Special Diet Statement

Why am I being asked to fill out this form?

Institutions or organizations who sponsor and operate a federally funded Child Nutrition Program must make reasonable substitutions to meals and/or snacks on a case-by-case basis for participants who are considered to have a disability that restricts their diet.* According to the ADA Amendments Act, most physical and mental impairments that substantially limit or affect one or more major life activities or bodily functions will constitute a disability.

Sponsors <u>are not</u> required to accommodate special dietary requests that are not a disability. This includes requests related to religious or moral convictions or personal preference. If these requests are accommodated, sponsors must ensure that all USDA meal pattern and nutrient requirements are met.

This form must be completed by a licensed physician, physician assistant, or an advanced practice registered nurse, such as a certified nurse practitioner. **Updates to this form are required only when a participant's needs change**.

Note to Districts/Schools: Parents/Guardians may provide a written request for lactose-free milk without a physician's signature. Lactose-free milk served must meet meal pattern requirements for the program.

Submit this completed special diet statement to:	
i ai ricihatif ililoLWgfION:	
Participant's Full Name:	Today's Date:
Date of Birth:	
Name of School/Center/Site Attended:	
Parent/Guardian Name:	
Home Phone Number:	Work Phone Number:
Required Information: Dietary Accommod	
1. List the food to be avoided:	
2. Briefly explain how exposure to this food affects th	e participant:
3. List foods to be omitted and substituted. Attach a s	heet with additional instructions as needed
Foods to be Omitted	Foods to be Substituted
Additional Information	
☐ Texture Modification: ☐ Pureed ☐ Ground ☐	Bite-Sized Pieces Other:
Tube Feeding Formula Name:	bite-sized Fieces Other:
Administering Instructions:	
Oral Feeding: No Vos If you specify for the	
Other Dietem Madification Administration	s (Describe):
L Outer Dietary Modification or Additional Instruction	s(Describe)

^{*}School Nutrition Program -7 CFR 210.10(m), Child and Adult Care Food Program - 7 CFR 226.20 (g), Summer Food Service Program - 7 CFR 225.16(f)(4).

Required Signature

This form must be signed by a licensed physicial, physician should keep a copy of this document in his/her records a certified nurse practitioner. The medical person signing it should keep a copy of this document in his/her records a certified nurse practitioner. Date: Clinic/Hospital: Clinic/Hospital:	This form must be signed by a licensed	physician, physician assistant, or advanced practice registered nurse such as
Clinic/Hospital:	a certified nurse practitioner. The medi-	cal person signing it should keep a copy of this document.
Clinic/Hospital:	Prescribing Authority Credentials (print)	:
Voluntary Authorization Note to Parent(s)/Guardian(s)/Participant: You may allow the director of the school/center/site to talk with the medical person about this Special Diet Statement by signing the Voluntary Authorization section: In accordance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Family Educational Rights and Privacy Act I hereby authorize (physician/medical authority name) to release such protected health information as is necessary for the specific purpose of Special Diet information to (program name) and I consent to allow the physician/medical authority to freely exchange the information listed on this form and in their records concerning me, with the program as necessary. I understand that I may refuse to sign this authorization without impact on the eligibility of my request for a special diet for me. I understand that permission to release this information will expire on (date). This information is to be released for the specific purpose of Special Diet information. The undersigned certifies that he/she is the parent, guardian, authorized representative of the participant listed on this document and has the legal authority to sign on behalf of that participant.	Signature:	Clinic/Hospital:
Note to Parent(s)/Guardian(s)/Participant: You may allow the director of the school/center/site to talk with the medical person about this Special Diet Statement by signing the Voluntary Authorization section: In accordance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Family Educational Rights and Privacy Act I hereby authorize (physician/medical authority name) to release such protected health information as is necessary for the specific purpose of Special Diet information to	Phone Number:	Fax Number:
In accordance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Family Educational Rights and Privacy Act I hereby authorize	Voluntary Authorization	
In accordance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Family Educational Rights and Privacy Act I hereby authorize	Note to Parent(s)/Guardian(s)/Particip	ant: You may allow the director of the school/center/site to talk with the Statement by signing the Voluntary Authorization section:
Parent/Guardian:Date:	In accordance with the provisions of the Family Educational Rights and Privacy (physician/medical authority name) to purpose of Special Diet information to the physician/medical authority to free concerning me, with the program as not impact on the eligibility of my request information may be rescinded at any permission to release this information for the specific purpose of Special Diet authorized representative of the part that participant.	he Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Act I hereby authorize
OR Participant's Signature (Adult Day Care ONLY):	Parent/Guardian:	

