BOTTLE SAFETY AND PREPARATION POLICY

As young children (particularly those under 12 months) are still developing their immune system, they are more susceptible to food borne illnesses and infection. This therefore makes it imperative that education and care services implement and maintain the highest level of hygiene practices. Our Service will ensure that safe practices are consistently maintained for handling, storing, preparing and heating breast milk and formula, and sterilising bottles and teats.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY					
2.1	Health	Each child's health and physical activity is supported and promoted			
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.			
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.			
2.2	Safety	Each child is protected.			
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.			

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS			
77	Health, hygiene and safe food practices		
78	Food and beverages		
168	Education and care services must have policies and procedures		
170	Policies and Procedures to be followed		
171	Policies and procedures to be kept available		
172	Notification of change to policies or procedures		

RELATED POLICIES

Breastfeeding Policy	Nutrition and Food Safety Policy
Health and Safety Policy	Work, Health and Safety Policy



PURPOSE

To ensure our Service maintains a safe and hygienic environment for all infants and toddlers requiring a bottle, educators will sterilise and prepare bottles safely and hygienically in accordance with recognised guidelines and best practice. All educators preparing and/or handling bottles will have undergone training in safe food handling.

SCOPE

This policy applies to educators, families, staff, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

IMPLEMENTATION

During their first year of life, babies are at their most vulnerable to viruses, bacteria, and parasitic infections, due to their immune system not yet being fully developed. Unsafe or careless food handling practices can therefore lead to anything from a mild attack of thrush to a more serious condition of gastroenteritis, all of which are similar to food poisoning and can cause vomiting and diarrhoea, and subsequent dehydration.

To ensure that bottles are consistently prepared in a safe and hygienic manner educators will adhere to Service procedures at all times.

Management will ensure:

- that the Nominated Supervisor and educators are aware of the procedures for sterilising bottles and teats, and preparing, heating and storing bottles of formula and breast milk
- procedures for the safe sterilisation of bottles and teats are strictly adhered to
- procedures for the safe storage and heating of food provided in bottles are strictly adhered to
- infants over 6 months of age are given small amounts of cooled boiled water in addition to breastmilk or formula as required
- infants are given only breast milk, formula, or cooled boiled water: They are not given fruit juice in their bottle due to the increase risk of tooth decay.

A Nominated Supervisor/ Responsible Person will:

- ensure that educators adhere to the procedures for sterilising bottles and teats, and preparing,
 heating, and storing bottles of formula and breast milk
- adhere to the procedure for the safe storage and heating of food provided in bottles



- provide infants over 6 months of age with small amounts of cooled boiled water in addition to breast milk or formula as required
- ensure infants are not given fruit juice in their bottle due to the increase risk of tooth decay
- ensure families are familiar with their responsibilities in accordance with this policy.

Educators will:

- implement safe food handling practices
- wash hands thoroughly and wear gloves when preparing bottles
- store all bottles in an appropriate area for food preparation that complies with the food safety standards for kitchens and food preparation areas
- adhere to the procedure for the safe storage and heating of food provided in bottles
- provide infants over 6 months of age with small amounts of cooled boiled water in addition to breast milk or formula
- not give infants fruit juice in their bottle due to risk of tooth decay
- adhere to each child's feeding routine
- ensure families are familiar with their responsibilities in accordance with this policy
- document the amount of milk each infant consumed including the time of feeds
- communicate regularly with families about infant and children's feeding patterns and routines

Families will:

- be informed during orientation that children's bottles must be clearly labelled with the child's name
- label bottles containing breast milk or formula with the date of preparation or date of expression
- attempt to bring enough sterilised bottles each day to meet their child's requirements
- supply breast milk in multiple small quantities to prevent wastage
- keep formula powder at the service so that the formula can be prepared as required. (Formula must be in its original tin and must be clearly labelled with the child's name.)
- provide a labelled bottle(s) for use at the service for children having regular cow's milk in their bottles
- be encouraged to communicate regularly with educators about children's bottle and feeding requirements
- not put fruit juice in children's bottles.

STERILISING BOTTLES, TEATS, AND DUMMIES

After sterilising any item for infants, it is important to remember not to touch any part that will go into



the baby's mouth with your hands. Generally, all sterilising systems come with tongs for this purpose, which must also be sterilised with the items.

Always read and follow the manufacturer's instructions that come with the sterilising system and ensure that the recommended sterilising times are strictly adhered to.

Prior to using any sterilising system or device or removing items from a steriliser staff will wash their hands.

This is the single most effective way of preventing the spread of infection.

