

# Sleeping and Rest Requirements Policy

All children have individual sleep and rest requirements. Our objective is to meet these needs by providing a comfortable, relaxing and safe space to enable their bodies to rest. This environment will also be well supervised ensuring all children feel secure.

## National Quality Standard (NQS)

Quality Area 2: Children's Health and Safety		
2.1.1	<b>Wellbeing and comfort</b>	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation
2.2	<b>Safety</b>	Each child is protected
2.2.1	<b>Supervision</b>	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard

Quality Area 3: Physical Environment		
3.1	<b>Design</b>	The design of the facilities is appropriate for the operation of a service
3.1.2	<b>Upkeep</b>	Premises, furniture and equipment are safe, clean and well maintained

## Education and Care Services National Regulations

Children (Education and Care Services) National Law NSW	
<b>81</b>	Sleep and Rest
<b>103</b>	Premises, furniture and equipment to be safe, clean and in good repair
<b>105</b>	Furniture, materials and equipment
<b>110</b>	Ventilation and natural light
<b>115</b>	Premises designed to facilitate supervision
<b>168</b>	Education and care service must have policies and procedures

## Related Policies

Work Health and Safety
Health and Safety
Nursery Furniture and Equipment Safety Policy

## PURPOSE

Our Service will ensure that all children have appropriate opportunities to sleep, rest and relax in accordance with their individual needs. The risk of Sudden Infant Death Syndrome (SIDS) will be minimised by following practices and guidelines set out by health authorities.

If a family's beliefs and requests are against current recommended evidence-based guidelines, our Service will need to determine if there are exceptional circumstances that allow for alternate practices.

Our Service will only approve an alternative practice if the Service is provided with written advice from and the contact details of a registered medical practitioner accompanied by a risk assessment and risk minimisation plan for individual children. We have a duty of care to ensure children are provided with a high level of safety when sleeping and resting and every reasonable precaution is taken to protect them from harm and hazard. In meeting the Service's duty of care, it is a requirement that all Educators implement and adhere to this policy to ensure we respect and cater for each child's specific needs.

## SCOPE

This policy applies to children, families, staff, management and visitors of the Service.

## IMPLEMENTATION

Children have different sleep, rest and relaxation needs. Children of the same age can have different sleep patterns, which Nominated Supervisors and Educators need to consider within the Service. As per Standard 2.1 (Element 2.1.1) of the National Quality Standard, each child's comfort must be provided for and there must be appropriate opportunities to meet each child's sleep, rest and relaxation needs.

Our Service defines 'rest' as a period of inactivity, solitude, calmness or tranquility, and can include a child being in a state of sleep. Considering the busy and energetic nature of children's day, we believe it is important for children to participate in a quiet/rest period during the day in order to rest, relax and recharge their body. Effective rest strategies are important factors in ensuring a child feels secure and safe in an early childhood environment.

Our Service will consult with families about their child's individual needs, ensuring they are aware of the different parent's values and cultural beliefs associated with sleep requirements.

### Management will ensure:

- Reasonable steps are taken to ensure that the needs for sleep and rest of children being educated and cared for by the Service are met, having regard to the ages, developmental stages and individual needs of each child.
- There are adequate numbers of cots and bedding available to children that meet Australian Standards.
- All cots sold in Australia must meet the current mandatory Australian Standard for Cots (AS/NZS 2172), and should carry a label to indicate this.

- All portable cots sold in Australia must meet the current mandatory Australian Standard for children's portable folding cots, AS/NZS 2195, and should carry a label to indicate this.
- Sleep and rest environments are safe and free from hazards
- That areas for sleep and rest are well ventilated and have natural lighting.
- That supervision window (or similar) will be kept clear to ensure safe supervision of sleeping children.
- Ensure safe sleep practices are documented and shared with families. Nominated Supervisors and Educators are not expected to endorse practices requested by a family, if they are different from the 'Red Nose' safe sleeping recommendations.

