

Dietary Accommodations

Note: [HB4089 \(Plant-based school lunch option\)](#) will become effective **August 1, 2023**. It requires public school districts participating in the National School Lunch Program to provide a plant-based school lunch option to students who submit a prior request. Additionally, the plant-based option must meet applicable NSLP meal pattern and nutrition requirements. Guidance on how to meet this requirement is provided in this chapter.

Dietary

Accommodations

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Additional Resources

- *ISBE Handbook for Managing Special Dietary Needs in School Food Service*
<https://www.isbe.net/Documents/Special-Dietary-Needs-Handbook.pdf>
- *ISBE Anaphylaxis Response Policy for Illinois Schools*
<https://www.isbe.net/Documents/Anaphylactic-policy.pdf>
- *USDA-FNS Accommodating Children with Disabilities in the School Meal Programs: Guidance for School Food Service Professionals*
<https://fns-prod.azureedge.us/sites/default/files/cn/SP40-2017a1.pdf>
- *SP 26-2017 Accommodating Disabilities in the School Meal Programs: Guidance and Questions & Answers (Q&As)*
<https://fns-prod.azureedge.us/sites/default/files/cn/SP26-2017os.pdf>

Introduction

Federal law and USDA regulations require SFAs participating in the School Nutrition Programs to make reasonable modifications to meals when a child has a disability that affects their dietary needs. Furthermore, 7 CFR 15b.26(d) requires SFAs receiving Federal financial assistance to provide children with disabilities a modified meal at no extra cost. Requested modifications may fall within or outside the current meal pattern requirements, but are subject to different requirements in order for SFAs to receive federal reimbursement for those meals. Guidance on these regulations is provided in the following sections.

Definitions

A list of frequently used terms throughout this section are defined as follows:

Disability – The Americans with Disabilities Act (ADA), Section 504, and Departmental Regulations at 7 CFR part 15b define a disability as a physical or mental impairment that substantially limits one or more major life activities of an individual, a record of such an impairment, or being regarded as having such an impairment. According to the ADA, most physical and mental impairments will constitute a disability; a physical or mental impairment does not need to be life-threatening in order to be classified as a disability.

Physical or Mental Impairment – The Title III ADA Regulations (Section 36.104) define the phrase *physical or mental impairment* as any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following bodily systems: neurological, musculoskeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine; as well as any mental or psychological disorder such as an intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

Major Life Activity – Major life activities are broadly defined and include, but are not limited to: caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.

Major Bodily Function – Major bodily functions are included under the term major life activity. Examples of major bodily functions include, but are not limited to: functions of the immune system, normal cell growth, and digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

State Licensed Healthcare Professional – This term refers to an individual who is authorized to write medical prescriptions under State law. According to 225 ILCS 85/3, prescriptions must be issued by one of the following in the State of Illinois: a physician licensed to practice medicine in all of its branches, a physician assistant (in accordance with subsection (f) of Section 4), or an advanced practice nurse (in accordance with subsection (g) of Section 4).

Medical Statement – A written statement from a State Licensed Healthcare Professional supporting a request for a meal modification for a child with a disability. Program regulations require SFAs to provide modifications to meals for children with disabilities when medical statements are provided. More details on what must be provided by a medical statement can be found in the sections that follow. A sample *Medical Authority Modified Meal Request Form* can be found on ISBE’s [Accommodations webpage](#).

Preference – A preference is a requested meal modification, within or outside current meal pattern requirements, that is not related to a disability situation (e.g. cultural, religious, and ethical preferences). Preference for a meal modification can be requested, but SFAs may decline such requests.

Students with Mental or Physical Impairment or Disability

After the passage of the Americans with Disabilities Amendments Act, most physical and mental impairments constitute a disability. A physical or mental impairment need not be life threatening to constitute a disability; it is enough that it limits a major life activity. For example, digestion is an example of a bodily function that is a major life activity. A child whose digestion is impaired by lactose intolerance may be a person with a disability regardless of whether or not consuming milk causes the child severe distress. Further, an impairment may be covered as a disability, even if medication or another mitigating measure may reduce the impact on the impairment. Whether a physical or mental impairment constitutes a disability must be determined on a case-by-case basis. The determination must be made without regard for whether mitigating measures may reduce the impact of the impairment.

Students Without Mental or Physical Impairment or Disability

Meal modifications may be requested for children without a physical or mental impairment or a disability. SFAs are encouraged to consider children’s cultural, religious, and ethical preferences when planning and preparing meals. FNS encourages schools to provide a variety of foods for children to select from in order to accommodate food preferences, which helps to maintain participation in the NSLP and SBP. If requested accommodations are considered reasonable, SFAs may honor the requested meal modification. When providing a substitution for a child without a disability, the substitution must be consistent with the meal pattern requirements for the meal to be reimbursable. However, SFAs are not required to accommodate meal modification requests related to a preference.

