HEAD START/EARLY HEAD START
NUTRITION POLICIES

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Policy:

All children enrolled in Head Start (HS) and Early Head Start (EHS) programs will have a nutrition assessment completed to identify family eating patterns, cultural preferences, and to identify those at nutritional risk. The annual community assessment will identify major nutrition issues in the community.

Pregnant women enrolled in Early Head Start will have a nutritional assessment and be provided with nutrition information for a healthy pregnancy.

Procedure:

1. In order to identify current feeding practices, cultural preferences, and those children at risk for nutrition problems, a nutritional assessment will be completed as follows:

   • For all HS children and EHS children over one year of age, a “Child Nutrition History” (HS.47) will be completed upon enrollment, and updated annually and/or as needed. A copy will be given to the Nutrition Specialist.

   • For all EHS children, under one year of age, an “Infant Nutrition History” form (EHS.03) will be completed upon enrollment, and updated regularly. A copy of the EHS.03 will be given to the Nutrition Specialist and updates will be available for review.

   Nutrition concerns will be referred on the “Interoffice Referral for Services” form (HS.79) to the Nutrition Specialist.

2. Heights and weights will be completed according to “Height and Weight Screening Policy”. If Body Mass Index (BMI) for children two years and older is at or above the 95th percentile or below the 5th percentile, the child will be referred to the Nutrition Specialist. Children under two will be assessed on an individual basis.

3. Children will be screened for anemia according to the “Hemoglobin/Hematocrit Screening” policy. The Nutrition Specialist will assist the health staff in monitoring results and providing information to parents.

4. Children will be screened for elevated lead according to the “Lead Screening, Referral and Follow-up” policy. The Nutrition Specialist will assist the health staff in monitoring results and providing information to parents.
5. HS/EHS staff members will refer children with nutrition related disabilities to the Nutrition Specialist for review. (See the policy, “Referral of Nutritional Problems”)

6. HS/EHS staff members will refer children with food allergies or special diets to the Nutrition Specialist for review. (See the policy, “Special Diets and Food Allergies”)

7. All children will be assessed by the Nutrition Specialist and appropriate follow-up will be provided.

8. The community assessment will include current trends in childhood obesity, cardiovascular disease, and other community concerns. The Health Advisory Committee (HAC) will have input in the community assessment.

9. Nutrition Specialists will coordinate with the appropriate staff to ensure that special needs children are accommodated during meal service and eat meals and snacks with their classmates.

10. The “Pregnant Woman Health and Nutrition Assessment” form (EHS.20) will be completed and assessed on each pregnant woman enrolled in the EHS program by the Nutrition Specialist. Information will be provided on nutrition during pregnancy, infant feeding, and the benefits of breastfeeding.
Policy: Head Start/Early Head Start will comply with the Child and Adult Care Food Program (CACFP) guidelines for program accountability at the Cleveland and Nelson Street Centers. These centers will provide meals and snacks through a contracted public school food service department.

Procedure:

Meal Service, Recordkeeping and Other Operational Requirements
The Head Start/Early Head Start program will ensure that the following areas will be adhered to and closely monitored for program compliance.

1. All meals provided by the participating centers will meet USDA/TDA required meal patterns.
   - The Nutrition Specialists are responsible for menu planning and monitoring meal production records. For children one year of age and older, the kitchen manager of the site is responsible for meal preparation and completing Form 1530, Daily Meal Production Record. The infant classroom staff is responsible for completing Form 1530A, Daily Meal Production Record for Infants. Only TDA approved forms will be used. The USDA Food Buying Guide, standardized recipes, and Child Nutrition (CN) labels are used to ensure servings meet meal pattern requirements. The meal production records are reviewed by the Nutrition Specialists for accuracy and for use of TDA approved forms.

2. Civil Rights requirements will be met.
   - The Nutrition Specialists are responsible for ensuring that Civil Rights training requirements are met and that appropriate documentation is in place. All staff involved in meal counts, food service, or other key areas attend annual training. New employees attend training at new employee orientation prior to assuming any duties affiliated with the CACFP.
   - Notices from the Child and Adult Care Food Program are posted at each childcare center. Federal contact addresses are posted for discrimination complaints.

