

# Requirements for Meal Modifications in the Child and Adult Care Food Program (CACFP)

## CHILD CARE 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 meal modification requirements for child care programs participating in the U.S. Department of Agriculture's (USDA) CACFP
- 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 CACFP Child Care Programs webpage at <http://portal.ct.gov/SDE/Nutrition/Special-Diets-in-CACFP-Child-Care-Programs/Documents>
- For specific questions or additional guidance, please contact the CSDE (see slide 65)

# Presentation Contents

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# USDA Meal Patterns for the CACFP

- CACFP sponsors must comply with the USDA's CACFP meal patterns
  - **Children** (ages 1-12, and through age 18 in at-risk afterschool care centers and emergency shelters)
  - **Infants** (birth through 11 months)
- However, modifications may be needed for children whose disability restricts their diet

Meal Patterns for Children: <http://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Child-Care-Programs>

Meal Patterns for Infants: <http://portal.ct.gov/SDE/Nutrition/Feeding-Infants-in-CACFP-Child-Care-Programs>

# CACFP Child Care Programs Include

- Child care centers
- At-risk afterschool care centers
- Emergency shelters
- Family day care homes



<http://portal.ct.gov/SDE/Nutrition/Child-and-Adult-Care-Food-Program>

# Federal Nondiscrimination Legislation



# Federal Nondiscrimination Legislation

Contain provisions that require CACFP facilities 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)

# 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

Any person who has a *physical or mental impairment* that substantially limits one or more “*major life activities,*” has a record of such impairment, or is regarded as having such impairment



# ADA Amendments Act

## Expanded Definition of Disability

### *Revises “Substantially Limits”*

- The impairment does not need to prevent or severely/significantly restrict a major life activity

Example: A child whose digestion is impaired by a food intolerance may be a person with a disability, regardless of whether consuming the food causes the child severe distress

- Individualized assessment: *Case-by-case basis*, according to each child’s individual needs, as specified on the medical statement

# ADA Amendments Act

## Expanded Definition of Disability

### *Revises “Substantially Limits”*

- Without regard to ameliorative effects of mitigating measures

#### Examples

- A child with a disability may be able to control an allergic reaction by taking medication, but this cannot be considered in determining if the child’s condition constitutes a disability
- A child may be able to control diabetes through insulin and diet, but this cannot be considered in determining if the child’s condition constitutes a disability

# ADA Amendments Act

## Expanded Definition of Disability

### *Revises “Substantially Limits”*

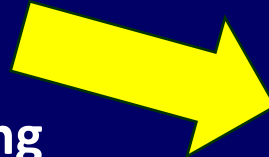
- May include an impairment that is *episodic or in remission* if it would substantially limit a major life activity when active
  - Must consider duration (or expected duration) and extent to which impairment actually limits a major life activity

Example: 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

# 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 Function

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

# 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 are *optional* for children without a disability

# 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	<ul style="list-style-type: none"> <li>Individualized Education Program (IEP)</li> <li>Individualized Health Care Plan (IHCP)</li> <li>May also have Emergency Care Plan (ECP)</li> </ul>	<ul style="list-style-type: none"> <li>Section 504 Plan</li> <li>IHCP</li> <li>May also have ECP</li> </ul>	<ul style="list-style-type: none"> <li>IHCP</li> <li>May also have ECP</li> </ul>
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 30)



# Types of Disability Discrimination

- **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**

**CACFP facilities 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 disability (physical or mental impairment) that restricts their diet



# What Constitutes a Disability

CACFP facilities 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 CACFP Child Care Programs* form (see slide 32)

Question 10 asks if the child has a physical or mental impairment that restricts their diet

- If recognized medical authority's answer is "Yes," CACFP facility **must** make the meal modification
- If recognized medical authority's answer is "No," CACFP facility can **choose**, but is not required, to make the meal modification

# Examples of Disabilities That May 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 CACFP Child Care Programs* (see slide 58)**
- **CSDE Handout: *Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Child Care Programs* (see slide 33)**
- **CSDE Operational Memorandum No. 2C-18 and 2H-18 (see slide 59)**
- **USDA Policy Memo CACFP 14-2017 (see slide 60)**

