
Policy Statement

Our Organisation aims to meet each child's need for sleep, rest and relaxation in a safe and caring manner that takes into consideration the preferences and practices of each child's family.

Sleep and rest periods are included in all children's daily routines consistent with their developmental needs.

Our Organisation's safe sleep and rest procedures and practices follow Red Nose Australia Guidelines, the recognised national authority in this area.

Procedures for Safe Sleep Practices - Long Day Care 0 – 6 years

Management will:

- ✓ Ensure all equipment used meets any relevant Australian Standards.
 - Cots will meet Australian Standards - AS/NZS 2172
 - The distance between slats is at least 50mm
 - Cots must not have any hazardous gaps:
 - between 30 and 50mm that can entrap a child's limbs
 - greater than 95mm that could trap a child's head or neck
 - Cots in the lowest base position, the distance between the top of the mattress base and the top edge of the lowest cot side or end is at least:
 - 600mm when access is closed
 - 250mm when access is open
 - Cots in the upper base position, the distance between the top of the mattress base and the top edge of the lowest cot side or end is at least:
 - 400mm when access is closed
 - 250 when access is open
 - Mattresses will meet Australian Standards - AS/NZS8811.1:2013
 - Cot mattresses must be in good condition, clean, firm, flat and fit the cot base.
 - Cot mattresses of the recommended size must be no more than:
 - 20mm from any cot side or end when centred on the mattress base.
 - 40mm when the mattress is pushed to one side or end.
- ✓ Ensure that the indoor spaces used by children are well ventilated; have adequate natural light; and are maintained at a temperature that ensures the safety and well being of children.

Coordinator/Responsible Person will:

- ✓ On enrolment consult families on their child's sleep and rest routine. Together with families the Coordinator will outline sleep and rest practices that accommodate each individual's preference for rest and sleep, but also ensuring the implementation of safe sleeping practices.
- ✓ Obtain written authorisation from the child's doctor if sleeping practices differ from safe sleep guidelines.
- ✓ Be aware of individual child's sleep and rest needs prior to child attending.
- ✓ Ensure Red Nose Sleep and Rest Audit Tool is completed in Term 1 and Term 3.

Educators will:

- ✓ Undertake a Risk Assessment once every 12 months or as soon as practicable after becoming aware of any circumstance that may affect the safety, health and wellbeing of children during sleep and rest.
- ✓ Be aware of each child's sleep and rest needs, and ensure this is implemented while the child is at the Service.
- ✓ Communicate with families daily about their child's sleep and rest routines and consult with them if needed.
- ✓ To the best of their ability ensure they can see and hear sleeping and resting children at all times. While we recognise that continuous supervision, in which an Educator is in sight and hearing of a sleeping child at all times represents best practice, there may be exceptional or extenuating circumstance where continuous supervision is not achievable at all times. If an Educator is unable to provide continuous supervision, Sleep and Rest checks will be carried out every 10 minutes.
- ✓ Adequate space between sleeping and resting children. Children will be positioned alternate head to tail, unless they are siblings.

- ✓ Complete for children the Safe Sleep and Rest Physical Check document every 10 minutes to monitor child's sleep position, breathing, skin and lips, head position, body temperature, airway and state (whether they are asleep in a cot or stretcher).
- ✓ Be aware of circumstances and needs of each child to determine any risks factors that may mean physical checks are required more frequently.
- ✓ Provide children who do not require sleep or rest with quiet, meaningful activities.
- ✓ Encourage children to communicate their needs for sleep and rest and make appropriate decisions about these needs.
- ✓ Support children who need rest and relaxation outside the designated sleep time.
- ✓ Create a rest environment that is calm and relaxing e.g: Play calm relaxing music, close the blinds, turn off artificial light etc.
- ✓ Comfort children when required. Educators try to avoid rocking children to sleep so they don't expect this at home.
- ✓ Implement the cleaning procedures as per our Hygiene and Cleaning Policy for cots, stretchers and linen.

Safe Sleeping Practices – 0 - 12 months

- ✓ Babies placed on their back with their feet at the bottom of the cot.
- ✓ Keep babies face and head uncovered.
- ✓ Babies who can roll back and forth may be left to find their own sleeping position.
- ✓ Ensure hanging cords or string from blinds, curtains, mobiles or electrical devices are away from cots and mattresses.
- ✓ Light bedding used and tucked in tightly. Sleeping bags with a fitted neck, arm holes or sleeves but no hood may be used instead of bed linen.
- ✓ Wraps made from lightweight material like muslin or cotton can be used.
- ✓ Wraps should be firm but not tight – allow hip flexion and chest wall expansion.
- ✓ Babies arms free from wraps once startle reflex disappears (around 3 months old) and discontinue wrapping when baby starts rolling.
- ✓ No wraps used if babies can roll from back to front to back again.
- ✓ No quilts, doonas, pillows, lambs wool, cot bumpers or loose bedding or fabric in cots.
- ✓ If child requires comforter to self sooth it will be supervised and then removed once the child is asleep.
- ✓ No electric blankets, hot water bottles or wheat bags.
- ✓ No bottles given to children while they are in a cot, for safety and dental hygiene reasons.
- ✓ No bibs on child.
- ✓ Dummies provided if required without chain attachments. Dummies not replaced if they fall out while child is sleeping.
- ✓ Babies should be dressed with consideration to the room temperature.
- ✓ No teething necklaces, bracelets or anklets or jewellery apart from stud earrings to be worn in the cot.
- ✓ A monitor may be used in Cot Room (however it will not replace Educators physically checking and monitoring children).

