

Healthy Snacks in pre-school nurseries and playgroups

Tool Kit to encourage provision of healthy snack food and drinks in pre-school nurseries.

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Chapter 1

Introduction – aims and objectives of the Initiative

Health Challenge Wales

1. The key themes of Health Challenge Wales have been selected because they are considered to be those issues that constitute a significant proportion of the ill health that could be avoided. Obesity is the key themes. This intervention, which addresses the issue of obesity, is aimed at pre-school and nursery children.
2. The detrimental health effects of overweight and obesity are well documented. Obese and overweight people are more likely to suffer from Type 2 Diabetes, Coronary Heart Disease, respiratory diseases such as asthma, arthritis and some types of cancer and individuals who are obese (i.e. have a BMI of greater than 30) have a 50 to 100% increased risk of premature death from all causes, compared to individuals with a healthy weight.
3. Adult eating habits are likely to be influenced by what is eaten in childhood. All national and local surveys of food and dietary patterns show that there is less variety of foodstuffs, in poorer households ⁱ. Unfortunately Welsh children are amongst the highest consumers of snack foods, which are often high in fat, sugar and/or salt. Consumption of fruit by young people in Wales is low by international standardsⁱⁱ. Children who are malnourished are unlikely to grow well, and they are more likely to become obese.
4. A high sugar intake causes dental decay. Dental disease in Wales compares badly to England where 52% of 5 year olds in Wales were reported to have dental caries in 2000 compared to 38% of children in England ⁱⁱⁱ.
5. There has been a sharp rise in childhood obesity since the 1970s, with 1.8 million two to 15-year-olds in the UK now classed as overweight and 700,000 obese. Research by experts at University of Wales, Swansea^{iv}, has revealed that as many as 8% of girls and 5% of boys are obese by the time they are five. The evidence also suggests that overweight children have between a 40% and 70% chance of becoming obese adults.
6. Obese children suffer from obesity related health conditions. Many obese children already have medical conditions, including respiratory problems, such as asthma, exercise intolerance and glycaemic index disorders.
7. Being an obese or overweight child not only has serious medical consequences, but it can also make youngsters the targets for bullies, cruel taunts and physical violence. Evidence suggests that this sort of bullying can start at a very early age, and can lead to alienation of a child from its peers. It is also suggested that bullying based around weight and weight issues can be the trigger in adolescence for eating disorders, particularly in girls.
8. The costs to the NHS of dealing with the consequences of obesity are considerable. The Department of Health commissioned a cost-of-illness study to enable estimates to be prepared on the costs of obesity in England for the

Westminster Parliament in order to provide a platform for further debate. The National Audit Office (NAO) report, *Tackling Obesity in England*, published in 2001^v, was the result of this commission. The report looked at the human and financial costs of obesity and made recommendations to Government on the way overweight and obese patients are managed within the NHS and on cross-Government work to prevent obesity. It became the subject of a Public Accounts Committee hearing and was followed by recommendations from the Committee to Government, and a published Government response. The NAO report concluded that obesity accounted for 18 million lost working days due to associated illness and 30,000 deaths in 1998 for England. The direct cost of treatment of obesity and associated co-morbidities was conservatively estimated at £480m or 1.5% of the total NHS expenditure in England. Given that the report was unable to evaluate the costs of obesity-related back pain and several other conditions, the true costs may exceed the estimates.

9. The purpose of this initiative is to address the nature and types of snacks being provided to children of pre-school age when attending at nurseries or playgroups. As noted, this is the age at which children are most receptive to new food ideas and types, but also the age when have learned taste preference for salt and sugar. IT is therefore a critical time in the development of the eating habits of the child, and one which can determine their future eating behaviour and health.

ⁱ Poverty Bites. Food, Health and Poor Families, E. Dowler and S. Turner, 2001

ⁱⁱ Better Health, Better Wales. Welsh Office 1998

ⁱⁱⁱ Food and Well-being. Reducing Inequalities through a Nutrition Strategy for Wales. FSA Wales, 2003.

^{iv} S E Jones, M James-Ellison, S Young, M B Grosvenor, R Williams 'Monitoring trends in obesity in South Wales using routine data' Archives of Disease in childhood 2005;90 :464-467 BMJ Publications

^v National Audit Office 'Tackling Obesity in England'. NAO London 2001

Chapter 2

Healthy Snacks in pre-school nurseries and playgroups

Running an Initiative

1. Initial considerations

Initial considerations for this project have to be addressed, including;

- What is the target group?
- Will the outcome have the desired outcome,
- How can the target group be reached?
- Who are the key partners in the initiative?
- How will the initiative be evaluated?
- Will the initiative deliver value for money?

