

Food Policy: Nutrition and Food Handling

NQS

QA2	2.1.3	Healthy lifestyle - Healthy eating and physical activity are promoted and appropriate for each child.
QA2	2.1.1	Wellbeing and comfort - Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's need for sleep, rest and relaxation.
	2.1.2	Health practices and procedures - Effective illness and injury management and hygiene practices are promoted and implemented.
	2.2.1	Supervision - At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

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

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.

Related Policies

Additional Needs Policy

Enrolment Policy

Health, Hygiene and Safe Food Policy

Medical Conditions Policy

Nutrition

Policy Statement

At Seaford District Community Children's Centre we are a **lunch box** service. This means our families provide the food, snacks and formulas to meet their children's daily nutritional requirements. We believe good nutrition is important for the health and well being of all children.

Families will provide healthy food choices according to their child's individual needs.

Staff will follow children's individual routines to meet their nutritional needs.

Healthy eating habits are easier to model if all children, staff and our families are following healthy eating guidelines as addressed below.

Terminology

The term '**the centre**' refers to Seaford District Community Children's Centre's two services Long Day Care and Out of School Hours Care.

Aims

To establish standards in food and nutrition for the children of our service.

To convey those standards to educators, families and guardians and be aware of good nutrition.

Strategies

- To introduce children to a wide variety of foods, tastes and textures.
- Involve parents/caregivers in the nutrition curriculum in order to enable families to contribute their knowledge and expertise to school and preschool programs while also learning about the healthy eating practices being promoted through the Centre.
- Foster positive communication and relationships with families to support healthy eating outcomes for children.
- Encourage practical experiences in food preparation.
- Appreciate foods from a variety of cultures.
- Positively promote healthy foods.
- To refer to the National Quality Framework and Early Years learning Framework to support children's learning and development regarding food and nutrition.
- For educators to plan and implement experiences that develop children's understanding of 'healthy eating practices', 'good hygiene practices', and 'develop healthy eating choices'.
- To provide a learning curriculum that provide opportunities to develop practical food skills related to growing, selection, storage, preparation, cooking and serving of food

The Environment

- To provide a safe and friendly eating environment.
- Children are encouraged to try new foods but not forced to eat.
- Healthy eating learning programmes are inclusive of the socio-economic, cultural and spiritual perspectives of the community.
- Children will be encouraged to be independent and feed themselves but will be assisted when required.
- Mealtimes are set to a regular schedule but are flexible for children's individual needs.
- Educators and children will wash and dry their hands before handling or eating food.
- Educators will sit with children whilst they eat their meals.
- Food will not be used as punishment or reward.
- Educators will talk about food offered in a positive manner.
- Food awareness experiences will be taken from a variety of cultures.

- Children are provided enough time to eat in a safe, comfortable environment. Children will eat in a supervised social setting.
- Children and educators will be seated while eating.
- **Drinking water will be available for children at all times.**
- Parents and carers of children will be encouraged to pack healthy lunches that will meet 50% their child's daily nutritional requirements.
- Families will be provided with the most up to date nutritional information by the centre through newsletter and flyers.

Non-compliance with the Food Policy:

Food in the lunchbox that does not comply with the food and nutrition policy will be sent home with additional information regarding nutrition. (see appendix attached)

Continued non-compliance will result in the following

- **Step 1** Meeting with carer/parent educational information provided to family
- **Step 2** Meeting with Director/parent/team leader educational information provided to family.
- **Step 3** Referral to Private Paediatric Dietitian

The centre will provide a sandwich in replacement of the non-compliant lunchbox for which families will be charged by the centre.

Cooking Experiences/Special Lunch Days:

Our Centre regularly offers cooking experiences for children to participate actively in. We choose a range of recipes to explore including from different cultures and our own culture.

We encourage children to try different foods on our special lunch days whilst also focusing on different cultures, as well as our own. Parents are informed and consulted on these special events. Information on safe food handling and nutrition can be obtained in home languages on request.

Fundraising:

Fundraising and sponsored activities within the Centre will be aligned with Dietary guidelines for children. The Centre will ensure any partnerships with food industry and related organisations, including sponsorship arrangements, support the Centre's healthy eating guidelines.

Special Occasion Food:

Birthdays are celebrated with educators and children, where the emphasis is on the "occasion" rather than the food. A cultural practice we have created as a substitute to the traditional sweet birthday cake is for parents to bring in a watermelon or cantaloupe which we will decorate with candles. **Birthday cakes will not be permitted at the centre.**

Foods that do not comply with dietary guidelines will be offered no more than twice a term.

Review and Communication:

The Seaford District Community Children's Centre Food Policy: Nutrition and Food Handling will be reviewed annually. The policy will be communicated to families as part of the family orientation process and be accessible in the foyer policy display. Information updates with current issues relating to healthy eating and food handling practices will be provided in pockets or through newsletters.

- Kuula educators will record children's food consumption for parents and share at the end of each day.
- Kardi, Pirlta and Tarnda rooms, lunch box content will be discussed verbally as required.
- A food prompting document will be provided in the lunch box with additional lunchbox ideas from time to time

