Accommodating Special Diets in CACFP Adult Day Care Centers
Accommodating Special Diets in CACFP Adult Day Care Centers

Connecticut State Department of Education


Project Director
Susan S. Fiore, M.S., R.D., Nutrition Education Coordinator

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(3) email: program.intake@usda.gov.

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### Contents

**About This Guide** ............................................................................................................. iv

**CSDE Contact Information** ........................................................................................ v

**Abbreviations and Acronyms** ....................................................................................... vi

1 — **Overview** ................................................................................................................ 1

- Nondiscrimination Legislation ......................................................................................... 1
- Federal legislation ............................................................................................................. 2

Requirements for Meal Modifications ................................................................................. 3
- Adult participants with disabilities .................................................................................. 3
- Adult participants without disabilities ............................................................................ 4
- Table 1. Determining if meal modifications are required in the CACFP ......................... 5

Meal Patterns ....................................................................................................................... 6

Meal Reimbursement and Cost ............................................................................................ 6
- Allowable costs ................................................................................................................ 6

Procedures for Meal Modifications ..................................................................................... 7
- Team approach ................................................................................................................ 7
- Communicating with adult participants and guardians/caregivers .................................. 7
- Communicating with food service personnel .................................................................. 9

Summary of CACFP Responsibilities ................................................................................. 10
- Meal pattern substitutions ............................................................................................ 10
- Accessibility ..................................................................................................................... 11
- Cooperation ..................................................................................................................... 12

Definition of Disability ....................................................................................................... 14
- Section 504 of the Rehabilitation Act and the ADA ....................................................... 14
- USDA’s Nondiscrimination Regulations ......................................................................... 16

Determining What Constitutes a Disability ........................................................................ 17

Medical Statement Requirements ....................................................................................... 19
- CSDE’s medical statement form .................................................................................... 20
- Medical information in Section 504 plan ..................................................................... 21
- Assessing requests ......................................................................................................... 21
- Handling missing information ....................................................................................... 22
- Declining a request ........................................................................................................ 23
- Stopping a request ......................................................................................................... 23
- Storing medical statements .......................................................................................... 24
- Updating medical statements ....................................................................................... 24

---

### Table 1. Determining if meal modifications are required in the CACFP

<table>
<thead>
<tr>
<th>Adult participants</th>
<th>Adult participants with disabilities</th>
<th>Adult participants without disabilities</th>
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<tbody>
<tr>
<td>without disabilities</td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Conflicting information ................................................................. 24
Temporary Disabilities ............................................................... 25
Same Meal .................................................................................. 25
Specific Brands of Food ............................................................... 26
Number of Alternate Meals .......................................................... 27
Different Portion Sizes ................................................................. 28
Texture Modifications ................................................................. 28
Tube Feedings ........................................................................... 29
Administering Feedings ............................................................... 29
Meal Services Outside of CACFP .................................................. 30
   Special foods or nutrition supplements ....................................... 30
Nutrition Information ................................................................. 31
   Nutrition information for procured meals ............................... 32
Carbohydrate Counts .................................................................. 32
Food Allergy .............................................................................. 32
   Food allergy resources .......................................................... 33
Food Intolerance ........................................................................ 35
Gluten Sensitivity ....................................................................... 35
Celiac Disease ........................................................................... 36
   Table 2. Examples of foods to avoid and allow with celiac disease 37
Autism ....................................................................................... 38
   Example of a required meal modification due to autism ............. 38
Food Preference versus Disability ............................................... 39
Milk Substitutes for Disabilities ................................................... 40
   Fat content ............................................................................ 40
   Nondairy milk substitutes ....................................................... 40
Identifying Adult Participants ..................................................... 41
   Unacceptable practices ........................................................ 41
   Acceptable practices ........................................................... 42
Appropriate Eating Areas ............................................................ 43
Banning Foods .......................................................................... 44
Family-provided Meal Components for Medical Reasons ........... 45
   Food safety considerations .................................................... 46
   Table 3. FDA food temperature requirements ........................ 46
   Current DPH Food Protection Regulations ............................ 47
3 — Modifications for Adult Participants without Disabilities ........................................... 49
Milk Substitutes without Disabilities ................................................................................. 50
Required documentation for milk substitutes................................................................. 50
Lactose-reduced and lactose-free milk .............................................................................. 51
Acceptable nondairy beverages for milk substitutes ......................................................... 51
Table 4. USDA’s nutrition standards for fluid milk substitutes ......................................... 52
Identifying acceptable milk substitutes .......................................................................... 52
Variety of milk substitutes ............................................................................................... 53
Availability of milk substitutes ......................................................................................... 53
Other beverages ............................................................................................................... 54
Table 5. Milk substitutes for adult participants without disabilities ............................... 55

4 — Modifications for Other Reasons .............................................................................. 57
   Religious Reasons .......................................................................................................... 57
   Jewish sponsors .............................................................................................................. 57
   Seventh-day Adventist sponsors ................................................................................... 59
Vegetarians ....................................................................................................................... 60
Food Preferences ........................................................................................................... 61
Procured Meals .............................................................................................................. 62

5 — Policies and Procedures ........................................................................................... 63
   Procedural Safeguards .................................................................................................. 63
   CACFP adult day care centers with 15 or more employees ........................................ 63
Policy for Meal Modifications ......................................................................................... 65
   Standard operating procedures (SOPs) ...................................................................... 66
   Strategies for policy development .............................................................................. 67
Staff Training .................................................................................................................... 69

6 — Resources .................................................................................................................... 71
   CSDE Forms and Handouts ......................................................................................... 71
   CSDE Guides ................................................................................................................ 72
   CSDE Resource Lists .................................................................................................. 72
   CSDE CACFP Websites ............................................................................................. 73
   Nondiscrimination Legislation .................................................................................... 75
   Regulations and Policy ............................................................................................... 76

Glossary ............................................................................................................................. 79
About This Guide

The Connecticut State Department of Education’s (CSDE) guide, *Accommodating Special Diets in CACFP Adult Day Care Centers*, contains information and guidance on the requirements for modifying meals and snacks for adult participants with special dietary needs in adult day care centers that participate in the U.S. Department of Agriculture’s (USDA) Child and Adult Care Food Program (CACFP). This guide provides information on the requirements for meal modifications for adult participants whose disability restricts their diet, based on the federal nondiscrimination laws and USDA regulations. It also addresses optional meal modifications for adult participants whose dietary needs do not constitute a disability.

Due to the complicated nature of some issues regarding feeding adult participants with special dietary needs, CACFP adult day care centers are encouraged to contact the CSDE for assistance. For questions regarding meal modifications, please contact the CACFP staff in the CSDE’s Bureau of Health/Nutrition, Family Services and Adult Education. For a list of the CACFP staff, see “CSDE Contact Information” on the next page.

Each section of this guide contains links to other sections when appropriate, and to websites with relevant information and resources. These can be accessed by clicking on the blue text throughout the guide. The mention of trade names, commercial products, and organizations does not imply approval or endorsement by the CSDE or the USDA.

The contents of this guide are subject to change. The CSDE will update this guide as the USDA issues additional policies and guidance. Please check the CSDE’s Special Diets in CACFP Adult Day Care Centers webpage for the most current version. For more information, contact Susan S. Fiore, M.S., R.D., Nutrition Education Coordinator, at susan.fiore@ct.gov or 860-807-2075.

Previous revision date: March 2020
Current revision date: December 2020
CSDE Contact Information

For questions regarding meal modifications in the CACFP, please contact the CACFP staff in the CSDE’s Bureau of Health/Nutrition, Family Services and Adult Education.

<table>
<thead>
<tr>
<th>CACFP Staff</th>
</tr>
</thead>
</table>
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Hartford, CT 06103-1841
# Abbreviations and Acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
</tr>
<tr>
<td>APP</td>
<td>alternate protein product</td>
</tr>
<tr>
<td>APRN</td>
<td>advanced practice registered nurse</td>
</tr>
<tr>
<td>CACFP</td>
<td>Child and Adult Care Food Program</td>
</tr>
<tr>
<td>CDC</td>
<td>Centers for Disease Control and Prevention</td>
</tr>
<tr>
<td>CFR</td>
<td>Code of Federal Regulations</td>
</tr>
<tr>
<td>CNP</td>
<td>Child Nutrition Programs</td>
</tr>
<tr>
<td>CSDE</td>
<td>Connecticut State Department of Education</td>
</tr>
<tr>
<td>DPH</td>
<td>Connecticut State Department of Public Health</td>
</tr>
<tr>
<td>ECP</td>
<td>Emergency Care Plan</td>
</tr>
<tr>
<td>FARE</td>
<td>Food Allergy Research &amp; Education</td>
</tr>
<tr>
<td>FDA</td>
<td>Food and Drug Administration</td>
</tr>
<tr>
<td>FNS</td>
<td>Food and Nutrition Service, U.S. Department of Agriculture</td>
</tr>
<tr>
<td>ICN</td>
<td>Institute of Child Nutrition</td>
</tr>
<tr>
<td>IHCP</td>
<td>Individualized Health Care Plan</td>
</tr>
<tr>
<td>PHC</td>
<td>Public Health Code</td>
</tr>
<tr>
<td>PKU</td>
<td>phenylketonuria</td>
</tr>
<tr>
<td>QFO</td>
<td>qualified food operator</td>
</tr>
<tr>
<td>RD</td>
<td>registered dietitian</td>
</tr>
<tr>
<td>RDN</td>
<td>registered dietitian nutritionist</td>
</tr>
<tr>
<td>SOP</td>
<td>standard operating procedure</td>
</tr>
<tr>
<td>USDA</td>
<td>U.S. Department of Agriculture</td>
</tr>
</tbody>
</table>
1 — Overview

Adult day care centers that participate in the U.S. Department of Agriculture’s (USDA) Child and Adult Care Food Program (CACFP) must comply with the USDA’s nondiscrimination regulations (7 CFR 15b) and CACFP regulations (7 CFR 226) for meal modifications for adult participants whose disability restricts their diet.

The requirements for meal modifications are different for adult participants with and without disabilities. This guide summarizes the federal nondiscrimination laws and the USDA’s regulations and policies that determine these requirements. It includes current USDA guidance on the requirements for meal modifications in the CACFP, as indicated in USDA Memo CACFP 14-2017 and SFSP 10-2017: Modifications to Accommodate Disabilities in CACFP and SFSP.

Due to the complicated nature of some issues regarding feeding adult participants with special dietary needs, CACFP adult day care centers are encouraged to contact the CSDE for assistance. For a list of the CACFP staff, see “CSDE Contact Information” at the beginning of this guide.

Nondiscrimination Legislation

Federal nondiscrimination laws and regulations contain provisions that require CACFP adult day care centers to make reasonable meal modifications on a case-by-case basis for adult participants whose disability restricts their diet. These laws include:

- Section 504 of the Rehabilitation Act of 1973 (Section 504);
- the Americans with Disabilities Act (ADA) of 1990, including changes made by the ADA Amendments Act of 2008; and
- the USDA’s nondiscrimination regulations (7 CFR 15b).

The USDA’s CACFP regulations (7 CFR 226.20(g)) require reasonable meal modifications for
adult participants whose disability restricts their diet, based on a written medical statement signed by a recognized medical authority. Requests for a reasonable meal modification must be related to the adult participant’s disabling condition. For information on what constitutes a disability and the requirements for meal modifications for adult participants with disabilities, see section 2.

Federal legislation

Section 504, the ADA, and the ADA Amendments Act are laws that protect individuals with disabilities from discrimination.

- Section 504 prohibits discrimination on the basis of a disability in programs and activities that receive federal financial assistance, such as the USDA Child Nutrition Programs.

- The ADA guarantees equal opportunity and access for individuals with disabilities in employment, public accommodations, transportation, state and local governments, and telecommunications.

- The ADA Amendments Act prohibits discrimination based on disability in the provision of state and local government services, including services provided by public schools, and prohibits discrimination based on disability by private entities offering public accommodations, including private schools. Title II of the ADA Amendments Act prohibits discrimination based on a disability in the provision of state and local government services, such as public schools. Title III of the ADA Amendments Act prohibits discrimination based on a disability by private entities that provide public accommodations, including adult day care centers. The ADA Amendments Act greatly expands the concept of who is disabled. It requires that a disability must be viewed more broadly to encompass more impairments that limit a major life activity and therefore require an accommodation.

- The USDA’s nondiscrimination regulations (7 CFR 15b.26(d)) prohibit discrimination against participants with disabilities in any USDA program or activity. These regulations require recipients of federal financial assistance (such as CACFP adult day care centers) to serve modified meals and snacks at no extra charge to participants whose disability restricts their diet.

Adult participants whose disability restricts their diet may be protected from discrimination under the provisions of one or more of these laws.
Requirements for Meal Modifications

The USDA requires that all meals and snacks served to adult participants must comply with the CACFP adult meal patterns. However, food substitutions and other reasonable modifications to the CACFP adult meal patterns may be necessary to meet the dietary needs of adult participants who:

- qualify as having a disability under any of the federal nondiscrimination laws; or
- do not qualify as having a disability under any of the federal nondiscrimination laws, but have other special dietary needs.

Examples of possible modifications include food restrictions, food substitutions, texture changes (e.g., pureed, ground, chopped, or thickened liquids), increased or decreased calories, and tube feedings. Modifications to the meal service may also involve ensuring that facilities and personnel are adequate to provide necessary services.

In certain situations, disability accommodations may require additional equipment; separate or designated storage or preparation areas, surfaces, or utensils; and specific staff training and expertise. For example, some adult participants may require the physical assistance of an aide to consume their meal, while other adult participants may need assistance tracking their dietary intake, such as tracking carbohydrate intake for diabetes.

Table 1 helps CACFP adult day care centers determine when meal modifications are required. For an overview of the requirements for meal modifications, review the CSDE’s resource, *Summary of Requirements for Accommodating Special Diets for Adult Participants in the CACFP*.

Adult participants with disabilities

The USDA’s nondiscrimination regulations (7 CFR 15b) and CACFP regulations (7 CFR 226.20(g)) require that CACFP adult day care centers make reasonable modifications on a case-by-case basis for adult participants whose disability restricts their diet, when a recognized medical authority certifies the need. “Case-by-case basis” means that the meal modifications are specific to the individual medical condition and dietary needs of each adult participant. A recognized medical authority is a state-licensed healthcare professional who is authorized to write medical prescriptions under state law. This includes physicians, physician assistants, doctors of osteopathy, and advanced practice registered nurses.

The USDA defines a “reasonable modification” as a change or alteration in policies, practices, and/or procedures to accommodate a disability that ensures adult participants with disabilities have equal opportunity to participate in or benefit from a program. The general guideline in making accommodations is that adult participants with disabilities must be able to participate
in and receive benefits from programs that are available to adult participants without disabilities.

Meal modifications must be related to the disability or limitations caused by the disability, and require a medical statement from a recognized medical authority. All disability considerations must be reviewed on a case-by-case basis. For information on what constitutes a disability and the requirements for meal modifications, see section 2.

**Adult participants without disabilities**

The CACFP regulations (7 CFR 226.20(g)) allow, but do not require, meal modifications for adult participants whose dietary needs do not constitute a disability. Examples of optional meal modifications include requests related to:

- religious or moral convictions;
- general health concerns; and
- personal food preferences, such as adult participants who prefer eating a gluten-free diet or organic foods because they believe it is healthier.

CACFP adult day care centers may choose to make optional accommodations on a case-by-case basis. Modified meals and snacks provided to adult participants without a disability must always comply with the CACFP adult meal patterns.

For adult participants without a disability, CACFP adult day care centers cannot claim reimbursement for meals and snacks that do not meet the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority. The USDA allows deviations from the CACFP adult meal patterns only for adult participants whose disability restricts their diet, when a recognized medical authority certifies the need.

Meals and snacks with optional modifications for adult participants without a disability are eligible for reimbursement, regardless of whether the CACFP adult day care center obtains a medical statement. However, the CSDE recommends obtaining a medical statement to ensure clear communication between the adult participant (or guardian/caregiver) and the CACFP adult day care center about the appropriate meal modifications for the adult participant.

For information on the CACFP adult meal patterns, visit the CSDE’s Meal Patterns for CACFP Adult Day Care Centers webpage and review the CSDE’s guide, Meal Pattern Requirements for CACFP Adult Day Care Centers. For guidance on meal modifications for adult participants without a disability, see section 3.
### Table 1. Determining if meal modifications are required in the CACFP

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
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<tbody>
<tr>
<td>Does the adult participant have a physical or mental impairment that meets the definition of disability under any of the federal nondiscrimination laws (Section 504, the ADA and ADA Amendments Act, and the USDA nondiscrimination regulations (7 CFR 15b))?</td>
<td>The CACFP adult day care center is not required to make the meal modification. See section 3 for guidance on optional meal modifications.¹</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Does the physical or mental impairment restrict the adult participant’s diet?</td>
<td>The CACFP adult day care center is required to make a reasonable meal modification. See section 2 for guidance on required meal modifications.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Did the adult participant or guardian/caregiver provide a medical statement signed by a recognized medical authority that indicates:</td>
<td>The CACFP adult day care center is required to make a reasonable meal modification and must work with the adult participant or guardian/caregiver to obtain a medical statement.² See section 2 for guidance on required meal modifications.</td>
</tr>
<tr>
<td>• how the physical or mental impairment restricts the adult participant’s diet;</td>
<td></td>
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<tr>
<td>• an explanation of what must be done to accommodate the adult participant; and</td>
<td></td>
</tr>
<tr>
<td>• if appropriate, the food or foods to be omitted and recommended alternatives?</td>
<td></td>
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¹ Optional accommodations for adult participants without a disability must always comply with the CACFP adult meal patterns. For more information, visit the CSDE’s [Meal Patterns for CACFP Adult Day Care Centers](#) webpage and review the CSDE’s guide, *Meal Pattern Requirements for CACFP Adult Day Care Centers*.

² When necessary, the CACFP adult day care center should work with the adult participant or guardian/caregiver to obtain the required information. The CACFP adult day care center should not deny or delay a requested modification because the medical statement does not provide complete information. For more information, see “Handling missing information” in section 2.
Meal Patterns

The CACFP adult meal patterns do not apply to modified meals and snacks for adult participants whose disability restricts their diet. However, meals and snacks that consist only of texture modifications, such as chopped, ground, or pureed foods, must comply with the CACFP adult meal patterns.

