Health, Hygiene and Safe Food Policy

NQS

QA2  2.1 Each child’s health is promoted.
     2.1.1 Each child’s health needs are supported.
     2.1.3 Effective hygiene practices are promoted and implemented.
     2.1.4 Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.
     2.2.1 Healthy eating is promoted and food and drinks provided by the service are nutritious and appropriate for each child.

QA2  2.3.2 Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.

National Regulations

Regs  77 Health, hygiene and safe food practices
      78 Food and beverages
      79 Service providing food and beverages
      80 Weekly menu

EYLF

LO3 Actively support children to learn hygiene practices.
Promote continuity of children’s personal health and hygiene by sharing ownership of routines and schedules with children, families and the community.
Discuss health and safety issues with children and involve them in developing guidelines to keep the environment safe for all.
Model and reinforce health, nutrition and personal hygiene practices with children.

Aim

Our service aims to promote and protect the health, safety and wellbeing of all children, educators and families using procedures and policies to maintain high standards of hygiene and safe food handling.
Related Policies
Additional Needs Policy
Enrolment Policy
Food, Nutrition and Beverage Policy
Immunisation and Disease Prevention Policy
Incident, Injury, Trauma, Illness Policy
Medical Conditions Policy
Physical Activity Promotion Policy
Relationships with Children Policy

Implementation
The Approved Provider will ensure that the Nominated Supervisor (who is responsible for ensuring all staff members, educators and volunteers) must implement adequate health and hygiene practices and safe practices for handling, preparing and storing food. This policy, and related policies and procedures at the service will be followed by the nominated supervisor, staff members and volunteers at, the service in relation to -

(a) Hygiene practices.

(b) Safe and hygienic storage, handling and preparation of all food and drinks, including foods and drinks provided by the child’s home.

(c) Working with children to support the promotion of hygiene practices, including hand washing, coughing, dental hygiene and ear care.

(d) Toileting, nappy changing and cleaning of equipment.

(e) The provision of fresh linen to mattresses when required.

Importantly, we will work with each child to promote health and safety issues, encourage effective hygiene, food safety and dental care, and maintain a healthy environment that is safe for each child. Regular discussions between educators and children will be integrated throughout the program at appropriate intervals.

In any instances where children display any signs of illness or injury, educators will refer to the Incident, Injury, Trauma and Illness Policy and Incident, Injury, Trauma and Illness Record.

To uphold the general health and safety of all children using the service, all educators and visitors will follow the Tobacco, Drug and Alcohol Policy.
Equipment and Environment

The service will wash toys weekly using the dishwater. A record of this will be kept in the Cleaning of Toys Register.

Surfaces will be cleaned after each activity and all surfaces cleaned thoroughly daily. Floors will be vacuumed and washed daily by the cleaner. Areas contaminated with body fluids will be disinfected after washing.

Bedding
When bedding is used by one child it is washed before it is used by another child.

Hand Washing Procedure

Our service will provide the appropriate height basins for children to wash their hands in as well as a basin the appropriate height for adults. Liquid soap will be provided for all individuals to wash their hands and we will ensure any allergies to soap are identified using the Enrolment Form and catered for appropriately. Along with this, the service will provide paper towel for people to dry their hands.

All individuals should wash their hands:

- Upon arrival to reduce the introduction of germs.
- Before handling food.
- After handling food.
- After doing any dirty tasks such as cleaning or changing nappies.
- After removing gloves.
- After going to the toilet.
- Before and after nappy change procedures.
- After giving first aid.
- Before and after giving each child medication. If giving medication to more than one child between each child.
- Before going home to prevent taking germs home.
Below are instructions on how to effectively wash hands. All individuals are to follow this procedure and it should be displayed above every sink.

- Wash hands using running water and soap.
- Wash hands all over ensuring that the back of the hands, wrists, between fingers and under the fingernails are cleaned.
- Rinse hands thoroughly.
- Dry hands thoroughly with paper towel.

