

# Getting Started with Good Nutrition, Health & Wellness

A practical guide to help Vermont  
child care centers create a healthy  
learning environment.

2013

# Acknowledgements

*"This guide would not have been possible without the contributions made by the Vermont child care centers who participated in the Green Mountain Healthy Kids Challenge."*

All-4-One (Springfield School District)  
Champlain Islands Parent Child Center  
Emerson Falls Play Care  
Family Center of Washington County  
Frog & Toad Childcare Learning Center  
Growing up Right at the CDD  
Happy Days Playschool  
Kid Stop Childcare Center  
Little Critters Children's Center  
Lund Early Childhood Program  
Mary Johnson Children's Center  
Milton Family Community Center  
NEKCA Head Start  
New Beginnings Child Care Center

New Leaf Family Center  
Northshire Day School  
Otter Creek Child Care  
Peanut Gallery  
Pine Forest Children Center  
Playworks Child Center  
Round Hill Kids  
SEVCA Head Start  
Sunrise Family Resource Center  
Suzy's Little Peanuts  
The Learning Tree  
Windham Evening Child Care  
Y Early Childhood Program @ St. Albans

## Contributors

### Project Coordinator

Amy Gifford

### Child Care Advisory Team Leader

Karen Abbott

### Evaluator

Linda Berlin

### Author

Helen Labun Jordan

### Designer

Katie Rutherford

### Editor

Helen Ballard

**Thank you to the mentors who shared their time, guidance and resources with the childcare center teams.**

**Amethyst Peaslee**, Resource Development Specialist, Mary Johnson Child Care Support Services

**Cynthia Greene**, Health and Early Childhood Service Coordinator, Child Development Division

**Karen Abbott**, Child and Adult Care Food Program Specialist, Agency of Education

**Marla Ianello**, Pre K Consultant, Upper Valley Healthy Eating Active Living

**Michele Wheeler**, Child and Adult Care Food Program Consultant

**Sheri Lynn, Consultant**, VT Head Start-State Collaboration Office, Child Development Division, Department for Children and Families

**Todd Perry**, Public Health Specialist, Department of Health

# Contents of this Guide



## Introduction 4

- 4 How did this guide begin?
- 5 What will I find in this guide?
- 5 How does this guide fit in with other child care center resources?
- 5 A Note on Policy vs. Practice



## Creating a Wellness Policy 35

- 35 Benefits of developing a wellness policy
- 36 8 steps to developing, or improving, your policy



## Getting Started 6

- 6 Evaluate your starting point
- 7 Define your goals
- 7 Set priorities
- 8 Make an action plan
- 8 Move from planning to doing



## Additional Resources 39

- 40 Wellness Resources
- 48 Self-Assessment Worksheet
- 62 Action Planning Template
- 73 Promising Practices Template
- 74 Wellness Policy Worksheet
- 76 Mary Johnson Children's Center Wellness Policy



## Promising Practices 9

- 9 Introduction
- 10 Nutrition Standards
- 15 Eating Environment
- 20 Nutrition Education
- 24 Physical Activity
- 28 Communication, Promotion & Monitoring



The goal of this guide is to offer guidance and practical ideas to child care centers interested in improving their approach to nutrition, nutrition education, physical activity, and wellness.

The content is based on a framework of national recommendations combined with tips, tools, and practices tested through on-the-ground, local experience. It is understood that resources are limited and it is not possible to implement all the ideas presented here at once, but by offering a wide variety of possibilities we hope that all centers can find first steps that work for them and support them in their quest to help Vermont young children establish healthy lifelong habits.

### HOW DID THIS GUIDE BEGIN?

Today, more than one-third of children are overweight or obese. And because habits formed in early childhood tend to carry into adulthood, these children are likely to continue to struggle with obesity. (For the most recent statistics on childhood obesity, visit the Centers for Disease Control at [www.cdc.gov](http://www.cdc.gov).)

Since children who establish healthy patterns of nutritious eating and regular physical exercise are more likely to continue those practices as they grow up, Vermont's child care centers are in an ideal position to play an important role in determining children's lifelong approaches to health and wellness through nutritious meals and snacks, daily physical activities and education for both children and parents.

In September 2011, the Vermont Agency of Education was awarded a two-year Team Nutrition Grant from the USDA to create the Green Mountain Healthy Kids Challenge (GMHKC). The purpose of GMHKC was to expand and enhance training programs that incorporate and implement the 2010 Dietary Guidelines for Americans in meals served under the Child and Adult Care Food Program (CACFP) by focusing on three behavior-focused strategies:

- Provide training and technical assistance to child nutrition foodservice professionals to enable them to prepare and serve nutritious meals that appeal to children.
- Provide fun and interactive nutrition education for children, teachers, parents and other caregivers.
- Build school and community support for creating healthy environments that are conducive to healthy eating and physical activity.

Twenty-eight child care centers participated in GMHKC. They were selected by application and over the course of two years they:

- Attended three training sessions on dietary guidelines, physical activity, and nutrition education.
- Created an action plan for improving health and wellness at their center.
- Received mini-grants for purchasing materials and supplies to implement priority projects.
- Worked with a mentor who supported implementing the new health and wellness approach.
- Completed evaluations that tracked change over the course of the Project.

This guide reflects the key components of what was learned through GMHKC. It includes the background information and resources that GMHKC participants used to evaluate their current practices, a step-by-step guide to forming action plans, how-to instructions and examples for adopting some of the successful practices and information on how to create a larger context for health and wellness through developing useful policies.

## WHAT WILL I FIND IN THIS GUIDE?

Small changes can make big differences. This guide offers a lot of small steps that can significantly impact nutrition and physical activity practices. They are the first steps in a larger project that can take shape over time and engage staff, parents, and even the community in envisioning what is possible.

The promising practices highlighted in this guide are part of a larger health and wellness picture. They hold the potential to move child care centers toward national standards experts recommend for child care centers. This guide also outlines that bigger picture and provides resources for learning more. The guide has four parts:

### Getting Started

Resources to evaluate where your center is now, choose priorities for improvements, and create clear action plans for moving forward.

### Promising Practices

Examples of projects, approaches, and tips from other child care centers. These examples come with tools that make it easy to try them out.

### Creating a Wellness Policy

Ideas for how to keep momentum once you've started new health and wellness projects.

### Additional Resources

Handouts, assessments, templates, and other resources referenced in the text.

## HOW DOES THIS GUIDE FIT IN WITH OTHER CHILD CARE CENTER RESOURCES?

This guide focuses on small but significant practical steps child care centers can take to build a healthy learning environment. It does not go into regulations governing specific programs like the Child and Adult Care Food Program (CACFP) or Head Start, but supports these programs through suggested practices to enhance the health and wellness of children while still meeting local, state and national standards and regulations.

## A NOTE ON POLICY VS. PRACTICE

Policies set direction, shape programming and establish expectations for administration, staff and parents. So traditionally policy is developed first then used as the basis for establishing practices. However, developing an overall policy can be a time-consuming and daunting task and during this project child care centers found that beginning with one or two key practices and seeing the results demonstrated to staff, parents, children and the community that change and improvement are possible. It also made it easier to ultimately gain support for the policy development process. So for centers that do not already have nutrition policies in place, it may make sense to begin with changing practices then move on to creating policies around the practices.

If a center already has a policy in place, then practices can be developed to support the policies. For example, at Suzy's Little Peanuts, each classroom has a routine at the start of mealtime. These routines include a transition activity, hand washing, setting the table, and family-style serving of food. Teaching teams set the routine for their particular classroom and that becomes their practice. All the routines are created following an existing policy that outlines the sort of eating environment children experience at Suzy's Little Peanuts. While the specific routines change across classrooms and over time, they consistently follow the core policy.

Because this guide reflects the experiences of the majority of child care centers participating in GMHKC, it is organized to place the promising practices before the policy development. You will need to determine if it makes more sense for your center to start with developing, or refining, a wellness policy before implementing new practices. Either way, the process begins with a self-assessment, which is explained in the next section.



# Getting Started

This section gives a quick overview of how to choose your first, or next, steps. As mentioned in the introduction, this guide contains more ideas than anyone could ever implement at once. The steps in this section offer one route to identifying priority projects and determining how best to start work on them.

## Evaluate Your Starting Point

A detailed self assessment tool for comparing your current practices with national recommendations for best practices.

## Define Your Goals

The self assessment can be used to identify areas in need of attention, helping to establish goals.

## Set Priorities

Of the many possible goals for the next year, what are the priorities?

## Make an Action Plan

An action plan provides a clear outline for how will you address the areas that have been prioritized.

## Move from Planning to Doing

Equipped with a well-informed plan you are ready to begin taking action to implement changes.

## EVALUATE YOUR STARTING POINT

One of the first GMHKC activities was filling out a self assessment questionnaire about how each child care center promoted good nutrition and physical activity.

You probably have a starting idea of what's going well and what could stand some improvement in your child care center. Taking a full inventory of best practices, however, goes into much more detail. You could spend weeks just figuring out a list of all the possible best practices, much less evaluating where you fall on that list. To simplify the process, GMHKC participants used an existing self assessment, which you can find in the Additional Resources section.

Participants in GMHKC used the self assessment to:

- Become familiar with best practices recommended by national experts. (These recommendations form the basis for questions asked on the self-assessment.)
- Build a vision of longer term goals.
- Prioritize what to work on first.
- Create action plans for change over the course of the year.
- Get all staff on the same page for thinking about what's happening now and what needs to happen in the future.
- Talk with parents. They will be happy to know all the good practices already in place, and also the specifics of what's going to happen next so they can reinforce these ideas at home.

- Measure the impact of activities during the GMHKC project by completing evaluations at the beginning and end of the year.
- Start to build a record of changes, progress and future goals for the child care center.

Take a minute to skim the Self-Assessment Worksheet (p. 48-61) and you'll see that it covers a lot of ground. In fact, it has 128 different practices to consider and that's not including ones that are on your personal priority list separate from what the experts recommend. It's a little daunting. But, as the next two sections describe, this level of detail will make it much easier to identify first steps and get started on projects without feeling like everything needs to be done tomorrow.

## DEFINE YOUR GOALS

As part of their application to GMHKC, participants were asked to list the nutrition and wellness goals they wished to address. The most-often listed goals were:

- Involve children's families, and the whole community more in health and wellness activities.
- Make better use of school gardens and/or local foods.
- Plan for more educational elements in activities like playtime or mealtime.
- Improve menu planning.
- Add diversity to physical activity options.
- Create policies and offer professional development to ensure everyone on staff gives consistent health and wellness messages to children.

You probably have at least one of those goals on your own list, too. These general goals didn't necessarily change over the course of GMHKC, although some participants did shift to other priorities after completing the self-assessment. But notice how most of us think in terms of broad goals when we first list what we want to accomplish. Knowing that we want to be "better" in one area is a great start - doing something about it requires both defining "better" and knowing what steps bring us towards that goal.

The self-assessment tool in the Additional Resources section helps refine big goals by organizing them into different categories and breaking them into specific tasks. The categories it uses are:

- Nutrition Standards
- Eating Environment
- Nutrition Education
- Physical Activity
- Communication, Promotion & Monitoring

Within those categories, the assessment breaks goals down into more specific details based on national guidelines. So, for example, from Eating Environment, you might go to Meal Schedules, and to the specific issue of whether scheduled mealtimes provide children with at least 20 minutes to eat breakfast. That level of specificity gives a clear indication of next steps.

The downside of having so much detail is that you might be left with dozens of possible next steps. GMHKC participants also used tools for setting priorities and selecting specific actions from those priorities.

## SET PRIORITIES

After drawing up a list of potential changes to your child care center's approach to health and wellness, you'll have to prioritize which to start on now and which can wait (unless it's an exceptionally short list). There are various ways to set these priorities. For example:

- Decide realistically how many areas of work you want to tackle at once. That number might depend on the size of your staff, the level of interest in nutrition and wellness policies, and what other projects you have planned for the next year. Here is where the evaluation tool is particularly important - just because you don't work on something this year doesn't mean it's forgotten, it's still on the list and will appear in future years' evaluations too.
- Look for clusters of evaluation questions where your center isn't currently using best practices, for example if you answer "partial" or "incomplete" to all the questions about engaging parents, that might be a good place to start.
- Talk with everyone on staff about their priorities. Either broad

consensus on a few needs or an enthusiastic champion willing to work on a specific area can indicate a good starting point.

- Talk with parents about what interests them the most. You'll see that many promising practices involve engaging parents; that engagement can start during the planning stage.
- Look around the community for relevant projects starting up. If your town has a new initiative for physical activity for children, for example, then taking advantage of that new resource could be a great opportunity to highlight physical activity for children in your center.
- Think about your own personal priorities, what would you enjoy working on over the next year? If you have a list of areas for work that are all equally important, it makes sense to start with the one that interests you the most and will show your enthusiasm for the project.

## MAKE AN ACTION PLAN

Once you have the list of priority needs you can develop a basic plan of action to address them. There are templates for each category starting on page 62 in the Additional Resources section can help you organize your thoughts about next steps. Each template covers:

- Statement of Purpose (Why are you doing this)
- Goals for the Next Year
- What Needs to Be Done
- Who is Responsible
- Timeline
- Resources Needed
- How Progress Will Be Tracked
- How Impact Will Be Evaluated
- Long-Term Ideas & Goals for Future Years

Note that these questions balance what can be accomplished now

with bigger visions for the future. They also specify a lead person for each action. Mentors involved in GMHKC reported that being very clear about who had responsibility for specific tasks was vital to a successful project.

Also, although it's easy to overlook questions that plan for tracking progress and evaluating impact, these components are an important part of maintaining a sense of accomplishment and momentum. It's hard to get everyone excited about continuing a new initiative if they can't see the progress of what they've already done. Plus, without evaluating what's working you can't know what approaches to continue and which might need to be changed.

## MOVE FROM PLANNING TO DOING

At this point in the guide, we've moved from a broad assessment of health and wellness practices in child care centers, to defining what that actually means for your child care center, to breaking the work up into manageable and prioritized pieces, to planning how to tackle the priority issue areas. Now it's time to actually do something with the plans.

Of course, what might look simple in the planning stages becomes more complicated in the actual doing stage. Fortunately, the GMHKC participants took the plunge first. They followed a very similar planning process to what was outlined here, then started work on those plans. After a year of work, we collected information on how their projects turned out. In Promising Practices we've put together that information in tools, examples, and resource lists.

# Promising Practices

The following sections provide examples of projects at Vermont child care centers in the categories of:

- 10 Nutrition Standards
- 15 Eating Environment
- 20 Nutrition Education
- 24 Physical Activity
- 28 Communication, Promotion, & Monitoring

While each individual center participating in the Green Mountain Healthy Kids Challenge had its own goals, there were many common experiences and lessons learned that can be useful to any child care center in Vermont. At the end of the program, we collected information about practices that GMHKC child care centers believed improved their approach to wellness.

Centers shared practices that received positive reactions from staff, parents, and children, that were practical to implement, and that set the stage for future improvements. This Promising Practices section captures what they reported.

Some overall recommendations from GMHKC child care centers:

- Start with a manageable project. You don't need to do everything at once.
- Baby steps do make a difference, so don't overlook small changes that can add up to something big.
- Involve parents as much as possible.
- Use what other people have already done. Even if you are tailoring practices for your own center, you can adapt others' ideas.

# Nutrition Standards

Food served in child care centers can put kids on the right track for healthy eating. When child care centers meet best practices for good nutrition, they not only make sure kids have healthy diets while in their care, they also make it easier for parents to balance their children's diets during the day. Plus, modeling a good diet at mealtimes reinforces the nutrition education that centers can provide.

Some of the key parts of good nutrition standards for child care are:

- Planning menus that both reflect healthy choices and make these foods enjoyable through variety, exploring foods of other cultures, trying fresh local foods, and other strategies.
- Planning ahead for ways to celebrate special events that include healthy, nutritious foods.
- Working with parents to ensure that the foods they might contribute also reflect healthy choices, including parent provided snacks, food at events and food as part of fundraisers.
- Providing for the special needs of infants, particularly supporting mothers in breast feeding their infants.
- Accommodating special dietary needs of all children.
- Emphasizing water as a healthy beverage, and providing fresh drinking water to children at all times.

## WHAT ARE VERMONT CHILD CARE CENTERS DOING?

The child care centers that participated in GMHKC each chose their own focus within the broad topic of Nutrition Standards. Many centers chose to work on menu planning, expanding the diversity of foods children ate and also substituting in healthier ingredients such as whole grains. Centers also worked in areas that involved parents, such as finding ways to celebrate special occasions without unhealthy food and ensuring that food from home met center standards for nutrition. At the end of the GMHKC period, participants reported back ideas they implemented. You will find those ideas on the following pages.



## GET THE MOST RECENT INFORMATION ON NUTRITION STANDARDS

Most of us haven't memorized the recommended nutrition standards for children and infants, much less why each standard exists. These sites that will help you get more information on nutrition standards.

### The Dietary Guidelines for Americans

[www.DietaryGuidelines.gov](http://www.DietaryGuidelines.gov) or [www.health.gov/dietaryguidelines](http://www.health.gov/dietaryguidelines)

### Federal Food Assistance Programs: Child and Adult Care Food Program, Head Start and WIC are all found at

[www.nutrition.gov/food-assistance-programs](http://www.nutrition.gov/food-assistance-programs)

**Child and Adult Care Food Program in Vermont** – Visit the Agency of Education site and, from the Index link, go to Child Nutrition.

[www.education.vermont.gov](http://www.education.vermont.gov)

### WIC – Women, Infants and Children in Vermont

[www.healthvermont.gov/wic](http://www.healthvermont.gov/wic)

**The Vermont Head Start Association** provides links to regional Head Start service providers

[www.vermontheadstart.org](http://www.vermontheadstart.org)

## Menu Planning

Planning menus ahead of time helps with more than just making sure they follow nutrition standards. Otter Creek Child Center used the planning process to save money they could invest in local foods. After completing GMHKC, the Family Center of Washington County reported that the upfront work for a 5 week menu cycle led to a lot of saved time later in the year.

## Use Recipes that Are Linked to Nutrition Standards

Many of the same organizations who develop recommendations for good nutrition also create the tools to help you cook recipes that match what they recommend. The USDA's Food and Nutrition Service branch provides an overview of some of the top resources at this site: [www.fns.usda.gov/fncs-recipe-box](http://www.fns.usda.gov/fncs-recipe-box). You can use the links there to find recipes, menus, and even build your own virtual cookbook. This page also highlights which sources are designed with child care centers in mind.

## Experiment with Whole Grains

Dietary guidelines call for some ingredient substitutions, like baking with more whole grains. The Growing Up Right child care center tells the story of one child helping bake with the "brown flour" (whole wheat). She wouldn't eat whole wheat bread, but as the center tried out different baking experiments, she discovered that she likes how brown flour tastes in muffins. Growing Up Right has found that the *King Arthur Flour Whole Wheat Cookbook* has plenty of interesting recipes to try. King Arthur Flour also has a blog where they give baking tips at [www.kingarthurfLOUR.com/blog](http://www.kingarthurfLOUR.com/blog). Just because one whole grain recipe isn't a hit doesn't mean that the next one won't be!

## Use Local Farm Products to Add Healthy Diversity to Your Menu

Otter Creek Child Center found that careful menu planning saved money, and they could spend those savings on more fresh fruits and vegetables. They even subscribed to a Community Supported Agriculture (CSA) share to get ingredients from a local farm. These CSA shares offer a lower price on local food, if you commit to receiving a certain amount of food each week for the share season. The food provided reflects what's in season and you'll be working with the freshest ingredients possible. If you're interested in CSA's, NOFA-VT maintains a list at [www.nofavt.org](http://www.nofavt.org).

*"We are getting referrals to the center because of the quality of food we are serving here. Parents are hearing that we serve organic, local food whenever possible."*

*—Suzy's Little Peanuts*

## Involve Children, Staff and Family in Menu Ideas

Kid Stop is a child care center in Morrisville with 46 enrolled children, ages 0-5, that involves the kids in thinking up menu ideas. Once a month is a Pick Your Own Menu Day when the kids decide on a menu. On Mix Up Days children choose fillings to make their own "recipes" for tacos or burritos. The more fun kids have with the food, Kid Stop reports, the more likely they are to try different things.

