

Food and Nutrition Policy

A. Principle

1. Under the Food Act 2014, the Changepoint Early Learning Centre is required to ensure that food provided to children is safe and suitable.
2. Although the Changepoint ELC is exempt from operating under a National Food Control Programme, everything practicable is done to ensure that food safety practices are maintained to a high standard.
3. Changepoint ELC endeavours to create a sustainable healthy eating environment, promoting healthy eating amongst children, whānau, and staff.
4. Developing and sustaining healthy eating behaviours in children are integral parts of the daily curriculum.

B. Connection with Te Whāriki

Strand 1: Wellbeing – Goal 1: *Children experience an environment where their health is promoted.*

C. Procedures

1. Food provided by parents / whānau
 - a) Parents are required to provide their child's morning tea, main lunch meal for the day, and their afternoon tea. The ELC is able to refrigerate and or re-heat food if required.
 - b) All whānau will receive a copy of "Ministry of Health – Reducing food related choking for babies and young children at early learning services" upon enrolment at ELC.
 - c) Food that is required to be refrigerated is kept in the Fridge until being served. If the food is to be reheated then it is reheated once using the microwave until piping hot the whole way through. This is then cooled until the child is able to eat it. After this reheated food has been served it is disposed of.
 - d) Parents are strongly encouraged to provide simple, nutritious food in accordance with the document "Ministry of Health – Reducing food related choking for babies and young children at early learning services".
 - e) Food that is not compliant with this documents are listed as high risk and include:
 - Whole or pieces of nuts
 - Large seeds, like pumpkin or sunflower seeds.
 - Hard or chewy sweets or lollies
 - Crisps or chippies
 - Hard rice crackers
 - Dried fruit
 - Sausages, saveloys and cheerios
 - Popcorn
 - Marshmallows
 - f) Food that is considered high risk but can be altered to be safer are listed in appendix A.
 - g) To help with a positive transition to school, children are supported to have autonomy over their bodies and are scaffolded by teachers to make positive

choices when eating out of their lunch boxes. Teachers do this by giving guidelines as to what choices might be best to eat at particular times of the day. Fruit or vegetables are always encouraged to be eaten first to promote healthy eating. Children are encouraged to save sandwiches or hot meals for the lunch kai time.

- h) ELC promotes a healthy eating environment and does not allow the consumption of fizzy drinks, lollies, chocolate, or chewing gum.
 - i) Parents are required to provide cups or bottles for their child's specific and exclusive use. These need to be clearly named and filled with water only.
2. Meal times are planned but also flexible
- a) Meal times are flexible and reflect the rhythms of the children in each room however. Depending on the room, age group of children and other key care moments meals are offered at approximately the following times:
 - Morning Tea is offered sometime between 9am and 10am
 - Lunch is offered sometime between 11am and 1pm
 - Afternoon Tea is offered sometime between 1pm and 2pm
 - b) If children stay on past 4pm they will be offered another opportunity to have a small snack to tide them over to dinner time.
 - c) Meal times are fun and interactive times that are viewed as key care moments. Teachers sit with the children and actively supervise them while they are eating.
 - d) To ensure that a staff member can always actively supervise children who are eating, a timing device may be used to support children to eat. For example Lunch kai time may be timed to 30mins to allow children plenty of time to eat but not so long that the teacher is stuck and cannot continue to care for the rest of the group.
3. As tables and chairs are used for both kai and play; all kai areas are wiped with bleach solution and then dried before and after children eat at the table. Table mats may be used for play to create an extra barrier and help children know the difference between play times and kai times.
4. Hand washing and general hygiene routines are observed when adults and children are handling food.
- a) Children are sent to go toilet and wash their hands before every meal time.
 - b) If on the property, wet wipes and hand sanitizer is used to clean and sanitize children's hands.
 - c) Children are either given a warm flannel or sent back to the bathroom to wash and dry their hands after meals.
 - d) Teachers observe children washing their hands and sing the song "tops and bottoms" to support them while they wash their hands. This helps with the killing of germs and appropriate handwashing.
 - e) Children who need support such as young children or new children are helped by a teacher who may role model or wash hands with the child.
 - f) Teachers regularly wash and or sanitize their hands while helping children to open packets or access food in their lunch boxes
5. Children are required to sit at a table, eating mat (outdoors only) or highchair/ floor chair to eat and are actively supervised by staff at all times.
- a) This means that at least 1 teacher is sitting with the children until they have all left the table.
 - b) If children are in a "floor chair" (That is a high chair without the legs) then the

floor where the seat is intended to sit is spray and wiped before the child is sat in the chair to eat

