Guidelines for Food and Nutrition Policy in Child Care Centres

South Australian Child Care Nutrition Partnership

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Guidelines for developing a Food and Nutrition Policy in Child Care Centres

Why have a food and nutrition policy?

A nutrition policy is a requirement for:

- QIAS accreditation: The Quality Improvement and Accreditation System (QIAS) is the quality assurance program for child care services, administered by the National Childcare Accreditation Council.
- Child Care Licensing in SA: This is administered by DECS (Department of Education and Children's Services) Children's Services (Child Care Centre) Regulations 1998.

Other Child Care settings in South Australia also require a food policy such as Family Day Care, Outside School Hours Care (OSHC), preschools and schools (DECS Healthy Eating Guidelines for Schools and Preschools).

Apart from being a requirement, a good nutrition policy:

- ensures quality and consistency in your staff practices around nutrition
- makes sure that all staff and parents/carers are clear and consistent about the centre's philosophy and practices around nutrition and feeding issues for children in care
- develops standards and procedures in food provision and nutrition practice
- provides guidelines for new staff and new parents
- enables your centre to assess its performance and identify areas which need improvement
- develops and sustains changes you may want to put in place at your centre
- gives confidence to parents that your centre is concerned about the nutrition of their
- recognises that quality is very important in child care centres.

The guidelines in this resource have been developed to help your centre review or develop your Nutrition Policy. These guidelines are considered best practice guidelines for nutrition and incorporate related principles from QIAS.

Quality Improvement and Accreditation System

Child Care Centres are accredited according to the principles of Quality Improvement and Accreditation System (QIAS). The following QIAS quality areas and principles relate to nutrition, mealtimes and food safety, and have implications for child care centre food and nutrition policy:

QIAS Quality Area 2: Respect for Children

Principle 2.4: Mealtimes are pleasant, culturally appropriate occasions and provide an environment for social learning and positive interaction.

QIAS Quality Area 7: Protective care

Principle 7.1: The centre has **written policies and procedures** on child protection, health and safety; and staff monitor and act to protect the health, safety and well-being of each child.

Principle 7.2: Staff to supervise children at all times.

QIAS Quality Area 8: Health

Principle 8.1: Food and drink are nutritious and culturally appropriate and healthy eating habits are promoted.

Principle 8.2: Staff implement effective and current food-handling standards and hygiene practices.

Principle 8.3: Staff encourage children to follow simple rules of hygiene.

(Reference: QIAS Source Book, National Child Care Accreditation Council www.ncac.gov.au)

The Children's Services (Child Care Centre) Regulations 1998 (DECS)

The following DECS licensing regulations relate to nutrition, mealtimes and food safety, and have implications for child care centre food and nutrition policy.

Part 8: Health and Safety

Division 2: Health

Nutrition

46. (1) Where food is provided by the child care centre to children cared for at the centre, the licensee of the centre must ensure that:

- (a) the centre has developed a **food policy** that outlines the centre's approach to children's dietary needs, having regard to culture, religion and health; and
- (b) a weekly menu, outlining the food to be provided daily, is prominently displayed; and
- (c) the food provided is varied, nutritious and adequate in quantity; and
- (d) food stored at the centre in a manner that minimises the risk of contamination of the food; and
- (e) food is offered to the children at frequent and regular intervals.
- (2) The licensee of a child care centre must ensure that drinks are available at all times to children being cared for at the centre.

How to develop a Food and Nutrition Policy

The following steps are a model used for developing policy and can be used or adapted by child care centres.

Suggested steps to developing and implementing a food and nutrition policy.

1. Form a working group

Invite membership from the management or ownership of the centre, staff, and parents. When the group first meets, it should discuss what they would like to achieve, and a timeline to work by.

2. Inform the centre's community

Inform parents and other people who are involved in the centre that a policy is going to be developed or reviewed. Invite their involvement and comments.

3. Identify what is already happening in food and nutrition

This may include menu planning tools, curriculum resources, recent staff training, links with local health services and mealtime practices.

4. Ask the centre community

This could include a survey, or a meeting to find out what people want in a policy.

5. Draft a policy

Use the information gathered and formulate your policy. The working group may like to invite their local Nutritionist to be involved.

6. Circulate and get feedback

It is essential to get feedback about the policy from the centre community before it is implemented. Make a clear date by which comments should be returned. The policy could be circulated for comment by:

- placing it on the notice board and ask people to fill out feedback
- giving it to parent members of your management advisory committee to discuss at a meeting
- giving all staff a copy
- giving parents a copy, or ask a sample of parents to give feedback.