#### A Nominated Supervisor/ Responsible Person will:

- Take reasonable steps to ensure that the needs for sleep and rest of children being educated and cared for by the Service are met, having regard to the ages, development stages and individual needs of the children.
- Maintain up to date knowledge regarding safe sleeping practice and communicate this information to Educators and families.
- Ensure that sleeping infants are closely monitored and that all sleeping children are within hearing range and observed. This involves checking/inspecting sleeping children at regular intervals (every 10 minutes), and ensuring that they are always within sight and hearing distance of sleeping and resting children so they can easily monitor a child's breathing and the colour of their skin.
- Negotiate sleep and rest routines and practices with families to reach agreement on how these occur for each child at the Service.
- Ensure Educators receive information and training to fulfil their role effectively, including being made aware of the sleep and rest policies, their responsibilities in implementing these, and any changes that are made over time.
- Ensure the child's safety is always the first priority
- Ensure children who are sleeping or resting have their face uncovered at all times
- Ensure the sleep and rest environment is free from cigarette or tobacco smoke

#### Educators will:

- Consult with families about children's sleep and rest needs
- Be sensitive to each child's needs so that sleep and rest times are a positive experience
- Ensure that beds/mattresses are clean and in good repair
- Ensure beds are wiped over with neutral surface cleaner between each use
- Ensure that bed linen is clean and in good repair
- Ensure clean bed linen is applied on all beds and cots
- Children are to use the same sheet and bed/cot throughout their attendance pattern each week to reduce the risk of cross contamination. Children can share beds/cots with other children whose attendance pattern is different to theirs (e.g a child that has a Monday to Wednesday attendance pattern can share a bed/cot with a child that has a Thursday/Friday attendance

pattern) but the bed/cot needs to be thoroughly cleaned with *Neutral Floor and Surface cleaner* and paper towel in between.

- Arrange children's beds and cots to allow easy access for children and staff.
- Create a relaxing environment for sleeping children by playing relaxation music, reading stories, turning off lights and ensuring children are comfortably clothed.
- Create a tranquil and calm environment for both Educators and children.
- Sit near children encouraging them to relax and listen to music. Remember that children do not need to be "patted" to sleep. By providing a quiet and tranquil environment, children will choose to sleep if their body needs it.
- Maintain adequate supervision and maintain child-to-educator ratios throughout the sleep period.
- Assess each child's circumstances and current health to determine whether higher supervision levels and checks may be required.
- Communicate with families about their child's sleeping or rest times and the service policy regarding sleep and rest times.
- Respect family preferences regarding sleep and rest and consider these daily while ensuring children feel safe and secure in the environment. Conversations with families may be necessary to remind families that children will neither be forced to sleep nor prevented from sleeping. Sleep and rest patterns will be recorded daily for families.
- Encourage children to dress appropriately for the room temperature when resting or sleeping. Lighter clothing is preferable, with children encouraged to remove shoes, jumpers, jackets and bulky clothing.
- Ensure children rest/sleep head to toe to minimise the risk of cross infection.
- Monitor the room temperature to ensure maximum comfort for the children.
- Ensure that each child's comfort is provided for.
- Ensure there are appropriate opportunities to meet each child's need for sleep, rest and relaxation.
- Ensure that children who **do not** wish to sleep are provided with alternative quiet activities and experiences, while those children who **do** wish to sleep are allowed to do so, without being disrupted. If a child requests a rest, or if they are showing clear signs of tiredness, regardless of the time of day, there should be a comfortable, safe area available for them to rest (if required). It is important that opportunities for rest and relaxation, as well as sleep, are provided.
- Consider a vast range of strategies to meet children's individual sleep and rest needs.
- Respond to children's individual cues for sleep (yawning, rubbing eyes, disengagement from activities, crying etc).
- Acknowledge children's emotions, feelings and fears.
- Develop positive relationships with children to assist in settling children confidently when sleeping and resting.

## CHILDREN IN COTS

### Educators will:

- Give bottle-fed children their bottles before going to bed.
- Ensure children are not be put in cots or in beds with bottles as per the Dental Health Policy.
- Ensure that cot rooms and sleep rooms have operational baby monitors on at all times.
- Observe children at 10-minute intervals while they sleep in these rooms. Educators must go into the rooms and physically see the children breathing. The Educator will then officially record this on a Sleep Check Form.
- Encourage the use of sleeping bags for babies. If they have fitted neck and armholes there is no risk for the child's face being covered.
- Securely lock cots sides and wheels into place to ensure children's safety.
- Turn off wall-mounted heaters before children use the room for sleeping. Cot rooms will be air conditioned and maintained at an appropriate temperature.
- Be aware of manual handling practices when lifting children in and out of cots.
- Participate in staff development about safe sleeping practices.
- Understand that bassinets, hammocks and prams/strollers do not carry safety codes for sleep. Babies should not be left in a bassinet, hammock or pram/stroller to sleep, as these are not safe substitutes for a cot.
- Ensure mattresses are kept in good condition; they should be clean, firm and flat, and fit the cot base with not more than a 20mm gap between the mattress sides and ends. A firm sleep surface that is compliant with the new AS/NZS Voluntary Standard (AS/NZS 8811.1:2013 Methods of testing infant products – Sleep surfaces – Test for firmness) should be used.
- Not elevate or tilt mattresses.
- Remove any plastic packaging from mattresses.
- Use firm, clean and well-fitting mattresses on portable cots.
- Remove pillows, doonas, loose bedding or fabric, lamb's wool, bumpers and soft toys from cots.
- Children are to use the same sheet and bed/cot throughout their attendance pattern each week to reduce the risk of cross contamination. Children can share beds/cots with other children whose attendance pattern is different to theirs (e.g a child that has a Monday to Wednesday attendance pattern can share a bed/cot with a child that has a Thursday/Friday attendance pattern) but the bed/cot needs to be thoroughly cleaned with *Neutral Floor and Surface cleaner* and paper towel in between.

