



# SLEEP AND REST FOR CHILDREN

## **NQS**

**Element 2.1.1**: Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's need for sleep, rest, and relaxation.

Element 3.1.2 Premises, furniture and equipment are safe, clean, and well maintained.

Education and Care Services National Regulations: 81,168

#### PURPOSE

The Approved Provider and the Nominated Supervisor of an education and care service must 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 age, development stages, individual needs, and rights of the child to sleep and rest.

The purpose of this policy is to set out the guidelines for children's sleep and rest periods to promote a regular routine for children and to ensure compliance with relevant early childhood legislation. Our sleep and rest policy is based on recommendations from the Australian Children's Education & Care Quality Authority (ACECQA), Red Nose, Sleep Smart Education, Safe Sleep Space, FROEBEL's philosophy, FROEBEL vision, mission and values and the United Nations Convention on the rights of the child.

The procedures in the policy are in accordance with risk assessments that will provide optimal safe rest environments for all children. (Appendix 1)

FROEBEL believes that a period of rest each day for every child supports their growth and development.

#### PROCEDURES

FROEBEL educators will encourage all children to have a sleep or rest period during the day.

- Infants will sleep as required or at times nominated by parents/guardians, as appropriate.
- Toddlers will be encouraged to seep or rest. FROEBEL educators will not keep a child awake who exhibits signs of tiredness and falls asleep.
- Where parents request that a child is given a shorter sleep time:
  - O Children will only be encouraged to wake after their first full sleep cycle. A sleep cycle refers to the two sleep states:
    - non-REM (non-rapid eye movement) or Deep or Quiet sleep.
    - REM (Rapid Eye Movement) or light or Active sleep
  - Babies and toddlers have variable sleep states and do not always move from one cycle to the other as adults easily do, they may require assistance to shift to the next sleep cycle or may wake at this point 1
- Older children who do not wish to sleep will be provided with an opportunity to rest or engage in alternate quiet experiences.

<sup>&</sup>lt;sup>1</sup> Saf<u>e Sleep Space</u>



Educators will consider the wishes of parents/guardians in relation to children's sleep routines while ensuring recommendations of safe sleeping guidelines from Red Nose<sup>2</sup> (formerly SIDS and Kids), and Safe Sleep Space the needs of the group and individual needs of the child and with respect to children's rights to rest and sleep.

#### Safe resting practices for babies and toddlers

#### Resting position:

- Babies should be placed on their back to sleep when first being settled. Babies who have been observed to repeatedly roll from back to front and back independently may be left to find their preferred sleep position.
- Babies younger than five to six months who have not been observed to independently
  roll back to front to back 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 child from being placed on their back, the
  alternative resting practice must be directed in writing by the child's medical
  practitioner.
- 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.
- Transitions from cot to bed will be discussed with educators and families to ensure transitions are in accordance with safe sleep practices and children's individual needs.

#### Bed linen and comforters and bottles

- At no time will a child be put to bed with a bottle; if a bottle is required before sleep this will be given to the child before they are placed to sleep.
- At no time will a baby's face be covered with bed linen.
- Quilts and duvets will not be used as bed linen.
- Pillows will not be used in cots or beds with children under two years of age.
- Soft toys, lamb's wool and cot bumpers will not be used; comforters will not be left in the cot with a child under seven months of age.
- Babies who are under seven months may have a soft toy placed outside the cot but within sight; or be kept in the cot (under direct supervision) until the baby falls asleep, and then it must be removed from the cot.
- 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 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.
- If a baby is wrapped when sleeping, their age and stage of development will be considered. Arms will be left free once the startle reflex disappears, around three months of age.
- Wraps will be discontinued when the baby can roll from back to front and back again (usually around four to six months)

## Sleeping records and quiet experiences for non-sleepers

- A record of time spent sleeping will be noted for infants, on the Nursery Record Form.
- Beds will be spaced such that each bed has unobstructed access to avoid any cross contamination.
- Children who do not wish to sleep will be provided with alternate quiet experiences.
- Children will be able to participate in quiet experiences as they wake.

