

CHOICE

Creating Healthy Opportunities In Child Care Environments



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Child Health & Nutrition Program Paula James, Program Director

Developed by: Mary Ann Ferrera, BSN, MA, RN Kitty Lenhart, MEd, RD

For more information about this resource and associated trainings, please contact: Contra Costa Child Care Council – Child Health and Nutrition Program, 1035 Detroit Avenue, Suite 200, Concord, CA 94518 Phone: 925-676-5442 Fax: 925-676-5829 www.CoCoKids.org

This material was produced, in part, by the California Department of Public Health's *Network for a Healthy California* in partnership with Contra Costa Child Care Council using funds from USDA SNAP, known in California as CalFresh (formerly Food Stamps). These institutions are equal opportunity providers and employers. CalFresh provides assistance to low-income households and can help buy nutritious foods for better health. For CalFresh information, call 877-847-3663. For important nutrition information, visit www.cachampionsforchange.net.

INTRODUCTION

A CHILD'S EARLY YEARS are a critical time for physical and mental development. It is also during the early years that eating and activity habits of a lifetime are formed. This CHOICE manual has been developed to help child care homes and centers more easily and successfully write and implement nutrition and physical activity policy. The *Best Practices for Child Nutrition and Physical Activity Environments* can be used to enhance the quality of a program's nutrition and physical activity, and initiate a change in how one thinks about nutrition and physical activity in child care.

Whether working on single or multiple policies, the following information can be used as a guide to set your goals, monitor your progress and individualize written policy for your program. When policy is well written and implemented, it provides an educational resource for staff and parents, and clear and consistent guidelines that will help you solve and/or avoid problems. It will express your child care home's or center's commitment to providing and supporting nutrition and physical activity practices that promote good health for the children in your care.

This revised CHOICE manual was developed to help you assess your child care environment and, using best practices, successfully write and implement nutrition and physical activity guidelines. The materials were created to provide you with simple step-by-step directions, detailed explanations, worksheets with sample policies, and an easy-to-follow process to help you achieve this goal.

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THIS IS A TOOL KIT to help you through the process of developing and implementing comprehensive written nutrition and physical activity policies for your child care center or child care home. Whether you are working on single or multiple policies, use the following outline as a guide to set your goals, monitor your progress, and achieve individualized written and implemented policy for your program.



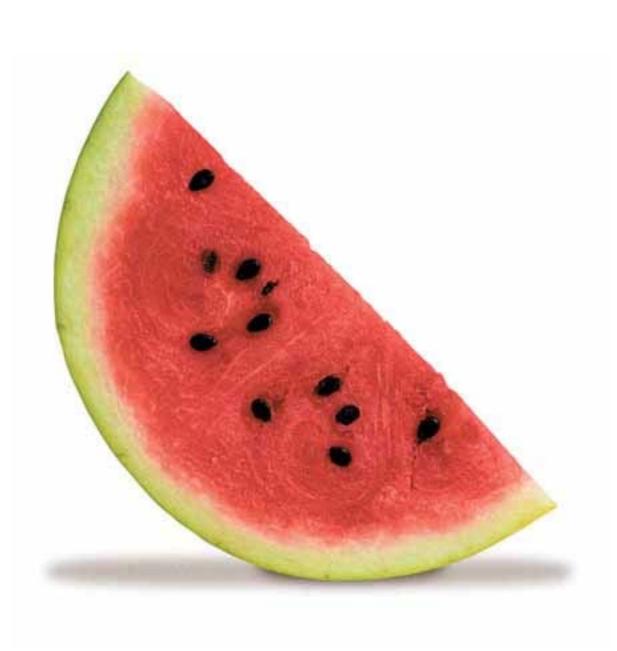
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Assessment





How to Start: First Steps

st Step Plan and Organize

- 1. Assess your organization's readiness to change
- 2. Identify and resolve barriers to change
- **3.** Share with staff and parents that a nutrition and/or physical activity policy is being developed
- 4. Develop a plan of action that will include staff and parents.

2 *nd Step* Assess/Determine and Prioritize Needs

- 1. Meet with parents/staff to open the discussion
 - A. Conduct assessment using Self Assessment Questionnaire
 - B. Refer to Best Practices Manual, licensing requirements, observations, staff and parent comments, and Early Childhood Environment Rating Scale (ECERS)
- 2. Begin with an area of mutual concern to staff and parents
 - A. Assess barriers, constraints (i.e. time, staff, and money)
 - B. Set priorities
 - C. Determine who is responsible
- 3. Develop time frame/action plan check list
 - A. Set dates
 - B. Personnel assignment
 - Who will research Best Practices?
 - Who will write policies?
 - Who will review?
 - Who will approve policies?
 - When are the target dates for completion?
 - C. Methods of implementation
 - How will information be disseminated (handbook, parent/ staff orientation, posted on site, parent flyer?)
 - D. Training/information sharing
 - E. Ongoing assessment of effectiveness of policy
 - Decide how you will know if policy is effective
 - Review and reevaluate at least every two years



Readiness Assessment

To help you recognize your current level of commitment, these are the questions you should ask yourself. You are most likely to be successful when you have reached level 3, 4 or 5.

Circle the choice below that best describes you:

1	l have not given any thought to writing or implementing nutrition and physical activity policies in our home/center. (Pre-contemplation)
2	Occasionally I think about developing nutrition/physical activity policies, but then decide to forget about it. (Contemplation)
3	I keep meaning to do something to improve our home/ center nutrition and physical activity policies, but have not gotten around to it. (Preparation)
4	From time to time I write or implement a nutrition and physical activity policy but sometimes go back to old methods of doing things. (Action)
5	I have been consciously implementing nutrition and physical activity policies in our home/center for 6 months or more. (Maintenance)

A scale of 3, 4 or 5 indicates that you are ready to begin, and likely to be successful.

Best Practices for Child Care Nutrition & Physical Activity Environments



How to Use the Self Assessment Questionnaire (SAQ)

The *Self Assessment Questionnaire (SAQ)* is meant to be used by child care center directors, staff, and family child care providers as a **first step** to help develop and implement nutrition and physical activity policy. It is designed to be brief, easy to use, understand and interpret. It is meant to be a "snap shot" of your child care environment at the moment you are answering the questions.

- 1. The SAQ has 35 Best Practice statements, arranged in four categories:
 - Nutrition: Feeding Practices
 - Nutrition: Food Served
 - Physical Activity
 - Staff and Parent Training
- **2.** The statements in three of the categories can be answered by choosing one of the four options:
 - Already doing
 - Making progress in doing
 - Planning to do
 - Not planning to do
- **3.** The statements in the category titled Nutrition: Food served, reflect some common foods served in child care that are of particular concern or significance. The answers to these statements reflect frequency of times served, or kind of milk served to children 2 years and older. Mark only one box.
- **4.** There is no right or wrong answer. Answer each question as it applies to your situation.

The completed *SAQ* will help to identify the strengths and weaknesses of the existing nutrition and physical activity at a child care site and then facilitate goal setting. After completing the *SAQ*, begin policy development using the *Best Practices Manual*. Using the *SAQ* with the Best Practices Manual is simple, and can motivate and assist in writing and implementing nutrition and physical activity policy to improve the health of the children in care.





For more information about this resource: The Child Health & Nutrition Program 925-676-5442 www.CoCoKids.org

Self-Assessment Questionnaire (SAQ)

X Please mark the box that describes your current practice.

NUTRITION: Feeding Practices	Already doing	Making progress in doing	Planning to do	Not planning to do
1. Parents receive written nutrition policies upon enrollment.				
2. Parents are informed about what their children are eating.				
3. If food is brought from home, parents are provided with guidelines.				
4. Menus are posted for parents to see.				
5. Meals and snacks are scheduled at regular times.				
6. Portion sizes are age appropriate.				
7. Mealtimes are relaxed, calm and with shared conversation.				
8. Children decide which foods they will eat from the foods offered.				
9. Children are not required to eat all the food on their plates.				
10. Children serve themselves from serving dishes at mealtime.				
11. Children with special needs have their nutrition needs taken into account.				
12. Food is served in a form that young children can eat with minimum assistance and without choking.				
13. Adults sit with children at mealtime.				
14. Adults eat the same foods as children at mealtime.				
15. Foods are served that reflect the ethnicity and cultures of all children in the center/home.				
16. Special occasions and holidays are celebrated with mostly healthy foods or with non-food treats.				
17. Parents are provided a supportive breastfeeding environment.				
18. Water is freely available both indoors and outdoors.				

