

# Policy on Feeding Infants

**Note:** If your state licensing regulations on feeding infants are stricter than Bright Horizons policy and procedures, the state regulations always supersede.

## General Feeding Information for Infants

Feeding time should be a social occasion, an excellent time to build a close relationship with an infant. Primary caregivers should sit at eye level, make eye contact, and communicate with the baby while feeding. Whenever possible, the same caregiver should feed an infant for most of that infant's feedings. When the caregiver is consistent, she is more likely to understand the infant and know how to respond appropriately.

Bright Horizons policy is to feed an infant based on his/her cues unless the child's parent/guardian and/or medical provider should provide written instructions otherwise. Cues such as the following send signals that the infant is ready to feed.

- Opening the mouth
- Making suckling sounds
- Moving hands at random

Responding to the infant's feeding cues provides feelings of trust and security, meeting the nutritional and emotional needs of the infant. Cues such as turning away from the nipple, increased attention to surroundings, and closed mouth, are all indications of satiation.

- Respond to early signs of hunger. Do not wait until the baby is upset or crying from hunger.
- A pacifier should not be offered to a hungry infant
- Never force a baby to eat or finish a bottle or a serving of solid food.

Always wash your hands and sanitize work surfaces before preparing food and/or bottles and before feeding infants. Wash the infant's hands before and after he or she eats.

## Parent Involvement

For those mothers who are breastfeeding and have the ability to come to the center to feed their child, a comfortable area should be provided in the center for this purpose. (NAEYC 5.B.09)

## Storage of Food and Bottles

*Because infant bottles are often alike, as is their food, a color-coding system should be in place in each infant classroom for all food and bottle storage.*

### Example

Each child has an individual basket in the refrigerator and cabinet or cubby solely for the purpose of his or her food and bottle storage. This basket will have a colored mark unique to the child that will also be put on the child's food containers/bottles each day, i.e., blue dot on basket and each food container, or blue basket and blue dot put on each food container. A description of the system and a list of the color codes used for each child should be posted in the classroom.

## Weaning

When the time comes, talk with parents/guardians about weaning their baby from the bottle and when to introduce solid foods or new foods. Weaning efforts should be coordinated between the child's home and the center.

## Breast Milk Precautions

Breast milk is a body fluid and should be treated as such. You should clean up breast milk spills like any other body fluid:

- Wipe up the spill wearing disposable gloves.
- Dispose of as directed. See the *Procedures for Standard Precautions — Bloodborne Pathogens*.
- Clean the area with a bleach and water solution.

**A child should never drink another child's breast milk.** If this happens, the incident should be taken seriously. Although the risk of any illness being transmitted is very small, should it occur, proceed as follows:

- Inform the parent/guardian of the child given the wrong bottle that his or her child drank another child's breast milk.
- Ask the parent/guardian to notify his or her child's physician immediately.
- Inform the mother whose milk was consumed about the switch and ask her:
  - how the milk was handled before it was brought to the center
  - if she would be willing to share any pertinent medical information or be tested for any communicable illnesses
  - if she would be willing to allow a confidential call between her doctor and the other child's pediatrician

## Preparing and Feeding an Infant a Bottle

### Overview

Outlined below are Bright Horizons procedures for

- storing bottles of formula and milk
- storing bottles of breast milk
- warming a bottle for feeding an infant
- feeding an infant a bottle of formula, milk, or breast milk

Infants younger than 12 months will not be fed cow's milk and only whole milk or reduced fat (2%) milk (recommended by the child's medical provider) will be fed to children between 12 to 24 months of age who are not on formula or breast milk (NAEYC 5.B.13). No other milk products, i.e., skim milk, milk containing 1% or 2% butterfat or reconstituted nonfat dry milk will be fed to any child unless under the direction of the parent and the child's health care provider.

Bright Horizons recommends that formula be brought from home in ready-to-feed concentrations. However, if preferred, center staff can prepare formula onsite according to the instructions on the label and the formula is clearly labeled with the child's full name and date. If the parent/guardian wishes that the formula is prepared in a way other than what is stated on the directions, authorization from the child's medical provider is also required. Only the scoop from that comes with the can of formula should be used for measuring purposes as these may vary between manufacturers and products. Sterilized bottles should be brought from home. ***All bottles and caps must be labeled with the child's full name.***

**Note:** Solid food should not be fed in a bottle unless the child has specific written instructions from a physician. Solid food in a bottle is not only a choking hazard, it also teaches the child to eat solid foods incorrectly.

