

Participant's Guide

Tipping the Scales:

Nutrition

Session 1

3 hours

Session 1 Overview

Tipping the Scales: Promoting Nutrition and Physical Activity in Early Childhood Programs, Session 1

Date /Time

Location

Core Competencies

This session addresses the following Core Competencies:

- 1a: Practices safe food handling and observes general sanitation practices.
- 1c: Recognizes health hazards in meals (choking, allergies, etc.) and takes steps to prevent dangerous situations.
- 2b. Provides appropriate meals and snacks in a relaxed and social setting with no coercion.
- 4b. Communicates with families about the foods children need and prefer
- 4c. Plans and evaluates menus.
- 4d. Includes foods from diverse cultures.

Parent Aware Area

Physical Health and Well Being

Learning Objectives

Participants will be able to:

1. Identify health hazards in meals and meal preparation and steps to prevent them.
2. Review menus and make changes based on the MyPlate recommendations.
3. Describe how the environment influences children's food choices.
4. Identify ways to incorporate cultural and family preferences into meal planning.

Session Outline

Section	Overview
Introduction	<ul style="list-style-type: none">• Welcome and Introductions• Activity – Nutritional Self Check• Presentation – Introduction to topic
Why Good Nutrition Matters	<ul style="list-style-type: none">• Activity – Describe your food (part 1)• Presentation – How nutrition affects development• Discussion – Factors Influencing food choice
How Child Care Providers Can Influence Good Nutritional Habits	<ul style="list-style-type: none">• Activity - What makes meal time pleasant?• Presentation– Modeling good health habits at the table • Break
MyPlate	<ul style="list-style-type: none">• Presentation – MyPlate• Share – MyPlate resources• Activity – What's on My Menu?

	<ul style="list-style-type: none"> • Activity – Describe your food (Part 2) • Activity – Complete NAP SACC Self Assessment on Nutrition • Review – Additional considerations for Infants and toddlers
Safety in the Kitchen	<ul style="list-style-type: none"> • Activity – Choking Hazards • Discuss – Additional safety concerns
How Family Preferences And Health Needs Fit Into the Recipe	<ul style="list-style-type: none"> • Discuss – Meeting Individual Needs • Activity – Sharing Resources
Conclusion	<ul style="list-style-type: none"> • Discuss – Assignments • Activity – Review Nutrition Self Check • Activity – Reflection

Session 1

Nutrition Self Check

Answer the questions as either True or False.

	True	False
1. Child care providers influence children's nutritional habits.		
2. Every person working around food has the potential of contaminating a food.		
3. Iron deficiency is one of the most prevalent nutrition problems in young children.		
4. The effects of under-nutrition are only seen in malnourished children.		
5. The media begins to influence food and beverage choices in children around the age of 6 years.		
6. It is not necessary for child care providers to eat the served meals with children.		
7. The new MyPlate guidelines recommend that we use bigger plates to serve meals and that one-third of the plate should be filled with fruits and vegetables.		
8. Chewing gum and carrots are considered choking hazards.		
9. Child care providers can use an epinephrine auto-injector on an any child they suspect is having an allergic reaction.		
10. Serving foods from other cultures is the best way to incorporate diversity into your child care setting.		

Activity: What's on My Menu?

Review the menu below. Highlight the different fruits and vegetables using their color (i.e. orange over the oranges).

Breakfast	½ c clementines Sliced boiled egg ½ slice toast ¾ c milk	½ c orange juice ¼ c cooked oatmeal w/1 T. raisins ¾ c milk	½ slice toast + ½ oz melted cheese ½ c orange sections ¾ c milk	½ c applesauce 1 pancake w/1T syrup ¾ c milk	½ c peaches 1/3 c cereal ¾ c milk
Snack	2 oz. yogurt 2 graham cracker sticks water	½ c carrot sticks w/1T ranch dressing ½ oz wheat crackers water	1 string cheese ½ c apple slices Water	1/3 c cereal w/milk ½ c apple juice water	1 slice banana bread ¾ c milk water
Lunch	1/3 c baked chicken ¼ c steamed broccoli ¼ c apple slices ½ slice bread ¾ c milk	¾ c veggie chili ¼ c fresh fruit salad 1 corn muffin ¾ c milk	½ oz tuna w/1 t. light mayo ¼ c cooked carrots ½ c gelatin w/fruit ¾ c milk	1 tortilla roll up ¼ c black beans ¼ c kernel corn ¼ c grapes ¾ c milk	1 English muffin pizza w/1/2 oz cheese & 1 T sauce ¼ c cooked broccoli ¼ c pear halves ¾ c milk

Rewrite the menu using the new *My Plate* dietary recommendations as well as the food program requirements.