NUTRITION: Food Served	-			
19. 100% fruit juice is offered:	🗆 1 time per day	🗆 2 times per day	□ 3–4 times per day	□ Never
20. Chicken nuggets, fish sticks, hot dogs, corn dogs, bologna or other lunch meat, sausage or bacon are offered:	□ 1 time per week	□ 2 times per week	□ 3 or more times per week	□ Never
21. Whole grain bread, oatmeal, whole grain cereal, brown rice, whole wheat tortillas, corn tortillas or other whole grains are offered:	□ 1 time per day	□ 2 times per day	□ 3 times per day	□ Never
22. Vegetables including fresh, frozen or canned, are served:	□ 1 time per day	□ 2 times per day	□ 3 times per day	□ Never
23. Fruit, including fresh, canned in water or own juice, frozen or dried is served:	🗆 1 time per day	□ 2 times per day	□ 3 times per day	□ Never
24. Milk served to children ages 2 years and older is:	□ whole or regular	□ 2% reduced fat	□ 1% reduced fat	□ skim or non-fat
PHYSICAL ACTIVITY	Already doing	Making progress in doing	Planning to do	Not planning to do
25. Parents receive written physical activity policy upon enrollment.				
26. Daily play and planned movement experiences both indoors and outdoors are provided to children.				
27. Information is provided to parents about their children's physical activity choices while in child care.				
28. Staff participate in physical activities with children.				
29. Restriction of play time is not used as a disciplinary tool.				
30. Activities, equipment and outside play areas are developmentally appropriate and safe.				
31. Media time for children is used only for educational purposes.				
STAFF AND PARENT TRAINING	Already doing	Making progress in doing	Planning to do	Not planning to do
32. Training opportunities are provided for staff on physical activity for children.				
33. Training opportunities are provided for staff on child nutrition.				
34. Parents are provided information that encourages physical activity at home.				
35. Parents are provided information on child nutrition and healthy eating.				



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The project was made possible in part by a grant from the Vitamin Cases Consumer Settlement Fund. Created as a result of an antitrust class action, one of the purposes of the Fund is to improve the health and nutrition of California consumers.



Best Practices Manual





NUTRITION: Feeding Practices

Parents receive written nutrition policies upon enrollment.

Best Practice	Rationale
Support parents' efforts to evaluate the quality of child care providing information on nutritio physical activity policies and mea schedules.	n, them with a way to assess quality of
• Nutrition Policy (NP) that is written and implemented, provides guidance for staff and aids in communication with parents	
 NP prevents problems, provides solutions and is a measure of quality for a child care program 	
 NP can be used in provider's newsletters or parent handbook 	
Reference: (1, 2, 3, 6, 8, 11, 12, 17)	

NUTRITION: Feeding Practices

2 Parents are informed about what their children are eating.

Best Practice		Rationale
Daily information is provided to parents about their child's activities and needs including eating and physical activity.		Children benefit when parents and caregivers share information about how to maintain complementary support for healthy choices at home and in the child care or preschool setting.
TALKING POINTS	 Shared information helps parents recognize the variety of foods offered to their children while in child care Provides an opportunity to learn what foods their children enjoy in child care and those not eaten or offered at home 	
	 Helps parents plan meals at home that do not duplicate what a child has been served that same day in child care 	
	 More acceptance of new foods when eating with peers 	
	Reference: (1, 2, 3, 8, 9, 11, 12, 17) Apoyar los esfuerzos de los padres para evaluar la calidad del cuidado infantil dando información de políticas de nutrición, actividad física y horario de comidas.	

NUTRITION: Feeding Practices		
3 If food is brought from home, parents are provided with guidelines.		
Best Practice	Rationale	
A policy about food brought from home addresses food safety and nutrition and requires prior approval of any foods brought for sharing.	Although parents may wish to bring foods to celebrate special events, health risks associated with serving food prepared in an unknown environment must be considered.	
 Assists parents in understanding what foods are acceptable to bring from home and those that are not appropriate Guidelines provide clarity and prevent embarrassment for parents who want to help, but need some direction for choosing healthy foods Provides an opportunity to address food safety as well as food choices Reference: (1, 2, 3, 8, 9, 11, 12, 17) 		
	left-	

NUTRITION: Feeding Practices

4 Menus are posted for parents to see.

Best Practice	Rationale	
Daily information is provided to parents about their child's activities and needs including eating and physical activity.	Children benefit when parents and caregivers share information about how to maintain complementary support for healthy choices at home and in the child care or preschool setting.	
• Provides a bridge for conversation between provider and parent, including which foods are favorites and which foods are new to their child		
 Visually shows a planned menu with the components of a well-balanced meal or snack, which can be a teaching aid for parents 		
 Some parents like to see the daily menus in child care, so that they don't duplicate those foods at home that same day 		
Reference: (1, 2, 3, 8, 9, 11, 12, 17)		







NUTRITION: Feeding Practices

5 Meals and snacks are scheduled at regular times.

Best Practice	Rationale	
Meals and snacks are scheduled at a regular time. Either a meal or a snack is offered to children at least every 2-3 hours.	Children have small stomachs and need many chances during the day to eat. A regular schedule also reduces children's anxiety so they can focus on learning how to eat.	
• Snacks are an important part of a child's nutrition, providing 20% of daily nutrition and calories		

- When children know they will be oòered a snack between meals, or a meal about 2 hours after a snack, they do not have to think about being hungry
- Regular meals and sit-down snacks are planned into the daily schedule, and children love and thrive on reliable routine

Reference: (1, 2, 3, 8, 9, 11, 12, 17)

	NUTRITION: Feeding Practices		
AUS/ Inc.	6Portion sizes are age appropriate.Best PracticeRationale		
	Meals and snacks meet the requirements of the Child and Adult Care Food Program (CACFP) and the Dietary Guidelines for Americans.		These guidelines reflect the most recent research available on healthy food choices for people of all ages.
	TALKING POINTS	 Serving sizes have been distorted in the past 50 years, becoming much larger than needed and may lead to childhood obesity 	
		 When serving sizes are too large, they are likely to reduce children's appetites or encourage them to eat too much 	
	 Seeing appropriate serving sizes at child care, teac child the amount of food to serve to themselves 		•
		• •	nd if still hungry requesting a second, e in touch with their own hunger and
		Reference: (1, 2, 3, 8,	9, 11, 12, 17)

NUTRITION: Feeding Practices		
7 Mealtimes are relaxed, calm and with shared conversation.		
Best Practice	Rationale	
 Quiet time precedes meals to promote relaxed eating. Meal schedules are long enough to allow for conversation and passing food several times. 	 Quiet time before meals prepares young children to focus on the developmental and sometimes frustrating tasks of learning how to eat. Children need time to serve themselves. Adequate time overall reduces the pressure which may surround meal times. 	
 • When an adult shares the meal or snack with children, it becomes more calm and relaxed, conflicts are lessened and everyone enjoys a pleasant eating experience • The adult can easily ober individual help, direct conversation, and role model good manners and eating behaviors • Children need time to learn the tasks of feeding themselves and eventually serving themselves Reference: (1, 2, 3, 8, 9, 11, 12, 17) 		
NUTRITION: Feeding Practices		
NUTRITION: Fe	eding Practices	
NUTRITION: Fe 8 Children decide which foods they		
8 Children decide which foods they	will eat from the foods offered.	
8 Children decide which foods they Best Practice Food is served in a manner that allows children to select amounts and varieties of foods they will eat. Children know how choosing foods they is why adults are re- meals and snacks	Family meal service allows children to serve themselves so they determine which foods to take and how much. Adults should determine what foods are served and how they are served.	
8 Children decide which foods they Best Practice Food is served in a manner that allows children to select amounts and varieties of foods they will eat. Children know how choosing foods they is why adults are re- meals and snacks All foods obered si child chooses will	will eat from the foods offered. Rationale Family meal service allows children to serve themselves so they determine which foods to take and how much. Adults should determine what foods are served and how they are served. w much to eat, but need help in at will help them learn and growthat esponsible for planning and preparing hould be healthy, so whatever the be healthy.	
8 Children decide which foods they Best Practice Food is served in a manner that allows children to select amounts and varieties of foods they will eat. Children know how choosing foods they is why adults are re- meals and snacks All foods obered si child chooses will	will eat from the foods offered. Rationale Family meal service allows children to serve themselves so they determine which foods to take and how much. Adults should determine what foods are served and how they are served. w much to eat, but need help in at will help them learn and growthat esponsible for planning and preparing hould be healthy, so whatever the be healthy mini-meals, with components as he choices	

16



NUTRITION: Feeding Practices

9 Children are not required to eat all the food on their plates.

Best Practice	Rationale	
Food is served in a manner that allows children to select amounts and varieties of foods they will eat, and to stop eating when they are full.	Family meal service allows children to serve themselves so they determine which foods to take and how much. Children need the opportunity to recognize their own feeding cues for hunger and fullness, and to learn to eat amounts appropriate for them. Feeding problems arise when adults interfere with the child's decisions about how much or if they want to eat.	
(POINTS) of year, preparation	of year proparation for a growth spurt onset or recovery	
	 Children need to be trusted to know how much they want to eat and to be allowed to say "no" to foods 	
of food they choos	ability to self regulate the amount se to eat, which teaches them to on hunger and fullness	
Reference: (1, 2, 3, 8,	9, 11, 12, 17)	

