

# SLEEP AND REST TIME POLICY

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			Policies\Quality Area	2- Childrens Health &			
			Safety\Current policy				

#### **POLICY STATEMENT**

Deniliquin Children's Centre will ensure that all children have appropriate opportunities to sleep, rest and relax in accordance with their individual needs. We will provide beds and cots that comply with Australian Standards. The risk of Sudden Unexpected Death in Infancy (SUDI) will be minimised by following practices and guidelines set out by health authorities.

#### **RATIONALE**

All children have individual sleep and rest requirements. Children need a comfortable relaxing environment to enable their bodies to rest. This environment must be safe and well supervised to ensure children are safe, healthy and secure in their environment.

Our Sleep and rest time Policy is based on recommendations from SIDS & Kids.

### **PROCEDURE**

Approved providers, nominated supervisors and educators 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.

Our routine involves a set rest time every day, but we also provide rest time outside this time if required by children. We encourage flexible resting periods for babies meeting individual resting needs.

## Safe Equipment

- All equipment is to carry safety codes for sleep. Bassinets, hammocks and prams/strollers
  are not considered safe equipment to sleep in and cannot be considered a substitute for a
  cot or stretcher bed.
- Ensure a safety check of sleep and rest environments is undertaken on a regular basis.
- If hazards are identified, lodge a report as instructed in the service's policies and procedures for the maintenance of a child safe environment.
- Ensure hanging cords or strings from blinds, curtains, mobiles or electrical devices are away from cots and mattresses.
- Keep heaters and electrical appliances away from cots.
- Do not use electric blankets, hot water bottles and wheat bags in cots

Do not place anything (e.g. amber teething necklaces) around the neck of a sleeping child.
 The use of teething bracelets (e.g. amber teething bracelets) is also not recommended while a child sleeps.

#### **Safe Cot Mattress**

- Mattress should always be in good condition, they should be clean, firm and flat. Cot
  mattresses should fit the cot with no 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
- Mattresses should never be elevated or tilted.

### Portable cots (or portacots)

Portable cots should meet the *Cots for household use—Safety requirements* or the Australian/New Zealand Standard AS/NZS 2195:2010.

Folding cots—Safety requirements.

- Only use the firm, thin well fitting supplied portacot mattress will be used in a portacot.
- Educators will not place an extra mattress or padding under or over the manufacturer's portacot mattress.
- Note: educators should assess whether older babies or toddlers have the ability to climb over the sides of a cot as this presents a safety risk or are greater than 15kg. If this is the case- a stretcher bed is to be used.

#### Safe Bedding

- Light bedding is recommended.
- Remove pillows, doonas, loose bedding or fabric from cots.

#### **Beds, Cot and Sleeping Areas Checks**

At the start of each quarter, the service will conduct a safety check of the resting environments, equipment and/or aids by following attachment NQS 2.15 A1 'Building and equipment maintenance procedure- bedding and cot area audit'

## The Approved Provider 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." (Regulation 81.)

- Ensure there are adequate numbers of cots and bedding available to children that meet Australian Standards.
- Ensure that all cots meet AS/NZS 2172 and should carry a label to indicate this.
- Ensure that areas for sleep and rest are well ventilated and have natural lighting.
- Ensure that supervision windows will be kept clear to ensure safe supervision of sleeping children.

- Ensure that children's' safety, health and well-being are upheld at all times.
- Maintain up to date knowledge regarding safe sleeping practice and communicate this information to educators and families.
- Rest strategies and practices are outlined in the Family Handbook, enrolment forms, newsletters, poster and brochures. Information regarding SIDS & Kids Safe Sleeping Practices will be displayed on noticeboards and given to all new enrolments.

#### **Educators will:**

- Consult with families about children's sleep and rest needs at enrolment and as the child's needs change. Educators will be sensitive to each child's needs so that sleep and rest times are a positive experience. 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.
- If a family's beliefs and requests are in conflict with current recommended evidence-based guidelines, the service will need to determine if there are exceptional circumstances that allow for alternate practices.

For example, with some rare medical conditions, it may be necessary for a baby to sleep on his or her stomach or side, which is contrary to Red Nose recommendations. It is expected that in this scenario the service would only endorse the practice, with the written support of the baby's medical practitioner. The service may also consider undertaking a risk assessment and implementing risk minimisation plans for the baby.

