

FOOD, NUTRITION AND BEVERAGE POLICY

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1 NQS

QA2	2.1	Each child's health is promoted.
	2.1.1	Each child's health needs are supported.
	2.2.1	Healthy eating is promoted and food and drinks provided by the service are nutritious and appropriate for each child.

2 National Regulations

Regs	77	Health, hygiene and safe food practices
	78	Food and beverages
	79	Service providing food and beverages
	80	Weekly menu
	90	Medical conditions policy
	91	Medical conditions policy to be provided to parents
	162	Health information to be kept in enrolment record
	168	Education and care service must have policies and procedures

3 EYLF

LO3	Children recognise and communicate their bodily needs (for example, thirst, hunger, rest, comfort, physical activity).
	Children are happy, healthy, safe and connected to others.
	Children show an increasing awareness of healthy lifestyles and good nutrition.
	Educators promote continuity of children's personal health and hygiene by sharing ownership of routines and schedules with children, families and the community.
	Educators discuss health and safety issues with children and involve them in developing guidelines to keep the environment safe for all.
	Educators engage children in experiences, conversations and routines that promote healthy lifestyles and good nutrition.
	Educators model and reinforce health, nutrition and personal hygiene practices with children.

4 Aim

- 4.1 Our service aims to promote healthy lifestyles, good nutrition and the wellbeing of all of children, educators and families using procedures and policies. We also aim to support and provide adequately for children with food allergies, dietary requirements and restrictions and specific cultural and religious practices.
- 4.2 This dietary information will also be provided to families so they can plan healthy home meals for their child.
- 4.3 The Kids' Uni Policies and Procedures apply to Kids' Uni North, Kids' Uni South, South Coast Workers Child Care Centre, Kids Uni iC – Preschool, After School Care and Vacation Care (Kids' Uni OOSH).

5 Related Policies

Additional Needs Policy (CHI-ADM-POL-003)

Enrolment Policy (CHI-ADM-POL-022)

Health, Hygiene and Safe Food Policy (CHI-ADM-POL-030)

Immunisation and Disease Prevention Policy (CHI-ADM-POL-033)

Incident, Injury, Trauma, Illness Policy (CHI-ADM-POL-034)

Medical Conditions Policy (CHI-ADM-POL-038)

Physical Activity Promotion Policy (CHI-ADM-POL-045)

Relationships with Children Policy (CHI-ADM-POL-050)

6 Implementation in relation to provision of Food and Beverages

6.1 The service has a responsibility to help children attending the service to develop good food habits and attitudes. By working with families and all educators, we will also positively influence each child's health and good nutrition at home.

6.2 As stated in the National Regulations (Regulation 79 [4]), we recognise that these requirements do not apply to food or a beverage provided by a parent or family member for consumption by their child at the service.

6.3 In order to achieve these habits and attitudes, the Approved Provider and the Nominated Supervisor, who is responsible for overseeing all educators, will –

- i. Ensure children have access to, and are encouraged to access, safe drinking water at all times.
- ii. Ensure children are offered foods and beverages throughout the day that are appropriate to their nutritional and specific dietary requirements based on written advice from families that is typically set-out in a child's Enrolment information on Hubworks which is our online enrolment system or on the "Allergy and Medical Notification" form 05. We will choose foods based on the individual needs of children whether they are based on likes, dislikes, growth and developmental needs, cultural, religious or health requirements. Families will be reminded to update this information regularly or as necessary.
- iii. Children who do not eat during routine meal times or children who are hungry will be provided with foods at periods other than meal times or snack times.
- iv. Ensure food is consistent with the service's menu that is based on the Australian Government's –

- Australian Dietary Guidelines 2013

<http://www.nhmrc.gov.au/guidelines/publications/n55>

A Summary of the Guidelines is available at

http://www.nhmrc.gov.au/files/nhmrc/publications/attachments/n55a_australian_dietary_guidelines_summary_book_0.pdf And/or

- Infant Feeding Guidelines 2012

http://www.nhmrc.gov.au/files/nhmrc/publications/attachments/n56_infant_feeding_guidelines.pdf