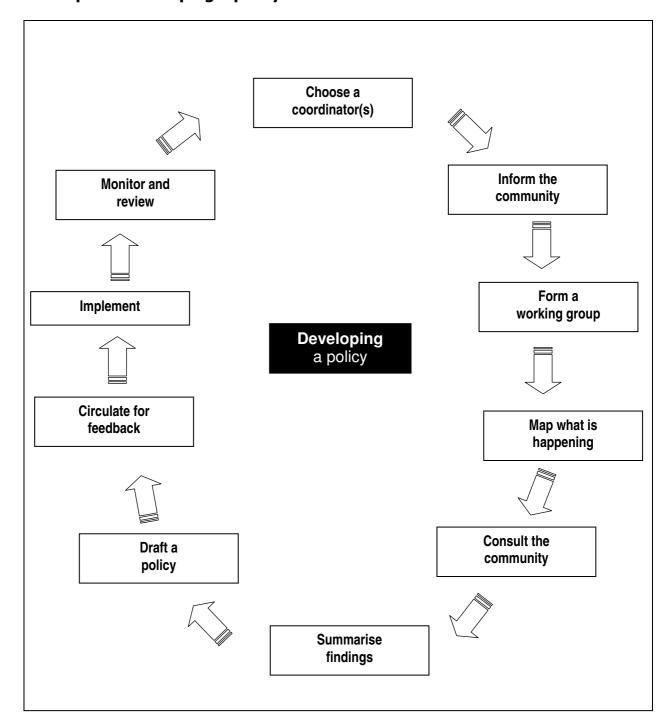
7. Implement

Promote the new/reviewed policy so that people understand any changes that have occurred and why. Plan any staff professional development that is needed.

8. Monitor and review

If you have made any major changes, it is important to monitor these closely to ensure they are being implemented appropriately. Set a date for a policy review, eg in 12 months. Also identify how the policy will be communicated to new parents.

Steps for developing a policy



Developing a good Food and Nutrition Policy

The content of a Food and Nutrition Policy can be considered under these topics

- food provided by the centre or brought from home
- mealtimes and the eating environment
- families and nutrition
- · curriculum.

For best practice centres should include policy or procedures on special dietary considerations such as:

- special diets
- feeding infants.

The guidelines in this resource are those considered to be best practice and include recommendations from various sources including QIAS, child care licensing regulations, consultation with child care staff and from workshops attended by child care staff in South Australia.

Food provided by centres

Goal: To provide children with food and drink that is safe, varied, nutritious and culturally diverse.

Good nutrition is of vital importance to young children. It helps them to grow, develop and maintain healthy bodies. Child care 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.

What to include in a policy

A centre may have a goal in their food and nutrition policy to provide food and drink that is safe, varied, nutritious and culturally diverse. In developing a policy your centre needs to state the guidelines used to plan your menu and other food provision practices. The following statements are based on the QIAS and ideas from child care workers and cooks:

- 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.
- Food provided is developmentally appropriate for children and encourages independent eating.
- Tap water is the main drink and is to be available at all times.
- Food provided takes into account special dietary needs.
- Guidelines on feeding children up to 12 months old are available.
- Food linked with a high risk of choking is minimised.
- Food is provided in a safe and hygienic manner.
- Staff will receive training in nutrition and food safety and food handling.
- Additional food is available for children who are hungry.
- Guidelines are available for foods for special occasions eg, birthdays, celebrations, theme days and fundraising.

For more information refer to 'Planning Nutritious Child Care Centre Menus: Nutrition Checklist and Support Materials', South Australian Child Care Partnership, (second edition) 2005.

(See resource section)

¹ Dietary Guidelines for Children and Adolescents in Australia, NHMRC, 2003.

Food brought from home

Goal: To ensure children have food and drink that is safe, varied, nutritious and culturally diverse.

Child care centres where parents provide the food have special considerations to take into account. Common issues for your centre may be the provision of inappropriate foods (such as items with few nutrients and high fat or sugar content) or not enough food being provided.

What to include in a policy

Strategies to ensure that children receive food and drink which is nutritious, safe, varied and culturally diverse may include:

- Families will be provided with guidelines on food, and suggestions for nutritious and safe foods.
- Families will be given a copy of the Centre's Food and Nutrition Policy.
- The Centre will have a procedure in place, detailing what is to be done when inappropriate foods are brought to the Centre, or if additional food is necessary.
- All dairy milk provided by the Centre will be full-cream for children aged 1-2 years old, and reduced fat for children older than 2 years old. Skim milk will not be available.
- Parents will be advised when their child is not eating well, or of any concerns.
- An eating environment which promotes family and multicultural values will be provided.
- Staff members will sit with and supervise children during mealtimes.
- Children will be taught about food and nutrition through food awareness activities, practical food preparation activities and discussions about food.
- Tap water will be the main drink and will be available, supplied by the centre, at all times.
- Food will always be available in case of an emergency, or if children are hungry between meals and snacks.
- All staff will have food safety and handling training.
- The Centre will implement and encourage practices that assist children to receive safe food.
- Food will be stored and handled hygienically by staff and children to minimise food contamination.
- The Centre will have procedures about the disposal of unused food, food storage and cleaning.
- The Centre will implement practices that ensure children receive food hygienically eg, washing hands.

