

# **Sleep and Rest 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 safe, comfortable and secure.

Quality	Quality Area 2: Children's Health and Safety	
2.1	Health	Each child's health and physical activity is supported and promoted
2.1.1	Wellbeing and comfort	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	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

# National Quality Standard (NQS)

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

#### **Education and Care Services National Regulations**

Education and Care Services National Law (WA) Act 2012	
Section 165	Offence to inadequately supervise children
Section 167	Offence relating to protection of children from harm and hazard
81	Sleep and Rest
82	Tobacco, drug and alcohol-free environment
103	Premises, furniture and equipment to be safe, clean and in good repair
105	Furniture, materials and equipment
107	Space requirements-indoor space



110	Ventilation and natural light
115	Premises designed to facilitate supervision
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be available
172	Notification of change to policies or procedures
176	Time to notify certain information to Regulatory Authority

## **Related Policies**

Furniture and Equipment Safety Policy	Interactions with Children
Health and Safety Policy	Physical Environment Policy
	Respect for Children Policy
	Tobacco, Drug and Alcohol-Free Policy
	Work Health and Safety

#### PURPOSE

The *Education and Care Services National Regulations* requires approved providers to ensure their services have policies and procedures in place for children's sleep and rest. Our *Sleep and Rest Policy* will assist management and educators 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) for infants will be minimised by following practices and guidelines set out by the national authority on safe sleeping practice for infants and children-Red Nose (formerly SIDS and Kids). Our policy sets out quality practice and is informed by recognised and evidence-based principles. Safe Sleep practices are informed by Red Nose and guidance from ACEQCA.

If a family's beliefs and requests are against current recommended evidence-based guidelines, REED management will determine if there are exceptional circumstances that allow for alternate practices. REED will only approve an alternative practice if our 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 REED'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 REED Services.

## IMPLEMENTATION

'Children have different sleep, rest and relaxation needs. Children of the same age can have different sleep patterns that Nominated Supervisors, Responsible Person 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.' (ACECQA)

REED 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 play, we feel that 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 educators will consult with families about their child's individual needs, ensuring they are respectful of the different values, cultural and parenting beliefs and practices, or opinions 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 REED Services are met, having regard to the ages, developmental stages and individual needs of each child.
- All educators and new employees are provided with a copy of this policy as part of their induction program
- Nominated supervisors, educators, staff and volunteers follow the policy and procedures
- A risk assessment is developed, reviewed and updated every 12 months
- 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.
- All educators receive ongoing training and staff development in safe sleeping practices as recommended by Red Nose.
- 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 '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 REED Services are met, having regard to the ages, development stages and individual needs of the children.
- Ensure educators understand and follow the Sleep and Rest Policy
- Maintain up to date knowledge regarding safe sleeping practice and communicate this information to Educators and families.
- Provide opportunities for educators to participate in Red Nose professional training
- 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 10 minute intervals, 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 they 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.
- Provide information to families about Safe Sleep practices (see Red Nose <u>https://rednose.org.au/</u>)

# 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 and mattresses are wiped over with warm water and neutral detergent between each use.





- Ensure that bed linen is clean and in good repair.
- Ensure bed linen is used by an individual child and will be washed before use by another child.
- Arrange children's beds and cots to allow easy access for children and staff.
- Create a tranquil and relaxing environment for sleeping children by playing relaxation music, reading stories, cultural reflection; turning off lights and ensuring children are comfortably clothed.
- The environment is tranquil and calm for both educators and children.
- Sit near children who are resting, encouraging them to relax and listen to music.
- Maintain adequate supervision and maintain educator ratios throughout the sleep period.
- Check that the child is breathing by checking the rise and fall of the child's chest and the child's lip and skin colour from the side of the cot (or floor mattress/toddler bed)
- Ensure sleeping infants are closely monitored and that all sleeping children are within hearing range and observed.
- Ensure physical checks of a sleeping child occur at least every 10 minutes
- a record is maintained recording the time and observation of each physical check of under 2 year old's immediately after checks are made on the *Safe Sleep Record*
- 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.
- 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 (TV/DVD is not appropriate), 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.
- Record sleep and rest patterns to provide information to parents/families.

