Special Dietary Needs

Guidelines for Students with Special Diets

If your child has been identified as having a disability and has special dietary needs, changes can be made to your child's school breakfast and/or lunch at no extra charge with the proper documentation from a licensed medical professional.

Is your child eligible?

Your child is eligible if he or she has been identified as having a disability under **Section 504 of the Rehabilitation Act of 1973**, or under **Part B of the Individuals with Disabilities Education Act (IDEA)** and has special dietary needs. USDA regulations (7 CFR Part 15b) require substitutions or modifications in school meals for children whose disabilities restrict their diets.

Some examples of special dietary needs that are considered disabilities:

- Celiac disease
- Diabetes
- Food allergies
- PKU

Section 504 of the Rehabilitation Act of 1973

*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. A **major life activity** is defined as caring for one's self, eating, doing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working. The term "physical or mental impairment" includes many diseases and conditions.*

Part B of the Individuals with Disabilities Education Act (IDEA)

*The term **child with a "disability"** under Part B of the Individuals with Disabilities Education Act (IDEA) means a child evaluated in accordance with IDEA as having one or more of the recognized disability categories and who, by reason thereof, needs special education and related services.*

For more information on Section 504 of the Rehabilitation Act of 1973, please visit the U.S. Department of Education Office for Civil Rights website at www.ed.gov and f*or more information on Part B of the Individuals with Disabilities Education Act, please visit the U.S. Department of Education IDEA website at http://idea.ed.gov/.*

What types of meal modifications can be made?

Possible modifications include but are not limited to:

- Food restrictions (milk and milk products, gluten, eggs, etc.)
- Increased calories
- Texture changes (pureed, ground, chopped, thickened liquids, etc.)
- Tube feeding
- Weight management (calorie-controlled)

What documentation is needed?

Special Diet Form will need completed for special dietary requests. OR
Submit a **statement** signed by a licensed medical professional. This includes a licensed physician (MD or OD), physician's assistant (PA), or nurse practitioner (NP), or Registered Dietitian (RD).
The **Special Diet Form** or the **licensed statement** must identify:

- Child's dietary restriction(s);
- Description of major life activities affected in relation to the diet modification;
- The food(s) to be omitted from the child's diet and the food or choice of foods that must be substituted.

What the school foodservice department will provide:

The school food service department will accommodate all substitutions or modifications as identified by a licensed medical professional, defined above, within the **Special Diet Form** or a **licensed statement**.
The following are examples of what the school will provide:

- Dietary supplements (tube feeding formulas & other nutritional formulas)
- Substitution foods (gluten free, low protein, etc.)
- Food service staff will be trained on optimum handling of special diet modifications.
- Communication between foodservice department, school nurse, registered dietitian, physician and parent or guardian regarding your child's school meals.

Note: Due to safety and sanitation reasons, we cannot store, hold, or cook items brought from home.

What if my child has special dietary needs, but not a disability?

Schools are not required to make modifications to meals for students with special dietary needs that are not considered a disability. This includes modifications based on food choices of a family or child regarding a healthful diet. For example, general health concerns, like preferring to eat gluten-free because of a belief that it is better, rather than due to Celiac disease, are not disabilities and do not require accommodation.

Children without disabilities, but with special dietary needs requiring food substitutions or modifications, may request in writing that the school food service meet their special nutrition needs. However, it is up to the individual school and/or school district as to whether requests are accommodated.

What if my child's meal modification is denied?

If a meal modification is denied or is determined unreasonable by the individual school and/or school district, the student's parent or guardian has the following procedural rights:

- File a grievance if they believe a violation has occurred regarding the request for a reasonable modification,
- Receive a prompt and equitable resolution of the grievance,
- Request and participate in an impartial hearing to resolve their grievances,
- Be represented by counsel at the hearing,
- Examine the record, and
- Receive notice of the final decision and a procedure for review, i.e., right to appeal the hearing's decision.

Have more questions on special dietary needs?

Contact the Food Service Department to speak with a Registered Dietitian.

Special Diet

☐ New ☐ Change/Modify ☐ Temporary (End Date: _____)

STUDENT INFORMATION

First Name: _____ Last Name: _____ Today's Date: _____

Student ID Number: _____ Age: _____ Male / Female Date of Birth: _____/_____/_____

School: _____ Grade: _____ Teacher: _____

Parent/Guardian Name: _____ Phone/Email: _____

MEDICAL INFORMATION

Per the United States Department of Agriculture, a person with a disability is any such person who has an impairment that substantially limits one or more major life activities. By definition this includes but is not limited to diabetes, PKU, celiac disease, food anaphylaxis, learning disabilities, and etc.

THIS SECTION MUST BE COMPLETED BY A LICENSED MEDICAL PROFESSIONAL.

Student's Diet Restriction(s): _____

Please describe major life activities affected in relation to dietary modification: _____

_____

Texture Modification: Ground Chopped Pureed Other (please be specific): _____

Tube Feeding: Formula Name: _____ Instructions: _____ Oral? _____YES _____NO

Nutrient Modification: Increase Calories _____ Decrease Calories _____ Nutrient Restriction _____

Omit Foods: _____ Substitute with: _____

Does patient have a life threatening food allergy? _____YES _____NO

Food Allergies (circle all that apply):

☐ Fluid Milk ☐ All Dairy Products ☐ Soy ☐ Eggs ☐ All Products with Eggs

☐ Wheat ☐ Gluten ☐ Corn ☐ All Corn Additives ☐ Seafood ☐ Sesame Seeds

☐ Peanuts ☐ All Nuts ☐ All Foods Produced in Facility with Nut Products

Can patient consume allergen as an ingredient in food product? _____YES _____NO

Licensed Medical Professional: _____ Phone: (_____)_____-_____

Licensed Medical Professional Signature: _____ Date: _____

Any change of treatment must be requested in writing on this form. Once form is submitted, please allow up to five days for processing.

By signing below, I understand that it is my responsibility to renew this form anytime my child's medical or health needs change.

Parent Signature: _____ Date: _____

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: https://www.usda.gov/sites/default/files/documents/ad-3027.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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; or

2. Fax: (833) 256-1665 or (202) 690-7442; or

3. Email: program.intake@usda.gov.

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