A summary of the Infant Feeding Guidelines is available at

<http://www.nhmrc.gov.au/guidelines/publications/n56>

- Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood (<http://www.health.gov.au/internet/main/publishing.nsf/Content/phd-gug-child-cookbook>) And/or
 - Dietary Guidelines for Children and Adolescents in Australia (http://www.nhmrc.gov.au/_files_nhmrc/publications/attachments/n34.pdf)
- v. Educators will follow the guidelines for serving different types of food and the serving sizes in the Guidelines and may use the Australian Government “eat for health” calculator <http://www.eatforhealth.gov.au/eat-health-calculators>.
 - vi. Families utilising the iC Pre-School will be encouraged to provide food using these Guidelines.
 - vii. Provide food that is hygienic by following the relevant policies and procedures set out in the Health, Hygiene and Safe Food Policy.
 - viii. Ensure foods and beverages have a reduced risk of choking.
 - ix. Families will be provided with daily information about their child’s food and beverage intake and related experiences.
 - x. Provide a weekly menu of food and beverages that are based on the Australian Dietary Guidelines that actually describes the food and beverages provided every day and ensure the provision of food and beverages is nutritious and adequate in quantity.
 - xi. The weekly menu is displayed in an accessible and prominent area for parents to view. We also display nutritional information for families and keep them regularly updated.
 - xii. The weekly menu must accurately describe the food and beverages provided each day of the week.
 - xiii. Present food attractively.
 - xiv. Babies will be fed individually by educators.
 - xv. Age and developmentally appropriate utensils and furniture will be provided for each child.
 - xvi. encourage toddlers and young children to develop their sense of agency by feeding themselves independently and developing their social skills at meal times.
 - xvii. Model and reinforce healthy eating habits and food options with children during eating times.

7 Obesity in Children

- 7.1 Overweight and obesity is a serious, chronic medical condition, which is associated with a wide range of debilitating and life threatening conditions. Research suggests there is evidence that children less than 3 years old who are overweight are no more likely to be obese in adulthood than are children who are not overweight. However children 3 years and above, who are overweight are more likely to be overweight in adulthood.
- 7.2 Obesity in children can be reduced by:
 - i. Providing a nutritionally sound menu developed in consultation with specialist professionals and ensuring all meals provided at the service promote healthy dietary behaviours, reflecting the cultural diversity of the families using our service.

- ii. Providing families with information on how to prevent overweight and obesity in children.
- iii. Ensuring adequate and effective stimulation to encourage physical activity in both indoor and outdoor environments and reduce sedentary behaviours. This will be reflected in programming and project work.
- iv. Promoting lifestyle choices that have been demonstrated to contribute to improve energy balance in children such as extended Breast Feeding and active transport options.
- v. Liaising with specialist professionals concerning children with special needs to implement strategies enhancing physical development.

8 Implementation in regards to promoting Healthy Living and Good Nutrition

- 8.1 Develop health and nutrition awareness and act to the best of our abilities on cross-cultural eating patterns and related food values.
- 8.2 Make meal times relaxed and pleasant and timed to meet the needs of the children. Educators will engage children in a range of interesting experiences, conversations and routines.
- 8.3 Discuss food and nutrition with the children.
- 8.4 Not allow food to be used as a form of punishment or to be used as a reward or bribe.
- 8.5 Not allow the children to be force fed without being required to eat food they do not like or more than they want to eat.
- 8.6 Encourage toddlers to be independent and develop social skills at meal times.
- 8.7 Establish healthy eating habits in the children by incorporating nutritional information into our program.
- 8.8 Talk to families about their child's food intake and voice any concerns about their child's eating.
- 8.9 Encourage parents to the best of our ability to continue our healthy eating message in their homes. This information will be provided upon enrolment and as new information becomes available in Newsletters. Families will be provided with information on good lunch box choices for Kids Uni iC Preschool.
- 8.10 Encourage educators to present themselves as role models. This means maintaining good personal nutrition and eating with the children at meal times.
- 8.11 Provide nutrition and food safety training opportunities for all staff including an awareness of other cultures food habits.
- 8.12 Children and parents are encouraged to contribute ideas for menu planning.
- 8.13 Educators are required to provide menu suggestions which complement and reflect the children's related experiences.
- 8.14 Parents are welcome to share a meal with their child.
- 8.15 Holidays, festivals and religious celebrations of various cultures provide a valuable opportunity to include special occasion foods. Special occasions may be celebrated with culturally appropriate foods.

- 8.16 Meals and snacks provided for the children will incorporate the five food groups. Daily minimum number of serves recommended during operating hours will be provided for each food group to assist in children's growth and development.
- 8.17 All dairy products will be full cream for children under 2 years and "lite" dairy products will be offered to children over 2 years. Low fat diets are not recommended for children under two years. Babies and young children grow very rapidly and need the fat supply in whole milk, cheese and yoghurt to provide the energy they need for growth and development. Reduced fat milk can be introduced after 2 years of age (*Nutrition Australia.org*)