NUTRITION: Feeding Practices

10 Children serve themselves from serving dishes at mealtime.

Best Practice	Rationale	
Food is served in a manner that allows children to select amounts and varieties of foods they will eat.	Family meal service allows children to serve themselves so they determine which foods to take and how much. Adults should determine what foods are served and how they are served.	
 Family meal service can be adapted to the ages of the children in care, from partially self-served to fully self-served Assistance may be necessary, since pouring, scooping and passing may be new skills 		
 Developmentally, children should be encouraged and helped to be successful in whatever self-feeding and self-serving they are capable of doing 		
Reference: (1, 2, 3, 8, 9, 11, 12, 17)		

NOTRITION: Feeding Practices		
11 Children with special needs have their nutrition needs taken into account.		
Best Practice	Rationale	
A written description of nutrition or feeding needs is required from a child's physician. Parents and staff discuss how these needs will be met while a child is in care.	Special needs must be identified so that dietary modifications may be made.	
 Recognize the need for adaptations of food, feeding equipment and environment for special needs children Learn from parents' experiences and suggestions Share your experiences and ideas with parents, so they can also learn from you 		
Reference: (1, 2, 3, 8, 9, 11, 12, 17)		

NUTRITION · Feeding Pra

NUTRITION: Feeding Practices

12 Food is served in a form that young children can eat with minimum assistance and without choking.

Best Practice	Rationale
Children serve themselves during meals and snacks with adult supervision. Food is cut and prepared appropriately. Consider the child's ability to chew, pick up foods and use utensils when planning meals and snacks.	Children gain mastery in eating and appreciation of what they eat if they can eat successfully on their own.

TALKING POINTS

- Consider children's developmental abilities, not just their age, so that they can be safe as well as successful in self-feeding
- Consider texture of food, size of pieces, small utensils, plates and cups, whatever needs a child may have to be able to safely and successfully feed themselves
- Children should be sitting when eating meals and snacks
- Children need to be carefully supervised when eating, because choking is quiet and help may be needed immediately

Reference: (1, 2, 3, 8, 9, 11, 12, 17)



and the second s	
	13 Adults s
	Be
5 8 1	Adults sit with supervise the environment.
STOP	
	TALKING POINTS

NUTRITION: Feeding Practices

3 Adults sit with children at mealtime.

Best Practice	Rationale	
Adults sit with children and supervise the mealtime environment.	When adults sit with children, they can assure that mealtime is relaxing and social and that appropriate eating behaviors are modeled. Adults can help children with utensils and dishes, talk with children about food during the mealtime, and prevent a situation that might lead to choking, spreading of germs or conflict among children.	
 POINTS becomes more cal and everyone enjo The adult can easil conversation, and behaviors and hea 	 When an adult shares the meal or snack with children, it becomes more calm and relaxed, conflicts are lessened and everyone enjoys a pleasant eating experience The adult can easily ober individual help, direct conversation, and role model good manners, eating behaviors and healthy choices Reference: (1, 2, 3, 8, 9, 11, 12, 17) 	

NUTRITION: Feeding Practices

14 Adults eat the same foods as children at mealtime.

Best Practice	Rationale	
Adults eat with children and share the same foods while supervising the mealtime environment.	When adults eat the same food with the children, they are role models for eating a variety of foods. In addition, they can more personally talk about the foods that are served and model healthy choices.	
• The adult is a role model for enjoying the same foods the children are served		
	 The adult shares the same food, as well as the pleasant mealtime experience 	
Reference: (1, 2, 3, 8,	9, 11, 12, 17)	

NUTRITION: Feeding Practices			
15 Foods are served that reflect the ethnicity and cultures of all children in the center/home.			
Best Practice	Rationale		
Child care providers learn about food customs of all children in the program and serve meals and snacks consistent with this knowledge.	Adults have an important role to play in modeling acceptance of a variety of foods so they must be knowledgeable about foods and customs.		
 Learning about foods from other cultures includes tasting new foods and flavors The educational experience can be expanded to include books with stories and pictures about children in another country, describing lifestyles, clothing, and food preparation By learning about new food, children increase their knowledge of the world around them, and the likelihood that they will choose a more varied, better balanced diet in later life Reference: (1, 2, 3, 8, 9, 11, 12, 17) 			
NUTRITION: Feeding Practices			
16 Special occasions and holidays are celebrated with mostly healthy foods or with non-food treats.			
Best Practice	Rationale		
A policy about food brought from home addresses food safety and nutrition and requires prior approval of any foods brought for sharing. Although parents may wish to bring foods to celebrate special events, health risks associated with serving food prepared in an unknown environment must be considered. Nutrition policy can provide suggestions and guidelines for celebration foods to help parents make healthy choices.			
 Parents will welcome this guidance, since it will help them in planning, while also helping to prevent celebrations from becoming competitions to outdo one another Food safety needs to be addressed, along with expressions of beatthrafted and 			
 suggestions of healthy foods Celebration foods should not compete with regular meals and spaces 			
meals and snacks	should not compete with regular		
meals and snacks	an be a pleasant alternative to birthday		



NUTRITION: Feeding Practices

17 Parents are provided a supportive breastfeeding environment.

	Best Practice	Rationale	
Written nutrition policy should include guidelines for correct labeling, storing, handling, thawing, warming of breast milk, as well as, holding and feeding the breast fed infant. Ideally a quiet corner can be provided for the mother who is able to visit to breast feed her baby.		Breast milk is the ideal source of nutrition for infants for at least the first year of life, because it is easy to digest, has just the right amount of nutrients needed for a healthy start, and helps baby and mother develop a special closeness.	
	• Breast milk needs to be stored and handled safely to keep it from spoiling. Remind mothers to label, date, and chill or refrigerate their breast milk right after they express it.		
	 Breastfed babies will usually eat every 1½-3 hours in the first few months, and every 3-4 hours after that. 		
	 Breast milk helps protect babies from infections and delays allergies, so babies will be sick less often 		
	Breast fed babies have less colic and spitting up		
	 Breast feeding may protect against childhood obesity 		
	Reference: (1, 2, 3, 8, 9, 11, 12, 17)		

18 Water is freely available both indoors and outdoors.

Best Practice	Rationale
Water is easily accessible for children. Drinking fountains are installed at appropriate levels (for centers). Water coolers are brought outside and on field trips. Pitchers of water and single-service cups are available to children if drinking fountain or sink is not conveniently located.	Water is essential to health and should be promoted as a drink of choice.
POINTS help children learn	m temperature, with ice or sliced fruit, to like drinking water frink water when thirsty, rather than

- Teach children to drink water when thirsty, rather than choosing fruit juices or fruit juice flavored drinks; water quenches thirst better than any other liquid
- Water helps children stay cool and healthy
- The provider can be a role model for frequent water drinking and encourage the children to join her
- Help children to drink water by having it readily available and easy to serve in their own or disposable cups

Reference: (1, 2, 3, 8, 9, 11, 12, 17)

Contra Costa Child Care Council Child Health & Nutrition



NUTRITION: Food Served 19 100% fruit juice **Best Practice** Rationale Only 100% juice should be served. Juice can reduce a child's appetite Juice should be limited to no more for other nutritious foods required than 4–6 ounces a day. for growth and development, which may result in feeding problems and overweight/obesity. · Too much juice is ölling and may decrease desire for **TALKING** other nutritious foods POINTS Juice lacks the öber of the whole fruit and contributes to dental caries when sipped throughout the day • Do not put juice in a baby bottle or sippy cup that allows a child to transport and consume juice throughout the day....bathing baby teeth in sugar leads to Baby Bottle Tooth Decay · Read labels before purchasing juice because not all "juice" products" are 100% juice. In addition, 100% vitamin C is not the same as 100% juice · Excessive fruit juice consumption may be associated with malnutrition (over nutrition and under nutrition), diarrhea, flatulence and abdominal distention Reference: (1, 4, 10, 12, 16, 17, 19)

