

**RISK ASSESSMENT: Safer**

**Feeding V1**

**Date: May 2026**

SITE: Day Nurseries

ASSESSMENT BY: Georgia Wilson

**All staff are required to follow this safer feeding risk assessment at all times, and the setting manager must be informed immediately of any breach of this risk assessment.**

**Failure to comply may result in disciplinary action, or the implementation of the capability process in line with Wise Owls Childcare procedures.**

<p>Risk assessment description</p>	<p>This Safer Feeding Risk Assessment outlines the potential hazards associated with children eating and drinking at Wise Owls Childcare, and the control measures in place to minimise the risks. It aims to ensure mealtimes are safe, well-supervised, developmentally appropriate and inclusive for every child in our care, while reducing the risk of choking, allergic reaction and cross-contamination.</p> <p>This Safer Feeding Risk Assessment will be accessible for anyone supporting mealtimes including permanent staff, temporary or agency staff, placement workers and visitors.</p> <p>Any responsible person that witnesses or is involved in an incident or near miss relating to the hazards outlined in this risk assessment [or any other situation they judge to present a risk] should calmly and professionally intervene where a child is at immediate risk. They must report the incident to the setting manager as soon as possible without compromising staff deployment or supervision, or at the earliest safe opportunity. In the absence of the manager, the deputy manager or responsible person present must be informed.</p> <p>All serious feeding incidents and notifiable near misses must be reported to the company Operations Director by the setting manager, deputy manager or responsible person present.</p> <p>Please refer to the External Authority Reporting Guide [Child Protection] for full external reporting guidance.</p>
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Section 1 - Baseline Control Measures			
<u>WHAT IS THE HAZARD</u>	<u>WHO IS AT RISK</u>	<u>RISK FACTOR</u> <u>HIGH,</u> <u>MEDIUM OR</u> <u>LOW</u>	<u>CONTROL MEASURES</u>
General mealtime risks (applies to all safer feeding hazards)	Children		<ul style="list-style-type: none"> <li>· Staff deployed and statutory child: staff ratios maintained at all times during feeding</li> <li>· At least one paediatric first aider present and readily available during all feeding times</li> <li>· Staff actively supervise children while eating and remain positioned where all children are visible</li> <li>· Staff deployed to ensure a paediatric first aider is sat front facing the children at each table whilst eating and staff remain vigilant with supervision</li> <li>· Staff must not leave the table during mealtimes unless supervision has been clearly handed over to another staff member to maintain ratios, staffing requirements, qualifications and first aid cover. Managers refer to 'nursery ratio, qualification and staff deployment guidance' for further direction</li> <li>· Nominate a designated person/s to move around during mealtimes and all other staff to remain seated with the children, ensuring supervision is maintained during feeding</li> <li>· Staff sit with children at their level</li> </ul>

			<ul style="list-style-type: none"><li>· Calm, structured mealtime routines followed</li><li>· All staff handling food must complete up-to-date food health and hygiene training</li><li>· Staff minimise distractions and avoid multitasking during mealtimes</li><li>· First aid equipment and emergency medication accessible during mealtimes</li><li>· All risk assessments and Individual Health Care Plans (IHCP) to be accessible during mealtimes</li><li>· Red medical bags must be accessible during mealtimes but kept out of children's reach. The paediatric first aider should retain possession of the bag and hand it over to another qualified first aider if they need to leave the area, ensuring communication and continuous supervision</li><li>· Any individual responsible for children during mealtimes who witnesses or is involved in an incident or near miss relating to the hazards outlined above, or any other situation believed to present risk, must calmly and professionally intervene if a child is at immediate risk. The incident must be reported to the setting manager at the earliest safe opportunity. In the manager's absence, the deputy manager or responsible person on duty must be informed</li><li>· All supporting hard copy and digital documentation will be retained in accordance with company record retention procedures</li><li>· Staff must not use iPads during mealtimes to minimise distractions and maintain continuous active supervision of children</li></ul>
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<b>Section 2 – Choking and Swallowing Hazards</b>			
<b><u>WHAT IS THE HAZARD</u></b>	<b><u>WHO IS AT RISK</u></b>	<b><u>RISK FACTOR</u></b> <b><u>HIGH,</u></b> <b><u>MEDIUM OR</u></b> <b><u>LOW</u></b>	<b><u>CONTROL MEASURES</u></b>
Sudden choking on food or drink	Children		<ul style="list-style-type: none"> <li>• Food must be cut into small, manageable pieces appropriate for age and stage of child</li> <li>• Avoid high-risk foods for children under 5</li> <li>• Ensure all children are seated upright and supported during feeding, following the 90/90/90 rule to support safe swallowing, breathing and reduce choking risk</li> <li>• Children must remain seated when eating</li> <li>• Staff must always sit facing children when eating</li> <li>• Designated eating areas used for feeding</li> <li>• Mealtime routines followed consistently to encourage calm eating habits</li> <li>• Staff to receive training on recognising the signs of choking during their induction and subsequently every 12 months after, or following a choking incident or near miss</li> </ul>
Over-filling mouth/eating too quickly	Children		<ul style="list-style-type: none"> <li>• Age-appropriate portion sizes served</li> <li>• Children encouraged to chew thoroughly and eat slowly</li> </ul>

