

Guidance for Meal Modifications in the Summer Food Service Program

This document provides guidance on the requirements for meal modifications in the U.S. Department of Agriculture’s (USDA) Summer Food Service Program (SFSP), based on the federal nondiscrimination regulations and [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](#). SFSP sponsors:

- are **required** to make reasonable meal modifications for children whose physical or mental impairment (disability) restricts their diet; and
- have the **option** to make meal modifications for children whose special dietary needs do not constitute a disability, if the requested modification complies with the SFSP meal patterns.

For additional assistance, please contact the Connecticut State Department of Education’s (CSDE) [Summer Meals staff](#).



SFSP meals and snacks must meet the requirements of the [SFSP meal patterns](#). However, modifications to the meal patterns may be necessary to meet the dietary needs of children who qualify as having a disability under any of the federal nondiscrimination laws. Examples of possible modifications include food restrictions, substitutions, texture changes (e.g., pureed, ground, chopped, or thickened liquids), and increased or decreased calories. Modifications to the meal service may also involve ensuring that facilities and personnel are adequate to provide necessary services.



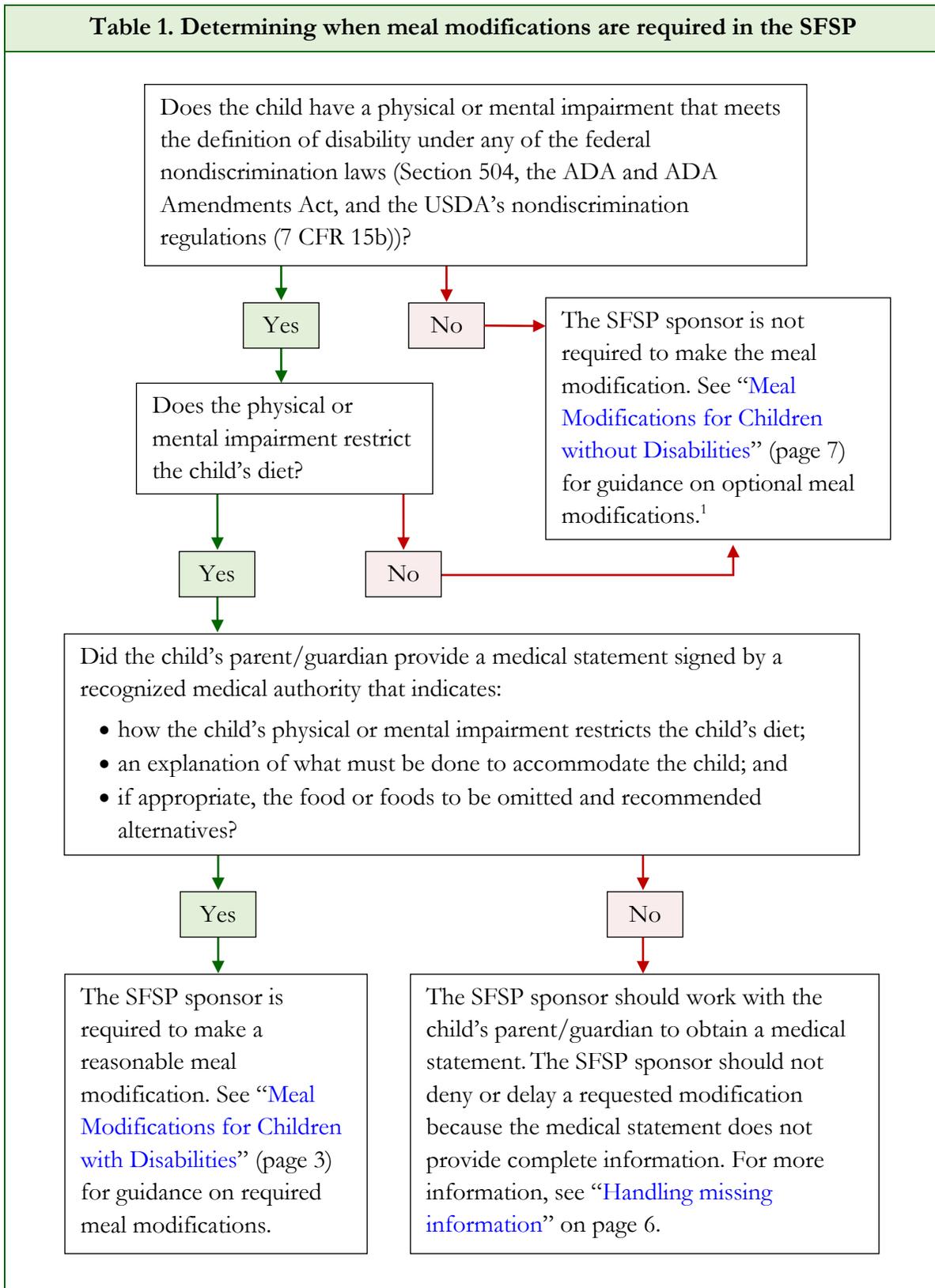
In certain situations, disability accommodations may require additional equipment; separate or designated storage or preparation areas, surfaces, or utensils; and specific staff training and expertise. For example, some children may require the physical assistance of an aide to consume their meal, while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

