Safer Eating including Nutrition and Mealtimes

Grass Roots Nursery Group

Updated October 2026

1. Policy Statement

Grass Roots Nursery Group is committed to providing safe, nutritious, developmentally appropriate mealtime experiences for all children. We ensure food preparation, supervision, choking prevention, and dietary management comply with the EYFS Statutory Framework (2026) and DfE Early Years Nutrition Guidance.

We promote:

- healthy, balanced meals
- safe food modification
- responsive feeding practices
- positive relational mealtime interactions
- inclusive dietary provision
- safe choking-response procedures, including LifeVac as a last-resort device

2. Purpose & Scope

This policy ensures:

- food is prepared safely and hygienically
- choking risks are minimised through food modification and supervision
- mealtimes support children's emotional, social, and physical development
- nutritional provision meets national guidance
- staff follow safe choking-response procedures
- LifeVac is used safely and appropriately
- dietary needs, allergies, and weaning stages are respected

This policy applies to:

- all children, staff, apprentices, volunteers, and visitors
- all nursery rooms and eating areas
- all off-site outings where food is consumed

3. Statutory Framework & Reference Guidance

This policy operates in full compliance with:

- EYFS Statutory Framework (DfE, 2026)
- DfE Early Years Nutrition Guidance
- UK Resuscitation Council Choking Guidance
- NHS Start for Life Weaning Guidance
- UKHSA Infection Control Guidance
- Food Information Regulations (Allergen Labelling)

4. Operational Procedures

A. Nutrition & Meal Planning

Healthy & Balanced Meals

- Meals meet children's nutritional needs and follow DfE guidance.
- Ultra-processed foods (UPFs), refined sugars, and high-salt ingredients are strictly limited.
- Menus include vegetables, fruits, whole grains, pulses, and varied proteins.
- Water is the only drink served at mealtimes.

Individual Dietary Needs

We work with families to meet:

- verified allergies and intolerances
- cultural and religious dietary requirements
- weaning stages
- texture preferences
- medical dietary plans

B. Choking Prevention & Active Supervision

Food Preparation Standards

All food provided by the nursery or brought from home is modified to reduce choking risk:

- **Spherical foods** (grapes, cherry tomatoes, olives, sausages) are cut lengthwise into quarters.
- **Hard, round, or sticky foods** (raw apple, carrot, firm cheese, whole nuts) are cooked, grated, finely chopped, or omitted.
- **Finger foods** for infants are soft, easy to grasp, and cut into safe shapes.

Upright Eating

Children must remain:

- seated upright at a table
- or securely harnessed in an age-appropriate highchair

Eating while walking, running, playing, or reclining is prohibited.

Active Supervision

Staff:

- sit directly facing children
- maintain continuous visual and audible supervision
- observe chewing and swallowing
- prevent food sharing
- support individual needs
- model positive social interaction

Paediatric First Aid Requirement

A PFA-qualified staff member is physically present **inside the room** during all meals and snacks.

Mandatory Choking Incident Logging

Any choking intervention (verbal prompts, back blows, abdominal thrusts, LifeVac use) must be:

- logged immediately on CPOMS
- added to the Choking Incident Log
- reviewed by DSL and management

C. Choking Response (UK Resuscitation Council Sequence & LifeVac Use)

Grass Roots Nursery Group follows the **UK Resuscitation Council choking sequence**:

1. Encourage effective coughing

2. Back blows
3. Abdominal thrusts (for children over 1 year)
4. Repeat sequence

These steps must always be attempted first.

LifeVac – Last-Resort Emergency Device

A LifeVac device is available at **both nursery sites**. It may be used **only when:**

- the child has **not responded** to the full UK Resuscitation Council choking sequence
- the obstruction remains **life-threatening**
- a **trained member of staff** is present

Key Requirements:

- LifeVac is a **last-resort adjunct**, not a replacement for standard choking procedures.
- Staff receive **annual LifeVac training**.
- **999 must be called immediately** after LifeVac use, even if the obstruction is removed.
- The incident is logged as a **serious medical event**.
- The device is checked **monthly** and after every use.

D. Weaning & Infant Nutrition

We work closely with parents to ensure weaning aligns with developmental readiness.

- Purees and finger foods are introduced gradually.
- Finger foods are soft, cut lengthwise into quarters, and easy to grasp.
- Bottle feeds and weaning moments are responsive, supporting attachment and emotional well-being.
- Weaning follows the Home-First Allergen Introduction Protocol.

5. Monitoring & Review

- Choking incidents reviewed termly to identify patterns.
- Food preparation and supervision practices audited regularly.
- LifeVac devices are checked monthly and after each use.
- Menus reviewed seasonally for nutritional balance.
- Policy reviewed annually or sooner if guidance changes.

