



User Guide for the Licensing Toolkit Action Sheets

NRC Goals for Licensing Toolkits to Promote Healthy Weight:

- To develop tools and products to support states' child care licensing personnel and child care providers in ensuring environments that promote healthy weight by focusing on high-impact standards of best practice
- To facilitate conversations among licensors, child care and early education providers, legislators, health professionals, and families

Administrators of State Licensing programs have numerous responsibilities. Developing and revising state licensing requirements is among the most important. In areas where new findings are rapidly accruing, it is difficult to be aware of all the research and information that may influence licensing requirements. This Licensing Toolkit is intended to assist Licensing Administrators as they develop and revise licensing requirements addressing guidelines for the prevention of childhood obesity.¹

The Toolkit consists of three components:

- 1) Licensing Agencies' Action Sheet
- 2) Child Care Provider's Action Sheet
- 3) Legislator's Action Sheet

Here you will find suggested uses for each of the three Action Sheets. The NRC encourages you to find other uses for the Toolkit. Please let us know how you use them. You can email us at info@nrckids.org. We will share your ideas with others in the professional licensing community.

¹ The NRC acknowledges the expert contributions of the NRC Licensing Advisory Panelists who worked with us to create the Toolkit concept and format: Judy Collins, Melissa Courts, Ann Ditty, Becky Fleming-Siebenaler, Pauline Koch, Ann Ryan, and Jackie Wood. Special thanks are extended to Judy Collins who also co-facilitated focus groups with licensing and health professionals to acquire feedback on the toolkit and who led preparation of the Guide for Using the Licensing Toolkit Action Sheets.

Toolkit Action Sheets may be used in several ways to:

Licensing Agencies' Action Sheet

- Provide guidance to Licensing Administrators who wish to strengthen obesity prevention regulations;
- Gain agency support by sharing with policy and management personnel;
- Provide up-to-date research and best practices to support licensing work groups;
- Facilitate wording of regulations by providing sample language for regulations;
- Guide policy with other agencies (such as departments of health and education);
- Provide background information to assist preparation of press releases to support regulations;
- Inform grant proposals;
- Inform quality improvement programs (such as Quality Rating Improvement Systems);

Child Care Provider's Action Sheet

- Offer technical assistance to providers during monitoring visits to
 - inform of new nutrition regulations,
 - review menus,
 - suggest tips for involving families in prevention of childhood obesity,
 - support providers who do not participate in a subsidized food program;
- Serve as a/n
 - training tool for current providers of care and orientation of potential providers,
 - training tool used by child care health consultants and child care resource and referral agencies,
 - refresher in periodic mailings to providers,
 - resource for curriculum development,
 - newsletter item or handout for families,
 - exhibit at professional meetings and conferences (such as NAEYC, provider organizations);

Legislator's Action Sheet

- Inform legislators and their staff of the importance of regulations or revisions that include stronger guidelines for prevention of childhood obesity;
- Inform legislative committees addressing child care and early education;
- Inform child advocacy groups.

Licensing Agencies' Action Sheet

Avoid or Limit Foods High in Sugar in Child Care

Introduction

This action sheet provides specific information to regulators who wish to strengthen regulations for child care in order to assure that children in out-of-home care receive meals and snacks that limit or do not include foods high in sugar content. It will assist agencies to promote the understanding that obesity can be prevented by the development and implementation of best practices and policies that instill healthy behavior and healthy lifestyle choices in our youngest children (1).



Obesity among children is on the rise in the United States and is one of the leading health issues for children. With this premise in mind, the information contained in this action sheet is intended to assist state agencies in their efforts to develop regulations that support safe and healthy environments for children — specifically related to assessing and planning for healthy nutrition for children.

One of the basic responsibilities of regulatory agencies is to develop regulations that provide for the overall health and safety of children while they are in the care of persons other than their parents. Such guidelines include those that protect children's physical, emotional, social, developmental, and nutritional health.