Optional meal modifications for adult participants whose dietary need does not constitute a disability must always meet the meal patterns. Meals and snacks that do not meet the meal patterns are ineligible for reimbursement.

For information on the CACFP adult meal patterns, visit the CSDE’s Meal Patterns for CACFP Adult Day Care Centers webpage and review the CSDE’s guide, Meal Pattern Requirements for CACFP Adult Day Care Centers.

Meal Reimbursement and Cost

CACFP adult day care centers cannot charge more for modified meals and snacks served to adult participants with or without disabilities. Additional costs for substituted foods are allowable CACFP costs, but the USDA does not provide additional reimbursement. The USDA reimburses all CACFP meals and snacks at the same rate.

Allowable costs

In most instances involving modified meals, the costs of special food and food preparation equipment are allowable CACFP costs, and food service personnel will generally be responsible for providing the modified meal. For example, if the adult participant must have a pureed meal, it is reasonable to budget CACFP funds to purchase a blender or food processor and have the meal prepared by the food service staff.

For special procedures like tube feedings, proper administration generally requires the skills of specially trained personnel such as nurses or trained aides who regularly work with the adult participant. Adult day care centers may charge these costs to the CACFP or other non-CACFP funding sources, as appropriate.
In most cases, CACFP adult day care centers can make meal modifications with little extra expense or involvement. When CACFP funds are insufficient to cover the additional cost, the adult day care center can consider alternative funding sources such as the facility’s non-CACFP funds. Examples include Veterans Administration (VA), Department of Developmental Services (DDS), local Area Agencies on Aging, Connecticut Community Care, Inc. (CCCI), private funding, donations, and client revenues and fees.

**Procedures for Meal Modifications**

The process of providing modified meals and snacks for adult participants with disabilities should be as inclusive as possible. It is essential that the CACFP adult day care center works with the adult participant or guardian/caregiver to ensure the adult participant receives a safe meal, and has an equal opportunity to participate in the CACFP.

**Team approach**

The USDA strongly encourages CACFP adult day care centers to implement a team approach when providing meal modifications for adult participants with disabilities. Developing a team that includes individuals from the sponsoring organization, adult day care center, and the disability coordinator, e.g., Section 504 Coordinator (if available) will help ensure consistent decisions, implementation, and tracking of meal modifications.

The most effective team may also include other individuals with training in this area, such as a nurse and registered dietitian. Any request for modifications related to the meal or meal service should be reviewed by the team and forwarded to the disability coordinator (if available). Any medical information obtained by the team must be kept confidential.

The team will work with the adult participant or guardian/caregiver to review the request and develop a solution as quickly as possible. The USDA encourages the team to develop policies and practices that allow the CACFP adult day care center to quickly and consistently address the most commonly encountered disabilities. For information on developing policies, see section 5.

**Communicating with adult participants and guardians/caregivers**

Ongoing communication between the CACFP adult day care center and adult participants or guardians/caregivers is essential to ensure that meal modifications meet each person’s individual dietary needs. The CSDE encourages CACFP adult day care centers to develop procedures for regularly communicating with adult participants and guardians/caregivers regarding meal modifications. Topics to communicate include:
1 Overview

- the CACFP adult day care center’s policy and standard operating procedures (SOPs) for managing meal modifications for adult participants whose disability restricts their diet (see “Policy for Meal Modifications” in section 5);
- procedures to request meal modifications for adult participants whose disability restricts their diet, including how to complete the medical statement (see “Medical Statement Requirements” in section 2);
- procedures for obtaining nutrition information for CACFP meals and snacks (see “Nutrition Information” in section 2); and
- procedural rights of adult participants and guardians/caregivers for grievance procedures (see “Procedural Safeguards” in section 5).

The policy and SOPs for meal modifications should be posted on the CACFP adult day care center’s website and shared with adult participants and guardians/caregivers through other means. Examples include handbooks, newsletters, e-mails, handouts, menu backs, bulletin boards and displays, meetings, program events, and public service announcements.

The USDA’s nondiscrimination regulations (7 CFR 15b.7) require CACFP adult day care centers to notify adult participants of the process for requesting meal modifications and the individual responsible for coordinating modifications. Methods of initial and continuing notification may include:

- posting of notices;
- placement of notices in relevant publications;
- radio announcements; and
- other visual and auditory media.

As part of this notification, CACFP adult day care centers should explain when the adult participant or guardian/caregiver must submit supporting documentation for the meal modification request. To receive reimbursement for meal modifications that do not follow the CACFP adult meal patterns, the USDA requires that CACFP adult day care centers must have a medical statement signed by a recognized medical authority.

The CSDE strongly encourages CACFP adult day care centers to develop written policies for meal modifications that provide clear guidelines for adult participants, guardians/caregivers, and staff. For more information, see “Procedural Safeguards” and “Policies for Meal Modifications” in section 5.
Communicating with food service personnel

CACFP adult day care centers must establish procedures for identifying adult participants with special dietary needs, and communicating this information to the staff responsible for planning, preparing, and serving CACFP meals and snacks. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) permits the disclosure of personal health information needed for patient care and other important purposes.

CACFP adult day care centers may share copies of medical statements with food service personnel and other appropriate staff, for the purposes of meal modifications for adult participants with special dietary needs. The CSDE recommends that CACFP adult day care centers inform adult participants and guardians/caregivers about this sharing of information.

For some medical conditions, such as food allergies, it may be appropriate for CACFP adult day care centers to maintain information for food service personnel in the form of a list identifying the adult participants and their food restrictions, along with the appropriate substitutions designated by each adult participant’s medical statement. This list would be adequate to document the substitutions in the CACFP adult meal patterns if the CACFP adult day care center has the original signed medical statements on file. The CSDE evaluates documentation for meal modifications as part of the Administrative Review of the CACFP.

CACFP adult day care centers must protect the privacy of adult participants who have a disability, and must maintain the confidentiality of each adult participant’s medical condition. CACFP adult day care centers cannot implement policies or practices that outwardly identify adult participants whose disability requires a meal modification.

If the CACFP adult day care center uses lists to identify adult participants and their food restrictions, these lists must be in locations that are only visible to appropriate staff, such as food service staff and the adult day care staff supervising CACFP meals and snacks. For more information, see “Identifying Adult Participants” in section 2.
Summary of CACFP Responsibilities

CACFP adult day care centers are responsible for providing meals and snacks to all adult participants, including those with disabilities. The following summarizes the responsibilities of CACFP staff regarding meal modifications in adult day care centers.

Meal pattern substitutions

- CACFP adult day care centers must make reasonable meal modifications on a case-by-case basis for adult participants whose disability restricts their diet, based on a medical statement signed by a recognized medical authority. For more information, see section 2.
  - The USDA does not require CACFP adult day care centers to obtain a medical statement for modified meals and snacks that meet the CACFP adult meal patterns. For example, if an adult participant has an allergy to strawberries, the center can substitute grapes. This substitution meets the CACFP adult meal patterns because both food items are from the fruits component. However, the USDA strongly recommends that CACFP adult day care centers keep documentation on file acknowledging the adult participant’s disability.

- CACFP adult day care centers are encouraged, but not required, to provide optional meal modifications on a case-by-case basis for adult participants whose dietary needs do not constitute a disability. Optional meal modifications for adult participants without a disability must comply with the CACFP adult meal patterns. For more information, see section 3.
  - The USDA does not require CACFP adult day care centers to obtain a medical statement for modified meals and snacks that meet the CACFP adult meal patterns.

The CSDE recommends obtaining a medical statement for all modified meals that meet the CACFP adult meal patterns, including required meal modifications for adult participants whose disability restricts their diet and optional meal modifications for adult participants without a disability. This practice ensures clear communication between the adult participant (or guardian/caregiver) and the CACFP adult day care center about the appropriate meal modifications for the adult participant; and serves as a precaution to ensure that adult participants receive safe and appropriate meals, protect the CACFP adult day care center, and minimize misunderstandings.
Overview

- CACFP adult day care centers must have documentation on file for all meal modifications that do not comply with the CACFP adult meal patterns, i.e., modifications for adult participants with disabilities. For more information, see “Storage of medical statements” in section 2.

  - CACFP adult day care centers should not deny or delay a requested modification because the medical statement does not provide complete information or needs clarification. The CACFP adult day care center should work with the adult participant or guardian/caregiver to obtain additional information from the recognized medical authority. For more information, see “Handling missing information” in section 2.

- Under no circumstances should food service personnel revise or change a diet prescription or medical order. CACFP adult day care centers must make a reasonable modification based on the instructions written by the recognized medical authority in the adult participant’s medical statement.

For guidance on determining when CACFP adult day care centers are required to make reasonable meal modifications, see “Requirements for Meal Modifications” and table 1 in this section.

Accessibility

The USDA’s nondiscrimination regulations (7 CFR 15 b.26(d)(2)) specify that where existing food service facilities are not completely accessible and usable, CACFP adult day care centers may provide aides or use other equally effective methods to serve food to adult participants with disabilities. The CACFP adult day care center is responsible for the accessibility of food service sites and for ensuring the provision of aides when needed.

As with additional costs for meal modifications, any additional costs for adaptive feeding equipment or aides are allowable CACFP costs. However, the USDA does not provide additional reimbursement. For more information, see “Allowable costs” in this section.

The USDA’s nondiscrimination regulations also require that CACFP adult day care centers provide food services in the most integrated setting appropriate to the needs of adult participants with disabilities. For more information, see “Appropriate Eating Areas” in section 2.
Cooperation

CACFP food service personnel should work closely with the adult participant or guardian/caregiver, and all other adult day care center, medical, and community personnel who are responsible for the health and well-being of adult participants with disabilities or with other special dietary needs, to ensure that the CACFP adult day care center makes reasonable modifications to allow participation in the meal service. This cooperation is particularly important when accommodating adult participants whose disabilities require significant modifications or personal assistance. For more information, see “Team approach” and “Communicating with adult participants and guardians/caregivers” in this section.
2 — Modifications for Adult Participants with Disabilities

The USDA’s nondiscrimination regulations (7 CFR 15b) and CACFP regulations (7 CFR 226.20(g)) require that CACFP adult day care centers make reasonable modifications on a case-by-case basis for adult participants whose disability restricts their diet, when a recognized medical authority certifies the need. Meal modifications must be related to the disability or limitations caused by the disability, and require a medical statement signed by a recognized medical authority.

- A **reasonable modification** is a change or alteration in policies, practices, and/or procedures to accommodate a disability that ensures adult participants with disabilities have equal opportunity to participate in or benefit from a program. The general guideline in making accommodations is that adult participants with disabilities must be able to participate in and receive benefits from programs that are available to adult participants without disabilities.

- **Case-by-case basis** means that the meal modifications are specific to the individual medical condition and dietary needs of each adult participant.

- The Connecticut State Department of Public Health (DPH) defines a **recognized medical authority** as a state-licensed healthcare professional who is authorized to write medical prescriptions under state law. This includes physicians (MD), physician assistants (PA) and certified physician assistants (PAC), doctors of osteopathy (DO), and advanced practice registered nurses (APRN). These are the only medical professionals who are authorized to sign an adult participant’s medical statement for meal modifications. CACFP adult day care centers cannot accept medical statements signed by any other individuals.

Examples of conditions that might require meal modifications include, but are not limited to:

- autism;
- cancer;
- celiac disease;
- cerebral palsy;
- diabetes;
- food allergies;
- food intolerances, e.g., lactose intolerance and gluten intolerance;
Adult Participants with Disabilities

- heart disease;
- metabolic disorders;
- phenylketonuria (PKU);
- seizure disorder;
- severe obesity; and
- certain temporary disabilities (see “Temporary Disabilities” in this section).

These examples of medical conditions are not all-inclusive and might not require meal modifications for all adult participants. All disability considerations must be reviewed on a case-by-case basis.

Definition of Disability

Each federal law specifies the definition of a person with a disability. The definitions under Section 504 of the Rehabilitation Act, the ADA (including the ADA Amendments Act), and the USDA’s nondiscrimination regulations are summarized below.

Section 504 of the Rehabilitation Act and the ADA

Under Section 504 of the Rehabilitation Act and the ADA, a “person with a disability” means any person who 1) has a physical or mental impairment that substantially limits one or more major life activities, 2) has a record of such an impairment, or 3) is regarded as having such an impairment.

The final rule (28 CFR Parts 35 and 36) for the ADA Amendments Act includes examples of diseases and conditions that may qualify an individual for protection under Section 504 or the ADA, if the disease or condition meets the qualifying criteria for a physical or mental impairment under Section 504 or the ADA. This list is not all-inclusive.

- orthopedic, visual, speech, and hearing impairments;
- cerebral palsy;
- epilepsy;
- muscular dystrophy;
- multiple sclerosis;
- cancer;
- heart disease;
- diabetes;
- intellectual disability;
- emotional illness;
dyslexia and other specific learning disabilities;
• Attention Deficit Hyperactivity Disorder;
• Human Immunodeficiency Virus infection (whether symptomatic or asymptomatic);
• tuberculosis; and
• drug addiction and alcoholism. Note: An individual who is currently engaging in the illegal use of drugs, when an institution acts based on such use, is not a protected individual with a disability under either Section 504 or the ADA. This exclusion does not include individuals currently participating in, or who have successfully completed, a supervised drug rehabilitation program and are no longer engaging in such drug use.

The final rule for the ADA Amendments Act defines “major life activities” as including, but not being limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, writing, communicating, interacting with others, and working.

“Major life activities” also include the operation of a major bodily function including, but not limited to, functions of the immune system, special sense organs and skin, normal cell growth, and digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, and reproductive systems. The operation of a major bodily function includes the operation of an individual organ within a body system.

The ADA Amendments Act specifically prohibits “mitigating measures” from being used to deny an individual with a disability protection under Section 504. Mitigating measures are things like medications, prosthetic devices, assistive devices, or learned behavioral or adaptive neurological modifications that an individual may use to eliminate or reduce the effects of an impairment. For example, if an adult participant’s diabetes can be controlled through insulin and diet, the adult participant may still qualify for protection because the mitigating measure (insulin) cannot be considered in determining qualification. However, mitigating measures may be used to determine the accommodations needed for the adult participant.
**USDA’s Nondiscrimination Regulations**

While the USDA’s nondiscrimination regulations (7 CFR 15b) use the term “handicapped” to refer to people with disabilities, this guide uses the terms “disability” and “disabilities” because they are consistent with the current language used in the definitions under Section 504, and the ADA and ADA Amendments Act.

The USDA’s nondiscrimination regulations provide the following definition for handicapped person:

“Handicapped Person” means any person who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment.

“Physical or mental impairment” means 1) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genitourinary; hemic and lymphatic; skin; and endocrine; or 2) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities. The term “physical or mental impairment” includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; diabetes; mental retardation; emotional illness; and drug addiction and alcoholism.

“Major life activities” means functions such as caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.

“Has a record of such impairment” means has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities.

“Is regarded as having an impairment” means 1) has a physical or mental impairment that does not substantially limit major life activities but that is treated by a recipient as constituting such a limitation; 2) has a physical or mental impairment that substantially limits major life activities only as a result of the attitudes of others towards such impairments; or 3) has none of the impairments defined in “physical and mental impairment” above, but is treated by a recipient as having such an impairment.

The USDA’s nondiscrimination regulations require meal modifications for adult participants whose disability restricts their diet. This applies to all adult participants whose physical and
mental impairments meet the definition of disability under any of the federal laws, including Section 504, the ADA and ADA Amendments Act, and the USDA’s nondiscrimination regulations. Under the ADA Amendments Act, most physical and mental impairments will constitute a disability.

**Determining What Constitutes a Disability**

The determination of whether an adult participant has a disability is based on the federal laws (Section 504, the ADA and ADA Amendments Act, and the USDA’s nondiscrimination regulations) and a recognized medical authority’s diagnosis of the adult participant’s medical condition. The medical statement indicates if the adult participant has a disability (physical or mental impairment) that restricts their diet.

The USDA requires that the medical statement must include:

- information about the adult participant’s physical or mental impairment that is sufficient to allow the CACFP adult day care center to understand how it restricts the adult participant’s diet;
- an explanation of what must be done to accommodate the adult participant’s disability; and
- if appropriate, the food or foods to be omitted and recommended alternatives.

CACFP adult day care centers can determine if an adult participant requires a meal modification by reviewing question 10 in section B of the CSDE’s medical statement form, *Medical Statement for Meal Modifications in CACFP Adult Day Care Centers*. Question 10 asks if the adult participant has a physical or mental impairment that restricts their diet. If the answer is “Yes,” the CACFP adult day care center must make a reasonable meal modification. If the answer is “No,” the CACFP adult day care center may choose, but is not required, to make the meal modification. For more information on medical statements, see “Medical Statement Requirements” in this section.

Under the ADA Amendments Act, most physical and mental impairments will constitute a disability. This includes conditions that impair immune, digestive, neurological, and bowel functions, as well as many others. All disability considerations must be reviewed on a case-by-case basis, i.e., specific to the individual medical condition and dietary needs of each adult participant.
Adult Participants with Disabilities

- Under the ADA Amendments Act, a physical or mental impairment does not need to be life threatening to constitute a disability. It is sufficient that it limits a major life activity. For example, a food intolerance, such as lactose intolerance or gluten intolerance, may be considered to be a disability if it substantially limits digestion, a bodily function that is a major life activity. An adult participant whose digestion is impaired by a food intolerance may be a person with a disability, regardless of whether consuming the food causes the adult participant severe distress.

- If an adult participant’s condition is not listed under the ADA’s categories of diseases and conditions, it cannot be assumed that the condition is not a disability. The ADA's categories of diseases and conditions are not all-inclusive; there are more conditions that meet the definition of disability than are listed in the law.

- The determination of whether a physical or mental impairment constitutes a disability must be made without regard for whether mitigating measures may reduce the impact of the impairment. An impairment may be covered as a disability even if medication or another mitigating measure may reduce the impact on the impairment. For example, the fact that an adult participant may be able to control an allergic reaction by taking medication should not be considered in determining whether the allergy is a disability.

- General health concerns and personal preferences, such as adult participants who prefer eating a gluten-free diet or organic foods because they believe it is healthier, are not disabilities and do not require meal modifications. This also applies to preferences for nondairy milk substitutes (such as rice milk and almond milk) that do not comply with the USDA’s nutrition standards for fluid milk substitutes (see Table 4 in section 3). CACFP adult day care centers can never serve noncompliant milk substitutes to adult participants without disabilities, even with a medical statement signed by a recognized medical authority. For more information, see section 3.

