

Flavored Milk

Flavored milk contains all the major nutrients found in unflavored milk. Flavored milk (commercially prepared and plain milk that is flavored with syrup or straws) also contains added sugars and the Dietary Guidelines recommends that all Americans reduce their consumption of added sugars. To better align with the Dietary Guidelines' recommendation and help children develop healthy eating practices early, FNS established new requirements for flavored milk **which becomes effective October 1, 2017:**

- *• *Children 1 through 5 years old:* Meals served to children 1 through 5 years old that contain flavored fluid milk and flavored non-dairy beverages cannot be claimed for reimbursement.
- *• *Children 6 years old and older and adults:* If flavored milk is served to children 6 years old and older or adults it must be fat-free. This is consistent with the National School Lunch and School Breakfast Programs.

CACFP centers and day care homes must comply with these flavored milk requirements no later than October 1, 2017.

II. FLUID MILK SUBSTITUTES

Non-Dairy Beverages

For children or adults who cannot consume fluid milk due to non-disability medical or other special dietary needs, non-dairy beverages may be served in place of fluid milk. This has been in effect since September 15, 2011 and allows the CACFP to better serve the dietary needs of its participants. Non-dairy beverages must be nutritionally equivalent to 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. The nutrient standards for non-dairy beverages are outlined in the CACFP regulations at 7 CFR 226.20(g)(3). As stated above, non-dairy beverages served to children 1 through 5 years old must be unflavored due to the higher sugar content of flavored varieties.

CACFP State agencies have the discretion to identify appropriate substitutions that meet these requirements. FNS encourages CACFP State agencies to coordinate with the State agency operating the National School Lunch Program to ensure that the identified locally available substitutions are consistent among the Child Nutrition Programs.

Parents, guardians, adult participants, or a person on-behalf of the adult participant, must provide a written request for the non-dairy milk substitution that is nutritionally equivalent to milk. A medical statement is not required. For example, if a parent has a child who follows a vegan diet, the parent must submit a written request to the child's center or day care home asking that soy milk be served in place of cow's milk. The written request must identify the medical or other special dietary need that restricts the diet of the child or adult. Non-dairy beverage substitutions are served at the option and the expense of the center or day care home.

- *• A medical statement is required for non-dairy substitutions due to a disability that do not meet the nutritional standards of cow's milk as described above. Requiring non-dairy beverages to be nutritionally equivalent to cow's milk ensures children receive vital nutrients needed for growth and development. A medical statement for non-dairy beverages that are not nutritionally equivalent to cow's milk provides the assurance that the beverage substitute is meeting the nutritional needs of the child or adult participant. The requirements related to milk or food substitutions for a participant who has a disability and who submits a medical statement signed by a licensed physician or a licensed health care professional who is authorized by State law to write medical prescriptions remain unchanged.

* Yogurt (Adults Only) *

Beginning October 1, 2017, yogurt (6 ounces by weight or $\frac{3}{4}$ cup by volume) may meet the fluid milk requirement once per day for adults, only (7 CFR 226.20(a)(1)(iv)). State agencies have the discretion to begin allowing this flexibility prior to October 1, 2017. Please see memorandum SP 42-2016, CACFP 14-2016 *Early Implementation of the Child and Adult Care Food Program Meal Patterns* (http://www.fns.usda.gov/sites/default/files/cacfp/SP42_CACFP14_2016os_0.pdf) for more information.

Allowing yogurt to substitute fluid milk once per day for adults offers greater flexibility to the menu planner and will help encourage consumption of a calcium rich food among adult participants. Yogurt may not be substituted for fluid milk for children of any age. This is because milk provides a wealth of nutrients growing children need, such as vitamin A and D, and comparable quantities of these nutrients are not currently found in commercially available yogurts.

III. COMPLIANCE

In order to ensure compliance with the milk requirements outlined in 7 CFR 226.20(a)(1) and this memorandum, centers and day care homes must document the type of milk served on their menu. This includes listing the fat content (e.g. whole, low-fat or 1%, and fat-free or skim) and if the milk is flavored. It is the responsibility of the State agency or sponsor, as applicable, to further ensure that the correct type of milk is being served when conducting reviews.

