

Baby Led Weaning (All Nations)

Introduction

Every infant child has the right to good nutrition (Convention on the Rights of the Child).

This factsheet includes information about Baby Led Weaning and ways in which childcare providers may work with babies and families to support this method of feeding whilst the baby is at the setting.

Research

Guidelines recommend that babies start to eat solid food at 6 months, starting with small amounts of food and increase this gradually as the child gets older. Food consistency and variety should also gradually increase as the child gets older, as should the number of times that the child is fed: the World Health Organisation (WHO) Guidelines recommend 2-3 meals per day for infants 6-8 months of age and 3-4 meals per day for infants 9-23 months of age, with 1-2 additional snacks as required.

There are lots of websites, forums and information about supporting weaning, using the pureed type foods method and the more recent method of starting straight onto finger foods known as Baby Led Weaning.

What is Baby Led weaning?

Baby Led Weaning, quite simply, means letting your child feed themselves from the very start of weaning, rather than taking food from a spoon offered by an adult. The term was originally coined by Gill Rapley, a former health visitor and midwife. <http://www.babyledweaning.com/>

Baby Led Weaning means no purees, no ice cube trays, no food processor, no potato masher and no baby rice. This method is becoming popular as babies can

often enjoy eating the same food as the rest of the family.

Baby-led weaning is a way of introducing solid foods by letting babies choose what they eat and feed themselves when they are ready. This means it is more likely to tie in with their ability to take food into their mouth, move it around and swallow safely. Although it can be messier at first, parents often say that babies who can choose what to feed themselves have wider food tastes.

www.nct.org.uk/parenting/introducing-solidfoods

www.nhs.uk/conditions/pregnancy-and-baby/pages/solid-foods-weaning.aspx

Health and hygiene

Washing bowls, plates and spoons in hot, soapy water, and rinsing them afterwards or washing them in the dishwasher is sufficient for babies over 6 months of age and they do not need sterilising. This is due to babies digestive and immune systems being more mature, so they are less likely to pick up an infection. Bottles still require sterilising up until a baby is 12 months old.

<https://www.babycentre.co.uk/x25010519/do-i-need-to-sterilise-weaning-equipment-before-feeding-my-baby#ixzz4kYn9XGp1>

How can Early Years Settings manage this?

It is recommended that methods of weaning are discussed with parents during settling in visits to find out exactly how the child is fed at home. Following these discussions childcare providers can then work together with the parents to meet the child's individual needs.

If the families are using a baby led approach, then working together with the parent will make this a smoother transition. Some practitioners may feel anxious about this way of feeding so you may need to look at further training for staff and carry out a full risk assessment, which covers smaller ratios during meal times. This should be applied just as an allergy or intolerance would be.

Having regular meetings with parents and sharing progress both at home and in the setting will help.

Top tips

The following NHS website has further information about how to support a baby or child that may be choking as well as a video of what to do if a young child is choking.

<http://www.nhs.uk/Conditions/pregnancy-and-baby/pages/helping-choking-baby.aspx>

Where possible, liaise with your local health visiting team to ensure parents are receiving consistent advice.

Review and update your Food and Drink Policy about how you work with parents regarding weaning and which method you use.

Gagging v Choking

Gagging is caused when a baby either has too much food in their mouth or if the food starts to go too far back before they have chewed and broken it down sufficiently. Inside the mouth there is an area known as the gag reflex. When an object touches the gag reflex we gag to remove the object from our mouth and thus prevent ourselves from choking. In babies the gag reflex is much further forward than in adults and is the body's way of offering extra precaution.

Choking is when a person's airways are blocked causing the person to stop breathing.

Millie's Mark

Supervising children during meal times, having an up to date paediatric first aid training certificate and using mock scenarios all help to prevent incidents.

Millie's Mark is a special endorsement for settings that have 100% paediatric first aid trained staff who work directly with children and have gone above and beyond minimum requirements. For further information please visit www.milliesmark.com

The contents of this work are exclusively the property of National Day Nurseries Association (NDNA). NDNA would like to point out that although the information in this factsheet has been completed and checked by experts, it only provides a guide. As legislation and inspection criteria change on a regular basis to reflect new practices it is essential that you confirm legal matters with a solicitor and keep up to date.

NDNA cannot accept any responsibility if you implement the guidance without first confirming your legal position with a suitably qualified person.

We hope that you will continue to use this factsheet as a useful tool for guidance and would welcome any feedback. If you have any queries or concerns about the factsheet please do not hesitate to contact us.

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