20 Chicken nuggets, fish sticks, hot dogs, corn dogs, bologna or other lunch meat, sausage or bacon Rationale High fat, high salt, fried or processed sources of protein should be offered to children no more than two times per week. Protein is an important part of a healthy diet. Healthy protein choices are lean meats, poultry, fish, eggs, beans, lentils, nuts and seeds. Protein requirements are based on energy needs and growth rates. Image: Talking points • High-fat, high-salt processed sources of protein are "sometime foods," not meant to be eaten daily or more than 2 times per week • Fried foods and high-fat, high-salt processed meats may contribute to high blood pressure, elevated cholesterol, heart disease, and even type 2 diabetes if frequent intake of these high calorie foods become a lifelong habit contributing to overweight • Choose healthy proteins such as lean meats, ösh, poultry, eggs, beans, lentils, nuts and seeds • Protein needs to be eaten daily and is required for growth, regulation of hormones, control of metabolism and repair of body cells Child care is the perfect opportunity to introduce children to a variety of healthy proteins and to use these early years to develop healthy proteins and to use these early	NUTRITION: Food Served		
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 a healthy diet. Healthy protein choices are lean meats, poultry, fish, eggs, beans, lentils, nuts and seeds. Protein requirements are based on energy needs and growth rates. High-fat, high-salt processed sources of protein are "sometime foods," not meant to be eaten daily or more than 2 times per week Fried foods and high-fat, high-salt processed meats may contribute to high blood pressure, elevated cholesterol, heart disease, and even type 2 diabetes if frequent intake of these high calorie foods become a lifelong habit contributing to overweight Choose healthy proteins such as lean meats, ösh, poultry, eggs, beans, lentils, nuts and seeds Protein needs to be eaten daily and is required for growth, regulation of hormones, control of metabolism and repair of body cells Child care is the perfect opportunity to introduce children to a variety of healthy proteins and to use these early 	Best Practice	Rationale	
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Reference: (1, 4, 10, 12, 16)	 Fried foods and hig contribute to high heart disease, and intake of these high habit contributing Choose healthy preeds, beans, lentils Protein needs to b growth, regulation and repair of body Child care is the perto a variety of heal years to develop h 	 High-fat, high-salt processed sources of protein are "sometime foods," not meant to be eaten daily or more than 2 times per week Fried foods and high-fat, high-salt processed meats may contribute to high blood pressure, elevated cholesterol, heart disease, and even type 2 diabetes if frequent intake of these high calorie foods become a lifelong habit contributing to overweight Choose healthy proteins such as lean meats, ösh, poultry, eggs, beans, lentils, nuts and seeds Protein needs to be eaten daily and is required for growth, regulation of hormones, control of metabolism and repair of body cells Child care is the perfect opportunity to introduce children to a variety of healthy proteins and to use these early years to develop healthy habits for a lifetime 	



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NUTRITION: Food Served

1 Whole grain bread, oatmeal, whole grain cereal, brown rice, whole wheat tortillas, corn tortillas or other whole grains

	Best Practice	Rationale
APP AND APP AN	Make at least half your grains whole grains. Look for whole grain to be listed as the first ingredient. Choose foods that are highest in fiber (cereals, breads, pastas, etc.). Baked goods that are high in sugar and fat should be avoided or limited, such as cinnamon rolls, toaster pastries, muffins, and donuts. Baked snacks that are high in sugar or fat should be avoided or limited, such as cookies, cakes, and rice treats. Cereals that have more than 6 grams of sugar per serving are not recommended.	Whole grains are an important part of a healthy diet. Whole grains and products made from whole grains are good sources of carbohydrates, B-vitamins, minerals like iron, zinc, and magnesium and fiber.
and a strength	 of dietary fiber ead Since getting enougood health, give each week to have About 85% of diet fiber-rich fruits, ve delicious foods to Grains are importation including dietary fiber from healthy diet, helps 	ugh öber is important for life-long young children many opportunities e fiber-rich foods in meals and snacks ary öber comes from whole grains, getables and dried beanseasy and include in menus ant sources of many nutrients, fiber, several B vitamins, and minerals. whole grains, as part of an overall reduce blood cholesterol levels and heart disease. Fiber is important for ction

NUTRITION: Food Served				
22 Vegetable	22 Vegetables including fresh, frozen or canned			
Best	Practice	Rationale		
 Serve a variety of vegetables throughout the day at meals and snack time. Daily recommended serving: Age 1 year is ³/₄ cup, 2–3 years is 1 cup, 4–8 years is 1¹/₂ cups, 9-12 years is 2¹/₂ cups. 		Vegetables are an essential part of a healthy diet. Vegetables provide vitamins, minerals, fiber and phytonutrients.		
TALKING POINTS	• Raw or cooked vegetables provide a variety of textures, temperatures, colors and flavors that complement many other foods			
	 Vegetables are convenient and delicious for any meal or snack, and are also a good source of fiber 			
	 It is not unusual for young children to prefer the sweeter vegetables such as sweet potatoes, corn and carrots, or the less strongly flavored vegetables like white potatoes and broccoli, rather than green beans and peas which may taste bitter to a small child 			
	 Tastes change as children get older, so give them the opportunity to learn to enjoy vegetables 			
	for children to acce	nultiple exposures (8–15 times) ept new foods. Foods should be tter of fact way without outside nd		
	Reference (1 4 10	12 16 17 19 20)		

Reference: (1, 4, 10, 12, 16, 17, 19, 20)



NUTRITION: Food Served

and the second			
	23 Fruit, including fresh, canned in water or own juice, frozen or dried		
	Best Practice	Rationale	
	 Serve a variety of fruits throughout the day at meals and snack time. Daily recommended serving: Age 1 year is 1 cup, 2–3 years is 1 cup, 4–8 years is 1½ cups, and 9–12 years is 1½ cups. 	Fruits are an essential part of a healthy diet. Fruits provide vitamins, minerals, fiber and phytonutrients.	
A		ed fruits provide a variety of textures, ors and flavors that complement so	
- 10-		with a strong liking for sweetness, hore easily accepted by young children	
al l		and delicious for any meal, snack or a good source of fiber	
	Reference: (1, 4, 10, ⁻	12, 16, 17, 19, 20)	

	NUTRITION:	Food Served
24 Milk served to children ages 2 years and older		
Best P	ractice	Rationale
 All milk served to children 2 years or older should be 1% or fat free milk. Milk or a milk substitute must be offered at each meal. Daily recommended serving: Age 1–8 years is 2 cups; 9–13 years is 3 cups. Milk is an invaluable component of a child's diet because it provides large amounts of many nutrients, including protein calcium, vitamin B-6, vitamin D, vitamin B-12 and magnesium. After age 2, children need less fat in their diets, and using lower fat milk is an easy way to reduce fat yet keep all the good nutrition provided by milk. 		
TALKING POINTS	same amount of Vitamin D as Poduced fat and Whole	
	• Non-fat and low-fat milk are recommended by the American Academy of Pediatrics for all children over 2 years old	
	 In general, it is recommended that after the örst birthday, 2 to 4 servings of milk each day (16 to 24 ounces total), depending on age 	
	 Drinking too much milk each day may decrease the desire for other healthy foods and contribute to iron deficiency anemia in children 	
 It is recommended that children over 1 year old drink from a cup and not from a baby bottle 		
	Reference: (1, 4, 10, 1	2, 16, 17)

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25 Parents receive written physical activity policy upon enrollment.

Best Practice		Rationale
Support parents' efforts to the quality of child care by information on nutrition, pl activity policies and meal se	providing hysical	A statement of policy and practice can inform parents and provide them with a way to assess quality of child care.
• Physical Activity (PA) policy that is written and implemented provides guidance for staff and aids in communication with parents		ides guidance for staff and aids in
 PA policy prevents problems, measure of quality for a child 		problems, provides solutions and is a for a child care program
 PA policy can be used in provider's newsletters and parent handbook 		
Reference: (1, 2, 3, 6		8, 10, 12, 13, 14, 15, 17)

26 Daily play and planned movement experiences both indoors and outdoors are provided to children.

Best Practice	Rationale
Structured physical activity is scheduled throughout the day as recommended by the National Association for Sport and Physical Education in the physical activity guidelines for infants, toddlers, and preschoolers. Unstructured playtime and planned movement experiences, both indoor and outdoor, are included in the daily schedule.	Children learn important motor skills during both structured and unstructured physical activity. A balance of each of these activities supports child development.



