Child Care Healthy Eating and

Active Living Guidelines
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Visit us online at ottawa.ca/health or email us at healthsante@ottawa.ca.
Introduction

Rationale for the Guidelines

Child care is an important setting for promoting physical activity and healthy eating in young children.\textsuperscript{1,2,3} The first five years of a child’s life are a critical time in their growth and development when many lifelong healthy eating and active living habits are being formed. With many children under five spending most of their day in care, child care providers have great influence on children’s daily routines, eating behaviours and participation in physical activity. In Ontario, one in five (21%) children ages two to five years-old are considered overweight or obese. Promoting healthy eating and physical activity in child care environments is an important strategy in the prevention of these trends.

Ottawa Public Health partnered with the City of Ottawa Municipal Child Care Services to develop the \textit{Healthy Eating and Active Living Guidelines}. These guidelines were created based on current evidence and best practices in the field of health and child care. The \textit{Healthy Eating and Active Living Guidelines} help ensure consistent standards of practice in the child care setting and recommend that:

\begin{itemize}
\item All children are provided with healthy food and a positive eating environment while in care.
\item All children, while in care, spend less time sitting and more time learning basic movement skills through play.
\item All children have a wide range of opportunities to be active while in care. This includes adult-led activities, and time for active free play indoors and out.
\item Child care staff act as role models for healthy eating and physical activity.
\end{itemize}

These guidelines are available for use in all child care centres. Supporting information is provided through additional resources, such as menus, recipes and training e-modules.

For more information or to access additional resources please visit Ottawa.ca/health, contact the Ottawa Public Health Information Line at 613-580-6744 or send your request by e-mail to healthsante@ottawa.ca.

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Healthy Eating Guidelines

Overall Goal

Child care centres promote healthy eating by providing a wide range of nutritious and safe foods in a positive and supportive environment in accordance with the Child Care and Early Years Act, 2014, Canada’s Food Guide and Nutrition for Healthy Term Infants.

Guidelines

A. Healthy Eating Environment

1. Provide parents with healthy eating information, resources and access to community services.

2. Create an environment that promotes healthy eating.
   a. Serve meals and snacks in a ‘family-style’ setting where staff eat together with children.
   b. At least one staff member should sit with the children and eat the same meal with them.
   c. Remove all screens, toys, books or other distractions while eating.
   d. Give children enough time for meals and snacks. Allow for at least 20 minutes to eat a snack and at least 30 minutes to eat a meal.
   e. Give children enough space to eat. Children should sit at the table when eating.
   f. Do not use food or beverages to reward, punish, or comfort.
   g. Infants are fed on demand following cues for hunger and fullness or according to the written feeding plan provided by parents.

3. Support and encourage exclusive breastfeeding for the first six months of a child’s life, with continued breastfeeding along with solid foods for two years and beyond.
   a. Allow mothers to visit and breastfeed their child during the day anytime, anywhere.
   b. Provide a quiet space with a comfortable chair, table, a nearby electrical outlet and access to running water for mothers to breastfeed or express their milk.
   c. Display breastfeeding-friendly information.
   d. Create space in the refrigerator to store expressed milk. Breast milk should be labelled with the child’s name and date. Breast milk should be adequately refrigerated at a temperature of no more than 4°C or 40°F.
4. Be a positive role model. Make mealtime a pleasant, social time and a learning opportunity as well as being a time to eat.
   a. Encourage children to talk and have conversation. Use mealtime as an opportunity to talk about table manners, food and nutrition concepts.
   b. Make healthy food and eating fun. Offer and encourage the children to sample a variety of new healthy foods.
   c. Involve children in some aspects of mealtime such as preparation, service and clean-up.
   d. Celebrate special events in a healthy and fun way. Celebrate without food or if food or beverages are served, offer healthy choices.

5. Follow the Division of Responsibility model.
   a. The child care provider is responsible for:
      - What food is served;
      - When it is served; and
      - Where it is served.
   b. The child’s responsibility is to decide:
      - Which foods to eat and
      - How much they want to eat.

