## REVISION RECORD

<table>
<thead>
<tr>
<th>Date</th>
<th>Version</th>
<th>Revision description</th>
</tr>
</thead>
<tbody>
<tr>
<td>December 2010</td>
<td>1.</td>
<td>New name and format. Changed care provider to educator and fieldworker to coordinator. Resource/reference information updated.</td>
</tr>
</tbody>
</table>
RATIONALE

The family day care setting offers a unique opportunity to promote and enhance children’s health and wellbeing. As the service is provided for small groups of children in a home environment, educators offer care that considers the needs of each individual child. They form close, supportive relationships with children and their families, working in partnership with parents to optimise each child’s health and wellbeing. Most children attending family day care eat while in care and, for many, this makes a large contribution to their daily food intake.

Children need healthy food to allow them to develop their full physical and mental potential. Inappropriate food choices in young children leads to an increased risk of chronic diseases like obesity, diabetes, high blood pressure, heart disease and kidney disease later in life. Being overweight may also reduce quality of life. Overweight children complain of increased teasing, lower self-esteem and may have less athletic ability.

Children’s food preferences and eating patterns are learned and powerfully influenced by early food and eating experiences. Food is a very important part of social and cultural life. Educators have a key role in providing food and nutrition experiences that will positively influence a child’s food preferences, eating habits and nutritional health into adulthood. Educators plan and ensure the provision and promotion of healthy food choices to children in care, and share information about the importance of children’s nutrition with families.

By implementing this policy educators and staff play an important role in supporting well-nourished and healthy children, leading to personal, social and economic benefits for many families across South Australia.

Healthy Eating Guidelines, Australian Government 2009

1. Exclusive breastfeeding is recommended, with positive support, for babies up to six months. Continued breastfeeding is recommended for at least 12 months - and longer if the mother and baby wish.
2. If an infant is not breastfed, is partially breastfed, or if breastfeeding is discontinued, use an infant formula until 12 months of age
3. Introduce suitable solids at around six months
4. Make sure that food offered to children is appropriate to the child’s age and development, and includes a wide variety of nutritious foods consistent with the Dietary Guidelines for Children and Adolescents in Australia
5. Provide water in addition to age-appropriate milk drinks. Infants under the age of six months who are not exclusively breastfed can be offered cooled boiled water in addition to infant formula
6. Plan mealtimes to be positive, relaxed and social
7. Encourage children to try different food types and textures in a positive eating environment
8. Offer an appropriate amount of food, but allow children to decide themselves how much they will actually eat
9. Offer meals and snacks at regular and predictable intervals
10. Ensure that food is safely prepared for children to eat - from the preparation stages to consumption
Dietary Guidelines for Children and Adolescents in Australia
These guidelines are not in order of importance. Each one deals with an issue that is key to optimal health.

Encourage and support breastfeeding
Children and adolescents need sufficient nutritious foods to grow and develop normally
- Growth should be checked regularly for young children
- Physical activity is important for all children and adolescents

Enjoy a wide variety of nutritious foods
Children and adolescents should be encouraged to:
- Eat plenty of vegetables, legumes and fruits
- Eat plenty of cereals (including breads, rice, pasta and noodles), preferably wholegrain
- Include lean meat, fish, poultry and/or alternatives
- Include milks, yoghurts, cheese and/or alternatives – Reduced-fat milks are not suitable for young children under 2 years, because of their high energy needs, but reduced-fat varieties should be encouraged for older children and adolescents
- Choose water as a drink – Alcohol is not recommended for children

and care should be taken to:
- Limit saturated fat and moderate total fat intake – Low-fat diets are not suitable for infants
- Choose foods low in salt
- Consume only moderate amounts of sugars and foods containing added sugars

Care for your child’s food: prepare and store it safely

RIGHTS

Children have the right to:
- Food that is safe, healthy and nutritious and that supports their general health, growth and optimal wellbeing
- An environment that encourages healthy eating habits for a lifetime
- Respect, dignity and support from educators in individualised and developmentally appropriate ways:
  - to optimise food and nutrition related learning and development
  - when being guided in the development of positive, culturally appropriate and acceptable food related behaviour
- Have FDC staff, educators and families liaising together regularly and effectively on their behalf to ensure the achievement of the policy outcomes.

Families have the right to:
- Regular information, consultation and support from educators to ensure the provision and promotion of healthy food choices for their children while in care
- Respect of their role as the primary carers to manage their child’s eating and drinking outside of the FDC setting
- Support and assistance from FDC staff when negotiating with educators regarding any difficult issues or barriers faced when implementing the policy and guidelines.

Educators have the right to:
- Be respected for their role as childcare professionals in the management of a child’s eating and drinking while in the FDC setting
- Training and support in all areas relating to the policy outcomes
- Food and nutrition related information and resources for themselves and for families
Support and assistance from FDC staff when negotiating with families regarding any difficult issues or barriers relating to food. This may include help to negotiate reimbursement from parents to educators for food they provide to a child.

FDC staff have the right to:
- Training and support in all areas relating to the policy outcomes
- Food and nutrition related information and resources for themselves and for educators.