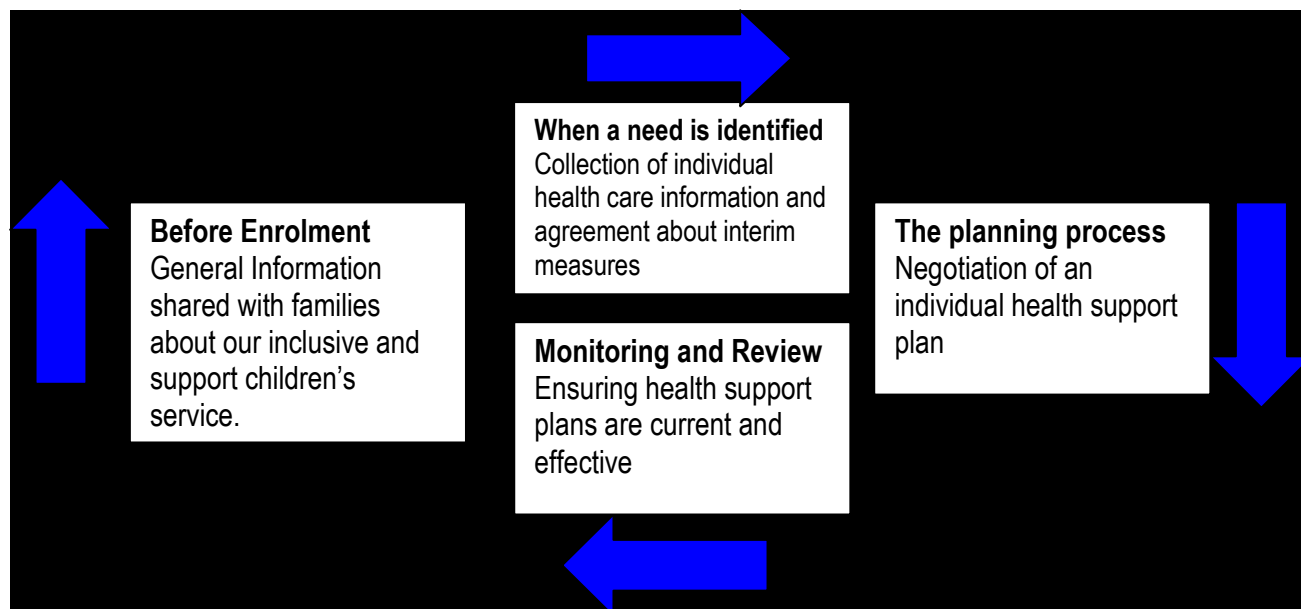
Training and Development:

Educators have access to current food handling/nutrition training and are encouraged to attend training. The Director and educators will review and discuss The Food Policy: Nutrition and Food Handling through staff and team meetings in consultation with the Director and an Early Childhood Nutritionist. The staff will have access to professional development materials, such as The South Australian Government Health Department's Food Safety resources and online training such as Onkaparinga City

Councils I'm ALERT food safety training including during the induction process. Educators will review their food safety training annually.

Allergy Aware Centre: Special Diets for Food Allergies, Food Intolerance and other special dietary needs:

Seaford District Community Children's Centre is a supportive environment that work's in partnership with parents to provide a safe environment for children. Due to the high incidence of nut allergies, this centre adopts policies and procedures with a view to ensuring we are a NUT FREE centre. It is appreciated while we are unable to guarantee this, all reasonable and possible steps are taken to seek to comply with this mandate. The following procedure demonstrates the steps taken when the need for special diet is identified.



Families need to inform the director in writing if their child has any food sensitivity or allergy, or special dietary requirements. Written evidence about any special diet from your child's doctor is required as per our Protective Care Policy: Health and Medical.

The Centre will ensure that children with medically warranted individual health care needs related to food and nutrition are supported in line with the Department for Education and Child Development (DECD) health support planning policy. This includes children who have special dietary requirements. It also includes children who have a food-related mental health issue.

Children who have specific health needs:

Where a child with special dietary needs for health or medical reasons attends the centre or will attend the centre we must hold on file a Health Management Plan that has been completed by the child's medical practitioner or other health professionals such as a dietician or speech pathologist.

Children who have potentially serious conditions will not be accepted into care unless;

- There is a current health plan on file
- The child's medication or required treatment is at the centre
- Educators caring for the child have been fully informed of the details of the health plan
- Educators caring for the child have received accredited training to enable them to administer required treatment or carry out necessary procedures.

We acknowledge and respect specific dietary needs pertaining to specific religious and cultural beliefs and other reasons. A 'Special Diets form' is attached to this policy and needs to be filled out by parents for **non medical reasons**; in this case health professional input is not required. If your childcare professional is concerned that the diet is not nutritionally adequate as a result of the 'special diet request' advice and support will be sort from health professionals such as an Early Childhood Nutritionist.

Guidelines for Lunches: also Lunchbox Checklist both half and full day

Research has shown that when offered a variety of healthy foods children can and do make good choices. Offering a variety of healthy foods every day will provide children with the range of nutrients they need for growth as well as help set healthy eating habits for later in life. Encourage children to drink water as it is the best drink for quenching thirst and doesn't spoil the child's appetite.

A healthy Nutritious Lunchbox provided by parents will be consistent with the Australian Dietary Guidelines for Children and Adolescents

The table below illustrates the types of food and the number of serves from each food group that parents are encourage to offer if their child is attending 8 hours of child care per day.

<p>Breads and Cereals 3 or 4 serves per day</p> <ul style="list-style-type: none"> ▪ Bread, bread rolls, fruit loaf, pita and Lebanese breads ▪ Dry biscuits Ryvita, Vita-weets, Salada, Cruskits ▪ Crumpets ▪ Muffins homemade savoury and fruit ▪ English muffins ▪ Scones ▪ Pasta ▪ Rice ▪ Weetbix 	<p>Meat and protein 1 medium serve or 2 small serves per day</p> <ul style="list-style-type: none"> ▪ Eggs (hard boiled, omelette) ▪ Lean meat (turkey, chicken, beef) ▪ Tuna and salmon ▪ Cheese (ricotta, cottage, cheddar) ▪ Yoghurt (fruit or plain) ▪ Beans and legumes 	<p>Vegetables 3 serves per day</p> <ul style="list-style-type: none"> ▪ Vegetable soups ▪ Cooked vegetables ▪ Salad vegetables ▪ Avocado ▪ Tin fruit (in natural juice) ▪ Snow peas ▪ Baked spud and filling 	<p>Iron This is an important nutrient because:</p> <ul style="list-style-type: none"> ▪ It carries oxygen around the body. ▪ Young children who don't have enough iron may become anaemic. ▪ Foods that contain good amounts of iron are meat, fish and chicken, eggs and fortified breakfast cereal.
<p>Fruit 2 serves per day</p> <ul style="list-style-type: none"> ▪ Fresh fruit ▪ Dried fruit 	<p>Dairy 3 serves per day Please note full cream under 3</p> <ul style="list-style-type: none"> ▪ Yoghurt (fruit or plain) ▪ Cheese ▪ Milk (plain) ▪ Soy milk (calcium enriched) ▪ Fruche ▪ Custard (no choc) 	<p>Calcium Encourage the habit of including calcium rich foods because:</p> <ul style="list-style-type: none"> ▪ It is essential for strong, health bones and teeth. ▪ Dairy foods such as milk, cheese and yogurt provide most of the calcium in children's diet, in addition to more than 10 essential nutrients such as carbohydrate, protein and B vitamins. 	

