*<****Insert Name of Program****>***Nutrition and Physical Activity Policies**

The *<insert name of program>* believes in creating the healthiest possible environment for the infants and children in our care. Children who eat well and are physically active are healthier and learn better. Yet, research shows that many children have poor diets and do not get enough physical activity. Our nutrition and physical activity policies create an environment that supports healthy behaviors, encourages learning, and eliminates practices that do not promote children’s health. Our policies include best practices for promoting healthy eating and physical activity based on current science, public health research, and national recommendations and standards. We encourage families to contact *<insert name and title>*at *<insert phone number>* with any concerns or questions regarding these policies.

# Nutrition Standards

The policy recommendations for Child and Adult Care Food Program (CACFP) meals and snacks and other foods and beverages in the child care environment are based on the Connecticut Child Care Nutrition Standards (CCCNS). The CCCNS provides the healthiest choices in child care by promoting whole or minimally processed, nutrient-rich foods that are low in fat, added sugars and sodium. The standards reflect current nutrition science and national health recommendations from the Dietary Guidelines for Americans and national organizations, such as the National Academy of Sciences Institute of Medicine, American Academy of Pediatrics, Academy of Nutrition and Dietetics, and American Heart Association. A summary of the CCCNS is available in [Appendix C](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/CCPolicy/Child_Care_Action_Guide_AppendixC.pdf) of the Connecticut State Department of Education’s (CSDE) [*Action Guide for Child Care Nutrition and Physical Activity Policies*](https://portal.ct.gov/-/media/SDE/Nutrition/CACFP/CCPolicy/Child_Care_Action_Guide.pdf). The CACFP meal patterns for children and infants are available at the CSDE’s [Meal Patterns for CACFP Child Care Programs](https://portal.ct.gov/SDE/Nutrition/Meal-Patterns-CACFP-Child-Care-Programs) webpage.

## Menu Planning

Our center uses a cycle menu of four weeks *<insert number of weeks if different>* that changes with the seasons and contains minimal repetition. To broaden children’s food experiences, we serve a variety of healthy and appealing foods. We regularly include foods from different cultures. Menus are planned and approved by *<insert specific information on who plans the menus, e.g., our registered dietitian, our registered dietitian consultant, our public health nutritionist>,* who is trained in nutrition and CACFP requirements. The menu planning process includes input from families and staff members through *<insert specific information on how input is obtained, e.g., menu surveys, discussions, meetings, and other means>.* Written menus are developed one month *<insert number of months if different>* in advance and are posted and shared with families and staff members. Menus are available *<insert specific information on where menus are available, e.g., posted on our website at (insert web address) and are available in (insert location, e.g., the main office, each classroom).>*

## Nutrition Guidelines for Children

Our center provides healthy and safe meals and snacks that meet the nutrition requirements established by federal and state laws and regulations. *<Additional language for programs with food or vending contracts: All meals and snacks provided by our food service vending company follow these requirements.>* Our menus offer varied and nutritious food choices that are consistent with the CACFP meal patterns for children, the Dietary Guidelines for Americans, and the Connecticut Child Care Nutrition Standards (CCCNS). Meals and snacks emphasize nutrient-rich foods, including fruits, vegetables, whole grains, low-fat or nonfat dairy, lean meats, skinless poultry, fish, eggs, legumes, nuts, and seeds. We use healthy food preparation techniques for our menus. All foods are trans fat free, and low in saturated fats, added sugars, and sodium.

## Nutrition Guidelines for Infants

Our center promotes an environment that encourages and supports mothers who are breastfeeding their infants by providing:

* refrigerated storage for breast milk;
* a comfortable, private area for mothers to breastfeed their infants or express milk;
* sensitivity for breastfeeding mothers and their infants; and
* training for staff members on proper handling of breast milk.

If a mother is breastfeeding exclusively, staff members will feed the mother’s expressed breast milk to the infant and support the mother in breastfeeding her infant when visiting the facility. Bottles from home must be labeled with the child’s name, the bottle’s contents, and the date and time received. Breastfed infants will receive infant formula only if the mother requests it.

