

FOOD STATES Control Control



Best practice guidance

Food and Nutrition for Childcare settings

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FOOD COUTRITION for Childcare settings

Section 1

Why healthy eating matters for children

Section 1

Why healthy eating matters for children in childcare

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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 about 73% of children at reception age are a healthy weight but 26.9% (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 2018/19

26.9% of children aged 4–5 years are overweight or obese



The range of levels of obesity across local authority areas in Wales is

8.6%-20.7%

Local authority areas above the average of

in Wales include:

1

Anglesey, Gwynedd, Denbighshire, Powys, Pembrokeshire, Carmarthenshire, Neath Port Talbot, Bridgend, Rhondda Cynon Taf, Merthyr Tydfil, and Cearphilly

Local authority areas below the average of

12.6%

in Wales include:

Conwy, Flintshire, Wrexham, Ceredigion, Swansea, Vale of Glamorgan, Cardiff, Blaenau Gwent, Torfaen, Monmouthshire and Newport

i. Ref: National Child Measurement Programme in Wales 2018/19, Public Health Wales, 2021.

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. About 60% of adults in Wales are overweight or obese⁴.

Helping children to be a healthy weight is one of the best things we can do to set them up for life.

EVERY CHILD



If you are planning to start a family, aim to be a healthy weight.

If you as parents are a healthy weight your child is more likely to be a healthy weight too.



Avoid gaining too much

to try to lose weight but making sure that you gain

weight within recommended

levels is a good idea for your health and that of your baby.

to play outdoors every day. Children who play

toddlers opportunities

Give children and

outdoors every day are more likely to be a healthy weight





Limit screen time

Children who spend less than 2 hours a day using a screen, including a phone, tablet, computer or TV, are more likely to be a healthy weight.

Give children fruit and vegetables every day.

Fruit and vegetables are rich in fibre, vitamins and minerals which all help to keep your child healthy.



10 STEPS TO A

HEALTHY WEIGHT



www.everychildwales.co.uk

Breastfeed your baby.

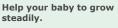
Babies who are breastfed are more likely to be a healthy weight by school



Breast f

around six months old before giving solid foods.

Before six months old breast milk or infant formula has all of the goodness and nutrients your baby needs.



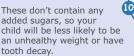
Babies who grow rapidly in the first year of life are more likely to be overweight when they are school age.



Help your children have enough sleep

Regularly getting enough sleep will help your child be a healthy weight.

Water and milk are the only drinks your child



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:

www.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

3 year old in Wales

14.5%

of 3 year olds have at least one tooth affected by decay

Typically a child aged 3 **V** with decay will have about 3 teeth affected (2.91)

5 year old in Wales

32.4%

of 5 year olds have at least one tooth affected by decay

The mean number of decayed, missing or filled teeth per child is 1.11

12 year old in Wales

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



The amount of tooth decay in young children has improved

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



i. Ref: Morgan, M, Monaghan, N (2015) Dental epidemiological survey of 3 year olds in Wales 2013-14 Welsh Oral Health Information Unit, Cardiff University & Public Health Wales ii. Oral health of 5-year-old children in Wales 2022-23: Summary Welsh Oral Health Information Unit, Cardiff University & Public Health Wales iii. Ref: Morgan, M, Monaghan, N (2018) Dental epidemiological survey of 5 year olds in Wales 2017-18 Welsh Oral Health Information Unit, Cardiff University & Public Health Wales

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.phw.nhs.wales/services-and-teams/designed-to-smile/ Contact your local Designed to Smile team for information: 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 development⁵. 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 sections 2 and 3.

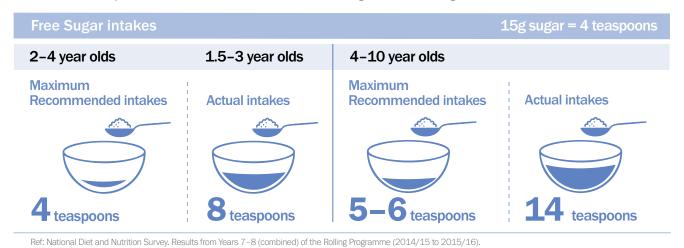


What are our children eating?

Sugar intakes

Figure 3: Children's dietary intakes of sugar

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



What are Free sugars?