The QIAS source book lists food provision as a principle in a quality area.

Quality Area 8 Health

Principle 8.1: Food and drink are nutritious and culturally appropriate and healthy eating habits are promoted.

Mealtimes and the eating environment

Goal: To provide a safe, supportive and social environment in which children can enjoy eating.

Mealtimes and the eating environment play a large role in the nutrition outcomes of children. It helps children:

- to learn and form good food habits which become eating habits for life
- to learn a positive attitude about food
- to try a variety of foods, and
- to learn family and community values and culturally inclusive perspectives.

When planning the Centre's mealtimes, consideration is also given to food safety as well as staff role modelling and family and cultural values and practices.

What to include in a policy

A centre may have a goal in their food and nutrition policy to provide a safe, supportive and social eating environment for children. In developing a policy, your centre needs to outline the eating environment where the positive food habits and transmission of family and multicultural values will be encouraged. The following strategies are based on the QIAS and ideas from child care workers and cooks:

- Children will be supervised whilst eating at all times.
- Staff will sit with children and, where possible, eat and enjoy the same food.
- Staff will promote a positive, relaxed, social eating environment with children.
- Staff promote positive discussion about the foods being served to children.
- Food will not be used as a punishment or reward, whether by its provision or denial.
- Staff will provide positive encouragement and role modelling.
- The food preferences of the children will be respected.
- Cultural food events and practices are celebrated.
- Staff discuss food from a variety of cultures.
- · Staff talk about health and nutrition.
- Staff encourage self-help and, where necessary, assist children at mealtimes.
- Precautions to prevent and treat choking are known by all staff and implemented.

The QIAS source book lists mealtimes as a principle in a quality area.

QIAS Quality Area 2: Respect for children

Principle 2.4: Mealtimes are pleasant, culturally appropriate occasions and provide an environment for social learning and positive interaction.

Families and nutrition

Goal: To communicate effectively with parents, carers and families about their child's food and nutrition.

The foods children are eating and how much food is eaten is of interest and sometimes concern for families. Your staff are in a good position to provide parents/carers with general information about children's nutrition, or to identify and discuss issues that may benefit from referring the parent and child to a health professional (such as a GP, Paediatrician or Dietitian-Nutritionist) for further assessment and advice.

More information about communicating with parents and carers can be obtained from the Gowrie Training Centre resource, 'Talking with Families about Nutrition', and 'Sharing a Picture of Children's Development'

http://www.rch.org.au/ccch/pub/index.cfm?docid=936#siteinfo

What to include in a policy

A goal of the Centre's Food and Nutrition Policy may be to communicate effectively with parents, carers and families about their child's nutrition.

The following strategies are based on the QIAS and ideas from child care workers and cooks:

- The weekly menu is displayed, outlining the food and drinks to be provided daily, including snacks.
- Families opinions are considered when planning the menu.
- Details of foods and serves eaten are provided to parents as appropriate (eg daily for parents of babies and younger children).
- Nutrition information is accessible to families, in appropriate languages where possible.
- Families receive information about the centre's food and nutrition policy prior to enrolment.
- · Families have access to menus and recipes.
- A positive relationship is encouraged with the centre's cook.

The OIAS source book lists partnerships with families as a quality area.

Quality Area 3: Partnerships with families

Principle 3.1: Staff and families use effective spoken and written communication to exchange information about individual children and about the centre.

Principle 3.2: Families members are encouraged to participate in the centre's planning, program and operations.

Principle 3.3: The centre has an orientation process for all new children and their families.

Curriculum

Goal: To teach children about food and nutrition.

Studies have shown that day care contributes to children's learning, behavioural development and school achievement.² Teaching children about food and nutrition makes an important contribution to lifetime food habits, to learning and to a healthy society.

Food and talking about food and good nutrition is a tool to develop:

- literacy and numeracy skills (through eg, food stories, 'reading' recipes and packets, cooking, food songs)
- fine and gross motor skills (through food preparation eg, shredding lettuce, cutting pastry, kneading, cooking and gardening)
- social skills (eg, eating together, dramatic play such as 'shopping', feeding toys, food puppets, sharing food and cooking)
- awareness of other cultures (eg, theme days, stories, recipes, food implements)
- cognitive skills (eg, food related excursions, food in science, food cycles; food and the environment and gardening).

