



# SPECIAL DIETARY NEEDS IN THE NATIONAL SCHOOL LUNCH PROGRAM

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School Nutrition Programs  
Office of School Support Services  
Michigan Department of Education

# Today's Plan

- Laws & Regulations
- Accommodating Children with Special Dietary Needs
  - Disability
  - Other Special Dietary Needs
- Food Allergies
- Best Practices
- Training Exercises
- Resources

# Laws and Regulations

- Federal
  - Section 504 of the Rehabilitation Act of 1973 (Section 504) and the Americans with Disabilities Act of 1990 (ADA)
  - Individuals with Disabilities Education Act (IDEA)
  - U.S. Department of Agriculture's (USDA) nondiscrimination regulation (7 CFR 15b)
  - FNS Instruction 783-2, revision 2, *Meal Substitutions for Medical or Other Special Dietary Reasons*

# ADA Amendments Act

- Americans with Disabilities Act Amendments Act of 2008 (ADAAA), P.L. 110-325
  - Broadened the list of “Major Life Activities” and added a new category called “Major Bodily Functions”
  - Major Life Activities now include Major Bodily Functions:
    - Functions of the immune system
    - Normal cell growth
    - Digestive, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, and reproductive functions

# Defining Disability

- 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 an impairment, or is regarded as having such an impairment.
  - Includes many diseases and conditions, a few of which may be:
    - Cerebral palsy
    - Muscular dystrophy
    - Metabolic diseases (diabetes, phenylketonuria-PKU)
    - Food anaphylaxis (severe food allergy)

## **IDEA**

- Disability
- Special education needed
- IEP completed
- Accommodations made

## **Section 504**

- Disability
- Special education not needed
- 504 plan completed
- Accommodations made

# Individuals with Disabilities Education Act

- A child with a disability under Part B of the Individuals with Disabilities Education Act (IDEA) means a child evaluated as having one or more of the recognized thirteen disability categories and needs special education and related services.
- An Individualized Education Program (IEP) is developed for a child with a disability.
  - When nutrition services are required under a child's IEP, school officials need to ensure the school food service staff are involved early on in the decisions regarding special meals.

# Challenge Activity



- You are concerned about bullying so you are thinking you want to provide children with disabilities a serving area separate from the one where other children are being served. Is it appropriate to do this? Why or why not?

# Guidance for Children with Medical Conditions that are Disabilities

- USDA regulations 7 CFR, Part 15b require substitutions or modifications in school meals for children whose disabilities restrict their diets.
  - With documented disability = must be provided substitutions in foods when need is supported by statement signed by a licensed physician.
    - Child's disability
    - Explanation of why disability restricts the child's diet
    - Major life activity affected by the disability
    - Food(s) to be omitted, and food(s) that must be substituted

MDE has a form available or you may use your own as long as all the above information is included.

# New Form Available at www.michigan.gov/schoolnutrition

Michigan Department of Education  
Office of School Support Services

## REQUEST FOR SPECIAL MEALS/MILK AND/OR ACCOMMODATIONS

The information on this form should be updated as necessary to reflect the current needs of the participant.

1. School/Agency Name:	2. Site Name:	3. Site Telephone:
4. Name of Participant/Student:		5. Participant Age:
6. Name of Parent/Guardian:		7. Parent/Guardian Telephone:
<p><b>8. Check One:</b></p> <p><input type="checkbox"/> Participant has a disability or a medical condition and <i>requires</i> a special meal or accommodation. (Refer to instructions on reverse side of this form.) Schools and agencies participating in federal nutrition programs must comply with requests for special meals and any adaptive equipment. <b>A licensed physician currently managing the disability care of this participant/student must sign this form.</b></p> <p><input type="checkbox"/> Participant <i>does not have a disability</i>, but is requesting a special meal or accommodation due to food intolerance(s) or other medical reasons. Food preferences are not an appropriate use of this form. Schools and agencies participating in federal nutrition programs are not required to make accommodations when there is not a documented disability but may make accommodations for reasonable requests at their discretion. <b>A licensed physician, physician's assistant, registered dietitian, or nurse practitioner must sign this form.</b></p> <p><input type="checkbox"/> Participant does not have a disability, but is requesting a special accommodation for a <b>fluid milk substitute</b> that meets the USDA nutrient standards for non-dairy beverages offered as milk substitutes. Granting the request of a non-dairy milk substitute is at the discretion of the facility.  <b>Product Name:</b> _____ <b>Meets Requirements?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure  <b>Reason for request:</b> _____ Please skip to #15.  <b>A licensed physician, physician's assistant, registered dietitian, nurse practitioner, or parent/guardian may sign this form.</b></p>		
9. Disability or medical condition requiring a special meal or accommodation:		

# Challenge Activity



- If the licensed physician's orders are to provide portion sizes twice the amount served to other children, do you have to provide the additional quantities? Why or why not?