Our center supports exclusive breastfeeding (preferred) or iron-fortified infant formula for the first six months of life. We support mothers who are breastfeeding beyond 12 months. We work in consultation with families to gradually introduce solid foods from ages 4 to 6 months, based on each infant’s developmental readiness. The American Academy of Pediatrics strongly recommends waiting until 6 months before serving any solid food. All foods provided to infants will meet the CACFP requirements and the CCCNS.

Our center will not serve infants any food or drink in a bottle other than breast milk or iron-fortified infant formula unless medically necessary and documented by a medical statement (refer to “Special Dietary Needs” below). Following the American Academy of Pediatrics’ recommendations, we encourage children ages 1 and older to use a cup exclusively, instead of a bottle.

## Special Dietary Needs

Our center follows state and federal requirements for accommodating children with special dietary needs. With appropriate medical documentation, we modify meals for children (including infants) with food allergies or other special dietary needs. If the child has a disability that restricts their diet, the medical statement must be signed by a recognized medical authority, i.e., physician assistant, doctor of osteopathy, or advanced practice registered nurse. Medical statements are available *<insert specific information on where medical statements are available, e.g., available in the parent handbook, posted on our website at (insert web address) and are available (insert location, e.g., in the main office, from the center director).>*

Our center takes appropriate precautions to prepare and serve safe meals and snacks for children with food allergies. Procedures are in place to:

* develop a food allergy action plan for each child with life-threatening food allergies;
* check ingredients labels for all foods served to children with food allergies;
* designate an area in the kitchen for allergy-free meals and use separate equipment and utensils during preparation, cooking and serving;
* develop cleaning procedures that avoid cross-contamination; and
* provide ongoing training for staff members.

*<Optional Additional Information: The program can provide specific information on the food allergy action plan or other program-specific information related to accommodating special diets.>*

## Foods from Home

When meals and snacks are provided from home for an individual child’s consumption, we ask families to support safe and healthy eating by providing only nutrient-rich choices that meet the CACFP meal patterns and the CCCNS. Foods provided by parents are healthy choices from the CACFP meal components of grains, meat/meat alternates, vegetables, and fruits. They include appropriate child-size portions that are trans fat free and low in saturated fat, added sugars and sodium.

Beverages provided for children (ages 1 and older) consist only of:

* whole milk for children younger than 2;
* low-fat (1%) or fat-free unflavored milk for children ages 2 and older;
* 100 percent juice when it can be served in a cup (limit of ¼ cup or 2 fluid ounces per day for ages 12 to 23 months and ½ cup or 4 fluid ounces per day for ages 2 and older); and
* water without added ingredients, e.g., flavors, sugars, sweeteners (natural, artificial, and nonnutritive), sugar alcohols, and caffeine.

Beverages for infants (birth through 11 months) consist only of:

* breast milk (preferred) or iron-fortified infant formula; and
* water without added ingredients for infants ages 7 months and older when it can be served in a cup.

Families will provide safe foods for children by clearly labeling all foods with the child’s name, date, and type of food, and storing all foods at an appropriate temperature until they are eaten*. <Optional Additional Information: The program may choose to provide specific information on safe food storage, e.g., using ice packs and insulated containers.>* Children are not allowed to share lunches and snacks brought from home with other children.

Foods that do not meet the CCCNS (such as candy, soda, cookies, cake, doughnuts, ice cream, and snack chips) are not allowed in our center. Foods that do not meet our standards for nutrition and food safety will be returned home with the children. We supplement children’s meals or snacks if food from home is deficient in meeting the child’s nutrient needs. *<Optional Additional Information: The program may choose to provide specific information on their process for addressing families who consistently send inappropriate foods, e.g., meeting with the registered dietitian consultant or referrals to appropriate medical professionals.>*

## Celebrations

*Option 1 (Preferred):* Our center promotes nonfood celebrations. We choose to celebrate birthdays and other special occasions with activities that focus on children instead of food. This policy is consistent with the healthy environment we are promoting and the nutrition curriculum we are teaching. Families support our efforts by providing only nonfood items or activities for celebrations, holiday parties and other events on site. A list of appropriate nonfood items and activities for parties is available *<insert specific information on where this list is available, e.g., upon request, on our website at (insert website), from your child’s teacher, in the main office, from the center director.>*