2. Target Group

The group benefiting from this intervention is children of pre-school age, attending pre-school nurseries and playgroups. At this age the children are receptive to new food tastes and textures and can be encouraged to try new foods relatively easily. They are also influenced by the behaviour of others in their peer group and will adopt similar behaviour patterns.

The children however are not targeted directly, but as the interface with them is through the operators and staff at the nurseries involved in the initiative, it is nursery and playgroup operators and staff who are the target group. It is the staff who work with children in pre-school nurseries who influence the choice of food to be provided by way of snacks to the them, therefore this initiative seeks to influence the choices made by staff to ensure that the food and drinks provided are healthy and do not promote the development of bad food habits in the children.

3. Achieving the desired outcome

The purpose of this initiative is to promote the provision of healthy snacks by nurseries and playgroups to children in their care. The desired outcome is therefore achieved if the nurseries and playgroups targeted in the intervention change their snack policy such that snacks considered to be less healthy options, such as potato crisps and other high fat and salt snacks, sweet biscuits and chocolate confectionary, cakes and sugary drinks are not offered, but are instead replaced by raw fruit and vegetables, plain biscuits and fruit juice, milk or water, and this change in practice is maintained.

4. Reaching the Target Group

All nurseries and pre-school playgroups are required to be registered with the local authority. This registration information includes the name of the person having control of the nursery or playgroup, the address and time at which it operates and the maximum number of children that can be accommodated. This initiative makes primary contact with the target group by letter, although further contact upon request can be made through personal visits.

5. Who are the key partners in the initiative?

It is suggested that the key partners in this initiative are were the local authority, the Local Health Board, the local NHS Trust, the National Public Health Service for Wales, through its Community Dieticians, Wales Pre-school Playgroups Association and the National Childminding Association Clybiau Plant Cymru Kid's Clubs, Mudiad Ysgolion Meithrin, Communities First Officers and Sure Start Officers. This list is not exhaustive nor exclusive.

6. How will the initiative be evaluated?

Evaluation of this initiative is simple, and is by comparison of pre-and post – intervention snacks.

The pre-initiative information is collected by survey, asking the pre-school and nurseries what foods and drinks they provide as snacks to children in their care, and by comparing this with the foods and drinks they provide after receiving the information and advice that is sent to them.

As part of the pilot initiative an award scheme was put in place. Two levels of award were made, being gold and silver awards, and certificates were given to the successful nurseries and play groups. As a further evaluation tool the partners to the initiative could measure the number of gold and silver award certificates awarded over a fixed period of time, and further could measure the number of silver certificate holders who progress to gold awards

7. Will the initiative deliver value for money?

As with the Healthy Lunch Boxes Scheme, the benefits of this intervention are hard to cost in simple financial terms. There is clear health benefit to the individual child involved in reducing the likelihood of it becoming overweight or obese, and of suffering all or any of the life limiting conditions flowing from the carrying of excess weight. The benefits of this in health terms will not be quantifiable in the short term and will vary from individual child to child. Reducing obesity and overweight in children may also have beneficial effects on their mental health and well being, which benefits again are hard to cost in strict financial terms.

The initiative itself is not resource intensive to run, with costs mainly being incurred in the design and printing of materials. Costs are also incurred in collating the initial information as to what foods and drinks are offered by nurseries, where advisory and monitoring visits are made to premises taking part in the initiative and in promoting the awards, but it is suggested that these should not be prohibitive.

Analysis of the project suggests that the likely health benefits to the children involved in the initiative out weight the financial and time resources required to run it, and that being the case that it does represent value for money.

Chapter 3

Healthy Snacks in pre-school nurseries and playgroups

The Campaign

Nursery school and pre-school play groups are encouraged to give children healthy snacks and drinks and to adopt a healthy snack food policy. Those adopting the policy are given an Award.

Preliminary work.