<sup>&</sup>lt;sup>2</sup> Red Nose



## Safe resting practices for toddlers and pre-schoolers

Preschool children will be encouraged to lie on their back to rest. If they turn over during their sleep, they will be left to find their own sleeping position but always ask them to lay on their back first.

- At no time will a pre-schooler's face be covered with bed linen when they are sleeping.
- Light bedding is the preferred option.
- Quiet experiences will be offered to pre-schoolers who do not fall asleep.

#### Supervision of resting children

- All children who are resting will be supervised by educators.
- All children who have fallen asleep in the centre will be monitored regularly with specific attention to breathing patterns.
- First aid for a non-breathing child will be administered by educators as per training and procedure displayed in the room.
- Educators will comfort children as required, using settling techniques to support their transition to sleep.
- Beds, Cots and Sleeping Area Checks will form part of the regular health and safety checks of the service. Educators will conduct a safety check of the resting environments, equipment and/or aids by following the Bedding and Cot Room Audit.
- A risk assessment will be conducted and reviewed annually to assess hazards and control measures.

#### Cots and Beds

All cots and beds meet Australian Standards as mandated by the government. The Australian standard for cots is AS/NZS 2172. 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.

- Prams and strollers are not to be used for children to sleep in, should a child fall asleep in a pram whilst on an excursion they will be transferred to their cot/ bed upon return to the service.
- Hygiene practices will be applied as per cleaning schedule.
- Cots and mattresses protective covers are cleaned with soap and water if they are visibly soiled and as per cleaning schedule which is displayed in rooms.
- Cots with trundles beds; the trundle underneath is pulled out when children are sleeping on them.
- Each child has their own bed linen. Children's bed linen will be washed at the end of care during the week or at the end of week, whichever comes first.

#### Rest environment

Rest environments include cot rooms where regular audits ensure the room, temperature, air flow, and cot beds meet Australian Safety Standards. Sleep beds/ mattresses within the room, are adequately spaced and the space where children are sleeping free of hazards.

Outdoor environments may be used for sleep/ rest time for those children who have transitioned to sleep on sleep beds/ mattresses. Each FROEBEL service and respective room will conduct a risk assessment to determine if their outdoor space meets safety requirements to support children who may choose to sleep in an outdoor space if outdoor sleeping is an option.

#### **FROEBEL** routines



Each FROEBEL centre includes an allocated sleep / rest time every day. Children may request to rest outside of the routine times and adequate provision is made to meet their needs.

• Educators monitor the temperature of the rest environment and address children's clothing and bedding needs. Children will not be permitted to sleep or rest in hooded clothing or where cords hang from clothing as per our clothing policy.

## Communicating with families

 Rest strategies and practices are outlined in the Family Handbook, and a QR code to the Red Nose Safe Sleeping Page and their information sheets are available in our 'Welcome to FROEBEL booklet located at each service for all stakeholders.

#### SOURCES AND FURTHER READING

- Australian Children's Education & Care Quality Authority (ACECQA)
- Australian Competition and Consumer Commission (ACCC), Keeping baby safe a guide to infant and nursery products, July 2011
- Education and Care Services National Regulations
- Mandatory Cot Standards
- Red nose
- Raising children's network
- Safe Sleep Space
- UN Convention on the rights of the child:
   Article 31. Rest, play, culture, arts: Every child has the right to rest, relax, play and to take part in cultural and creative activities.

#### ▲ ASSOCIATED POLICIES

- Child Safety and Wellbeing
- Educational Program
- Interactions with Children
- Provision of child safe environments and supervision
- Work Health and Safety

#### POLICY REVIEW

The Centre (together with educators) will review this policy every 12 months.

The Approved Provider and Centre Director always ensure that all educators maintain and implement this policy and its procedures.

Families are encouraged to collaborate with the Centre to review the policy and procedures.

