

## Sleep Policy

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### Aim

This policy is based on recommendations from Red Nose. If a family's beliefs and practices conflict with Red Nose, the service will only endorse an alternative practice if the service is provided with written advice from and the contact details of a registered medical practitioner. In meeting the service's duty of care, it is a requirement that all educators implement and adhere to this policy.

We will aim to respect and cater for each child's specific needs.

### Implementation

The Nominated Supervisor will ensure that all staff members, educators and volunteers implement the following requirements –

- The service will provide a quiet and restful environment for sleep and rest periods that is within hearing and/or observation range for educators to closely monitor children.
- We recognise the differences between each child and family's preferences in relation to routines for rest, sleep and clothing. These needs will be met provided they are within the service's requirements.
- We respect the need for rest, sleep and clothing requirements to be aligned with each child's social and cultural background and personal preferences.
- We will communicate daily with parents about their child's routines that are in place at the service and at the child's home.
- Educators will work with children to help them learn about their need for rest and comfort. Children will be encouraged to communicate their needs where possible.
- Children who do not require sleep or rest will be provided with appropriate and quiet play activities.
- Children will be grouped in a way that minimises overcrowding.
- In line with the principles and objectives of the National Law, if a resting child falls asleep without assistance in instances where families have requested the child not have naps, educators may allow the child to sleep for a period they believe is in the best interests of the child's health and wellbeing. Educators will attempt to contact parents/guardians to discuss the situation as soon as possible.

- Children will not be left unattended in cots with a bottle
- Staff will undergo regular professional development in this area
- Information on reducing the risk of SIDS will be displayed and made available to families

### **Safe resting**

- Babies will be placed on their back to rest.
- If a medical condition exists that prevents a child from being placed on their back, the alternative resting practice must be directed in writing by the child's registered medical practitioner.
- If older children 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.
- At no time will a baby's face be covered with bed linen.
- To prevent a baby from wriggling down under bed linen, they will be placed with their feet closest to the bottom end of the cot.
- Quilts and duvets will not be used as bed linen.
- Soft toys/comforters will not be placed in the cot with children who are under 7 months (as recommended by Red Nose).
- Pillows, lamb's wool and cot bumpers will not be used.
- Light bedding is the preferred option, which must be tucked in to prevent the baby from pulling bed linen over their head.
- Sleeping bags with a fitted neck and arm holes are an alternative option to bed linen and encourage a baby to rest on their back. Sleeping bags should not have a hood.
- Calm relaxing music will be played if suitable.
- Dummies will be provided but they will not be attached to chains.
- If babies fall asleep on a cushion they will be moved to an approved cot or mattress or monitored closely

### **Supervision of resting children**

- All children who are resting will be supervised by educators ensuring ratios are upheld at all times.
- All children who have fallen asleep in the service will be monitored regularly with specific attention to breathing patterns. All babies will be checked every 10 minutes.

### **Settling children for rest**

Carers will comfort children when required. We discourage rocking children to sleep as this will form an unworkable habit with families at home.

### **Cots**

All cots meet Australian Standards for Cots and be labelled AS/NZS 2172:2010 or AS/NZS 2195:2010. Cot mattresses should be in good condition, clean, firm, flat and must fit the cot base with no more than a 25mm gap between the mattress and the sides of the cot.

Sleep rooms will not be over heated (the recommendation is 18- 22 degrees). Cots will be positioned so that babies cannot reach any hazard.

**Prams and strollers are not to be used for children to sleep or rest in.**

### **Hygiene practices**

- Cots and mattresses protective covers are sprayed with disinfectant as per cleaning schedule or when needed which is displayed in rooms.
- Each child has their own bed linen. Children's blankets and baby's sheets will be washed regularly at the centre as per washing schedule located in rooms.

### **Sleepwear**

Educators monitor the temperature of the rest environment and address children's clothing needs.

## **Sources**

**Education and Care Services National Regulations 2011**

**Early Years Learning Framework**

**Occupational Health and Safety Act 2000**

**Occupational Health and Safety Regulations 2001**

**Australian Bureau of Statistics (ABS). (2003). SIDS in Australia 1981-2000: A statistical overview.**

**Australian/New Zealand Standard AS/NZS 2172:2010, Cots for household use—Safety requirements**

**Australian/New Zealand Standard AS/NZS 2195:2010, Folding cots—Safety requirements**

**United Nations Conventions on the Rights of a Child**

## **Review**

The policy will be reviewed annually.

**Last reviewed: July 2020**

**Date for next review: July 2021**