Determining When Meal Modifications Are Required

Table 1 summarizes when meal modifications are required. SFSP sponsors can quickly determine if a child requires a meal modification by reviewing the CSDE’s medical statement form, [Request for Meal Modifications in the SFSP](#). Question 1 in the “Medical Statement” section of the form asks if the child has a physical or mental impairment that restricts his or her diet. If the recognized medical authority’s answer is “yes,” the SFSP sponsor **must** make the meal modification. If the recognized medical authority’s answer is “no,” the SFSP sponsor may **choose**, but is not required, to make the meal modification.

Guidance for Meal Modifications in the SFSP

Table 1. Determining when meal modifications are required in the SFSP



Guidance for Meal Modifications in the SFSP

¹ Optional modifications for children without disabilities must always comply with the SFSP meal patterns.

Guidance for Meal Modifications in the SFSP

Meal Modifications for Children with Disabilities

Federal laws and USDA regulations require that SFSP sponsors make reasonable meal modifications on a case-by-case basis to accommodate children whose disability restricts their diet. A “**reasonable modification**” is a change or alteration in policies, practices, and/or procedures to accommodate a disability that ensures children with disabilities have equal opportunity to participate in or benefit from a program. “**Case-by-case basis**” means that the meal modifications are specific to the individual medical condition and dietary needs of each child.

A request for a reasonable modification must be related to the disability or limitations caused by the disability, and requires a medical statement from a recognized medical authority, i.e., a state-licensed healthcare professional who is authorized to write medical prescriptions under state law. The Connecticut State Department of Public Health defines a **recognized medical authority** as a physician, physician assistant, doctor of osteopathy, or advanced practice registered nurse (APRN).

Section 504 of the Rehabilitation Act of 1973 (Section 504), the Americans with Disabilities Act (ADA) of 1990, the ADA Amendments Act of 2008, and the USDA nondiscrimination regulations (7 CFR 15b) define a **person with disability** as any person who has a physical or mental impairment that substantially limits one or more “major life activities,” has a record of such impairment, or is regarded as having such impairment” (29 USC 705(9)(b), 42 USC 12101, and 7 CFR 15b.3). The definitions for these terms are below.

- “**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**” 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.



Guidance for Meal Modifications in the SFSP

- **“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” but is treated by a recipient as having such an impairment.

What constitutes a disability

Under the ADA Amendments Act, most physical and mental impairments 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.

- 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 a disability if it substantially limits digestion, a bodily function that is a major life activity. A child whose digestion is impaired by a food intolerance may be a person with a disability, regardless of whether consuming the food causes the child severe distress.
- If a child’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 a child may be able to control an allergic reaction by taking medication should not be considered in determining whether the allergy is a disability.
- A food allergy is generally considered a disability. 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 a disability and require a meal modification if it impacts a major bodily function or other major life activity, such as digestion, respiration, immune response, and skin rash.