IV. SUMMARY OF IMPLEMENTATION DATES:

Implementation Date	Requirement
Currently In Effect	<ul style="list-style-type: none"> Milk served to children two years old and older and adults must be low-fat or fat-free; and Non-dairy beverages that are nutritionally equivalent to cow's milk may be served in place of fluid milk for children or adults with special dietary needs.
* Effective October 1, 2017	<ul style="list-style-type: none"> Milk served to one year old children must be unflavored whole milk; Flavored milk, including flavored non-dairy beverages, cannot be served to children 1 through 5 years old; Flavored milk served to children 6 years old and older and adults must be fat-free; and Yogurt may be served in place of fluid milk for adults once per day, unless the State agency chooses to implement this flexibility prior to October 1, 2017.

Please see DECAL Policy Memorandum, *Implementation of the Updated CACFP Meal Pattern Requirements*, July 21, 2016 for additional information on implementing the updated meal pattern requirements beginning October 1, 2017. The memo can be accessed at: (<http://www.dec.al.ga.gov/documents/attachments/ImplementCACFPMealPatternReqmts.pdf>).

For questions concerning this memorandum, please contact the Sonja Adams, Policy Administrator at 404-651-8193.

NOTE: Some states supplement the IEP with a written statement specifically designed to address a student's nutritional needs. Other states employ a "Health Care Plan" to address the nutritional needs of their students. For ease of reference, the term "IEP" is used to reflect the IEP as well as any written statement designating the required nutrition services.

When nutrition services are required under a child's IEP, school officials need to make sure that school food service staff are involved early on in decisions regarding special meals.

Physician's Statement for Children with Disabilities

USDA regulations 7 CFR Part 15b require substitutions or modifications in school meals for children whose disabilities restrict their diets. A child with a disability must be provided substitutions in foods when that need is supported by a statement signed by a licensed physician. The physician's statement must identify:

- ✓ the child's disability;
- ✓ an explanation of why the disability restricts the child's diet;
- ✓ the major life activity affected by the disability;
- ✓ the food or foods to be omitted from the child's diet, and the food or choice of foods that must be substituted.

In Cases of Food Allergy

Generally, children with food allergies or intolerances do not have a disability as defined under either Section 504 of the Rehabilitation Act or Part B of IDEA, and the school food service may, but is not required to, make food substitutions for them.

However, when in the licensed physician's assessment, food allergies may result in severe, life-threatening (anaphylactic) reactions, the child's condition would meet the definition of "disability," and the substitutions prescribed by the licensed physician must be made.

B. OTHER SPECIAL DIETARY NEEDS

The school food service may make food substitutions, at their discretion, for individual children who do not have a disability, but who are medically certified as having a special medical or dietary need.

Such determinations are only made on a case-by-case basis. This provision covers those children who have food intolerances or allergies but do not have life-threatening reactions (anaphylactic reactions) when exposed to the food(s) to which they have problems.

Medical Statement for Children with Special Dietary Needs

Each special dietary request must be supported by a statement, which explains the food substitution that is requested. It must be signed by a recognized medical authority.

The medical statement must include:

- ✓ 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; and
- ✓ the food or choice of foods to be substituted.

III. SCHOOL ISSUES

The school food service, like the other programs in the school, is responsible for ensuring that its benefits (meals) are made available to all children, including children with disabilities. This raises questions in a number of areas:

- A. What are the responsibilities of the school food service?
- B. Where can additional funds be obtained?
- C. Who can provide more information and technical assistance?

A. SCHOOL FOOD SERVICE RESPONSIBILITIES

- ✓ School food service staff must make food substitutions or modifications for students with disabilities.
- ✓ Substitutions or modifications for children with disabilities must be based on a prescription written by a licensed physician.
- ✓ The school food service is encouraged, but not required, to provide food substitutions or modifications for children without disabilities with medically certified special dietary needs who are unable to eat regular meals as prepared.
- ✓ Substitutions for children without disabilities, with medically certified special dietary needs must be based on a statement by a recognized medical authority.
- ✓ Under no circumstances are school food service staff to revise or change a diet prescription or medical order.
- ✓ For USDA's basic guidelines on meal substitutions and accessibility, see FNS Instruction 783-2, Revision 2, *Meal Substitutions for Medical or Other Special Dietary Reasons*, in **Appendix A**.

- ✓ It is important that all recommendations for accommodations or changes to existing diet orders be documented in writing to protect the school and minimize misunderstandings. Schools should retain copies of special, non-meal pattern diets on file for reviews.
- ✓ The diet orders do not need to be renewed on a yearly basis; however schools are encouraged to ensure that the diet orders reflect the current dietary needs of the child.

