

## SLEEPING AND REST

### National Quality Standards

#### Quality Area 2: Children's Health and Safety

**Standard 2.1:** Health – Each child's health and physical activity is supported and promoted.

**Standard 2.2:** Safety – Each child is protected.

#### Quality Area 3: Physical Environment

**Standard 3.1:** Design – The design of the facility is appropriate for the operation of a service.

#### Quality Area 5: Relationships with Children

**Standard 5.1:** Relationships between educators and children – Respectful and equitable relationships are maintained with each child.

### Education and Care Services National Regulations

**81:** Sleep and Rest

**103:** Premises, furniture and equipment to be safe, clean and in good repair

**105:** Furniture, materials and equipment

**110:** Ventilation and natural light

**115:** Premises designed to facilitate supervision

## PURPOSE

Educators must take reasonable steps to ensure that the needs for sleep and rest of children being educated and cared for are met.

## POLICY

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.

## PROCEDURE

Children have different sleep, rest and relaxation needs. Children of the same age can have different sleep patterns, which Educators need to consider.

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 days, 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.

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

#### Educators 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.
- Maintain up to date knowledge regarding safe sleeping practice and communicate this information to families.
- Ensure that sleeping infants are closely monitored and that all sleeping children are within hearing and or sight range. This involves checking/inspecting sleeping children at regular intervals, and ensuring that they are always within sight and/or hearing distance of sleeping and resting children so they can easily monitor a child's breathing and the colour of their skin. If the baby or children are asleep in a spate room to where the educator is situated, a baby monitor is required at all times.
- Consult with families about children's sleep and rest needs
- Negotiate sleep and rest routines and practices with families to reach agreement on how these occur for each child at the Service.
- 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.
- 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
- 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 bed linen is used by an individual child and will be washed before use by another child. All bedding must be in good repair.
- Arrange children's beds and cots to allow easy access for children and the educator.
- Create a relaxing environment for sleeping children by playing relaxation music, reading stories, cultural reflection; turning off lights and ensuring children are comfortably clothed.

- Assess each child's circumstances and current health to determine whether higher supervision levels and checks may be required.
- 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
- 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
- Give bottle-fed children their bottles before going to bed
- Record children's sleep patterns using a sleep form/booklet
- Amber teething necklaces and bracelets consist of amber beads which are a fossilised tree resin. The possible risks indicates that they can release small parts which could result in choking hazards to children under three. These items must be removed from the child when the child is sleeping and if child is unsupervised (resting)

## CHILDREN IN COTS

### Educators will:

- Give bottle-fed children their bottles before going into the cot.
- Ensure that sleep rooms have operational baby monitors on at all times
- Observe children regularly. Educators must go into the rooms and physically see babies breathing. The Educator will record children's sleep patterns using a sleep form/booklet
- 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.
- Be aware of manual handling practices when lifting babies in and out of cots
- 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
- Waterproof mattress protectors are strong, not torn and a tight fit
- Remove pillows, doonas, loose bedding or fabric, lamb's wool, bumpers and soft toys from cots
- Amber teething necklaces and bracelets consist of amber beads which are a fossilised tree resin. The possible risks indicates that they can release small parts which could result in choking hazards to children under three. These items must be removed from the child when the child is sleeping and if child is unsupervised (resting)

## **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.
- 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.

## OVERNIGHT SLEEPING

- no child aged 7 years or more may sleep in the same room as another child of the opposite sex who is not a relative
- no child may sleep in the same room in which an adult is sleeping
- a permanent bed must be available for each child attending overnight care who does not require a cot
- a baby monitor must be used for all children sleeping overnight
- the use of the monitor must be explained to older children that it will be used so that they can contact the educator if needed throughout the night
- educators must check on the sleeping children as per the monitoring routine until the educator retires, then resumes the routine on waking

### 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.com.au/section/safe-practices>

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**Associated Forms/information:**

Sleep monitoring form

Sleep monitoring form – overnight care

Educator Work, Health and Safety Maintenance and Cleaning Checks – SIDs and KIDS safe sleeping

*Failure to comply with this policy may result in disciplinary action or termination of employment or registration as an educator*