Guidance for Meal Modifications in the SFSP

- Autism is considered a disability and may require a reasonable modification if it substantially limits a major life activity such as eating. For example, some children with autism will only eat certain foods due to their repetitive and ritualistic behavior patterns. Any physical or mental impairment preventing a child from consuming a meal is considered a disability.
- Phenylketonuria (PKU), diabetes, and celiac disease are considered disabilities and may require reasonable meal modifications.
- Obesity is recognized by the American Medical Association as a disease and may be considered a disability if the condition of obesity substantially limits a major life activity.
- If a disability is episodic and substantially limits a major life activity when active, the SFSP sponsor must provide a reasonable modification for the child. Whether a temporary impairment is a disability must be determined 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 the condition is temporary, but severe and lasts for a significant duration, the SFSP sponsor must provide a reasonable modification for the duration of the condition. An example of a temporary disability is a child who had major oral surgery due to an accident and is unable to consume food for a significant period unless the texture is modified. The SFSP sponsor must make the meal modification, even though the child is not “permanently” disabled. Temporary illness or injury, such as a cold, the flu, or a minor broken bone, are generally not considered conditions that require reasonable meal modifications.
- General health concerns and personal preferences, such as parents who prefer that their children eat a gluten-free diet or organic foods because they believe it is healthier, are **not** disabilities and do not require meal modifications.



For additional guidance, see [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](#).

Guidance for Meal Modifications in the SFSP

Required documentation for children with disabilities

The USDA requires that the medical statement to request meal modifications for children with disabilities must include the three components below.

1. The medical statement must provide information about the child's physical or mental impairment that is sufficient to allow the SFSP sponsor to understand how it restricts the child's diet.
2. The medical statement must include an explanation of what must be done to accommodate the child's disability; and
3. If appropriate, the medical statement must indicate the food or foods to be omitted and recommended alternatives.

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

The CSDE's medical statement form, *Request for Meal Modifications in the SFSP*, includes the information required by the USDA for parents/guardians to request a meal modification for their children. SFSP sponsors may use or adapt this form. If a SFSP sponsor chooses to use an alternate form, it must contain the USDA's three required components. **To protect children's privacy and confidentiality, the SFSP sponsor's medical statement *cannot* require a specific diagnosis by name or use the term "disabled" or "disability."**

Handling missing information

When the medical statement is unclear, or lacks sufficient detail, SFSP sponsors must obtain appropriate clarification to provide an appropriate and safe meal for the child. SFSP sponsors may consider using the services of a registered dietitian, when available, to assist in implementing meal modifications, as appropriate.

SFSP sponsors 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 child. When necessary, SFSP sponsors should work with the child's parent/guardian to obtain the required information. However, clarification of the medical statement should not delay the SFSP sponsor from providing a meal modification for the child. While obtaining additional information, the SFSP sponsor should follow the portion of the medical statement that is clear and unambiguous to the greatest extent possible.

Guidance for Meal Modifications in the SFSP

Maintaining documentation for meal modifications

SFSP sponsors must keep medical statements on file for all children with a documented disability, whose meal modifications do not meet the SFSP meal patterns. The USDA does not require a medical statement for children with disabilities if the modified meals and snacks meet the SFSP meal patterns. Examples include:

- modifying meals for texture, e.g., chopped, ground, or pureed foods; and
- substituting food items from the same component, e.g., substituting a banana for strawberries (fruits component) or chicken for cheese (meat/meat alternates component).



The CSDE recommends that SFSP sponsors maintain a medical statement for modifications that meet the SFSP meal patterns. This ensures clear communication between families and SFSP sponsors about the appropriate meal modifications for the child. The CSDE will review medical statement during the Administrative Review of the SFSP.

Assessing modifications for children with disabilities

The USDA does not require SFSP sponsors to provide the exact substitution or other modification requested in the child's medical statement, such as a specific brand of food. In most cases, a generic brand is sufficient. SFSP sponsors must work with the parent/guardian to offer a reasonable modification that effectively accommodates the child's disability, and provides equal opportunity to participate in or benefit from the SFSP. SFSP sponsors may consider expense and efficiency in choosing an appropriate approach to accommodate a child's disability.

The USDA does not require SFSP sponsors to make modifications that would result in a fundamental alteration to the nature of the SFSP, such as expensive meal modifications that would make continued operation of the SFSP unfeasible. The expense of a modification is measured against the total resources available to the individual SFSP sponsor. For additional guidance, see [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](#).