- Children need to be active frequently throughout each day
- Physical activity is developmentally necessary for learning, growth and good health
- Large muscle development and balance are enhanced by both structured (directed by an adult) and unstructured play
- Toddlers should engage in a total of at least 30 minutes of structured physical activity each day, and at least 60 minutes and up to several hours per day of unstructured physical activity, and should not be sedentary for more than 60 minutes at a time, except when sleeping
- Preschoolers should accumulate at least 60 minutes of structured physical activity each day and engage in at least 60 minutes and up to several hours of unstructured physical activity each day, and should not be sedentary for more than 60 minutes at a time, except when sleeping (National Association for Sports and Physical Education)

Reference: (1, 3, 7, 12, 13, 14, 15, 16, 17, 19)





and designed as a	PHYSICAL ACTIVITY		
	27 Information is provided to parents about their children's physical activity choices while in child care.		
	Best Practice	Rationale	
	Daily information is provided to parents about their child's activities and needs including eating and physical activity.	Children benefit when parents and caregivers share information about how to maintain complementary support for healthy choices at home and in the child care or preschool setting.	
	Children enjoy and Children enjoy and This communication active play to be e	n keeps parents aware of the activities I participate in at child care on may give parents some ideas for njoyed with their child at home on a child's activity and play 2, 13, 14, 15, 17, 19)	

PHYSICAL ACTIVITY		
$\frac{28}{28}$ Staff participate in physical activities with children.		
Best Practice Rationale		
Adults join children in physical activity and demonstrate movement during structured play while supervising children.	Staff can role model and share the physical activity, while also demonstrating that being active is fun.	
• Child care providers can be role models for activity and structured (directed by an adult) play experiences with children		
 Children can see and experience that being active is fun for everyone 		
Reference: (1, 3, 7, 12, 13, 14, 15, 17, 19)		

PHYSICAL ACTIVITY		
29 Restriction of play time is not used as a disciplinary tool.		
Best Practice Rationale		
Children should not be denied scheduled physical education, physical activity or play as a punishment. Physical activity should never be used as a reward or incentive.	Children enjoy and need to be active, which sometimes leads adults to use activity time as a tool for changing behavior. An inappropriate consequence is that children who are not compliant may be denied physical education or recess. This is counter to optimal child development.	
 Children need to be active throughout the day and should not be deprived of that opportunity while in child care Children who are acting out may be in greater need of an activity break from the classroom routine 		
Reference: (1, 3, 7, 12, 13, 14, 15, 17, 19)		

30 Activities, equipment and outside play areas are developmentally appropriate and safe.

Best Practice		Rationale
Activities and equipment are age appropriate, and all children, regard- less of age, have equipment to play with and on that provides them the chance to have fun and be active.		Young children are best served with separate facilities, equipment, and activities, which are designed specifically for their age group.
TALKING POINTS	participating in ph	quipment is required for success in ysical activity outdoors, and is also safe while being active
	 Having several diòerent riding toys, balls of diòerent sizes or rebound, and a variety of climbing equipment, allows each child the opportunity to practice and develop 	
	Reference: (1, 3, 7, 12	2, 13, 14, 15, 17, 19)

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31 Media time for children is used only for educational purposes.

	<u> </u>	
	Best Practice	Rationale
191	Restrict media (television, video, computer use and games) time that is not part of the educational plan. No media should be used by children under the age of 2. The American Academy of Pediatrics recommends no more than two hours of total screen time a day for older children.	Children in the last 30 years have become more inactive, due in part to the time they spend with media.
and the second	time in child care s at all, always thoug connection with ev • Children spend mu home, often becau	uch time being sedentary at use parks are not nearby, unsafe ohibit outdoor play, and supervision
K.	Child care is a plac safe and freely ava	e where playing and being active is ilable
and a	the opportunity to computer time, an	provide care givers and teachers model the limitation of media and d to educate parents about alternative lies can do with their children
	Reference: (1, 10, 12,	. 13, 15, 16, 19)

32 Training opportunities are pro for children.	videa for stan on physical activity	
Best Practice	Rationale	-
Staff is provided with education on physical activity and written policy regarding supervision and participation in physical activity with children, including the importance of developmentally appropriate activities and role modeling.		
 Providers need to of active play while Providers need ide 		
 Providers who role "doing" and not ju 	e model activity are teaching by Ist "saying"	
• It is important to u	understand that physical activity helps	Partie Sand
children become competent movers and learn to enjoy being active		
being active		
-	2, 13, 15, 16, 17, 18, 19)	
Reference: (3, 7, 8, 1)	2, 13, 15, 16, 17, 18, 19) RENT TRAINING	
Reference: (3, 7, 8, 1) STAFF AND PAI		
Reference: (3, 7, 8, 1) STAFF AND PAI	RENT TRAINING	
Reference: (3, 7, 8, 12 STAFF AND PAI 33 Training opportunities are pro- Best Practice Staff is provided with education on child nutrition and written policy regarding sitting with children at mealtimes, sharing the same foods	RENT TRAINING	
Reference: (3, 7, 8, 12 STAFF AND PAI 33 Training opportunities are pro- Best Practice Staff is provided with education on child nutrition and written policy regarding sitting with children at mealtimes, sharing the same foods and being important role models. • Providers need to and its importance	RENT TRAINING ovided for staff on child nutrition. Rationale Staff who understand the need and importance of good nutrition for children will actively role model and teach these skills. learn and understand child nutrition e to good health	
Reference: (3, 7, 8, 12 STAFF AND PAI 33 Training opportunities are pro- Best Practice Staff is provided with education on child nutrition and written policy regarding sitting with children at mealtimes, sharing the same foods and being important role models. • Providers need to and its importance • Providers who role by "doing" and no	RENT TRAINING ovided for staff on child nutrition. Rationale Staff who understand the need and importance of good nutrition for children will actively role model and teach these skills. learn and understand child nutrition e to good health e model good nutrition, are teaching of just "saying"	
Reference: (3, 7, 8, 12 STAFF AND PAI 33 Training opportunities are pro- Best Practice Staff is provided with education on child nutrition and written policy regarding sitting with children at mealtimes, sharing the same foods and being important role models. • Providers need to and its importance • Providers who role by "doing" and no • Teaching should a healthy eating mak	RENT TRAINING ovided for staff on child nutrition. Rationale Staff who understand the need and importance of good nutrition for children will actively role model and teach these skills. learn and understand child nutrition e to good health e model good nutrition, are teaching of just "saying" leso include the broader message that ses you feel good and helps you stay well	
Reference: (3, 7, 8, 12 STAFF AND PAI 33 Training opportunities are pro- Best Practice Staff is provided with education on child nutrition and written policy regarding sitting with children at mealtimes, sharing the same foods and being important role models. • Providers need to and its importance • Providers who role by "doing" and no • Teaching should a healthy eating mak • Providers need ide	RENT TRAINING ovided for staff on child nutrition. Rationale Staff who understand the need and importance of good nutrition for children will actively role model and teach these skills. learn and understand child nutrition e to good health e model good nutrition, are teaching it just "saying" lso include the broader message that	

34



STAFF AND PARENT TRAINING

34 Parents are provided information that encourages physical activity at home.

Best Practice		Rationale
Daily information is provided to parents about their child's favorite activities at school with ideas and suggestions for physical activity at home.		Children benefit when parents and caregivers share information about how to maintain complementary support for healthy choices at home and in the child care or preschool setting.
TALKING POINTS	• Good communication between the child care provider and parent makes you a team, working together to help the child be active, learn and grow up to be healthy	
	 Share ideas for activities that are fun for parents and children to do together at home 	
	 The information to parents and children should include the message that being active is fun 	
	Reference: (1, 4, 5, 7,	10, 12, 14, 16, 17, 18, 19)

STAFF AND PARENT TRAINING

35 Parents are provided information on child nutrition and healthy eating.

Best Practice	Rationale
Information is provided about meals and snacks served in care, by posting daily menus with nutrition education resources and tips, to encourage healthy eating at home. Parents are also provided with information about how to access CalFresh, WIC, Summer Lunch, and other programs to help with access to nutritious foods.	Parents are responsible for planning, purchasing and preparing food for their children and families. Parents who are more knowledgeable about child nutrition and healthy eating will make better food choices for their children and families at home.
POINTS and parent makes	ion between the child care provider you a team, working together to help earn and grow up to be healthy
 Share ideas for feeding children well, such as recipes that the children enjoy, child nutrition information from newsletters or CACFP, and suggestions for adult cooking with children 	
 Gardening and gro great ways to learn 	ocery or farmer's market shopping are about foods
Reference: (4, 5, 7, 8,	9, 10, 12, 16, 17, 18, 19, 20)





Resource	Topic Areas
1. American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education <u>http://nrckids.org/CFOC3/PDFVersion/</u>	Preventing Childhood Obesity in Early Care and Education Programs—selected Standards from Caring for Our Children: National Health and Safety Performance Standards
preventing_obesity.pdf	
2. American Dietetic Association	Benchmarks for Nutrition Programs in
http://www.eatright.org/About/Content. aspx?id=8366	Child Care Settings – American Dietetic Association
3. California Department of Education	Keeping Children Healthy in
http://www.cde.ca.gov/ls/nu/he/documents/ keepchildhealexecsumm.pdf	California's Child Care Environments: recommendations to improve nutrition and increase physical activity
4. California Women, Infants and Children Supplemental Nutrition Program (WIC)	
www.wicworks.ca.gov	a. General information and resource links
<u>http://www.cdph.ca.gov/</u> programs/wicworks/Pages/ WICHealthyHabitsCampaign.aspx	b. Healthy Habits Campaign
http://www.cdph.ca.gov/programs/ wicworks/Pages/WICBreastfeeding.aspx	c. Breastfeeding
5. California Head Start Association	
<u>http://www.caheadstart.org/</u> <u>HeadStartGardenGuide07.pdf</u>	Growing, Eating, Living: A Garden Guide for Head Start
6. Children's HealthWatch Policy Action Brief	
http://www.childrenshealthwatch.org/ upload/resource/cacfp_brief_jan10.pdf	Child Care Feeding Programs Support Young Children's Healthy Development
7. Color Me Healthy	
http://www.colormehealthy.com/	Interactive learning opportunities on