Other centers involved parents. Little Critters, in Castleton, sent home recipe templates for parents to fill out with favorite dishes. One of the most popular was "Cheesy Cauliflower Bake". Recipe below.



### Lund Early Childhood Program Pizza Day

When children at Lund help make pizza every Friday, they come up with some creative recipes! They love whole wheat pizza dough with any of the following: chicken sausage & broccoli, spinach & red peppers, ground turkey & onions, or black beans and corn. They made a fruit pizza with quinoa crust and mango, pear, oranges and pureed avocado sauce. And the #1 Favorite? Cauliflower crust pizza with spinach, cheese, and tomatoes.

## The Cheesy Cauliflower Bake

<b>Ingredients:</b>	2 garlic cloves
1 Large cauliflower cut into 3/4" pieces	1 Tbsp flour
2 slices of bread torn into pieces	1/2 Cup half-and-half
1/2 Cup shredded cheddar cheese	1/3 cup low sodium chicken broth
1/2 Cup shredded Monterey jack cheese	1 tsp mustard
2 Tbsp butter, melted	

Preheat oven to 450 degrees.

In food processor pulse bread, 1 Tbsp butter, and 1 clove garlic (peeled) until bread is coarsely ground.

Heat remaining 1 Tbsp butter, remaining garlic, and flour in medium saucepan for 1 minute, stirring constantly. Whisk in half-and-half and broth slowly. Add

cauliflower and mustard. Bring to a boil then reduce heat to a simmer and cover. Cook until cauliflower is almost tender stirring occasionally (about ten minutes). Remove from heat and stir in cheeses.

Pour mixture into 8x8 baking dish and top with bread mixture. Bake 15 minutes. Let cool for about 10 minutes before serving.

## Have Fun with Trying New Foods

Having a creative menu theme like this Dr. Seuss menu from the Mary Johnson Children's Center brings in new foods that are fun to try! Sending the menu home to parents in advance allows them to talk to their kids about the food (and maybe read Dr. Seuss too).

### DR. SEUSS MENU IDEAS

**Green Eggs and Ham** "The Cat in the Hat!"

**Roasted Veggie Who Hash** (a loose interpretation - Roasted potatoes, carrots and turnips) "Horton hears a Who"

**Pita Pockets** "Wocket in My Pocket"

**Roast Beast** (roast chicken) "How the Grinch Stole Christmas"

**Flapjack Flappers Flapjacks** (Pancakes with peanut butter and crushed peanuts) "Oh Say Can You Say?"

**Truffula Fruits** (berries dipped in yogurt) "The Lorax"

**Blueberry Bumplings** "The Cat in the Hat Songbook"

## Rearrange Your Kitchen for Food Allergies

The Learning Tree child care center wanted to reduce food allergy risks while also increasing the diversity of foods children ate. They educated staff on appropriate precautions when preparing or handling food, put up reminder signage, and rearranged the kitchen with food allergies in mind. The School Nutrition Association provides resources for managing allergies and special diets at [www.schoolnutrition.org](http://www.schoolnutrition.org). See also the Additional Resources section (p.39) of this guide.

## If Parents Send Food From Home, Offer a Guide to Healthy Choices

Many child care centers request that parents not send food in from home with their children. But sometimes parent-provided snacks or meals are a way to extend nutrition education and get new ideas for nutritious foods. For example, the Mary Johnson Children's Center uses the "What's in...My Lunch box" (pictured right) as a guide for parents bringing food from home.

## Consider Nutrition Standards When Planning Fundraising Activities

National recommendations are to avoid unhealthy foods as part of fundraising. Growing Up Right fundraising policy reads "Our center does not allow the sale of foods or beverages as fundraisers. We encourage fundraising activities that promote physical activity, as developmentally appropriate."

Other child care centers do allow food or beverage sales as part of fundraising, but they feature healthy foods and food education. For example, All-4-One in Springfield has two afterschool cooking clubs for their K-2 and 3-5 students. These clubs help with planning, taste testing and cooking menu items. This school year, they are going to plan a cookbook to use for a 2014 fundraiser.

**What's in.... MY LUNCH BOX?**

<p><b>FRUITS</b></p> <p>Some favorites that hold up well in a lunch box include:</p> <ul style="list-style-type: none"> <li>GRAPES</li> <li>STRAWBERRIES</li> <li>CANTALOUPE cut in small pieces</li> <li>BANANAS</li> <li>BLUEBERRIES</li> <li>RAISINS or CRAISINS</li> <li>APPLESAUCE snack packs*</li> </ul>	<p><b>MILK</b></p> <p>For children over the age of 2:</p> <p>SKIM MILK or 1% MILK is recommended.</p> <p>For children ages 1 to 2 years:</p> <p>WHOLE MILK is recommended.</p> <p>M/JCC will PROVIDE MILK and WATER!</p>	<p><b>GRAINS</b></p> <ul style="list-style-type: none"> <li>WHOLE GRAIN or ENRICHED BREAD</li> <li>GRANOLA BARS</li> <li>CRACKERS</li> <li>BLUEBERRY or FRUIT MUFFINS</li> <li>RICE CAKES</li> <li>BAGELS</li> <li>RAISIN BREAD</li> </ul>
<p><b>VEGETABLES</b></p> <ul style="list-style-type: none"> <li>CARROT STICKS</li> <li>CAULIFLOWER or BROCCOLI</li> <li>CELERY STICKS</li> <li>CUCUMBER SLICES</li> <li>GREEN, RED, or ORANGE PEPPER SLICES</li> <li>HUMMUS (is in the protein category too!)</li> </ul>	<p><b>PROTEIN</b></p> <ul style="list-style-type: none"> <li>CHEESE STICKS</li> <li>CHEDDAR CHEESE CUBES</li> <li>HUMMUS (is in the vegetable category too!)</li> <li>YOGURT</li> <li>PEANUT BUTTER or other NUT and SEED butters</li> <li>HARD BOILED EGG</li> <li>HAM or TURKEY slices</li> </ul>	

## Try Some New Birthday Celebration Ideas

The Y Early Childhood Program in St. Albans enlisted parents' help in switching to celebration activities that don't focus on food. One favorite activity is decorating birthday hats!

Otter Creek Child Care has a practice of giving out birthday books instead of birthday cakes.

Incorporating physical activity into celebrations emphasizes that being active is fun. In some centers, children choose or bring in their favorite games to play on their birthdays.

Northshire Day School points out that if a food like birthday cake is served, baking a sheet cake and then making age appropriate servings is better than cupcakes that are all the same size. This is part of their approach to healthy eating that emphasizes the difference between foods that can (and should) be eaten frequently and foods that are occasional treats.

### Birthday Hat Instructions:

You will need:

- Paper bags
- Glue
- Foam cut outs
- Stickers
- Markers
- Glitter

Kids at the Y Early Childhood Program making birthday hats



**Step One:** Open the paper bag

**Step Two:** Crumple the bag a little to make it easier to work with

**Step Three:** Roll the bag up from the opening a little less than halfway depending on child's head size

**Step Four:** Use markers, stickers, glitter, glue and foam pieces to decorate hat

**Step Five:** Let it dry and then enjoy!



### Drinking water

Child care centers should make fresh drinking water available to children at all times, indoors and outdoors, including during meals and snacks.

### LEARN MORE ABOUT WHAT'S WORKING IN OTHER STATES

Vermont has lots of great examples to share with the rest of the states, and they have examples to share with us. The USDA Team Nutrition program has an online site for states to share their resources. Visit [healthymeals.nal.usda.gov/state-sharing-center-0](http://healthymeals.nal.usda.gov/state-sharing-center-0) to check out what's happening around the country. For example, for Nutrition Standards:

- Delaware contracted with the Nemours Foundation to produce an easy-to-follow, detailed guide to nutrition standards in child care. Visit the Growing Up Healthy information at [www.nemours.org/service/health.html](http://www.nemours.org/service/health.html).
- The Indiana Department of Education has posted an online workshop for training child care staff in creating snacks and meals that match national dietary guidelines at [media.doe.in.gov/food/recipe](http://media.doe.in.gov/food/recipe).
- The West Virginia Department of Education started a Leap of Taste initiative for child care centers, with resources that include a collection of food prep training videos and administrative tools for things like planning fundraisers without unhealthy foods. It's available at [wvde.state.wv.us/child-nutrition/leap-of-taste](http://wvde.state.wv.us/child-nutrition/leap-of-taste).

## PROMISING PRACTICES

# Eating Environment

The eating environment at a child care center can affect children's behavior at meal times, their ability to self regulate the amount they eat, the nutrients they get during eating, and also their dental health. The eating environment includes scheduling when food is offered as well as the atmosphere at meal and snack times. The eating environment also includes food safety concerns such as avoiding choking hazards and ensuring food stays at proper temperatures.

Some of the key parts of a healthy eating environment are:

- Serving meals and snacks in a pleasant, relaxing atmosphere.
- Staff members holding infants while bottle feeding, and never leaving infants to sleep or propped in a chair with a bottle.
- Older children eating meals family style, serving themselves with staff member assistance, and interacting with others during meals.
- Offering food at least every three hours to older children, and feeding infants according to schedules provided by their parents.

- Structuring the day so that physical activity comes immediately before mealtimes and children have at least 20 – 30 minutes to eat after sitting at the table.
- Accommodating the tooth-brushing regiments of all children, wiping infants' gums with disposable tissue or gauze after each feeding.
- Encouraging children to try foods, but never forcing, coaxing, or bribing children to eat.
- Never using food as a reward or punishment.
- Providing adequate training and continuing professional development for food service personnel.
- Complying with all federal, state, and local food safety and sanitation regulations.
- Supporting staff and parents in modeling a healthy lifestyle for children at mealtimes.

### WHAT ARE VERMONT CHILD CARE CENTERS DOING?

The child care centers that participated in GMHKC each chose their own focus within the broad topic of Eating Environment. Many of the centers' work built from family style dining at meal times, which gave an opportunity for trying new foods, teaching serving sizes, and interacting with adult role models. Centers also used different training programs on food safety and nutrition, and worked with staff to support wellness for everyone at a center, not only the children.



Child care program should accommodate the tooth-brushing regimens of all children, including those with special oral health needs. Infants' teeth and gums should be wiped with a disposable tissue or gauze after each feeding.

## Set Mealtime Routines

While all the children at Suzy's Little Peanuts participate in family style meals, different stages of development mean that not every classroom does exactly the same thing. Suzy's Little Peanuts developed a food policy that helps with both consistency and flexibility. Teachers start with a common check list, and from that list build the routines that happen each day with their children. The routine includes a transition activity, how children will enter a meal, hand washing, setting the table, distribution of food, and any other tradition developed by the teaching team. Teachers assess their mealtime routine twice a year, and make any necessary changes.

The National Food Service Management Institute ([www.nfsmi.org](http://www.nfsmi.org)) recommends a family style mealtime checklist that includes:

- Mealtime routine
- Appropriate size bowls and serving utensils
- Mealtime expectations to review with children
- Passing food practice for children
- Serving utensils practice for children
- Pouring practice for children
- Cleaning practice for children

## Let Children Be Role Models for Each Other

Switching to family style dining can lead to children trying more food. After starting their own family style dining, the Lund Early Childhood Program reports: "Beets had been served for a period of time, with only one child truly loving them. Because the serving dish stayed on the table and other children were exposed to the idea of beets, one day a different child decided to try them. He ended really liking them and because of his verbal ability, was descriptive about how much he liked them. This encouraged other children to try them that same meal. Not all liked them, but they tried them and teachers gave them positive encouragement for trying it...A mother of a 2 year old was sharing a story with the Parent Child Review committee. She shared that her child recently started cleaning off his own plate after dinner...when he's tried something and didn't like it he commented:

*'it's okay. I don't like it now, but I'll try again later'."*





Having a diverse diet with lots of different healthy foods usually means taking a chance on something new ...here children at New Beginnings chart their own experience trying new foods.

## Choose Healthy Foods with Go, Slow, Whoa

Northshire Day School in Manchester used the Go, Slow, Whoa program combined with family style dining. The National Heart, Lung and Blood Institute first developed this program as part of the We Can! initiative to encourage kids to stay active and healthy. Materials are found on their website [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov) (use the Search box to find "We Can!").

Go, Slow, and Whoa foods can be labeled as green, yellow, or red to correspond to traffic lights that tell drivers to go, slow down, or stop. Go foods are foods that are OK to eat most any time, Slow foods are ones that are not off-limits, but shouldn't be eaten every day. Whoa foods are once-in-a-while foods.

The color coding of green / yellow / red that corresponds to go / slow / whoa can help children learn. Northshire uses color coded bowls at



their family-style tables so that children have go / slow / whoa in mind as they serve themselves. Staff sharing mealtime with children can help children understand the different categories.

## Consider All the Things Children Can Learn from Family Style Dining

Family style dining is a mealtime where children and adults sit around the table and food is placed on the table in serving bowls and plates. The serving dishes are passed around the table and everyone serves themselves (with assistance provided where needed). Meals are scheduled with plenty of time for conversation and seconds if desired.

Child care centers using the family style of eating reported many advantages and positive outcomes. Children learned etiquette, how to measure out a serving size, how to know if they are full or need more. Very young children had a chance to practice the motor skills needed to manage serving, passing the bowls and eating. Children were more likely to try a new food when they were able to control the serving size by serving themselves. Conversations about food, between children and with adults at the table, also helped encourage children to explore new foods or take more of healthy foods. Staff members had a chance to model good eating habits. Some centers decorated the dining area with nutrition information, providing a place to start conversations about nutrition. If children helped prepare the food, they had a chance to talk about that, too.

In the end, taking relaxed time with a meal helps everyone pause and be more thoughtful about what they are eating.



Kidstop's family-style eating environment.

## Help Children Learn Serving Sizes

The Child and Adult Care Food Program (CACFP) provides a chart of serving sizes and sample meals for infants and children at their website: [education.vermont.gov/new/html/pgm\\_nutrition/child\\_adult\\_care.html](http://education.vermont.gov/new/html/pgm_nutrition/child_adult_care.html).

Child care centers have found different ways to translate the numbers on charts into what food appeared on children's plates. One resource is **MyPlate.gov**, which provides plate-shaped charts and plenty of promotional materials describing a healthy balance of foods and appropriate serving sizes.

The Children's Place Preschool found that parents also appreciated serving size guides - they discussed what children learned at meals in parent-teacher conferences, gave out posters to hang in the kitchen, and also referred parents to the **ChooseMyPlate.gov** website.

Family style eating is an effective way to teach children to self-regulate their portions based on how hungry they feel. They learn to take small servings first, take time eating those servings, then serve themselves more if they are still hungry.

### Serving Sizes

Serving utensils that measure out each serving size, such as these from Environments Inc., can help children learn what a portion looks like.



The Y Early Childhood Centers use plate-shaped charts from MyPlate.gov to teach good balance and serving sizes.



## Encourage Staff Wellness

Staff wellness is both an important part of a healthy work environment and an important part of providing positive messages for children in child care centers. Little Critters took the idea of role models one step further to have staff participate in wellness programs modeled after the children's programs - they have a chart of weekly goals and if they reach their health goal each week, they get a sticker, just like a child might get a sticker for trying a new food or remembering to brush their teeth. It's a fun and visible way to fully participate in the good practices children are learning. Plus, it works. In the entire GMHKC project there was only one week when someone missed a goal and didn't get their sticker.



## Consider Food Only as a Means to Good Health

Using food as a reward or punishment sets the stage for unhealthy relationships with food, such as using food to meet emotional needs. At Mary Johnson Children's Center, the wellness policy clearly spells out that food will not be used as part of punishment. They say:

- Based on the Child and Adult Care Food Program (CACFP) which Mary Johnson Children's Center participates in, facilities participating in the CACFP are prohibited from restricting children's access to CACFP meals and snacks for any reason, including as punishment for individual or group behavior. Other inappropriate practices include:**
- Forcing a child to eat food
  - Delaying access to food e.g. a child or group of children that is served last
  - Denying children access to certain types of food, e.g. dessert and snacks
  - Preventing children from eating food when food is normally allowed

## Use a Trained Nutrition Specialist to Shape Health and Wellness

A nutrition specialist is someone who has received specialized training in nutrition information based on documented research. This individual can help train staff or work directly with children using age-appropriate terminology and concepts to promote health and wellness.

The Springfield All-4-One program is open before and after school for children ages 3 to 18. They serve breakfast, afternoon snacks, and dinner, all prepared onsite. Before entering GMHKC, All-4-One had a grant to hire a nutritionist for cooking and physical activities with the afterschool groups. A staff person had training in CACFP, Get Fit Get Moving, and ServSafe and was interested in continuing the nutritionist's work after the grant ended.

During GMHKC, All-4-One was able to hire their trained staff person to spend 2.5 hours each morning on ensuring good nutrition at the center. These additional hours covered extra support for planning, shopping and meetings. The result was better menus and better communication about those menus with staff and parents. All-4-One already had a system of afterschool clubs on special topics, including a cooking club. These regular club meetings provided an opportunity to do things like taste tests for new foods or comparing processed versus homemade snacks. Having trained staff focused on nutrition meant All-4-One could do more with the weekly club meetings.

## Attend Trainings on Food Safety and the Eating Environment

Several child care centers in GMHKC had staff trained through the ServSafe program, which provides training on the latest food safety standards and how to comply. Their program includes training on allergens. You can find out more about this certification at [www.servsafe.com](http://www.servsafe.com).

Child care centers with gardens may be interested in the food safety materials for gardeners from UVM Extension available at [www.uvm.edu/extension/food/](http://www.uvm.edu/extension/food/) (under 'Food Safety for Consumers').

Some states have shared materials they used for food safety and eating environment trainings as part of USDA Team Nutrition. The California Department of Education maintains a virtual learning center that includes a course on food safety for child care providers at [www.healthypreschoolers.com/](http://www.healthypreschoolers.com/). The Missouri Department of Health has made its training slides on the eating environment available online through [healthymeals.nal.usda.gov](http://healthymeals.nal.usda.gov). Look for Setting the Stage for Eating Well: The Nutrition Environment.

At the Milton Family Community Center, staff researched food safety, collected useful food safety resources, and put together informational sessions for everyone in their community - including not only people working with food in the kitchen, but also classroom teachers, parents, and interested community members. These sessions offered valuable information on food safety and sanitation, while promoting Milton's overall goal of integrating what's learned in the kitchen, classroom, and at home.

# Nutrition Education

Nutrition Education for children focuses on helping them learn about food and how it can help them grow and be healthy throughout their lives. Many activities and strategies can be used to help them learn about many kinds of food, where food comes from, how it can be prepared, how it is served, and eaten. Specific practices can help them learn how to tell if they are hungry and how to know when they have had enough. The social aspect of food is important, too, and nutrition education can help children develop good manners and practice mealtime etiquette. The food served in child care centers, and the behaviors modeled by staff and other adults, should reinforce the concepts taught in nutrition education.

Some of the key parts of nutrition education are:

- Following standards-based nutrition education that uses the best available science and national health recommendations.
- Providing consistent messages about nutrition. This includes reviewing all materials for accuracy and consistency, engaging parents and the community in reinforcing messages about health, demonstrating good nutrition at meal and snack times, and integrating nutrition into the overall information and goals for children at the center.

- Engaging children in their nutrition education through linking it to activities, involving families and community, and using developmentally and culturally appropriate educational materials.
- Offering regular training and professional development to help staff stay current on nutrition education standards.

## WHAT ARE VERMONT CHILD CARE CENTERS DOING?

The child care centers that participated in GMHKC each chose their own focus within the broad topic of *Nutrition Education*. As you'll see in the following pages, a big theme for centers was to work with existing education programs and resources for building curriculum. Although centers adapted statewide or national models to meet their particular needs. Starting with an existing framework or set of lesson ideas provided a strong starting point. Here we've collected both materials that GMHKC participants used to get started and what they created for their own centers, in a list of ideas they shared from what they learned in the GMHKC program.



