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## **Ontario Child Care Settings Needs Assessment Report**

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**Date:** December 2022

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## ACKNOWLEDGEMENTS

This report was written by members of the Child Care Working Group (CCWG), a subgroup of the Ontario Dietitians in Public Health (ODPH). ODPH is the official voice of public health nutrition professionals in Ontario and represents Registered Dietitians working in the 36 public health units across the province. For more information, please visit our website at [www.odph.ca](http://www.odph.ca) or contact us by e-mail at: [info@odph.ca](mailto:info@odph.ca).

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## EXECUTIVE SUMMARY

Children spend a large part of their early years in child care settings and the majority of their food intake occurs in this setting. In Ontario, child care settings are mandated to follow the [Child Care and Early Years Act, 2014](#) (CCEYA) to create a supportive nutrition environment that promotes health and well-being of children.

To better understand the needs of child care settings across Ontario with regard to menu planning and supportive nutrition environment, the Ontario Dietitians in Public Health Child Care Working Group (ODPH CCWG) surveyed licensed child care settings to assess current practices, knowledge, and attitudes of operators and staff as it pertains to planning menus and creating supportive nutrition environments. Respondents were asked to identify perceived challenges and enablers, as well as supports that would aid in offering a healthier menu and improve the nutrition environment in their child care setting.

The survey revealed that the resources most used for menu planning and to create supportive nutrition environments by child care settings are Canada's Food Guide, followed by the ODPH Practical Guide. Enabling factors that supports healthy menu planning included satisfaction from seeing children enjoying healthy foods and snacks and positive feedback from the children and from parents. Respondents identified that budget, time and staff constraints when planning menus and preparing food as well as lack of opportunities for professional development related to menu planning as barriers to offering a healthier menu.

Respondents felt that it is important to offer healthy foods to children and that creating a healthy nutrition environment and planning a healthy menu is a priority for the management at their child care centre. Best practices for creating a supportive nutrition environment are being implemented in most child care settings. Respondents indicated that they treat children in a positive and respectful manner regardless of their body size, by allowing children to decide what and how much to eat and both staff and children eat the food offered by the centre. The most helpful supports to creating a supportive nutrition environment were the positive relationship between children and child care staff, family style meals and staff role modelling healthy eating behaviours. Barriers included a lack of opportunities for professional development, insufficient knowledge about supportive nutrition environments and staff beliefs and attitudes about food and nutrition.

Other key findings were related to nutrition policies. Most child care settings use nutrition policies related to procedures for allergies and special diets, requirements for food and beverages offered at meals and snacks, and procedures for food being brought into the centre.

It was indicated that public health could support child care settings to offer a healthier menu by providing sample menus, recipes and an online menu planning tool. Respondents identified healthy

eating curriculum to support staff education, training on how to create and maintain supportive nutrition environments and networking opportunities to foster a supportive nutrition environment.

Registered Dietitians (RDs) in public health units are ideal to fulfill the need for resources, supportive tools and providing education in child care settings. RDs have credible expertise and experience in child health nutrition. Over the years, public health RDs have established effective partnerships and are well positioned to provide ongoing nutrition support to provincial and local child care sectors to meet both public health and provincial mandates.

Based on the evidence gathered from this survey, the CCWG recommends the following to support child care settings to create healthier menus:

1. Update the ODPH Practical Guide and related tools with the new Canada's Food Guide recommendations.
2. Continue to work closely with local child care settings to offer more support, resources, tools and training to staff on a regular basis, based on their needs. Consider an online recipe bank, sample menus, plant-based or recipes without allergens.
3. Share results of this survey with the Ministry of Education, in order to enhance collaboration with ODPH CCWG in producing and disseminating tools and resources to the child care sector.
4. Work in collaboration with Ministry stakeholders to develop a budgetary framework for the child care sector.

To support child care settings in creating a supportive nutrition environment the CCWG recommends:

1. Advocating for Early Childhood Educator students to receive comprehensive training on how to create a supportive nutrition environment.
2. Encourage child care settings who currently have nutrition policies to broaden the scope of their policies to include regular staff training on the various components that contribute to a supportive nutrition environment. For those child care settings who do not have nutrition policies, provide assistance to the development of such policies
3. Provide a combination of virtual and in-person professional development opportunities for child care staff on a regular basis, along with tools and resources to increase staff members' knowledge and ability to apply best practice recommendations for creating and maintaining a supportive nutrition environment.

## INTRODUCTION

Children spend a large part of early childhood in some form of out-of-home child care. In 2019, Ontario's Ministry of Education reported there were 446 596 licensed spaces for children aged 0-12 years - an increase of 73% since 2009 (Ontario Ministry of Education, 2019). The type and quality of child care in the early years has been linked to healthy childhood development and school readiness.

Children who attend child care spend approximately 40% of their waking time there and up to a third of a child's food consumption occurs within this setting (Healthy Kids Panel, 2013). This provides an opportunity to make a positive impact on a child's eating habits and patterns. Child care staff and caregivers play a vital role in helping young children establish early healthy eating habits (Erinosho, Hales, McWilliams, Emunah, & Ward, 2012).

Ontario's legislation requires licensed child care operators to offer children meals and snacks that consist of a variety of foods as recommended in Canada's Food Guide. Hence, the child care setting is an ideal location for young children to learn about and develop healthy eating habits for life.

### Background

In 2014, the *Day Nurseries Act* was replaced by the [Child Care and Early Years Act, 2014](#) (CCEYA). In 2017, the Child Care Working Group (CCWG), at the request of the Ontario Ministry of Education, developed the [Menu Planning & Supportive Nutrition Environments in Child Care Settings - Practical Guide](#) (Practical Guide) and the [Menu and Nutrition Environment Self-Assessment Tool for Child Care Settings](#) (Menu Assessment Tool) to help child care providers meet the food and drink requirements in the CCEYA. These documents are now the foundation for nutrition-related health promotion initiatives being undertaken by public health dietitians who support child care providers across Ontario.

### Purpose

Currently, there is insufficient provincial data to determine menu planning and nutrition environment needs of child care settings across Ontario. To better understand this, the CCWG surveyed licensed child care settings across Ontario to assess current practices, knowledge, and attitudes of operators and staff as it pertains to creating supportive nutrition environments and planning menus to meet the CCEYA. Findings will be used to inform the development of public health interventions aimed at supporting licensed child care settings to develop healthy menus and create/maintain supportive nutrition environments.

This survey represents the first ever provincial-wide survey to understand child care menu planning and nutrition environment needs across Ontario. It is one component of a broader situational assessment which includes an internal literature and policy review and a survey of Ontario public health dietitians who support child care nutrition programming.

## Research Objectives

**Objective #1:** Identify and assess menu planning needs of Ontario licensed child care settings.

1. Assess current practices, knowledge, and attitudes as they pertain to menu planning that meets the CCEYA, 2014.
2. Identify perceived challenges to offering a healthier menu.
3. Identify perceived enablers to offering a healthier menu.
4. Identify desired supports that would help offer a healthier menu.

**Objective #2:** Identify and assess the needs of Ontario licensed child care settings to create or maintain supportive nutrition environments.

1. Assess current practices, knowledge, and attitudes as they pertain to creating supportive nutrition environments.
2. Identify perceived challenges to creating a supportive nutrition environment.
3. Identify perceived enablers to creating a supportive nutrition environment.
4. Identify desired supports that might help improve the nutrition environment.

## METHODOLOGY

### Survey Development and Pilot

The survey was developed by a sub-working group of CCWG members. Questions were designed to answer the research objectives and gather meaningful information to inform public health practice. Both multiple choice and open-ended questions were asked. The survey was first developed in English and later translated into French and reviewed by a bilingual dietitian to ensure accuracy.

The survey was piloted in both English and French to obtain feedback from licensed child care providers from jurisdictions across Ontario. In total, the survey was piloted by 11 individuals working in licensed child care settings. This included at least one person from each of the following categories:

- Early Childhood Educators;
- supervisors;
- home child care providers; and,
- cooks.

The aim of the pilot phase was to:

- determine if the survey questions accurately capture information that will guide decision making;
- determine appropriateness of questions to target population; and,
- explore potential technical issues that may negatively impact survey results.



Pilot participants were provided with a hard copy of the survey which included open-ended questions embedded in the survey. The results were reviewed and analyzed, and appropriate changes were made based on participant feedback. Once the questions were finalized, an online version was created in [Simple Survey](#) and was tested by members of the CCWG to ensure that the technical aspects of the survey worked properly. The survey was available to respondents through an anonymous link and available in English and French ([Appendix A: Needs Assessment Survey](#)).

## Study Population and Recruitment

Owners, operators, cooks, and Early Childhood Educators (ECE) employed by licensed child care settings in Ontario (centre- and home-based) were eligible to complete the survey. A convenience sample of licensed child care settings across Ontario was used, with the aim to include representation from all regions of Ontario.

An email was sent to child care partners by members of the CCWG, inviting them to complete the survey or to share the invitation within their local child care networks ([Appendix B: Introduction Email to Child Care Stakeholders](#)). The survey was available to licensed child care staff for four weeks, between January 27, 2020 and February 21, 2020. A reminder email was sent seven days after the survey was released.

Child care partner list:

- Ministry of Education public listing of Consolidated Municipal Service Managers (CMSMs) and District Social Services Administration Boards (DSSABs). Telephone calls were made to collect direct email addresses of service system managers from this public listing;
- Local/Regional Child Care Resource Centres;
- Ontario-based Professional Associations and Networks including:
  - Association of Daycare Operators in Ontario;
  - Ontario Association of Child and Youth Care (OACYC);
  - Ontario College of Registered Early Childhood Educators;
- ODPH membership contacts; and,
- Other relevant local child care sector stakeholders.

## Consent Process

At the start of the survey respondents were informed that their participation was voluntary, that they could choose not to answer any question, stop participating at any time, and that their decision to participate (or not to participate) would not affect their use of or access to public health programs or services. Respondents were also notified that once they submitted their responses, they would not be able to delete them. They were informed that their responses would be kept confidential and that they would not be identified in any reports written to summarize findings. Consent to participate was assumed when respondents partially or fully completed the survey.

Ethics approval was not obtained as no personal health information was not collected.

## **Data Management & Analysis**

A sub-group of the CCWG led the data management and analysis of survey responses. Survey data was extracted from Simple Survey and stored in a Microsoft Excel v16.0 document on the password-protected computers of the team members undertaking the analysis. Following analysis, the summarized data was stored on the ODPH CCWG Planning and Evaluation webpage restricted to the co-chairs and relevant members of the CCWG Planning and Evaluation team.

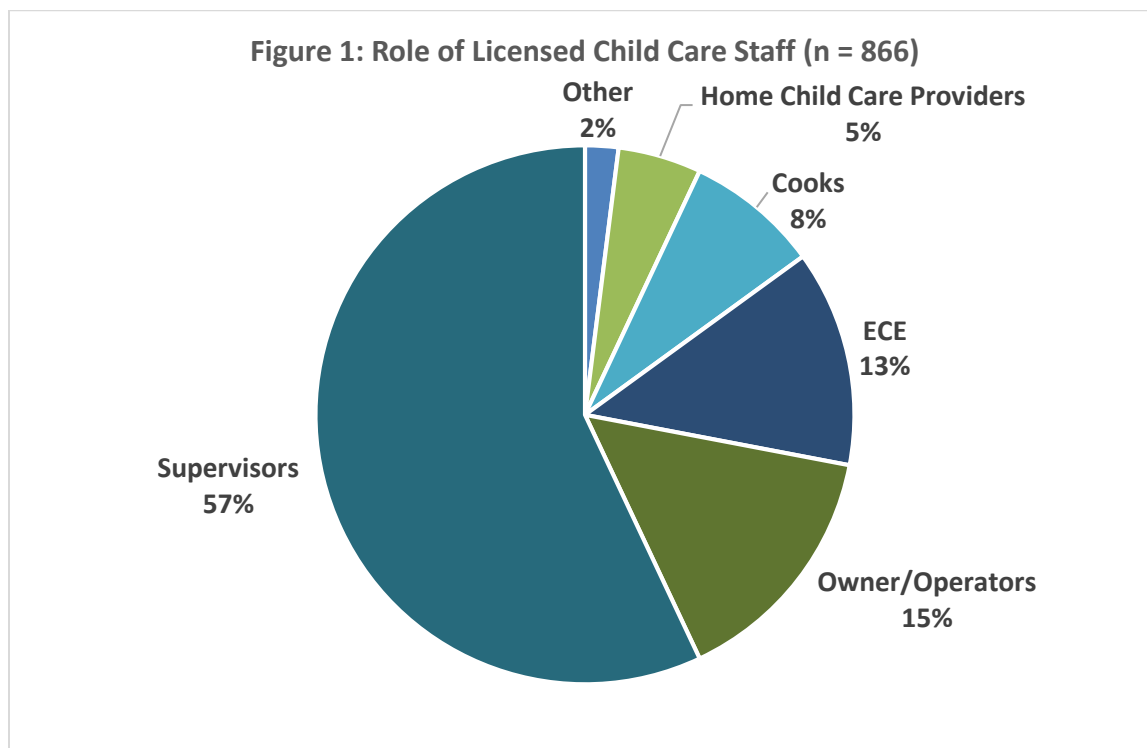
Survey data was analyzed using Microsoft Excel v16.0. Descriptive statistics were used to summarize quantitative survey data from multiple choice and Likert scale questions. Content from open ended survey questions were analyzed for common themes using Microsoft Excel v16.0.