**Last review**: 6.09.2023 **Next review**: 6.09.2024





**TEMPLATE** 

# SLEEP AND REST RISK ASSESSMENT





From 1 October 2023, the approved provider, nominated supervisor and family day care (FDC) educator must 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 (Education and Care Services National Regulations, regulation 84A). Approved providers must also ensure policies and procedures are in place for managing sleep and rest for children (regulation 168) and take reasonable steps to ensure those policies and procedures are followed (regulation

To ensure the safety of children during sleep and rest, from 1 October 2023, the approved provider must conduct a sleep and rest risk assessment at least once every 12 months, and as soon as practicable after becoming aware of any circumstance that may affect the safety, health and wellbeing of children during sleep and rest. The approved provider must make any necessary updates to the sleep and rest policies and procedures as soon as practicable after conducting the sleep and rest risk assessment and keep a record of each sleep and rest risk assessment conducted.

The sleep and rest risk assessment must be conducted for each education

and care service or for each FDC residence or FDC venue of the service.

Completing risk assessment and management plans is an ongoing part of good operational practice to ensure the health, safety and wellbeing of children. One way to support this is by using a system of hazard identification and risk management. This can help identify, assess and manage the risk of harm before an incident occurs.

This sleep and rest risk assessment template is designed to assist approved providers and services in conducting sleep and rest risk assessments. This template is a starting point and should be adapted to meet the individual needs of your service or FDC residence/venue in line with regulations 84A, 84B and 84C. It is a requirement for services and FDC residences or FDC venues to complete a sleep and rest risk assessment at least once every 12 months, and as soon as practicable after becoming aware of any circumstance that may affect the safety, health and wellbeing of children during sleep and rest. This document is intended to be an evolving and regularly updated document, to be amended as circumstances change and new hazards arise. Once completed, it is also important to schedule regular reviews of this document to make sure hazards in your service are

identified, risks are managed before they cause harm and identified risks are addressed within policies and procedures (regulation 84B).

## **USING THIS TEMPLATE**

- To begin using this template, inspect and review sleep and rest practices in your service including environments, equipment, policies, procedures, and forms, to identify any potential or existing hazards and check current health guidelines on best practice control measures. Ensure the matters outlined in regulation 84C are considered as well as best practice guidance from recognised authorities (such as Red Nose Australia).
  - » Adapt this template to be relevant to your service context. To add to this template you can add rows by pressing the tab button on your keyboard from the last column.
- When identifying the action required include the:
  - » hazard identified
  - » level of risk (using the risk assessment matrix attached to this document)
  - » action identified to eliminate/mitigate/manage the hazard or risk
  - » elimination/control measures
  - » person(s) responsible for taking the required action
  - » timeframes for addressing the identified action.
- Once developed, make the template available to all service leaders, educators and staff so that they know what has been assessed as a risk, and how to manage it.
- After the sleep and rest risk assessment is complete, prepare/review the service's policies and procedures and address within policy and procedure any risks identified in the sleep and rest risk assessment (regulation 84C) as well as other matters required under regulation 84B.

ACECQA's <u>Risk Assessment and Management tool</u> is a useful resource and should be referred to for more information on how to conduct a risk assessment in your education and care service or residence.

What needs to be considered when conducting a sleep and rest risk assessment from 1 October 2023?

A risk assessment must consider the matters set out below:

- the number, ages and development stages of children being educated and cared for, including at each education and care service and FDC residence or approved FDC venue of the service
- the sleep and rest needs of children at the service (including specific health care needs, cultural preferences, sleep and rest needs of individual children and requests from families about a child's sleep and rest) including at each education and care service and FDC residence or approved FDC venue of the service
- the suitability of staffing arrangements required to adequately supervise and monitor children during sleep and rest periods
- the level of knowledge and training of the staff supervising children during sleep and rest periods
- the location of the sleep and rest areas, including the arrangement of cots and beds within the sleep and rest areas, including at each education and care service and FDC residence or approved FDC venue of the service
- the safety and suitability of any cots, beds and bedding equipment and having regard to the ages and developmental stages of the children who will use them
- any potential hazards in sleep and rest areas or on a child during sleep and rest periods
- the physical safety and suitability of sleep and rest environments, including temperature, lighting and ventilation at each education and care service and FDC residence or approved FDC venue of the service
- for FDC services that provide overnight care to a child, any risks that the overnight care provided at the family day care residence or approved venue may pose to the safety, health or wellbeing of the child.

