Nutrition and Dietary Requirements Policy

Policy first issued	12 August 2016
Current review date	31 August 2026
Personnel responsible	Childcare Operations

NQS 2 Children's Health and Safety

PURPOSE AND BACKGROUND

(1) To set out how we ensure children are offered food and drinks that are appropriate to their needs while they are in our care

(2) This policy is a requirement under the *Education and Care Services National Regulations*. The approved provider must ensure that policies and procedures are in place for health and safety matters in relation to nutrition, food and beverages, and dietary requirements (s 168)

(3) This policy helps us to comply with the specific obligations regarding food and beverages we have under the *National Regulations* (ss 77-80) and the National Quality Standard

SCOPE

(4) This policy applies to:

- 'Staff': the approved provider, paid workers, volunteers, work placement students, and third parties (e.g., contractors, subcontractors, self-employed persons, employees of a labour hire company) at our service who carry out work that is relevant to this policy
- Children in our care, their parents, families and care providers
- Board members

(5) Food safety is covered in our Food Safety Policy and Procedures

DEFINITIONS

(6) The following definitions apply to this policy and related procedures:

- 'Dietary requirements' specific food and beverage needs based on each child's growth, development, cultural, religious and health needs
- 'Food safety' means practices for food handling that ensure food is safe and suitable to consume. Food safety is covered extensively in our Food Safety Policy and Procedures

- ‘Medical management plans’, ‘risk management plans’, and ‘communication plans’ are required for children who have a specific health care need, allergy or relevant medical condition – see our Medical Conditions Policy

POLICY STATEMENT

Meeting children’s individual dietary requirements

(7) The approved provider and nominated supervisor must ensure that educators offer children food and beverages that are appropriate to their needs at regular times throughout the day (*National Regulations* s 78)

(8) Our weekly menu caters to children’s individual dietary requirements. We have routine meal and snack times, and provide fresh and safe drinking water. Children are allowed to eat outside of our routine times if required

(9) Staff must follow our Nutrition and Dietary Requirements Procedure to ensure all children’s nutrition and dietary requirements are identified and catered to

Identifying children’s dietary requirements

(10) At the time of a child’s enrolment, we must collect information about their daily dietary needs, including their:

- Growth and developmental needs
- Cultural or religious food practices
- Health and medical needs, including dietary restrictions, allergies and risk of anaphylaxis

(11) Up-to-date health information must be recorded in children’s enrolment record (*National Regulations* s 162); and, where relevant, in a child’s medical management plan, risk-minimisation plan and communication plan (*National Regulations* s 90)

(12) We must consult with families about their child’s dietary needs during our routine check-ins, and send reminders to parents to update us in writing if there are any changes

(13) Room leaders and the nominated supervisor must ensure that educators and other relevant staff members are aware of each child’s current dietary requirements. This will be achieved through regular formal and informal communication (e.g., written instruction, at induction and orientation, during staff/room briefings etc)

(14) If there are concerns about a child’s food intake, educators and the parents should discuss the matter in an open and respectful manner

(15) Educators must provide families with information about their child’s food and beverage intake while in our care

Weekly Menu

Menu design

(16) The approved provider and nominated supervisor must ensure that our weekly menu provides adequate portions of nutritious food and beverages, and is chosen with regard to the dietary requirements of each child, taking into account their growth and development needs, and any specific cultural, religious or health requirements (*National Regulations* s 79)

(17) We provide breakfast, morning tea, lunch, afternoon tea (and High tea at Kids on Collins) and food and drinks outside of the regular routine mealtimes as required

(18) We follow guidelines from recognised nutrition authorities, including the Australian Dietary Guidelines, the Victorian Department of Education's Healthy Eating in the National Quality Standard and Healthy Eating Advisory Service

(19) Our weekly menu must offer:

- A range of nutritious food for children to grow and develop, including fresh fruit and vegetables, whole grains and cereals, meat/meat alternatives, fish and poultry, and dairy/dairy alternatives
- A variety of tastes, colours, textures and flavours
- Textures (e.g., purees, chopped, whole) and quantities to suit the ages and developmental needs of children
- Appropriate alternatives for children who have allergies, intolerances, or religious and cultural requirements
- Culturally diverse ingredients and meal styles