Non-Discrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the <u>USDA Program Discrimination Complaint Form</u> (https://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <u>How to File a Complaint</u> (https://www.usda.gov/oascr/how-to-file-a-program-discrimination-complaint), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

Mail: U.S. Department of Agriculture
 Office of the Assistant Secretary of Civil Rights
 1400 Independence Avenue, SW
 Washington, D.C. 20250-9410

2. fax: (202) 690-7442; or

3. email: program.intake@usda.gov

This institution is an equal opportunity provider.



Understanding Special Diet Accommodations for Child Nutrition Programs

Helping schools, sponsors* and providers understand accommodations for participants who request a special diet.

Table of Contents

HOW TO ACCOMMODATE SPECIAL DIETS IN CHILD NUTRITION PROGRAMS	1-6
What are the Special Diet Requirements for Child Nutrition Programs?	
What is a Dietary Preference?	
What is a Reasonable Accommodation?	
Creating an Integrated Environment	
Steps for Implementing a Plan	
	3
What Documentation is Required?	4-5
Special Diet Statement (Form)	
School Nutrition Program Considerations	
BEVERAGE OPTIONS IN USDA CHILD NUTRITION PROGRAMS	7-9
School Nutrition Programs	7
Child and Adult Care Food Program	8
Summer Food Service Program.	9
Summer Food Service Program	
MILK SUBSTITUTES	10

^{*} The term "sponsor" used in this guidebook refers to school districts, institutions, child care providers, and family day care home sponsors participating in USDA Child Nutrition Programs (CNP) including the National School Lunch Program (NSLP), School Breakfast Program (SBP), Child and Adult and Care Food Program (CACFP), and the Summer Food Service Program (SFSP).

Special Diet Requirements for Child Nutrition Programs

Requirements: Organizations that operate a federally funded Child Nutrition Program (CNP) must make reasonable substitutions to meals and/or snacks for participants who are considered to have a disability or medical need that restricts their diet. This is done on a case-by-case basis.

The most important thing for sponsors should be working together with families to ensure equal access to program benefits for participants with disabilities.

What Defines a Disability?

The Americans with Disabilities Act (ADA) Amendments Act of 2008 made important changes to the term disability to include any person with a physical or mental impairment that substantially limits one or more major life activities, including major bodily functions.

- Major life activities include, but are not limited to: caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, bending, speaking, breathing, learning, reading, and concentrating.
- Major bodily functions include but are not limited to: functions of the immune system, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

Accommodation requests for a disability must be honored.

What Defines a Dietary Preference?

Dietary preferences **are not** considered medical conditions or disabilities and do not need to be accommodated.

These could include:

- Personal lifestyle choices (such as vegan, vegetarian, or organic)
- Religious choices (such as eliminating pork, beef, or eggs)
- General health concerns (such as a preference that a child eat a glutenfree diet because a parent believes it is better for the child)

If a sponsor chooses to accommodate a request due to a dietary preference, then they must ensure all meal pattern requirements are met for the meal to be eligible for reimbursement.

For More Information:

Accommodating Children with Disabilities in School Meal Programs (USDA Guide) SP 40-2017

Accommodating Children with Disabilities in School Meal Programs Questions and Answers (USDA memo SP- 26-2017)

Modifications to Accommodate Disabilities in the Child and Adult Care Food Program and Summer Food Service
Program (USDA memo's CACFP 14-2017, SFSP 10-2017)

Special Diet Requirements for Child Nutrition Programs

What is a Reasonable Modification?

The modification provided does not have to be the exact modification requested.