			<ul style="list-style-type: none"> <li>• Staff gently remind children not to rush eating</li> <li>• Calm environment maintained during feeding</li> </ul>
Consumption of bones, stones, shells, foreign objects	Children		<ul style="list-style-type: none"> <li>• Serve age-appropriate, deboned/deshelled foods</li> <li>• Use reputable suppliers and check food packaging</li> <li>• Staff trained to recognise the signs of choking and high-risk foods to avoid</li> </ul>
Talking, laughing or crying while eating	Children		<ul style="list-style-type: none"> <li>• Staff encourage calm conversation [avoiding communication when a child has food in their mouth] and discourage shouting or rough play</li> <li>• Any child showing signs of distress during mealtime will be supported using calm reassurance and appropriate comfort measures before they are encouraged to resume eating</li> <li>• Staff will model calm and safe eating behaviours and will intervene promptly and calmly if unsafe or risky eating behaviours are observed</li> </ul>
Drowsiness/falling asleep when eating	Children		<ul style="list-style-type: none"> <li>• Staff to intervene immediately if a child shows signs of drowsiness during eating [i.e. head dropping, slowed chewing, reduced responsiveness] and stop further food intake</li> <li>• Child to be transferred to a designated sleep area [in line with safer sleep procedures] ensuring continuous front facing supervision of all other children is maintained</li> </ul>
Prolonged periods of sitting at mealtimes	Children		<ul style="list-style-type: none"> <li>• Children will only be seated for mealtimes once food is ready to be served</li> </ul>

			<ul style="list-style-type: none"> <li>• Where children need to be kept clear of food delivery routes, they will be engaged in calm, structured activities nearby under supervision until seating for mealtimes begins</li> <li>• Clear communication will be maintained between kitchen and room staff to ensure safe and timely coordination of food delivery and seating</li> <li>• If service delays occur, staff will provide reassurance and continue to engage children in calm activities to prevent distress and anticipatory behaviours [e.g. rushing or unsafe eating behaviours]</li> <li>• Children will be seated and served in small, managed groups where appropriate to reduce waiting time</li> <li>• Staff will monitor children for signs of tiredness, frustration, or over-excitement and adjust seating/serving order accordingly</li> <li>• Mealtimes will be structured to ensure food is served promptly once children are seated</li> <li>• Any repeated delays in food delivery will be escalated to management and catering provider to prevent recurrence</li> </ul>
<p>Children walking, standing or running with food</p>	<p>Children</p>		<ul style="list-style-type: none"> <li>• Preferred location for food and drink consumption is in designated eating areas. Alternative locations [i.e. outdoor picnics] are permitted following risk assessments</li> <li>• Staff ensure children are seated before serving food</li> <li>• Staff intervene immediately and safely if a child moves from their seated position during feeding</li> </ul>