3. Complete and accurate recordkeeping are kept for enrollment, attendance, participant eligibility, meal counts, meal production and monthly claims.
   - The Director of Direct Services is responsible for training designated employees in enrollment, attendance, eligibility, and meal count requirements. The Nutrition Specialists train designated employees in completing the meal production record, meal patterns, and meal service requirements.
   - Daily meal counts are completed at time of meal service by classroom staff.
   - An Administrative Assistant enters the attendance and meal service data into a computerized program which produces daily, weekly, and monthly attendance counts, meal counts and participant eligibility counts.
• Attendance, meal counts, and participant eligibility counts are verified for accuracy and completeness by the Early Childhood Principals.
• Counts are verified by the Director of Direct Services prior to submitting the monthly claim for reimbursement so that only claims for eligible meals are submitted. Claims will be submitted online and no later than the 15th of the month for the preceding month.
• The Nutrition Specialists verify the meal production records for completeness and accuracy.

Training
The Nutrition Specialists and the Director of Direct Services provide training to program staff based upon staff members’ current responsibilities prior to staff assuming CACFP duties. Training is provided annually or as needed to all staff who perform CACFP duties according to the following training plan.

1. Nutrition Specialists will provide training to new program staff that performs key CACFP activities prior to beginning these key activities. The areas and subtopics to be covered will be based on current CACFP training guidelines.

2. Nutrition Specialists will provide training annually to program staff that performs key CACFP activities. The topics to be included in the training will be based on current CACFP training guidelines.

3. All new employees are trained at new employee orientation in the appropriate area before assuming any duties related to the CACFP.

4. Nutrition Specialists and the Director of Direct Services update their knowledge of CACFP guidelines through policy alerts or TDA training if available. If additional monitors are needed, they will be trained by the Nutrition Specialists.

5. Nutrition Specialists and Director of Direct Services will include the “CACFP Training Stand-By Registration” form in their training materials to ensure that stand-by registrants have all the required elements in the documentation of training. The Head Start/Early Head Start Administrative Assistant will monitor CACFP training session registration and documentation to ensure that all the required elements in the training documentation are met.

Monitoring Schedule/Plan
The Nutrition Specialists are responsible for monitoring reviews for the Child and Adult Care Food Program (CACFP) according to the following guidelines:

1. Form 1606, Monitor Review, is the tool used to review all participating centers to ensure compliance with the CACFP requirements.

2. Each center is monitored a minimum of three times per year according to CACFP guidelines.

3. All meal service types being claimed (breakfast, lunch, and snack) must be reviewed.

4. Two of the reviews conducted must be unannounced; the third review may be announced or unannounced at the Nutrition Specialists discretion.
5. An additional review is conducted each year using Form 1529, Food Service Management Company/Vendor Monitor Review. This review may be done in conjunction with the on-site monitoring reviews.

6. Findings and recommendations are reviewed with kitchen supervisor and Early Childhood Principals. These findings and recommendations are either corrected immediately on site or a corrective action plan is established. A copy is sent to the contracted public school foodservice director and a copy is kept on file by the Nutrition Specialists.

7. All documentation of reviews is kept on file for a minimum of three years from the last day of the program year to which they pertain.

Financial Monitoring at Program Level

1. The Region 16 Education Service Center uses a computerized accounting system which is monitored to ensure that expenditures are not greater than the amount appropriated.

2. The division secretary in Business Services sends a copy of the food service management company invoice to the Director of Direct Services upon receipt. The Director of Direct Services verifies the invoice for accuracy and notifies Business Services that the invoice can be paid.

3. The Director of Direct Services monitors monthly the invoices from the food service management company and the reimbursements from CACFP and compares them to ensure fiscal integrity and accountability.
Policy:

Evidence of compliance with Federal, State, Tribal, and local food safety and sanitation laws related to the storage, preparation, and service of food and health of the food handlers will be posted.

Procedure:

1. The food service inspection form will be posted at each Head Start/Early Head Start site.

2. The Texas Department of State Health Services or the local health department will make an inspection of local schools and child care centers on a regular basis.

3. Facilities serving infants and toddlers will have a proper storage area for breast milk and formula. Containers of breast milk will be clearly labeled with the child’s name and used only for the intended child.

4. Parents have the right to breast feed or provide breast milk to their child. A private place will be provided upon request.

5. EHS staff members at facilities serving infants and toddlers will have proper instruction on the handling of breast milk, formula and commercially prepared baby food.

6. Early Head Start staff members at facilities serving infants will have proper instruction for sterilization of dishes and utensils used during meals and snacks according to Minimum Standards for Childcare Licensing.
Policy:

Nutrition services will contribute to the development and socialization of children enrolled in Head Start and Early Head Start programs.

Procedure:

1. A variety of foods will be served that broaden a child’s food experience.
   - New foods will be introduced along with familiar foods to enhance acceptability.
   - Discussion of new or unusual foods before, during, or after meals will be encouraged.
   - Discussion will include color, texture, cultural aspects, etc.
   - Children will be encouraged but not forced to try new foods.

