

Policy 6.11 Nutrition, Food and Beverages and Dietary Requirements

Policy Statement:

Our aim is to ensure that all children educated and cared for at the Ballan Community Childcare Centre (BCCC) are provided with their necessary daily nutritional requirements and that mealtime is a positive time of learning and socialisation, as well as nutrition.

BCCC is committed to providing children in care with healthy and nutritious meals that meet a minimum of 50% of their daily nutritional requirements (Recommended Daily Intakes – RDIs).

We understand that providing meals for young children is not simply about meeting their daily nutritional requirements, it also provides children with routines, social and eating experiences, development of self help skills and sound hygiene practices (ie - learning to wash their hands before and after meals).

Meal times are seen as an important component of our daily programme and are used to maximise children's learning opportunities.

Definitions:

Food Safety Plan: A BDHC controlled document which details the health and hygiene principles and practice that will be followed by all staff and contractors in relation to the preparation, handling and storage of food.

Medical Management Plan: A plan provided to the Centre by the parent/guardian specifying practices to follow to (i) reduce the likelihood of an adverse event and (ii) response sequence to follow if an adverse medical event occurs. The Plan will be developed for the parent/guardian by the child's GP and will include the GPs contact details. NOTE: A Registered Nurse will check all Medical Management Plans that have been provided, prior to the Plan being implemented by Centre staff.

Risk Minimisation Plan: A plan developed by the Centre in consultation with the child's parent/guardian which details a range of processes / practices that will be followed by the Centre to reduce the risk of adverse medical incidents occurring.

BCCC Confidential Enrolment Form: An enrolment form that must be completed by all parents/guardians prior to their child commencing at BCCC. The Form includes a section on the medical & health information pertaining to the child.

Guidelines

- The formation of healthy eating habits is critical in children 0-5 years
- Children's individual needs are met by flexible meal times, re-heating of meals according to the Food Safety Plan, encouraging children to develop healthy eating habits whilst taking into account their food preference or choices, cultural and dietary requirements, and responding to their individual daily nutritional needs.
- Meals provided at the Centre account for at least 50 per cent of the recommended daily intake for children in long day care
- The Hotel and Food Services Manager is responsible for the development of a 4 week menu for use at the Centre. This is developed in conjunction with a BDHC dietician. (The current 4 week menu is appended to the policy.)
- The 4 week menu is reviewed on an annual basis by the BDHC dietician to ensure it continues to meet the children's nutritional needs. (Appendix includes most recent reviews of the current menu.)
- Children's nutritional requirements are met through complying with the recommendations as set out in recent NHMRC publication, *Eat for Health Australian Dietary Guidelines Summary (2013)*
http://www.nhmrc.gov.au/files/nhmrc/publications/attachments/n55a_australian_dietary_guidelines_summary_130530.pdf

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- Serves of essential foods:

What’s in a serve? Essential foods for long day care menu planning:

This table outlines the amount of food from each core food group required to meet the nutrition needs of children in long day care. A children’s serve refers to the portion of food appropriate for children aged 1–5 years. To be practical in the childcare setting, these serve sizes have been adapted from the serve sizes in the *Australian Guide to Healthy Eating (NHMRC 2013)*.

Food group	Minimum amount per day in care	Minimum children’s serve per day in care	Examples of 1 children’s serve
Lean meat, poultry, fish, eggs, legumes and nuts	50g raw meat/poultry or equivalent	1 children’s serve	<ul style="list-style-type: none"> • 50g raw lean red meat (e.g. beef, lamb, kangaroo), lean pork or poultry without the bone • 30g lean cooked red meat • 40g cooked chicken (skin off) • 60g raw fish or 50g canned or cooked fish • 35g dry weight beans or legumes or 85g (½ cup) cooked or canned beans or legumes (drained) • 15g peanut butter or nuts (if centre policy allows) • 1 egg • 20g dry weight Textured Vegetable Protein (TVP) • 85g tofu • 60g hummus
Fruit	75g fruit	1 children’s serve	<ul style="list-style-type: none"> • 75g fresh fruit* (1 small piece, ½ medium piece or equivalent amount of 2–3 types) • 75g (½ cup) diced, cooked or canned fruit (drained) • 15g dried fruit*#
Vegetables and legumes	75–100g vegetables or legumes	1–1½ children’s serves	<ul style="list-style-type: none"> • 75g fresh, frozen, canned (drained) or cooked vegetables* (½ cup cooked, 1 cup salad, 1 small potato) • 30g dry weight beans or legumes or 75g (½ cup) cooked or canned beans or legumes (drained)
Milk, yoghurt, cheese and alternatives	200mL milk or equivalent	2 children’s serves	<ul style="list-style-type: none"> • 100mL milk/calcium fortified soy drink • 50mL evaporated milk • 15g milk powder • 100mL custard • 80g yoghurt/calcium fortified soy yoghurt • 15g hard cheese (1 slice), 50g ricotta cheese

