

# **FOOD AND NUTRITION POLICY**

## **1. Policy**

Annie Dennis Children's Centre (ADCC) will provide children with meals and snacks that are delicious, essential for growth and development and consistent with best practice guidelines. This policy will be used to determine best practice and procedures in the Centre. ADCC will store, prepare and serve food according to current food safety and hygiene practices. This policy will be available on the Centre website and centre foyer.

## **2. Purpose and Scope**

This policy sets out ADCC's obligations on food and nutrition, standards of food preparation and communication with families.

## **3. Regulatory framework and current literature on healthy eating**

The National Childcare Accreditation Council (NCAC) administers the Quality Improvement and Accreditation System in which ADCC participates. Principle 6.1 of the Quality Practices Guide published by the NCAC sets out guidelines on promoting healthy eating habits in children and Principle 6.2 sets out guidelines on implementing effective and current food safety and hygiene practices. ADCC is assessed against these standards to gain accreditation. A copy of each guideline is attached to this policy. In summary, the guidelines recommend that childcare centres:

- provide food that is nutritious as well as meeting the social, cultural and educational needs of children
- provide a pleasant atmosphere for children at mealtimes that encourages social interaction and learning
- seek up to date information on nutrition from recognised health authorities and promote healthy eating and good food habits
- work cooperatively with families
- ensure that water is available for children to drink throughout the day
- support mothers who wish to continue breastfeeding their children in day care
- attend to children when eating or drinking, including from bottles
- develop a policy and plan to manage allergies
- ensure regular and thorough hand washing by staff and children
- establish appropriate food storage and handling practices and have these monitored and evaluated, and
- encourage staff to participate in professional development on food handling, menu planning and healthy eating habits.

The National Health and Medical Research Council (“NHMRC”) is responsible for raising the standard of individual and public health. In 2003 it published the revised ***Dietary Guidelines for Children and Adolescents in Australia*** ([www.nhmrc.gov.au](http://www.nhmrc.gov.au)). The guidelines are summarised as follows:

- A. Encourage and support breastfeeding**
- B. Children and adolescents need sufficient nutritious foods to grow and develop normally**
  - Growth should be checked regularly for young children
  - Physical activity is important for all children and adolescents
- C. Enjoy a wide variety of nutritious foods**
- D. Children and adolescents should be encouraged to:**
  - Eat plenty of vegetables, legumes and fruits
  - Eat plenty of cereals (including breads, rice, pasta and noodles), preferably wholegrain
  - Include lean meat, fish, poultry and/or alternatives
  - Include milks, yoghurts, cheese and/or alternatives  
Reduced-fat milks are not suitable for young children under 2 years, because of their high energy needs, but reduced-fat varieties should be encouraged for older children and adolescents
  - Choose water as a drink and care should be taken to:
  - Limit saturated fat and moderate total fat intake -  
Low-fat diets are not suitable for infants
  - Choose foods low in salt
  - Consume only moderate amounts of sugars and foods containing added sugars.

Minimum recommended daily food serves for children in long day. The minimum amount of essential foods for each child (2-5 yrs) in long day care is 50% of the RDI, which is equal to:

Food Group	Minimum number of serves to be offered in long day care	Equivalent amount of food	1 serve=
Milk & milk alternatives	3	300ml	100 ml full cream milk
			15g cheese
			100ml yoghurt
			100ml soy milk
Bread and cereals	2	60g	1 slice of bread
			½ cup of breakfast cereal
			½ cup cooked rice
			½ cup cooked pasta
Fruit	1	150g	1 medium piece
Vegetables	1	75g	½ cup cooked vegetables
Meat and meat alternatives	1	45g	½ cup cooked legumes, baked beans, lentils
			1 egg
			45g cooked meat 55g fish
Fats and oils	1.5	7g	1 teaspoon margarine/oil

The amount of food needed for each day varies with age, size and activity level of each child. RDI's are the amounts of nutrients that will meet the daily nutritional needs of most children.

### ***E. Care for your child's food: prepare and store it safely***

ADCC is subject to the **Victorian Food Act 1984** as it provides food to children as part of its service for which families pay. The objects of the *Food Act* include:

- (a) to ensure food for sale is both safe and suitable for human consumption
- (b) to prevent misleading conduct in connection with the sale of food, and
- (c) to provide for the application in Victoria of the Food Standards Code.

