

Guidance

- for the Nutrition and
Oral Health Award for Carers
of the Under 5's





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INTRODUCTION

Growing children need a good nutritional intake to ensure they grow and develop well. However, there is evidence that:

- The number of overweight children is increasing. In 2016/17 National Child Measurement Programme results showed that in Tameside 23.8% of reception children were above a healthy weight. This is similar to the national situation. Some overweight children can develop Type II Diabetes usually only seen in adults.
- Oral Health - Good oral health is linked to sound infant nutrition, breastfeeding is the foundation for child and adult health, and healthy weight. It is essential that oral health is considered within the context of general health.
- The diets of children under 5 in Britain are:
 - for some groups of children too low in vitamin D (cases of rickets are appearing more frequently.)
 - too low in iron (More than one in four young children in the UK may be at risk of iron deficiency which is linked to slower intellectual development and poor behaviour in the longer term.)
 - too low in zinc, vitamin A and vitamin C
- their diets contain too much of the type of sugars that most contribute to tooth damage
- their diets contain too much salt
- their diets are dependent on too much convenience and snack foods.
- Intakes of home prepared dishes based on meat, fish, vegetables and fruit are generally low. An increase in the intakes of these foods would help to ensure that children have the right amounts of vitamins and minerals for healthy growth and development.

Eating is an important part of everyone's life. Encouraging children to eat healthily does not mean totally denying them food they enjoy. Healthy eating is about getting a varied, balanced diet and enjoying lots of different foods. It is important to ensure children get the right amount of energy (calories) and nutrients they need whilst growing rapidly. It is also important that too much energy (calories) is not consumed as this may lead to children becoming overweight or obese.

The best long term approach to ensure a healthy weight is to follow a healthy balanced diet with optimum levels of physical activity from early years. The pre-school years are an ideal time to establish healthy lifestyles. Exposure to health risks through inactivity begins in childhood so establishing activity patterns early in life will have an impact on later behaviours. Those who provide childcare are in a unique position to have a positive influence not only on the nutritional intake and activity levels of the babies and children in their care, but also in the knowledge and attitudes about food and activity that form behaviours and can impact on health and well-being in later life.

These guidelines have therefore been produced to ensure a good standard of nutrition is provided for all children who attend childcare in Tameside and to ensure they grow healthily and to help ensure a healthy weight.

Tameside childcare providers can apply for the Nutrition and Oral Health Award for Carers of the Under 5's. This is a joint award which recognises good practice by carers of the under 5's developed by the Children's Nutrition Team and the Oral Health Improvement Team, supported by the Early Years Quality Team and Children's Centres.

Aims and Objectives of the Nutrition and Oral Health Award for Carers of the Under 5's

Aim

To ensure that childcare providers in Tameside meet National and Local Food, Nutrition and Oral Health guidelines.

Objectives

- To reward childcare providers who promote good standards of nutrition and oral health.
- To promote childcare providers who have gained the award on relevant websites, in local press etc.
- To offer the Nutrition and Oral Health Award to all childcare providers across Tameside.
- To provide continual support to childcare providers who have gained the award.
- To evaluate the award and the award criteria in consultation with relevant agencies e.g. parents, children, Early Years Team, Oral Health Improvement Team.

Expected Outcomes

- Increase in childcare providers demonstrating evidence of meeting Tameside's Food, Nutrition and Oral Health Guidelines (based on School Food Trust Voluntary Food and Drink Guidelines for Early Years Settings in England and National Caroline Walker Trust Guidelines).
- Increase in childcare providers demonstrating evidence of healthy eating policies involving staff, parents and children.
- Reduction in overweight and obese children in Reception and Year 6.



What are the criteria to achieve a 'Nutrition and Oral Health Award for Carers of the Under 5's'?

In order to achieve an award, a childcare provider needs to provide:

- **Meals and snacks of a good nutritional standard which meet evidence based healthy eating/oral health guidelines.**
- **A written food/oral health policy with involvement from staff, parents and children.**
- **A written copy of their cycle of menus.**
- **Promote regular play and physical activity.**
- **Promote evidence based weaning practices.**
- **Good hygiene standards which meet Environmental Health Department inspections.**
- **Educational food/oral health related activities as part of learning programme.**
- **To provide meals for children with special needs e.g. particular dietary requirements.**
- **Staff are encouraged to attend Early Years Food, Nutrition and Oral Health Training. This training is run regularly by the Children's Nutrition Team and Oral Health Improvement Team.**

If you wish to apply for an award, please contact one of the team:

Children's Nutrition Team – Tel: 0161 366 2349

**Lynn Callaghan
(Oral Health Improvement/Be Well Tameside) Tel: 0161 716 2000**

Or email: childrensnutrition@tgh.nhs.uk

You can also now follow us on Twitter @NHSTamesideCNT

REQUIRED NUTRITIONAL STANDARD FOR EARLY YEARS FOOD PROVISION

Nutrition, food, type, consistency and quantity vary according to a child's age.

As children attend childcare for different amounts of time in a day, the number of meals they are given will vary. The nutrition they should receive will therefore also vary.

Full day care– includes morning snack, lunch, afternoon snack and tea, this does not include breakfast

Morning session – snack and lunch

Afternoon session – snack and tea

Snack only

Lunch only

Tea only

It is important that the food and drink provided for children is balanced across each day.

The food and drink guidelines divide energy and nutritional requirements across meals and snacks provided during full day care in the following proportions:

- Breakfast 20%
- Mid-morning snack 10%
- Lunch 30%
- Mid-afternoon snack 10%
- Tea 20%

This leaves 10% for an additional drink or a drink and snack at home in the evening.

Balancing Lunch and Tea

Meals provided to children can vary between different early years settings, with some serving children a main meal at lunchtime and a light meal at teatime, and others providing a light meal at lunchtime and a main meal at teatime. The guidelines for main and light meals are the same, and the difference is the amount of energy provided; main meals provide about 30% of energy and light meals provide about 20% of energy. The amount of energy provided can be varied by the type and overall amounts of food provided at the meal.

The above proportions are based on the assumption that lunch is a main meal and tea is a light meal. Where settings provide tea as a main meal and lunch as a light meal, these proportions should be reversed.

Drinking water should be available throughout the day.

Achieving and Maintaining the Nutritional Standard

Development of a food policy and consulting with staff and parents forms part of the criteria in achieving the award. Help with this along with a sample food policy can be found in Food, Nutrition and Oral Health Policy Development section.

Guidelines for the provision of nutrition for infants (0-1years) are shown in the section entitled 'Food and Nutritional Recommendations for Babies'.

Guidelines to help plan healthy meals for children 1-4 years that meet the nutritional standard are shown in the section entitled 'Healthy Eating and Menu Planning for 1-5 Year Olds'.

Assessment of the Nutritional Standard

Ensuring that childcare providers meet the nutritional standard required at each meal is essential. All childcare providers can request to be assessed by a Nutrition Adviser from the Children's Nutrition Team.

FOOD AND NUTRITIONAL RECOMMENDATIONS FOR BABIES UP TO 1 YEAR OLD

Advice on Infant Feeding is largely based on recommendations from the Government Committee on medical aspects of Food and Nutrition Policy (COMA) and also the World Health Organisation (WHO), Department of Health Guidelines (DOH), ESPGHAN Recommendations 2008.

Promoting Breastfeeding

Exclusive breastfeeding for around 6 months is a desirable goal.

Carers should support breastfeeding mothers and encourage them to continue providing breast milk. Mothers who are breastfeeding and who may wish to feed their baby in the childcare setting should have warm, private facilities available to them.

Families of bottle fed babies need to be supported with appropriate information and advice.

Weaning

Weaning is the process of expanding the diet to include foods and drinks other than breast milk or infant formula.

Weaning should start at around six months of age in a normal, healthy term infant but not before 4 months. All full term babies should start weaning at 6 months if they have not started already. Babies are ready to move on to solid foods when they seem hungry between milk feeds or are demanding feeds more often even though larger milk feeds have been offered. Other signs are wanting to chew e.g. putting toys and other objects into their mouths, chewing fists, watching others with interest when they are eating.

The following advice is sensible advice for carers to follow, but it is important to remember that babies progress through the weaning process at different rates and it is obviously important that weaning is discussed with the individual parents/carers of the baby.

