

# 4 – Sleep and Rest

## Children’s Services Procedures

### 4 – SLEEP AND REST

Effective from: 28 September 2022  
Contact officer: Coordinator of Children’s Services  
Next review date: 4 years

#### Related Policies/Local Laws/Legislation:

- *Education and Care Services National Law 2010*
- Education and Care Services National Regulations 2011 – Cl: 81, 103,105, 168(2)(a)(v),  
<https://legislation.nsw.gov.au/view/html/inforce/current/sl-2011-0653#statusinformation>
- National Quality Standard: QA2

#### Related Documents:

- ACECQA (2018) *Guide to National Quality Framework*
- Kidsafe NSW – Family Day Care Guidelines 7<sup>th</sup> Edition (2020) [chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/viewer.html?pdfurl=https%3A%2F%2Fkidsafe.com.au%2Fwp-content%2Fuploads%2F2020%2F06%2FFINAL-FDC-Safety-Guidelines\\_7thEd.pdf&clen=2534603&chunk=true](chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/viewer.html?pdfurl=https%3A%2F%2Fkidsafe.com.au%2Fwp-content%2Fuploads%2F2020%2F06%2FFINAL-FDC-Safety-Guidelines_7thEd.pdf&clen=2534603&chunk=true)
- Australian Competition and Consumer Commission (ACCC) <https://www.productsafety.gov.au/>
- Red Nose – Saving Little Lives <https://rednose.com.au/section/safe-sleeping>
- Red Nose – Safe Sleeping Practices in FDC Settings <https://rednose.org.au/article/safe-sleep-practices-save-lives>

#### PURPOSE

Rest and sleep are seen as vital in assisting with normal development and should always be viewed as a pleasant component of a child’s daily routine. Effective rest and sleeping strategies are important for ensuring that children feel secure and safe in the early childhood environment.

Sudden Infant Death Syndrome (SIDS) has decreased considerably since the introduction of community education on safe sleeping practices for babies and young children. Despite this it is still a common cause of death in children aged between one month and one year. It is important that all Educators working with children know, understand and practice safe sleeping methods when caring for children.

The Children’s Services Sleep and Rest Procedure commits to:

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- Developing effective rest and sleep strategies to ensure a child feels secure and safe in the child care environment
  - Rest and Sleep practices based on recommendations from the recognised national authority Rednose.org.au.
  - Consulting with families about their child's individual needs and to be aware of the different values and parenting beliefs. Cultural or otherwise that are associated with rest.
  - Wingecarribee Children's Services has a duty of care to ensure that all children are provided with a high level of safety and supervision when resting or sleeping while in care.

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## SCOPE

This policy applies to:

Wingecarribee Children's Services Staff employed by Wingecarribee Shire Council

Wingecarribee Family Day Care Educators as Agents of the Approved Provider – Wingecarribee Shire Council

All children and families accessing care with Council's Children's Services

All volunteers and students engaged with Wingecarribee Children's Services.

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## DEFINITIONS

**"Rest"** is defined, for the purposes of this procedure, as a period of inactivity, solitude, calmness or tranquility, and can include a child being in a state of sleep.

**Direct Supervision** - requires an Educator to be present in the care area with the children at all times and to be able to maintain visual surveillance. There should be no physical barriers between Educator and children and the Educator should remain in close proximity to the children.

**Premature or Preterm birth** - Preterm birth is defined as birth before 37 completed weeks of pregnancy (WHO 2012). [www.health.gov.au](http://www.health.gov.au)

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## PROCEDURE

### 1. Safe rest and sleeping practices for babies (0-1yr) – Family Day Care Only

- 1.1 Educators will follow the recommendations of Red Nose Australia when resting babies in their care
- 1.2 Babies will be placed on their back to rest.
- 1.3 Where a family's beliefs and practices are in conflict with Red Nose Australia, the service will **not** implement an alternative practice, unless the service has received specific written advice from a medical practitioner. For example, only in rare medical conditions is it necessary for a baby to sleep on its stomach or side.
- 1.4 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.
- 1.5 At no time will a baby's face be covered with bed linen.
- 1.6 To prevent a baby from wriggling down under the bed linen, they will be placed with their feet closest to the bottom end of the cot.
- 1.7 Quilts, duvets, pillows, soft toys, lamb's wool and cot bumpers are not appropriate for use in Family Day Care.
- 1.8 Light bedding is the preferred option, which must be tucked in to prevent the baby from pulling bed linen over their head.
- 1.9 Sleeping bags with a fitted neck and arm holes (or sleeves), that is the correct size for a baby, are an alternative option to a light blanket and encourage a baby to rest on their back. Sleeping bags and tops with hoods should not be used when a child is sleeping. <https://rednose.org.au/article/what-is-a-safe-sleeping-bag>



