



Choking Prevention, Safer Weaning and Introduction to Solid Foods

Aim

At Clare House Nursery, we are committed to providing a safe, positive and enjoyable mealtime experience for every child. We recognise that introducing solid foods is an important stage in a child's development and that careful planning, appropriate supervision and partnership working with families are essential to reducing the risk of choking while promoting healthy eating habits and independence.

Our aim is to ensure that all children are supported according to their individual stage of development, with food prepared safely and staff trained to recognise and respond appropriately to choking emergencies.

Partnership with Parents

We recognise that every child develops at their own pace. Solid foods will only be offered when parents confirm that weaning has started at home and the child is developmentally ready. Staff will also consider whether the child is showing signs of readiness for solid foods, including good head and neck control, the ability to sit with minimal support, an interest in food and the ability to coordinate food safely to their mouth.

The nursery will not introduce solid foods without prior discussion and agreement with the child's parents or carers.

Parents and carers will be asked to provide information about:

- Foods already introduced.
- Foods not yet introduced.
- Allergies or suspected allergies.
- Cultural, religious or medical dietary requirements.
- Feeding preferences and routines.
- Any advice received from health professionals.
- Any foods the child particularly enjoys or dislikes.

Parents are encouraged to maintain regular communication with their child's Key Person regarding their child's progress with weaning, food textures and any changes to their dietary needs. This information will be reviewed regularly and updated whenever a child's needs change.

Safe Weaning Practice

Staff will ensure that:

- Every child is always closely supervised whilst eating or drinking.
- Children are seated upright in an appropriate chair during meals and snacks.

- Children are never fed whilst lying down, walking, running, climbing, playing or sleeping.
- Food is prepared according to each child's individual stage of development, chewing ability and swallowing skills rather than their age alone.
- Food textures are introduced gradually in partnership with parents as children develop the skills to manage them safely.
- Children are encouraged to self-feed where developmentally appropriate whilst remaining closely supervised.
- Practitioners remain actively engaged with children during mealtimes and do not undertake tasks that could distract them from supervising children whilst eating.
- Staff remain within sight and hearing of children throughout meals and snacks.
- Children are never left alone with food or drink.
- Mealtimes are calm, relaxed and free from unnecessary distractions.
- Children are encouraged to eat at their own pace and are never rushed, forced or pressured to eat.

Food Preparation

Food provided for babies and young children will always be prepared to minimise the risk of choking.

Where appropriate:

- Foods will be cooked until soft.
- Fruit and vegetables will be cut into age-appropriate sizes.
- Grapes, blueberries and cherry tomatoes will always be cut lengthways into quarters.
- Hard fruits and vegetables will be grated, finely chopped, mashed or cooked until soft where appropriate.
- Meat and fish will be prepared in manageable pieces with all bones removed.
- Nut butters will only be offered as a thin spread and never from a spoon.
- Whole nuts will never be offered to children under five years of age.
- Foods identified as presenting a higher choking risk will only be offered where they have been prepared in accordance with current NHS guidance or will not be offered if unsuitable for the child's stage of development.

Foods requiring particular care include, but are not limited to:

- Whole grapes
- Cherry tomatoes
- Blueberries
- Whole nuts
- Popcorn
- Marshmallows
- Hard sweets
- Large chunks of raw apple or carrot
- Sausages
- Large pieces of meat
- Thick spoonfuls of nut butter.

Choking Prevention and Emergency Response

Clare House Nursery recognises that gagging is a normal part of learning to eat and differs from choking, which is a medical emergency requiring immediate action.

All staff responsible for feeding children receive training in:

- Safe weaning practices.
- Choking prevention.
- Recognising the difference between gagging and choking.
- Emergency procedures.
- Paediatric First Aid.

Children are always closely supervised whilst eating and drinking and are never left alone with food or drink.

At least one practitioner holding a current **Paediatric First Aid** qualification will always be present during meals and snack times, enabling an immediate response should a choking incident occur.

If a child shows signs of choking, staff will immediately follow current UK Paediatric First Aid guidance by administering the appropriate first aid for the child's age whilst ensuring that another member of staff contacts the emergency services without delay where required.

Following any choking incident, the Nursery Manager will ensure that the incident is fully recorded, parents or carers are informed and nursery procedures are reviewed to identify any additional measures required to reduce future risk.

LifeVac® Airway Clearance Device

As an additional precaution, Clare House Nursery keeps a **LifeVac® Airway Clearance Device** on site.

The LifeVac® is **not** a replacement for recognised paediatric first aid procedures, staff training or emergency medical treatment. It is not regarded as a first-line intervention.

In the event of a choking emergency, staff will always follow current UK paediatric first aid guidance, including the recognised sequence of back blows and chest thrusts or abdominal thrusts (as appropriate to the child's age), whilst ensuring emergency services are contacted without delay.

The LifeVac® would only be considered in exceptional circumstances where recognised first aid interventions have been unsuccessful, emergency services have been called and the child's airway remains obstructed.

Any use of the LifeVac® will be recorded, reported to the Nursery Manager, shared with parents or carers and reviewed as part of the nursery's incident management procedures to identify any learning or improvements to practice.