- All weaning foods should be prepared:
 - without the addition of salt
 - without sugar
 - in an hygienic manner
- All weaning foods should be offered
 - using a baby spoon
 - as a finger food
- Solids should never be given via a bottle
- Home cooked freshly prepared foods should be encouraged
- Don't use adult type convenience foods for weaning – they are not suitable

Weaning at six months

Suitable first foods:

- Mashed vegetables e.g. carrot, parsnip, potato, yam
- Mashed potato
- Mashed fruit e.g. cooked apple, banana

When first starting weaning, the advice is:

- Start with suitable food e.g. mashed vegetables and fruit
- Give the food to a baby in the middle or at the end of a milk feed
- Choose a time when the baby is hungry
- At first give weaning foods once a day and then at a second meal
- Give a little of the food on the tip of a clean plastic spoon and let the baby suck it off
- Go at the baby's pace
- Gradually increase the amount you give, thus increasing the variety of foods given

Move onto the following food:

Further first weaning foods:

Well cooked mashed meat e.g. beef, chicken, liver, lamb, pork

Mashed pulses e.g. peas, lentils, dhal

Increased variety of fruit and vegetables

Milk products e.g. whole milk yoghurt

Cheese e.g. mashed with potato

At 6 months baby's tummy is developed so that new foods and textures can be introduced more quickly. They will naturally progress through the weaning stages much quicker than a younger baby.

Note:

The following foods should **not** be introduced before six months

- Wheat based foods which contain gluten e.g. wheat flour, breakfast cereals, rusks etc.
- Nuts and seeds* including ground nut and nut spreads
- Eggs
- Fish and shellfish
- Citrus fruits including citrus fruit juices
- Follow on milk
- Full fat cows' milk is OK for mixing foods or in cooking from 5-6 months onwards but not as a drink until a baby is 1 year

*Where a child has already been diagnosed with another kind of allergy or there is a history of allergy in the child's family. The family are encouraged to talk to their GP, Health Visitor or Consultant before introducing nuts to their child for the first time.

- **Whole nuts should be avoided until a child is 5 years old.**
- **Honey should not be given to babies under 12 months old due to the risk of developing infant botulism.**

Drinks

Initially, weaning foods are given in addition to milk feeds and should not replace them. However, as weaning progresses and the quantity of food eaten increases, the volume of milk may decrease. If an additional drink is required, water should be offered. (Water needs to be cooled, boiled water if baby is under 6 months). Drinks should be offered from a free flow beaker or cup.

Finger foods

These should be offered from 6-7 months but not before six months. These should be soft initially to avoid the risk of choking. Babies should always be supervised when feeding. Encourage finger foods at two or more meals. These will encourage the baby to learn to chew.

Suitable finger foods

Cooked soft vegetables e.g. carrot, green beans
Soft toast, chapatti, pitta bread, home cooked potato pieces/wedges
Banana, ripe apple, pear, mango
Hard cheese e.g. cheddar/edam cubed or sliced
Chopped hard boiled egg

Weaning (approx 6-9 months)

Food texture should become coarser. Food should be more thickly mashed and be lumpier. It is important to offer a wider variety of foods.

Suitable foods

Well cooked scrambled egg
Cauliflower cheese – mashed
Mashed poultry or meat casserole
Mashed pasta in cheese sauce
Mashed vegetables and lentil casserole with soft rice
Mashed fish and potato pie
Porridge/Weetabix

Wheat and gluten containing foods can be introduced from 6 months e.g. Wholemeal and white bread, pasta and cereals can be used.

Encourage 2 to 3 servings a day of starchy foods such as potatoes, rice, bread, pasta. Remember to encourage red meat, white meat, fish and liver, they are important for iron. Other sources of iron include green vegetables, peas, beans, lentils and fortified breakfast cereals.

Milk

As the quantity of solids increase, milk becomes less important, breast feeds will reduce to 3-4 per day and the volume of formula milk taken should decrease to one pint daily at 12 months. Solid food should be offered more frequently, increasing to three times each day.

As the baby eats more, milk at or before mealtimes may suppress the appetite for solid food. Try offering water with meals.

Other drinks

From six months, drinks should be offered from a free flow beaker or cup. (More information to follow.)

Water should continue to be the drink of choice. This should always be boiled before the age of six months. Sweet drinks should be avoided. The sugars in soft drinks, including 'baby' fruit juices and herbal drinks, together with the acidity can cause dental caries (decay).

If fruit juices are given they should be well diluted with water (e.g. at least ten parts water to one part juice) and offered with meals. The risk of dental decay is greater from a bottle or feeding cup with teat because of the position of the teat against the teeth. Adult type soft drinks or 'diet' drinks, tea and coffee are not recommended for infants.

Weaning (approx 9-12 months)

- At this stage food should be minced or chopped meals plus milk. A baby can also have fruit or other healthy snacks in between meals.
- Solids should be offered at three mealtimes each day and a baby should be learning to fit in with the family.
- Give harder finger foods, e.g. raw vegetables.
- It is important that by this age a baby is having a wide variety of foods. To ensure a baby is having a balanced diet it is important to include foods from each of these groups daily.

Meat and alternatives

*Meat, poultry, fish - white or tinned, eggs, pulses, beans, nuts (smooth/finely ground, TVP, soya products)

Bread and cereals

Bread, rice, potato, cereals, pasta, chapatti

Fruit and vegetables

Apples, bananas, pears, carrots, cauliflower, tomato, broccoli

Milk and milk products

Milk, cheese, yoghurt, fromage frais

*Unless advised otherwise.

HEALTHY EATING AND MENU PLANNING FOR 1-5 YEAR OLDS

General Healthy Eating Recommendations

Children should be encouraged to eat a varied diet. They should eat foods from each of the four main food groups every day. The four main food groups are:

- Starchy foods such as bread, potatoes, rice, pasta and cereals
- Fruit and vegetables
- Milk and dairy foods
- Beans, pulses, fish, eggs, meat and other proteins

A varied diet is associated with better health as it is more likely to contain all the nutrients the body needs.

Fruit and vegetables are particularly important for good health. Under 5's should be encouraged to eat 5 child-sized portions of fruit and vegetables a day. Aim for each full day's menu to offer 1-2 types of fruit and 2-3 types of vegetables, this can include fresh, frozen, stewed or canned fruit in natural juice: for example, half an apple; two portions of vegetables (such as peas, carrots or tomatoes); a glass of fruit juice (diluted, and preferably served with a meal); and a small banana or a helping of dried fruit (e.g. raisins). Children in full day care should have the opportunity to try 4-5 different fruits and vegetables/day. Offer fruits and/or vegetables at meals and snacks. As a guide a portion size of fruit or vegetable for a child is about the size of their clenched fist. Hence the portion size needed gets bigger as they grow and their fist grows.

Vitamin C is important in maintaining good health and has a role in helping the body to absorb iron if both nutrients are present in the same meal. Under 5's should be encouraged to eat foods containing vitamin C – for example most fruit and fruit juices, potatoes, broccoli and other green vegetables, tomatoes and peppers. Eating five portions of fruit and vegetables a day (see recommendation above) will ensure an adequate vitamin C intake.

Vitamin D is needed for healthy bones and teeth. To help ensure an adequate vitamin D intake, it is recommended that a low fat spread fortified with vitamin D for baking and as a fat spread is used. An **oil rich fish**, high in vitamin D should be on the menu at least twice every three weeks e.g. mackerel, pilchards, salmon, sardines, herring.

It is recommended that children up to their 4th birthday should receive **Healthy Start vitamin drops** containing vitamins A, C and D. These can be bought at local Health Clinics or some families are entitled to free Healthy Start Vitamins if on certain benefits. Families with babies who receive certain benefits can also get free vouchers for healthy foods e.g. fruit, vegetables, milk (for more information see the Healthy Start Section).

The **iron** intake of children under 5 is lower than currently recommended and there is evidence to suggest that low iron status is common in this age group. Under 5's should therefore eat a diet that is high in iron-rich food such as meat, offal (liver, kidney) poultry and oily fish, as well as fruits and vegetables. (Meat and meat dishes are also a good source of **zinc**). Children who do not eat meat should have a varied diet containing foods such as cereals, pulses (peas, beans and lentils), vegetables and fruits.

Whole or full fat cow's **milk** is suitable as a main drink for children between the ages of 1-2 years. Semi skimmed milk can be introduced gradually after age 2 as long as the child eats a varied diet. Skimmed milk is not suitable for under 5's. Milk is a good source of calcium along with milk products e.g. yoghurt, cheese. These foods should be offered at 2-3 meals and snacks each day.

The intakes of the type of **sugars** in the diet which most contribute to tooth decay are higher than recommended among the under 5's. If children have sugary foods, these should be given with meals rather than as snacks between meals. Children do not need sugary foods such as sweets,

chocolate, soft drinks or honey for energy. Starchy foods such as potatoes, bread, rice, pasta and yam are better sources of energy as these foods contain other important nutrients too.

