

# **Food Allergies and Food Substitutions**

## **Head Start Performance Standard**

§ 1302.42 (b) (4) § 1302.44 (a) (1) § 1302.47 (7) (vi)

#### Policy

Head Start will provide food substitutions when a diet restriction is due to a food allergy, disability, or medical condition requiring a special diet authorized by a medical authority, parent/guardian, or due to a religious restriction.

An approved **Medical Statement to Request Special Meals and/or Accommodations**, or a **Meal Preference Request Form** must be completed and on file in the classroom whenever a required food component is missing at a meal and the meal will be claimed for Child and Adult Care Food Program (CACFP) reimbursement.

#### Defining a disability under the CACFP:

A person with a disability is defined as any person...

With a physical or mental impairment which substantially limits one or more major life activity

Who has a record of such impairment or

Who is regarded as having such an impairment

"Major life activities" are defined as:

Caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.

"Major life activities" also include the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

Note: Food allergies and food intolerances are considered a disability under the CACFP and will be accommodated per CACFP guidelines

#### **Medical Food Substitutions**

For medical meal accommodation requests for children with disabilities, the teacher will inform the parent/guardian that a child needs a **Medical Statement to Request Special Meals and/or Accommodations** form.

This form is used when a child has a physical or mental impairment, food allergy or medical condition that substantially limits a major life activity or a major bodily function. This form is required when the child's disability, food allergy or food intolerance eliminates a mandatory meal pattern component, modifies a texture, reduces portion sizes, or changes meal frequency. This form must be completed and signed by a state licensed health care professional who is authorized to write medical prescriptions under state law. This information is specified on the form. If a child's disability does not eliminate an entire component but only a specific food (ex. Allergy to oranges), the accommodation will still be made but a form is not needed.

Examples of when to use the form:

Form Reference: [Medical Statement to Request Special Meals, Children with Food Allergies and Food Substitution List, Statement for Food Substitution Pending, Meal Preference Request Form, Food Substitution Form Decision Tree] Page **1** of **3** Reviewed 07/2023

### Community Action Head Start Washington County, Oregon

- Food allergies that eliminate/modify an entire meal component (ex. dairy allergy)
- Food intolerances that eliminate/modify an entire meal component (ex. dairy intolerance, gluten intolerance/celiac disease)
- Physical or mental impairments that eliminate/modify an entire meal component (ex. special diets for cerebral palsy, epilepsy)

An acceptable alternative to the Medical Statement is a doctor's note which includes: the major life activity or bodily function affected, foods to eliminate, foods to substitute, and a signature.

Refer to the **Food Substitution Form Decision Tree** for more information on when to use the Medical Statement form.

#### **Request for Non-Dairy Milk Substitute**

For soymilk requests for children *without* food allergies, intolerances, or physical/mental impairments, the teacher will inform the parent(s)/guardian(s) that they need to complete **Section A** of the **Meal Preference Request Form** during Orientation or as soon as possible.

This form is used when a child *without* disabilities prefers soymilk over dairy milk. The form can be signed by a parent or guardian and submitted to the CACFP Supervisor when complete.

CACFP guidelines indicate that non-dairy beverages must be nutritionally equivalent to dairy milk and meet the nutritional standards for fortification of calcium, protein, vitamin A, vitamin D, and other nutrients to levels found in cow's milk. Current non-dairy milks that are considered nutritionally equivalent to cow's milk include several brands of non-flavored soymilk.

For any other non-dairy milk requests, a **Medical Statement to Request Special Meals and/or Accommodation** form must be filled out and signed by an authorized medical professional.

Refer to the **Food Substitution Form Decision Tree** for more information on when to use the Meal Preference Request form.

### **Religious Food Substitutions**

For meal accommodations due to religious beliefs, the teacher will inform parent(s)/guardian(s) that they need to complete **Section B** of the **Meal Preference Request Form** during Orientation or as soon as possible. The teacher will send the completed form to the CACFP Supervisor.

### **Foods Brought from Home**

In special circumstances when a child's diet modification is unable to be accommodated or the parent(s)/guardian(s) are unsatisfied with the accommodation offered, food may be brought from home with the express permission of the CACFP Supervisor and/or Early Childhood Program Manager.

Meals brought from home are required to follow the allowable foods outlined in the CACFP meal pattern. Chips, cookies, cakes, candy, cinnamon rolls, and other similar foods are not allowed. Exceptions will be made for classroom celebrations outside of mealtimes.

If parent(s)/guardian(s) provides more than one CACFP-required food component at a child's meal, the meal cannot be claimed for CACFP reimbursement and will not be included in the Point of Service meal counts. All substitutions will be documented on the **Working Menu Food Substitution Addendum**.

If the parent(s)/guardian(s) has the intention of providing meals for their child but forgets, the teacher will: Call the parent(s)/guardian(s) and ask them to bring meals for their child, ask the parent(s)/guardian(s) to approve Head Start provided meals for that day or send the child home.

Form Reference: [Medical Statement to Request Special Meals, Children with Food Allergies and Food Substitution List, Statement for Food Substitution Pending, Meal Preference Request Form, Food Substitution Form Decision Tree]

#### Community Action Head Start Washington County, Oregon

#### Procedure

- 1. The classroom teachers will discuss the food substitution policy at Orientation and ask the child's parent(s)/guardian(s) to identify any special diet restriction, other than personal preference, that a child may have due to a documented food allergy, disability, medical condition, or religious exception.
- 2. The classroom teachers will reach out the Health Services Supervisor to ensure that (1) they receive any necessary training with Registered Nurse (RN) and (2) a child who has been diagnosed with a chronic medical condition, such as diabetes, or a severe food allergy (food anaphylaxis) has a medical protocol for the child on file in the classroom.
- 3. The classroom teachers will provide the appropriate Food Substitution Form to the guardian of the child that requires the accommodation. The family will work directly with the medical provider as needed.
- 4. If a child in need of a substitution is attending class and there is no completed substitution form on file, the teacher will work with the CACFP Supervisor to make the appropriate accommodation. The teacher will fill out the **Statement for Food Substitution Pending** form and interoffice mail the form to the CACFP Supervisor at the end of each week. That meal will not be reimbursable unless there is:
  - i. Documentation that the parent/guardian has given verbal or written notification that a child needs a substitution and
  - ii. A food substitution form is pending completion
- 2. Once the substitution form is completed and submitted back to the teacher, the teacher will review the form for completeness, and interoffice mail the original copy of the form to the CACFP Supervisor. The CACFP Supervisor will indicate the appropriate accommodation on the form. The original copy of the form will be kept on file.
- 3. The food services team will upload a copy of the complete form to ChildPlus under "Health Attachments" and flag the child for CACFP.
- 4. The teacher will make a copy of the form and place it in the Medical Protocol Folder.
- 5. The teacher will document the substitution on the **Children with Food Allergies and Food Substitutions List**. This list should reflect all children with food substitutions and should be kept in a consistent but private location in the classroom, such as inside a cabinet door. Staff and classroom volunteers will refer to this list prior to serving meals to any children.
- 6. All special diets will be communicated to the respective kitchen teams by the CACFP Supervisor. For children with diets that require a significant amount of monitoring and extra preparation from the kitchen, special menus will be developed in consultation with a Registered Dietitian.
- 7. When a child receives a substitution in the classroom, the substitution will be documented on the **Working Menu Food Substitution Addendum.** This form will be interoffice mailed to the CACFP Supervisor at the end of each month.