ADCC is required to be registered with Darebin City Council as a food business under the *Food Act* and to have a food safety program which is audited by an approved Food Safety Auditor every 12 months.

## **4. Providing nutritious food to our children**

ADCC will seek to meet the standards of the National Childcare Accreditation Council and plan menus to accord with the *Dietary Guidelines for Children and Adolescents in Australia* published by the National Health Medical Research Council. The menus will be reviewed each season to include seasonal food and to ensure variety. Food will be prepared in different ways reflecting the diverse backgrounds of the children attending the Centre. ADCC supports mothers who wish to breastfeed their baby whilst in day care, welcomes parent input on general menu planning and as well as planning for an individual child's special dietary needs and preferences.

## **5. Food Allergies and Intolerances**

All reactions to food will be taken seriously. If a staff member suspects that a child is having a severe food allergy reaction or sensitivity, ADCC will follow these procedures:

1. Call an ambulance on 000 and
2. Call the parents/guardians and inform them of their child's suspected reaction.

If a child is in anaphylaxis, their emergency plan will be followed in accordance with the ADCC ***Food Allergy and Anaphylaxis Policy***.

## Difference between food allergies and intolerances

<b>Food Allergies</b>	<b>Food Tolerances</b>
Immune reaction	Non immune reaction
Usually begin as infant or toddler	Can develop at any age
Symptoms can be mild to life threatening, and include: swelling, itching, hives, breathing difficulties and anaphylaxis	Symptoms can be mild to severe, including hives, irritable bowel
Immediate onset of symptoms- minutes to one hour	Delayed onset of symptoms- ½ hour to 72 hours
Symptoms occur every time	Symptoms don't always occur- level of tolerance
Can be diagnosed with skin/blood tests	Difficult to diagnose- elimination diet
Usually involve only a few foods- common foods causing allergies and intolerances are milk, eggs, peanuts and tree nuts, wheat, soy, fish/seafood	May involve large number of foods- natural and added chemicals

### 6. The eating environment

Nutritious foods are needed for normal growth and development. Good eating habits that are formed in the early years will usually be reflected in adulthood. ADCC is an ideal setting to influence good eating habits/food choices now and in the future. We will provide an eating environment that is enjoyable promotes good eating habits and gives children a healthy attitude towards food and assists in maintaining family and multicultural values.

Carers will achieve this by:

- sitting with the children and sharing food the same food
- encouraging children to serve themselves and feed themselves where appropriate
- encouraging children to taste the food provided
- initiating only positive conversations about the food being served
- providing plenty of fresh fruit and water to drink
- serving meals and snacks on a regular schedule, as well as accommodating individual needs for quantity and timing, and by
- not using food as a form of punishment either by its provision or denial
- offering children a selection of healthy food choices, and
- offering children a variety of foods prepared in a variety of ways.

## **7. Teaching children about food and nutrition**

ADCC will help our children to develop a healthy awareness and good eating habits by:

- including them in food preparation
- discussing the foods served
- discussing family beliefs and cultural attitudes to food, and by
- undertaking food awareness activities combined with simple healthy messages, for example, in telling stories and gardening and going on excursions

## **8. Precautions to prevent choking**

Choking is a risk for young children because their back teeth may not be fully developed until around 4 years of age. ADCC will minimise the risk of children choking by:

- Supervising children when eating
- Ensuring that children are always seated when eating
- Providing food that is age appropriate
- Never force feeding children
- Ensuring high risk foods (apple, raw carrot, raw celery) are not provided to children below three years of age. These foods can be grated, cooked or mashed.
- Ensuring high risk foods are sliced as thinly as possible for children over 3 years of age.
- Cutting sausages , frankfurts and other meats into small pieces
- Not giving children popcorn, nuts, hard lollies, corn chips or similar
- Not offering food to children who are laughing or upset, and
- Avoiding small hard lumps that may cause choking, and
- Ensuring staff are trained in First Aid.

## **9. Foods Provided**

### ***A. Special Occasions***

ADCC encourages the celebration of special events such as birthdays and will encourage families to provide foods that are low in fat, salt and sugar. Families should also list the ingredients in any home baked food.

ADCC staff will:

- Remove the focus of the occasion from the food
- Consider serving everyday foods in special ways
- Celebrate diversity eg singing songs, blowing out candles, making decorations, blowing up balloons with the children

## ***B. Religious /Cultural needs***

All parents and guardians enrolled at ADCC will receive an enrolment form and background information sheet. The health information sheet will assist staff and the Centre cook to plan meals and menus around any dietary restrictions due to religious or cultural needs of the children.

