

MEMO: STUDENTS WITH SPECIAL MEDICAL OR DIETARY NEEDS

This memorandum concerns United States Department of Agriculture (USDA), Food and Nutrition Service (FNS), regulations pertaining to food service for children with special needs. Federal Regulation, 7 CFR Subtitle A, Section 15b.26(d), outlines the following responsibilities of School Food Authorities in providing food service to children with special needs:

- **Food Services.** In providing food service to any of its students, a sponsor may not discriminate on the basis of disability.
 - (1) Sponsors shall serve special meals, at no extra charge, to students whose disability restricts their diet. Sponsors may require students to provide medical certification that special meals are needed because of their disability.
 - (2) Where existing food service facilities are not completely accessible and usable, sponsors may provide aides or use other equally effective methods to serve food to persons with a disability. Sponsors shall provide all food services in the most integrated setting appropriate to the needs of persons with a disability as required by Subpart D, Section 15b.23(b).

While the school food service is responsible for supplying prescribed food substitutions, the school district or school is responsible for ensuring the assignment of an aide, the school nurse or another appropriate individual, when needed, to assist in feeding children with disabilities.

Lunches served which accommodate the exceptions for medical or dietary needs indicated in federal regulations, 7 CFR 210.10(i), may be claimed for reimbursement.

- **Medical or dietary needs.** Schools shall make substitutions in foods listed in this section for students who are considered disabled under 7 CFR Part 15b and whose disability restricts their diet. Schools may also make substitutions for students without a disability who are unable to consume the regular lunch because of medical or other special dietary needs. Substitutions shall be made on a case by case basis only when supported by a statement of the need for substitutions that includes recommended alternate foods. Such statements shall, in the case of a student with a disability, be signed by a physician, or in the case of a student without a disability, by a recognized medical authority.

The definition of a disabled person from 7 CFR Subtitle A, Section 15b.3 is:

“A person with a disability” means any person who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment.

“Physical or mental impairment” means (1) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genitourinary; hemic and lymphatic; skin and endocrine, or (2) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities. The term “physical or mental impairment” includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech, and hearing impairment; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; diabetes; mental retardation; emotional illness; and drug addiction and alcoholism.

“Major life activities” means functions such as caring for one’s self, performing manual tasks, walking,

seeing, hearing, speaking, breathing, learning and working.

Generally, children with food allergies or intolerances are not disabled as defined in the section above. However, it is possible that such food allergies or intolerances will limit a major life activity. When faced with a request for special meals for such children, the food service personnel must abide by the determination of the physician or, if appropriate, the official who classifies children with disabilities.

Included is a sample medical statement form recommended for your use to obtain information needed to meet the special needs of children with disabilities. When a physician provides a diet prescription, it is the role of the school food service to fill that order properly and carefully. It is beyond the scope of school food service personnel to change, substitute or modify the diet order. If the child's diet prescription is not detailed enough to be interpreted clearly, then a registered dietitian or other authorized health professional may translate the diet order into food choices and portion sizes, and provide for a list of approved food substitutions.

Sponsors may at their discretion make substitutions for individual children who are not disabled, as defined in 7 CFR Part 15b, but who are unable to consume a food item because of medical or other special dietary needs. Such substitutions may be made on a case-by-case basis only when supported by a statement signed by a recognized medical authority. A recognized medical authority may include physicians, physician assistants, nurse practitioners, or others specified by the State agency.

For students without a disability, the supporting statement shall include:

- A. An indication that the medical or other special dietary need restricts the child's diet; and
- B. The food or foods to be omitted from the child's diet and the food or choice of foods that may be substituted.

There are two reference manuals that were provided to all sponsors during the past several years to assist in meeting the special dietary needs of their children with disabilities. They are:

Accommodating Children with Special Dietary Needs in the School Nutrition Programs, Guidance for School Food Service Staff, May 1995.

Meeting Their Needs, A Training Manual for Child Nutrition Personnel Serving Children with Special Needs, September 1993.

If you have any questions, please contact the Division of Food and Nutrition at 1-800-331-0129.

**Medical Statement For Children
With Special Needs In Child Nutrition Programs**

Student's Name: _____ **Age:** _____

School Name: _____ **Grade Level:** _____ **Classroom:** _____

Does the student have a disability that requires the student to have a special diet or feeding equipment/utensils? **No**
 Yes If Yes, describe the disability and the major life activity affected by the disability, complete this form, and have it signed by the student's physician. Return it to the school when completed.

Describe the disability/diagnosis: _____

If the student is NOT disabled, does he/she follow a special dietary modification or require assistance in eating?
 No **Yes**

Describe the dietary modification or assistance required: _____

Diet Prescription: _____

List Food Allergies/Intolerances: _____

List Allowable Food Substitutions: _____

Indicate any texture modifications and which foods need to be modified:

Chopped/Cut up: _____

Ground: _____

Pureed: _____

Liquid Modifications: Honey Nectar Other (specify)

List special equipment/utensils needed: _____

Additional comments about the student's eating patterns or dietary modifications:

Parent's Signature: _____ Date: _____

Physician's or Medical Authority's Signature: _____ Date: _____