Round Hill Kids planning their garden.



The Childrens' Place Preschool made laminated placemats with ChooseMyPlate; the children enjoyed the colorful mats and dividing their food by groups

### CHECK OUT SAMPLE CURRICULUMS:

Online, and through talking with trained nutritionists, you can find a lot of sample material for building a standards-based nutrition education curriculum. Some examples used by child care centers in GMHCC:

- The **ChooseMyPlate.gov** website explains national dietary guidelines and provides educational materials for teaching those guidelines.
- The National Food Service Management Institute offers a sample curriculum for preschoolers called *More than Mud Pies*, available at [www.nfsmi.org](http://www.nfsmi.org).
- The USDA Child and Adult Care Food Program (CACFP) has nutrition education resources at [www.fns.usda.gov/cnd/care/ChildCare.htm](http://www.fns.usda.gov/cnd/care/ChildCare.htm).
- Florida developed a set of nutrition lesson plans for child care providers, including songs and books available for downloading. You can find them at [www.doh.state.fl.us/Family/ccfp/index.htm](http://www.doh.state.fl.us/Family/ccfp/index.htm). Go to the Infant & Child Nutrition menu.
- The New York State Department of Health has made its *Eat Well Play Hard* curriculum for child care centers available online from [www.health.ny.gov/](http://www.health.ny.gov/). Look for Eat Well Play Hard in the topics index.

Some child care centers, for example All-4-One in Springfield and the Lund Early Childhood Program in Burlington, had trained nutritionists who could build a more formal curriculum around nutrition and wellness activities at the child care centers. The Champlain Islands Parent Child Center invited a registered dietitian in from the Hannaford Supermarkets community nutrition program.

### USE EXISTING NUTRITION EDUCATION MATERIALS

Some national programs offer free nutrition materials designed for different age groups and audiences (i.e. parents, staff, etc.). The U.S. Department of Agriculture sponsors several programs including ChooseMyPlate (**MyPlate.gov**) and Team Nutrition (**teamnutrition.usda.gov**). Child care centers used these existing materials to:

- Post tips around the center for staff and parents.
- Put up posters to start conversations about nutrition with children.
- Find information to include in parent newsletters.
- Have visual images to go with the nutrition curriculum.
- Create interactive activities such as pairing foods with the correct MyPlate areas.

See also the *Communication, Promotion and Monitoring* section for involving parents in nutrition education.



Some child care centers made creating nutrition promotion materials into an arts project, like these displays from Emerson Falls Playcare.



Gardening project at Emerson Falls Playcare.

## Learn from Gardens

Many GMHKC child care centers had gardens that they maintained with the children. Children enjoyed sampling the foods they helped grow. Spring planting and autumn harvesting provided special occasions for parents to join in the gardening. Some of the resources that centers used to turn gardens into a nutrition education opportunities were:

- Early Sprouts “seed to table” curriculum at [www.earlysprouts.org](http://www.earlysprouts.org)
- *Grow It, Try It, Like It*, a curriculum from USDA’s Team Nutrition at [teamnutrition.usda.gov](http://teamnutrition.usda.gov)
- UVM Extension *Eating What We Grow* curriculum found at [www.uvm.edu/extension/food](http://www.uvm.edu/extension/food)
- Local garden clubs and Master Gardeners. The UVM Master Gardener program can help you find local volunteer gardeners.
- Local food organizations. The Vermont Farm-to-School program provides a map of initiatives happening in Vermont communities at [www.vtfeed.org](http://www.vtfeed.org)
- The Wisconsin Department of Public Instruction has produced a virtual library of resources on using gardens and local foods in nutrition education at [ne.dpi.wi.gov/ne\\_nutred](http://ne.dpi.wi.gov/ne_nutred)

## Learn from Field Trips

GMHKC participants arranged a variety of field trips that included nutrition education. For example:

- As part of Pizza Day (described in the *Nutrition Standards* section) the Lund Early Childhood Program takes children on grocery shopping trips to find their ingredients.
- Growing Up Right read *The Mitten* and then visited a local Russian bakery.
- The Mary Johnson Children’s Center visited the high school’s greenhouses to see how students there grew plants, then continued to learn from these older students through letter writing as the season progressed
- Several child care centers visited farms. Some farms are experienced in hosting school field trips. Otter Creek, for example, used the Farm-to-School program to be matched with a local farmer.
- Kids Stop also visited the local farm where the center purchases meats and vegetables.

Children at Windham Evening Childcare discover that figuring out how to eat some foods can be a major project.



## Provide Starting Points for Conversations About Nutrition

In addition to structured learning opportunities, conversations with children reinforce messages about nutrition, whether it's teachers and parents answering questions, or children sharing with each other what they enjoy. Here are some examples of how conversations can start:

- The Y Early Childhood Program has an "I Tried It, I Liked It" chart for children to show what new foods they've tried and what they thought.
- Mary Johnson Children's Center places posters of nutritious foods and nutrition messages in the dining area to spark conversation during family style meals.
- Whenever children serve as helpers in the kitchen or bring in food from the garden, it's a chance for them to share with others what they've done.
- Kid Stop asks children for menu suggestions as a way to start a group conversation about menu planning.



## Share the Task of Integrating More Nutrition Education into Daily Activities

At Sunrise Family Resource Center, teachers took turns planning activities to bring to all groups of children in the center. Sharing the responsibility for coming up with new activities made it easier to add more nutrition education to daily activity. Putting together an activity box that can go from room to room makes it even easier to share new ways of learning about nutrition.

Staff members who are interested in health and wellness projects outside of *Nutrition Education* can still promote education. People involved in the *Eating Environment* can add educational posters to the dining area and start nutrition conversations at the table. Cooking new foods to meet *Nutrition Standards* is also a chance for education. As described in the *Physical Activity* section, there are some creative ways to combine exercise and nutrition (like food group relay races).

Working on *Communications* with parents also helps shape how children learn about nutrition.

The mentors who worked with GMHKC participants reflected that building a standards-based nutrition education program was a lot (probably too much) for one person to take on. They emphasized that group efforts—whether it was from committees or assigning different people different tasks or everyone working towards the goal a little bit at a time—made it possible.

# Physical Activity

Child care centers can help children meet the recommended amount of daily physical activity while also showing them how enjoyable physical activity can be, setting the stage for ongoing participation in exercise, sports, and other activities. Physical activity is an important part of developing basic movement and motor skills for infants and young children. Child care centers should provide an environment that encourages physical play and limits sedentary activities.

The U.S. Department of Health and Human Services has established guidelines for physical activity:

- Infants have planned daily activities that support their physical development, including self-supporting head and neck, rolling, reaching, sitting, kicking, crawling, standing and walking.
- Toddlers (Ages 1 – 2) have at least 30 minutes of structured activity and 60 minutes up to several hours of unstructured physical activity daily.
- Preschoolers (Ages 3 – 5) have at least 60 minutes of structured activity and 60 minutes up to several hours of unstructured physical activity daily.
- Toddlers and preschoolers are not sedentary for more than 60 minutes at a time except when sleeping.

Child care centers can meet these goals with:

- Scheduling varied activities that include outdoor time (except in unsafe conditions).
- Providing portable and fixed play equipment that promotes physical activity.
- De-emphasizing sedentary activities, for example televisions and video games are not prominently displayed and any screen time is limited.
- Providing equal access to physical play for children with disabilities.
- Incorporating physical activities into learning experiences, and providing short physical breaks between learning activities.
- Maintaining safe, supervised play areas.
- Associating physical activity with good health rather than using it as a reward or punishment.





Growing Up Right makes use of their indoor space for some physical activity.

### CREATE A COLLECTION OF ACTIVITY IDEAS

Physical activity during the day will change with the space available, whether there is equipment to use or a budget for new equipment, weather, the length of time available, the number of children participating, and children's physical development. Luckily, there are lots of places you can go to build a collection of ideas for activities that meet your needs at a particular time.

National programs with physical activity resources include:

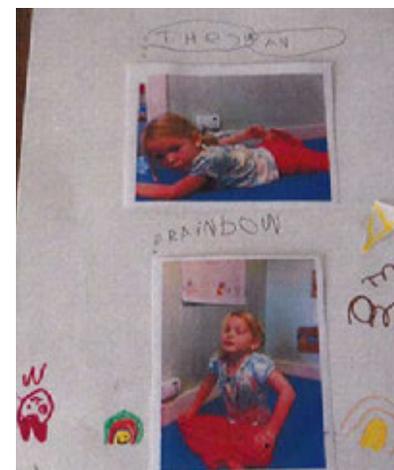
- Spark: [www.sparkpe.org](http://www.sparkpe.org)
- Let's Move! Child Care [healthykidshealthyfuture.org](http://healthykidshealthyfuture.org)
- Let's Move! [www.letsmove.gov](http://www.letsmove.gov)
- National Association for Sport and Physical Education [www.aahperd.org](http://www.aahperd.org). Although the focus is on school-age children, this site provides a lot of background information and research for educators.

The USDA Team Nutrition program also has an online site for states to share their resources at [healthymeals.nal.usda.gov/state-sharing-center-0](http://healthymeals.nal.usda.gov/state-sharing-center-0). For example, on this site you'll find:

- Team Nutrition Iowa has created a card set of low- to no-cost ways to increase physical activity in child care.
- The Wellness in Alaska Child Care Best Practices book has instructions for fun games enjoyed by Alaska child care centers, like Bubble Wrap Jumping, Swat the Fly and Clean Out the Back-yard (throwing and kicking practice).
- New York's Eat Well, Play Hard curriculum includes "Fitness for Fun" lesson plans.

### Make Space for Indoor Activities

When Growing Up Right made increasing physical activity during the day a priority, they took a second look at their center to see what space they could use. It turned out, some spaces, like the cubby space, were only being used a few times a day. They added a soft rug to the cubby space and designated it as an area to use for gross motor activities during those times when it used to sit empty. Now it's a regular activity area, used every day when some children are resting and others are playing.



Many of GMHCC centers created variations on yoga. Yoga is a great physical and visual activity. Champlain Island Parent Child Center, for example, has pictures of yoga poses up around the classrooms and many children try to imitate the poses on their own. Little Critters and Suzy's Little Peanuts encourage children to invent new poses and make their own pose cards. New Leaf Family Center plays "Freeze Yoga." Children run around until a teacher calls 'Freeze' with a child's name, then that child freezes into a yoga pose that the other children copy.

## Invent New Games

Kids can have a lot of fun with games that are unique to their child care center, and these new games don't need to start from nothing. The example of Freeze Yoga at the New Leaf Family Center combines two familiar activities (yoga and freeze tag) to come up with something new. Vermont's Fit WIC program recommends inventing games from household chores, and the USDA Team Nutrition resources include one example of this chore-turned-game – dumping socks rolled in a ball into a marked off section of the yard and encouraging kids to “clean the yard” by tossing all the sock-balls out of the circle. Books can inspire new games, like having children imitate the animals found in a picture book. Many GMHCK participants built physical activities by starting with something familiar and adding a new twist.

## Take a Break

While we try to build lifelong habits for exercise and physical activity, it's also true that young children simply have trouble sitting still for long periods of time. Many child care centers added structure to this need to move throughout the day by taking breaks called by the teacher. Growing Up Right describes their schedule like this:

*“Lots of wiggle breaks! Sometimes the wiggle break is to jump and move at the beginning sound of a child's name (“Jump up if your name starts with P – puh-puh”) The children love to call out the director's name so even if she is at her desk working, she has to jump up and wiggle.”*

Because teachers call for the breaks, they aren't disruptive to other activities.

## Use Themes to Integrate Physical Activity with Other Daily Activity

Physical activities can be integrated with other activities by using different themes for the day or week.

Here is one example from New Leaf Family Center.

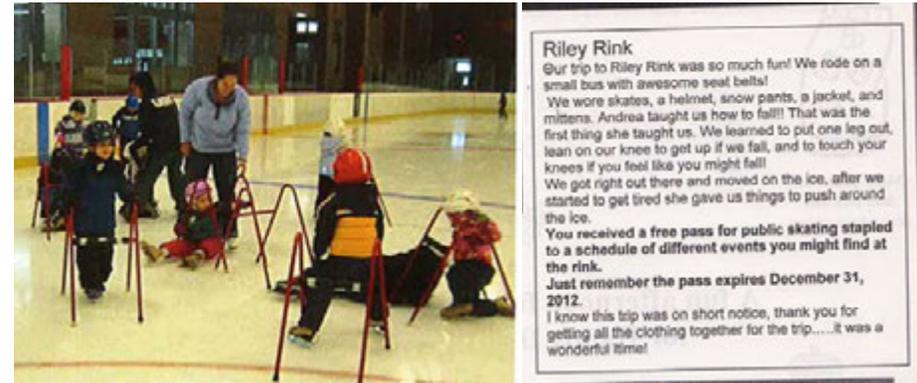
Theme: <u>Easter</u> Week: <u>March 25-29, 2013</u>		Monday	Tuesday	Wednesday	Thursday	Friday
<b>Circle Time</b> • Music • Songs • Finger-plays • Language	Little Bunny Foo-Foo Weather mystery box	Little Bunny Foo-Foo Weather Old Mac Donald	Little Bunny Foo-Foo Weather Itsy Bitsy Spider	Wrenn	Little Bunny Foo-Foo Weather ABC'S	
<b>Centers</b>						
1. Gross Motor	1. yoga	1. freeze dance	1. instruments and dancing	1. yoga	1. Simon says	
2. Project/Cooking/Sensory	2. bunny ears	2. water color eggs	2. peeling eggs	2. dye eggs	2. Nest w/ Eggs	
3. Dramatic Play/ Fine Motor	3. Easter grass + eggs	3. Easter snackers	3. Dabbers on eggs	3. Easter coloring	3. Easter grass + eggs	
Included Daily: Manipulative Options, Books & Literacy, Outdoor Activities, Science & Discovery, Music & Entertainment						
** Please Remember: Emergent Curriculum ideas and flexibility.						

The kids at Playworks Childhood Center get outside and get active!



## Emphasize Lifelong Physical Activity

Another important part of physical education is showing that these activities are enjoyable and should be a part of lifelong habits. While the standards for physical activity at child care centers emphasize daily activities, involving parents in special activities is one way to give a message of fun and lifelong fitness. Fitness challenges, field trips to go on nature walks, field trips to recreation centers...even getting parents out and moving around as part of education nights—touring gardens for example – creates a model of staying active outside of structured class activity.



## Help Parents Find Ways to Keep Children Active

Happy Days Playcare uses its newsletter to let parents know about low cost physical activities in the community that complement what children are learning at the center. Riley Rink was a favorite field trip destination for the children—the announcement above tells parents how they can go for a low-cost family skating trip of their own.



## Let Physical Activity be a Fun Way to Learn About Wellness

Physical activities throughout the day are a form of play, not a chore. In fact, the Vermont early learning standards point out that young children often have more interest in learning about the activity side of health and wellness than in learning about the nutrition side. They note that adding in physical activities, like gardening, can help engage children in nutrition education. Some child care centers get very creative with physical activity as a gateway to nutrition education. In Maryland, Carroll Child Care Center combined physical activity and nutrition education through “Nutrition with a Twist” – games modified to have a nutrition component. One example is a relay race with food models that children must place in the correct food group instead of a baton to hand off.



To stay active in the cold weather, Dinosaur class has set up an indoor jungle gym at Pine Forest Children's Center.

# Communication, Promotion & Monitoring

Strong communication systems engage everyone involved in a child's well-being in delivering consistent health messages. Promotion engages them in actively supporting health and wellness at a child care center. Communication, promotion, and monitoring help centers make continuous improvements in their approach to health and wellness, responding to new ideas, changing needs, and the most current best practices recommendations.

Some of the key parts of communication, promotion and monitoring are:

- Organizing a health advisory team to help with planning, offering, and evaluating nutrition and physical activity programs.
- Ensuring that verbal and nonverbal health messages are consistent. Nonverbal messages include what foods are served, activities depicted in games, television and videos, posters, and the behaviors modeled by staff.
- Eliminating advertisements that promote less nutritious food and beverages.
- Communicating with families in a two-way conversation about aligning health practices at home and in the child care center.
- Partnering with community groups and organizations to support activities that promote healthy eating and physical activity.

- Evaluating changes in physical activity and nutrition practices in the child care center, including planning ahead for future evaluations before making a change.
- Reviewing compliance with child care center policies as well as changes in local, state and national regulations and/or recommendations on a regular basis.

## WHAT ARE VERMONT CHILD CARE CENTERS DOING?

In their final program evaluation, GMHKC participants emphasized involving parents and families in health and wellness changes. You'll see that in the Communications, Promotion, and Monitoring ideas that follow, there are many that focus on engaging parents. It's also important to keep communications clear within the child care center, between staff and to children, to ensure consistent messages. Earlier sections have addressed creating a plan for monitoring, this section shows how monitoring can turn from a record keeping chore to a positive support system for keeping forward momentum. The following pages list ideas from other child care centers about what works.

## FIND COMMUNICATIONS MATERIALS FOR PARENTS ON NUTRITION EDUCATION SITES

The Nutrition Education section includes many online resource sites. Often, these sites come with materials that can be used to communicate with parents, community, and staff at your child care center. For example:

- The [ChooseMyPlate.gov](http://ChooseMyPlate.gov) website.
- USDA Food and Nutrition Service fact sheets and core messages [www.fns.usda.gov](http://www.fns.usda.gov)
- Bright Futures health fact sheets for families at [brightfutures.org/nutritionfamfact](http://brightfutures.org/nutritionfamfact)
- Let's Move! Child Care resource library [healthykidshealthyfuture.org](http://healthykidshealthyfuture.org)

If you're looking for a nutrition theme to share in a newsletter, you might also check out the resources from California at [www.healthypreschoolers.com](http://www.healthypreschoolers.com). Along with monthly tips sheets, the calendar announces important national holidays like "Get Acquainted with Kiwi Month" and "National Watermelon Day". There's always some time-relevant topic that can be shared.



Playtime can reinforce wellness messages. The preschoolers at Round Hill Kids have set up a play grocery store, which is now one of their favorite activities. The Y Early Childhood program created new games with healthy food images like Food Bingo.

## Avoid Confusing Messages

Earlier sections have talked about using designated class or meal time to provide nutrition and wellness education. In addition to actively promoting good wellness practices, it's important to eliminate contradictory messages. For example, the family style eating in the Eating Environment section lets staff members be good role models for children at mealtime. Modeling healthy eating habits should also spill over into the rest of the day. Screen time, as another example, runs counter to promoting physical activity and so best practices strictly limit it. But screen time also often includes advertisements for unhealthy foods, which confuses nutrition messages too. Some child care centers found that posters in their classes included unhealthy food messages that they hadn't noticed before. The Windham Evening Childcare center removed all the unhealthy foods from their supply of play foods and set a goal of purchasing healthy replacements. It's important to keep track of what's being communicated to children throughout the day.

## Use Menus to Engage Parents

The child care center menu cycle offers an immediate way to start conversations with parents – eating happens every day and with a changing menu cycle there is often something new to report.

The Milton Family Community Center made it a goal of the GMHCC year to be consistent in posting menus on their website so that parents can use them to plan similarly healthy meals at home and talk to their children about trying featured foods.

New Beginnings Child Care Center started a program called Harvest of the Month that introduces a new fruit or vegetable to their menu each month, incorporating it in food at the center, sending recipes home, and asking parents if they have any recipes to suggest. They began with Sweet Potatoes in December.

## Share Information Online

Round Hill Kids has a website ([www.roundhillkids.com](http://www.roundhillkids.com)) and Facebook page for sharing information. Some parents find it easier to access information online. Online information also offers a way for family members who don't live close by, like grandparents, to check in. In fact, being more involved with grandchildren, and even great-grandchildren, is one of the top reasons why older generations use the Internet.



Today there are plenty of options for low-cost or no-cost ways to put information online. Social media accounts are usually free, and free website building tools like WordPress, Blogger and Google Sites are also available. Besides being cheap, these tools are designed to be easy to use, even if you don't have any computer experience.