As children learn best through experiences, learning about food can be incorporated into many areas of the curriculum. For more information about learning and food refer to the resource list attached.

What to include in a policy

The centre may have a goal in their policy that children will be given opportunities to learn about food and nutrition. The following strategies are based on the QIAS and ideas from child care workers and cooks

- Include nutrition activities in planned curriculum and spontaneous programming.
- Source food activities from a variety of cultures.
- Treat mealtimes as an opportunity for social learning.
- Provide children with practical food preparation experiences.
- Discuss food safety with children.
- Teach children mealtime behaviour such as serving and clearing.
- Link the Centre's menu to programmed activities.

² Zortich B, Roberts I, Oakley A (2003), Day Care for Pre-school Children, The Cochrane Library, Issue 2, Oxford: Update Software Ltd.

The QIAS source book lists programming as a quality area.

Quality Area 6: Learning and development

Principle 6.1: Programs encourage children to make choices and take on new challenges.

Principle 6.2: Programs foster physical development.

Principle 6.3: Programs foster language and literacy development.

Principle 6.4: Programs foster personal and interpersonal development.

Principle 6.5: Programs foster curiosity, logical inquiry and mathematical thinking.

Principle 6.6: Programs foster creative and aesthetic development using movement, music and visual-spatial forms of expression.

Other dietary considerations

Guidelines for procedures on special diets

Special diets

When a child requires a special diet for a health or medical reason, it is recommended that the Centre seeks written evidence and guidelines from the child's health professionals. Having such written guidelines from relevant health professionals for special dietary requests (including how long the special diet will be needed for), prevents the following:

- parents asking for special diets for reasons that may not have been diagnosed and justified by a health professional
- dietary restrictions instigated by the parent that may impact severely and unnecessarily on the nutritional adequacy of the child's diet
- having the child care centre cook cater longer than necessary for a special diet that is only needed temporarily.

In terms of special diets in childcare, the following indicators are required to meet QIAS accreditation requirements for Quality Area 8: Health.

Principle 8.1: Food and drink are nutritious and culturally appropriate and healthy eating habits are promoted.

Indicators of Satisfactory Care (standard required for accreditation)

- Children with special dietary needs have adequate and appropriate food provided either by the Centre or by the children's families.
- Where a child has special dietary needs for health or religious reasons, the Centre seeks detailed information from families and evidence of advice from an appropriate health professional.

Furthermore, DECS have a 'Health Support Planning Process' recommended for schools, preschools and child care centres. The process recommends four steps.

- **Step 1. Before enrolment:** provision of general information to families and a supportive environment for children and students.
- **Step 2. When a need is identified:** collection of individual health care information (and agreement about interim measures).
- **Step 3. The planning process:** negotiation of an individual health support plan.
- **Step 4. Monitoring and review**: ensuring health support plans are current and effective.

- As part of Step 2, DECS recommends the Centre asks the parent or guardian to
 provide written information from a medical professional (and if necessary, an
 emergency plan) for children with special health needs. The care plan should
 document recommended emergency and routine health and personal care support
 for the child. For example, information about:
 - predictable emergency first aid associated with, for example, anaphylaxis (severe, life threatening allergy) or diabetes
 - routine supervision for health care safety, such as supervision of medication
 - personal care, including eating and drinking.
- Information about medical conditions (such as asthma, epilepsy and incontinence) must be provided by a doctor or, in some cases, a clinical nurse consultant working under the direction of a doctor.
- A therapist (for example, a Dietitian or a Speech Pathologist) will usually document information about therapeutic care such as special diet information and mealtime assistance.

See 'Health Support Planning for Schools, Preschools and Childcare Centres at the following website address:

www.dete.sa.gov.au/speced/files/links/HEALTH%20SUPPORT%20%20TEXT.pdf (N.B. There are two diet related health care plan templates on this site: one for a modified diet and one for anaphylaxis i.e. serious food allergy reaction.)

The following procedure's goal and strategies have been formulated in line with the QIAS and DECS guidelines above.

What to include in a procedure for special diets

Goal: The special need of children with food allergies, food sensitivities or medical diets will be catered for in consultation with parents and the appropriate medical professionals.

State the steps that should be taken if a parent or carer requests special dietary needs be catered for.