# Challenge Activity



- A student was in a serious accident and had to have his jaw wired shut for one month, which limits his ability to eat solid food. The doctor provides a statement of the disability that requires meals to be substituted with a specially purchased high calorie drink supplement. Are you required to accommodate this disability? Why or why not?

# Guidance for Children with Medical Conditions that are *Not* Disabilities

- A child with a medical condition that is ***not*** a disability must have a medical statement that includes:
  - An identification of the medical or other special dietary condition which restricts the child's diet;
  - The food or foods to be omitted from the child's diet
  - The food or foods that should be substituted
- MDE form can be used for both disability and non-disability conditions.

# Food Allergy

- Eight foods cause 90% of all allergic reactions in the U.S.:
  - Milk
  - Wheat
  - Eggs
  - Soy
  - Peanuts\*
  - Fish\*
  - Tree Nuts\*
  - Shellfish\*



\*cause the majority of severe or anaphylactic reactions

# Related Disorders

- Oral Allergy Syndrome (or Pollen-Food Syndrome)
  - Symptoms are typically limited to the mouth
  - Common pollen-food associations\*
    - Birch: apple, carrot, peach, plum, cherry, pear, almond, hazelnut
    - Grasses: tomato
    - Ragweed: melons, zucchini, cucumber, kiwi, banana
      - \* These are potential associations
- Food Intolerances
  - Do not involve the immune system
  - Lactose Intolerance
- Celiac Disease
  - Chronic digestive disease requiring a lifelong restriction of gluten (found in wheat, rye, barley and perhaps oats)
  - Extremely painful symptoms include bloating and gas, diarrhea, constipation, headaches, itchy skin rash, and pale mouth sores

# Can a Child Outgrow a Food Allergy?

- Peanut and tree nut allergies usually are lifelong
- Cow's milk, egg and soy allergies typically begin in childhood and eventually may be outgrown
  - Fortunately, the majority are allergy-free by age 16
- Fish and shellfish allergies also tend to be lifelong
  - More than 6.5 million adults are allergic to finned fish and shellfish



# Epinephrine (adrenaline)

- Medication that can reverse the severe symptoms of anaphylaxis
- Given as a “shot”
- Available as a self-injector, also known as an epinephrine auto-injector
- Highly effective medication, but it must be administered promptly during anaphylaxis to be most effective
  - Delays can result in death in as little as 30 minutes
  - Individual who was treated with epinephrine should always be taken to the emergency room for further evaluation and treatment

# Reactions at School



- Approximately 20-25% (about 1 in 4) of epinephrine administrations in schools involve someone whose allergy was unknown at the time of the reaction
- More than 15% of school-aged children have had a reaction in school
- Food allergy reactions happen in multiple locations throughout the school and are not limited to the cafeteria

# Causes of Accidental Exposures

- Not reading ingredient labels
- Food trading
- Inaccurate labeling
- Cross-contamination
  - Other foods
  - Improperly cleaned utensils
  - Table surfaces



# Food Labels

- Food Allergen Labeling and Consumer Protection Act
  - Took effect January 1, 2006
  - Requires that the labels of foods containing the major 8 food allergens note the allergen in plain language
  - Allergens must be listed if present in any amount
  - Manufacturers must list the specific nut (e.g., almond, walnut, cashew) or seafood (e.g., tuna, salmon, shrimp, lobster)
- Best practice is to read all labels on all packages carefully every time
- “May Contain” Statements (advisory labeling)
  - “may contain,” “processed in a facility that also processes,” or “made on equipment with” is voluntary and optional

# Challenge Activity



- A child has a life threatening allergy which causes an anaphylactic reaction to peanuts. The slightest contact with peanuts or peanut derivatives, usually peanut oil, could be fatal. To what lengths must the food service go to accommodate the child? Is it sufficient for the school food service to merely avoid obvious foods, such as peanut butter, or must school food service staff research every ingredient and additive in processed foods or regularly post all of the ingredients used in recipes?