## RESULTS

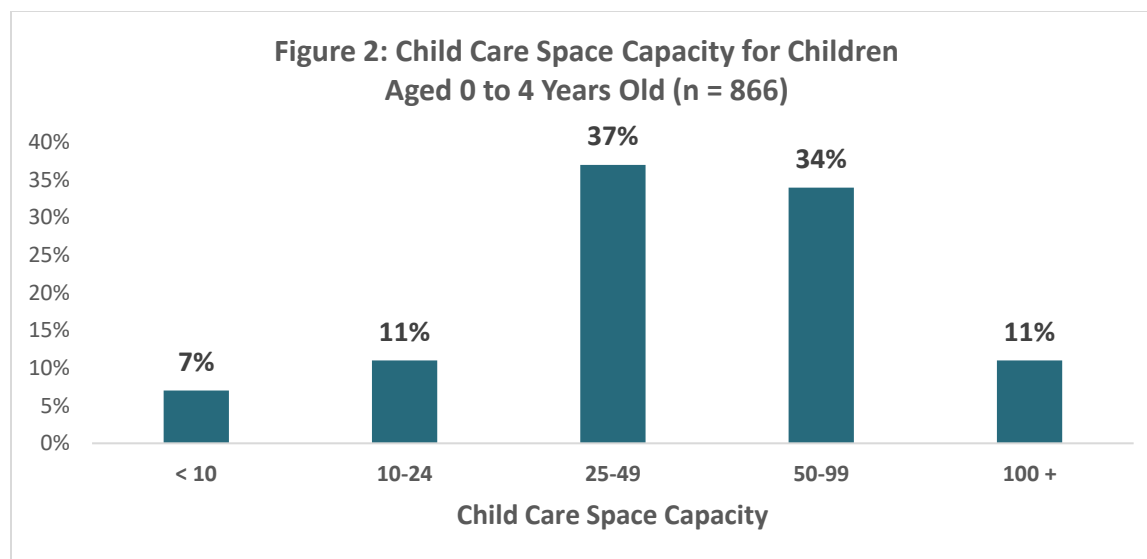
As of July 31, 2019, the Ontario Ministry of Education's Open Data catalog identified 3501 active, full-time programs in licensed child care settings and licensed home child care agencies in Ontario (Ontario Ministry of Education, 2019). The survey was completed by a total of 866 respondents.

### Respondent Profile

The child care survey was completed by various staff that work in licensed child care settings (Figure 1). The majority (57%) of respondents were supervisors followed by owners/operators (15%) and Early Childhood Educators (ECEs) (13%). Cooks and home child care providers were a smaller portion of respondents accounting for 8% and 5% of responses, respectively.



The majority of respondents worked at licensed child care settings that accommodated between 25-49 and 50-99 children (37% and 34%, respectively) (Figure 2). Only 11% had more than 100 spaces. Respondents came from across Ontario, with the majority coming from Central Ontario. Most settings were urban, accounting for 81% of respondents. Twelve respondents completed the survey in French.

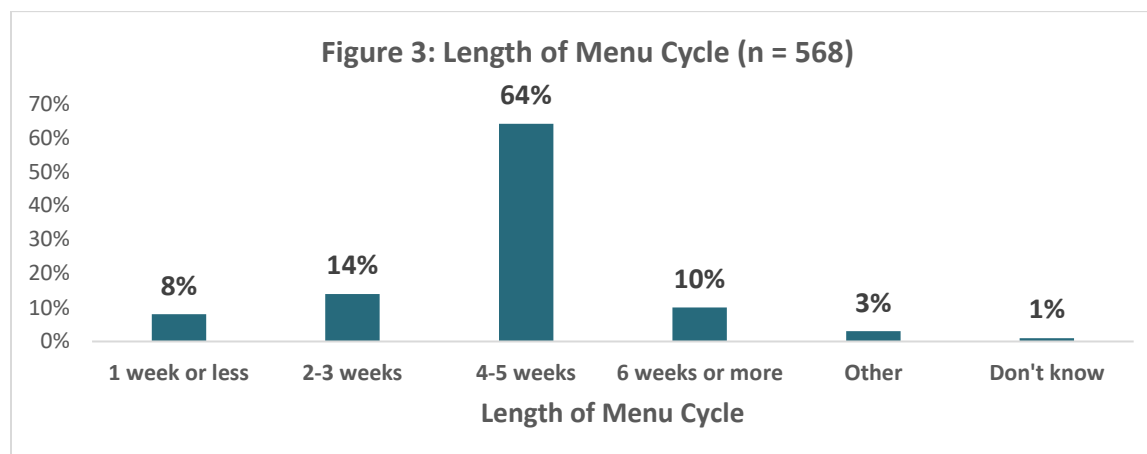


## Menu Planning Section

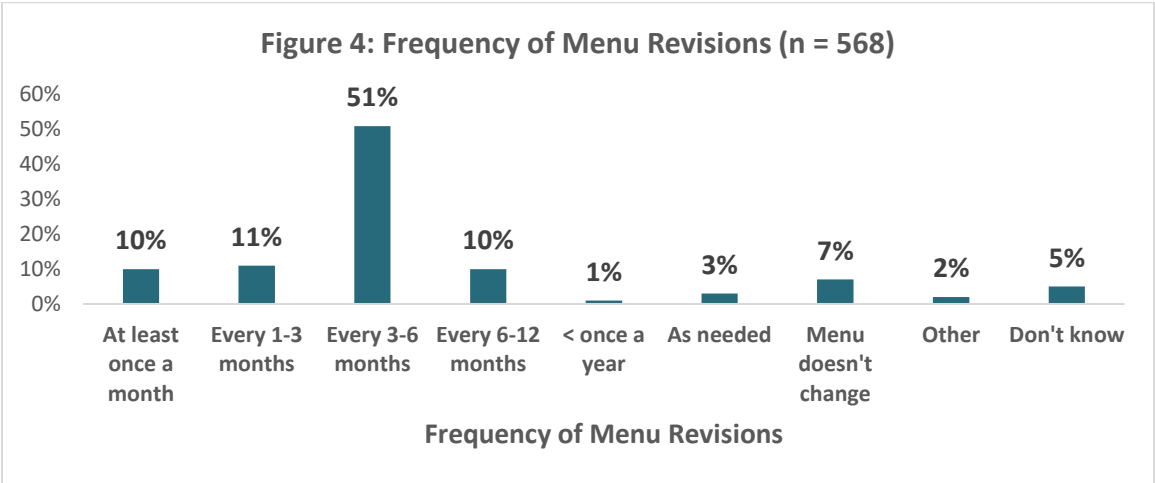
### Menu Cycles and Revision

The majority of child care settings that responded prepare food on-site (65%) with some opting to do both on-site food preparation and catering (10%). Twenty-three percent of respondents worked at centres that are completely catered. Two-thirds of respondents were responsible for planning and reviewing the menu at their centre as part of their role. Many respondents who reported being responsible for menu planning and reviewing were supervisors and owner-operators (38% and 13%, respectively). All home child care providers prepared and reviewed their own menus.

Most respondents (64%) said they had a 4-5-week menu cycle (Figure 3). Fourteen percent said they had a menu cycle of 2-3 weeks, and 1 in 10 said that their menus were 6 weeks or longer. Eight percent reported that their menu cycle was a week or less.

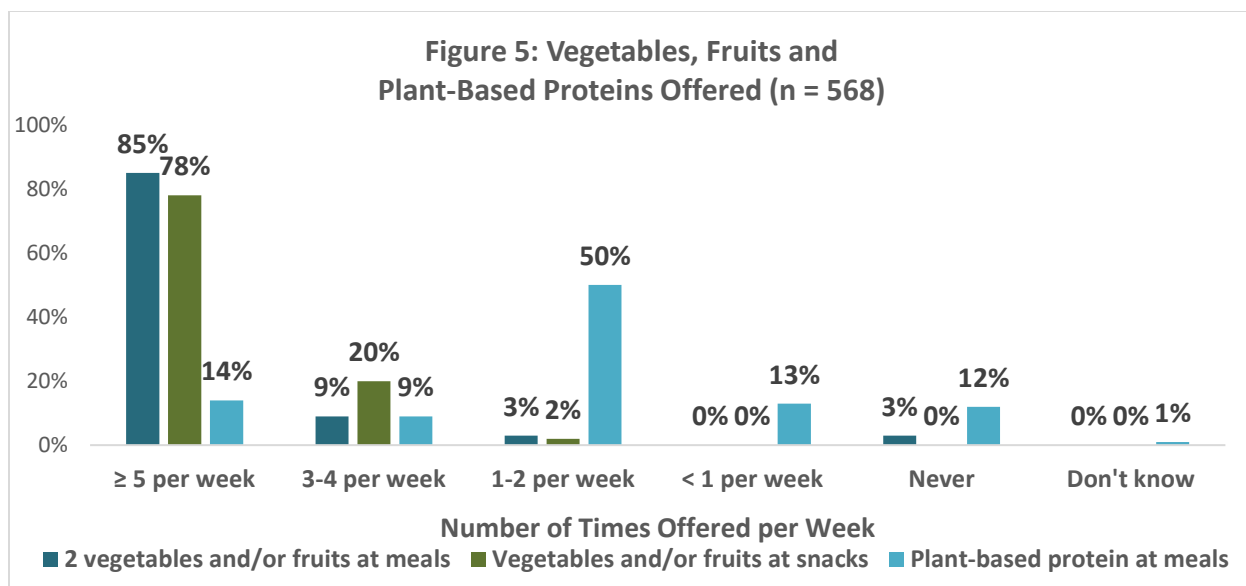


Sixty-five percent of the child care settings that responded to the survey were responsible for planning or reviewing their menus. Menus were revised on a regular basis, with only seven percent stating their menus do not change. Half of respondents said that they revise their menus every 3-6 months. Only 11% stated that their menus are revised less frequently than that, either every 6-12 months (10%) or less than once a year (1%). Ten percent stated that their menus are revised at least once a month, and 11% stated that they revise their menus every 1-3 months.



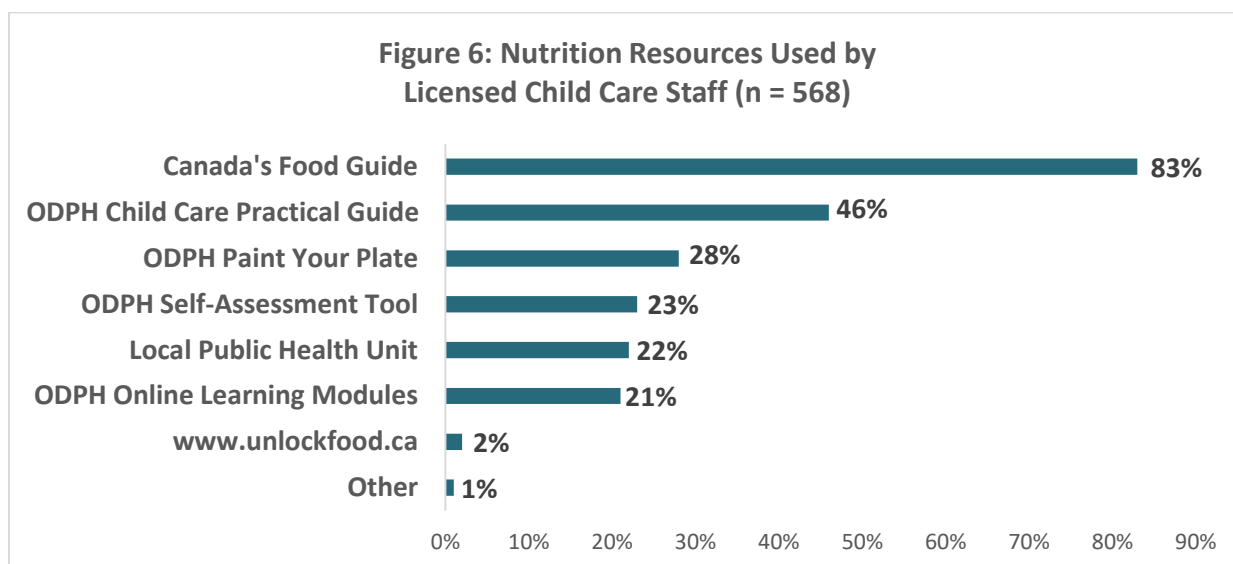
In regard to the food being offered in licensed child care settings, 85% of respondents stated that they offer two servings of vegetables and/or fruit at meal times five or more times a week and 78% offer a vegetable and/or fruit at snack more than 5 times per week. Twenty percent responded that vegetables and/or fruit were offered at snacks 3-4 times per week and two servings of vegetables and/or fruit were offered at meals 3-4 times per week (9%).

A plant-based protein was offered at mealtimes 1-2 times per week at half of licensed child care settings. Fourteen percent of settings offer a plant-based protein at meals five or more times a week, and 9% offer this 3-4 times a week. A quarter of respondents offered a plant-based protein either less than once a week (13%) or never (12%). It should be noted that this question did not clarify whether this was in relation to a standard menu or included alternative menu options for children with dietary restrictions and cultural preferences. Thus, some respondents may have reported offering plant-based options daily, but that these options may not be available to children unless requested.



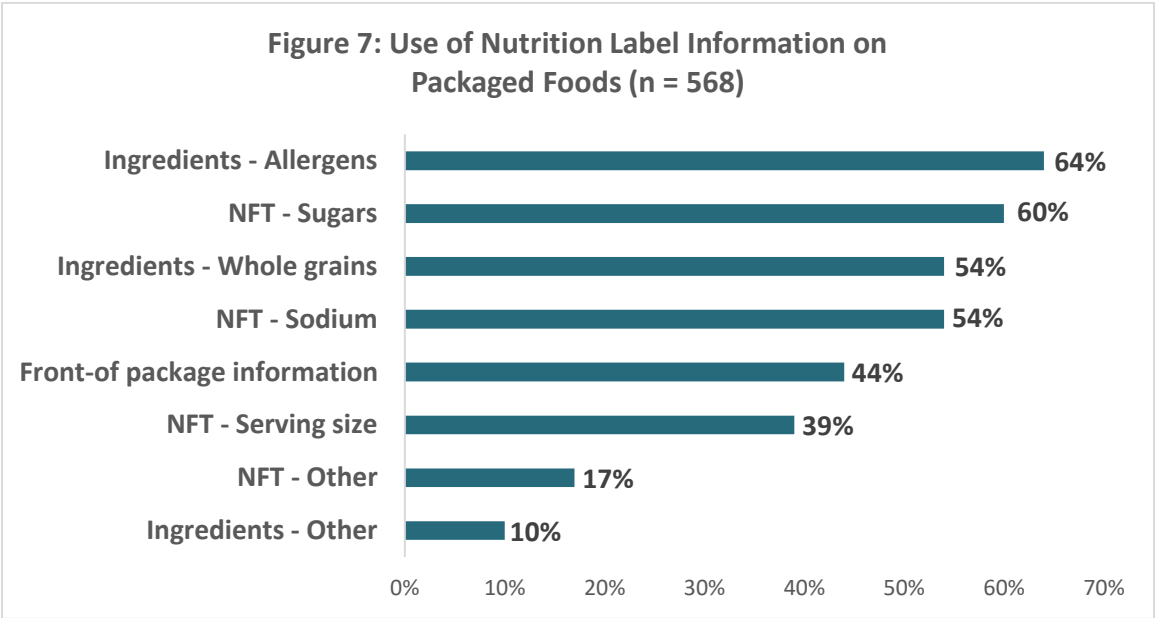
### Current Resources for Menu Planning

A wide variety of resources are used by child care settings to create their menus (Figure 6). Canada's Food Guide was cited as being used the most often with 83% referring to it to make menu planning decisions. The [ODPH Child Care Practical Guide](#) was also used by almost half of respondents (46%). Approximately a quarter of respondents used other resources such as [ODPH Paint Your Plate with Vegetables and Fruit](#) (28%), [ODPH Self-Assessment Tool for Child Care Settings](#) (23%), local public health units (22%) and the [ODPH Online Learning modules](#) (21%). Rarely used resources included TeleHealth Ontario and [www.UnlockFood.ca](#) (2% and 1%, respectively). Other resources reportedly used by respondents included online websites, dietitians, caterers and their own knowledge and beliefs to plan and create their setting's menu.