- Families are informed about what dietary support can be provided before enrolment.
- The ability of the centre to cater for any special dietary needs is at the centre's discretion. In some instances parents/carers may be asked to provide some/all of the food required for their child. Further discussion and negotiation may be required between the centre and the parents/carers, and should be mediated on a case by case basis to ensure that wherever possible their specific needs are accommodated. Where this is not possible, all other options will be explored to ensure they are not unfairly disadvantaged.
- If the child has individual dietary needs, the parent or carer will be asked to provide a *health care plan*, written by a relevant health professional eg, Doctor, Paediatrician, Specialist, Dietitian. The care plan should include information (provided by a Doctor/Paediatrician/Specialist) about medical conditions and any

- recommended emergency procedures, as well as information about nutrition intervention required (provided by a Dietitian), so that the centre cook can accurately cater for the special dietary need.
- Special diets for cultural or religious reasons will be discussed and negotiated with parents/carers to the best of the centre's ability.
- The health and safety of the child is foremost and any concerns about the child's dietary intake will be discussed with parents/carers.

State the steps that should be taken if a parent or carer suspects that a child has a food allergy or food sensitivity (food intolerance).

- A food allergy should be confirmed by a specialist (eg Paediatrician or Immunologist) or a General Practitioner. A food intolerance should be confirmed by a Paediatrician, Immunologist or Dietitian. The specialist should provide detailed information about the allergy or sensitivity and details of any emergency procedure required.
- A Dietitian's input is strongly recommended. A Dietitian can provide information about foods that may be eaten and foods to avoid for the period of time that the special diet is needed. Ask parents or carers to obtain detailed written information on the diet from a Dietitian.
- Negotiate with parents what food they are prepared to provide for their child while the child is on the special diet, and what the Centre will provide.
- Check how long the child will be on the special diet.
- Regularly check with the parents to see if the child still requires the special diet.
- Dietary restrictions for children with true food allergies must be taken seriously as ingestion of allergenic foods can be life threatening.
- Inform all staff of any emergency procedure necessary for the child, and display this procedure where appropriate.

State where parents or staff could be directed to obtain further information about the management of a food allergy or food sensitivity.

- Nutrition Department (Children, Youth and Women's Health Service)
 Phone: (08) 8161 7233
- Community Dietitian/Nutritionist
- Local doctor
- Allergy specialist eg, Immunologist or Paediatrician
- Private Dietitian
- Royal Prince Alfred Hospital Allergy Unit. Phone: (02) 9515-8244
 Email: allergy@email.cs.nsw.gov.au

Other dietary considerations

Guidelines for procedures on infant feeding

Centres should have procedures addressing:

- correct storing, thawing and warming of breastmilk and infant formula
- recommended schedule for introducing solids
- fluids allowed for babies and older children at the centre.

Adopting the following guidelines means your centre will be using best nutritional and food safety practices and advice as outlined by:

- Dietary Guidelines for Children and Adolescents in Australia (National Health & Medical Research Council, 2003).
- Infant Feeding Guidelines for Health Workers (National Health & Medical Research Council, 2003).
 - (NB Both of the above references are incorporated in the one document at http://www7.health.gov.au/nhmrc/publications/ files/n34.pdf
- Child and Youth Health www.cyh.com
- Australian Breastfeeding Association www.breastfeeding.asn.au
- Feeding and nutrition of Infants and Young Children (World Health Organisation, 2000).

Recommended procedures for storing, thawing and warming of breastmilk and infant formula

Storing breastmilk

- Expressed breastmilk (into a clean sterile container) should be date labelled (date of expression) and refrigerated at 4°C or lower at the back of the fridge where it is coldest. Breastmilk that will not be used within two days should be frozen.
- **Tips for parents:** Breastmilk should be transported to child care in an esky with a freezer brick, and placed immediately in the back of the refrigerator upon arrival.

Frozen breastmilk

- Frozen breastmilk can be kept for 2 weeks in the freezer compartment of a one door refrigerator, or 3 months in a freezer section of a fridge with separate door.
- If some milk has thawed it should be used within 24 hours. Do not refreeze it.
- **Tips for parents:** Breastmilk should be transported to child care in an esky with a freezer brick, and placed immediately in the back of the refrigerator upon arrival (or in the freezer if still frozen and to remain so).

Thawing frozen breastmilk

- Breastmilk can be thawed in the fridge or at room temperature in a warm water bath.
- Breastmilk that has been thawed in the fridge but not warmed should be used within 24 hours, and should not be refrozen.

 Breastmilk 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 breastmilk

- Breastmilk should NEVER be microwaved. It destroys the immunological properties in the breastmilk.
- Breastmilk that has been thawed outside the fridge in warm water can be used immediately, or stored in the fridge for up to 4 hours.
- If the baby has begun feeding, any unused breastmilk should be discarded.

Storing infant formula

- Infant formula should be name and date labelled and stored immediately in the centre at the back part of the fridge where it is coldest (not in the fridge door where it is warmer).
- Discard the contents of *partially used* bottles after 1 hour. Reusing half empty bottles is risky once they have been heated and sucked on.
- Throw out any unused formula after 24 hours.
- *Tips for parents:* the safest way to transport formula is to take the cooled, boiled water and the powdered formula in separate containers and mix them when needed. When it is necessary to transport prepared formula (or expressed breastmilk) it must be icy cold when leaving home and be carried in an insulated pack to keep it cold.

