

2.2 - SLEEP, REST and RELAXATION PROCEDURE

Safe Sleep Risk Management

To ensure compliance with regulation 84A of the Education and Care Services National Regulations, the Service and educators 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. Penalties may apply for FDC educators who breach regulatory requirements in relation to the needs of sleep and rest for children in their care. Refer *FDC Compliance Guide*.

Prior to any child starting care, there will be discussion with families about safe sleeping requirements, enabling families to transition routines prior to the child starting care to assist with settling the child into care e.g. if a child is used to going to sleep with a bottle in their cot, this would not be able to occur in Family Day Care and the family may be able to make changes to the practice so that it is easier for the child when they start care.

To ensure the safety of children during sleep and rest:

- An Annual Sleep and Rest Risk Assessment will be completed in consultation with the Coordination Team, in relation to the sleep and rest areas within the approved family day care spaces. In completing the risk assessment, consideration will be given to:
 - 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 Educator/Educator Assistant arrangements required to adequately supervise and monitor children during sleep and rest periods.
 - the level of knowledge and training of the Educator/Educator Assistant 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.

Educators will implement the Safe Sleep Practice recommendations as per the Red Nose Safe Sleeping guidelines, to reduce risks and ensure continuous supervision. Best practice dictates that an educator must be 'in sight and hearing' of a sleeping child at all times, while also noting:

- there may be circumstances where this is not achievable, such as when an educator must attend to another child's needs,
- risk assessments should ensure that risks are mitigated in these circumstances and that children are adequately supervised,

- regular physical checks – at the bed side (not via CCTV or viewing windows) should continue to be implemented in all circumstances.

In addition to the above, the Educator will implement the Red Nose 6 ways to sleep a baby and reduce the risk of sudden unexpected death in infancy. These include:

1. Sleep baby on back, feet at the bottom of the cot, use a safe sleeping bag with fitted neck and armholes, blankets tucked in firmly
2. Keep head and face uncovered
3. Smoke-free in line with Tobacco, Alcohol and Drug-Free Environment Policy
4. Safe Sleeping:
 - a. Cots meet Australian Standards AS2172,
 - b. Safe mattress – firm, clean, flat and right size for the cot
 - c. Safe bedding – no pillows, cot bumpers, lamb's wool, soft toys, and doonas
5. Sleep baby in space where they can be checked regularly
6. Encourage families to breastfeed, promoting this as a feeding option for families

If a family's beliefs and requests are in conflict with current recommended evidence-based guidelines, My Place Family Day Care will need to determine if there are exceptional circumstances that allow for alternate practices. For example, with some rare medical conditions, it may be necessary for a baby to sleep on their stomach or side, which is contrary to Red Nose recommendations. It is expected that in this scenario My Place Family Day Care would only endorse this practice, with the written support of the baby's medical practitioner and work with the Educator and family to undertake a risk assessment and implementation of the risk assessment plan for the infant. My Place Family Day Care requires the doctor to prepare a risk minimisation plan to be reviewed upon changes.

The Coordination Team will consider visiting during the sleep and rest periods when planning for monitoring visits as this is an opportunity to ensure the educator's practices are consistent with the Sleep and Rest Risk Assessment and the Red Nose Safe Sleeping Recommendations and that the sleep area is well ventilated and meeting each child's individual sleep, rest, and relaxation needs.

Overnight Care Arrangements

The provision of overnight care is a component of flexible delivery in Family Day Care and is related to care arrangements made with families to look after children during non-standard hours of 6.30pm to 6.30am. Educators offering overnight care must maintain a comfortable, safe environment that meets individual needs. Evacuation practice drills will be undertaken with overnight care in mind.

If an educator has a child/ren requiring overnight care, they must:

- Seek approval from the Coordination Unit at least 24 hours prior to overnight care commencing (unless exceptional circumstances apply).
- Ensure a Risk Assessment and individual Risk Minimisation Plan is in place for each overnight care situation which will consider:
 - the environment, bedding, and appropriateness of sleep arrangements for the provision of overnight sleep
 - age of the children
 - Identify and address how the Educator intends to ensure they sight and have the capacity to hear sleeping children,
 - Where a child is asleep in a room not located in the play area, what will they do to meet their supervision obligations, e.g. use of a baby monitor located in the room where the child is sleeping

- shared sleeping arrangements, including other children living at the residence or who are present at the time of the overnight sleep stay.
- Gain written parental approval before any child over six years of age sleeps overnight in the same room with any other child or adult (including their sibling).
- Ensure each child has their own bed and that the room in which the child sleeps is a bedroom but, in any case, shall not be used as a thoroughfare.
- Ensure the privacy and rights of the child are respected through ensuring they have a private place to bathe and dress, and appropriate space to store their belongings.