Meal time:

Young children need to eat regularly from the five food groups throughout the day. Meal and snack times coupled with other routine tasks assist in guiding children's sense of time throughout the day. These routines help children to regulate their energy levels and anticipate what happens next during the course of the daily routine. Meal times are therefore important indicators of time and although we are responsive to the child's individual needs meals is part of the general routine.

Encourage children to drink water as it is the best drink for quenching thirst and doesn't spoil the child's appetite.

Dental Health

Tooth decay is especially common in children and adults. When your child consumes food and drinks that are sugary (high in carbohydrates) the bacteria that naturally live in their mouth and in plaque, break down the carbohydrates into acids. These acids attack and dissolve the outer surface of the tooth (enamel). This process is known as demineralisation and can result in tooth decay.

Children who have frequently been comforted with a baby bottle have an increased risk of tooth decay.

Breastfeeding and Bottle-feeding:

The service supports families in their choice of breast or bottle-feeding. Breast feeding mothers are welcome to come in and feed their babies at their convenience on a comfortable sofa lounge. Families need to provide their own bottles, milk and formula. All bottles and food products need to be labelled and placed in the baby's fridge. See Bottle warming procedure attached to food handling policy.

Babies should be weaned to a cup at about 12 months. We actively discourage baby bottles promoting cups and water drink bottles only.

Meal Breaks Long Day Care and Out of School Hours Care

Breakfast:

Breakfast is served until 7.30 am. Breakfast consists of cereal (such as weet-bix), wholemeal toast with vegemite, fruit loaf toasted, fruit, and milk.

Breakfast at Out of School Hours Care is served until 8.00am.

Morning tea and afternoon tea:

Families provide a piece of fruit for morning and afternoon tea, which educators cut up and then shared in small groups with the children. Morning and afternoon tea consists of fruit (provided by families) and cheese and crackers provided by the Centre.

At Out of School Hours Care only afternoon tea is served between 4.00 - 4.30pm. Families are to provide recess and Lunch during the Vacation Care period.

Lunch:

Families provide a lunchbox using selections from the five food groups. It is important that the child's lunchbox contains at least 50 percent of their *Recommended Daily Intake (DDI)* if the child spends eight hours at the centre in the day. Educators will monitor and report to parents to ensure children have access to appropriate, nutritious food.

Late snack:

Families provide a late snack, (from their child's lunchboxes) which is served to the children between 4.00pm - 5.00pm this ensures that the children's energy levels will get them through until home time.

Helpful Hints:

- Please ensure all children's lunchboxes are named and placed in the fridge.
- Tarnda preschool lunchboxes need to be in an insulated lunchbox with ice pack, and placed in allocated place in the Tarnda room.
- All children must bring their own, labelled, water bottle.

Allergy Aware

Seaford District Community Children's Centre is an allergy aware service that works with families to support children's inclusion in the education and care program. Due to the high incidence of nut allergies, this centre adopts policies and procedures with a view to ensuring we are a NUT FREE centre. It is appreciated while we are unable to guarantee this, all reasonable and possible steps are taken to seek to comply with this mandate. The Centre will not purchase or provide any nuts or nut products. **Families are not to bring to the centre nut products.**



A food allergy is an immune system response to a food protein that the body mistakenly believes is harmful. Signs and symptoms of food allergy can be mild, moderate or severe. An allergic reaction can include; hives, swelling of the lips, face and eyes, abdominal pain, vomiting, swelling of the tongue, swelling of the throat, breathing difficulty, persistent dizziness and/collapse. Food allergies can be severe, causing potentially life-threatening reactions known as anaphylaxis. Anaphylaxis must be treated as a medical emergency, requiring immediate treatment and urgent medical attention. Food allergy now affects one in 10 infants and about two in 100 adults in Australia. The most common triggers, causing 90 percent of allergic reactions in Australians are **egg, cow's milk, peanut, tree nuts (such as cashew and almond), sesame, soy, wheat, fish and shellfish**. Some lesser known triggers also include kiwi

fruit, banana, chicken, mustard and celery. Children often outgrow cow's milk, egg, soy and wheat allergies during childhood. Common life-long allergies include peanuts, tree nuts, sesame and seafood.

'Discretionary' Foods and Drinks

The Seaford District Community Children's Centre Food Policy actively discourages 'discretionary' foods and drinks at the centre. Some foods and drinks do not fit into the Five Food Groups because they are not necessary for a healthy diet. Discretionary choices are foods high in kilojoules, saturated fat, added sugars and/or salt. They typically have very little nutritional value and are often processed and packaged. Eating discretionary foods too frequently can result in too much fat, sugar or salt in the diet and can lead to poor eating habits and poor health. Limit the amount of discretionary foods children eat, and avoid offering these foods as prizes or rewards, or as comfort foods. Success in encouraging healthy eating habits in children is more likely when parents, educators and carers work collaboratively. Educators and families can create opportunities to teach children the difference between everyday and discretionary food choices.