Milk substitutes for children with disabilities

If cow's milk causes any digestive problems, the condition may be considered a disability under the ADA Amendments Act, and may require a substitution. When a child has a medically documented disability that requires a milk substitute, the SFSP sponsor must provide an appropriate substitute based on the child's medical statement. For children with disabilities, SFSP sponsors can claim reimbursement for meals that contain other beverages in place of milk, such as juice, water, or nondairy milk substitutes (e.g., soy milk, almond milk, and rice milk). **Note:** Juice, water, and nondairy milk substitutes are never allowed as milk substitutes for children without disabilities.

Guidance for Meal Modifications in the SFSP

Procedural Safeguards

The USDA encourages SFSP sponsors to implement procedures for parents/guardians to request modifications to the meal service for children with disabilities, and resolve grievances. These procedures should include providing a written final decision on each request.

SFSP sponsors should notify parents/guardians of the procedure for requesting meal modifications. At a minimum, SFSP sponsors must provide notice of nondiscrimination and accessible services, as outlined in the USDA's nondiscrimination regulations (7 CFR 15b.7). SFSP sponsors should also ensure that summer site staff understands the procedures for handling requests for meal modifications.

SFSP sponsors with 15 or more employees

SFSP sponsors 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). The USDA recommends that SFSP sponsors employing less than 15 individuals have someone on staff who can provide technical assistance to summer sites when they are making meal modifications for children with disabilities.

SFSP sponsors 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 SFSP sponsor;
- providing that a prompt decision by the SFSP sponsor be rendered to the participant or the participant's representative regarding the grievance; and
- ensuring that the decision includes the official USDA nondiscrimination statement, which advises the participant how to file a complaint with the USDA's Food and Nutrition Service (FNS). The CSDE's document, *Civil Rights Requirements for the SFSP*, contains the official USDA nondiscrimination statement.

For additional guidance, see [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](#).

Guidance for Meal Modifications in the SFSP

Meal Modifications for Children without Disabilities

SFSP sponsors have the **option** to make meal modifications on a case-by-case basis for children whose special dietary needs do not constitute a disability. This includes requests related to religious or moral convictions, general health concerns, and personal food preferences, such as parents who prefer that their children eat a gluten-free diet because they believe it is healthier.

All meals served to children without disabilities must meet the SFSP meal patterns. SFSP sponsors cannot claim reimbursement for meals that do not meet the SFSP meal patterns, unless they are served to children with a medically documented disability. For information on the SFSP meal patterns, visit the [SFSP Meal Patterns](#) and [Crediting Foods in the SFSP](#) sections of the CSDE's SFSP webpage.

The USDA does not require a medical statement for modified meals that meet the SFSP meal patterns. For example, a lunch that substitutes cheese for tuna fish meets the SFSP meal patterns because both food items are from the meat/meat alternates component. SFSP meals and snacks with optional modifications for children without disabilities are eligible for reimbursement, regardless of whether the SFSP sponsor obtains a medical statement. However, the CSDE recommends obtaining a medical statement to ensure clear communication between families and SFSP sponsors about the appropriate meal modifications for the child.

Milk substitutes for children without disabilities

The SFSP meal patterns do not allow milk substitutes for children whose dietary restriction is not related to a disability. Examples of beverages that cannot be substituted for milk include juice; water; and nondairy milk (such as almond milk, soy milk, and rice milk). Meals and snacks for children without disabilities are not reimbursable if they contain any of these beverages in place of milk.



Procured Meals

Federal regulations specifically prohibit disability discrimination through contractual means, included vended contracts. SFSP sponsors must make accommodations for children with disabilities, regardless of whether the sponsor:

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

When a FSMC operates summer meals or the SFSP sponsor obtains meals and snacks from a vendor, the SFSP sponsor must address the issue of meal modifications. The CSDE recommends that the contract developed with the FSMC or vendor specifies the SFSP sponsor's requirements for

Guidance for Meal Modifications in the SFSP

meal modifications. SFSP sponsors 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 SFSP sponsor, not the FSMC or vendor, is ultimately responsible for complying with the USDA’s regulations for the SFSP, including meal modifications for children 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 “[Contracts in the SFSP](#)” section of the CSDE’s Food Service Management Company Contracts webpage.