There is evidence that the diets of under 5's are too high in **salt** (or sodium). Salt should not be added to the diet of under 5's either in cooking or at the table. Children who regularly eat foods which are high in salt e.g. salted savoury snacks, processed and tinned foods are probably getting more salt than they need.

It is important that the under 5's get enough **energy** (calories) for growth and development. While adults and children aged over 5 are encouraged to eat a diet that is high in starchy foods and low in fat, younger children on this sort of diet may not have the appetite to eat enough food to provide all the nutrients they need.

Children should be encouraged to drink **water** if they are thirsty. Water quenches thirst and does not spoil the appetite and does not damage teeth.

Summary of the four food groups and the nutrients they provide

The table below gives an overview of the four food groups.

Food groups	Examples of food included	Main nutrients provided	Recommended servings	Typical portion sizes as served
Starchy foods	Bread, potatoes and sweet potatoes, starchy root vegetables, pasta, noodles, rice, other grains, breakfast cereals	Carbohydrate, fibre, B vitamins and iron	Four portions each day Provide a portion as part of each meal (breakfast, lunch and tea) and provide as part of at least one snack each day	1 or 1½ small slices or 1 large slice bread (20 – 30g) ½ - 1 muffin, bread roll or pitta bread or 1 mini version (25 – 50g) 2-4 mini breadsticks (8-10g), 1-2 crackers (8-16g) or 1-2 oatcakes (10-20g) 1 small baked or 1-2 boiled potatoes (80-100g) 2-3 tablespoons mashed potato (80-100g) 1 small baked root vegetable (80-100g) 2-3 tablespoons mashed, diced starchy vegetable (80-100g) 3-4 tablespoons pasta or noodle (80-100g) 2-3 tablespoons rice (80-100g) 2-3 tablespoons grains (80-100g) 3-5 tablespoons breakfast cereals (20-30g) 1 to 1½ wheat biscuits (20 – 30g) 1/3–1/2 bowl of porridge made with milk (100-110g)

Fruit and vegetables	Fresh, frozen, canned, dried and juiced fruit and vegetables and pulses	Carotenes (a form of vitamin A), vitamin C, zinc, iron and fibre	Five portions each day Provide a portion as part of each main meal (breakfast, lunch and tea) and with some snacks	1-2 tablespoons cooked vegetables (40g) Small bowl vegetable soup (150g) 4-6 raw vegetable sticks (40g) ½ -1 tablespoons pulses (40g) ½ large piece of fruit such as half an apple or pear (40g) 2-3 small fruits e.g. apricots (40g) 1-2 tablespoons berries e.g. raspberries (40g) 1-2 tablespoons of canned fruit in natural juice (40 – 65g) 1-2 tablespoons stewed fruit (40g) ½-1 tablespoons or 2-5 pieces dried fruit (15g-30g) Unsweetened fruit juice, diluted half juice and half water (100ml = 50ml juice and 50ml water)
Beans, pulses, fish, eggs, meat and other proteins	Meat, poultry, fish, shellfish, eggs, meat alternatives, pulses, nuts	Protein, iron, zinc, omega 3 fatty acids, vitamins A and D	Two portions each day Provide a portion as part of lunch and tea (Two to three portions for vegetarian children)	Meat and poultry served by itself: 1 slice or 1-2 tablespoons chopped meat (30-40g) Meat and poultry in sauces and stews: 2-3 tablespoons (90g-120g) Fish served by itself: 1 slice or ½ fillet or 1-2 tablespoons (30-40g) Fish in sauces and stews: 2-3 tablespoons (90g-120g) Prawns served by themselves: 1-2 tablespoons (30-40g) Eggs served by themselves: 1 egg (50g) Meat alternatives served by themselves: 1-2 tablespoons (30-50g) Meat alternatives in sauces and stews: 2-3 tablespoons (90-120g) Pulses served by themselves: 1-2 tablespoons (30-50g) Pulses in sauces and stews: 2-3 tablespoons (90-120g) Ground nuts/peanuts served by themselves: 1-2 tablespoons (30g-50g)
Dairy and alternatives	Milk, cheese, yoghurt, fromage frais, custard, puddings made from milk	Protein, calcium and vitamin A	Three portions each day provided as part of meals, snacks and drinks	Milk drinks ½ cup (100ml – 150ml) Hard cheese: 1-2 tablespoons grated 15-20g) Soft Cheese: (20-25g) Yoghurt and fromage frais: Small pot (60g) or ½ large individual pot (half of 125-140g), or 1-2 tablespoons (50-75g) Unsweetened yoghurt drinks (60g) Custard: 3-4 tablespoons (50-75g) Rice pudding: 3-4 tablespoons (70-90g) Semolina: 3-4 tablespoons (85-110g)

Meals

Breakfasts

- A variety of breakfast cereals can be offered. It is a good opportunity for children to take milk and fortified breakfasts are a valuable source of vitamins and minerals. Avoid sugary breakfast cereals.
- A variety of bread e.g. wholemeal, granary, white toast, teacakes and muffins should be offered with a thin scrape of margarine.
- All children should be encouraged to have breakfast. Parents and childcare providers need to work together to ensure children have a breakfast either at home or when they arrive at childcare.

Examples of breakfasts meeting the food and drink guidelines using average portion sizes for children aged one to five years



Cornflakes (25g) with whole milk (100ml) and raisins (25g) with half a toasted Crumpet and spread and a cup of water



A slice of malt loaf (35g) and spread and a plain full fat yoghurt (60g) with a cup of diluted apple juice (100ml) 1:10



Wheat biscuits (25g) and whole milk (100ml) with half toasted teacake and spread and mixed berries (40g) with a cup of water



A hardboiled egg and one slice of wholemeal bread with spread with quarter of a pear and a cup of whole milk (100ml)



Rice krispies (25g) with whole milk (100ml) and dried apricots (25g) and half a banana with a cup of water

Main Meals

- Main meals should be freshly prepared.
- A main meal should always contain a protein source. A variety of protein foods e.g. meat, fish, eggs, cheese or pulses should be offered on the cycle of menus. All types of meat e.g. beef, lamb, pork, chicken, turkey, fish including white fish and oil-rich fish should be served. Pulses could include baked beans, lentils, butter beans and kidney beans. For vegetarian children meat alternatives can be used e.g. soya mince, textured vegetable protein, quorn and tofu.
- Avoid processed meat products which are high in fat and salt, such as crumb coated chicken products, burgers, pies and canned meats.
- Good quality sausages (80% meat content) can be served no more than once a week in the whole cycle of menus.
- Serve processed fish products e.g. fish fingers or fish bites no more than once a week in the whole cycle of menus.
- If using canned pulses, look for varieties with no added salt and sugar. Choose lower salt and lower sugar baked beans.
- Meat alternatives e.g. soya mince, textured vegetable protein, quorn or tofu can be used. Processed products made from meat alternatives (e.g. vegetarian sausages, burgers and pies) can be high in fat or salt and should only be served no more than once a week.
- A variety of starchy food e.g. potatoes - boiled, jacket or creamed, rice, pasta, noodles, couscous, chapatti or bread should be served as part of every meal. Oven cooked potato foods e.g. alphabites and smiley faces, as well as dried or canned ready prepared pasta in sauce and flavoured rice in packets should be avoided.
- Fresh or frozen vegetables or salad should be offered every day at main meals.

N.B. Spaghetti in tomato sauce/baked beans are not vegetables. Avoid vegetables canned with added salt and sugar. Do not overcook fresh vegetables or cut them up a long time before cooking and leave them in water, or cook them early and re-heat before serving.

- Lean red meat (e.g. beef, lamb, and pork) as well as offal* (e.g. liver and kidney) are excellent sources of iron and should be offered at least twice a week as a main meal. Poultry, tinned fish e.g. sardines and tuna as well as eggs, dark green vegetables, beans, breakfast cereals and pulses are also good sources of iron. Vitamin C containing foods e.g. fruit and vegetables help iron to be absorbed.

*Where possible include offal at least once during a three weekly cycle of menus (but not more than once a week).

- If children do not eat meat or fish they should be encouraged to eat a varied diet containing foods such as cereals, pulses, peas, beans, lentils, fruit & vegetables to ensure they eat adequate iron.