Steam Sterilising

Electric steam sterilising is based on hospital methods and is quick and efficient, taking eight to twelve minutes plus cooling time. Care must be taken that only equipment that is safe to boil is sterilised in this manner. For example, some parts of breast pumps cannot be boiled. Bottles, teats and other items must be placed upside down and must have sufficient room (not touching any other item) to ensure they are fully sterilised.

Microwave steamers take around five to eight minutes to work, plus cooling time. Note that metal utensils cannot be used in microwaves. Where possible leave the lid on the steriliser until it has cooled sufficiently to prevent steam burns. If using a microwave for sterilising, ensure that a purpose designed sterilisation container is being used.

Boiling

Most bottle-feeding equipment must be boiled for at least 10 minutes. Ensure the pot you use is large enough for all bottles to be completely submerged and use the pot exclusively for sterilising. Be aware that teats that are frequently boiled become sticky and may need to be replaced more frequently than if using other sterilisation methods.

Chemical Sterilising

Chemical sterilisation is achieved using cold water and a non-toxic liquid or tablet that is added to cold water to create a sterilising solution that is highly effective in killing bacteria. It is extremely safe to use and can be applied to the skin or even swallowed with no harmful effects. Educators need to check that there are no air bubbles left in the bottles to ensure complete sterilisation.



Always read the manufacturer's instructions to ensure the solution is mixed correctly and items are left in

the solution for the required amount of time: Generally, they are sterile after half an hour and can be safely left in the solution for up to 24 hours. The solution must be changed daily.

Avoid leaving sterilised empty bottles out on work surfaces as they will quickly lose their sterility. Ideally, sterilisers have built-in storage facilities and bottles can be removed when required.

Note: Dishwashers can be used to clean bottles and equipment, but these items must still be sterilised – the dishwasher does not sterilise.

Storing Sterilised Bottles

If not using sterilised bottles immediately, care needs to be taken to store them correctly to avoid them coming into contact with bacteria.

- Ensure your hands and the work bench are clean.
- Using sterile tongs, place the teat 'upside-down' in the bottle, and place the sterilised cap and lid on the bottle.
- Store bottles in a clean place away from dust.
- If not used within 24 hours sterilised bottles should be sterilised again before use.

PREPARING FORMULA

Before preparing formula

- Ensure your hands and the work bench are clean.
- Boil water and leave to cool for approximately 30 minutes. This will ensure that the water is not too hot (70°C is the best temperature to prepare formula as it will dissolve easily).

When preparing infant formula always closely follow the instructions on the tin. In general:

- always wash hands thoroughly prior to preparing formula
- do not compact the formula powder in the scoop, and always ensure the correct ratio of formula to water as specified on the tin: Too little formula powder may leave the infant hungry, whilst too much can cause constipation
- always use a sterilised knife to level the top of the scoop when measuring the formula powder
- without touching the teat shake the bottle well to mix the contents
- cool the made-up formula as quickly as possible: If using immediately run under cold tap water or place in a large bowl of cold water (with the lid on to avoid contaminating the teat)



• if not using immediately made-up formula should be cooled and stored in the fridge.

Heating bottles

- Heat bottles once only
- Do not allow a bottle to cool and then reheat as this can allow germs to grow.
- Stand the bottle in a container of hot water for no more than 15 minutes
- Before feeding the infant, check the temperature of the milk by letting a small drop fall on the inside of your wrist
- Do not microwave breast milk or bottles
- Do not refreeze thawed breast milk
- Discard any milk that has not been used

STORING BREASTMILK AND FORMULA

For safe storage of formula and breast milk, refrigerators must be kept at 5°C or below and should have a non-mercury thermometer to monitor the temperature.

- Formula or breast milk must be kept refrigerated or frozen if not being immediately consumed.
- Whenever possible, make up formula as it is needed. Formula should not be refrigerated for more than 24 hours.
- Any remaining formula should be thrown out if an infant does not finish a bottle: It should not be frozen or reheated.
- Prior to placing bottle in the fridge staff will check that it/they are labelled with the child's name and the date the bottle was prepared.

Breast milk can be stored in several ways, which include:

- 1. refrigerated for no more than 72 hours at 4°C or lower (4°C is the typical temperature of a standard fridge).
- 2. store breast milk on a shelf of the refrigerator, not in the door
- 3. frozen in a separate freezer section of a refrigerator for up to 3 months at a temperature of -18°C. If being frozen in a freezer compartment inside the refrigerator (as opposed to a freezer with a separate door), the breast milk should only be stored for 2 weeks.