POLICY OUTCOMES

1. **Children in FDC are provided with healthy nutritious food to support optimal health, growth and development.**
   Food provided for children meets the Dietary Guidelines for Children and Adolescents in Australia, and the quality and quantity of food provided meets the child’s nutrient and energy needs in proportion to the amount of time spent in care. Children are encouraged to eat a wide variety of nutritious foods.

2. **Educators regularly and actively promote healthy food and positive eating behaviour to children while in care.**
   Educators have an ideal opportunity to show, demonstrate, talk, model and share food and nutrition ideas with children. Children look to adults as role models and their food preferences are affected by the way that food is promoted and presented to them. By enjoying healthy foods, modelling healthy eating behaviours, guiding food related behaviour and exposing children to healthy foods, educators influence a child’s lifelong eating patterns and food choices.

3. **Children in FDC are provided with an enjoyable eating environment and are exposed to food and nutrition based learning experiences, which reflect multicultural understanding and family values.**
   A pleasant social and emotional environment encourages children to accept and enjoy healthy food. Learning about food and nutrition messages, sharing meals with the educator and other children and a positive meal time atmosphere supports good food choices. Food experiences and activities that help children learn about food and nutrition are incorporated regularly into plans for children while in care. A child’s family values, home environment and cultural background are considered when structuring the eating environment and planning food and nutrition activities.

4. **Educators regularly and actively communicate with families about healthy eating and the nutritional health of the children in their care.**
   Educators and families discuss all areas of the food environment, routines and activities, including cultural aspects and special dietary requirements. Educators support families with information and resources available through FDC, to assist with healthy choices.

5. **Food in FDC is provided in a safe and hygienic manner.**
   FDC homes are safe and hygienic environments where healthy, hygienic eating practices minimise the risk of transferring food-borne illnesses and disease. Eating is supervised to ensure risks of choking are minimised and food related allergic reactions are prevented.
RESPONSIBILITIES

DECS family day care staff will:

- Ensure educators and families can access the FDC policy guidelines and key supporting documents
- Provide information, facilitate training and offer resources for educators to enable, support and monitor the achievement of the policy outcomes
- Actively endorse and support the role of educators as important, reliable sources of information on nutrition and healthy eating practices for children
- Discuss with families the rationale for and role of healthy food and nutrition in the FDC setting and their responsibility regarding food provision and associated costs
- Help educators to obtain information and guidance from credible health services if additional help is needed with any aspect of a child’s eating including special dietary needs
- Support educators:
  - in their role of observing children’s dietary intake, including their right to intervene on a child’s behalf
  - to link learning about food and nutrition with their observation and planning for children’s individual developmental plans
  - in developing strategies to obtain payment from families for food provided by the educator
  - in developing strategies to implement the food policy and guidelines
- Work with educators and families to seek support or assistance from other agencies when the family has financial needs associated with providing appropriate food for children while in care, or with reimbursing an educator for food costs.

Educators will:

- Follow the Australian Government Healthy Eating Guidelines as described in Get Up and Grow (Staff and Carer Book & Cooking for Children)
- Include in their information for parents detailed information about how they implement the policy and guidelines in their care service, including information about the food and drinks offered in care and what their child eats
- Ensure that families (and where appropriate, children) are included in decisions on food routines and table manners that are culturally appropriate and acceptable to children, families and educators
- Observe each child’s food intake, and:
  - OFFER foods that are consistent with the Dietary Guidelines for Children and Adolescents in Australia
  - avoid foods that do not fit within recommended guidelines
  - take appropriate action when the nutritional health of any child is at risk
  - inform families of any action taken as appropriate
- Respect families’ wishes in relation to breast or bottle feeding and make appropriate arrangements to support either feeding method (refer to Get Up & Grow for more information)
- Model healthy eating practices and behaviour when children are in care
- Ensure that food and nutrition based learning experiences, discussions and daily routines are included in observations and planning for individual children
- Act as advocates for the nutritional health of children in care – make certain that the individual food and nutritional needs of each child remains the first priority when managing or negotiating any barriers families face that relate to the food policy
- Closely supervise the eating environment and ensure that children follow safe and hygienic eating practices.
Ensure emergency procedures are in place to manage a food related choking incident or any allergic reaction a child may have to a food

Families have the responsibility to:
- Follow FDC ‘Food and Nutrition Guidelines’ when providing types and amounts of food for children while in care
- Provide educators with relevant information related to additional or special dietary requirements
- Liaise with educators to offer food to children that includes culturally appropriate choices, food routines and food related behaviour guidance
- Liaise with educators or FDC staff to resolve any barriers faced by families which may prevent food policy outcomes being achieved
- Reimburse educators for any food costs if these have been negotiated with them.

FOOD HANDLING AND SAFETY

Food Storage
Store all perishable foods at temperatures that will prevent spoilage – refrigerator temperatures should be 5 degrees C.

Set up refrigerators so that there is enough shelf space to allow for air circulation around shelves and refrigerator doors.

Families transport food to care in a safe and hygienic manner. Food is given to the educator for safe storage on arrival and not left in children’s bags.

Milk, formula and breast milk
Prepare formula strictly according to instructions on container.