Before diving into an online presence, think through how much time you and your staff will realistically spend on the project. If you love websites, then it's great to set up something to be updated every day or every week. If you don't want to spend time on updates, try for something a bit more static. If no one on staff has experience setting up a website, it will probably be easiest to find a parent or community volunteer to get you started, just be sure that at least one person at the center learns how to edit, update, and build new pages for the site.

It's also a very good idea to have an online policy for your center that says what can and cannot be posted online, and makes it clear who is in charge of creating and editing pages or posting to social media.

## Find Community Partners for Family Nutrition Education

When child care centers participating in GMHKC wanted to offer families more opportunities to learn about good nutrition, many of them partnered with community organizations that shared this educational goal. Examples of groups used by GMHKC participants include:

- WIC – Women, Infants and Children offers nutrition education classes as well as a Growing Healthy Families newsletter. You can find the closest regional office at: [healthvermont.gov/wic/](http://healthvermont.gov/wic/).
- Child care programs spoke with local supermarkets and food cooperatives about classes, field trips, demonstrations, and parent education nights. Some developed special projects with the centers, others had programs already in place to meet these requests. One example of a store with programs already in place is Hannaford Supermarkets, which worked with Champlain Islands Parent Child Center.
- UVM Extension provides food and nutrition education in Vermont communities, including the Expanded Food and Nutrition Education Program. See [www.uvm.edu/extension/food](http://www.uvm.edu/extension/food).

Children and parents in the NEKCA Head Start program joined together for cooking lessons. NEKCA has many centers around the Northeast Kingdom, and while they found bringing all centers & families together into one big event cost prohibitive, each center sponsored parent events like classes, snowshoeing, and Harvest Dinners.



## Celebrate Small Victories

Monitoring children's behavior changes is about celebrating accomplishments as much as (hopefully more than) noting where change falls short of the goal. New Beginnings Child Care Center made healthy habits certificates, providing an opportunity to recognize children's efforts to be healthy.

## Find Fun Ways to Engage Families

Sometimes it's difficult to catch the attention of busy parents with printed materials or education nights. Here are some ways that child care centers got parents involved in health and wellness while having fun:

- Garden Parties – Planting gardens, harvesting from gardens
- Field Trips
- Special Meals – Meals cooked by children to show what they've learned, especially when they've harvested the produce themselves from a farm field trip or a school garden.
- Celebration Activities – Thinking of ways to celebrate a child's birthday that go beyond cupcakes
- Fitness Challenges
- Nature Walks

### Growing Up Right says

*"[We] recommend—don't have a parents night and make it a field trip instead, for example to the grocery store to find the rainbow, or try to find and buy one unusual fruit or vegetable to taste back in the center."*

As one way to involve their parents more in nutrition education, the children at Growing Up Right also performed a play to teach about nutrition, based on the Very Hungry Caterpillar. See below for one way a child care center involved parents in nutrition education.

## "The Very Healthy Caterpillar"

To create an entertaining play that taught about nutrition, Growing Up Right rewrote the classic Very Hungry Caterpillar. Children were given a food group, and got to choose a food from that group to be their part in the play. The result was this script, which the children used to act out the story and talk about the importance of eating a variety of healthy foods.

### The Very Healthy Caterpillar

By Growing-Up Right

In the light of the moon, a little egg lay on a leaf.

One Sunday morning, the warm sun came up and –pop!– out of the egg came a very hungry caterpillar. He started to look for some food.

On Monday, he ate through one fruit, an apple.

On Tuesday, he ate through two vegetables, a carrot, and some peas.

On Wednesday, he ate through three grains, a bagel, a piece of macaroni, and a muffin.

On Thursday, he ate through one protein, a piece of fish.

On Friday, he ate through 2 dairy products, a piece of cheese and a glass of milk.

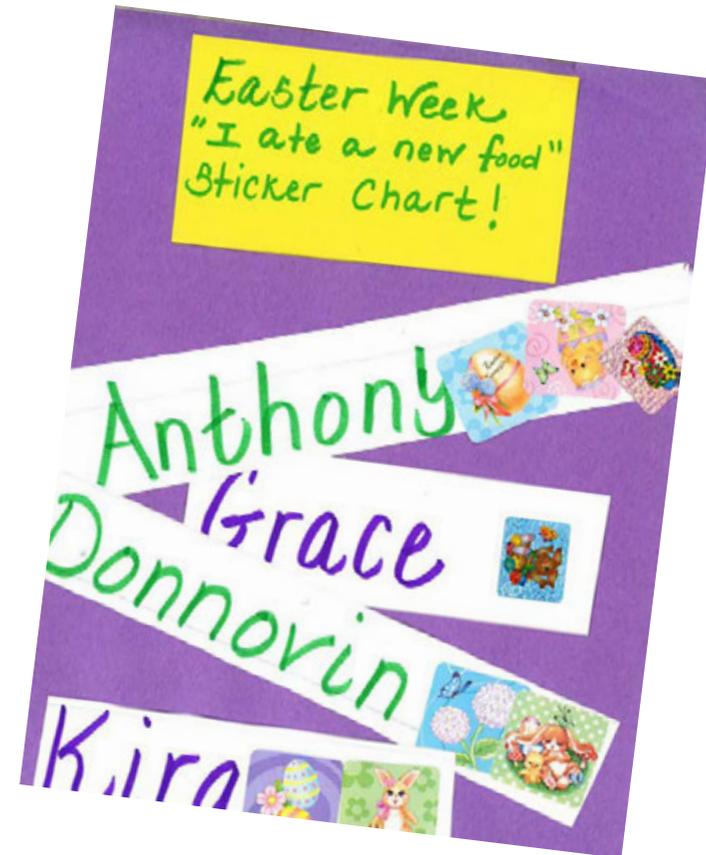
On Saturday, he ate through a purple and blue ice pop as a special treat.

The next day was Sunday again.

The caterpillar's body was strong and healthy from eating from all five food groups, so he was able to build a small house, called a cocoon around himself. He stayed inside for more than two weeks. Then he nibbled a hole in the cocoon, pushed his way out and he was a beautiful butterfly!

## Create Opportunities for Feedback

Sunrise Family Resource Center began GMHKC with a goal of getting parents and staff actively engaged in curbing childhood obesity. Along with providing educational materials to families and professional development opportunities to staff, this goal also meant an ongoing conversation about changes happening at the center. Sunrise formed a health advisory committee to continue checking in on progress. Sunrise communicated with parents and staff not only about changes to the menu, but also how those changes were received. Parents learned what new foods their children liked / didn't like and had a chance to incorporate newly discovered "likes" into meals at home. Staff kept track of how children accepted new foods. If they were offered several times in different ways and the children still rejected them, then that food was replaced with a different "new" food. These feedback loops help ensure that changes succeed.



*"It is an exciting time for us at Sunrise and our developing concern for the wellness of not just our children and their families but for ourselves in making us stronger and healthier to do what we do daily."*

The following section on Wellness Policy Development talks more about ways to set up formal feedback systems. There can also be lots of informal opportunities for feedback. In Maryland, for example, one child care center engaged parents with "Chat and Chew Coffee Stop"—a chance for parents to grab some coffee and a snack and have a conversation with staff and other parents while dropping their children off in the morning.

An additional benefit of asking for feedback is that it provides chances for parents and community members to volunteer to help. If there's a project that they think would really help meet wellness goals, then perhaps they also want to help make it a reality.

## Send Simple Surveys to Parents for Feedback

Even if you provide a variety of opportunities for people to offer their feedback, you'll probably also want to get their thoughts about specific questions and collect answers from as many parents as possible. Simple, very short surveys are one way to do that.

Surveying parents can reveal some surprising things. For example, Otter Creek Child Center surveyed parents about birthday celebrations. Everyone they surveyed thought the idea of singing "Happy Birthday" and letting the birthday child select a book for a gift was a great idea, but fewer than half the parents knew this was already happening! That was true even for parents who said they knew the birthday policy. It's easy for parents to remember prohibitions (like no sugary birthday treats) but it's just as important for them to remember the fun things their children get to do.

---

## Make Monitoring Easy and Effective

The Getting Started activities in the beginning of this guide included planning ahead for monitoring as part of an Action Plan. Having a clear idea of what information you need to collect simplifies the process once a new practice or project begins.

Be certain that the information you've chosen to collect for monitoring actually tells the story of whether an initiative is working. If the data isn't helping you know whether you're succeeding, it's going to feel like a pointless task to collect it. And don't forget that "data" isn't all numbers. GMHKC participants did measure success through numbers—tracking how many leafy greens appeared on the menu or the minutes of exercise each day—but they also measured success through stories from children and families.

As you track progress on particular projects, don't lose sight of the bigger picture. The self-assessment tool introduced at the start of this guide helps place each step forward in the context of a comprehensive approach to a healthy child care environment. Another thing that can keep that big picture perspective is creating a wellness policy, which is discussed in the next section.

## Establish an Environment of Whole-Family Learning

The Family Center of Washington County lets parents know their guiding principles on their website:

We are:

- **Family Centered:** We recognize that each family has strengths and can take a primary role in its own development.
- **Responsive:** We provide different types and degrees of support in partnership with families based on their needs.
- **Supportive:** Our programs and services strengthen families and caregivers in their vital roles of nurturing and caring for children.

We believe in:

- **Early Investment:** We build family strengths as a foundation for long-term benefits to families and communities.
- **The Right to Belong:** We promote every child being a valued member of a family and every family's connections to their communities.
- **Partnership:** We engage in and support cooperation and collaboration among educators, human service organizations and families to meet family needs in practical and respectful ways.
- **Community Engagement:** We promote and engage in community conversations and interactive dialogues to inform our decision making and to foster citizen investment in the wellbeing of young children and families.
- **Accessibility:** We make every effort to offer affordable, family friendly, and accessible services.
- **Privacy & Confidentiality:** We recognize each individual's right to privacy and to control the release of personal information.
- **Thriving Staff:** As a full staff, we practice each of the above principles in daily interactions with each other.

The Peanut Gallery collected stories to show the success of cooking classes to teach parents to cook from scratch.

*"One parent took home a bag of ingredients and made the meal [we learned] at home. One parent had learned to make a roux in class and made turkey gravy from scratch for Thanksgiving for the first time."*

### USE MONITORING TO KEEP FORWARD MOMENTUM FOR YOUR WELLNESS INITIATIVE

In an earlier example, New Beginnings Child Care used stickers to keep track of new foods children tried and certificates to mark small accomplishments along the way to a healthy lifestyle. In that example, "monitoring" was sticker charts and it encouraged children forward to meet their goals. When we turn to monitoring the performance of a new project or program, though, it's easy to start thinking of monitoring as, at best, too much paperwork and, at worst, a system for highlighting everything that fell short of expectations. It doesn't have to be that way.

When you have a clear structure for monitoring how things are going with a new initiative, you are always going to find areas to improve. But, at the same time, monitoring records small successes on the way towards a larger goal. Think about the example of a center trying to improve the amount of time spent in outdoor physical activity. Maybe during the month of November children didn't reach the target number of minutes each day, but maybe teachers also invented several new outdoor games for November weather that can help reach the target number of minutes next year. If you're measuring both minutes and activities, there is a success in activities plus a baseline number of minutes to improve on in the future.

A common piece of advice from child care centers completing GMHCK was to celebrate successes and see the value in baby steps. Monitoring systems can record those small steps, set benchmarks where you can pause to celebrate a success, and help keep everyone enthusiastic about continuing to make progress.

We follow this Promising Practices section with information on developing wellness policies. As noted in the introduction to this guide, policies provide a fundamental description of a child care center's approach to health and wellness. The sample policy framework and assessment we share in Additional Resources reflect national recommendations and are a good starting point; many of the promising practices stem from their guidance. Eventually, however, your child care center will want to have its own policy to guide practices.





# Creating a Wellness Policy

A child care center's wellness policy sets direction, shape programming, and establishes expectations for administration, staff, and parents. It describes in clear language the sort of environment you intend to create for encouraging healthy eating and physical activity. Wellness policies include both a broad general statement about the approach your center takes to wellness as well as information that is detailed enough to be useful in making day-to-day decisions. Policies do not describe activities that are expected to regularly change. Routines that a particular teacher implements in her classroom, for example, are not policies, they are practices.

## EXAMPLE

*Here's how Northshire Day School describes what their policy is designed to accomplish: Northshire Day School is committed to providing an intellectually stimulating school environment that promotes and protects children's health, social and emotional well-being, and ability to learn*

*by supporting healthy eating, physical activity and other behaviors that contribute to a child's wellness. Children need access to healthful food and opportunities to be physically active in order to grow, learn, and thrive. To role model healthy behaviors, teachers, parent volunteers, and all other adults visiting school will adhere to the same wellness practices as the children.*

Whether you're creating a policy from scratch or updating an old one, it's an opportunity to:

- Check in with nationally recognized best practices, and how your center compares to those recommendations.
- Offer a starting point for staff and parents to have a conversation about wellness as they give input into the final policy.
- Provide written guidance as practices build over time, so that no one loses sight of the core wellness goals.
- Create continuity as new children (and their parents) join the center or as staff changes.
- Communicate to prospective families your center's approach to health and wellness.

The Additional Resources section includes both a sample policy and the Wellness Policy Worksheet that GMHKC participants used to develop their own policies. The worksheet breaks the process into eight steps:

- 1. IDENTIFY YOUR TEAM:** The policy team will draft or revise your policy, support its implementation, document and evaluate progress, and make revisions as necessary. Here's an opportunity to pull in different perspectives, from staff, families, community, and also people with particular areas of expertise, like dietitians. Including people with different backgrounds can not only lead to better policy, but also save time by making effective use of others' expertise.

#### Some things to consider while building your team:

- Can you join efforts with another team that is working towards a related goal?
- Have you invited individuals who are representative of your child care program, families, and community?
- Does your team represent the ethnic, cultural, and demographic characteristics of your center?

#### EXAMPLE

*Sunrise Family Resource Center began with a wellness committee of Early Childhood Education staff. Although they originally hoped to have a broader starting group, they were able to use this small committee to get to that wider input. The Early Childhood Education staff established a preliminary Wellness Policy, then Sunrise began to expand it to all staff. The introduction began with applying the nutrition standards to the all-agency Staff Luncheon, then a presentation for an all-agency staff meeting, with discussion and input from everyone. This approach balanced letting the most interested group take the lead with engaging everyone in designing the final product.*



- 2. IDENTIFY YOUR POLICY DEVELOPMENT PROCESS:** The process will ensure everyone who needs to give input can give input and that final policies comply with requirements of your center and outside organizations (state requirements, CACFP, Head Start, funding agencies, accrediting organizations, etc.). GMHKC participants reported that having a policy that reflected all the different outside requirements alongside the center's own philosophy simplified decision making and improved efficiency.

#### Consider these components of the development process:

- Who needs to be involved or kept informed about the policy development?
- Is there a specific format that needs to be used for the final document?
- What is the timeline for policy review and approval?
- What needs to be included to comply with local, state, and federal requirements (for example, CACFP, Head Start) as well as the requirements of any agency funding your program?
- If your program is accredited, what are the requirements of the accrediting organization?

**3. ASSESS EXISTING POLICIES:** The Self-Assessment Worksheet (p. 48) and the Wellness Policy Worksheet (p. 74), in the Additional Resources section, walk you through the areas to consider when making a policy. Their list of what goes into a strong policy is a good starting point. It's also important to check in with staff and parents to see what they think about existing policies, and how they reflect (or don't reflect) their values regarding nutrition, eating practices, and physical activity.

Whether you are beginning with policy development or began with key practices and are now moving to policy development, this assessment is also a time to ask about the goals behind common practices. In a simple example, if every classroom has the practice of making fresh water available, there may be a larger goal of providing access to water at all times. If "access to water at all times" were a policy then other practices that follow would include making water available outside and on field trips.

**4. PRIORITIZE NEEDS AND DEVELOP AN ACTION PLAN:** The Getting Started section of this guide goes over prioritizing needs and developing action plans. If a policy is in place but not followed, or if you lack policies in an area entirely, then those are places to start making changes.



**5. DRAFT POLICY LANGUAGE:** The key to policy language is clarity. The policy document should be able to guide activities in your center and also answer parent's questions about how nutrition, physical activity, and education are handled when their child(ren) are in child care. Whenever there is a change – in staff, in children, in directors – the policy language should be clear enough to provide continuity.

#### EXAMPLE

*In their wellness policy, Mary Johnson Children's Center lists both Center-created goals and also goals that meet the requirements of outside programs in which they participate. For example, their introduction to 'Nutrition Education' states: Mary Johnson Children's Center is a NAEYC accredited program and also a Head Start site. NAEYC Standards specify that children are provided varied opportunities and materials to help them learn about nutrition, including identifying sources of food and recognizing, preparing, eating, and valuing healthy foods. Head Start regulations require that children are provided with opportunities for involvement in food-related activities, as developmentally appropriate.*

- 6. BUILD AWARENESS AND SUPPORT:** Inviting people to join your policy development team, asking for their feedback on existing policies, asking people both on the committee and outside of the committee for their reflections on existing policies and / or practices, getting input from people with expertise in particular areas, are all parts of the policy development process that start building awareness and support. Strategies from the Communication, Promotion, and Monitoring section of Promising Practices are also useful here.

Building background awareness and support is one step, but people also need to be aware of the full policy document after it is drafted, have an opportunity to give input, and then receive the final version. Some ways to share the policy document include:

- Send an electronic version to all administrators, teachers, food service, staff and families
- Post the policy on your child care program website
- Present the policy at a staff meeting
- Plan a time to introduce the policy to families during a program-wide event and include an opportunity for Q&A.

- 7. IMPLEMENT YOUR POLICY:** The examples in the Promising Practices section of this guide all give ideas and tools for turning policy into practice.

**8. DOCUMENT ACTIVITIES AND EVALUATE PROMISING PRACTICES:**

The Action Plan template provides space for planning how to document activities so that you can tell what has been successful as you implement your wellness policy. During GMHKC, participating child care centers met with mentors to talk about changes happening at their center and evaluate possible best practices. The evaluation began with steps centers were taking to improve wellness and, for each activity, asked:

- What happened?
- Who was impacted?
- How were they impacted?
- What is evidence or examples of the impact?
- Any other items of note, including notes on what might be done differently in the future or advice for others trying a similar activity.

A wellness policy isn't meant to be a frequently changing document, but a new policy will require adjustments to get it right. The systems of feedback set up at the beginning of the policy planning process can make sure that everyone checks in regularly to make those needed adjustments. Changes will become much less frequent after the initial implementation of the policy. As federal recommendations change, or requirements of funding agencies change, it will be important to reflect those changes in updated policies. You will want to be sure the policy doesn't become "stale", falling out of sync with the needs and philosophy of your child care center. And it will be important to check in regularly on how the policies are implemented in daily practices.



