PURPOSE:

To ensure that individual children’s needs for sleep and rest are met and respected in a safe and appropriate environment and provided with the appropriate bedding and furniture, considering cultural and religious requirements as well as individual routines.

SCOPE:

This Policy applies to Family Day Care (FDC) Educators, FDC Relief Educators, FDC Assistants, regular visitors, FDC Service staff members, FDC Educator family members, students, parents, children (including visiting children) and volunteers.

PRINCIPLE:

The approved provider of an education and care service has the responsibility to ensure the FDC Service has in place policies and procedures in relation to providing a safe, healthy, respectful and appropriate rest and sleep environment which meets the needs of individual children. The approved provider must take reasonable steps to ensure the policies and procedures are followed and made available for inspection or at request.

POLICY:

Effective rest and sleep strategies are important factors in ensuring a child feels secure and safe in a child care environment. FDC Educators must take reasonable steps to ensure that the needs for sleep and rest of children being educated and cared for are met, taking into consideration the ages, developmental stages and individual needs of the children.

PROCEDURES:

All children

1. Assess each child’s circumstances and current health to determine whether higher supervision levels and checks may be required.
2. Children should sleep and rest with their face uncovered.
3. Children’s sleep and rest environments should be free from cigarette or tobacco smoke.
4. Sleep and rest environments and equipment should be safe and free from hazards.
5. Supervision planning and the placement of educators across a service should ensure educators are able to adequately supervise sleeping and resting children.
6. Educators should closely monitor sleeping and resting children and the sleep and rest environments. This involves checking/inspecting sleeping children at regular 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. Service providers should 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.

Babies and toddlers

1. Assess each child’s circumstances and current health to determine whether higher supervision levels and checks may be required.
2. The first year of a baby’s life. If a dummy falls out of a baby’s mouth during sleep, it should not be re-inserted.
3. 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.
4. 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.
5. Babies over four months of age can generally turn over in a cot. When a baby is placed to sleep, educators should check that any bedding is tucked in secure 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.
6. 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. Visit the Red Nose website to download an information statement – Wrapping Babies – and the brochure – Safe Wrapping – for more information.

Safe cots

1. All cots sold in Australia must meet the current mandatory Australian Standard for Cots (AS/NZS 2172), and should carry a label to indicate this.
2. All portable cots sold in Australia must meet the current mandatory Australian Standard for children’s portable folding cots, AS/NZS 2195, and should carry a label to indicate this.
3. Cots used at a service should meet current standards. Download the guide to infant and nursery products publication – Keeping Baby Safe – for more information from the Australian Competition and Consumer Commission’s website.
4. 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.

Safe cot mattresses

1. Mattresses should be 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.
2. Mattresses should not be elevated or tilted. Testing by hand is not recommended as accurate in assessing compliance with the AS/NZ Standard.
3. Remove any plastic packaging from mattresses.
4. Ensure waterproof mattress protectors are strong, not torn, and a tight fit.
5. In portable cots, use the firm, clean and well-fitting mattress that is supplied with the portable cot. Do not add any additional padding under or over the mattress or an additional mattress.

Safe bedding

1. Light bedding is the preferred option; it should be tucked in to the mattress to prevent the child from pulling bed linen over their head.
2. Remove pillows, doonas, loose bedding or fabric, lambs wool, bumpers and soft toys from cots.
3. Soft and/or puffy bedding in cots is not necessary and may obstruct a child’s breathing. Download the information statements – Pillow Use, Soft Toys in the Cot and Bedding Amount Recommended for Safe Sleep – for more information on the Red Nose website.

Safe placement

1. Ensure a safety check of sleep and rest environments is undertaken on a regular basis.
2. If hazards are identified, lodge a report as instructed in the service’s policies and procedures for the maintenance of a child safe environment.
3. Ensure hanging cords or strings from blinds, curtains, mobiles or electrical devices are away from cots and mattresses.
4. Keep heaters and electrical appliances away from cots.
5. Do not use electric blankets, hot water bottles and wheat bags in cots.
6. 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.

Individual children

1. Ensure that children who do not wish to sleep are provided with alternative quiet activities and experiences, while those children who do wish to sleep can 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 (if required). It is important that opportunities for rest and relaxation, as well as sleep, are provided.
2. Consider that there are a range of strategies that can be used to meet children’s individual sleep and rest needs.
3. Look for and respond to children’s cues for sleep (e.g. yawning, rubbing eyes, disengagement from activities, crying, decreased ability to regulate behaviour and seeking comfort from adults).
4. Avoid using settling and rest practices as a behaviour guidance strategy because children can begin to relate the sleep and rest environment, which should be calm and secure, as a disciplinary setting.
5. Minimise any distress or discomfort.
6. Acknowledge children’s emotions, feelings and fears.
7. Understand that younger children (especially those aged 0–3 years) settle confidently when they have formed bonds with familiar educators.
8. Ensure that the physical environment is safe and conducive to sleep. This means providing quiet, well-ventilated and comfortable sleeping spaces. Wherever viewing windows are used, all children should be visible to supervising educators.
Policy review

Inspired Family Day Care encourages staff, educators and families to be actively involved in the annual review of each of its policies and procedures. In addition, the Service will accommodate any new legislative changes as they occur and any issues identified as part the Service’s commitment to quality improvement. The Service consults with relevant recognised authorities as part of the annual review to ensure the policy contents are consistent with current research and contemporary views on best practice.

### REVISION RECORD

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Approved in consultation with the Approved Provider, Nominated Supervisor, Staff, Educators and Families.

Next Review Date: August 2018