6. When on the ELC property or other excursion a kai mat may be used to create a barrier between the child and the floor. This mat will be cleaned after use.
7. Water is always available to children through the waterbottles provided by the parents. The bottles are filled as needed. If a child does not have a water bottle then the centre has spare cups that can be used. These cups are named and washed in the centre dishwasher at the end of the day. Children are discouraged from sharing cups and bottles.
8. There is a prayer or karakia before all meals.
9. If food is refused, encouragement is offered. If food is still refused, it is offered later when they are hungry. Children are empowered by having control over their food intake, by allowing self-choice and self-service at mealtimes (when practical).
10. Birthday and celebration food are considered positive social events in the Centre. However, ELC does not allow the whānau to provide a birthday cake for the child to share with the children at ELC. A clay or play-dough cake will be made for the child to blow out a candle and then disposed of after the birthday celebration.
11. For every 25 children in attendance at the ELC at least one of the adults present in ratio will hold a first aid certificate.
12. Allergies and intolerances
 - a) Due to the severity of nut allergies, Changepoint is a NUT FREE ZONE. There are no nuts, or nut containing products (see point b) kept on the premises and we request that parents do not bring these foods into the centre.
 - b) The only exception to the NUT FREE ZONE is when children who have a severe allergy to other kinds of foods and milk, and nut milks are their only option. In this case the nut milk is handled with extreme care, teachers wear gloves and take care to wash the child's hands and face after giving them the bottle. The child is always held by the teacher while drinking and the milk is stored at all times in the fridge.
 - c) All team members will be made aware of individual children's food allergies, intolerances and special dietary requirements. A visual guide including the child's photo and list of allergies, intolerances and special dietary requirements will be kept in the classroom for reference. If a child is at risk of an anaphylactic reaction to food, a management plan will be in place to ensure all team members know emergency protocols.
 - d) Parents/ Whānau are responsible for informing the ELC either upon enrolment or once an allergy is established. The management plans needed will be established in consultation with the relevant specialists, parent/ whānau and the management of ELC
 - e) Food allergies, intolerances, and special dietary requirements will be a shared responsibility of the child's parents and centre. Medical advice should be sought before eliminating food from a child's diet.

13. Milk, Breast/ Bottles

- a) There is no access to any bottles (food or liquid) within the sleeping space.
- b) Breast feeding is encouraged and supported by the centre.

- A comfortable nursing chair is provided for mothers to feed at the centre.
 - Expressed milk is to be clearly named and dated then it can be stored safely in the refrigerator or freezer and heated when required.
 - Breast milk will be heated with warm tap water (NOT boiled water) in a double boiler fashion.
 - Breast milk will be thrown away once re-heated and will not be heated again, or placed in the refrigerator
- c) If required, infant formulas are provided by the parents.
- Parents/ whānau can either provide a tin of formula or a sachet style container with each bottles amount pre-divided.
 - The tin or container must be clearly named. In the case of a formula tin, the date the tin was opened must be written on the container and then the formula must be disposed of 1 month after opening.
 - Infant formula will be made fresh and just before use. Formula will be made up to the exact specific instructions on the tin. When provided with pre-divided formula the parent/whānau will instruct the kaiako on how to prepare the formula.
 - If a child is under 3months old then all feeding equipment will be washed, rinsed and sterilised (A dishwasher will NOT sterilise feeding equipment). After 3months of age the feeding equipment will be washed and rinsed. Alternatively the feeding equipment will be sent home for the parent/ whānau to clean and rinse.
 - If a child is under 3months old then formula will be made up with cooled boiled water that has been prepared fresh that day. If the child is over 3months old then cold tap water will be used. Parent/ whānau may wish to provide the water pre-poured into the bottle to be mixed with the formula just before the bottle is served.
 - Made up formula will be kept no longer than 2hours in the refrigerator and will only be re-heated once.
- d) If required, cows milk or plant based milk bottles are provided by the parent/ whānau
- Cows milk bottles are clearly named and placed in the fridge on arrival
 - The kaiako heats the bottle before offering to the child unless otherwise told by the family.
 - The child is either held, sat at the table or placed on a cushion to drink their milk under close supervision of an adult
 - In the case of plant based milks please refer to the allergies and intolerances section of this policy.