- Sponsors are not required to provide the specific brand names requested.
- Meal accommodations do not need to mirror items being substituted.
 - Example: If lasagna is on the menu, you are not required to provide a gluten free lasagna option for a participant with Celiac disease; you could provide beans and rice instead.
- Sponsors are required to provide the participant a meal that is safe for them to eat, allowing them equal opportunity to participate in the program, but it does not need to be a different meal each day. It is best to provide a variety, but some diets are too restrictive and it may not be possible.
- To the extent possible, the meal or snack provided should follow the applicable USDA meal pattern.

Making Everyone Welcome at Meals (Integrated Environment):

Sponsors are required to serve participants with special diet requests due to medical need in the most inclusive way.

Example: a participant cannot be required to sit in another room during meal services.

However, always balance safety with stigma when accommodating a severe anaphylactic food allergy. A separate table may be necessary to control exposure to the allergen.

Steps to Get Started:

☐ Step 1: Develop procedures for:

- Parents, guardians, and participants to request special diet accommodations
- Getting required documentation
- Providing final written decision of the request
- Determining reasonable modifications
- Providing notice of nondiscrimination and accessible services, as outlined in 7 CFR 15b.7
- Receiving grievances and promptly resolving complaints

☐ Step 2: Train staff and volunteers on:

- All special diet procedures
- Legal and confidentiality requirements

☐ Step 3: Assign a key staff person

- All child nutrition programs with 15 or more employees must designate a Section 504 Coordinator who is responsible for ensuring compliance with all disability requirements.
- All child nutrition programs with less than 15 employees must still designate someone who can provide technical assistance for participants with special diet requests due to a medical need.

☐ Step 4: Use a team approach

- Create a team (including those involved with providing special diet accommodations and others trained in this area, such as food service staff, a registered dietitian and/or public health nurse).
- This team will work with the participant or their parent or guardian to review the request and develop a solution as quickly as possible.
- The team should develop policies and practices that allow for the special diet requests they most commonly encounter to be quickly and consistently addressed.
- The team should be advised that any medical information they get must be kept confidential.

What Documentation is Required?

A **Special Diet Statement** is required if the special diet request results in a meal or snack that **does not fully meet meal pattern requirements.**

A special diet statement must have the following information to be considered complete:

- ✓ Food or allergen to be avoided
- ✓ Explanation of how exposure to the food or allergen would affect the participant
- √ Food(s) to be substituted
- ✓ Completed and signed by a state licensed Physician (MD or DO), Physician Assistant (PA) or an Advanced Practice Care Nurse (such as a Nurse Practitioner NP)

A Special Diet Statement template is available on the Michigan Department of Education website. Other documentation, such as a doctor's prescription, may be accepted if it contains all the required information noted above.

Once a correct, complete Special Diet Statement is on file, meals with accommodations may be claimed for reimbursement, even if the meal or snack does not meet meal pattern requirements.

What if the Special Diet Statement is not clear?

If the Special Diet Statement is not clear or does not fully explain the change needed, the sponsor must get clarification from a parent, guardian, or the medical personnel to provide a safe meal.

Before consulting with the medical personnel directly, sponsors must have the parent or guardian sign the Voluntary Authorization Section on the Special Diet Statement.

Sponsors may provide meal modifications to the best of their ability while waiting for a correctly completed Special Diet Statement to be provided for the participant.

The Special Diet Statement <u>does not</u> need to be updated annually if the information still accurately reflects the participant's needs.

For More Information:

- Food and Drug Administration's "Food Allergies: What you need to know"
- Institute for Child Nutrition's Food Allergy Fact Sheets
- Food Allergy Research & Education: www.foodallergy.org

Special Diet Statement

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This form must be completed by a licensed physician, physician assistant, or an advanced practice registered nurse, such as a certified nurse practitioner. **Updates to this form are required only when a participant's needs change**.