Warming infant formula

- Microwaving infant formula is not recommended by the NHMRC for safety reasons; they do not heat the milk evenly and may create hot spots in the milk, which could burn the baby's mouth.
- Bottle warmers can be used, but they must have a thermostat control. Bottles should only be warmed in this way for less than 10 minutes.
- If a centre decides to use a microwave to warm *formula* (*breastmilk* should *not* be microwaved), the following guidelines are recommended to minimise the risk of hot spots and overheating:
 - make sure the bottle is microwave-safe
 - make sure there is at least 120mls of formula in the bottle (otherwise it will overheat)
 - heat only cold formula straight from the refrigerator
 - always stand the bottle upright
 - always take off all the teat/bottle top assembly and leave these *outside* the microwave
 - do not use microwave ovens with a wattage over 700W
 - for a 120ml size bottle use high setting and heat for less than 30 seconds
 - for a 240ml size bottle use high setting and heat for less than 45 seconds.
 - before giving the child a drink from the bottle:
 - put the teat/bottle top back on, and invert the bottle at least 10 times
 - make sure formula is cool to touch
 - always test formula place several drops on the back of the hand.

Recommended schedule for introducing solids

The Centre should have as part of their nutrition policy that the menu will follow the recommended schedule for introducing solids. Note these are guidelines only and should be discussed with parents considering the child needs.

Menu development guide		
Age and Texture	Suitable Foods	
Birth - 6 months	Breastmilk/infant formula provides all the nutrition a baby needs for about the first 6 months of life.	
'First tastes' 6 months to 7 months (If needed earlier, can offer solids between 4- 6 months, but NOT BEFORE 4 months).	 Breastmilk/infant formula Introduce first solids: First introduce baby rice cereal (iron enriched) Then fruits and vegetables Then pureed, well-cooked lean meat, poultry and *fish 'Baby' *Yoghurts and *custard, *Cow's milk in small amounts in the preparation of foods 	
Smooth and pureed foods. 'Learning to chew and self-feeder' 7 -12 months Mashed or chopped food progressing to finger foods.	 Breast milk/infant formula as the main drink. Fruits, vegetables and legumes Well-cooked lean meat, poultry and *fish. *Yoghurt with soft lumps, *custard, *cheeses. Other cereals (eg, wheat, oats), bread, pasta *Eggs – (well cooked) 	
'Centre menu with some changes" 1-2 years	Offer a wide variety of foods from the centre menu, some changes in texture or flavour may be needed. Use the Nutrition Checklist as a guide to food variety but quantities may differ for younger age groups • Breastmilk and/or full cream cows milk as a drink • Water and no more than one small cup of diluted fruit juice from a cup, not a bottle.	

^{*}Parents may seek dietetic advice regarding the timing of the introduction of eggs, nuts, cow's milk/dairy products, fish and soy if there is a strong family history of allergy.

Information adapted from World Health Organization 2000, 'Feeding and nutrition of infants and young children' and the Child and Youth Health website, www.cyh.com

<u>Nutrition Checklist</u> from 'Planning Nutritious Child Care Centre Menus: Nutrition Checklist and Support Materials' (second edition), 2005 by the South Australian Child Care Nutrition Partnership; see website http://www.wch.sa.gov.au/childcarenutrition

Guidelines for fluids for babies and children at the centre

The Centre should have as part of their nutrition policy a list of suitable and unsuitable fluids for babies (birth -1 year old) while in care.

<u>Cows' milk</u> is not recommended for babies less than 12 months old because it is a poor source of iron and predisposes infants to iron deficiency. It also has high levels of protein, sodium, potassium and calcium, which have a high renal solute load.

Allowed fluids for babies (birth to 12 months)

- Breastmilk and infant formula
- Boiled water

Suitable fluids for 1 year olds

- Breastmilk
- Cows' milk (full cream)
- Water
- Diluted juice (limit juice to half a cup per day, diluted 1:4)
- (Soy and vegetarian beverages eg, rice milk are not recommended. Only soy formula can be used in specific situations).