6. Help children feel good about themselves.
   a. Focus on strengths and abilities to build their self-esteem.
   b. Accept that healthy bodies come in many shapes and sizes through your attitude, language and comments about your own or a child's body.

7. Create an environment that restricts marketing of unhealthy foods and beverages.
   a. Do not allow any form of food and beverage marketing (e.g. educational materials, prizes, giveaways).
   b. Fundraise without food or sell healthy food for fundraisers.
   c. Do not enter into incentive programs with food and beverage companies.

**B. Menu Planning**

1. Use Canada’s Food Guide or Canada’s food Guide - First Nations, Inuit and Métis to plan meals and menus.

2. Set regular meal times. Provide meals or snacks every 2 to 3 hours.

3. Offer children a variety of foods on their plate from which to choose.

4. Include vegetables and fruit in each meal and in at least one snack.
5. Serve meals that include a variety of choices from each of the four Food Groups:
   - 2 or more choices from Vegetables and Fruit
   - 1 choice from Grain Products
   - 1 choice from Milk and Alternatives
   - 1 choice from Meat and Alternatives

6. Serve 2 to 3 snacks per day with at least one snack in the morning and one in the afternoon.
   a. Snacks should include at least one choice from two different Food Groups (e.g., yogurt with banana, pita with cucumbers and tomatoes).
   b. Serve at least one choice from Vegetables and Fruit at each snack.
   c. Make snacks not too large so they do not interfere with a child’s appetite for meal time.
   d. Offer snacks that promote dental health.

7. Plan menus on a 6-week cycle.
   a. Post the current and the following week menus in a visible place.
   b. Post any substitutions made to menu items and document in a log.
   c. Include foods that reflect cultural diversity.
   d. If alternatives are offered due to allergies or for cultural reasons, they should resemble as much as possible the foods offered to the other children.

C. Nutritious Food and Beverages

1. Prepare meals and snacks using healthy ingredients.

2. Do not serve processed foods and beverages that are high in added sugar, salt and fat.

3. Choose foods and beverages high in nutritional value. Refer to the Healthy Foods Choices list.

4. Beverages:
   a. Make tap water the beverage of choice and have it accessible to the children at all times.
   b. Do not serve juice (including 100% fruit or vegetable juice), fruit flavoured drinks and other sweetened drinks in the form of beverages, frozen juice, popsicles or “freezie-type” snacks.

5. Vegetables and Fruit:
   a. Serve at least two different choices of vegetables at meals.
b. Serve at least one dark green, orange and red vegetable or fruit each day.
c. Choose seasonal vegetables and fruit whenever possible.

6. **Grain Products:**
   a. Whole grains are the preferred choice for grain products.
   b. At least half of daily grain products should be whole grain.

7. **Milk and Alternatives:**
   a. Serve milk at lunch after the children have finished eating.
   b. Serve breast milk to children of any age whose parents supply expressed breast milk.
   c. Cow’s milk is the milk of choice for all children unless otherwise specified by the parent such as breast milk.
   d. 3.25% M.F. cow’s milk is served to infants (9-12 months of age) and toddlers until age 2.
   e. 2% M.F. cow’s milk is served to preschool children.
   f. 1% M.F. cow’s milk is served to school-aged children.
   g. If soy beverage is served it must be fortified. Do not serve rice, almond and other beverages unless specified by a parent.

8. **Meat and Alternatives:**
   a. Serve meat alternatives at least once a week. Choose legumes such as dried beans, chickpeas and lentils, eggs, and tofu. All canned legumes are drained and rinsed with water before use.
   b. Serve fish at least once a week. Choose fish low in mercury such as light (not white) tuna, salmon, cod, haddock, halibut, pollock, tilapia.

9. **Other Foods:** Limit the use of accompaniments and sauces such as margarine, butter, ketchup, mustard, relish, mayonnaise, sauces, salad dressings, gravies, jams, jellies, cream cheese and pickles.