Providing Special Meals to Children with Disabilities

The school food service is required to offer special meals, at no additional cost, to children whose disability restricts their diet as defined in USDA's nondiscrimination regulations, 7 CFR Part 15b.

- ✓ If a child's IEP includes a nutrition component, the school should ensure that school food service managers are involved early on in decisions regarding special meals or modifications.
- ✓ The school food service is not required to provide meal services to children with disabilities when the meal service is not normally available to the general student body, unless a meal service is required under the child's IEP.

For example, if a school breakfast program is not offered, the school food service is not required to provide breakfast to the child with a disability, unless this is specified in the child's IEP.

However, if a student is receiving special education and has an IEP, and the IEP indicates that the child needs to be served breakfast at school, then the school is required to provide this meal to the child and may choose to have the school food service handle the responsibility. This is discussed in more detail in *Section V*, under Situation 2.

Menu Modifications for Children with Disabilities

Children with disabilities who require changes to the basic meal (such as special supplements or substitutions) are required to provide documentation with accompanying instructions from a licensed physician.

Generally, participants with food allergies or intolerances, or obese participants are not "handicapped persons", as defined in 7 CFR 15b.3(i), and school food authorities, institutions and sponsors are not required to make substitutions for them. However, when in the physician's assessment food allergies may result in severe, life-threatening reactions (anaphylactic reactions) or the obesity is severe enough to substantially limit a major life activity, the participant then meets the definition of "handicapped person", and the food service personnel must make the substitutions prescribed by the physician.

II PARTICIPANTS WITH OTHER SPECIAL DIETARY NEEDS

School food authorities, institutions or sponsors may, at their discretion, make substitutions for individual participants who are not "handicapped persons", as defined in 7 CFR Part 15b.3(i), but who are unable to consume a food item because of medical or other special dietary needs. Such substitutions may only be made on a case-by-case basis when supported by a statement signed by a recognized medical authority. In these cases, recognized medical authorities may include physicians, physician assistants, nurse practitioners or other professionals specified by the State agency.

For these nonhandicapped participants, the supporting statement shall include:

- A. An identification of the medical or other special dietary need which restricts the participant's diet; and
- B. The food or foods to be omitted from the participant's diet, and the food or choice of foods that may be substituted.

School food authorities, institutions and sponsors are not required to make substitutions for participants whose conditions do not meet the definition of "handicapped person" set forth in 7 CFR 15b.3(i). For example, individuals who are overweight or have elevated blood cholesterol generally do not meet the definition of handicapped person, and thus school food authorities, institutions, and sponsors are not required to make meal substitutions for them. In fact, in most cases, the special dietary needs of nonhandicapped participants may be managed within the normal Program meal service when a well-planned

variety of nutritious foods is available to children, and/or "offer versus serve" is available and implemented.

III REIMBURSEMENT AND AVAILABILITY OF SUBSTITUTIONS

Reimbursement for meals served with an authorized substitute food to handicapped participants or to participants with other special dietary needs shall be claimed at the same reimbursement rate as meals which meet the meal pattern. Furthermore, there shall not be a supplementary charge for the substituted food item(s) to either a handicapped participant or to a participant with other special dietary needs. 7 CFR 15b.26(d)(1) specifies that, in providing food services, recipients of Federal financial assistance "may not discriminate on the basis of handicap" and "shall serve special meals, at no extra charge, to students whose handicap restricts their diet." While any additional costs for substituted foods are considered allowable Program costs, no additional Child Nutrition Program reimbursement is available. Sources of supplemental funding may include special education funds (if the substituted food is specified in the child's individualized education program); the general account of the school food authority, institution or sponsor; or, for school food authorities, the nonprofit school food service account.

IV ACCESSIBILITY

7 CFR 15b.26(d)(2) provides: "Where existing food service facilities are not completely accessible and usable, recipients may provide aides or use other equally effective methods to serve food to handicapped persons." The school food authority, institution or sponsor is responsible for the accessibility of food service sites and for ensuring the provision of aides, where needed. As with additional costs for substituted foods, any additional costs for adaptive feeding equipment or for aides are considered allowable costs. However, no additional Child Nutrition Program reimbursement is available. Sources of supplemental funding may include special education funds (if specified in the child's individualized education program); the general account of the school food authority, institution or sponsor; or, for school food authorities, the nonprofit school food service account.



