Section 1
Why healthy eating matters for children
Section 1
Why healthy eating matters for children in childcare

Contents

Key role of childcare settings in children’s nutrition  1
Diet and children’s health  2
   Healthy weight  3
   Dental health and tooth decay  4
   Important vitamins and minerals  5
What are our children eating?   6
   Sugars  6
   Fruit and vegetables  7
   Fibre  7
Aims of the Food and Nutrition Best Practice Guidance  8
What does the Food and Nutrition for childcare settings contain  10
   Best practice guidance  10
   Menu plans and recipes  10
References  11
Appendix 1: Child care regulations for food and drink  12
Key role of childcare settings in children’s nutrition

The early years and childhood are a crucial period for development and provide an important foundation for a child’s future health and well being.

The first 1000 days, from when a baby is conceived to age two, can have a positive influence on how they develop, grow and learn – not just now, but for his or her whole life. What a child eats is crucial. This means that childcare settings can play a key role in the provision of quality and nutritious food, for children in their care.

There is evidence that children as young as 3 are receptive and capable of learning about nutrition and its relationship to health¹ and that newly tasted foods are more likely to be accepted between 2 and 3 years, than between 4 and 8 years².

As children get older they may attend a variety of child care settings in addition to school, so it is equally important to maintain the focus on good nutrition.

There were 84,000 childcare and play places in Wales in 2017³ and therefore settings will impact on the lives of many young children.

Provision of a healthy balanced diet and healthy drinks is essential to:
- encourage children to eat a wide variety of foods because habits adopted at the toddler stage will be taken into later childhood and adult life
- influence food preferences as a toddler begins to have a decisive say in food selection
- ensure they get the right amount of energy and nutrients for this time of rapid growth and development
- develop and maintain a healthy weight.
- help prevent tooth decay
- help prevent iron deficiency and constipation.

Childcare practitioners are in an ideal position to help shape eating habits and to support infants and children to eat well.

Childcare settings can:
- play a significant part in children’s nutrition by supporting mums who are continuing to breastfeed and supporting the introduction of solid foods
- provide nutritious food in the correct portions to support a diet that encourages vegetables and fruit, and balanced meals providing all the essential nutrients, with milk or water to drink
- provide activities to create an environment that encourages children in their care to develop positive attitudes to food and their health.

The challenges are to ensure that meals, snacks and drinks provided meet dietary recommendations for this age group, and are eaten and enjoyed by children. This should continue throughout childcare settings for children up to 12 years.

Some families may not be able to access or afford good quality food and this can have an impact on children’s long-term health. Childcare settings can provide an essential part of a child’s dietary intake in these crucial years.
Diet and children’s health

Key health problems that are linked to children’s diet include: overweight and obesity, tooth decay and not having enough vitamin and mineral intakes.

Healthy weight

The Child Measurement Programme in Wales monitors the height and weight of all school children in reception class every year. We know that 72% of children at reception age are a healthy weight but 27.1% (over 1 in 4) is overweight or obese. What is of concern is the recent rise in the overall levels of obesity and the higher levels in more deprived areas. This makes it even more important to ensure that young children have the opportunities to grow up eating a healthy balanced diet and being physically active.

Figure 1: Results from the Child Measurement Programme in Wales for 2016/17

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>27.1%</td>
<td>12.4%</td>
</tr>
<tr>
<td>of children aged 4–5 years are overweight or obese</td>
<td>of children aged 4–5 years are obese</td>
</tr>
</tbody>
</table>

The range of levels of obesity across local authority areas in Wales is 7.8%–17.5%.

Local authority areas above the average of 12.4% in Wales include:

- Anglesey, Gwynedd, Conwy, Wrexham, Pembrokeshire, Carmarthenshire, Swansea, Bridgend, Rhondda Cynon Taf, Merthyr Tydfil and Blaenau Gwent

Local authority areas below the average of 12.4% in Wales include:

- Denbighshire, Flintshire, Ceredigion, Neath/Port Talbot, Vale of Glamorgan, Cardiff, Torfaen, Monmouthshire, Newport

Being overweight or obese as a child can lead to being overweight or obese as an adult with very serious health consequences such as increased risk of diabetes, heart disease and some cancers. Nearly 60% of adults in Wales are overweight or obese.

Helping children to be a healthy weight is one of the best things we can do to set them up for life.
10 Steps to a Healthy Weight is a national programme to improve the number of children starting school a healthy weight and presents positive steps that families can do to help their children be a healthy weight.

The 10 steps messages listed above can be used in childcare settings and when working with families, to help them to embed healthy lifestyle practices into their daily lives.

