

BOTTLE SAFETY AND PREPARATION POLICY

As young children (particularly those under 12 months) are still developing their immune system; they are more susceptible to food borne illnesses and infection. This therefore makes it imperative that education and care services implement and maintain the highest level of hygiene practices. Our Service will ensure that safe practices are consistently maintained for handling, storing, preparing and heating breast milk and formula, and sterilising bottles and teats.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.1.3	Healthy Lifestyles	Healthy eating and physical activity are promoted and appropriate for each child.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
78	Food and beverages
168	Education and care services must have policies and procedures
170	Policies and Procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

RELATED POLICIES

Breastfeeding Policy Dental Health Policy Health and Safety Policy	Nutrition and Food Safety Policy Sleep and Rest Policy Work, Health and Safety Policy
--	---

PURPOSE

To ensure our Service maintains a safe and hygienic environment for all infants and toddlers requiring a bottle, educators will sterilise and prepare bottles safely and hygienically in accordance with recognised guidelines and best practice. All educators preparing and/or handling bottles will have undergone training in safe food handling.

SCOPE

This policy applies to children, families, educators, staff, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

IMPLEMENTATION

During their first year of life, babies are at their most vulnerable to viruses, bacteria, and parasitic infections, due to their immune system not yet being fully developed. Unsafe or careless food handling practices can therefore lead to anything from a mild attack of thrush to a more serious condition of gastroenteritis, all of which are similar to food poisoning and can cause vomiting and diarrhoea, and subsequent dehydration.

To ensure that bottles are consistently prepared in a safe and hygienic manner educators will adhere to Service procedures at all times.

THE APPROVED PROVIDER/NOMINATED SUPERVISOR/MANAGEMENT WILL ENSURE:

- educators, staff, students, visitors and volunteers have knowledge of and adhere to this policy
- families are aware of this *Bottle Safety Preparation Policy*
- educators are aware of and strictly adhere to the procedures for washing and sterilising bottles and teats, and preparing, heating and storing bottles of formula and breast milk
- procedures for the safe storage and heating of food provided in bottles are strictly adhered to
- infants over 6 months of age are given small amounts of cooled boiled water in addition to breastmilk or formula as required
- educators give infants or children bottles before going to bed (in a cot or bed)
- infants are given only breast milk, formula, or cooled boiled water: They are not given fruit juice in their bottle due to the increase risk of tooth decay
- ensure families are familiar with their responsibilities in accordance with this policy.

EDUCATORS WILL:

- implement safe food handling practices
- wash hands thoroughly and wear gloves when preparing bottles
- store all bottles in an appropriate area for food preparation that complies with the food safety standards for kitchens and food preparation areas
- adhere to the procedure for the safe storage and heating of food provided in bottles
- provide infants over 6 months of age with small amounts of cooled boiled water in addition to breast milk or formula
- ensure infants and children are not given fruit juice in their bottle due to the increased risk of tooth decay
- give bottle-fed infants or children their bottles before going to bed
- ensure children are not put in cots or in beds with bottles as per the *Dental Health Policy*
- rinse children's bottles thoroughly after use and leave to air dry before placing in the child's bag
- adhere to each child's feeding routine
- document the amount of milk each infant consumed including the time of feeds
- communicate regularly with families about infant and children's feeding patterns and routines

FAMILIES WILL:

- read and comply with the policies and procedures of the Service
- be informed during orientation that children's bottles must be clearly labelled with the child's name
- label bottles or zip lock bags containing breast milk with the date of preparation or date of expression
- attempt to bring enough sterilised bottles each day to meet their child's requirements
- supply breast milk in clearly labelled, multiple small quantities to prevent wastage
- keep formula powder at the service so that the formula can be prepared as required. (Formula must be in its original tin and must be clearly labelled with the child's name.)
- provide a labelled bottle(s) for use at the Service for children
- be encouraged to communicate regularly with educators about children's bottle and feeding requirements
- not put fruit juice in children's bottles as per our *Dental Health Policy*.

STERILISING BOTTLES, TEATS, AND DUMMIES

After sterilising any item for infants, it is important to remember not to touch any part that will go into the baby's mouth with your hands. Generally, all sterilising systems come with tongs for this purpose, which must also be sterilised with the items.

Always read and follow the manufacturer's instructions that come with the sterilising system and ensure that the recommended sterilising times are strictly adhered to.

Prior to using any sterilising system or device or removing items from a steriliser staff will wash their hands. This is the single most effective way of preventing the spread of infection.

STEAM STERILISING

Electric steam sterilising is based on hospital methods and is quick and efficient, taking eight to twelve minutes plus cooling time. Care must be taken that only equipment that is safe to boil is sterilised in this manner. For example, some parts of breast pumps cannot be boiled. Bottles, teats and other items must be placed upside down and must have sufficient room (not touching any other item) to ensure they are fully sterilised.

Microwave steamers take around five to eight minutes to work, plus cooling time. Note that metal utensils cannot be used in microwaves. Where possible leave the lid on the steriliser until it has cooled sufficiently to prevent steam burns. If using a microwave for sterilising, ensure that a purpose designed sterilisation container is being used.

BOILING

Most bottle-feeding equipment must be boiled for at least 10 minutes. Ensure the pot you use is large enough for all bottles to be completely submerged and use the pot exclusively for sterilising. Be aware that teats that are frequently boiled become sticky and may need to be replaced more frequently than if using other sterilisation methods.

CHEMICAL STERILISING

Chemical sterilisation is achieved using cold water and a non-toxic liquid or tablet that is added to cold water to create a sterilising solution that is highly effective in killing bacteria. It is extremely safe to use and can be applied to the skin or even swallowed with no harmful effects. Educators need to check that there are no air bubbles left in the bottles to ensure complete sterilisation.