9 Children with Special Dietary Needs

- 9.1 We recognise the specific dietary needs of children in care and are aware that the elimination diet can be dangerous as it is not nutritionally adequate and should always be supervised by a dietitian.
- 9.2 If a child requires a special diet the centre should be informed through Hubworks the online enrolment system that allows parents to update all information electronically and completing the "Allergy and Medical Notification Form 05".
- 9.3 Upon orientation and enrolment, the Nominated Supervisor will work in consultation with the cook and parents to address all special dietary needs requirements.
- 9.4 If a child has an allergy, which requires special dietary consideration, a parent must provide the centre with any written information from a dietician or medical practitioner.
- 9.5 Special diets due to religious beliefs or parental preference will be respected.
- 9.6 Educators will familiarise themselves with all information regarding special dietary needs, by consulting special dietary charts in each playroom, staff room on food trolleys and in the kitchen. These will be updated as required. All educators are informed of updates/changes as they occur.
- 9.7 Should an educator become aware of a child eating/drinking a product which should be avoided. Educators must immediately notify the Nominated Supervisor.
- 9.8 Consult with relevant experts and professionals to develop a menu that meets the child's special dietary needs.
- 9.9 Allergies and Special Dietary Needs are regularly discussed at staff meetings.
- 9.10 All educators including casuals are made aware of the necessary importance of checking allergy chart at every meal time.

10 Safe Food Handling, Hygiene and Storage

Food will be stored in compliance with current Food Handling Guidelines. Dishes will be washed either by dishwasher or by a sterilising method.

11 Children under 2 years

- 11.1 For children under 2 years:
- i. Breast milk, formula, milk or solid food will be fed by the educator in the prescribed quantities and at the times specified by the parent.

- ii. Parents must provide formula. The service will provide cow's milk, soy milk, rice milk and water.
- iii. Breastfeeding mothers are encouraged to feed their child at the centre.
- iv. Bottles will be warmed and will stand for more than one minute after heating.
- v. Bottles and food will be labelled with the child's name and stored appropriately. Bottles are to be placed in the body of the fridge, not in the door of the fridge. The reason for this is that the temperature in the door panels is not as cold as that in the interior of the refrigerator.
- vi. We dispose of any formula or milk left in the bottle after feeding.
- vii. Self feeding is encouraged at the appropriate stage of development eg. Finger foods, using a cup or spoon, sitting in a baby chair.
- viii. We assist and supervise infants and toddlers during meals and snacks.
- ix. To reduce choking hazards children under 2 years will not be given raw apple, raw carrot, raw celery, dried fruits. Skin will be removed from all fruit and vegetables.
- x. A record of each child's food and fluid intake will be kept daily for parental information.

12 Returning Bottles to Parents

All bottles will be rinsed but not sterilised after use and ensure all bottles, will be returned to the parents at the end of each day whether used or not. Parents should complete their own sterilisation procedure.

13 Emergency Supply

- 13.1 Services will stock full cream dairy milk and formula powdered milk for emergencies only. The service should stock a few different types of established brands of formula, including soy-based formula for children who are allergic to cow's milk.
- 13.2 If the mother supplies breast milk, then the Nominated Supervisor will contact the parent to have an alternative milk source approved.
- 13.3 Parents/Guardian will be responsible on enrolment to ensure that the details of their child/ren formula are kept up-to date including the strength and the type of formula their child/ren drink.
- 13.4 The Parent/Guardian also needs to inform the educators and other staff when their child/ren will begin the transition from alternative forms of milk to diluted milk to full-cream cow's milk.

14 Breastfeeding, Breast Milk and Bottle Warming

- 14.1 Healthy lifestyles and good nutrition for each child is paramount. As such, we encourage all families to continue breast feeding their child until at least 12 months in line with recommendations for recognised authorities.
- 14.2 We aim to work with families with children who are still being breastfed and provide a supportive environment by feeding children breast milk supplied by their families.
- 14.3 We will provide a supportive environment for mothers to breastfeed.
- 14.4 Families will be regularly reminded by educators and the service to update the service in regards to their child's preferences, habits, likes, dislikes, dietary requirements and restrictions.

15 Breast Milk Procedure

- 15.1 Breast milk that has been expressed should be brought to the service in a clean sterile container labelled with the date of expression and the child's name.
- 15.2 We encourage families to transport milk to the service in cooler bags and eskies; this should be immediately given to educators, who will put it in the refrigerator.
- 15.3 We will refrigerate the milk at 4 degree Celsius until it is required.
- 15.4 Breast milk will be warmed and/or thawed by standing the container/bottle in a container of warm water.
- 15.5 The milk will then be temperature tested by educators before being given to the child.
- 15.6 If the service does not have enough breast milk from the family to meet the child's needs that day, individual families will be consulted on what the service should do in these circumstances.
- 15.7 To avoid any possible confusion, we will not store unused breast milk at the service.
- 15.8 A quiet, private, lockable space with a comfortable chair will be provided for mothers/women to breastfeed or express milk. A sign will also be placed on the door when the mother/woman is using the facilities.