## Use of Glass Bottles

Families may request the use of glass bottles for their child because many infant bottles continue to be made with the chemical BPA (Bisphenol A). Studies suggest that the chemical leaches into the bottle, causing harm to the infant when ingested with the contents of the bottle. If allowed by your state licensing agency, glass bottles may be used but the following are some options to first discuss with the family to minimize risk:

- Use glass bottles at home and plastic at the center
- Bring milk/formula to the center in glass bottles and contents will be transferred to plastic bottles (provided by the family) for feeding
- Many stores (such as Whole Foods) sell baby bottles without BPA: look for numbers 1, 2, 4 or 5 on the bottom of the bottle or those stamped BPA Free.
- Use glass bottles with a rubber grip or silicone sleeve (sold as a unit). This reduces the risk of dropping the bottle while feeding.

## Procedure

### Storing Bottles of Formula and Milk

1. **Verify that bottles of formula or milk are properly labeled.** As soon as bottles of formula or milk are brought to the center, verify that each bottle is labeled with easy-to-read labels, showing
  - the infant's full name
  - the date prepared (formula)
  - an expiration date
  - the color code (See *Storage of Food and Bottles* in the *Policy on Feeding Infants* for detail.)

**Note:** Do not accept any bottles unless they are labeled with the child's full name, and do not use any unlabeled bottles that have been accidentally accepted.

2. **Refrigerate bottles of formula and milk immediately.** Separate storage bins for each infant's feedings should be provided and clearly labeled with the child's full name and color. (See *Policy on Feeding Infants.*) Refrigerator temperature should be kept between 39° and 45°F.

Do not leave prepared bottles standing on the counter.

**Note:** Bottles should be brought in and taken home daily. If bottles remain in the center, all unused bottles of formula should be removed from the refrigerator after 24 hours and discarded. Unused bottles of milk should be removed after 48 hours and discarded. Powdered formula should be discarded after the stated shelf period (expiration date).

## Storing Bottles of Breast Milk

1. **Verify that bottles of breast milk are properly labeled.** As soon as bottles of breast milk are brought to the center, verify that each bottle is labeled with easy-to-read labels, showing
  - the infant's full name
  - the date collected
  - an expiration date
  - the color code (See *Policy on Feeding Infants*.)

**Note:** Each bottle of breast milk will also have a Bright Horizons *red rubber band* placed around it to distinguish it from other bottles by both sight and touch.

2. **Refrigerate or freeze bottles of breast milk immediately, as appropriate.**
  - If the breast milk will be used within 24 hours, store the bottles immediately upon receipt in a clean, tightly sealed, labeled, and dated container that is placed in the rear of the refrigerator (in the child's labeled storage bin).
  - Freeze breast milk if it will not be used within 24 hours, in two-to four-ounce servings. Place the bottles in the rear of the freezer, not near the door.

**Note:** Milk may be frozen for one month in an average freezer. Discard frozen breast milk after one month. Although some literature suggests that breast milk may be frozen for a longer period, given the types of freezers in our centers and the frequency with which they are opened, it is recommended that it be kept frozen no longer than one month.

**Note:** Remove all unused bottles (not previously frozen) of breast milk from the refrigerator after 48 hours and discard the contents.

## Infant Feeding Procedure

*Infant feeding will be based upon the primary caregiving system.* Only the infant's primary caregiver or designated substitute will handle the bottle from the refrigerator to the crockpot, from the crockpot to the child's mouth. In some instances, the primary caregiver may ask their coworker to handle the process or a portion of the process. This must be noted in writing on the infant's daily sheet.

## Warming Bottles of Formula, Milk, and Breast Milk

**Note:** Regardless of whether you are preparing a bottle of formula, milk, or breast milk, verify that you have the correct bottle for the child. Double-check the bottle to ensure that it is clearly labeled with the full name of the child for whom it is intended.

1. **Wash your hands and sanitize work surfaces.**

2. **Thaw frozen breast milk.** If you are using frozen breast milk, remove the bottle from the freezer and place it in a container of cool running water, gently swirling it periodically to evenly distribute the temperature or place it in the refrigerator to defrost if there is time. Use the oldest bottle of breast milk first.

Fat in breast milk may separate and rise to the top as it thaws. Gently swirl the container to mix any fat that may have separated.

Previously frozen breast milk thawed in the refrigerator must be used within 24 hours.