# Meal Modifications for Children with Disabilities

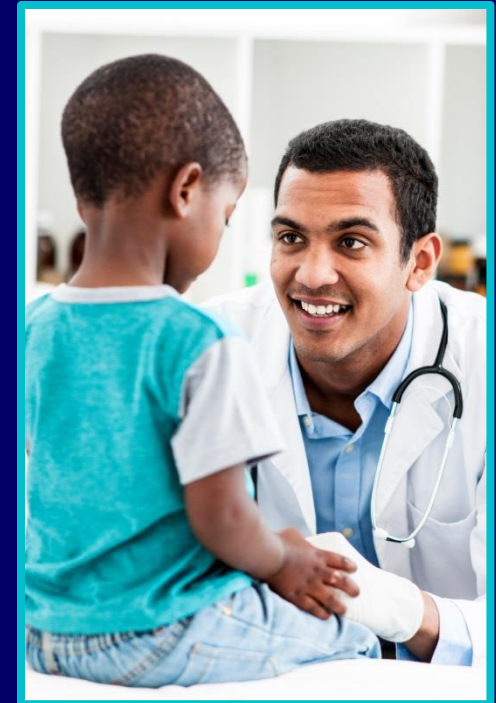




# USDA Requirements for Meal Modifications

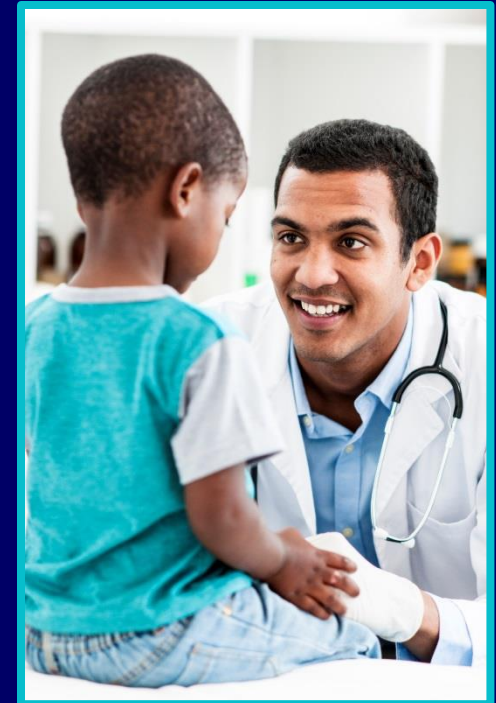
## GENERAL GUIDELINE

**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 CACFP facility 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 32)**
- **If a CACFP facility uses an alternate form, it must contain the information required by USDA (see slide 30)**
- **The CACFP facility'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 CACFP Child Care Programs

### Medical Statement for Meal Modifications in Child and Adult Care Food Program (CACFP) CHILD CARE PROGRAMS

This form applies to requests for meal modifications for children participating in the U.S. Department of Agriculture's (USDA) CACFP child care facilities, which include child care centers, at-risk afterschool care centers, emergency shelters, and family day care homes. CACFP facilities are required to make reasonable meal modifications for children whose physical or mental impairment restricts their diet. For guidance on meal modifications and instructions for completing this form, see the Connecticut State Department of Education's (CSDE) *Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Child Care Programs*.

**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 CACFP facility to understand how the 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. CACFP facilities should not deny or delay a requested meal modification because the medical statement does not provide sufficient information. When necessary, CACFP facilities should work with the child's parent or guardian to obtain the required information. While obtaining additional information, the CACFP facility should follow the portion of the medical statement that is clear and unambiguous to the greatest extent possible.

#### SECTION A – Completed by Parent or Guardian

1. Name of Child: \_\_\_\_\_ 2. Birth Date: \_\_\_\_\_  
3. Name of Parent or Guardian: \_\_\_\_\_  
4. Phone Number (with area code): \_\_\_\_\_ 5. E-mail address: \_\_\_\_\_  
6. Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

7. In accordance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Family Educational Rights and Privacy Act (FERPA), I hereby authorize \_\_\_\_\_

*name of child's recognized medical 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 CACFP child care center or family day care home*

exchange the information listed on this form and in my child's records with the child care program as necessary. I understand that I may refuse to sign this authorization without impact on the eligibility of my request for a special diet for my child. I understand that I may rescind permission to release this information at any time, except when the information has already been released.

8. Signature of Parent or Guardian: \_\_\_\_\_ 9. Date: \_\_\_\_\_

#### 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.

11. **Diet Plan:** Explain the meal modification for the child. Attach a specific diet plan, if needed.



