**Appendix B**

**Summary of excluded studies with pre-post study design examining interventions to improve the diet, physical activity and/or weight status of children attending family day care services.**

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| **First author, year published, country** | **Study design** | **Number of family day care schemes, providers and children** | **Description of intervention** | **Outcomes, follow up time point** | **Data collection method** | **Results** |
| Bravo 2008, Australia(28) | Repeat cross-sectional pre-post study, with no parallel control group | Family day care schemes: 7  Family day care staff: 18  Family day care providers: 104 at baseline (data collected for 20 infants and 203 1-5 year olds)  102 at post intervention (data collected for 22 infants and 102 1-5 year olds) | Good food in family day care project. Strategies include having an advisory committee to foster organisational support, workshop to develop workforce knowledge and skills, and printed nutrition resources | Nutrition and food safety policies  Food and drinks provided  Pre-intervention needs assessment and baseline data collection  (1997–1998)  Intervention implementation (1998–2000)  Post-intervention data collection (2000–2002) | Nutrition and food safety knowledge checklist with carers  (self-report on Likert scale from 1-7)  Modified diet history interview to assess food provision | Nutrition and food safety knowledge and the number and quality of appropriate policies improved post-intervention. Changes in mean percent nutrition scores for infants (78.2% to 83.4%) and 1-5 year olds (68.8% to 75.2%; *p* < 0.01) indicated improvements in nutritional quality of food and drinks offered during care |
| Dev 2018, USA(30)  Dinkel 2018, USA(31) | Pre-post study design with no control group  Pre-post study design with no control group | Family day care providers: 208  Family day care providers: 201 | Go NAP SACC Programme.  Strategy was in-person training, a meeting with a Go NAP SACC trainer, support from trainers and post self-assessment.  Go NAP SACC Programme.  Strategy was in-person training on health including physical activity, meeting with the Nebraska Go NAP SACC trainer, technical assistance from trainer and post assessment | Child nutrition scores for nutrition environment,  screen time scores for screen time environment  Implementation of Go NAP SACC took between 4-6 months to complete  Program ran from August 2014 to October 2017  Infant and child physical activity scores and outdoor play and learning scores to assess physical activity environments  Implementation of Go NAP SACC took between 4-5 months on average to complete  Program ran from August 2014 to August 2016 | Go NAP SACC survey (self-report) focussed on two of the five topic areas: child nutrition which is comprised of 44 questions and screen which is comprised of 12 questions  Go NAP SACC survey (self-report) focussed on 2 of the 5 topic areas: infant and child physical activity which is comprised of 20 questions and outdoor play and learning which is comprised of 14 questions | Family day care providers made significant improvement in the following areas; meats, fats and grains (2 of 8 items); family-style dining (1 of 1 item); supporting healthy eating (2 of 5 items); feeding practices (2 of 10 items); menus and variety (1 of 2 items); nutrition education for staff, children and parents (5 of 6 items); and nutrition policy (1 of 1 item). After the intervention, participating programmes made significant improvement in all the areas under screen time: availability (5 of 5 items); daily practices (1 of 2 items); education and professional development (4 of 4 items); and policy (1 of 1 item)  At post, family childcare providers demonstrated significant differences in 85% of the infant and child physical activity topics (17 of 20) and 80% of the outdoor play and learning topics |
| Kao 2018, USA(34)  Woodward-Lopez, 2018, USA(35) | Pre-post intervention without a control group  Pre-post intervention without a control group | Family child care providers: 17  Plate waste observations: 333 | Healthy Eating and Active Living Project/Initiative  Strategy included a physical activity workshop for child care staff and technical assistance to develop a policy to promote physical activity and other healthy behaviours  Healthy Eating and Active Living Project/Initiative  Strategy included two nutrition related provider workshops, nutrition resources and technical assistance to develop a policy to promote nutrition related organisational policies, practices and implementation strategies | Change in provider reported physical activity policies and practices and observed physical activity environment  Baseline data collected in May and June 2012 and follow-up data collected in May and June 2014  Changes in nutrition policies and dietary intake  Baseline data collected in May and June 2012 and follow-up data collected in May and June 2014 | Creating healthy opportunities in childcare environments self-assessment questionnaire (self-report)  Policies and practices questionnaire (self-report)  Observations of the physical activity environment  Creating healthy opportunities in childcare environments self-assessment questionnaire (self-report)  Plate waste observations and lunch foods offered recorded | Between baseline and follow-up, providers significantly increased both the number of structured, adult-led activities (2.6 vs 3.2 activities per day) and the number of structured, adult-led minutes of activity in which children participated (49 vs 83 minutes per day). Providers also improved screen time practices and made improvements to the physical activity environment.  There were significant increases in staff training, parental involvement, and several of the targeted nutrition-related practices; prevalence of most other practices either improved or was maintained over time. There were significant increases in the number of sites meeting Child and Adult Care Food Program meal guidelines, variety of fruit and frequency of vegetables offered, and reductions in frequency of juice and high-fat processed meats offered. Adequate portions of all food groups were consumed at both time points with no significant change over time |
| Naylor 2011, Canada(32) | Pre-post intervention without a control group | Family day care providers: 321 | Healthy physical activity opportunities for pre-schoolers. Participants attended a two day professional development workshop and delivered four workshops in their community | Changes in knowledge, attitudes, behavioural control and confidence  Data collected pre-workshop and nine months post-workshop | Workshop leader questionnaire, workshop tracking survey and participants questionnaire (self-report)  Participant telephone interview | 73% of workshop participants (48 workshops, n = 321) took part in the evaluation; intention to use what they learned after the workshop was high (86%) and perceived knowledge, confidence, and attitude all increased significantly (*p* < .001) |

Go NAPSACC, Go nutrition and physical activity self-assessment for childcare