1. This is an arms length campaign, which works by encouraging nurseries and play groups to adopt and implement healthy snack food and drink policies. Many nurseries and playgroups will not have polices in respect of food, other than in respect of children with particular food needs or allergies. This initiative encourages all of the nurseries and play groups targeted to adopt the same basic healthy snack food and drink policy, and provides an incentive, in the form of an award scheme to reward those who are successful in implementing the policy.
2. The initiative is started by the formation of a multidisciplinary task group, whose role is to put together healthy food snack and drink guidelines. The guidelines should be informed by and reflect national guidelines for children of pre-school age, including reference to nutritional requirements, seasonally available produce and appropriate portion size. The Guidelines used in the Caerphilly Pilot Project are included as [Appendix 1](#).
3. The task group will also need to design the award scheme by which the participating nurseries will be judged. This includes design of the certificate to be presented to successful participants. The pilot project, as noted, used a gold and sliver award criteria, with certificates being presented to successful nurseries. The award criteria are shown in [Appendix 1](#), as are the certificates presented.
4. In order to have comparison data it is helpful to ascertain before the start of the campaign what snack foods and drinks are being given to the children in the targeted nurseries and pre-school play groups. This information can be gathered by either visits made to the premises by members of the partnership taking the initiative forward the required information being collected through use of a survey form. Alternatively the survey form can be sent to all of the premises by mail shot. The text of a suitable form is shown as part of [Appendix 1](#).

Conducting the Intervention

5. Having gathered the pre- intervention data the project task group should send out the guidelines with a covering letter providing such information as is required to the proprietors and operators of the nurseries and playschools. Some may require advice visits for Community Dieticians to provide advice and support.
6. The covering letter should provide details of the award scheme, if one is being used, and should include the award criteria. It should further indicate what steps the nurseries and playgroups are required to take when they have put in place a policy of health snack food and drinks. This may either be to contact a named

person and advise of what steps have been taken or, in the alternative, the group may wish to put in place a cut off date, after which they will inspect nurseries and playgroups and will make the awards on the basis of what is found on the day of the inspection. This is a matter for local decision.

7. Follow up visits could be made by Environmental Health Officers or other members of the task group as appropriate, to ensure that the policies put forward by the nurseries and pre-school groups have been adopted and implemented. A press release detailing the winning nurseries and promoting the Healthy Snack Food and Drinks Guidelines should also be considered. Consideration can also be given to awarding the successful nurseries and pre-school groups their awards at an event attended by the relevant local authority portfolio holder, Local Health Board Member and other elected members and guests with the local media also invited. Such an event would have implication in costs, which would have to be balanced against the value of the media coverage generated.

Following up the event

8. The success of this initiative requires those nurseries and pre-school groups that adopt a Healthy Snack Food and Drinks to continue to implement it. To ensure the on-going implementation of the policy the local authority and its partners may wish to carry out cold call follow up visits to the premises to assist in maintaining enthusiasm levels.
9. The local authority may issue guidance to parents considering placing their children in nurseries about what to look for and what questions to ask of the staff at the premises. A question regarding Healthy Snack Food and Drinks policy can be added to the questions to be asked, and parents should be encouraged to request the provision of healthy food and drinks for their children whilst at the nursery or pre-school group.

Caerphilly County Borough

FOOD & HEALTH GUIDELINES FOR EARLY YEARS AND CHILDCARE SETTINGS

Disclaimer

So far as the law permits, neither Caerphilly county borough council nor the National Public Health Service (Caerphilly) nor any person who has been involved in development, creation or supply of this policy, shall be liable for any loss or damage of any nature whatsoever which arises from use of this policy howsoever such loss or damage may occur.

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Food & Health in Early Years and Childcare settings

Foreword

The guidelines provide direction relating to food and health issues for all staff working with children, including nursery nurses, childminders, Sure Start workers, playgroup leaders, out of school clubs, people working in the public and private sector and parents.

A healthy diet is a key factor in determining health in later life. Eating habits are established at a young age making the early years environment an ideal setting in which to influence children's diet. Children in early years and childcare settings should be given the opportunity to try, and to taste repeatedly, a wide range of nutritious foods.

The guidelines cover specific areas including food provision, developing skills, increasing knowledge and providing the environment to make the healthy choice the desired choice.

Working in partnership is the key to success and this has been addressed through a partnership of agencies, including Caerphilly county borough council, Caerphilly Local Health Board, National Public Health Service, Gwent Healthcare NHS Trust and Children's Partnership.

The group consists of members from the Nutrition subgroup of the Health Alliance and members of Cymorth including Food and Health Advisers, Oral health Promotion manager, Sure Start Health Co-ordinator, Sure Start social worker, Right from the Start, Cymorth Development Officer, Menter Iaith, Clybiau Plant Cymru Kid's Clubs, Mudiad Ysgolion Meithrin, Wales Pre-school Playgroups Association and the National Childminding Association.

