

Nutrition and Beverages

Policy Statement

Meerilinga recognises the importance of healthy eating to promote the growth and development of young children and is committed to supporting the healthy food and drink choices of children in our care. It is acknowledged that the early childhood setting has an important role in supporting families in healthy eating. Our service therefore recognises the importance of supporting families to provide healthy food and drink to their children.

Policy Purpose

Early Childhood Education and Care (ECEC) Services are required by legislation to ensure the provision of healthy foods and drinks that meet the requirements for children according to the *Australian Dietary Guidelines*. It is essential that our service partners with families to provide education about nutrition, and promote healthy eating habits for young children to positively influence their health and wellbeing, and reduce the risk of diet-related conditions and chronic diseases in children.

We believe in providing a positive eating environment that reflects dietary requirements, cultural and family values, and promotes lifelong learning for children, as we commit to implementing and embedding the healthy eating key messages.

We recognise food is used to help celebrate special occasions in different families, cultures and festivals. Food is an important part of any celebration in all nations of the world, regardless of culture or religion.

Scope

This policy applies to families and staff including volunteers and students engaged with Meerilinga. The daily nutritional needs of a child will be in context for the number of hours in a service on any given day for the duration of that child's attendance.

Exclusions

Policy Review

At least annually or from time to time the organisation may make changes to this policy to improve the effectiveness of its operation and customer service.

Implementation

Parents/guardians will provide a sufficient amount of food for the duration of their child's daily session of attendance. Our progressive mealtimes allow for morning tea, lunch and afternoon tea. We recommend a 'food safe', clearly labelled container or lunch bag that can be easily opened by the child.

We encourage families to send a variety of healthy food choices with no preparatory needs such as cooking and heating. Pre-cut fresh fruits and vegetables, cheeses, dried fruits, yogurt, and whole grain breads or crackers are good options.

Foods to limit are known as 'discretionary choices', these foods are high in kilojoules, saturated fat, added sugar and salt. Discretionary foods are not an essential or necessary part of our dietary pattern such as, sweet biscuits, cake, fried foods, crisps etc.

Choices should also consider children's age and experience in managing their food and beverage needs independently to avoid complex mixing, peeling, difficult packaging and where children may be transitioning between first and adult teeth, temporarily preparing foods by removing hard skins and pre-cut is recommended.

Information on Healthy Eating for Children, including healthy food choices, recommended daily intake specific to age and gender of a child can be located here: https://www.eatforhealth.gov.au/sites/default/files/content/The%20Guidelines/n55f_child_ren_brochure.pdf Other topics include hard foods that may increase the risk of choking for children under 5 years of age. Meerilinga does not allow popcorn to be consumed by children attending our Early Learning Programs.

Water is the primary drink and children will have accessibility to their water bottles throughout the session. Children are to bring their own clearly labelled water bottle filled with fresh water. Educators will re-fill the bottle with water as required throughout the day.

Learning about healthy lifestyles, including nutrition is integral to children's wellbeing and self-confidence and embedded in everyday routines and experiences. Children, families and staff will be encouraged to develop healthy eating choices.

Restrictions are in place to ensure protection of children and others with food sensitivity or allergy and only healthy options are demonstrated and encouraged. All Meerilinga programs are 'Allergy Aware' and nut free.

Anaphylaxis is a potentially life threatening, severe allergic reaction after exposure to an allergen (usually to foods, insects or medicines) and is treated as a medical emergency. We have children enrolled who live with anaphylaxis. A notice will be displayed at the entry of the service, notifying all persons that there are children enrolled at the service who are at risk of Anaphylaxis. The allergens to be avoided will be listed on the notice eg: raw egg, walnut etc and families must avoid packing foods containing those ingredients. Educators will be vigilant when monitoring foods consumed at mealtimes.

Refer to Medical Conditions policy and process.

Food safety

When choosing and packing food for the day, families must consider how it will be kept cool for the day to prevent it from spoiling. To ensure children's food is stored safely and within the 'safe temperature zone' at the service, food containers or bags containing 'high risk foods' such as cold meats, dairy products or cooked rice or pasta will be stored in the refrigerator.

At the time of delivery, families must inform Educators if the child's food container needs to be refrigerated. Educators will monitor the safe storage of children's food throughout the day.

Refer to Health, Hygiene and Infection Control policy and process for guidelines on food handling at the service.

Progressive Mealtimes

In recognising children as active participants in their own learning, children should be encouraged to make meaningful decisions about elements of their own education and care. Incorporating progressive mealtimes into the educational program allows children to choose to eat when they are hungry, rather than according to a timetable.

Children can gather in small groups to enjoy meals together, without interrupting the needs and play of others. This also encourages quieter, more social and meaningful interactions at mealtimes and allows for a smoother flow throughout the day.

Children can make decisions based on their own needs and can be supported to access food and water throughout the day by educators/staff, who actively participate in mealtimes.

