INFANT AND TODDLER FEEDING POLICY

Reason this policy is important:
Proper nutrition is very important to an infant/toddlers growth and development. Close attention to the general and individual nutrition needs of the children in our care is our goal.

Procedures and Practices, including responsible person(s):
______________________________ (staff title/name) will provide a (Infant/toddler Development & Routine form) for parents to complete with current eating habits.

_________________________ (staff title/name) will obtain, review, and share with staff a written description of each child’s eating habits before the child enters the program. (Infant/toddler Development & Routine form)

Meals and snack patterns will be consistent with Child/Adult Care Food Program –Child Care Infant Meal Pattern.

Formula Preparation:
• Caregiver’s hands will be washed before preparing formula and/or feeding children. Children’s hands will be washed before being fed.
• Formula will be brought to the setting in a factory-sealed container and labeled with the child’s name and date.
• Formula will be prepared according to the directions on the container. Formula will be used within 48 hours after preparation, opening of ready-to-eat, or concentrate.
• Prepared formula must be labeled with child’s name and date and kept covered and refrigerated. Individual bottles must also be labeled with child’s name and date and capped for storage in refrigerator until use.
• Filled bottles will be capped and refrigerated immediately upon arrival to the child care program.
• Preparation surface will be cleaned, rinsed, and sanitized before preparing formula or food
• A minimum of eight feet will be maintained between the preparation area and the diapering area.
• Dirty bottles and equipment will not be stored within eight feet of the diapering area or placed in the diapering sink. They will be placed in a tub to be properly cleaned in the kitchen.
• If formula is warmed, the bottle will be placed in hot water (not boiling) for five minutes and temperature tested before giving to infant. Microwave ovens will not be used to heat formula, breast milk, or baby food.
• If a crock-pot is used the water temperature must be monitored and held below 120 °F, and contain no more than 1 ½ inches of water (crock pots pose a risk of scalding). The crock-pot must be not be accessible to children. Crock-pots will be cleaned and sanitized daily.
• Other acceptable methods of heating infant bottles include: bottle warmers or by holding the bottle under warm running tap water until the fluid is no longer cold. Bottles will be wiped off to prevent hot water from dripping on child.
• Any formula remaining in a bottle or food remaining in a serving container after a feeding shall be discarded. (Bacteria from baby’s mouth are introduced into milk and begin to multiply once bottles are taken from the refrigerator and warmed).
• If the feeding has taken over 1 hour to complete or the bottle has been un-refrigerated for 1 hour, the milk shall be discarded.
• All bottles, nipples and other equipment for bottle preparation will be cleaned and sterilized before each use.

Breastfeeding and Breast Milk Bottle Preparation:
Mothers will be supported by providing a place for nursing mothers to breastfeed and by coordinating feeding routines in child care with mother’s schedule. Mothers who wish for privacy while breastfeeding may use ______________________ (location in setting).

Breast Milk Bottle Preparation:
• Human milk from a mother will be only used with that mother’s child.
• Expressed breast milk may be brought from home if the bottles/breast milk bags are transported in a clean insulated container that keeps the milk at 41 degrees Fahrenheit or below. Breast milk will be refrigerated or frozen as soon as it arrives at the child care program. See Safe Transportation of Breast Milk Form
• Child’s full name and date prepared will be on every bottle.
• Refrigerated breast milk must be used within 48 hours.
• Breast milk first frozen then thawed in refrigerator then must be used within 24 hours.
• Frozen breast milk may be kept in the freezer for 2 weeks and in a deep freeze (0 degrees) for 3 months.
• Caregiver’s hands will be washed before preparing bottles.
• Frozen breast milk will be thawed under cold water or in the refrigerator.
• If heated, all breast milk will be placed in hot water (not boiling) for five minutes and temperature tested before giving to infant. Microwaves will not be used to warm bottles.
• Any contents remaining in a bottle after feeding will be discarded. If the feeding has taken over 1 hour to complete or the bottle has been un-refrigerated for 1 hour, the milk shall be discarded.
• Only cleaned and sterilized bottles and nipples will be used.
• All bottles, nipples and other equipment for bottle preparation will be cleaned and sterilized before each use.

Feeding:
• Infants will be held or fed sitting up. Bottle propping, feeding in cribs, car seats, or swings, or carrying of bottles by children will not be permitted.
• Infants will be fed “on demand” as much as possible, but at least every 4 hours and usually not more than hourly.
• Formula or breast milk will be the only milk product served to children younger than 12 months of age unless medically indicated by the child’s health care provider.
• No medication or cereal will be added to the bottle unless medically indicated by the child’s health care provider.

Cow’s milk:
• Only whole pasteurized milk will be served to children younger than 24 months unless medically indicated by the child’s health care provider.

Solid food:
• Children will not be allowed to walk around with food, bottles, or cups.
• Caregiver will communicate with children during mealtime.
• When high chairs are used, caregivers will use safety straps.
• Trays, seats, arms of highchair will be cleaned and sanitized before and after eating.
• No more than three infants per caregiver will be fed at one time.
• Commercially packaged baby food will be served from a bowl or cup and not directly from the container unless the entire container will be used for only one feeding.
• Introduction of solid foods will begin between 4-6 months as indicated by the child’s nutritional and developmental needs after consulting family unless medically indicated by the child’s health care provider. Modification to infant food pattern (handout) will be provided in writing by child’s health care provider.
• After six months children will be encouraged to self-feed depending on their skills in this area.
• Food will be cut into ¼ inch pieces for finger feeding by children. Utensils will be offered to children who can use them.
• Round, firm foods that might be a choking hazard such as but not limited to: hot dogs, whole grapes, peanuts, nuts, seeds, raw peas, dried fruit, popcorn, thickly spread peanut butter, and hard candy will not be served to children under the age of 3 years old.
• Food will never be used as a reward or denied as punishment.
• Family/Caregiver Information Exchange form* will be filled out daily and shared with families of infants and toddlers.

When the policy applies:
To all meals and snacks served.

Communication plan for staff and parents:
• Staff and volunteers will receive a written copy of this policy in their orientation packets before beginning work at the center.
• Written instructions are posted in food preparation areas.
• Parents are given information when beginning program and information is exchanged daily between caregiver and parent.

References:


Indiana Rule 470 IAC 3-4.7-78
Indiana Rule 470 IAC 3-4.7-138

Reviewed by: 
______________________________ Director/Owner
______________________________ Health Professional (physician, nurse, health department, EMS, Health consultant)
______________________________ Staff member
______________________________ Other (parent, advisory committee)

Effective Date and Review Date:
This policy is effective _____/_____/_____ and will be reviewed annually by _____/_____/_____ or sooner if needed. Parents and staff will be notified of any upcoming policy review