Processed foods contain high levels of sugars, fats, preservatives and colours and are not recommended for the healthy development of children.		
These foods are not for consumption whilst your child is in our long day care at SDCCC		
LCM bars Lollies Chocolates	Fruit bars Muesli bars Roll ups fruit straps	Nuts Peanuts cashew nuts Peanut butter Nutella
Fruit buns with icing sugar or sugar on top	Chips, cheezels, twisties, pretzels or similar	Soft drinks and cordials All fruit juices (unless a modified dietary plan is in place)
Sugary sandwich spreads (honey, jam, chocolate spreads, hundreds and thousands,) Sweet biscuits all types	High salt biscuits (such as barbeque shapes, chicken crimpy etc)	Cakes and doughnuts (including homemade cakes eg banana bread and sweet cake muffins)
Frankfurts, hotdogs Commercial party pies, sausage rolls	Popcorn Corn chips Soy chips	Fast foods such as McDonald's

Preventing Choking

Children of any age can choke on food, but children under 4 years are most at risk because they:

- do not have back teeth to chew and grind food
- are still learning to eat, chew and swallow.

How to make eating safer

- Do not give food or drink to children when they are running, playing, laughing or crying.
- Always sit children down to eat.
- Stay close and watch children while they eat.
- Never force children to eat.
- Encourage children to feed themselves.
- Encourage children to eat slowly and chew well.

How to make food safe to eat for children under 4 years of age

Type of food	Examples	How to modify to make food safer
Foods with skins	Sausages.	Remove skins, cut lengthwise, and then into small pieces.
Round foods	Grapes and cherry tomatoes.	Cut in half.

Foods with seeds, pips and stones	Cherries, stone fruit, olives.	Remove seeds, pips and stones and cut into small pieces.
Foods that are hard, crunchy or stringy	Hard fruit and vegetables such as raw	Grate, very finely slice, cook or mash.
	Corn chips, popcorn, nuts, and hard or sticky lollies. Very hard crackers	Don't serve these or bring to childcare
Foods that are tough and chewy	Meat with gristle and bone. Tough meat.	Remove fat, gristle and bone. Cut into small pieces. Mince, shred or slow cook.
Foods containing small bones	Fish, chicken.	Remove bones and cut into small pieces.

Food Preparation and Food Hygiene Procedure

The Seaford Community District Children's Centre is a lunchbox service and considered low risk. The Seaford Community District Children's Centre aims to ensure that the food supplied at the centre is safe and suitable to eat through applying good food hygiene and handling practices as stated by the Food Act.

Staff access to current food handling/ nutrition training online through Onkaparinga City Council <http://www.imalert.com.au/foodsafety/onkaparingacity/onkaparinga-food-safety.phpl>.

Our service will follow appropriate food preparation hygiene techniques to meet the requirements of the *Food Standards Australia New Zealand* such as:

- Wash hands before food preparation.
- Cleaning food preparation area before, during and after use.
- Using colour-coded chopping boards in order to prevent cross contamination of raw food.
- Ensuring that individuals preparing food know, follow and adhere to the appropriate hygiene procedures. This includes:
 - Washing their hands
 - Keeping their personal hygiene at a high level. For example, tying their hair back or keeping it under a net
 - Not wearing jewellery (wedding band excluded)
 - Covering cuts with a blue bandaid and gloves and
 - Not changing nappies before preparing food.
- Avoiding the contamination of one work area to another by using colour-coded wash cloths and having specific cleaning implements (for example gloves and scourers) for a specific area.
- Avoiding the contamination of one work area to another by using the colour-coded wash cloths system and restricting the movement of contaminated items (such as gloves and cleaning implements) from one area to another.
- Clean children's dining tables with soap and water and dry before serving food.
- Ensuring food is always served in a hygienic way using tongs and gloves.
- Clean children's dining tables with soap and water and dry after meal times.
- Each child will be provided with their own clean drinking and eating utensils at each mealtime. These utensils will be washed after each use. Educators will actively encourage and monitor children so they do not to use drinking or eating utensils which have been used by another child or dropped on the floor.

- Providing families with current and relevant information about food preparation and hygiene.
- Showing and discussing with children the need for food hygiene in both planned and spontaneous experiences.

Cooking with Children

We sometimes include cooking experiences in our service's programming for the children. When these experiences are carried out, educators that are supervising will be vigilant to ensure food preparation remains a hygienic and safe experience. The relevant points from the above food preparation procedure will be followed during the children's cooking experiences.

Example of the type of activities children will participate in during cooking experiences include:

- Helping choose what to cook.
- Measuring and weighing ingredients.
- Stirring or mixing ingredients.
- Washing salad, vegetables or fruit.
- Setting the tables.

Food Safety, Temperature Control and Transport Procedure

We will, to the best of our ability, educate and promote safe food handling and hygiene in the children and families by:

- Provide food safety information from Safe Food Australia and NSW Food Authority.
- Encouraging 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.
- Encouraging staff to present themselves as role models. This means maintaining good personal nutrition and eating with the children at meal times.
- Providing nutrition and food safety training opportunities for all staff including an awareness of other cultures food habits.

The bacteria that commonly cause food poisoning grow rapidly between 5°C and 60°C, this is commonly referred to as the “temperature danger zone”.

To keep food safe:

- Children's lunchboxes brought from home will to be placed in the refrigerator.
- Tarnda Kinder lunchboxes will contain an ice-brick and be placed in the shelving units indoors on home days.
- Don't leave perishable foods in the temperature danger zone for longer than 2 hours.
- Keep cold food in a fridge, freezer, below 5°C until you are ready to cook or serve, eg if you are serving salads keep them in the fridge until ready to serve.
- Keep hot food in an oven or on a stove, above 60°C until you are ready to serve.
- Refrigerate leftovers as soon as possible, within 2 hours. If reheating leftovers, reheat to steaming hot. Heating food is not always recommended, however.
- Never defrost foods on the bench top. Foods should be defrosted overnight in the fridge or in the microwave.
- Use a thermometer to make sure your fridge is below 5°C. Don't overload refrigerators, as this reduces cooling efficiency.
- All foods (dry, cold and frozen) will be used by the FIFO rule (first in, first out). This will allow a rotation of food to make sure older stock is used first.
- Store dry foods in sealed, air-tight containers.
- Store food on shelving.
- Any food removed from its original container must be stored in a container with the used by date of the food written on it. The ingredients must also be listed with the date it was opened.
- Ensure the food storage areas are well cleaned, ventilated, dry, pest free and not in direct sunlight.
- Prevent pests by cleaning spills as quickly as possible and removing garbage/waste frequently.
- All foods are wrapped, covered, dated (used by date and date it entered the Centre) and labelled.
- Store foods on shelves, never on the floor including play dough material.
- Store raw and cooked foods separately. NEVER store raw foods on top of cooked foods as juices may drip down and contaminate the cooked food.
- Store food once it has sufficiently cooled down. Foods cool quicker in smaller, shallow containers.