Suitable fluids for 2-5 year olds

- Reduced fat milk (1.0-2.5% fat)
- Calcium fortified soy milk
- Water
- Diluted juice (limit juice to half a cup per day, diluted 1:4)

Unsuitable fluids for children (all ages)

- Soft drinks
- Cordials
- Sweet syrups eg, Ribena, Delrosa
- Vegetable juices
- Tea, Coffee, herbal teas
- Full strength juice (should be limited to half a cup of juice per day, diluted 1:4)
- Sweetened milk

References:

- NHMRC (2003). Food for health. Dietary Guidelines for Children and Adolescents in Australia. Commonwealth Department of Health and Ageing.
- Norberg, M & Young, R. 1997. <u>Caring For Infants: Food and Nutrition for 0-1 year olds in Long Day Care Centres.</u> Central Sydney Area Health Division of Population Health, and the Commonwealth Department of Health and Family Services.
- Nutrition Checklist from 'Planning Nutritious Child Care Centre Menus: Nutrition Checklist and Support Materials' (second edition), 2005 by the South Australian Child Care Nutrition Partnership; see website http://www.wch.sa.gov.au/childcarenutrition
- World Health Organisation (2000) Feeding and nutrition of infants and young children
- Infant Feeding Guidelines for Health Workers Summary (2004, WA Department of Health and SA Department of Human Service)

A summary of recommended points to be included in a Food and Nutrition Policy for Child Care Centres

Use this summary as a checklist to make sure your food and nutrition policy covers all recommended sections and points:

The policy

- States the policy's goal or aims, which includes
 - Providing a healthy, nutritious and varied menu for babies and children.
 - Providing a positive, safe eating environment.
 - Communicating with families about their children's nutrition.
 - Teaching children about food and nutrition in the curriculum.
 - Meeting other dietary considerations.
- States how often the policy is reviewed.
- States how the policy is communicated to staff/parents and by whom.
- States the minimum training requirements for staff in nutrition, food safety and hygiene.
- States where the policy is displayed or available from.

Provision of a healthy nutritious menu or food brought from home

- States foods provided will be consistent with the Dietary Guidelines for Children and Adolescents in Australia.
- States the menu or lunchboxes will provide at least 50% Recommended Daily Intake (RDI) for key nutrients.
- States how often the menu will be reviewed and what type it is.
- Lists what extra eating opportunities for children will be provided.
- Gives guidelines for foods for special occasions eg, birthdays, celebrations, theme days, fundraising.

Mealtimes and the eating environment

- Describes the eating environment, which is safe, supportive and social and recognises family and multicultural values.
- Encourages positive staff attitudes and behaviours in providing food.
- Lists precautions to prevent choking.

Families and nutrition

 Describes how Centre staff communicate effectively with parents, carers and families about their child's food and nutrition.

The curriculum

Describes how the centre increases children's awareness of food and nutrition.

Other dietary considerations

- Describes feeding practices of babies birth to 12 months, for example:
 - supports breastmilk provision and breastfeeding mothers
 - document correct storing/thawing/warming procedures for breastmilk and formula
 - recommends stages for introducing solids
 - lists fluids allowed for babies and children
 - encourages communicating with parents re feeding and solids progression.
- Describes procedures for special diets for food allergies, food intolerances and other special dietary needs, for example:
 - states the steps that will be taken by staff if a parent or carer indicates a child has a special dietary need
 - state the steps that should be taken if a parent or carer suspects that a child has food allergy or food sensitivity (food intolerance).

Resources for developing a Food and Nutrition Policy

Your Child Care Centre Food and Nutrition Policy

Year, edition: 2000

Author/s: Queensland Health Statewide Health Promotion Unit

Published by: Queensland Public Health Services

Available from: www.health.qld.gov.au/phs/Documents/shpu/6654.pdf

Description: This booklet includes sample policies with accompanying strategies

checklists.

There's More to Food than Eating: Food Foundation for Children Birth to Eight Years

Year, edition: 1999

Author/s: Julie Appleton, Nadine McCrea, Carla Patterson

Published by: Pademelon Press

Available from: Gowrie Resource Centre, 43 Dew St Thebarton 5031. Tel: 8352 5246

Email: resources@gowrie-adelaide.com.au

Description: This practical book for child care workers and nutrition educators describes food and nutrition related activities suitable for learning and including in programming. Also includes concise information on nutrition needs and multicultural recipes.

Talking with Families about Nutrition

Year, edition: 2003 Author/s: Jenny Brozel

Published by: Lady Gowrie Child Centre

Available from: Gowrie Resource Centre, 43 Dew St Thebarton 5031. Tel: 8352 5246

Email: resources@gowrie-adelaide.com.au

Description: This kit is a compilation of the many innovative ideas formed during the life of the project of the same name. It includes information on talking with families, sections on building a communication plan, posters with captions, case studies, and a thorough resource section.