Most respondents (73%) stated that they use nutrition label information on packaged foods to make decisions on what to offer children at their child care setting. However, 17% stated that they do not use nutrition labels. Nutrition label information includes front-of-package labeling, nutrition facts table and ingredients list. Forty-four percent of respondents said they used the front-of-package labeling to assist with food purchases (Figure 7). The serving size from the nutrition facts table was of interest to 39% of respondents.

There was a wide variety of nutrients that respondents looked at from the nutrition fact table. More than half said they looked at sugar (60%) and sodium (54%). Seventeen percent said they looked at other information on the nutrition facts table such as fat and fibre content. The most viewed item on the ingredients list was the presence of an allergen (64%). Over half of respondents also viewed the ingredients list to determine whether whole grains were included in the product (54%). Ten percent looked at additional information in the ingredients list such as other ingredients that the child care setting was restricting for reasons other than allergens, such as gluten, eggs, soy, and to meet cultural preferences such as Halal.



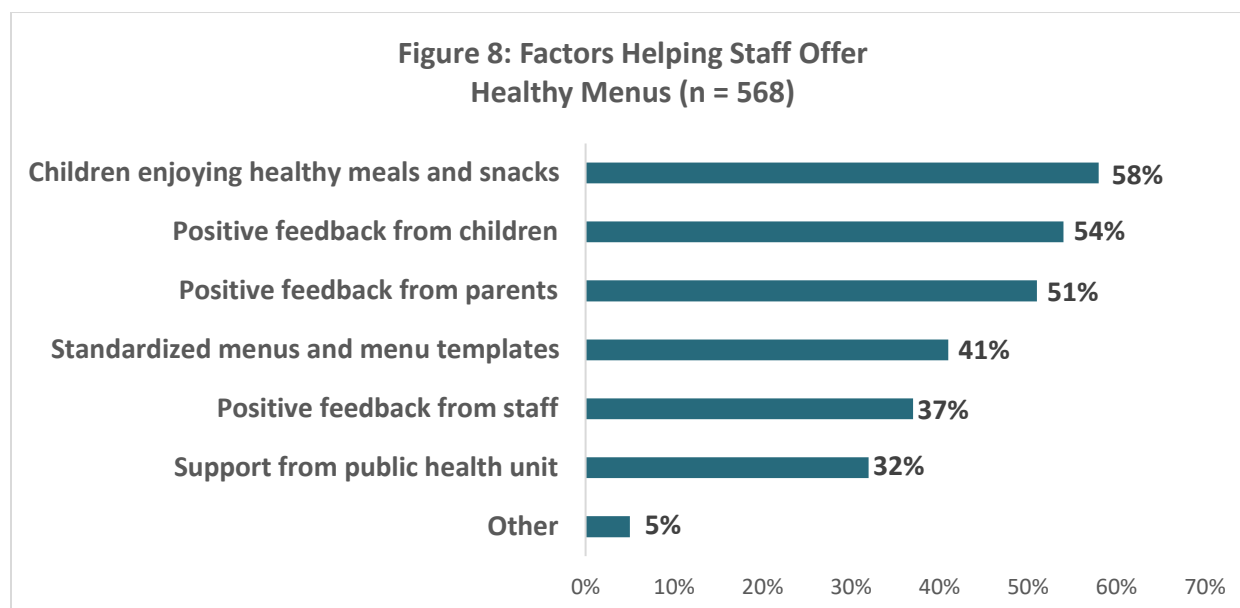
Conversely, of respondents that answered that they did not use the nutrition facts tables, 10% said that they did not find it useful and 9% said that they did not understand nutrition labels. Twenty nine percent said they were unsure why they did not use nutrition labels on packaged foods. More than half (52%) answered “other” as a reason for not using nutrition labels (i.e., they do not use packaged foods, their foods are catered or prepared off-site, and lack of time).

Half of respondents reported that they did not have a nutrition professional reviewing their menus. Of the 35% that said that their menus were reviewed by a registered dietitian, 17% relied on dietitians that work at their local public health unit. Seven percent of respondents said they did not know, and another

7% said that they used other resources such as the catering company, representative from the Ministry of Education, or a public health nurse.

### Supports and Barriers to Creating a Healthy Menu

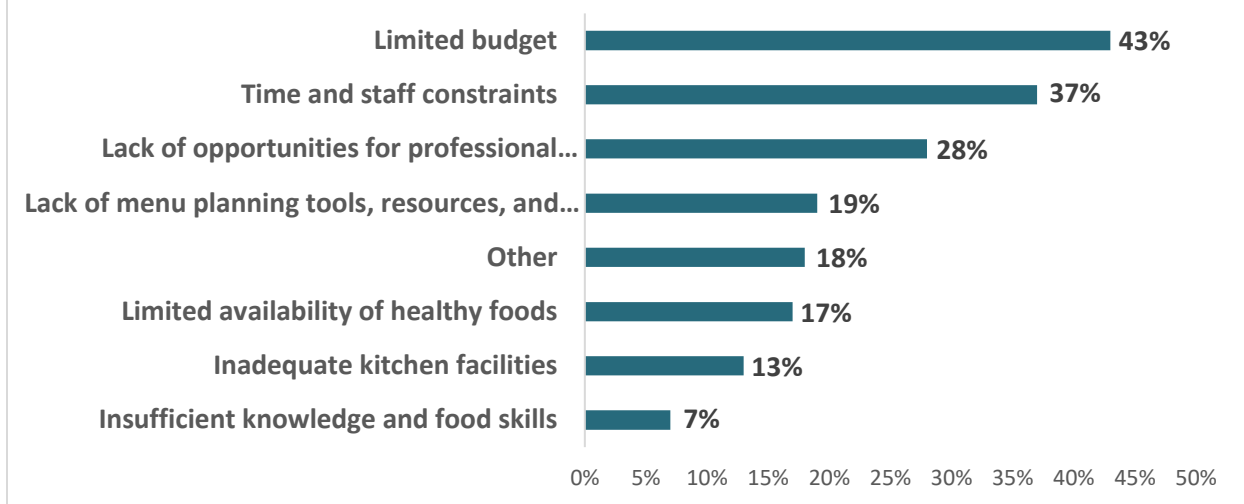
When asked what helps respondents offer a healthy menu (Figure 8), the top answers were the satisfaction from seeing children enjoying healthy foods and snacks (58%) and the positive feedback from the children (54%). Respondents also said that the positive feedback from parents (51%) and staff (37%) were supportive to offering healthy menus. Other supports included standardized menus and menu templates (41%) and support from local public health unit (32%). Five percent of respondents chose “other” and elaborated to include a knowledgeable cook, education, and online resources as additional supports to create healthy menus.



Budget was the largest identified barrier for creating a healthy menu (43%) followed by time and staff constraints when planning menus and preparing food (37%) (Figure 9). Education was another barrier that was noted and included lack of opportunities for professional development related to menu planning (28%) and insufficient nutrition knowledge and food skills (7%). Some respondents said that they did not have an adequate kitchen facility to create a healthy menu (13%) or have access to a variety of healthy foods (17%). Lack of menu planning tools, resources and recipes were noted by 19% of respondents. Eighteen percent indicated other barriers such as child/parent preferences, dietary restrictions, or having food catered or prepared off-site.



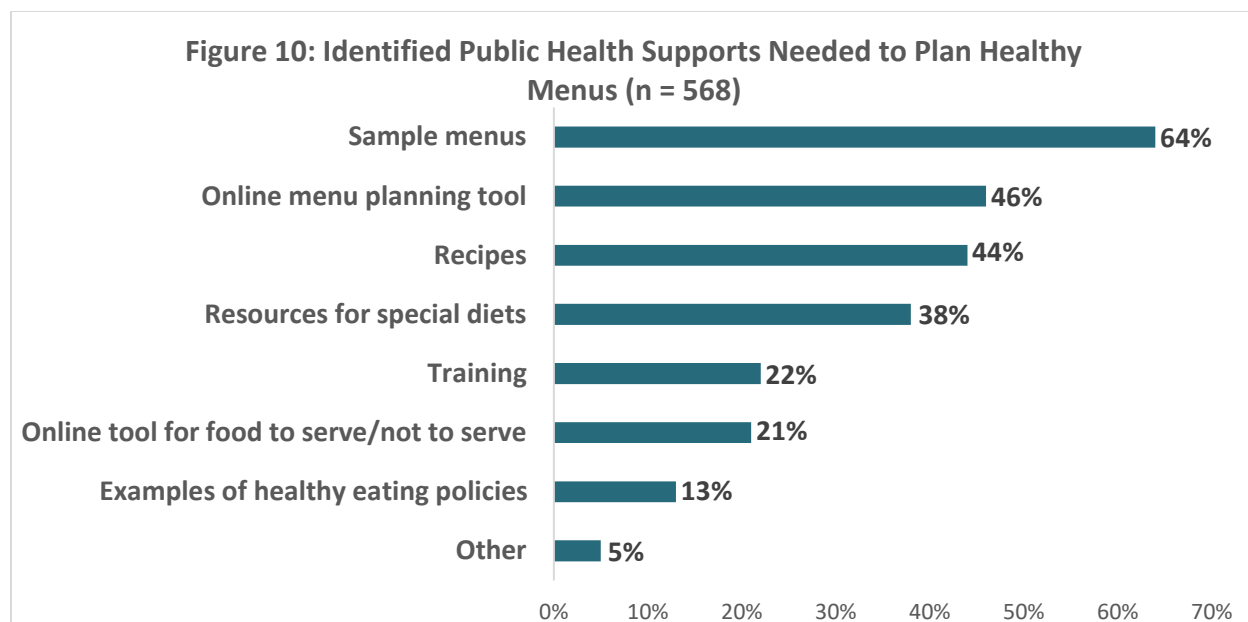
**Figure 9: Barriers to Planning Healthy Menus (n = 568)**



When asked how public health could better support child care settings to plan a healthy menu, the highest rated option was sample menus (64%) (Figure 10). When asked what type of sample menus respondents would find helpful, three-quarters stated seasonal menus. Menus for allergies and for special diets were also highly requested (67% and 60%, respectively). Other menu supports that were mentioned included budget conscious menus, sample menus for different ages and snack only menus.

Child care settings also listed recipes as an important resource that public health could provide to better support healthy menu planning (44%). When asked what type of recipe resources would be beneficial, three-quarters wanted to have an online recipe bank (76%). Over half also stated that having recipes for allergies was also important (64%). Other recipe resources included recipes for special diets (33%) and online scalable recipes (26%).

In addition to having sample menus and recipes to support child care settings to create a healthy menu, an online menu planning tool (46%) and resources for special diets (38%) were also popular resources. Less popular options were training (22%), having an online tool to understand which foods to serve and not to serve (21%), and examples of healthy eating policies (13%). Five percent selected the “other” option and specified funding support, snack menus or not needing additional support.



## Nutrition Environment Section

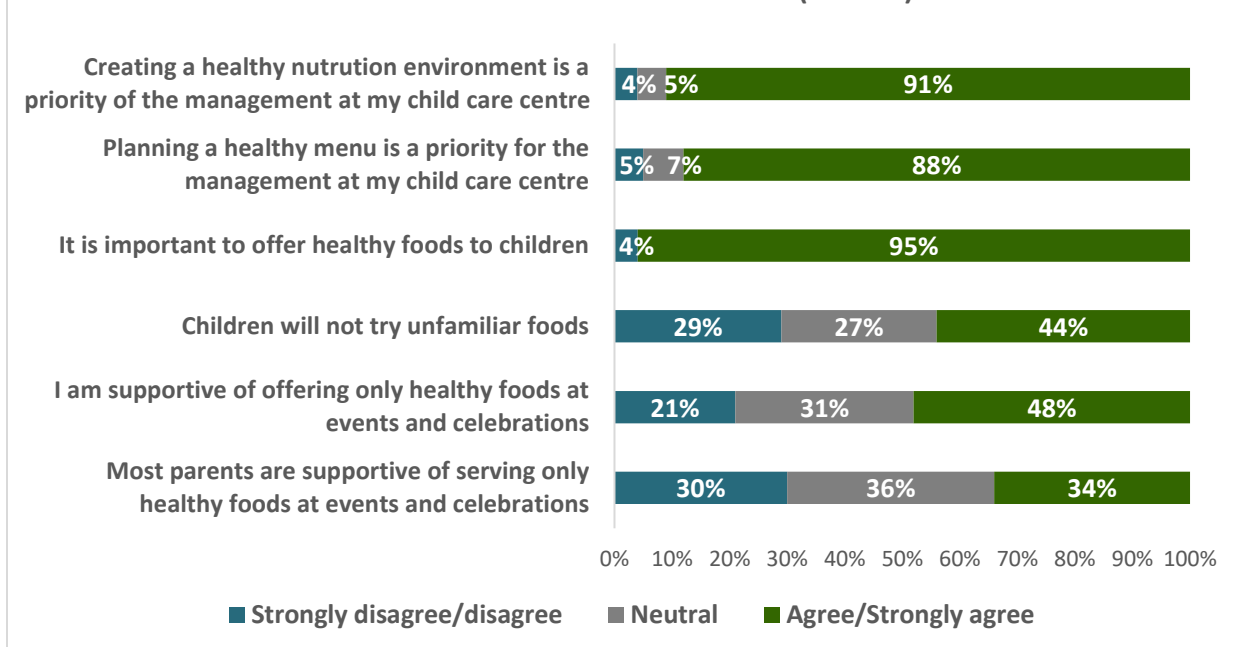
### Personal Attitudes Regarding the Nutrition Environment

Several statements were shared with child care staff to determine their attitudes regarding the nutrition environment (Figure 11). When asked if: *“Most parents are supportive of serving only healthy food at events and celebrations”* 34% of respondents indicated that they agreed with the statement. Approximately a third of respondents (36%) had a neutral opinion and 30 % disagreed. When respondents were asked if: *“[they] were supportive of offering only healthy food at events and celebrations”*, almost half of respondents (48%) agreed with the statement while 31% had a neutral opinion and 21% disagreed.