* Some hard fruit and vegetables may need to be cooked, mashed, grated, pureed or very finely sliced.

Dried fruit leaves a sticky residue on teeth and can contribute to tooth decay. If included on the menu it should only be offered once per week and preferably with other food.

- Menus consider the medical, cultural and religious requirements of children in care.
- Seasonal fruit and vegetables provide an important basis for the Centre menu.
- Children are involved in the meal time routines where appropriate.
- Meal times are an opportunity to provide social and learning experiences.
- The weekly menu is posted in each room so parents can view the planned meals for the day/week their child is in care.
- Children, families and staff are invited to provide feedback and make suggestions for the centre menu.
- To ensure the protection of children, families are asked not to bring food into the centre to be shared amongst other children.

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- Birthday cakes are provided by parents with individual serves preferred and all ingredients listed in a birthday cake ingredient list book located in the administration office of BCCC. Children are offered a wooden cake to blow out a candle for effective infection control.
- If food is provided for special occasions, staff will try to keep the focus on the occasion rather than the food, consider serving everyday food in special ways and will aim to avoid food high in fat, salt and sugar.
- Food is prepared offsite at the commercial kitchen located within BDHC and is transported to the centre meeting food safety requirements as per the BDHC Food Safety Plan.
- Food safety audits (both internal and external) are undertaken by BDHC in accordance with the Food Safety Plan.
- All BDHC kitchen staff and at least one staff member from the Centre hold a Certificate in Food Handling qualification.
- BDHC's Chef Manager has undertaken training in, and holds a formal qualification as a food safety supervisor.
- The Food Safety Plan is adhered to and reviewed annually – by BDHC and by an independent external auditor arranged by BDHC.
- BDHC Hotel and Food Services Manager is required to ensure that all kitchen staff have undertaken appropriate online training and hold the qualification of Certificate in Food Handling.
- The BDHC dietician provides annual training to BCCC staff in the correct portion size to meet daily requirements when serving children.

Responsibilities

1. BCCC staff, BDHC Hotel and Food Services Manager, chefs and kitchen staff all have a responsibility to ensure that:

- Water and milk are provided for the children at snack and meal times.
- Water is accessible to children at all times.
- Meals are provided for children needing alternative dietary requirements.
- Sugar and salt are not used, or where necessary are kept to a minimum.
- The weekly menu is displayed within the Centre.
- Safe food handling and hygiene practices are undertaken at all times.
- The Centre complies with the Food Safety Plan; this is verified through audits undertaken by an external accredited auditor.
- Emergency foods are kept on the premises and their use by date is checked regularly. Enough food (eg. dry biscuits), canned food (eg. soup, baked beans), and fluids (eg. bottled water) are kept at the each centre for all children to cover a minimum of 24 hours. If an emergency continues beyond 24 hours other methods of providing food for the children will be explored, for example purchasing suitable healthy food from local shops.

2. BCCC staff have a responsibility to ensure that:

- Water is accessible to children at all times.
- Hygiene practices are maintained prior to and during meal times.
- We model hygiene, safe food handling and social skills at meal times.
- Children are seated whilst eating and drinking.
- We sit with children at meal times.
- Children are provided with opportunities to participate in cooking experiences.
- Children are provided with opportunities to prepare the table for meals, serve themselves and pack away afterwards.
- Meal sizes and portions sizes meet the RDI guidelines as outlined in the above table to ensure that children are not overfed. The meals served up using the appropriate portion size utensils.