*Option 2:* Our center promotes healthy celebrations. Foods and beverages served at celebrations consist only of healthy choices that meet the CCCNS. This policy is consistent with the healthy environment we are promoting and the nutrition curriculum we are teaching. Families support our efforts by providing only nonfood items or healthy foods that meet the CCCNS for celebrations, holiday parties and other events on site. To protect food safety and guard against allergic reactions, all food provided by families to be shared with other children must be either whole fruits (e.g., apples, oranges, or pears) or commercially prepared packaged foods that are unopened and, when possible, individually wrapped. A list of appropriate healthy foods and beverages and activities for parties is available *<insert specific information on where this list is available, e.g., upon request, on our website at (insert website), from your child’s teacher, in the main office, from the center director.>* Foods and beverages that do not meet our standards for nutrition and food safety are not accepted.

## Functions, Events, and Meetings

All foods and beverages served at any functions, events, and meetings on site must meet the CCCNS. This includes foods and beverages brought from home by families.

## Fundraising

*Option 1 (Preferred):* Our center does not allow the sale of foods or beverages as fundraisers. We encourage fundraising activities that promote physical activity, as developmentally appropriate. A list of ideas for acceptable fundraising activities is available *<insert specific information on where this list is available, e.g., upon request, on our website at (insert website), from your child’s teacher, in the main office, from the center director.>* Vending machines are not located on site.

*Option 2:* Fundraising in our center involves nonfood items and only foods and beverages that meet the CCCNS. Our center encourages fundraising activities that promote physical activity, as developmentally appropriate. A list of ideas for acceptable fundraising activities, such as nonfood items or healthy foods and beverages, is available *<insert specific information on where this list is available, e.g., upon request, on our website at (insert website), from your child’s teacher, in the main office, from the center director.>* Vending machines sell only beverages and foods that meet the CCCNS.

## Access to Drinking Water

Safe, fresh drinking water will be clearly visible and available to children at all times indoors and outdoors, including during meals and snacks. Water will not be offered as a choice to replace the CACFP meal pattern components of milk or juice.

# Eating Environment

## Meal Schedules for Children

Our center schedules meal and snack periods at appropriate times so that children’s hunger does not overwhelm their ability to self-regulate food intake. *<Insert the actual meals and snacks served in your program, e.g., breakfast, morning snack, lunch, afternoon snack, and supper.>* Breakfast is served at *<insert time>*, lunch at *<insert time>* and snack at *<insert time>.* To encourage meal consumption and improve children’s behavior, mealtimes are scheduled after structured physical activity or active play.

Our mealtimes allow adequate time for all children to eat and socialize. Scheduled mealtimes provide children with at least 20 minutes to eat breakfast or snack and at least 30 minutes to eat lunch or supper, after the children are sitting at the table. Our center accommodates the tooth-brushing regimens of all children, including those with special oral health needs, e.g., orthodontia or high tooth decay risk.

## Meal Schedules for Infants

Our center feeds infants according to the written feeding plan provided by parents. *<Optional Additional Information: The program can choose to provide specific guidance regarding the requirements for the written feeding plan.>* Infants are fed on demand following cues for hunger and fullness. Infants’ teeth and gums are wiped with a disposable tissue or gauze after each feeding.

## Pleasant and Healthy Eating Environment for Children

Our center serves meals and snacks in safe, clean, and pleasant settings. The eating environment provides children with a relaxed, enjoyable climate. The eating environment is a place where children have:

* adequate space to eat;
* clean and pleasant surroundings;
* appropriate and culturally relevant eating dishes and utensils;
* pleasant conversation; and
* convenient access to hand washing facilities before meals and snacks.

Mealtimes include predictable routines, such as washing hands before coming to the table, assisting with setting plates and utensils, and cleaning up after meals. We serve meals family style. Children serve themselves from common platters of food with assistance from supervising adults who sit and eat the same foods with the children. Our center uses mealtimes as an opportunity to teach nutrition and food concepts. Adults eating with the children encourage social interaction and conversation. They ask questions and talk about nutrition concepts related to the foods being served.