Forty-four percent of respondents indicated that: *“Children will not try unfamiliar foods”* whereas 27% had a neutral opinion and 29% of respondents disagreed with that statement. However, when asked if: *“It is important to offer healthy food to children”* most respondents (95%) agreed with that statement while 1% had a neutral opinion and 3% disagreed.

Most respondents (88%) agreed that: *“Planning a healthy menu is a priority for the management at [their] child care centre”*. Seven percent had a neutral opinion while 5% of respondents disagreed with this statement. Similarly, the majority of respondents (91%) agreed that: *“Creating a healthy nutrition environment is a priority of the management at [their] child care centre”*. Five percent had a neutral opinion and 4% disagreed with the statement.

**Figure 11: Child Care Staff Personal Attitudes Regarding Nutrition Environments (n = 865)**



## Application of Best Practices

Child care providers are able to adopt and model practices and attitudes that create a supportive nutrition environment. A supportive nutrition environment encompasses not only physical structures such as chairs, utensils, food, and a setting free from commercial influences, but also supports children's social and emotional needs during their interactions with child care providers (Ontario Dietitians in Public Health, 2017). Several statements were shared with respondents to determine if they are applying best practice recommendations for creating a supportive nutrition environment (Figure 12).

Most respondents (99%) shared that they usually or always “...*treat all children in a positive and respectful manner regardless of their body size and shape, especially when it comes to food and physical activity.*” Whereas only 1% indicated that they sometimes treat all children in a positive and respectful manner regardless of their body size and shape.

Respondents were asked if: “*children are involved in cooking activities and other hands-on food experiences at [their] child care centre.*” Forty-nine percent indicated that they usually or always involve children in cooking activities or hands-on food experiences whereas 37% do sometimes and 13% rarely or never do.

Sixty percent of respondents shared that they always or usually “...*provide nutrition-related activities to children*”. Approximately one third of respondents (33%) selected sometimes while 5% of respondents selected rarely or never.

Just over half (56%) of respondents indicated that they never “...use healthy food fundraisers or non-food fundraisers to raise money.” Fourteen percent said that they usually or always use healthy food fundraisers or non-food fundraisers, 13% did sometimes and 17% were unsure of what their centre used for fundraisers.

Thirty-eight percent of respondents shared that they usually or always “...give non-food rewards when rewarding children” with 15% stating that they sometimes give non-food rewards, 38% never give non-food rewards and 5% were unsure of the practices in their setting.

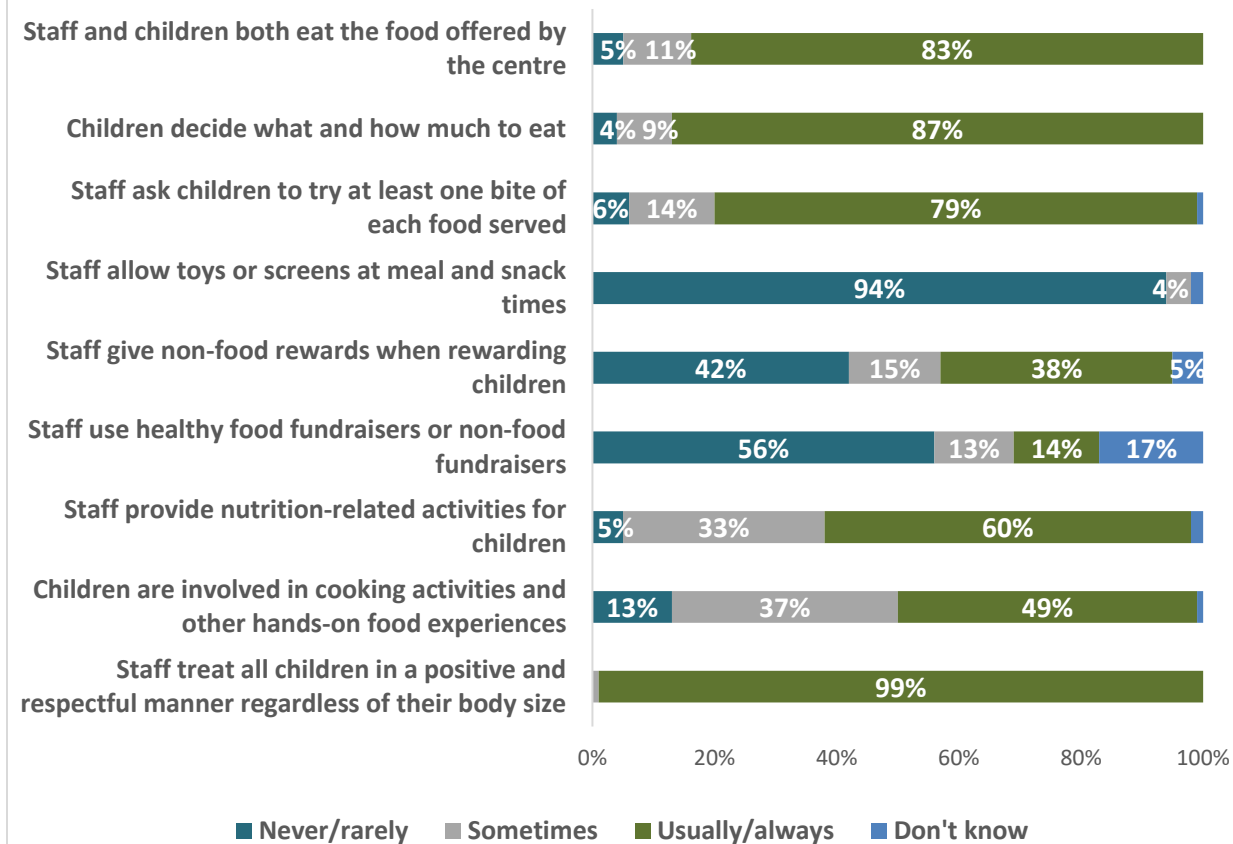
Most respondents (94%) indicated they rarely or never “...allow toys or screens at meal and snack times”. Four percent said that they sometimes allow it and 2% of respondents did not know if this occurred at their setting.

Seventy-nine percent of respondents said they always or usually “...ask children to try at least one bite of each food served.” Fourteen percent said that they sometimes ask children to try at least one bite. Only six percent said that they rarely or never ask children to try at least one bite.

Most respondents (87%) said that they always or usually let “children decide what and how much to eat from the food offered at meal and snack time.” Nine percent of respondents said they sometimes allow children to decide how much they eat and 4% said they rarely or never allow the child to decide.

Eighty-three percent of respondents indicated that usually or always have “staff and children both eat the food offered by the child care centre.” Eleven percent said that they sometimes eat the food offered and 5% said that they rarely or never eat the food that is offered by the child care centre.

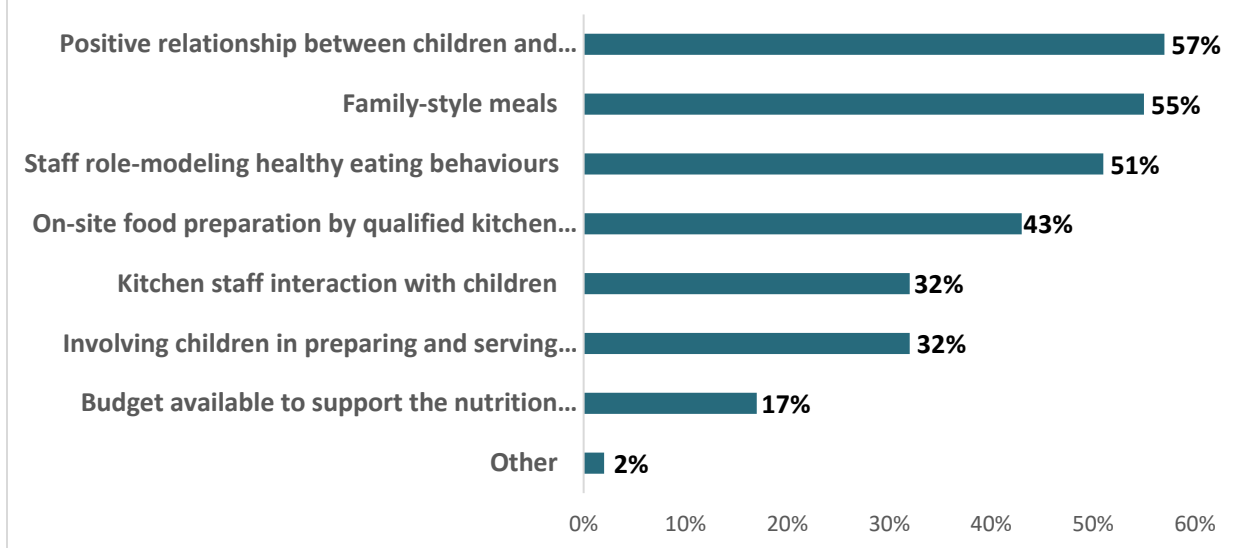
**Figure 12: Application of Best Practices (n = 865)**



## Supports and Barriers to Creating a Supportive Nutrition Environment

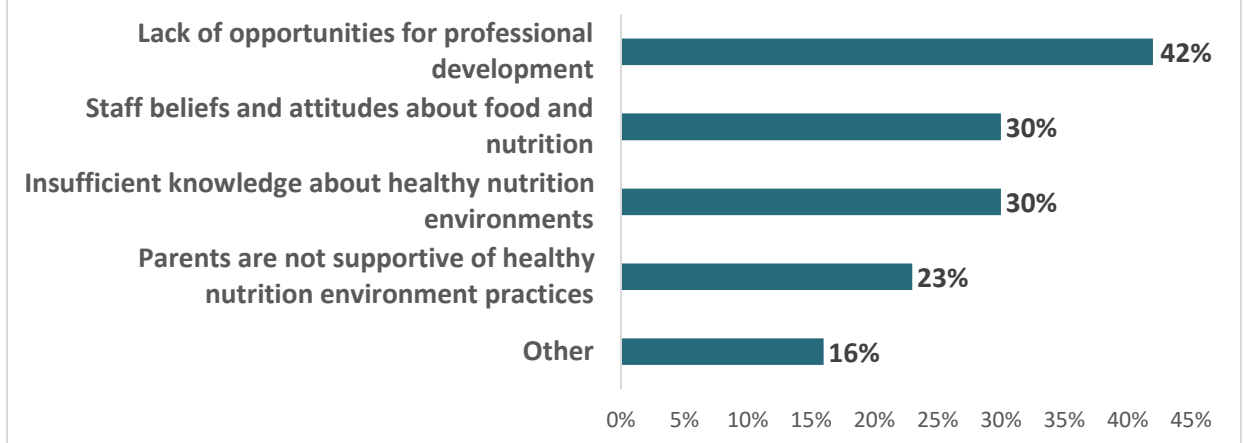
Respondents were asked to identify supports they found to be helpful in creating supportive nutrition environments at their child care setting (Figure 13). Respondents were asked to select up to 3 responses. Over half of the respondents found the following supports to be the most helpful: the positive relationships between children and child care staff (57%), family-style meals (55%) and staff-role modeling healthy eating behaviors (51%). Other common responses included: involving children in preparing and serving meals and snacks (32%), kitchen staff interaction with children (32%), and on-site food preparation by qualified kitchen staff (43%). The least common response was budget available to support the nutrition environment (17%).

**Figure 13: What Helps Licensed Child Care Staff Create Supportive Nutrition Environments (n = 866)**



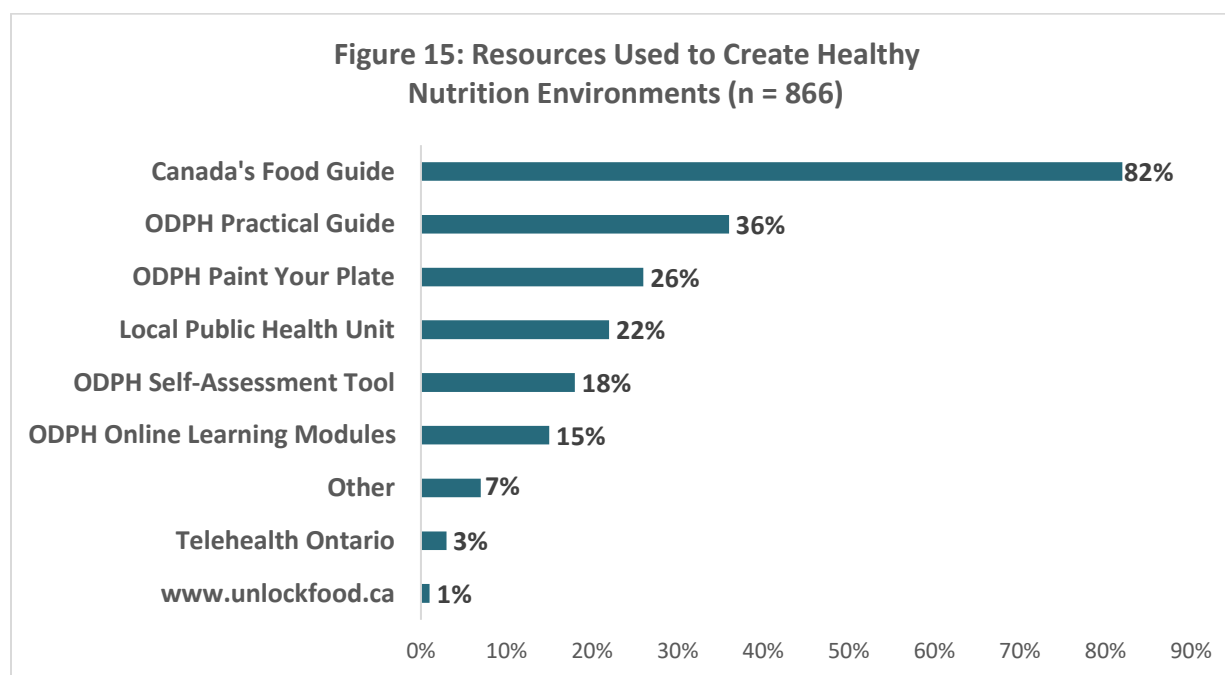
Respondents were asked to identify barriers to creating a supportive nutrition environment at their child care settings (Figure 14). Respondents could select up to 3 responses. The most common barrier selected by respondents was lack of opportunities for professional development (42%). This was followed by insufficient knowledge about supportive nutrition environments (30%), staff beliefs and attitudes about food and nutrition (30%), and parents not being in favour of supportive nutrition environment practices (23%). Other barriers reported by respondents included budgetary constraints and children's preferences.