Breakfast					
Snack					
Lunch					

Infants and Toddlers Mealtime Considerations

Infants

- Discuss the infants feeding schedule with the parents. Some parents will follow a self-demand schedule; others will want something on a more timed schedule. Consider having a written infant feeding schedule and/or agreement as part of your policies.
- To warm a bottle, hold it under warm running water or use a bottle warmer until room temperature. Do not use a microwave to warm a bottle; this is a safety hazard.
- Throw out any unused breast milk or formula left in a bottle after a feeding. Rinse the bottle. Do not reuse a bottle containing breast milk or formula after the baby has fed.
- Always wash your hands before feeding an infant.
- Always hold babies who cannot sit while bottle feeding them. Remember that this is a wonderful time to talk to and to build a secure attachment the infant. Never prop a bottle.
- When an infant is old enough to feed themselves with their own bottle, child care providers should continue to sit nearby and to talk.
- Do not allow young children to walk around or to nap with bottles.
- Check with your child care licensing rules for additional considerations.
- Feed only breast milk or formula from a bottle, never juice.

Breast Fed Infants

- Encourage mothers who are breast feeding their infant to continue to do so. Discussing your policies on breast feeding should help alleviate any concerns the mother may have.
- Locate a quiet, comfortable, and private place in your environment that could be available for mothers who are breastfeeding to use.
- Discuss the possibility of a back-up supply of refrigerated expressed breast milk in case the baby needs to eat more often than usual.
- When parent bring expressed milk to your setting, the baby's name and the date/time the breast milk was collected should be labeled on the bottle. Refrigerate bottles immediately when they arrive and until ready to use.
- Fresh breast milk should be refrigerated at 40° Fahrenheit or below and used within 48 hours of the time they were collected
- When handling breast milk, caregivers should wear gloves in accordance with universal precautions safety procedures. Wash skin on which breast milk has spilled with soap and water immediately.
- Do not leave any bottle of expressed breast milk out where another child could accidentally drink it.

Bottle Fed Infants

- Decide who will supply infant formula. While it may be okay to switch from one brand of formula to the next, it is not recommended you change the type of formula used (i.e. iron fortified to one that is not). Encourage parents to speak with their pediatrician if they have any questions about the type of formula they are feeding their infant.
- Water used to mix with infant formula should be from a safe water supply.

- When parent bring prepared bottles to your setting, the baby's name and the date/time prepared should be labeled on the bottle. Refrigerate bottles immediately when they arrive and until ready to use.

Infant Food

- Revisit the infant feeding schedule and/or agreement when the child becomes ready for additional foods, such as cereal. This should occur somewhere in the 4-6 month age range.
- Introduce no more than one new food at a time, typically 5 – 7 days apart. This will make it easier to identify a possible food allergy or intolerance.
- Keep in mind that infants do demonstrate a gag reflex when they first begin to eat; this does not necessarily mean he/she does not like the food.
- Begin with single ingredient foods first. When serving infant cereals, you should start with the rice cereal first. This can be mixed with breast milk or formula. The consistency to which you mix the cereal can gradually thicken as the infant's abilities develop. Do not add a wheat cereal in until after 9 months to prevent possible allergies.
- Do not put cereal into a bottle.
- Fruits and vegetables can be introduced after the infant accepts cereals into their diet, typically around 6 months. It is recommended that you begin with single vegetables; fruits can be added in later.
- Individual food jars or containers should be labeled with the infant's name and the date opened.
- To minimize the risk of cross-contaminations, do not feed infants directly from the jar or container. Do not return uneaten food to the jar.
- For all foods, watch for signs of allergic reactions in children as you introduce new foods.
- 100% fruit juice should only be introduced after 6 months of age. Initially you could limit juice to 3 ounces per day. However, it is suggested that all children ages 1 – 6 years get no more than 4 – 6 ounces of juice per day. Avoid giving infants orange juice due to the acidity content.
- Meat and meat alternatives are typically introduced around 8 months of age.
- Around 9 months, you should plan to revisit the infant feeding agreement and/or schedule again. This is the time when infants will be getting ready to begin drinking from a cup, eating finger foods, wean off bottles (around 12 months) and in general, become more independent.
- You may introduce a cup as children's diet and skills advance, somewhere around 9 months. This works well with the introduction of juice in their diet.
- Finger foods may also be introduced somewhere around 9 months. Remember that not all finger foods are alike; for example, some crackers may come apart in larger chunks that can create a choking hazard. Monitor children carefully as they become more independent in their skills.
- Inspect all finger foods for potential choking hazards.
- Infants capable enough to sit up while eating can be put into a low chair, "me-do" chair, or high chair at mealtime.
- Remember that daily milk intake will decrease as the infants food intake increases. However, do continue to offer breast milk and/or iron-fortified formula until they reach 12 months.