NUTRITION: Feeding Practices / Food Served

http://www.colormehealthy.com professional/index.html Interactive learning opportunities on physical activity and healthy eating

NUTRITION: Feeding Practices / Food Served (continued)

Resource	Topic Areas
8. Contra Costa Child Care Council	
<u>http://www.cocokids.org/health-and-</u> <u>nutrition/nutr/serve-kids/</u>	a. Best practices for serving food to kids
<u>http://www.cocokids.org/health-and-</u> <u>nutrition/nutr/choice/</u>	b. Developing Nutrition and Physical activity policies
<u>http://www.cocokids.org/health-and-</u> nutrition/nutr/role-model/	c. Healthy Role Models
<u>http://www.cocokids.org/health-and-</u> nutrition/nutr/feed-well/	d. Feeding Children Well
9. Ellyn Satter R.D., M.S., M.S.S.W.	
<u>http://www.ellynsatter.com/ellyn-satters-</u> <u>division-of-responsibility-in-feeding-i-80.</u> <u>html</u>	a. Feeding Relationships
<u>http://www.ellynsatter.com/how-to-</u> <u>feed-i-24.html</u>	b. Child Development
10. First 5	
http://www.f5ac.org/nutrition/doc.aspx?id=4	a. Nutrition and Physical Activity for Children Birth to 5
http://www.first5la.org/files/WIC-Preventing- overweight-PHFE-Data%20Mining2.pdf	b. Preventing Early Childhood Overweight
http://www.ccfc.ca.gov/Help/ntp.asp	c. Nutrition and Exercise – Tips for Parents and Caregivers
11. Laurel J. Branen, PhD, R.D. L.D., Janice Fletcher, Ed.D. University of Idaho	
http://www.ag.uidaho.edu/feeding/ pdfs/1_2%20Best%20Practices.pdf	a. Best Practices for Serving Foods to Groups of Children
<u>http://www.cals.uidaho.edu/feeding/pdfs/</u> <u>BMER.pdf</u>	b. Building Mealtime Environment and Relationships: An Inventory for Feeding Young Children in Group Settings



Resource	Topic Areas
12. USDA Food and Nutrition Service: Nutrition Education	
http://www.fns.usda.gov/fns/nutrition.htm	a. Center for Nutrition Policy and Promotion
http://www.fns.usda.gov/tn/	b. Team Nutrition
http://teamnutrition.usda.gov/Resources/ eatsmartmaterials.html	c. Eat Smart. Play Hard: Materials and Resources
<u>http://teamnutrition.usda.gov/Resources/</u> growit.html	d. Grow It, Try It, Like It! Preschool Fun with Fruits and Vegetables is a garden- themed nutrition education kit for child care center staff that introduces childrer to fruits and vegetables
<u>http://www.fns.usda.gov/tn/resources/</u> <u>nibbles.html</u>	e. Nibbles for Health: Nutrition Newsletters for Parents of Young Children
http://teamnutrition.usda.gov?Resources/ eatsmartactivitysheets.html	f. Eat Smart Play Hard Campaign Lesson Plans and Masters for children at 2 age ranges: 4 & 5, 11-12 years. Includes coloring sheets, stickers, placemats, posters, web site, parent information
http://teamnutrition.usda.gov/Resources/ MPFK_preschool.pdf	g. My Pyramid for Preschoolers: parent handouts, posters, WIC Fact Sheets, Flyers – USDA
http://teamnutrition.usda.gov/kids-pyramid. html	h. My Pyramid for Kids: Nutrition and Physical Activity Standards
http://www.fns.usda.gov/fns/ corenutritionmessages/Maximizing.htm	i. Food and Nutrition Service Core Nutritio Messages
http://www.letsmove.gov/	j. Let's Move Helpful tips and step-by- step strategies for families, schools and communities to help kids be more active eat better, and grow up healthy.
http://teamnutrition.usda.gov/Resources/ feedinginfants-ch3.pd	k. Feeding Infants
http://www.fns.usda.gov/cnd/care/tools.htm	l. Child and Adult Care Food Program

NUTRITION: Feeding Practices / Food Served (continued)

Resource	Topic Areas
13. Centers for Disease Control and Prevention	
<u>http://www.cdc.gov/physicalactivity/</u> everyone/guidelines/children.html	a. Physical Activity Guidelines for Children
http://www.cdc.gov/youthcampaign/ pressroom/article/decreasing-screen.htm	b. Decreasing Screen Time
14. Contra Costa Child Care Council	
<u>http://www.cocokids.org/health-and-</u> nutrition/child-fit/	Child Fitness
15. National Association for Sport and Physical Education	
http://www.aahperd.org/naspe/standards/ nationalGuidelines/ActiveStart.cfm	a. Active Start: A Statement of Physical Activity Guidelines for Children From Birth to Age 5, 2nd Edition
http://www.aahperd.org/naspe/standards/ nationalGuidelines/PAguidelines.cfm	b. Physical Activity for Children: A Statement of Guidelines for Children 5 – 12, 2nd Edition
<u>http://www.aahperd.org/naspe/standards/ upload/Physical-Activity-as-Punishment-to- Board-12-10.pdf</u>	c. Physical Activity used as Punishment and/or Behavior Management-position statement
<u>http://www.aahperd.org/</u> <u>headstartbodystart/</u>	d. HeadStart Body Start

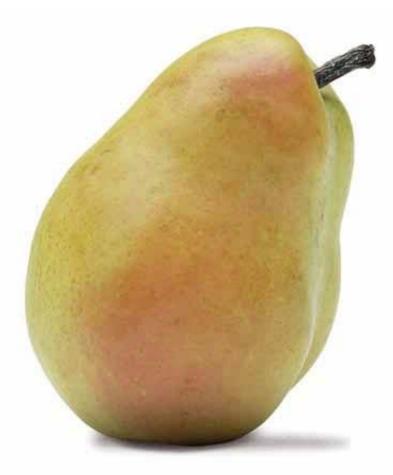
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STAFF AND PARENT TRAINING

Resource	Topic Areas
16. American Academy of Pediatrics	
<u>http://www.aap.org/healthtopics/</u> <u>physact.cfm</u>	a. Physical Activity
<u>http://www.aap.org/healthtopics/</u> overweight.cfm	b. Childhood Overweight and Obesity
17. Centers for Disease Control and Prevention	
http://www.cdc.gov/nutrition/index.html	a. Nutrition
<u>http://www.cdc.gov/obesity/childhood/</u> <u>index.html</u>	b. Overweight and Obesity
http://www.cdc.gov/physicalactivity/ everyone/guidelines/children.html	c. Physical Activity and Exercise
18. Contra Costa Child Care Council	
<u>http://www.cocokids.org/health-and-</u> <u>nutrition/nutr/</u>	a. Child Nutrition
<u>http://www.cocokids.org/health-and-</u> nutrition/child-health/	b. Child Health
<u>http://www.cocokids.org/health-and-</u> nutrition/child-fit/	c. Child Fitness
19. Network for Healthy California	
<u>http://www.cdph.ca.gov/programs/cpns/</u> <u>Pages/Links.aspx</u>	a. Resource Links for Fruit, Vegetable, Physical Activity
<u>http://www.network-toolbox.net/en/</u> index.asp	b. Fruit, Vegetable and Physical Activity Tool Box for Community Educators
	c. Champions for Change-resources \
http://www.cachampionsforchange.net/en/ index.php	
http://www.banpac.org/resources_sugar_ savvy_drink_otter.htm	d. Drink Water Said The Otter - book for preschool aged children that encourages drinking water
20. Orange County Department of Education	Harvest of the Month-resources designed for use in early childhood settings for teachers and parents
<u>http://healthycalifornia.ocde.us/For</u> <u>Educators/Pre-K.htm</u>	

Writing and Implementing Nutrition & Physical Activity Policy



Writing Policy for Child Care Environments

Having a written and implemented nutrition and physical activity policy is a measurement of quality in child care. It will contribute to improving the health of the children in care because it:

- defines the *guidelines* that are the framework of your child care center or home
- · creates a basis for staff training and parent education
- · translates standards and practices into a useable form
- provides consistency and continuity, improving communication with staff and parents

Using the SAQ **and** Best Practices Manual

These two documents work together to provide the necessary tools to write and implement nutrition and physical activity policy for your child care home/center.

- 1. Complete the SAQ and identify the areas found in the SAQ that you would like to include in your nutrition or physical activity policy
- 2. Refer the *Best Practices Manual* to learn more about the best practice, its rationale, and talking points in order to compose a policy statement that best reflects your desired nutrition and/or physical activity policy goal.
- 3. Choose each area you want to include in your policy and use the *best practice work sheets* and sample language for policy as a start to writing your policy in your own words to suit your child care environment.

