

Standard Operating Procedure: Special Diets

INTRODUCTION/BACKGROUND

The U.S. Department of Agriculture's (USDA) nondiscrimination regulation, as well as the regulations governing the National School Lunch Program (NSLP) and School Breakfast Program (SBP), state that substitutions to the regular meal must be made for children who are unable to eat school meals because of their disabilities when that need is certified by a licensed physician.

Rehabilitation Act of 1973 and the Americans with Disabilities Act

Under Section 504 of the *Rehabilitation Act of 1973*, and the Americans with Disabilities Act (ADA) of 1990, "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 impairment, or is regarded as having such impairment.

The term "physical or mental impairment" includes many diseases and conditions, a few of which may be orthopedic, visual, speech, and hearing impairments; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; metabolic diseases, such as diabetes or phenylketonuria (PKU); food anaphylaxis (severe food allergy); mental retardation; emotional illness; drug addiction and alcoholism; specific learning disabilities; HIV disease; and tuberculosis.

Major life activities covered by this definition include caring for one's self, eating, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

When nutrition services are required under a child's IEP, school officials need to make sure that child nutrition staff are involved early on in decisions regarding special meals. The Individualized Education Program (IEP) is the written document that contains the program of special education and related services to be provided to a child with a disability covered under the Individuals with Disabilities Education Act (IDEA).

In most cases, children with disabilities can be accommodated with little extra expense or involvement. Food and Child Nutrition Services and School Health Services have collaborated to devise a procedure and form for ordering special dietary modifications for students. This procedure was developed to insure that students receive adequate nutrition and schools have the equipment and supplies necessary to meet their needs.

I. REQUEST FORMS: SPECIAL DIETS

A. Medical Statement Form (Special Diet Form)

1. In accordance with USDA's regulations for "substitutions or diet modifications in school meals for children whose disabilities restrict their diet, all diets orders must reflect the current dietary needs of the child." Therefore, medical statements must be renewed on a yearly basis, even if diet order has not changed.
2. All requests for special dietary modifications should begin with the school nurse.
3. At the beginning of school, based on parent/guardian disclosure of dietary restrictions/modifications the nurse may either provide the Medical Statement Form or refer parent to CNS website www.mercedschilnutrition.net
4. Once parent/guardian has returned with the completed form, school nurse will contact Child Nutrition Services.
5. If the parents/guardian cannot provide a current statement, a special diet shall not be provided.

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B. Physician's Statement for Children with Disabilities

1. USDA regulations 7 CFR Part 15b require substitutions or modifications in school meals for children whose disabilities restrict their diets.
2. When food allergies result in severe, life threatening (anaphylactic) reactions, the child's condition would meet the definition of "disability".
3. A child with a disability must be provided substitutions in foods when that need is supported by a statement signed by a licensed physician.
4. The **physician's statement must identify:**
 - a. The child's disability;
 - b. An *explanation of why* the disability restricts the child's diet;
 - c. The major life activity affected by the disability;
 - d. The food(s) to be omitted from the child's diet, and the food or choice of foods that must be substituted;
 - e. **Specific substitutions** needed must be **specified in a statement** signed by a licensed physician.
5. This documentation is required to justify that the modified meal is "reimbursable", as defined by federal guidelines, and to ensure any meal modifications meet nutrition standards that are medically appropriate for the student

C. Reviewing Medical Statement

1. Once diet is received by the Department's Dietitian, special diet will be formulated within 10-15 business days; highly sensitive and restrictive diets may take longer to ensure an appropriate menu is selected.
 - a. Parent/guardian is to make arrangements to ensure student is provided meals from home during this time.
 - b. Cafeteria managers cannot make menu modifications without Dietitian consultation; therefore, in the best interest of the student that they bring their own sack lunch/breakfast.
2. Once reviewed by the Dietitian, the special diet will be reviewed on a one-to-one basis with the manager and dietitian.
3. Manager will then take a copy of the special diet to keep on file.
4. Dietitian will also forward copies to the school nurse for a copy.

D. Following Medical Statement/Diet Prescription

1. CN staff shall make food substitutions or accommodations for students with those disabilities as specifically outlined (written) in the special diet order form.
2. Substitutions for students with disabilities shall be based on a prescription written by a licensed physician.
3. Under no circumstances is school CNP staff to interpret, revise, or change a diet prescription or medical order.
 - c. For example, a "diet order" for 1 Starch, 1 Vegetable, 1 Fat, 1 Meat, and 1 Milk **is not acceptable** because it would require dietitian to make assumptions to the amount of carbohydrates in each group listed.
 - i. Instead a "diet order" that specifically states *total grams of Carbohydrates per meal* **will be followed** and implemented.
 - d. Another example, "low fat diet" no menu modifications will be made because request does not specify what food items to omit or the allowable amount of grams of fat.