The Centers for Disease Control and Prevention journal, *Preventing Chronic Disease*, released a study which looked at state child care licensing regulations and their possible use as tools for obesity prevention. This study observes that almost $\frac{3}{4}$ of preschool-aged children are in non-parental child care arrangements each week. This suggests that strengthening child care regulations related to health and nutrition, could have a broad, positive impact on promoting obesity prevention among young children.

This action sheet provides specific guidance for states to consider when examining the issue of nutritional guidelines within their regulatory documents so requirements can attempt to prevent obesity by requiring meals and snacks that avoid concentrated sweets such as candy, sodas, sweetened drinks, fruit drinks, and flavored milk.

Why Is This Important?

Early dietary experiences are the foundation for the formation of attitudes about food, eating behavior, and ultimately food habits. Sound food habits build on eating and enjoying a variety of healthy foods.

Because children grow and develop more rapidly during the first few years of life than at any other time, children must be provided food that is nutritionally sound and aids in the growth process. Current research shows that early childhood settings, including child care environments, affect the lives of millions of U.S. children. Because children spend a significant portion of their day in child care, early childhood providers, like parents, can model healthy lifestyles and teach children how to make healthy choices.

Within their child care regulations, states have the opportunity to provide basic guidelines for sound nutrition practices with the reward of preventing obesity in children.

What Should Your Regulations Include?

- Most states have a regulation covering nutritional requirements for licensed child care. Existing regulations may often contain language similar to the wording below:
 - “meals and snacks should contain at least the minimum amount of foods shown in the meal and snack patterns for children in the Child and Adult Care Food Program (CACFP) guidelines: www.fns.usda.gov/cnd/ProgramBasics/Meals/Meal_Patterns.”
- Sample language for regulations to address nutritional requirements (including avoidance of sugar) could use the following regulatory language:
 - The facility shall ensure that nutritious and age appropriate meals and snacks meeting nutritional requirements are served in accordance with the current USDA/Child and Adult Care Food Program (CACFP) meal pattern requirements or the USDA Nutritional Guidelines.

continued

Licensing Agencies' Action Sheet

Avoid or Limit Foods High in Sugar in Child Care continued



- All items for meals and snacks should avoid or limit items that contain high sugar content (i.e. candy, sodas, sweetened drinks, fruit drinks and flavored milk).
- Children in care should be provided nutritious foods to meet the caloric needs of the individual child for meals and snacks with items that are low in sugar.
- Nothing in this section shall prohibit the occasional serving of foods with higher sugar amounts in connection with a single event or celebration.
- The facility shall have a written nutrition policy which describes the following:
 1. A description of all food services provided;
 2. Times of snacks and meals;
 3. Procedures related to food allergies, religious dietary requirements and other special needs;
 4. Nutritional information and regulation concerning the content of meals and snacks to be provided;
 5. The written nutrition policy shall be provided to all parents/guardians at the time of enrollment; and
 6. The facility shall ensure that children are receiving nourishing foods that are limited in sugars, concentrated sweets such as candy, sweetened drinks, fruit drinks (less than 100% real juice) and flavored milk.

How Can You Promote Understanding?

Interpretative Guidelines can be provided that outline the following:

- Review of policies and procedures concerning meals and meal planning
- Review of current and past menus — does the facility have a nutrition specialist that reviews the menus
- Does review of above policies/procedures/menus find the following
 - facility offers low fat or fat free milk for healthy children two and older
 - facility offers no sugar-sweetened beverages (including flavored milk)
 - facility offers only 100% fruit juice; one 4-6 oz serving per day
 - facility makes water freely available? Is water offered with meals
 - facility offers at least one fruit or vegetable at lunch time
 - facility offers fruits and vegetables at snack time
 - facility offers snacks that are high in fiber, nutrient dense with no sugar

Reference

1. American Academy of Pediatrics, American Public Health Association, and National Resource Center for Health and Safety in Child Care and Early Education. 2010. *Preventing childhood obesity in early care and education: Selected standards from "Caring for our children: National health and safety performance standards; Guidelines for early care and education programs, 3rd edition"*. http://nrckids.org/CFOC3/PDFVersion/preventing_obesity.pdf.

Resources

Altarum Institute. 2010. Challenges and opportunities related to implementation of child care nutrition and physical activity policies in Delaware. <http://www.altarum.org/publications-resources-health-systems-research/CHOMP-Delaware-Focus-Group-Report>.

Benjamin, S. E., A. Craddock, E. M. Walker, M. Slining, and M. W. Gillman. 2008. Obesity prevention in child care: A review of U.S. state regulations. *BMC Public Health* 8:188. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2438347/pdf/1471-2458-8-188.pdf>.

Benjamin, S. E., M. W. Gillman, A. E. Traub, and J. Finkelstein. 2009. *Preventing childhood obesity in the child care setting: Evaluating state regulations*. Boston, MA: Harvard Medical School and Harvard Pilgrim Health Care. <http://cfm.mc.duke.edu/childcare>.

Kaphingst, K. M. and M. Story. 2009. Child care as an untapped setting for obesity prevention: State child care licensing regulations related to nutrition, physical activity, and media use for preschool-aged children in the United States. *Prev Chronic Dis* 6(1). http://www.cdc.gov/pcd/issues/2009/jan/07_0240.htm.

Robert Wood Johnson Foundation. 2010. 30 facts for childhood obesity awareness month, September 2010. http://www.reversechildhoodobesity.org/sites/default/files/files-wfm/RWJF_factsheet5_press.pdf.

Child Care Provider's Action Sheet

How to Avoid or Limit Foods High in Sugar

Introduction

This action sheet provides specific information for child care providers who wish to give meals and snacks to the children in their care that avoid or limit foods high in sugar content. It will help you to prevent obesity, using policies and procedures that instill healthy behavior and healthy lifestyle choices in young children (1).

Providing for the overall care, health, and safety of children who are away from their parents in out-of-home care settings is one of the basic responsibilities of child care professionals. This includes protecting children's physical, emotional, social, developmental, and nutritional health.



This action sheet is intended to assist you in the development of daily practices that produce healthy nutrition for children. It specifically focuses on ways to reduce children's consumption of concentrated sugars such as candy, sweetened drinks, fruit nectars and flavored milk.

Did You Know?

- Obesity among preschool children has more than doubled in the United States over the last 30 years and has become a leading health issue. The foods served to children in child care and the eating habits that staff members model can have a significant impact on childhood obesity and a healthy lifestyle.
- Children in your care could be at risk of becoming overweight or obese. This can lead to lifelong health problems, including heart disease, diabetes, asthma, sleep apnea, tooth decay, discrimination based on weight, low self esteem, and adult obesity.
- You can help fight childhood obesity by decreasing or eliminating children's consumption of concentrated sugars. These provide calories with little to no nutritional value and reduce children's appetite for healthy foods.
- 100% juice is high in sugar and provides fewer nutritional benefits than fresh fruit. Therefore it is recommended children consume no more than 4-6 oz. of 100% juice a day.
- Replacing sweetened drinks with water is an inexpensive and easy way to help children's health, as well as your budget.

What Can You Do?

- Serve clean drinking water throughout the day, having it available to children, over age of one, indoors and out, during meals and when children are thirsty (1).
- Serve foods low in sugar. Avoid foods with added sugars. Pay attention to labels which may disguise added sugars as high fructose corn syrup, corn sweetener, dextrose or sucrose.
- Serve only 100% juice, water or low fat non-flavored milk to healthy children over the age of one. Do not serve juice to children under the age of one (1).
- Limit 100% juice to one 4 to 6 oz. serving a day for children, age 1 to 6, given only during meals or snacks (1).
- Serve fresh fruits instead of juice. Make it fun. Have children help in preparation. Guess the 'mystery' fruit, sing songs and create drawings of their own mystery fruit.
- Stock the children's space with books that encourage healthy eating. Provide opportunities that encourage eating healthy foods. Involve children in food preparation where possible.
- Encourage staff to model drinking water and eating foods/drinks low in sugar.
- Enlist those who prepare/select food to be leaders for children's healthy eating. Provide them with information/training on childhood obesity.

continued

Child Care Provider's Action Sheet

How to Avoid or Limit Foods High in Sugar continued

- Contact a child care health consultant, dietitian, local chef or parent with a background in health or nutrition, to help you identify ways to promote healthy eating in your program.
- Give staff and parents suggestions for "alternate" party food, such as "Make-it yourself pizza" with healthy toppings, a birthday trip to an orchard with apple snacks, etc.



How Can You Partner with Your Children's Families?

- Share information about childhood obesity/being overweight and its impact on children's health. Provide tip sheets on the impact of sugar sweetened foods/beverages and how families can help make the change to healthier beverages and foods.
- Share what you are doing to increase water and fruit consumption, limit 100% juice and eliminate concentrated sugars. Discuss how your motivation is children's health, not a budget concern.
- Ask for your parents' support in
 - Replacing sugar sweetened drinks in children's lunches with water or low fat non-flavored milk (skim or 1% milk for children age two and older).
 - Providing healthier options (fresh fruit, pizza toppings, etc.) for special occasions instead of sugar sweetened foods.
 - Modeling water consumption at home.
- Discuss with parents the impact of sugar sweetened drinks and foods on children's health. Ask parents with backgrounds in health/ nutrition, if they would help develop tip sheets for other parents and staff. Encourage them to talk with their children about the importance of water and fresh fruits.

Reference

(1) American Academy of Pediatrics, American Public Health Association, and National Resource Center for Health and Safety in Child Care and Early Education. 2010. *Preventing childhood obesity in early care and education: Selected standards from "Caring for our children: National health and safety performance standards; Guidelines for early care and education programs, 3rd edition"*. http://nrckids.org/CFQC3/PDFVersion/preventing_obesity.pdf

Resources

American Academy of Pediatrics

American Academy of Pediatrics Committee on Nutrition 2001. *The use and misuse of fruit juice in pediatrics. Pediatrics, 107: 12/10-13.*
<http://aappolicy.aappublications.org/cgi/reprint/pediatrics:107/5/1210.pdf>

Government Resources

Action Guide for Child Care Nutrition and Physical Activity Policies: Best Practices for Creating a Healthy Child Care Environment, Connecticut State Department of Education
http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/CCAG_ActionGuide.pdf

The Nemours Foundation

Fact Sheet for Parents: Grow Up Healthy, <http://www.nemours.org/content/dam/nemours/www/filebox/service/preventive/nhps/resource/fivetwoone/parentan.pdf> (specifically addresses sugary beverages)

Legislator's Action Sheet

Avoid or Limit Foods High in Sugar in Child Care

Introduction

This action sheet provides specific information for legislators who wish to understand and support research-based child care regulations that address healthy nutrition, especially a rule requiring that children in care are offered meals and snacks that avoid or limit foods high in sugar content. It will help legislators to support the prevention of obesity through the development of best practices and policies to instill healthy behavior and healthy lifestyle choices in our youngest children (1).



Protecting the health and safety of young children who are away from their parents in out-of-home care settings is one of the basic responsibilities of the State Legislature. The Legislature grants permission to operate a child care facility to individuals and organizations that meet your State's licensing regulations. These are established as the basic foundation of care to protect children's physical, emotional, social, developmental, and nutritional health.

Recent research confirms that obesity among children is on the rise in the United States and is one of the leading health issues. In the past 30 years, obesity among 2-5 year old children has more than doubled. "Currently one in four preschool children is overweight or obese" (2).

Did You Know?

- "The onset of obesity in the first years of life is a strong predictor of continued obesity into adulthood, largely because eating habits are formed during the early years" (2).
- Addressing this issue during infancy through the preschool years is an opportune time to develop healthy eating habits to help prevent later obesity (3).
- Since a large percentage of children under the age of 5 years are in some form of child care, child care centers and family child care homes provide the perfect setting to support and facilitate healthful eating in young children (3).
- "Eight in ten American voters believe childhood obesity is a serious problem" (4).

What Should the Regulation Say?

- Nutrition regulations in child care programs generally follow minimum national standards provided by *Caring for Our Children (CFOC)* and the United States Department of Agriculture and/or Child and Adult Care Food Program (CACFP).
- New research tells us that we need to make nutrition regulations stronger to attack the obesity problem in early childhood. One critical requirement to be added is
 - Children shall be offered items of food that avoid or limit "concentrated sweets such as candy, sodas, sweetened drinks, fruit nectars and flavored milk."

Why Is This Important?

Current obesity prevention research clearly outlines the problem and offers recommendations to fight the obesity crisis.

continued

Legislator's Action Sheet

Avoid or Limit Foods High in Sugar in Child Care continued

- Research that reviewed current state licensing regulations provides broad evidence of the importance of strengthening regulations related to health and nutrition to promote obesity prevention in child care.
- According to Sara Benjamin, "Most states had (have) few regulations related to obesity for child care centers and family child care homes . . ." "No state had all 10 (model) healthy regulations" "including those in the area of nutrition." "7 states (14%) restricted sugar sweetened beverages in both child care centers and family child care homes" (5).
- Obesity prevention initiatives by the Nemours Foundation provide examples of how to implement the new nutrition guidelines successfully in licensing regulations and in child care programs.
- Delaware's comprehensive regulations on health and nutrition as well as those in several other states, e.g., Georgia and Nevada, provide model language and approach for other states to follow.
- These regulations and alternative food choices are not costly to implement:
 - Serving clean drinking water throughout the day whenever children are thirsty is important for good health.
 - Limiting the amount of 100% fruit juice to 4-6 oz. daily will actually reduce food costs.
 - Replacing all sugar-sweetened drinks with water, 100% juice and non-flavored low-fat milk as acceptable alternatives.
- 56% of voters believe that combating childhood obesity is worth any financial investment (4).



What Can You Do?

- Work with your state licensing agency and the early childhood system to provide support and resources to strengthen licensing regulations and their enforcement in licensed programs.
- Educate your colleagues, the business community, and the general public on the benefits of implementation of this regulation to avoid products with high sugar content:
- Work to decrease obesity and the high medical costs of treating obesity and related illnesses, e.g., diabetes, heart disease, sleep apnea and other illnesses exacerbated by obesity.
- Be guided by the fact that broad sweeping changes in state policy will play a primary role in child obesity prevention (3).

References

1. American Academy of Pediatrics, American Public Health Association, and National Resource Center for Health and Safety in Child Care and Early Education. 2010. *Preventing childhood obesity in early care and education: Selected Standards from "Caring for our children: National health and safety performance standards: Guidelines for early care and education programs, 3rd edition"*. http://nrckids.org/CFOC3/PDFVersion/preventing_obesity.pdf.

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4. Robert Wood Johnson Foundation. 2010. 30 facts for childhood obesity awareness month, September 2010. http://www.reversechildhoodobesity.org/sites/default/files/files-wfm/RWJF_factsheet5_press.pdf.

5. Benjamin, S. E., A. Craddock, E. M. Walker, M. Slining, and M. W. Gillman. 2008. Obesity prevention in child care: A review of U.S. state regulations. *BMC Public Health* 8:188. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2438347/pdf/1471-2458-8-188.pdf>.

Resource

Kaphingst, K. M. and M. Story. 2009. Child care as an untapped setting for obesity prevention: state child care licensing regulations related to nutrition, physical activity, and media use for preschool-aged children in the United States. *Prev Chronic Dis* 6(1). http://www.cdc.gov/pcd/issues/2009/jan/07_0240.htm.