Based on the ADA Amendments Act, CACFP adult day care centers should not engage in weighing medical evidence against the legal standard to determine whether a particular physical or mental impairment is severe enough to qualify as a disability. The primary concern is ensuring equal opportunity for all adult participants to participate in or benefit from the CACFP. For additional guidance, see USDA Memo CACFP 14-2017 and SFSP 10-2017: Modifications to Accommodate Disabilities in CACFP and SFSP.
Medical Statement Requirements

For adult participants whose disability restricts their diet, the USDA requires that the medical statement to request meal modifications must include:

- information about the adult participant’s physical or mental impairment that is sufficient to allow the CACFP adult day care center to understand how it restricts the adult participant’s diet;
- an explanation of what must be done to accommodate the adult participant’s disability; and
- if appropriate, the food or foods to be omitted and recommended alternatives.

In some cases, more information may be required. For example, if the adult participant requires caloric modifications or the substitution of a liquid nutrition formula to accommodate a disability, the recognized medical authority should include this information in the medical statement.

CACFP adult day care centers cannot request medical records or medical charts related to an adult participant’s disability as part of the medical statement. The medical statement addressing the three specific areas above required by the USDA, is the only document required for CACFP adult day care centers to receive reimbursement for modified meals and snacks outside of the USDA’s meal patterns.

Medical statements should provide sufficient information to allow the CACFP adult day care center to provide meals and snacks that are appropriate and safe for each adult participant, and comply with the USDA’s requirements. When necessary, CACFP adult day care centers should work with the adult participant or guardian/caregiver to obtain the required information. However, CACFP adult day care centers should not deny or delay a requested meal modification because the medical statement does not provide sufficient information. For more information, see “Handling missing information” in this section.

The USDA does not require a medical statement for adults with disabilities if the modified meals and snacks meet the CACFP adult meal patterns, such as meals modified only for texture (e.g., chopped, ground, or pureed foods) or meals that only substitute food items from the same component. Examples include substituting a banana for strawberries (fruits component) or chicken for cheese (meat/meat alternates component). However, the CSDE recommends obtaining a medical statement to ensure clear communication between the adult
2 | Adult Participants with Disabilities

participant (or guardian/caregiver) and the CACFP adult day care center. This serves as a precaution to ensure clear communication about safe and appropriate meals and snacks for the adult participant, protect the CACFP adult day care center, and minimize misunderstandings. For more information, see “Medical Statement Requirements” in section 2.

**CSDE’s medical statement form**

The CSDE’s medical statement form and instructions assist CACFP adult day care centers with obtaining the specific medical statement information required by the USDA. These documents are available in English and Spanish in the “Documents/Forms” section of the CSDE’s Special Diets in CACFP Adult Day Care Centers webpage, or the direct links below.

- Medical Statement for Meal Modifications in CACFP Adult Day Care Centers (English):

- Medical Statement for Meal Modifications in CACFP Adult Day Care Centers (Spanish):

- Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Adult Day Care Centers (English):

- Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Adult Day Care Centers (Spanish):

CACFP adult day care centers that use an alternate form must include the three areas required by the USDA.

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To protect the privacy and confidentiality of adult participants, the CACFP adult day care center’s medical statement cannot require a specific diagnosis by name or use the term “disabled” or “disability.”
Medical information in Section 504 plan

The CACFP adult day care center does not need obtain a separate medical statement if the adult participant has a Section 504 plan that includes the same information required by the USDA, or if the required information is obtained during the development or review of the Section 504 plan. Using a team approach can help CACFP adult day care centers to ensure that the Section 504 plan will include the information needed to meet the USDA’s requirements for the medical statement. Clear communication about the requirements for the medical statement can help reduce the burden for guardians/caregivers, food service personnel, and staff working to accommodate adult participants with disabilities in the adult day care center setting.

Assessing requests

CACFP adult day care centers may consider expense and efficiency when choosing the most appropriate approach to accommodate an adult participant's disability. The USDA does not require CACFP adult day care centers to provide the exact substitution or other modification requested in the adult participant’s medical statement, such as a specific brand of food or nutrition supplement, unless it is medically necessary. However, CACFP adult day care centers must work with the adult participant or guardian/caregiver to offer a reasonable modification that effectively accommodates the adult participant’s disability, and provides equal opportunity to participate in or benefit from the CACFP.

For example, an adult participant with an allergy to a specific ingredient found in a menu item might have a medical statement that requests a specific brand-name version as a substitute. Generally, the CACFP adult day care center is not required to provide the identified brand-name item, but must offer a substitute that does not contain the specific allergen that affects the adult participant. For more information, see “Specific Brands of Food” in this section.

When determining what constitutes an appropriate modification, CACFP adult day care centers should consider the mental capacity and physical ability of the adult participant. For example, some adult participants may need greater assistance with selecting and eating their meals, whereas other adult participants may be able to take a greater level of responsibility for some of their dietary decisions.
The USDA does not require CACFP adult day care centers to make modifications that would result in a fundamental alteration to the nature of the CACFP, such as expensive meal modifications that would make continued operation of the CACFP unfeasible. The expense of a modification is measured against the total resources available to the individual CACFP adult day care center.

When CACFP adult day care centers receive a very expensive meal modification request, they should first consider engaging in further dialogue with the adult participant or guardian/caregiver. While CACFP adult day care centers are not required to provide the exact substitution or other modifications requested, they must work with the adult participant or guardian/caregiver to offer a reasonable modification that effectively accommodates the adult participant’s disability, and provides equal opportunity to participate in or benefit from the CACFP. Generally, the emphasis should be working collaboratively to develop an effective approach for the adult participant.

**Handling missing information**

CACFP adult day care centers should not deny or delay a requested meal modification because the medical statement does not provide sufficient information. An example is a medical statement that does not provide recommended alternatives or fully explain the needed modification for the adult participant. If the medical statement is unclear or lacks sufficient detail, the CACFP adult day care center must obtain appropriate clarification so the adult participant receives safe meals and snacks. When necessary, the CACFP adult day care center should work with the adult participant or guardian/caregiver to obtain an amended medical statement.

While waiting to obtain additional information, the CACFP adult day care center must follow (to the greatest extent possible) the portion of the medical statement that is clear and unambiguous. An example is a medical statement that indicates an adult participant experiences respiratory distress when consuming eggs, but does not identify recommended substitutes. In this case, the CACFP adult day care center should not serve eggs to the adult participant, while waiting for additional information regarding the specific substitutions. Clarification of the medical statement should not delay the CACFP adult day care center from providing a reasonable meal modification for the adult participant.

While waiting for the adult participant or guardian/caregiver to submit additional information or a revised medical statement for an adult participant whose dietary needs constitute a disability, the USDA allows CACFP adult day care centers to claim reimbursement for
modified meals and snacks that do not comply with the CACFP adult meal patterns. In this situation, the CACFP adult day care center must document the initial conversation with the adult participant or guardian/caretaker when they first learned of the need for a meal modification. The CACFP adult day care center should follow up with the adult participant or guardian/caretaker if they do not receive the requested medical statement as anticipated, and maintain a record of this contact. The CACFP adult day care center should diligently continue to follow up with the adult participant or guardian/caretaker until a medical statement is obtained or the request is rescinded.

**Declining a request**

If the meal modification request is related to the adult participant’s disabiling condition, it is almost never appropriate for the CACFP adult day care center to decline the meal modification. The exception is a modification request that would fundamentally alter the nature of the CACFP. Denying modifications under the fundamental alteration exception should not result in the denial of access to the CACFP or other benefits or services. Before using this exception, CACFP adult day care centers should contact the CSDE for assistance with any concerns that a requested modification would fundamentally alter the nature of the CACFP. For more information, see “Assessing requests” in this section.

When considering a denial, the CACFP adult day care center must first ensure that the decision is being made according to policy at the sponsor, state, and federal levels. A small center should coordinate these actions with their sponsoring organization, which has procedural safeguards and grievance procedures in place. Any final decision regarding the modification request must be provided to the adult participant or guardian/caretaker in writing. For more information, see “Procedural Safeguards” in section 5.

**Stopping a request**

If an adult participant no longer needs a meal modification, the USDA does not require CACFP adult day care centers to obtain written documentation from a recognized medical authority to rescind the original medical order prior to ending a meal modification. However, the USDA recommends that CACFP adult day care centers maintain documentation when ending an adult participant’s meal modification. For example, before ending the meal modification, the CACFP adult day care center could ask the adult participant or guardian/caretaker to sign a statement or send an e-mail indicating that the meal modification is no longer needed.
Storing medical statements
The CACFP adult day care center should maintain all medical statements in a confidential manner with each adult participant’s medical records, such as physical forms. The CACFP adult day care center may share copies of medical statements with food service personnel for the purposes of making appropriate meal modifications for each adult participant.

Updating medical statements
The USDA regulations do not specify time limits on medical statements or require CACFP adult day care centers to obtain updated medical statements on a regular basis. However, when adult participants or guardians/caregivers provide updated medical information, CACFP adult day care centers must ensure that the medical statements on file reflect current dietary needs. Changes to diet orders must be in writing on a medical statement signed by a recognized medical authority.

Since an adult participant’s dietary needs may change over time, the CSDE strongly recommends that CACFP adult day care centers develop a plan for ensuring that the dietary information on file is current. For example, a CACFP adult day care center’s policy could request an updated medical statement whenever an adult participant:

- has a physical;
- requires a new meal modification; or
- requires a change to an existing meal modification.

CACFP adult day care centers may require updates as necessary to meet their responsibilities. When establishing these requirements, the USDA recommends carefully considering if obtaining additional medical statements could create a burden for adult participants and guardians/caregivers.

Conflicting information
If there is a conflict between the information in the adult participant’s medical statement and information provided either verbally or in writing by the adult participant or guardian/caregiver, the CACFP adult day care center should request a revised medical statement. For example, a medical statement indicates that an adult participant’s disability requires avoiding all foods containing lactose, but the guardian/caregiver tells a staff member that the adult participant can eat yogurt and cheese. In this situation, the CACFP adult day care center should request a request a revised medical statement that clarifies the change in the
meal modification, and is signed by the adult participant’s recognized medical authority. This ensures clear communication between the adult participant (or guardian/caregiver) and the CACFP adult day care center regarding the appropriate meal modification.

Updated information is important because the USDA requires that the CACFP adult day care centers must make a reasonable meal modification based on the instructions in the adult participant’s medical statement. The USDA does not allow food service personnel to diagnose health conditions, perform nutritional assessment, prescribe nutritional requirements, or interpret, revise, or change a diet order from a recognized medical authority.

**Temporary Disabilities**

CACFP adult day care centers must provide meal modifications for adult participants with disabilities, regardless of whether the disability is permanent or temporary. The determination of whether a temporary impairment is a disability must be on a case-by-case basis, taking into consideration both the duration (or expected duration) of the impairment and the extent to which it actually limits a major life activity of the affected individual. If an adult participant’s condition is temporary, but severe and lasts for a significant duration, the CACFP adult day care center must provide a reasonable modification for the duration of the condition.

Examples of a temporary disability include:

- an adult participant who had major oral surgery due to an accident and is unable to consume food for a significant period of time unless the texture is modified; and
- an adult participant who is on medication for several months, and the medication requires avoidance of certain foods;

If the adult participant has a temporary disability, the CACFP adult day care center must make the requested meal modification, even though the adult participant is not “permanently” disabled. However, temporary illness or injury, such as a cold, the flu, or a minor broken bone, are generally not considered to be conditions that require reasonable meal modifications.

**Same Meal**

CACFP adult day care centers are not required to provide a modified meal that is the same as the meal offered on the regular CACFP menu. The CACFP adult day care center is responsible for serving the adult participant a safe meal that accommodates the disability, but is not responsible for serving the same meal. For example, if the regular lunch entree item is whole grain-rich (WGR) pasta with cheese, the CACFP adult day care center is not required to prepare WGR pasta with lactose-free cheese for an adult participant with lactose intolerance. The CACFP adult day care center could meet the requirement for a reasonable modification by serving a different entree that meets the adult participant’s dietary need to avoid lactose, such as a turkey sandwich on WGR bread.
Specific Brands of Food

CACFP adult day care centers may consider expense and efficiency in choosing an appropriate approach to accommodate an adult participant’s disability. CACFP adult day care centers must offer a reasonable modification that effectively accommodates the adult participant’s disability and provides equal opportunity to participate in or benefit from the CACFP.

The USDA does not generally require CACFP adult day care centers to provide the exact substitution or other modification requested in the adult participant’s medical statement, such as a specific brand of food or nutrition supplement, unless it is medically necessary. In most cases, a generic brand is sufficient. For more information, see “Assessing requests” in this section.

For example, an adult participant’s medical statement for a food allergy might request a specific brand of food as a substitute. The CACFP adult day care center is generally not required to provide the requested brand of food, but must offer to provide a substitute that does not contain the specific allergen that affects the adult participant. The meal substitution can include any brand or type of food that meets the adult participant’s specific dietary needs.

In situations where the requested substitute is very expensive or difficult to procure or obtain, it is reasonable for the CACFP adult day care center to follow up with the adult participant or guardian/caregiver to see if a different substitute would be safe and appropriate. For example, if the medical statement lists a specific brand of gluten-free chicken patty, the CACFP adult day care center could check with the adult participant or guardian/caregiver to see if it would be safe and appropriate to provide a different gluten-free brand or a different gluten-free food item. For example, appropriate substitutes might include:

- a different brand of gluten-free chicken patty that meets the adult participant’s specific dietary needs;
- another type of chicken that meets the adult participant’s specific dietary needs, e.g., gluten-free grilled or baked chicken; or
- another type of food that meets the adult participant’s specific dietary needs, e.g., gluten-free hamburger or sliced turkey.

In this instance, the adult participant or guardian/caregiver could affirm that the change meets the adult participant’s dietary needs.
Number of Alternate Meals

The USDA does not require a specific number of alternate meals or snacks to meet the dietary needs of adult participants with disabilities. CACFP adult day care centers are obligated to offer adult participants with disabilities a medically appropriate and reasonable meal modification, based on the medical statement signed by a recognized medical authority. Each request must be assessed on a case-by-case basis to determine the specific and appropriate modification for the individual adult participant, including the number of alternate meals and snacks.

In certain cases, an adult participant may have a restricted diet that requires the same modified meal or snack each day. However, most adult participants will be able to eat a variety of modified meals and snacks over the week. Depending on the adult participant’s individual medical condition and the recognized medical authority’s instructions, a reasonable modification could be offering:

- the same modified meal that meets the adult participant’s specific dietary needs each time the adult participant eats CACFP meals and snacks; or
- a cycle menu of modified meals and snacks that meet the adult participant’s specific dietary needs, based on input from the adult participant or guardian/caregiver, medical professionals, and other appropriate individuals.

Whenever possible, the USDA encourages CACFP adult day care centers to offer adult participants with disabilities a variety of options over the week that is similar to the weekly variety of options offered to adult participants without disabilities.

To improve nutrition and increase variety, the CSDE encourages CACFP adult day care centers to develop a cycle menu of modified meals that meet specific dietary needs, such as a five-day cycle menu for a gluten-free diet or a two-week cycle menu for a specific food allergy. Before using the same cycle menu for multiple adult participants with the same medical condition, CACFP adult day care centers should check with the adult participant or guardian/caregiver to ensure that the modified meals and snacks meet the adult participant’s specific dietary requirements.
Different Portion Sizes

If an adult participant with a disability has a medical statement requiring portion sizes that are different from the minimum quantity requirements in the CACFP adult meal patterns, the CACFP adult day care center must provide the specified portions. Examples include:

- an additional amount of a specific food component in the meal, such as a second serving of the meat/meat alternates component or grains component;
- a smaller amount of food than the minimum portion size required in the CACFP adult meal patterns, such as 1 ounce of the meat/meat alternates component at lunch instead of the required 2 ounces of the meat/meat alternates component;
- requiring that the adult participant receive two of the same meal, such as two lunches.

Note: While the CACFP adult day care center must provide the two meals prescribed by the recognized medical authority, USDA regulations require CACFP adult day care centers to claim only one lunch per adult participant per day.

The adult participant’s medical statement must specify any requirements for different portion sizes.

Texture Modifications

Unless otherwise specified by the recognized medical authority, meals and snacks modified for texture (such as chopped, ground, or pureed) should consist of the same food items and quantities specified in the regular CACFP menus. CACFP adult day care centers should work with appropriate staff (such as a nurse or registered dietitian) to provide food service staff with proper training on pureeing foods and any additional auxiliary aids or services (including necessary equipment) to implement texture modifications.

CACFP adult day care centers cannot make changes or substitutions to the original texture modification request in a medical statement without consulting the adult participant or guardian/caregiver. For example, if the medical statement for an adult participant with a disability requests pureed food, the CACFP adult day care center cannot substitute baby food unless it is appropriate for the adult participant and effectively accommodates the adult participant’s specific dietary needs. In this example, the CACFP adult day care center cannot serve baby food as an alternative to pureeing the regular CACFP menu unless the adult participant or guardian/caregiver agrees, and a revised medical statement confirms that baby food is an appropriate modification to meet the adult participant’s specific dietary needs.
As with all meal modifications, continued communication between the CACFP adult day care center and the adult participant or guardian/caregiver is essential to ensure that adult participants with a disability receive an appropriate texture modification. All texture modifications for adult participants whose disability restricts their diet must be made on a case-by-case basis, i.e., specific to the individual medical condition and dietary needs of each adult participant. An appropriate texture modification for one adult participant may not be appropriate for another adult participant.

Medical statements are not required when texture is the only meal modification. CACFP adult day care centers may apply stricter guidelines and require that a medical statement must be on file concerning the needed texture modifications. The CSDE recommends obtaining a medical statement to ensure clear communication about safe and appropriate meals and snacks for the adult participant, protect the CACFP adult day care center, and minimize misunderstandings.

As with other dietary substitutions, the USDA does not provide additional reimbursement for texture-modified meals and snacks. If an adult participant must have a pureed meal or snack, it is reasonable to use CACFP funds to purchase a blender or food processor and to have the meal prepared by food service personnel.