A Family Day Care Educator must be present and sleeping in a registered area of the approved residence while conducting overnight care. The child who stays overnight will have access to the Educator at all times.

If age appropriate or child is non mobile, use a monitor while children are sleeping which will be positioned in the same room as where the Educator is sleeping.

Child/ren will not be permitted to attend another residence (neighbours, other family members, friends) while the child is in overnight care. All care must occur at the educator's residence unless an excursion has been organised, and the appropriate risk assessments are carried out.

Overnight Sleeping Practices

My Place Family Day Care acknowledges overnight sleep practices will differ from those used during the day. In addition to the above measures, an individual risk assessment will consider the physical safety of the child's sleeping environment including:

- Plans for the supervision of the child while they are sleeping, including how they will be monitored during the night. For example,
 - Because a higher risk may be associated with small babies or children with colds or chronic lung disorders, they might require a higher level of supervision while sleeping.
 - Rooms that are darkened and have music playing may not provide adequate supervision for sleeping children in an FDC context.
- Who is at the residence and where the child will sleep. Sleeping children should always be within sight and/or hearing distance so that Educators can assess the child's breathing and colour of their skin to ensure their safety and wellbeing.
- Bedding, and appropriateness of sleep arrangements.
- The age of the children.
- Shared sleeping arrangements, including other children living at the residence or present at the time of the overnight sleep stay.
- Access of the child to other parts of the house during the night.
- Access of other people to the child's sleeping environment.
- Night-time emergency evacuation plans (e.g., in the case of a fire, intruder etc.).

Where children are cared for overnight, there must be a private, safe and appropriate space for the child to sleep. No child will sleep in a room with a child of the opposite sex for overnight care unless they are siblings or in any other case with written parent permission.

Educators will conduct and document sleep checks throughout the duration of overnight care using the following guideline:

- 0-2 years every 2 hours
- 2.5-5 years every 3 hours
- 5 years and above 4 hours

In all cases where children are sleeping at the Educator's residence the Educator will:

- Provide sufficient linen for each bed and cot and be suitable for climatic conditions

- Ensure the bed or cot linen is changed and laundered regularly, or if wet or soiled, and before use by a different child.

Outside of standard hours (6.30pm – 6.30am) Coordination Team visits will be conducted quarterly, including at least two visits per calendar year after 9pm, which could also be completed through a digital platform.

Recognising Children's Sleep and Rest Needs

All educators will be provided with instruction around children's rights to sleep, rest, relaxation and leisure. Additionally, the wellbeing and comfort of children will be an ongoing aspect of reflection with educators being responsive to the needs of children and demonstrating flexibility around how their program is facilitated. Where needed, educators support children to engage in sleep, quiet and/or downtime experiences.

Rest times should be planned for as part of the educator's daily routine, with consideration given to accommodating individual children's needs, especially infant, toddler routines, and the needs of children who do not sleep. Implement routines to signal that it is time for rest and plan calming routines or rituals before these times of transition begin, such as reading a story, turning the lights down, or listening to soft music. 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 the opportunities for rest and relaxation, as well as sleep, are provided. Acknowledge children's emotions, feelings, and fears by discussing with them their rest and relaxation 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 and 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.

It's important for educators to understand that not all children may need daytime sleep or are not good sleepers and may find it difficult, remaining quiet. Children should not be required to be still for a long period; for example, this should not exceed more than 15 minutes.

For children who are not sleeping, educators will offer quiet activities, such as puzzles and books offered at their beds/mats. In these situations, this period could be referred to on an Educators schedule as "rest time" or "quiet time" to avoid resistance from children who don't "take naps".

Educators reflect on the quiet-time period within their program and may consider using strategies such as offering spaces that have nooks for one or two children with quiet experiences such as a book corner with a comfortable chair for one or having a 'Rest Box' for each child. This would have some quiet activities the child either has bought in from home or items the Educator has included based on the interest of the child.

Educators should also consider having an area where children are offered quiet activities, away from other children who are resting to ensure that children who **do** want to sleep will be allowed to do so without being disrupted.

Additionally, educators recognise that waking up is a major transition for children, and they may awaken disoriented or cranky. It is important that they are allowed to wake slowly with calm reassurances from the Educator. Keeping the lights dim will help to make this transition take place smoothly.

Safe Sleeping Areas

As per Red Nose Safe Sleeping guidelines, sleep and rest areas need to allow for a comfortable and safe sleep environment through ensuring:

- The mattress is good condition - clean, firm, and well fitted with not more than a 20mm gap between the mattress sides and ends. Mattresses should not be elevated or tilted and ensure waterproof mattress protectors are strong, not torn, and are a tight fit.
- Bedding is safe – no pillows, cot bumpers, lamb wool, soft toys, comforters, etc. Light bedding is the preferred option; it should be tucked into the mattress to prevent the child from pulling bed linen over their head.
- The area is free from hazards including cigarette or tobacco smoke.
- The area is well ventilated, and temperature controlled as well as the ability to close curtains or darken the room in some way to create a restful environment.
- Doors to sleep rooms remain open.
- Sleeping children are in spaces where they can be regularly checked.

My Place Family Day Care will ensure all cots and sleeping facilities are up to Australian Standards and are in good working order. Educators are responsible to ensure:

- All cots are regularly checked, maintained, and kept in a hygienic manner.
- Cots, beds, stretchers, mattresses, and other bedding are arranged to:
 - Ensure each child's comfort and is in a well-ventilated area for sleeping; and
 - Allow easy exit or access of any child, and
 - Reduce the risk of cross infection between children.
- The safe placement of cots, e.g., allows for ventilation – air to move around the cot (is not placed in a corner), away from windows and away from blinds and/or curtain cords and potential hazards.
- That provision is made for:
 - Clean and comfortable mattresses and other bedding, which is in good repair.
 - All forms of bedding to be fitted with a waterproof cover under sheets.
 - Bed clothing appropriate to the climate.
 - Fresh linen for each child (i.e., Individual bed linen and blankets)

Safe Sleeping Equipment

The premises, furniture and equipment are safe, clean and in good repair, including ensuring all equipment used for sleep and rest meets any relevant Australian Standards and other product safety standards, such as Australian Competition and Consumer Commission (ACCC) guidelines.

All cots, beds, bedding and bedding equipment being used for sleep and rest are safe and appropriate for the ages and developmental stages of children who will use them (considering for example, if the children might roll, climb out of a cot, fall from a high sleep surface, become trapped between a sleep surface and wall, become trapped face down in bedding, are over the recommended weight limit for sleeping surfaces, or if children's breathing might become impeded from weighted sleep products).

In determining if a bed is appropriate, the Coordination Team and Educators will ensure:

- No waterbeds or beanbags are to be used with children resting and sleeping.
- Individual beds are required to be used appropriately for the recommended age and weight of the child.
- The mattress kept in a good, dry, dust free and clean condition.
- Children over the age of 2 years sleep on a mattress on the floor or in a bed with guard-rails.

Acknowledging that in some instances, other factors such as a request from parent, the developmental stages of a child or level of ability, if an Educator is unsure whether a bed is appropriate under the specific circumstances they must bring this to the attention of the Coordination team for further exploration.

Educators will ensure there is an adequate number of cots, beds, stretchers, or sleeping mats (together with waterproof covers) or other culturally appropriate forms of bedding for all children who sleep at the educator's residence. No child is to sleep on a waterbed or beanbag. Portable or folding cots are not to be used within My Place Family Day Care environments.

If bunk beds are present in the Family Day Care residence and are used by children enrolled with My Place Family Day Care, then it is mandatory for the beds to be of Australian/New Zealand safety standard (AS/NZ: 4220):

- Children aged six years and under should NEVER be allowed on the top bunk.
- There should be at least 2 metres clearance between ceiling fans and bunk beds.
- Properly attached ladders are important to provide safe access to and from the top bunk when someone is using the top bunk.
- The ladder is to be removed when not in use.
- The correct size mattress should fit snugly into the bed frame with a gap of not more than 25mm between it and the bed and sides and ends.
- The top bunk is not to be played on.

Bassinets and hammocks will not be used within the family day care environment or be present anywhere within the family day care educator's residence. Prams/strollers do not carry safety codes for sleep. Babies should not be left in a pram/stroller to sleep, as these are not safe substitutes for a cot.