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4. When uncertainty arises or the diet cannot be located, the manager shall notify the dietitian so that a diet plan may be formulated.
5. *Best Practice*: School nurse is to print out school menu for parent/guardian to review and take to physician to specify items to be omitted.
6. If a student has a **milk allergy**, Kikkoman Soy milk will be substituted for regular cow's milk.
 - a. Water and juice may **NOT** be substituted for cow's milk.
 - b. As per USDA regulations 8 ounces or 1 cup of fluid milk is a required component of the school lunch & breakfast pattern.
7. **Summer School**: If student is to attend summer school parent/guardian is only required to notify the school nurse by the first day of school.
 - a. Nurse will then contact CNS Dietitian to verify that all necessary paperwork is on file.
 - b. CNS Dietitian will then contact the cafeteria manager and review diet orders with the recommended menu modifications.
 - c. Estimated time of menu modifications implementation is 5-7 business days.
 - i. Parent/guardian is to make arrangements to ensure student is provided meals from home during this time.
 - ii. Cafeteria managers cannot make menu modifications without Dietitian consultation; therefore, in the best interest of the student that they bring their own sack lunch/breakfast.

II. CHILDREN **WITHOUT DISABILITIES**

- A. Children without disabilities, but with special dietary needs requiring food substitutions or modifications, may request that the school food service meet their special nutrition needs.
 1. **The school food authority will decide these situations on a case-by-case basis.**
 2. Documentation with accompanying information must be provided by a recognized medical authority.
 3. While school food authorities are encouraged to consult with recognized medical authorities, where appropriate, **schools are not required to make modifications to meals** based on food choices of a family or child regarding a healthful diet.
 4. This provision **covers those children who have food intolerances or allergies but do not have life-threatening reactions** (anaphylactic reactions) when exposed to the food(s) to which they are allergic.

B. Lactose Intolerant

1. If a student is **lactose intolerant**, *a medical statement form is required* and Lactaid milk will be substituted for regular cow's milk.
2. As per USDA regulations 8 ounces or 1 cup of fluid milk is a required component of the school lunch & breakfast pattern.
3. No other beverage (juice, ice tea, or soda), nor food (ice cream, cottage cheese, or yogurt), can be substituted for this required component.

III. REMOVAL OF SPECIAL DIET

1. Liability Statement

- a. If at any time parent/guardian feels that it is the best interest of the student to be removed from the special diet order by his/her physician parent/guardian are to obtain a liability statement from the school nurse.

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- b. This statement releases the school district from any liability if student is to have an adverse affect due to not following his/her prescribed diet.
- c. Once this form is reviewed and signed by parent it shall be forwarded to the dietitian.
- d. The dietitian will then inform the cafeteria manager to stop implementing special diet for that student.

IV. SUMMARY OF RESPONSIBILITIES

A. Dietitian's Responsibility

- Keep a log that includes student name, ID, campus, allergy/diagnosis etc.
- Keep a file/log of all documentations provided regarding special diet and medical notes documenting phone conversations/clarifications regarding diet.
- Review all menu item ingredients for allergens
- Provide nutrition education to cafeteria managers regarding special diets.
- Provide training to school nurses regarding CNS procedures on special diets.
- Verify and confirm with MD, nurse, and/or parent as needed regarding orders.
- Input special instructions onto student account via POS system; update annually and/or as needed.
- Provide special diet log to all school nurses before summer school begins

B. Manager's Responsibility

- Cafeteria managers **cannot** make menu modifications without dietitian consultation.
- Make the necessary food substitutions or accommodations for students with those disabilities as specifically outlined (written) in the special diet order form.
- Meet with dietitian, one-to-one basis, to review diet restrictions.
- Review menu with his/her kitchen staff.

C. Nurse's Responsibility

- Provide parent with medical statement form
- Assist in educating parent/guardian on CNS special diet procedures
- Turn in medical statement form (special diet request) only if completed in its entirety to CNS Dietitian (via school mail, fax, or email)

D. Parent/Guardian's Responsibility

- Obtain medical statement form (special diet request) from school nurse or CNS website www.mercedeschildnutrition.net
- Return all completed forms back to school nurse.
- Provide sack meals for breakfast/lunch until special accommodations are made.
- Provide updated forms annually even if special accommodations remained the same as the previous year.