# Guidelines for Managing Allergies at School

- Family's Responsibility
  - Notify the school of the allergy
  - Work with the school to develop an accommodations plan including classroom, cafeteria, care programs, bus transportation, and school activities
  - Provide appropriate written medical documentation
  - Provide properly labeled medications and replace upon expiration or use
  - Educate the child on self-management:
    - Safe & unsafe foods
    - Strategies for avoiding exposure
    - Symptoms of a reaction
    - How and when to tell an adult about a potential problem
    - How to read food labels (age appropriate)
  - Review policies/procedures with staff regularly
  - Provide emergency contact information

# Guidelines for Managing Allergies at School

- School's Responsibility
  - Be knowledgeable about and follow federal and state laws, and district policies
  - Review the health records submitted by parents and share appropriately
  - Include food allergic students in school activities
  - Identify a core team to work with parents and student(s), review policies and procedures, etc.
  - Assure staff understands, can recognize a reaction, knows what to do, and works to eliminate the allergen in all school activities
  - Be prepared to handle a reaction through training and simulation
  - Take threats or harassment against an allergic child seriously

# Guidelines for Managing Allergies at School

- Student's Responsibility
  - Do not trade food with others
  - Do not eat anything with unknown ingredients or with known allergen
  - Be proactive in the care and management of their own food allergies and reactions (age appropriate)
  - Notify an adult immediately if they eat something they believe may contain the allergen

# Exceptions to Accommodations

- Religious or ethnic reasons
- When meal service is not normally available to the general student body

# Challenge Activity



- Do you have to provide a modified meal to a child who claims to be a strict vegetarian and wants vegetarian meals because they believe it is healthier than eating meat? Why or why not?

# Best Practices

- **Accommodations**
  - Use food already purchased when possible
  - May require special training
  - May require professional help of a dietitian
  - State agencies may be of assistance
- **Food Service Staff**
  - Keep confidentiality
  - Provide substitutions and modifications
  - Exercise care
  - Document
  - Do not overcharge
  - Be consistent

# Resources

- USDA Regulations
  - National School Lunch Program, 7 CFR 210.10(m)
  - School Breakfast Program, 7 CFR 220.23 (d)
  - Memo SP36-2013
- USDA Guidance: [www.fns.usda.gov/cnd/guidance/special\\_dietary\\_needs.pdf](http://www.fns.usda.gov/cnd/guidance/special_dietary_needs.pdf)
- USDA Food Allergy Resources: [www.fns.usda.gov/food-safety/food-allergy-resources](http://www.fns.usda.gov/food-safety/food-allergy-resources)
- Food Allergy: [www.foodallergy.org](http://www.foodallergy.org)
- Food Allergy & Anaphylaxis toolkit: [www.nasn.org/ToolsResources/FoodAllergyandAnaphylaxis](http://www.nasn.org/ToolsResources/FoodAllergyandAnaphylaxis)
- Food Allergies: What School Employees Need to Know [neahin.org/foodallergies](http://neahin.org/foodallergies)
- NSFMI Resources: [www.nfsmi.org/foodallergy](http://www.nfsmi.org/foodallergy)
- Policy Resources:
  - [www.nsba.org/foodallergyguide.pdf](http://www.nsba.org/foodallergyguide.pdf)
  - [www.allergyready.com](http://www.allergyready.com)
  - [www.allergyhome.org/schools](http://www.allergyhome.org/schools)

## Voluntary Guidelines for Managing Food Allergies In Schools and Early Care and Education Programs



# Ingredient Quiz

- Albumin
- Casein
- Marzipan
- Oysters
- Miso
- Lactose
- Hydrolyzed Protein
- Gluten
- Nutmeat
- Gianduja
- Surimi
- Lecithin
- Caesar dressing
- Cereals
- Baked goods
- Soy Sauce
- Mayonnaise
- Textured vegetable protein
- Margarine
- Pesto

<b>1. Egg</b>	<b>2. Milk</b>	<b>3. Peanut</b>	<b>4. Tree Nut</b>
<b>5. Fish</b>	<b>6. Shellfish</b>	<b>7. Soy</b>	<b>8. Wheat</b>

# Ingredient Quiz - Answers

1. Egg	2. Milk	3. Peanut	4. Tree Nut
Albumin Mayonnaise Sirimi Baked goods Cereals Lecithin Caesar dressing	Casein Whey Lactose Baked goods Cereals Pesto Margarine Caesar dressing	Nutmeat Baked goods Cereals	Nutmeat Baked goods Cereals Pesto Gianduja Marzipan
5. Fish	6. Shellfish	7. Soy	8. Wheat
Surimi Caesar dressing	Oyster Surimi	Miso Soy Sauce Baked goods Cereals Textured vegetable protein Lecithin Edamame	Surimi Gluten Soy sauce Baked goods Cereals Hydrolyzed protein

# Contact Information

Contact MDE School Nutrition Programs at:

Phone: 517-373-3347

or

E-mail:

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