## **2. Safe rest and sleeping practices for toddlers (1 – 3yrs) – Family Day Care Only**

- 2.1** Toddlers will be placed on their back to rest, unless otherwise directed in writing by the child’s medical practitioner.
- 2.2** If toddlers turn over during the sleep allow them to find their own sleeping position, but always lay them on their back when first placing them to rest.
- 2.3** At no time will a toddler’s face be covered with bed linen.
- 2.4** If using a cot, toddlers will be placed with their feet closest to the bottom end of the cot to prevent them from wriggling down under bed linen.
- 2.5** Quilts, duvets, pillows, soft toys, lamb’s wool and cot bumpers are not appropriate for use in Family Day Care, for toddlers sleeping in a cot. In line with government advice pillows should not be introduced until a child is over two and in a bed.
- 2.6** Light bedding is the preferred option, which must be tucked in to prevent the toddler from pulling bed linen over their face.
- 2.7** A safe baby sleeping bag with a fitted neck and arm holes (or sleeves), that is the correct size for a toddler, is an alternative option to a light blanket and encourages a toddler to rest on their back. If parents request to continue using the sleeping bag option when the toddler rests on a mattress, then the service will comply as long as all Red Nose Australia Guidelines for the use of Safe Sleeping Bags are being met. <https://rednose.org.au/article/what-is-a-safe-sleeping-bag>
- 2.8** Quiet experiences may be offered to those toddlers who do not fall asleep.

## **3. Safe resting for preschool children – Family Day Care Only**

- 3.1** It is recommended that preschool aged children rest on their back. 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.
- 3.2** At no time will a preschooler’s face be covered with bed linen when they are sleeping.
- 3.3** Light bedding is the preferred option.
- 3.4** Quiet experiences may be offered to preschoolers who do not fall asleep.

## **4. Safe resting for school aged children – All Service Types**

- 4.1** If a school age child requests a rest then there is a designated area for the child to be inactive and calm, away from the main group of children.
- 4.2** The designated area may be a cushion, mat or seat in a quiet section of the care environment
- 4.3** Quiet, solitary play experiences are available for those schools are children who request the need for a rest or time away from their peers.
- 4.4** Safe resting practices are relevant to school age children because, if they are resting or sleeping they should be monitored at regular intervals and a school age child’s face should be uncovered when they are sleeping
- 4.5** Light bedding is the preferred option.

## **5. Safe resting procedures for a child who is unwell – All Service Types**

- 5.1** A child will be placed on their back to rest when displaying signs of being unwell. If a child turns onto their side or stomach during sleep, then allow them to find their own sleeping positions.

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- 5.2** All children will rest with their faces uncovered.



**5.3** Children who are unwell will be given the highest direct supervision priority and monitored constantly especially if the child has: a high temperature vomited or received minor trauma to their head. Infection control measures must be taken.

**5.4** Refer to other relevant service procedures. For example: Supervision and Illness & Infection control Procedures

## **6. Supervision of resting children**

**6.1** All children who are resting will be supervised by educators. Educators will undertake annual training in safe sleep practices and supervision of sleeping children, by Red Nose or other recognised authority.

**6.2** A Service Risk Assessment has been developed, for Family Day Care (FDC), which all Educators use with reference to sleeping children in care. The Risk Assessment is tailored as applicable to meet individual Educator or child's unique requirements in consultation with the Educator, parent/guardian and staff from the coordination unit.

**6.3** Each FDC Educator documents on the Service Safe Sleep Risk Assessment how they will supervise sleeping children and conduct physical checks whilst also maintaining adequate supervision of the other children in care.

**6.4** Students, volunteers or visitors will not be left unsupervised with children when settling children for a rest.

**6.5** All children who have fallen asleep at the service will be monitored regularly with specific attention for breathing patterns.

**6.6** Children with diverse and complex needs will have a Risk Minimisation Plan developed that includes specific information on how the child's rest and sleep needs will be safely met.

**6.7** Adults will not rest or sleep in the same environment as a child or group of children.

**6.8** FDC Educators will check the rest environment and children regularly, at least every 10 - 15 minutes and as per Red Nose guidelines <https://rednose.org.au/article/safe-sleep-practices-save-lives>. FDC Educators will conduct physical checks of sleeping children from the side of the cot (or floor mattress for older children) and observe the following during the check:

- the position of each child's body in their cot/on their bed
- each child's breathing rate and colour of the child's skin. If a child is not breathing or if lips are blue the educator will call an ambulance and commence DRSABC first aid.
- the arrangement of bed linen. If a child's face is covered, the educator will immediately uncover the child's face; and
- the environment. Educators will monitor the temperature, the security of each cot and the environment safety e.g. hanging cords

**6.9** FDC Educators will maintain a documented record of their monitoring practices whenever there are children sleeping in their care.

## **7. Settling children for rest – Family Day Care Only**

**7.1** Educators will discuss with families how they settle children for rest period and consider the individual needs of the child or group of children.

**7.2** The "Information for Family Day Care Educator form" which is provided to families prior to a child commencing will gather specific information to inform sleeping practices for any child under 2 years commencing in Family Day Care. Where there are factors as outlined in Red Nose Safe Sleeping practices in Family Day Care a Risk Minimisation Plan will be developed in consultation with the Coordination Unit, Families and Educator.

**7.3** When settling children for rest it is important for educators to:

- meet individual needs of children

- maintain health and safety practices. Inclusive of considerations for child comfort such as: removing shoes and outer layers of clothing and maintaining a comfortable room temperature
- minimise any distress and discomfort.
- acknowledge children's emotions, feelings and fears
- not use settling and resting practices as a behavior guidance strategy because the child begins to relate the rest environment, which should be calm and secure; and
- understand that young children (especially 0-3 years of age) settle confidently when they have formed bonds with familiar and trusted educators.

## **8. Wrapping Children for sleeping**

**8.1** Wrapping a baby can be a useful method to assist a baby to settle and stay asleep. It can reduce crying time and episodes of waking as well as providing stability which may help to keep babies in the recommended back position.

**8.2** When wrapping a baby ensure:

- that they are wrapped from below the neck to avoid covering their face
- Only lightweight wraps such as cotton or muslin are used
- Firm but not too tight
- That the baby is not over dressed under the wrap. For example: Use only a nappy and singlet in summer months and a light weight grow suit in cooler months
- Arms are free once the startle reflex disappears at around 3 months.

**8.3** Discontinue wrapping a baby:

- as soon as they start showing signs that they can begin to roll, usually around 4-6 months but sometimes younger
- once they start using a suitable sleeping bag, as described by Red Nose

## **9. The safe rest environment and equipment – Family Day Care Only**

**9.1** All equipment used for rest and sleep will be checked on a daily basis by staff/ educators as a part of their daily safety check and any hazards identified, documented and managed.

**9.2** All cot's purchased by Educators with Wingecarribee Family Day Care must comply with one of the following requirements:

- Australian / New Zealand Standard AS/NZS Standard AS/NZS Standard 2172:2010- Safety requirements OR
- Australian / New Zealand Standard AS/NZS Standard 2195:2010 Folding Cot Safety requirements OR
- The most current AS/NZ Safety Standard available for purchase.

**9.3** Proof of compliance must be provided for each cot. A copy of this compliance to be kept on record at the Coordination Unit.

**9.4** Manufactures guidelines must be followed with regard to use, mattresses and maintenance

**9.5** Portable cots will not be used for a child who weighs more than 15kg. Instructions and weight recommendations for each particular model will be followed.

**9.6** The service does not permit the use of hot water bottles, electric blankets or heated wheat bags for children resting in cots or mattresses. These items present a risk to children of either being scalded or developing hyperthermia (overheating).

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- 9.7 No cot will have any additional mattress or padding under or over the manufacturer's cot mattress
  - 9.8 Babies and toddlers sleeping in a cot who use a comforter such as a soft toy, loose blanket, piece of fabric etc to settle them for sleep will have this removed once they have fallen asleep.
  - 9.9 All cots and bedding will be inaccessible and placed at a safe distance from heaters, electrical cords and appliances and hanging cords or strings.
  - 9.10 Cot mattresses must 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.
  - 9.11 Beanbags and water beds are not to be used in Family Day Care.
  - 9.12 Bassinets WILL NOT be used in Family Day Care.
  - 9.13 No child in Family Day Care is permitted to sleep on the top bed of a bunk bed. Ladders are to be made inaccessible
- 10. Prams and Strollers – Family Day Care Only**
- 10.1 Children will be restrained correctly at all times when in a pram or stroller, as directed by the manufacturer's instructions.
  - 10.2 It is recommended that all prams and strollers meet with current Safety Standard.
  - 10.3 Prams and strollers will not be used for the intended purpose of sleep or a rest.
  - 10.4 Children are not to be left unattended in prams or strollers
  - 10.5 A five-point restraint (defined as: straps over each shoulder, a waist belt and a crotch strap between the legs that all meet and are secured) is recommended.
  - 10.6 Prams and strollers will not be used to restrain children as part of behaviour guidance procedures.
- 11. Hygiene – Family Day Care Only**
- 11.1 Cots, beds, mattresses, stretchers or sleeping mats or other culturally approved bedding used by Family Day Care Children, must have waterproof covers (covered with a sheet) and these are to be in areas of natural light, arranged to permit easy exit by a child (age permitting), easy access to a child by an educator and which reduces the risk of cross infection between children. All bedding used must be clean and comfortable.
  - 11.2 Children are not to sleep in beds with linen currently being used by other household members.
  - 11.3 There is to be individual bed linen provided by either the Educator or the parent which must be laundered at least weekly. Under no circumstances are children to share any item of bedding until it has been freshly laundered. Dependent on age individual sleeping bags may be used as an alternative to a light blanket. See 1.9 and 2.7
  - 11.4 Children are not to share the same bed at the same time (exceptions will be considered for cultural and specific family circumstances e.g. twins)
- 12. Rest environment aesthetics and ventilation – All Service Types**
- 12.1 Staff/Educators will maintain a warm and comfortable environment for resting.
  - 12.2 Any room used for sleeping or resting children will be well ventilated taking into consideration weather conditions and temperature.
  - 12.3 Staff/Educators will negotiate with family's expectation regarding sleep and rest and reach agreement that values the family culture and expectations wherever possible as long as it is in the best interest of the child and supported by recommendations of Red Nose
  - 12.4 The service supports the use of soft music and lullabies to assist children to rest in a calm and relaxing environment.