# CSDE Resource

## Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Child Care Programs

### Guidance and Instructions

#### Medical Statement for Meal Modifications in Child and Adult Care Food Program (CACFP) CHILD CARE PROGRAMS

The Connecticut State Department of Education's (CSDE) *Medical Statement for Meal Modifications in CACFP Child Care Programs* applies to requests for meal modifications for children participating in the U.S. Department of Agriculture's (USDA) CACFP child care facilities, which include child care centers, at-risk afterschool care centers, emergency shelters, and family day care homes. CACFP facilities:

- 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 complies with the CACFP meal patterns.

This document provides general guidance on the requirements for meal modifications (pages 1-6) and instructions for completing the CSDE's *Medical Statement for Meal Modifications in CACFP Child Care Programs* form (pages 7-8). For detailed guidance on the requirements for modified meals, review the CSDE's guide, *Accommodating Special Diets in CACFP Child Care Programs*.

#### Determining if a Meal Modification is Required

CACFP facilities 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 CACFP Child Care Programs* form. Question 10 asks if the child has a physical or mental impairment that restricts their diet. If the recognized medical authority's answer is "Yes," the CACFP facility must make the meal modification. If the recognized medical authority's answer is "No," the CACFP facility can choose, but is not required, to make the meal modification. For more information, see "What Constitutes a Disability" on page 2.

#### MEAL MODIFICATIONS FOR CHILDREN WITH DISABILITIES

Federal laws and USDA regulations require that CACFP facilities 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.

A request for a reasonable modification must be related to the disability or limitations caused by the disability and requires a medical statement from a state-licensed healthcare professional who is authorized to write medical prescriptions under state law. The Connecticut State Department of Public Health defines a recognized medical authority as a 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.

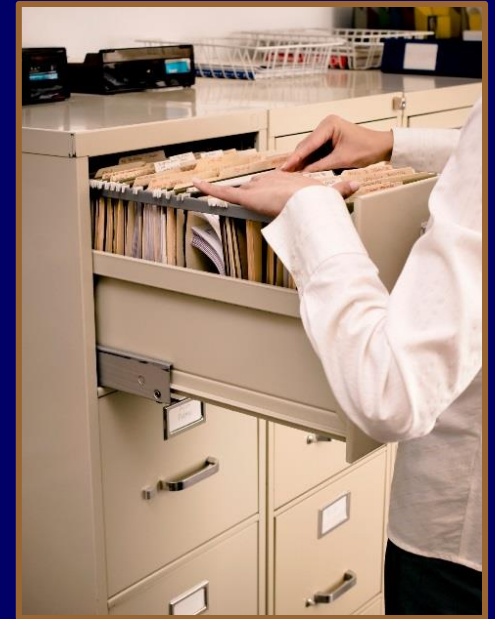
Section 504 of the Rehabilitation Act of 1973 (Section 504), the Americans with Disabilities Act (ADA) of 1990, the ADA Amendments Act of 2008, and the USDA nondiscrimination regulations (7 CFR 15b) define a person with disability as any person who has a physical or mental impairment that substantially limits one or more "major life activities," has a record of such impairment, or is

# Handling Missing Information

- CACFP facilities *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, CACFP facilities 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
- CACFP facilities should *develop a plan* for ensuring that dietary information on file is current
- USDA recommends that CACFP facilities maintain documentation when *ending* a meal accommodation



# Good Communication is Important

- USDA encourages *inclusive team approach* to provide appropriate meal modifications
  - individuals from sponsoring organization, center, or family day care home
  - other individuals with appropriate training, e.g., nurse or registered dietitian
  - food service personnel



# Good Communication is Important

- *Establish procedures* for identifying children with special dietary needs and providing applicable information to food service personnel



# Sharing of Medical Statements

- **The Health Insurance Portability and Accountability Act of 1996 (HIPAA) permits disclosure of personal health information needed for patient care and other important purposes**
  - **May share copies of children's medical statements with CACFP food service personnel for the purposes of accommodating special diets**



# CACFP Facility Obligations for Reasonable Meal Modifications





# CACFP Facility 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:** CACFP facility 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 CACFP



# Food Substitutions

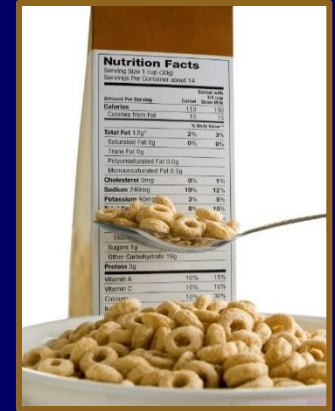
- Not required to provide the *same* meal
- Not required to provide a *specific number* of alternate meals
- Generally not required to provide a *specific brand of food*, unless medically necessary



