

Food and Milk Substitutions:

Accommodating Children with Special Dietary Needs



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Child and Adult Care Food Program

Illinois State Board of Education – Nutrition and Wellness Programs

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Meal Pattern Substitutions

The United States **Department of Agriculture's (USDA's)** nondiscrimination regulation (7 CFR 15d*) applies to any site participating in a federally-funded meal program, including the Child and Adult Care Food Program (CACFP).

Regarding food substitutions:

- CACFP facilities **must** make food substitutions or reasonable accommodations for children with disabilities.
- CACFP facilities are encouraged, but **not required**, to provide food substitutions or accommodations on a case-by-case basis for children without disabilities.
 - CACFP facilities are encouraged, but not required, to have a written policy in place on how they will handle food substitution requests for children without a disability. Facilities are encouraged to provide food substitutions or accommodations when feasible.

* <http://www.gpo.gov/fdsys/pkg/CFR-2003-title7-vol1/xml/CFR-2003-title7-vol1-sec15b-13.xml>



What is considered a disability?

According to the Americans with Disabilities Act of 1990*, any person who has a physical or mental impairment which substantially limits one or more major life activities is considered to have a disability.

Major life activities include functions such as:

- Caring for oneself
- Performing manual tasks
- Seeing
- Hearing
- Eating
- Sleeping
- Walking
- Standing
- Lifting
- Bending
- Speaking
- Breathing
- Learning
- Reading
- Concentrating
- Thinking
- Communicating
- Working

A major life activity also includes the operation of a major bodily function.

* <http://www.ada.gov/pubs/ada.htm>

Physician's Statement for Food Substitutions

CACFP facilities are required to have a ***Physician's Statement for Food Substitutions**** on file when any substitutions or modifications are made for medical reasons to the required USDA meal patterns. The statement must include:

- the child's disability
- explanation as to how the disability restricts the child's diet
- the major life activity affected by a disability
- foods/beverages to be omitted
- foods/beverages to be substituted, and
- signature of a medical authority
 - includes licensed physicians, chiropractic physicians, physician assistants, and nurse practitioners

*Can be found online at http://www.isbe.net/nutrition/htmls/forms_cacfp.htm



Substitutions For A Child With A Disability:

- A *Physician's Statement for Food Substitutions* must be completed and on file.
- Substitutions **must be made** to the regular meal, including milk, for any child with disabilities.
 - The child care institution is required to provide the alternate food(s)/milk. Parents may provide the substituted component, but it is not required.
- In these cases, meals are reimbursable when modifications to the Meal Pattern are made, but any modification must follow the substitutions listed on the *Physician's Statement for Food Substitutions*.
- For children with disabilities that only require **modifications in food texture, a licensed physician's** written instructions indicating the appropriate texture is recommended, but not required.
 - Modifications in food texture (such as chopping, grinding, or pureeing) are allowed for any child, as long as the required portion of the component is provided.



Substitutions For Food Intolerances Or Allergies:

- A *Physician's Statement for Food Substitutions* should be completed and on file.
- If a physician determines the food allergy is severe enough to result in a life-threatening reaction, then the **child's condition meets the definition of "disability"** and the CACFP facility **must** make all substitutions the physician prescribes.
- For children with food allergies or food intolerances that do not rise to the level of a disability, substitutions **may** be made to the reimbursable meal, but are not required.
 - For a meal to be reimbursable, any substitutions made would need to follow meal pattern requirements. For example, a center could provide peaches instead of strawberries for a child who is allergic to strawberries.
 - Check with parents and review the *Physician's Statement for Food Substitutions* to see which alternate food components are acceptable.



Important to Remember:

Children could have their first allergic reaction while in your care. Because of this, food allergy training is recommended for all child care staff – even if a program has no enrolled children with known food allergies.