Sharing a Picture of Children's Development: A communication framework for child care staff and parents

Year, edition: 2000

Author/s: Royal Children's Hospital, Melbourne Published by; Australian Dairy Corporation

Available from: www.dairyaustralia.com.au Freecall 1800 817 736 for order form Description: A variety of resources, including a manual and pamphlets for parents are available. Explains children's development in relation to nutrition, and emphasises the importance of building relationships with families. A key component of this resource is the framework for communicating with families.

Relaxed and social: A positive approach to children's healthy eating

Year, edition: 2002

Author/s: Royal Children's Hospital, Melbourne, Published by; Australian Dairy Corporation

Available from: www.dairyaustralia.com.au Freecall 1800 817 736 for order form Description: This resource was designed to support child care staff to communicate with parents about the social and developmental aspects of healthy eating for young

children. This resource comes with a poster and parent booklet.

Resources for developing menus for Child Care Centres

South Australian Child Care Nutrition Partnership

Formed in 1998 and still current, this forum is made up of representatives from child care centres and agencies in South Australia who have an interest in strengthening good nutrition practices in child care settings.

Available free downloaded from the website www.wch.sa.gov.au/childcarenutrition

Planning Nutritious Child Care Centre Menus: Nutrition Checklist and
Support Materials (second edition) 2005. This free kit provides information on
how to plan a nutritious menu that meets the Dietary Guidelines for children and
provides at least half the Recommended Daily Intake for key nutrients. A checklist
provided helps centres to check their menu.

☐ **Food Matters newsletter**: A glossy newsletter covering up to date nutrition topics and information for child care workers and cooks. Also includes an insert for parents that can be photocopied.

Caring for Children: Food, Nutrition and Fun Activities (4th Edition)

Year: 2005

Available from: Gowrie Resource Centre, 43 Dew St Thebarton 5031 Tel: (08) 8352 5246; Email: resources@gowrie-adelaide.com.au

Description: A spiral bound book for child care centres, which has tested recipes for 40 children and menus for 36 days. Also has a section on good nutrition and food related learning activities.

Dietary Guidelines for Children and Adolescents (pamphlet)

The Australian Guide to Healthy Eating (booklets, pamphlets, posters)
Australian Government Department of Health and Ageing
Free Call 1800 020 103 (ext 8654) Public Health Division Publications Officer.
Available free and in bulk numbers.

NEAT Recipes for Kids. Cookbook for Long Day Care Centres

1998 Penrith Food Project. Penrith City Council.

A cook's recipe book with **N**utritious, **E**conomical **A**nd **T**asty recipes for 40 children.

Available from Gowrie Resource Centre, 43 Dew St Thebarton 5031 Tel: (08) 8352 5246; Email: resources@gowrie-adelaide.com.au

Tummy Tempters

Year: 2000

Authors: Northern Sydney Cooks Network

Available from: Sarah's Place, 24 William Street, Hornsby, NSW, 2077.

Tel: (02) 9940 4595

Description: Spiral bound recipe book developed by cooks for cooks for up to 40

children in child care, or available from;

Dietetics Department, Manly Hospital, Darley Road, Manly, NSW 2095.

Tel: (02) 9976 9611; Email: dedward@doh.health.nsw.gov.au

The Cook's Cookbook

Year: 2000

Author: Nutrition Australia

Available from: Nutrition Australia. 247 Flinders Lane, Melbourne, VIC 3000.

Tel (03) 9650 5165.

Multicultural Finger Food and Food Culture, Custom and Presentation

Authors: Diversity Directions (formerly Multicultural Child Care Unit) Available from: Diversity Directions, 3 Ninth Street, Bowden, SA, 5007.

Tel: (08) 8346 1762; Email: divdir@divdir.asn.au

Cultures, Cuisines and Child Care: More Than Just Nutrition

Year: 2001

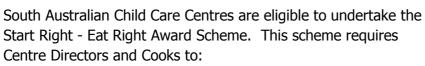
Author: Michelle Nolan

Available from: Dietetic Department, Liverpool Health Service, PO Box 2084, Liverpool, NSW, 2170. Also available from Gowrie Resource Centre, 43 Dew St Thebarton 5031

Tel (08) 8352 5246; Email resources@gowrie-adelaide.com.au

Description: A highly recommended book of recipes children can help with from various countries (Arabic, American, Chines, Greek, Italian, Latin American, Vietnamese) plus accompanying information on festivals, learning activities and food information related to each culture. Developed for child care centres.

Start Right - Eat Right Award Scheme





- undertake a 9 hour nutrition training course (menu planning and Food Policy are covered extensively; this resource is used in the Food Policy section of the course)
- review their menu (or food guidelines for centres where food comes from home) and Food Policy
- have all staff do Food Safety and Hygiene training
- have a Nutritionist and Environmental Health Officer do a site visit.

For further information, contact the Start Right – Eat Right Project Officer on (08) 8325 8100.