Children putting non-food items in mouth	Children		<ul style="list-style-type: none"> <li>• Environment kept free from small hazards</li> <li>• Ensure toys and resources for each room are age and stage appropriate</li> <li>• Ensure toys and resources across the setting have the correct compliance markings</li> <li>• Any item placed in a child's mouth must be removed and further sterilised</li> </ul>
Children with swallowing difficulties (dysphagia)	Children		<ul style="list-style-type: none"> <li>• Individual Healthcare Plans followed</li> <li>• Food texture and consistency adapted according to parent and SALT guidance [speech and language therapy]</li> <li>• Close front facing supervision of child and within arm's reach</li> <li>• Slow feeding pace encouraged with small mouthfuls</li> <li>• Staff monitor for signals of choking or aspiration</li> <li>• Staff remain alert and ready to respond to coughing or distress immediately</li> </ul>

**Section 3 – Food Safety and Hygiene**

<u>WHAT IS THE HAZARD</u>	<u>WHO IS AT RISK</u>	<u>RISK FACTOR</u> <u>HIGH,</u> <u>MEDIUM OR</u> <u>LOW</u>	<u>CONTROL MEASURES</u>
<p>Unsafe storage and handling of prepared and unfinished food</p>	<p>Children Staff</p>		<ul style="list-style-type: none"> <li>· Unfinished meals will be removed promptly from the designated eating area following interruption of feeding [i.e. child falling asleep] and will be transferred to a clean, food-safe container with a secure lid</li> <li>· All containers will be clearly labelled with the child's name, food contents, and the date and time of storage</li> <li>· Food will be cooled promptly, where required, using shallow containers or smaller portions before refrigeration</li> <li>· Food will be refrigerated promptly and stored at 0-5°C</li> <li>· Reheated food must reach a minimum core temperature of 75°C</li> <li>· Food will only be reheated once</li> <li>· Any reheated food not consumed will be discarded</li> <li>· Food must be used within the same day of service and discarded thereafter</li> <li>· Where a child arrives late [i.e. due to appointments], meals must be cooled and refrigerated promptly if not served immediately. Meals may only be reheated once, within safe storage time limits, and to a minimum core temperature of 75°C</li> </ul>

<p>Spoiled or contaminated food</p>	<p>Children</p>		<ul style="list-style-type: none"> <li>· Food stored at correct temperatures [fridge 0–5°C, freezer -18°C]</li> <li>· Daily fridge temperature checks recorded</li> <li>· Daily freezer temperature checks recorded</li> <li>· Food expiry dates monitored and food discarded if expired or deteriorating</li> <li>· Delivered food inspected for spoilage</li> </ul>
<p>Cross contamination during food preparation and serving</p> <ul style="list-style-type: none"> <li>• Raw and cooked meat</li> <li>• Allergens</li> </ul>	<p>Children</p>		<ul style="list-style-type: none"> <li>· Separate utensils and chopping boards used for raw &amp; cooked meat and allergens</li> <li>· Colour-coded chopping boards used</li> <li>· Chopping board colour code displayed in food preparation area</li> <li>· Work surfaces sanitised before and after use, and between exposure to raw meats and allergens</li> <li>· Raw meat stored below ready-to-eat foods in fridge</li> <li>· High-touch surfaces and tables sanitised between food service</li> <li>· Allergen and dietary alternative meals prepared before regular meals</li> <li>· Staff preparing meals to wash hands after handling raw meat and/or allergens as needed</li> </ul>
<p>Safe storage of catered food</p>	<p>Children</p>		<ul style="list-style-type: none"> <li>· Food temperatures will be checked at the point of service to ensure food is 63°C or above, in line with hot holding requirements</li> <li>· If food is found to be below 63°C, staff must immediately check the documented dispatch time on caterers paperwork to confirm how long the food has been below hot holding temperature</li> </ul>