(20) We must limit food that is nutritionally poor, highly processed, or which is high in saturated fats, salt and sugar. Such food should not on our regular menu, but can be sometimes offered for special occasions

(21) We do not serve sugary drinks, confectionery or deep-fried food to children

(22) We do not serve nuts or peanuts to children as these are not staple foods

(23) We must engage with families to integrate cultural foods, dietary practices and traditions into the menu where we can

(24) We celebrate diversity with food in our weekly menu, and during special cultural and religious events

(25) We must regularly review our menu to ensure it continues to meet the recognised guidelines

Displaying the weekly menu

(26) The approved provider and nominated supervisor must ensure our weekly menu is displayed in a prominent position at the main entrance (*National Regulations* s 80)

(27) The menu must accurately describe the food and beverages we are providing each day (*National Regulations* s 80). If there are last-minute changes to the menu, families will be informed

Access to safe drinking water

(28) The approved provider and nominated supervisor must ensure that children have access to safe drinking water at all times (*National Regulations* s 78)

(29) Educators must make fresh water available where children play, eat and rest and remind children to drink water throughout the day

Food safety and medical requirements

(30) If a child has a food-related medical condition or health need (e.g., allergy, diabetes, food intolerance etc), staff must follow our Medical Conditions Policy, which sets out how to implement medical management, risk management, and communication plans (*National Regulations* s 90)

(31) If applicable, we must display a notice stating that a child who is at risk of anaphylaxis is enrolled at the service (*National Regulations* s 173(f)(ii)). The notice must be in a prominent position that is clearly visible from the main entrance, but must not identify the child

(32) The approved provider and nominated supervisor must ensure that all staff (including volunteers) follow our Food Safety Policy and Health, Hygiene and Cleaning Policy to maintain proper health, hygiene and food safety practices (*National Regulations* s 77)

(33) We follow the best practice 'allergy aware' approach rather than banning allergenic foods (e.g., we are 'nut aware' rather than 'nut free'). This means we must implement risk management measures instead of outright bans (as detailed in our Food Safety Policy and Medical Conditions Policy)

(34) All bottles, drinks and lunchboxes from home must be labelled with the child's name

(35) Celebration food provided by families is not permitted at our service

(36) We must follow government guidelines to prevent choking hazards, including not serving or modifying (e.g., grating, finely slicing, cooking until soft, mashing) food that poses a choking risk to children under 5 years

(37) Educators must incorporate oral/dental hygiene education in daily routines to promote good dental health among children and staff

Feeding babies and toddlers

(38) We support mothers to breastfeed their babies by offering a dedicated comfortable area for breastfeeding or expressing milk**.** Mothers (including staff members) are welcome to breastfeed their child at any time during the day

(39) We must provide fridges for storing expressed milk and infant's formula. Educators must prepare bottles and feed babies according to our safe bottle-feeding procedure in our Food Safety Policy

(40) We follow the National Health and Medical Research Council's *Infant Feeding Guidelines* for introducing solids and transitioning babies to a toddler diet from 12 months

(41) From 12 months, babies are offered food from our regular weekly menu

Positive mealtimes

(42) Educators must supervise children during mealtimes to ensure children's safety and wellbeing (see our serving food safely procedure in our Food Safety Policy)

(43) Mealtimes should be used as a time to promote children's agency – children should be encouraged to make their own food choices, serve themselves where possible and be involved in mealtime set up and clean up

(44) Children, including babies who are weaning and toddlers, should be encouraged to eat independently (with consideration given to the child's age or developmental stage)

(45) Babies must be fed individually and according to our procedures (see also our safe bottle-feeding procedure in our Food Safety Policy)

(46) Appropriate utensils and serving ware must be provided for each child based on their developmental stage

(47) Furniture and equipment must be child-centred and suitable for the different ages and stages of our children

(48) The eating area/s must be set up to encourage social interaction and a sense of belonging among the children. Educators should also interact with children and each other during mealtimes

(49) Mealtimes should be relaxed, pleasant, and structured to meet most children's needs