Additional Considerations for Toddlers

- Children ages 1 – 2 years should be given whole milk to promote healthy brain development.
- Remember to give only 100% fruit juice and no more than 4 – 6 ounces per day.
- Use a variety of colors, textures, and tastes in your meal planning. Remember that new foods may need up 8 – 12 exposures before a child will accept it.
- Meals should be served with child-sized dishes and utensils at a table they can sit comfortably at.
- Children should eat at the table until they are done. Encourage those who finish to talk and to interact with the children still at the table.
- Clean and sanitize the chairs, tables, and tray tops immediately after the child is done eating.

Reflection

Take a few minutes to reflect on what you have learned in this session of this class. Use the spaces below to capture your ideas and plans for action.

In this session I learned...

Based on what I learned, some things I plan to do ...

This session started me thinking about...

Session 1 – Assignments

1. Go to the MyPlate website at <http://www.choosemyplate.gov/index.html>. List 1 thing you will use from each of the following categories:
 - new information that you learned;
 - activity or recipe to use in your child care setting; and
 - resources to share with parents.
2. What's On My Menu? This assignment will be similar to the activity done in class. Copy one week of your current menu into the top portion of the attached assignment. Evaluate your menu based on the color of the fruits and vegetables you are offering that week as well as the MyPlate recommendations. Answer the following questions: what did you learn? What changes did you make on the menu? Why (or why not) did you make the changes?
3. Go to <http://www.center-trt.org/index.cfm>. This is the Center of Excellence page through the University of North Carolina at Chapel Hill. On the left side, click on the Obesity Prevention tab; then click on the NAP SACC tab (on the left side as well). Once there, click on the Intervention tab (right side of screen). This will pull up a tab that states "Click here to download the NAP SACC Materials. You will now have access to a variety of free materials on obesity prevention for both child care and parents.

Compare your Nutritional Self-Assessment, completed earlier in class, to the NAP SACC Best Practice Recommendations. Be ready to discuss what you learned in the next session.

Additional Resources

American Academy of Pediatrics

www.aap.org

A Parent's Guide to Childhood Obesity: A Roadmap to Health provides solutions and resources for parents and other caregivers who are concerned about childhood obesity and overweight children and for those parents and others who simply want to learn how to help children lead healthier, more active lives.

American Dietetic Association

www.eatright.org

Resources and information on healthy eating including, fact sheets and brochures that provide nutrition facts along with healthy eating tips and recipes, including a brochure done in collaboration with Gerber on feeding babies called Start Healthy: The guide to teaching your little one good eating habits.

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>

Choose MyPlate

www.choosemyplate.gov

The website features practical information and tips to help Americans build healthier diets. It features selected messages to help consumers focus on key behaviors.

National Dairy Council

<http://www.nationaldairycouncil.org/Pages/Home.aspx>

This website features the latest news, research, and educational materials including downloadable fact sheets, research summaries, recipes, child nutrition lessons, and more.

USDA TEAM Nutrition

www.fns.usda.gov/tn

Team Nutrition is an initiative of the USDA designed to support its Child Nutrition Programs. The project includes a variety of educational and promotional materials to help teach children the importance of healthy eating and physical activity.

USDA TEAM Nutrition

www.fns.usda.gov/tn

Team Nutrition is an initiative of the USDA designed to support its Child Nutrition Programs. The project includes a variety of educational and promotional materials to help teach children the importance of healthy eating and physical activity.