3. **If appropriate, prepare the formula for the infant** according to the parent/guardian's written instructions.
4. **If you are using a refrigerated bottle, get the bottle.** Use the oldest bottle of breast milk first.
5. **Check the label on the bottle.**
  - Check the label on the bottle immediately upon removing it from the storage area.
  - Check the label again before marking your initials on the child's **Infant Communication Form**.
6. **Note that you have verified the labeling on the bottle on the child's Infant Communication Form.** Mark a checkmark and your initials in the **Bottle Check first column** of the **Feedings** section on the **Infant Communication Form**.
7. **Check your state licensing regulations to determine what means are acceptable in your state to warm bottles and food.** Many states are moving away from allowing slow-cooking devices and electric bottle warmers in the classroom. Running the bottle under warm tap water or placing the bottle in a container of warm tap water is acceptable; cordless bottle warmers may also be acceptable.
  - Bottles and infant foods can be served cold from the refrigerator and do not have to be warmed; however, if the family requests that they be warmed, the following methods can be used:
    - Run them under warm tap water
    - Place them in a container of water no warmer than 120°F for no longer than 5 minutes
    - If the use of a slow-cooking device\* is allowed, follow these steps:
      - Place the bottle in the device set on low (no higher than 120° F) for no more than five minutes. (NAEYC 5.B.10) Water should not be boiling.
      - Make certain only clean bottles are placed in the device.
      - Heat only one bottle at a time when possible.
      - Change the water in the device and sanitize daily.
  - Do not allow bottles to warm at room temperature.

*\*Place slow-cooking devices used to warm baby bottles as far back on the counter as possible, with electric cords tucked behind. To prevent accidental burns to young toddlers, avoid using towels under the device, or fold the towel so that it sits only under the device and does not reach the edge where toddlers might reach up and pull on it.*

**Note:** Do not use a microwave oven to heat a bottle. Microwave ovens heat unevenly and place children at risk for serious burns. (NAEYC 5.B.10)

8. **Warm the bottle for young infants to “tepid”** (about the same temperature as the underside of your wrist or forearm).

Older infants may need to only have the chill removed, or may even prefer the bottle cool.

9. **Check the label on the bottle.** Upon removing the bottle from the crockpot, check the label with a coworker to verify that you have the correct bottle for the child.

Mark a checkmark and your initials in the **Bottle Check second column** of the **Feedings** section on the **Infant Communication Form**.

**Note:** Infants should not be held while removing a bottle or food from the crockpot or while preparing a bottle or food that has been warmed in some other way.

10. **Check the temperature of the bottle’s contents.** Shake the bottle, then sprinkle a few drops from the bottle on your wrist or forearm to test the temperature of the contents.

If the drops feel “hot,” let the bottle cool a few minutes and then test the temperature again. Do not offer an infant a “hot” bottle.

**Note:** According to the American Academy of Pediatrics in *Caring for Our Children, the risk of transmission of infection to caregivers who are feeding expressed human milk is very low either during feeding or from milk that the infant regurgitates. Wearing of gloves to feed expressed human milk is unnecessary; however, as a precaution, caregivers with open cuts on their hands should avoid getting expressed human milk on their hands, especially if they have any open skin or sores on their hands.*

## Feeding an Infant a Bottle of Milk

1. **Wash the infant’s hands.**

**Note:** *Before feeding, do one last verbal check with your coworker to ensure you are feeding the correct bottle to the child. State: “This is (child’s name) food/bottle, this (child’s name) that I’m feeding now.” If you are alone, this step must still be spoken aloud.*

2. **Hold the infant while bottle-feeding.** Sit at eye level, make eye contact, and communicate with the baby while feeding.

- If it is necessary to feed more than one baby at a time, hold one infant while placing another baby who can hold his or her own bottle close to you, where you can maintain eye and verbal contact.

**Note:** If you put a bottle down, make sure that you pick up the correct bottle for the child before you resume feeding the child. Also, make sure that a mobile infant does not pick up the bottle.

3. **Hold the infant’s head a little higher than the rest of the body.** This helps to prevent milk from backing up into the Eustachian tubes and possibly causing a middle ear infection.

4. **Burp the infant as appropriate.** Be aware of each child's need for burping and manner of being burped. Some babies need to be burped after a small amount of formula or milk, while others can take an entire bottle before needing to be burped.

**Note:** Children should not be allowed to continue to feed themselves or continue to be assisted with feeding themselves if they begin to fall asleep while eating. Caregivers/teachers should check that no food is left in a child's mouth before laying a child down to sleep. Continuing to eat while falling asleep puts the child at great risk for gagging or choking.

## After Feeding

1. **Wash the infant's hands after he or she eats.**
2. **After one hour, discard any unused breast milk, formula, or milk left in the bottle.**  
Do not re-refrigerate or rewarm a partially consumed bottle. You may leave the bottle at room temperature for up to one hour in case the child wants more.

**Note:** When infants feed, the milk or formula is inoculated by the saliva and bacteria in the infants' mouth. When fed over a period of an hour, bacteria could multiply to spoil the milk or formula and should be discarded at this point.