**Hygienic Nappy Change Procedure**

The service accepts enrolments of children who have not yet been toilet trained. Toileting occurs at any time of the day and is specific to individual needs. Educators will communicate with parents to develop consistency with their child’s toileting habits. Educators must be aware of and consider any special requirements related to culture, religion or privacy needs. Children who are in nappies will have this detail recorded in the register kept by the staff. This is located in the Educator’s Office for parents to check.

Nappy changing and toileting will only be carried out by main educators following the nappy changing procedure. At times it may be necessary for a student to carry out the nappy change procedure as part of practical education requirements, and a trained educator must always be present to monitor this situation and ensure the procedure is being followed adequately. If a parent is present and helping their child (toileting in the bathroom), it is required that an educator accompany any other children needing to use the bathroom at the same time. Additionally, the service will follow hygienic nappy change practices at all times using the following procedure -

- Nappy changing will be done only in the bathroom which will be properly stocked with paper towels, plastic bags, fresh nappies, clean clothes, rubbish bin with sealed lid lined with plastic. Always prepare change area first: put on gloves, place paper towel, wipes and bag to dispose of nappy.
- Nappy changes occur frequently and as needed throughout the day.
- Assist the child onto the nappy change mat.
- Remove the child’s nappy and any soiled clothes. Place them in separate plastic bags. Clean and dry the child’s bottom using wipes, wiping from front to back. Remove paper towel from the change table.
- Seal the soiled nappy, paper towel and wipes into plastic bag (use two if soiled) and place into lined pedal bin in the bathroom. Place any soiled clothing into a bag and seal for washing. Remove gloves before touching any clean clothing or the clean nappy. Remove gloves by peeling them back from your wrists, turning them inside out as you go. Place gloves in bin.
- Dress the child and wash and dry the child’s hands, take the child away from change area. Wash your hands.
- Clean the nappy change surface after each use. Put on clean gloves and clean surface with neutral detergent and warm water. Wipe dry with paper towel. Dispose of gloves and paper towel in bin. Wash your hands. Disinfect after the last nappy change in a series of nappy changes.
- After each nappy change the child’s and educator’s hands will be washed and the change table cleaned.
- At the end of each day the nappy change area will be disinfected.
- The procedure for nappy changing will be displayed in the nappy change area. The service only uses disposable nappies.

**Hygienic Toileting Procedure**

The service accepts enrolments of children who have not yet been toilet trained. Toileting occurs at any time of the day and is specific to individual needs. Educators will communicate with parents/guardians to develop consistency with their child’s toileting habits. Educators must be aware of and consider any special requirements related to culture, religion or privacy needs.

At times it may be necessary for a student to assist children in the area of toileting as part of practical education requirements, and a trained educator must always be present to monitor this situation and ensure the procedure is being followed adequately. If a parent is present and helping their child (toileting in the bathroom), it is required that an educator accompany any other children needing to use the bathroom at the same time.

Additionally, the service will follow hygienic toileting practices at all times using the following procedure -

- Educators will at all times encourage the child to be independent in their toileting habits and provide assistance as and when needed.
- The service will ensure that toilets and hand washing facilities are easily accessible to children.
- Children will be encouraged to flush toilets and wash hands after use.

**Disposable gloves should be used for any of these stages in the toileting procedure:**

- Help child to remove clothing if needed.
- Help child onto toilet if needed.
- Help the child to wipe themselves, encouraging them to wipe front to back.
- Encourage the child to flush the toilet themselves.
- Encourage the child to wash and dry hands on single sheet of paper towel, and then to leave the bathroom.

**If the child has soiled or wet their clothing:**

- Remove any wet/soiled clothing and seal in a bag for washing.
- Clean and dry the child.
- Remove your gloves and wash hands, do not touch the child’s clean clothing.
- Dress the child, wash and dry the child’s hands. Have them leave the bathroom.
- Clean any spills following procedure for cleaning spills of body fluids.
- Remove and dispose of gloves, wash and dry your hands.

