



2.6 Nutrition Form Instruction Sheet



PURPOSE STATEMENT

The Nutrition Form documents each Head Start child's nutrition needs and preferences. This form is used for ages 3-5.

TIMELINE

- The Nutrition Form is completed prior to enrollment or no later than 45 days of a child's first day of attendance.
- The Nutrition Form is completed each year, even for returning families.

STAFF RESPONSIBLE

- Family Service Advocate, Home Visitor, Family Services Supervisor, Site Supervisor/Assistant Site Supervisor, Home-Based Supervisor, or other assigned staff

INSTRUCTIONS

- Complete the child's name and Date of Birth.
- Fill in responses to questions 1 and 2.
- Check a "YES" or "NO" box in response to questions 3-11.
- Questions 4 and 5 ask about children that require a special diet.
 - If the family answers YES, provide the parent/guardian with a copy of the appropriate **Request for Special Meals and/or Accommodations** form (2.8A or 2.8B).
 - **2.8A** form is to be used if the child is on a special diet for medical and/or disability conditions (such as high calorie diet, lactose intolerance, or severe food aversion). This form **must** be filled out by a health-care provider/physician (medical authority).
 - **2.8B** form is to be used for children consuming a vegetarian diet and/or if the parent/guardian is requesting a fluid milk substitution for their child. Soy milk will be provided instead.
 - 2.8B form **does not** require the approval and signature-of a health-care provider/physician. The person approving and signing for the request is the parent/guardian.
 - See 2.8A-B Request for Special Meals Instruction Sheet for details.



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- Questions 6 - 11: If parent/guardian answers "YES" to any, an explanation is needed in the comments section at the bottom of the form. Questions to ask the parent/guardian and document their answers in the comments, include:
 - Is this a current problem?
 - Is there something that we need to do or consider at the site?
 - Have you spoken to your doctor about this?
 - Would you like to speak to our Nutrition Coordinator about this?

Often issues that come up in questions 6 - 11 will be possible referrals to an outside agency after parent/guardian consents.

- Question 12 will require interviewing the parent/guardian to determine how frequently the child is eating foods from certain food groups. Staff explains the scale of 0-7 times a week and circles the number reported by the parent/guardian.
- Ensure all questions are answered. Once the form is completed, the staff member filling out the form and the parent/guardian **sign and date** the document at the bottom of the form.
- Nutrition information is entered in PROMIS per the PROMIS Record-Keeping SOP instructions.
- File the Nutrition Form in Section 2 of the Child File according to the Section 2 Table of Contents.