Note to Districts/Schools: Parents/Guardians may provide a written request for lactose-free milk without a physician's signature. Lactose-free milk served must meet meal pattern requirements for the program.

signature. Eactose-free fillik served fridst frieet friedripa	ttern requirements for the program.	
Submit this completed special diet statement to:		
Participant Information: Participant's Full Name:	Today's Date:	
Date of Birth:	4-48-0	
Name of School/Center/Site Attended:		
Parent/Guardian Name:		
Home Phone Number:	Work Phone Number:	
Required Information: Dietary Accommod	ation	
1. List the food to be avoided:		
2. Briefly explain how exposure to this food affects th	e participant:	
3. List foods to be omitted and substituted. Attach a s	heet with additional instructions as needed.	
Foods to be Omitted	Foods to be Substituted	
Additional Information		
☐ Texture Modification: ☐ Pureed ☐ Ground ☐	Bite-Sized Pieces Other:	
Tube Feeding Formula Name:		
Administering Instructions:		
Oral Feeding: No Yes If yes, specify foods:		
Other Dietary Modification or Additional Instruction	ns (Describe):	

^{*}School Nutrition Program -7 CFR 210.10(m), Child and Adult Care Food Program - 7 CFR 226.20 (g), Summer Food Service Program - 7 CFR 225.16(f)(4).

Required Signature

Prescribing Authority Credentials (print):	Date:
Signature:	Clinic/Hospital:
	Fax Number:
Voluntary Authorization	
	ent: You may allow the director of the school/center/site to talk with the statement by signing the Voluntary Authorization section:
	e Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Act I hereby authorize
	release such protected health information as is necessary for the specific
the physician/medical authority to free	(program name) and I consent to allow ly exchange the information listed on this form and in their records
the physician/medical authority to free concerning me, with the program as ne impact on the eligibility of my request f	ly exchange the information listed on this form and in their records ecessary. I understand that I may refuse to sign this authorization without for a special diet for me. I understand that permission to release this
the physician/medical authority to free concerning me, with the program as ne impact on the eligibility of my request finformation may be rescinded at any tipermission to release this information for the specific purpose of Special Diet	ly exchange the information listed on this form and in their records cessary. I understand that I may refuse to sign this authorization without

Non-Discrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the <u>USDA Program Discrimination Complaint Form</u> (https://www.ocio.usda.gov/sites/default/files/docs/2012/Complain_combined_6_8_12.pdf), (AD-3027) found online at: <u>How to File a Complaint</u> (https://www.usda.gov/oascr/how-to-file-a-program-discrimination-complaint), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- 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.

This institution is an equal opportunity provider.

School Nutrition Program Considerations

How does Offer Versus Serve (OVS) work with Special Dietary concerns?

Offer Versus Serve (OVS) allows students to decline some of the food offered in a reimbursable lunch or breakfast. The goals of OVS are to reduce food waste and to let students choose the foods they want to eat. For more information, see the USDA Offer Versus Serve Manual.

Schools operating OVS must make sure children with special dietary needs due to a medical need can select all required food components for the meal.

<u>Example</u>: A child who has Celiac disease or a gluten intolerance must have a choice of a grain item that is gluten-free. The school may not use OVS to eliminate a specific food component for this child. The school must offer a grain substitute for a child who cannot eat gluten.

What if a student has an Individualized Education Program (IEP)?

Documentation: If the child's IEP or 504 Plan includes the same information that is required in a Special Diet Statement, it is not necessary for the school to get a separate Special Diet Statement.

Accommodations: USDA does not require schools to provide meals to children with special dietary needs due to a medical need beyond the meals provided to other children. For instance, if the school does not have a breakfast program, schools are not required to begin participating in the School Breakfast Program or to provide a breakfast meal exclusively for a child with special dietary needs.

However, any nutrition-related services included in a child's IEP or 504 Plan deemed necessary for the child to receive a free appropriate public education must be provided by the school. In the example above, if the child's IEP states they need a breakfast meal, this must be provided, even if the school does not participate in the School Breakfast Program.

How do I cover the costs?

Schools will not receive additional reimbursement to cover the extra costs sometimes associated with providing special diet accommodations.

If the special diet request is due to a medical need, the school cannot charge the student more than they charge other students for the same meal or snack. However, schools may use funds from the nonprofit school food service account, the general fund, or special education funds (if specified in the child's IEP) to cover these additional costs.