- The procedure for toileting will be displayed in the toileting area.
- Soiled and wet clothes will be rinsed out with water and sealed in a plastic bag and placed in the child’s locker.

**Dental Hygiene and Care**

- The service will arrange for dental health professionals to attend the service to discuss good dental health practices and guidelines with educators, children and family members.
- Educators should actively seek to be positive role models for children and families in attendance at the service.
- Educators form positive relationships with family members and children to discuss and encourage good dental health practices and ensure the continuity of care of each child. Information should be made available to family members and educators in their home language.
- The service integrates educative information and guidelines on good dental health practices into the daily routine. This should include information on tooth brushing, tooth friend snacks and drinks and going to the dentist and/or dental health professionals.
- The service will actively encourage good dental health practices including eating and drinking habits, tooth brushing and going to the dentist and/or dental health professionals.
- Children will be encouraged to drink water to quench their thirst and remain hydrated.
- Family members should be informed without undue delay any incident or suspected injury or issue with their child’s dental health which may include teeth and gums, gum swelling, infection in the mouth, or problems, pain or discomfort the child has with chewing, eating or swallowing food or drink.
- Educators will be aware of dental first aid and receive appropriate professional development opportunities where appropriate.

**Dental Accidents**

If a dental accident occurs at the service, the following will occur:

For younger children:

- The accident will be managed as an emergency. Injury forms will be completed.
- The tooth will not be reinserted into the socket, but gently rinsed in clean water or clean milk to remove any blood and will be placed in a clean container or wrapped in cling wrap to give to the child’s parent or dentist.
- Seek dental advice as soon as possible and ensure staff or the parent takes the tooth/tooth fragment to the dentist with the child.
For older children or adults:

- The accident will be managed as an emergency. Injury forms will be completed.

- Gently rinse the tooth fragments in clean milk or clean water for a few seconds to remove excess dirt and blood.

- Handle the tooth by its crown (the white enamel top part of the tooth), not its root and be careful not to rub off the endothelial fragments on the root of the tooth as these are needed for the tooth to take if replaced by the dentist.

- In an adult or older child who can be relied on not to swallow their tooth, it is preferable to replace the tooth back into the socket. (Be certain that the tooth is placed into the socket the correct way round, in its original position, using the other teeth next to it as a guide).

- Hold the tooth in place by gently biting on a clean handkerchief or gauze pad.

- If unable to reinsert the tooth, get the casualty to hold the tooth inside the mouth next to the cheek or place the tooth in clean milk, sterile saline, or clean water. Place a firm pad of gauze over the socket and have the casualty bite gently on the gauze.

- Seek dental advice as soon as possible and ensure you or the family takes the child to the dentist with the tooth/tooth fragments within 30 minutes, as the root endothelial layer begins to deteriorate after 30 minutes.

- If the tooth has been in contact with dirt or soil, advise the family that tetanus prophylaxis may be required and advise them to consult with both their dentist and doctor.
Food Preparation and Food Hygiene Procedure

Our service will follow appropriate food preparation hygiene techniques to meet the requirements of the Food Standards Australia New Zealand such as:

- Wash hands before food preparation.
- Cleaning food preparation area before, during and after use.
- Ensuring that individuals preparing food know, follow and adhere to the appropriate hygiene procedures. This includes:
  - Washing their hands
  - Keeping their personal hygiene at a high level. For example, tying their hair back or keeping it under a net
  - Covering cuts with a bandaid and gloves
  - Not changing nappies before preparing food.
- Avoiding the contamination of one work area to another by using colour-coded wash cloths and having specific cleaning implements (for example gloves and scourers) for a specific area.
- Avoiding the contamination of one work area to another by using the colour-coded wash cloths system and restricting the movement of contaminated items (such as gloves and cleaning implements) from one area to another.
- Clean children’s dining tables before serving food.
- Ensuring food is always served in a hygienic way using tongs and gloves.
- Clean children’s dining tables with vinegar and water and dry after meal times.
- Providing families with current and relevant information about food preparation and hygiene.
- Showing and discussing with children the need for food hygiene in both planned and spontaneous experiences.