(50) Food must never be used as a punishment, reward or bribe

(51) Educators must respect children's food choices and appetites, and never force children to eat or drink. Second helpings should be offered

(52) Educators model and reinforce healthy and hygienic eating habits during mealtimes

Educational programming

(53) Educators must plan and conduct lessons and activities that teach children about the benefits of healthy eating, oral/dental health and the different types of nutritious food

(54) Food and mealtimes should be used as an opportunity for children to learn about their identity, relationships, their community, literacy, numeracy, science, and the world

(55) We must regularly share with families information from recognised nutrition authorities about healthy eating and oral health

(56) Food-related activities must be incorporated into our program to reinforce children's connection to food. These may include gardening, eating outside, and cooking

PRINCIPLES

(57) We meet each child's dietary needs, and promote / provide nutritious and appropriate food and beverages for good health, development, and well-being

(58) We have an inclusive environment that meets children's cultural, religious, and health-based dietary requirements

(59) We have an allergy-aware approach and implement strict food safety measures to ensure children are not at risk while they are in our care

(60) We communicate respectfully and partner with families to encourage children's healthy eating. We consult with families regularly so we can cater to each child's dietary needs

(61) Staff are given the skills and knowledge to promote and model healthy eating. Healthy eating and oral health are included in our educational programming and planning

(62) We regularly review our policies and procedures so we can be sure we are implementing the current best practice for children's nutrition, dietary requirements and food safety

(63) We help children to take increasing responsibility for their own health and physical wellbeing, and we see mealtimes as an opportunity to encourage their sense of agency and social belonging

POLICY COMMUNICATION, TRAINING AND MONITORING

(64) This policy and related documents can be found in the Foyer via QR Code and saved in Teams

(65) The approved provider and nominated supervisor provide information, training and other resources and support regarding the Nutrition and Dietary Requirements Policy and related documents

(66) All staff (including volunteers and students) are formally inducted. They are given access to, review, understand and formally acknowledge Nutrition and Dietary Requirements Policy and related documents

(67) The nominated supervisor runs a professional development program for each staff member, which covers this policy

(68) Roles and responsibilities are clearly defined in this policy and in individual position descriptions. They are communicated during staff inductions and in ongoing training

(69) The approved provider and nominated supervisor monitor and audit staff practices and address non-compliance. Breaches to this policy are taken seriously and may result in disciplinary action against a staff member

(70) At enrolment, families are given access to Nutrition and Dietary Requirements Policy and related documents

(71) Families are notified in line with our obligations under the *National Regulations* when changes are made to our policies and procedures

LEGISLATION (OVERVIEW)

Education and Care Services National Law and Regulations

Law	Description
s 167	Offence relating to protection of children from harm and hazards
Regulations	
s 73	Educational program
s 77	Health, safety and safe food practices
s 78	Food and beverages
s 79	Service providing food and beverages
ss 90 - 91	Medical conditions policy
s 162	Health information to be kept in enrolment record
s 168	Education and care services must have policies and procedures
s 170	Policies and procedures to be followed
s 171	Policies and procedures to be kept available
s 172	Notification of change to policies or procedures
s 173	Prescribed information to be displayed
ss 181 ,183 - 184	Confidentiality and storage of records

Other applicable laws and regulations

Act / Regulation / Standard	Description
Work Health and Safety Act 2011	Describes the primary duty of care to people in the workplace
Australia New Zealand Food Standards Code	Covers food safety requirements
Privacy Act 1988	Principal act protecting the handling of personal information
Food Act 1984 (VIC) *Food Safety Regulations (VIC)*	Covers the safe handling of food, including the Australian Food Safety Code

National Quality Standard

Standard / Element	Concept	Description
2.1	Health	Each child's health and physical activity is supported and promoted
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented
2.1.3	Healthy lifestyle	Healthy eating and physical activity are promoted and appropriate for each child
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazards

Standard / Element	Concept	Description
5.1.1	Positive educator to child interactions	Responsive and meaningful interactions build trusting relationships which engage and support each child to feel secure, confident and included
5.2	Relationships between children	Each child is supported to build and maintain sensitive and responsive relationships
6.1	Supportive relationships with families	Respectful relationships with families are developed and maintained and families are supported in their parenting role
6.1.2	Parent views are respected	The expertise, culture, values and beliefs of families are respected and families share in decision-making about their child's learning and wellbeing
6.1.3	Families are supported	Current information is available to families about the service and relevant community services and resources to support parenting and family wellbeing
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service
7.1.3	Roles and responsibilities	Roles and responsibilities are clearly defined, and understood, and support effective decision-making and operation of the service

Early Years Learning Framework (EYLF) V2.0 / Victorian Early Years Learning and Development Framework

EYLF Outcome	Key component
3: CHILDREN HAVE A STRONG SENSE OF WELLBEING	• Children become strong in their social, emotional and mental wellbeing • Children become strong in their physical learning and wellbeing • Children are aware of and develop strategies to support their own mental and physical health and personal safety

National Principles for Safe Organisations

Most relevant principles
Child safety and wellbeing is embedded in organisational leadership, governance and culture
Children and young people are informed about their rights, participate in decisions affecting them and are taken seriously
Equity is upheld and diverse needs respected in policy and practice
Policies and procedures document how the organisation is safe for children and young people.

RELATED DOCUMENTS

Key Policies	Food Safety Policy | Child Safe Environment Policy |Health, Hygiene and Cleaning Policy | Incident, Injury, Trauma and Illness Policy | Physical Environment Policy | Enrolment Policy | Medical Conditions Policy | Enrolment Policy | Additional Needs Policy
Procedures	Roles and Responsibilities – Nutrition and Dietary Requirements (attached) | Food Safety Procedures (in Food Safety Policy) |Medical management plans (in Medical Conditions Policy) | Incident, Injury, Trauma and Illness Procedures (in Incident, Injury, Trauma and Illness Policy)

SOURCES

Education and Care Services National Law and Regulations | National Quality Standard | Australian Dietary Guidelines | Eat for Health – Australian Guide to Healthy Eating | Get Up & Grow – Healthy eating and physical activity for early childhood| | NHMRC's Infant Feeding Guidelines: information for health workers 2012 (current) | State/territory food legislation | Australian Breastfeeding Association | Best Practice Guidelines for Anaphylaxis Prevention and Management in Children's Education and Care Services V2.1, 2023 | Victorian Department of Education's Healthy eating in the National Quality Standard | Healthy Eating Advisory Service

POLICY INFORMATION

Approval	**Operations Team**
Review	Reviewed annually and when there are changes that may affect this policy or related procedures. The review will include checks to ensure the document reflects current legislation, continues to be effective, or whether any changes and additional training are required **Reviewed:** 31 August 2026 **Date for next review:** August 2027

APPENDIX A

ROLES AND RESPONSIBILITIES – Nutrition and Dietary Requirements

Approved provider responsibilities (not limited to)
Ensure our service meets its obligations under the *Education and Care Services National Law* and *Regulations,* including to: • Ensure that children have access to safe drinking water at all times • Ensure that children are offered food and beverages on a regular basis throughout the day • Display a notice about any anaphylaxis risks at the main entrance • Ensure that the food and beverages we serve to children are nutritious and adequate in quantity and chosen having regard to the dietary requirements of each child, taking into account their growth and developmental needs, and any specific cultural, religious or health requirements • Display our weekly menu in a prominent position at the entrance and ensure that it accurately describes the food and beverages we are providing each day
Ensure that our service's management, operations, policies, plans, (including risk management/action plans), systems, practices and procedures for nutrition, and dietary and medical requirements are appropriate in practice, up-to-date, best practice, and comply with all relevant legislation, standards and guidelines
Ensure this Nutrition and Dietary Requirements Policy and related procedures are in place and available for inspection
Take reasonable steps to ensure our Nutrition and Dietary Requirements Policy and related procedures are followed (e.g. through clear and accessible communication, and systemised inductions, training and monitoring of all staff – including volunteers, students)
Regularly review this Nutrition and Dietary Requirements Policy and related procedures in consultation with children, families, communities and staff
Notify families at least 14 days before changing this Nutrition and Dietary Requirements Policy if the changes will: affect the fees charged or the way they are collected; or significantly impact the service's education and care of children; or significantly impact the family's ability to utilise the service