Always read the manufacturer's instructions to ensure the solution is mixed correctly and items are left in the solution for the required amount of time: Generally, they are sterile after half an hour and can be safely left in the solution for up to 24 hours. The solution must be changed daily.

Avoid leaving sterilised empty bottles out on work surfaces as they will quickly lose their sterility. Ideally, sterilisers have built-in storage facilities and bottles can be removed when required.

Note: Dishwashers can be used to clean bottles and equipment, but these items must still be sterilised – the dishwasher does not sterilise.

STORING STERILISED BOTTLES

If not using sterilised bottles immediately, care needs to be taken to store them correctly to avoid them coming into contact with bacteria.

- Ensure your hands and the work bench are clean
- Using sterile tongs, place the teat 'upside-down' in the bottle, and place the sterilised cap and lid on the bottle
- Store bottles in a clean place away from dust
- If not used within 24 hours sterilised bottles should be sterilised again before use.

PREPARING FORMULA

Before preparing formula

- Ensure your hands and the work bench are clean
- Boil water and leave to cool for approximately 30 minutes. This will ensure that the water is not too hot (70°C is the best temperature to prepare formula as it will dissolve easily).

When preparing infant formula always closely follow the instructions on the tin. In general:

- always wash hands thoroughly prior to preparing formula
- do not compact the formula powder in the scoop, and always ensure the correct ratio of formula to water as specified on the tin: Too little formula powder may leave the infant hungry, whilst too much can cause constipation
- always use a sterilised knife to level the top of the scoop when measuring the formula powder
- without touching the teat shake the bottle well to mix the contents
- cool the made-up formula as quickly as possible: If using immediately run under cold tap water or place in a large bowl of cold water (with the lid on to avoid contaminating the teat)
- if not using immediately made-up formula should be cooled and stored in the fridge.

Warming bottles

- Warm bottles once only
- Do not allow a bottle to cool and then reheat as this can allow germs to grow
- Stand the bottle in a container of hot water for no more than 15 minutes

- Before feeding the infant, check the temperature of the milk by letting a small drop fall on the inside of your wrist- it should feel warm or even a little cool
- Do not warm breast milk or formula in a microwave
- Do not refreeze thawed breast milk
- Discard any milk that has not been used

STORING BREASTMILK AND FORMULA

For safe storage of formula and breast milk, refrigerators must be kept at 5°C or below and should have a non-mercury thermometer to monitor the temperature.

- Formula or breast milk must be kept refrigerated or frozen if not being immediately consumed
- Whenever possible, make up formula as it is needed. Formula should not be refrigerated for more than 24 hours
- Where possible, store freshly made formula at the back of the refrigerator
- Any remaining formula should be thrown out if an infant does not finish a bottle: It should not be frozen or reheated
- Prior to placing bottle in the fridge staff will check that it/they are labelled with the child's name and the date the bottle was prepared.

BREAST MILK CAN BE STORED IN SEVERAL WAYS, WHICH INCLUDE:

1. refrigerated for no more than no more than 72 hours at 5°C or lower (5°C is the typical temperature of a standard fridge)
2. store breast milk on a shelf of the refrigerator, not in the door
3. frozen in a separate freezer section of a refrigerator for up to 3 months. If being frozen in a freezer compartment inside the refrigerator (as opposed to a freezer with a separate door), the breast milk should only be stored for 2 weeks.
4. Frozen in a deep freeze (at a temperature of -18°C) for 6-12 months.

FROZEN BREAST MILK CAN BE THAWED:

1. in the refrigerator and used within 24 hours
2. standing the bottle in a container of lukewarm water and used straight away

Source: 6th Edition Staying Healthy Preventing infectious diseases in early childhood education and care services (2024).

The *Bottle Safety Preparation Policy* will be reviewed on an annual basis in conjunction with children, families, staff, educators and management.

SOURCES

Australian Breastfeeding Association www.breastfeeding.asn.au

Australian Children's Education & Care Quality Authority. (2025). [*Guide to the National Quality Framework*](#) Australian Government Department of Health and Aged Care. [*Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood*](#).

Australian Government Department of Health and Aged Care. [*Pregnancy, birth and baby*](#).

Australian Government National Health and Medical Research Council. (2013). Eat for health: Infant feeding guidelines: Information for health workers.

https://www.eatforhealth.gov.au/sites/default/files/files/the_guidelines/n56b_infant_feeding_summary_130808.pdf

ECA Code of Ethics. (2016).

[*Education and Care Services National Regulations*](#). (Amended 2023).

Food Standards Australia – www.foodstandards.gov.au

National Health and Medical Research Council. (2024). *Staying Healthy: preventing infectious diseases in early childhood education and care services* (6th Ed.). NHMRC. Canberra.

NSW Ministry of Health. (2014). Caring for children birth to 5 years: Food, nutrition and learning experiences. <https://www.health.nsw.gov.au/health/Publications/caring-for-children-manual.pdf>

Safe Food and Health Service Executive. (2013). How to prepare your baby's bottle.

[*Western Australian Legislation Education and Care Services National Regulations \(WA\) Act 2012*](#)

REVIEW

POLICY REVIEWED BY	Hayley Owen	Director	2/2/25
POLICY REVIEWED	FEBRUARY 2025	NEXT REVIEW DATE	FEBRUARY 2026
VERSION NUMBER	V11.02.25		
MODIFICATIONS	<ul style="list-style-type: none"> annual policy review sources checked for currency and updated as required 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS		NEXT REVIEW DATE
FEBRUARY 2024	<ul style="list-style-type: none"> annual policy review sources checked for currency and updated as required 		FEBRUARY 2025