Some steps you might take include:

- Arrange for training to be conducted by a child care health consultant
- Handle food allergies and food intolerances on a case-by-case basis
- Talk **to the child's parents or guardians about the child's food allergies or food intolerances**
- Know where emergency medications are
- Be aware of what is in foods before serving
- Always actively supervise children while they are eating
- Follow the regular menu, whenever possible

These tips are provided in the USDA's *Nutrition & Wellness Tips for Young Children: Provider Handbook for the Child and Adult Care Food Program*, available online at: <http://teamnutrition.usda.gov/Resources/nutritionandwellness.html>

Substitutions For Non-medical Reasons:

In cases where a parent requests a food substitution for non-medical reasons, CACFP facilities are encouraged to work with parents and children to provide foods that can be eaten. Non-medical reasons for food substitution requests include:

- Diets that are Vegetarian, Vegan, etc.
- Religious Reasons
- Personal Preference

CACFP facilities may choose to address the needs of individuals by substituting different food items within the same component of the meal pattern.

- For example, a child who does not eat pork for religious reasons or because they follow a vegetarian diet could be served another meat/meat alternate (such as cheese, yogurt, or peanut butter) and still be provided a reimbursable meal.
- To receive USDA reimbursement, meals and snacks served must include all the required CACFP meal pattern components.
- When substitutions are made, they should be documented.



Food Substitution Chart

When food substitutions are requested, the following chart can help you determine when substitutions are required and reimbursable.

It is available on the ISBE Nutrition and Wellness Programs website, under Meal Pattern Requirements and Nutrition Information, at

http://www.isbe.net/nutrition/htmls/forms_cacfp.htm.



Food Substitution Chart

(ONLY for children 1 year of age and older; it does not apply to infants.)

Illinois State Board of Education
Nutrition and Wellness Programs
100 North First Street, Springfield, Illinois 62777-0001

When are food substitutions reimbursable?

The Child and Adult Care Food Program (CACFP) regulations allow food substitutions for children under certain circumstances. Refer to the chart below to determine requirements for food substitutions and when the meal is reimbursable. Also, refer to the separate document, *Milk and Non-Dairy Milk Substitution Chart*.

Reason for Request	Child Not Disabled Special Dietary Need for Personal Reason (Example: Vegetarian, Religious, or Cultural Preferences)	Child Not Disabled Medical Condition (Example: Allergy)		Child with Disability or Life Threatening Allergy
	<i>The center/home <u>may provide</u> these substitutions; however, is not required.</i>	<i>The center/home <u>may provide</u> these substitutions; however, is not required.</i>		<i>The center/home <u>must provide</u> substitution when prescribed by physician.</i>
Type of Request	Parent Request ¹	Parent Request ¹	Physician Statement for Food Substitution Signed by Licensed Physician ² (Must list both food to avoid and food to substitute)	Physician Statement for Food Substitution Signed by Licensed Physician ² (Must list both food to avoid and food to substitute)
Vegetarian diet (will eat eggs, cheese and milk)	Reimbursable when a meat alternate is substituted for meat	N/A	N/A	N/A
Strict vegan diet (will not eat any animal products including eggs, cheese, and milk)	Reimbursable when a meat alternate is substituted for meat; and milk is replaced with non-dairy milk substitute that meets USDA Nutrient Standards ³	N/A	N/A	N/A
Will not eat pork for religious reasons	Reimbursable when a different meat/meat alternate is offered	N/A	N/A	N/A
Allergic to fruit, vegetable, or meat/meat alternate (Example: Allergic to strawberries, eggs or nuts)	N/A	Need <i>Physician Statement for Food Substitution</i> from Licensed Physician when Allergy Severe or Life Threatening	Reimbursable when center/home (or parent) provides substitution according to Physician's Statement ⁴	Reimbursable Center/Home MUST provide according to Physician's Statement (or parent may provide, but is not required) ⁴

Allergic to ingredient in bread and crackers (Example: Allergic to wheat/gluten)	N/A	Need <i>Physician Statement for Food Substitution</i> from Licensed Physician when Allergy Severe or Life Threatening	Reimbursable when center/home (or parent) provides substitution according to Physician's Statement ⁴	Reimbursable Center/Home MUST provide according to Physician's Statement (or parent may provide, but is not required) ⁴
Requires ground or pureed food	N/A	Reimbursable when center/home (or parent) provides ⁴ . Does not change meal pattern, just consistency	Reimbursable when center/home (or parent) provides substitution according to Physician's Statement ⁴	Reimbursable Center/Home MUST provide according to Physician's Statement (or parent may provide, but is not required) ⁴
Requires tube feeding	N/A	N/A	N/A	Reimbursable Center/Home MUST provide according to Physician Statement (or parent may provide, but is not required) ^{4,5}
Severely allergic to peanuts/peanut butter	N/A	N/A	N/A	Reimbursable Center/Home MUST provide according to Physician Statement (or parent may provide, but is not required) ⁴

