



Level 3 Children's Care, Play, Learning and
Development – Practice

Unit 302 Promoting Nutrition and Hydration in Early Years

Supporting Materials

Assessor Notes/Learner Handout:

Eating and Drinking: Potential Challenges and Strategies to Help

Level 3 Children's Care, Play, Learning and Development: Practice and Theory - Unit 310	AC 2.5
Level 3 Children's Care, Play, Learning and Development: Practice - Unit 302	AC 1.12

The following are examples of challenges that can arise at each stage of development and helpful management strategies. Effective strategies will depend on the family, their individual needs and the type of setting you work in. The information provided is **not intended to be comprehensive** and practitioners may need to seek advice, and work in partnership, with specialist professionals and the child's care team.

Stage of development	Potential challenges	Strategies to help	Useful links
0-6 months	Continuation of breastfeeding and perceived barriers (e.g. returning to work, feeling embarrassed to feed in public, concerns about the amount of milk the infant is receiving).	<ul style="list-style-type: none"> • Signpost families to local breastfeeding support services and the national breastfeeding helpline if needed. • Provide a welcoming environment for mothers to breastfeed or express milk. Provide a room that is private, comfortable and quiet. • Talk about breastfeeding when families register with the setting. Mothers may want to express their milk or attend to feed during breaks in their working day. • Assure families that breast milk will be handled safely at the setting in line with best practice guidance. • Include information about expressing and storing breast milk in registration/welcome packs for families. • Display a '<i>you are welcome to breastfeed here</i>' poster available free in English and Welsh at https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/welcome-to-breastfeed-here-posters/. • Signpost families to their Health Visitor who can monitor their baby's growth in their red book (national standard health and development record given to parents/carers at a child's birth). This can provide reassurance that the infant is feeding well. 	<p>UNICEF – https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2008/02/start4life_guide_to_bottle_feeding.pdf.</p> <p>See the 'guide to bottle feeding' for information about handling and storing breast milk.</p> <p>The national breastfeeding helpline: 0300 100 0212</p> <p>Bump, Baby and Beyond – can be accessed at https://www.everychildwales.co.uk.</p> <p>See section 2 of the Welsh Government Food and Nutrition for Childcare Settings: Best Practice Guidance https://gov.wales/sites/default/files/publications/2019-03/190313-nutrition-guidance-complete.pdf.</p>

Stage of development	Potential challenges	Strategies to help	Useful links
6 months-1 year	Moving on to lumpy textures and finger foods.	<ul style="list-style-type: none"> • Encourage a variety of homemade foods. If offering purees, gradually thicken these to encourage movement of the tongue around the mouth. • Limit the use of processed infant foods (e.g. jars, packets and pouches). There can be a large jump in texture between products advertised as 'stage 1' and 'stage 2' which can be tricky for some infants to manage. • Reassure families that infants can manage soft finger foods from around 6 months. Discuss the safety aspects such as offering finger foods when the infant is alert, sitting up (e.g. safely strapped into a highchair) and avoiding foods that are a potential choking hazard e.g. whole nuts, whole grapes. • Keep trying. It can take infants several attempts to learn to accept a new taste or texture. • Encourage mess at mealtimes – this helps infants familiarise with new textures. • Encourage messy play outside of mealtimes. • Reassure families/carers that gagging and spitting out is normal as infants get used to solids. 	<p>For information about feeding babies and recommended textures to offer visit https://firststepsnutrition.org.</p> <p>See the St John's Ambulance website for a video and guidance on dealing with a choking baby https://www.sja.org.uk.</p> <p>See section 3 of the Welsh Government (2018) Food and Nutrition in Childcare and Early Years Settings: Best Practice Guidance.</p>

Stage of development	Potential challenges	Strategies to help	Useful links
1-4 years	Challenging behaviours at mealtimes, food refusal and fussy/choosy eating.	<ul style="list-style-type: none"> • Involve children in preparing the snack or meal. Children love to do this – it supports independence and can encourage them to try new foods. • Let children decide how much to eat. Toddlers have small stomachs and can't eat much food at one time. Give them small portions and praise them for eating, even if they only manage a little. • Recognise that children may not eat the same amount each time. As with adults, some days children will be hungry and other times they will be less hungry. • Make mealtimes happy, relaxed and sociable. Eating as a family, or with other children in the setting, makes mealtimes more enjoyable. Children are more likely to try a new food if they see others trying them too. • Let children feed themselves. Young children often enjoy finger foods and eating with their hands (e.g. small sandwiches, vegetables sticks and dip, filled wraps cut into strips). • Let children serve themselves (with supervision). • Offer children a limited choice so they are involved in the decision making e.g. "do you want broccoli or green beans with your meal?" • Try the same foods but in different ways. A child may refuse cooked carrots but enjoy raw carrots cut into sticks. • Avoid distractions at mealtimes. Switch off TVs and screens so that children can focus on eating and chatting with others at the table. • Never bribe or force a child to eat. Bribing, coaxing or forcing a child to eat can reduce their appetite further. Encouraging children to eat when they are not hungry could lead to unhealthy weight gain over time. 	<p>Parenting. Give it Time. Mealtimes (suitable for 1-5 years). Visit https://gov.wales/parenting-give-it-time.</p> <p>See http://www.childfeedingguide.co.uk.</p> <p>See section 5 of the Welsh Government Food and Nutrition for Childcare Settings: Best Practice Guidance 'encouraging children to eat well'.</p>