**General Guideline:** CACFP facility 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 CACFP

# Nutrition Information

- CACFP facility must make *nutrition information for CACFP meals available* to families, health consultants, 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 CACFP staff about appropriate meal modifications



# Meal Services Outside USDA Programs

- CACFP facilities are not required to provide meal services to children with disabilities when the meal service is *not normally available for all children*



**Example: A CACFP facility that does not serve breakfast is not required to provide breakfast for children with disabilities**

# 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



# Meal Modifications for Children *without* Disabilities





# Meal Modifications for Children *without* Disabilities

- **Optional**
- **Must always comply with the CACFP meal patterns**
- **Medical statement not required**
  - **CSDE recommends medical statement to ensure clear communication between parents/guardians and CACFP staff about appropriate meal modifications**





# Milk Substitutes for Children *without* Disabilities

- CACFP meal patterns *require* milk at breakfast, lunch, and supper and *allow* milk as one of the two snack components

Age Group	Allowable Types of Milk
1	Unflavored whole
2-5	Unflavored low-fat (1%) Unflavored fat-free
6-18	Unflavored low-fat (1%) Unflavored fat-free Flavored fat-free *

\* Flavored fat-free milk can be served to ages 6 and older, but the USDA's *CACFP Best Practices* recommends serving only unflavored milk

# Milk Substitutes for Children *without* Disabilities

- CACFP facilities 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 nutrition standards for fluid milk substitutes



# Milk Substitutes for Children *without* Disabilities

- Without a disability, CACFP facilities 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?	
	Disability	No Disability
Juice	Yes *	No
Water	Yes *	No
Nondairy beverage that meets USDA standards	Yes *	Yes
Nondairy beverage that does NOT meet USDA standards	Yes *	No

\* If specified by the recognized medical authority in the child's medical statement

# CSDE Resource

## Allowable Milk Substitutes for Children without Disabilities in the CACFP

### ALLOWABLE MILK SUBSTITUTES FOR CHILDREN WITHOUT DISABILITIES in the Child and Adult Care Food Program

Child care centers, Head Start centers, at-risk afterschool care centers, emergency shelters, and family day care homes that participate in the Child and Adult Care Food Program (CACFP) must follow the U.S. Department of Agriculture's (USDA) requirements for milk substitutes for children without disabilities. These requirements apply only to meal accommodations for children without disabilities who cannot drink milk.

CACFP facilities have the option to make this accommodation by offering one or more allowable fluid milk substitutes for children without disabilities. These substitutes are at the expense of the CACFP facility. If the CACFP facility chooses to make allowable milk substitutes available, they must be available for all children when requested by their parent or guardian.

The following criteria apply only to milk substitutes for children without disabilities. Dietary accommodations for children with disabilities must follow the USDA requirements specified in the Connecticut State Department of Education's (CSDE) guide, *Accommodating Special Diets in CACFP Child Care Programs*.

#### ALLOWABLE FLUID MILK SUBSTITUTES

CACFP facilities can choose to offer one or more allowable fluid milk substitutes, including:

- **lactose-free or lactose-reduced milk that meets the appropriate fat content for each age group** (i.e., unflavored whole milk for age 1; unflavored low-fat (1%) milk or unflavored fat-free milk for ages 2-5; and unflavored low-fat (1%) milk, unflavored fat-free milk, or flavored fat-free milk for ages 6-12); and
- **allowable nondairy milk substitutes**, such as soy milk, that meet the USDA nutrition standards for milk substitutes. For more information, see "USDA Nutrition Standards for Milk Substitutes" on page 2.

The USDA recommends that lactose-free or lactose-reduced milk is the first choice for children with lactose intolerance.

CACFP facilities may choose to offer only one milk substitute such as lactose-free milk. If a child or family decides not to take this option, the CACFP facility is not obligated to offer any other milk substitutes. CACFP facilities may also choose (but are not required) to offer a second option of a nondairy beverage that meets the USDA nutrition standards for milk substitutes.



