Introduction
Good nutrition supports children’s health, development and learning. Centres can provide many opportunities for children to experience and learn about healthy foods. Mealtimes provide an opportunity for children to practise social, language and self-help skills. Educators will plan to create a pleasant and relaxed environment where children have the time to enjoy their food, make choices and interact with others.

This procedure relates to children’s nutrition, meal times, food safety, cooking experiences with children, and baby bottle storage and feeding.

Definition

| Key educator | A key educator is an educator who works in the same group and is well known to the child. A key educator is responsible for initiating a child’s care rituals, as well as for sharing with and building positive relationships with the child’s family. |

Educator responsibilities

Nutrition

Families
- Confirm and discuss children’s dietary requirements upon and throughout enrolment.
- Provide information regarding children’s daily food intake. Provide a written record of food consumption for children under two years of age.
- Upon and throughout enrolment, encourage and promote healthy food choices as per the Australian Dietary Guidelines and Get up and grow: Healthy Eating and Physical Activity for Early Childhood recommendations (e.g. Storypark, family library, centre newsletter, display boards).
- Respect family, religious and cultural food preferences. This may require food / meals to be heated.

Children
- Model and encourage healthy eating habits and positive attitudes towards food.
- Do not withdraw food from children or make judgments about food provided. Food choices lie with parents / guardians.
- Do not use food or drink to reward or punish.
- Incorporate concepts regarding healthy food choices into the curriculum.
- Ensure water is available at all times and actively encourage drinking across the day.

Mealtimes
- When possible, a child’s key educator will be responsible for a child’s mealtime routines.
- Encourage and support children to wash and dry their hands before and after meals.
- Supervise children during mealtimes. Never leave babies unattended with a bottle or food. Encourage children to sit whilst eating.
- Strive to make mealtimes pleasant and relaxed experiences by:
  - Slowing down to the pace of the children. Don’t rush, and be patient with slow or fussy eaters.
  - When possible, setting other tasks aside to allow all educators to be present.
  - Acting as role models for healthy eating.
  - Sitting with and engaging children in conversations to create a relaxed and enjoyable mealtime atmosphere.
NQS2 Children’s health and safety
Procedure
Nutrition and food safety

- Modelling and discussing healthy food choices rather than instructing children in what and how much they will eat.
- Encouraging independence by supporting children to open lids, feed themselves and assist with meal time cleaning.
- Being responsive to individual hunger needs by allowing children to eat outside routine meal times and feeding babies individually at different times.

- Consider factors which can affect the ‘mood’ at mealtimes:
  - Arrange mealt ime furniture in a safe and attractive manner (e.g. tables, flowers, placemats).
  - Where possible, arrange tables to allow for small groups.
  - Allow time for children to assist with mealt ime rituals.
  - Provide mealt ime utensils that are age and developmentally appropriate.
- Encourage children to use tongs when sharing food from a communal plate.
- Ensure children do not share eating or drinking utensils or take food from others.
- Encourage children to turn away from food when they cough or sneeze, and then to wash and dry their hands.
- Discuss oral health with children and encourage children to drink water after meals.
- Always consume hot drinks away from children.

Children with food allergies

- Document and consistently implement the directions and risk minimising strategies for mealtimes and special events as detailed in:
  - User guide Allergic reactions and anaphylaxis
  - Form Medical Conditions Risk Minimising Plan Anaphylaxis
  - Procedure Medical conditions

Preparing meals

- Wash and dry hands as per Procedure Hand washing before and after preparing and serving food, and if interrupted to care for another child while preparing food or spoon-feeding a baby.
- Gloves do not need to be worn when handling food if hands are clean and dry. However, gloves must be worn if hands have any cuts or abrasions, dressings, acrylic nail varnish or large rings. Ensure all cuts are covered with approved kitchen band aids (blue in colour).
- Implement food preparation practices which are consistent with this procedure and Food Safety Information Council recommendations.
- Wash fruit and vegetables before serving.
- Implement the following when heating or reheating food:
  - Reheat food to 70°C and maintain this temperature for 2 minutes. Measure temperature with a food temperature thermometer.
  - Ensure food has cooled before providing to a child by removing a small piece of food with a spoon to another plate and testing the temperature with a food temperature thermometer or by the inside of your wrist. Throw this piece of food away, wash the spoon, and wash and dry your hands.
  - Heat food or milk once only.
- Wash and dry all plates and cutlery in the designated / labelled sink.
- Throw out leftovers and inform parents / guardians what food was not eaten.
- Clean food preparation surfaces, meal tables and chairs before and after meals.
• Clean floors after mealtimes.
• If a centre provides meals as part of regular service provision:
  o Display a weekly menu for children and families.
  o Develop menus in consultation with children and families.
  o Provide meals that reflect children’s dietary needs (including food allergies) and recommendations outlined in the Australian Dietary Guidelines and Get up and grow: Healthy Eating and Physical Activity for Early Childhood. Refer to FeedAustralia when developing menus. FeedAustralia is a free online menu planning tool, that assists centres develop menus that reflect the Australian Dietary Guidelines.
  o Staff who cook meals for children with food allergies as part of regular service provision must have a recognised nutrition / food handling qualification and implement risk minimising strategies to prevent cross contamination of allergens during meal preparation.
  o Do not prepare or serve food if suffering from gastrointestinal illness or a cold / flu. Exclude ill staff from food preparation and serving tasks for 48 hrs after the illness has passed.