# Additional Resources

- [40 Wellness Resources](#)
- [48 Self-Assessment](#)
- [62 Action Planning Template](#)
- [73 Promising Practices Template](#)
- [74 Wellness Policy Worksheet](#)
- [76 Mary Johnson Children Center Wellness Policy](#)

## Child Care Policies and Practices

---

### **Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education, 3rd Edition**

National Resource Center for Health and Safety  
in Child Care and Early Education

<http://nrckids.org/CFOC3/index.html>

*National standards on quality health and safety practices and policies that should be followed in today's early care and education settings.*

### **Connecticut Action Guide for Child Care Nutrition and Physical Activity Policies**

Connecticut State Department of Education

<http://www.sde.ct.gov/sde/cwp/view.asp?a=2678&Q=322594>

*A guide intended to help local and community child care, early education, and afterschool programs establish and implement policies and practices that encourage healthy lifestyles in children.*

### **Early Childhood Obesity Prevention Policies**

Institute of Medicine

[http://books.nap.edu/openbook.php?record\\_id=13124](http://books.nap.edu/openbook.php?record_id=13124)

*Recommendations for policies on early childhood obesity prevention in the first 5 years of life.*

### **Let's Move! Child Care**

White House; Department of Health and Human Services; National Association of Child Care Resource & Referral Agencies; Nemours Foundation; University of North Carolina

<http://www.healthykidshealthyfuture.org>

*Resources for child care providers to instill healthy choices that could help prevent childhood obesity from the start.*

### **Nutrition and Physical Activity Self-Assessment for Child Care**

North Carolina Healthy Weight Initiative, University of North Carolina

<http://centertrt.org/?p=intervention&id=1091>

*Targets child care policy, practice, and environmental influences on nutrition and physical activity behaviors in young children.*

## Choking Hazards

---

### **Choking Prevention**

Healthy Meals Resource System, National Agricultural Library, United States Department of Agriculture

<http://healthymeals.nal.usda.gov/hsmrs/chokingprevention>

*Website with links to resources from a variety of sources that provide guidelines for reducing the risk of choking.*

### **Choking Prevention, Chapter 9 of Feeding Infants: A Guide for Use in the Child Nutrition Programs**

Team Nutrition, Food and Nutrition Service, United States Department of Agriculture

<http://teamnutrition.usda.gov/Resources/feedinginfants-ch9.pdf>

*Helpful tips to serve food safely to infants and children and prevent choking.*

### **Complementary Foods, Chapter 5 of Infant Nutrition and Feeding: A Guide for Use in the WIC and CSF Programs**

WIC Works Resource System, National Agricultural Library, United States Department of Agriculture

[http://www.nal.usda.gov/wicworks/Topics/FG/Chapter5\\_ComplementaryFoods.pdf](http://www.nal.usda.gov/wicworks/Topics/FG/Chapter5_ComplementaryFoods.pdf)

*This resource reviews current knowledge regarding the introduction of complementary foods, appropriate types of complementary foods to feed an infant, home preparation of infant food, using commercially prepared infant food, how to prevent choking, and other practical aspects of feeding complementary foods and beverages.*

# Wellness Resources

## Foods Associated with Choking

National Agricultural Library, United States Department of Agriculture

[http://www.nal.usda.gov/wicworks/WIC\\_Learning\\_Online/support/job\\_aids/choking.pdf](http://www.nal.usda.gov/wicworks/WIC_Learning_Online/support/job_aids/choking.pdf)

*WIC (Special Supplemental Nutrition Program for Women, Infants and Children) provides a list of foods associated with choking in children.*

## Infant and Child Life Saving Steps, Appendix A from Building Blocks for Fun and Healthy Meals

Team Nutrition, Food and Nutrition Service, United States Department of Agriculture

<http://teamnutrition.usda.gov/Resources/appenda.pdf>

*Resource includes two handouts that list steps to prevent choking, as well as helpful tips to assist individuals who may be choking.*

## MyPlate Food Safety: Choking Hazards

Center for Nutrition Policy and Promotion, United States Department of Agriculture

<http://www.choosemyplate.gov/Preschoolers/food-safety/choking-hazards.html>

*Highlights foods that young children may choke on and lists steps to take to prevent choking.*

## Food Allergies

---

### Food Allergies and Intolerances

Nutrition.gov

[www.nutrition.gov/allergies](http://www.nutrition.gov/allergies)

*Web site with links to resources that list common food allergens and their causes, signs, and symptoms.*

## Food Allergies or Just Food Fussiness?

Team Nutrition, Food and Nutrition Service, United States Department of Agriculture

[http://teamnutrition.usda.gov/Resources/Nibbles/Nibbles\\_Newsletter\\_26.pdf](http://teamnutrition.usda.gov/Resources/Nibbles/Nibbles_Newsletter_26.pdf)

*Nibbles for Health take-home newsletter for parents of young children.*

## Food Allergies Publications & Resources

Centers for Disease Control and Prevention, Department of Health and Human Services

<http://www.cdc.gov/healthyyouth/foodallergies/publications.htm>

*Resources and Web sites that address food allergy issues faced by youth, and tips to prevent and manage allergic reactions.*

## Food Allergies: What You Need to Know

Food and Drug Administration, Department of Health and Human Services

<http://www.fda.gov/Food/ResourcesForYou/Consumers/ucm079311.htm>

*Resource that identifies the most common food allergens and important information to help consumers make informed choices when purchasing food products.*

## Food Allergy Fact Sheet for Child Nutrition Professionals

National Food Service Management Institute

<http://nfsmi-web01.nfsmi.olemiss.edu/documentlibraryfiles/PDF/20100312115315.pdf>

*Provides detailed information on food allergies and how food allergies are handled in relation to the operation of child nutrition programs.*

## Food Allergy Resources

Healthy Meals Resource System, National Agricultural Library, United States Department of Agriculture

<http://healthymeals.nal.usda.gov/hsmrs/foodallergies>

*Web site with a list of various food allergy resources.*

# Wellness Resources

## Food Allergy Topics

Healthfinder.gov

<http://healthfinder.gov/Scripts/SearchContext.asp?topic=320>

*Web site with numerous food allergy links and resources.*

## Meeting Children's Special Food and Nutrition Needs in Child Nutrition Programs

National Food Service Management Institute

<http://nfsmi-web01.nfsmi.olemiss.edu/ResourceOverview.aspx?ID=89>

*Lesson focuses on managing food allergies, and includes an instructor's guide, PowerPoint presentation, and video.*

## Recognizing and Responding to Food Allergy Symptoms

National Food Service Management Institute

<http://nfsmi-web01.nfsmi.olemiss.edu/documentlibraryfiles/PDF/20090210035621.pdf>

*Handout reviews how to recognize and respond to food allergy symptoms.*

## Understanding Food Allergy

National Institute of Allergy and Infectious Diseases, Department of Health and Human Services

<http://www.niaid.nih.gov/topics/foodallergy/understanding/Pages/default.aspx>

*Resource provides numerous links to basic food allergy information, possible causes, and how a food allergy is diagnosed.*

## Food Safety

---

### Food Safety Information

Food Safety and Inspection Service, United States Department of Agriculture; United States Food and Drug Administration; and the Centers for Disease Control and Prevention, Department of Health and Human Services.

<http://www.FoodSafety.gov>

*This Web site is the gateway to food safety information provided by government agencies. Consumers can also sign up to receive notification of recalls and alerts.*

### Basics of Safe Food Handling

Food Safety and Inspection Service, United States Department of Agriculture

[http://www.fsis.usda.gov/Fact\\_Sheets/Basics\\_for\\_Handling\\_Food\\_Safely/index.asp](http://www.fsis.usda.gov/Fact_Sheets/Basics_for_Handling_Food_Safely/index.asp)

*Web site discusses the basics of safe food handling including shopping, storage, preparation and cooking.*

### Be Food Safe: Food Safety Education

Food Safety and Inspection Service, United States Department of Agriculture

<http://www.befoodsafe.gov>

*Food safety education website.*

### Child Care Mini-Posters

National Food Service Management Institute

[www.nfsmi.org](http://www.nfsmi.org) (Click on 'Child and Adult Care Food Program')

*Ten colorful 8 ½" x 11" laminated mini-posters available in English and Spanish. Topics include hand washing, cross contamination, grocery shopping tips, safe handling of baby food, breast milk, safe temperature for foods, and meat, poultry, and fish safety.*

# Wellness Resources

## Common Foodborne Illnesses: Causes and Symptoms

FightBac.org

<http://fightbac.org/about-foodborne-illness/causes-a-symptoms>

*Easy-to-read chart outlining the causes and symptoms of common foodborne illnesses.*

## Cooking Safely in the Microwave Oven Fact Sheet

Food Safety and Inspection Service, United States Department of Agriculture

[http://www.fsis.usda.gov/Fact\\_Sheets/Cooking\\_Safely\\_in\\_the\\_Microwave/index.asp](http://www.fsis.usda.gov/Fact_Sheets/Cooking_Safely_in_the_Microwave/index.asp)

*Fact sheet outlining safety tips for cooking in the microwave oven, including instructions for defrosting and recommendations for using containers and wraps.*

## Eating Outdoors, Handling Food Safely

Food and Drug Administration, Department of Health and Human Services

<http://www.fda.gov/Food/ResourcesForYou/Consumers/ucm109899.htm>

*Web site providing tips on packing and transporting food safely, picnic site preparation, and handling food safely when eating outdoors.*

## Fight BAC! Keep Family Food Safe

Team Nutrition, Food and Nutrition Service, United States Department of Agriculture

[http://www.teamnutrition.usda.gov/Resources/Nibbles/Nibbles\\_Newsletter\\_32.pdf](http://www.teamnutrition.usda.gov/Resources/Nibbles/Nibbles_Newsletter_32.pdf)

*Nibbles for Health take-home newsletter for parents on keeping family food safe.*

## Food Safety Topics

Center for Food Safety and Applied Nutrition, Food and Drug Administration, Department of Health and Human Services

<http://healthfinder.gov/FindServices/SearchContext.aspx?topic=321>

*Web site provides list of food safety topics and Web links to provide more information on a variety of topics related to food safety.*

## Food Safety Activities for Kids

FightBac.org

<http://www.fightbac.org/fightbac-downloads/kids-activities>

*Use coloring and learning activities to help teach food safety habits.*

## Food Safety Advice for Everyone

Center for Nutrition Policy and Promotion, United States Department of Agriculture

<http://www.choosemyplate.gov/healthy-eating-tips/food-safety-advice.html>

*General food safety advice that is based on the clean, separate, cook, and chill recommendations from the USDA Food Safety and Inspection Service (FSIS).*

## Food Safety at CDC

Food Safety Office, Centers for Disease Control and Prevention, Dept. of Health and Human Services

[www.cdc.gov/foodsafety](http://www.cdc.gov/foodsafety)

*Web site provides data on foodborne illness and outbreaks, and shares resources on prevention and education.*

## Food Safety Educational Resources

Food Safety and Inspection Service, United States Department of Agriculture

<http://www.fsis.usda.gov/education/>

*Educational resources that cover the importance of food safety and how to prevent common foodborne illnesses.*

# Wellness Resources

## Is It Done Yet?

Food Safety and Inspection Service, United States Department of Agriculture

[http://www.fsis.usda.gov/is\\_it\\_done\\_yet/](http://www.fsis.usda.gov/is_it_done_yet/)

*Information on how to tell when cooked food is safe to eat.*

## Handle Leftovers Safely

FightBac.org

<http://www.fightbac.org/storage/documents/flyers/limits%20to%20leftovers.pdf>

*Resource discusses handling leftovers safely and basic food safety principles.*

## Handwashing: Clean Hands Save Lives

Centers for Disease Control and Prevention, Department of Health and Human Services

<http://www.cdc.gov/handwashing/>

*Web site has tips, fact sheets, posters, and videos on handwashing.*

## Keep Hands Clean with Good Hygiene Poster

Food Safety and Inspection Service, United States Department of Agriculture

[http://www.fsis.usda.gov/PDF/NFSEM\\_Clean\\_Card.pdf](http://www.fsis.usda.gov/PDF/NFSEM_Clean_Card.pdf)

*Display this hand-washing poster above the sinks in your child care facility or home to remind both children and adults to wash their hands.*

## Kitchen Thermometers Fact Sheet

Food Safety and Inspection Service, United States Department of Agriculture

[http://www.fsis.usda.gov/Fact\\_Sheets/Kitchen\\_Thermometers/index.asp#4](http://www.fsis.usda.gov/Fact_Sheets/Kitchen_Thermometers/index.asp#4)

*Information on appliance and food thermometers, and temperature indicators.*

## Safe Minimum Temperatures Chart

Food Safety.gov

<http://www.foodsafety.gov/keep/charts/mintemp.html>

*Use this chart and a food thermometer to make sure that foods reach a safe minimum internal temperature.*

## Serving Safe Food in Child Care

National Food Service Management Institute

[www.nfsmi.org](http://www.nfsmi.org) (click on "Child and Adult Care Food Program")

*Based on the four principles: Clean, Separate, Cook, and Chill. Developed specifically for child care providers in the CACFP environment.*

## Start at the Store: 7 Ways to Prevent Foodborne Illness

Food and Drug Administration, Department of Health and Human Services

<http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm094535.htm>

*Helpful steps consumers can take to prevent foodborne illness while at the grocery store.*

## The Story of Bac for Kindergarten and First Graders

FightBac.org

<http://www.fightbac.org/storage/documents/curriculum/k-3storyofbac.pdf>

*Share story time together and teach children about germs.*

## Wash Your Hands Podcast Video

Centers for Disease Control and Prevention, Department of Health and Human Services <http://www2c.cdc.gov/podcasts/videowindow.asp?f=789183&af=v>

*Watch a fun video clip, sing a handwashing song, practice washing hands together, and encourage regular handwashing.*

## Nutrition

---

### Dietary Guidelines for Americans, 2010

Center for Nutrition Policy and Promotion, United States Department of Agriculture

<http://www.cnpp.usda.gov/dietaryguidelines.htm>

*Web site provides links to the Federal evidence-based nutrition guidance document and supporting materials that promote health.*

### Grow It, Try It, Like It! Preschool Fun with Fruits and Vegetables

Team Nutrition, Food and Nutrition Service, United States Department of Agriculture

<http://www.teamnutrition.usda.gov/Resources/growit.html>

*Garden-themed nutrition education kit for child care center staff that introduces children to three different fruits and three different vegetables.*

### Health and Nutrition Information for Preschoolers

Center for Nutrition Policy and Promotion, United States Department of Agriculture

<http://www.choosemyplate.gov/preschoolers.html>

*Geared towards parents and caregivers of children 2 through 5 years of age, this Web site includes the new MyPlate for Preschoolers, as well as information on developing healthy eating habits, trying new foods, playing actively, and more.*

### Improving Nutrition & Physical Activity Quality: Menu Planning Guide

Delaware Department of Education Child Nutrition Programs

<http://healthykidshealthyfuture.org/content/dam/nemours/www/filebox/service/preventive/nhps/publication/nhpsmenuplanning.pdf>

*Menu planning guide that provides CACFP menus and reimbursable recipes, as well as shopping lists.*

### MODEL Health! Promoting Nutrition and Physical Activity in Children

Healthy Meals Resource System, National Agricultural Library, United States Department of Agriculture

<http://healthymeals.nal.usda.gov/hsmrs/Maryland/MODELHealth.pdf>  
*Nutrition and physical activity lessons for children 3 to 5 years old.*

### MyPlate

Center for Nutrition Policy and Promotion, United States Department of Agriculture

<http://www.choosemyplate.gov/>

*Web site highlights the MyPlate nutrition messages for consumers that are based on the Dietary Guidelines for Americans 2010.*

### Nutrition Education and Programs

Nutrition.gov

<http://www.nutrition.gov/>

*Web site provides links to online government nutrition resources.*

### Nutrition Resources for Child Care

Healthy Meals Resource System, National Agricultural Library, United States Department of Agriculture

<http://healthymeals.nal.usda.gov/hsmrs/nutritionforyoungchildren>  
*Web site with links to resources and nutrition guidance for feeding children ages 2 to 5 years.*

### Nutrition Topics information

Centers for Disease Control and Prevention, Department of Health and Human Services

<http://www.cdc.gov/nutrition/index.html>

*Web site provides links to a wide variety of nutrition topics found within the Centers for Disease Control and Prevention.*

# Wellness Resources

## Health Topics A to Z

Healthfinder.gov

<http://www.healthfinder.gov/HealthTopics/>

*Web site with different health topics and tools to help families stay healthy.*

## Team Nutrition Resource Library

Team Nutrition, Food and Nutrition Service, United States Department of Agriculture

<http://www.teamnutrition.usda.gov/library.html>

*Library of resources developed by Team Nutrition to promote nutrition education and physical activity in schools and child care.*

## Physical Activity

---

### Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education, 3rd Edition

National Resource Center for Health and Safety in Child Care and Early Education

<http://nrckids.org/CFOC3/index.html>

*National standards on quality health and safety practices and policies that should be followed in today's early care and education settings.*

### Eat Well Play Hard in Child Care Settings

New York State Department of Health

[http://www.health.ny.gov/prevention/nutrition/cacfp/ewphccs\\_curriculum/index.htm](http://www.health.ny.gov/prevention/nutrition/cacfp/ewphccs_curriculum/index.htm)

*A curriculum on improving the nutrition and activity behaviors of preschool children and their parents or caregivers.*

### Family Checklist for Physical Activity in Early Care and Education

National Resource Center for Health and Safety in Child Care and Early Education

<http://nrckids.org/physicalchecklist.pdf>

*A checklist for families to assess the physical activity practices of their child care providers.*

### Got Dirt? Gardening Initiative

Nutrition, Physical Activity and Obesity Program; Wisconsin Department of Health Services

[http://www.dhs.wisconsin.gov/health/physicalactivity/pdf\\_files/GotDirt\\_09.pdf](http://www.dhs.wisconsin.gov/health/physicalactivity/pdf_files/GotDirt_09.pdf)

*A toolkit to assist with implementation of gardens in child care programs.*

### Head Start Body Start

National Center for Physical Development and Outdoor Play

<http://www.headstartbodystart.org>

*Web site with resources for child care providers to bring active play and meaningful movement to their programs.*

### I am Moving, I am Learning

Administration for Children and Families, Department of Health and Human Services

<http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/Health/Nutrition/Nutrition%20Program%20Staff/IamMovingIam.htm>

*A proactive approach for addressing childhood obesity in Head Start children that seeks to increase daily physical activity, improve the quality of movement activities intentionally planned and facilitated by adults, and promote healthy food choices every day.*

# Wellness Resources

## Let's Move! Child Care Activities

White House; Department of Health and Human Services; National Association of Child Care Resource & Referral Agencies; Nemours Foundation; University of North Carolina

<http://healthykidshealthyfuture.org/content/hkhf/home/activities.html>

*Web site with activities, tools, and resources for helping young children be physically active.*

## Nutrition and Physical Activity Self-Assessment for Child Care

North Carolina Healthy Weight Initiative, University of North Carolina

<http://centertrt.org/?p=intervention&id=1091>

*Targets child care policy, practice, and environmental influences on nutrition and physical activity behaviors in young children.*

## Physical Activity Resources for Young Children

Healthy Meals Resource System, National Agricultural Library, United States Department of Agriculture

<http://healthymeals.nal.usda.gov/hsmrs/physicalactivity>

*Web site with links to resources to help motivate children to move more and sit less.*

## Physical Activity Topics

Centers for Disease Control and Prevention, Department of Health and Human Services

<http://www.cdc.gov/physicalactivity/index.html>

*Web site with links to resources and information on physical activity in the United States.*

## Screen Time

### Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education, 3rd Edition

National Resource Center for Health and Safety in Child Care and Early Education

[http://nrckids.org/CFOC3/PDFVersion/preventing\\_obesity.pdf](http://nrckids.org/CFOC3/PDFVersion/preventing_obesity.pdf)

*National standards on quality health and safety practices and policies that should be followed in today's early care and education settings.*

### Electronic Media Use and Screen Time Resources for Young Children

Healthy Meals Resource System, National Agricultural Library, United States Department of Agriculture

<http://healthymeals.nal.usda.gov/cacfp-wellness-resources-child-care-providers/electronic-media-use-screen-time>

*Web site with links to resources to help reduce screen time and to motivate children to play more and watch less.*

### Screen Free Moments: Promoting Healthy Habits - Video for Child Care Providers

National Resource Center for Health and Safety in Child Care and Early Education

<http://nrckids.org/ScreenFreeMoments/index.htm>

*This video shows some simple ways to limit or even eventually eliminate screen time in family child care homes.*

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

Check the appropriate box to indicate whether each recommendation is fully implemented, partially implemented or not implemented by the child care program. If a recommendation does not apply, check "NA". For example, the recommendations for infants do not apply to an afterschool program serving school-age children.