FNS Diet Order for Special Nutritional Needs Annual Medical Statement for Students

Parent / Guardian (Complete Items 1-9)

(Padre o tutor: Completar la información en los espacios del 1 al 9)

1) Student's Last Name (<i>Apellido del estudiante</i>):	2) First Name (<i>Nombre del estudiante</i>):	3) Date of Birth (<i>Fecha de Nacimiento</i>) MM / DD / YYYY
4) Choose meals eaten at school? <input type="checkbox"/> Breakfast (<i>Desayuno</i>) <input type="checkbox"/> Lunch (<i>Almuerzo</i>) <input type="checkbox"/> Snack (<i>Merienda</i>) <input type="checkbox"/> Supper (<i>Cena</i>)		
5) Mailing Address (<i>Dirección Postal</i>): _____ School (<i>Escuela</i>): _____ Grade (<i>Grado Escolar</i>): _____ School Year (<i>Año Escolar</i>): 20__ to 20__		
6) Is there an IEP in place at the school that includes dietary restrictions? <input type="checkbox"/> YES <input type="checkbox"/> NO		
7) Parent or Guardian's Signature (<i>Firma del Padre o Tutor</i>)	8) Print Parent or Guardian's name (<i>Nombre del Padre o Tutor en letra de molde</i>)	9) Parent's phone number Home (<i>Hogar</i>): _____ Cell (<i>Móvil</i>): _____ Email: _____

Cafeteria Manager (Complete Items 10-17)

(Gerente de la Cafetería: Completar espacios del 10 al 17)

10) School's name (Include EEC name, is applicable):	11) Check site type: <input type="checkbox"/> Prep <input type="checkbox"/> Satellite <input type="checkbox"/> Finishing School	
12) School Nurse:	13) School Nurse's Phone:	14) School's Fax:
15) Cafeteria Manager (CM):	16) CM's email:	17) Cafeteria Kitchen's Phone:

COMPLETED BY THE PHYSICIAN ONLY: (Complete Items 18-29)

(Esta sección solamente para ser llenada por el médico. Completar espacios del 18 al 29)

18) Does the student have a disability, medical condition or severe food allergy warranting a special diet?

The disability or medical condition must limit a major such as breathing or learning, and the food allergy must result in a reaction that is life-threatening and/or severely impacts the student's ability to function in school. Per USDA law 42 USC 12102(2)(B), major bodily functions include those of the immune, digestive, bowel, bladder, cellular, neurological, brain, respiratory, circulatory, endocrine and reproductive systems.

YES If YES, continue to complete the remainder of this form.

NO If NO, STOP HERE. A SPECIAL DIET IS NOT WARRANTED.

19) Disability, Medical Condition, or Severe Food Allergy: Also provide a brief description of the **major life activity** (i.e. breathing, learning) affected by the disability or **severe and/or life-threatening reaction** resulting from the food allergy.

20) Diet Prescription: (For carbohydrate or protein restrictions, include the level allowed for each meal)

21) Food Allergies: Indicate the level of sensitivity to the food(s) the child is allergic to:

Omit all sources of this food **OR** Omit major sources of this food (small amounts are tolerated)

22) Food(s) to be Omitted and Suggested Substitutions:

Food(s) to Omit	Suggested Substitution(s)

23) Texture Modification: If needed, circle **one** appropriate for the student: **CHOPPED** **GROUND** **PUREED**

24) Physician's Signature	25) Physician's Printed Name	26) Medical License Number
27) Phone number	28) Date	29) Name and Phone of Registered Dietitian following student:

OFFICE USE ONLY: Signature _____ Date _____

OCPS Registered Dietitian / DTR

*Information regarding the major allergens (Soy, Wheat, Dairy, Eggs, Fish, and Nuts) are available for review by calling 407-317-3700, ext. 2025182 and nutrient information can be found at www.ocpsmenus.com

Shellfish is not served in OCPS cafeterias (No se sirven mariscos en las cafeterías de OCPS)

Parent/Guardian: It is **REQUIRED** that this form is returned to the cafeteria manager once completed by the physician for verification. The manager will return the form to the District Food and Nutrition Services Office.

Padre o Tutor: Se **REQUIERE** que luego de haber sido completada esta forma por el médico sea entregada al gerente de la cafetería para ser verificada. El gerente devolverá la forma a la Oficina de Servicios Alimenticios (*Food and Nutrition Services*) del Distrito.

Food Service Managers: Return completed form via email fsmenu@ocps.net or fax at 407-317-3951. For more information, please call 407-317-3700. Once approved, copies of the FNS Diet Form will be distributed to FNS District Office, Food Service Manager, and School's Nurse.

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