



SECTION 3

HEALTH & SAFETY POLICIES

3.6 Food and Nutrition Policy

Aim:

1. To ensure all children are provided with a nutritious and balanced diet
2. To ensure the provision of healthy meals, a social and learning experience, and an opportunity for conversation.
3. To promote children's self help and good eating skills.
4. To provide an eating environment that assists the transmission of family and multicultural values.
5. To promote oral health.

Background:

Good nutrition is of vital importance to young children. It helps them grow, develop and maintain healthy bodies. Childcare centres can contribute to the development of good eating habits by providing a variety of foods for children to taste and enjoy. These foods often become the basis for lifetime food choices. The Dietary Guidelines for Children and Adolescents¹ recommend that children eat a wide variety of nutritious foods, and that care is taken with children's food so that it is safe and hygienic.

For children in long day care, the food provided by the centre makes a significant contribution to their overall intake of energy, vitamins, and minerals. It is recommended that in each full day of care, each child is provided with at least 50% of their recommended daily intake for key nutrients and that these foods are based on the Dietary Guidelines for Children and Adolescents.

Process:

Food and drink provided by the Centre

1. The Centre provides all food requirements except babies' formulas.
2. Food provided is consistent with the Dietary Guidelines for Children and Adolescents in Australia (NHMRC, 2003). Menus aim to provide at least 50% of the recommended dietary intake for key nutrients for children as per recommendation by Start Right Eat Right principles.
3. The Centre's kitchen operates with a rotating menu that adheres to the guidelines of Start Right Eat Right. The menu is reviewed at staff meetings and changed seasonally. The director and the cook have attended SRER training course.
4. Parents are discouraged from sending food to the Centre with the children – unless it is for a specific dietary need. No food or drinks should be left in a child's bag at any time.
5. The Centre provides a morning tea of fresh fruit, lunch and an afternoon snack
6. Children who arrive at the Centre between 7am and 7.30 am are offered breakfast at a low cost or staff will prepare breakfast brought from home that is nutritionally sound. Children who are

in the Centre after 5pm are offered a late snack. Hungry children will be offered extra food, eg a slice of bread or piece of fruit if necessary

7. A wide variety of meals with varying textures are served from a range of different cultures.

8. All meals are low in fat, low in salt, and prepared with minimal added sugar. The Centre aims to minimize the use of preservatives and colouring additives in food.

9. Non-saturated oils are used for cooking.

10. The Centre aims to be "NUT FREE" which means that no nut based products are used within the Centre, nor should they be brought into the Centre at any time. Nutritional requirements are met with alternative foods. This policy is in place to protect the well being of children affected by allergic reactions to such products.

11. The Centre provides all meals and drinks to children when on excursions and outings.

12. All children are required to bring a clearly named water bottle each day. Children are encouraged to drink regularly throughout the day. The drinks provided by the Centre are water and milk and the **SRER guidelines for fluids for babies and 1-5 year olds at the centre** is attached to this policy. Tap water is the main drink and is available at all times. Staff encourage children to drink water after each meal to "rinse the food from their teeth".

13. Staff like to observe children's birthdays. Birthdays are celebrated with ice creams in cones or small individual cakes made in the Centre's kitchen. Due to possible child allergies parents should not bring cakes from home.

14. Special occasions may be celebrated with culturally appropriate foods.

15. To minimise the risk of choking, NO raw sticks or whole hard vegetables are given to any child in the Centre. NO raw apple is given to children under 2 years. Microwaved apple can be served to under 2's. Only grated or microwaved carrot is given to children. No pop corn or corn chips are served at the Centre.

Mealtimes and the eating environment

1. Children are seated and supervised for all meals.

2. Morning fruit and the main lunch meal are served in the Dining room; however flexibility can be used by Team leaders in varying the eating environment.

3. Food will not be used as a punishment or reward, whether by its provision or denial.

4. The food preferences of the children will be respected. NO child will be force fed, nor given food when laughing or crying.

5. Children are often asked and encouraged to assist with preparation, to serve themselves and to help clear the table.

6. Precautions to prevent and treat choking are known by all staff and implemented.

7. Staff model the behaviours expected of children with regard to eating.

Families and Nutrition

1. Families receive information about the Centre's food and nutrition policy in the Parent Information Handbook.

2. Nutritional information about food and drinks is available for parents in the front entrance.

3. The Centre displays the weekly menu in the dining room window. Parents are invited to provide input into the planning of meals.

4. Staff observe children's individual daily consumption of food & drink and record this on the room's whiteboard.

5. Recipes for food served in the Centre will be available to parents.

6. Staff discuss with parents possible strategies for reluctant eaters.

7. A positive relationship is encouraged between families and the Centre's cook.

8. Chocolate and other confectioneries shall not be offered to families as a means of fund raising. Instead we will continue with garage sales, fun evenings etc

9. Parents are encouraged to communicate with staff about their child/ren's eating preferences

Curriculum

1. Nutrition activities are part of both planned and spontaneous programming.
2. Recipes and food awareness activities are chosen from a variety of cultures.
3. Meal times are recognised by staff, parents and children as an important social and learning experience.
4. Staff sit with the children to encourage self help skills, appropriate eating behaviours and table manners.
5. Staff promote positive discussion about the foods being served to children.
6. Where ever possible children are provided with practical food preparation experiences.
7. Staff supervision ensures that children do not share their own food or utensils with others. Staff discuss food safety with children.
8. Staff provide information to the kitchen staff so that the Centre's menu is linked with the programmed activities.
9. Staff regularly discuss with the children the importance of good oral hygiene.

