

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 secure and safe at our Service.

NATIONAL QUALITY STANDARD (NQS)

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.

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.

LEGISLATIVE REQUIREMENTS/ EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
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
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
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

Dental Health Policy Family Communication Policy Furniture and Equipment Safety Policy Health and Safety Policy	Interactions with Children, Family and Staff Policy Physical Environment Policy Respect for Children Policy Tobacco, Drug and Alcohol-Free Policy Work Health and Safety
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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, our Service will need to determine if there are exceptional circumstances that allow for alternate practices. Our Service will only approve an alternative practice if the 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 the Service’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, educators, staff, management, approved provider, nominated supervisor, students, volunteers and visitors of the Service.

IMPLEMENTATION

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

Our Service defines 'rest' as a period of inactivity, solitude, calmness, or tranquillity, and can include a child being in a state of sleep. Considering the busy and energetic nature of children's day, 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 Service will consult with families about their child's individual needs, ensuring all parties are aware of the different values, cultural, and parenting beliefs and practices, or opinions associated with sleep requirements.

Approved Provider/Management 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
- 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
- there are adequate numbers of cots and bedding available to children that meet Australian Standards
- all cots used in our Service will meet the current mandatory Australian Standard for Cots (AS/NZS 2172) and will carry a label to indicate this.
- all portable cots used in our Service will meet the current mandatory Australian Standard for children's portable folding cots, AS/NZS 2195, and will carry a label to indicate this
- sleep and rest environments will be safe and free from hazards including cigarette and tobacco smoke

- areas for sleep and rest are well ventilated and have natural lighting
- the supervision window (or similar) will be kept clear to ensure safe supervision of sleeping infants
- 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 differ from [Red Nose](#) safe (formerly SIDS and Kids) 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 the Service 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 practices and communicate this information to educators and families
- provide opportunities for educators to participate in Red Nose professional training
- ensure there are appropriate opportunities to meet each child's need for sleep, rest and relaxation including providing children with comfortable spaces away from the main activity area for relaxation and quiet activities
- ensure that sleeping infants are closely monitored and that all sleeping children are within hearing range and observed. This involves physically checking/inspecting sleeping children at **regular 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. It is recommended that educators will not perform administrative duties that would take their attention away from sleeping/resting children.
- provide children with safe sleeping equipment and environment, including adequate ventilation and adequate lighting to enable effective supervision
- 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 parents and families about Safe Sleep practices. (see [Red Nose](#))

Educators will:

- have a thorough understanding of the Service's policy and practices and embed practices to support safe sleep into everyday practice
- 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 there are appropriate opportunities to meet each child's need for sleep, rest and relaxation
- ensure that each child's comfort is provided for
- ensure that beds/mattresses are clean and in good repair
- ensure beds and mattresses are wiped over with warm water and neutral detergent or vinegar solution between each use
- ensure that bed linen is clean and in good repair
- ensure bed linen is used by an individual child and is washed before use by another child
- arrange children's beds and cots to allow easy access for children and staff
- ensure children rest/sleep with their beds/mattresses head to toe to minimise the risk of cross infection- consider positioning of cots, mats, cushions etc to be at least 1.5 metres apart (COVID-safe plan)
- create a relaxing environment for sleeping children by playing relaxation music, reading stories, cultural reflection, turning off lights, and ensuring children are comfortably clothed
- ensure there are no loose aspects of clothing that could entangle the child during sleep/rest (including bibs)
- ensure the environment is tranquil and calm for both educators and children
- sit near children who are resting and encourage them to relax and/or listen to music.
 - 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.
- maintain adequate supervision and maintain educator ratios throughout the sleep period

- ensure they are not engaged in other duties (e.g., administrative duties) that will take their attention away from actively supervising sleeping and resting children
- physically 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 physical checks of a sleeping child occur at least every **10 minutes**
- If the child's face/body appears blue and the child is not breathing, initiate first aid immediately including calling an ambulance and beginning resuscitation
- ensure a record is maintained recording the time and observation of each physical check immediately after checks are made on the **Safe Sleep Record**
- ensure sleeping spaces are not dark- there needs to be sufficient light to allow supervision and to physically check children's breathing, lip and skin colour
- ensure sleeping infants are closely monitored and that all sleeping children are within hearing range and observed
- 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 children who **do not** wish to sleep are provided with alternative quiet activities and experiences, whilst 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. 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 in regard to sleep/rest time
- 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 ACECQA

- 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 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 or 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. Dummy use should be phased out by the end of the first year of a baby's life (in consultation with parents). 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 children are not be put in cots or in beds with bottles as per the *Dental Health Policy*
- 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 observe babies breathing and check the colour of their skin. The educator will then officially record this on a **Safe Sleep Record**
- encourage the use of sleeping bags with fitted neck and armholes for babies as there is no risk of the infant's face being covered.
- 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 may 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 to provide information to parents/families.

PRE-SCHOOL AGE CHILDREN

Educators will:

- be respectful for 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

Our Service 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 Children's Education and Care Quality Authority	The independent national authority that works with all regulatory authorities to administer the National Quality Framework, 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 Death in Infancy (SUDI)	A broad term used to describe the sudden and unexpected death of a baby for which the cause is not immediately obvious.
Sudden Infant Death Syndrome (SIDS)	The sudden and unexpected death of an infant under one year of 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: <https://www.acecqa.gov.au/resources/information-sheets/safe-sleep-and-rest-practices>

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).

NSW Department of Education. (2021). *Sleep and rest for children-Policy guidelines for early childhood education and care services.*

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 – www.standards.org.au

The NSW Work Health and Safety Act 2011

The NSW Work Health and Safety Regulation 2011

REVIEW

POLICY REVIEWED BY	Tahnee Jones	Manager	13/07/2022
POLICY REVIEWED	FEBRUARY 2022	NEXT REVIEW DATE	FEBRUARY 2023
MODIFICATIONS	<ul style="list-style-type: none"> Additional information added to policy to reflect best practice as requested by AO- NSW regulatory authority 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	

JUNE 2021	<ul style="list-style-type: none"> • policy reviewed to align with ACECQA policy guidelines (June 2021) • Additional legislative requirements added • Additional section added 'Families' • Additional section added- Key Terms 	FEBRUARY 2022
FEBRUARY 2021	<ul style="list-style-type: none"> • rearranged content- Information re: Babies and Toddlers and other specific procedures for educators related to babies and toddlers • added section specifically for pre-school aged children • checked currency of information from sources • additional related policies added 	FEBRUARY 2022
FEBRUARY 2020	<ul style="list-style-type: none"> • Referenced appropriate content to ACECQA • Sources checked for currency • Red Nose link added 	FEBRUARY 2021
FEBRUARY 2019	<ul style="list-style-type: none"> • Grammar, punctuation and spelling edited. • Additional information added to points. • Sources checked for currency – many links now unavailable: deleted and updated as required. • Sources/references corrected and alphabetised. 	FEBRUARY 2020
FEBRUARY 2018	<ul style="list-style-type: none"> • Added 'related policies' list • Improvement to opening statement • Minor terminology adjustments 	FEBRUARY 2019
OCTOBER 2017	<ul style="list-style-type: none"> • Merged Rest Time Policy with Sleeping Requirements Policy. Changes made to comply with changes to National Regulations and revised National Quality Standard and safe sleeping practice. 	FEBRUARY 2018
FEBRUARY 2017	<ul style="list-style-type: none"> • Minor adjustments made with the addition of the National Quality Standard requirements for sleeping. 	February 2018