- Fridges and freezers need to be cleaned regularly and fridge door seals checked to be in good repair.
- The operating temperature of the fridge and freezer need to be checked regularly and a record kept of this.

Protecting food from contamination will be achieved by:

- Using containers with lids or by applying plastic film over each container. These materials will be suitable for food contact to ensure that they do not contain any chemicals that could leach into the food.
- Aluminium foil, plastic film and clean paper may be used and food will be completely covered.
- Food already in packaging may not need additional coverage. However, if additional coverage is required the above will apply.
- Previously used materials and newspaper will not be used.

The following will be considered when transporting food:

- Containers of cool food will be placed in the coolest part of the vehicle.
- If the inside of the vehicle is air-conditioned, cold food may be transported better here rather than in the boot.
- Vehicle will be kept clean and maintained at hygienic standards.
- When food is being packed in the vehicle, cold foods will be collected last and immediately placed in insulated containers for transporting.
- Upon arrival at the destination, staff will immediately unload any hot or cold food and place it in an appropriate temperature controlled environment.

All food will be served within two hours of it being cooked.

Food Storage Procedure

In order to implement safe food storage practices to the highest possible standard, educators will access and amend their practices to the latest known information. This information will be passed onto families. Staff will then implement these standards in the Centre by inspecting food items when first brought into the Centre to ensure they are in good order, for example, not in damaged packing, within their used by date period and at a correct temperature. Staff will then see that they are appropriately stored as per the following:

- All foods (dry, cold and frozen) will be used by the FIFO rule (first in, first out). This will allow a rotation of food to make sure older stock is used first.
- Store dry foods in sealed, air-tight containers.
- Store food on shelving.
- Any food removed from its original container must be stored in a container with the used by date of the food written on it. The ingredients must also be listed with the date it was opened.
- Ensure the food storage area is well cleaned, ventilated, dry, pest free and not in direct sunlight.
- Prevent pests by cleaning spills as quickly as possible and removing garbage/waste frequently.

For cold storage, the following applies:

- All foods are wrapped, covered, dated (used by date and date it entered the Centre) and labelled.
- Foods are stored at the correct temperature depending on the product. Cold foods need to be stored at less than 5 degrees (C) and frozen foods at minus 18 degrees (C).
- Store foods on shelves.
- Store raw and cooked foods separately. NEVER store raw foods on top of cooked foods as juices may drip down and contaminate the cooked food.
- Store food once it has sufficiently cooled down. Foods cool quicker in smaller, shallow containers.
- Fridges and freezers need to be cleaned regularly.
- The operating temperature of the fridge and freezer need to be checked regularly and a record kept of this.
- Potentially hazardous foods must be kept under temperature control (raw and cooked meat or foods containing meat, dairy products, seafood, processed fruits and vegetables, cooked rice and pasta, foods containing eggs, beans or other protein rich foods, foods that contain these foods, such as sandwiches and rolls).
- Temperature for potentially hazardous foods is either 5C or cooler or at 60C or hotter when it is transported, received, stored or displayed.
- Fridge temperature is recorded daily.
- Food must be fully thawed before cooking either in the refrigerator or by using a microwave oven. Frozen food should not be left to thaw on the bench.

- Temperature must reach at least 75C when reheating or cooking. A thermometer is to be use to check temperature of reheated foods. Once food is reheated, it must be discarded after use and not to be kept and reheated for later or eaten cold

Bottle preparation and storage procedures

Seaford Community District Children's Centre educators believe in providing the best practice for warming bottles safely and ensuring these meet current expert recommendations. We will work in partnership with families to provide education, support and advice on providing safe strategies for storing and warming of children's bottles.

Recommended procedure for storing, thawing & warming of breast milk and infant formula-

Storing infant formula-

- Infant formula should be named and stored in the centre at the back of the fridge where it its coldest (not in the fridge door where it is warmer)
- Remaining contents of partially used bottles need to be discarded after one hour. (Reusing half empty bottles is risky after they have been heated and sucked on.)
- Unused formula must be thrown away after 24hours.

Warming infant formula-

- Using a microwave oven to warm bottles of formula, milk, or other liquids for consumption by children in child care is not safe practice.
- The National Health and Medical Research Council (NHMRC) publication Staying Healthy in Child Care (5th Edition, 2012) states:
Do not warm bottles in the microwave. Microwave ovens distribute heat unevenly. Also, water in the milk turns to steam and collects at the top of the bottle. There is a danger that the baby could be scalded.
- Bottle warmers can be used, but they must have a thermostat control. Bottles should only be warmed this way for less than 10 minutes.

Using baby bottle warmers-

- Place the baby bottle warmer out of reach of children and on a dry, non-slip, horizontal surface.
- Turn the click-step control knob to the OFF position
- Place the bottle in the container and fill the space between the bottle and the inner container with water up to two centimetres from the rim. For smaller bottles fill up to just above the milk line in the bottle.
- Use the click-step control knob to set the temperature. Choose the setting according to how full the bottle is. The indicator lamp lights to indicate the heating operation.
- After some minutes the milk will have reached just the right temperature. The indicator lamp goes out. The indicator lamp then switches on and off intermittently to indicate the thermostat is controlling the temperature of the water.
- When the indicator lamp goes out, remove the bottle from the container and turn the control knob to the OFF position.
- Shake the bottle to distribute the heat evenly. Always test formula – place several drops on the back of the hand before offering to child.
- Do not leave the bottle in the warmer after the indicator lamp has gone out as this could cause overheating of the milk.