**Tube Feedings**

For adult participants whose disability requires tube feedings, the USDA recommends using commercial nutrition formulas prescribed by a recognized medical authority and specially designed for tube feedings. Formula prepared on site may be subject to spoilage, and might not always have the correct consistency or nutrition content.

With appropriate documentation on the medical statement, CACFP adult day care centers can use CACFP funds for the cost of tube feeding formulas that are required as meal substitutions. However, food service personnel are not responsible for physically feeding the adult participant. Proper administration of this type of feeding generally requires the skills of specially trained personnel, such as nurses or specially trained aides who regularly work with the adult participant.

**Administering Feedings**

While the CACFP adult day care center is responsible for providing modified meals and snacks for adult participants with disabilities, food service personnel are not responsible for physically feeding adult participants. CACFP adult day care centers should be aware of the potential liability if staff members without sufficient training and direction are performing tasks or activities such as developing or modifying a diet order prescribed by a recognized
medical authority or administering tube feedings. Proper administration of this type of feeding generally requires the skills of specially trained personnel, such as nurses or trained aides who regularly work with the adult participant.

**Meal Services Outside of CACFP**

The general guideline in making accommodations is that adult participants with disabilities must be able to participate in and receive benefits from programs that are available to adult participants without disabilities. CACFP adult day care centers are not required to provide meal services to adult participants with disabilities when the meal service is not normally available for all adult participants. For example, a CACFP adult day care center that does not serve breakfast is not required to provide breakfast for adult participants with disabilities.

**Special foods or nutrition supplements**

If the medical statement documents that special foods or nutrition supplements are medically necessary for an adult participant with a disability, the CACFP adult day care center is generally required to provide them as part of reimbursable meals and snacks. In some cases, other funding sources may be available to cover these costs. For more information, see “Allowable Costs” in section 1. However, CACFP adult day care centers are not required to pay for other servings of special foods or nutrition supplements throughout the day outside of reimbursable CACFP meals and snacks.

The USDA does not require CACFP adult day care centers to make modifications that would result in a fundamental alteration to the nature of the CACFP, such as expensive meal modifications that would make continued operation of the CACFP unfeasible. For more information, see “Assessing requests” in this section.
Nutrition Information

The USDA considers providing nutrition information for foods served in CACFP meals and snacks to be a component of reasonable meal modifications. This enables adult participant or guardian/caregiver and appropriate medical personnel to determine which meals are safe for to eat, and which meals the CACFP adult day care center must modify to meet the adult participant’s specific dietary requirements. For example, if an adult participant has a life-threatening food allergy, the CACFP adult day care center must provide information on the ingredients for foods served in CACFP meals and snacks.

CACFP adult day care centers can provide nutrition information in a variety of ways. Examples include menus, the CACFP adult day care center’s website, and maintaining a binder of nutrition labels in the office that anyone can review.

CACFP adult day care centers are responsible for making nutrition information for CACFP meals and snacks available to adult participants, or guardians/caregivers medical professionals, and others as needed. If a product’s label does not provide adequate nutrition information, the CACFP adult day care center is responsible for obtaining the necessary information to ensure a safe meal for the adult participant. The CACFP adult day care center should contact the product’s supplier or manufacturer to obtain the required nutrition information.

When adult participants or guardians/caregivers require nutrition information for CACFP meals and snacks, the CSDE recommends providing a monthly menu several weeks in advance. This enables the adult participant or guardian/caregiver to determine which CACFP meals and snacks require modifications. It also allows sufficient time for the CACFP adult day care center to gather nutrition information to share with the adult participant or guardian/caregiver, and the staff who purchase, prepare, and serve food to adult participants. As a reminder, a best practice is to develop cycle menus for common special diets, such as gluten free, diabetic, and specific food allergies. For more information, see “Number of Alternate Meals” in this section.
Nutrition information for procured meals

When the CACFP adult day care center obtains meals or snacks from a vendor or through a food service management company, the food service contract should address the requirement for providing nutrition information for CACFP meals and snacks. Vendors must make nutrition information available to the CACFP adult day care center as needed. For more information, see “Procured Meals” in section 4.

Carbohydrate Counts

CACFP adult day care centers are responsible for providing a carbohydrate count to an adult participant with diabetes (or their guardian/caregiver) for each food item served in each daily reimbursable meal and snack. If the daily menu includes multiple meal or snack choices, CACFP adult day care centers are not required to provide carbohydrate counts for each meal or snack option.

The CACFP food service program is responsible for providing information on the initial weights or measures of the planned food for the meal or snack. However, food service personnel are not responsible for weighing or measuring leftover food after the adult participant has consumed the meal, or determining the proper amount of carbohydrates needed or consumed. These tasks are the responsibility of designated medical personnel.

The CSDE encourages CACFP adult day care centers to develop a diabetic cycle menu with carbohydrate counts, such as a one-week or two-week cycle menu. For more information, see “Number of Alternate Meals” in this section. For resources on carbohydrate counting, review the “Diabetes” section of the CSDE’s Resource List for Special Diets in Child Nutrition Programs.

Food Allergy

A food allergy is a hypersensitivity from an abnormal response of the body’s immune system to food or food additives that the body would otherwise consider harmless. While almost any food can trigger an allergic reaction, eight foods cause the majority of reactions. These include milk, eggs, peanuts, tree nuts (e.g., almonds, cashews, pistachios, pecans, walnuts, and hazelnuts), wheat, fish, shellfish (e.g., crab, lobster, and shrimp), and soy. These foods account for 90 percent of food allergic reactions, and are the food sources from which many other ingredients are derived. In addition, sesame is increasingly recognized as a top food allergy.
Under the ADA Amendments Act, a food allergy does not need to be life threatening or cause anaphylaxis to be considered a disability. A non-life-threatening food allergy may be considered to be a disability and require a meal modification if it affects a major bodily function or other major life activity, such as digestion, respiration, immune response, and skin rash. If a recognized medical authority determines that a food allergy is a disability for a particular adult participant, the CACFP adult day care center must make a reasonable meal modification based on the adult participant’s medical statement.

The CACFP adult day care center must provide the adult participant with safe meals and snacks, and a safe environment to consume them. Food service personnel must ensure that modified meals and snacks meet each adult participant’s prescribed guidelines, and are free of all ingredients suspected of causing an allergic reaction. The CACFP adult day care center must use proper storage, preparation, and cleaning techniques to prevent exposure to allergens through cross-contact. Cross-contact occurs when allergen-containing ingredients are transferred to allergy-free food by hands, food-contact surfaces, sponges, cloth towels, or utensils.

Sometimes it is advisable to prepare a separate meal from scratch using ingredients allowed on the special diet, instead of serving a meal using processed foods. The general rule in these situations is to exercise caution at all times. If a food’s ingredients are unknown, CACFP adult day care centers cannot serve the food to adult participants who are at risk for allergic reactions.

CACFP adult day care centers must implement procedures to ensure that meals and snacks prepared for adult participants with food allergies are safe. For adult participants with life-threatening food allergies, this includes the development of a food allergy action plan. This plan addresses prevention and emergency response, and is prepared in consultation with the adult participant or guardian/caregiver, the recognized medical authority, and appropriate staff, such as a nurse or registered dietitian.

Food allergy resources
The resources below provide guidance on managing food allergies. Note: Some of these resources were developed for schools, but also provide applicable guidance for adult day care settings.

- Allergies and Food Sensitivities (USDA):
- Avoiding Cross-Contact (FARE): https://www.foodallergy.org/resources/avoiding-cross-contact


- Food Allergy Fact Sheets (Institute of Child Nutrition): https://theicn.org/icn-resources-a-z/food-allergy-fact-sheets

- Food Allergy Research & Education (FARE): http://www.foodallergy.org/

- How to Read a Food Label (FARE): https://www.foodallergy.org/resources/how-read-food-label


- Tips for Avoiding Your Allergen (FARE): https://www.foodallergy.org/resources/tips-avoiding-your-allergens
• Voluntary Guidelines for Managing Food Allergies in Schools and Early Care and Education Programs (CDC): https://www.cdc.gov/healthyschools/foodallergies/pdf/13_243135_A_Food_Allergy_Web_508.pdf

For more information, see “Food Allergies” under the “Related Resources” section of the CSDE’s Special Diets in CACFP Adult Day Care Centers webpage, and the “Food Allergies” section of the CSDE’s Resource List for Special Diets in Child Nutrition Programs.

Food Intolerance

A food intolerance is an adverse food-induced reaction that does not involve the body’s immune system. Examples lactose intolerance and gluten intolerance. Under the ADA Amendments Act, a food intolerance may be considered to be a disability if it substantially limits digestion, a bodily function that is a major life activity. For example, an adult participant whose digestion is impaired by lactose intolerance may be a person with a disability, regardless of whether consuming milk causes the adult participant severe distress.

If a recognized medical authority determines that a food intolerance is a disability for a particular adult participant, the CACFP adult day care center must make a reasonable meal modification based on the medical statement. CACFP adult day care centers must review each adult participant’s situation on a case-by-case basis, i.e., specific to the individual medical condition and dietary needs of each adult participant.

Gluten Sensitivity

Gluten sensitivity (also called gluten intolerance) is a condition with symptoms similar to those of celiac disease that improve when gluten is eliminated from the diet. Gluten sensitivity is a diagnosis of exclusion that requires ruling out celiac disease and wheat/gluten allergy, followed by a period of dietary gluten exclusion to see if the patient gets better, then a gluten challenge to see how the patient reacts. Individuals diagnosed with gluten sensitivity do not experience the small intestine damage found in celiac disease.

Under the ADA Amendments Act, a food intolerance or sensitivity may be considered to be a disability if it substantially limits digestion, a bodily function that is a major life activity. An adult participant whose digestion is impaired by gluten sensitivity may be a person with a disability, regardless of whether consuming gluten-containing foods causes the adult participant severe distress.
Accommodating Special Diets in CACFP Adult Day Care Centers
 Connecticut State Department of Education
 December 2020

2 Adult Participants with Disabilities

If a recognized medical authority determines that gluten sensitivity is a disability for a particular adult participant, the CACFP adult day care center must make a reasonable meal modification based on the adult participant’s medical statement. CACFP adult day care centers must review each adult participant’s situation on a case-by-case basis, i.e., specific to the individual medical condition and dietary needs of each adult participant.

Celiac Disease

Celiac disease is a genetic autoimmune digestive disease that damages the small intestine and interferes with the absorption of nutrients from foods. Individuals with celiac disease cannot tolerate gluten, a protein found in wheat, rye, and barley. The treatment for celiac disease is to avoid all foods that contain gluten, including wheat, rye, barley, and any foods made with these grains.

Under the ADA Amendments Act, celiac disease qualifies as a disability because it limits the major life activity of digestion. If an adult participant has celiac disease, the CACFP adult day care center must make a reasonable meal modification based on the medical statement signed by a recognized medical authority.

Many processed foods contain gluten unless they are labeled “gluten-free” or are made with corn, rice, soy, or other gluten-free grains. Foods that are likely to contain gluten include:

- breads and bread products, e.g., pizza crust and muffins;
- pasta and couscous;
- grain-based desserts, such as cookies, cakes, and pies;
- breakfast cereals;
- crackers and snacks, e.g., pretzels, snack mix, pita chips, and croutons;
- seasoned snack foods, e.g., potato and tortilla chips;
- processed luncheon meats;
- soups and soup bases; and
- salad dressings and sauces, including soy sauce.

Table 2 shows examples of foods to avoid and allow with celiac disease. Note: This information provides general guidance on foods with and without gluten. When making meal modifications for celiac disease, CACFP adult day care centers must make a reasonable meal modification based on each adult participant’s medical statement signed by a recognized medical authority. CACFP adult day care centers must review each adult participant’s situation.
on a case-by-case basis, i.e., specific to the individual medical condition and dietary needs of each adult participant.

<table>
<thead>
<tr>
<th>Avoid</th>
<th>Allow</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Barley (malt, malt flavoring, and malt vinegar are usually made from barley)</td>
<td>• Beans, seeds, and nuts in their natural, unprocessed form</td>
</tr>
<tr>
<td>• Rye</td>
<td>• Fresh eggs</td>
</tr>
<tr>
<td>• Triticale (a cross between wheat and rye)</td>
<td>• Fresh meats, fish, and poultry (not breaded, batter-coated, or marinated)</td>
</tr>
<tr>
<td>• Wheat</td>
<td>• Fruits and vegetables</td>
</tr>
<tr>
<td>o Dextrin</td>
<td>• Most dairy products</td>
</tr>
<tr>
<td>o Durum flour</td>
<td>• Gluten-free grains</td>
</tr>
<tr>
<td>o Farina</td>
<td>o Amaranth</td>
</tr>
<tr>
<td>o Graham flour</td>
<td>o Arrowroot</td>
</tr>
<tr>
<td>o Kamut</td>
<td>o Buckwheat</td>
</tr>
<tr>
<td>o Modified food starch</td>
<td>o Corn flour and cornmeal</td>
</tr>
<tr>
<td>o Semolina</td>
<td>o Flax</td>
</tr>
<tr>
<td>o Spelt</td>
<td>o Gluten-free flours (rice, soy, corn, potato, bean)</td>
</tr>
<tr>
<td>o Wheat germ</td>
<td>o Hominy (corn)</td>
</tr>
<tr>
<td>o What bran</td>
<td>o Millet</td>
</tr>
<tr>
<td>• Processed foods unless labeled “gluten-free” or made with corn, rice, soy, or other gluten-free grain</td>
<td>o Oats 3</td>
</tr>
<tr>
<td></td>
<td>o Quinoa</td>
</tr>
<tr>
<td></td>
<td>o Rice</td>
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<tr>
<td></td>
<td>o Sorghum</td>
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<tr>
<td></td>
<td>o Soy</td>
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<td></td>
<td>o Tapioca</td>
</tr>
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<td></td>
<td>o Tapioca</td>
</tr>
</tbody>
</table>

1 The CACFP adult day care center must make appropriate meal modifications on a case-by-case basis, according to each adult participant’s medical statement signed by a recognized medical authority.

2 These foods are acceptable if they are not processed or mixed with gluten-containing grains, additives, or preservatives.

3 Oats must be labeled “gluten-free.” Pure oats are a gluten-free food, but most commercially processed oats have been contaminated during the growing, harvesting, or processing stages.
Adult Participants with Disabilities

For more information and resources, review the “Celiac Disease” section of the CSDE’s Resource List for Special Diets in Child Nutrition Programs.

**Autism**

Autism is considered to be a disability under the ADA, Section 504, and USDA’s nondiscrimination regulations. Autistic adult participants may require a reasonable meal modification if their autism substantially limits a major life activity such as eating.

Having an autism diagnosis does not automatically qualify an adult participant for meal modifications. CACFP adult day care centers must review each adult participant’s situation on a case-by-case basis, since one adult participant’s autism diagnosis may not have the same issues as another adult participant’s autism diagnosis.

Adult participants with autism might not have a medical dietary condition. However, autism sometimes results in food behaviors and preferences that require specific meal modifications. For example, some individuals with autism have repetitive and ritualistic behavior patterns and will only eat certain foods. Others may be very sensitive to food textures and will only eat foods with a smooth texture.

Any physical or mental impairment that prevents an adult participant from consuming a meal is considered to be a disability. For some autistic individuals, it is reasonable to view the autism diagnosis as a dietary restriction that is part of their disability. If a recognized medical authority determines that a dietary restriction is part of an adult participant’s autism diagnosis, the CACFP adult day care center must provide a reasonable meal modification based on the adult participant’s medical statement.

**Example of a required meal modification due to autism**

An example of an autism diagnosis that could require a meal modification is an autistic adult participant who has a severe aversion to fruits and vegetables. If a recognized medical authority supports the elimination of the fruits component and vegetables component due to the adult participant’s autism, the CACFP adult day care center must provide meals and snacks that do not contain fruits or vegetables. The USDA allows reimbursement for these modified meals.

It would be beneficial for the CACFP adult day care center to consult with the guardian/caregiver or recognized medical authority to gain a better understanding of the adult
participant’s autism disability relating to food aversions, and to determine if it is necessary to provide additional calories for the adult participant in the absence of fruits and vegetables. The USDA recommends collecting as much information as possible regarding the adult participant’s condition to better meet his or her nutrition needs. This information will also assist the menu planner with making appropriate meal modifications.

**Food Preference versus Disability**

The federal nondiscrimination laws and CACFP regulations require CACFP adult day care centers to make reasonable meal modifications to accommodate adult participants whose disability restricts their diet. CACFP adult day care centers meet this requirement if they provide appropriate meal alternatives to accommodate an adult participant’s dietary restriction resulting from a disability.

CACFP adult day care centers are not required to provide meal modifications based on personal preferences.

For example, a CACFP adult day care center provides a reasonable modification for an adult participant with diabetes by offering a two-week cycle lunch menu that includes carbohydrate counts. The participant does not like any of the choices and refuses the offered meals due to personal food preferences. The CACFP adult day care center is not required to provide additional alternatives based on the adult participant’s personal food preferences because the cycle menu meets the USDA’s requirement for a reasonable meal modification.

As reminder, CACFP adult day care centers are obligated to offer adult participants with disabilities a medically appropriate and reasonable meal modification based on the medical statement signed by a recognized medical authority. However, CACFP adult day care centers are generally not required to provide the specific modification requested in the medical statement, although the specific modification may often be provided. Additionally, CACFP adult day care centers are generally not required to provide a specific brand of food, unless it is medically necessary. For more information, see “Assessing Requests,” “Number of Alternate Meals,” and “Specific Brands of Food” in this section.
Milk Substitutes for Disabilities

When an adult participant has a medically documented disability that requires a milk substitute or a type of milk that does not comply with the CACFP meal pattern requirements, the CACFP adult day care center must provide an appropriate substitute based on the adult participant’s medical statement signed by a recognized medical authority. The medical statement must include:

- information about the adult participant’s physical or mental impairment that is sufficient to allow the CACFP adult day care center to understand how it restricts the adult participant’s diet;
- an explanation of what must be done to accommodate the adult participant’s disability, e.g., the type of milk to be omitted from the adult participant’s diet and the beverage that should be substituted.

If cow’s milk causes any digestive problems, the adult participant’s condition is considered to be a disability under the ADA Amendments Act, and requires a substitute. CACFP adult day care centers must make the substitution if the adult participant has a medically documented disability that requires an alternative to milk, such as juice, water, or a nondairy beverage, e.g., soy milk.