Food in Play

Educators will not incorporate food in play. Code of Ethics aspects for no food play decisions and include being conscious of principles such as:

- Biodegradability;
- Reducing waste;
- Recycling potential;
- Sourcing of the product including fair work labour laws;
- Using food as learning materials teaches young children that it is acceptable to waste limited resources. Therefore, questioning the use of food when families are struggling to afford this necessity. Food is a precious resource that should be treated with great care to minimise waste;
- Using food as learning materials has the potential of disrespecting teaching about diverse groups. When teachers encourage children to play with food important to their cultures, they need to consider the possibility that using food as learning materials may offend some cultural groups who use that food for religious or ethnic celebration e.g. rice and beans.

Sustainable food alternatives are to be sort and ensure that all children to have the opportunity to participant in play.

Nutrition and Beverages Process	
Process Owner	CEO
Effective Date	30 September 2019
Date of Last Revision	20 September 2019

Process Details	
	Description
1.	<p>Families and children will be supported with information on suitable food and drink to pack for their children. Information about child nutrition and safe food practices are promoted to families on a regular basis through resources, e news, parent sharing involvement activities. Families will be consulted and asked to share family and multicultural values and experiences to enrich the variety and enjoyment of food.</p> <p>Consideration will be given to the special dietary needs of all children participating and these will be recorded and acted on by Educators. The importance of healthy food choices and experiences will form the basis for regular and active inclusion in all children's program. Families are provided with daily information about their child's intake and experiences with food and drink.</p> <p>Other sources of information for families can be found at:</p> <ul style="list-style-type: none"> • Nutrition Australia – www.nutritionaustralia.org • Eat for Health – https://www.eatforhealth.gov.au/ • Fussy Eaters ECA Everyday Learning Series - http://www.earlychildhoodaustralia.org.au/parent-resources/childrens-health-nutrition/ • Raising Children Network www.raisingchildren.net.au
2.	<p>Food and water will be available at all times. Furniture and utensils will be age appropriate and developmentally suitable to encourage children to be involved in and enjoy positive food occasions. Setting up café style social spaces is encouraged.</p> <p>Spare water bottles and food containers will be available if required. In the event a child doesn't have sufficient food, the service will provide nutritious food such as fruit/vegetable/multigrain crackers.</p> <p>Food storage and equipment will be maintained in a clean and hygienic manner.</p>
3.	<p>Educators and support staff will complete annual training and development on food safety, storage and handling guidelines and procedures: http://www.imalert.com.au/foodsafety/training Procedures and practice will be actively embedded in everyday routine experiences and modelled to children and families; These include:</p> <ul style="list-style-type: none"> • Handwashing. • Clean storage and eating environments. • Refrigeration cleanliness and temperatures maintained. • Adequate and age appropriate utensils. • Safety risk plans and procedures to minimise cross contamination, choking, medical reactions, hazards in food experiences and routines. • Supervision. • Accessibility strategies for all children to their food and drinks. • Local communication strategies for information sharing. • Medical and Emergency Management plans.

Process Details	
	Description
4.	<p>Educators role model and discuss healthy eating and dental care with the children using resources from;</p> <ul style="list-style-type: none"> • SNAC http://snacwa.com.au/ • Get Up and Grow Healthy Eating and Physical Activity for Early Childhood http://www.health.gov.au/internet/main/publishing.nsf/content/phd-gug-staffcarers, and • Dietary Guidelines for Children and Adolescents in Australia http://www.health.gov.au/internet/publications/publishing.nsf/Content/gug-family-toc~gug-family-guidelines <p>as well as arranging health visitors such as child health, dentist or nutritionist.</p> <p>Opportunities for food experiences can include self-grown foods from the service gardens with family permission. Risk management plans should include the choices on the type of food plants considered, known or likelihood of food sensitivity or intolerance, choking, excessive preparation, checking for toxicity for all or part of a plant, plant pests or diseases, pesticide bans or other hazards.</p>

Associated Documents
<p>Personnel Records of FoodSafe Medical Conditions and Emergency Policy and Procedures Medical Management Plans – Individuals Medical Risk Assessment and Communication Plans – Individuals Risk Assessment Plan – gardens / food experiences / visitors (Incursions) Cleaning, maintenance, workplace safety schedule/audits/records.</p>

Guidelines for Service Director, Educators and Advisors

Nominated Officers and Educators have equal responsibility to ensure that the Education and Care Services National Regulations [and National Quality Standards are implemented and followed](#) as service benchmarks to meet each child’s daily nutritional needs and safe food handling irrespective of the program of attendance.

Thereby common threads of responsibility and opportunity are:

1. Enabling nutritionally adequate food and beverage for children – food is provided by families and the environment should also take into account a child’s preferences, cultural, physical, social, emotional and educational needs and development and always offer a positive experience.
2. Food and beverage is never a reward, punishment, coercion or withheld.

3. Fostering nutritionally positive attitudes and food and beverage preferences in young children through being positive role models for children; carrying out nutrition education activities with children aimed at broadening a child's awareness of a wide variety of food and the links between health and nutrition.