Ideas for main meals

- Shepherd's pie and vegetables (could include finely chopped liver or kidney)
- Tuna, bean and sweetcorn pasta
- Mild chicken and vegetable or meat and lentil/ vegetable curry and rice
- Ham and pasta carbonara and vegetables
- Homemade salmon fish cakes and vegetables
- Vegetable or meat lasagne with small quantity of chopped cucumber/tomato
- Homemade beef/ lamb burgers in tomato sauce, vegetables and pasta/potatoes
- Fish pie (try to include oily fish such as mackerel, sardines, pilchards) and peas
- Homemade vegetable soup with lentils (for protein)
- Mild chilli con carne, rice or potato wedges and small quantity of salad
- Homemade pizza (try adding vegetable toppings), salad and jacket potatoes
- Chicken pasta bake with vegetables
- Savoury mince, mashed potatoes and mixed vegetables
- Roast meat, roast potatoes and vegetables
- Homemade sweet and sour chicken with egg noodles and vegetables
- Hot pot/casserole (try pork or lamb) and vegetables
- Braised liver and onions, mashed potatoes and vegetables
- Sausage, mashed potato or pasta and vegetables
- Salmon and broccoli pasta with vegetables
- Savoury omelette/quiche with new potatoes and salad

Also see sample menus at the end of this section.



Main course:

Beef bolognese (110g)
with white spaghetti (90g).

Drink: Glass of water (100ml).



Main course:

Chickpea and vegetable curry (120g)
with brown rice (90g).

Drink: Glass of water (100ml).



Main course:

Salmon and broccoli pasta (200g)
with sweetcorn (40g).

Drink: Glass of diluted orange juice
(100ml), half juice and half water



Dessert: Carrot cake (50g).

Drink: Glass of water (100ml).



Dessert: Raspberry purée (40g)
and fromage frais (60g).

Drink: Glass of water (100ml).



Dessert: Eve's pudding and
custard (60g).

Drink: Glass of diluted orange juice
(100ml, half juice and half water).

- Fruit, fresh, frozen, stewed or tinned in natural juice should be offered alone or as part of a main meal dish, 2-3 times per week e.g. in crumbles, fruit with custard.
- Milk based desserts and toppings should be offered most days e.g. custard, natural yoghurt or fromage frais with added fresh fruit, rice pudding (try this with fresh or dried fruit), blancmange, milk jelly, semolina.
- Avoid yoghurts and fromage frais with a high sugar content, the sugar content should not be higher than 15g sugar per 100g.

Light Tea

A variety of dishes should be offered so that children attending every day may receive different foods such as:

- Sandwiches made with different breads and savoury fillings e.g. cooked meat, cheese spread, egg, tinned fish. Serve with vegetables/salad e.g. carrot sticks, celery sticks, cherry tomatoes.
- Toast with toppings e.g. baked beans (lower sugar and salt), sardines, egg, and cheese.
- Jacket potato with toppings e.g. cheese, tuna fish.
- Home made pasta dishes e.g. macaroni cheese.
- Try serving vegetables/salad e.g. celery sticks, carrot sticks, peppers, cherry tomatoes with the meal. These are good finger foods for young children.
- Afters could be fresh fruit, yoghurt, fromage frais, milk pudding with dried fruit, fruit flan.



Main course:
Chicken and vegetable couscous salad (150g).

Drink: Glass of water (100ml)



Main course:
Savoury omelette (70g) with potato salad (90g) and cucumber sticks (40g).

Drink: Glass of water (100ml).



Main course:
Tuna and sweetcorn wholemeal pasta (150g) with red pepper sticks (40g).

Drink: Glass of water (100ml).



Dessert:
Rice pudding (75g) with sultanas (25g).

Drink: Glass of water (100ml).



Dessert:
Crunchy summer crumble (60g) with yoghurt (60g).

Drink: Glass of water (100ml).



Dessert:
Blueberry muffin (50g).

Drink: Glass of water (100ml).

Seven Steps for Planning Healthy Meals, Snacks and Drinks

Planning menus ahead will ensure that the best food choices are made and that meals are varied. When choosing meals to include in menus, remember that:



Step 1. Plan menus for all the meals and snacks you provide for children.

This will help you to check that food and drink provision across the day is balanced and includes variety and also helps planning for shopping and food preparation.



Step 2. Plan menus lasting for at least 2-3 weeks.

In practice a menu that covers between 2-3 weeks will give children lots of variety. Try to make sure that children who attend your setting on the same day each week are not always provided with the same meal.



Step 3. Plan each meal and snack menus to meet the food and drink guidelines in this guide.

This means that children attending your setting for sessional care or who move between different settings will still meet their nutritional requirements overall.



Step 4. Plan menus to include a variety of foods, tastes, textures and colours. This will give children opportunity to try a wide range of foods and makes meals and snacks colourful and tasty. Some finger foods as well as foods which require cutlery allow variation at meal times.



Step 5. Make sure that you cater for all the cultural and dietary needs of all the children in your care.

You can also plan your menus to enable children to experience food from different cultures.



Step 6. Introduce new menu cycles at least twice a year.

This could be seasonal such as spring/summer and autumn/winter menus and will give children the chance to try different foods.



Step 7. Share menus for meals and snacks with parents.

This can help parents to balance meals and snacks with the food that they provide at home. For example if children are having a light meal at tea-time and you expect them to eat again at home, make sure that parents are aware of this.

Spring / summer menu for early year settings

This spring / summer one week menu meets the food and guidelines and the average energy and nutrient requirements for children aged one to five.

Meal	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast Planned to provide 20% of a child's daily energy and nutritional requirements	Cornflakes with whole milk and raisins Toasted crumpet and spread Water	Pear and hard boiled egg with wholemeal bread and spread Whole milk	Rice krispies and whole milk with dried apricots and banana Water	Plain yoghurt with malt loaf and spread Diluted	Wheat biscuits with whole milk and mixed berries Toasted teacake and spread Water
Mid-morning snack Planned to provide 20% of a child's daily energy and nutritional requirements	Rice cakes and banana Water	Toasted muffin with spread and melon Water	Toasted bagels and spread with strawberries Whole milk	Wholemeal toast and spread with apple and grapes Water	Sugar snap peas and houmous Water
Lunch Planned to provide 30% of a child's daily energy and nutritional requirements	Beef bolognese or Vegetarian bolognese (v) With white spaghetti Carrot cake Water	Chickpea and vegetable curry (v) With brown rice Raspberry puree with fromage frais Water	Pork and apple casserole or mixed bean casserole (v) With new potatoes and carrots Pineapple upside down pudding with custard Water	Lamb burger or bean burger (v) with homemade tomato sauce, potato wedges and garden peas Banana buns Water	Salmon and broccoli pasta or broccoli and lentil pasta (v) with sweetcorn Eve's pudding with custard Diluted orange
Mid-afternoon snack Planned to provide 10% of a child's daily energy and nutritional requirements	Strawberries and plain yoghurt Water	Breadsticks with mozzarella balls and cherry tomatoes Whole milk	White bread and spread with grapes Water	Pitta bread with tzatziki and carrot sticks Water	Sliced peach with fromage frais and rice cakes Water
Tea Planned to provide 20% of a child's energy and nutritional requirements	Beef and vegetable enchiladas or bean and vegetable enchiladas (v) Fresh fruit platter Water	Ratatouille with mozzarella cheese and a jacket potato Ginger biscuits with sliced apple Water	Tuna sweetcorn wholemeal pasta or chickpea and sweetcorn wholemeal pasta (v) Blueberry muffin Water	Chicken and vegetable couscous salad or Quorn™ and vegetable couscous salad Rice pudding with sultanas Water	Savoury omelette With potato salad and cucumber Crunchy summer crumble with yoghurt Water

Autumn / winter menu for early year settings

This Autumn / winter one week menu meets the food and guidelines and the average energy and nutrient requirements for children aged one to five.