1. Request must identify child's special dietary needs or medical problem.
2. Use *Physician Statement for Food Substitution* form.
3. Nutrient Standards required for non-dairy milk substitute – *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), and Vitamin B-12 (1.1 mcg).*
4. The center/home must provide one component for meal/snack to be reimbursable.
5. If, according to the physician's statement, the special formula provided by the parents is the only component the child is allowed to consume, the meals may be claimed for reimbursement when the special formula is prepared and fed by center staff or home provider. If the parent performs this task at the center/home, the meal would *not* be reimbursable.

Fluid Milk Requirements

- For children between one and two years old, serving whole milk is recommended; serving fat-free, low-fat (1%), and reduced-fat (2%) also is acceptable.
 - For a period of one month, while a 12-month-old child is **weaning from infant formula to cow's milk, one or both** beverages may be served to claim the meal for reimbursement.
 - A child receiving infant formula and not in the weaning stage must have a signed ***Physician's Statement for Food Substitutions*** on file in order for meals to be claimed for reimbursement.
 - Expressed breast milk may continue to be offered to a child **over one year of age in place of cow's** milk.
- Fluid milk served to children two years of age and older must be:
 - Fat-free or low-fat milk (1%), fat-free or low-fat (1%) lactose reduced milk, fat-free or low-fat (1%) lactose free milk, fat-free or low-fat (1%) buttermilk, or fat-free or low-fat (1%) acidified milk.
 - Pasteurized fluid milk that meets state and local standards, and may be flavored or unflavored.
 - Whole milk and reduced-fat (2%) milk **may not** be served to children over two years of age.



Fluid Milk Substitutions

- A facility **must** comply with a statement from a licensed physician when a milk substitution is necessary due to a disability.
- When the milk substitution request is due to a medical or special dietary need other than a disability, the facility **may** choose whether to provide that milk substitution.
- Any fluid milk substitution **may** be made by a childcare center for non-disabled children when a signed statement from a medical authority, parent, or guardian is on file.
 - The request should include the medical or other special dietary reason for the need for substitution.
 - Any reasonable request could be accepted (e.g. milk allergy; vegan diet; and religious, cultural or ethical reasons).
 - If a meal includes a milk substitute that does not meet required nutrient standards, no reimbursement would be provided for that meal.



Non-dairy Nutrient Standards

Non-dairy beverages that are served in place of fluid milk must meet the following nutrient standards :

Nutrient	Amount
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



Milk Substitution Chart

When milk substitutions are requested, the following chart can help you determine when substitutions are reimbursable.

It is available on the ISBE Nutrition and Wellness Programs website, under Meal Pattern Requirements and Nutrition Information, at

http://www.isbe.net/nutrition/htmls/forms_cacfp.htm.



Milk and Non-Dairy Milk Substitution Chart

(ONLY for children 1 year of age and older; it does not apply to infants.)

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When can different types of milk or non-dairy milk substitutes be claimed for reimbursement?

The Child and Adult Care Food Program (CACFP) regulations allow parents to request a non-dairy milk substitute when their child cannot consume fluid milk due to medical or other special dietary needs. The non-dairy milk substitute must be nutritionally equivalent to milk¹ and served in the correct portion for the age of the child.

1. Nutrient Standards required for non-dairy milk substitute – 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), and Vitamin B-12 (1.1 mcg).