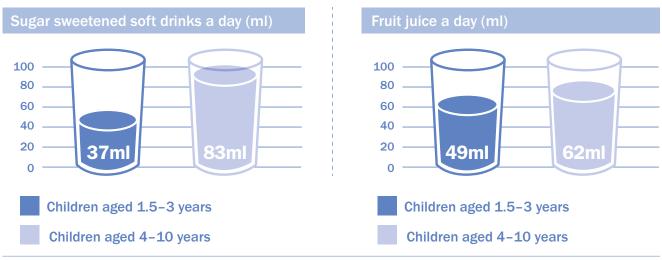
Free sugars are all added sugars in any form plus sugars naturally present in honey, syrups,

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 comes 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.



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

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 them⁶. 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 ageⁱ



i. Statistics Wales (2017) National survey for Wales 2016/17 Child health Lifestyle

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 areas⁷.

Fibre intakes

Figure 6: Dietary intakes of fibre

Current dietary intakes show that children are not eating enough fibre.

Fibre intake (per day) 2-4	l years	Fibre intake (per day) 5–10 years	
Recommended intake	Actual intake	Recommended intake	Actual intake
15 g	10.3 g	20 g	14.0 g

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

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, cylchoedd 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?

Best practice guidance

- Section 1 Introduction to the guidance
- Section 2 Feeding babies in your care
- Section 3 Introduction of solid foods
- Section 4 Food and Nutrition: standards, guidelines and menu planning:
 - a set of food and drink standards for 1 year onwards and practical guidance on how to implement them
- Section 5 Encouraging children to eat well activities that promote healthy eating habits and wellbeing
- Section 6 Food hygiene and safety
- Section 7 Putting it all together how to monitor and demonstrate best practice in food and drink provision.

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

Menu plans and recipes

- A 3 week set of example menu plans.
- · Recipes of all items on the menus that meet the nutritional requirement for these age groups for different size settings.

References

- 1. Cooke, L. (2007) The importance of exposure for healthy eating in childhood: a review. Journal of Human Nutrition and Dietetics 20, 294-301.
- 2. Skinner J D, Carruth BR, Wendy B, Ziegler PJ (2002) Children's food preferences: a longitudinal analysis J Am Diet Assoc. 2002 Nov: 102 (1): 1638-47.
- 3. Welsh Government (2017) Childcare capacity in Wales- Mapping childcare supply against potential demand.
- 4. Welsh Government (2018) National Survey for Wales 2017-18, Statistics for Wales.
- 5. Scientific Advisory Committee on Nutrition (2010) Iron and health. Available at www.gov.uk/government/collections/sacn-reports-and-position-statements.
- 6. Public Health England and Food Standards Agency (2018) National Diet and Nutrition Survey (NDNS) rolling programme for 2014-2015 and 2015-1026.
- 7. Welsh Government Social Research, (2015); 2013/14 Health Behaviour in School-aged Children (HBSC) Wales: key findings.

Appendix 1

The Child Minding and Day Care (Wales) Regulations 2010

Regulations for Food and drink

Part 5 regulation 21

Food provided for children

- (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.

The registered person is responsible for ensuring that:

- 12.1 Information is obtained from parents and recorded about individual children's dietary requirements, including cultural and religious requirements and therapeutic diets for officially diagnosed food allergies and these are complied with.
- 12.2 If children receive meals and / or snacks, they are safely prepared, nutritionally balanced, of good quality and appropriate in quantity following recommendations in <u>Welsh Government's Food and Nutrition guidance for childcare settings</u>⁶. The food and drink offered is varied and nutritious and meets the religious, cultural, and dietary requirements of each of the children.
- 12.3 Fresh drinking water is freely available to children at all times.
- 12.4 All food is stored safely. If parents provide food, they are informed of what can be stored safely.
- 12.5 Food Standards Agency and Environmental Health requirements are complied with.
- 12.6 In settings where there are set meal and refreshment times, they are arranged to provide sociable opportunities for children, using tables, seating and appropriate crockery and cutlery.
- 12.7 If care is provided for babies and children under the age of 2:
- feeding and nappy changing takes place in accordance with the child's individual needs and not as part of a nursery routine
- facilities are available to support mothers who wish to continue to breastfeed, e.g., for safe storage
 of expressed milk or for visiting in order to breastfeed their baby during the time in which the
 child is cared for. In exceptional circumstances, where facilities are not permanently available,
 temporary arrangements are made as required
- babies are held when being bottle fed, preferably by the same carer or key worker on each occasion
- an area is provided with access to drinking water and facilities for the hygienic preparation of babies' feeds
- · suitable sterilisation equipment is used for babies' feeding equipment and dummies
- records are kept of babies' food intake and are shared with their parent(s).

⁶ The Food Standards Agency (FSA) have added popcorn to their list of choking hazards for babies and young children. The Welsh Government will update the Food and Nutrition Guidance for Childcare Settings to reflect this and publish guidance on www.gov.wales.