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- If children request additional food then, in the first instance, vegetables, fruit or a dairy option will be offered.
 - Meal times are used as a social and learning experience for children.
 - We encourage children to develop their self-help skills and sound hygiene practices.
 - Meal times are relaxed, flexible and pleasant experiences for children.
 - When extra fluids are required infants are provided with boiled, cooled water.
 - Children are offered both courses at their meal time; food is not used as a reward or punishment.
 - Children are encouraged to discuss food and related topics during meal times and other programme activities.
3. Family's responsibilities:
- At time of enrolment, the child's parent/guardian will declare in the BCCC Confidential Enrolment Form whether any dietary restrictions apply to their child. This may be due to a medical condition, allergy - or cultural or religious belief which impacts the food and beverages that may be consumed by the child.
 - Where the child has a medical condition, a Medical Management Plan is provided by the parents at time of enrolment which will include procedures to follow in the event of medical emergency. A Risk Minimisation Plan will subsequently be developed by BCCC in consultation with the family that will fully specify the range of processes / practices to be followed by the Centre to reduce the risk of adverse medical incidents occurring. For Further information see the *BCCC Medical Conditions Policy*
 - Where a parent brings food from home to be consumed by their child, the Centre will encourage the parent to provide a healthy meal that complies with the minimum health and hygiene requirements as specified in the Food Safety Plan.

Miscellaneous Policy Guidance

(i) Preventing choking on food

Choking is a risk for young children because their back teeth may not be fully developed until around four years of age. They are still learning to grind and chew food. To prevent choking:

- Children are supervised to ensure choking does not occur.
- Small hard lumps that may cause choking are avoided.
- Foods such as carrots, celery and apple are grated, cooked or mashed.
- Meats such as sausages, frankfurts and other meats are cut into small pieces.
- Young children are not given popcorn, nuts, hard lollies, corn chips or similar foods.
- Children are always seated when they eat.
- Young children are not forced to eat.

(ii) Managing food allergies and intolerances

Parents and the centre need to work together to develop a shared management plan for managing individual allergies or intolerances. If staff suspect a child may have an allergy or food intolerance, parents will be informed and encouraged to seek further medical advice. The parents will also be encouraged to fill out a Dietary Requirements/Restrictions Information Form.

(iii) Feeding of infants 0-6 months

Caregivers will ensure that:

- Breast milk or formula meets the fluid and nutrition needs of infants until around six months of age.
- Breast milk or formula provided by parents is refrigerated until needed.
- Breast milk or formula is warmed just prior to feeding the infant.
- Only the amount of breast milk or formula needed is warmed.

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- Breast milk or formula is warmed by water bath method (stand bottle in hot water).
- Microwaving is not used for breast milk.
- The bottle is shaken and the temperature checked before it is offered to the baby.
- Food or formula heated in a microwave is stirred or shaken before the temperature is checked.
- Cooled boiled water is offered when extra fluid is required.
- Fruit juice is not made available to children

(iv) Introducing solids to infants

Caregivers will ensure that solids are introduced in consultation with the child's family, and the progression to different textured food is made according to the stages of infant development.

Around 0-6 months – liquid:

- Breast milk or infant formula as required.

Around 6 months – pureed or sieved:

- Iron fortified baby rice cereal, cooked fruit and cooked vegetables.
- Start with 1-2 teaspoons after milk.
- Introduce one new food every three 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 food before milk feed three times per 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 piece in the mouth.

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

- Offer a wide variety of fruits, vegetable, 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.

References

The Geelong Children's Centre Policy Manual (2012)

Education and Care Services National Regulations (2011) 77, 78, 79, 80, 168

Eat for Health Australian Dietary Guidelines Summary (NHMRC 2013)

Healthy Eating for Children (NHMRC 2013)

Australian Guide to Healthy Eating, NHMRC (2013)

Menu planning guidelines for long day care, Healthy Together Victoria Health Eating Advisory Service (2013)

Links to frameworks/accreditation

National Quality Standards 2.1, 2.2, 2.3

Interaction with other BDHC policies

Medical Conditions Policy

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APPENDIX

- Current BCCC 4 week Menu
- Menu reviews