IMPORTANT SAFEGUARDS-

- Always keep bottle warmers out of reach from children.
- Never use the unit without the water in it.
- Do not touch hot surfaces. Use handles or grips.
- Do not move an appliance containing hot liquids.
- Do not place on hot surfaces or on a heated oven.
- Only use the baby bottle warmer when the ambient temperature is between +7` C and +37` C.
- Change the water in the bottle warmer regularly for hygienic reasons.

Storing breast milk-

- Expressed breast milk should be named and the date labelled of expression.
- It should be placed at the back of the fridge where it is the coldest. (4` C or lower.)
- Breast milk that will not be used within two days should be frozen.

Warming breast milk-

- Breast milk should NEVER be micro-waved. It destroys the immunological properties in the breast milk.
- Follow bottle warmer procedure.
- Breast milk that has been thawed outside the fridge in warm water can be used immediately, or stored in the fridge for up to 4 hours.
- If the baby has begun feeding, any unused breast milk should be discarded.
- Our Centre supports and encourages breast feeding.

Frozen breast milk-

- Frozen breast milk 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.
- Do not refreeze if some milk has thawed it should be used within 24hours.

Thawing frozen breast milk-

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

Alternative fluids for infants and young children-

- Breast milk or formula best meets the fluid and nutrient requirements for infants until 12 months old and can continue beyond this.
- Full cream milk- is not recommended for babies under the age of 12 months 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.
- Full cream milk can be offered from twelve months of age as a main drink.
- Water should be encouraged (boiled water for children under 12months)

Sources:

Eat Well SA healthy eating guidelines. (www.healthactive.gov.au).
Education and Care Services National Regulations 2011
Early Years Learning Framework
National Quality Standard
Food Standards Australia New Zealand
Safe Food Australia, 2nd Edition. January 2001
Caring for Children- Food, Nutrition and Learning Experiences 2014
Choking Fact Sheet Department of Health, Government of South Australia August 2011
Australian Guide to Healthy Eating
Australian Dietary Guidelines 2013
Infant Feeding Guidelines 2012
Staying Healthy Preventing Infectious Diseases in ECEC services (5th Edition) NHMRC
Food Safety Standards for Australia 2001
Food Standards Australia and New Zealand Act 1991
Food Standards Australia New Zealand Regulations 1994
Food Act 2001
Food Regulation 2002
SA Health: Food Safety
Start Right Eat Right
Work Health and Safety Act 2012
Work Health and Safety Regulations 2012
Dental Association Australia
Sterilising bottles, teats and dummies Qld Health
Bottle feeding with formula: Better Health Vic Govt
Bottle Feeding (cleaning and sterilising bottles and equipment): Health Direct Australia

Acknowledgement

Seaford District Community Children's Centre acknowledges Nutritionist Laura Ryan of Early Nutrition Service

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www.earlynutrition.com.au

Appendices:

Food Pyramid
Bottle Procedure Policy
Lunchbox Checklist 8 hour day
Lunchbox Checklist half day
Modified Diet Care Plan
Special Diet Care Form

Recommended schedule for introducing solids to infants

Our centre will follow the following recommended schedule for introducing solids.

Menu Development Guide	
Age and Texture	Suitable Foods
Birth – 6 months	<ul style="list-style-type: none"> Breast milk/infant formula provides all the nutrition a baby needs for about the first 6 months of life. Children may commence solids around 4-6 months when developmentally ready but not prior to 4 months
<p>“First tastes” 6 months to 7 months. (If needed earlier, solids can be offered after 4 months, but NOT BEFORE 4 months.)</p> <p>Smooth and pureed foods.</p>	<ul style="list-style-type: none"> Breast milk/infant formula as the main drink. Introduce first solids, one at a time every 2-3 days. A variety of well cooked and pureed foods can be introduced in any order. <ul style="list-style-type: none"> baby rice cereal (iron enriched) fruits and vegetables pureed, well-cooked(meat beef, chicken, fish, lamb pork) Plain or “Baby” *Yoghurt and *custard, *Cow’s milk in small amounts in the preparation of foods
<p>“Learning to chew and self-feeder” 7-12 months.</p> <p>Mashed or chopped food progressing to finger foods.</p>	<ul style="list-style-type: none"> 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)
<p>“Centre menu with some changes” 1-2 years</p>	<p>Offer a wide variety of foods from the centre menu, some changes in texture or flavour may be needed. Use the SRER Nutrition Checklist as a guide to food variety, but quantities may differ for younger age groups.</p> <ul style="list-style-type: none"> Breast milk and/or full cream cow’s milk as a drink. Water and no more than one small cup of diluted (50:50) fruit juice from a cup, not a bottle. <u>Juice is not given at childcare.</u>

*There is no evidence that delaying the introduction of highly allergenic solids (e.g. cow’s milk, soy, wheat, egg, and fish) reduces the risk of developing a food allergy. Introduce these foods in the child’s diet at the normal time for introduction of solids as specified above (ASCIA Infant Feeding Advice 2008, available online: www.allergy.org.au/images/stories/pospapers/ascia_infantfeedingadvice_oct08.pdf). *Although this advice also applies to infants with siblings who already have food allergies, families with a high risk of allergy should consult with their doctor if they have any concerns.*

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.au.

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

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

Cow's milk is not recommended for babies less than 12 months old because it is a poor source of iron and predisposes an infant to iron deficiency. It also has high levels of protein, sodium, potassium, phosphorous and calcium which has a high renal solute load.