Summary of Requirements

Table 2 summarizes the requirements for meal modifications in the SFSP.

| Table 2. Summary of requirements for meal modifications in the SFSP | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------|
| Criteria | Disability ¹ | No disability ² |
| Modification required | Yes ³ | No |
| Medical statement required | Yes ⁴ | No ⁴ |
| Modified meals must meet SFSP meal patterns | No | Yes |
| Nondairy milk substitutes allowed (e.g., soy milk, almond milk, and rice milk) | Yes ³ | No |
| ¹ “Disability” means that the child has a physical or mental impairment that restricts his or her diet. ² Examples of situations that are not related to a disability include meal modification requests for personal food preferences, religious or moral convictions, and general health concerns. ³ Modifications must be based on the child’s medical statement signed by recognized medical authority, i.e., physician, physician assistant, doctor of osteopathy, or APRN. ⁴ The USDA does not require a medical statement for modified meals and snacks that meet the SFSP meal patterns. The CSDE recommends obtaining a medical statement to ensure clear communication between parents/guardians and the SFSP sponsor about the appropriate meal modifications for the child. | | |



Guidance for Meal Modifications in the SFSP

Resources

Americans with Disabilities Act (ADA) (U.S. Department of Justice, Civil Rights Division):

<https://www.ada.gov/>

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

<https://www.gpo.gov/fdsys/pkg/CFR-2003-title7-vol1/xml/CFR-2003-title7-vol1-sec15b-3.xml>

Crediting Foods in the SFSP (Documents/Forms section of CSDE's SFSP webpage):

<https://portal.ct.gov/SDE/Nutrition/Summer-Food-Service-Program/Documents>

Food Allergy Resources (CSDE):

<https://portal.ct.gov/SDE/Nutrition/Special-Diets-in-School-Nutrition-Programs/Documents#FoodAllergies>

Meal Modifications for Special Diets in the SFSP (CSDE's SFSP webpage):

<https://portal.ct.gov/SDE/Nutrition/Summer-Food-Service-Program#MealModifications>

Meal Patterns for the SFSP (CSDE's SFSP webpage):

<https://portal.ct.gov/SDE/Nutrition/Summer-Food-Service-Program#MealPatterns>

Medical Statement Form: Request for Meal Modifications in the SFSP (CSDE):

<https://portal.ct.gov/-/media/SDE/Nutrition/SFSP/MealPattern/MealModificationRequestSFSP.doc>

Nutrition Guide: Summer Food Service Program (USDA):

https://fns-prod.azureedge.net/sites/default/files/resource-files/USDA_SFSP_NutritionGuide.pdf

Resource List for Special Diets in Child Nutrition Programs (CSDE):

<https://portal.ct.gov/-/media/SDE/Nutrition/Resources/ResourcesSpecialDiets.pdf>

Resources for Special Diets in Child Nutrition Programs (CSDE webpage):

<https://portal.ct.gov/SDE/Nutrition/Special-Diets-in-School-Nutrition-Programs/Documents>

Section 504 of the Rehabilitation Act of 1973 (Office for Civil Rights, U.S. Department of Health and Human Services):

<https://www.hhs.gov/sites/default/files/knowyourrights504adafactsheet.pdf>

SFSP Regulations 7 CFR 225 (USDA):

<https://www.fns.usda.gov/part-225%E2%80%94summer-food-service-program>

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

<https://www.fns.usda.gov/modifications-accommodate-disabilities-SFSP-and-sfsp>

Guidance for Meal Modifications in the SFSP



For more information, visit the [Meal Modifications for Special Diets](#) section of the CSDE's [SFSP](#) website or contact the [Summer Meals staff](#) in the Connecticut State Department of Education, Bureau of Health/Nutrition, Family Services and Adult Education, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103-1841.

This document is available at <https://portal.ct.gov/-/media/SDE/Nutrition/SFSP/MealPattern/MealModificationGuidanceSFSP.pdf>.

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- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

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