Meal	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast Planned to provide 20% of a child's daily nutritional requirements	Cornflakes with whole milk and raisins Toasted crumpet and spread Water	Pear and hard boiled egg with wholemeal bread and spread Whole milk	Rice krispies and whole milk with dried apricots and banana Water	Plain yoghurt with malt loaf and spread Diluted	Wheat biscuits with whole milk and mixed berries Toasted teacake and spread Water
Mid-morning snack Planned to provide 20% of a child's daily nutritional requirements	Rice cakes and banana Water	Toasted muffin with spread and melon Water	Toasted bagels and spread with strawberries Whole milk	Wholemeal toast and spread with apple and grapes Water	Sugar snap peas and houmous Water
Lunch Planned to provide 30% of a child's daily nutritional requirements	Beef bolognese or Vegetarian bolognese (v) With white spaghetti Carrot cake Water	Chickpea and vegetable curry (v) With brown rice Raspberry puree with fromage frais Water	Pork and apple casserole or mixed bean casserole (v) With new potatoes and carrots Pineapple upside down pudding with custard Water	Lamb burger or bean burger (v) with homemade tomato sauce, potato wedges and garden peas Banana buns Water	Salmon and broccoli pasta or broccoli and lentil pasta (v) with sweetcorn Eve's pudding with custard Diluted orange
Mid-afternoon snack Planned to provide 10% of a child's daily nutritional requirements	Strawberries and plain yoghurt Water	Breadsticks with mozzarella balls and cherry tomatoes Whole milk	White bread and spread with grapes Water	Pitta bread with tzatziki and carrot sticks Water	Sliced peach with fromage frais and rice cakes Water
Tea Planned to provide 20% of a child's nutritional requirements	Beef and vegetable enchiladas or bean and vegetable enchiladas (v) Fresh fruit platter Water	Ratatouille with mozzarella cheese and a jacket potato Ginger biscuits with sliced apple Water	Tuna sweetcorn wholemeal pasta or chickpea and sweetcorn wholemeal pasta (v) Blueberry muffin Water	Chicken and vegetable couscous salad or Quorn TM and vegetable couscous salad Rice pudding with sultanas Water	Savoury omelette With potato salad and cucumber Crunchy summer crumble with yoghurt Water

Note: The Autumn/winter menu has been developed using estimated average requirements (EAR) for energy, and the nutrient-based standards for fat, saturated fat, carbohydrate and non-milk extrinsic sugars based on this EAR, as specified by COMA¹ not the 2011 Dietary Recommendations for Energy published by SACN.²

SNACKS AND DRINKS

Mid-morning/afternoon snacks

The intake of the type of sugars in the diet which contribute to tooth decay are higher than recommended in under 5's. It is important to reduce both the frequency and total amount of sugar eaten. Therefore snacks in between meals should be sugar free.

Food Group	Food and drink guidelines for snacks
Starchy foods	<ul style="list-style-type: none"> ✓ Provide a starchy food as part of at least one snack each day. ✓ Provide at least three different varieties of starchy food across snacks each week. ✓ Choose bread n bread products with a low salt content where possible.
Fruit and vegetables	<ul style="list-style-type: none"> ✓ Provide fruit or vegetables as part of some snacks. ✓ Provide a variety of fruit and vegetables across the day, and each week. ✓ Dried fruit should not be provided as part of snacks.
Beans, pulses, fish, eggs, meat and other proteins	<ul style="list-style-type: none"> ✚ Foods from this group provide a useful source of iron and zinc and can be provided as part of snacks once or twice each week.
Dairy and alternatives	Children should have three portions of milk and dairy foods each day (including those provided at home); a portion of milk or dairy food can be provided at snack time.



Sugar snap peas (40g) and houmous (40g) with a cup of water (100ml).



Tomato (40g) and full fat mozzarella cheese (17g) with low salt breadsticks (7g) and a cup of whole milk (100ml).



Banana (40g) and rice cakes (16g) with a cup of water (100ml).



Peach (40g) and full fat fromage frais (60g) With 2 rice cakes (16g) and a cup of water (100ml).



Melon (40g) and half a toasted muffin (30g) with spread (4g) and a cup of water (100ml).

More ideas for sugar free snacks include: Small sandwiches with fillings e.g. ham, cheese, tinned fish, fresh fruit, crackers with soft cheese, toast, vegetables e.g. slices of carrot, peppers, cucumber, crumpet, breadsticks, melba toast, homemade potato wedges, crispbreads and savoury scones.

- Milk is an excellent drink for pre-school children and should be offered at least once, ideally twice per day as a drink (it is a good drink at snack time; it does not cause dental caries (decay)). Full fat milk should be served to all under two's including in cooking. Over two's can use semi-skimmed milk as long as they eat a good variety of foods at regular meals.
- Water is an ideal drink. Milk and water are the best drinks for teeth.
- Diluted pure fruit juice (particularly citrus fruit) is a useful source of vitamin C and is a good drink **at mealtimes** as it helps the body to absorb iron. Pure fruit juice should be diluted 1:10 for children under 12 months. For children aged 1 – 5 this can be diluted 50:50 when served at mealtimes.
- Diluted sugar free squash is not recommended.
- If a child uses a dummy or comforter, it should never be dipped into sugar or sugary drinks, as this can contribute to tooth decay. Dummies should be used appropriately to ensure speech development is not affected. (See Oral Health section.)
- Some soft drinks (including flavoured water), which claim to have 'no added sugar', still contain sugars which are harmful to the teeth. Diet drinks, both fizzy and still are also harmful. This is because they may be acidic and erode the dental enamel, especially if sipped frequently. The use of these drinks should be avoided.
- Avoid milk drinks with added sugar or milkshake powders/syrups. If milkshakes are made they should contain only milk and fresh fruit, and no added sugar. Ideally these drinks should be given at mealtimes only.
- Tea/coffee interferes with iron absorption and should also be avoided. They are not suitable for under 5's.

Regular Drinking

- Children must have access to drinking water throughout the day and be encouraged to help themselves to water.
- Children need to drink regularly to replace the fluids they lose in energetic activities and play, and to make sure they do not become dehydrated.

How to Read Food Labels

- When planning meals and snacks it is a good idea to look at the ingredients list and the nutritional information on product labels. This will help you to choose products which are lower in saturated fat, sugar and salt.
- Nutrition labels are often displayed as a panel or grid on the packaging, but may sometimes appear simply as text.
- The label usually includes information on energy (calories), protein, carbohydrate and fat. It may also provide additional information on saturated fat, sugar, fibre, sodium and salt.
- Nutrition information is normally given per 100 grams (100g) of the product, and sometimes per portion (such as 'one slice').
- Remember that the portion size given on the product label may not be appropriate for young children. The portion size will affect how much fat, saturated fat, sugar and salt a child will consume.

How do I know if a food is high in fat, saturated fat, sugar or salt?

- The Department of Health has produced guidelines to help all of us compare the fat, saturated fat, sugar and salt content of food. Try to choose products which are low or medium in saturated fat, sugar and low in salt (sodium), and limit those that are high.

Guidelines for fat, saturated fat, salt and sugar per 100 g			
Nutrient	What is Low per 100g?	What is Medium per 100g?	What is High per 100g
Fat	3.0g or less	3.1 – 17.5g	More than 17.5g
Saturated fat	1.5g or less	1.6 – 5g	More than 5g
Sugar	5.0g or less	5.1 – 22.5g	More than 22.5g
Salt	0.3g or less	0.3 – 1.5g	More than 1.5g
Sodium	0.1g or less	0.1 – 0.6 g	More than 0.6g

Using food labels to identify baked beans lower in salt and sugar

<p>Brand 1 Baked beans</p> <p>Nutritional information</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #f2f2f2;">Typical values</th> <th style="background-color: #f2f2f2;">Per 100g</th> </tr> </thead> <tbody> <tr> <td style="background-color: #f2f2f2;">Energy</td> <td style="background-color: #f2f2f2;">355 kJ 84 kcal</td> </tr> <tr> <td style="background-color: #f2f2f2;">Protein</td> <td style="background-color: #f2f2f2;">5.2g</td> </tr> <tr> <td style="background-color: #f2f2f2;">Carbohydrate</td> <td style="background-color: #f2f2f2;">15.3g</td> </tr> <tr> <td style="background-color: #fff2cc;">of which sugars</td> <td style="background-color: #fff2cc;">5.9g</td> </tr> <tr> <td style="background-color: #f2f2f2;">Fat</td> <td style="background-color: #f2f2f2;">0.6g</td> </tr> <tr> <td style="background-color: #f2f2f2;">of which saturates</td> <td style="background-color: #f2f2f2;">0.1g</td> </tr> <tr> <td style="background-color: #f2f2f2;">Fibre</td> <td style="background-color: #f2f2f2;">3.7g</td> </tr> <tr> <td style="background-color: #fff2cc;">Sodium</td> <td style="background-color: #fff2cc;">530mg</td> </tr> <tr> <td style="background-color: #f2f2f2;">Equivalent as salt</td> <td style="background-color: #f2f2f2;">1.3g</td> </tr> </tbody> </table>	Typical values	Per 100g	Energy	355 kJ 84 kcal	Protein	5.2g	Carbohydrate	15.3g	of which sugars	5.9g	Fat	0.6g	of which saturates	0.1g	Fibre	3.7g	Sodium	530mg	Equivalent as salt	1.3g	<p>Brand 2 Reduced salt and sugar baked beans</p> <p>Nutritional information</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #f2f2f2;">Typical values</th> <th style="background-color: #f2f2f2;">Per 100g</th> </tr> </thead> <tbody> <tr> <td style="background-color: #f2f2f2;">Energy</td> <td style="background-color: #f2f2f2;">311 kJ 73 kcal</td> </tr> <tr> <td style="background-color: #f2f2f2;">Protein</td> <td style="background-color: #f2f2f2;">5.4g</td> </tr> <tr> <td style="background-color: #f2f2f2;">Carbohydrate</td> <td style="background-color: #f2f2f2;">12.5g</td> </tr> <tr> <td style="background-color: #d9ead3;">of which sugars</td> <td style="background-color: #d9ead3;">2.5g</td> </tr> <tr> <td style="background-color: #f2f2f2;">Fat</td> <td style="background-color: #f2f2f2;">0.6g</td> </tr> <tr> <td style="background-color: #f2f2f2;">of which saturates</td> <td style="background-color: #f2f2f2;">0.1g</td> </tr> <tr> <td style="background-color: #f2f2f2;">Fibre</td> <td style="background-color: #f2f2f2;">3.8g</td> </tr> <tr> <td style="background-color: #fff2cc;">Sodium</td> <td style="background-color: #fff2cc;">330mg</td> </tr> <tr> <td style="background-color: #f2f2f2;">Equivalent as salt</td> <td style="background-color: #f2f2f2;">0.8g</td> </tr> </tbody> </table>	Typical values	Per 100g	Energy	311 kJ 73 kcal	Protein	5.4g	Carbohydrate	12.5g	of which sugars	2.5g	Fat	0.6g	of which saturates	0.1g	Fibre	3.8g	Sodium	330mg	Equivalent as salt	0.8g
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Brand 2 baked beans contain less sugar and less sodium/salt than brand 1, and are therefore a better choice than brand 1.