Nominated supervisor / persons in day-to-day charge responsibilities (not limited to)
Ensure our service meets its obligations under the *Education and Care Services National Law* and *Regulations,* including to: • Ensure that children have access to safe drinking water at all times • Ensure that children are offered food and beverages on a regular basis throughout the day • Display a notice about any anaphylaxis risks at the main entrance • Ensure that the food and beverages we serve to children are nutritious and adequate in quantity and chosen having regard to the dietary requirements of each child, taking into

account their growth and developmental needs, and any specific cultural, religious or health requirements • Display our weekly menu in a prominent position and ensure that it accurately describes the food and beverages we are providing each day
Support the approved provider to ensure that our service's management, operations, policies, plans, (including risk management/action plans), systems, practices and procedures for nutrition, and dietary and medical requirements are appropriate in practice, up-to-date, best practice, and comply with all relevant legislation, standards and guidelines
Implement this Nutrition and Dietary Requirements Policy and related procedures
Take reasonable steps to ensure our Nutrition and Dietary Requirements Policy and related procedures are followed (e.g. through clear and accessible communication, and systemised inductions, training and monitoring of all staff – including volunteers, students)
Record children's dietary requirements at enrolment and keep the record updated with any new information or changes. Communicate any requirements to educators and other relevant staff members. Implement any medical management plans, risk management plans and communication plans as required
Enforce our 'allergy aware' approach according to this policy and procedure
Contribute to policies and procedure reviews and risk assessments and plans in consultation with children, families, communities and staff. Support the approved provider to notify families of reviews and changes according to legislation and our policies and procedures

Educator / other staff responsibilities (not limited to)
Follow this Nutrition and Dietary Requirements Policy and related procedures (including for food safety and managing children's medical conditions)
Undertake any relevant professional development to enhance your skills and knowledge in nutrition, food safety, and dietary and medical requirements
Model and teach children about healthy eating and oral health. Plan and conduct relevant activities in our educational program (e.g., cooking, gardening, discussions about food choices)
Make mealtimes a positive experience for children. Supervise and interact with children while they are eating, and encourage children's independence and autonomy by allowing them to make their own decisions about food
Make records of children's food and beverage intake and communicate it to their parents
Be aware of each child's dietary needs or medical requirements, including risk of anaphylaxis. Room leaders must communicate this information regularly to educators/food handling staff and volunteers (e.g., through written records, and in team and staff meetings)
Maintain open and respectful communication with parents about their child's nutrition, and any cultural, religious or health requirements. Report any concerns you have about a child's food and

beverage intake to their parents and the nominated supervisor. Provide families with information and resources about healthy eating and oral health
Follow our ‘allergy aware’ approach, according to this policy

Families responsibilities
Label your child’s water bottles, formula, milk and bottles
Provide up to date information about your child’s dietary requirements, including any cultural, religious, health or medical needs. If there are any changes, please advise us in writing as soon as possible
Follow our allergy-aware approach

APPENDIX B

Nutrition and Dietary Requirements Procedure

Introduction

- These procedures apply to our Nutrition and Dietary Requirements Policy
- See also our Medical Conditions Policy, Food Safety Policy and Health, Hygiene and Cleaning for related procedures
- 'Parents' includes guardians and persons who have parental responsibilities for the child under a decision or order of court
- 'Staff' includes volunteers, students and third parties defined in the scope of the Nutrition and Dietary Requirements Policy

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Procedure

When to use this procedure

- When you are collecting, communicating and managing children's dietary and health needs, including allergies
- When you are designing and implementing our weekly menu
- During mealtimes and snacks
- For food-related educational planning and programming