Food and curriculum
Cooking with children
• Wash and dry hands before and after a cooking experience.
• Where possible, tie back long hair.
• Where possible, choose cooking experiences where the food is cooked, as any germs will be destroyed in the cooking process. The risk for uncooked foods can be lowered if children only prepare food to eat themselves. For example, individual fruit salad cups or sandwiches.
• Children should not participate in cooking experiences if they have had vomiting or diarrhoea within the previous 48 hours. If a centre has a recent outbreak of gastrointestinal disease, check with your local Public Health Unit before resuming cooking activities.

Considerations when using food in play
• Are there other sensory play alternatives to using food products? Discuss as a team and make decisions to meet the current needs of children.
• Consider possible cultural, participation rights and ethical issues? Engage with current families and determine whether using food products in play is appropriate and respectful.

Food storage and safety

<table>
<thead>
<tr>
<th>Educators</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Consistently implement Food Safety Information Council and Staying healthy: Preventing infectious diseases in early childhood education and care services, 5th edition, food safety guidelines.</td>
</tr>
<tr>
<td>• Check and maintain fridge temperature at 5°C or below. Include and document check as part of the Daily Safety Checklist.</td>
</tr>
<tr>
<td>• Store all dairy products in the body of the fridge, not the door.</td>
</tr>
<tr>
<td>• Provide food safety information to families throughout enrolment.</td>
</tr>
<tr>
<td>• Respect family, religious and cultural food storage practices except where the health and safety of the child could be compromised.</td>
</tr>
<tr>
<td>• Ensure food belonging to a child with allergies is stored separately in a sealed, airtight container in the fridge. Refer to User guide Allergic reactions and anaphylaxis.</td>
</tr>
</tbody>
</table>
**Nutrition and food safety**

**Families**

- Upon arrival, place food in designated area, e.g. basket and / or fridge. Seek advice from educators if unsure of your centre food storage routine.
- Do not store food in insulated containers within fridge.
- Place all milk and other dairy products in the body of the fridge, not the fridge door.
- Name all food containers.

**Bottle storage and preparation**

**Parent / guardian responsibilities**

- Upon arrival, record all bottles and sipper cups containing breast milk, formula or milk via *Form Bottle Receipt Record*.
- Ensure bottles and teats provided are clean, sterilised and clearly labelled with child’s name and the date the bottle was prepared or provided to the centre. Educators will wash bottles and teats after use, however are unable to sterilise.
- To prevent wastage, supply breast milk in separate small quantities.
- Provide pre-prepared bottles OR provide pre-measured portions of formula powder.
- Transport pre-prepared bottles in an insulated bag with an ice brick. Upon arrival remove bottles from the insulated bag and place in the body of the fridge.
- Provide the required number of bottles / day.

**Educator responsibilities**

- Wash and dry hands before and after preparing bottles.
- Ensure bottle preparation surfaces are clean before and after preparing bottles.
- Always store bottles in the body of the fridge, not in the fridge door.
- Heat bottles only once in a bottle warmer. Never heat bottles in a microwave.
- A feed should take no longer than 1 hour. Discard bottle content that has been at room temperature for longer than 1 hour.
- Clean bottles in hot, soapy water, immediately after feeding. Allow the bottle to air dry. Do not attempt to sterilise bottles.
- Send bottles home at the end of the day.

**Formula**

- Prepare formula strictly according to manufacturer’s instructions.
- Discard ‘leftover’ formula.
Breast milk

- Provide a private, comfortable area for mothers to breastfeed or express.
- When thawing frozen breast milk, always use the oldest milk first.
- Frozen breast milk can be thawed in the refrigerator and used within 24hrs OR by standing the bottle in a container of lukewarm water and used straight away.
- Discard ‘leftover’ breast milk.

Bottle feeding

- Wherever possible, the child’s ‘key educator’ will be responsible for bottle feeding.
- Slow down and provide the baby valuable uninterrupted quality time and attention.
- Be flexible-watch for cues that the baby is hungry and requires feeding, rather than working by the clock.
- Wash and dry hands before and after feeding. There is no need to wear gloves if hands are clean and dry.
- Take great care to ensure formula or breast milk is never given to the wrong child. Two educators will check the bottle label name before feeding.
- Test the bottle temperature with a sterilised food thermometer or on the inside of the wrist before feeding.
- Never ‘prop-up’ a baby with a bottle. Babies must be nursed and held at a slight incline while bottle feeding. Do not provide a bottle when a child is in a cot / bed.
- With close supervision and support and after consultation with parents, older babies who have the required motor skills, may bottle feed themselves.
- Remove bottles from children when they have finished drinking.

Acknowledgements and references