A Case Study: Nutrition and Physical Activity Policy Development

A family child care home/center has decided to develop nutrition and physical activity guidelines. After completing the *Self Assessment Questionnaire*, several areas in each of the four domains were of interest to include in the policy for the parent handbook and used to train new assistants. In the *Nutrition: Feeding Practices section*, the provider wanted to include the following best practices: menus are posted for parents to see (#4); and portions sizes are age appropriate (#6). In the *Nutrition: Foods Served* section, milk served to children 2 years and older (#24); in the *Physical Activity* section, media time for children is used only for education purposes (#31); and in the *Staff and Parent Training* section, parents are provided information on child nutrition and healthy eating (#35). Using the sample policy statements given in the *best practices worksheets* as a guide, the provider wrote the following guideline (policy) for her child care center/home.

A Case Study: Child Care Nutrition and Physical Activity Guidelines

As a commitment to your child's health, this child care program follows these guidelines in feeding your children and promoting physical activity.

- Menus are posted so that parents will have daily information about their children's nutrition. (Best Practice #4)
- Meals and snacks served to children meet the USDA Child and Adult Care Food Program (CACFP) age appropriate portion and meal pattern and requirements. We serve a variety of foods and encourage their acceptance by offering new foods along with more familiar foods. (Best Practice #6)
- Whole milk is served to children between the ages of 1 and 2. At 2 years, we will serve only 1% or fat-free milk which is a best practice as recommended by the American Academy of Pediatrics. (Best Practice #24)
- Media time (television, videos, and computer use) is always thoughtfully and meaningfully chosen in connection with education goals. (Best Practice #31)
- Parents are provided with information on child nutrition and healthy eating, offered ideas and recipes to use at home, given information about their children's nutrition while in care, and helped to understand that they are important role models for their children's healthy eating. (Best Practice #35)

Best Practice #1 – Parents receive written nutrition policies upon enrollment.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- promotion of healthy options and restriction of unhealthy options
- guidelines on food brought from home
- meals and snacks scheduled at regular times
- children decide which foods they will eat from foods offered
- adults sit with children at mealtime
- · adults eat the same foods as children at mealtime
- menus posted
- · children serve themselves from serving dishes
- · allergies and other special needs taken into account
- foods provided by the site or avoided, such as peanuts

Sample policy:

Food served to children meet the USDA CACFP requirements, promote an acceptance of a variety of foods by offering new foods along with more familiar foods, and are culturally appropriate, respecting all children's food customs.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:





Best Practice #2 – Parents are informed about what their children are eating.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- · how are parents informed—written or verbally
- · what information do they receive
- how often do parents receive this information
- menus are posted
- support parents so they are healthy role models for their children

Sample policy:

Information is provided to parents about their children's daily nutrition by posting menus, having ongoing conversations with teachers, and as part of regularly scheduled parent meetings.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #3 – If food is brought from home, parents are provided with guidelines.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- clear, easy to understand and simply written
- include promotion of healthy options and restriction of unhealthy foods
- consider food safety—preparation, serving, storing, and hand washing
- consider prior approval of foods brought for special occasions
- determine how parents will receive the guidelines

Sample policy:

Food that is brought from home must follow the written guidelines, and be approved in advance for special occasions and holidays.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #4 – Menus are posted for parents to see.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- menus provide daily information to a parent about their child's nutrition
- menus are a visual example of the components of a healthy meal or snack
- posted menus may include descriptive information, such as whole grain cereal, fresh fruit, 1% milk
- snacks are mini-meals and should include the same healthy foods as served at regular meals
- parents are partners in providing good nutrition

Sample policy:

Menus are posted so that parents will have daily information about their children's nutrition.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #5 – Meals and snacks are scheduled at regular times.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- mealtime scheduling—either a meal or snack is offered to children at least every 2–3 hours
- consider including specific serving times of meals and snacks
- mealtime scheduling should allow for relaxed eating and conversation

Sample policy:

Either a meal or a snack is offered every 2–3 hours.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #6 – Portion sizes are age appropriate.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- meals and snacks meet the requirements and portion size recommendations of the Child and Adult Care Food Program (CACFP)
- children serve themselves during meals and snacks with adult supervision
- food is served in a manner that allows children to select age appropriate portions from a variety of foods offered

Sample policy:

Meals and snacks meet the portion size recommendations of the CACFP. Food is served, using child-sized utensils and dishes, in a manner that allows children to select age appropriate amounts from a variety of foods offered.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #7 – Mealtimes are relaxed, calm and with shared conversation.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- quiet time precedes meals to promote relaxed eating
- meal schedules are long enough to allow for relaxed eating and
- sharing pleasant conversation

Sample policy:

A brief quiet time precedes each meal, and meal schedules allow adequate time for passing, serving food, eating and sharing pleasant conversation.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #8 – Children decide which foods they will eat from the foods offered.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- children serve themselves during meals and snacks with adult supervision
- food is served in a manner that allows children to select age appropriate portions from a variety of foods offered

Sample policy:

Children naturally choose a balanced diet when presented with a variety of healthy foods.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #9 – Children are not required to eat all the food on their plates.

To incorporate this best practice into a written and implemented policy,

- these are some ideas to consider:
- the Division of Responsibility for feeding children is that the adult is responsible for *what, when, where,* and the child is responsible for *how much and whether*
- menu planning takes into consideration children's ability to eat successfully on their own

Sample policy:

Children are responsible for how much and whether they will eat, while the adult is responsible for what, when, and where.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #10 – Children serve themselves from serving dishes at mealtime

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- · children serve meals and snacks to themselves with adult supervision
- food is served in a manner that allows children to select age appropriate portions from a variety of foods offered
- utensils and serving dishes are child sized
- adults eat with children to role model appropriate food handling and insure that assistance is nearby

Sample policy:

Children serve themselves during meals and snacks with adult supervision. Foods are served in a manner that allows children to select amounts and varieties of foods they will eat with minimal assistance. Furniture, utensils and dishes are child-sized.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #11 – Children with special needs have their nutrition needs taken into account.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- written description of special nutritional needs
- · family and professional consultations as needed
- · clearly post a list of foods to omit and foods to substitute
- monitor to assure menu and eating skills are progressing appropriately
- maximum self-feeding is encouraged

Sample policy:

Children with special needs have meals planned with professional and family consultation. A written description of feeding needs is required from a child's physician before entering care.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #12 – Food is served in a form that young children can eat with minimum assistance and without choking.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- food is prepared and served appropriately, with consideration for each child's ability to chew, swallow, pick up foods and use utensils
- food is modified as children get older, increasing texture appropriately

Sample policy:

Food is prepared and served with consideration for each child's ability to chew, swallow and feed themselves.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #13 – Adults sit with children at mealtime.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- adults model appropriate mealtime behaviors that contribute to a relaxing and social mealtime experience
- adults help with serving and feeding, are part of the conversation, and prevent choking, spreading of germs or conflict among children

Sample policy:

Adults sit with the children so that mealtime is relaxing and social, that behaviors are modeled and assistance is nearby.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #14 – Adults eat the same foods as children at mealtime.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- adults model appropriate eating behaviors by enjoying the same foods as the children, while supervising the mealtime environment and sharing the meal-time conversation
- adults help with serving and feeding, and prevent choking, spreading of germs or conflict among the children

Sample policy:

Adults eat the same foods as the children in order to be role models for good nutrition, appropriate mealtime behaviors and also provide assistance.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #15 – Foods are served that reflects the ethnicity and cultures of all children in the center/home.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- new foods are offered with familiar foods
- foods are culturally appropriate
- introduction of unfamiliar foods and flavors

Sample policy:

Foods served promote acceptance of a variety of foods by regularly offering new foods along with more familiar foods, and are culturally appropriate, respecting all children's food customs.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #16 – Special occasions and holidays are celebrated with mostly healthy foods or with non-food treats.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- provide guidelines for food brought from home
- consider food safety: hand washing, preparation, serving, and storing
- suggestions for non-food celebration ideas
- scheduling of celebrations
- prior approval for parent requested celebrations

Sample policy:

For celebrations and holiday parties, please provide non food treats or healthy foods, especially fruits and vegetables.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #17 – Parents are provided a supportive breastfeeding environment.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- provide a quiet and private space for parent to breastfeed or express breast milk
- · accurately label all breast milk and store in the refrigerator
- sensitivity to breastfeeding mothers and their babies schedules
- staff trained in handling human milk
- breastfeeding information and resources available

Sample policy:

Breastfeeding mothers are provided a private and comfortable place to breastfeed their babies or express their milk. Sensitivity will be shown to breastfeeding mothers and their babies' schedules.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #18 – Water is freely available both indoors and outdoors.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- · children always have access to safe drinking water
- children are encouraged to drink water throughout the day
- · adults model frequent drinking of water