Frozen breast milk can be thawed:

- 1. in the refrigerator and used within 24 hours.
- 2. standing the bottle in a container of lukewarm water and used straight away



Staying healthy: Preventing infectious diseases in early childhood education and care services- 5^{th} Edition

SOURCE

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REVIEW

POLICY REVIEWED BY	Cherie Graham	Childcare Director	01/04/2022
POLICY REVIEWED	APRIL 2022	NEXT REVIEW DATE	APRIL 2023
MODIFICATIONS	Minor editsAdditional regulatiSources checked		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
FEBRUARY 2021	policy reviewedminor editssources checked for currency		FEBRUARY 2022
FEBRUARY 2020	 Add section: Heating bottles Added section on record keeping for parents sources checked for currency Added references 		FEBRUARY 2021
FEBRUARY 2019	Combined with Steppolicy.	g statement and purpose. erilising bottles and teats toring sterilised bottles and	FEBRUARY 2020



	 Changed heading from Storing bottles to Storing breast milk and formula. Changed heading from Cold water sterilising to Chemical sterilising. Additional information added to points Sources checked for currency 	
FEBRUARY 2018	 Added the 'related policies' list Included statements regarding handling & storage to further support compliance 	FEBRUARY 2019
OCTOBER 2017	Updated the references to comply with the revised National Quality Standard	FEBRUARY 2018
FEBRUARY 2017	Minor terminology changes made.	FEBRUARY 2018

FORMULA BOTTLE PREPARATION PROCEDURE

- 1. Thoroughly wash hands and wear gloves when preparing bottles
- 2. All bottle preparation will be completed in the designated bottle and food preparation area
- 3. The bottle and food preparation area will always be clean and hygienic and will only ever be used for the purpose intended
- 4. All food and bottles will be kept totally separate from the nappy change and toileting areas
- 5. Prepare formula as per the instructions on the formula container and use the provided scoop for measurement, using cooled boiled water for infants under 12 months of age.
- 6. Once formula is made it must be used or kept in the refrigerator. Discard any leftover formula
- 7. Formula bottles will not be re-heated as this can allow germs to grow
- 8. Do not warm bottles in the microwave as microwave ovens distribute heat unevenly. Water in the milk can turn to steam that collects at the top of the bottle, and there is a danger that the infant could be scalded.
- Our Service will use bottle warmers that have a thermostat control to heat Infant Formula/Cow's Milk/Breast Milk
 - the Service will use the bottle warmer as per the manufacturer's instructions
 - educators will ensure that bottle warmers are inaccessible to children at all times



- bottles will be warmed for less than 10 minutes
- 10. Test the temperature of bottle contents by placing a few drops on the inside of the wrist before feeding the child
- 11. Supervise children with bottles at all times. Children will not be placed on beds or in cots for feeding as this can be a choking hazard.
- 12. Give bottles to children before going to bed to reduce the risk of tooth decay
- 13. Rinse all children's bottles thoroughly after use and leave to air dry before placing in child's bag
- 14. Communicate regularly with families about children's bottle and feeding requirements.
- 15. Communicate with families about the amount of milk taken by the child and any changes in feeding patterns or routines at the education and care Service.

BREAST MILK PREPARATION PROCEDURE

- 1. Breast milk that has been expressed should be brought to the Service in a clean sterile container labelled with the date of expression and the child's name.
- 2. We encourage families to transport milk to the Service in cooler bags; this should be immediately given to the educators, who will put it in the refrigerator.
- 3. We will refrigerate the milk at 4°C until it is required
- 4. Thoroughly wash hands and wear gloves when preparing bottles
- 5. All bottle preparation will be done in the designated bottle and food preparation area
- 6. The bottle and food preparation area will always be clean and hygienic and will only ever be used for the purpose intended
- 7. All food and bottles will be kept totally separate from the nappy change and toileting areas
- 8. Breast milk will be warmed and/or thawed by standing the container/bottle in a container of warm water
- 9. Shake the bottle before feeding the infant and check the temperature of the milk on the inside of the educator's wrist to ensure it is not too hot
- 10. If the Service does not have enough breast milk from the family to meet the child's needs that day, individual families will be consulted on what the Service should do in these circumstances
- 11. To avoid any possible confusion, we will not store unused milk at the Service



- 12. Unused milk will be returned to families at the end of the day when they come to collect their child
- 13. A quiet, private space with a comfortable chair will be provided for mothers/women to breastfeed or express milk. A sign will also be placed on the door when the mother/woman is using the facilities.