Allowed fluids for babies (birth to 12 months)

- Breast milk and infant formula
- Cooled boiled water
- (Soy or other specialised formula only under medical advice)

Suitable fluids for 1 year olds

- Breast milk
- Cow's milk (full cream)
- Water
- Soy beverage, calcium fortified (full fat)

Suitable fluids for 2-5 year olds

- Reduced fat milk (1.0-2.5% fat)
- Soy beverage, calcium fortified (full fat or reduced fat)
- Water

Unsuitable fluids for child care (all ages)

Soft drinks

Cordials

Sweet syrups e.g. Ribena, Delrosa

Vegetable juices

Tea, Coffee, herbal teas

Fruit juice

Sweetened milk

Alcohol

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

References:

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

Infant Feeding Guidelines for Health Workers Summary (2004)

WA Dept. of Health and SA Dept. of Human Services.

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

The Infant's Lunchbox

The following suggestions are for non-allergic babies who are in care for eight hours or more per day. To make sure a baby is provided with the best nutrition, try to include the following in the 'lunchbox':

Birth to Four Months

Only breast milk or infant formula is needed.

- Send at least half of the usual amount of breast milk or formula that the baby has in 24 hours.
- As babies will still be fed on demand, use the smaller (120mls) bottles. This way less milk will be wasted.

About Six Months

DRINK:

- Breast milk or formula. Send at least 450 mls of breast milk or formula.
- Fruit juice is not needed. Both breast milk and formula have vitamin C.

FOOD:

This will depend on what foods have already been introduced.

Send a rice-based cereal, pureed fruits and pureed vegetables as these are introduced.

- Avoid other foods.
- Send a packet of infant rice cereal, pureed fruits and vegetables (frozen, fresh or tinned) and fresh fruits/vegetables that are easily mashed to a suitable consistency (eg. avocado, banana).
- Don't rely only on commercial prepared baby foods. Home-prepared fruits and vegetables are more educational for the baby, because of their colours and flavours. Most home foods can be made in larger amounts, frozen in ice cube trays and then transferred into freezer bags if required. These food cubes are easy to take to childcare.

HOW MUCH TO SEND TO CARE

At Least:

Two tablespoons each of at least one vegetable and one fruit. Larger amounts may be needed once the baby is used to eating solids.

SIX TO 12 MONTHS

DRINK:

- Continue with breast milk or formula. Send at least 450mls breast milk or formula at six months and decrease this to about 300mls by 12 months.
- Juice is not needed but if it is given it must be diluted one part juice to four parts boiled water and given only once per day.
- Send a cup for the baby to learn to drink from.

FOOD:

- From about six months of age, all other foods can be slowly introduced.
- Home prepared foods are more educational (colour, taste, texture) than commercial baby foods.
- Foods need to vary from fine mashed at six months to finely cut family foods at 12 months, with soft finger foods provided after seven months.

HOW MUCH TO SEND TO CARE

At least:

1. **Breast milk or formula** – 300 to 450 mls (depending on the age of the baby)
2. **Fruit** – one small piece, or one to two tablespoons or one to two frozen food cubes
3. **Vegetable** – two tablespoons or two frozen food cubes
4. **A food which contains iron** – two tablespoons or two frozen food cubes (meat, fish, chicken, lentils/dhal, baked beans, any other legume, tofu)
5. **Cereal food** – two serves of bread, rice, pasta, noodles or breakfast cereal

(One serve = one slice bread or two to three tablespoons of pasta, noodles, rice or breakfast cereal).

Dairy foods can also be given after the age of six months, in addition to, not instead of the above foods.

Remember, it is more important that baby is offered these above foods first. They will be getting plenty of calcium and other nutrients typically found in dairy from their breastmilk or formula.

The actual amounts of food eaten by a baby will change from day to day. Childcare providers will need to inform parents when the baby needs more food.








Lunchbox Checklist – 1-5 year olds

Checklist for an 8 hour day

Use this checklist to provide a quick overview of lunchboxes to ensure that they include the minimum serves of foods needed to meet the nutritional requirements of children while in long day care (a full day). Children's appetites will vary, so more food may be provided. If your child eats breakfast or a late afternoon snack in care or is in care for 9 hours or more, then more food is required.

Tick the boxes for each serve provided in a day.

<p>Breads and cereals: 2-3 serves per day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1 slice of bread • 1/2 bread roll • 1/2 cup breakfast cereal • 1 weetbix • 1/2 cup cooked rice or pasta • 2 crackers or crisp bread 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>Vegetables: 1 serve per day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1/2 cup cooked vegetables (on own or in dishes) • 1 potato (eg: potato salad, in dishes) • 1 cup salad vegetables (eg: cherry tomatoes, sliced tomato, snowpeas, cucumber sticks, grated carrot, capsicum strips, coleslaw- on own or in sandwiches. Some may need to be lightly steamed for under 2's) 	<input type="checkbox"/>
<p>Fruit: 1 serve per day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1 piece of fruit (apple, orange, banana) • 2 small fruits (eg: apricots, plums) • 1/2 cup stewed or canned fruit in natural juice 	<input type="checkbox"/>
<p>Milk and Milk Products: 3 serves per day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1/2 cup milk/ custard/ calcium enriched soy milk • 1 slice processed cheese/ 20 gm block cheese/ 1/3 cup grated cheese • 100gm/ 1/2 cup yoghurt • 1 TBs milk powder 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<p>Meat and Substitutes: 1 serve per day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 45 gm cooked weight red meat, chicken or fish • 1/3 cup mince or meat casserole • 1 slice beef/ham • 1 egg • 1/3 cup cooked legumes or baked beans, lentils or chickpeas 	<input type="checkbox"/>
<p>Vitamin C-rich food with the vegetarian meal.</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1 fruit or vegetable high in Vitamin C eg: citrus, kiwifruit, rockmelon, tomato, capsicum, handful berries 	<input type="checkbox"/>

Water: Aim for 4-6 cups per day. Encourage water. Make sure it is freely available.

PLEASE NOTE: WE ARE A NUT FREE SERVICE. PLEASE DO NOT SEND IN NUT PRODUCTS. THIS INCLUDES PEANUT BUTTER.








HALF DAY

Lunchbox Checklist – 1-5 year olds

Checklist for morning tea or afternoon tea and lunch

Use this checklist to provide a quick overview of lunchboxes to ensure that they include the minimum serves of foods needed to meet the nutritional requirements of children while in care for half a day. Children's appetites will vary, so more food may be provided.