6. Linked Policies

- Accident & First Aid Policy
- Allergy & Intolerance Policy
- Weaning & Allergen Introduction Policy
- Health & Safety Policy
- Safeguarding & Child Protection Policy
- Intimate Care Framework
- Inclusion & SEND Policy
- Outings & Visits Policy

Appendix A: Procedure for Handling Food Allergies and Dietary Restrictions

Purpose & Scope

To outline the mandatory operational steps taken to guarantee the safety and well-being of children with food allergies, intolerances, or dietary restrictions across all setting rooms.

Operational Steps

1. Information Collection & BSACI Action Plans

- Upon enrollment, parents complete detailed dietary and medical information on registration forms.
- For children with diagnosed medical allergies, an **Individual Allergy Action Plan** aligned with **BSACI (British Society for Allergy & Clinical Immunology)** guidelines is established.
- Weaning details are updated through settling-in sessions, Weaning and Allergen Stage forms, and ongoing practitioner dialogues.

2. Communication & Documentation

- Dietary records and BSACI plans are uploaded to individual files on Famly, shared with the Nursery Manager and Chef, and displayed securely in kitchen and preparation areas.

3. Safe Food Preparation

- Allergen-free meals are prepared in designated kitchen areas using sanitised, separate equipment to eliminate cross-contamination.
- All prepared food items and plates are clearly labelled with child names and ingredient details prior to leaving the kitchen.

4. Emergency Response & Medication

- All room staff receive annual training on recognising anaphylaxis and allergic reaction symptoms.
- Emergency allergy kits containing prescribed auto-injectors (e.g., EpiPens) or antihistamines are stored in easily accessible, unlocked, secure locations known to all staff.
- Immediate first aid and emergency services protocols (calling 999) are initiated in the event of accidental exposure.

Appendix B: Mealtimes Procedure

Operational Steps

1. Mealtime Supervision & Ratios

- **Active Line-of-Sight & Hearing**: Staff maintain direct, uninterrupted visual and audible supervision of all children throughout every meal/snack.
- **Seated Positioning**: Staff sit directly at tables/highchairs facing children to observe chewing, assist with feeding, prevent food swapping, and lead social conversations.
- **PFA Presence**: At least one PFA-trained staff member remains physically in the room throughout the feed.

2. Environment & Hygiene

- Tables and highchairs are disinfected before and after eating.

- Children and staff thoroughly wash hands with soap and warm water prior to and after eating.
- Background distractions (toys, media) are removed to create a calm, focused environment.

3. Positive Practices, Language & Learning

- Children are offered balanced portions across food groups aligned with EYFS guidelines.
- Practitioners actively engage children using serve-and-return communication and Emotion Coaching strategies to encourage trial of new foods without pressure.
- Independence is promoted through self-serving, cutlery practice, and cup pouring.
- **No Coercion**: Staff never force or coerce a child to eat.
- **Celebrations**: Sugary treats or home-baked goods brought from outside are not served; healthy alternatives (e.g., fruit platters) are provided.

Appendix C:Step-by-Step Bottle Preparation Procedure

1. **Boil Fresh Water**: Empty the kettle completely. Refill with at least 1 litre of fresh cold tap water (do not use previously boiled water or artificially softened water) and boil.
2. **Prep Your Space & Hands**: Thoroughly clean and sanitise the work surface. Wash hands thoroughly with soap and water and dry on a clean, single-use towel. Remove sterilised bottle parts handling the teat by the plastic edge only.
3. **Cool Water Safely (Target: At least 70°C)**: Allow the boiled water to cool in the covered kettle for no longer than 30 minutes. This ensures the water remains above 70°C to kill harmful bacteria present in powdered formula without compromising feed safety. Do not submerge thermometer probes directly into feed water to avoid cross-contamination.
4. **Pour Water First**: Pour the exact required volume of hot water into the bottle first, reading the volume at eye level on a flat surface.
5. **Add Formula Powder**: Using the manufacturer scoop, loosely fill and level off using the built-in scraper or a clean knife. Do not compact or heap. Add the precise number of scoops required.
6. **Mix thoroughly**: Screw the teat assembly on, cover with the cap, and shake vigorously until all powder is completely dissolved.
7. **Cool the Feed**: Hold the bottom half of the sealed bottle under cold running tap water to rapidly bring it down to body temperature.
8. **Final Safety Wrist Check**: Drop a few drops of milk onto the inside of your wrist before feeding. It must feel lukewarm or cool, never hot.