Modifications Within the Meal Pattern

SFAs may receive reimbursement for a meal modification request without a medical statement when the modification can be made within the program meal pattern. For example, if a child has

an allergy to one fruit or vegetable, the SFA can simply substitute another fruit or vegetable in the child's meal. In situations where the SFA does not obtain a medical statement, FNS strongly encourages SFAs to make note of the actions taken to accommodate a child's disability. Local agencies may choose to require a medical statement for meal modifications within the program meal pattern. Maintaining a medical statement on file is highly recommended although not required at the Federal or State level. Doing so helps to safeguard children in all areas of the school environment and protects children in situations where substitute staff members who may be unfamiliar with their needs are working in the cafeteria.

Modifications Outside the Meal Pattern

SFAs must obtain a medical statement from a State Licensed Healthcare Professional to receive reimbursement for meal modifications when the modified meal does not meet program meal pattern requirements. For example, a child may require portion sizes larger than those outlined in the program meal pattern requirements to accommodate a disability, in which case the SFA must keep on file a written medical statement supporting the meal modification with a State Licensed Healthcare Professional's signature. More information on what is required in a written medical statement is located in the following section.

Medical Statement Requirements

The medical statement should include a description of the child's physical or mental impairment that details how it restricts the child's diet. It should also include an explanation of what must be done to accommodate the disability. In the case of food allergies, this means identifying the food(s) to be omitted and recommending alternatives. In other cases, more information may be required. For example, if the child would require caloric modifications or the substitution of a liquid nutritive formula to accommodate a disability, this information must be included in the statement. A sample *Medical Authority Modified Meal Request Form* to be completed by a State Licensed Healthcare Professional can be found on ISBE's [Accommodations webpage](#).

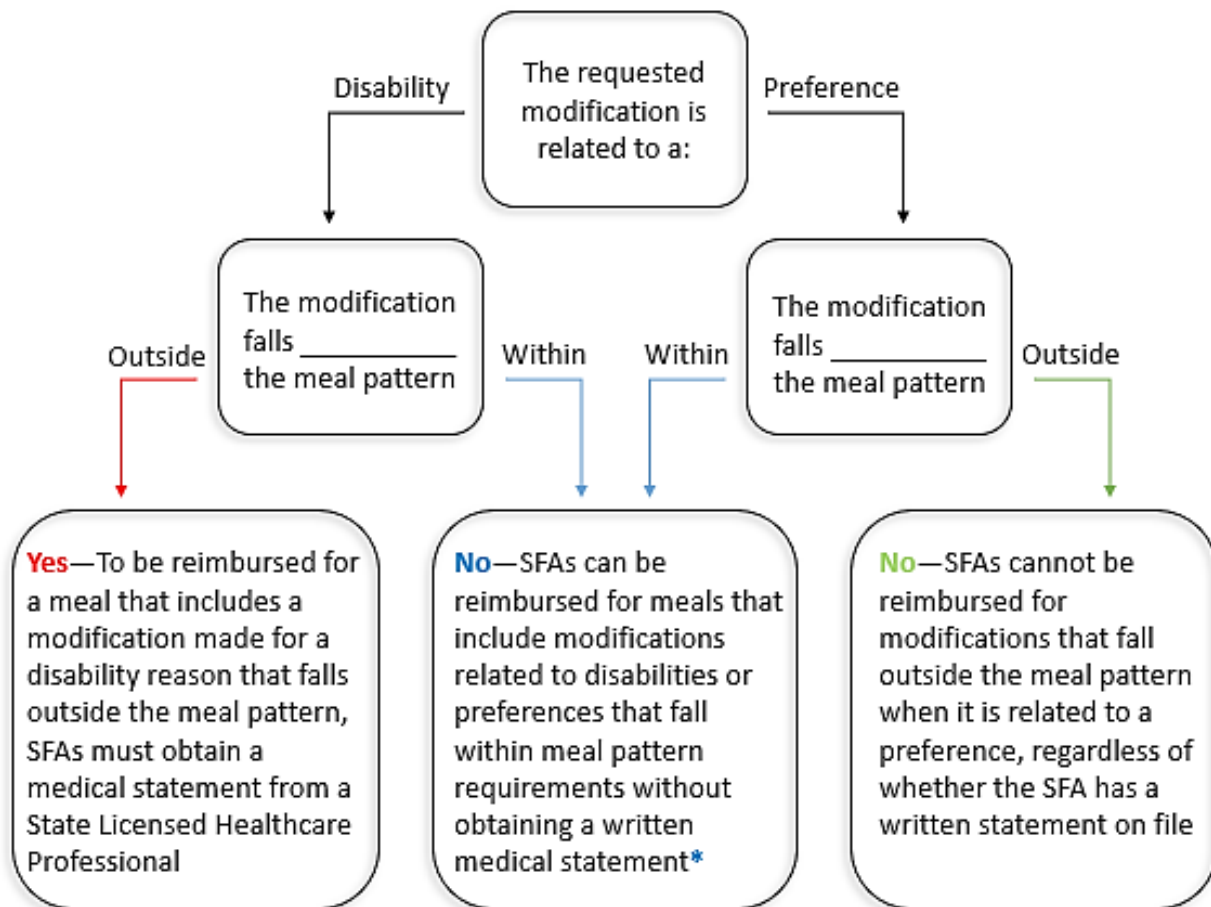
If a medical statement is provided and does not fully explain the modification needed, the SFA should immediately contact the child's parent/guardian for guidance and ask the family to provide an amended medical statement as soon as possible. However, clarification of the medical statement should not delay the SFA from providing a meal modification. SFAs should follow the portion of the medical statement that is clear and unambiguous to the greatest extent possible, while obtaining the additional information.