To support the development of healthy eating habits, staff members observe children’s hunger and fullness cues and implement strategies that support children’s self-regulation of food intake. Staff members encourage children to start with small portions. They ask children if they are hungry before serving or allowing second helpings. Staff members encourage children to try foods but never force, coax, or bribe children to eat. Staff members do not praise children for finishing food or cleaning their plates. Mealtime is never used to discipline or scold children.

## Pleasant and Healthy Eating Environment for Infants

Our center follows best practices for feeding infants, as defined by the American Academy of Pediatrics and the CACFP. Infants are provided a safe, calm, and uninterrupted feeding environment. Staff members hold infants while they are being fed. Infants are never laid down to sleep or propped in a bouncy chair or high chair with a bottle. Whenever possible, infants are fed by a single caregiver to develop familiarity, encourage bonding, and make mealtimes an enjoyable experience.

## Modeling Healthy Behaviors

Our center recognizes the importance of staff members as positive role models for children as they learn to live healthy lives. Staff members model behaviors for healthy eating, physical activity (including limited screen time), and positive body image in the presence of children. They do not consume unhealthy foods and beverages such as candy and soda in front of children. Staff members sit with children at the table and eat the same foods as children (with exceptions for staff members with special religious, dietary, or medical restrictions). We encourage parents to reinforce these positive messages by serving as role models for their children at home.

## Food Rewards and Punishments

Staff members do not use foods or beverages as rewards for performance or good behavior. Staff members never withhold foods or beverages (including foods served through CACFP meals) as a punishment. Our center uses nonfood reinforcement for appropriate behavior. *<Optional Additional Information:* *The program can choose to provide specific guidance regarding their procedures for reinforcing appropriate behavior or refer families to other program policies that address this information.>*

## Food Service Personnel Qualifications and Training

Qualified nutrition professionals administer the CACFP. Our center provides adequate training and continuing professional development for all nutrition and food service personnel. Food service personnel regularly participate in professional development activities that address all applicable areas of food service operations. Training includes planning, preparing, and serving nutritious, safe, and appealing meals and snacks that meet the required CACFP meal pattern components and serving sizes. Food service personnel regularly participate in professional development activities that address other appropriate topics, such as nutrition, strategies for promoting healthy eating behaviors, and accommodating special dietary needs.

## Food Safety

All foods and beverages made available in our center comply with federal, state, and local food safety and sanitation regulations. This includes foods and beverages served for CACFP meals and snacks, nutrition education activities (such as cooking and taste-testing), celebrations and other events on site. We take appropriate precautions during food preparation to eliminate foods that are high risks for choking and use preparation methods to make all foods safe to eat.

## Staff Wellness

Our center highly values the health and well-being of every staff member. We promote and provide activities and resources that support personal efforts by staff members to maintain a healthy lifestyle and that encourage staff members to serve as role models for children.

# Nutrition Education

## Standards-Based Nutrition Education

Our center provides standards-based nutrition education that reflects current science, national guidelines, and state standards, and is focused on children’s eating behaviors. We provide nutrition education at least once per week *<insert number of times if different>.* Nutrition education is part of a planned comprehensive health education program designed to provide children with the knowledge and skills necessary to promote and protect their health. Nutrition education activities are consistent with the Dietary Guidelines for Americans and emphasize the appealing aspects of healthy eating. They promote nutrient-rich foods, healthy food preparation methods and good nutrition practices. Nutrition education activities include enjoyable, developmentally appropriate, and culturally relevant participatory activities, e.g., *<insert examples of the types of activities provided in your program, e.g., cooking, taste-testing, gardening and farm visits>.*

## Appropriateness of Nutrition Materials

Our center reviews all nutrition education lessons and materials for accuracy, completeness, balance, cultural relevancy, and consistency with our educational goals and curriculum standards. We do not use nutrition education materials with corporate logos or advertising. Books, posters, and other educational materials depict healthy foods and enjoyment of safe and developmentally appropriate physical activity. Foods used for nutrition education activities are consistent with the CCCNS.

