Children with Disabilities and Special Dietary Restrictions

DEFINITIONS OF DISABILITY AND OF OTHER SPECIAL DIETARY NEEDS Rehabilitation Act of 1973 and the Americans with Disabilities Act

Under Section 504 of the *Rehabilitation Act of 1973*, and the *Americans with Disabilities Act* (ADA) of 1990, a "person with a disability" means any person who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment. The term "physical or mental impairment" includes many diseases and conditions, a few of which may be:

orthopedic, visual, speech, and hearing	metabolic diseases, such as diabetes or
impairments;	phenylketonuria (PKU)
cerebral palsy;	Heart disease
epilepsy;	food anaphylaxis (severe food allergy)
muscular dystrophy;	mental retardation
multiple sclerosis	emotional illness
cancer	drug addiction and alcoholism
specific learning disabilities	HIV disease
tuberculosis	

Please refer to the Acts noted above for a more detailed explanation.

<u>Major life activities covered by this definition include caring for one's self, eating, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.</u>

Individuals with Disabilities Education Act

The term child with a "disability" under Part B of the *Individuals with Disabilities Education Act* (IDEA) means a child evaluated in accordance with IDEA as having one or more of the recognized thirteen disability categories and who, by reason thereof, needs special education and related services.

IDEA recognizes thirteen disability categories which establish a child's need for special education and related services. These disabilities include:

Autism	Deaf-blindness
Deafness or other hearing impairments	Mental Retardation
Orthopedic impairments	Emotional disturbance
Specific learning disabilities	Speech or language impairment
Traumatic brain injury	Multiple disabilities
Other health impairments due to chronic or acute	Visual impairment; including blindness, which
health problems, such as asthma, diabetes,	adversely affects a child's educational
nephritis, sickle cell anemia, a heart condition,	performance.
epilepsy, rheumatic fever, hemophilia, leukemia,	
lead poisoning, tuberculosis;	

Attention deficit disorder or attention deficit hyperactivity disorder may fall under one of the thirteen categories. Classification depends upon the particular characteristics associated with the disorder and how the condition manifests itself in the student, which determines the category.

The Individualized Education Program or IEP means a written statement for a child with a disability that is developed, reviewed, and revised in accordance with the IDEA and its implementing regulations. The IEP is the cornerstone of the student's educational program that contains the program of special education and related services to be provided to a child with a disability covered under the IDEA.

NOTE: Some states supplement the IEP with a written statement specifically designed to address a student's nutritional needs. Other states employ a "Health Care Plan" to address the nutritional needs of their students. For ease of reference, the term "IEP" is used to reflect the IEP as well as any written statement designating the required nutrition services. When nutrition services are required under a child's IEP, school officials need to make sure that school food service staff is involved early on in decisions regarding special meals.

Physician's Statement for Children with Disabilities

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

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

The form (Figure 1), in Appendix A, is adapted from the USDA guidance:

<u>Accommodating Children with Special Needs: Guidance for School Food Service Staff</u>,
and may be used to obtain the required information from the physician

Reference: Accommodating Children with Special Needs: Guidance for School Foods Service Staff, United States Department of Food and Nutrition Service, Fall 2001; http://www.fns.usda.gov/cnd/Guidance/default.htm

Food Allergy Management

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

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

Other Special Dietary Needs

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

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

Eating and Feeding Evaluation: Children with Special Needs

FIGURE 1: .PART A	Simulen wit	ii opeciai necus	•		
Student's Name		Age			
Name of School	Grade Level	Classroom			
Name of School	Glade Level Glassiooni				
Described house of the billion of the second		h., 46 - 48 - 48 994 .	1.77	LAI	
Does the child have a disability ? If Yes, describe the major life a	activities affected	by the disability.	Yes	No	
				No	
Does the child have special nutritional or feeding needs? If Yes, complete Part B of this form and have it signed by a licensed physician.			Yes	No	
If the child is not disabled, does the child have special nutritional or feeding needs? If Yes, complete				No	
Part B of this form and have it signed by a recognized medical authority. If the child does not require special meals, the parent can sign at the bottom and return the form to the school food service.					
PART E		eturn the form to the si	C11001 1000	i service.	
List any dietary restrictions or special diet.					
List any allergies or food intolerances to avoid.					
List foods to be substituted.					
List foods that need the following change in texture. If all foods no	eed to be prepare	ed in this manner indi	cate "All "		
	ood to be propart	od iii tiilo iiidiiiioi, iiidi	outo 7111.		
Cut up or chopped into bite size pieces:					
Finely ground:					
Pureed:					
List any special equipment or utensils that are needed.					
Indicate any other comments about the child's eating or feeding p	atterns.				
, , , , , , , , , , , , , , , , , , , ,					
Parent's Signature				Date:	
Parent's Printed Name and Phone Number					
Physician or Medical Authority's Signature				Date:	
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Dhysician or Modical Authority's Printed Name and Dhane Number	or.				
Physician or Medical Authority's Printed Name and Phone Number	į.				

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