USDA does not require SFAs to obtain updated medical statements on a regular basis. Once the medical statement is accepted, SFAs will continue to receive reimbursement as long as the medical statement is on file. However, SFAs are responsible for ensuring that medical statements on file reflect the current dietary needs of participating children and may require updates as

necessary to meet their responsibilities. SFAs should carefully consider the burden obtaining additional medical statements could create for parents/guardians when establishing such requirements.

If a child who previously required a meal modification no longer requires modified meals, SFAs are not required to obtain written documentation from the State Licensed Healthcare Professional rescinding the original medical order. However, FNS does encourage SFAs to maintain documentation when ending a meal modification. For example, an SFA could ask the child’s parent/guardian to sign a statement indicating their child no longer needs a meal modification before ending the modification.

Is a medical statement needed to be reimbursed for a meal modification?



*While not required for a modification that meets meal pattern requirements, SFAs are highly encouraged to maintain a medical statement on file for modifications related to a disability to safeguard the student

Fluid Milk Substitutions

Fluid milk substitutions are among the most common menu variations for SFAs. SFAs must inform the State Agency of any schools opting to provide a milk substitute(s) [7 CFR 210.10(m)(2)(ii)] and must ensure milk substitutions meet FNS nutrient requirements (see chart below). For example, low-fat or fat-free lactose-free milk, or reduced-lactose milk, would meet the nutrient requirements.

Nutrient	Per Cup
Calcium	276 mg
Protein	8 g
Vitamin A	500 IU
Vitamin D	100 IU
Magnesium	24 mg
Phosphorus	222 mg
Potassium	349 mg
Riboflavin	0.44 mg
Vitamin B-12	1.1 mcg

SFAs will not receive Federal reimbursement for a meal that substitutes juice or water for milk for a non-disability reason. If a child's medical statement indicates the child cannot consume milk due to a disability, and requests the child receive a substitute, the SFA must provide the requested substitute regardless of whether it meets the nutrient requirements. In a disability situation, the SFA will continue to receive reimbursement for the meal based on the signed medical statement. A child whose digestion is impaired by lactose intolerance may be a person with a disability regardless of whether or not consuming milk causes the child severe distress. Further, an impairment may be covered as a disability, even if medication or another mitigating measure may reduce the impact on the impairment.

Offer Versus Serve

At schools participating in offer versus serve (OVS), children with disabilities must have the option to select all food components/items made available to other children. SFAs cannot accommodate a child's disability by asking the child to exclude a food component/item from their selection. For example, a child who has Celiac disease or a gluten intolerance must have a choice of a grain item that is gluten-free. The SFA may not use OVS to eliminate a specific food component for a child with a disability.

Employee Requirements

According to 7 CFR 15b.6, LEAs employing 15 or more individuals must designate at least one person to coordinate compliance with disability requirements. This person is often referred to as the Section 504/ADA Coordinator. Additionally, these LEAs must ensure their Procedural Safeguards process provides for a prompt and equitable resolution of grievances. LEAs are strongly encouraged to develop a Section 504/ADA Team to encourage information sharing throughout the school and to better help protect children. This team may include school food service professionals and nutritionists, administrators, school medical personnel, teachers, classroom aides, support personnel, parents/guardians, students, or other school officials with relevant experience.

Plant-Based School Lunch Option

Beginning **August 1, 2023** under HB4089 (Plant-based school lunch option), public school districts participating in the National School Lunch Program will be required to provide a plant-based school lunch option to students who submit a prior request. Plant-based options offered must meet applicable NSLP meal pattern and nutrition requirements. SFAs may meet this requirement by regularly incorporating plant-based options into their planned menu, or by providing these options on a case-by-case basis.

Common plant-based alternatives that may credit toward the meat/meat alternate component in the NSLP include, but are not limited to: nuts/seeds, nut/seed butters, beans/peas (legumes), and tofu and soy-based products. When incorporating plant-based options into an NSLP meal, SFAs should refer to Child Nutrition (CN) labels or Product Formulation Statements (PFS) for information on contributions to the meal pattern. *Chapter C—Menu Planning & Meal Pattern Requirements* of this handbook provides more information on crediting meat/meat alternate food items and how to use product labels. Additionally, the following USDA memos may assist SFAs with crediting the applicable items:

- [SP 53-2016](#)--Tofu and soy yogurt products
- [SP 25-2019](#)--Tempeh
- [SP 26-2019](#)--Pasta made from legume flour