For More Information:

- Accommodating Children with Disabilities in School Meal Programs (USDA memo SP-40-2017)
- Accommodating Children with Disabilities in School Meal Programs Questions and Answers (USDA memo SP-26-2017)
- Modifications to Accommodate Disabilities in School Meal Programs (USDA memo SP-59-2016)

Beverage Options in School Nutrition Programs

NOTE: The guidance provided below does not apply when a complete Special Diet Statement is submitted and on file for a participant. In that case, the sponsor must accommodate the diet ordered. If the diet ordered for a meal or snack does not meet meal pattern requirements, the sponsor can still claim the meal or snack for reimbursement. School Food Authorities participating in the Child and Adult Care Food Program, At-Risk Afterschool Meals, or Summer Food Service Program need to follow guidance for whichever meal pattern is being used.

Program	Fluid Milk Substitute (FMS)	Non-Dairy Milk Alternatives (e.g., Almond, Coconut, Rice, a non-creditable sov beverage)	Lactose-Free Milk	Whole Milk/2% Milk	Water & Juice
School Nutrition	Allowed.	Not allowed.	Allowed.	Not allowed.	Not allowed.
Programs—School Breakfast/National School Lunch Program, Special Milk Program	School Food Authorities opting to provide an FMS that meets USDA's criteria must get a written request from a parent, guardian, or medical authority that includes the medical or other special dietary reason for the substitution. Note: only an unflavored FMS can be offered to children 1 through 5 years old.	A non-dairy milk alternative that is not nutritionally equivalent to cow's milk cannot be used as a replacement for milk in a reimbursable meal. However, a non-dairy milk alternative may be offered as an extra beverage (that will not credit) but must be included in the total weekly averages for calories, sodium, and fat, ensuring that the maximums for each are not exceeded.	Lactose-free milk is cow's milk that contains no lactose or milk sugar. Since lactose-free milk is cow's milk, it can be served as milk in a reimbursable meal or snack. School Food Authorities must provide a lactose-reduced or lactose-free milk option to a student when a written request is submitted by a parent, guardian, or medical authority. A Special Diet Statement is not required.	However, whole milk or 2% milk may be offered as an extra beverage (that will not credit) but must be included in the total weekly averages for calories, sodium, and fat, ensuring that the maximums for each are not exceeded. If serving children 12-23 months of age, follow the guidance under CACFP for the service of whole milk and 2% milk.	Water or 100% juice cannot be used as a replacement for milk in a reimbursable meal. However, water or 100% juice may be offered as an extra beverage (that will not credit) but must be included in the total weekly averages for calories, sodium, and fat, ensuring that the maximums for each are not exceeded. USDA requires that water be available during meal services.

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Beverage Options in the Child and Adult Care Food Programs

NOTE: The guidance provided below does not apply when a complete Special Diet Statement is submitted and on file for a participant. In that case, the sponsor must accommodate the diet ordered. If the diet ordered for a meal or snack does not meet meal pattern requirements, the sponsor can still claim the meal or snack for reimbursement. School Food Authorities participating in the Child and Adult Care Food Program, At-Risk Afterschool Meals, or Summer Food Service Program need to follow guidance for whichever meal pattern is being used.

Reminder: Only unflavored beverages which includes cow's milk, fluid milk substitutes, lactose-free milk, etc., may be offered to children 5 years old and younger. A flavored beverage may be offered to children age 6 and older.

uice	% juice das a or
Water & Juice	Not allowed. Water or 100% juice cannot be used as a replacement for milk in a reimbursable meal. However, USDA requires that water be offered throughout the day to participants. 100% juice can be offered only once in a day across all approved meal services offered.
Whole Milk	Allowed for children 12-23 months of age. Unflavored whole milk must be served to toddlers 12 through 23 months of age. Iron- fortified formula may be served to children between the ages of 12 and 13 months to help with the transition to whole milk. A center or provider may elect to offer children age 24 to 25 months of age (for only one month) unflavored whole milk to help with their transition to unflavored 1% or skim milk.
Lactose-Free Milk	Allowed. Lactose-free milk is cow's milk that contains no lactose or milk sugar. Since lactose-free milk is cow's milk, it can be served as milk in a reimbursable meal or snack. Parents/guardians do not need to submit a written request and schools/sponsors/providers can choose to provide or not provide a lactose-free milk. If the sponsor or provider chooses not to supply the lactose-free milk, the parent or guardian can supply this beverage and the sponsor or provider may claim all meals/snacks that include the parent-provided lactose-free or reduced beverage for reimbursement.
Non-Dairy Milk Alternatives (e.g., Almond, Coconut, Rice, a non-creditable soy beverage)	Not allowed. A non-dairy milk alternative that is not nutritionally equivalent to cow's milk cannot be used as a replacement for milk in a reimbursable meal or snack. Sponsors or providers may offer a non-dairy milk alternative as an extra beverage, but it cannot credit as cow's milk in a reimbursable meal or snack. In addition, sponsors may not use CACFP reimbursement to pay for any non-dairy milk alternate. A parent or guardian can choose to supply a non-dairy milk alternative, but the center or provider can only claim meals/ snacks for the participant if there is a Special Diet Statement on file for the participant that supports the need for this beverage.
Non-Dair Milk Substitute (FMS) (e.g., Almo	CACEP sponsors or providers choosing to provide an FMS that meets USDA's criteria must get a written request from a parent, guardian, or medical authority that includes the medical or other special dietary reason for the substitution. If the sponsor or provider chooses not to provide an FMS that may provide an FMS that meets USDA's criteria and the sponsor or provider may claim all meals/snacks that include the parent-provided FMS for reimbursement.
Program	Child and Adult Care Food Program (CACFP)

Beverage Options in the Summer Food Service Program

reimbursement. accommodate the diet ordered. If the diet ordered for a meal or snack does not meet meal pattern requirements, the sponsor can still claim the meal or snack for NOTE: The guidance provided below does not apply when a complete Special Diet Statement is submitted and on file for a participant. In that case, the sponsor must

whichever meal pattern is being used. School Food Authorities participating in the Child and Adult Care Food Program, At-Risk Afterschool Meals, or Summer Food Service Program need to follow guidance for

Allowed. Allowed. Allowed. Allowed. Allowed. Allowed. Allowed. Allowed. Allowed. Sponsors may offer whole or 2% milk only if following the SFSP milk, it can be served as meal pattern, though low-fat/fat-free options are encouraged.	Program	Fluid Milk Substitute (FMS)	Non-Dairy Milk Alternatives (e.g., Almond, Coconut, Rice, a non-creditable soy beverage)	Lactose-Free Milk	Whole Milk/2% Milk	Water & Juice
Only School Food Authorities that follow the School Breakfast/National School Lunch Program meal patterns for SFSP may offer an FMS, upon request, that meets USDA standards and credit it as milk. Not Allowed. Non-School Food Authority sponsors may not offer an FMS to replace milk in a reimbursable meal or snack. However, an FMS can be offered as an extra food item in the meal but may not be credited as milk. Also, SFSP funds cannot be used to purchase the FMS.	Summer Food	Allowed.	Not Allowed.	Allowed.	Allowed.	Not Allowed.
that follow the School Breakfast/National School Lunch Program meal patterns for SFSP may offer an FMS, upon request, that meets USDA standards and credit it as milk. Not Allowed. Non-School Food Authority sponsors may not offer an FMS to replace milk in the meal but may not be credited as milk. Also, SFSP funds cannot be used to purchase the FMS. as an extra item, but may not use SFSP may not use SFSP lactose-free milk sugar. Since milk com/s lactose-free milk is cow/s following the SFSP milk, it can be served as milk in a reimbursable meal or snack. However, an FMS can be offered as an extra food item in the meal but may not be used to purchase the FMS.	Service Program	Only School Food Authorities	Sponsors may offer milk alternatives	Lactose-free milk is cow's	Sponsors may	Water or juice cannot
them as milk and may not use SFSP lactose or milk sugar. Since reimbursement to pay for the cost of reimbursement to pay for the cost of lactose-free milk is cow's milk, it can be served as milk in a reimbursable meal or snack. Authority offer an lor snack. Can be stood item ay not be stood to seed to	(oror)	that follow the School	as an extra item, but may not credit	milk that contains no	offer whole or 2%	be used as a
reimbursement to pay for the cost of ran FMS, the product. The product.		Breakfast/National School	them as milk and may not use SFSP	lactose or milk sugar. Since	milk only if	replacement for milk in
the product. the product. milk, it can be served as though low-fat/fat-free options are encouraged. milk in a reimbursable meal or snack. meal or snack. can be a food item sy not be lso, SFSP sed to meal or snack. milk, it can be served as though low-fat/fat-free options are encouraged. meal or snack. encouraged.		Lunch Program meal patterns	reimbursement to pay for the cost of	lactose-free milk is cow's	following the SFSP	a reimbursable meal or
milk in a reimbursable meal or snack. free options are encouraged. Authority offer an k in a lor snack. can be a food item sy not be lso, SFSP sed to		for SFSP may offer an FMS,	the product.	milk, it can be served as	meal pattern,	snack.
nd credit it meal or snack. Authority offer an lk in a l or snack. I or snack. can be sood item ay not be lso, SFSP sed to		upon request, that meets		milk in a reimbursable	though low-fat/fat-	
Authority offer an lk in a l or snack. can be so food item ay not be lso, SFSP sed to		USDA standards and credit it		meal or snack.	free options are	
Non-School Food Authority sponsors may not offer an FMS to replace milk in a reimbursable meal or snack. However, an FMS can be offered as an extra food item in the meal but may not be credited as milk. Also, SFSP funds cannot be used to purchase the FMS.		as milk.			encouraged.	
Non-School Food Authority sponsors may not offer an FMS to replace milk in a reimbursable meal or snack. However, an FMS can be offered as an extra food item in the meal but may not be credited as milk. Also, SFSP funds cannot be used to purchase the FMS.		Not Allowed.				
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purchase the FMS.		credited as milk. Also, SFSP				
purchase the FMS.		funds cannot be used to		· ·		
		purchase the FMS.				