NUTRITION STANDARDS	IMPLEMENTATION			
	N/A	None	Partial	Full
<b>Menu Planning</b>				
The child care program uses a cycle menu of at least five weeks that changes with the seasons and contains minimal repetition.				
Menus are planned using good menu planning principles, local foods and include a variety of new and familiar healthy and appealing foods. Menus regularly include foods from different cultures.				
Menus are planned and approved by an individual with knowledge of nutrition, the Child and Adult Care Food Program (CACFP) requirements, children's developmental skills and abilities and an understanding of children's eating behaviors.				
The menu planning process includes input from families and staff members through menu surveys, discussions, meetings and other means.				
Written menus are developed at least one month in advance and are posted and shared with families and staff members.				
<b>Nutrition Guidelines for Children</b>	N/A	None	Partial	Full
The child care program provides healthy and safe meals and snacks that meet the nutrition requirements established by federal and state laws and regulations. Agreements with food or vending companies ensure that contractors follow these requirements.				
Menus offer a variety of nutritious food choices that are consistent with the CACFP Meal Pattern and the Dietary Guidelines for Americans.				
Meals and snacks emphasize nutrient-rich foods, including fruits, vegetables, whole grains, low-fat or nonfat dairy, lean meats, skinless poultry, fish, eggs, legumes, nuts and seeds and local foods when possible.				
Healthy food preparation techniques are used (i.e. draining fat from meat, using applesauce rather than oil during baking).				
<b>Nutrition Guidelines for Infants</b>	N/A	None	Partial	Full
The child care program creates an environment that encourages and supports mothers who are breastfeeding their infants, including: refrigerated storage for breast milk; a comfortable, private area for mothers to breastfeed their infants or express milk; sensitivity for breastfeeding mothers and their infants; and training for staff members on proper handling of breast milk.				
If a mother is breastfeeding exclusively, staff members will feed the mother's expressed breast milk to the infant and support the mother in breastfeeding her infant when visiting the facility.				
Breastfed infants will receive infant formula only if the mother requests it.				
The child care program supports exclusive breastfeeding or iron-fortified infant formula for the first six months of life.				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

The child care program works in consultation with families to gradually introduce solid foods from ages 4 to 6 months, based on each infant's developmental readiness. All foods provided to infants will meet the CACFP requirements.				
The child care program will not serve infants any food or drink in a bottle other than breast milk or iron-fortified infant formula unless medically necessary and documented by a medical statement.				
Following the American Academy of Pediatrics recommendations, the child care program encourages children ages 1 and older to use a cup exclusively, instead of a bottle.				
<b>Special Dietary Needs</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program follows state and federal requirements for accommodating children with special dietary needs.				
With appropriate medical documentation, the child care program prepares modified meals for children (including infants) with food allergies or other special dietary needs.				
Parents must provide the appropriate medical statement before the child care program can make any dietary accommodations. This statement must be signed by a licensed physician if the child is considered disabled or by a recognized medical authority (i.e., physician, physician assistant, doctor of osteopathy or advanced practice registered nurse) if the child is not disabled but has medical or other special dietary needs.				
The child care program takes appropriate precautions to prepare and serve safe meals and snacks for children with food allergies. Procedures are in place to: <ul style="list-style-type: none"> <li>• develop a food allergy action plan for each child with life-threatening food allergies;</li> <li>• check ingredients labels for all foods served to children with food allergies;</li> <li>• designate an area in the kitchen for allergy-free meals and use separate equipment and utensils during preparation, cooking and serving;</li> <li>• develop cleaning procedures that avoid cross-contamination; and</li> <li>• provide ongoing training for staff members.</li> </ul>				
<b>Parent-Provided Meals and Snacks</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
When meals and snacks are provided from home for an individual child's consumption, families support safe and healthy eating by providing nutrient-rich choices that meet the CACFP Meal Pattern				
Foods provided by parents are healthy choices from the CACFP meal components of grains and breads, meat and meat alternates and vegetables and fruits. They are low in fat, added sugars and sodium.				
Beverages provided for children (ages 1 and older) will consist only of: <ul style="list-style-type: none"> <li>• whole milk for children younger than 2;</li> <li>• low-fat (1%) or fat-free unflavored milk for children ages 2 and older;</li> <li>• water without added ingredients, e.g., flavors, sugars, sweeteners (natural or artificial), sugar alcohols and caffeine.</li> </ul>				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

Beverages for infants (birth through 11 months) will consist only of: <ul style="list-style-type: none"> <li>• breast milk (preferred) or iron-fortified infant formula; and</li> <li>• water without added ingredients for infants ages 7 months and older when it can be served in a cup.</li> </ul>				
Families will provide safe foods for children by clearly labeling all foods with the child's name and date and type of food and storing all foods at an appropriate temperature until they are eaten.				
Children are not allowed to share lunches and snacks brought from home with other children.				
Foods that do not meet the child care program's standards for nutrition and food safety will be returned home with the children. The child care program supplements children's meals or snacks if food from home is deficient in meeting the child's nutrient needs.				
<b>Celebrations</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program promotes non-food celebrations. If foods and beverages are served at celebrations, they consist only of healthy choices that meet the center's nutrition policy.				
Families support the child care program's efforts by providing only non-food items or healthy foods that meet the center's nutrition policy for celebrations, holiday parties and other events on site.				
To protect food safety and guard against allergic reactions, all food provided by families to be shared with other children must be either whole fruits (e.g., apples, oranges or pears) or commercially prepared packaged foods that are unopened and, when possible, individually wrapped.				
The child care program provides staff members and families with party ideas, including an approved list of appropriate healthy foods and beverages and non-food activities for parties.				
Foods and beverages that do not meet the child care program's standards for nutrition and food safety are not accepted or served.				
<b>Functions, Events and Meetings</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
All foods and beverages served at any functions, events and meetings on site, whether provided by the child care program or brought from home by families, meet the center's nutrition policy.				
<b>Fundraising</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
Fundraising activities do not involve food or beverages or only use foods and beverages that meet the center's nutrition policy.				
The child care program encourages fundraising activities that promote physical activity, as developmentally appropriate.				
The child care program provides a list of ideas for acceptable fundraising activities, such as non-food items or healthy foods and beverages.				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

Access to Drinking Water	N/A	None	Partial	Full
Safe, fresh drinking water will be clearly visible and available to children at all times indoors and outdoors, including during meals and snacks.				
Water will not be offered as a choice to replace the CACFP meal pattern components of milk.				

**NUTRITION STANDARDS**

Review the areas rated "none" or "partial" and identify the priority areas for change in your child care program.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

EATING ENVIRONMENT	IMPLEMENTATION			
	N/A	None	Partial	Full
<b>Meal Schedules - Children</b>				
The child care program schedules meal and snack periods at appropriate times that are not too close together or too far apart. Food is offered at least every three hours so that children's hunger does not overwhelm their ability to self-regulate food intake.				
To encourage meal consumption and improve children's behavior, mealtimes are scheduled after structured physical activity or active play.				
Adequate time is provided to allow all children to eat and socialize. Scheduled mealtimes provide children with at least 20 minutes to eat breakfast or snack and at least 30 minutes to eat lunch or supper, after the children are sitting at the table.				
The child care program accommodates the tooth-brushing regimens of all children, including those with special oral health needs, e.g., orthodontia or high tooth decay risk.				
<b>Meal Schedules - Infants</b>				
The child care program feeds infants according to the written feeding plan provided by parents. Infants are fed on demand following cues for hunger and fullness.				
Infants' teeth and gums are wiped with a disposable tissue or gauze after each feeding.				
<b>Pleasant and Healthy Eating Environment - Children</b>				
The child care program serves meals and snacks in safe, clean and pleasant settings, and develops an eating environment that provides children with a relaxed, enjoyable climate. The eating environment is a place where children have: <ul style="list-style-type: none"> <li>• adequate space to eat;</li> <li>• clean and pleasant surroundings;</li> <li>• appropriate and culturally relevant eating dishes and utensils;</li> <li>• pleasant conversation; and</li> <li>• convenient access to hand washing facilities before meals and snacks.</li> </ul>				
Mealtimes include predictable routines, such as washing hands before coming to the table, assisting with setting plates and utensils and cleaning up after meals.				
Meals are served family style, where children serve themselves from common platters of food with assistance from supervising adults who sit and eat with the children. The child care program uses mealtime as an opportunity to teach nutrition and food concepts. Adults eating with the children encourage social interaction and conversation, and ask questions and talk about nutrition concepts related to the foods being served.				
To support the development of healthy eating habits, staff members observe children's hunger and fullness cues and implement strategies that support children's self-regulation of food intake.				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

Staff members encourage children to try foods but never force, coax or bribe children to eat.				
Staff members do not praise children for finishing food or cleaning their plates.				
Mealtime is never used to discipline or scold children.				
<b>Pleasant and Healthy Eating Environment - Infants</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program follows best practices for feeding infants, as defined by the American Academy of Pediatrics and the USDA Child and Adult Care Food Program (CACFP). Infants are provided a safe, calm and uninterrupted feeding environment.				
Staff members hold infants while they are being fed and never lay them down to sleep or propped in a bouncy chair or high chair with a bottle.				
Whenever possible, infants are fed by a single caregiver to develop familiarity, encourage bonding and make mealtime an enjoyable experience.				
<b>Modeling Healthy Behaviors</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program recognizes the importance of staff members as positive role models for children as they learn to live healthy lives. Staff members model behaviors for healthy eating by participating in meal and snack service with children, physical activity (including limited screen time), and positive body image in the presence of children. They do not consume unhealthy foods and beverages such as candy and soda in front of children.				
The child care program encourages parents to reinforce these positive messages by serving as role models for their children at home.				
<b>Food Rewards and Punishments</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
Staff members do not use foods or beverages as rewards for performance or good behavior.				
Staff members never withhold food or beverages as a punishment.				
The child care program develops alternative non-food reinforcement for appropriate behavior.				
<b>Food Service Personnel Qualifications and Training</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
Qualified nutrition professionals administer the CACFP. The child care program provides adequate training and continuing professional development for all nutrition and food service personnel.				
Food service personnel regularly participate in professional development activities that address all applicable areas of food service operations, including planning, preparing and serving nutritious, safe and appealing meals and snacks that meet the required CACFP meal pattern components and serving sizes.				
Food service personnel regularly participate in professional development activities that address other appropriate topics, such as nutrition, strategies for promoting healthy eating behaviors and accommodating special dietary needs.				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

Food Safety	N/A	None	Partial	Full
All foods and beverages made available in the child care program comply with federal, state and local food safety and sanitation regulations. This includes foods and beverages served for CACFP meals and snacks, nutrition education activities (such as cooking and taste-testing), celebrations and other events on site.				
The child care program takes appropriate precautions during food preparation to eliminate foods that are high risks for choking and use preparation methods to make all foods safe to eat (i.e. taking food temps, using separate cutting boards for vegetables and meats).				
Staff Wellness	N/A	None	Partial	Full
The child care program highly values the health and well-being of every staff member. The child care program promotes and provides activities and resources that support personal efforts by staff members to maintain a healthy lifestyle and that encourage staff members to serve as role				

### EATING ENVIRONMENT

Review the areas rated "none" or "partial" and identify the priority areas for change in your child care program.

4.

5.

6.

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

NUTRITION EDUCATION	IMPLEMENTATION			
Standards-Based Nutrition Education	N/A	None	Partial	Full
The child care program provides standards-based nutrition education				
Nutrition education is offered at least once per week as part of a planned comprehensive health education program designed to provide children with the knowledge and skills necessary to promote and protect their health.				
Nutrition education activities are consistent with the Dietary Guidelines for Americans and emphasize the appealing aspects of healthy eating. They promote nutrient-rich foods, healthy food preparation methods, good nutrition practices and include enjoyable, developmentally appropriate and culturally relevant participatory activities, e.g., cooking, taste-testing and farm visits.				
Appropriateness of Nutrition Materials	N/A	None	Partial	Full
The child care program reviews all nutrition education lessons and materials for accuracy, completeness, balance, cultural relevancy and consistency with the child care program's educational goals and curriculum standards.				
Connecting with Planned Learning Experiences	N/A	None	Partial	Full
Nutrition education is a part of comprehensive health education and is included in other content areas, such as language and literacy development, mathematics, science and music.				
The child care program encourages instructional staff members to incorporate nutrition themes into planned learning experiences, when appropriate, to reinforce and support health messages.				
Nutrition concepts are integrated into daily routines whenever possible, such as mealtimes and transitions.				
Afterschool programs integrate nutrition activities throughout the learning environment.				
Nutrition Promotion	N/A	None	Partial	Full
The child care program conducts nutrition education activities and promotions that involve children, families and the community.				
The nutrition education program is coordinated with Child and Adult Care Food Program (CACFP) meals and snacks and other foods and beverages available in the child care environment, such as parties, meetings and other events.				
Whenever possible, nutrition education activities involve the entire child care program and are linked to health-related community initiatives, services and programs.				
The child care program collaborates with agencies and groups conducting nutrition education in the community to send consistent health messages to children and their families.				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

Professional Development	N/A	None	Partial	Full
Staff members responsible for nutrition education are adequately prepared and regularly participate in professional development activities to effectively deliver the nutrition education program as planned. The child care program includes relevant nutrition training at least twice a year for teachers, assistant teachers and other staff members, as appropriate.				
Professional development includes orientation to appropriate state standards and curriculum frameworks.				
The child care program builds awareness among teachers, food service personnel, consultants and other staff members about the importance of nutrition, physical activity, decreased screen time and positive body image to academic success and lifelong wellness.				
Nutrition and physical activity information shared with children, families and staff members is based on current science and national health recommendations.				

## NUTRITION EDUCATION

Review the areas rated "none" or "partial" and identify the priority areas for change in your child care program.

1.

2.

3.

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

PHYSICAL ACTIVITY				
Daily Physical Activity - Children	N/A	None	Partial	Full
<p>In accordance with NASPE guidelines, the child care program encourages all children to participate in a variety of daily physical activity opportunities that are appropriate for their age, that are fun and that offer variety. The child care program provides all children with numerous opportunities for physical activity throughout the day.</p> <ul style="list-style-type: none"> <li>• Toddlers (ages 1 to 2) are provided with at least 30 minutes of structured activity and at least 60 minutes up to several hours of unstructured physical activity daily.</li> <li>• Preschoolers (ages 3 to 5) are provided with at least 60 minutes of structured activity and at least 60 minutes up to several hours of unstructured physical activity daily.</li> <li>• Toddlers and preschoolers are not sedentary for more than 60 minutes at a time except while sleeping.</li> <li>• School-age children (ages 6 and older) are provided with at least 60 minutes of daily physical activity that includes aerobic and age-appropriate muscle- and bone-strengthening activities.</li> </ul>				
<p>Program practices are inclusive and offer access for children with disabilities to participate in physical activities with nondisabled peers.</p>				
<p>All children are provided outdoor time at least twice daily, weather and air quality permitting.</p> <ul style="list-style-type: none"> <li>• Children can go outside when the temperatures are above 15 degrees Fahrenheit (including wind chill factor) and below 90 degrees Fahrenheit.</li> <li>• Outdoor time should be limited to 20 to 30 minutes when temperatures are between 16 to 32 degrees Fahrenheit.</li> <li>• Outdoor time is in safe settings supervised by adults.</li> </ul>				
<p>Staff members lead and participate in active play (e.g., games and activities) during outdoor time and other times devoted to physical activity.</p>				
Daily Physical Activity - Infants	N/A	None	Partial	Full
<p>In accordance with NASPE guidelines, the child care program provides all infants with planned daily physical activity to safely support their physical development and health. Activities are planned to support infants' developmental milestones, such as self-supporting head and neck, rolling, reaching, sitting, kicking, crawling, standing and walking.</p>				
<p>Following the American Academy of Pediatrics' recommendation, infants are provided "tummy time" (time spent lying on their stomachs) for short intervals at least two to three times each day while they are awake and supervised by an adult.</p>				
<p>All infants are provided daily outdoor time when the weather and air quality are safe.</p> <ul style="list-style-type: none"> <li>• Infants can go outside when the temperatures are above 15 degrees Fahrenheit (including wind chill factor) and below 90 degrees Fahrenheit.</li> <li>• Outdoor time should be limited to 20 to 30 minutes when temperatures are between 16 to 32 degrees Fahrenheit.</li> <li>• Outdoor time is in safe settings supervised by adults.</li> </ul>				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

To support infant development, confining equipment (e.g., swings, bouncy chairs, exercise saucers, car seats and strollers) is limited to less than 30 minutes per day while infants are awake.				
<b>Play Space and Equipment - Children</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program provides children with a physical environment that promotes active play. Safe, sufficient and developmentally appropriate indoor and outdoor space and equipment encourage all children to be physically active, including children with disabilities. Sufficient equipment is provided to avoid competition and long waits. <ul style="list-style-type: none"> <li>• A variety of fixed play equipment is available that accommodates the needs of all children, such as climbing structures, swings, sandboxes, tunnels and slides.</li> <li>• A large variety of indoor and outdoor portable play equipment is available for children to use at the same time, such as balls, hula hoops, tumbling mats, jump ropes, tricycles and buckets.</li> <li>• Outdoor play space includes open grassy areas and a path for wheeled toys.</li> <li>• Indoor play areas are safe and provide adequate space for each child</li> </ul>				
Staff members regularly inspect equipment and play areas to ensure they are safe.				
Staff members always supervise children on playground equipment and during active play and other physical activities.				
The physical environment does not promote sedentary activity. Sedentary equipment such as televisions, videos and electronic games are not prominently displayed.				
<b>Play Space and Equipment - Infants</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program provides infants with a safe and engaging physical environment that encourages movement and exploration.				
The child care program provides safe, sufficient and developmentally appropriate equipment for infants, such as rattles, balls, and simple cause and effect toys.				
Staff members regularly inspect infant equipment and play areas to ensure they are safe.				
Staff members always supervise infants in their play environments.				
<b>Standard-Based Physical Education</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program provides standards-based physical education for children at least once per week, using national or state-developed standards				
Physical education complements health education by reinforcing the knowledge and self-management skills needed to maintain a physically active lifestyle and to reduce time spent on sedentary activities, such as watching television and playing video games.				
Children with disabilities have appropriate physical education opportunities and participate with nondisabled peers.				
<b>Connecting with Planned Learning Experiences</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
Opportunities for physical activity and active play are incorporated into planned learning experiences outside physical education, such as language and literacy development, mathematics, science and music.				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

Teachers provide short physical activity breaks between learning activities, as appropriate.				
Physical activity is integrated into daily routines whenever possible, such as transition time.				
As age appropriate, physical activity is used as reinforcement, reward and celebration for group achievement.				
Afterschool programs integrate physical activity throughout the learning environment.				
<b>Screen Time</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
In accordance with the American Academy of Pediatrics recommendations, the child care program does not permit screen time (e.g., television, movies, video games and computers) for infants and children younger than 2.				
For children ages 2 and older, screen time is limited to less than one hour per day and consists only of quality educational activities that are connected to learning goals and standards or programs that actively engage child movement.				
The child care program does not allow screen time during meals or snacks.				
<b>Physical Activity and Punishment</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
Staff members do not withhold opportunities for physical activity (e.g., not being permitted to play with the rest of the class or being kept from play time), except when a child's behavior is dangerous to himself or others.				
Staff members never use physical activity or exercise as punishment, e.g., doing push-ups or running laps.				
Play time or other opportunities for physical activity are never withheld as a measure to enforce the completion of learning activities or academic work.				
The child care program uses appropriate alternate strategies as consequences for negative or undesirable behaviors.				

## PHYSICAL ACTIVITY

Review the areas rated "none" or "partial" and identify the priority areas for change in your child care program.

2.
3.