## Connecting with Planned Learning Experiences

Nutrition education is a part of comprehensive health education and is included in other content areas, such as language and literacy development, mathematics, science, and music. Our staff members incorporate nutrition themes into planned learning experiences, when appropriate, to reinforce and support health messages. Nutrition concepts are integrated into daily routines whenever possible, such as mealtimes and transitions.

*<Alternate language for afterschool programs: Our center integrates nutrition activities throughout the learning environment. We incorporate nutrition into planned learning experiences, when appropriate, to reinforce and support health messages.>*

## Nutrition Promotion

Our center conducts nutrition education activities and promotions that involve children, families, and the community. The nutrition education program is coordinated with CACFP meals and snacks and other foods and beverages available in the child care environment, such as parties, meetings and other events. Whenever possible, nutrition education activities involve the entire child care program and are linked to health-related community initiatives, services and programs. Our center collaborates with agencies and groups conducting nutrition education in the community to send consistent health messages to children and their families. *<Optional Additional Information: The program can choose to provide specific examples of local community collaborations.>*

## Professional Development

Staff members responsible for nutrition education are adequately trained. They regularly participate in professional development activities to effectively deliver the nutrition education program as planned. Our center offers relevant nutrition training at least twice a year *<insert number of times if different>* for teachers, assistant teachers, and other staff members, as appropriate. Professional development includes orientation to appropriate state standards and curriculum frameworks*.*

Our center builds awareness among teachers, food service personnel, consultants, and other staff members about the importance of nutrition, physical activity, decreased screen time and positive body image to academic success and lifelong wellness. Nutrition and physical activity information shared with children, families, and staff members is based on current science and national health recommendations.

# Physical Activity

## Daily Physical Activity for Children

In accordance with national guidelines, our center encourages all children to participate in a variety of daily physical activity opportunities that are appropriate for their age, that are fun, and that offer variety. Children with disabilities have access to participate in physical activities with nondisabled peers. We provide all children with numerous opportunities for physical activity throughout the day.

* Toddlers (ages 1 to 2) are provided with at least 30 minutes of structured activity and at least 60 minutes up to several hours of unstructured physical activity daily.
* Preschoolers (ages 3 to 5) are provided with at least 60 minutes of structured activity and at least 60 minutes up to several hours of unstructured physical activity daily.
* Toddlers and preschoolers are not sedentary for more than 60 minutes at a time except while sleeping.
* School-age children (ages 6 and older) are provided with at least 60 minutes of daily physical activity that includes aerobic and age-appropriate muscle- and bone-strengthening activities.

All children are provided outdoor time at least twice daily, weather and air quality permitting.

* Children can go outside when the temperatures are above 15 degrees Fahrenheit (including wind chill factor) and below 90 degrees Fahrenheit.
* Outdoor time is limited to 20 to 30 minutes when temperatures are between 16 to 32 degrees Fahrenheit.
* Outdoor time is in safe settings supervised by adults.

We expect parents to provide children with appropriate clothing for safe and active outdoor play during all seasons. *<Optional Additional Information: The program can choose to provide specific guidance on appropriate clothing. For example: For safety, children cannot wear open-toe shoes, sandals, or flip-flops. In winter, provide a warm jacket, snowsuit, hat, mittens, and boots. In spring and fall, provide a jacket or sweater, and boots and rain jacket on rainy days. In summer, provide light clothing, swimsuit, towel, hat, and sunscreen.>*

Staff members lead and participate in active play (e.g., games and activities) during outdoor time and other times devoted to physical activity.

## Daily Physical Activity for Infants

In accordance with national guidelines, our center provides all infants with planned daily physical activity to safely support their physical development and health. Activities are planned to support infants’ developmental milestones, such as self-supporting head and neck, rolling, reaching, sitting, kicking, crawling, standing, and walking. Following the American Academy of Pediatrics’ recommendation, infants are provided “tummy time” (time spent lying on their stomachs) for short intervals at least two to three times each day while they are awake and supervised by an adult.

All infants are provided daily outdoor time when the weather and air quality are safe.

* Infants can go outside when the temperatures are above 15 degrees Fahrenheit (including wind chill factor) and below 90 degrees Fahrenheit.
* Outdoor time is limited to 20 to 30 minutes when temperatures are between 16 to 32 degrees Fahrenheit.
* Outdoor time is in safe settings supervised by adults.

To support infant development, confining equipment (e.g., swings, bouncy chairs, exercise saucers, car seats and strollers) is limited to less than 30 minutes while infants are awake.

## Play Space and Equipment for Children

Our center provides children with a physical environment that promotes active play and supports the development of gross motor skills. Safe, sufficient, and developmentally appropriate indoor and outdoor space and equipment encourage all children to be physically active, including children with disabilities. Sufficient equipment is provided to avoid competition and long waits.

* A variety of fixed play equipment is available that accommodates the needs of all children, such as climbing structures, swings, sandboxes, tunnels, and slides.
* A large variety of indoor and outdoor portable play equipment is available for children to use at the same time, such as balls, hula hoops, tumbling mats, jump ropes, tricycles, and buckets.
* Outdoor play space includes open grassy areas and a path for wheeled toys.
* Indoor play areas are safe and provide adequate space for each child.

Staff members regularly inspect equipment and play areas to ensure they are safe. Staff members always supervise children on playground equipment and during active play and other physical activities. Our physical environment does not promote sedentary activity. Sedentary equipment such as televisions, videos and electronic games are not prominently displayed.

## Play Space and Equipment for Infants

Our center provides infants with a safe and engaging physical environment that encourages movement and exploration. We provide safe, sufficient, and developmentally appropriate equipment for infants, such as rattles, balls, and simple cause and effect toys. Staff members regularly inspect infant equipment and play areas to ensure they are safe. Staff members always supervise infants in their play environments.

## Standards-Based Physical Education

Our center provides standards-based physical education for children at least once per week, using national or state standards and guidelines**.** Physical education complements health education. It reinforces the knowledge and self-management skills needed to maintain a physically active lifestyle and to reduce time spent on sedentary activities, such as watching television and playing video games. Children with disabilities have appropriate physical education opportunities and participate with nondisabled peers.

## Connecting with Planned Learning Experiences

Our center incorporates opportunities for physical activity and active play into planned learning experiences outside physical education, such as language and literacy development, mathematics, science, and music. Teachers provide short physical activity breaks between learning activities, as appropriate. Physical activity is integrated into daily routines whenever possible, such as transition time. As age appropriate, physical activity is used as reinforcement, reward, and celebration for group achievement.

*<Alternate language for afterschool programs: Our center integrates physical activity throughout the learning environment. We incorporate opportunities for physical activity and active play into planned learning experiences, when appropriate, to reinforce and support health messages. Teachers provide short physical activity breaks between learning activities, as appropriate. Physical activity is used as reinforcement, reward, and celebration for group achievement.>*

## Screen Time

In accordance with the American Academy of Pediatrics’ recommendations, our center does not permit screen time (e.g., television, movies, video games, and computers) for infants and children younger than 2. For children ages 2 and older, screen time is limited to less than one hour per day and consists only of quality educational activities that are connected to learning goals and standards or programs that actively engage child movement. We do not allow screen time during meals or snacks.

## Physical Activity and Punishment

Staff members do not withhold opportunities for physical activity (e.g., not being permitted to play with the rest of the class or being kept from play time), except when a child’s behavior is dangerous to themselves or others. Staff members never use physical activity or exercise as punishment, e.g., doing push-ups or running laps. Play time or other opportunities for physical activity are never withheld to enforce the completion of learning activities or academic work. Our center uses appropriate alternate strategies as consequences for negative or undesirable behaviors. *<Optional Additional Information: The program may choose to provide specific information on the strategies used or refer families to other program policies that address this information.>*

# Communication and Promotion

## Health Advisory Team

Our center maintains a health advisory team for the planning, operation, and evaluation of the program’s health services component, including nutrition and physical activity. Membership includes parents, governing board members, program administrators, teachers, staff members, food service personnel, program consultants, community members, and other individuals as appropriate to local needs. *<Modify this list to include members specific to your local healthy advisory team.>*

## Consistent Health Messages

Our center actively promotes positive, motivating verbal and nonverbal messages about healthy eating and physical activity throughout the child care environment. All staff members help reinforce these positive messages. To be consistent with healthy eating messages, all foods and beverages available on site meet the CCCNS, including foods used for planning learning experiences and foods brought from home. Staff members do not use practices that contradict messages to promote and enjoy physical activity, such as withholding play time or using physical activity as punishment.