Cooking with Children

We sometimes include cooking experiences in our service’s programming for the children. When these experiences are carried out, educators that are supervising will be vigilant to ensure food preparation remains a hygienic and safe experience. The relevant points from the above food preparation procedure will be followed during the children’s cooking experiences.

Examples of the type of activities children will participate in during cooking experiences include:

- Helping choose what to cook.
- Measuring and weighing ingredients.
- Stirring or mixing ingredients.
- Washing salad, vegetables or fruit.
- Setting the tables.
Food Safety Procedure

We will, to the best of our ability, educate and promote safe food handling and hygiene in the children and families by:

- Encouraging parents to the best of our ability to continue our healthy eating message in their homes. This information will be provided upon enrolment and as new information becomes available.
- Encouraging staff to present themselves as role models. This means maintaining good personal nutrition and eating with the children at meal times.
- Providing nutrition and food safety training opportunities for all staff including an awareness of other cultures food habits.

The bacteria that commonly cause food poisoning grow rapidly between 5°C and 60°C, this is commonly referred to as the “temperature danger zone”.

To keep food safe:

- All food for children brought from home will be immediately placed in the refrigerator provided in the service.
- Don’t leave perishable foods in the temperature danger zone for longer than 2 hours.
- Keep cold food in a fridge, freezer, below 5°C until you are ready to cook or serve, eg if you are serving salads keep them in the fridge until ready to serve.
- Use a thermometer to make sure your fridge is below 5°C. Don’t overload refrigerators, as this reduces cooling efficiency.
- Ensure the food storage area is well cleaned, ventilated, dry, pest free and not in direct sunlight.
- Prevent pests by cleaning spills as quickly as possible and removing garbage/waste frequently.
- Store foods on shelves, never on the floor including play dough material.
- Fridges and freezers need to be cleaned regularly and fridge door seals checked to be in good repair.

Sources

Education and Care Services National Regulations 2011 Early Years Learning Framework

Review
The policy will be reviewed annually. The review will be conducted by:

- Management
- Employees
- Families
- Interested Parties

Last reviewed: May 2013 Date for next review: May 2014

- Nominated Supervisor: ________________________________
- President, Management Committee: _______________________
- Vice President, Management Committee: ___________________
- Secretary, Management Committee: _______________________
- Treasurer, Management Committee: _______________________
Good for kids, good for life

Lunchbox Recommendations

Use this checklist to plan or review your lunchbox recommendations if you are open for less than 8 hours and families provide all means. The number of serves recommended is required to meet the nutritional needs of children in care. You must meet each criteria for your lunchbox to be meeting children’s nutrition requirements when in care. You should only recommend the exact number of serves for that food group (ie no less, no more).

Lunchbox recommendations for families with children in care:

- 1 main meal
- 1 snack
- 1 child size serve of lean meat or meat alternatives
- 1 child size serve of vegetables for children less than 3 years and up to 2 child size serves of vegetables for children 3 years and over.
- 1 child size serve of fruit
- 2 child size serves of dairy (reduced fat milk suggested for children over 2 years of age)
- 2 child size serves of bread, cereals, rice, pasta or noodles for children less than 3 years and 3 child size serves of bread, cereals, rice, pasta or noodles for children 3 years and over
- Water as a drink
- No foods or drinks that are high in fat, sugar or salt eg: frankfurts
- Packaged foods which include:
  - Roll ups, LCM bars, fruit sticks, pies, Yogo’s, fruit stringers
- Home cooked snacks are accepted as long as healthy ingredients are included.