Accommodating Children with Food Allergies

Family child care providers participating in the USDA Child and Adult Care Food Program (CACFP) must provide reasonable modifications to accommodate children with documented disabilities. This includes food-related disabilities like food allergies and intolerances. USDA details these requirements in their policy memo *Modifications to Accommodate Disabilities in the Child and Adult Care Food Program and Summer Food Service Program*. Care must be taken to ensure children with food allergies are not exposed to any products that will cause an allergic reaction. This fact sheet will discuss how to accommodate children with food allergies in family child care.

What is considered a disability?

After the passage of the *Americans with Disabilities Act (ADA) Amendments Act*, the question of whether a child has a disability has been simplified, most physical and mental impairments will be considered a disability. Family child care providers do not determine whether a particular physical or mental impairment qualifies as a disability. The main concern for providers should be ensuring equal opportunity for a child with a disability to participate in or benefit from the CACFP.

Is a family child care provider required to make meal modifications for children with food allergies?

Yes. Providers are required to make reasonable meal modifications for documented food-related disabilities or other health concerns. A food allergy, whether life-threatening or not, is considered a disability. A meal modification for a child may require meals (including snacks) that do not meet CACFP meal pattern requirements. These meals are reimbursable if there is a medical statement on file from a State licensed healthcare professional that documents the necessary meal modifications. Providers may choose to accommodate food-related disabilities without a signed medical statement if the meal modifications still meet the meal pattern requirements.
Is a family child care provider required to make meal modifications for children with food-related disabilities that are not food allergies?

Yes. Providers are required to make reasonable meal modifications for food-related disabilities (for example, food intolerance, celiac disease, diabetes). Meal modifications (including snacks) that are outside of the CACFP meal pattern require a medical statement from a State licensed healthcare professional to be reimbursable. Additionally, providers may accommodate other medical or food-related disabilities within the meal pattern requirements without a signed medical statement.

Is a family child care provider required to make meal modifications for children with special dietary needs based on cultural or religious preference?

No, but family child care providers are strongly encouraged to meet these special dietary needs based on cultural, religious, or other preferences. These needs can often be met within the CACFP meal pattern (such as substituting another meat/meat alternate for pork). Substitutions of fluid milk do not require a medical statement or disability if the substitution is nutritionally equivalent to milk.

Why is documentation required for children with food allergies?

Documentation is required to receive reimbursement for meals (including snacks) that do not follow the required meal pattern. A medical statement fulfills the required documentation. It prescribes the necessary modifications needed to keep children with food allergies safe and justifies service of foods outside of the meal pattern.
What documentation is needed to make meal modifications for children with food allergies?

If a child’s food allergy meal modifications do not meet CACFP meal pattern requirements, a medical statement from a State licensed healthcare professional is required.

The medical statement must include:

1. A clear description of the child’s physical or mental impairment that explains how the disability restricts the child’s diet (that is, a provider should be able to know the child’s food allergy(s) and what allergic reactions they have);
2. An explanation of what must be done to accommodate the child’s disability; and
3. The food or foods to be omitted and recommended alternatives (to clarify, a substitution or modified meal).

For a sample medical statement form, family child care providers should contact their sponsor or CACFP State agency. Providers are encouraged to make it easy for parents/guardians to request meal modifications. For example, they can include information about meal modifications during enrollment. Please note that the family child care provider should not attempt to evaluate the medical statement to determine whether or not the child has a disability or if the disability is severe enough to require a meal modification.

If a meal modification for a child’s disability can be made within the CACFP meal pattern, USDA, Food and Nutrition Service (FNS) does not require a medical statement. Providers should check with their sponsor or State agency before changing any policies as they may still require a medical statement. It is also best practice to document what is being done to protect children with food allergies.

To what length must family child care providers go to accommodate a child with a food allergy?

Since a child’s documented food allergy is considered a disability, a family child care provider must make a reasonable meal modification. This includes but is not limited to providing the child with an allergen-free meal and a safe environment for the child to eat the meal. The provider must work closely with the parents or guardians to determine how best to meet the child’s needs.
What substitutes can be used for allergens in meals?
When making menu modifications for a child with food allergies, refer to the recommended substitutions in the child’s medical statement. If the statement is unclear or does not provide enough information, contact the household or State licensed healthcare professional (as permitted by the household) for clarification.

When planning meals for a child with food allergies, see what allergen-free options are available in the menu cycle. From there, determine if a reimbursable meal can be made for the child with the existing allergen-free food options. This approach will minimize the need to prepare special recipes or make menu substitutions.

If making substitutions for children with food allergies costs extra money, is there a way to get additional funding?
A provider cannot charge a child with food allergies more than it charges other children. The costs for accommodating a food allergy are an allowable expense. Extra expenses can be reduced by choosing an allergen-free menu from the items already being offered. Additional funds could come from government programs, donations, or non-profits. If asked to provide an expensive food item, have a discussion with the parents or guardians first to talk about alternatives. Providers are not required to make exact substitutions (such as specific brand names) if another reasonable meal modification is available (such as store brand) that effectively accommodates the disability and provides equal opportunity to participate in or benefit from the program.

Should certain foods not be allowed in the family child care home?
The Centers for Disease Control and Prevention and USDA do not encourage banning certain foods. A family child care provider cannot guarantee that food will never enter the home. If a child could have a severe allergic reaction to a certain food, the provider needs to have a discussion with the parents or guardians about what meal modifications can realistically be made. It could be that another provider may be able to better meet the child’s needs.

Always read ingredient lists for allergens. Discourage homemade items and those without food labels as it is difficult to know if the ingredients are safe.

How can a family child care provider accommodate a child with multiple food allergies?
Discuss with the child’s parents or guardians what meal modifications can realistically be made. In some cases, the parent or guardian may choose to provide the child’s food.
References

https://www.cdc.gov/healthyschools/foodallergies/index.htm

Food Allergy Research & Education. (n.d.). *Early childhood education with food allergies.*
https://www.foodallergy.org/resources/early-childhood-education-food-allergies

U.S. Department of Agriculture. (2017, June 22). *Modifications to accommodate disabilities in the Child and Adult Care Food Program and Summer Food Service Program.*

https://www.fda.gov/food/food-labeling-nutrition/food-allergies

This project was funded using U.S. Department of Agriculture grant funds. The USDA is an equal opportunity provider, employer, and lender.

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