Fat content

If an adult participant has a medically documented disability that requires milk with a fat content that does not comply with the CACFP adult meal patterns, the CACFP adult day care center must provide an appropriate substitute based on the medical statement signed by a recognized medical authority. An example is a medical statement signed by a recognized medical authority that indicates an adult participant’s disability requires whole milk instead of low-fat milk.

Nondairy milk substitutes

If an adult participant has a medically documented disability that requires a milk alternative, such as soy milk, the CACFP adult day care center must provide an appropriate substitute based on the medical statement signed by a recognized medical authority. Nondairy milk substitutes for adult participants with disabilities are not required to comply with the USDA’s nutrition standards for milk substitutes (see Table 4 in section 3).

CACFP adult day care centers are generally not required to provide a specific brand of nondairy milk substitute. In most cases, a generic brand is sufficient. The CACFP adult day care center must work with the adult participant or guardian/caregiver to offer a reasonable modification that effectively accommodates the adult participant’s disability and provides
equal opportunity to participate in or benefit from the CACFP. For more information, see “Specific Brands of Food” in this section.

In situations where the requested milk substitute is very expensive or difficult to obtain, it would be reasonable for the CACFP adult day care center to follow up with the adult participant or guardian/caregiver to see if a different substitute would be safe and appropriate. For example, if the medical statement lists a specific brand of nondairy milk substitute, the CACFP adult day care center could check with the adult participant or guardian/caregiver to see if it would be safe and appropriate to provide a different brand. For more information, see “Assessing Requests” in this section.

**Identifying Adult Participants**

When determining how to identify adult participants during the meal service who require modified meals and snacks due to a disability, the CACFP adult day care center’s policies and practices must protect the privacy of adult participants who have a disability, and must maintain the confidentiality of each adult participant’s medical condition. The HIPAA requires that medical information is kept confidential, including medical information related to an adult participant’s disability.

The general guideline for identifying adult participants whose disability requires a meal modification is to ensure that the CACFP adult day care center’s policies and practices protect children’s privacy and maintain the confidentiality of each adult participant’s medical condition. Federal laws do not allow CACFP adult day care centers to ask adult participants (or guardians/caregivers) to relinquish confidential medical information through outward identification.

**Unacceptable practices**

CACFP adult day care centers cannot implement policies or practices that outwardly identify adult participants whose disability requires a meal modification. This includes practices such as posting lists of adult participants in public areas or asking adult participants (or guardians/caregivers) to consent to a physical designation, such as wearing a lanyard, bracelet, pin, sticker, or similar item. These types of practices:

- impinge upon the privacy and confidentiality of an adult participant’s disability status and medical information;
- are inconsistent with the CACFP adult day care center’s duty to keep adult participants’ disability and medical information confidential; and
provide the potential for stigma for adult participants with disabilities.

If an adult participant, without being asked by the CACFP adult day care center, chooses to self-identify with a physical designation such as a lanyard or similar item (or the adult participant or guardian/caregiver requests a physical designation), this is less of a privacy concern and is acceptable because the adult participant (or guardian/caregiver) is voluntarily engaging in the physical designation. This differs from an unacceptable policy that routinely uses a physical designation and asks adult participants (or guardians/caregivers) to agree to use it. Under the federal laws that require CACFP adult day care centers to maintain adult participants’ confidentiality, the adult participant (or guardian/caregiver) can choose to self-identify, but the CACFP adult day care center cannot outwardly identify the adult participant or ask the adult participant (or guardian/caregiver) to agree to outward identification.

Acceptable practices

The USDA has identified several acceptable practices to identify adult participants with disabilities during the meal service. These practices avoid outward designation and maintain adult participants’ confidentiality by focusing on identifying meals, not adult participants.

- Conduct a daily pre-service meeting with all appropriate staff to review the CACFP menu and identify any menu items that should be avoided for certain dietary restrictions, such as food allergies, lactose intolerance, and gluten intolerance.

- Provide regular updates to staff for each adult participant whose disability requires a meal modification. Post this information in locations that are only visible to appropriate staff, such as food service personnel and the staff who supervise and serve CACFP meals and snacks. For example, a list of adult participants with food allergies could be posted in the kitchen for food service staff to review.

- Use different colored plates or trays to identify meals and snacks that meet specific dietary criteria, e.g., nut-free meals and snacks on blue plates and gluten-free meals and snacks on red plates.

- As appropriate to the CACFP adult day care center’s logistics and the mental capacity of adult participants, use colored tags or labels, placards, or similar signage near each food item to identify each food item’s dietary criteria, such as lactose-free, nut-free, and gluten-free.

- Maintain ongoing communication with adult participants and guardians/caregivers to explain the CACFP adult day care center’s procedures for meal modifications, CACFP
menus, and ensuring allergen-free meals and snacks. For more information, see “Communicating with adult participants and guardians/caregivers” in section 1.

**Appropriate Eating Areas**

Federal civil rights legislation, including Section 504 of the Rehabilitation Act of 1973, and Titles II and III of the ADA, requires that in providing nonacademic services, including meals, institutions must ensure that participants with disabilities participate along with participants without a disability to the maximum extent appropriate.

The USDA’s nondiscrimination regulations (7 CFR 15b.40 (b)) require that meal services must be provided in the most integrated setting appropriate to the needs of adult participants with disabilities. Exclusion of any adult participant with a disability from the dining area is not considered an appropriate or reasonable modification. For example, an adult participant with a disability cannot be excluded from the dining room and required to sit in another room during the meal service.

However, under some circumstances it may be appropriate to require adult participants with certain special needs to sit at a separate table. For example, if an adult participant requires significant assistance from an aide to consume their meals, it may be necessary for the adult participant and the aide to have more space during the meal service.

Additionally, CACFP adult day care centers may determine that a separate, more isolated eating area would be best for adult participants with severe food allergies. The separate eating area may be:

- a designated table in the dining area that is cleaned according to food safety guidelines (to eliminate possible cross-contact of allergens on tables and seating); or
- an area away from the dining room, where adult participants can safely consume their meals.

CACFP adult day care centers cannot segregate adult participants with disabilities from the regular meal service simply as a matter of convenience. In all cases, the decision to feed adult participants with disabilities separately must always be based on what is appropriate to meet their needs.

Prior to developing a special seating arrangement, the CACFP adult day care center should determine, with input from the adult participant (or guardian/caregiver) and recognized
medical authority, if this type of seating arrangement would truly be helpful for the adult participant. If the CACFP adult day care center develops a special seating arrangement, other adult participants should be permitted to join the adult participant, provided they do not bring any foods that would be harmful to the adult participant.

**Banning Foods**

Universal exclusion of specific foods or food groups is not USDA policy, but could be appropriate for an individual CACFP adult day care center depending on local circumstances. However, if a CACFP adult day care center chooses to enact a universal ban, the specific allergen must never be present in the adult day care environment, since adult participants and guardians/caregivers will assume the CACFP adult day care center is a safe place based on the stated ban.

Universal bans of specific foods might not render the adult day care environment safe because there is no method for ensuring that the allergenic food does not inadvertently enter the center’s grounds. Bans can create a false sense of security, which can lead to less responsible approaches to effective management strategies, education, and emergency responses. Banning offending foods detracts from the CACFP adult day care center’s responsibility to plan properly for adult participants with life-threatening food allergies, and to educate all center staff accordingly.

Banning can be problematic in terms of defining the limits. While it may mean the banning of peanuts for some adult participants, it could also mean the banning of all nuts, milk, wheat, or another food item for other adult participants.

CACFP adult day care centers need to consider how to develop a plan that over time will best meet the needs of all adult participants. Options may include:

- establishing allergen-free zones;
- establishing allergen-free tables or areas in the dining room;
- establishing food-free zones, such as common areas; and
- enforcing relevant adult day care center policies, such as prohibiting eating during senior transportation services.

The privacy needs and preferences of individual adult participants should be considered in determining appropriate plans. Not all adult participants will need or want to use an allergen-free zone during the day.
Family-provided Meal Components for Medical Reasons

The CACFP regulations (7 CFR 26.20(g)(ii)) allow adult participants (or their guardians/caregivers) to supply one or more meal pattern components for medical reasons, when the adult participant has a disability that restricts his or her diet, and the family-provided components are based on a medical statement signed by a recognized medical authority. The CACFP adult day care center must provide at least one required meal component, and the adult participant must receive all required CACFP adult meal pattern components. To claim these meals for reimbursement, the CACFP adult day care center must:

- submit a specific written request to the CSDE (see “CSDE Contact Information” at the beginning of this guide);
- detail the adult participant’s medical issue in the request and attach a copy of the medical statement signed by the adult participant’s recognized medical authority;
- indicate the food or beverage items to be provided by the adult participant or the guardian/caregiver; and
- include a statement of assurance that the CACFP adult day care center will serve all other required meal components.

If the request is approved, the CSDE will issue a written response for the acceptable family-provided meal components. The CACFP adult day care center must maintain this approval on file with the adult participant’s other medical records (see “Storage of medical statements” in section 2). The CACFP adult day care center may use the CSDE approval only for the individual adult participant for whom the request has been granted.

CACFP adult day care centers that implement this option should have policies in place to address food safety standards for family-provided components, including:

- clearly labeling all foods with the adult participant’s name, date, and type of food;
- storing foods at an appropriate temperature until they are eaten; and
- prohibiting adult participants from sharing foods with other adult participants.

For information and resources on food safety, visit the CSDE’s Food Safety for Child Nutrition Programs webpage.

When determining whether to allow family-provided meal pattern components for adult participants with a disability, CACFP adult day care centers must consider food safety issues and the liability that might arise if an adult participant gets a foodborne illness.
Food safety considerations

Adult day care centers that are a class 4 food service establishment according to the Connecticut State Department of Public Health’s (DPH) regulations for food service establishments must comply with the Connecticut Public Health Code (PHC) (19-13-B42) and the applicable adopted sections of the FDA food code. State regulations define a “class 4 food establishment” as a retail food establishment that serves a population that is highly susceptible to food-borne illnesses, including, but not limited to, preschool students, hospital patients and nursing home patients or residents, or that conducts specialized food processes, including, but not limited to, smoking, curing or reduced oxygen packaging for the purposes of extending the shelf life of the food.

PHC 19-13-B42 and the FDA food code require that all foods and beverages must originate from an approved inspected and regulated source, and be transported properly at required temperatures. These regulations apply to all foods, regardless of whether they are prepared on site in the adult day care center or brought from home.

Foods sent into the CACFP adult day care center from a private home have not originated from an approved source. CACFP adult day care centers cannot ensure that foods brought from home are safe from microbial contamination or cross-contact with potential food allergens. There are potential liability issues if CACFP adult day care centers serve foods that have not been:

- directly received from a regulated source, such as an approved food service vendor; or
- stored, cooked, and served by trained food service personnel under the direction of a certified food protection manager.

Effective October 1, 2017, hot and cold holding temperatures for foods that require temperature control to prevent bacterial growth must follow the temperature requirements of the FDA Food Code (see table 3).

<table>
<thead>
<tr>
<th>Process</th>
<th>FDA Food Code 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hot holding</td>
<td>135 °F or above</td>
</tr>
<tr>
<td>Cold holding</td>
<td>41 °F or below</td>
</tr>
<tr>
<td>Cooling</td>
<td>135 °F to 70 °F within 2 hours</td>
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<tr>
<td></td>
<td>70 °F to 41 °F within 6 hours</td>
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</table>
Before submitting a request to the CSDE to allow a family-provided meal pattern component for an adult participant with a disability, CACFP adult day care centers should consult with their local health department to determine if meal components brought from home will comply with PHC 19-13-B42 and the FDA food code. As a reminder, CACFP adult day care centers can provide family-provided meal pattern components only when 1) the adult participant has a disability that restricts their diet, based on a written medical statement signed by a recognized medical authority; and 2) the CSDE has approved the CACFP adult day care center’s request for the family-provided meal pattern component for the adult participant.

**Current DPH Food Protection Regulations**

During the 2017 Connecticut legislative session, Senate Bill 901 was passed to adopt the FDA Food Code. The new code will replace the following current food regulations: 19-13-B40, 19-13-B42, 19-13-B48, and 19-13-B49. Public Act 18-168 (approved June 13, 2018) included language that extends the date for adoption of the FDA Food Code to “Not later than January 1, 2019.”

The state regulations to implement the FDA Food Code are still in the regulation review process, and were not approved by January 1, 2019. Therefore, as of January 1, 2019, the current food regulations (19-13-B42, 19-13-B40, 19-13-B48, and 19-13-B49) are still in effect and are enforceable by local certified food inspectors, until the state regulations are approved. Certain sections of the FDA food code are also in effect. For guidance on these requirements, contact the local health department.
3 — Modifications for Adult Participants without Disabilities

CACFP adult day care centers have the option to make meal modifications on a case-by-case basis for adult participants whose dietary needs do not constitute a disability. However, the USDA does not require these accommodations. Examples of optional modifications include requests related to religious or moral convictions, general health concerns, and personal food preferences, such as adult participants who prefer eating a gluten-free diet or organic foods because they believe it is healthier.

Modified meals and snacks served to adult participants without a disability must always comply with the CACFP adult meal patterns. For information on the CACFP adult meal patterns, visit the CSDE’s Meal Patterns for CACFP Adult Day Care Centers webpage and review the CSDE’s guide, Meal Pattern Requirements for CACFP Adult Day Care Centers.

The USDA does not require a medical statement for modified meals and snacks that meet the CACFP adult meal patterns. These meals and snacks are eligible for reimbursement regardless of whether the CACFP adult day care center obtains a medical statement. However, the CSDE recommends obtaining a medical statement for optional modifications to ensure clear communication between the adult participant (or guardian/caregiver) and the CACFP adult day care center about the appropriate modifications. This serves as a precaution to ensure safe and appropriate meals and snacks for the adult participant, protect the CACFP adult day care center, and minimize misunderstandings.

CACFP adult day care centers can use the CSDE’s medical statement form, Medical Statement for Meal Modifications in CACFP Adult Day Care Centers, to collect information for making meal modifications for adult participants without a disability. The form and instructions are available in English and Spanish in the “Documents/Forms” section of the CSDE’s Special Diets in CACFP Adult Day Care Centers webpage.
Milk Substitutes without Disabilities

The CACFP adult meal patterns allow unflavored low-fat (1%) milk, unflavored fat-free milk, and flavored fat-free milk. For adult participants without a disability, reimbursable CACFP meals and snacks cannot include milk that does not comply with these requirements, even with a medical statement signed by a recognized medical authority. For example, meals and snacks cannot include whole milk or reduced-fat milk. The USDA does not allow any types of milk that do not comply with the CACFP adult meal patterns, unless the adult participant has a medically documented disability. For more information, see “Milk Substitutes for Disabilities” in section 2.

CACFP adult day care centers may choose, but are not required, to offer one or more allowable milk substitutes for adult participants whose dietary needs do not constitute a disability. The two types of allowable substitutes include:

- lactose-reduced or lactose-free milk (unflavored low-fat (1%), unflavored fat-free, or flavored fat-free); and
- nondairy beverages that meet the USDA’s nutrition standards for fluid milk substitutes (see Table 4), such as certain brands of soy milk.

The USDA does not provide additional reimbursement for CACFP adult day care centers that choose to provide these substitutions.

Required documentation for milk substitutes

Milk substitutions for adult participants without a disability do not require a medical statement from a recognized medical authority. Adult participants or guardians/caregivers may request a nondairy milk substitute in writing. For example, a vegetarian adult participant can submit a written request asking the CACFP adult day care center to substitute an allowable brand of soy milk for cow’s milk. An allowable brand is one that meets the USDA’s nutrition standards for fluid milk substitutes (see Table 4).

Except for allowable nondairy milk substitutes, any other menu substitutions for vegetarian diets must meet the CACFP adult meal patterns. For more information, see “Vegetarians” in section 4.
The written request must identify the medical or other special dietary need that restricts the adult participant’s diet. Requests for milk substitutes from an adult participant or guardian/caregiver must be maintained on file with the adult participant’s medical records. For more information, see “Storage of medical statements” in section 2.

The USDA’s provision allowing a written request from an adult participant or guardian/caregiver applies only to milk substitutes for adult participants without a disability. It does not apply to any other substitutions of foods or beverages in CACFP meals and snacks for adult participants without a disability.

**Lactose-reduced and lactose-free milk**

Lactose-reduced milk has part of the lactose removed, while lactose-free milk has all of the lactose removed. Like regular milk, these types of milk come in a variety of flavors and fat contents, such as fat-free (skim), low-fat, and whole. The USDA’s *CACFP Best Practices* recommends serving only unflavored milk.

Lactose-reduced and lactose-free milk credit as the milk component in the CACFP adult meal patterns. CACFP adult day care centers can substitute low-fat or fat-free lactose-reduced and lactose-free milk for regular milk, without a written request from an adult participant or guardian/caregiver. The CSDE encourages CACFP adult day care centers to make lactose-reduced or lactose-free milk available to adult participants as needed.

**Acceptable nondairy beverages for milk substitutes**

The USDA’s regulations allow CACFP adult day care centers to offer nondairy milk substitutes that meet the USDA’s nutrition standards for fluid milk substitutes (see Table 4). CACFP adult day care centers may serve flavored nondairy milk substitutes, but the USDA’s *CACFP Best Practices* recommends serving only unflavored nondairy milk substitutes.

The USDA’s nutrition standards require that milk substitutes must be nutritionally equivalent to fluid milk and provide specific levels of calcium, protein, vitamins A and D, magnesium, phosphorus, potassium, riboflavin, and vitamin B₁₂. This ensures that adult participants without a disability who require a substitute for cow’s milk for cultural, ethnic, religious, or medical reasons receive the important nutrients found in milk.

Certain brands of soy milk are the only nondairy milk products that meet the USDA’s nutrition standards for fluid milk substitutes. Almond milk, rice milk, and other nondairy milk products do not currently meet these standards.
3 | Adult Participants without Disabilities

For adult participants without a disability, CACFP adult day care centers cannot substitute nondairy beverages that do not comply with the USDA’s nutrition standards for fluid milk substitutes, even with a medical statement signed by a recognized medical authority. A noncompliant nondairy beverage cannot replace milk unless the adult participant has a medically documented disability that specifically requires it.

