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## Elizabeth North Early Learning Centre

### Policy Statement Safe Sleep and Rest Policy

#### Elizabeth North Preschool Safe Sleep and Rest Policy

This policy reflects the Safe Sleep and Rest procedure documented on the Australia Children's Education & Care Quality Authority (ACECQA) website.

#### Rationale

Effective sleep and rest strategies are important factors in ensuring a child feels secure and is safe during their time at preschool. Approved providers, nominated supervisors and educators 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.

Consultation with families about their child's individual needs in relations to sleep and rest is sought and treated sensitively when dealing with different values and parenting beliefs, cultural or otherwise

#### Safe sleep and rest procedure

##### Children of all ages

- Children should sleep and rest with their face uncovered.
- A quiet place should be designated for rest and sleep, away from interactive groups. If designated for rest, the space should allow for a calm play experience.
- Children's sleep and rest environments should be free from cigarette or tobacco smoke.
- Sleep and rest environments and equipment should be safe and free from hazards.
- Supervision planning and the placement of educators across a service should ensure educators are able to adequately supervise sleeping and resting children.
- 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. Educators are required to document a child's sleep from the time they fall asleep to the time they wake by signing the Sleep Schedule located in the medical folder every 15 minutes.

- 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**

- 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. 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.
- 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.
- 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. 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. Download the brochure – *Cot to bed safety: When to move your child out of a cot* – for more information

## **Safe cots**

- 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. 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.

- 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.
- 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

- 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.
- Mattresses should not be elevated or tilted. Testing by hand is not recommended as accurate in assessing compliance with the AS/NZ Standard.
- Remove any plastic packaging from mattresses.
- Ensure waterproof mattress protectors are strong, not torn, and a tight fit.
- 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

- 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.
- Remove pillows, doonas, loose bedding or fabric, lambs wool, bumpers and soft toys from cots.
- 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

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

## Individual children

- 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 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 (if required).
- It is important that opportunities for rest and relaxation, as well as sleep, are provided.
- Consider that there are a range of strategies that can be used to meet children's individual sleep and rest needs.
- 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).
- 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.
- Minimise any distress or discomfort.
- Acknowledge children's emotions, feelings and fears.
- Understand that younger children (especially those aged 0–3 years) settle confidently when they have formed bonds with familiar carers.

**Governing Council Member's Signature** \_\_\_\_\_

**Principal's Signature** \_\_\_\_\_

**Deputy Principal's Signature** \_\_\_\_\_

Date Written: February 2018

Next Review Due: February 2020

Sources: Australian Children's Education & Care Quality Authority website  
[www.acecqa.gov.au](http://www.acecqa.gov.au)

*National Quality Standard 2*

*Element 2.1.2 'Each child's comfort is provided for and there are appropriate opportunities to meet each child's need for sleep, rest and relaxation.'*