This guidance is recommended as a model of "good practice". It is proposed that early years and childcare groups implement it within their development plans.

Judith Paget
Chief Executive
Caerphilly Local Health Board

May 2004

Malgwyn Davies
Chief Executive
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May 2004

Food & Health in Early Years and Childcare Settings

Background

Wales has one of the highest child poverty rates in the United Kingdom. A family's lack of access to or ability to afford good quality food (food poverty) is a crucial factor in the relationship between childhood deprivation and long-term ill health. Cost appears to be of particular concern in relation to increasing intakes of fruit and vegetables ⁽¹⁾ but is also relevant for healthy eating in general, particularly for low-income groups.

The importance of a healthy diet in promoting short and long-term health is well recognised. A poor diet is one of the main causes of ill health and premature death ⁽²⁾. A diet rich in fruit and vegetables, fibre rich starchy food and low in fat, particularly saturated fat, sugar and salt would do much to reduce the risk of major chronic diseases such as coronary heart disease, cancer, and obesity. Atherosclerosis (narrowing arteries) has been found in a small minority of children as young as two years of age. By the age of 20 it may be present in as many as 1 in 3 young people ⁽³⁾.

Adult eating habits are likely to be influenced by what is eaten in childhood. All national and local surveys of food and dietary patterns show that there is less variety of foodstuffs, in poorer households ⁽⁴⁾. Unfortunately Welsh children are amongst the highest consumers of snack foods, which are often high in fat, sugar and/or salt. Consumption of fruit by young people in Wales is low by international standards ⁽⁵⁾. Children who are malnourished are unlikely to grow well, and they are more likely to become obese.

A high sugar intake causes dental decay. Dental disease in Wales compares badly to England where 52% of 5 year olds in Wales were reported to have dental caries in 2000 compared to 38% of children in England ⁽²⁾. For 2001/2002, the proportion of 5 year olds in Caerphilly county borough with decayed, missing and filled teeth is significantly higher than the Wales average, and has increased (it was 44% in 1995/6, rising to 61% in 2001/02.)

The government believes that everyone should have access to healthy food, and that children in particular need a better chance of a healthy start in life ⁽⁶⁾. The provision of a well balanced diet, and physical activity, are crucial to the health and well-being of young children and adolescents. Providing children with the opportunity to have a piece of fruit or another healthy snack is a vital step towards improving our children's health and tackling health inequalities across Caerphilly county borough.

RECOMMENDED FOOD POLICY For HEALTHY SNACKS

- AIM:**
- To establish sound eating habits for life through the provision of healthy snacks between meals that meet the nutritional requirement of a growing child.
 - To encourage good social eating practices in hygienic surroundings.

OBJECTIVES:

- Children will have the opportunity to try an increased variety of foods and will have access to healthy snacks.
- Water will be available at all times.
- Staff will sit with children while they eat and will provide a good role model for healthy eating.
- Children will be encouraged to develop good eating habits and will be given plenty of time to eat.
- Parents 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.
- Non- food items will be used as a reward for children instead of confectionary.
- Healthy food options will be used in all activities whenever possible: in play, in education, language, cooking and other events.
- Drinks should be given in a lidless cup for children over 1 year of age.
- Parents / carers will be asked not to provide their children with any snacks, food or drinks not recommended unless there is a specific dietary requirement to do so.
- To increase the knowledge of staff relating to food safety issues.

Recommended Action Plan for Early Years and Childcare Settings

Healthy Snacks

AIM: To promote healthy snacks including fruit and vegetables and to reduce the consumption of biscuits, cakes and confectionary in a hygienic environment in line with recommendations included in the Nutrition Strategy for Wales 2003⁽²⁾.

OBJECTIVE	ACTION for Early Years and Child Care Settings.
To consider the adoption of a healthy snack policy.	Adopt and implement the healthy snack policy.
To encourage non-food rewards.	To compile a list of non-food rewards. (see Appendix 1)
To use healthy food options in activities where possible: in play, education, language, cooking and training activities.	For activities and resources, (see Appendix 2).
To provide a pleasant environment which encourages good eating and hygiene habits and social skills.	To review the eating environment. (see Appendix 3c)
To provide opportunities for staff development and training.	Representatives to attend relevant training.
To adhere to the current food safety regulations.	Staff preparing food to attend food hygiene training.
To attain the Gold Standard Award for Snacks.	To work towards and obtain the Award (for criteria see Appendix 3).
To monitor and evaluate	In-house assessment.