3. **Once empty, rinse the bottle and nipple thoroughly, and place in the child's cubby or bag.**
4. **Do not refreeze previously frozen breast milk.**

## Teacher Transitions

As teachers leave and others come in for afternoon shifts or break coverage, please take time to review which children are still in attendance, those who are sleeping, those who will need to be fed, where their food and bottles are, and any other relevant information that would need to be shared with their parents/guardians at the end of the day. Make note of any new children who may have started, those who may have new foods or formula introduced, etc.

## At the End of the Day

At the end of the day, use soapy water to wash the liner of the crockpot used for warming bottles, then rinse with a mild bleach solution ( $\frac{1}{4}$  cup bleach to 1 gallon water, or 1 tablespoon bleach to 1 quart water) and allow to air dry.

# Preparing and Feeding an Infant Solid Food

## Overview

Outlined below are Bright Horizons procedures for

- storing containers of solid food
- preparing solid food
- feeding an infant solid food

Age-appropriate solid foods may be introduced no sooner than when the child has reached the age of four months, but preferably six months and as indicated by the individual child's nutritional and developmental needs. Solid foods or fruit juices should not be introduced to infants less than 4 months of age unless done so upon the recommendation of the parent/guardian and the child's pediatrician. If juice is served, it should be limited to no more than four ounces per child daily. (NAEYC 5.B.11)

**Note:** Honey should not be given to children under one year of age due to bacterial spores; however, it is harmless for older children.

## Procedure

### Storing Solid Foods

1. **Verify that jars/containers of solid food are properly labeled and color-coded.** As soon as jars/containers of solid food are brought to the Center, verify that they are labeled with easy-to-read labels, showing the child's full name and date, and the color-code.
2. **If appropriate, refrigerate the food.** Unopened commercially-prepared solid foods can be stored on the counter or in a cabinet. However, once a jar has been opened, or if a parent/guardian prepares food for his or her child, store the food in the refrigerator. See *Storage of Food and Bottles* in the *Policy on Feeding Infants* for detail on food storage systems.

Refrigerated food should be covered and labeled, showing

- the infant's full name
- the date the jar was opened or the food prepared
- the color code

Discard any opened, unused food after 24 hours.

### Preparing Solid Foods for an Infant

1. **Wash your hands and sanitize work surfaces.**
2. **Verify you have the correct jar(s)/container(s) of food for the child.** Double-check the jar(s)/ container(s) to ensure that they are clearly labeled with the full name of the child for whom they are intended.

Note the date recorded on an opened jar/container of food. Opened jars/containers of baby food should be used within 24 hours.

3. **Ensure that new jars of commercially prepared baby food have not been opened.** Before opening jars of commercially prepared baby food, check to make sure that the vacuum seal is not broken. If the seal is broken, do not use. Wash the outside of the jars with soap and warm water to clear it of any contaminants.
4. **Note that you have verified the labeling on the jar(s)/container(s) on the child's Infant Communication Form.** Mark a checkmark and your initials in the **Comments** column of the **Feedings** section on the **Infant Communication Form**.
5. **Pour small amounts of food into feeding bowls.** Do not feed infants directly from a baby food jar. Saliva from the feeding spoon can promote bacterial growth.



**Note:** Do not use a microwave oven to heat an infant's food. Microwave ovens heat unevenly and place children at risk for serious burns. (NAEYC 5.B.10)

## **Feeding an Infant Solid Foods**

1. **Wash the infant's hands, and put a bib on the child.**
2. **Place the infant in a feeding chair or at a low table in an age-appropriate chair.**
  - When feeding more than one baby at a time, place babies so they can see one another.
  - Sit with babies while they are eating, maintaining eye contact and language interactions.
3. **For children who are self-feeding, place some of each food in front of them.**
  - Food should not be placed directly on the table due to the likelihood of contamination.
    - If using a feeding chair, food can be placed on the tray if it is made of plastic, is in good repair, and is free from cracks, etc. It can be made safe if it is washed and sanitized before placing a child in the chair for feeding and if it is washed and sanitized after each child has been fed. This is not the case for wood or metal, other than stainless steel.

## **After Feeding**

1. **Wash the infant's hands, face, etc., after he or she eats.**
2. **Discard uneaten food from the bowls.** Do not return uneaten food to the original baby food containers.
3. **Refrigerate remaining food.**
  - Cover each opened container of baby food.
  - Label the containers with the infant's full name.
  - Note the date the containers were opened.
  - Place the containers in the refrigerator.

*Updated 7/2012 According to Caring for Our Children, National Health and Safety Performance Standards Guidelines for Early Care and Education Programs, Third Edition*