#### JUICE AND WATER SUBSTITUTES

CACFP facilities can never offer juice or water as milk substitutes for children without disabilities, even with a medical statement signed by a recognized medical authority. If CACFP facilities chooses to make milk substitutes available, they must include either lactose-free or lactose-reduced milk that is the appropriate fat content for each age group, or a nondairy beverage that meets the USDA nutrition standards for milk substitutes (see table 1). These are

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<http://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/CACFPmilksub.pdf>

# 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 CACFP 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, and the USDA nondiscrimination regulations 7 CFR 15 b)?

YES

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

YES

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?

YES

CACFP facility is *required* to make the meal modification

NO

CACFP facility is *not required* to make the meal modification

NO

CACFP facility is *not required* to make the meal modification

NO

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




# Resources



# CSDE Resource


## Accommodating Special Diets in CACFP Child Care Programs

Nutrition Policies and Guidance for the  
Child and Adult Care Food Program (CACFP)




**Accommodating Special Diets  
IN CACFP CHILD CARE PROGRAMS**

Child Care Centers · Family Day Care Homes  
Emergency Shelters · At-risk Afterschool Care Centers



March 2018

Connecticut State Department of Education  
Bureau of Health/Nutrition, Family Services and Adult Education  
450 Columbus Boulevard, Suite 504  
Hartford, CT 06103-1841



<http://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/NPGspdiet.pdf>

# CSDE Operational Memorandum

## Operational Memorandum No. 2C-18 and 2H-18

(October 20, 2017)

## Requirements for Meal Modifications in CACFP Child Care Centers and Family Day Care Homes



STATE OF CONNECTICUT  
DEPARTMENT OF EDUCATION



**TO:** Child and Adult Care Food Program (CACFP) Child Care Centers and Family Day Care Home Sponsors

**FROM:** John D. Frassinelli, Chief  
Bureau of Health/Nutrition, Family Services and Adult Education

**DATE:** October 20, 2017

**SUBJECT:** Operational Memorandum No. 2C-18 and 2H-18  
Requirements for Meal Modifications in CACFP Child Care Centers and Family Day Care Homes

On June 22, 2017, the U.S. Department of Agriculture (USDA) issued policy memo [CACFP 14-2017 SFSP 10-2017: Modifications to Accommodate Disabilities in CACFP and SFSP](#). This operational memorandum significantly changes the requirements and process for meal modifications for children with disabilities in CACFP child care centers (including Head Start centers, at-risk afterschool care centers, and emergency shelters) and family day care homes.

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 CACFP child care centers and family day care homes. For detailed guidance, review the CSDE's guide, [Accommodating Special Diets in CACFP Child Care Programs](#).

#### REVISED RESOURCES

The CSDE has recently revised the following documents to reflect the USDA's policy guidance in CACFP 14-2017 SFSP 10-2017:

- [Accommodating Special Diets in CACFP Child Care Programs](#);
- [Allowable Milk Substitutes for Children without Disabilities in the CACFP](#);
- [Medical Statement for Meal Modifications in CACFP Child Care Programs](#);
- [Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Child Care Programs](#) (new resource); and
- [Summary of Requirements for Accommodating Special Diets in the CACFP](#) (new resource).

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

Please note that there is only one medical statement for all meal modification requests for children with and without disabilities. This form replaces the previous two forms (medical statement for children with disabilities and medical statement for children without disabilities).

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[http://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Memos/OM2018/OM02C18\\_02H18.pdf](http://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Memos/OM2018/OM02C18_02H18.pdf)

# USDA Policy Memo

**CACFP 14-2017**

**SFSP 10-2017**

**(June 22, 2017)**

## ***Modifications to Accommodate Disabilities in CACFP and SFSP***



Food and Nutrition Service  
Park Office Center  
3101 Park Center Drive  
Alexandria VA 22302

DATE: June 22, 2017

MEMO CODE: CACFP 14-2017, SFSP 10-2017

SUBJECT: Modifications to Accommodate Disabilities in the Child and Adult Care Food Program and Summer Food Service Program

TO: Regional Directors  
Special Nutrition Programs  
All Regions

State Directors  
Child Nutrition Programs  
All States

This memorandum outlines the requirements for Child and Adult Care Food Program (CACFP) institutions and facilities and Summer Food Service Program (SFSP) sponsors (Program operators) to provide reasonable modifications to Program meals or the meal service to accommodate children or adults (participants) with disabilities. This memorandum supersedes FNS Instruction 783-2, Rev. 2. With the release of this memorandum, FNS Instruction 783-2, Rev. 2 has been rescinded.

