

## Child and Adult Care Food Program Menu Modification Guidelines

Parent/guardian requests a menu modification for their child. Discuss the modification request. Does the requested modification meet the CACFP meal pattern? NO YES Is accommodating the request required or optional? Non-Medical Non-Medical Food Allergy, Food Allergy, Personal Personal Intolerance, Intolerance, Major Preference Preference Major Bodily **Bodily Function Function Optional Optional** Required Provider Customer Provider Customer Required Service Decision Service Decision Required Required **Best Practice Best Practice Documentation Documentation Documentation Documentation** Participant Menu Modifications Participant Menu Participant Menu Participant Menu Form Sections 1, 2, and 3 Modifications Form Modifications Form Modifications Form signed by parent/guardian and Sections 1, 2, and 3 Sections 1 and 2 Sections 1 and 2 signed provider by parent/guardian and signed by signed by parent/guardian and parent/guardian and provider Medical Authority provider provider Documentation (or complete 'Request Timeline' for up to 6 months while waiting for the **Cannot Claim** medical note) Claiming Meals do not meet the meal pattern and there is Claiming can continue. no medical reason for the Claiming request. Claiming can continue with Claiming cannot **Monitoring Monitoring** all required documentation. continue. If no documentation: If no documentation: **Monitoring** Recordkeeping TA, Recordkeeping TA then CA **Monitoring** If no Participant Menu Do not disallow Modification form: Do not disallow meals. Recordkeeping TA, then CA. If claiming: Meal meals. Pattern CA. Meals If no medical disallowed. documentation: Meal Pattern CA. Meals disallowed.

Note: A Civil Rights finding is assigned if meals are not modified when required or if the modification is not reasonable or immediate.