**Figure 14: Identified Barriers to Creating Supportive Nutrition Environment (n = 866)**



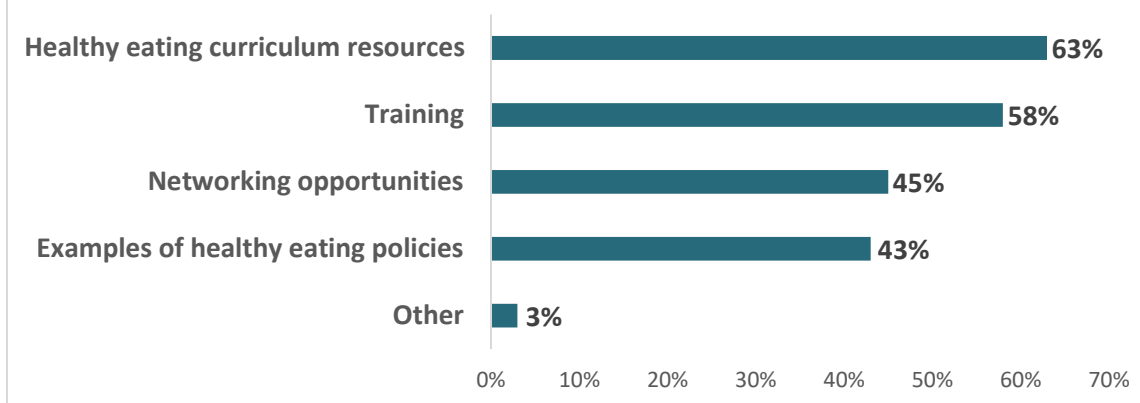
## Resources to Create a Supportive Nutrition Environment

Respondents were asked to identify what types of resources they use to create a supportive nutrition environment (Figure 15). The most common resource was Canada's Food Guide (82%). This was followed by ODPH resources including [Menu Planning and Supportive Nutrition Environments in Child Care Settings: Practical Guide](#) (36%), [Paint Your Plate with Vegetables and Fruit: A toolkit for Ontario child care providers](#) (26%), [Menu and Nutrition Environment Self-Assessment Tool for Child Care Settings](#) (18%), and [ODPH Online Learning Modules](#) (15%), followed by local public health unit (22%). The least common responses included Telehealth Ontario (3%) and [www.unlockfood.ca](http://www.unlockfood.ca) (1%). Other resources that respondents reported included online information and consulting with a registered dietitian.



When asked what public health supports were needed to create supportive nutrition environments at licensed child care settings, respondents indicated a need for healthy eating curriculum to support staff education (63%). Other resources included training on how to create and maintain supportive nutrition environments (58%), networking opportunities (45%), and examples of healthy eating policies (43%). Three percent of respondents selected other and listed parent/caregiver education, presentations by registered dietitians and funding opportunities.

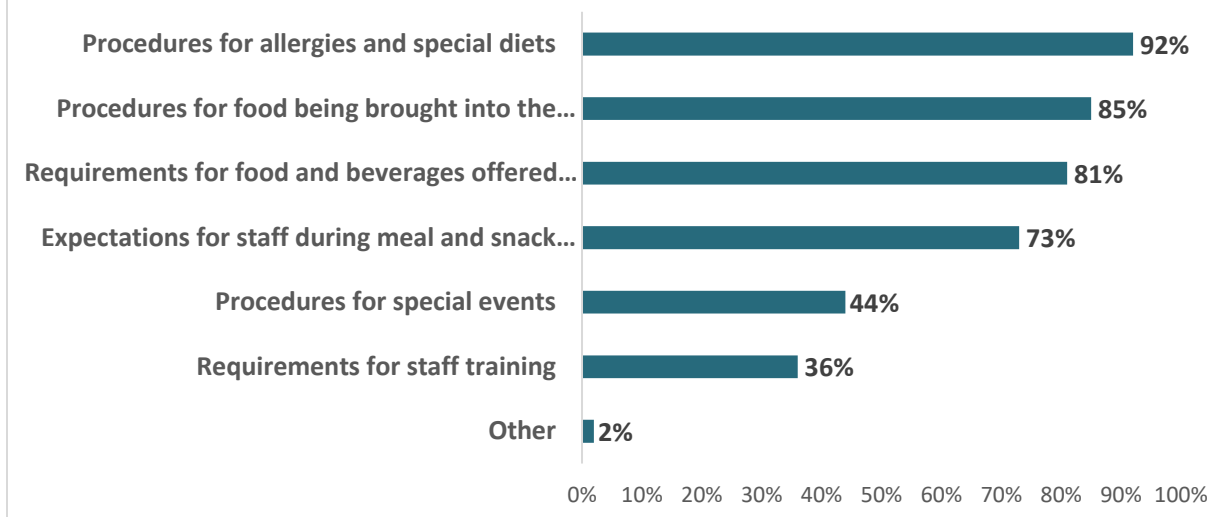
**Figure 16: Identified Public Health Supports Needed to Create Supportive Nutrition Environments (n = 866)**



### Nutrition Policy

Three quarters of licensed child care settings use nutrition policies (74%). Eighteen percent of respondents indicated that they do not, while 8% of respondents did not know. Of those that did have nutrition policies, they were asked what components were included. The most common nutrition topics included in nutrition policies were: procedures for allergies and special diets (92%), requirements for food and beverages offered at meals and snacks (81%), procedures for food being brought into the centre (85%), and expectations for staff during meal and snack times (73%). According to respondents, policies relating to requirements for staff training (36%) and procedures for special events (44%) were less commonly used. Two percent of respondents selected other and included topics such as parent/caregiver education, funding, and training.

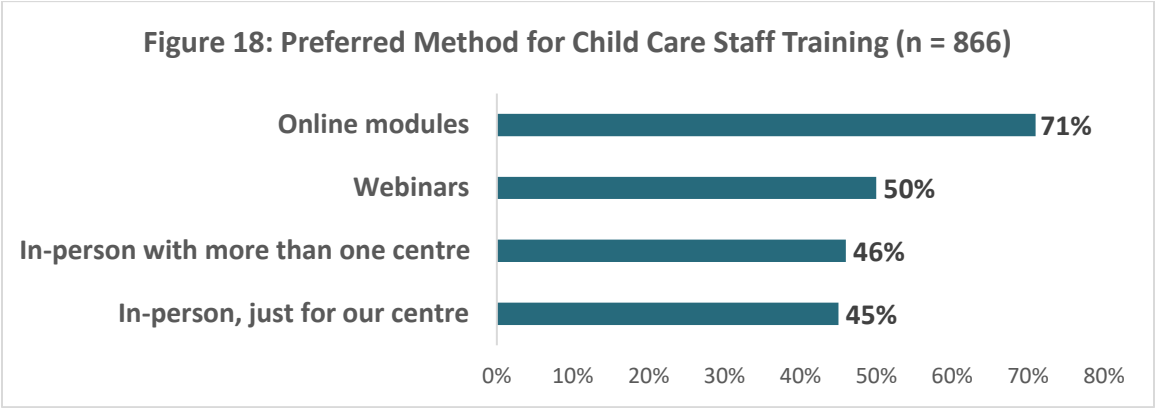
**Figure 17: Nutrition Policies in Licensed Child Care Settings (n = 641)**



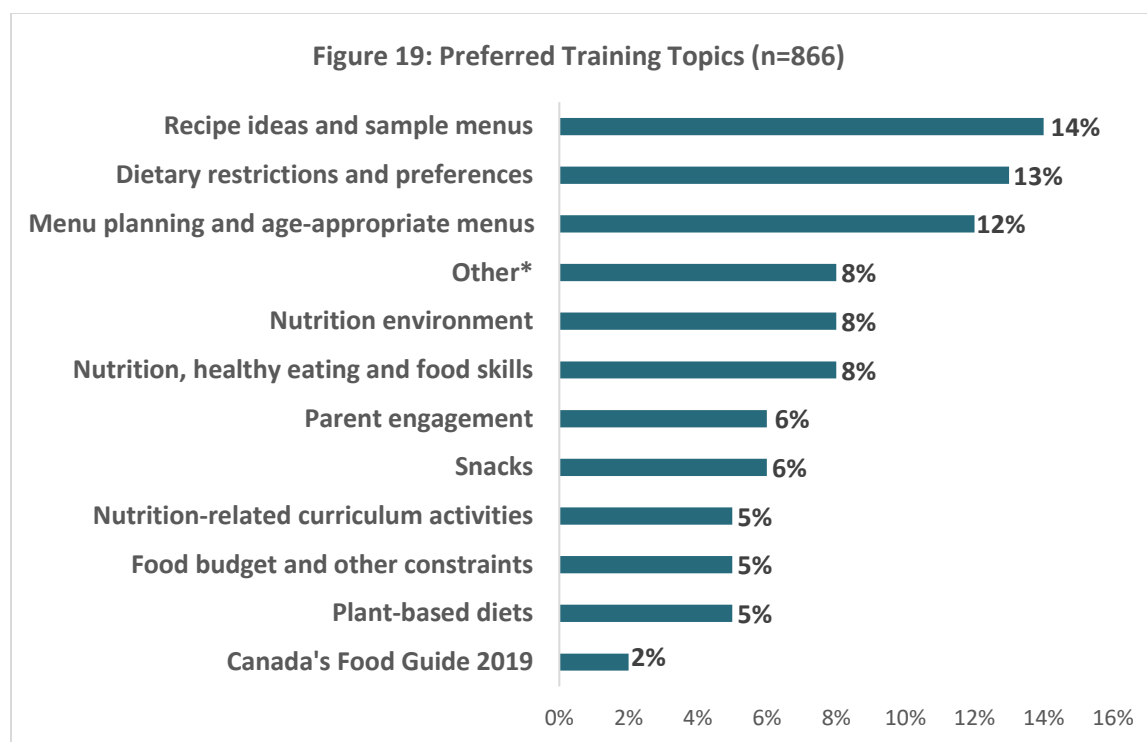


Public Health Support

Child care staff were asked if public health were to provide staff training, what would be the preferred method (Figure 18). Respondents were able to choose more than one option. The most popular format was online modules, with almost three-quarters of respondents choosing this option (71%). Half of respondents also chose webinars as the preferred mode of training. The in-person option was less popular, with 46% choosing in person with more than one child care centre and 45% selecting in-person with just their child care centre. A few respondents commented that they did not require training.



When asked which topics they would like covered if training was provided, the most popular options were recipe ideas and sample menus (14%), dietary restrictions and preferences (13%) and menu planning and age-appropriate menus (12%) (Figure 19). Eight percent selected nutrition, healthy eating and food skills as well as learning more about the nutrition environment. Six percent selected more education around snacks and parent engagement. Five percent wanted more knowledge around plant-based diets, food budgets and other constraints, and nutrition-related curriculum activities. Only 2 % requested additional information about Canada’s Food Guide. Other topics suggested by respondents included menu planning for a home child care, local food and food systems, seasonal menu planning, and food safety.



Respondents were also asked if they would like resources and support to engage parents at their child care setting. Most respondents stated that they would like some form of support (92%). Three-quarters of respondents stated that they would like a factsheet to send home to parents. Over half also requested newsletter inserts to help engage families (56%). Other options to engage parents included social media posts (40%) and online videos (34%).

## DISCUSSION

### Current Practices for Menu Planning

The [ODPH Practical Guide \(2017\)](#) recommends that two fruit and vegetable choices are offered at each meal and for more variety that one meal provides plant-based protein once per week. Many respondents indicated that they offer two servings of vegetables and/or fruit more than five times a week at mealtime and a vegetable and/or fruit at snack more than 5 times per week. A plant-based protein was offered 1-2 times per week at half of the child care settings. This demonstrates that respondents are following ODPH recommendations for ensuring nutritionally adequate meals and provide opportunities for children to try and explore new varieties of foods.

### Current Resources for Menu Planning

Health Canada's healthy eating recommendations, including Canada's Food Guide and Nutrition for a Healthy Term Infant, are foundational for menu planning across settings. Since 2015, ODPH has worked collaboratively with the Ministry of Education to support the application of Health Canada's recommendations to the child care sector. This work includes the development of interactive and comprehensive bilingual tools and resources. This survey helped to inform ODPH of the current uptake of these resources in child care settings and direct future steps.

Results showed that a wide variety of resources are used by child care settings to design their menus. Although Canada's Food Guide was cited as being used the most often, the [Practical Guide](#) was also used by almost half of respondents, and a lot of respondents reported using other ODPH resources such as [Paint Your Plate with Vegetables and Fruit](#) and the [Self-Assessment Tool for Child Care Settings](#) with accompanying [Online Learning modules](#).

The positive response to the release of these guidelines confirms the need for nutrition guidance in child care settings. These results clearly shows that the ODPH series of interactive and bilingual tools are being used by child care settings to help with menu planning.

### Barriers to Creating a Healthy Menu

#### Budget

The results from the ODPH child care survey reveal that the food budget was the largest barrier identified to creating a healthy menu, followed by time and staff constraints when planning menus and preparing food. Currently there are provincial resources to assist with food budgeting in various sectors in Ontario such as long-term-care facilities, schools, and correctional facilities. These resources provide these sectors a budgetary framework from which to plan menus to ensure that nutrient needs are met for their respective populations. Unlike sectors mentioned above, there is currently no framework for

food budgeting in child care. Such a tool would establish a necessary benchmark for child care settings to meet nutritional requirements for young children.

In creating a budgetary framework for child care settings, it would be important to collaborate with other stakeholders (e.g. child care operators, the Ontario Ministries of Health and Education, etc.) in the development, review and dissemination. The Ministry of Education's report, [Planning and Design Guidelines for Licensed Child Care Centres](#), does not address budgeting and the importance of a supportive nutrition environment (Ministry of Education, 2022). There appears to be a gap in understanding that following the [ODPH Practical Guide](#), (and completing the [ODPH Self- Assessment Tool for Child Care Settings](#)) is crucial to adhering to the CCEYA food and drink requirements. The focus must not only be on whether the menus are being posted, but the quality of the food offered and how it is offered. Shifting this understanding through collaboration with inspectors and supervisors alike, child care settings may then see the importance of advocating for sufficient budgets to create nutritious menus that follow the [ODPH Practical Guide](#) and provide children with the nutrients they need for proper growth and development in a supportive food environment that fosters a lifelong positive relationship with food.