2. Food will **not** be used as a reward or punishment.

3. Sufficient time will be allowed for each child to eat. In general, ½ hour is allowed for meals but may be adjusted if necessary.

4. All classroom staff, including volunteers, will eat together family style and share the same menu to the extent possible. Some locations will pass the food around the table as each person serves himself or herself while other locations will have the food served on an individual tray to each child. The focus of the family style dining experience will be on pleasant conversation or simple nutrition education activities to ensure the experience is relaxed, social, and educational.

5. Infants will be held while feeding and not laid down to sleep with a bottle.

6. The Nutrition Specialist **must** be consulted regarding any medically-based diets, food allergies, or special diet requests. These requests will be reviewed and accommodated on an individual basis with documentation by a health care provider.

7. Will follow the requirements for the Food and Nutrition Programs administered by the USDA/Texas Department of Agriculture at all Head Start and Early Head Start centers.
Policy:

As developmentally appropriate, opportunity is provided for the involvement of children in food-related activities.

Procedure:

1. Developmentally appropriate nutrition activities/experiences for children will be offered in the classroom at least once a week. These may include any of the following:
   - Physical activity as it relates to the lesson plan.
   - Participation in activities that convey how food relates to good health.
   - Discussion of the daily menu and any unusual or different foods offered.
   - Comparison and contrasting of the taste, texture, shape, size and color of the foods served.
   - Discussion of similarities and differences in preparation of cultural foods (e.g. bread and tortillas).
   - Participation in food preparation or tasting experiences that are age appropriate.
   - Participation in the different aspects of meal service according to developmental Readiness. (e.g. preparing food, setting the table, cleaning up after meals)

2. The Nutrition Specialists will correspond with the Coordinated Services Specialist to make available appropriate nutrition education curricula for classroom teachers. In developing the nutrition education curricula the specialists will use a variety of resources.

3. Nutrition activities will be documented weekly on the lesson plans for classrooms and monthly for Head Start/Early Head Start home-based programs.

4. Home-based children will be offered similar opportunities at home visits and group socialization activities (GSA’s).

5. Parents will be encouraged to participate in the classroom nutrition education activities with the children.
Policy:

Parent education activities will include opportunities to assist individual families with food preparation and nutritional skills. Staff members will receive nutrition education information throughout the year.

Procedure:

1. Nutrition education will be offered annually to parents, including the management of food budgets.

2. Healthy food choices will be offered at parent functions, including Group Socialization Activities (GSA). Meals or snacks for GSAs must be approved by the appropriate nutrition specialist prior to the activity. A sample snack list will be provided to home educators. Infant formula and baby food will be available as needed.

3. General nutrition information will be offered to all parents.

4. As appropriate, referrals will be made to provide parents the opportunity to consult with the Nutrition Specialist to address individual nutrition concerns.

5. Parents will be invited to participate in the planning of nutrition activities through the Health Advisory Committee, Policy Council, home visits and GSA meetings.

6. Parents will be involved in evaluating nutritional services, including but not limited to, the annual self-assessment (Assessment for Continuous Excellence) and parent surveys.

7. Head Start/Early Head Start staff will be given opportunities throughout the year for nutrition education updates including newsletters, nutrition calendars, curriculum activities, and training sessions.
Policy:

Head Start and Early Head Start will design and implement a nutrition program that meets the nutritional needs and feeding requirements of each child, including those with special dietary needs and children with disabilities. Parents and appropriate community agencies will be involved in planning, implementing, and evaluating the agencies’ nutritional services.

Procedure:

1. Head Start and Early Head Start schools and centers will utilize funds from the USDA Food and Nutrition Services Child Nutrition Programs as the primary source of reimbursement for meals and snacks. Costs not allowed through USDA programs will be funded through Head Start or Early Head Start. Meals and snacks will be individualized as necessary to accommodate children with special needs and those with special dietary requirements.

2. All children in a part-day program will receive at least 1/3 of the child’s daily nutritional needs and all children in a full-day program will receive 1/2 to 2/3 of the child’s daily nutritional needs. Meal patterns will follow USDA guidelines.

3. Children enrolled in the morning program who have not received breakfast, will receive a nourishing breakfast when they arrive at Head Start or Early Head Start.

4. Infants and toddlers will receive foods appropriate to his or her developmental needs. The following guidelines will be followed:
   - USDA meal pattern for infants/toddlers according to age.
   - Breast milk or formula and solid foods will be served according to CACFP guidelines.
   - Children between the ages of one and two receive whole milk.
   - Foods that are a choking hazard will not be served (nuts, hot dogs, popcorn, etc.).
   - Information concerning feeding will be shared with parents and updated regularly.

