children's eligibility status only, without parental consent. Parental consent must be obtained to disclose any additional eligibility information. Section 9(b)(6)(D)(ii) specifies that for State Medicaid or SCHIP, parents must be notified and given an opportunity to elect not to have information disclosed. Social security numbers may only be disclosed if households are given notice of the disclosure and the uses to be made of their social security numbers as required by Sec.7 of the Privacy Act.

*III. RESPONSIBILITIES*

Diocese of Covington School Lunch Program will:

When required, secure the consent of parents/guardians prior to any disclosure not authorized by the National School Lunch Act or any regulations under that Act, unless prior consent is secured by the receiving agency and made available to the determining agency;

For State Medicaid and SCHIP, notify parents/guardians of potential disclosures and provide opportunity for parents/guardians to elect not to have information disclosed;

Disclose eligibility information only to persons directly connected to the administration or enforcement of programs authorized access under the National School Lunch Act or regulations under the Act or to programs or services for which parents/guardians gave consent.

Ellen Zimmer, Kenton County School District will:

Ensure that only persons who are directly connected with the administration or enforcement of Kenton County School District and whose job responsibilities require use of the eligibility information will have access to children's eligibility information:

Specify by name(s) or title(s) Academic Consultant to the Private Schools

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Use children's free and reduced price eligibility information for the following specific purpose(s):

Allocation of eligible services

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Inform all persons that have access to children's free and reduced price meal eligibility information that the information is confidential, that children's eligibility information must only be used for the purposes specified above, and the penalties for unauthorized disclosures.

Protect the confidentiality of children's free and reduced price meal or free milk eligibility information as follows:

Restricted Access

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Specifically describe how the information will be protected from unauthorized uses and further disclosures.

Password protected

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Description of Procedures to Transfer Meal Eligibility Information.

Data will be exported from our POS system and sent to the school in an Excel file.

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Describe the procedures for transferring students' meal eligibility information from the determining agency to the requesting agency/program so as to limit the number of individuals who have access to the information.

(Describe)

Data will be exported from our POS system and sent to the school in an Excel file.

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IV. EFFECTIVE DATES

This agreement shall be effective from November 15, 2021 to June 30, 2022.


V. PENALTIES

Any person who publishes, divulges, discloses, or makes known in any manner, or to any extent not authorized by Federal law (Section 9(b)(6)(C) of the National School Lunch Act; 42 USC 1758(b)(6)(C)) or a regulation, any information about a child's eligibility for free and reduced price meals or free milk, shall be fined not more than a \$1,000 or imprisonment of not more than 1 year or both.

VI. SIGNATURES

The parties acknowledge that children's free and reduced price meal and free milk eligibility information may be used only for the specific purposes stated above, and that unauthorized use of free and reduced price meal and free milk information or further disclosure to other persons or programs is prohibited and a violation of Federal law, which may result in civil and criminal penalties.

Requesting Agency/Program Administrator:

Name: Ellen Zimmer  
Title: Director of Early Childhood  
Phone: 859-344-8888 Signature:   
Date: 1/14/22

Determining Agency Administrator:

Name: Jackie Kaiser  
Title: Food Service Director  
Phone: 859-392-1500 Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

*\*Any attachments will become part of this agreement.*

**USDA Nondiscrimination Statement**

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, (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](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).

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