Creditable Non-Dairy Beverages (Milk Substitution)



What is a creditable non-dairy beverage?

A creditable non-dairy beverage is a beverage that meets USDA's nutrient standards for fluid milk substitutes (see table below). A list of creditable non-dairy beverages (certain soymilks) are provided on this page.

(1 cup cow's milk) (8 fluid oz.) Calcium 276 mg Protein 8 g Vitamin A 150 mcg Vitamin D 2.5 mcg Magnesium 24 mg Phosphorus 222 mg Potassium 349 mg Riboflavin .44 mg Vitamin B-12 1.1 mcg (ug)	Nutrients	Requirement per cup	
	(I cup cow's milk)	(8 fluid oz.)	^ 0%
	Calcium	276 mg	28%
	Protein	38	%91
	Vitamin A	150 mcg	%0 I
	Vitamin D	2.5 mcg	25%
	Magnesium	24 mg	%9
	Phosphorus	222 mg	23%
	Potassium	349 mg	%01
	Riboflavin	.44 mg	26%
0 - 0	Vitamin B-12	I.Imcg (μg)	%61

When served to children 1-5 years old, they must be unflavored. Non-dairy beverages are not required to be low-fat or fat-free.

To determine if a product not listed on this page is creditable:

- Compare product's nutrient amounts to amounts listed in table
 - If amounts are the same or more, the beverage is creditable

hemp, oat, and rice milks do not contain enough protein to be a Non-Creditable Non-Dairy Beverages: Almond, cashew, coconut, creditable non-dairy beverage. Water and juice are also not creditable non-dairy beverages. Non-creditable non-dairy beverages cannot be served as a milk substitution.

valid medical statement is not required fluid milk substitution request for the dietary reason for the substitution. A standards, but the request must be in participant which includes the special When there is a written and signed if the beverage meets nutrient writing. non-dairy beverage be served?

When can a creditable

Creditable Non-dairy Beverages:

Unflavored



Flavored Non-Dairy Beverages may only be served to children 6 years and older and adults

	Kikkoman Pearl Organic Soymilk Smart Creamy Chocolate	Westsoy wisser Original Plus Vanilla Soymilk
Flavored	Kikkoman Pearl Organic Soymilk Smart Creamy Vanilla	Sunrich Naturals Organic Vanilla Soymilk
	8th Continent Vanilla Soymilk	Ripple Vanilla or Chocolate Non-Soy Dairy Substitute

This institution is an equal opportunity provider.