			<ul style="list-style-type: none"> <li>• The 2-hour hot holding window only applies once food has fallen below 63°C. Food below 63°C may only be served if it is confirmed to still be within 2 hours of leaving temperature control. Food below 63°C that is outside the 2-hour window, or where timing cannot be verified, must be discarded immediately and not served to children</li> <li>• In the event of a delay to service, food must remain in insulated hot holding equipment with lids kept closed where possible to help maintain safe temperatures</li> <li>• Clear communication must be maintained between the setting and catering provider to support timely delivery and safe service</li> <li>• Staff will follow mealtime routines to ensure meals are served promptly and safely</li> <li>• Any recurring concerns regarding food temperature, late delivery, or hot holding compliance must be escalated to management and reviewed with the catering provider ))</li> </ul>
<p>Inadequate fridge/freezer storage, hygiene and maintenance</p>	<p>Children Staff</p>		<ul style="list-style-type: none"> <li>• Fridge and freezer temperatures monitored daily and recorded to ensure they remain within safe limits [fridge: 0-5°C freezer: -18°C]</li> <li>• Any faults, damage or temperature concerns reported to management immediately and monitored with discontinued use if suspected immediate risk</li> <li>• High risk food that has not been stored at the correct temperature will be disposed of</li> </ul>

			<ul style="list-style-type: none"> <li>• Fridge and freezers will be kept closed as much as possible to maintain safe internal temperature</li> <li>• Fridge and freezers must not be overloaded</li> <li>• All opened food must be labelled with clear dates to ensure safe stock rotation</li> <li>• Regular fridge and freezer checks and cleaning to remove old or unsafe food</li> <li>• Freezers to be emptied and defrosted annually and further as required</li> <li>• Electrical safety checks including PAT testing to be completed annually in line with company procedures</li> </ul>
<p>Dishwasher hygiene and maintenance</p>	<p>Children Staff</p>		<ul style="list-style-type: none"> <li>• Dishwasher is used for cleaning all reusable feeding equipment [i.e. plates, cups, utensils]</li> <li>• Dishwasher is operated at the correct temperature [minimum 60°C wash] to effectively remove bacteria</li> <li>• Staff check that items are visibly clean after each cycle; any items not fully clean rewashed</li> <li>• Dishwasher is not overloaded</li> <li>• Items are rinsed of excess food before loading to prevent blockage and ensure effective cleaning</li> <li>• Separate compartments used correctly for detergent and rinse aid; levels checked regularly and replenished as required</li> <li>• Dishwasher is cleaned and maintained in line with manufacturer guidance</li> </ul>

			<ul style="list-style-type: none"> <li>• Only appropriate, food-safe dishwasher detergents and cleaning products are used and stored safely out of reach of children</li> <li>• Clean items are removed with clean hands and stored in a clean, dry, designated area to prevent contamination</li> <li>• Dishwasher is checked for faults [i.e. poor drainage, low temperature] and any issues reported to management</li> <li>• In the event of dishwasher failure, all items for the dishwasher to be handwashed using hot, soapy water</li> </ul>
<p>Waste disposal</p> <ul style="list-style-type: none"> <li>• Food waste</li> <li>• General waste</li> <li>• Recycling</li> </ul>	<p>Children Staff</p>		<ul style="list-style-type: none"> <li>• Separate waste streams are followed where applicable [i.e. general waste, recycling, food waste in line with setting procedures]</li> <li>• Food waste is not left in food preparation or serving areas after meals have finished</li> <li>• Spillages involving waste are cleaned immediately</li> <li>• Clear separation is maintained between clean feeding areas and waste disposal areas to prevent cross-contamination</li> <li>• Waste bins are lidded and foot-operated where possible to minimise hand contact and reduce contamination</li> <li>• Waste bin lids are kept closed when not in use</li> <li>• Food waste is removed from eating areas promptly after mealtimes to reduce hygiene risks and prevent pests</li> <li>• Waste bins are lidded, emptied regularly and not overfilled to reduce contamination, odours and pest attraction</li> </ul>

