



2.04 SLEEP AND REST

Purpose Statement

Sleep, rest and relaxation is integral to a child's health and development. Sleep and rest is also critical for a child's learning and behaviour.

In an education and care setting, it is important to balance the individual child's needs for sleep and rest with the needs of other children and factors associated with the physical environment (i.e. physical space, programming, meal times etc.).

Safe sleep practices are an important factor in establishing sleep and rest routines. Sudden Infant Death Syndrome (SIDS) is a major cause of death among infants and Windermere is committed to creating a safe sleep environment for all infants and children accessing services.

Scope

This policy applies to all salaried full time and part time staff (including casuals), educators and contractors.

Policy Statement

EDUCATORS WILL WORK TOGETHER WITH CHILDREN AND FAMILIES TO PROVIDE OPPORTUNITIES FOR REST AND RELAXION AS WELL AS SLEEP IN A SAFE AND SECURE ENVIRONMENT.

Procedures

Understanding a Child's Sleep and Rest Needs

Educators will work together with parents/guardians to develop an understanding of a child's sleep and rest needs.

Educators will take all reasonable steps to ensure that the needs for sleep and rest are met. A child's age, developmental stage and individual needs (as discussed with parents) will determine when sleep and rest takes place.

The following factors are to be discussed with children and/or parents/guardians in order to understand individual needs and preferences:

1. How a child signals that he/she is tired (i.e. rubbing eyes, yawning)
2. Routines established within family home
3. Strategies required to assist a child to transition to sleep

NOTE: Parents are encouraged to inform educators if their child did not have enough sleep the night before or if they are unwell. In such instances, changes may need to be made to sleep, rest and relaxation needs.



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The Physical Environment

Children have difficulty in sleeping and/or resting in environments where they do not feel safe or secure.

Things to consider in creating a safe and secure environment for sleep and rest include:

1. Calming routines (i.e. story time)
2. Lowering the light
3. Minimising noise and distractions
4. Cool room temperature
5. Enforcing a smoke free policy (refer to the Smoke, Drug & Alcohol Free Environment procedure).
6. Equipment that is safe and free from hazards.
7. Comfortable space – positioning of cots/beds/mattresses (i.e. away from windows and away from blinds and/or curtain cords).
8. The individual needs of children to transition to sleep (i.e. soft music).

Sleeping Facilities and Portacots

In providing a comfortable space for each child requiring a sleep, the following must be in place:

1. A separate mattress for each child in care to sleep independently. Mattresses must be in good, clean condition and be firm and flat.
2. Individual, clean bed linen for each child (NOTE: bed linen is to be cleaned weekly)
3. Cots as supplied are free of bumpers, pillows and/or doonas. Cot mattresses must fit the cot base with no more than a 20mm gap between the mattress sides and ends.
4. Babies are to be placed on their backs for sleeping. At around 5-6 months of age when babies repeatedly roll from back to front, they can be left to find their own preferred sleep or rest position. When first being settled, however, place all babies on their back. Babies aged younger than 5-6 months who have not been observed to repeatedly roll on their own, are to be re-positioned onto their back when they roll onto their front or side.
5. When put to bed, babies are to be positioned with their feet at the bottom of the cot to prevent the possibility of wriggling down under bed linen. Check that linen is tucked in and secure. At no time during sleep should a baby's face or head be covered (i.e. with linen). *NOTE: sleeping bags with a fitted neck and arm holes are an alternative option to a top sheet.*
6. Do not place anything around the neck of a sleeping child (e.g. amber teething necklaces). Amber teething bracelets are also not recommended while a child sleeps.
7. Do not use electric blankets, hot water bottles and wheat bags in cots.
8. If being used at home, 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. Discuss with parents/guardians, the phasing out of dummy use once a child celebrates his/her first birthday.



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9. When a 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 between the ages of 2 and 3½ years, but can be as early as 18 months.
10. Do not use portable cots if the child weighs 15kg or more.
11. Bunk beds are not to be used for rest time of Family Day Care children.
12. Nursery/bedroom furniture checked for compliance against Australian Standards (see attached for AS/NZS requirements).

Under no circumstances are children to use bunk beds as a play area. Many injuries occur as a result of children falling from bunk beds when playing.

Under no circumstances are children permitted to sleep in prams, high chairs, swings or bouncers.

Where children are in care overnight, the following rules apply:

1. Children 8 years and over must not sleep in a room with another child (other than a sibling).
2. Children must have their own bed
3. Privacy rights are to be respected (i.e. knock on bedroom door to enter should a child's bedroom door be closed).

Monitoring Sleeping and Resting Children

Educators are to closely monitor sleeping and resting children and the sleep and rest environments. This involves checking sleeping children at regular interval (i.e. every 10-15 minutes). The age of the children, individual needs, medical conditions and history of health and/or sleep issues should all be considered when determining how often to check on sleeping and resting children.