<table>
<thead>
<tr>
<th>Table 4. USDA’s nutrition standards for fluid milk substitutes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Minimum nutrients per cup (8 fluid ounces)</strong></td>
</tr>
<tr>
<td>Calcium</td>
</tr>
<tr>
<td>276 milligrams (mg) or 30% Daily Value (DV) ^1</td>
</tr>
<tr>
<td>Protein</td>
</tr>
<tr>
<td>8 grams (g)</td>
</tr>
<tr>
<td>Vitamin A</td>
</tr>
<tr>
<td>500 international units (IU) or 10% DV</td>
</tr>
<tr>
<td>Vitamin D</td>
</tr>
<tr>
<td>100 IU or 25% DV</td>
</tr>
<tr>
<td>Magnesium</td>
</tr>
<tr>
<td>24 mg or 6% DV</td>
</tr>
<tr>
<td>Phosphorus</td>
</tr>
<tr>
<td>222 mg or 20% DV ^1</td>
</tr>
<tr>
<td>Potassium</td>
</tr>
<tr>
<td>349 mg or 10% DV ^1</td>
</tr>
<tr>
<td>Riboflavin</td>
</tr>
<tr>
<td>0.44 mg or 25% DV ^1</td>
</tr>
<tr>
<td>Vitamin B12</td>
</tr>
<tr>
<td>1.1 micrograms (mcg) or 20% DV ^1</td>
</tr>
</tbody>
</table>

^1 The FDA labeling laws require manufacturers to round nutrition values to the nearest 5 percent. The unrounded minimum DV is 27.6% for calcium, 22.2% for phosphorus, 9.97% for potassium, 25.88% for riboflavin, and 18.33% for vitamin B12. Source: How to Determine if a Soy-Based Beverage Meets the Nutrient Requirements to Qualify as an Authorized Milk Substitute in WIC, USDA Food and Nutrition Services (FNS) Office of Research, Nutrition, and Analysis (ORNA), 2006.

**Identifying acceptable milk substitutes**

The Nutrition Facts label does not usually include all of the nutrients required to identify a product’s compliance with the USDA’s nutrition standards for fluid milk substitutes. If the Nutrition Facts label is missing any of the required nutrient information, CACFP adult day care centers must contact the manufacturer to obtain a product specification sheet that documents the product’s compliance with each of the nine nutrients.

CACFP adult day care centers can use the USDA’s protein standard to screen nondairy products and determine if they might meet the USDA’s nutrition standards. The USDA requires that fluid milk substitutes contain 8 grams of protein per cup (8 fluid ounces). If the
product’s Nutrition Facts label lists less than 8 grams of protein per 1-cup serving, the product does not meet the USDA’s nutrition standards.

If the product’s Nutrition Facts label lists at least 8 grams of protein per 1-cup serving, the product might comply with the USDA’s nutrition standards. CACFP adult day care centers must obtain additional information from the manufacturer to determine if the product also meets the standards for calcium, vitamin A, vitamin D, magnesium, phosphorus, potassium, riboflavin, and vitamin B12. CACFP adult day care centers are encouraged to submit this information to the CSDE so that new acceptable products can be identified. For information on currently approved products, review the CSDE’s resource, Allowable Milk Substitutes for adult participants without a disability in the CACFP.

Variety of milk substitutes
CACFP adult day care centers may choose how many types of milk substitutes to offer to adult participants without disabilities. If more than one substitute is offered, the CACFP adult day care center must inform all adult participants and guardians/caregivers of the options, and allow all adult participants or guardians/caregivers to choose one.

All milk substitute options offered by the CACFP adult day care center must be lactose-reduced or lactose-free milk (unflavored low-fat (1%), unflavored fat-free, or flavored fat-free), or a nondairy beverage that meets the USDA’s nutrition standards for fluid milk substitutes. For more information, see “Lactose-reduced and lactose-free milk” and Table 4 in this section.

Availability of milk substitutes
If CACFP adult day care centers choose to make allowable milk substitutes available, they must be available for all adult participants, when requested by an adult participant or guardian/caregiver. If the CACFP adult day care center grants a request for any substitute, then all requests for that substitute must be granted. For example, if the CACFP adult day care center chooses to provide an allowable brand of soy milk at an adult participant’s request, then an allowable brand of soy milk must be available to all adult participants who make any request for fluid milk substitutes. All soy milk products must meet the USDA’s nutrition standards for fluid milk substitutes (see Table 4).
**Other beverages**

For adult participants whose dietary restriction is not related to a disability, CACFP adult day care centers cannot substitute any other beverages for milk, even with a medical statement signed by a recognized medical authority. Examples of beverages that cannot be substituted for milk include:

- juice;
- water;
- nondairy milk substitutes that do not comply with the USDA’s nutrition standards for fluid milk substitutes (see Table 4 in section 3), such as almond milk, rice milk, and cashew milk;
- nutrition supplement beverages, such as Ensure and Boost;
- powdered milk beverages;
- coffee (regular and iced);
- tea (regular and iced); and
- soda (regular and diet).

CACFP meals and snacks for adults without disabilities are not reimbursable if they contain any of these beverages in place of milk.

If the CACFP adult day care center chooses to make milk substitutes available, they must include at least one choice of either lactose-reduced or lactose-free milk (unflavored low-fat (1%), unflavored fat-free, or flavored fat-free), or an allowable nondairy beverage that meets the USDA’s nutrition standards for milk substitutes. These are the only two options allowed for milk substitutes for adult participants without a disability.

Adult day care centers may serve these beverages in addition to the required CACFP meal components, but not as a substitute for the milk component. All meal substitutions for adult participants without a disability must comply with the CACFP adult meal patterns, including milk substitutions.

Table 5 show examples of acceptable and unacceptable milk substitutes for adult participants without disabilities.
### Table 5. Milk substitutes for adult participants without disabilities

<table>
<thead>
<tr>
<th>CACFP adult day care center offers</th>
<th>Allowable?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Whole milk, unflavored or flavored</strong>, (including lactose-free or lactose-reduced milk)</td>
<td>No. Whole milk can never substitute for low-fat or fat-free milk in the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority.</td>
</tr>
<tr>
<td><strong>Reduced-fat (2%) milk, unflavored or flavored</strong>, (including lactose-free or lactose-reduced milk)</td>
<td>No. Reduced-fat can never substitute for low-fat or fat-free milk in the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority.</td>
</tr>
<tr>
<td>Lactose-free or lactose-reduced <strong>low-fat (1%) milk, unflavored</strong></td>
<td>Yes. Unflavored lactose-free and lactose-reduced low-fat milk credit the same as regular unflavored low-fat milk in the CACFP adult meal patterns.</td>
</tr>
<tr>
<td>Lactose-free or lactose-reduced <strong>low-fat (1%) milk, flavored</strong></td>
<td>No. From July 1, 2020, through June 30, 2021, flavored milk must be fat-free.</td>
</tr>
<tr>
<td>Lactose-free or lactose-reduced <strong>fat-free milk, unflavored or flavored</strong></td>
<td>Yes. Unflavored and flavored lactose-free and lactose-reduced fat-free milk credit the same as regular unflavored and flavored fat-free milk in the CACFP adult meal patterns. The USDA’s <em>CACFP Best Practices</em> recommends serving only unflavored milk.</td>
</tr>
<tr>
<td><strong>Nondairy milk substitute (unflavored or flavored)</strong> that does not meet the USDA’s nutrition standards, such as rice or almond milk</td>
<td>No. All nondairy milk substitutes must meet the USDA’s nutrition standards for milk substitutes (see table 4).</td>
</tr>
<tr>
<td><strong>Nondairy milk substitute (unflavored or flavored)</strong> that meets the USDA’s nutrition standards, such as certain brands of soy milk</td>
<td>Yes. Nondairy milk substitutes that meet the USDA’s nutrition standards for milk substitutes (see table 4) may substitute for milk in the CACFP adult meal patterns. The USDA’s <em>CACFP Best Practices</em> recommends serving only unflavored nondairy milk substitutes.</td>
</tr>
<tr>
<td>CACFP adult day care center offers</td>
<td>Allowable?</td>
</tr>
<tr>
<td>--------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Juice</td>
<td>No. Juice can never substitute for milk in the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority.</td>
</tr>
<tr>
<td>Water</td>
<td>No. Water can never substitute for milk in the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority.</td>
</tr>
<tr>
<td>Coffee and tea, regular or iced</td>
<td>No. Coffee and tea can never substitute for milk in the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority.</td>
</tr>
<tr>
<td>Soda, regular or diet</td>
<td>No. Soda can never substitute for milk in the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority.</td>
</tr>
<tr>
<td>Nutrition supplement beverage</td>
<td>No. Nutrition supplement beverages can never substitute for milk in the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority.</td>
</tr>
<tr>
<td>Powdered milk beverage</td>
<td>No. Powdered milk beverages can never substitute for milk in the CACFP adult meal patterns, even with a medical statement signed by a recognized medical authority.</td>
</tr>
</tbody>
</table>

1 All beverages offered as part of reimbursable meals and snacks for adult participants without a disability must comply with the CACFP adult meal patterns.

2 A decision in April 2020 by the U.S. District Court for the District of Maryland cancels the USDA’s 2018 final rule, *Child Nutrition Programs: Flexibilities for Milk, Whole Grains, and Sodium Requirements* (83 FR 63775), and eliminates the previously approved meal pattern flexibility that allowed flavored low-fat milk for ages 6 and older.
4 — Modifications for Other Reasons

This section addresses meal modifications for reasons other than medical needs, including religion and personal food preferences. With the exception of sponsors of Jewish and Seventh-day Adventist institutions, the USDA regulations do not require CACFP adult day care centers to make meal modifications for individual food preferences such as vegetarianism and religious, ethnic, moral, or other reasons. However, the USDA encourages CACFP adult day care centers to provide a variety of foods, which helps to accommodate individual food preferences.

Religious Reasons

The USDA has granted institutions exemptions from the CACFP adult meal patterns when evidence shows that the variations are nutritionally sound and necessary to meet ethnic, religious, economic, or physical needs. USDA exemptions include sponsors of Jewish and Seventh-day Adventist institutions.

The USDA grants religious exemptions for entities (schools, institutions, and sponsors), not individuals. CACFP adult day care centers are not required to make meal modifications for children whose dietary restrictions are based on religion. For more information, see “Food Preferences” in this section.

CACFP adult day care centers may choose to address the needs of individuals by substituting different food items within the same meal pattern component. For example, an adult participant who does not eat pork for religious reasons could be served another meat/meat alternate (such as cheese, yogurt, or peanut butter), and still be provided a reimbursable meal.

Jewish sponsors

The USDA’s FNS Instruction 783-13 (Rev. 3) summarizes the requirements for variations in meal patterns for Jewish schools, institutions, and sponsors. During the religious observance of Passover, Jewish institutions are exempt from the whole grain-rich (WGR) requirement of USDA regulations. Jewish institutions may substitute unenriched matzo for WGR or enriched products only during that period. At all other times of the year, matzo served as the grains
4 | Other Modifications

component must be WGR or enriched. For guidance on WGR and enriched grains, review the CSDE’s resources, *Crediting Whole Grains in the CACFP*, *Crediting Enriched Grains in the CACFP*, and *Whole Grain-rich Criteria for the CACFP*.

The USDA also allows flexibilities for Jewish institutions regarding the meal pattern requirement to offer milk with all meals. Jewish institutions may choose from four alternative options. These options apply only to meals containing meat or poultry, when adult participants do not have the opportunity to refuse milk or meat/poultry through OVS. For information on OVS, review the CSDE’s resource, *Offer versus Serve in CACFP Adult Day Care Centers*.

The four options for Jewish institutions are summarized below.

1. Serve an equal amount of an allowable nondairy milk substitute (for medical or special dietary needs) that is nutritionally equivalent to fluid milk. For information on the USDA’s nutrition standards for milk substitutes, see Table 4 in section 3.

2. Serve an equal amount of full-strength juice in place of milk with lunch or supper. When substituting juice for milk, juice cannot contribute to the meal pattern requirements for fruits or vegetables.

   - CACFP adult day care centers operating five days per week may substitute juice for milk twice per week for lunches and twice per week for suppers, but no more than once each day.

   - CACFP adult day care centers operating seven days per week may make three substitutions per week for lunches and three substitutions per week for suppers, but no more than once each day.

3. Serve milk at an appropriate time before or after the meal service period, in accordance with applicable Jewish Dietary Laws.

4. If applicable, serve the snack’s juice component at breakfast, lunch, or supper, and serve the corresponding meal’s milk component as part of the snack.

Milk must be offered or served in all other meals according to regulations, since Jewish Dietary Laws allow other meat alternates (such as fish, egg, beans and peas, nuts, seeds, and nut/seed butters) to be consumed with milk at the same meal.

Jewish institutions have the discretion to select one of the four options as an alternative to the standard regulatory meal requirements. For review and audit purposes, institutions electing to use these options must inform the CSDE in writing prior to implementation, and must
maintain a record of which option they have chosen. For information on contacting the CSDE, see “CSDE Contact Information” at the beginning of this guide.

**Seventh-day Adventist sponsors**

Seventh-day Adventist institutions, like all other sponsors of the USDA Child Nutrition Programs, may use alternate protein products (APPs) such as vegetable burgers and other meatless entree items to meet the requirements for the meat/meat alternates component. The USDA allows the use of APPs to provide more flexibility in menu planning.

APPs are food ingredients that may be used alone or in combination with meat, poultry, or seafood. They are processed from soy or other vegetable protein sources and may be dehydrated granules, particles, or flakes. Some examples include soy flours, soy concentrates, soy isolates, whey protein concentrate, whey protein isolates, and casein. APPs may be used in the dry (nonhydrated), partially hydrated, or fully hydrated form.

**Appendix A** of the CACFP regulations (7 CFR 226) requires that APPs must comply with specific criteria to credit toward the meat/meat alternates component of the CACFP adult meal patterns. The APP requirements are listed below.

1. The APP is processed so that some portion of the non-protein constituents of the food is removed. (This refers to the manufacturing process for APPs.) APPs must be safe and suitable edible products produced from plant or animal sources.

2. The biological quality of the protein in the APP must be at least 80 percent that of casein (milk protein), determined by performing a Protein Digestibility Corrected Amino Acid Score (PDCAAS).

3. The APP contains at least 18 percent protein by weight when fully hydrated or formulated. (“When hydrated or formulated” refers to a dry APP and the amount of water, fat, oil, colors, flavors or any other substances that have been added.)

Menu planners cannot determine this information by reading the product’s label. The USDA’s Food Safety Inspection Service (FSIS) and the Food and Drug Administration’s (FDA) labeling laws require manufacturers to list product ingredients, but percent labeling is voluntary. For example, the ingredients may list whey protein concentrate and hydrolyzed soy protein, but will not indicate the percentage of these protein ingredients by weight. Consequently, CACFP adult day care centers are responsible for obtaining documentation from the manufacturer for any APPs used to meet the requirements of the meat/meat alternates component.
4 | Other Modifications

The manufacturer can provide documentation of the USDA’s three criteria for APPs in a variety of forms, such as a product specification sheet or a letter signed by a company official attesting the product meets the USDA requirements. Products that have Child Nutrition (CN) labels provide information on how to credit APP foods toward the USDA meal patterns. For more information on crediting APPs, see the CSDE’s guide, Meal Pattern Requirements for CACFP Adult Day Care Centers. For information on CN labels, review the CSDE’s resource, Using Child Nutrition (CN) Labels in the CACFP.

Vegetarians

With the exception of Seventh-day Adventist sponsors, the USDA’s regulations do not require CACFP adult day care centers to make meal modifications for vegetarians. To receive USDA reimbursement, meals and snacks served to vegetarian adult participants must meet the CACFP adult meal patterns.

The CACFP adult day care center must provide all of the required CACFP adult meal pattern components. Meals and snacks containing family-provided components are not reimbursable, unless they are for a adult participant with a disability who has a documented medical need and the CSDE has preapproved them. For more information, see “Family-provided Meal Components” in this section.

CACFP adult day care centers are encouraged to work with adult participants and guardians/caregivers to identify foods that adult participants can eat, while considering cost constraints and program logistics such as food service production capabilities. CACFP adult day care centers can offer a variety of vegetarian choices each week, such as macaroni and cheese, spaghetti with tomato sauce and cheese wedge, cheese pizza, vegetable bean soup, chili, grilled cheese sandwiches, meatless lasagna, bean tacos, and bean burritos.

CACFP adult day care centers may also incorporate a variety of vegetable-based entree products in CACFP menus, such as tofu, tempeh, and meatless entrees (such as hotdogs and vegetable burgers) that meet the USDA’s specified criteria for APPs. For more information, see “Seventh-day Adventist Sponsors” in this section, and the CSDE’s guide, Meal Pattern Requirements for CACFP Adult Day Care Centers.
Food Preferences

The CACFP regulations do not require CACFP adult day care centers to make meal modifications based on the food choices or personal preferences of adult participants or guardians/caregivers. An example is adult participants who prefer eating a gluten-free diet or organic foods because they believe it is healthier. Personal food preferences are not disabilities and do not require meal modifications. For more information, see “Food Preference versus Disability” in section 2.

CACFP adult day care centers may choose, but are not required, to accommodate personal food preferences of adult participants on a case-by-case basis.

Meal modifications for personal food preferences must comply with the CACFP adult meal patterns. For information on the CACFP adult meal patterns, visit the CSDE’s Meal Patterns for CACFP Adult Day Care Centers webpage and review the CSDE’s guide, Meal Pattern Requirements for CACFP Adult Day Care Centers.
4 | Other Modifications

Procured Meals

CACFP adult day care centers must always ensure that any benefits available to the general population are equally available to adult participants with disabilities. Federal regulations specifically prohibit disability discrimination through contractual means, included vended contracts. CACFP adult day care centers must make accommodations for adult participants with disabilities, regardless of whether the CACFP adult day care center:

- operates the food service program;
- contracts with a food service management company (FSMC); or
- purchases vended meals.

When a FSMC operates the food service or the CACFP adult day care center obtains meals and snacks from a vendor, the CACFP adult day care center must address the requirements for meal modifications and providing nutrition information. For more information, see “Nutrition information for procured meals” in section 2.

The CSDE recommends that the contract developed with the FSMC or vendor specifies the CACFP adult day care center's requirements for meal modifications. CACFP adult day care centers that do not have any need for meal modifications at the time a bid is prepared should still include sufficient information in the bid to ensure that the vendor is aware that meal modifications may be required during the term of the contract.