• **Step 8** and **Step 10** are about food and drink:
  - **Step 8** – give children fruit and vegetables every day
  - **Step 10** – milk and water are the only drinks your child needs

These messages form part of these food standards and guidance for food and drink provision in childcare settings.

Childcare settings can also have a role in supporting the other steps e.g.

- **Step 2** – Providing an environment which supports mums to continue to breastfeed if their infant is in childcare
- **Step 6** – Give children the opportunity to play outdoors every day
- **Step 7** – Limit screen time

More information on the 10 Steps to a Healthy Weight Programme for parents and professionals is available from: http://everychildwales.co.uk/professionals/

More information on supporting breastfeeding is in section 2 of this guidance.
Dental Health and tooth decay

Children’s dental health has improved over recent years, but tooth decay is still one of the biggest health issues in children. Tooth decay can be prevented by a healthy, low-sugar diet and good tooth brushing habits.

Tooth decay occurs when sugars entering the mouth are absorbed by the plaque/bacteria present on the surface of teeth. The bacteria convert the sugars to an acid which weakens the tooth surface, leading to dental caries (holes in the teeth). If left untreated, dental abscesses, which are collections of pus at the end of the teeth, in the gums, can occur. Build up of plaque can also cause gum disease. Enamel erosion is when the outer surface of the tooth is weakened by drinking acidic. Once the tooth surface is weakened it cannot repair itself. Tooth erosion is preventable by reducing the amount and frequency of acidic drinks.

### Figure 2: Levels of tooth decay of children in Wales

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 year old in Wales</td>
<td>14.5%</td>
<td>Of 3 year olds have at least one tooth affected by decay. Typically a child aged 3 with decay will have about 3 teeth affected (2.91).</td>
</tr>
<tr>
<td>5 year old in Wales</td>
<td>34.2%</td>
<td>Of 5 year olds have at least one tooth affected by decay. The mean number of decayed, missing or filled teeth per child is 1.22.</td>
</tr>
<tr>
<td>12 year old in Wales</td>
<td>About 9 out of 30 children (30%) will have some decay in their permanent teeth in 2017, compared with 14 out of 30 in 2004. On average children had 2.1 teeth affected.</td>
<td></td>
</tr>
</tbody>
</table>

Long term trends from the late 1980s to the present day highlight a significant reduction in both the prevalence and average experience of dental caries amongst 12 year olds living in Wales.

### Designed to Smile

Designed to Smile is a national programme to improve the oral health of children in Wales and childcare settings have an important role.

Young children are particularly vulnerable to tooth decay and this can have a big impact on the development of their adult teeth, which is why it is so important to have tooth friendly snacks and drinks and to look after teeth from a very young age.

All childcare settings can help teach children about looking after their teeth and can familiarise children with visits to the dentist through role play, using stories, pictures and puzzles. Activity sheets and other resources are available to support this.

Targetted settings are encouraged to participate in a daily fluoride tooth brushing scheme for children from 2 years of age. Staff are provided with full training and support, and home tooth brushing packs are also provided for children taking part.

For more information: [www.designedtosmile.org/info-pro/information-for-schools-and-nurseries/](http://www.designedtosmile.org/info-pro/information-for-schools-and-nurseries/)
Contact your local Designed to Smile team for information: [www.designedtosmile.org/contact-us/](http://www.designedtosmile.org/contact-us/)
Important vitamins and minerals

More than one in four children may be at risk of iron deficiency which can have a significant impact on a child’s development. Ensuring a varied diet which includes foods high in iron can help prevent this. Growing children, especially those who don’t eat well sometimes don’t get enough vitamins A and C. It’s also difficult to get enough vitamin D through food alone.

It is recommended that all infants and children aged 6 months to 5 years have daily vitamin drops of vitamins A, C and D, unless as an infant they are drinking around 500mls (1 pint) of infant formula milk a day. This is important even if they are eating well and spending time in the sunshine. Healthy Start vitamins are ideal. As a setting you can provide information on who is eligible for Free Healthy Start vitamins.

More information is available in the attached link www.healthystart.nhs.uk/

It is also recommended that babies who are being breastfed are given a daily vitamin D supplement from birth.

For more information on feeding infants see section 2.
What are our children eating?

Sugar intakes

**Figure 3: Children’s dietary intakes of sugar**

Current dietary intakes show that children are eating too much sugar.

<table>
<thead>
<tr>
<th>Free Sugar intakes</th>
<th>15g sugar = 4 teaspoons</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2–4 year olds</strong></td>
<td><strong>1.5–3 year olds</strong></td>
</tr>
<tr>
<td>Maximum Recommended intakes</td>
<td>Actual intakes</td>
</tr>
<tr>
<td>4 teaspoons</td>
<td>8 teaspoons</td>
</tr>
</tbody>
</table>

Ref: National Diet and Nutrition Survey. Results from Years 7–8 (combined) of the Rolling Programme (2014/15 to 2015/16).