SIDS (Red Nose)

Sudden Infant Death Syndrome (SIDS) is the leading cause of post neonatal infant death from one to twelve months of age in Australia (ABS, 2003). Red Nose (www.rednose.com.au) is a national authority providing guidance on safe sleeping practices for infants and children. Maintaining a safe and secure environment for sleep is critical to reducing the risk of sudden unexpected death in infancy. For further information on safe sleeping, see <https://rednose.com.au/resources/education>

Relevant Standards/Legislation

- National Quality Framework for Early Childhood Education and Care Services including:
 - Education and Care Services National Law 2011
 - Education and Care Services National Regulations 2011

Related Policies & Links

- Australian Cot Standard AS/NZS 2172
- Australian Standard AS/NZS 2195 (portable cots)
- Australian Standard AS/NZS 4220 (bunk beds)



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- ACECQA – Quality Area 2, Children’s Health & Safety
- www.rednose.com.au

Does your cot meet Australian Standards (AS/NZS 2172)?	Yes	No
Does the cot have a label or sticker that says it complies with the mandatory standard AS/NZS 2172?		
Does the mattress fit snugly to within 20mm of sides and ends?		
Do the cot sides and ends sit at least 500mm higher than the mattress?		
Are the spaces between the cots bars or panels between 50mm and 95 mm? NOTE: gaps wider than 95mm can trap a child’s head		
Are there any fittings (including bolts, knobs and corner posts) that might catch onto a child’s clothing and cause distress or strangulation?		
Does your portable cot meet Australian Standards (AS/NZS 2195)?	Yes	No
Does the portacot have a label or sticker that says it complies with the mandatory standard AS/NZS 2195?		
Does the portacot have two locking mechanisms to prevent accidental collapse and closure?		
Does the portacot have brakes or some other mechanism to stop it rolling (relevant if cot has wheels or castors)?		
Is the floor of the portacot firm with no sagging?		
Are the fabric or mesh sides taut, free from tears and well ventilated?		
Are children unable to unlock the locking devices?		



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Safe Sleeping Practices

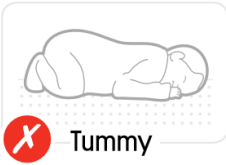
1. Sleep baby on their back



Back



Side



Tummy

Sleeping baby on the side or tummy increases the risk of sudden infant death

2. Keep head and face uncovered



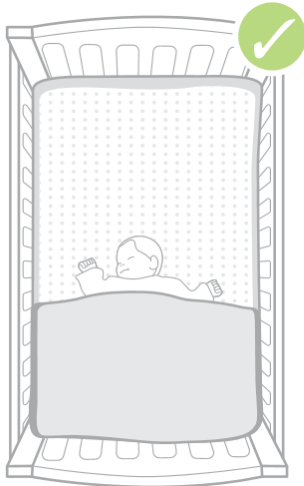
- Baby on back
- Feet to bottom of cot
- Blankets tucked in firmly



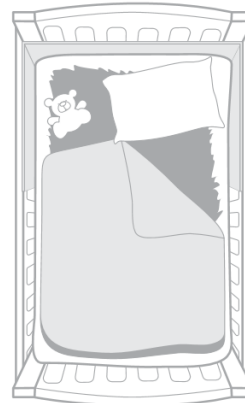
- Use a safe baby sleeping bag with fitted neck and armholes and no hood

Covering baby's head or face increases the risk of sudden infant death

3. Safe sleeping environment



- **Safe cot**
[should meet current Australian Standard AS2172]
- **Safe mattress**
firm, clean, flat, right size for cot
- **Safe bedding**
soft surfaces and bulky bedding increase the risk of sudden infant death

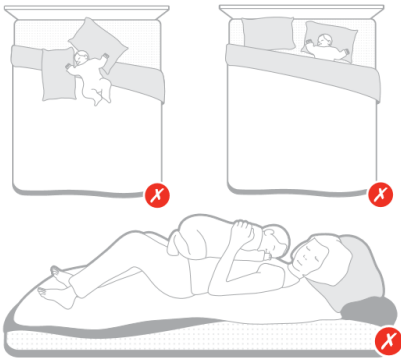


- pillow
- cot bumper
- lambs wool
- soft toy eg: teddy
- doona



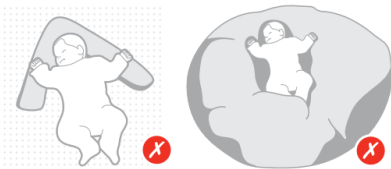
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Unsafe ❌ sleeping places



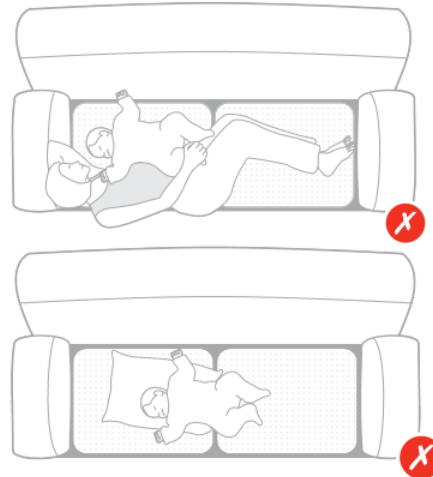
Unsafe ❌ sleeping places

Pictures with a 'X' are **NOT** safe sleeping places



Unsafe ❌ sleeping places

Pictures with a 'X' are **NOT** safe sleeping places



remember



Sleep young children safely:

- Safe bed
- Safe mattress
- Safe bedding
- Safe sleeping environment night and day

Alert !

- Bean bags, sofas, large cushions and air mattresses are not safe places for young children to sleep.
- Bunk beds are not recommended for children under nine years of age.
- If a child is wearing a baby sleeping bag whilst sleeping outside of a cot be careful! A child wearing a baby sleeping bag and not confined to a cot is at a higher risk of falling and being injured. The child must be actively supervised and the sleeping bag removed as soon as the child wakes.