The CACFP adult day care center, not the FSMC or vendor, is ultimately responsible for complying with the USDA’s regulations for CACFP meals and snacks, including meal modifications for adult participants whose disability restricts their diet.

For detailed guidance on contracting with FSMCs, see USDA Memo SP 40-2016, CACFP 12-2016 and SFSP 14-2016: Updated Guidance: Contracting with Food Service Management Companies. For more information, visit the CACFP section of the CSDE’s Food Service Management Company Contracts webpage.
5 — Policies and Procedures

This section provides guidance for CACFP adult day care centers on developing and implementing written policies and procedures for accommodating adult participants with special dietary needs. The USDA’s regulations require CACFP adult day care centers to provide notice of nondiscrimination and accessible services. CACFP adult day care centers with 15 or more employees must designate at least one person to coordinate compliance with disability requirements. The CSDE recommends that CACFP adult day care centers develop a written policy and standard operating procedures (SOPs) for meal modifications in the CACFP. This section summarizes these requirements and recommendations.

Procedural Safeguards

The USDA encourages CACFP adult day care centers to implement procedures for adult participants and guardians/caregivers to request modifications to the meal service for adult participants with disabilities, and resolve grievances. These procedures should include providing a written final decision on each request. CACFP adult day care centers should notify adult participants and guardians/caregivers of the procedure for requesting meal modifications.

At a minimum, CACFP adult day care centers must provide notice of nondiscrimination and accessible services, as outlined in the USDA’s nondiscrimination regulations (7 CFR 15b.7). CACFP adult day care centers should also ensure that personnel understand the procedures for handling requests for meal modifications.

CACFP adult day care centers with 15 or more employees

CACFP adult day care centers that employ 15 or more individuals must designate at least one person to coordinate compliance with disability requirements, as required by the USDA’s nondiscrimination regulations (7 CFR 15b.6). This position is often referred to as the Section 504 Coordinator.

The Section 504 Coordinator, who is responsible for addressing requests for accommodations in the adult day care center, may also be responsible for ensuring compliance with disability requirements related to meals and the meal service. The USDA does not require a separate
Section 504 Coordinator who is only responsible for meal modifications. The USDA recommends that CACFP adult day care centers employing less than 15 individuals have someone on staff who can provide technical assistance regarding meal modifications for adult participants with disabilities.

CACFP adult day care centers that employ 15 or more individuals must also establish grievance procedures that incorporate appropriate due process standards and that provide for the prompt and equitable resolution of complaints, as required by the USDA’s nondiscrimination regulations (7 CFR 15b.6). The USDA’s recommended procedures include:

- allowing participants or their representatives to submit a grievance (complaint with any supporting documentation) for consideration by the CACFP adult day care center;
- providing that a prompt decision by the CACFP adult day care center be rendered to the adult participant or the adult participant’s representative regarding the grievance; and
- ensuring that the decision includes the official USDA nondiscrimination statement, which advises the adult participant how to file a complaint with the USDA’s Food and Nutrition Service (FNS). The CSDE’s document, CACFP Civil Rights Requirements, contains the official USDA nondiscrimination statement.
Policy for Meal Modifications

In addition to the requirements for procedural safeguards, the CDSE strongly encourages CACFP adult day care centers to develop a written policy addressing meal modifications in the CACFP. The policy should be integrated with all applicable adult day care policies, such as the procedural safeguards process and food allergy management plan, and be developed in collaboration with the CACFP adult day care center’s local team (see “Team approach” in section 1). Written policies for meal modifications are important because they:

- provide clear guidelines for adult participants, guardians/caregivers, and staff;
- ensure consistent practices at all sites and among all staff;
- document compliance with federal requirements and best practices;
- educate adult participants and guardians/caregivers regarding the CACFP adult day care center’s practices and procedures;
- provide a basis to evaluate program activities and staff; and
- demonstrate the adult day care center’s commitment to the health and well-being of adult participants.

Policies are an important tool to notify the adult day care community (including administrators, staff, and families) of the availability of meal modifications, and explain applicable requirements and procedures, including:

- the federal requirements to ensure that modified meals and snacks are reimbursable;
- the process for adult participants or guardians/caregivers to request meal modifications;
- how to submit the medical statement and supporting documentation, such as diet plans;
- maintaining appropriate documentation and ensuring that the dietary information on file is current;
- SOPs for meal modifications, e.g., preparing foods for different types of special diets and cleaning procedures to prevent food allergen contamination;
- communication procedures among adult day care center staff, and between the adult day care center and adult participants (or guardians/caregivers), to ensure that everyone is aware of each adult participant’s specific dietary needs and accommodations, based on the adult participant’s medical statement; and
- monitoring to ensure that meal modifications are appropriate and meet each adult participant’s individual dietary needs, based on the adult participant’s medical statement; and
- providing notice to adult participants and guardians/caregivers of nondiscrimination and accessible services, as outlined in the USDA’s nondiscrimination regulations (7 CFR 15b.7), and grievance procedures for CACFP adult day care centers that
employ 15 or more individuals. For more information, see “Procedural Safeguards” in this section.

Since the USDA only requires meal modifications for adult participants whose disability restricts their diet, CACFP adult day care centers will make decisions regarding meal modifications for adult participants without a disability. The written policy should address how the CACFP adult day care center will handle these meal modifications and identify any local procedures.

**Standard operating procedures (SOPs)**

SOPs are detailed explanations of how to implement a policy through specific practices or tasks. They standardize the process and provide step-by-step instructions that enable everyone to perform the task in a consistent manner. This ensures that all staff follows the same procedures each time. Potential SOPs for meal modifications include:

- preparing foods for different types of special diets, such as texture modifications, food allergies, celiac disease, and diabetes;
- reviewing menus, reading food labels, and making nutrition information available to adult participants, guardians/caregivers, recognized medical authorities, and appropriate staff, as needed;
- cleaning to prevent cross-contact of possible allergens;
- handwashing to prevent cross-contact of possible food allergens;
- ensuring that CACFP adult day care center staff, food service personnel, and other appropriate staff regularly communicate and collaborate regarding the planning and implementation of meal modifications for adult participants whose disability restricts their diet;
- obtaining consultation services (such as a registered dietitian), as needed, to plan meals and snacks for adult participants whose disability restricts their diet; and
- training for food service staff and all appropriate CACFP adult day care center staff (including substitutes) involved with planning, preparing, and serving CACFP meals and snacks.
The resources below provide examples of SOPs. These resources were developed for schools, but provide guidance that also applies to adult day care settings.

- Food Safety SOPs (Institute of Child Nutrition):
  https://theicn.org/icn-resources-a-z/standard-operating-procedures/

- Preparation of Foods with Potential to Cause Allergic Reaction: Standard Operating Procedure (Wisconsin Department of Public Instruction):
  https://dpi.wi.gov/sites/default/files/imce/school-nutrition/doc/sop_allg.doc

- Standard Operating Procedure (SOP): Serving Safe Food to Students with Food Allergies (ICN):

- Standard Operating Procedure: Handling Students Identified with Severe Food Allergy or Anaphylaxis (South Windsor Public Schools):
  http://www.southwindsorschools.org/UserFiles/Servers/Server_239916/File/Departments/Food%20Services%20Chartwells/School%20Lunch%20Policies%20Procedures%20and%20Forms/SOP_on_Handling_students_Identified_with_Severe_Food_Allergy_or_Anaphylaxis_8-2013.pdf

- Standard Operating Procedures (SOPs): Washing Hands (ICN):

- “Standard Operating Procedures” in the CSDE’s Food Safety Resource List:

**Strategies for policy development**

The strategies below assist CACFP adult day care centers with developing a policy for meal modifications. Priority areas include assessing current operations, developing SOPs, providing professional development, ensuring consistent communication, and monitoring implementation.

- Identify the staff and resources needed for planning, developing, implementing, and evaluating the policy and SOPs for modifications to CACFP meals and snacks.

- Conduct a self-assessment of the CACFP adult day care center’s current policies, practices, and procedures for modifications to CACFP meals and snacks. For more information, see the CSDE’s document, *Self-assessment of Adult Day Care Center Practices for Special Diets in the CACFP.*
- Identify the essential practices to implement in the food service program and the adult day care environment, and determine where SOPs are necessary.

- Develop an action plan to address the practices needing attention, as identified by the CACFP adult day care center’s completed self-assessment. When developing action plans for policy and SOPs, start with the most important practices. The CSDE’s action planning form and sample action plans can assist with this process.
  
  
  

- Develop SOPs by writing down the actual steps taken when performing the specific task. When using sample SOPs from organizations or other programs, be sure to customize the information so it is specific to the local CACFP adult day care center.

- Identify the training needs of CACFP adult day care center staff, and appropriate professional development on meal modifications for adult participants with special dietary needs. Provide annual and ongoing training for food service staff and other adult day care center staff, as appropriate. For more information, see “Staff Training” in this section.

- Identify effective communication strategies among CACFP adult day care center staff, and between the adult day care center and adult participants (or guardians/caregivers), to ensure that everyone is aware of the CACFP adult day care center’s policy and SOPs for meal modifications. Incorporate these strategies into the SOPs, and provide staff training and guidance on how to implement them.

- Implement monitoring procedures to ensure that meal modifications are reasonable, appropriate, and meet each adult participant’s specific dietary needs; and that all staff responsible for planning, preparing, and serving meals and snacks consistently follows the CACFP adult day care center’s policy and SOPs for meal modifications. Review the policy and SOPs for meal modifications at least annually, and make changes as needed.
**Staff Training**

Appropriate training in nutrition, CACFP requirements, food preparation techniques, meal modifications, and food safety prepares staff to provide nutritious and safe meals and snacks. Training helps staff understand their responsibilities and be successful in their jobs. Motivation is increased when employees understand program goals and the tasks required to achieve those goals. Training also instills a sense of positive self-esteem through improved professional competency.

CACFP regulations require that all sponsors provide training at least annually for key staff members. The training must include instruction that is appropriate to the level of staff experience and duties. At a minimum, the training must address the CACFP adult meal patterns, meal counts, claim submission and review procedures, recordkeeping requirements, and the reimbursement system. The CSDE strongly recommends that CACFP adult day care centers include regular training on meal modifications.

Appropriate training is especially critical for the effective management of life-threatening food allergies. Food service staff require appropriate training on how to read food labels and identify potential allergens in processed foods. They also need to know how to avoid cross-contact with potential allergens during food preparation, service, and cleaning. All CACFP adult day care center staff need training on identifying the symptoms of an allergic reaction and how to respond in an emergency. For training resources on food allergies, visit the “Related Resources” section of the CSDE’s Special Diets in CACFP Adult Day Care Centers webpage. For more information and resources on food allergies, see “Food Allergy” in section 2.

The USDA also requires annual civil rights training for all staff interacting with adult participants of the CACFP. The USDA’s civil rights requirements address meal modifications for students with disabilities. CACFP adult day care centers should use the CSDE’s presentation, *Civil Rights: Your Responsibilities in the Child and Adult Care Food Program (CACFP)*, to provide civil rights training. This presentation is available under “CACFP” on the CSDE’s Civil Rights for Child Nutrition Programs webpage.
6 — Resources

This section includes links to federal and state regulations, policy memoranda, websites, and the CSDE’s guides, resource lists, forms, and handouts. All forms and handouts for meal modifications are available on the CSDE’s Special Diets in CACFP Adult Day Care Centers website.

CSDE Forms and Handouts

Action Planning Form:

Allowable Milk Substitutes for adult participants without a disability in the CACFP:

Medical Statement for Meal Modifications in CACFP Adult Day Care Centers (English):

Medical Statement for Meal Modifications in CACFP Adult Day Care Centers (Spanish):

Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Adult Day Care Centers (English):

Guidance and Instructions: Medical Statement for Meal Modifications in CACFP Adult Day Care Centers (Spanish):

Requirements for Meal Modifications in CACFP Adult Day Care Centers (Presentation):
https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/SpecDiet/PresentationSpecialDietsCACFP.pdf

Sample Action Plan: Developing Policy for Meal Modifications in the CACFP:

Sample Action Plan: Promoting Policy for Meal Modifications in the CACFP:
Self-assessment of Adult Day Care Center Practices for Special Diets in the CACFP:

Summary of Requirements for Accommodating Special Diets for Adult Participants in the CACFP:

CSDE Guides

Accommodating Special Diets in CACFP Adult Day Care Centers:

Meal Pattern Requirements for CACFP Adult Day Care Centers:
https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/MealPattern/AdultNPGmealpattern.pdf

Planning Healthy Meals in CACFP Adult Day Care Centers:
https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/MealPattern/AdultNPGhealthy.pdf

CSDE Resource Lists

The CSDE resource lists are available on the CSDE’s Resources for Child Nutrition Programs webpage.

Child Nutrition Programs Resource List:

Competitive Foods Resource List:

Dietary Guidelines and Nutrition Information Resource List:

Food Safety Resource List:

Health and Achievement Resource List:
Menu Planning and Food Production Resource List:

Nutrition Education Resource List:

Physical Activity and Physical Education Resource List:

Promoting Healthy Weight Resource List:

Special Diets Resource List:

Wellness Policies for Schools and Child Care Resource List:

CSDE CACFP Websites

CACFP Adult Day Care Centers (CSDE):
https://portal.ct.gov/SDE/Nutrition/CACFP-Adult-Day-Care-Centers

Child and Adult Care Food Program (CACFP) (CSDE):
https://portal.ct.gov/SDE/Nutrition/Child-and-Adult-Care-Food-Program

Child Nutrition (CN) Labeling (USDA):

Child Nutrition Programs (CSDE):
https://portal.ct.gov/SDE/Nutrition/Child-Nutrition-Programs

Connecticut Department of Public Health Food Protection Program (DPH):
https://portal.ct.gov/DPH/Food-Protection-Program/Main-Page

Crediting Foods in CACFP Adult Day Care Centers (CSDE):

FNS Instructions for Child Nutrition Programs (CSDE):
https://portal.ct.gov/SDE/Nutrition/FNS-Instructions-for-Child-Nutrition-Programs

Food Safety for Child Nutrition Programs (CSDE):
https://portal.ct.gov/SDE/Nutrition/Food-Safety-for-Child-Nutrition-Programs

Forms for CACFP Adult Day Care Centers (CSDE):
https://portal.ct.gov/SDE/Nutrition/CACFP-Adult-Day-Care-Centers/Documents
Resources

Laws and Regulations for Child Nutrition Programs (CSDE):

Manuals and Guides for Child Nutrition Programs (CSDE):
https://portal.ct.gov/SDE/Nutrition/Manuals-and-Guides-for-Child-Nutrition-Programs

Meal Patterns for CACFP Adult Day Care Centers (CSDE):
https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Adult-Centers

Menu Planning for Child Nutrition Programs (CSDE):
https://portal.ct.gov/SDE/Nutrition/Menu-Planning

Operational Memoranda for the CACFP (CSDE):
https://portal.ct.gov/SDE/Lists/Operational-Memoranda-for-the-CACFP

Program Guidance for CACFP Adult Day Care Centers (CSDE):
https://portal.ct.gov/SDE/Nutrition/Program-Guidance-CACFP-Adults

Resources for Child Nutrition Programs (CSDE):
https://portal.ct.gov/SDE/Nutrition/Resources-for-Child-Nutrition-Programs

Special Diets in CACFP Adult Day Care Centers (CSDE):
https://portal.ct.gov/SDE/Nutrition/Special-Diets-in-CACFP-Adult-Day-Care-Centers
**Nondiscrimination Legislation**

https://www.ada.gov/pubs/ada.htm

Americans with Disabilities Act (ADA) Amendments Act of 2008 Final rule: Amendment of Americans with Disabilities Act Title II and Title III Regulations to Implement ADA Amendments Act of 2008 (28 CFR Parts 35 and 36):
https://www.ada.gov/regs2016/adaaa.html

Americans with Disabilities Act (ADA) Final Rule: Nondiscrimination on the Basis of Disability by Public Accommodations and in Commercial Facilities (28 CFR Part 36) (Implementing regulation for Title III of the Americans with Disabilities Act (ADA)):

Americans with Disabilities Act (ADA):
https://www.ada.gov/

Americans with Disabilities Act (ADA): The Americans with Disabilities Act of 1990 and Revised ADA Regulations Implementing Title II and Title III (U.S. Department of Justice website):
https://www.ada.gov/2010_regs.htm

Americans with Disabilities Act of 1990 (ADA) and the ADA Amendments Act of 2008 (Public Law 110-325):
https://www.ada.gov/pubs/ada.htm

Civil Rights (U.S. Department of Health & Human Services, Office for Civil Rights):
https://www.hhs.gov/civil-rights/for-individuals/disability/index.html

Code of Federal Regulations 7CFR15b.3 Nondiscrimination on the Basis of Handicap in Programs and Activities Receiving Federal Financial Assistance (USDA):

CSDE Circular Letter C-9: Section 504 of the Rehabilitation Act of 1975: Procedural Safeguards:

https://www.hhs.gov/hipaa/index.html

Section 504 of the Rehabilitation Act of 1973:
https://www.hhs.gov/sites/default/files/knowyourrights504adafactsheet.pdf

U.S. Department of Education Office of Special Education Programs:
https://www2.ed.gov/about/offices/list/osers/osep/index.html
Resources


Regulations and Policy

CACFP Policy Memos (USDA): https://www.fns.usda.gov/resources


Connecticut General Statutes Section 10-221q (Sale of Beverages): https://www.cga.ct.gov/current/pub/chap_170.htm#sec_10-221q


CSDE Operational Memorandum No. 02C-18 and 02H-18: Requirements for Meal Modifications in CACFP Child Care Centers and Family Day Care Homes: https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/Memos/OM2018/OM02C18_02H18.pdf


How to Determine if a Soy-Based Beverage Meets the Nutrient Requirements to Qualify as an Authorized Milk Substitute in WIC (USDA):

Nutrition Standards for CACFP Meals and Snacks (USDA):

USDA Memo CACFP 08-2017: Questions and Answers on the Updated Meal Pattern Requirements for the adult participant and Adult Care Food Program:

USDA Memo CACFP 14-2017 and SFSP 10-2017: Modifications to Accommodate Disabilities in the Child and Adult Care Food Program and Summer Food Service Program:

USDA Memo CACFP 17-2016: Nutrition Requirements for Fluid Milk and Fluid Milk Substitutions in the CACFP, Q&As:

USDA Nondiscrimination Regulations (7 CFR 15b): Nondiscrimination on the Basis of Handicap in Programs or Activities Receiving Federal Financial Assistance):
Glossary

added sugars: Sugars and syrups added to foods in processing or preparation, as opposed to the naturally occurring sugars found in foods like fruits, vegetables, grains, and dairy products. Names for added sugars include brown sugar, corn sweetener, corn syrup, dextrose, fructose, fruit juice concentrates, glucose, high-fructose corn syrup, honey, invert sugar, lactose, malt syrup, maltose, molasses, raw sugar, sucrose, sugar, and syrup.