Safe Sleeping Practices – 12 months to 6 years

- ✓ Toddlers will be moved from cot to stretcher if likely to succeed when attempting to climb out of cot, regardless of age.
- If sleeping in a cot–
- ✓ Circumstances and needs of the individual child will be assessed to determine any risk factors that may mean the Safe Sleep and Rest Physical Check document is required eg. Lung disorders, colds etc.
- If sleeping on a stretcher –
- ✓ Keep areas around stretcher neat and tidy (to avoid trip hazards).
 - ✓ Ensure stretcher is positioned in sleep area where Educators are able to see and hear children at all times.
 - ✓ Educators are to undertake regular checks to ensure children's comfort items do not pose any risks.

Procedures for Safe Sleep and Rest - OOSH

- ✓ Educators recognise the need for and provide a range of active and passive experiences:-
 - in the daily routines
 - in program and excursion planning
 - in environment setup
- ✓ Educators allow children the options to choose between more active or passive activities:-
 - straight after School
 - after excursions
- ✓ Educators will provide children with opportunities for quiet activities:-

- Music
- Books
- Chill out area set up with cushions or mats or a sofa/futon
- ✓ Educators observe and are responsive to children communicating they are tired or in need of rest, comfort or assistance.
- ✓ Educators will ensure soft furnishings are in clean and hygienic order- noting frequency of cleaning in the Cleaning Checklist.

Sleep and Rest Environment - Long Day Care and OOSH

- ✓ To promote learning and wellbeing, Educators may occasionally encourage children to sleep or rest outdoors in suitable weather conditions. Educators will ensure:
 - Cots, stretchers or bedding are placed in clean and shaded areas
 - Bed linen is washed at the end of the day
 - Children are supervised at all times
 - The quality of children’s rest time is not affected by being outdoors

Considerations

Education and Care Services National Law

165	Offence to inadequately supervise children
167	Offence relating to protection of children from harm and hazards

Education and Care Services National Regulations

77	Health, Hygiene and safe food practices
82	Tobacco, drug and alcohol free environment
84A	Sleep and rest
84B	Sleep and rest policies and procedures
84C	Risk Assessment for purposes of sleep and rest policies and procedure
84D	Prohibition of bassinets
87	Incident, injury, trauma and illness record
103	Premises, furniture and equipment to be safe, clean and in good repair
105	Furniture, materials and equipment
106	Laundry and hygiene facilities
107	Space requirements – indoor space
110	Ventilation and natural light
115	Premises designed to facilitate supervision
168	Education and care services must have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be kept available
172	Notification of change to policies or procedures

Education and Care Services National Quality Standards

Quality Area	Standard	Element
QA 2 Children’s health and Safety	2.1 Health	2.1.1 Wellbeing and comfort
		2.1.2 Health practices and procedures
QA3 Physical Environment	3.1 Design	3.1.1 Fit for purpose
		3.1.2 Upkeep
QA 6 Collaborative partnerships with families and communities	6.1 Supportive relationships with families	6.1.2 Parent views are respected
QA 7 Governance and Leadership	7.1 Governance	7.1.3 Roles and responsibilities

Activity Centres Inc. Policies and Procedures

Child Safe Environment	Hygiene and Cleaning
Comfort	Laundry
Emergency	Smoking, drugs and alcohol

Enrolment	Work Health and Safety
First Aid – Management of Incident, Injury, Illness and Trauma	

My Time, Our Place

Outcome 1: Children have a strong sense of identity	<ul style="list-style-type: none"> • Children feel safe, secure and supported • Children develop their autonomy, inter-dependence, resilience and sense of agency • Children learn to interact in relation to others with care, empathy and respect
Outcome 3: Children have a strong sense of wellbeing	<ul style="list-style-type: none"> • Children become strong in their social and emotional wellbeing • Children take increasing responsibility for their own health and physical wellbeing
Outcome 5: Children are effective communicators	<ul style="list-style-type: none"> • Children interact verbally and non – verbally with others for a range of purposes

Early Years Learning Framework

Outcome 1: Children have a strong sense of identity	<ul style="list-style-type: none"> • Children feel safe, secure and supported • Children develop their emerging autonomy, inter-dependence, resilience and sense of agency • Children learn to interact in relation to others with care, empathy and respect
Outcome 3: Children have a strong sense of wellbeing	<ul style="list-style-type: none"> • Children become strong in their social and emotional wellbeing • Children take increasing responsibility for their own health and physical wellbeing
Outcome 5: Children are effective communicators	<ul style="list-style-type: none"> • Children interact verbally and non – verbally with others for a range of purposes

Legislation

Websites

Red Nose – Safe Sleeping Environment	rednose.org.au
Product Safety Australia	www.productsafety.gov.au
Australian Competition & Consumer Commission	www.waccc.gov.au
NSW Health – Safe sleep for babies	www.health.nsw.gov.au/kidsfamilies/MCFhealth/maternity/Pages/safe-sleep.aspx

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Policy is only endorsed if initialled by 2 members of the Management Committee

Endorsed by the Management Committee on the 29 May 2024
 Sleep and Rest for Children Policy is to be reviewed by the 29 May 2025