Birthdays

Birthdays should ideally not be celebrated with sugary foods. If birthday cakes are given these should be served at a mealtime, or sent home with parents.

The childcare provider should be discouraging parents from bringing edible birthday treats from home for their children to share. In the past sweets, lollies or chocolates may have been provided by parents for children to celebrate their birthday. Other ways of celebrating a child's birthday should be considered instead.

As part of the criteria for this award, the childcare provider must provide evidence to show that they are actively discouraging edible birthday treats being brought in from home.

When children are rewarded in a childcare setting, staff could use non-edible rewards such as stickers, pencils etc. or praise the child.

Example of letter to parents:

Dear Parent/Carer,

In the past you may have provided sugary foods e.g. sweets, lollies or chocolates for your child to celebrate their birthday. We are now discouraging these types of foods from being brought into this childcare setting. Alternative options could be for you to bring along a book so that the children can enjoy a story together. Maybe bring a packet of flower or plant seeds so that the children can watch something grow together or bring along crayons or stickers.

We are currently working with local health services including Tameside's Children's Nutrition Team and the Oral Health Improvement Team to promote sugar-free snacks and treats because of the risk of children becoming overweight and because of the damage sugar causes to teeth.

Your co-operation in this matter is very much appreciated and any suitable, alternative ideas for birthday treats will be gratefully received.

Yours faithfully,

Name

OTHER CONSIDERATIONS

Creating the Right Atmosphere and Encouraging Social Skills

Meals can be times of pleasant social sharing. It is good practice for carers to sit with children during meals and snacks. It is important that what the carer eats and drinks, provides a good role model for healthy eating.

Mealtimes offer an opportunity to extend children's social and language skills. Children can learn from the carer about table manners, and can practise their speaking and listening skills. To encourage this, distractions such as television are best avoided during mealtimes.

Children aged 2-5 years should be allowed to serve themselves during meals as this may encourage them to try different kinds of food. Finger foods of all kinds should be offered, particularly fruit and vegetables, this will encourage children under 2 years of age to feed themselves and try new foods. Child-sized utensils, crockery, tables and chairs may also make it easier for children to serve themselves and learn to eat independently.

Children should be encouraged to choose the food they are going to eat themselves and to try new food. If a child refuses a food or meal, the carer should gently encourage them to eat, but children should never be forced to eat. To minimise food refusal, it is important to ensure that a variety of foods are offered.

Some children may eat slowly. It is important to ensure that all children have enough time to eat.

Learning through Food

Food can be used in a variety of educational ways, for example to teach children about food sources, nutrition, health, the seasons, growing cycles and other people's ways of life. Learning how to choose and enjoy many different nutritious foods in early childhood can provide the foundation for a lifetime of wise food choices.

Carers should involve children in preparing food and setting and clearing tables.

Holidays, festivals and religious occasions provide a valuable opportunity for children to learn about special events and different cultures and the variety of foods associated with these events.

Involving Parents and Guardians

A real partnership between parents or guardians and carers should be encouraged.

Childcare providers should give parents or guardians clear information each day about what food has been eaten and if their child has eaten well. Even older children may not be accurate in reporting what they have eaten.

Childcare providers should ask parents or guardians about any special dietary requirements their child has before the child starts attending the childcare setting.

Vegetarian diets

Vegetarians do not eat meat, or meat products such as lard or stock and may not eat fish.

Vegetarian diets can be divided into three main types:

- lacto-ovo vegetarians eat both dairy products and eggs. This is the most common type of vegetarian diet
- lacto-vegetarians eat dairy products but not eggs
- vegans do not eat dairy products, eggs, or any other animal product, including honey. If children in your setting are following a vegan diet, seek specific advice from a dietitian. You may need to ask families to provide appropriate foods. Vegetarian meals and snacks are suitable for all children. It is important that meals for vegetarian children are planned so that they have a wide range of foods to meet their nutritional needs.
- All lunches and teas provided for vegetarian children should include a portion of meat alternative such as soya, tofu, textured vegetable protein or Quorn™, eggs, pulses or nuts* to provide protein and minerals such as iron and zinc.
- Include a variety of different protein sources across each week for example meat alternatives can be used once or twice, pulses and beans two to three times, and eggs and cheese, once or twice per week.
- To ensure that young children who are vegetarian have sufficient iron and zinc, provide meals and snacks containing good sources of these nutrients. Iron from plant sources is less well absorbed than iron from eat and fish, but there are many good vegetarian sources such as peas, beans, lentils, nuts, soya products, wholegrain cereal foods, dried fruit, green leafy vegetables, and fortified breakfast cereals. Vitamin C helps to increase the amount of iron absorbed from vegetables and cereals. Make sure you provide vegetables and/or fruit with meals to help to increase the absorption of iron.

It is important that food provided for vegetarian children is of a similar appearance and texture to the food given to other children.

Cultural and religious diets

Many early years settings in England have a diverse population, with children attending from different ethnic and religious groups. You will need to consider the dietary needs of all of the children attending your setting, and talk to families to make sure you can cater for them wherever possible. Even if there are no children from minority ethnic or religious groups attending, it is still important to introduce all children to a variety of foods and so they can learn to appreciate the diets of different cultures.

Many of the meals and snacks that are suggested in this guide are suitable for all children. Using the guidelines will help you to provide healthy food for all children, regardless of their culture or religion. Families and children from minority ethnic or religious communities may follow specific dietary habits and customs, and may exclude or prepare food in a particular way according to their religious or cultural beliefs. These will vary not only according to their religion, but also their culture and background. Families may need your support to make sure they have a varied diet that provides all the nutrients their children need.

When you are designing menus for children who are following cultural and religious diets, try to make sure that the food you provide looks as similar as possible to the dishes being served to other children. This will avoid identifying individual child as 'different'.

The table on page 27 summarises some of the dietary practices that people of different religions may follow but is not a definitive list, and within each there may be some differences. Use this information to help you plan appropriate menus, but talk to families to make sure your menu is appropriate for their child.

Food customs of different religions and cultural groups

Food	Jewish	Hindu*	Sikh*	Muslim	Buddhist	Rastafarian**
Eggs 	No blood spots	It varies	It varies	Yes	It varies	It varies
Milk/yoghurt 	Not with meat	Yes	Yes	Yes	Yes	It varies
Cheese 	Not with meat	It varies	It varies	It varies	Yes	It varies
Chicken 	Kosher only	It varies	It varies	Halal only	No	It varies
Mutton/lamb 	Kosher only	It varies	It varies	Halal only	No	It varies
Beef/beef products 	Kosher only	No	No	Halal only	No	It varies
Pork/pork products 	No	No	Rarely	No	No	No
Fish 	Fish with fins and scales only	Fish with fins and scales only	It varies	It varies	It varies	No
Shellfish 	No	It varies	It varies	It varies	No	No
Butter/ghee 	Kosher only	It varies	It varies	It varies	No	It varies
Lard 	No	No	No	No	No	No
Cereal foods 	Yes	Yes	Yes	Yes	Yes	Yes
Nuts/pulses 	Yes	Yes	Yes	Yes	Yes	Yes
Fruit and vegetables 	Yes	Yes	Yes	Yes	Yes	Yes

'It varies' means that some people within a religious group would find these foods acceptable

*Strict Hindus and Sikhs will not eat eggs, meat, fish and some fats.