#### BACKGROUND

This guidance only addresses modifications required to accommodate disabilities that restrict a participant's diet. Program operators have the option to accommodate special dietary needs that do not constitute a disability, including those related to religious or moral convictions or personal preference. Additional guidance on accommodating special dietary needs and preferences that are not related to a disability will be provided separately.

Program regulations require Program operators to ensure that breakfast, lunch, snack, or milk (meals) offered through the CACFP and SFSP meet the respective meal pattern requirements established in the Program regulations. Federal law and USDA regulations further require Program operators to make reasonable modifications to accommodate participants with disabilities. This includes providing special meals, at no extra charge, to participants with a disability that restricts the participant's diet.

Program operators are required to make substitutions to meals for participants with a disability that restricts participant's diet on a case-by-case basis and only when supported by a written statement from a State licensed healthcare professional.

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<https://www.fns.usda.gov/modifications-accommodate-disabilities-cacfp-and-sfsp>

# CSDE Resource

## Summary of Requirements for Accommodating Special Diets in the CACFP

### SUMMARY OF REQUIREMENTS FOR ACCOMMODATING SPECIAL DIETS IN CHILD AND ADULT CARE FOOD PROGRAM (CACFP) CHILD CARE PROGRAMS

This document summarizes the requirements for meal accommodations for children in the U.S. Department of Agriculture (USDA) CACFP child care facilities, which include child care centers, at-risk afterschool care centers), emergency shelters, and family day care homes. The USDA regulations require reasonable accommodations 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 or organic foods because the parent believes it is healthier for the child does not meet the definition of disability, and does not require a modification. CACFP facilities may choose to make accommodations for participants without disabilities on a case-by-case basis. All meal modifications for children without disabilities must comply with the CACFP meal patterns. For detailed guidance on meal modifications, see the Connecticut State Department of Education's (CSDE) guide, *Accommodating Special Diets in CACFP Child Care Programs*.

Scenario	Determination of Disability	Plan on File	Examples of Medical Conditions <sup>1</sup>	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	<ul style="list-style-type: none"> <li>504 plan and Individualized Health Care Plan (IHCP)</li> <li>May also have an Emergency Care Plan (ECP) depending on participant's medical condition</li> </ul>	Medical conditions that substantially limit a major life activity and affect the child's diet, for example: <ul style="list-style-type: none"> <li>metabolic diseases, such as diabetes or phenylketonuria (PKU)</li> <li>food anaphylaxis (life-threatening food allergy)</li> </ul>	Yes	Medical statement signed by recognized medical authority <sup>2,3</sup>	<ul style="list-style-type: none"> <li>Information about the child's physical or mental impairment that is sufficient to allow the CACFP facility to understand how the impairment restricts the child's diet</li> <li>An explanation of what must be done to accommodate the child</li> <li>The food or foods to be omitted and recommended alternatives, if appropriate</li> </ul>
Child is determined to have a disability (physical or mental impairment) under the Individuals with Disabilities Education Act (IDEA), and the disability restricts the child's diet	Planning and Placement Team (PPT) Meeting	<ul style="list-style-type: none"> <li>Individualized Education Program (IEP) and IHCP</li> <li>May also have an ECP depending on child's medical condition</li> </ul>	Medical conditions that meet the IDEA recognized disability categories, require related services under IDEA, and affect the child's diet, for example: <ul style="list-style-type: none"> <li>autism</li> <li>traumatic brain injury</li> <li>other health impairment, e.g., heart condition and diabetes</li> </ul>	Yes	Medical statement signed by recognized medical authority <sup>2,3</sup>	<ul style="list-style-type: none"> <li>Information about the child's physical or mental impairment that is sufficient to allow the CACFP facility to understand how the impairment restricts the child's diet</li> <li>An explanation of what must be done to accommodate the child</li> <li>The food or foods to be omitted and recommended alternatives, if appropriate</li> </ul>

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# CSDE Webpage

## Special Diets in CACFP Child Care Programs

The screenshot shows the CSDE website interface. At the top, there is a blue header with the 'ct.gov' logo, the text 'Connecticut's Official State Website', and a search bar. Below the header, a breadcrumb trail reads 'HOME / DEPARTMENT OF EDUCATION / SPECIAL DIETS IN CACFP CHILD CARE PROGRAMS'. The main heading is 'Special Diets in CACFP Child Care Programs'. On the left, a navigation menu includes 'Overview' (highlighted), 'Documents/Forms', 'Related Resources', 'Laws/Regulations', and 'Contact'. Below the menu, it says 'Provided by: Department of Education'. The main content area features an 'Overview' section with a sub-header 'CACFP | Program Guidance | Forms for Centers | Forms for Homes | Operational Memos | Resources'. The text explains that the CSDE's 'Accommodating Special Diets in CACFP Child Care Programs' guide provides meal modification guidance based on federal laws and USDA regulations. It further details requirements for children with disabilities and allowances for children without disabilities.