In other circumstances, nominated supervisors and educators would not be expected to endorse practices requested by a family, if they differ with Red Nose recommendations. For example, a parent may request the service wrap or swaddle their baby while they are sleeping. However, according to Red Nose recommendations, this practice should be discontinued when a baby starts showing signs that they can begin to roll (usually around four to six months of age, but sometimes earlier).

Nominated supervisors and educators should be confident to refer to the service's Sleep and Rest Policies and Procedures if parents make requests that are contrary to the safety of the child. Child safety should always be the first priority.

 Rest strategies and practices are outlined in the Family Handbook, enrolment forms, newsletters, poster and brochures. Information regarding SIDS & Kids Safe Sleeping Practices will be displayed on noticeboards and given to all new enrolments.

## Supervise:

- Educators should closely monitor sleeping and resting children and the sleep and rest
  environments. This involves checking/inspecting sleeping children at regular 15 minutes
  intervals, and ensuring they are always within sight and hearing distance of sleeping and
  resting children so that they can assess a child's breathing and the colour of their skin.
- Educators will record each child's sleep times for family information
- Maintain educator ratios throughout the rest period. Supervision planning and the placement of educators across a service should ensure educators are able to adequately supervise sleeping and resting children
- Assess each child's circumstances and current health to determine whether higher supervision levels and checks may be required.
- Ensure children will sleep and rest with their face uncovered.
- 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. The room temperature will be considered to ensure maximum comfort for the children.

## Maintain effective hygiene and infection control

- Ensure that beds/mattresses are clean and in good repair. Beds and mattresses /
  protective covers will be wiped over with warm water and neutral detergent between each
  use as per the Hygiene and Infection Control Policy.
- Ensure that bed linen is clean and in good repair. Children's bed linen will be washed at the end of care during the week or at the end of week, whichever comes first.
- Mobile families are asked to provide their own bed linen.

#### **Children in Cots**

#### **Educators will:**

- Give bottle-fed children their bottles before going to bed. Children will not be put in cots or in beds with bottles.
- Ensure that cot rooms and sleep rooms must have operational baby monitors on at all times.
- The service will consider the risk for each individual child, and tailor Sleep and Rest Policies and Procedures (including the frequency of checks/inspections of children) to reflect the levels of risk identified for children at the service. Factors to be considered include the age of the child, medical conditions, individual needs and history of health and/or sleep issues.
- Ensure that cot mattresses are clean, firm and the correct size for the cot frame.
- Make up cots to comply with Red Nose safe sleeping messages. Babies will be placed on their backs to sleep, but they will be able to find their own sleeping position. No loose bedding is to be available to the child.
- Bed linens will be firmly tucked under the mattress to reduce the risk of a child covering their face. Put the baby's feet at the bottom of the cot so the baby cannot slip down under the covers. Tuck the baby in securely so bed linen is not loose.
- No doonas, duvets, pillows or cot bumpers will be placed in cots.
- Encourage the use of sleeping bags for babies. If they have fitted neck and armholes there
  is no risk for the child's face to be covered. The sleeping bag must be removed
  immediately after the child wakes.
- Ensure children remove hooded clothing, necklaces, bracelets etc will be removed from the child before rest.
- 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. The education and care service will access The Red Nose Child Care Kit and provide information to families on safe sleeping practices.

- Babies will be placed on their back to rest.
- If older babies turn over during their sleep, allow them to find their own sleeping position, but always lay them on their back when first placing them to rest.
- Families are welcome to bring in comforter items for their child/children ( children under 7 months of age whom require a comforter must have an educator supervising until the child is asleep). The comforter is then removed.

## Safe resting practices for toddlers (18month - 3 years).

- Toddlers will be placed on their back to rest, unless otherwise directed in writing by the child's medical practitioner.
- If toddlers turn over during their sleep, allow them to find their own sleeping position, but always lay them on their back when first placing them to rest.
- A sleep room/area which is set up with stretcher beds available for children to sleep at any time throughout the day. Stretchers are arranged to reduce the risk of cross infection between children.

## Safe resting practices for preschool children (3-5yrs)

- Preschool children will be placed on their back to rest. If they turn over during their sleep, allow them to find their own sleeping position but always ask them to lay on their back when first placing them to rest.
- An area which is set up with mats is available for children to sleep at any time throughout the day. Stretchers are arranged to reduce the risk of cross infection between children.

\*\* For safety reasons when a young child is observed attempting to climb out of a cot, it is time to move them out. Typically, this occurs between 2-3 years of age, and could be as early as 18months. Do not use a portable cot if the child weighs more than 15kg.