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

COMMUNICATION, PROMOTION AND MONITORING	IMPLEMENTATION			
<b>Health Advisory Team</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program maintains a health advisory team for the planning, operation and evaluation of the program's health services component, including nutrition and physical activity.				
Membership includes parents, governing board members, program administrators, teachers, staff members, food service personnel, program consultants, community members and other individuals as appropriate to local needs.				
<b>Consistent Health Messages</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program actively promotes positive, motivating verbal and nonverbal messages about healthy eating and physical activity throughout the child care environment. All staff members help reinforce these positive messages.				
To be consistent with healthy eating messages, all foods and beverages available on site meet the Center's nutrition policy.				
Staff members do not use practices that contradict messages to promote and enjoy physical activity, such as withholding play time or using physical activity as punishment.				
<b>Promoting Healthy Foods</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program promotes healthy food choices that meet the Child and Adult Care Food Program (CACFP) requirements, the Dietary Guidelines for Americans and the center's nutrition policy.				
The child care program does not allow advertising or messages that promote less nutritious food and beverage choices. Food promotions and messages are consistent with nutrition education and health promotion, and emphasize nutrient-rich foods such as fruits, vegetables, whole grains and low-fat dairy products.				
<b>Engaging Families</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program encourages family involvement to support and promote children's healthy eating and physical activity habits.				
The child care program provides families with education and resources on nutrition and physical activity in language they can understand. Nutrition education is provided for parents at least twice a year.				
The child care program supports families' efforts to provide a healthy diet and daily physical activity for their children through effective two-way communication strategies that share information from the child care program to home and from home to the child care program.				
The child care program communicates in ways that respect families' cultures and customs.				
<b>Partnering with Community Organizations</b>	<b>N/A</b>	<b>None</b>	<b>Partial</b>	<b>Full</b>
The child care program partners with the community to provide consistent health messages and support activities that promote				

# Self-Assessment Worksheet

Child Care Center Name: \_\_\_\_\_

healthy eating and physical activity.				
Monitoring	N/A	None	Partial	Full
The child care program develops a plan to evaluate the implementation of nutrition and physical activity policies and practices. The plan: <ul style="list-style-type: none"> <li>addresses how policy impact will be evaluated, including changes to staff members' practices and children's behavior; and</li> <li>designates who is responsible for ensuring policy compliance, such as the health advisory team or program administrator.</li> </ul>				
In facilities with multiple sites, the child care program designates an individual at each site who ensures compliance with program policies and reports on the site's compliance to the health advisory team, program administrator or designee.				
The child care program identifies a strategy and schedule to regularly review policy compliance, assess progress and determine areas in need of improvement. As part of that process, the child care program regularly reviews current nutrition and physical activity policies and observes program practices.				
The child care program determines whether policy revisions are needed based on local evaluation data, national and state standards, regulations and research on health trends and effective programs. As necessary, the child care program revises current policies and develops work plans to facilitate their implementation.				

### COMMUNICATION, PROMOTION AND MONITORING

Review the areas rated "none" or "partial" and identify the priority areas for change in your child care program.

1.

2.

3.

This tool is modeled after the *Self-Assessment for Child Care Nutrition and Physical Activity Policies* developed by the Connecticut Department of Education and is used by permission.

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write to *USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington DC 20250-9410* or call (866) 632-9992 or (800) 877-8339 (TTY). USDA is an equal opportunity provider and employer.

# Action Planning Template

## **ACTION PLANNING TEMPLATE**

Vermont FEED 2012 

**Team Members:**

**Statement of Purpose: (WHY is your team doing this?)**

---

# Action Planning Template

## ACTION PLANNING TEMPLATE



### Nutrition Standards

Goals (2012-13 Program Year)	Action Steps (WHAT needs to be done?)	Lead Person (WHO is responsible?)	Timeline (WHEN do things need to be done?)	Resources Needed

**Long-term Ideas & Goals for Future Years:**

# Action Planning Template

## **ACTION PLANNING TEMPLATE**



### **Documentation of *Nutrition Standards* Activities:**

How will you record what you have done?

What do you need to collect to document your progress? Think about pre-, during, and post- evaluation and documentation.

# Action Planning Template

## ACTION PLANNING TEMPLATE



### Eating Environment

Goals (2012-13 Program Year)	Action Steps (WHAT needs to be done?)	Lead Person (WHO is responsible?)	Timeline (WHEN do things need to be done?)	Resources Needed

**Long-term Ideas & Goals for Future Years:**

# Action Planning Template

## **ACTION PLANNING TEMPLATE**



---

### **Documentation of *Eating Environment* Activities:**

How will you record what you have done?

What do you need to collect to document your progress? Think about pre-, during, and post- evaluation and documentation.

# Action Planning Template

## ACTION PLANNING TEMPLATE

Vermont FEED 2012 

### Nutrition Education

Goals (2012-13 Program Year)	Action Steps (WHAT needs to be done?)	Lead Person (WHO is responsible?)	Timeline (WHEN do things need to be done?)	Resources Needed

**Long-term Ideas & Goals for Future Years:**

# Action Planning Template

## ACTION PLANNING TEMPLATE



---

### Documentation of *Nutrition Education* Activities:

How will you record what you have done?

What do you need to collect to document your progress? Think about pre-, during, and post- evaluation and documentation.

# Action Planning Template

## ACTION PLANNING TEMPLATE

Vermont FEED 2012 

### Physical Activity

Goals (2012-13 Program Year)	Action Steps (WHAT needs to be done?)	Lead Person (WHO is responsible?)	Timeline (WHEN do things need to be done?)	Resources Needed

**Long-term Ideas & Goals for Future Years:**

# Action Planning Template

## **ACTION PLANNING TEMPLATE**

Vermont FEED 2012 

---

### **Documentation of *Physical Activity* Activities:**

How will you record what you have done?

What do you need to collect to document your progress? Think about pre-, during, and post- evaluation and documentation.

# Action Planning Template

## ACTION PLANNING TEMPLATE

Vermont FEED 2012 

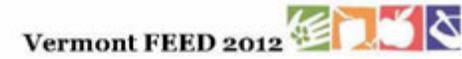
### Communication, Promotion & Monitoring

Goals (2012-13 Program Year)	Action Steps (WHAT needs to be done?)	Lead Person (WHO is responsible?)	Timeline (WHEN do things need to be done?)	Resources Needed

**Long-term Ideas & Goals for Future Years:**

# Action Planning Template

## ACTION PLANNING TEMPLATE



---

### Documentation of *Communication, Promotion & Monitoring* Activities:

How will you record what you have done?

What do you need to collect to document your progress? Think about pre-, during, and post- evaluation and documentation.

# Promising Practices Template

	What Happened?	Who was impacted?	What is the impact?	Evidence or Example
Nutrition Standards				
Eating Environment				
Nutrition Education				
Physical Activity				
Communication, Promotion & Monitoring				

# Wellness Policy Worksheet

## Wellness Policy Worksheet\*

Wellness policies are tools that establish a set of values and commit to best practices that create a health-promoting environment for children. This worksheet is designed to guide you through a step-by-step process for creating or revising a wellness policy for your child care program. Following these steps will help increase your success at developing a policy that effectively sets direction, guides programming, and establishes expectations for administration, staff, and parents.

### Step 1: Identify your team

The first step is to identify a group of individuals who will draft or revise your policy, support its implementation, document and evaluate progress, and make policy revisions, as necessary. As you compile a team, keep the following questions in mind:

- Can you join efforts with another team that is working towards a related goal?
- Have you invited individuals who are representative of your child care program, families, and community?
- Does your team represent the ethnic, cultural, and demographic characteristics of your center?

Here's a list of potential candidates to consider:

- Board members,
- Program administrators,
- Parents,
- Teachers,
- Food service personnel,
- Program consultants (e.g., registered dietician),
- Community members.

Depending on your local needs, established relationships, and program structure, you might also consider: health care providers, community groups, school groups, physical activity groups, university departments, government agencies, hospitals and public health representatives, social service agencies, and local civic organizations.

List the people you would like to engage in this process (use reverse side, if necessary):

\*Adapted from the Connecticut State Department of Education, *Action Guide for Child Care Nutrition and Physical Activity Policies* (2010).

### Step 2: Identify your policy development process

Before beginning work on revising or writing a wellness policy, your team needs to identify whether your child care program has a process for policy development and implementation. Your program administrator will be able to help you answer the following questions:

1. Who needs to be involved or kept informed about wellness policy development?  
\_\_\_\_\_
2. Is there a specific format that needs to be used for the document? \_\_\_\_ yes \_\_\_\_ no
3. Who needs to review and approve drafts?  
\_\_\_\_\_
4. What is the typical timeline for policy review and approval? \_\_\_\_\_
5. What needs to be included in the policy to make compliance with all local (e.g., local health department and board of education), state (e.g., School Readiness), and federal (e.g., CACFP and Head Start) requirements?
6. What are the requirements of your funding agency?
7. If your program is accredited, what are the requirements of the accrediting organization?

### Step 3: Assess existing policy (ies)

The next step is to identify the strengths and weaknesses of your child care program's current policies, programs, and practices. The GMHRC Self-Assessment can assist with this part of the process. Here are some other strategies you can use to assess the current situation:

- Review current policy/handbook language related to nutrition, nutrition education, and physical activity;
- Survey staff members to determine attitudes about current programs and practices and to solicit recommendations;
- Interview teachers and food service staff to identify children's eating practices, e.g., what they are eating and what they are throwing away;
- Interview or survey parents regarding family nutrition and physical activity practices and concerns regarding their children's nutrition and physical activity.

### Step 4: Prioritize needs and develop an action plan

After gathering information on your current child care program environment, it is time to identify the priority areas for change. A good jumping off point is to review the areas rated "none" or "partial" in your Self-Assessment. Once you've identified the priority areas, you'll want to determine the order in which you will take action to implement change. Use the Action Planning Template to outline your goals, action steps, lead people, timeline, and resources needed.

# Wellness Policy Worksheet

## Step 5: Draft Policy Language

Now it is time to draft some initial policy statements. You'll notice that each of the tools you've used in this process is organized into five components: Nutrition Standards, Eating Environment, Nutrition Education, Physical Activity, and Communication, Promotion and Monitoring. This sets you up to create a policy that addresses these five components in creating a healthy child care environment. The *Getting Started With Good Nutrition, Health, and Wellness* guide contains two sample policy documents in the Additional Resources. For more policy recommendations, rationale, implementation strategies, and resources for each of the five components, please refer to the *Action Guide for Child Care Nutrition and Physical Activity Policies* from the CT State Department of Education. Once you've drafted your policy make sure to send it through the appropriate channels (identified in Step 2) for approval.

## Step 6: Build Awareness and Support

After all of your hard work you'll want to ensure the success of your wellness policy. Inviting your child care program community, including program administrators, teachers, food service personnel, other staff, families, and community members and/or partners to review your draft document is an important first step towards being successful. Hopefully, you've had representatives from each of these groups on your team, providing input and sharing recommendations. If you've inadvertently left someone out, now is the time to share the policy with them and request feedback. This buy-in goes a long way towards the successful adoption and implementation of your policy. Here are some suggestions for educating stakeholders and soliciting input:

- Send an electronic version of the document to all administrators, teachers, food service, staff, and families;
- Post the policy on your child care program website;
- Present an outline of the policy at a staff meeting;
- Plan a time to introduce the policy to families during a program-wide event and include an opportunity for Q & A.

## Step 7: Implement your policy

Once you've gotten the word out and incorporated feedback from your community, take a moment to celebrate your accomplishment. Your hard work has resulted in the creation of something that can foster a healthy child care environment, positively impacting the health of your children and families and setting the stage for a lifetime of positive choices. At this point, it's also important to remember that the creation of a policy does not necessarily mean that it will be implemented. Now the responsibility of the Wellness Policy Team shifts towards management. The best approach is to design an implementation plan that meets the needs of your child care program. As you do so, consider the following:

- Will you implement the entire policy at once or will you phase in the changes over time?
- Who are the appropriate staff members to take on each task?

3

- What resources do you need?
- Who will provide general oversight to make sure the program stays on track?
- How will you address negative attitudes about the new policy changes?
- How will you celebrate the positive changes you make?

## Step 8: Document activities and evaluate best practices

The last step is to evaluate how well your policy is working. Are children eating more fruits and vegetables? Are they spending more time in physical activity? Have teachers integrated more nutrition education into their curriculum? Has the nutritional quality of your program's food changed? Are parents and staff satisfied with the changes? On the following page is a chart that can be used as the framework for documenting what's happening and having a conversation about the evolving practices at your child care center. The data collected will include:

**What:** What happened? Describe the event or practice that resulted in the impact here, for example "Phil Black's 3<sup>rd</sup> grade class prepared a bean dip and presented it for a taste test to their peers in the cafeteria."

**Who:** The role and name of the individual or group on whom the impact was observed, for example, "Jane Emerson's 5<sup>th</sup> grade class" or "the afterschool program staff".

**Impact:** The trend you have observed, for example "increased student enthusiasm about lunch" or "increasing number of teachers using the gardens".

**Evidence or Example:** The specific thing you observed, for example "implementation of weekly team planning meetings" or quotes such as "he said to me: They really got it when they tasted the bean dip, I'm convinced it's worth the effort." When possible, try to quantify the trend, for example "two new garden beds established" or "three new teachers approached me for ideas about nutrition projects this month."

4

# Mary Johnson Children's Center Wellness Policy

**SAMPLE POLICY: Mary Johnson Children's Center  
Nutrition and Physical Activity Policy  
DRAFT April 3, 2013**

**Policies derived from various national and state standards for best practices in early childhood education.**

- Vermont Early Learning Standards, Developed by The Vermont Early Childhood Work Group
- National Food Service Management Institute, University of Mississippi: Creating and Maintaining a Wellness Environment in Child Care Centers Participating in the CACFP
- Family Child Care Licensing Regulations, State of Vermont
- I am Moving, I am Learning, Head Start
- Strengthening Families Program
- Happy Mealtimes for Healthy Kids
- Action Guide for Child Care Nutrition and Physical Activity Policies: Best Practices for Creating a Healthy Child Care Environment, Connecticut State Department of Education.
- SPARK P.E. Early Childhood
- My Plate
- NAEYC
- Head Start

## Child and Adult Care Food Program (CACFP) Meals and Snacks

### Menu Planning

MJCC's menu varies each month. We use seasonal produce as available and incorporate local produce in as many meals as possible. We strive for minimal repetition while maintaining some of the children's favorites on a bi-weekly basis. Each week we try to vary the protein offerings by offering eggs, beans, chicken, beef or pork and cheese on different days. Vegetables and fruits also vary each day. Vegetables are often served fresh and raw and fruit is usually offered fresh and raw, occasionally from a frozen source and seldom canned. When served canned the fruit is in light syrup or its own juices. Any kind of fruit juice is not offered at anytime.

We serve a variety of healthy and appealing foods and make accommodations for various food restrictions and allergies. Menus are planned by our cook and CACFP program coordinator who is trained in nutrition and the CACFP program requirements. We seek and welcome input from families through informal conversations with families, during parent conferences and with surveys. We include a food program survey in our newsletter once a year and also at parent nights.

Written menus are developed one month in advance. Paper copies are available in each classroom, posted in the kitchen and entry way and also available on our website: [www.mjccvt.org](http://www.mjccvt.org).

### Nutrition Guidelines for Children

MJCC provides healthy and safe meals and snacks that meet the nutrition requirements established by federal and state laws and regulations. Meals and snacks emphasize nutrient rich food choices.

We offer breakfast which includes low fat or skim milk, whole or enriched grains such as crackers, cereals, and breads, and a fresh fruit. Three days a week a protein such as yogurt, eggs, cheese, or lean meats, nuts and seeds are offered with breakfast.

At lunch we offer low fat or skim milk, a protein which may be: lean meats or fish, cheese, egg, or beans and legumes option, occasionally nuts and seeds, and every day fresh and/or cooked vegetables and fresh fruits.

Afternoon snacks are offered, the components vary daily, each day consisting of two of the following components: low fat or skim milk, whole or enriched grains, vegetables, fruits, or protein which may be a meat, cheese, egg, or bean-legume based (such as hummus or black bean dip) option and nuts and seeds.

All of our meals are prepared on site from whole ingredients and often from scratch. We use olive oils, butter, coconut oils, and no trans fats. We use minimal sugar and sodium. When possible we use local fruits and vegetables, honey, and maple syrup.

# Mary Johnson Children’s Center Wellness Policy

## Nutrition Guidelines for Infants (NA)

While MJCC does not serve infants under the age of 12 months we do support mothers who are breastfeeding their toddlers to have the opportunity to breastfeed their child while the child is in our care.

## Special Dietary Needs

MJCC follows state and federal requirements for accommodating children with special dietary needs.

With appropriate medical documentation, we modify meals for children with food allergies or other special dietary needs. See attached example of medical statement form from doctor.

Parents must provide the appropriate medical statement before we can make any dietary accommodations. This statement must be signed by a licensed physician if the child has a disability that restricts their diet. If the child has special dietary needs but is not disabled, the statement must be signed by a recognized medical authority, ie, physician, physician assistant. Medical statements are available from the directors, child’s classroom teacher, or CACFP food program coordinator.

MJCC takes appropriate precautions to prepare and serve safe meals and snacks for children with food allergies.

- With the guidance of a physician’s medical statement we will develop an allergy plan for each child with life-threatening food allergies;
- Check ingredient labels for all foods served to children with food allergies
- Designate an area in the kitchen or cooking area for allergy free meals and use separate equipment and utensils during preparation, cooking, and serving.
- Develop cleaning procedures that avoid cross-contamination
- Evaluate the need to exclude the food allergen completely from the center if the above procedures are unattainable and
- Provide ongoing training for staff members.

## Other Foods and Beverages

### Parent Provided Meals and Snacks

When meals and snacks are provided from home for an individual child’s consumption, we encourage families to support safe and healthy eating by encouraging them to provide as many nutrient-rich choices that meet the CACFP meal patterns as possible. We have developed a lunch box guide encouraging parents to provide healthy choices from the CACFP meal components of grains and breads, protein, meat and meat alternatives, vegetables, and fruits. MJCC is committed to providing children with low fat or skim milk and or water in addition to parent supplied meals. MJCC discourages including non 100% juice in parent supplied meals and snacks.

We are in the process of not allowing foods such as cookies, cakes, doughnuts, non- 100% juices and snack chips at breakfast time and packed in parent supplied lunches. Foods that do not meet MJCC’s standards for nutrition and food safety will be returned home with the children. We supplement children’s meals or snacks from home if it is deficient in meeting the child’s nutrient needs.

## Celebrations

MJCC celebrates a birthday of a child through a variety of ways including : making banners and signs, crowns, giving of birthday books , and with sharing of snacks and food. It is our agreement that birthdays may include cakes and cupcakes that are served after a healthy snack. Parents may provide the birthday treat or the children in the class may prepare a birthday treat for the special child.

## Functions, Events, and Meetings

MJCC promotes healthy, nutritious whole foods at functions, events, and meetings.

## Fundraising

MJCC’s major fundraiser is the Festival of Wreaths in December each year. Free food including fruits and crackers, cheese and cookies and apple cider are offered as snacks. Our other fundraisers have included a family concert, gift wrap sales.

## Access to Drinking Water

Each classroom has a water fountain the children may access whenever they are thirsty. There is also a water fountain on the playground available during the spring, summer, and fall. Teachers also provide children with water from thermoses and paper cups while on walking field trips.

There is a water fountain located in the dining room. The children may help themselves to water during the meal in addition to the milk that is offered.

## Eating Environment

MJCC’s main meal, lunch, occurs in the dining room. Lunch is served family style at 4 or 5 tables of 4-6 people at each table. Teachers eat at the same time and tables as their classes. Meals are served family style. Children serve themselves from common bowls, plates, and pitchers of food. Adults assist the children as needed with serving food. Adults eating with the children encourage conversation, social interaction, model language for offering and asking for certain types of food. The adults also ask questions and talk about nutrition concepts related to the foods being served. Children are encouraged to observe their hunger and fullness cues and implement strategies that support children’s self regulation of food intake. Children wash hands before each meal.

The youngest children in the toddler room (18 mos-2.5 years) eat lunch in the more familiar setting of their classroom. At the beginning of the year teachers serve most of the food choices to the children. As the year progresses and the children become more able the food choices are offered to the children family style, with the adults assisting as necessary.

# Mary Johnson Children’s Center Wellness Policy

Breakfast and snack are also served daily in the classrooms. These meals are also served family style.

Staff members encourage children to try new foods, but never force, coax, or bribe children to eat.

Staff members do not praise children for finishing food or cleaning their plates. Mealtime is never used to discipline or scold children.