For services where overnight care is provided (such as services in hospitals, where shift workers' children attend overnight), the risk assessment must address management of risks relating to overnight care, to inform policies and procedures.

## **RISK MATRIX**

A risk matrix is a useful tool to use during the risk assessment process. It helps in identifying the level of risk by looking at the likelihood that a negative event may occur, and the severity of the consequence should it occur.

The Guide to the NQF defines likelihood and consequences in a risk matrix in Section 5: Regulatory Authority power.

Risk Matrix												
	Likelihood	Likelihood										
Consequences		Rare	Unlikely	Possible	Likely	Almost certain						
	Major	Moderate	High	High	Critical	Critical						
	Significant	Moderate	Moderate	High	High	Critical						
	Moderate	Low	Moderate	Moderate	High	High						
	Minor	Very low	Low	Moderate	Moderate	Moderate						
	Insignificant	Very low	Very low	Low	Moderate	Moderate						

#### **LIKELIHOOD**

The risk matrix includes five levels of likelihood:

- Rare
- Unlikely
- Possible
- Likely
- Almost Certain.

When thinking about likelihood, the approved provider and service leaders should prioritise actions based on ensuring compliance with the minimum legislative standards, particularly those standards relating to the safety, health and wellbeing of children. The following table is a useful guide.

Likelihood					
Rare	Very unlikely – the event may occur only in exceptional circumstances				
Unlikely	Improbable – the event is not likely to occur in normal circumstances				
Possible	Potential – the event could occur at some time				
Likely	Probable – the event will probably occur in most circumstances				
Almost certain	Very likely – the event is expected to occur in most circumstances				

## **CONSEQUENCE**

The risk matrix also includes five levels of consequences:

- Insignificant
- Minor
- Moderate
- Significant
- Major

This considers the potential impact and how it might affect the safety and wellbeing of children, families, staff and the wider community.

# RISK ASSESSMENT TEMPLATE

Risk assessment									
Activity	Hazard iden	tified	Risk assessment (use matrix)	Elimination/control measures	Who?	When?			
		1							
Plan and review									
Plan prepared by	Full name		Date						
	Signature		6						
Role/position									
Prepared in consultation with	Full name	Full name							
	Signature								
	Role/position								
Communicated to all relevant staff	Yes	No	Comment (if need	ded)					

#### Plan and review

Risks identified from this risk assessment have been addressed within policy and procedure (regulation 84C) as well as other matters required under regulation 84C, including:

- the number, ages and development stages of children being educated and cared for, including at each education and care service and FDC residence or approved FDC venue of the service
- the sleep and rest needs of children at the service (including specific health care needs, cultural preferences, sleep and rest needs of individual children and requests from families about a child's sleep and rest) including at each education and care service and FDC residence or approved FDC venue of the service
- the suitability of staffing arrangements required to adequately supervise and monitor children during sleep and rest periods
- the level of knowledge and training of the staff supervising children during sleep and rest periods
- the location of the sleep and rest areas, including the arrangement of cots and beds within the sleep and rest areas, including at each education and care service and FDC residence or approved FDC venue of the service
- the safety and suitability of any cots, beds and bedding equipment and having regard to the ages and developmental stages of the children who will use them
- any potential hazards in sleep and rest areas or on a child during sleep and rest periods
- the physical safety and suitability of sleep and rest environments, including temperature, lighting and ventilation at each education and care service and FDC residence or approved FDC venue of the service
- for FDC services, that provide overnight care to a child, any risks that the overnight care provided at the family day care residence or approved venue may pose to the safety, health or wellbeing of the child.

No

Comment if needed

Yes

Next sleep and rest risk assessment to be conducted before

\*AND as soon as practicable after becoming aware of any circumstance that may affect the safety, health and wellbeing of children during sleep and rest