16 Educators who Breastfeed at the Service

- 16.1 The service also recognises the importance and benefits of breastfeeding and that many women will return to work before they wish to wean their children. Requests for allowances to be made for educators to continue breastfeeding once they have returned to work at the service will be treated sympathetically and reasonably and all efforts will be made to support the educator in her choice to continue breastfeeding her child.
- 16.2 On return to work from maternity leave, female educators may seek to change their work arrangements. The returning staff member will have a meeting with the Nominated Supervisor/Children's Services Manager to try and work out an arrangement which suits the educator, the Nominated Supervisor and also the running of the service. The service will provide Lactation Breaks for the educator to express milk or breastfeed her child. The Nominated Supervisor will be reasonably flexible as to when these occur.
- 16.3 A quiet, private, lockable space with a comfortable chair will be provided for women to breastfeed or express milk. A sign will also be placed on the door when the educator is using the facilities.
- 16.4 If arrangements have been made for the educator's child to come to the service to breastfeed and needs its nappy changed, the educator can use the service's nappy changing area as long as the relevant policies and procedures are followed.
- 16.5 When an educator is in the process of breastfeeding her child or expressing milk, educator to child ratios cannot be compromised. Educators will work to cover the Lactation Break as they would any other break.

17 Safe Storage and Heating of Babies Bottles (using Bottle Warmers)

- 17.1 Our service will use bottle warmers/hot water to heat Infant Formula/Cow's Milk/Breast Milk.

- 17.2 Our service will not use microwaves because of uneven heating when a bottle is heated in the microwave.
- i. The service will use the bottle warmer as per the manufacturer's instructions.
 - ii. Educators will ensure that bottle warmers are inaccessible to children at all times.
 - iii. Bottles will be warmed for less than 10 minutes.
- 17.3 The educator or other staff responsible for feeding a particular child will check to see that the name on the bottle being used correctly matches the name of the child he/she is to feed.
- 17.4 If the service is preparing an emergency bottle using the service's formula, check to ensure that the formula is correctly made up for the child's age and review the Parents/Guardians' instructions.
- 17.5 Babies should be held when being fed with a bottle, never leave babies unattended to feed with bottles "propped-up" to them.
- 17.6 If an emergency arises and the educator or other staff are called away, another educator or other staff should continue to feed the child. If this is not possible, the educator or other staff must cover the teat and place the bottle in the fridge. If the feed is interrupted for more than a few minutes the bottle must be emptied and a new one made before continuing to feed the child.
- 17.7 Children **MUST NOT** share bottles or dummies. In order to avoid choking or, swapping of bottles and contamination, children should not be allowed to walk around with bottles.
- 17.8 Once milk has been heated, any unused portion must be discarded. The amount the child drinks is to be recorded in the daily communication system in place at the service. This record of food intake is to be available for Parents/Guardians to read at the end of each day.
- 17.9 Dummies and bottles should only be used on request by families, for settling children. Dummies should not be attached to a child's clothing. If they are soiled, they should be sterilised.
- 17.10 **Under no circumstances will milk or breast milk be reheated for future use or be saved to take home.**

18 Sources

- Education and Care Services National Regulations 2011
- My time, Our Place framework for School Age Care
- Early Years Learning Framework
- National Quality Standard
- Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood Dietary Guidelines for Children and Adolescents in Australia.
- Infant Feeding Guidelines 2012
- Australia Dietary Guidelines 2013
- Eat for health: Dept Health and Ageing and NHMRC
- Food Act
- Food Regulations
- NSW Food Authority
- Work Health and Safety Act
- Work Health and Safety Regulations
- Australian Breast Feeding Association Guidelines

19 Review

This policy will be reviewed every 2 years and the review will include Management, Employees, Families and Interested Parties.

20 Version Control Table

Version Control	Date Released	Next Review	Approved By	Amendment
1	Feb 2012	Feb 2013	Michele Fowler Manager – Kids Uni	
2	Feb 2013	Feb 2014	Michele Fowler Manager – Kids Uni	Paragraph inserted re application of policies across all centres. Migrated into new QA format. This policy replaces the Children with Special Dietary Needs Policy, Nutrition Policy, and the Obesity Policy.
3	Dec 2013	Dec 2014	Michele Fowler Manager – Kids Uni	Minor updates provided by Centre Support to update dietary guidelines references and the eat for health calculator
4	Jun 2014	Jun 2016	Michele Fowler Manager – Kids Uni	Policy reviewed with no changes required. The review period changed to 2 years.
5	Mar 2016	Jun 2018	M. Gillmore – UniCentre Manager	Policy reviewed with a few minor editorial changes required.