**Meal Schedules**

Mary Johnson Children’s Center provides breakfast, lunch, and an afternoon snack each day. Breakfast and afternoon snack occur in each classroom. Lunch occurs in the common dining room. Breakfast is scheduled as close to each classroom’s opening time as possible, usually between 8:00 am and 9:30 am. Children may participate in breakfast as they are ready usually breakfast is offered for 30-45 minutes each morning. Lunchtimes vary depending on each class sometime between the hours of 11:00 am and 12:30 pm. All children eat lunch at least two hours after their breakfast offering and no more than three hours after breakfast. Lunchtime generally lasts between 30-40 minutes. Afternoon snack occurs at about 3:00 after the children’s rest time. Snack times usually last 20 to 30 minutes. Transition activities such as circle time, story time, songs, and movement activities ease the movement from classroom activities to mealtimes. All children are encouraged to come to the table for meals and snacks.

The children often go for walks, play outside on the playground, or inside in the gross motor space before lunchtime.

After lunch the children brush their teeth.

**Pleasant and Healthy Eating Environment**

Mealtimes at Mary Johnson are intended to encourage children to enjoy mealtimes in a relaxed environment and to engage in pleasant conversations, and to learn about nutrition and food concepts. Children wash hands prior to meals. Meals are served family style and adults and teachers sit and eat with the children. Children serve themselves and practice asking for foods, practice sharing and passing food. Teachers help children observe their hunger and fullness cues and support children’s self-regulation and food intake. Teachers and adults encourage children to try new foods, but never force, coax, or bribe children to eat. Staff members do not praise children for finishing their food or cleaning their plates. Mealtime is not used to discipline or scold children. Children assist with clean-up of their own utensils and bring serving dishes back to the kitchen when the meal is finished.

Table settings at Mary Johnson Children’s Center include real plates, bowls, cups, and silverware (plastic). We also use table cloths on tables which lend an attractive appearance to the dining room (and secondarily absorb spills when they occur!). Tables and chairs are sized appropriately for young children. Serving bowls and serving utensils are child sized and help children to serve themselves appropriate portion sizes.

**Environment (Physical, Social, and Emotional)**

**Modeling Healthy Behaviors**

Mary Johnson Children’s Center takes modeling healthy behaviors very seriously. We are aware that the choices we as adults make in front of the children in our care shape children’s behaviors.

- Staff sit with the children at mealtimes and as much as possible consume the same foods as the children. If staff bring meals from home, staff member still eat with the children.
- Staff enjoy healthy foods like fruits and vegetables, whole grains and make positive comments about healthy foods.
- Encourage children to try healthy foods and provide positive reinforcement when they do.
- Do not consume unhealthy foods in front of children such as candy, soda, coffee, fast food items.
- Staff members take the time to learn about avoiding inappropriate verbal and non-verbal responses that communicate negative messages to children, such as making negative comments about foods, negative body language (such as negative facial expressions when disliked food is served), commenting about children’s or adults’ body size and comparing children’s eating characteristics (“Sam eats his peas, why can’t you?”)
- Do not treat children differently based on body size.
- Staff members participate in unstructured, child initiated physical activity.
- Provide opportunities that support staff members in making healthy food and lifestyle choices for themselves. Professional development workshops that we have offered in the past year include: a Yoga series, cooking classes including Bread Baking and Non-Grain Cooking, Farmers’ Market tour and cooking with local produce, Spring Gardening.

**Food Rewards and Punishments**

Based on the Child and Adult Care Food Program (CACFP) which Mary Johnson Children’s Center participates in, facilities participating in the CACFP are prohibited from restricting children’s access to CACFP meals and snacks for any reason, including as punishment for individual or group behavior. Other inappropriate practices include:

- forcing a child to eat food

**Food Service Personnel Qualifications and Training**

**Food Service Personnel Qualifications and Training**

# Mary Johnson Children's Center Wellness Policy

**Serve Safe Certified**

Foods and beverages made available to the children comply with federal, state, and local food safety and sanitation regulations. The child care program takes appropriate precautions during food preparation to eliminate foods that are high risks for choking and use preparation methods to make all foods safe to eat.

**Food Safety**

- Ensure that all foods used are clean, wholesome, and from approved sources
- Maintain food storage, preparation and service that are consistent with state and federal standards for food safety and sanitation.
- Ensure foods are at proper temperatures at all times
- Eliminate foods that are high risks for choking and use preparation methods to make all food safe to eat.
- Provide ongoing food safety and sanitation training for all food service personnel, including basic food safety principles and proper hand washing procedures.
- Attend sanitation and food safety training provided by state agencies, state child care organizations, CACFP sponsors, and other appropriate organizations.
- Train teachers and other program staff in basic food safety principles.
- Communicate with families regarding food safety procedures for foods brought from home. (Developing)

**Staff Wellness**

This is an area that is in the developing stages in terms of intentional programming and activities for staff.

Continuing education workshops are offered regularly with options for self care, yoga, cooking with whole foods, farmers' market tours.

**Nutrition Education**

Mary Johnson Children's Center helps children make healthy food choices through a variety of means. We provide positive food experiences in the classroom, in the kitchen, in the dining room, in the garden, with local farmer visits, and in the community at the farmers' market, and at area grocery stores.

Mary Johnson Children's Center is a NAEYC accredited program and also a Head Start site. NAEYC Standards specify that children are provided varied opportunities and materials to help them learn about nutrition, including identifying sources of food and recognizing, preparing, eating, and valuing healthy foods. Head Start regulations require that children are provided with opportunities for involvement in food-related activities, as developmentally appropriate.

- Integrate nutrition materials and foods into the curriculum that reflect the diversity of the community, e.g. include healthy food and cooking utensils from a variety of cultures in the dramatic play area, regularly include foods from various cultures when cooking, and ensure that literature includes foods from various cultures.
- As age appropriate, include cooking and food related activities that reinforce and promote health messages, e.g., using recipes for healthy foods, taking field trips to farms or orchards, and growing vegetables from seeds.
- Conduct taste tests and cooking activities.

- Provide current nutrition resources, toys, games, and materials that staff members can use with nutrition education activities.
- Model healthy behaviors, e.g., staff members eat the same foods with children and talk about nutrition and healthy eating habits.
- Promote healthy eating messages to families using a variety of methods, e.g., posters, parent newsletter, menu backs, program web site and family nights.
- Ask families to share healthy recipes that children can prepare as a group cooking activity.
- Encourage children to tell their parents about their food experiences at school.
- Involve families in nutrition education (developing....)

**Standards Based Nutrition Education**

Mary Johnson Children's Center curriculum includes lessons on nutrition. Examples from classrooms.....

Mealtimes are an opportunity to teach nutrition and food concepts. Food related activities include using whole fruits and vegetables, whole grains, and making healthy snack choices. Children visit farmers' market and grocery stores and sample new fruits and vegetables and make purchases for snacks.

Children provided with varied opportunities to learn about nutrition projects include: taste tests, applesauce making.....

Nutrition activities such as cooking and gardening are incorporated into the regular curriculum.

**Appropriateness of Nutrition Materials**

Language, culturally appropriate, preferences based on culture, low literacy. Developing....

**Connecting with Planned Learning Experiences**

Gardening, seed starting, harvesting, and cooking of fresh produce. Connects with curricula areas of math, science, language arts, physical activity.

**Nutrition Promotion**

Articles in newsletter about meals served at lunch. Information about whole grains, local fruits and vegetables. Information about 3 Squares VT at Farmers' Market. My lunch box guide for lunches from home.

Mary Johnson schedules regular education programs for families... Strengthening Families, nutrition information in newsletters and on website. Information sent home.

**Professional Development**

Teachers participate in two hours of food and nutrition trainings each year with the CACFP coordinators and also participate in continuing education workshops with food emphasis.

**Physical Activity**

**Daily Physical Activity**

# Mary Johnson Children’s Center Wellness Policy

During outdoor play children practice gross motor skills by running, skipping, climbing on playscape, kicking and throwing balls. Children regularly walk to area playgrounds to access swings, slides, climbing structures. Our center offers daily opportunities for outdoor play when the weather is conducive. On cold weather days (temperature) children participate in gross motor play in our basement play space with tumbling and climbing mats, tricycles and scooters and balls and swing. In addition our center offers ice skating 12 weeks in the winter months at an indoor ice rink. In the summer months children in the 4-5 year old classroom may swim at the community outdoor pool. Our center also regularly utilizes the nearby walking /hiking Trail Around Middlebury. open gym at municipal gym. Classes at local library in Tae Kwon Do, Yoga, Music and Movement .

When outdoor opportunities are not possible due to weather conditions, similar activities must be provided inside. Weather that poses a significant health risk shall include a wind chill at or below 15 degrees F and a heat index at or above 90 degrees F??? as identified by the National Weather Service.

**Play Space and Equipment**

**Connecting with Planned Learning Experiences**

Frequency of outdoor play / time  
Duration of outdoor play /time

Provision of physical activity / gross motor skills education- teachers demonstrate and direct instruction to help children become proficient in fine and gross motor skills.  
Protocol for teachers ensuring children play safely during physical activities: Teachers must position themselves at different points around the playground so they can see all children. They should not stand in clusters with the other teachers. During outdoor time teachers must remain free of distractions and monitor children’s behaviors to ensure children are playing actively and safely.

**Standards Based Physical Education**

Addresses the provision of training for teachers on strategies for promoting physical activity.  
Addresses the provisions of structured physical activity.  
Addresses teacher participation in physical activity.

**Screen Time**

Computers and videos are rarely used. Computers may be used with the assistance of a teacher to research information about a topic of the child’s interest, to find a recipe, or song, or picture of interest to the child. Computer and video games are not used at all. Children assist with printing and photocopying photos and documents of their work.

**Physical Activity and Punishment**

Addresses not restricting physical activity as punishment.  
Children are not to be denied outdoor activities as punishment.

The use of time-out is prohibited.

**Communication and Promotion**

**Health Advisory Team**

Who responsible for health and wellness communication: Co-Director, CACFP Coordinators. Several representatives from various groups including: Head Start Teacher, Farmer, Parent, Board Member

**Consistent Health Messages**

How engage parents in wellness / health goals?  
Developing

**Promoting Healthy Foods**

Provide nutrition or health consultation for families.  
Quarterly newsletters with food information. Paper and website.  
Developing.

**Engaging Families**

Provide written menus for families. Daily lunch menu posted. Snack and breakfast records available to families. Provide info on how to contact center regarding concerns or suggestions.

**Partnering with Community Organizations**

- ACORN-VT (Addison County Re-localization Network)
  - Stone Soup Food Summit
- Addison County Hunger Coalition
- Vermont Health Department, Middlebury Office
- Champlain Orchards
- Doolittle Farm
- Elmer Farm
- Hunger Free Vermont
- Julius Kingdom Farm (Tata Harper Skin Products)
- Middlebury Farmers’ Market
- Middlebury Union High School
- Otter Creek Child Center
- NOFA-VT Farm to Community Mentor (Northeast Organic Farming Association of Vermont)

**Monitoring**

Identifies plan for evaluating and / or assessing health / wellness policies or programs.

**Policy Review**

Identifies a plan for revising the health / wellness policies or programs.

Children have varied opportunities and are provided equipment to engage in large motor experiences that:

- a** stimulate a variety of skills.
- b** enhance sensory-motor integration.
- c** develop controlled movement (balance, strength, coordination).
- d** enable children with varying abilities to have large-motor experiences similar to those of their peers.
- e** range from familiar to new and challenging.

*New and challenging: movable or temporary large motor opportunities (e.g., traffic cone bike courses, impromptu obstacle courses, sprinklers to run through in the summer) in addition to regular (e.g., bikes) and/or stationary (e.g., climbers) equipment.*

**f** help them learn physical games with rules and structure.

*Games with rules and structure include turn-taking and other expected behaviors (for example, Hokey Pokey or Simon Says) or an activity invented by the children themselves game equipment such as bean bags, bowling sets, or hopscotch squares. Large motor experiences may include indoor and outdoor opportunities.*

**Curriculum Content Area for Cognitive Development: Health and Safety**

Children are provided varied opportunities and materials that encourage good health practices such as serving and feeding themselves, rest, good nutrition, exercise, hand washing, and tooth brushing.

*Conversations about these things can be evidence of opportunity. Such things as books, posters, lesson plans, posted schedules, and materials that address the benefits of good health practices.*

Children are provided varied opportunities and materials to help them learn about nutrition, including identifying sources of food such as: recognizing, preparing, eating, and valuing healthy foods.

*Such things as posted menus, lesson plans, books, posters, play foods, field trips to agricultural farms/orchards, growing a vegetable garden, etc.*

Teaching staff support children's needs for: physical movement, sensory stimulation, fresh air, rest, and nourishment.

# Mary Johnson Children’s Center Wellness Policy

Adults sit and eat with children and engage them in conversation at snack and meal times. Teaching staff are expected to sit with children and engage them in conversation when time for a snack or meal is provided, even if the food is brought from home. Conversations must extend beyond rules and expectations for behavior at the table.

**Responding to Children’s Interests and Needs**

Program staff use a variety of formal and informal strategies (including conversations) to become acquainted with and learn from families about their family structure; their preferred child-rearing practices; and information families wish to share about their socioeconomic, linguistic, racial, religious, and cultural backgrounds.

Program staff use a variety of formal and informal methods to communicate with families about the program philosophy and curriculum objectives, including educational goals and effective strategies that can be used by families to promote their children’s learning. Staff use a variety of methods such as new family orientations, small group meetings, individual conversations, and written questionnaires, which help staff get input from families about curriculum activities throughout the year. The program works with families on shared child caregiving issues, including routine separations, special needs, the food being served and consumed, and daily care issues.

Families may visit any area of the facility at any time during the program’s regular hours of operation as specified by the procedures of the facility. The program facilitates opportunities for families to meet with one another on a formal and informal basis.

Program staff inform families about community events sponsored by local organizations, such as museum exhibits, concerts, storytelling, and theater intended for children.

Program staff invite members of the performing and visual arts community, such as musical performers, coordinators of traveling museum exhibits, local artists, and community residents, to share their interests and talents with the children.

The program engages with other community organizations and groups to cosponsor or participate in cultural events to enrich the experience of children and families in the program. Program staff are encouraged to participate in local, state, or national early childhood education organizations by joining and attending meetings and conferences. Program staff are also encouraged to participate regularly in local, state, or regional public-awareness activities related to early care and education.

The program encourages staff to participate in joint and collaborative training activities or events with neighboring early childhood programs and other community service agencies.

Outdoor play areas, designed with equipment that is age and developmentally appropriate and that is located in clearly defined spaces with semiprivate areas where children can play alone or with a friend, accommodates motor experiences such as running, climbing, balancing, riding, jumping, crawling, scooting or swinging, activities such as dramatic play, block building, manipulative play, or art activities, exploration of the natural environment, including a variety of natural and manufactured surfaces, and areas with natural materials such as nonpoisonous plants, shrubs and trees. The program makes adaptations so children with disabilities can fully participate in the outdoor curriculum and activities.

# Project Partners and Funders



## VERMONT AGENCY OF EDUCATION

The agency supports program sponsors through program guidance, technical assistance, training, monitoring and evaluation to assure that every program receives the maximum federal and state funding available. The agency's Child Nutrition Programs staff administer the federal programs that support nutritious meals and snacks in schools, daycare settings and summer program sites, ensuring that nutritious, high-quality meals and snacks are served to program participants in all eligible sites in Vermont.



## USDA

We provide leadership on food, agriculture, natural resources, rural development, nutrition, and related issues based on sound public policy, the best available science, and efficient management.



## TEAM NUTRITION

Team Nutrition is an initiative of the USDA Food and Nutrition Service to support the Child Nutrition Programs through training and technical assistance for foodservice, nutrition education for children and their caregivers, and school and community support for healthy eating and physical activity.

## USDA NON-DISCRIMINATION POLICY

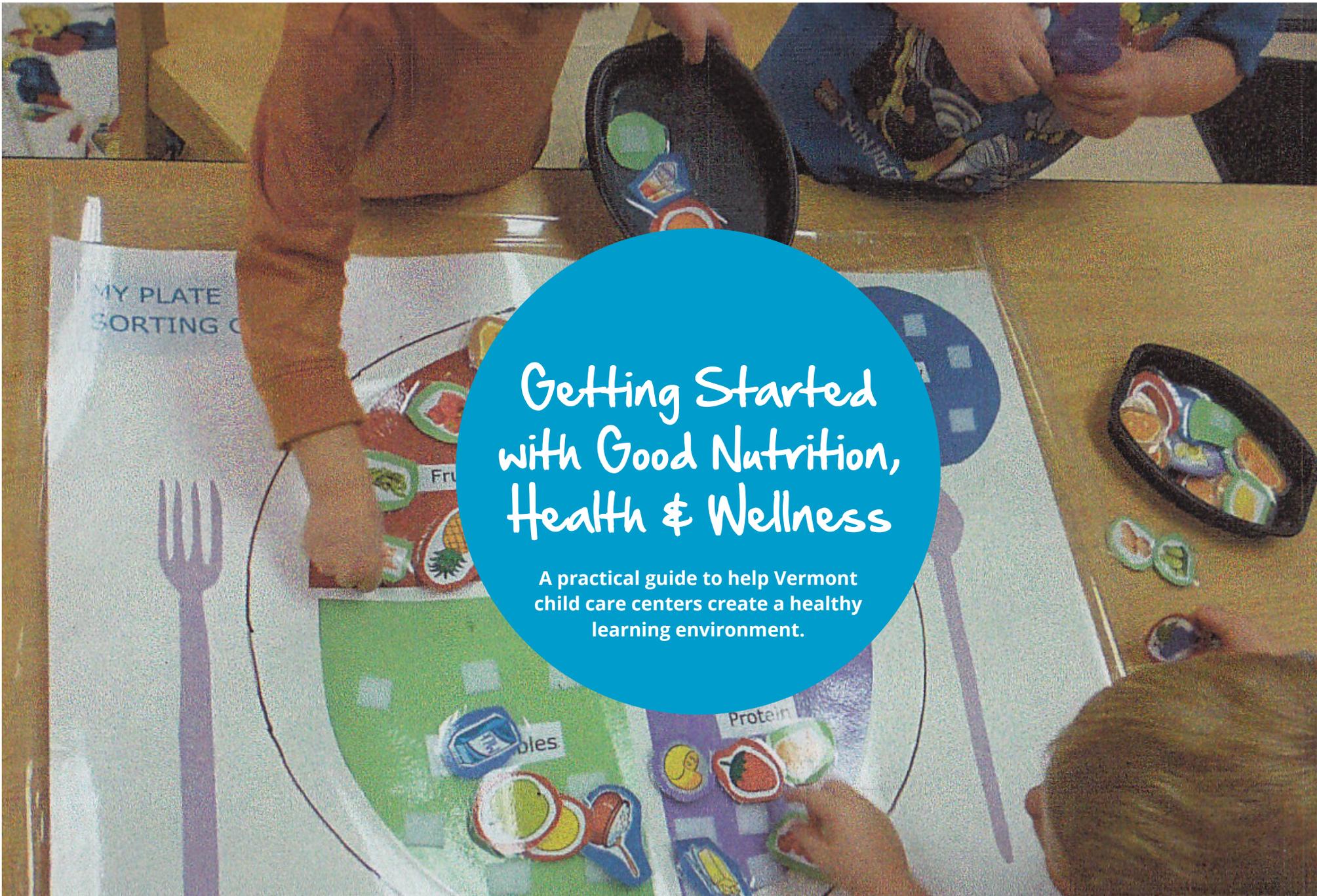
The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and, where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov).

USDA is an equal opportunity provider and employer.

## FUNDING STATEMENT

This project has been funded at least in part with Federal funds from the U.S. Department of Agriculture. The contents of this publication do not necessarily reflect the view or policies of the U.S. Department of Agriculture, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.



# Getting Started with Good Nutrition, Health & Wellness

A practical guide to help Vermont  
child care centers create a healthy  
learning environment.