Each child in care has fresh linen (linen is not used for more than one child without being laundered if the educator supplies linen). Should the Parent supply the linen then they are responsible for the laundering of the linen.

After each use, cots and beds are cleaned in accordance with the Staying Healthy Preventing infectious diseases in early childhood education and care services 5th ed and where possible waterproof covers are on sleeping surfaces. Warm soapy water and vigorous rubbing is the best method of removing germs.

Safe Sleep Practices

Educators will implement safe sleep practices to minimise risk to children through:

- Ensuring children are not to sharing the same bed at the same time.
- Ensuring children do not (except with the written consent of a parent of the child) sleep in a room where the educator is sleeping. Sleeping in a room with the educator may occur if overnight care is being provided and for addressing effective supervision and if necessary, will be written in the overnight care risk assessment and management plan.
- Supporting children moving from play to rest calmly.
- Respecting cultural differences concerning sleeping, that continue to maintain the recommended Red Nose Safe Sleeping practice.
- Ensuring babies and children do not sleep in any (baby) hammocks.
- Ensuring bassinets are not used within the family day care premises.
- Ensuring babies do not sleep in prams and/or strollers. Move the child as soon as possible into a cot or floor mattress if they fall asleep in the pram.
- Providing a comfortable, quiet place for each child to sleep at any time of the day.
- Providing children in care overnight with a separate, comfortable bed and respecting their privacy needs.
- Discussing children's sleeping arrangements with families and respecting their requirements.
- Ensuring that children who are sleeping or resting remain within sight and/or hearing range of the educator and are regularly monitored to maintain supervision.
- If a child is sleeping in a room where the Educator cannot see and/or hear them at all times, an operational baby monitor will be required.

When considering the supervision requirements of sleeping children, an assessment of each child's circumstance and needs should be undertaken to determine any risk factors. Consideration is given to:

- When babies or young children should be moved out of a cot and into a bed. When a child has reached the age of 12mths consideration needs to be given to supporting the child in moving to a mattress/stretcher.
- Ensuring dangling cords or string, including mobiles, will be moved out of the infant's reach, as these may get caught around their neck.
- Removing restrictive clothing or clothing with hoods and cords around the neck, including dummy cords and items such as hair clips that a child could easily remove while sleeping.
- Ensuring there is nothing placed around a baby's neck as this could tighten during sleeping, e.g., amber teething necklaces.
- The use of safe bedding- remove pillows, quilts, doonas, and lambskins from the cot as these may cover the baby's face and make it difficult to breathe.
- Ensuring heaters, fans, and electrical appliances are kept well away from the cot to avoid the risk of overheating, burns, or electrocution.
- Ensuring electric blankets, hot water bottles, or wheat bags for babies or young children will not be used.
- Ensure that harnesses are used and done up correctly when a baby is placed in a pram, stroller, or bouncer or any other baby/toddler equipment where harnesses are fitted.
- Practicing emergency evacuation drills in relation to the sleeping arrangements, in particular where the sleep room and play areas are not adjacent, so that an effective plan is established in case of fire or an intruder.

Babies and Toddlers

- Placing babies 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 My Place Family Day Care, by the child's medical practitioner and a Risk Minimisation Plan completed by the doctor.
- 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 ensure they are placed on their backs, 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). Ensure that if babies are wrapped or swaddled, only cotton or muslin will be used, and the baby's face will not be covered. 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. If a dummy falls out of a baby's mouth during sleep, it should not be re-inserted.

Supervision of Children

Educators will ensure the physical environment is safe, designed to facilitate supervision and conducive to sleep. Wherever viewing windows are used, all children should be visible to supervising educators.

The circumstance and needs of each child should be considered to determine any risk factors that may impact the adequate supervision of sleeping and resting children. For example, babies or children with colds, chronic lung disorders or specific health care needs might require a higher level of supervision while sleeping.

Educators will monitor sleeping children regularly. The details of all children under 2 years of age will also be recorded on the service's Sleep Tracker form every 10 minutes. This documentation must be recorded and kept on file for 12 months.

Educators will keep doors to sleep rooms open unless a monitor is used, and a smoke detector is installed in the room. Educators may use a monitor that has sound and clearly displays the child/ren during times when children are sleeping at different times/multiple times throughout a day

Supervision of sleeping and resting children will be maintained throughout rest periods including regular physical bedside checks including visual inspection of the child's:

- sleeping position
- skin and lip colour
- breathing
- body temperature
- head position
- airway
- head and face, ensuring they remain uncovered

Educators will sit near resting children and support them by encouraging children to relax and listen to music or read stories.