			<ul style="list-style-type: none"> <li>• Bins are kept away from cots, sleep mats, food preparation areas and children's play spaces where possible</li> <li>• Waste is never left within reach of unsupervised children</li> <li>• Waste from rooms used by children is removed promptly and stored securely until collection</li> <li>• External waste and recycling areas are clean, secure and inaccessible to children</li> <li>• Waste bins are cleaned and disinfected regularly</li> <li>• Staff wash hands thoroughly after handling waste</li> <li>• Any overflowing bins, missed collections or signs of pests are investigated and reported to management immediately</li> <li>• Food waste is never reused, re-served or stored once removed from a plate</li> </ul>
Poor food hygiene	Children Staff		<ul style="list-style-type: none"> <li>• Staff and children must wash hands with antibacterial hand soap before food handling and eating</li> <li>• Tables must be cleared and sanitised before and after mealtimes and between courses as needed</li> <li>• Food preparation equipment cleaned according to manufacturer guidance</li> <li>• Staff receive refresher training on level 2 food hygiene every 3 years</li> </ul>
Poor personal hygiene	Children		<ul style="list-style-type: none"> <li>• Children wash hands with antibacterial hand soap before eating</li> <li>• Staff supervise and support effective hand washing</li> <li>• Age-appropriate hand-washing posters displayed at child's level in baTHEooms</li> </ul>

			<ul style="list-style-type: none"> <li>• Staff wash hands before food handling and after toileting, nappy changing, nose wiping and outdoor play [refer to hand washing posters for best practice]</li> <li>• Face flannels used after feeding as necessary and laundered after each use on a hot wash</li> <li>• Face flannels will be for independent and single use</li> <li>• Staff to encourage independence, but support children in cleaning their hands and faces where needed</li> <li>• Staff handling food tie hair back and maintain good personal hygiene</li> <li>• Cuts and sores covered with blue waterproof dressings when handling and serving food</li> <li>• Staff will not handle food if unwell [48-hour exclusion for sickness/diarrhoea in line with company policy]</li> <li>• Children discouraged from sharing utensils, cups or food and supervised closely to mitigate risk</li> <li>• Designated handwashing facilities stocked with soap and hand paper towels</li> </ul>
<p>Food dropped and re-eaten</p>	<p>Children</p>		<ul style="list-style-type: none"> <li>• Food dropped on the floor disposed of immediately</li> <li>• Staff supervise children to prevent food being picked up from floor</li> <li>• Floors cleaned immediately after mealtimes</li> </ul>

<b>Section 4 – Allergies, Dietary Requirements and Medical Needs</b>			
<b><u>WHAT IS THE HAZARD</u></b>	<b><u>WHO IS AT RISK</u></b>	<b><u>RISK FACTOR</u></b> <b><u>HIGH,</u></b> <b><u>MEDIUM OR</u></b> <b><u>LOW</u></b>	<b><u>CONTROL MEASURES</u></b>
Food allergies and dietary requirements	Children		<ul style="list-style-type: none"> <li>• Detailed dietary information collected before enrolment</li> <li>• Allergy posters displayed with child photo and dietary information</li> <li>• Individual Healthcare Plans must be completed, followed and shared with all relevant personnel including permanent staff, temporary or agency staff, placement workers and visitors</li> <li>• Individual risk assessments must be completed, followed and shared with all relevant personnel including permanent staff, temporary or agency staff, placement workers and visitors</li> <li>• Strict no food sharing policy</li> <li>• Emergency medication accessible</li> <li>• Allergy and medical toolkit processes followed</li> <li>• Food sign off sheet completed</li> </ul>
Unidentified or poorly communicated food allergies and dietary requirements	Children		<ul style="list-style-type: none"> <li>• Parents/carers must provide written allergy information via the digital app and notify the setting of any changes to dietary needs</li> <li>• Individual risk assessments and care plans must be kept up to date and shared with all relevant personnel</li> </ul>