REFERENCES

1. Cox, DN, Reynolds, J, Mela, D J, Anderson, S, McKellor, S and Lean, MEJ (1996). Increasing vegetable and fruit consumption. FSA Food Acceptability and Choice Research Programme Series Report (2001).
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3. Berensen GS, Srinivasan SR, Bao Wetal 1998. Association between multiple cardiovascular risk factors and Atherosclerosis in children and young adults. New England Journal of Medicine, 338; 23: 1650. 56
4. Poverty Bites. Food, Health and Poor Families, E. Dowler and S. Turner, 2001.
5. Better Health, Better Wales. Welsh Office 1998
6. The National School Fruit Scheme. Department of Health 2000

ALTERNATIVES TO USING FOOD AS A REWARD

Throughout the community children are offered food as a reward for “good” behaviour.

Often these foods have little or no nutritional value but are easy, inexpensive, and can bring about short-term behaviour change.

There are many disadvantages to using food as a reward:

- It undermines nutrition education being taught in the pre-school and school environment.
- It encourages over consumption of foods high in added sugar and fat.
- It teaches children to eat when they're not hungry as a reward to themselves.

Children learn preferences for foods made available to them, including those that are unhealthy. Poor food choices and inadequate physical activity contribute to overweight and obesity. Currently, obesity among children is at epidemic levels and can often lead to serious health problems.

Praise



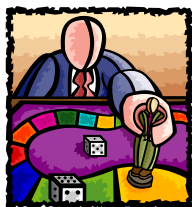
Music



Picnics



Games



Star Charts



Stickers



Activities Promoting Healthy Snacks

Language, Literacy and Communications Skills

- Read stories and develop projects from books which include food, e.g. 'The Very Hungry Caterpillar', (see Resources or other suggestions)
- Discuss personal food favourites/dislikes.
- Introduce songs/rhymes/poems about food e.g. 'Five currant buns',

Personal and Social Development

- Discuss and explain the importance of taking responsibility for personal; hygiene, e.g. washing hands before handling food.
- Sing songs about personal hygiene such as 'When you wake up in the morning....', 'This the way we wash our hands'.

Mathematical Development

- Use and introduce mathematical language in relevant contexts by using fruit and vegetables: shape, position, size and quantity.
- Weigh fruit and vegetables, cook the fruit and mash it and re-weigh it. What changes have taken place?
- Count how many portions of fruit and vegetables children eat over a normal day.

Knowledge and Understanding of the World

- Discuss the identification of fruits and vegetables.
- Look at taste, texture and colour of foods.
- How does produce grow. Grow fruit and vegetables from seed.
- Smell and touch fruit and vegetables.
- Begin to understand about food and where it comes from.
- Introduce the idea of time: meal times/seasons.
- Introduce food from other cultures/countries.
- Pick fruit e.g. blackberry picking.

Creative Development

- Visit supermarket, greengrocers, farmers market, garden centres, bakery etc. Follow up activities could include creating a shop or café in the home corner.
- Role play and imaginative drama, e.g. in the home corner shop.
- Sing songs about food.
- Fruit printing.
- Painting of fruit and vegetables.
- Making play dough shapes of fruit and vegetables.
- Craft with junk materials, e.g. fruit yoghurt pots, wrapping paper and card and vegetables boxes. Introduction of colour and texture.
- Making puppets. Putting on a puppet show.

Suggestions for Resources:

<i>Books:</i>	The Very Hungry Caterpillar by Eric Carle (Puffin)
	Growing Food by Bernard Ashley & Anne Wilson (Bloomsbury)
	I Will Not Ever Never Eat A Tomato by Lauren Child (Orchard books)
	Oliver's Milkshakes by Alison Bartlett (Hodder)
	The Walker Book of Children's Cookery by Roz Denny and Caroline Waldegrave ISBN 0-7445-6990-7
<i>Mats:</i>	Plastic food mat
<i>Food Models:</i>	Plastic food models of fruit, vegetables and other food groups

All resources are available for loan from the National Public Health Service, Local Public Health Team (Caerphilly), Ystrad Mynach Hospital, Caerphilly Road, Ystrad Mynach, Hengoed. Tel: 01443 811404

Caerphilly County Borough

**GOLD
STANDARD
HEALTHY
SNACK
AWARD**

The Gold Standard Award

This award has been designed to raise the awareness of healthy eating practices and demonstrate what can be achieved by providing nutritious snacks for children in childcare settings.

The award is aimed at pre-school groups and after school clubs across Caerphilly county borough. It would be ideal to see all these groups achieving the award so that children have the opportunity to be offered a wide variety of healthier snacks.