## **Education, Tools, and Resources**

Education was another barrier that was noted by respondents, including lack of opportunities for professional development related to menu planning and insufficient nutrition knowledge and food skills. Respondents indicated that training was something public health units could do to support child care settings. Professional development opportunities support staff in honing and gaining new skills, stay current in their field of practice, and apply creative and innovative concepts to the workplace. In addition, regular professional development opportunities also provide networking opportunities and supports staff retention.

When asked about the tools that would help child care settings plan healthy menus, they mentioned standardized menus and menu templates, as well as recipes. Registered dietitians in public health units are ideal to fulfill the need for resources and continuing education in child care settings, and the need for different support tools and resources. They have credible expertise and experience in child health nutrition and have been instrumental in the creation of many valuable resources. For example, registered dietitians at the Ottawa Public Health unit developed [HEAL](#) which promotes healthy eating and active living environments for young children, and registered dietitians at Peterborough Public Health created a [comprehensive food literacy website](#).

Over the years, public health dietitians have established effective partnerships and are therefore well positioned to provide ongoing nutrition support to provincial and local child care sectors to meet both public health and Ministry of Education mandates.

## Supportive Nutrition Environments

In addition to developing menus that offer nutritious options in age-appropriate amounts, child care providers play an important role in helping children develop lifelong healthy relationships with food by creating and maintaining supportive nutrition environments.

A supportive nutrition environment helps to meet children's social and emotional needs. One of the key components of creating and maintaining supportive nutrition environments includes child care provider's modeling of positive attitudes and healthy behaviours. Examples include offering nutritious choices and being positive about the food and beverage choices available, modeling healthy eating by eating the same food and beverages offered to children, refraining from using personal electronics during snack and mealtimes, and treating all children the same way regardless of their body size or shape (Ontario Dietitians in Public Health, 2017).

Survey results demonstrate that most child care staff believe that it is important to offer healthy food to children and for staff to eat the same foods offered to the children by the child care setting. In addition, toys or screens are rarely allowed at meal and snack times. Centres also promote body diversity by treating all children in a positive and respectful manner regardless of their body size and shape. This highlights that overall, most child care settings are implementing the best practice recommendations related to modeling positive attitudes and healthy behaviours.

Another key component of creating and maintaining a supportive nutrition environment is to practice responsive feeding. This encompasses following the Satter Division of Responsibility in Feeding (sDOR). This model of feeding promotes parents and caregivers to take leadership with the *what*, *when*, and *where* of feeding and let the child determine *how much* and *whether* to eat of what is provided (Satter, 2022). An important aspect of this feeding model is to not pressure the child in any way to eat certain amounts or types of food. The evidence shows that children who are pressured to eat certain amounts and types of food get turned off to those foods and avoid them when they can (Satter, 2022). While most respondents said that they always or usually let children decide what and how much to eat from the food offered at meal and snack time, there were some settings that did not follow this practice. This demonstrates that child care staff would benefit from additional education on the Division of Responsibility in Feeding to promote competent eating behaviours.

Lastly, avoiding the use of pressure to influence food intake is another key component of a supportive nutrition environment. This encompasses not bribing, coaxing or forcing children to eat. Many respondents said that they ask children to try at least one bite of each food served as well as giving food rewards when rewarding children. Best practice recommendations suggest that food should not be given as a reward. Evidence has shown that offering food as a reward can have negative implications such as increased preference for the reward foods and increased dependency on the rewards to promote the consumption of healthier foods (Rollins, Loken, Savage, & Birch, 2014). Thus, this research

shows that child care staff require ongoing education and support related to applying the best practice recommendations for creating and maintaining supportive nutrition environment.

### **Challenges and Enablers to Creating Supportive Nutrition Environment**

The most common barrier selected by respondents was lack of opportunities for professional development, insufficient knowledge about supportive nutrition environments, and staff beliefs and attitudes about food and nutrition. This further supports previous conclusions that staff not only require more education and training, but they also need opportunities to engage in professional development in order to create supportive nutrition environments in their child care setting. On the other hand, survey respondents shared that the positive relationships between children and child care centre staff, family-style meals and staff-role modelling healthy eating behaviors were the most common enablers to create a supportive nutrition environment. The least common response was the budget available to support the nutrition environment. This demonstrates that finances have very little influence on a child care setting's ability to create a nutritious environment, but rather that the relationships and engagement with children is far superior.

Desired support to improve the nutrition environment identified by survey respondents included the need for a healthy eating curriculum to support staff education. Other resources included training on how to create and maintain a supportive nutrition environment, networking opportunities, and examples of healthy eating policies. Once again, these results validate previous conclusions that staff education and practical support are key components of creating supportive nutrition environments in child care settings.

Another key factor to establish a supportive nutrition environment is implementation of a nutrition policy. A nutrition policy is a clear and enforced written statement that provides a set of principles to help make the best decisions about nutrition. Most respondents indicated that they currently have nutrition policies in place in their child care setting. However, most policies are reflective of procedures for allergies and special diets, requirements for food and beverages offered at meals and snacks, procedures for food being brought into the centre, and expectations for staff during meal and snack times. Very few child care setting have nutrition policies related to requirements for staff training and procedures for special events. This shows the need for more comprehensive nutrition policies to further develop a supportive nutrition environment.

Collaboration between public health and child care settings is important to integrate the essential components of a supportive nutrition environment. Registered dietitians in public health are in a unique position to offer such support as part of their mandate includes consulting and collaborating with key stakeholders in child care settings. One key support that can be offered is staff development opportunities. This resonated with many respondents as training for staff has been previously identified as a need. Other types of supports that respondents identified that would be helpful from public health included factsheets to send home to parents, newsletter inserts to help engage families, social media posts and online videos. Public health has the opportunity to be a key influencer in helping child care settings create supportive nutrition environments.

## STUDY LIMITATIONS

### From the Survey

Participants were recruited using a non-probabilistic convenience sample. Convenience sampling is prone to self-selection bias where licensed child care managers and staff who value nutrition, for example, are more likely to complete the survey compared to other child care managers and staff who place less value on nutrition. Therefore, the results reported are not representative and not generalizable to all licensed child care managers and staff in Ontario.

Responses from open-ended questions made it apparent that some childcares had a challenging time differentiating between the two sections of the survey: menu planning vs nutrition environment, leading to an unknown amount of measurement error.

Many child care settings listed Canada's Food Guide as a resource for planning their menu. On January 22, 2019 Health Canada launched a new version of the Canada's Food Guide. The new food guide does not provide serving sizes or recommended servings per day, a tool that was used widely to determine which foods and how much to offer in child care centres. Although not explicitly stated by child care staff, we recognize the difficulty in applying the new food guide when planning menus.

### COVID-19 Pandemic

The survey was completed by child care providers in January and February 2020. On March 17, 2020 Ontario declared a state of emergency due to COVID-19 and closed all schools and child care centres. What followed has been a significant disruption of services provided by child care settings. The child care environment has changed significantly to adapt to the COVID-19 pandemic. What we have heard anecdotally from childcare settings is that there is no longer any communal food prep and children are served food and not allowed to serve themselves. Staff no longer eat meals with the children. Parents are not allowed to enter the child care settings and pick up/drop off happens at the door. We have heard of staffing issues and difficulty finding qualified staff, including cooks. In addition, Canadians are enduring a 31-year high in the annual rate of inflation, which Statistics Canada pegged at 6.7% in March 2022 (Statistics Canada, 2022). This was not an issue at the time of survey completion. The results are reflective of the nutrition environment prior to the COVID-19 pandemic and is a major limitation in utilizing these results to reflect present day nutrition environments in child care settings. It would be beneficial to follow up with survey participants to see how their setting has changed since the start of the pandemic.

In addition, once the COVID-19 pandemic was declared as a state of emergency, many public health dietitians were deployed to COVID-19 work. This continued for over two years and completion of this report was put on hold. This impacted the timeliness of reporting the results from the survey.

## RECOMMENDATIONS

### Menu Planning

1. Update the [ODPH Practical Guide](#) and related tools with the new Canada's Food Guide recommendations.
2. Continue to work closely with local child care settings to offer more support, resources, tools and training to staff. Consider online recipe bank, sample menus, plant-based or recipes without allergens.
3. Share results of this survey with the Ministry of Education in an effort to enhance ODPH CCWG's collaboration with the Ministry and ability to produce and disseminate tools and resources to the child care sector.
4. Work in collaboration with Ministry stakeholders to develop a budgetary framework for the child care sector.

### Supportive Environment Section

1. Advocate for ECE students to receive comprehensive training on how to create a supportive nutrition environment
2. Encourage child care settings who currently have nutrition policies to broaden the scope of their policies to include regular staff training on the various components which contribute to a supportive nutrition environment. For those child care settings who do not have nutrition policies, provide assistance to the development of such policies
3. Provide a combination of virtual and in-person professional development opportunities for child care staff on a regular basis, along with tools and resources to increase staff knowledge and ability to apply best practice recommendations for creating and maintaining a supportive nutrition environment.



## CONCLUSION

The results presented in this report demonstrates that the OPDH Practical Guide is being used by child care settings to plan menus and ensure a supportive nutrition environment in their settings and that there is value in updating and maintaining this resource. Registered dietitians can address the needs of child care settings for education, professional development opportunities, and the lack of tools and resources that they have identified. Training can be provided through online modules, webinars and in-person education.

Registered dietitians in public health units are ideal to fulfill the need for resources and continuing education in child care settings, and the need for different support tools and resources. They have credible expertise and experience in child health nutrition and have been instrumental in the creation of many valuable resources. Over the years, public health dietitians have established effective partnerships and are therefore well positioned to provide ongoing nutrition support to provincial and local childcare sectors to meet both public health and Ministry of Education mandates.

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## APPENDICES

### APPENDIX A: Needs Assessment Survey

#### Survey Questions – English

##### Introduction

Ontario Dietitians in Public Health (ODPH) is the independent and official voice of registered dietitians working in public health in Ontario. ODPH is collecting information from child care settings in Ontario to understand the supports you need to offer healthy food and beverages and a supportive nutrition environment to the children in your care. The survey will take approximately 15-20 minutes to complete and will close on February 21, 2020.

This survey is intended to be completed by:

- Licensed child care operators (home and centre based) that care for children 0-4 years of age;
- Staff that make decisions regarding their menu; and
- Staff that support children during meals and snack times.

Your participation is voluntary. Your participation will not affect your use of, or access to, public health programs or services. You may choose not to answer any question and can stop participating at any time by closing the survey window without submitting your answers. Once you submit your answers, we are unable to delete your responses.

Your responses will be kept confidential. You or your child care centre will not be identified in any reports written to summarize findings. Any identifying information will be removed before publication. Survey responses will be exported to a secure computer network for analysis by ODPH members. After the report is completed, the electronic surveys will be deleted and your information will be saved to a password-protected ODPH webpage and only accessible to ODPH members involved in this project.

By answering the questions below, you consent to the use of your responses for this project. If you have any questions about this survey, please contact: Marcia Dawes, Public Health Nutritionist, Region of Peel - Public Health, [marcia.dawes@peelregion.ca](mailto:marcia.dawes@peelregion.ca).

We appreciate your participation in this survey.

##### Child Care Centre Profile

Please note: The term “child care centre” is used throughout this survey and refers to both licensed child care centres and licensed home child care providers.

The first few questions are about you and your child care centre.

***What is your role at your licensed child care centre?***

- Owner/operator
- Supervisor
- Early Childhood Educator
- Cook
- Home child care provider
- Other → Please specify:

***What are the TOTAL number of spaces that your child care centre has for children from birth to 4 years of age? Please do not include spaces for before and after school programs.***

***Where is the food served at your child care centre prepared?***

- On-site
- Catered
- Both on-site and catered
- Other → Please specify:

***What is the first digit of your child care centre's postal code?***

- K - Eastern Ontario
- L - Central Ontario
- M - Metropolitan Toronto
- N - Southwestern Ontario
- P - Northern Ontario

***What is the second digit of your child care centre's postal code?***

- 0 (rural area)
- 1-9 (urban area)

**Menu Planning**

The next questions ask about your child care centre's menu planning practices.

***Are you responsible for planning or reviewing the menu at your child care centre?***

- Yes
- No \*\*skip to Nutrition Environment – Question 1\*\*

***What resources are you currently using to plan a healthy menu at your child care centre? Select all that apply.***

- Menu Planning & Supportive Nutrition Environments in Child Care Settings: Practical Guide
- Menu and Nutrition Environment Self-Assessment Tool for Child Care Settings
- Paint Your Plate with Vegetables and Fruit: A toolkit for Ontario child care providers

- Online learning modules: Nutrition Recommendations for Healthy Eating in Child Care Settings
- UnlockFood.ca
- Canada's Food Guide
- Telehealth Ontario
- Local public health unit
- Other → Please specify:

***How long is your child care centre's menu cycle?***

- 1 week or less
- 2 - 3 weeks
- 4 - 5 weeks
- 6 weeks or more
- Don't know
- Other → Please specify:

***How often does your child care centre change or revise the menu?***

- Every \_\_\_ months (please specify the number of months)
- Menu doesn't change
- Don't know
- Other → Please specify:

***For the following statements, select the one response that most closely describes your child care centre's current menu.***

My child care centre serves...

	5 or more times /week	3-4 times/ week	1-2 times/ week	Less than 1 time/week	Never	Don't Know
Two vegetables and/or fruit at meals.						
Vegetables and/or fruit at every snack.						
A plant-based protein meal. For example: an entrée made with beans, lentils, or tofu.						