## Promoting Healthy Foods

Our center promotes healthy food choices that meet the CACFP requirements, the Dietary Guidelines for Americans and the CCCNS. We do not allow advertising or messages that promote less nutritious food and beverage choices. Food promotions and messages are consistent with nutrition education and health promotion. They emphasize nutrient-rich foods such as fruits, vegetables, whole grains, and low-fat dairy products.

## Family Involvement

Our center encourages family involvement to support and promote children’s healthy eating and physical activity habits. We communicate in ways that respect families’ cultures and customs. We provide information for families on nutrition and physical activity *<insert information on how information is provided, e.g., in our newsletter, on our website and at parent night events>.* Nutrition education is provided for parents at least twice a year *<insert number of times if different>*, and includes *<insert information on types of education provided, e.g., parent workshops, handouts, orientation to center’s nutrition and physical activity policies>*.

Our center supports families’ efforts to provide a healthy diet and daily physical activity for their children. We encourage parents to take an active role in this process by regularly communicating any concerns about their child’s eating or physical activity habits. We also encourage parents to contact us with any questions or suggestions about our nutrition and physical activity practices. *<Optional Additional Information: The program may choose to provide specific information on how parents should communicate concerns or suggestions about their children’s nutrition and physical activity. For example: Contact your child’s teacher with any questions or concerns. If the issue cannot be resolved, contact the site manager. If the issue cannot be resolved with the site manager, contact the center director.>*

*<Additional guidance for programs that conduct nutrition assessments, e.g., Head Start: Our center works with families to conduct a nutrition assessment of each child. We regularly assess children’s height and weight, and nutrition concerns. Families are informed of each child’s nutritional status and nutrition counseling is available upon request. Our program provides referrals for families of children with special nutrition concerns.>*

## Partnering with Community Organizations

Our center partners with the community to provide consistent health messages and support activities that promote healthy eating and physical activity. *<Optional Additional Information: The program may choose to provide specific examples of these partnerships and how families can get involved, e.g., a website or phone contact.>*

# Evaluation

## Monitoring

Our center has a plan for evaluating our nutrition and physical activity policies and practices. This plan addresses how policy impact will be evaluated, including changes to staff members’ practices and children’s behavior. The *<insert title of person responsible for ensuring policy compliance, e.g., health advisory team, center director, program administrator>* is responsible for ensuring policy compliance. *<Optional Additional Information: The program may choose to provide specific information on what local evaluation measures are used and how families can access this information.>*

*<Additional language for facilities with multiple sites: The (insert name of designated individual, e.g., center director, program administrator) at each of our sites ensures compliance with our policies and reports on the site’s compliance to the (insert title of person responsible for ensuring policy compliance, e.g., health advisory team, center director or program administrator)>.*

## Policy Review

We review our current nutrition and physical activity policies annually. Revisions are made as needed based on local evaluation data, national and state standards, regulations, and research on health trends and effective programs. We inform families when any changes are made to our nutrition and physical activity policies.

We develop work plans to facilitate policy implementation. We regularly review policy compliance, assess progress, and determine areas in need of improvement. We observe program practices at least every six months to ensure they are consistent with our policies.

**Nondiscrimination Statement for CACFP Child Care Programs**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant’s name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail: U.S. Department of Agriculture  
   Office of the Assistant Secretary for Civil Rights  
   1400 Independence Avenue, SW  
   Washington, D.C. 20250-9410; or
2. fax: (833) 256-1665 or (202) 690-7442; or
3. email:[program.intake@usda.gov](mailto:program.intake@usda.gov)

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