Reason for Request	Child with Medical Condition (Example: Allergy) or Special Dietary Need for Personal Reason (Example: Vegetarian, Religious, or Cultural Preferences)		Child with Disability/ Life Threatening Allergy
	<i>The center/home may provide substitution; however, is not required.</i>		<i>The center/home <u>must provide</u> substitution when prescribed by physician.</i>
Type of Request	Parent Request ²	Physician Statement for Food Substitution Signed by Licensed Physician ^{3,4}	Physician Statement for Food Substitution Signed by Licensed Physician ⁴
Whole or reduced-fat (2%) milk to be served to child 2 years of age or older	Not Reimbursable Only low-fat or fat-free milk is reimbursable	NOT Reimbursable	Reimbursable Center/Home MUST provide
Juice served to child instead of milk	NOT Reimbursable	NOT Reimbursable	Reimbursable Center/Home MUST provide (or parent may offer to provide, but is not required) ⁵
Non-dairy milk substitute served to child which <u>meets</u> USDA Nutrient Standards ¹	Reimbursable when center/home (or parent) provides ⁵	Reimbursable when center/home (or parent) provides ⁵	Reimbursable Center/Home MUST provide (or parent may offer to provide, but is not required) ⁵
Non-dairy milk substitute served to child which <u>does NOT meet</u> USDA Nutrient Standards ¹	NOT Reimbursable	NOT Reimbursable	Reimbursable Center/Home MUST provide (or parent may offer to provide, but is not required) ⁵

2. Request must identify child's medical or special dietary needs.

3. Center/Home cannot accept requests ONLY from medical authorities for non-dairy milk substitute; they must also accept parent requests.

4. Use *Physician Statement for Food Substitution* form.

5. The center/home must provide at least one component for meal/snack to be reimbursable.

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Infant Formula and Food Substitutions

- It is recommended that a child care center offer the type of formula that the infant's health care provider has suggested.
 - If the child care facility offers a different type of formula, the infant's parent may decline the offered formula, and supply another type. This choice should be documented on the *Infant Formula/Food Waiver Notification*.
- The USDA Food and Nutrition Services provides, as a guide, a list of products that do not require medical statements when offered to infants in the child nutrition programs.
 - The list is available online at:
<http://www.fns.usda.gov/cnd/care/regs-policy/infantmeals/formulalist.htm>.



Parent-provided Meal Components

When following the Infant Meal Pattern, Birth to 11 Months:

- The parent's preference for what their infant is fed should be noted on the *Infant Formula/Food Waiver Notification*.
- For infants, if the center serves expressed breast milk, formula, and/or solid foods that a parent brings in for their baby, the meal **can** be claimed. However, when two or more components are required, the child care provider **must** have purchased and served at least one of the components for the meal to be reimbursable.
- In cases of a disability and there is a special dietary need, the CACFP facility must provide all required CACFP meal pattern components with any modifications or substitutions.
 - These modifications or substitutions for the **infant's formula or food** should be specified on a *Physician's Statement for Food Substitutions*. Parents may provide components, but it is not required. In cases where two or more components are required, the center must provide at least one component for the meal to be reimbursable.



Parent-provided Meal Components

When following the Meal Pattern for Children Ages 1 to 12:

- For disabled children with special dietary needs, the CACFP facility must provide all required CACFP meal pattern components with **any modifications or substitutions, as specified by the child's *Physician's Statement for Food Substitutions***. Parents may provide components, but it is not required. The center must provide at least one component for the meal to be reimbursable.
- For nondisabled children with special dietary needs, CACFP facilities may allow parents to provide a meal component if all the other meal pattern components are provided by the CACFP facility. A ***Physician's Statement for Food Substitutions*** would need to be on file.
- When there is no medical reason, the center cannot claim the meal for reimbursement if it has not provided all of the meal pattern components.



Question:

A child who attends our center has a life threatening allergy to peanuts, including traces of peanuts, and any contact with them could be fatal. To what lengths must our child care center go to accommodate the child?

In this type of scenario, the allergy rises to the level of a disability, and substitutions must be made. A *Physician's Statement for Food Substitutions* should indicate exactly what foods the child cannot eat and what foods you should substitute. If the statement says the child cannot eat foods produced in a plant that also produces nuts, then you would have to withhold any product on your menu that could have been produced around nuts. You would need to replace those products with one of the items listed as an acceptable substitution.

- The general rule is to be cautious in these situations. For a product that could have **been produced around nuts, if the product's packaging clearly says "produced in a nut-free facility,"** then you should be fine. If the product packaging says nothing and **you can't be sure, then** it would be safer to omit the item from the meal or snack. You could also contact the supplier or manufacturer for more information.

Question:

A child's parents have requested that a strict vegetarian diet be followed for their child. Must our center comply with this request?