## BABIES AND TODDLERS

- Babies should be placed on their back to sleep when first being settled. Once a baby has been observed to repeatedly roll from back to front and back again on their own, they can be left to find their own preferred sleep or rest position (this is usually around 5–6 months of age). Babies aged younger than 5–6 months, and who have not been observed to repeatedly roll from back to front and back again on their own, should be re-positioned onto their back when they roll onto their front or side.

- If a medical condition exists that prevents a baby from being placed on their back, the alternative practice should be confirmed in writing with the Service, by the child's medical practitioner.
- Babies over four months of age can generally turn over in a cot. When a baby is placed to sleep, Educators should check that any bedding is tucked in securely and is not loose. Babies of this age may be placed in a safe baby sleeping bag (i.e. with fitted neck and arm holes, but no hood). At no time should a baby's face or head be covered (i.e. with linen). To prevent a baby from wriggling down under bed linen, they should be positioned with their feet at the bottom of the cot.
- If a baby is wrapped when sleeping, consider the baby's stage of development. Leave their arms free once the startle reflex disappears at around three months of age, and discontinue the use of a wrap when the baby can roll from back to tummy to back again (usually four to six months of age). Use only lightweight wraps such as cotton or muslin.
- If being used, a dummy should be offered for sleep periods. It is recommended that dummy use should be phased out by the end of the first year of a baby's life. If a dummy falls out of a baby's mouth during sleep, it should not be re-inserted.
- Babies or young children should not be moved out of a cot into a bed too early; they should also not be kept in a cot for too long. When a young child is observed attempting to climb out of a cot, and looking like they might succeed, it is time to move them out of a cot. This usually occurs when a toddler is between 2 and 3 ½ years of age, but could be as early as 18 months.

#### Source

- Australian Children's Education & Care Quality Authority
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2015.
- ECA Code of Ethics.
- Guide to the National Quality Standard.
- Guidelines for SIDS and Kids Safe Sleeping in Childcare Facilities
- SIDS & Kids Safe Sleeping Kit – [www.sidsandkids.org](http://www.sidsandkids.org)
- Standards Australia – [www.standards.org.au](http://www.standards.org.au)
- The Children's Hospital at Westmead – Safety factsheet – Cots and Cot Mattresses, <http://kidshealth.schn.health.nsw.gov.au/sites/kidshealth.schn.health.nsw.gov.au/files/safetyfactsheets/cots-and-cot-mattresses.pdf>
- Australian Competition and Consumer Commission (ACCC) – [www.accc.gov.au](http://www.accc.gov.au) - Cot safety PDF
- Australian Consumer Law 2011 - Australian Competition and Consumer Commission.
- The NSW Work Health and Safety Act 2011 & the NSW Work Health and Safety Regulation 2011
- Safe sleep and rest practices from October 2017 (ACECQA)
- Revised National Quality Standards
- Red Nose - [https://rednose.org.au/downloads/Safe\\_Sleeping\\_Long\\_Brochure.pdf](https://rednose.org.au/downloads/Safe_Sleeping_Long_Brochure.pdf)  
<https://rednose.com.au/section/safe-practices>

## Review

Policy Reviewed	Modifications	Next Review Date
February 2017	Minor adjustments made with the addition of the National Quality Standard requirements for sleeping.	February 2018
October 2017	Merged Rest Time Policy with Sleeping Requirements Policy. Changes made to comply with changes to National Regulations and revised National Quality Standard and safe sleeping practice.	February 2018
February 2018	<ul style="list-style-type: none"> <li>- Added 'related policies' list</li> <li>- Improvement to opening statement</li> <li>- Minor terminology adjustments</li> </ul>	February 2019
April 2018	Reviewed policy to ensure best practice	August 2019
April 2019	Policy reviewed – changed wording slightly to be clearer	April 2020