			<ul style="list-style-type: none"> <li>• Allergy posters, including child photographs and dietary information, must be kept up to date and displayed appropriately</li> <li>• Work closely with parents/carers to maintain accurate and up-to-date allergy and dietary information</li> <li>• All personnel, including cover and agency staff, must be informed of children’s allergies and dietary needs before working in rooms and read relevant risk assessments and care plans</li> <li>• Nursery management and administration staff must ensure kitchen staff are informed of any changes to allergies or dietary needs</li> <li>• Meal signing procedures must be completed consistently for all meals and snacks to reduce handover errors between kitchen and room staff</li> </ul>
Medication side effects affecting eating	Children		<ul style="list-style-type: none"> <li>• Medication consent forms and care plans must be completed, read, and signed by all relevant personnel</li> <li>• Staff monitor children during feeding for any behavioural changes linked to medication and record observations</li> <li>• Parents informed of changes in eating behaviour</li> <li>• Portion sizes adjusted if appetite is reduced</li> </ul>

**Section 5 – Burns, Cuts and Physical Hazards**

<u>WHAT IS THE HAZARD</u>	<u>WHO IS AT RISK</u>	<u>RISK FACTOR HIGH, MEDIUM OR LOW</u>	<u>CONTROL MEASURES</u>
Hot food and drink causing burns and scalds	Children		<ul style="list-style-type: none"> <li>· Food is allowed to cool to a safe temperature before children eat to prevent burns and scalds</li> <li>· Children will not carry hot food</li> <li>· Hot equipment kept out of reach of children</li> <li>· Staff model safe handling of hot items and remind children of hot surfaces</li> </ul>
Broken or damaged crockery and cutlery	Children Staff		<ul style="list-style-type: none"> <li>· Crockery and tableware checked for damage before use</li> <li>· Damaged or unsafe items removed immediately</li> <li>· Non-breakable nursery-grade crockery and tableware used</li> </ul>
Inappropriate cutlery for age and stage of child	Children Staff		<ul style="list-style-type: none"> <li>· Age-appropriate nursery-grade cutlery used</li> <li>· Staff supervise use of cutlery during mealtimes</li> <li>· Children guided on how to hold and use cutlery safely</li> <li>· Cutlery distributed when children are seated and ready to eat only</li> <li>· Cutlery stored securely and out of reach of children when not in use</li> <li>· Cutlery checked regularly for damage and wear, and removed immediately if unsafe</li> </ul>
Unsafe drinking cups	Children		<ul style="list-style-type: none"> <li>· Use lightweight, shatterproof nursery-grade cups only</li> <li>· Avoid glass or ceramic cups for children</li> <li>· Open cups not filled full</li> <li>· Staff to model safe drinking practice</li> </ul>

			<ul style="list-style-type: none"> <li>• Staff to check cups for damage before use</li> </ul>
Ill-fitting bibs	Children		<ul style="list-style-type: none"> <li>• Staff must check bibs for tears, loose fastenings, or worn material before use</li> <li>• Bibs must fit correctly and not be too tight around the neck</li> <li>• Adjustable bibs should be used to accommodate growth</li> <li>• Worn or damaged bibs must be replaced</li> <li>• Clean bibs must be stored in a dry, clean, and hygienic location</li> <li>• Bibs must be washed and cleaned in line with hygiene and manufacturer guidance</li> </ul>

Section 6 – Environment and Furniture Safety			
<u>WHAT IS THE HAZARD</u>	<u>WHO IS AT RISK</u>	<u>RISK FACTOR</u> HIGH, MEDIUM OR LOW	<u>CONTROL MEASURES</u>

<p>Poor seating and posture</p>	<p>Children</p>		<ul style="list-style-type: none"> <li>• Babies and young children must be supported in upright seating when eating, following the 90/90/90 position to support safe swallowing and reduce choking risk. From around 6 months, children should be seated with hips, knees and ankles at approximately 90 degrees</li> <li>• Chair and table heights must be appropriate for the child's age and stage of development</li> <li>• Staff must support children with educational needs who may require help maintaining an upright seated position</li> <li>• Furniture must be checked regularly for condition and suitability</li> <li>• Eating areas must be kept clear, and chairs must be stable on level ground</li> <li>• Children must be discouraged from swinging on chairs</li> </ul>
<p>Highchairs not secured properly</p>	<p>Children</p>		<ul style="list-style-type: none"> <li>• Highchairs must be checked before use to ensure they are in safe working order, including secure fixings, functional fastenings, intact trays with no damage and stable legs</li> <li>• Highchairs must be correctly positioned away from edges, walls, or hazards and placed on a flat, stable surface</li> <li>• Safety straps must be correctly fitted and fastened for each child</li> <li>• Children must never be left unattended when seated in a highchair</li> </ul>
<p>Tables or chairs tipping</p>	<p>Children Staff</p>		<ul style="list-style-type: none"> <li>• Nursery-grade furniture should be used</li> <li>• Furniture must be visually checked daily for damage or instability</li> <li>• Tables and chairs must be positioned on flat, stable flooring positioned on flat flooring</li> </ul>