## ***C. Emergency foods***

There are occasions due to unforeseen circumstances that the Centre will experience an emergency situation such as, an evacuation due to fire, burst water main, gas leak etc. All children's rooms are equipped with 'emergency bags' which contain:

- Blankets, clothing, nappies, tissues, baby wipes
- Rice cakes, UHT long life milk, bottled water and cups

## **10. Communicating with families**

The Director, centre cook and staff will communicate with families at the Centre about food, good nutrition and menus by:

- displaying the weekly menu in the foyer
- commenting on the meals eaten by children in the daily 'Handover Sheets'
- advising parents/guardians if their children are not eating well
- discussing and planning for a child's food individual preferences and needs with parents/guardians
- making recipes for the food served in the Centre available to parents
- displaying general information about healthy food and nutrition on the noticeboard outside the kitchen and in the Centre's newsletter every term, and by
- inviting parents to participate in meal times, particularly on religious or cultural days which may be observed with the preparation of special food.

## **11. Storage and preparation of food**

ADCC is bound by the Victorian *Food Act 1984* to ensure the safe storage, preparation and serving of food. ADCC will ensure that:

- all staff involved in the preparation of food undertake food safety training, with a minimum of three staff members to hold a Food Handler's Certificate
- food is stored safely, including baby milk formula and breast milk
- baby milk formula and breast milk is prepared correctly
- kitchen equipment is used safely in the preparation of food and drinks
- staff and children wash their hands properly before handling food
- serving utensils are used where appropriate

- children are shown how to eat shared food correctly (for example, from fruit platters), and
- it maintains a food safety program which is audited annually. (for further information refer to the Centre's **Food Safety Policy**)

## **12. Procedure for handling breast milk and infant formula**

- Refrigerate breast milk or formula until needed.
- Warm breast milk or formula prior to feeding the infant
- Warm only the amount you need
- Warm by water bath method (stand bottle in hot water) as microwaving is not recommended for breast milk
- Shake and check the temperature of the milk before feeding
- Always stir and shake food or formula before checking the temperature, if using the microwave to heat it
- Offer cooled boiled water when extra fluid is required
- Never give fruit juice to babies under six months of age as even diluted juice is not recommended.

## **13. Introducing solid foods to infants**

When introducing solid foods, progression to different textured foods is made according to the stages of infant development

### **Around 0-6 months**

- Breast milk or infant formula

### **Around 6 months- pureed or sieved**

- Iron fortified baby rice cereal , cooked fruit and cooked vegetables
- Start with 1-2 tablespoons after a milk feed
- Introduce one new food every 3 days
- Avoid adding sugar, spices or fat to food

### **Around 6-9 months- minced, mashed or grated**

- Meat and meat alternatives, fruit, vegetables and cereals
- Offer foods before milk feed three times a day
- New foods should be introduced gradually
- Finger foods can be introduced from about eight months
- Be aware of foods that can break into small pieces in the mouth

### **Around 9-12 months-meat is minced; other foods chopped or mashed and finger foods**

- Offer a wide variety of fruits, vegetables, cereals and meats
- Slowly introduce full cream milk foods
- Offer three small meals per day with snacks between meals
- Encourage finger foods

- Continue to offer breast milk or formula three times per day after feeding

#### **14. Key Responsibilities and Authorities**

In order to assess whether the policy has achieved the values and purposes the director, committee, centre cook and staff will:

- consult with the parents/guardians to obtain their feedback regarding the policy.

The director, centre cook and staff are responsible for:

- Implementing the policy

#### **15. Related documents**

**Children's Food Allergies and Intolerances** contact

[www.allergy.org.au](http://www.allergy.org.au) and [www.nutritionaustralia.org](http://www.nutritionaustralia.org)

**Toddlers and Choking** contact [www.betterhealth.vic.gov.au](http://www.betterhealth.vic.gov.au)

#### **16. Related Policies**

- Food Safety Policy
- Food Allergy and Anaphylaxis Policy

**Date** Approved by the COM 20 February 2008

**Review date** 20 January 2010

**Start Right Eat Right Reassessment Review date** April 2009

**Date** 15 July 2009

**Next review date** July 2011

#### **Key Source Documents**

- National Health and Medical Research Council [www.nhmrc.gov.au](http://www.nhmrc.gov.au) (2003)