10. Compare the **Nutrition Facts** table on food labels to make healthy food choices.

**D. Healthy Cooking Techniques**

1. Use only healthy food preparation techniques such as baking, broiling, and steaming. Do not deep fry.
2. Use little or no salt in cooking and less sugar in baking.
3. Use small amounts of unsaturated fat such as canola, olive or soybean oil, non-hydrogenated margarine and mayonnaise. Limit use of butter. Do not use hard margarine, shortening and lard.
4. Store, prepare and serve all food so as to retain maximum nutritive value and prevent contamination.

E. Food and Eating Safety

1. Infectious Disease Prevention:
   a. Food handlers are certified on safe food preparation at least every five years.
   b. Child care staff, other than food handlers, receive regular updates on safe food handling practices.
   c. Any individuals with vomiting and/or diarrhea must not handle food and must be excluded from work until they are at least 24 hours symptom free. These individuals should follow the outbreak guidelines set out by Ottawa Public Health.
   d. Promote and establish a proper hand washing routine before meals and snacks for child care staff, parents and children.
   e. Keep all surfaces clean as per guidelines provided.

2. High Risk Foods:
   a. High risk foods are not served including sprouts, raw fiddleheads, undercooked meat, poultry, eggs or fish, smoked fish and unpasteurized products such as dairy products, eggs, juices, ciders and honey.
   b. No honey (pasteurized or not) is served (or used in cooking) to children under age one.

3. Choking Hazards and Food Allergies:
   a. Avoid foods that cause choking.
   b. Accommodate food allergies and restrictions as much as possible. Post allergy information in the cooking and serving areas.
Active Living Guidelines

Overall Goal

Child care centres promote physical activity and healthy childhood development by following best practices in childhood physical activity and by providing children with the appropriate time, instruction, equipment, and environment to support the development of physical literacy.

Educators at child care centres will be provided with the knowledge, training and tools to enable children in their care to reach their potential to develop physical literacy skills, school readiness and adopt healthy living behaviours.

The intent of these guidelines is to enable child care educators to promote, role model, and engage children in daily physical activity and provide opportunities for children to develop physical literacy skills.

Guidelines

A. Active Living Environment

1. Provide parents with physical activity and physical literacy information, resources and access to community services.
2. Take an active role in teaching and promoting age appropriate physical activity and physical literacy skills while considering children’s abilities and temperaments.
3. Stay current with the latest research around ways to promote physical activity, physical literacy and reducing sedentary behaviours in children.
4. Have a positive attitude towards physical activity by encouraging all children to participate in physical activity and never withholding it as punishment.
5. Adapt indoor and outdoor space to create an environment to support active play and to develop physical literacy skills.
6. Provide age appropriate toys, portable play and sports equipment to promote physical literacy.
7. Make the space safe for children to be physically active and learn physical literacy skills.
B. Sedentary Behaviours

1. No screen time for children who are less than 4 years of age.
2. Start moving. Infants and children should not be sitting for more than an hour when awake.

C. Active Play

1. Play on the floor with infants several times a day to teach gross and fine motor skills.
2. Provide regular periods of physical activity throughout child care programming to support children reaching the recommended daily 180 minutes, including:
   a. At least 60 minutes per day of child-led active play inside and/or outdoors.
   b. At least 30 minutes per day of moderate-to-vigorous physical activity encouraged and guided by adults.
3. Ensure children with disabilities and special needs receive the support or equipment needed to help them take part in physical activity.

D. Physical Literacy

1. Provide at least 30 minutes per day of physical literacy promoting activities.
References and Credits:

The Healthy Eating guidelines were developed based on the recommendations of:


With permission, these guidelines have been adapted from child care nutrition guidelines used by the following health units:

- Hamilton Public Health Services, Simcoe Muskoka District Health Unit and York Region Community and Health Services.

The Active Living Guidelines were developed based on the recommendations of: