Increasing Access to Drinking Water and Other Healthier Beverages in Early Care and Education Settings

National Center for Chronic Disease Prevention and Health Promotion
Division of Nutrition, Physical Activity, & Obesity
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Purpose and Scope of this Guide

The purpose of this guide is to explain why your early education child care center or family child care home should serve water to children under your care and to give you information on how to do it. It also describes how providing water fits in with serving other beverages. In addition, the guide includes information on how those participating in the Child and Adult Care Food Program (CACFP) can remain in compliance with CACFP regulations in their efforts to serve water.
Section 1
Importance of Drinking Water and Other Healthier Beverages
Why Provide Access to Drinking Water in Early Care and Education Settings?

Beverages contribute to the quality of children's diets. In addition, children often continue their early diet habits into adulthood. Because of these factors, teaching young children to have a healthy diet is a priority. Many children in the United States participate in early care and education (ECE) programs before starting kindergarten. About 70% of 4- and 5-year-old children and 43% of 3-year-old children attend ECE centers. Because of their potential to reach so many young children, ECE settings are good places to teach them healthy eating behaviors.

The United States is having an epidemic of obesity. Unfortunately, even some of our youngest children are affected and, currently, nearly one of four children 2–5 years of age is overweight or obese. Beverages can be a large source of calories for preschool children. Drinking too much soda, sports drinks, and fruit-flavored drinks can lead children to take in excess calories and added sugars.

In contrast, tap water is a low cost, calorie-free drink. Drinking tap water can reduce added sugars and extra calories when it is served to children instead of sugary drinks and excess juice. Tap water also helps to hydrate children's growing bodies, and fluoridated tap water can help prevent cavities.

Water Access Requirements and Recommendations

The federal Healthy, Hunger-Free Kids Act of 2010 established a requirement to make water available to children at child care centers and family child care homes participating in the Child and Adult Care Food Program (CACFP). Specifically, the act requires centers and homes to make water available to children throughout the day, including at meal times and upon children's requests. It is important to note that, although water is not a component of a reimbursable meal, it can be served during meals and snacks along with milk and other healthier beverages. However, plain water should not be given to infants younger than 6 months of age, according to expert recommendations published in *Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Early Care and Education Programs, 3rd edition* (*Caring for Our Children*).

In addition to federal law, many states have separate licensing regulations on water in ECE settings. As of 2013, ECE licensing regulations in 30 states required all licensed providers to make drinking water available to children whether they were inside or outside the building. In many states, CACFP nutrition requirements apply to non-CACFP centers and family child care homes as well.
The importance of drinking water is highlighted in many dietary recommendations. The *Dietary Guidelines for Americans, 2010* recommends that Americans “reduce the intake of calories from solid fats and added sugars.” Replacing sugary drinks with water is a good way to reduce children’s intake of added sugars. Ready access to drinking water throughout the day, both indoors and outdoors, is a recommended ECE standard included in the third edition of *Caring for Our Children*. The First Lady’s Let’s Move! Child Care initiative also features a recommendation that drinking water be visible and available inside and outside for self-service throughout the day.

**Drinking Water Quality and Water Testing**

Ensuring the quality and safety of the water you serve to the children in your care is important. You should be aware of the regulations and performance standards regarding the testing of drinking water in ECE facilities in your locality. These regulations and standards differ, depending on whether you receive water from a municipal water utility or from a private well.

**If Your Facility Gets Water from a Municipal Water Utility…**

The United States has one of the safest drinking water supplies in the world. If your facility gets water from a water utility, then the water you receive is tested regularly according to Environmental Protection Agency (EPA) standards. Contact your local water utility for the most recent water quality report.

Though tap water is tested before it enters the water system, it can sometimes become contaminated by lead, copper, or other contaminants from pipes and plumbing fixtures. These contaminants may make water unhealthy to drink, particularly for young children. For this reason, *Caring for Our Children* recommends that drinking water be tested with the assistance of the local health authority or state drinking water program to determine whether lead and copper levels are safe. *Caring for Our Children* also recommends that you keep copies of water testing reports on file for parents and regulators to see.

Please see the following EPA report for more information on ways to ensure that your tap water is safe:

- *Drinking Water Best Management Practices: For Schools and Child Care Facilities Served by Municipal Water Systems*  
  http://water.epa.gov/infrastructure/drinkingwater/schools/upload/epa816b13002.pdf

More general information on tap water can also be found in the EPA report:

- *Water on Tap: What You Need to Know*  
  http://water.epa.gov/drink/guide/index.cfm
If Your Facility Uses Private Well Water…

If your facility obtains drinking water from a private well, there may be state regulations regarding water testing and water quality. Caring for Our Children recommends that ECE programs using private well water test the water every year or as required by the local health department to ensure the water is safe.8

Please see the following EPA report for more information on ways to ensure that your tap water is safe:

- *Drinking Water Best Management Practices: For Schools and Child Care Facilities with Their Own Drinking Water Source*
  
  http://water.epa.gov/infrastructure/drinkingwater/schools/upload/epa816b13001.pdf

Milk, Juice, and Other Beverages

While the focus of this guide is on drinking water, other beverages such as milk and juice provide important nutrients to children in ECE settings. There are different requirements and recommendations regarding water, juice, milk, and sugary drinks that can vary according to the age of the child. ECE facilities that receive reimbursement from CACFP must follow nutrition standards on food and drinks served to children (http://www.fns.usda.gov/cacfp/meals-and-snacks).

Milk

Facilities obtaining CACFP meal reimbursement are required to provide toddlers 2 years of age and older 1% or skim milk, or equivalent non-dairy milk, at breakfast, lunch, and supper (dinner). It is recommended that toddlers 1 year of age be served whole milk. Water cannot replace required milk in the CACFP meal pattern, but water can be served at the table with milk at meals and snack times. Outside of meals and snack times, plain water should always be available as the default beverage for children.

Juice

Full-strength 100% juice can be served to satisfy the fruit and vegetable requirements of the CACFP child meal pattern. Juice can count as the fruit/vegetable component for breakfast or snack and as one of the two servings of fruit or vegetables required during both lunch and supper.13 CACFP does not currently limit the serving size of juice that can be served to children or the total amount of juice that can be served to children during the day.
However, some state agencies have stricter requirements and only allow a certain amount of juice either per day or per week. *Caring for Our Children* recommends that juice be limited to 4–6 oz per day for children 1 year to 6 years of age. This includes juice consumed at home. Regarding infants, *Caring for Our Children* also recommends that ECE providers do not give any fruit juice to infants younger than 12 months of age, and instead serve mashed or pureed fruit to infants 7 months to 1 year of age.

### Why Limit Juice to 4–6 oz per Day for Children 1 Year to 6 Years of Age?

Even though juice contains important nutrients, a serving of juice usually contains more calories than a serving of whole fruits or vegetables. For example, a half cup (4 fluid oz) of apple slices contains 28 calories. A half cup of apple juice contains 58 calories, more than twice the calories of the apple slices! Serving children more juice than the recommended amount can result in children taking in extra calories and potentially becoming overweight or obese.

To avoid having children drink too much juice, consider serving whole fruits or vegetables instead; doing this will satisfy the CACFP fruit and vegetable requirements. Whole fruit is more nutritious than fruit juice because it provides dietary fiber. In addition, though juices contain more calories, they do not make children feel as full as whole fruits. When you serve whole fruit or vegetables as part of a snack, water can be served as the snack drink. However, plain water should not be served to children younger than 6 months of age.

### Juice Drinks and Other Sugary Drinks

Both Let’s Move! Child Care and *Caring for Our Children* recommend that sugary drinks not be served in ECE settings. These drinks include fruit drinks or juice drinks that are not 100% juice, sports drinks, sweet tea, flavored milk, or soda.

Fruit drinks usually contain very little real juice and large amounts of added sugar. As of 2013, 30 states have regulations that prohibit serving juice that is not 100% juice in all licensed ECE settings. Unfortunately, it is not always easy to tell the difference between 100% juice and sugar-sweetened juice drinks based on the product name or packaging. For example, many products labeled as providing “100% Vitamin C” are not 100% juice. Carefully read the nutrition labels and ingredient lists on juices to be sure they are 100% juice before serving to children. See page 42, “Be a 100% Juice Detective,” for sample nutrition labels showing what to look for when selecting juice.
Section 2
Recommendations on Serving Water and Other Healthier Beverages in Early Care and Education Settings
Performance standards related to water and healthier beverages were published in the third edition of *Caring for Our Children*.8 The *Caring for Our Children*, 3rd edition (CFOC3) performance standard numbers correspond to recommendations provided on page 10.

Some recommendations reference the 2010 Healthy, Hunger-Free Kids Act. Water-related standards are listed separately for children 1 year of age or older and for children younger than 1 year of age.
Recommendations on Serving Water and Other Beverages to Children in ECE Settings

Children 1 Year of Age or Older

- Drinking water should be readily available to children throughout the day. If you are a CACFP provider, this is a requirement. (CFOC3 Standard 4.2.0.6; Healthy, Hunger-Free Kids Act)

- Water should not be a substitute for milk at meals or snack times where milk is a required CACFP food component, unless recommended by the child’s primary care provider. However, it is fine to serve water with milk at meals and snack times. (CFOC3 Standard 4.2.0.6; Healthy, Hunger-Free Kids Act)

- If your facility drinking water comes from a household well (does not come from a public water system), the water should be tested every year or as required by the local health department. (CFOC3 Standard 5.2.6.2)

- If your facility drinking water comes from a public water system, the water should be tested for lead and copper levels in accordance with the state drinking water program or local health authority requirements. Testing should include water from drinking fountains. (CFOC3 Standard 5.2.6.3)

- Written water test results should be kept in one central location in the facility. Results should be available to parents and regulatory personnel. (CFOC3 Standard 5.2.6.4)

- Children need extra water to drink when they are physically active or when it is hot outside. Ensure kids drink water before and during periods of physical activity. (CFOC3 Standards 3.1.3.2 and 4.2.0.6)

- If you have drinking fountains, they should be kept clean and maintained to provide adequate water flow and drainage. (CFOC3 Standard 5.2.6.10)

- If you have drinking fountains, children should be taught to drink water without mouthing the drinking fountain fixture. (CFOC3 Standard 4.2.0.6)

- Children should be taught to drink water from a cup rather than a sippy cup or bottle. (CFOC3 Standard 4.2.0.6)

- When tooth brushing is not done after eating, children should be offered water to drink to rinse food from their teeth. (CFOC3 Standards 3.1.5.1 and 4.2.0.6)

- When juice is served, it should be only full-strength (100%) pasteurized fruit juice or full-strength fruit juice diluted with water. (CFOC3 Standard 4.2.0.7) However, only full-strength (100%) juice is allowed under CACFP requirements.

- Juice should be limited to 4–6 oz per day for children 1–6 years of age. This includes juice children drink at home. (CFOC3 Standard 4.2.0.7)

- Avoid concentrated sweets such as candy, sodas, sweetened drinks, fruit nectars, and flavored milk. (CFOC3 Standard 4.2.0.4)

Children Younger than 1 Year of Age

- Infants should not be given plain water, especially in the first 6 months of life. (CFOC3 Standard 4.2.0.6)

- Infants should not be given any fruit juice before 12 months of age. Whole, mashed, or pureed fruit is recommended for infants from 7 months to 1 year of age. (CFOC3 Standard 4.2.0.7)

- If infants need extra fluid on hot days, extra human milk or formula (depending on what the infant normally drinks) can be given in a bottle. (CFOC3 Standard 4.2.0.6)
Section 3
Assessing Where You Are: Performance Standards Checklist for Water and Healthier Beverages
Perfomance Standards Checklist

Use this checklist to assess the healthier beverage practices and goals in your ECE setting. The standards listed correspond with National Health and Safety Performance Standards related to drinking water and beverages published in the third edition of *Caring for Our Children.*

Please check the box next to the statement that best describes your current situation. When you have completed the checklist, use it to identify which practices you need to work on to improve the quality of care in your facility. You can find tips to help meet these standards in later sections.

<table>
<thead>
<tr>
<th>Standard</th>
<th>Meeting this standard</th>
<th>Not meeting this standard</th>
<th>Not applicable to my facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drinking water is available to children upon request throughout the day, including meal times. (Note: This is a CACFP requirement.)</td>
<td></td>
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<tr>
<td>If your facility drinking water comes from a household well (does not come from a public water system), the water is tested every year or as required by the local health department.</td>
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<tr>
<td>If your facility drinking water comes from a public water system, the water is tested for lead and copper levels. If you have drinking fountains, that water is also tested.</td>
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<tr>
<td>Children are encouraged to drink water before and during periods of physical activity.</td>
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<td>If you have drinking fountains, children are taught to drink water without mouthing the drinking fountain fixture.</td>
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<tr>
<td>Children are taught to drink water from a cup rather than a sippy cup or bottle.</td>
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<tr>
<td>When tooth brushing is not done after eating, children are offered water to drink to rinse food from their teeth.</td>
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<tr>
<td>If you have drinking fountains, they are kept clean and maintained to provide adequate water flow and drainage.</td>
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<tr>
<td>Standard</td>
<td>Meeting this standard</td>
<td>Not meeting this standard</td>
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<tr>
<td>When juice is served, it should be only full-strength (100%) pasteurized fruit juice or full-strength fruit juice diluted with water. (CFOC3 Standard 4.2.0.7) However, only full-strength (100%) juice is allowed under CACFP requirements.</td>
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<tr>
<td>Juice is limited to 4–6 oz per day for children 1–6 years of age.</td>
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<tr>
<td>Sodas, sweetened drinks such as fruit nectars, and flavored milks are not served to children.</td>
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<tr>
<td>Infants younger than 6 months of age are not given plain water.</td>
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<tr>
<td>Infants younger than 12 months of age are not given fruit juice.</td>
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</tr>
<tr>
<td>On hot days, if an infant needs more fluids, extra human milk or formula (depending on what the infant normally drinks) is given in a bottle.</td>
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</tbody>
</table>
Section 4
Deciding Which Standards to Work On in Your Facility
Now that you have taken the assessment in Section 3, you are ready to choose which standards you want to work on.

Which Performance Standards Should I Focus On?

First, Comply with Federal and State Regulations…

- If you participate in CACFP, are you meeting the requirement of making water available to children throughout the day, including meal times? Even if you are not a CACFP provider, making water available may still be a requirement in your state. If you are not meeting this requirement, then start here.

- Check the ECE regulations regarding drinking water in your state. There may be specific regulations about testing your drinking water or about how you provide water to children. If you are not meeting the requirements in your state, then you should also make these changes.

Raising the Bar…

- If you are already in compliance with federal and state requirements, decide on other performance standards to implement. Choose standards that make the most sense for your facility and your budget.

- Even if you are already making water available to children, you can choose to improve what you are doing. For example, you might consider getting small pitchers and cups so that children can serve themselves water. You can also lead educational activities about water and beverages for kids. Resources and tips to help you are included in later sections of this document.

- Remember, you do not have to make changes all at once. It is okay to take small steps and change gradually. Identify standards that will make a difference for your children and that you can meet using current staff and available funds. Some standards may require purchasing materials, taking time to train staff, or asking for help from parents.
Section 5
Tips to Help Implement Water and Beverage Performance Standards
Once you have identified which standards to work on, you will need to develop a detailed plan to meet them. Below are general and specific tips that relate to each performance standard. You can use these tips to develop a specific action plan.

**General Tips**

- To make it more likely that the changes you make to water and beverages practices will be permanent and effective, try putting them in writing.

- Try using water- and beverage-related educational and promotional activities for children, caregivers, and parents to help reinforce the practices you are enacting. See Section 6 (pages 25–30) for some ideas and resources.

- Make an action plan with specific steps and establish a target date to meet each performance standard.

- Meet with staff members and parents to discuss the goals you want to achieve and the importance of drinking water and healthier beverages for children.

- Identify and train staff members who will be responsible for implementing specific action steps to meet beverage performance standards.

**Tips for Specific Performance Standards**

**Drinking water is available to children upon request throughout the day, including meal times.**

- If you participate in CACFP, train staff members about the federal requirement that water be available to children throughout the day.

- Keep small pitchers or jugs of water in classrooms and on playgrounds. Allow children to pour water into cups when they are thirsty.

- Place water dispensers and cups in places where children can use them easily.

- Clean and sanitize water pitchers, dispensers, and reusable drinking cups daily.

- Serve water to children whenever they are thirsty between meals and snacks.

- Whenever possible, serve tap water. Tap water is inexpensive and environmentally friendly. In most places, municipal water also contains fluoride for teeth. For information on water quality, see page 4.

- If you have drinking fountains that are too tall for children, purchase a sturdy stool to allow children to reach them.

- If you have drinking fountains, keep them clean.
If you have drinking fountains, check that water flow and drainage are working properly. Flow should be strong enough so children don’t mouth the fixture but not so strong that water sprays on the floor and creates a slipping hazard.

**Well or municipal drinking water is tested every year or as required by the local health department.**

- Determine whether your water comes from a private well or municipal water utility.

- Find out about the regulations for testing of drinking water in ECE facilities in your state.
  - For contact information on the state drinking water offices in your state, visit [http://water.epa.gov/drink/local](http://water.epa.gov/drink/local) and click on your state.
  - To find state-specific ECE licensing information related to drinking water, visit [http://nrckids.org/index.cfm/resources/state-licensing-and-regulation-information](http://nrckids.org/index.cfm/resources/state-licensing-and-regulation-information) and click on your state.

- If you have a facility manager, ask him or her about any water testing that is currently being done. Determine whether current testing meets state requirements or standards listed in this document.

- Contact the state drinking water office to find out which laboratories are available to test your drinking water.

- Keep test results on file.

- If testing reveals any problems with water quality, contact the testing laboratory and state drinking water offices to find out how to fix the problem. If water is unsafe, purchase bottled water until the problem is fixed.

**Children are encouraged to drink water before and during periods of physical activity.**

- Keep small pitchers or jugs of water on playgrounds or in indoor play areas. Allow children to pour water into cups when they are thirsty.

- Make a water break part of the routine before and during play time.
If you have drinking fountains, children are taught to drink water without mouthing the drinking fountain fixture.

- Check that the water flow and drainage in water fountains are appropriate. Flow should be strong enough so children don't mouth the fixture.
- Observe children while using the drinking fountain and correct them if they mouth the fixture.

Children 1 year of age or older are taught to drink water from a cup rather than a sippy cup or bottle.

- Purchase or obtain washable or disposable plastic cups.
- Start by pouring only a small amount of water in each cup. Promptly clean up any water spilled on the floor as children learn to use the cup.
- Train staff members on the importance of this practice. Teach them that allowing toddlers to suck continuously on a bottle or sippy cup filled with water may cause nutritional or electrolyte imbalances.
- Inform parents that you are using regular cups rather than sippy cups. Encourage parents to work with children on learning to use regular cups at home.

When tooth brushing is not done after eating, children are offered water to drink to rinse food from their teeth.

- Purchase or obtain washable or disposable plastic cups.
- Make a water break part of the routine after meals.
- Train staff members on the importance of this practice.

If you have drinking fountains, they are kept clean and maintained to provide adequate water flow and drainage.

- Check state sanitation laws to see which may apply to your drinking fountains.
- Determine who will be responsible for cleaning and maintaining the fountains.
- Create and post a cleaning schedule checklist. Include specific tasks such as wiping down surfaces with disinfectant and ensuring the drain is clear of obstructions.
- Check that the water flow in water fountains is appropriate. Flow should be adjusted so that it is strong enough so children don't mouth the fixture. Flow should not be so strong that water sprays on the floor and creates a slipping hazard.
- If you need help adjusting the fountain, consult a plumber or facility maintenance personnel.
When juice is served, it should be only full-strength (100%) pasteurized fruit juice or full-strength fruit juice diluted with water.

Juice is limited to 4–6 oz per day for children 1–6 years of age.

- Create and post guidelines specifying the amount of juice that can be served to children in your facility.

- To stay within the 4–6 oz limit and satisfy CACFP meal requirements, you can serve whole fruits and vegetables rather than juice during meals and snack times. When you serve whole fruits or vegetables during snack times, water can be served as the snack beverage.

- Provide educational opportunities for families on the importance of limiting children’s juice consumption to no more than 4–6 oz of 100% juice per day while at home and in care.

- Train staff members on the importance of limiting juice for toddlers and preschoolers.

- Serve only 100% juices. For CACFP participants, only full-strength 100% juice is allowed.

- Train staff members on how to identify 100% juice. (See page 42, “Be a 100% Juice Detective,” for sample nutrition labels.)

- Recommend that staff members drink only water, 100% juice, or low-fat milk in the presence of children. Seeing staff members drink healthier beverages will encourage children to develop healthy behaviors.

Infants younger than 6 months of age are not given plain water.

On hot days, if extra fluid is needed, human milk or formula is given to infants in a bottle.

- Train staff members to give extra human milk or formula to infants instead of plain water.

- Educate parents to give extra human milk or formula to infants rather than water.
Section 6
Ideas and Resources for Promoting Water and Healthier Beverages to Children, Parents, and Staff
Promoting Water and Healthier Beverages

As you consider how to implement standards for drinking water and healthier beverages in your facility, it may be helpful to include educational and promotional activities in your plan. As an ECE provider, you are in an excellent position to educate children, families, and other staff members about healthier beverages.

Below are some ideas and resources that may help you to implement your goals. There are sections for children, parents, and staff members.

Posters and Tips

- California Childcare Health Program—Healthy Beverages in Child Care. [http://www.ucsfchildcarehealth.org/pdfs/posters/others/HealthyBevPoster.pdf](http://www.ucsfchildcarehealth.org/pdfs/posters/others/HealthyBevPoster.pdf)


- California Department of Public Health—Potter the Otter Loves to Drink Water. [http://www.cdph.ca.gov/programs/cpns/Pages/RethinkYourDrink-Resources.aspx](http://www.cdph.ca.gov/programs/cpns/Pages/RethinkYourDrink-Resources.aspx)

Promoting Water to Children

Children can be encouraged to drink healthier beverages in many ways. You can make drinking water fun! Try some of these suggestions when encouraging children to drink water and other healthier beverages:

- Provide teachers with materials and ideas to incorporate healthier beverage messages into lessons. See the links on page 28 to find little- to no-cost resources for healthier beverage promotion.

- Add fresh or frozen berries; orange, lemon, and lime slices; or fresh herbs like mint to water pitchers. Make sure what you add is large enough that it does not present a choking hazard to children.

- Make water available in an area that is easy for children to access. Use child-sized pitchers so children can enhance their motor skills while pouring water for themselves.

- Talk and read about water and healthier beverages during circle time.

- Encourage children to bring their own water bottles to drink water throughout the day. Be sure they are sanitized and dried daily.

- Have children create a collage with pictures from magazines showing water and kids being active. Display it in the learning area.

- When purchasing toys and books, consider choosing those with examples of healthier beverage consumption in pictures, activities, or as part of a toy set.
• Put up posters about drinking water and healthier beverages near water fountains and kitchens, and in your learning, dining, and other high-traffic areas, such as by the door where children are dropped off and picked up.

Activities, Resources, Books, and Websites
• Bay Area Nutrition and Physical Activity Collaborative—“‘Drink Water!’ Said the Otter” activity and coloring pages.  
http://www.banpac.org/banpac_resources_drink_water_otter.htm

• First 5 Santa Clara County—“Potter Loves Water” preschool-oriented website for healthier beverages.  
http://www.potterloveswater.com

• Nemours Foundation—“Let’s Move! Child Care” website ideas and resources.  
http://www.banpac.org/banpac_resources_sugar_savvy_resources.htm#

Promoting Water and Healthier Beverages to Parents and Families
Parents may need to be informed about why changes are taking place in your facility related to healthier beverages. Take the opportunity to encourage parents to also offer healthier beverages in their own homes. Create educational opportunities for families about the benefits of drinking water, juice, milk, and other healthier beverages. Emphasize the importance of limiting children’s 100% juice consumption to no more than 4–6 oz per day, including both at home and in child care. Help parents understand the importance of modeling healthier beverage consumption at home. Use tip sheets, flyers, and take-home lessons to incorporate messages about healthier beverages in the home.

Consider These Ideas:
• Create healthier beverage bulletin boards in learning areas, in hallways, and on doors.

• Work with parents and community partners to provide assistance in creating flyers and bulletin boards.

• Have your municipal or well water tested and communicate the results. Satisfactory test results will help win buy-in from parents who may mistrust the safety of tap water.

• Suggest adding fresh or frozen berries to water pitchers at home. Make sure fruit pieces are large enough so children cannot choke on them.

• Suggest making water available in easily accessible child-sized pitchers at home.
• Give the families a sticker, magnet, or poster to display at home with catchy rhymes like, “We Drink Water First for Thirst!”

• Take pictures of healthier beverage activities and lessons as you do them with the children, and display the pictures in your facility for everyone to see. You can also display children’s lessons and books.

• List water and healthier beverages on menus.

**Educational Resources for Parents**

• NRC—“Water & 100% Juice” tip sheet. [http://nrckids.org/TipSheet/JuiceTipSheet.pdf](http://nrckids.org/TipSheet/JuiceTipSheet.pdf)

• CDC—“Rethink Your Drink” website. [http://www.cdc.gov/healthyweight/healthy_eating/drinks.html](http://www.cdc.gov/healthyweight/healthy_eating/drinks.html)

**Training Staff Members About Water and Healthier Beverages**

Teach staff members how to encourage children to drink healthier beverages throughout the day and during physical activity. Explain how to incorporate the benefits of water and healthier beverage consumption into lesson plans.

Learning about water, juice, milk, and other beverage recommendations may require training or continuing education. Determine what sort of training is needed for you or your staff members and research continuing education courses in your local area related to serving healthier beverages.

Consider consulting Child Care Aware of America ([http://www.naccra.org/programs-services/child-care-aware-training-academy](http://www.naccra.org/programs-services/child-care-aware-training-academy)) and your local child care resource and referral agency for training opportunities. Also, consider having written guidelines that set standards for the beverages that are offered to children and consumed by staff members onsite.
Training, Resources, and Websites for Staff Members

- Let’s Move! Child Care Resources for Trainers—Slide Sets, Goal 4: Offer Healthy Beverages. [http://www.healthykidshealthyfuture.org/home/resources/trainers.html](http://www.healthykidshealthyfuture.org/home/resources/trainers.html)


- Healthy Beverages in Child Care Website. [http://healthybeveragesinchildcare.org/index.shtml](http://healthybeveragesinchildcare.org/index.shtml)

Section 7
Creating Action Plans for Reaching Healthier Beverage Goals
Create an Action Plan

After deciding what performance standards to work on and considering some specific action steps and activities, you are ready to create a plan. Refer to tips listed in Sections 5 and 6 to help with ideas. Decide which action steps will help you meet each performance standard and assign target dates for completing each step. You should also identify and train staff members who will be responsible for implementing specific action steps to meet beverage performance standards.

Make sure you include steps to promote and educate children, parents, and staff members about water and healthier beverages in your ECE facility. Some additional suggestions for creating a good plan are listed below. Sample plans are also included at the end of this section for both child care centers and family child care and home-based settings.

Include Steps to Check How Well Your Plan Is Working

Even the best plans do not always work out the way you want. It is important to include steps to check how your plan is working to meet your goals.

- Look at your action plan regularly. Check to see whether each step gets implemented.
- Determine what worked, what didn’t work, and how it could be made to work better.
- Go through the checklist again after you have implemented your plan fully. Did you achieve the goals you wanted?

Ensure the Changes You Make Can Be Sustained Over Time

The children, parents, and staff members at your facility are always changing. It is important to plan on continuing your efforts over time.

- Create written policies for healthier beverages and include them in provider and parent handbooks. Post written policies regarding beverages in your facility.
- Monitor compliance with policies at specific time periods during each year. Determine whether policies are being followed.
- Train staff members annually on the healthier beverage policies you have established.
- Discuss your beverage policy with the parents of new children coming to your facility.
- Give healthier beverage education regularly to the children in your care.
**Sample Action Plans**

Below are two sample action plans, one for family child care and home-based settings and the other for child care centers. These action plans contain possible goals identified from the Section 3 checklist and steps on how to reach these goals. You can refer to these sample plans for ideas on how to create your own action plan.

However, you know your child care program best. Your action plan should reflect your program’s unique needs so that you and your program can achieve your goals. A blank action plan is also included so that you can make your own plan.

**Sample Action Plan for Family Child Care and Home-Based Settings**

<table>
<thead>
<tr>
<th>Action Plan Steps</th>
<th>Target Date for Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal: Drinking water is available to children upon request throughout the day, including meal times.</strong></td>
<td></td>
</tr>
<tr>
<td>Purchase water pitchers and reusable cups.</td>
<td>Sept 1</td>
</tr>
<tr>
<td>Place cups and stool next to the kitchen sink faucet.</td>
<td>Sept 2</td>
</tr>
<tr>
<td>Place pitcher and cups in outdoor play area whenever children are outside.</td>
<td>Sept 2</td>
</tr>
<tr>
<td>Print coloring pages for children to color.</td>
<td>Sept 6</td>
</tr>
<tr>
<td>Do healthier beverage art project with children and send home with them.</td>
<td>Sept 7</td>
</tr>
<tr>
<td>Send home letter to parents regarding healthier beverages.</td>
<td>Sept 7</td>
</tr>
<tr>
<td><strong>Goal: Juice is limited to 4–6 oz per day for children 1–6 years of age.</strong></td>
<td></td>
</tr>
<tr>
<td>Purchase small snack cups for serving cut-up fruits and vegetables.</td>
<td>Sept 1</td>
</tr>
<tr>
<td>Purchase fruits and vegetables instead of juice.</td>
<td>Sept 1</td>
</tr>
<tr>
<td>Serve cut-up fruit or vegetables to children during snack time.</td>
<td>Sept 2</td>
</tr>
<tr>
<td>Update menus to account for changes in beverage choices, and send newsletter home to parents explaining choices.</td>
<td>Sept 15</td>
</tr>
</tbody>
</table>
Sample Action Plan for Child Care Centers

<table>
<thead>
<tr>
<th>Action Plan Steps</th>
<th>Person Responsible</th>
<th>Target Date for Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal: Tap water is tested for lead and copper levels annually.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact the local health department or the municipal water provider for guidance on testing tap water for lead and copper.</td>
<td>Director</td>
<td>Aug 1</td>
</tr>
<tr>
<td>Have tap water tested according to recommendation of local health department or municipal water provider. Make sure water fountain is tested.</td>
<td>Director</td>
<td>Aug 8</td>
</tr>
<tr>
<td>If problem is found with water, contact local health department or water utility about ways to correct problem. Create an action plan to address the problem.</td>
<td>Director</td>
<td>Aug 16</td>
</tr>
<tr>
<td>Tell parents and staff members the test results both at a meeting and in a letter. If there is a problem, describe the actions we are taking to correct it and follow up to ensure action plan is implemented.</td>
<td>Director and Staff</td>
<td>Aug 16</td>
</tr>
<tr>
<td><strong>Goal: Drinking water is available to children upon request throughout the day, including meal times.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discuss barriers to providing drinking water with staff members and identify solutions.</td>
<td>Director</td>
<td>Sept 1</td>
</tr>
<tr>
<td>Write a policy about water availability at facility.</td>
<td>Director</td>
<td>Sept 3</td>
</tr>
<tr>
<td>Purchase pitchers and cups to keep in all classrooms and outdoors.</td>
<td>Director</td>
<td>Sept 3</td>
</tr>
<tr>
<td>Arrange staff training on new policy and importance of drinking water for children.</td>
<td>Director</td>
<td>Sept 7</td>
</tr>
<tr>
<td>Begin water availability policy in all classrooms and outside.</td>
<td>Director and Staff</td>
<td>Sept 22</td>
</tr>
<tr>
<td>Follow up to assess whether water access policy is being correctly implemented.</td>
<td>Director</td>
<td>Oct 15</td>
</tr>
<tr>
<td><strong>Goal: Sodas, sweetened drinks such as fruit nectars, and flavored milks are not served to children.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discuss healthy drink choices for children with food service and child care staff.</td>
<td>Director</td>
<td>Aug 30</td>
</tr>
<tr>
<td>Train food service and child care staff on identifying 100% juice and serving size limit for children.</td>
<td>Director</td>
<td>Sept 5</td>
</tr>
<tr>
<td>Communicate to parents the importance of limiting children's sugary drink and juice intake.</td>
<td>Director</td>
<td>Sept 15</td>
</tr>
<tr>
<td>Place healthier beverage poster on bulletin board.</td>
<td>Director</td>
<td>Sept 15</td>
</tr>
<tr>
<td>Staff members conduct healthier beverage and water art activity with children.</td>
<td>Staff</td>
<td>Sept 15</td>
</tr>
<tr>
<td>Action Plan Steps</td>
<td>Person Responsible</td>
<td>Target Date for Completion</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
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<td>-----------------------------</td>
</tr>
<tr>
<td>Post a beverage sign that identifies water, juice, and milk as the beverages that can be served to children. Recommend that staff members drink healthy drinks such as water, milk, and juice in the presence of children.</td>
<td>Director</td>
<td>Sept 15</td>
</tr>
</tbody>
</table>