The award is recognition of quality in your childcare setting.

Your childcare setting will obtain the award if the following criteria are met:

- Provision of healthy snacks
- Hygiene standards
- Provision of a suitable eating environment.

This is a local award and has been produced in partnership with Food and Health advisers, dental adviser, environmental health, catering officer, pre-school workers and after school staff.

External verifiers will assess the award and after the initial assessment it will be conducted at three yearly intervals.

A certificate will be awarded to successful groups who meet the award criteria. Groups receiving the award will have free publicity on the Council's website. A leaflet outlining the award is available for parents for their information.

HEALTHY SNACKS (0 – 4 years)

Fresh Fruit & Fruit Tinned in Natural Juice	Vegetables & Salad Vegetables	Bread	Cereals	Crackers	Drinks
Apple Pear Orange Tangerine Banana Grapes Kiwi Fruit Strawberries Pineapple Peach Blackberries Tomato And all other fruits	Carrot Celery Cucumber Raw Pepper And other suitable vegetables	Wholemeal Bread Granary Bread White Bread Toast Pitta Bread Crumpet Chapatti Tortilla Wrap Drop Scone Pancake	Weetabix Cornflakes Bran Flakes Rice Krispies Oat cereal	Cream Crackers Cheese Biscuits Ryvitas Rice Cakes Bread Sticks Unsweetened popcorn	Milk Water

Appendix 3b

HEALTHY SNACKS (5 years and upwards)

Fresh Fruit & Fruit Tinned in Natural Juice	Vegetables & Salad Vegetables	Bread	Cereals	Biscuits	Drinks	Other
Apple	Carrot	Wholemeal	Weetabix	Bread	Milk	Yoghurt

KIWI Fruit Strawberries Pineapple Peach Nectarine Plums Tomato And all other fruits. Dried Fruit e.g. mini boxes of raisins	vegetables.	Pitta Bread Crumpet Chapatti Tortilla Wrap Drop Scone Pancake Fruit Breads Carrot Cake Sultana Scone Malt Loaf Mini Pancake Fruit Muffin Fruit Cake	Oat cereal Muesli Fruit & Fibre Shredded Wheat	Biscuits Ryvitas Rice Cakes Bread Sticks Plain Biscuits e.g. digestives, oat biscuits	pineapple, apple, orange Sugar free squash	Marmite Peanut Butter Jam Honey
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GUIDELINES FOR PROVIDING A SUITABLE ENVIRONMENT FOR HEALTHY SNACKS

As well as providing healthy snacks, the setting in which they are given is equally important. A proper routine will help social skills and language development.

Does the setting meet the following criteria?	YES/NO
<ul style="list-style-type: none"> • Is a suitable area set aside with table and chairs? 	YES/NO
<ul style="list-style-type: none"> • Are all highchairs fitted with a safety harness? 	YES/NO
<ul style="list-style-type: none"> • Does at least one adult sit with the children whilst eating? This gives rise for promoting good manners with “please and thank you” and helps with sharing issues. 	YES/NO
<ul style="list-style-type: none"> • Are children encouraged to sit until everyone has finished eating? 	YES/NO
<ul style="list-style-type: none"> • At the end of the session are hands wiped or washed and placemats put away? <i>This can provide an opportunity for songs or rhymes.</i> 	YES/NO

Optional

- To enhance recognition skills place mats can be personalised with the children’s name or a chosen picture

Hygiene Criteria

Do you prepare high-risk foods e.g. cooked food, sandwiches with fillings? **YES / NO**

If answered *Yes* you will be assessed separately.

If answered *No* the following criteria have to be met.

Does the fridge have a thermometer to measure temperatures? **YES / NO**

Are you buying foods from a reputable supplier? **YES / NO**

Is all decanted food labelled with a 'use by date'? **YES / NO**

Is the food preparation area clean and in good repair and condition? **YES / NO**

Is antibacterial cleaner available? **YES / NO**
This should be used prior to commencement of food preparation.

Is hot and cold water available? **YES / NO**

Is soap available, preferably liquid antibacterial soap available in a dispenser? **YES / NO**

Do staff wash their hands with soap and water before preparing food or helping children to eat? **YES / NO**

Do the children wash their hands with soap and water before the consumption of snacks? **YES / NO**

Is there a No Smoking policy in operation? **YES / NO**

Is the general condition of the building suitable for food preparation e.g. no flaking paint, clean floors? **YES / NO**