Administrative Review: A periodic review of an institution’s operations by the Connecticut State Department of Education to monitor performance and assess compliance with all USDA regulations.

advanced practice registered nurse (APRN): An individual who performs advanced level nursing practice activities that, by virtue of post-basic specialized education and experience, are appropriate to and may be performed by this profession. The APRN performs acts of diagnosis and treatment of alterations in health status and collaborates with a physician (licensed to practice medicine in Connecticut) to prescribe, dispense, and administer medical therapeutics and corrective measures. For more information, see Section 20-87a of the Connecticut General Statutes.

alternate protein products (APP): APPs are generally single ingredient powders that are added to foods. Some examples include soy flours, soy concentrates, soy isolates, whey protein concentrate, whey protein isolates, and casein. APPs include vegetable protein products. The USDA has specific requirements for the crediting of APPs in Child Nutrition Programs. For more information, see “Seventh-day Adventist Sponsors” in section 4, and the CSDE’s resource, Requirements for Alternate Protein Products in the CACFP.

anaphylaxis: A sudden, severe allergic reaction occurring in allergic individuals after exposure to an allergen such as food, an insect sting or latex. Anaphylaxis involves various areas of the body simultaneously or causes difficulty breathing and swelling of the throat and tongue. In extreme cases, anaphylaxis can cause death.

body mass index (BMI): A screening tool that indicates the relationship of an adult’s weight to height. BMI is an adult’s weight in kilograms divided by the square of height in meters. For more information, visit the CDC’s Defining Adult Overweight and Obesity webpage.
Glossary

CACFP adult meal patterns: The required food components and minimum serving sizes that facilities participating in the CACFP must provide to receive federal reimbursement for meals (breakfast, lunch, and supper) and snacks served to adult participants. For more information, visit the CSDE’s Meal Patterns for CACFP Adult Day Care Centers webpage and review the CSDE’s guide, Meal Pattern Requirements for CACFP Adult Day Care Centers.

CACFP sponsor: A public or private nonprofit organization that is entirely responsible for the administration of the CACFP in one or more day care homes, child care centers, emergency shelters, or at-risk afterschool care centers. In some situations, for-profit institutions may also be eligible to participate in the CACFP. For more information, see 7 CFR 226.2 of the CACFP regulations.

carbohydrates: A category of nutrients that includes sugars (simple carbohydrates) and starch and fiber (complex carbohydrates). Carbohydrates are easily converted by the body to energy (calories). Foods that provide carbohydrates (fruits, vegetables, breads, cereals, grains, milk, and dairy products) are important sources of many nutrients. However, foods containing large amounts of added sugars provide calories but few, if any, nutrients. For more information, see “added sugars” and “simple carbohydrates” in this section.

celiac disease: An autoimmune digestive disease that damages the small intestine and interferes with absorption of nutrients from food. People who have celiac disease cannot tolerate gluten, a protein in wheat, rye and barley. For more information, see “Celiac Disease” in section 3 and visit the National Digestive Diseases Information Clearinghouse website.

Child and Adult Care Food Program (CACFP): The USDA’s federally assisted meal program providing nutritious meals and snacks to adult participants in child care centers, family day care homes and emergency shelters, and snacks and suppers to adult participants participating in eligible at-risk afterschool care programs. The program also provides meals and snacks to adults who receive care in nonresidential adult day care centers. For more information, see the USDA’s CACFP webpage and the CSDE’s CACFP webpage.

Child Nutrition (CN) label: A statement that clearly identifies the contribution of a food product toward the meal pattern requirements, based on the USDA’s evaluation of the product’s formulation. Products eligible for CN labeling include main dish entrees that contribute to the meat/meat alternates component of the meal pattern requirements, e.g., beef patties, cheese or meat pizzas, meat or cheese and bean burritos, egg rolls, and breaded fish portions. The CN label may also indicate the contribution of other meal components that are part of these products. For more information, review the CSDE’s resource, Using Child Nutrition (CN) Labels in the CACFP, and the USDA’s Child Nutrition (CN) Labeling webpage.
**Child Nutrition Programs:** The USDA’s federally funded programs that provide nutritious meals and snacks to children, including the National School Lunch Program (NSLP), School Breakfast Program (SBP), Afterschool Snack Program, Special Milk Program (SMP), Summer Food Service Program (SFSP), Seamless Summer Option (SSO) of the NSLP, Fresh Fruit and Vegetable Program (FFVP), and Child and Adult Care Food Program (CACFP). The CACFP also provides nutritious meals and snacks to the frail elderly in adult day care centers. For more information, see the CSDE’s Child Nutrition Programs webpage.

**creditable food:** A food or beverage that can be counted toward meeting the meal pattern requirements for a reimbursable meal or snack in the USDA Child Nutrition Programs. For more information, visit the “Documents/Forms” section of the CSDE’s Crediting Foods in CACFP Adult Day Care Centers webpage.

**cross-contact:** The transfer of allergen-containing ingredients to allergy-free food by hands, food-contact surfaces, sponges, cloth towels, or utensils.

**cycle menu:** A series of menus planned for a specific period of time, with a different menu for each day. Cycle menus can help schools comply with the meal pattern requirements, increase variety, control food cost, control inventory, and save time.

**dietitian:** See “registered dietitian” in this section.

**disability:** A condition in which a person has a physical or mental impairment that substantially limits one or more major life activities; has a record of such an impairment; or is regarded as having such an impairment. For more information, see “Definition of Disability” in section 2.

**Emergency Care Plan (ECP):** A written plan that provides specific directions about what to do in a medical emergency, such as an accidental exposure to the allergen or safety emergency such as a fire drill or lockdown. The ECP is often part of the IHCP. This written plan helps medical personnel, adult day care center staff, and emergency responders react to an emergency in a prompt, safe, and individualized manner.

**fluid milk substitutes:** Nondairy beverages (such as soy milk) that can be used as a substitute for fluid milk in the USDA Child Nutrition Programs. For reimbursable CACFP meals and snacks, nondairy beverages served to children without disabilities must comply with the USDA’s nutrition standards for milk substitutes. For more information, see “nutrition standards for milk substitutes” in this section.
Glossary

**food allergy:** An exaggerated response by the immune system to a food that the body mistakenly identifies as being harmful. The body’s reaction to the allergy-causing food can affect the respiratory system, gastrointestinal tract, skin, and cardiovascular system. In some people, a food allergy can cause severe symptoms or even a life-threatening reaction known as anaphylaxis. For more information, see “anaphylaxis” in this section.

**food components:** The five food groups that comprise reimbursable meals in the USDA Child Nutrition Programs, including milk, fruits, vegetables, grains, and meat/meat alternates. For more information, visit the “Documents/Forms” section of the CSDE’s Crediting Foods in CACFP Adult Day Care Centers webpage.

**food intolerance:** An adverse food-induced reaction that does not involve the body’s immune system, e.g., lactose intolerance. For more information, see “lactose intolerance” in this section.

**food item:** A specific food offered within the food components that comprise reimbursable meals and snacks in the USDA Child Nutrition Programs. In the CACFP adult meal patterns for adult participants, a food item is one of the three required foods for breakfast, one of the five required foods for lunch and supper, or one of the two required foods for snack.

**gluten sensitivity:** A condition with symptoms similar to those of celiac disease that improve when gluten is eliminated from the diet. Individuals diagnosed with gluten sensitivity do not experience the small intestine damage found in celiac disease. Gluten sensitivity is a diagnosis of exclusion that requires ruling out celiac disease and wheat/gluten allergy, followed by a period of dietary gluten exclusion to see if the patient gets better, then a gluten challenge to see how the patient reacts. For more information, see “Gluten Sensitivity” in section 2 and the Celiac Disease Foundation website.

**has a record of such impairment:** Has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities. For more information, see “Definition of Disability” in section 2.

**Health Insurance Portability and Accountability Act of 1996 (HIPAA):** A federal law that protects personal health information. The HIPAA Privacy Rule provides federal protections for personal health information (electronic, written and oral) held by covered entities and gives patients an array of rights with respect to that information. It also permits the disclosure of personal health information needed for patient care and other important purposes. The Security Rule protects health information in electronic form. It requires entities covered by HIPAA to ensure that electronic protected health information is secure. For more information, see the U.S. Department of Health and Human Services website.
Individualized Health Care Plan (IHCP): A written document developed for individuals with special health care needs or whose health needs require daily intervention. The IHCP describes how to meet an individual’s daily health and safety needs in the adult day care setting.

is regarded as having an impairment: 1) has a physical or mental impairment that does not substantially limit major life activities but that is treated by a recipient as constituting such a limitation; 2) has a physical or mental impairment that substantially limits major life activities only as a result of the attitudes of others towards such impairments; or 3) has none of the impairments defined in “physical and mental impairment” but is treated by a recipient as having such an impairment. For more information, see “Definition of Disability” in section 2.

lactose intolerance: A reaction to a food that does not involve the immune system. Lactose-intolerant people lack an enzyme needed to digest milk sugar (lactose). When that person eats milk products, symptoms such as gas, bloating, and abdominal pain may occur.

licensed physician: A doctor of medicine (MD) or osteopathy (DO).

major life activities: These 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 life activities” also include the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions. For more information, see “Definition of Disability” in section 2.

meal patterns for the CACFP: The required food components and minimum servings that institutions participating in the CACFP must provide to receive federal reimbursement for meals and snacks served to children. For information on the CACFP adult meal patterns, visit the CSDE’s Meal Patterns for CACFP Adult Day Care Centers webpage.

meat alternates: Foods that provide similar protein content to meat. Meat alternates include alternate protein products (APPs), cheese, eggs, cooked dry beans or peas, nuts and seeds and their butters (except for acorn, chestnut and coconut), yogurt, soy yogurt, and commercial tofu containing at least 5 grams of protein in a ¼-cup (2.2 ounces) serving. For more information, visit the “Documents/Forms” section of the CSDE’s Crediting Foods in CACFP Adult Day Care Centers webpage.
**Glossary**

**medical statement**: A document that identifies the specific medical conditions and appropriate dietary modifications for adult participants with special dietary needs. The USDA requires that the medical statement to request meal modifications must include: 1) information about the adult participant’s physical or mental impairment that is sufficient to allow the CACFP adult day care center to understand how it restricts the adult participant’s diet; 2) an explanation of what must be done to accommodate the adult participant’s disability; and 3) if appropriate, the food or foods to be omitted and recommended alternatives. For more information, see “Medical Statement Requirements” in section 2.

**menu item**: Any planned main dish, vegetable, fruit, bread, grain or milk that is part of the reimbursable meal. Menu items consist of food items.

**mitigating measures**: Things like medications, prosthetic devices, assistive devices, or learned behavioral or adaptive neurological modifications that an individual may use to eliminate or reduce the effects of an impairment. These measures cannot be considered when determining whether a person has a substantially limiting impairment under Section 504 or the ADA Amendments Act.

**noncreditable foods**: Foods and beverages that do not contribute toward the meal patterns for the USDA’s Child Nutrition Programs. Noncreditable foods and beverages are either in amounts too small to credit (i.e., foods and beverage that do not provide the minimum creditable amount of a food component), or they do not fit into one of the meal pattern components. For more information, review the CSDE’s resource, Noncreditable Foods in CACFP Adult Day Care Centers.

**nutrient-dense foods**: Foods and beverages that provide vitamins, minerals, and other substances that contribute to adequate nutrient intakes or may have positive health effects, and contain little or no solid fats, added sugars, refined starches, or sodium. Ideally, these foods and beverages are also in forms that retain naturally occurring components, such as dietary fiber. Examples include all vegetables, fruits, whole grains, seafood, eggs, beans and peas, unsalted nuts and seeds, fat-free and low-fat dairy products, and lean meats and poultry (when prepared with little or no added solid fats, sugars, refined starches, and sodium). The term “nutrient dense” indicates the nutrients and other beneficial substances in a food have not been “diluted” by the addition of calories from added solid fats, sugars, or refined starches, or by the solid fats naturally present in the food.

**nutrient-rich foods**: See “nutrient-dense foods” in this section.
nutrition standards for fluid milk substitutes: The USDA’s nutrition requirements for nondairy beverages (such as soy milk) substituted for fluid milk in the USDA Child Nutrition Programs. The USDA requires that any fluid milk substitutes are nutritionally equivalent to cow’s milk and contain the following nutrients based on a 1-cup serving (8 fluid ounces): 276 milligrams (mg) of calcium; 8 grams (g) of protein; 500 international units (IU) of vitamin A; 100 IU of vitamin D; 24 mg of magnesium; 222 mg of phosphorus; 349 mg of potassium; 0.44 mg of riboflavin; and 1.1 micrograms (mcg) of vitamin B-12. For more information, see Table 4 in section 3 and the CSDE’s handout, Allowable Milk Substitutes for Adult Participants without a Disability in the CACFP.

nutritionist: There is no accepted national definition for the title “nutritionist.” All registered dietitians are nutritionists, but not all nutritionists are registered dietitians. Some state licensure boards have enacted legislation that regulates use of the title “nutritionist” and sets specific qualifications for holding the title. The definition is variable from state to state. Section 20-206n of the Connecticut General Statutes defines a licensed dietitian/nutritionist certification for registered dietitians. Other professionals can also apply if they have successfully passed a written examination prescribed by the Commissioner of Public Health and have a master’s degree or doctoral degree from an institution of higher education accredited by a regional accrediting agency recognized by the U.S. Department of Education, with a major course of study which focused primarily on human nutrition or dietetics. For more information on state licensing requirements, see the Connecticut State Department of Public Health’s Dietitian/Nutritionist Certification webpage.

obesity (adults): A BMI of 30.0 or higher. For more information, see “body mass index (BMI)” in this section and the CDC’s Defining Adult Overweight and Obesity webpage.

overweight (adults): A BMI of 25 to less than 30. For more information, see “body mass index” in this section and the CDC’s Defining Adult Overweight and Obesity webpage.

phenylketonuria: A rare genetic disorder in which an individual lacks an enzyme to break down the amino acid phenylalanine, which is present in protein foods. Without the enzyme, levels of phenylalanine build up in the body. This can harm the central nervous system and cause brain damage.
physical or mental impairment: 1) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genitourinary; hemic and lymphatic; skin; and endocrine; or 2) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities. The term “physical or mental impairment” includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; diabetes; mental retardation; emotional illness; and drug addiction and alcoholism. For more information, see “Definition of Disability” in section 2.

product formulation statement (PFS): An information statement obtained from the manufacturer that provides specific information about how the product credits toward the USDA’s meal pattern requirements, and documents how this information is obtained citing Child Nutrition Program resources or regulations. All creditable ingredients in this statement must match a description in the USDA’s Food Buying Guide for Child Nutrition Programs. Unlike a CN label, a PFS does not provide any warranty against audit claims. If these foods will be used in a reimbursable meal, the SFA must check the manufacturer’s crediting information for accuracy. For more information, review the CSDE’s resources, Using Product Formulation Statements in the CACFP and Accepting Processed Product Documentation in the CACFP.

product specification sheet: Manufacturer sales literature that provides various information about the company’s products. These materials do not provide the specific crediting information that is required on a product formulation statement and cannot be used to determine a product’s contribution toward the USDA meal pattern components.

reasonable modification: A change or alteration in policies, practices, and/or procedures to accommodate a disability that ensures individuals with disabilities have equal opportunity to participate in or benefit from a program. The general guideline in making accommodations is that individuals with disabilities must be able to participate in and receive benefits from programs that are available to individuals without disabilities.

recognized medical authority: A state-licensed health care professional who is authorized to write medical prescriptions under state law and is recognized by the State Department of Public Health. In Connecticut, recognized medical authorities include physicians (MD), physician assistants (PA) and certified physician assistants (PAC), doctors of osteopathy (DO), and advanced practice registered nurses (APRN).
registered dietitian (RD) or registered dietitian nutritionist (RDN): The Commission on Dietetic Registration defines a RD and RDN as someone who has completed a minimum of a bachelor’s degree at a U.S. regionally accredited university or college and course work accredited or approved by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics (AND); completed an ACEND-accredited supervised practice program at a health-care facility, community agency, or a foodservice corporation or combined with undergraduate or graduate studies; passed a national examination administered by the Commission on Dietetic Registration (CDR); and completed continuing professional educational requirements to maintain registration. For more information, visit the AND’s What is a Registered Dietitian Nutritionist website and the CDR’s Registered Dietitian (RD) or Registered Dietitian Nutritionist (RDN) Certification website.

reimbursable meals: Meals and snacks that meet the meal pattern requirements of the CACFP regulations, and are eligible for USDA funds.

serving size or portion: The weight, measure, or number of pieces or slices of a food or beverage. CACFP adult day care centers must provide the minimum serving sizes in the CACFP adult meal patterns for meals and snacks to be reimbursable.

simple carbohydrates (sugars): Carbohydrates consisting of one sugar (e.g., fructose and galactose) or two sugars (e.g., lactose, maltose, and sucrose). Sugars can be naturally present in foods (such as the fructose in fruit or the lactose in milk) or added to foods (such as sucrose or table sugar). Foods that naturally contain simple carbohydrates (such as fruits, milk, and milk products, and some vegetables) also contain vitamins and minerals. Foods that contain large amounts of added sugars (such as cookies, candy, pastries, sweetened baked goods, regular soft drinks, and other sweetened drinks) provide calories with few, if any, nutrients. For more information, see “added sugars” in this section.

sodium: A mineral that helps maintain the body’s fluid balance and blood pressure. Diets that are high in sodium can increase the risk of high blood pressure in individuals who are sodium sensitive.

sugars: See “added sugars” and “simple carbohydrates” in this section.
Glossary