***Do you use nutrition labels on packaged food when planning your child care centre's menu?***

- Yes \*\*skip to Menu Planning – Question 7\*\*
- No \*\*skip to Menu Planning – Question 8\*\*
- Don't know \*\* skip to Menu Planning – Question 9\*\*

***What information do you use from the nutrition label of packaged foods? Select all that apply.***

- Front-of-package nutrition information (for example: No added sugar, Source of iron) \*\*skip to Menu Planning – Question 9\*\*
- Nutrition Facts Table – Serving size \*\*skip to Menu Planning – Question 9\*\*
- Nutrition Facts Table – Sodium \*\*skip to Menu Planning – Question 9\*\*
- Nutrition Facts Table – Sugars \*\*skip to Menu Planning – Question 9\*\*
- Nutrition Facts Table – Other \*\*skip to Menu Planning – Question 9\*\*

↳ Please specify:

- Ingredients – Whole grains \*\*skip to Menu Planning – Question 9\*\*
- Ingredients – Allergens \*\*skip to Menu Planning – Question 9\*\*
- Ingredients – Other \*\*skip to Menu Planning – Question 9\*\*

↳ Please specify:

***Why don't you use the nutrition labels on packaged food? Select the one response that most closely describes your answer.***

- Don't understand nutrition labels
- Don't find it useful to read food labels
- Don't know
- Other → Please specify:

***Do you have an external nutrition professional review your menus?***

- Yes, a Registered Dietitian from our local public health unit
- Yes, a Registered Dietitian who is not from our local public health unit
- No
- Don't know
- Other → Please specify:

***What helps you to offer a healthy menu at your child care centre? Select up to 3.***

- Standardized menus and menu templates
- Support from our local public health unit
- Positive feedback from parents
- Positive feedback from staff
- Positive feedback from children
- Satisfaction from seeing children enjoying healthy meals and snacks
- Other → Please specify:

***Which of the following, if any, are barriers to planning a healthy menu at your child care centre? Select up to 3.***

- Lack of menu planning tools, resources, and recipes
- Limited budget
- Inadequate kitchen facilities

- Limited availability of a variety of healthy foods
- Time and staff constraints when planning menus and preparing food
- Insufficient nutrition knowledge and food skills
- Lack of opportunities for professional development related to menu planning
- Other → Please specify:

***How could public health better support you to plan a healthy menu at your child care centre? Select up to 3.***

- Sample menus
- Recipes
- Online menu planning tool
- Resources for special diets (for example: vegetarian, Halal, allergies)
- Examples of healthy eating policies (a policy is a clearly written, enforceable set of principles to help make decisions)
- Training
- Online tool to understand which foods to serve and to not serve (for example: the Ontario Ministry of Education's Nutrition Standards Tool)
- Other → Please specify:

***If public health was to provide child care centres with sample menus, what would best support you with menu planning? Select all that apply.***

- Sample menus for special diets (for example: Halal, vegetarian)
- Sample menus for allergies
- Seasonal menus
- Other → Please specify:

***If public health was to provide child care centres with recipes, what would best support you with menu planning? Select all that apply.***

- Online recipe bank
- Online scalable recipes (to convert recipes for different yields)
- Recipes for special diets (for example: Halal, vegetarian)
- Recipes for allergies
- Other → Please specify:

### **Nutrition Environment**

The next questions ask about the nutrition environment at your child care centre. A healthy nutrition environment promotes healthy eating through role modeling, education, positive social interactions and providing safe and healthy foods. For example: child-sized plates and cups, family-style meals, and food and nutrition learning activities for children.



***Please rate your level of agreement with each of the following statements as they relate to your child care centre.***

A reminder that all responses are anonymous.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I feel that creating a healthy nutrition environment is a priority for the management of my child care centre.					
I feel that planning a healthy menu is a priority for the management of my child care centre.					
I feel it is important to offer healthy food to children.					
I find that children will not try unfamiliar foods.					
I am supportive of offering only healthy food at events and celebrations (for example: serving fruit and yogurt parfaits instead of birthday cake).					
I feel that most parents are supportive of serving only healthy food at events and celebrations (for example: serving fruit and yogurt parfaits instead of birthday cake).					

***Please rate how often each of the following occur at your child care centre.***

	Always	Usually	Sometimes	Rarely	Never	Don't Know
Staff and children both eat the food offered by the child care centre.						
Children decide what and how much to eat from the food offered at meal and snack time.						
Staff ask children to try at least one bite of each food served.						
Staff allow toys or screens at meal and snack times.						
Staff give non-food rewards when rewarding children (for						

example: stickers, extra story time).						
Staff use healthy food fundraisers (for example: bags of apples) or non-food fundraisers (for example: calendars) to raise money.						
Staff provide nutrition-related activities for children (for example: gardening and reading children's books about healthy eating).						
Children are involved in cooking activities and other hands-on food experiences at my child care centre.						
Staff treat all children in a positive and respectful manner regardless of their body size and shape, especially when it comes to food and physical activity.						

***What helps you to create or maintain a healthy nutrition environment at your child care centre? Select up to 3.***

- Involving children in preparing and serving meals and snacks
- Kitchen staff interact with children
- On-site food preparation by qualified kitchen staff
- Positive relationships between children and child care centre staff
- Family-style meals
- Budget available to support the nutrition environment
- Staff role-modelling healthy eating behaviours
- Other → Please specify:

***Which of the following, if any, are barriers to create and/or maintain a healthy nutrition environment at your child care centre? Select up to 3.***

- Insufficient knowledge about healthy nutrition environments
- Staff beliefs and attitudes about food and nutrition (for example: staff are reluctant to eat meals with children)
- Parents are not supportive of healthy nutrition environment practices implemented by the child care centre

- Lack of opportunities for professional development related to healthy nutrition environments
- Other → Please specify:

***What resources are you currently using to create a healthy nutrition environment at your child care centre? Select all that apply.***

- Menu Planning & Supportive Nutrition Environments in Child Care Settings: Practical Guide
- Menu and Nutrition Environment Self-Assessment Tool for Child Care Settings
- Paint Your Plate with Vegetables and Fruit: A toolkit for Ontario child care providers
- Online learning modules: Nutrition Recommendations for Healthy Eating in Child Care Settings
- UnlockFood.ca
- Canada's Food Guide
- Telehealth Ontario
- Local public health unit
- Other → Please specify:

***How could public health better support you to create a healthy nutrition environment at your child care centre? Select up to 3.***

- Examples of healthy eating policies (a policy is a clearly written, enforceable set of principles to help make decisions)
- Networking opportunities
- Healthy eating curriculum resources
- Training on how to create and support healthy nutrition environments
- Other → Please specify:

### **Nutrition Policy**

The next questions ask about the nutrition policies at your child care centre. A nutrition policy is a clearly written statement about healthy eating that is enforced. It provides a set of principles to guide staff and help make decisions. For example, a policy about food at special events would provide a set of principles or expectations for the food permitted to be served at special events, such as birthdays.

***Does your child care centre have any nutrition policies?***

- Yes
- No \*\*skip to What Do You Need from Public Health – Question 1\*\*
- Don't know \*\*skip to What Do You Need from Public Health – Question 1\*\*

***What do your child care centre's nutrition policies include? Select all that apply.***

- Requirements for food and beverages offered at meals and snacks
- Procedures for allergies and special diets (for example: Halal, vegan)
- Procedures for special events (for example: birthdays, holidays, field trips)
- Procedures for food being brought into the centre (for example: from parents or staff)

- Expectations for staff during meal and snack times (for example: eating with children, letting children serve themselves)
- Requirements for staff training
- Other → Please specify:

### **What Do You Need from Public Health**

The last few questions are on how public health can better support your work.

***If public health was to provide staff training on menu planning or healthy nutrition environments, what format would you prefer? Select up to 3.***

- In person, with just your child care centre
- In person, with more than one child care centre
- Online modules
- Webinars
- Other → Please specify:

***What training topics related to nutrition would be most useful to your work at your child care centre? To create healthy change in child care settings, parents also need to be engaged and supportive of these decisions. Which of these options would be the most useful to your centre? Select up to 3.***

- Factsheets
- Newsletter inserts
- Social media posts for your child care centre
- Online video on the importance of healthy eating in child care for parents
- My child care centre does not need support to engage parents
- Other → Please specify:

You have reached the end of the survey. To submit your responses, please click the 'Submit' button below.

Thank you for completing the survey.

## **Survey Questions – French**

### **Introduction:**

Le groupe des Diététistes en santé publique de l'Ontario (DSPO) est l'organisme indépendant et officiel regroupant les diététistes travaillant en santé publique en Ontario. Les DSPO recueillent des renseignements auprès des services de garde d'enfants en Ontario afin de comprendre le soutien dont vous avez besoin pour offrir des aliments et des boissons saines et créer un environnement alimentaire sain pour les enfants sous votre charge. Le sondage prend environ 15 à 20 minutes et se termine le 21 février 2020.

Le présent sondage s'adresse aux personnes suivantes :

- les exploitants d'un service de garde agréé (en milieu familial et dans un centre) qui s'occupent d'enfants âgés de zéro à quatre ans;
- les membres du personnel qui prennent des décisions au sujet de leur menu; et,
- les membres du personnel qui aident les enfants pendant les repas et les collations.

Votre participation est volontaire. Votre participation n'aura aucune incidence sur votre utilisation ou votre accès aux programmes et services de santé publique. Vous pouvez choisir de ne pas répondre à certaines questions et pouvez cesser de remplir le sondage en tout temps en fermant la fenêtre sans soumettre vos réponses. Une fois les réponses soumises, nous ne pouvons plus les effacer.

Vos réponses demeureront confidentielles. Vous ou votre service de garde d'enfants ne serez identifié dans aucun rapport rédigé pour résumer les résultats. Toute information d'identification sera supprimée avant publication. Les réponses au sondage seront exportées sur un réseau informatique sécurisé pour fins d'analyse par les membres des DSPO. Une fois le rapport terminé, les sondages électroniques seront supprimés et vos informations seront enregistrées sur une page Web des DSPO protégée par un mot de passe seulement accessible aux membres des DSPO impliqués dans ce projet.

En répondant aux questions ci-dessous, vous consentez à l'utilisation de vos réponses pour le projet. Si vous avez des questions sur ce sondage, veuillez contacter : Mélissa Cardinal, diététiste en santé publique, Bureau de santé de l'est de l'Ontario, mcardinal@eohu.ca.

Nous vous remercions de votre participation au sondage.

### **Profil du service de garde d'enfants**

Remarque : Le terme « service de garde d'enfants » utilisé tout au long du sondage désigne à la fois les centres de services de garde d'enfants agréés et les fournisseurs de services de garde en milieu familial agréés.

Les premières questions concernent vous et votre service de garde d'enfants.

#### ***Quel est votre rôle dans votre service de garde d'enfants agréé?***

- Propriétaire/exploitant(e)
- Superviseur(e)
- Éducateur(trice) de la petite enfance
- Cuisinier(ère)
- Fournisseur de services de garde en milieu familial
- Autre → Veuillez préciser:

#### ***Quel est le nombre TOTAL de places dans votre service de garde d'enfants pour les enfants de la naissance à 4 ans?***

Veuillez ne pas inclure les places pour les programmes avant et après l'école.

***Où prépare-t-on la nourriture offerte dans votre service de garde?***

- Sur place
- Service de traiteur
- Sur place et par un service de traiteur
- Autre → Veuillez préciser:

***Quelle est la première lettre du code postal de votre service de garde d'enfants?***

- K – Est de l'Ontario
- L – Centre de l'Ontario
- M – Région métropolitaine de Toronto
- N – Sud-Ouest de l'Ontario
- P – Nord de l'Ontario

***Quel est le premier chiffre du code postal de votre service de garde d'enfants?***

- 0 (région rurale)
- 1-9 (région urbaine)

**Planification des menus**

Les prochaines questions portent sur les pratiques de planification des menus de votre service de garde d'enfants.

***Êtes-vous responsable de la planification ou de la révision du menu de votre service de garde d'enfants?***

- Oui
- Non \*\*Passez à Environnement Alimentaire – Question 1\*\*

***Quelles ressources utilisez-vous actuellement pour planifier un menu santé dans votre service de garde d'enfants?***

Indiquez toutes les réponses pertinentes.

- Planification de menus et environnements alimentaires sains dans les services de garde d'enfants : Guide pratique
- Outil d'autoévaluation des menus et de l'environnement alimentaire dans les services de garde d'enfants
- Décorez votre assiette de légumes et de fruits : Trousse d'outils destinée aux fournisseurs de services de garde d'enfants de l'Ontario
- Modules d'apprentissage en ligne: Nutrition Recommendations for Health Eating in Child Care Settings (en anglais seulement)
- DécouvrezLesAliments.ca
- Guide alimentaire canadien

- Télésanté Ontario
- Bureau de santé publique local
- Autre → Veuillez préciser:

**Combien de temps dure le cycle de menu de votre service de garde d'enfants?**

- 1 semaine ou moins
- 2-3 semaines
- 4-5 semaines
- 6 semaines ou plus
- Je ne sais pas
- Autre → Veuillez préciser:

**À quelle fréquence votre service de garde d'enfants change-t-il ou révise-t-il le menu?**

- Tous les \_\_\_ mois (précisez le nombre de mois)
- Le menu ne change pas
- Je ne sais pas
- Autre → Veuillez préciser:

**Pour les énoncés suivants, choisissez la réponse qui décrit le mieux le menu actuel de votre service de garde d'enfants.**

Mon service de garde d'enfants offre...

	5 fois ou plus par semaine	3-4 fois par semaine	1-2 fois par semaine	Moins d'une fois par semaine	Jamais	Je ne sais pas
Deux légumes et/ou fruits aux repas.						
Des légumes et/ou des fruits à toutes les collations.						
Un repas contenant des protéines d'origine végétale. Par exemple, un plat principal composé de haricots, de lentilles ou de tofu.						

**Utilisez-vous les étiquettes nutritionnelles des aliments emballés lorsque vous planifiez le menu de votre service de garde d'enfants?**

- Oui \*\*Passez à Planification de menus - Question 7\*\*
- Non \*\*Passez à Planification de menus - Question 8\*\*
- Je ne sais pas \*\*Passez à Planification de menus - Question 9\*\*

**Quelles informations utilisez-vous sur l'étiquette nutritionnelle des aliments emballés?**

Indiquez toutes les réponses pertinentes.

- Informations nutritionnelles sur le devant de l'emballage (par exemple: sans sucre ajouté, source de fer) \*\*Passez à Planification de menus - Question 9\*\*
- Le tableau de la valeur nutritive – Portion \*\*Passez à Planification de menus - Question 9\*\*
- Le tableau de la valeur nutritive – Sodium \*\*Passez à Planification de menus - Question 9\*\*
- Le tableau de la valeur nutritive – Sucres \*\*Passez à Planification de menus - Question 9\*\*
- Le tableau de la valeur nutritive – Autre \*\*Passez à Planification de menus - Question 9\*\*

↳ Veuillez préciser:

- La liste des ingrédients – Grains entiers \*\*Passez à Planification de menus - Question 9\*\*
- La liste des ingrédients – Allergènes \*\*Passez à Planification de menus - Question 9\*\*
- La liste des ingrédients – Autre \*\*Passez à Planification de menus - Question 9\*\*

↳ Veuillez préciser:

**Pourquoi n'utilisez-vous pas les étiquettes nutritionnelles des aliments emballés?**

Cochez la réponse la plus pertinente.