Collaborating with Families

As part of My Place Family Day Care's enrolment process, families are requested to provide information relating to their child's specific sleep and rest needs.

Throughout their child's time in care, families are requested to work with the educator to consider their child's sleep, rest and relaxation needs and to communicate openly to ensure a strong working relationship is formed between them and the educator

If families require additional support, they should be directed to contact the Coordination Team.

Educator Professional Development and Training

The Coordination Team and Educators will have access to current information and training to ensure their sleep practice knowledge is current.

The Coordination Team will provide educators with child protection training to ensure they are aware of their vulnerability to allegations of abuse and/or harm. The training will highlight the protective measures they must implement to protect themselves and their families.

Educators and Educator Assistants will undertake training or update their knowledge of safe sleep practices at least annually or as instructed by the Nominated Supervisor on the Red Nose Sleep Recommendations to reduce the risk of sudden unexpected death in infancy (SUDI).

Regulatory Foundations

In preparing and implementing this policy, the Approved Provider recognises the obligations and requirements related to –

Education and Care Services National Law Act

S.163	Offence relating to appointment or engagement of family day care co-ordinator
S.164	Offence relating to assistance to family day care educators
S.164A	Offence relating to the education and care of children by family day care service
S.165	Offence to inadequately supervise children
S.167	Offence relating to protection of children from harm and hazard
S.173	Offence to fail to notify certain circumstances to Regulatory Authority
S.175	Offence relating to requirement to keep enrolment and other documents

Education and Care Services National Regulations

R.81	Sleep and rest
R.82	Tobacco, drug and alcohol-free environment
R.83	Staff members and FDC educators not effected by alcohol or drugs
R.84A	Sleep and rest
R.84B	Sleep and rest policies and procedures
R.84C	Risk assessment for purposed of sleep and rest policies and procedures
R.84D	Prohibition of bassinets
R.86	Notification to parents of incident, injury, trauma and illness
R.87	Incident, injury, trauma and illness record
R.103	Premises, furniture and equipment to be safe, clean and in good repair
R.105	Furniture, materials and equipment
R.106	Laundry and hygiene facilities
R.107	Space requirements – indoor space
R.110	Ventilation and natural light
R.116	Assessments of family day care residences and approved family day care venues
R.168	Education and care service must have policies
R.169	Additional policies and procedures – family day care
R170	Policies and procedures to be followed
R171	Policies and procedures to be kept available
R172	Notification of change to policies or procedures

National Quality Standard

- QA 2 – Children’s Health and Safety
- QA3 – Physical Environments
- QA5 – Relationships with Children
- QA6 – Collaborative Partnerships with Families and Communities
- QA7 – Leadership and Management

Additional Regulatory Context and Guidance

- <https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safe-sleep-and-rest-practices>
- <https://rednose.org.au/>
- <https://www.productsafety.gov.au/products/babies-kids/kids-furniture/folding-cots>
- https://kidsafe.com.au/wp-content/uploads/2020/06/FINAL-FDC-Safety-Guidelines_7thEd.pdf
- https://www.acecqa.gov.au/sites/default/files/2024-02/FDCEducator_ComplianceGuide_August2023.pdf

Related Policies and Procedures

- Educational Program and Practice
- Enrolment and Orientation

- Providing a Child Safe Environment
- Non-Smoking, Illicit Substance and Alcohol-free Environment
- Supervision of Children
- Child Protection
- Emergency Management, Lockdown and Evacuation

Forms and Resources

- Sleep and Rest Risk Management Plan
- Sleep Tracker
- Overnight Sleeping Risk Assessment Plan

Policy 2.2 Sleep, Rest and Relaxation			
Revision Register	Date of Last Update	Date Ratified and endorsed by board	Amendments
V1.0	07/2015		Original policy issued
V2.0	12/2016		Policy reviewed and amended
V3.0	08/2017		Policy reviewed and amended
V4.0	12/2019		Policy Amended
	10/2020		Policy reviewed and procedures separated to separate document
V5.0	01/2021		Policy Amended
V6.0	01/2024		Policy Amended
V7.0	13/09/2024	23/09/2024	Policy reviewed, combined 4.19 Safe Sleep procedures, 4.20 Rest and Relaxation Procedures, 6.8 Nursery Equipment, Procedure updated format and enhanced procedures