## **BABIES AND TODDLERS**

Recommendations sourced from Red Nose

- Babies 0-12 months, 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 but may not always be able to
  roll back again. 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.
- Ensure any bed linen is securely tucked underneath the mattress so it cannot ride up and cover the baby's chest of cover his/her head.
- 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.
- Ensure there is no soft bedding in baby's sleep environment. (pillows, doonas, loose bedding, lambswool or soft toys).
- If being used, a dummy should be offered for all sleep periods ). 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.

# Educators will:

- Give bottle-fed children their bottles before going to bed.
- 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 babies (0-2 years) breathing. The educator will then officially record this on a *Safe Sleep Record*.
- 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.
- Not place comfort items (blankets, soft toys) in the cot with babies under 7 months old, as per Red Nose safe sleep recommendations.
- Ensure teething beads and any other necklace is removed before placing the baby in the cot.
- Securely lock cots sides 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 babies 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.
- Ensure that waterproof mattress protectors are strong, not torn and a tight fit.
- 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.
- Record sleep and rest patterns.

PRE-SCHOOL AGE CHILDREN





# Educators will:

- be respectful of children's individual sleep and rest requirements
- discuss children's sleep and rest needs with families and include children in decision making
- provide a tranquil and calm environment for children to rest by turning off lights, playing relaxing music, reading stories, cultural reflection
- ensure children are comfortably clothed
- encourage children to rest their bodies and minds for 20-30 minutes
- introduce relaxation techniques into rest routine- use of a relaxation tape
- ensure children sleep with their face uncovered
- closely monitor sleeping and resting children
- provide quiet activities for children- puzzles, books, drawing if they do not fall asleep
- record sleep and rest patterns to provide information to parents/families.

## **Parents/Families**

REED requests parents/families provide educators with regular updates on their child's sleeping routines and patterns, especially for infants.

Families may be required to provide specific bedding for their child each day (as detailed in enrolment information).





Key terms

Term	Meaning	
ACECQA- Australian	The independent national authority that works with all regulatory	
Children's Education and	authorities to administer the National Quality Framework,	
Care Quality Authority	including the provision of guidance, resources and services to	
	support the sector to improve outcomes for children.	
Infant	A young child between the ages of birth and 12 months	
Rest	A period of inactivity solitude, calmness or tranquility and can	
	include a child being in a state of sleep.	
Relaxation	Relaxation or other activity for bringing about a feeling of calm in	
	your body and mind.	
Red Nose	Red Nose is Australia's leading authority on safe sleep and safe	
	pregnancy advice.	
Sudden and Unexpected	A broad term used to describe the sudden and unexpected death	
Death in Infancy (SUDI)	of a baby for which the cause is not immediately obvious.	
Sudden Infant Death	The sudden and unexpected death of an infant under one year of	
Syndrome (SIDS)	age with an onset of a fatal episode occurring during sleep, that	
	remains unexplained after a thorough investigation including	
	performance of a complete autopsy and review of the	
	circumstances of death and the clinical history.	

## Source

ACECQA. (n.d.). Safe sleep and rest practices: <u>https://www.acecqa.gov.au/resources/information-sheets/safe-sleep-and-rest-practices</u>

Australian Children's Education & Care Quality Authority. (2014).

Australian Competition and Consumer Commission (ACCC). (2013). Find out more: Keeping baby safe:

https://www.accc.gov.au/system/files/639 Keeping%20Baby%20Safe text FA4-WEB%20ONLY.pdf Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018).

Education and Care Services National Regulations. (2011)

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2018). (Amended 2020).

Red Nose: https://rednose.com.au/section/safe-practices

Red Nose: https://rednose.com.au/section/safe-sleeping

Revised National Quality Standard. (2018).

Standards Australia – <u>www.standards.org.au</u>

The NSW Work Health and Safety Act 2011

The NSW Work Health and Safety Regulation 2011





#### Review

Policy Reviewed	Modifications	Next Review Date
September 2023	Addition of removal of teething beads	September 2024
July 2021	Policy reviewed to align with ACECQA policy guidelines, additional section added – 'Families', additional section added – 'Key Terms'	June 2022
February 2020	Minor editing and reformatting	February 2021
January 2019	Policy developed by REED management	January 2020