**Some Rastafarians are vegans

FUSSY EATING

Food refusal and faddy eating is very common in under fives. Young children can be very wary about trying new foods and may reject food on sight without even tasting it. Parents often worry about faddy eating but they should be reassured this is most frequently normal behaviour and is a sign a young child is becoming more independent. For the majority of children, the faddy eating phase will be short lived.

Where there is a prolonged problem, particularly if there is concern about a child's weight, parents/carers should be advised to contact their child's Health Visitor or GP.

Faddy eating is more likely in the following situations:

- Children who have not been offered a wide variety of tastes and textures.
- Children who are drinking frequently – some young children prefer drinking to eating and may fill themselves up with drinks. This can be more of a problem in children who are having drinks from a bottle or frequently drinking during the night.
- Children who are offered lots of snacks / drinks between meals which are often high in fat and/or sugar meaning that the child is not hungry at mealtimes.
- Children who are not in a routine with meals and snacks.
- Children who never eat together as a family at home.

Useful tips/strategies:

- Offer a variety of foods at meal and snack time.
- Offer small helpings initially. Extra portions can be offered if required.
- A consistent approach is important.
- Praise should be given, even if the smallest amount of food is eaten.
- Start with foods known to be well accepted.
- Do not offer foods as a reward. Use rewards other than foods e.g. stickers.
- Do not refer to foods as good or bad.
- Involve children in preparing and cooking foods where appropriate.
- Discourage distractions at mealtimes, for example toys.
- Ensure children are not filling up on excessive drinks.
- Encourage children to feed themselves.
- Do not coax or force a child to eat.
- Take away uneaten food without comment at the end of a meal.
- Still offer dessert, even if the main meal has not been eaten.
- Give finger foods as much as possible. Some children prefer this.
- Offer a variety of tastes and textures.
- Encourage families to eat together at home and carers to eat with children in childcare.
- Seat fussy eaters with good eaters at mealtimes, it has been shown that children will adopt the food preferences of their peers if they eat together regularly.
- Encourage parents/carers to keep calm and try not to worry.

NB: It is important to remember that different strategies will work with different children.

Special Diets

Parents of children who are on special diets (e.g. a milk-free diet), are responsible for providing the childcare provider with information about the food choices available to their child. Advice can also be sought from the Community Paediatric Dietitian.

Equal Opportunities

All children and their parents or guardians should be respected as individuals, and their food preferences and religious requirements should be accommodated.

When planning food provision, carers need to consider children who have special needs. Some children may have particular dietary requirements or may need specific help with eating, both of which are outside the scope of these guidelines. Parents or guardians and carers may find it useful to contact support groups associated with the child's particular disability or need.

Carers should positively encourage both boys and girls to participate in all activities, including food-related activities such as cooking.

All that children bring with them to their place of childcare – their race, gender, family background, language, culture and religion – should be valued in order for children to feel accepted and accepting of themselves. It is therefore important to value the contributions which different cultures and nationalities make to the variety of foods eaten in the UK today.

HEALTHY START SCHEME

Healthy Start replaced the Welfare Food Scheme. The scheme:

- provides vouchers to allow families to obtain fruit and vegetables (including fresh/frozen) as well as milk and infant formula milk
- supports breastfeeding
- promotes uptake of vitamin supplements for pregnant women and children under age 4 to help prevent illnesses due to vitamin deficiencies e.g. rickets
- encourages earlier and closer contact between health professionals and families from disadvantaged groups

Who qualifies for Healthy Start?

You qualify for Healthy Start if you're at least 10 weeks pregnant or have a child under four years old AND you or your family get.....

- Income Support, **or**
- Income-based Job Seeker's Allowance **or**
- Income-related Employment and Support Allowance, **or**
- Child Tax Credit (but not Working Tax Credit unless your family is receiving Working Tax Credit run-on only*) **and** an annual family income of £16,190 or less in 2010/11.

* Working Tax Credit run-on is the Working Tax Credit you receive in the four weeks immediately after you have stopped working for 16 hours or more per week.

All pregnant women under the age of 18 also qualify, whether or not they are on benefits.

Anyone who thinks they are eligible should apply. The scheme is available throughout England, Scotland, Wales and Northern Ireland. For an application form call Healthy Start: 0845 607 6823

How does Healthy Start work?

Once accepted on the scheme, pregnant women and families will receive a set of vouchers through the post every four weeks. Each voucher is worth £3.10 and can be exchanged for any combination of milk, fresh fruit, fresh vegetables and infant formula milk in registered shops.

Entitlement to vitamin supplements will be printed on the letter attached to the vouchers. Beneficiaries should bring this letter with them to claim their vitamins from the distribution points at their health trust (please check availability at local health centres or clinics).

How many vouchers do families get?

- Pregnant women, and children aged between one and four will receive one voucher per week, currently worth £3.10 for each child/pregnancy.
- Babies under one year old will receive two vouchers, worth a total of £6.20.

As well as their vouchers, beneficiaries also get lots of health advice about healthy eating, breastfeeding, infant feeding and using the vouchers.

Healthy Start vitamin supplements

Healthy Start also provides free vitamin supplements to qualifying pregnant women, mothers and children. Vitamin supplements can be obtained from local health clinics. Vitamin supplements can also be bought if a family does not qualify for free ones. Current cost £1.80 for children's vitamins and 91p for pregnant women's.

Recommendations for babies/children

The UK health departments recommend a daily dose of vitamins A, C and D for:

- breastfed infants from 6 months old (or from 1 month if there is any doubt about the mother's vitamin status during pregnancy)
- formula-fed infants who are over 6 months old and taking less than 500ml infant formula per day
- children up to their fourth birthday

This recommendation is particularly important for children who are picky or fussy eaters, those of Asian, African, Afro-Caribbean or Middle Eastern origin and those living in northern areas of the UK.

Recommendations for women

UK health departments recommend:

- 10 micrograms of vitamin D each day for pregnant and breastfeeding women
- 400 micrograms of folic acid for women who may become pregnant and up until the 12th week of pregnancy
- The vitamin supplements also contain 70mg vitamin C

This recommendation is particularly important for women who are not eating well and those of Asian, African, Afro-Caribbean or Middle Eastern origin and those living in northern areas of the UK.

Further Information can be found on the Healthy Start Website:

www.healthystart.nhs.uk

Including Healthy Start resources and a database of local shops where vouchers can be spent.

Parents/carers should be encouraged to obtain Healthy Start vitamins for their babies/children, either free of charge or bought.

PHYSICAL ACTIVITY AND OUTDOOR PLAY

Physical activity significantly benefits children's health. An active child is less likely to become overweight and physical activity is also important for bone health. In addition physical activity has psychological health benefits for children, in particular improving self-esteem. It also has benefits for healthy growth and development and social interaction during childhood by providing an important vehicle for play and recreation, learning physical and social skills, developing creative intelligence and stimulating growth and fitness. Children who are physically active when they are young are more likely to maintain a healthy active lifestyle as they get older.

How much and what type?

Current NICE Guidelines (National Institute for Health and Clinical Excellence) for promoting physical activity and active play in children and young people recommends that children from 2 years of age partake in:

- A minimum of 60 minutes of moderate to vigorous/ intense activity every day and
- At least twice a week this should include activities to improve bone health (weight bearing activities that produce high physical stresses on the bones such as running and jumping), muscle strength and flexibility. The Department of Health have said that children are more likely to maintain a healthy weight if they are physically active for more than 180 minutes each day.

All children under five should minimise the amount of time spent on sedentary activities.

Facilities and Equipment

NICE recommends that opportunities, facilities and equipment are available to encourage children to develop movement skills regardless of their ability or disability with access to environments that stimulate their need to explore and which safely challenge them.

Helping children to be active

Provide a range of indoor and outdoor physical activities for children on a daily basis, including opportunities for unstructured, spontaneous play. Tailor activities according to the child's developmental age and physical ability. Ensure they are inclusive, progressive and enjoyable. Provide opportunities at intervals throughout the day to be active. Provision and support should be available irrespective of disability, health status, religion, ethnicity, social, economic and other circumstances. The focus should be on fun, enjoyment and active participation.

NB Exposure to summer sunlight in outdoor play helps children to maintain their vitamin D status. It is important to use protective clothing such as sun hats and sunscreen. All children under five should be appropriately supervised at all times while outdoors.

