



COUNTY OF SAN BERNARDINO
PRESCHOOL SERVICES DEPARTMENT
POLICY

NO. 01 NS ISSUE 2

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EFFECTIVE: 11-25-13
Updated

SUBJECT:

Procedure for Children with Food Allergies, Special Feeding Needs, or Special Diets

APPROVED: 11-25-13

BY: Diana Alexander Director

PURPOSE

To provide dietary substitutions for children with food allergies/chronic diseases and children with religious/cultural preferences

POLICY

Special diets are accommodated for Early Head Start/ Head Start children with food allergies or chronic diseases.

REFERENCE

Head Start Performance Standards 1304.23(b)(1),(C)(6)

PROCEDURE

I. Medical Based Diets

In order to determine if a child has a food allergy at enrollment Generalist will review:

- Medical History Profile
- Nutrition Survey
- Child's Physical
- Emergency Card

If an allergy is identified follow these instructions:

Stage	Description
1	<p>Generalists will:</p> <ul style="list-style-type: none"> • Provide parent with Medical Statement for Food Allergy and Chronic Diseases and Food Allergy Questionnaire • Review Food Allergy Questionnaire • Refer families who require medication to Site Supervisor • Initiate nutrition referral when completed Medical Statement for Food Allergy and Chronic Disease is received • Send completed Medical Statement for Food Allergy and Chronic Disease, Food Allergy Questionnaire, and Allergy Test Report to Nutrition Specialist. • Notify Site Supervisor, Food Service Worker, and Nutrition Specialist of any children who have dropped from the program.
2	<p>Nutrition Specialist will:</p> <ul style="list-style-type: none"> • Review documents received • Provide Special Diet Instructions • Communicate details of Special Diet Instructions to Site Supervisor, Teacher, Food Service Worker, Program Quality Specialist, and parent when a child has multiple allergies. <p>Note: Children should not be enrolled until Special Menus have been provided by Nutrition Specialist</p>
3	<p>Site Supervisors will:</p> <ul style="list-style-type: none"> • Provide parents with medication forms and Epi-Pen Health Plan if needed • Make copies of Special Diet Instructions and Medical Statement for Food Allergy and Chronic Disease for Food Service Worker and classroom teacher • Notify Nutrition Specialist immediately of any child diagnosed with a food allergy after enrollment
4	<p>Food Service Worker will:</p> <ul style="list-style-type: none"> • Maintain a copy of Medical Statement for Food Allergy and Chronic Disease and Special Diet Instructions • Document daily substitutions on "Menu Substitution Log" • Secure allergy documents in a file folder marker "Confidential" • Ensure "Confidential" folder is available and labeled "Allergy List"
5	<p>Program Quality Specialist will:</p> <ul style="list-style-type: none"> • Ensure Site Supervisor and Food Service Worker have all needed food substitutions within two weeks

Note: Contact the Disabilities Service Manager and Regional Manager for all non-compliance issues.

II. Religious or Cultural Preference Diets

The following table should be used when special meal accommodations are needed for religious or cultural reasons:

Stage	Description
1	Generalist will: <ul style="list-style-type: none">• Review Nutrition Survey or Emergency Card to identify children requiring meal accommodations• Provide parent with Religious/Cultural Preference Form• Fax completed Religious/Cultural Preference Form
2	Nutrition Specialist will: <ul style="list-style-type: none">• Provide "Diet Instructions" for Site Supervisor and Generalist
3	Site Supervisor will: <ul style="list-style-type: none">• Make copies of Diet Instructions Religious/Cultural Preference Form for Food Service Workers and Classroom Teacher

III. Declining Participation in Food Program

Parents may choose to decline school meals due to religious reasons, severe allergies, or as directed by medical authority. Use the following table when a parent chooses to decline school meals:

Step	Action
1	Site Supervisor contacts Nutrition Specialist
2	Nutrition Specialist contacts parent for consultation
3	Site supervisor provides parent with Declining Participation in Child and Adult Care Food Program (CACFP) form Note: Form must be signed by parent and Site Supervisor
4	Site Supervisors provide the PSD CACFP Declining Food Program Letter to Parents
5	Site Supervisor provides copies of the Declining Participation in Child and Adult Care Food Program (CACFP) form to Food Service Worker and Nutrition Specialist Note: Original Declining Participation in Child and Adult Care Program (CACFP) form is to be kept in file.

Note: Teachers should not count a child that brings a meal from home on the Classroom Meal Count Form.