5. Servings for children 3-5 years of age will conform to USDA recommended serving sizes and minimum standards for meal patterns or nutrient standard menu planning requirements.

6. Foods served for group experiences at center-based settings will be high in nutrients and low in fat, sugar, and salt. The Nutrition Specialist will be available for consultation as needed to fulfill the following guidelines:
   - Children over the age of 2 years will be offered 1% milk.
   - Additional sugar, fat, butter, and salt will not be placed on tables during meal or snack time.
   - 100% fruit or vegetable juice will be served rather than fruit drinks.
   - Alternatives to items high in sugar, fat, and salt will be offered to the extent possible.
7. Meal and snack periods will be appropriately scheduled and adjusted as necessary.
   • Infants and young toddlers will be fed “on demand” to the extent possible and at appropriate intervals.
   • Children with disabilities or special needs will be accommodated during meal and snack times in order to participate with classmates.
   • Any concerns related to eating patterns will be referred to the Nutrition Specialist.

8. The Head Start and Early Head Start home-based programs will provide appropriate snacks and meals to each child during group socialization activities. The Nutrition Specialist will be available for consultation by staff or parents.

9. The Head Start and Early Head Start staff will promote effective dental hygiene among children in conjunction with meals. (See Tooth brushing Policy MD section)

10. Menus for meals and snacks will be posted at each facility and will be accessible to parents. Copies will be available for parents upon request.

11. Parents will be invited to participate in the planning of nutrition activities through the Health Advisory Committee, Policy Council, and through parent committee meetings.

12. Parents will be involved in evaluating the nutritional services through the annual self-assessment (Assessment for Continuous Excellence), Policy Council, and parent surveys.
Policy:

Infants and children at nutritional risk will be referred for follow-up services.

Procedure:

1. Children will be screened utilizing the “Child Nutrition History” form (HS.47) for children one year of age and older or the “Infant Nutrition History” form (EHS.03) for children birth through 11 months of age. The following problems require a written referral by any Head Start/Early Head Start staff member to the Nutrition Specialist:
   - Special diets
   - Food allergies
   - Disabilities that affect nutritional status
   - Children two years and older with a BMI at or above the 95th percentile or below the 5th percentile
   - Inadequate or excessive breast milk or formula intake
   - Inappropriate foods introduced for child’s age
   - Dietary problems (i.e. eating substances other than food, and/or parent requests)

2. The Nutrition Specialist will assess the child and determine intervention. The intervention may include, but is not limited to, any or all of the following:
   - Providing an informational packet to parent/caregiver regarding the nutrition concern
   - Counseling with parent/caregiver regarding nutrition concern
   - Making a home visit to the family to provide assistance with nutrition issues
   - Discussing the nutrition problem with appropriate Head Start or EHS staff members
   - Referring to another Head Start or EHS specialist
   - Referring to a primary care provider for further evaluation
   - Requesting a staffing to address multiple concerns
   - Coordinating with Early Childhood Intervention (ECI) as appropriate

3. Information regarding referrals will be documented on the “Interoffice Referral for Services” form (HS.79). The Nutrition Specialist will be given the white and yellow copies.

4. Once the referral has been completed, the white copy of the “Interoffice Referral” (HS.79) will be given to the center LVN, EHS nurse, or family services assistant to be filed in the child’s folder/notebook.
Policy:

Special diets and food allergies will be documented and referred for follow up services.

Procedure:

1. Food allergies and special diets will be referred to the Nutrition Specialist by a health staff or HS/EHS staff member.

2. Parents MUST obtain a physician’s statement documenting the food allergy or special diet. The Nutrition Specialist will contact parents/caregivers and/or physician’s office, as needed, to make appropriate food substitutions based on the food allergy or special diet concerns.

3. Family Services Assistants or health staff will place the documentation in the child’s folder.

4. Cafeteria, classroom, and health staff will be notified of restrictions.

5. The Nutrition Specialist will provide the classroom staff and kitchen staff with appropriate documentation of the food allergy and/or special diet according to district or center policies. This information will be posted in the Emergency Folder in the classroom and posted in a visible location in the kitchen.

6. The Nutrition Specialists will coordinate with other specialists and staff members to ensure individualization of meals and snacks.

7. For children with severe food allergies, the “Care of Students with Diagnosed Food Allergies at Risk for Anaphylaxis” policy will be followed.