			<ul style="list-style-type: none"> <li>• Children must be reminded to keep chair legs on the floor when seated</li> </ul>
Crowded eating areas	Children		<ul style="list-style-type: none"> <li>• Tables must be spaced to allow safe movement</li> <li>• Walkways must be kept clear</li> <li>• Mealtimes should be staggered where required to ensure safe seating capacity</li> <li>• Additional tables must be used where necessary to safely accommodate all children</li> </ul>
Poor lighting	Children		<ul style="list-style-type: none"> <li>• Eating areas must be kept well-lit to ensure safe visibility</li> <li>• Faulty lighting must be reported and replaced promptly</li> <li>• Additional lighting must be sourced where needed</li> </ul>
Slips, trips and falls	Children Staff		<ul style="list-style-type: none"> <li>• Floors must be kept dry, and spillages cleaned immediately</li> <li>• Flooring must be maintained in an even, safe condition</li> <li>• Eating areas must be adequately lit</li> <li>• Children must be encouraged to walk when indoors</li> <li>• Walkways must be kept clear and free from clutter</li> </ul>

Section 7 – Bottle Feeding Safety			
<u>WHAT IS THE HAZARD</u>	<u>WHO IS AT RISK</u>	<u>RISK FACTOR</u>	<u>CONTROL MEASURES</u>
		<p><u>HIGH,</u></p> <p><u>MEDIUM OR</u></p> <p><u>LOW</u></p>	

Incorrect bottle preparation	Children		<ul style="list-style-type: none"> <li>Feeding areas must be kept well-lit and faulty lighting replaced promptly</li> <li>Hands must be washed before preparing bottles</li> <li>Formula must be prepared accurately in line with manufacturer instructions</li> <li>Breast milk and formula must be clearly labelled with the child's name</li> </ul>
Incorrect milk given to child	Children		<ul style="list-style-type: none"> <li>Parents must clearly name all bottles, and staff will check labels before feeding</li> <li>Bottles must be stored in good working order to prevent mix-ups</li> </ul>
Inaccurate or inconsistent monitoring and recording of bottle feeds	Children		<ul style="list-style-type: none"> <li>All bottle feeds must be accurately recorded on the digital app and shared with parents, including date, time, quantity consumed, and type of feed [i.e. breast milk or formula]</li> </ul>
Choking during bottle feeding	Children		<ul style="list-style-type: none"> <li>Babies must be fed in an upright or semi-upright position</li> <li>Bottles must never be propped during feeds</li> <li>Babies must be continuously supervised throughout bottle feeds</li> </ul>
Unsafe milk temperature	Children		<ul style="list-style-type: none"> <li>Milk must be checked for safe temperature before feeding</li> <li>Bottles must not be microwaved</li> <li>Staff must follow manufacturer guidelines when warming formula</li> </ul>
Poor bottle storage hygiene	Children		<ul style="list-style-type: none"> <li>Bottles must be stored in the fridge below 5°C</li> <li>Any leftover milk must be discarded after feeding</li> </ul>

			<ul style="list-style-type: none"><li>• Bottles should be stored separately from raw foods to prevent cross-contamination</li><li>• All bottles must be sent home daily</li></ul>
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**Staff Acknowledgement**

**I confirm that I have read and understood the safer feeding risk assessment and take responsibility for following the control measures outlined at all times. I confirm that any areas I do not understand have been raised with my line manager.**