Sample policy:

Children always have access to safe drinking water and are encouraged to drink water frequently throughout the day.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

NUTRITION: Food Served

Best Practice #19 - 100% juice

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- limit unsweetened 100% juice to 4 fluid ounces each day
- compare nutrient content of juice with the same fruit portion size
- sugar sweetened beverages not served
- water is visible and available for self serving in and outdoors

Sample policy:

Only 100% juice is served and is limited to no more than 4 ounces each day.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

NUTRITION: Food Served

Best Practice #20 – Chicken nuggets, fish sticks, hot dogs, corn dogs, bologna or other lunch meat, sausage or bacon

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- offer fried or pre-fried meats or fish less than once a week or never
- offer beans or lean meats or fish at least once a day

Sample policy:

Fried or baked pre-fried foods such as chicken nuggets and fish sticks, or high fat and high sodium items such as sausage, bacon and bologna are offered no more than two times per week.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

NUTRITION: Food Served

Best Practice #21 – Whole grain bread, oatmeal, whole grain cereal, brown rice, whole wheat tortillas, corn tortillas or other whole grains

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- offer breads, pastas, and grains made from whole grains
- serve whole grain cereals containing 6 grams of sugar or less

Sample policy:

At least half of the breads, cereals and grains offered are whole grains.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:





Best Practice #22 – Vegetables including fresh, frozen or canned.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- serve vegetables at least twice a day
- offer a variety of vegetables, other than potatoes and corn, daily
- include healthy foods (fruits and vegetables) for celebrations and special occasions

Sample policy:

Fresh, frozen or canned vegetables are served at least twice a day, and at celebrations and special occasions.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

NUTRITION: Food Served

Best Practice #23 – Fruit, including fresh, canned in water or own juice, frozen or dried

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- offer a variety of fruit at least twice a day
- include healthy foods (fruits and vegetables) for celebrations and special occasions

Sample policy:

Fruit is served at least three times a day, and at celebrations and special occasions.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:





Best Practice #24 – Milk served to children ages 2 years and older

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- serve fat free or 1% milk to children 2 years and older (American Academy of Pediatrics recommendation)
- serve whole milk to children between 1 year and up to their 2nd birthday

Sample policy:

1% or fat free milk is served to children who are 2 years and older, and whole milk is served to 1 year olds.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #25 – Parents receive written physical activity policy upon enrollment.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- provide frequent information to parents about their child's physical activity
- recognize parents as partners in fostering physical activity
- support parents and staff as role models for physical activity

Sample policy:

Parents are partners in encouraging physical activity for children, and are supported in being healthy role models for their children.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Best Practice #26 – Daily play and planned movement experiences both indoors and outdoors are provided to children

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- amount of time appropriate for toddlers and preschoolers
- regularly scheduled structured and unstructured playtime
- adult role modeling of active behavior
- no more than 60 minutes of sedentary time

Sample policy:

Structured physical activity is provided each day to include 30 minutes for toddlers and 60 minutes for preschoolers. Unstructured indoor and outdoor play times are also included daily. There is never more than 60 consecutive minutes of sedentary time during the day.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #27 – Information is provided to parents about their children's physical activity choices while in child care.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- parents are partners and role models for physical activity
- knowledge of activities enjoyed while in child care may help parents engage their children in physical activity on weekends

Sample policy:

Information is regularly provided to parents about their child's daily physical activity while in care. Parents are provided with ideas for being active with their children on weekends, and support for being healthy role models for their children.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #28 – Staff participate in physical activities with children.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- adults demonstrate movement during structured play while supervising children
- adults role model being active
- adults joining children in physical activity demonstrate that being active is fun

Sample policy:

Staff is a partner in encouraging healthy physical activity for children and in role modeling that being active is fun.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #29 – Restriction of play time is not used as a disciplinary tool.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- children need to be active throughout the day
- restriction of playtime is an inappropriate and ineffective disciplinary tool

Sample policy:

Children are never denied physical activity or play as punishment.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #30 – Activities, equipment and outside play areas are developmentally appropriate and safe.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- children need to be safe while having fun and being active
- equipment meets the National Association for Sport and Physical Education Guidelines for Young Children
- adult supervision and role modeling

Sample policy:

Activities and equipment are age appropriate, and all children will have a safe environment to have fun and be active.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

Best Practice #31 – Media time for children is used only for educational purposes.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- viewing of TV, videos and use of other screen time are restricted, unless they are part of the educational plan
- physical activity is part of daily activity
- adults join children in physical activity and role model that being physically active is fun

Sample policy:

Viewing of television, videos and use of other screen time may occasionally be used as part of an educational plan to teach children about healthy eating and the fun of being active.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



STAFF AND PARENT TRAINING

Best Practice #32 – Training opportunities are provided for staff on physical activity for children.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- staff needs to understand the importance of physical activity for children
- staff needs ideas for implementing physical activity with children during structured play
- staff must understand the importance of their being role models for having fun while being physically active
- recognize parents as partners
- support parents as role models for physical activity

Sample policy:

Staff is provided with training on physical activity for children, that includes ideas for activities to use during structured play, understanding the importance of being a healthy role model for physical activity and supporting parents as partners in being active with their children.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

STAFF AND PARENT TRAINING

Best Practice #33 – Training opportunities are provided for staff on child nutrition.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- staff needs to be taught basic child nutrition
- staff needs to understand the importance of their being role models for choosing and eating healthy foods and teaching healthy habits.
- recognize parents as partners
- support parents as role models for good nutrition

Sample policy:

Staff is provided with training on child nutrition that includes the importance of being a role model for eating healthy foods, teaching healthy habits, and supporting parents as partners in providing good nutrition for their children.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:





Best Practice #34 – Parents are provided information that encourages physical activity at home.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- parents are partners in helping children to be active
- provide parents with ideas for being physically active with their children
- support parents as role models for physical activity being fun
- regularly provide information to parents about their children's physical activities while in care

Sample policy:

Parents are provided with information on physical activity for children, the kinds of activities their children enjoy while in care, ideas for being active with their children at home, and the importance of their being healthy role models for physical activity.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:

STAFF AND PARENT TRAINING

Best Practice #35 – Parents are provided information on child nutrition and healthy eating.

To incorporate this best practice into a written and implemented policy, these are some ideas to consider:

- · parents are partners for healthy eating
- · parents are important role models for their children's food choices
- provide ideas, including recipes, to help parents practice healthy nutrition at home
- regularly provide parents with information about their children's nutrition while in care

Sample policy:

Parents are provided with information on child nutrition and healthy eating, offered ideas and recipes to use at home, given information about their children's nutrition while in care, and helped to understand that they are important role models for their children's healthy eating.

Your ideas to consider:

Your existing policy:

Changes and additions:

Proposed new policy:



Tracking Progress for Policy Development & Implementation

Date	Торіс	Person Responsible	Outcome
mo/day/year	Policy for milk served	Provider	Draft written policy

Decision Check List

Language

	person responsible	completion date	comments
English			
Spanish			
Other			

Presentation/content/interpretation

	person responsible	completion date	comments
Reading level			
Graphics			
Related handouts			

Distribution and implementation

	person responsible	completion date	comments
Flyer/bulletin board			
Parent handbook			
Orientation materials			
Verbal/individual			
Email/web site			
In-service training			
Parent meeting			
Staff meeting			
Other			

Additional Resources



NUTRITION / PHYSICAL ACTIVITY

California Department of Education

Healthy and Active Preschoolers is a nutrition learning center for child care professionals that offers a variety of online courses and resources to improve the nutrition and physical activity environment in child care programs http://www.healthypreschoolers.com

California Healthy Kids Resource Center

The California Healthy Kids Resource Center maintains a comprehensive collection of reviewed health education materials for use by teachers, administrators, university faculty, and other professionals who work with preschool through 12th grade students in school settings and after-school programs.

www.californiahealthykids.org

Best Practices for Healthy Eating: A Guide To Help Children Grow Up Healthy

This guide provides information to child care providers and parents on how to help children in their care grow up healthy. Healthy food guidelines, portion sizes based on CACFP reimbursable meal guidelines, rationale for recommendations and sample policies are included in this resource.

http://www.nemours.org/content/dam/nemours/www/filebox/service/preventive/nhps/ heguide.pdf

Best Practices for Physical Activity: A Guide To Help Children Grow Up Healthy.

This guide promotes and supports quality physical activity for children and youth. Physical activity guidelines for children from birth to 18 years of age are provided along with examples that support guidelines.

www.nemours.org/filebox/service/preventive/nhps/paguidelines.pdf

Let's Move! Child Care

This resource provides recommendations for childhood obesity prevention in early child care that helps inform parents and childcare providers to foster environments that support healthy choices.

http://www.letsmove.gov/blog/2011/06/08/introducing-let%E2%80%99s-move-child-caretools-child-and-day-care-centers-and-family-care-h



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