No. However, centers are encouraged to make food substitutions based on food choices of a family or child regarding a healthful diet.

To serve a reimbursable meal, substitutions within the same component of the meal pattern may be made. For example, a black bean quesadilla could be served in place of a chicken quesadilla.

Additionally, alternate protein products, such as soy patties, are allowed under the Meal Pattern for Children, Ages 1 through 12 Years. A manufacturer supplying an alternate protein product must provide documentation that the product meets all the following criteria:

- Processed so that some portion of the non-protein constituents of the food is removed
- Safe and suitable edible products produced from plant or animal sources
- Produced so the biological quality of the protein is at least 80 percent that of casein
- Contains at least 18 percent protein by weight when fully hydrated or formulated

Question:

A child with a disability is on a number of medications. The **physician's statement is well defined and includes menus with specific foods**. If a situation arises where specific foods are out of stock, can a center make substitutions on an "as necessary" basis?

No. Staff cannot decide what substitutions are appropriate for a given child. Also, do not ask the child if it is acceptable to deviate from any of their individual plans. A child may be on a specific medication, which could interact in a negative way with a particular food item.

A list of appropriate substitutions should be noted on the ***Physician's Statement for Food Substitutions***. Ideally, those substitutions should be on hand on a regular basis. If such a list is not provided, staff must ask parents **to obtain from the child's physician** a list of those foods that may be substituted.

Question:

A child at our center is allergic to milk. Because the milk component only includes milk, there is no way to make a substitution and still meet the meal pattern requirements. What can we do?

- If the child has a disability, you would need to have their doctor complete the *Physician's Statement for Food Substitutions*. This form will document **if the child's allergy is a disability, or not. The physician also would list the food that needs to be substituted for the milk – possibly soy milk. Your institution would purchase the soy milk listed on the medical statement, and the child's meals could be claimed for reimbursement.**
- **If the child's allergy is not considered a disability, the** center may choose to accept a signed statement from a medical authority, parent, or guardian. The statement would need to be kept on file. For the meal to be claimed, any milk substitute provided would need to meet the required nutritional standards.
- If a medical statement is not on file and the child is not receiving milk, the meals cannot be claimed for reimbursement.

Question:

If the child doesn't have a disability, must the facility offer a milk substitute for a child with a medical or special dietary need at the request of a medical authority or a parent?

No, a center has the choice to offer a milk substitute as part of the reimbursable meal to a child with a medical or special dietary need other than a disability.

However, we encourage facilities to try to meet the dietary needs of these children by offering a milk substitute that meets the requirements.

If your facility chooses to do so, you must accept a written request from a medical authority, or a parent or legal guardian.

Question:

A child at our center is a “picky” eater and will not eat some of the meal components we provide. To ensure they receive the **nutrition they need and don’t go** hungry, must we substitute items they will eat? What can we do?

In this case, you don’t need to offer substitute meal components. While all required meal pattern components must be served to the children, the children do not need to eat them to claim a reimbursable meal. However, staff should encourage each child to take and eat the minimum required portions.

There are many **reasons for a child’s resistance to eating certain foods**, such as an intense sensitivity to flavor, food boredom, a desire to make their own decisions, and the fear of trying new foods. For additional tips on this subject, the following resources are available online:

- The USDA’s Nibbles for Health, Issue 13, *Handling a “Choosy” Eater*, at http://www.fns.usda.gov/tn/Resources/Nibbles/Nibbles_Newsletter_13.pdf
- Mealtime Memo for Child Care, January, 2011, at <http://www.nfsmi.org/documentlibraryfiles/PDF/20110106110856.pdf>

Resources

For more information, check out the following resources:

- For copies of the CACFP Meal Patterns and CACFP forms, **visit the ISBE's Nutrition and Wellness Program website** online at:
http://www.isbe.net/nutrition/htmls/forms_cacfp.htm.
- **ISBE's Mealtime Minutes** offers guidance on a variety of topics, including food substitutions:
<http://www.isbe.net/nutrition/htmls/newsletters.htm#meal>
- Also, you may visit the **USDA's CACFP website** online at:
<http://www.fns.usda.gov/cnd/Care/Default.htm>.

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