Involving parents, carers and the community

Parents/carers are important role models and can help foster their child's involvement in, and enjoyment of physical activity and play. Being active with children can also benefit parents/carers' own health. Children need to understand the importance and benefits of physical activity and have role models to look up to. Encourage parents and carers to complete at least some local journeys with young children using a physically active mode of travel.

Have a policy that involves and informs parents of the importance of physical activity and play. Offer parents/carers the opportunity to be involved in planning and delivery of play and physical activity. Encourage childcare staff to undertake physical activity too.

FOOD, NUTRITION AND ORAL HEALTH POLICY DEVELOPMENT

Writing a food and nutrition policy is not as difficult to do as it may sound. Many child care settings already have a lot of 'unwritten' rules about food and eating. The advantage of writing them down as a 'policy' is that everyone has a chance to agree these ideas and in addition they provide information to new parents about your approach to healthy eating. This policy should not be seen as something set in stone, but something open to regular review. You can also consider adding in good practice around physical activity and play environments e.g. promotion of play and physical activity within the childcare setting, encouraging children to play outside and promoting an active travel plan.

A whole childcare approach should be taken in the development of the Food Policy.

Staff at a day nursery may include: Manager, Cook/Caterer, Parents and Children. You could identify a member of staff to take the lead for healthy eating and physical activity.

Advice can also be sought from the Children's Nutrition Team and the Oral Health Improvement Team.

Aims of food policy should be:

- To ensure that consistent messages are given
- To put into practice principles of healthy eating
- To improve the health of children in the setting, and provide the best services possible
- To send out clear messages about food to the community
- To provide equal opportunities for those in the setting

Considerations for Food and Nutrition Policy

Sample menus and information on cooking methods used, portion sizes, breakfast options offered. Snacks and drinks provided.

Information on expressed breast milk, infant formulas and weaning advice.

Foods brought into the setting from home e.g. packed lunches.

Guidance on use of rewards, celebrations, special events, birthdays.

How staff should manage children who are not eating well.

Promoting good eating habits: staff sitting with children while they eat, teaching good eating skills and table manners.

Consideration given to procurement of local, seasonal, sustainable foods.

Cooking with children.

Catering for cultural, religious, special dietary requirements, managing allergies and intolerances.

Learning about food.

Food safety and hygiene.

Staff training.

Promoting breastfeeding.

Oral Health.

Communicating with children and families.

Sample Nutrition Policy (taken from Caroline Walker Trust)

- A weekly menu will be displayed in advance. Recipes will be available to parents.
- The weekly menu will provide children in childcare with a tasty, varied diet.
- All the children in childcare will have suitable food made available for them.
- Children who do not have breakfast at home will be offered this when they arrive, with agreement from their parent/guardian.
- Milk will be served with morning and afternoon snacks.
- All dairy products will be full fat.
- Water will be available at all times.
- Diluted fruit juice will be served with the main meal.
- Children will have access to bread or fruit if they are hungry between meals.
- Children will be allowed to have second helpings of fruit or milk-based desserts.
- Children will still receive dessert if they refuse their main course, parents/guardians will be advised if their child is not eating well.
- Parents/guardians of children who are on special diets will be asked to provide as much information as possible about suitable foods and, in some cases, may be asked to provide the food themselves.
- A specific allergy plan will be in place to deal with any child having an allergic reaction.
- Carers will sit with children while they eat and will provide a good role model for healthy eating.
- Withholding food will not be used as a form of punishment.
- Children will be encouraged to develop good eating skills and table manners and will be given plenty of time to eat.
- Advice will be given to parents about suitable foods to bring from home.
- Children will be encouraged to play outside every day, weather permitting, as sunshine helps their bodies to make Vitamin D.

Considerations for Physical Activity and Play Policy

What to consider:

Good practice in play and physical activity environments.

Risk assessment policy/procedures for activities.

Consultation with parents about physical activity.

Encouraging children to play outside, weather permitting and information on suitable outdoor clothing and sun protection.

Encouraging children to explore the natural environment via supervised visits to parks and natural spaces.

Active travel plan which promotes staff and families travelling to and from the setting in a healthier, more sustainable way.

FOOD SAFETY AND HYGIENE

Breast milk

Expressed breast milk provided for babies in childcare should be clearly labelled with the child's name, date and stored as follows:

- Up to 24 hours in a refrigerator
- Up to one week in the ice making compartment of a fridge
- Up to six months in a domestic freezer

Breast milk can be thawed slowly in the fridge and used within 24 hours or thawed at room temperature and used immediately.

Any expressed breast milk left over at the end of the day in the childcare setting should be discarded.

Infant Formula

- For those babies given infant formula it is essential that feeds are prepared correctly and safely. Feeds should be made up fresh by the carers. Ideally these should be prepared in a separate milk preparation area. The manufacturer's instructions for making up the infant formula should be followed carefully. This includes using the correct amount of powder and water, using only boiled water that is hotter than 70°C (this means water that has been boiled and left to cool for about 30mins) and sterilising all equipment before use. Unused feed should be discarded within two hours.
- Feeds should be stored for the minimum amount of time and no longer than 24 hours.
- When reheating feed from the fridge just before it's needed, reheat using a bottle warmer or place in a container of warm water for no longer than 15 minutes. Microwaves should never be used for reheating a feed. Shake the bottle to ensure the feed has heated through evenly and check the temperature. Use back of wrist – it should feel lukewarm (not hot).

General Hygiene Tips

Carers should always wash their hands with soap and water before preparing food or helping children to eat, and after changing nappies and toileting children. If carers use a handkerchief while preparing food, they should wash their hands before continuing.

Children's hands should always be washed with soap and water before meals and snacks, and after going to the toilet.

Carers also need to be aware of food safety issues such as storage of food and leftover food, and thorough cooking and heating of foods.

Children under 5 should never be left alone while they are eating, in case they choke.

Advice on food hygiene and safety can be obtained from Tameside's Environment Health Department including information on accredited Basic Food Hygiene Training.

REFERENCES

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3. Department of Health 1991. Dietary Reference Values for Food Energy and Nutrients for the United Kingdom. Report on Health and Social Subjects No 41. London HMSO.
4. Department of Health 1994 Weaning and the Weaning Diet Report on Health and Social Subjects No. 45 London HMSO
5. Department of Health (2004) Infant Feeding Recommendation
6. Butte MF, Lopez-Alarcon MG, Garza (2002): Nutrient adequacy of exclusive breastfeeding for the term infant during the first six months of life. EHO. Geneva.
7. Paediatric Group of British Dietetic Association Position Paper 2009. Weaning infants onto solid foods
8. Department of Health (2014) Delivering Better Oral Health: An evidenced based toolkit for prevention.
9. First Steps Nutrition Trust: Eating Well Sustainably: A Guide for Early Years Settings. Originally published by First Steps Nutrition Trust in 2013 and updated in 2016.

USEFUL CONTACTS

Tameside's Children's Nutrition Team
Hattersley Clinic
Hattersley Road East
Hattersley
Hyde
SK14 3EH
0161 366 2349/3922

Email: childrensnutriton@tgh.nhs.uk

Oral Health Improvement Department
Hattersley Clinic
Hattersley Road East
Hattersley
Hyde
Cheshire
0161 366 3913/3914

Tameside Environmental Health Department
Council Offices
Wellington Road
Ashton under Lyne
Lancs
0161 342 3476

Tameside Quality Team
Early Years Quality Development Centre
Manchester Road
Audenshaw
Manchester
M34 5GJ
Tel No 0161 342 5427

Website address – www.tameside.gov.uk/earlyyears

A copy of these guidelines can be downloaded from this website. A list of current award holders can also be found at this site.

USEFUL RESOURCES/WEBSITES

1. Change 4 Life

The Change 4 Life website has a growing number of resources available to help support healthy weight. This fact sheet describes all the resources available currently and describes how they can be ordered free of charge.

www.nhs.uk/change4life

2. Department of Health Website

Various resources can be ordered or downloaded including breast feeding and bottle feeding

leaflets as well as weaning leaflets.

Oral Health information is also available through the Department of Health website.

www.dh.gov.uk

3. Active Tameside

Fun activities for children.

www.activetameside.com

4. Service Information Directory

A directory of services available in Tameside for children, families and practitioners.

www.tameside-sid.org.uk

5. Healthy Start

healthystart@dh.gsi.gov.uk

Help is at hand if you require this information in an alternative format such as large print, audio tape, Braille, disc or other. Please contact the Communications Team on 0161 304 5800/5314 or email communication@tgh.nhs.uk