1. **Identify and communicate the nutrition and dietary needs of each child**
    - Collect information about each child at enrolment, including:
        - Food allergies, intolerances or medical conditions (e.g., diabetes, coeliac disease, anaphylaxis)
        - Cultural and religious food practices (e.g., vegetarian, halal, fasting periods)
        - Individual food and drink preferences
        - Any food or drinks the child must avoid
    - Record the child's dietary information in the child's enrolment record and the dietary information list
    - Display the dietary information list in the room, staff room and kitchen spaces
    - If a child has a medical dietary requirement, the nominated supervisor must ensure that their management plans (medical management, risk minimisation,

communication) are kept up-to-date, and communicated and available to staff, in line with our Medical Conditions Policy

- If applicable, the nominated supervisor must put up a notice to alert everyone at the service that child who has been diagnosed as at risk of anaphylaxis is enrolled at the service:
    - Put the notice up in a prominent spot, visible at the entrance
    - Do not identify the child/ren in the notice
- Ask families to review and update the dietary information at least once a year and immediately in writing if their child's needs change
- The nominated supervisor and room leaders must update the records and tell the other staff about the changes

- **Plan and display our weekly menu** Develop the weekly menu based on our policies, recognised nutritional guidelines, the growth and development needs of the children, dietary requirements and food allergies, and the cultural and religious food preferences of families
- Display the weekly menu in a prominent spot at the main entrance (this is a legal requirement). It must accurately state all the meals and snacks that will be provided each day
- Communicate the weekly menu electronically to families via email, in our newsletter
- Prepare and serve meals as per the approved menu. If there is a last-minute change the nominated supervisor or another staff member must put a note on our menu board as soon as possible or tell families electronically
- If you are handling food, you must follow our Food Safety Policy
- Regularly review the menu to make sure it is still nutritionally balanced. Ask for feedback from staff, children and families and adjust the menu according to the season

2. Make sure children have access to safe drinking water

- Place water dispensers, bubblers or water bottles in areas where children play, eat and rest
- Routinely check that water containers are filled, clean and sanitised, especially after meals and snacks
- Remind children to drink water throughout the day, especially on hot days or after physical activity
- Keep water bottles belonging to children with a food allergy in a separate location from the other children's water bottle (e.g., in an open shelf with the child's backpack) to reduce the chance of other children drinking from them

3. Implement our 'allergy aware' approach to manage and prevent anaphylaxis

- We do not ban nuts or other allergen foods as doing so can give staff and families a false sense of security
- Follow the safety measures and regulations (detailed in our Food Safety Policy and Medical Conditions Policy) so that children are not put at risk. These include:
    - Knowing which children are at risk of anaphylaxis
    - Knowing what allergies need to be managed in our service
    - Having medical management plans, risk management and communication plans in place (for on-site and off-site activities)
    - Taking precautions when storing, handling and serving food and drinks to prevent cross-contamination with allergens – including training in food handling for staff, volunteers and students
    - Having staff on-site or on excursions who have completed anaphylaxis training and know how to administer adrenaline injector devices
    - Informing families and visitors about how we manage allergies, especially for any activities that involve food
    - Teaching children about allergies and the importance of washing their hands before and after eating, and not sharing food and drinks with each other
    - Not serving nuts or peanuts to children as these are not staple foods
- If a child has a reaction to a food while they are in our care, follow medical management plans, your first aid training and our first aid procedure

4. Manage other food-related risks

- Sit with children during mealtimes and actively supervise them
- Be aware of choking hazards:
    - Do not serve high-risk foods like whole grapes, popcorn, and hard lollies to children under 5 years
    - Modify food textures where required (e.g., grating, finely slicing, cooking, or mashing firm foods)
- Respond to any choking incidents according to your first aid training and our procedures
- If you are handling food, follow our Food Safety Policy and Procedures and Health, Hygiene and Cleaning Policy and Procedures to keep food free from contamination
- Ensure children and staff practice hand hygiene before and after eating
- Check that all bottles, drinks and lunchboxes from home are labelled with the child's name. Check labels before serving to children to prevent mix-ups

- Communicate to families that we do not permit any food from outside the service to be shared amongst children
- Feed babies and toddlers according to our procedure for safe bottle feeding (in our Food Safety Policy)