Strategies can include;

- Teach children about food and nutrition.
- Food awareness activities from garden to table and a variety of cultures included in the teaching curriculum.
- Children will be encouraged to get practical experience in food preparation.
- Foods being eaten by the children will be discussed with them.
- To provide an eating environment that assists the transmission of family and multicultural values.
- Educators sit and engage with children unhurried at food time.
- Special occasions may be celebrated with culturally appropriate foods or sometimes foods from the approved list with the approval of each parent. Foods of multiple ingredients or cooking process for sharing can be made entirely at the service in the community kitchen.
- Families will be invited to at least one food occasion each year.
- Food and beverage experiences provide opportunities for encouraging self-help, independence, social skills, learning and understanding.

4. Ensuring children diagnosed with anaphylaxis and allergies have a Medical Management Plan from their Registered Medical Practitioner, together with a Medical Risk Minimisation and Communication Plans that is completed in consultation with parents and staff. These plans will be displayed at the service and accessible to staff in the event of a medical emergency.

Refer to the Medical Conditions policy and processes

5. On specific days where children at risk of anaphylaxis or food intolerances are in attendance. It will be communicated to every parent/guardian on those days. If food containing those products is discovered, it will be removed and the child offered a healthy alternative. The Educator will discuss with the parent /guardian upon collection of the child.
6. Providing nutrition information onto parents of children. It is important to establish links with family members to encourage parent participation in the services nutrition experiences. Parent's knowledge, beliefs and food preferences play a key role in establishing a child's eating pattern and behaviour.
7. Information recognised by health and dental authorities on dental health and nutrition relating to different age groups of children will be promoted at the service in a variety of accessible and non-static methods. Health practices in the service will be evident.
8. When food is prepared as part of the children's curriculum of experiences, the ingredients and preparation techniques used will be hygienic and safe and contribute to children's nutritional needs.

9. Provide research based materials to support alternatives to food in play.
The Code of Ethics core principles that relate to this topic are:
 - Effective learning and teaching is characterised by professional decisions that draw on specialised knowledge and multiple perspectives.
 - Democratic, fair and inclusive practices promote equity and a strong sense of belonging.
 - Research, inquiry and practice-based evidence inform quality education and care.
10. Ensuring spaces and facilities allow and support for breastfeeding/formula preparation for infants.
11. The regular review of practices and remedial actions are documented, communicated, monitored and reported.

Review of practices can be combinations of discussion, research, and accessing expertise, professional development, consulting and observing and modelling occurring of practices with educators, families, children, experts and others that are consistent with meeting exceeding standards of practice. Guidelines for review of practices can be found at <http://files.acecqa.gov.au/files/National-Quality-Framework-Resources-Kit/3%20-%20Guide%20to%20the%20National%20Quality%20Standard%20FINAL-3.pdf>

Guidelines for achieving exceeding practice descriptors is located at; http://files.acecqa.gov.au/files/Assessment%20and%20Rating/1-NQS_Assessment%20and%20Rating%20Instrument_120522_%20FINAL-1.pdf

Documentation and improvement and can be combinations of tracking changes to the Quality Improvement Plan, implementing revised routines and transition plans, continuous improvement form, risk management plan, maintenance, audit monthly reporting, meeting minutes, e news and internal communications.

Records Management

Title	Location	Responsible Officer	Minimum Retention Period
• Medical Management Plan	ELP	Children and Family	3 yrs from exit
• Medical Risk Minimisation and Communication Plan	ELP	Children and Family	3 yrs from exit
• Children's Health and Wellbeing Register	ELP	Children and Family	3 yrs from exit
• Excursion/Incursion Plan and Permission Form	ELP	Children and Family	3 yrs after the record was made
• Risk Management Form	ELP	Children and Family	3 yrs after the record was made
• CFC Daily Checklist (Refrigerator Temperature Record)	ELP	Children and Family	3 yrs after the record was made
• Staff Development Record	WLEED	CEO	7 yrs from exit

Reference

- Education and Care Services National Law Act (WA) 2012 - *October 2018*
- Education and Care Services National Regulations (WA) 2012 - *October 2018*
- ACECQA - National Quality Standards - *February 2018*
- ACECQA - Belonging, Being & Becoming - Early Years Learning Framework
- Code of Ethics - Meerilinga
- ECA Code of Ethics - 2016
- Code of Conduct - Meerilinga
- Australia New Zealand. Food Act 2008, Food Standards Code.
www.foodstandards.gov.au
- Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood

Mapping Policy and Processes

Education and Care Services National Law (WA) Act 2012	
Section	167

Education and Care Services National Regulations (WA) 2012	
Regulations	77, 78, 90, 168(a)(i)

Policy Area	Standards for RTOs 2015	National Quality Standards Early Childhood	National Standards for Volunteering Involvement 2015	Standards to Community Services	Standards to Family Support
Children's Programs	NA - The individual cultural / health needs are considered.	QA 1 - 1.1, 1.1.1, 1.1.2, 1.1.3, 1.2, 1.2.1. QA 2 - 2.1, 2.1.1, 2.1.2, 2.1.3, 2.2.1, 2.2.2. QA 5 - 5.1, 5.2. QA 6 - 6.1, 6.2. QA 7 - 7.1, 7.1.1, 7.1.2, 7.2.1, 7.2.3	NA - The individual cultural / health needs are considered.	NA - The individual cultural / health needs are considered.	NA - The individual cultural / health needs are considered.