**What are Free sugars?**

Free sugars are all added sugars in any form plus sugars naturally present in honey, syrups, and fruit juices. They are the sugars that should be limited, not as you may think sugars that can be freely consumed.

Free or added sugars in children’s diets come from a range of foods, including sugars, preserves, confectionary, fruit juice and soft drinks, biscuits, buns, cakes, pastries and pies, yoghurts and fromage frais.

**Figure 4: Amounts of sugar sweetened drinks and fruit juice consumed by children**

Children are also drinking increasing amounts of sugar sweetened soft drinks and fruit juice as they get older, as shown in recent dietary intake surveys.

<table>
<thead>
<tr>
<th>Sugar sweetened soft drinks a day (ml)</th>
<th>Fruit juice a day (ml)</th>
</tr>
</thead>
<tbody>
<tr>
<td>37ml Children aged 1.5–3 years</td>
<td>49ml Children aged 1.5–3 years</td>
</tr>
<tr>
<td>83ml Children aged 4–10 years</td>
<td>62ml Children aged 4–10 years</td>
</tr>
</tbody>
</table>

Ref: National Diet and Nutrition Survey. Results from Years 7–8 (combined) of the Rolling Programme (2014/15 to 2015/16).
Fruit and vegetable intakes

We should be providing children with fruit and vegetables from a young age and aiming to establish a regular habit of eating 5 a day with portion size appropriate to age.

In the last detailed UK dietary survey, the highest numbers eating fruit and vegetables are children between 1.5 and 3 years but this decreases with age. Only 8% of 11-18 year olds had ‘5 a day’ and ate on average 2.7 portions a day. Salad and raw vegetables are less common in younger age groups with less than 50% of under 10 years eating them. What’s important again is that this varies with the level of deprivation.

Figure 5: Recent data for Wales on the percentage of children who ate fruit and vegetables every day, by age

Childcare settings can help to improve this, particularly with vegetable intakes in young children and both fruit and vegetables with older children.

A survey of school pupils aged 11–16 in Wales also shows that girls, younger pupils and those from the most affluent backgrounds are more likely to eat fruit and vegetables and there is a stark contrast in the amounts eaten between the least and most deprived areas.

Fibre intakes

A survey of school pupils aged 11–16 in Wales also shows that girls, younger pupils and those from the most affluent backgrounds are more likely to eat fruit and vegetables and there is a stark contrast in the amounts eaten between the least and most deprived areas.

Although young children do not need as much fibre as older teenagers and adults they still need more than they currently have. This can be achieved by following the food guidance in section 4 and encouraging them to eat fruit and vegetables with meals and as snacks. Also to ensure that starchy foods include a variety of whole grain cereals, bread, pasta and rice.
Aims of the Food and Nutrition in childcare settings – best practice guidance

This Best Practice Guidance document has been put together with input from a range of child care providers, childcare organisations, health care professionals and Care Inspectorate Wales. It’s aim is to provide the following help to childcare settings, children, parents and carers.

For childcare settings it will help you to:
- demonstrate how you meet the child care regulations and supporting National Minimum Standards for Regulated Childcare for food, drink and health needs of children. See Appendix 1
- provide the right balance of nutritious food and drink in the correct portions to meet the dietary recommendations for children
- encourage children to eat well and learn about food
- aim for excellent quality rating and best practice in this area
- promote your setting as a healthy environment to children to develop positive attitudes toward a healthy balanced diet
- promote consistency of nutrition messages and encourage opportunities to pass these messages on to parents/carers.

For children it will help to:
- establish good eating habits
- ensure they get the right balance and range of nutrients
- develop and maintain a healthy weight
- prevent tooth decay, iron deficiency and constipation
- ensure they get consistent messages about food and drink.

For parents & carers it will help to:
- make them feel confident that their child is receiving good nutrition
- inform about the childcare setting’s approach to food and drink
- continue good habits at home.
Where relevant it will also:
• be consistent with the ethos of the Foundation Phase Framework
• support other national policy initiatives and programmes that impact on early years and children, e.g. Welsh Government Healthy Weight: Healthy Wales, Every Child Wales, Flying Start, Healthy Pre-school Scheme, Healthy Eating Regulations for local authority maintained schools
• inform the relevant childcare and playwork qualifications, so that newly qualified practitioners will be aware and have knowledge of food provision in their settings
• be embedded in the community ‘Nutrition skills™ for life’ training programme which childcare settings can access across Wales for their staff
• inform trainers of childcare practitioners e.g. continuing professional development (CPD) sessions for staff and student training.