HOME / DEPARTMENT OF EDUCATION / SPECIAL DIETS IN CACFP CHILD CARE PROGRAMS

## Special Diets in CACFP Child Care Programs

Overview

Documents/Forms

Related Resources

Laws/Regulations

Contact

Provided by:  
Department of Education

### Overview

[CACFP](#) | [Program Guidance](#) | [Forms for Centers](#) | [Forms for Homes](#) | [Operational Memos](#) | [Resources](#)

The Connecticut State Department of Education's (CSDE) [Accommodating Special Diets in CACFP Child Care Programs](#) provides guidance on meal modifications for children and infants with special dietary needs, based on the federal nondiscrimination laws and U.S. Department of Agriculture (USDA) regulations. This guide applies to CACFP child care centers (including at-risk afterschool care centers and emergency shelters) and family day care homes.

#### Children with a Disability

The USDA **requires** reasonable meal modifications on a case-by-case basis for children and infants whose disability restricts their diet, based on a medical statement signed by a recognized medical authority. The Connecticut State Department of Public Health defines a recognized medical authority as licensed physicians (doctors of medicine or osteopathy), physician assistants, and advanced practice registered nurses (APRNs), including nurse practitioners, clinical nurse specialists, and certified nurse anesthetists who are licensed as APRNs.

#### Children without a Disability

The USDA **allows**, but does not require, meal modifications for children and infants whose special dietary needs do not constitute a disability, including those related to religious or moral convictions, general health concerns, and personal food preferences, such as a preference that a child eats a gluten-free diet because a parent believes it is better for the child. CACFP facilities may choose to make these accommodations on a case-by-case basis. All meal modifications for children without disabilities must comply with the [CACFP meal patterns for children](#) and all meal modifications for infants without disabilities must comply with the [CACFP infant meal patterns](#).

<http://portal.ct.gov/SDE/Nutrition/Special-Diets-in-CACFP-Child-Care-Programs>



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

- **Applies only to CACFP child care centers in public schools**
- **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**

[https://www.cga.ct.gov/current/pub/chap\\_169.htm#sec\\_10-212](https://www.cga.ct.gov/current/pub/chap_169.htm#sec_10-212)

# CSDE Resource

## Guidelines for Managing Life-threatening Food Allergies in Connecticut Schools

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



Connecticut's Official State Website

Search Connecticut Government...

Connecticut State Department of Education

HOME / DEPARTMENT OF EDUCATION / K-12 EDUCATION / HEALTH / PUBLICATIONS / GUIDELINES FOR MANAGING LIFE-THREATENING FOOD ALLERGIES IN CONNECTICUT SCHOOLS

### Managing life-threatening food allergies in Connecticut schools

- Acknowledgments
- Introduction
- Overview of Food Allergies and Anaphylaxis
- Legislation
- Management Plans for Food Allergy and Glycogen Storage Disease
- Procedural Guidelines
- Developing Individualized Health Care Plans and Action Plans
- Appendixes
- Printable Version PDF

Guidelines for Managing Life-threatening Food Allergies in Connecticut Schools  
(Includes Guidelines For Managing Glycogen Storage Disease)

CONNECTICUT STATE DEPARTMENT OF EDUCATION

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



# CSDE CACFP Staff

## Child Care Centers

- **Susan Boyle**  
860-807-2074  
susan.boyle@ct.gov
- **Celia Cordero**  
860-807-2076  
celia.cordero@ct.gov
- **Benedict Onye**  
860-807-2080  
benedict.onye@ct.gov

## Family Day Care Homes

- **Celia Cordero**  
860-807-2076  
celia.cordero@ct.gov



Connecticut State Department of Education  
Bureau of Health/Nutrition, Family Services and Adult Education  
450 Columbus Boulevard, Suite 504  
Hartford, CT 06103