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- 12.5** The service recommends that lighting be reduced in the sleep area, however this should be considered with the best interest of the child in mind.
- 12.6** At all times the staff/educators will maintain a calm and restful environment for a child resting or sleeping
- 13. Rest and sleep times of the day – Family Day Care Only**
- 13.1** Resting times must be flexible and suit the individual needs of the children. There may be a set time in the day for toddlers and preschool children to rest which is part of their routine.
- 13.2** Educators will be attentive to a child who is unwell or taking medication that causes drowsiness, after immunisation, stress or experiencing a change to sleeping patterns and provide opportunity for them to rest if they require.
- 13.3** Children who do not rest or sleep must be offered a variety of quiet time activities during routine resting times.
- 13.4** No child will be forced to rest against a child's wishes or need
- 14. Sleepwear – All Services Type**
- 14.1** Sleepwear must take into consideration the following things:
- Child's age
  - Temperature of the rest environment. Should be at a comfortable temperature for resting.
  - Bed linen used for resting
  - Child's individual needs
  - Safe resting practices established by the service.
- 14.2** Children must not rest in jumpers with hoods or cords as they create a higher risk of choking. If using a red nose supported sleeping bag in place of a light blanket, ensure the child is not over dressed when putting to bed.
- 14.3** All necklaces, bibs or teething necklaces are to be removed prior to children resting as they create a higher risk of choking. (Family Day Care)
- 15. Over- night Care – Family Day Care Only**
- 15.1** Overnight care is significantly different to day time care because the educator may sleep while the child is sleeping. This means the usual checks that would normally take place in the day cannot occur.
- 15.2** The service accepts that the provision of overnight care is a component of flexible delivery in family day care. It is vital that educators offering overnight care maintain a comfortable, safe environment that meets individual needs.
- 15.3** An educator who cares for children in an overnight care situation has a duty of care to the following:
- maintaining practices consistent with advice from Red Nose
  - protect children from harm or negative influences in relation to the presence of visitors in the family home.
  - minimise visitors to the family home while children are in care.
  - ensure that no alcohol or other unlawful substances is consumed at the home while the children are in care.
  - provide suitable, clean and appropriate bedding for a full night's sleep.to provide suitable sleeping space that allows for privacy and comfort.
  - ensure that the sleeping environment is physically safe.

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- ensure that the emergency evacuation plan is established and practiced that addresses night care, so that in the event of a critical incident occurring the children are familiar with the procedure.
  - ensure that children cannot access areas of the home that have not had their safety assessed and managed, during the night.
  - ensure than no child sleeps in the same room as an adult unless they are under 2 years old and with the written permission of the parent/guardian.
  - ensure no child who is above the age of 7 sleeps in the same room as another child of the opposite sex who is not a relative.
  - ensure that appropriate activities are programmed with consideration made to the impact this may have on the family unit. For example – some night time television, music, computer games and other electronic games are not suitable for a child care service, which could impact on the family.
  - ensure all excursion procedures are adhered to.

**15.4** An educator must develop a written management and supervision strategy using the points list in 9.3 as a guide. Educators must identify how they will ensure that children are effectively supervised while in overnight care.

**Approved By:**



Danielle Lidgard

**Group Manager Corporate and Community**

28 September 2022