5. Make mealtimes a positive experience

- Create a calm, unhurried, relaxed environment for the children:
    - Arrange the tables and seating to encourage social interactions
    - Sit, eat and talk with the children
    - Encourage children to eat at their own pace and not to rush
    - Be positive about the healthy foods the children are eating
    - Model healthy and hygienic eating habits and good table manners during the meal
- Let children choose what and how much to eat:
    - Don't ever force a child to eat or drink if they don't want and offer second helpings
    - If a child refuses food, educators should not pressure them but may encourage tasting
    - Never use food as punishment, reward or bribe
- Encourage children's autonomy and independence:
    - Make sure that tables, chairs, utensils and serving ware are developmentally appropriate for each child
    - Encourage children to help set the table, serve their own food and drinks (where appropriate), find their own place to sit and process communal and individual food waste
    - Encourage children, including babies who are weaning and toddlers, to eat independently to develop their autonomy, and their fine motor, language and social skills

6. Feed babies and toddlers according to best practice guidelines

- Provide a private, comfortable area to mothers (including staff members) who would like to breastfeed or express milk at our service
- Store and serve breastmilk and formula according to our safe bottle-feeding procedure in our Food Safety Policy
- Bottle feed infants individually in a semi-upright position on your lap or in a high-chair – do not 'prop' feed or give bottles to babies while they are in a bouncinette,

lying on the floor or in their cot. (Note, babies benefit from being held while bottle fed as it gives them contact and may also reduce the risk of ear infections)

- Demand feed infants under 6 months
- Work with parents when introducing solids to babies. Share information from reputable sources. Advise them that we follow government guidelines for infant feeding, which recommend:
    - That babies must be developmentally ready before starting solids (around six months, but not before four months)
    - First foods should be iron-rich (e.g., mashed meat, tofu, iron-fortified cereal, legumes) and foods that might trigger allergies (e.g., peanut butter, eggs, soy), as there is evidence that offering these earlier may be protective against developing allergies
    - Smooth purees should be offered first, progressing to mashed, lumpy and finger foods over time
    - Not offering honey, raw or runny eggs or food containing raw eggs, until the child is 12 months old
    - Avoiding giving whole nuts and high-sodium or high-sugar food
    - Introducing one new food at time and monitoring for any reactions or allergies
    - Offering cooled, boiled water in a cup at mealtimes
    - Continuing to give breastmilk or formula (not alternative milks) until at least 12 months old, but decreasing the amount as baby eats more food
- From 12 months, children:
    - Should be offered a variety of foods with varying textures, including vegetables, fruit, dairy, protein, whole grains
    - Should be encouraged to self-feed with spoons, forks and fingers
    - Should be helped to start drinking independently from an open cup
    - Can be offered up to 3 small cups of full fat milk a day (no more than 500ml in total). Reduced fat or dairy alternatives such as soy, rice, goat, oat, almond and coconut milk should only be given after the child is 2 years old (unless there is a medical reason)
    - Can drink fresh tap water – no need to boil it first
- Always supervise babies and young children while they are eating
- Wipe babies' gums with a clean, damp cloth to remove plaque and milk after feeding
- Encourage them to eat and drink sitting down to reduce the risk of choking and avoid small hard foods (e.g., nuts, raw carrot, popcorn)

7. Promote healthy eating and oral gum health

- Have discussions with children about food and nutrition during your daily routines – talk about where food comes from, different cultures, and making good food and drink choices to keep your teeth and body healthy
- Plan and conduct lessons about food and nutrition and oral health
- Include food-related activities in our program (e.g., gardening, cooking, alfresco dining or picnics, excursions to community gardens, farms, markets)
- Use food to develop children's skills and knowledge of the world. For example, counting fruit, reading recipes, weighing ingredients, baking, gardening, and exposure to diverse cultural foods are great ways to indirectly to teach children literacy, numeracy, chemistry, biology, geography, and social sciences)
- Share information with families through newsletters, posters, email, social media etc
- Encourage families to share their cultural food traditions and recipes with us, and share your own
- Encourage children to drink water throughout the day to support dental health. Teach them to rinse their mouth with water to remove food debris (under an adult's supervision)
- Emphasise the importance of brushing your teeth and gums, eating a wide variety of healthy foods, limiting sugary drinks and food, and having regular check-ups with a dentist