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Reducing food related choking for babies and young children at early learning services (2021)

High-risk food to exclude

Exclude the following foods. They have the highest risk of choking on, and are either not practical to alter, have no or minimal nutritional value, or both:

- whole or pieces of nuts, large seeds, like pumpkin or sunflower seeds, hard or chewy sweets or lollies, crisps or chippies, hard rice crackers, dried fruit, sausages, saveloys and cheerios, popcorn, marshmallows.

High-risk food to alter

The following table shows which foods to alter, why and how to do it for different age groups.

(‘Soft’ means the food can be easily squashed between your thumb and forefinger, or on the roof of your mouth with your

Food characteristics	Examples	Choking risk	Changes to reduce risk	
			1–3 years old	4–6 years old
Small hard food	<ul style="list-style-type: none"> • Pieces of raw carrot, apple or celery 	Difficult for young children to bite through and break down enough to swallow safely. Pieces can become stuck in children’s airways.	<ul style="list-style-type: none"> • Grate raw carrot, apple or celery, spiralise to create vegetable or fruit spirals, slice thinly using a mandolin. • Cook until soft² and cut into strips (around 4–6 cm long) that can be picked up with one hand. 	<ul style="list-style-type: none"> • Prepare as for 1–3 years. • Raw or cooked vegetables or fruit cut into sticks (approximately 4–6 cm long) that can be picked up with one hand.
Small round or oval food	<ul style="list-style-type: none"> • Fruit with stones and large seeds or large pips like watermelon • Grapes, large berries, cherry tomatoes • Raw green peas 	Small round foods can lodge in children’s airways.	<ul style="list-style-type: none"> • Remove stones and large seeds or large pips. • Quarter or finely chop grapes, berries and cherry tomatoes to an 8mm x 8mm size or smaller (about half the width of a standard dinner fork). • Cook and squash with a fork. 	<ul style="list-style-type: none"> • Halve or quarter grapes, berries and cherry tomatoes • Whole cooked green peas are acceptable.
Food with skin or leaves	<ul style="list-style-type: none"> • Chicken 		<ul style="list-style-type: none"> • Remove skin from chicken. • Finely slice or chop salad leaves, spinach and cabbage. 	
	<ul style="list-style-type: none"> • Lettuce and other raw salad leaves, spinach, cabbage • Stone fruit (eg, plums, peaches, nectarines) • Apples and pears • Tomatoes 	Food skins are difficult to chew and can completely seal children’s airways.	<ul style="list-style-type: none"> • Grate raw carrot, apple or celery, spiralise to create vegetable or fruit spirals, slice thinly using a mandolin. • Cook until soft³ and cut into strips (around 4–6 cm long) that can be picked up with one hand. 	<ul style="list-style-type: none"> • Prepare as for 1–3 years. • Raw or cooked vegetables or fruit cut into sticks (around 4–6 cm long) that can be picked up with one hand.
Compressible foods	<ul style="list-style-type: none"> • Pieces of cooked meat 	Can fit into the shape of the airway and get wedged tightly.	<ul style="list-style-type: none"> • Cook meat until very tender. • Choose mince, shred or chop meat to 8mm x 8mm sized pieces. 	<ul style="list-style-type: none"> • Prepare as for 1–3 years; or offer thin strips of meat (around 4–6 cm long) that can be picked up with one hand or with a fork.
Food with bones	<ul style="list-style-type: none"> • Fish • Chicken nibbles 	Small bones present a choking risk.	<ul style="list-style-type: none"> • Remove all bones. 	
Thick pastes	<ul style="list-style-type: none"> • Nut or seed butter 	Can fit to the shape of a child’s airway or stick to side of airway.	<ul style="list-style-type: none"> • Use smooth thick pastes sparingly, spreading thinly and evenly onto bread. 	
Fibrous or stringy food	<ul style="list-style-type: none"> • Raw pineapple 	Fibres make it difficult for children to break up the food into smaller pieces.	<ul style="list-style-type: none"> • Peel the skin or strong fibres off where possible. • Slice these foods thinly across the grain of fibres. 	