Stage of development	Potential challenges	Strategies to help	Useful links
5+ years	Peer influences (these can be positive or negative).	<ul style="list-style-type: none"> • Offer health snacks, meals and drinks as a setting – this will help make healthier choices the easier choice for all the children and young people in your care. • In early years settings, sit children who are 'choosy/picky' eaters with children who eat well, to encourage them to try new foods. • Adults working with children can be powerful role models. Enjoy healthy options in front of children to encourage them to do the same. • Involve children in planning healthy options for the setting. • Engage older children in discussions around factors that influence their food and drink choices. 	
	Influences of advertising.	<ul style="list-style-type: none"> • Swap screen time for other activities to limit exposure to advertising. • Engage older children in discussions around advertising and the influence of marketing on food choices. • Offer healthy snacks, meals and drinks as a setting – this will help make healthier choices the easier choice for children and young people. • Adults working with children can be powerful role models. Enjoy healthy options in front of children to encourage them to do the same. • Offer non-food rewards. Using branded food items (such as crisps and confectionary) implies that these are 'prized' and 'desirable' – reinforcing what the adverts say! • Think twice before accepting sponsorship from companies promoting unhealthy options to children. 	A 'screen time tracker' can be found at https://www.everychildwales.co.uk

Stage of development	Potential challenges	Strategies to help	Useful links
All age groups	<p>Disabilities and conditions.</p> <p>Potential challenges will be diverse depending on the disability, condition, the child and their family.</p>	<p>A partnership between children, families/ carers, staff and specialist professionals is essential to help children with disabilities to eat well.</p> <ul style="list-style-type: none"> Children with heart conditions commonly have difficulties with eating. They may tire easily at mealtimes therefore need encouragement, nutrient dense foods and time to eat. Children with cerebral palsy, epilepsy or degenerative disorders may have difficulties with swallowing. The texture of their foods/meals may need to be modified to help them eat. It is important that meals remain attractive and appealing after changing their form or texture. Children with an autistic spectrum disorder often have eating difficulties such as selective eating, food refusal and over-eating. They may be particularly sensitive to taste, texture, smell, noise and feel anxious at snack and mealtimes. Effective strategies will be individual but could include: reducing noise levels at mealtimes; playing relaxing music when eating to reduce anxiety; sticking to clear mealtime routines; keeping the eating environment familiar and making the transition between activities clear (e.g. play time and eating). It can take patience and several months to encourage autistic children to feel comfortable with new foods. Children with Down's Syndrome can have a small oral cavity (mouth) and delayed development of teeth. They may have oral sensitivity and find it hard to accept new tastes and textures. Families may need to work with a Dietitian and a Speech and Language Therapist on strategies to help with eating. 	<p>The Caroline Walker Trust https://cwt.org.uk/wp-content/uploads/2015/02/EWLDGuidelines.pdf. Eating well: Children and adults with learning disabilities.</p> <p>National Autistic Association https://www.autism.org.uk/</p> <p>Paediatric Dietitians in each local health board in Wales can advise on special dietary needs. Other specialist professionals may be involved in the care of children with disabilities e.g. occupational therapists, physiotherapists, specialist nurses, pharmacists and speech and language therapists. It is important to follow any professional advice provided.</p>

Stage of development	Potential challenges	Strategies to help	Useful links
All age groups (continued)		<ul style="list-style-type: none"> • Some children with a disability may have restricted motor skills and posture. They may require eating aids (e.g. a non-slip table mat) and help with positioning at mealtimes. • Certain disabilities are associated with 'hyperphagia' – eating excessively and not feeling full. This can result in food grabbing, eating inedible objects, obesity and behavioural problems. Strategies to help can include limiting the availability of foods and drinks high in fat, salt and sugar and providing opportunities for physical activity. • Babies born with a cleft lip and palate (a facial birth defect) may need support with feeding, particularly before treatment. This might include help to breastfeed or using a special type of bottle. • Some children may be required to take medications to help manage their condition. Some drugs have side effects that can affect eating such as sore gums, constipation, nausea, abdominal pain and tiredness. Practitioners should liaise with the child's health team to discuss helpful strategies. <p>Strategies that help children to eat well in general can be useful e.g. involving children in preparing meals, creating a relaxed eating environment, role-modelling positive eating behaviours and establishing a regular meal and snack routine.</p>	