One option is to take the mattress from a cot or a full height single bed and use it made up on the floor. Ensure the mattress is positioned away from the walls as young children can become trapped bet ween the mattress and wall. A child's mattress needs to be firm to prevent sleep accidents. Keep the area around the mattress clear of soft toys, bean bags, plastic bags or similar objects that a young child can roll onto. Soft objects could mould around a young child's face, resulting in suffocation

# First aid for a non-breathing child will be administered by educators as per training and procedure displayed in the room.

## Effective settling techniques:

There is no definitive recognised authority for settling practices for resting children. However, there are general best practice standards.

- Arrange children's beds and cots to allow easy access for children and staff, and to ensure children can't reach each other. Beds will be positioned so that children can top and tail (to assist with infection control).
- Create a relaxing atmosphere for resting children by playing relaxation music, reading stories, cultural reflection, turning off lights and ensuring children are comfortably clothed.
- The environment should be tranquil and calm for both educators and children.
- Educators will sit near resting children and support them by encouraging them to relax and listen to music or stories.

- Remember that children do not need to be "patted" to sleep. By providing a quiet, tranquil environment, children will choose to sleep if their body needs it.
- Provide a quiet learning environment to encourage children to rest their bodies and minds for 20-30 minutes. This includes both indoor and outdoor and may involve cushions and mats.

## Settling children for rest

The techniques and strategies for settling a child/children for rest may reflect the:

- individual needs of the child or group of children;
- parenting beliefs and values of families accessing the service;
- professional philosophy, knowledge and experience of educators
- cultural and religious practices;
- frequency of days that the child attends care;
- · circumstances or events happening at home;
- consistency of practices between home and care;
- child's general health and wellbeing;
- status or condition of the rest environment; and
- use of comforters or resting aids (including dummies and security blankets).

When considering settling procedures for resting children, it is important for educators to:

- · meet the individual needs of children;
- maintain health and safety practices;
- minimise any distress or discomfort;
- acknowledge children's emotions, feelings and fears;
- avoid using settling and resting practices as a behaviour guidance strategy because the child begins to relate to the rest environment, which should be calm and secure, as a disciplinary setting; and
- understand that young children (especially from 0 to 3 years of age) settle confidently when
  they have formed bonds with familiar and trusted educators. Services should prioritise their
  staffing needs with individuals who are familiar with the young children in care before using
  relief staff whom children may not know.

#### LEGISLATIVE LINKS AND SOURCES

Red Nose saving little lives child care kit.

- SIDS & Kids website.
- Education & Care Services National Regulations 81
- United Nations Conventions on the Rights of a Child
- Occupational Health and Safety Act 2000
- Occupational Health and Safety Regulations 2001
- Children and Young Persons (Care and Protection) Act 1998
- National Childcare Accreditation Council
- National Quality Framework Standard 2.1, Element: 2.1.2
- https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safe-sleep-and-restpractices#principles

Building and equipment r	DENILIQUIN	
QIAS Principle	5.4.3, 6.5.1	Children's Centre
Staff Name:	Date:	
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## **Staff Signature:**

Yes	No	N/A	Bedding Safety	
Yes	No	N/A	All beds are to be adequately spaced allowing staff members to move freely among cots and beds.	
Yes	No	N/A	All cords are to be concealed away from cots and sleeping areas.	
Yes	No	N/A	Cot Room - All electric cords and power boards are to be inaccessible to all children at all times.	
Yes	No	N/A	Cot Room - All unused power sockets all are to have safety plugs in them.	
Yes	No	N/A	Children are not to be put to bed with dummy chains, bottles, doonas, jewellery etc.	
Yes	No	N/A	Appropriate heating and/or cooling needs to be provided within the room	
Yes	No	N/A	The room needs to have access to natural light.	
Yes	No	N/A	The room needs to be well ventilated.	
Yes	No	N/A	Cot room is not to be used as a storage room.	
Yes	No	N/A	Light switches need to be visible and easily locatable.	
Yes	No	N/A	Doors need to be in good working order and operational.	
Yes	No	N/A	Cots are to meet Australian Standards. Standard Label Identified.	
Yes	No	N/A	No visible sign of damage on beds	
Yes	No	N/A	No visible sign of damage on cots	
Yes	No	N/A	No paint peeling from cots or beds	
Yes	No	N/A	Plastic beds not brittle	
Yes	No	N/A	No finger traps on beds, particularly older style beds	
Yes	No	N/A	Staff are to be mindful of how they are carrying and placing children into their cots.	