**Goal: Drinking fountains are kept clean and maintained to provide adequate water flow and drainage.**

<table>
<thead>
<tr>
<th>Action Plan Steps</th>
<th>Person Responsible</th>
<th>Target Date for Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact state child care licensing agency to determine the requirements for keeping drinking fountains clean. Print a copy of state fountain sanitation requirements.</td>
<td>Director</td>
<td>Aug 1</td>
</tr>
<tr>
<td>Inspect fountain for proper flow.</td>
<td>Director</td>
<td>Aug 1</td>
</tr>
<tr>
<td>Meet with facility maintenance director to discuss state fountain sanitation requirements. Determine necessary changes in current procedures to comply with requirements.</td>
<td>Director</td>
<td>Aug 3</td>
</tr>
<tr>
<td>Post a fountain cleaning schedule with check-boxes for maintenance staff to initial and date when fountain is cleaned and serviced.</td>
<td>Maintenance Director</td>
<td>Aug 7</td>
</tr>
<tr>
<td>Follow up to ensure fountains are being cleaned correctly and according to required frequency.</td>
<td>Director</td>
<td>Sept 1</td>
</tr>
</tbody>
</table>

Facility_________________________ Date_________________
## Action Plan for Healthier Beverages

<table>
<thead>
<tr>
<th>Action Plan Steps</th>
<th>Person Responsible</th>
<th>Target Date for Completion</th>
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<tbody>
<tr>
<td>Goal:</td>
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<td>Goal:</td>
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Appendices
Sample Letter for Parents
Dear Families,

Serving healthier drinks, like water, will give your child a great start to developing lifelong healthy habits! Remember, WATER is the best choice to keep kids hydrated without the extra calories!

Did You Know?

- Water contains no calories.
- While 100% juice can contribute to a healthy diet, experts recommend that children 1–6 years of age consume no more than 4–6 ounces per day of 100% juice.
- Soda, sports drinks, and fruit-flavored drinks are a major source of sugar and unnecessary calories for children.

What You Can Do

- Encourage your children to drink water by being a role-model and drinking water yourself.
- Make drinking water fun by adding fruit such as frozen berries or slices of lemon, lime, or orange to add flavor. Make sure the fruit pieces are large enough that children cannot choke on them.
- Serve whole fruits and vegetables instead of large quantities of 100% fruit juice.
Be a 100% Juice Detective

- Be sure to check the label.
- If a beverage is 100% juice, it will say so on the label.
- Look for the words, **100% Juice** and don't be misled by terms like “100% Vitamin C.” This is not the same as 100% juice.

### Orange Juice

[Circle: 100% Juice]

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
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</thead>
<tbody>
<tr>
<td>Serving Size 8 fl oz (249g)</td>
</tr>
<tr>
<td>Servings Per Container 8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Amount Per Serving</th>
<th>% Daily Value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calories 112</td>
<td>0%</td>
</tr>
<tr>
<td>Total Fat 0g</td>
<td>0%</td>
</tr>
<tr>
<td>Saturated Fat 0g</td>
<td>0%</td>
</tr>
<tr>
<td>Trans Fat 0g</td>
<td>0%</td>
</tr>
<tr>
<td>Cholesterol 0mg</td>
<td>0%</td>
</tr>
<tr>
<td>Sodium 0mg</td>
<td>0%</td>
</tr>
<tr>
<td>Total Carbohydrate 26g</td>
<td>9%</td>
</tr>
<tr>
<td>Dietary Fiber 0g</td>
<td>0%</td>
</tr>
<tr>
<td>Sugars 21g</td>
<td></td>
</tr>
<tr>
<td>Protein 2g</td>
<td></td>
</tr>
</tbody>
</table>

**Ingredients:** Orange juice (not from concentrate)

### Juice Drink

[Circle: Made with 5% Juice]

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Serving Size 8 fl oz (249g)</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Amount Per Serving</th>
<th>% Daily Value*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calories 120</td>
<td>0%</td>
</tr>
<tr>
<td>Total Fat 0g</td>
<td>0%</td>
</tr>
<tr>
<td>Saturated Fat 0g</td>
<td>0%</td>
</tr>
<tr>
<td>Trans Fat 0g</td>
<td>0%</td>
</tr>
<tr>
<td>Cholesterol 0mg</td>
<td>0%</td>
</tr>
<tr>
<td>Sodium 30mg</td>
<td>1%</td>
</tr>
<tr>
<td>Total Carbohydrate 31g</td>
<td>10%</td>
</tr>
<tr>
<td>Dietary Fiber 0g</td>
<td>0%</td>
</tr>
<tr>
<td>Sugars 29g</td>
<td></td>
</tr>
<tr>
<td>Protein 0g</td>
<td></td>
</tr>
</tbody>
</table>

**Ingredients:** Water, high fructose corn syrup, pear juice, citric acid, ascorbic acid, yellow 5, red 40, (other ingredients)
References