Who is it for: All regulated providers who provide food as snacks and/or meals and drinks and for all staff, not just those preparing the food:
• Child minding
• Day care and Open Access Play Provision:
  ◦ Full Day Care settings, such as day nurseries, cylchoedd meithrin, children’s centres and some family centres
  ◦ Sessional Day Care, such as play groups, cylchoedd meithrin, wrap around care, funded education places, free childcare places
  ◦ Out of School Childcare
  ◦ Creches
  ◦ Open access play provision

To make it easier to use, the food provision section is split into settings that provide snacks and drinks only and settings that provide a range of meals, snacks and drinks across the day.

Food provision in maintained schools is covered by the Healthy Eating regulations and applies to nursery classes. However, this can support their work on the whole school environment for this age group.
It is also encouraged as best practice for other groups offering food and drink e.g.:
- unregulated provision such as parent and toddler groups, cyhoedd ti a fi, nannies and some play groups and open access groups. Also uniformed groups such as scouts, brownies and cadets
- parents and carers themselves so they know what they should expect their child to be offered. It is important to work alongside parents when implementing this guidance. Parents/carers can provide key information about an individual child’s needs and the childcare setting has a unique opportunity to act as a role model, potentially influencing food provision in the home
- a wider group of practitioners who have an interest in the health and welfare of young children e.g. NHS and social work staff who support families, third sector organisations working with families in community settings
- parents who provide food for their child when they are in childcare.

Developing the whole food environment
It is important to support a values and rights based approach to a healthy food environment from the right of the child to have clean water, food that is good for them and that can protect their health. Also to support and develop their skills, attitudes and knowledge through education to have a voice and express their opinion in their choice of food. All these aspects are covered in the guidance.

What does the Food and Nutrition for childcare settings contain?

<table>
<thead>
<tr>
<th>Best practice guidance</th>
<th>Menu plans and recipes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section 1</strong> – Introduction to the guidance</td>
<td>• A 3 week set of example menu plans.</td>
</tr>
<tr>
<td><strong>Section 2</strong> – Guidance on infant feeding 0-6 months</td>
<td>• Recipes of all items on the menus that meet the nutritional requirement for these age groups for different size settings.</td>
</tr>
<tr>
<td><strong>Section 3</strong> – Introduction of solid foods 6-12 months</td>
<td></td>
</tr>
<tr>
<td><strong>Section 4</strong> – Food and Nutrition: standards, guidelines and menu planning:</td>
<td></td>
</tr>
<tr>
<td>◦ a set of food and drink standards for 1 year onwards and practical guidance on how to implement them</td>
<td></td>
</tr>
<tr>
<td><strong>Section 5</strong> – Encouraging children to eat well – activities that promote healthy eating habits and wellbeing</td>
<td></td>
</tr>
<tr>
<td><strong>Section 6</strong> – Food hygiene and safety</td>
<td></td>
</tr>
<tr>
<td><strong>Section 7</strong> – Putting it all together – how to monitor and demonstrate best practice in food and drink provision.</td>
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For ease of use in Section 4 standards, meal planning and guidance is split into three parts:

4 A: Settings providing snacks and drinks only

4 B: Healthy hydration for all settings

4C: Settings providing meals, snacks and drinks for younger children 1-4 years
References

Appendix 1

The Child Minding and Day Care (Wales) Regulations 2010

Regulations for Food and drink
Part 5 regulation 21

Food provided for children
21. (1) The registered person must ensure, where food is provided to relevant children by the registered person, that–
   (a) they are provided with food which–
      (i) is served in adequate quantities and at appropriate intervals;
      (ii) is properly prepared, wholesome and nutritious;
      (iii) is suitable for their needs and meets their reasonable preferences; and
      (iv) is sufficiently varied; and
   (b) any special dietary need of a relevant child which is due to the child’s health, religious persuasion, racial origin or cultural background is met.

   (2) The registered person must ensure that relevant children are provided with access to fresh drinking water at all times while they are under the care of the registered person.

Health needs of children
24. (1) The registered person must promote and protect the health of relevant children.

   (2) In particular the registered person must ensure that–

      (a) each child is provided with such individual support as may be required in the light of any particular health needs or disability of the child; and
      (b) at all times, at least one person caring for relevant children has a suitable first aid qualification.

Welsh Government, National Minimum Standards for Regulated Childcare for children up to the age of 12 years
These standards are made in accordance with section 30 (3) of the Measure and are designed to assist providers and settings to meet the regulations that are relevant to the service they provide. Registered persons must have regard to the standards which relate to the type of care provided.

Quality of care

Standard 12: Food and drink

Outcome:
Children are provided with regular drinks and food in adequate quantities for their needs.