- Je ne comprends pas les étiquettes nutritionnelles
- Je ne trouve pas utile de lire les étiquettes nutritionnelles
- Je ne sais pas
- Autre → Veuillez préciser:

**Faites-vous réviser vos menus par un(e) professionnel(le) de la nutrition?**

- Oui, par un(e) diététiste professionnelle du bureau de santé publique local
- Oui, par un(e) diététiste professionnelle qui n'est pas du bureau de santé publique local
- Non
- Je ne sais pas
- Autre → Veuillez préciser:

**Qu'est-ce qui vous aide à offrir un menu santé dans votre service de garde d'enfants?**

Sélectionnez jusqu'à 3 réponses.

- Menus et gabarits de menus standardisés
- Soutien du bureau de santé publique local
- Rétroaction positive des parents
- Rétroaction positive des employés
- Rétroaction positive des enfants
- Satisfaction de voir les enfants apprécier des repas et collations santé
- Autre → Veuillez préciser:

**Lesquels, s'il y en a, sont les obstacles à la planification d'un menu santé dans votre service de garde d'enfants?**

Sélectionnez jusqu'à 3 réponses.



- Manque d'outils de planification des menus, de ressources et de recettes
- Budget limité
- Cuisine inadéquate
- Disponibilité limitée d'une variété d'aliments sains
- Contraintes de temps et de personnel pour la planification des menus et la préparation des aliments
- Connaissances nutritionnelles et compétences en préparation des aliments insuffisantes
- Manque d'opportunités de développement professionnel lié à la planification de menus
- Autre → Veuillez préciser:

***Comment le bureau de santé publique pourrait-il vous aider à planifier un menu santé dans votre service de garde d'enfants?***

Sélectionnez jusqu'à 3 réponses.

- Exemples de menus
- Recettes
- Outil de planification des menus en ligne
- Ressources pour les régimes alimentaires particuliers (p. ex., végétarisme, aliments halal, allergies)
- Exemples de politiques sur l'alimentation saine (une politique est un ensemble de principes clairement définis pour aider à prendre des décisions)
- Formation
- Outil offert en ligne pour déterminer les aliments à servir le plus souvent et les aliments à ne pas servir (p. ex., L'outil de création de menus santé du Ministère de l'Éducation de l'Ontario)
- Autre → Veuillez préciser:

***Si le bureau de santé publique devait fournir des exemples de menus aux services de garde d'enfants, lesquels vous seraient les plus utiles pour planifier vos menus?***

Indiquez toutes les réponses pertinentes.

- Exemples de menus pour régimes alimentaires particuliers (p. ex., aliments halal, végétarisme)
- Exemples de menus pour enfants allergiques
- Menus saisonniers
- Autre → Veuillez préciser:

***Si le bureau de santé publique devait fournir des recettes aux services de garde d'enfants, lesquelles vous seraient les plus utiles pour planifier vos menus?***

Indiquez toutes les réponses pertinentes.

- Banque de recettes en ligne
- Recettes modifiables en ligne (pour convertir les recettes pour différents rendements)
- Recettes pour les régimes alimentaires particuliers (p. ex., aliments halal, végétarisme)
- Recettes pour enfants allergiques
- Autre → Veuillez préciser:

### Environnement alimentaire

Les prochaines questions portent sur l'environnement alimentaire dans votre service de garde d'enfants. Un environnement alimentaire sain favorise une alimentation saine grâce aux modèles de comportement, à l'éducation, aux interactions sociales positives et aux aliments sains et sécuritaires qui y sont offerts. Des assiettes et des verres pour enfants, des repas de type familial et des activités d'apprentissage sur l'alimentation et la nutrition sont des exemples d'un environnement alimentaire sain pour les enfants.

***Veillez indiquer dans quelle mesure vous êtes d'accord avec les énoncés suivants en ce qui concerne votre service de garde d'enfants.***

N'oubliez pas que toutes les réponses sont anonymes.

	Fortement en désaccord	En désaccord	Ni d'accord ni en désaccord	D'accord	Tout à fait d'accord
J'estime que la création d'un environnement alimentaire sain est une priorité pour la gestion de mon service de garde d'enfants					
J'estime que la planification d'un menu santé est une priorité pour la gestion de mon service de garde d'enfants.					
J'estime qu'il est important d'offrir des aliments sains aux enfants.					
Je trouve que les enfants ne goûteront pas aux aliments qu'ils ne connaissent pas.					
J'appuie l'idée d'offrir uniquement des aliments sains lors des événements et des célébrations (p. ex., des parfaits aux fruits et au yogourt au lieu d'un gâteau d'anniversaire).					
Je pense que la plupart des parents appuient l'idée d'offrir uniquement des aliments sains lors des événements et des célébrations (p. ex., des parfaits aux fruits et au yogourt au lieu d'un gâteau d'anniversaire).					

***Veuillez indiquer la fréquence à laquelle les situations suivantes se produisent dans votre service de garde d'enfants.***

	Toujours	La plupart du temps	Parfois	Rarement	Jamais	Je ne sais pas
Le personnel et les enfants mangent les aliments offerts par le service de garde d'enfants.						
Les enfants décident ce qu'ils mangent et en quelle quantité parmi les aliments offerts aux repas et aux collations.						
Le personnel demande aux enfants d'essayer au moins une bouchée de chaque aliment servi.						
Le personnel permet les jouets ou les écrans pendant les repas et les collations.						
Le personnel donne autre chose que des aliments pour récompenser les enfants (p. ex., autocollants, une histoire supplémentaire).						
Le personnel utilise des aliments sains (p. ex., des sacs de pommes) ou autres choses que des aliments (p. ex., des calendriers) pour les levées de fonds.						
Le personnel offre des activités sur l'alimentation aux enfants (p. ex., jardinage et lecture de livres pour enfants sur l'alimentation saine).						
Les enfants participent à des activités et expériences pratiques culinaires à mon service de garde d'enfants.						

Le personnel traite tous les enfants de façon positive et respectueuse, peu importe la taille et la forme de leur corps, surtout en ce qui concerne la nourriture et l'activité physique.						
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***Qu'est-ce qui vous aide à créer ou à maintenir un environnement alimentaire sain dans votre service de garde d'enfants?***

Sélectionnez jusqu'à 3 réponses.

- Faire participer les enfants à la préparation et au service des repas et des collations
- Le personnel de la cuisine interagit avec les enfants
- Préparation des aliments sur place par du personnel de cuisine qualifié
- Relations positives entre les enfants et le personnel
- Repas de style familial
- Budget disponible pour soutenir l'environnement alimentaire
- Le personnel démontre des comportements alimentaires sains
- Autre → Veuillez préciser:

***Lesquels, s'il y en a, sont les obstacles à la création et/ou au maintien d'un environnement alimentaire sain dans votre service de garde d'enfants? Choisissez les trois réponses les plus pertinentes pour vous.***

Sélectionnez jusqu'à 3 réponses.

- Connaissances insuffisantes au sujet d'un environnement alimentaire sain
- Croyances et attitudes du personnel au sujet de l'alimentation et de la nutrition (p. ex., le personnel hésite à prendre ses repas avec les enfants)
- Les parents n'appuient pas les pratiques liées à un environnement alimentaire sain adoptées par le service de garde d'enfants
- Manque d'opportunités de développement professionnel sur les environnements alimentaires sains
- Autre → Veuillez préciser:

***Quelles ressources utilisez-vous actuellement pour créer un environnement alimentaire sain dans votre service de garde d'enfants?***

Indiquez toutes les réponses pertinentes.

- Planification de menus et environnements alimentaires sains dans les services de garde d'enfants : Guide pratique
- Outil d'autoévaluation des menus et de l'environnement alimentaire dans les services de garde d'enfants
- Décorez votre assiette de légumes et de fruits : Trousse d'outils destinée aux fournisseurs de services de garde d'enfants de l'Ontario

- Modules d'apprentissage en ligne : Nutrition Recommendations for Health Eating in Child Care Settings (en anglais seulement)
- DécouvrezLesAliments.ca
- Guide alimentaire canadien
- Télésanté Ontario
- Bureau de santé publique local
- Autre → Veuillez préciser:

***Comment le bureau de santé publique pourrait-il mieux vous aider à créer un environnement alimentaire sain dans votre service de garde d'enfants?***

Sélectionnez jusqu'à 3 réponses.

- Exemples de politiques sur l'alimentation saine (une politique est un ensemble de principes clairement définis pour aider à prendre des décisions)
- Possibilités de réseautage
- Ressources pour le curriculum sur l'alimentation saine
- Formation sur la création et le soutien d'un environnement alimentaire sain
- Autre → Veuillez préciser:

**Politique sur la nutrition**

Les prochaines questions portent sur les politiques sur la nutrition dans votre service de garde d'enfants. Une politique décrit clairement par écrit les principes d'une alimentation saine et est appliquée rigoureusement. Elle établit les principes qui orientent le travail du personnel et l'aident à prendre des décisions. Par exemple, une politique sur les aliments à offrir lors d'événements spéciaux indique les aliments autorisés lors de tels événements comme lors d'une fête d'anniversaire.

***Votre service de garde d'enfants a-t-il des politiques sur la nutrition?***

- Oui
- Non \*\*Passez à De quoi avez-vous besoin du Bureau de santé publique - Question 1\*\*
- Je ne sais pas \*\*Passez à De quoi avez-vous besoin du Bureau de santé publique - Question 1\*\*

***Qu'est-ce qui est inclus dans les politiques sur la nutrition de votre service de garde d'enfants?***

Indiquez toutes les réponses pertinentes.

- Exigences relatives aux aliments et aux boissons offerts lors des repas et des collations
- Marche à suivre pour les allergies ou les régimes alimentaires particuliers (p. ex., aliments halal, régime végétalien)
- Marche à suivre lors des événements spéciaux (p. ex., fêtes d'anniversaire, vacances, sorties éducatives)
- Marche à suivre pour les aliments apportés au service de garde d'enfants (p. ex., par les parents ou le personnel)
- Attentes à l'endroit du personnel pendant les repas et les collations (p. ex., manger avec les enfants, laisser les enfants se servir eux-mêmes)

- Exigences pour la formation du personnel
- Autre → Veuillez préciser:

### **De quoi avez-vous besoin du Bureau de santé publique**

Les dernières questions portent sur la façon dont le bureau de santé publique peut mieux soutenir votre travail.

### ***Si le bureau de santé publique offrait de la formation au personnel sur la planification de menus ou les environnements alimentaires sains, comment aimeriez-vous que la formation soit offerte?***

Sélectionnez jusqu'à 3 réponses.

- En personne, réservée aux employés de votre service de garde d'enfants
- En personne, pour les employés de plusieurs services de garde d'enfants
- Modules en ligne
- Webinaires
- Autre → Veuillez préciser:

### ***Quels sujets liés à la nutrition seraient les plus utiles pour votre travail à votre service de garde d'enfants?***

Pour apporter des changements positifs dans les services de garde d'enfants, les parents doivent être impliqués et appuyer ces décisions. Quelles options parmi les suivantes seraient les plus utiles pour votre service de garde d'enfants?

Sélectionnez jusqu'à 3 réponses.

- Feuilles d'information
- Messages pour infolettres aux parents
- Messages pour médias sociaux pour votre service de garde d'enfants
- Vidéo en ligne sur l'importance de la saine alimentation dans les services de garde d'enfants pour les parents
- Mon service de garde n'a pas besoin d'aide pour obtenir la participation des parents
- Autre → Veuillez préciser:

Vous avez terminé le sondage. Pour envoyer vos réponses, veuillez cliquer « Soumettre ».

Merci d'avoir répondu au sondage.

## Appendix B: Introduction Email to Child Care Stakeholders

### Email to Child Care Stakeholders - English

SUBJECT LINE: Menu Planning and Supportive Nutrition Environments Child Care Survey

Greetings!

Ontario Dietitians in Public Health (ODPH) is excited to launch the Menu Planning and Supportive Environments Child Care Survey in English and French.

This survey is collecting information from child care settings in Ontario to understand the menu planning needs and to better support child care centres to offer healthy foods and beverages.

Please forward the survey link below directly to:

- Licensed child care operators (home and centre based) that care for children 0-4 years of age;
- Child care staff that make decisions regarding their menu; and
- Child care staff that support children during meals and snack times.

The survey will take approximately 15-20 minutes to complete and will close on February 21, 2020.

Link to survey.

NOTE: Use the arrow in the top right corner to access the French survey.

Please forward any questions about the survey to:

Marcia Dawes, MPH, RD

Karen Wismer, MSc, RD

Marcia.dawes@peelregion.ca

Karen.wismer@wdgpublichealth.ca

Region of Peel – Public Health

Wellington-Dufferin-Guelph Public Health

Many thanks for your support with this project!

To see ODPH's current child care resources in French and English visit <https://www.odph.ca/child-care-resources>.

### Email to Child Care Stakeholders - French

SUJET: Sondage sur la planification de menus et les environnements alimentaires sains dans les services de garde d'enfants

Bonjour !

Les diététistes en santé publique de l'Ontario (DSPO) sont contentes de lancer le sondage sur la planification de menus et les environnements alimentaires sains dans les services de garde d'enfants.

Ce sondage recueille des renseignements auprès des services de garde d'enfants en Ontario afin de comprendre les besoins en matière de planification de menus pour mieux aider les services de garde à offrir des aliments et des boissons saines.

Veuillez envoyer le lien au sondage directement aux:

- exploitants d'un service de garde agréé (en milieu familial et dans un centre) qui s'occupent d'enfants âgés de zéro à quatre ans;
- membres du personnel qui prennent des décisions au sujet de leur menu; et,
- membres du personnel qui aident les enfants pendant les repas et les collations.

Lien vers le sondage.

Merci beaucoup pour votre appui envers ce projet!

Pour consulter les ressources actuelles de la DSPO pour les services de garde, visitez le:

<https://www.odph.ca/ressources-en-fran-ais>.