Always keep baby bottles refrigerated at a temperature of 5 degrees Celsius or less.

It is better to warm bottles in mild warm water, than in a microwave.

Bottles are warmed only once and the leftovers are thrown out if the bottle is not finished within 20-30 minutes.

Breast milk should be stored in the refrigerator no more than 48 hours, or in a deep freeze no longer than 3 months. It is to be labelled with the child's name and dated before storing.

Breast milk is to be supplied in separate small quantities to prevent wastage.

Hygiene and Safety
Food is warmed only once and the leftovers are thrown out if the food is not finished within 20-30 minutes.

Educators and children should wash their hands before handling or eating food, preferably with warm running water and liquid soap.

Separate bowls, cups and utensils should be used for each child.

All kitchen surfaces, dishes, cups and utensils should be kept clean.

Cracked or chipped dishes or utensils may harbour bacteria, don't use them.
Wash dishes in hot soapy water/dishwasher.
Wash tables before and after each meal.
Keep dogs and cats away from food preparation and eating areas.

**Serving Food and the Eating Environment**
Wash hands prior to serving or handling foods.
Clean tables before any meal is served.
Guide children to wash their hands before eating.
Children should not share plates, cups or utensils, as sharing can spread germs.
A daily routine is established to ensure that children do not become over-hungry, and are not
tired or over excited at mealtimes.
A pleasant and relaxing environment is to be created to assist in developing a positive attitude
about food and establish regular meal and snack times.
Children should sit at a comfortable height in relation to the table surface with their feet touching
the floor. Food can be served on mats or rugs for special occasions or if culturally appropriate.
Plates and utensils should be appropriate to the child's size and skills.
Food should not be offered as a treat or withheld as a threat.
Sit with children while they eat to make eating a social experience, in which conversation is
encouraged and independence is fostered.
Educators eat similar food as the children, where possible.
Children are offered appropriate amounts of food and are never forced to eat.

**Modified Diet Care Plan**
Parents of children with allergies to foods or medical conditions requiring special diets must
provide educators with clear and concise information on the allergies or special dietary
requirements using the modified diet plan form (www.chess.sa.edu.au)

**Safe Eating**
To prevent children under 4 years choking on food, DO NOT offer:
- foods that can break off into hard pieces such as raw carrot, celery sticks, apple pieces.
  These can be grated or cooked
- popcorn, grapes, nuts, hard lollies, corn chips or other similar foods which are hard to chew
  and easily remain in large hard pieces in a young child’s mouth or throat
- sausages, frankfurts or other meats should be cut into small pieces and tough skins
  removed
- meat with bones, gristle or skin.
- large seeds from fruits.
If sharing is allowed:

Supervise the sharing of food ensuring that children choose food hygienically and do not replace touched food for others to choose.

Supervise the eating environment and ensure children do not choose food from another child’s plate or lunch box.

Encourage children to learn safe and hygienic food practices when sharing and preparing food for others, including thorough hand washing and hygienic practices to keep food free of illness and disease.

Supply each child with their own plate for serving shared food.

Where possible, encourage the use of tongs, forks and spoons to touch and pick up food, especially if it comes from a shared plate.

SUPPORTING DOCUMENTS

FDC Fact Sheet – FOOD SAFETY 2010

Health Support Planning:
- Modified Diet Care Plan

Fact Sheets:
- Family Day Care Guidelines for Food Provision
- Healthy Lunch Box Ideas – save time, money & effort
- Food Refusal & Fussy Eaters
- Safe Eating for Children
- Meal & Snack Ideas
- Understanding Food Labels
- Calcium & Children
- Iron & Children
- Vegetables & Children
- Starting Solid Foods
- Food Allergy & Intolerance
- Healthy Food Experiences and Activities
- Communicating with Families about Food
- Talking to New Families about the Food Policy – a checklist for educators


REFERENCES/RESOURCES

Healthy Eating and Physical Activity for Early Childhood - Get Up & Grow
Australian Government Department of Health and Ageing, 2009

Dietary Guidelines for Children and Adolescents in Australia
National Health and Medical Research Council, 2003

Food Safety Standards
Parenting SA  
Parent Easy Guides; Feeding Toddlers.  
http://www.parenting.sa.gov.au

Lynne Daniels, Bunny Franco, Julie-Anne McWhinnie. An assessment of the potential of Family day care as a nutrition promotion setting in South Australia. Nutrition & Dietetics: 60;1;30-37. (The Journal of the Dietitians Association of Australia) 2002


Local councils - food handling, safety and training  
www.lga.sa.gov.au

Health SA  

Healthy Eating and Physical Activity Guidelines for Early Childhood Settings  

The Right Bite Strategy  
The Right Bite strategy assists South Australian schools and preschools to select food and drink to promote healthy eating.  

Eat Well South Australia  

Start Right Eat Right  
The SRER project promotes healthy eating and good nutrition for young children in South Australian child care centres. This state wide project assists in achieving the goals of South Australia’s nutrition and healthy weight strategies as part of Eat Well South Australia and Eat Well Be Active. It is funded by SA Health and managed by Southern Adelaide Health Service.  

Culturally Diverse Food Experiences  