Special Diets

1. Menus are planned with consideration to any dietary conditions or allergies that individual children may have.
2. Parents of children requiring a modified diet for medical reasons must have a "Special Diet Form" completed and provide the Centre with a Medical Action Plan signed by their doctor. Parents of children requiring a modified diet for reasons of a non-medical nature (eg. Cultural or religious reasons, vegetarian diet) are required to complete a "Special Diet Form".
3. Children with special dietary needs have adequate and appropriate food provided by either the Centre or by the children's families.
4. Where necessary staff can be trained to assist children requiring special needs assistance while feeding (i.e. tube feeding). In this case, the Centre will develop an individual health care plan for the child in conjunction with parents, doctors and support agencies if necessary.

Feeding Infants

1. Breastfeeding is encouraged and welcomed wherever possible.
2. Parents with babies who require bottles and/or individual formula need to bring these to the Centre prepared in named bottles each day. Parents should provide enough formula to last the day, the Centre recommends one extra just in case of emergency.

Storing breast milk

1. Expressed breast milk should be date labelled and refrigerated at 4°C or lower at the back of the fridge. Breast milk that will not be used within 2 days should be frozen.

Frozen breast milk

1. Frozen breast milk can be kept for 2 weeks in the freezer compartment of the Babies Room bar fridge or 3 months in the kitchen's freezer.
2. If some milk has thawed it should be used within 24 hours. Do not refreeze it.

Thawing frozen breast milk

1. Breast milk can be thawed in the fridge, at room temperature or in a warm bath.
2. Breast milk that has been thawed in the fridge but not warmed should be used within 24 hours.
3. Breast milk that has been thawed outside the fridge in warm water can be used immediately, or stored in the fridge for up to 4 hours.

Warming breast milk

1. Breast milk should NEVER be microwaved. It destroys the immunological properties in the breast milk.
2. If the baby has begun feeding, any unused breast milk should be discarded.

Storing Infant formula

1. Infant formula should be named and date labelled and stored immediately in the room / staffroom fridge.
2. Discard the contents of *partially used* bottles after 1 hour.
3. Throw out any *unused* formula after 24 hours.

Warming Infant formula

1. Infant formula may be heated in a microwave or water bath. Microwaves may not heat the milk evenly and may create hot spots in the milk, therefore bottles must be shaken and the temperature of the bottle carefully tested by the staff member on their wrist prior to giving the bottle to an infant.

3. When babies start solids, we talk with families about advising the Centre on the foods that they have introduced and we follow suit. This process is very much parent-led, and where we can offer advice to families we do not introduce foods until the family has done so.

4. Fluids suitable for Infants under 12 months are breast milk and infant formula or cooled boiled water only. Cows milk is not suitable for infants.

Relates to Quality Area 2: elements 2.1.1, 2.1.4, 2.3.2, 2.3.3, 2.1.3, 2.2.1, 2.3, National Regulations 162, 168, 168(2)(a)

SOURCE:

Australian Dietary Guidelines Guide
SA Nutrition Partnership
Start Right Eat Right (Program) Dept Health SA Government
Talking with Families about Nutrition (Training and Pack)
Growing Healthy Families Team at Lower North Health
NHRMC (2003)



Guidelines for Fluids allowed for babies and 1-5 year olds at the centre

This is a list of suitable and unsuitable fluids for babies (birth-1 year old) and all children in care at our centre.

Cow's milk is not recommended for babies less than 12 months old because it is a poor source of iron and may place an infant at risk of iron deficiency. It also has high levels of protein, sodium, potassium, phosphorous and calcium causing a high renal solute load and a strain on young kidneys.

Allowed fluids for babies (birth to 12 months)

- Breast milk and infant formula
- Plain tap water (boiled and cooled until at least 12 months)
- If tap water is not available, spring or bottled water can be used but must be boiled and cooled until 12 months old, and rain water must be boiled and cooled for all babies and children until 5 years old
- Soy formula only under medical advice

Suitable fluids for 1 year olds

- *Breast milk*
- Cows milk (full cream)
- Plain tap water
- Diluted juice (limit to 100-200ml per day, 50:50 dilution)
- Soy beverage, calcium fortified (full fat)

Suitable fluids for 2-5 year olds

- Reduced fat milk (1.0-2.5% fat)
- Soy beverage, calcium fortified (full fat or reduced fat)
- Plain tap water
- Diluted juice (limit to 100-200ml per day, 50:50 dilution)

Unsuitable fluids for child care (all ages)

Carbonated drinks e.g. soft (including soda water), sports, energy, flavoured waters and artificially sweetened

Cordials

Sweet syrups e.g. Ribena, Delrosa

Vegetable juices

Tea, coffee, herbal teas

Full strength juice (dilute 50:50 with water and limit to 100-200ml per day)

Flavoured or condensed milk

Alcohol

Vegan beverages (eg. rice milk, oat milk) not suitable, except under medical advice

References:

NHMRC (2003). Food for Health. Dietary Guidelines for Children and Adolescents in Australia. Commonwealth Department of Health and Ageing.

Infant Feeding Guidelines for Health Workers Summary (2004)
WA Dept. of Health and SA Dept. of Human Services.

Norberg, M & Young, R. 1997. Caring For Infants: Food and Nutrition for 0-1 year olds in Long Day Care Centres. Central Sydney Area Health Division of Population Health, and the Commonwealth Department of Health and Family Services.

SA Dental Service (2011). www.sadental.sa.gov.au

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