	Tick if provided
<p>Breads and cereals: 2 serves per half day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1 slice of bread • 1/2 bread roll • 1/2 cup breakfast cereal • 1 weetbix • 1/2 cup cooked rice or pasta • 2 crackers or crispbread 	<input type="checkbox"/> <input type="checkbox"/>
<p>Vegetables: 1 serve per half day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1/2 cup cooked vegetables (on own or in dishes) • 1 potato (eg: potato salad, in dishes) <p>1 cup salad vegetables (eg: halved cherry tomatoes, sliced tomato, snowpeas,</p> <ul style="list-style-type: none"> • Cucumber sticks, grated carrot, capsicum strips, coleslaw- on own or in • Sandwiches. Some may need to be lightly steamed for under 2's) 	<input type="checkbox"/>
<p>Milk and Milk Products: 2 serves per half day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1/2 cup milk/ custard/ calcium enriched soy milk • 1 slice processed cheese/ 20 gm block cheese/ 1/3 cup grated ch • 100gm/ 1/2 cup yoghurt • 1 TBs milk powder 	<input type="checkbox"/> <input type="checkbox"/>
<p>Meat and Substitutes: 1 serve per half day</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 45 gm cooked weight red meat, chicken or fish • 1/3 cup mince or meat casserole • 1 slice beef/ham • 1 egg 	<input type="checkbox"/>
<p>Fruit: 1 serve per half day</p> <p>1 serve fruit =</p> <ul style="list-style-type: none"> • 1 piece of fruit (apple, orange, banana) • 2 small fruits (eg: apricots, plums) • 1/2 cup stewed or canned fruit (natural juices) 	<input type="checkbox"/>
<p>Complete this box if a vegetarian meal (with iron source) is provided</p> <p>Vitamin C-rich food with the vegetarian meal.</p> <p>1 serve =</p> <ul style="list-style-type: none"> • 1 fruit or vegetable high in Vitamin C eg: citrus, kiwifruit, rockmelon, tomato, capsicum, handful berries (to help absorb the iron in meat substitutes) 	<input type="checkbox"/>

Water: Aim for at least 2-3 cups per half day. Make sure water is freely available.

Modified diet care plan

for education, child/care and community support services*

CONFIDENTIAL

To be completed by the DOCTOR OR DIETITIAN and the PARENT/GUARDIAN and/or ADULT STUDENT/CLIENT.
This form is to be used where a person has a proven history of food allergy or intolerance
or requires a special diet for a proven medical condition.
This information is confidential and will be available only to supervising staff and emergency medical personnel.

Name of child/student/client _____ Date of birth _____
Family name (please print) First name (please print)

MedicAlert Number (if relevant) _____ Review date _____

Foods and substances that must be avoided for the period of this plan (see review date above).

Alternative foods the person can consume (eg soy products instead of standard dairy for lactose intolerance).

Details of any special feeding routine (eg meals at particular times or intervals for health reasons).

In the case of food allergy/intolerance, what are the signs and symptoms?

Please indicate whether the person can report symptoms, the time period over which symptoms might emerge and the severity of the anticipated reaction.

First aid response to signs and symptoms of an allergic reaction/intolerance to a food or other substance.

Please complete the first aid action plan on the back of this form.

If the reaction is severe, an anaphylaxis care plan, including an emergency first aid response, will be required from the treating medical practitioner.

This plan has been developed for the following services/settings: *

- | | |
|--|--|
| <input type="checkbox"/> School/education | <input type="checkbox"/> Outings/camps/holidays/aquatics |
| <input type="checkbox"/> Child/care | <input type="checkbox"/> Work |
| <input type="checkbox"/> Respite/accommodation | <input type="checkbox"/> Home |
| <input type="checkbox"/> Transport | <input type="checkbox"/> Other (please specify) |

AUTHORISATION AND RELEASE

Health professional _____ Professional role _____

Address _____

Telephone _____

Signature _____ Date _____

I have read, understood and agreed with this plan and any attachments indicated above.

I approve the release of this information to supervising staff and emergency medical personnel.

Parent/guardian or adult student/client _____ Signature _____ Date _____
Family name (please print) First name (please print)

Special Diet Form

For Care Providers

To be completed when a child is on a special diet for reasons of a **non-medical** nature eg cultural or religious reasons, vegetarian diet.

If a special diet is required for a proven medical condition (eg coeliac disease, lactose intolerance) the "Modified diet care plan" and/or other documents from the Health Support Planning package should be used. If there is a severe food allergy the "Anaphylaxis (severe allergy) care plan" should be completed in addition to the "Modified diet care plan".

Child's name _____ Date of birth ___ / ___ / ___
(Family name please print) (First name please print)

1. Reason for the child's special diet. Please tick the relevant box.

Religious / Cultural Parental decision Other, please specify

2. What are the foods and substances that the child must avoid or include?

3. Please list, in detail, alternative foods the child can eat so that no food groups are excluded (eg eggs, dairy food, tofu, bean instead of meat for a vegetarian diet)

4. Please provide details of any special feeding routine, eg meals at particular times or intervals for health reason, providing extra food to meet increased calorie needs.

5. How long will the child be on this special diet?

Date : ___ / ___ / ___ Parent/Guardian _____ Signature _____

To help your care provider to continue to provide your child with adequate nutrition and protection from potentially harmful substances, this form must be reviewed every 6 months, or whenever more up to date information is available.

Date for diet to be reviewed : ___ / ___ / ___

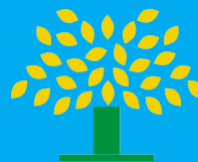
HEALTHY EATING PYRAMID



Enjoy a variety of food and be active every day!



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Please sign agreement and return to the front office.

I have read and understood the
Seaford Community District Children's Centre Inc. Food Policy – Nutrition and Food Handling.

I will comply with the Food Policy and know I can source additional information about Nutrition
and Food Handling from the centre.

Signed

Dated