

Sleep and rest for children - Procedure guidelines for early childhood education and care services

May 2021



Table of contents

- Purpose3**
- Reference to policy and philosophy3**
- Procedures3**
- Roles and responsibilities.....4**
- Procedures created/reviewed 13**
- Monitoring, evaluation and review..... 13**
- Checklist..... 13**
- Useful resources.....13**

Purpose

Your procedures should be written in clear and concise language, making them easy to read and understand.

The procedures should be specific as to what is required to implement the ***Sleep and rest for children policy***.

Induction and training about the procedures needs to be directed and clear so that all educators, including those who are may be casually employed, new to a service or moving between rooms, can refer to this document when they are unsure about their role and responsibilities.

The steps and guidelines you document will not only guide your practice, but also inform the NSW Regulatory Authority of how roles and responsibilities are allocated and explained in your service.

When thinking about your procedures to implement the ***Sleep and rest for children policy***, ensure that the procedures are practical and achievable. For example, where your procedures outline that sleep checks are to be undertaken every 10 minutes, the procedures need to be specific about what is required for a check, how it is to be recorded and where the documentation of this activity will be kept.

Reference to policy and philosophy

The procedures should refer to your ***Sleep and rest for children policy*** and specify where to find the policy (in hard copy, online or both).

Your procedures will also reflect your service's overall philosophy and supervision and action plans for specific children.

Procedures

This is the document where you set out in detail the way in which the service will implement its ***Sleep and rest for children policy***.

There must be specific step-by-step procedures for each age group (a 'how to' guide that must be followed in your service).

In addition, other areas that will be set out in the procedure will include:

- how you are using the procedures as part of your educator and staff inductions, as well as ongoing training on safe sleeping practices

- templates or documents that might be required and/or used as a part of the procedures (e.g. Sleep and Rest Time Check chart or digital device/app)
- resources required for the implementation of procedures, where necessary
- systems to monitor the implementation of procedures
- how the service will share the procedures with families
- where the procedures will be kept
- when they were last reviewed

Age is particularly important when considering appropriate sleep and rest, due to the increased risks of SIDS and SUDI associated with the younger age group.

Your procedures need to reflect the safe sleep recommendations and guidelines set out by [Red Nose](#) (the recognised national authority on safe sleeping) procedures, [ACECQA](#) (the national authority under the NQF) and these Guidelines.

Consider whether breaking up the ***Sleep and rest for children policy*** into separate procedures with different topics will help staff members to follow the procedures and understand their roles and responsibilities. For example, your service's bed and linen cleaning procedures may need to be displayed in the storeroom where the beds are kept (and by laundry facilities).

Roles and responsibilities

This is where you will designate specific roles and responsibilities for the people who hold different positions within your service. This needs to align with the *Education and Care Services National Regulations* (as set out on pages 9-12 below).

It is important to note that it is the legal responsibility of approved providers to ensure systems are in place to ensure that health and safety procedures are implemented by the nominated supervisors, staff members and volunteers in services, including family day care (FDC) environments (if applicable). Ultimate responsibility lies with the approved provider to ensure their service/s are meeting the requirements of the *Children (Education and Care Services) National Law (NSW)* (National Law).

When developing this section of the procedure, it should include:

- The roles and responsibilities of the approved provider, responsible person, nominated supervisor, coordinators, educators, family day care educator assistants or other staff in your service in relation to managing children's sleep and rest
- Clear definitions of these roles and expectations and where they will be documented
- Why clear and robust procedures for children's sleep and rest are important for children's health, safety and wellbeing
- How the service will learn from the administration of these procedures to improve its practices

- How the service will document the service’s strengths and areas for improvements in its QIP or self-assessment information
- How the service will ensure that the necessary tools are available so that educators and staff can follow the procedures in relation to children’s sleep and rest
- How educators and staff will be made aware of the procedures
- That the roles and responsibilities reflect your service type
- That the procedures are tailored and specific to your individual service
- How families will be consulted in the development and review of the procedures

An example of how roles and responsibilities could be described includes, but is not limited to:

Role	Responsibilities
Approved provider	<ul style="list-style-type: none"> • Ensures that obligations under the <i>Children (Education And Care Services) National Law (NSW)</i> and <i>Education and Care Services National Regulations</i> are met. • Ensures all staff receive information and induction training to fulfil their roles effectively, including being made aware of the sleep and rest policies, their responsibilities in implementing these, and any changes that are made over time. • Takes reasonable steps to ensure that nominated supervisors, FDC coordinators, educators, family day care educator assistants, staff and volunteers follow the policy and procedures. • Ensures children are adequately supervised during periods of sleep and rest. This includes ensuring clear procedures and processes are in place for in-person physical checks of children and recording of all checks at the time they occur. • Ensures the needs for sleep and rest of children being educated and cared for by the service are met, having regard to the ages, developmental stages and individual needs of the children. • Ensures the premises, furniture and equipment are safe, clean and in good repair. This includes ensuring all equipment used meets any relevant Australian Standards and other product safety standards. • Ensures that each child has access to sufficient furniture, materials and developmentally appropriate equipment suitable for the education and care of that child. • Ensures that the indoor spaces used by children are well ventilated; have adequate natural light; and are maintained at a temperature that ensures the safety and wellbeing of children. • Ensures sleep and rest environments are free from cigarette or tobacco smoke. • Ensures copies of all policies and procedures are readily accessible to nominated supervisors, educators, staff and volunteers, and available for inspection. • Notifies families at least 14 days before changing policies or procedures if the changes will:

Role	Responsibilities
	<ul style="list-style-type: none"> ○ affect the fees charged or the way they are collected or, ○ significantly impact the service's education and care of children, or ○ significantly impact the family's ability to utilise the service. ● [For centre-based services] Ensures that the premises are designed to facilitate supervision. ● [For FDC services] Considers best practice guidelines for safe sleeping environments and equipment when undertaking assessments and reassessments of FDC residences and approved FDC venues.
Nominated Supervisor / Family day care coordinator	<ul style="list-style-type: none"> ● Ensures children are adequately supervised during periods of sleep and rest. This includes ensuring clear procedures and processes are in place for in-person physical checks of children and recording of all checks at the time they occur. ● Ensures sleeping spaces are not dark. The lights can be dimmed, but there needs to be sufficient light to allow supervision and to physically check children's breathing, lip and skin colour. ● Ensures sleep practices, environment and equipment continue to be safe and in line with best practice guidelines. ● Ensures procedures are tailored to the specific service. ● Ensures educators understand and follow the service's policies and procedures. ● Ensures educators understand their legal roles in the implementation of the sleep and rest policies and procedures. ● Ensures the needs for sleep and rest of children being educated and cared for by the service are met, having regard to the ages, developmental stages and individual needs of the children, e.g. provides opportunities and environments for sleep, rest and relaxation. ● [For FDC coordinators] Considers best practice guidelines for safe sleeping environments and equipment when undertaking assessments and reassessments of FDC residences and approved FDC venues. ● [For FDC coordinators] Works with FDC educators to tailor the service's policy and procedures to the unique layout and safety considerations of each family day care residence or venue, as well as the ages and developmental stages of the children in care.
Educators	<ul style="list-style-type: none"> ● Have been inducted and trained in the policy and procedures. ● Have a good understanding of the service's policy and procedures, and embed practices that support safe sleep into everyday practice. ● Ensure procedures are relevant to their particular residence/venue and if not, take that up with the Nominated Supervisor / Family day care coordinator. ● Maintain adequate supervision of sleeping and resting children. This involves being within sight and hearing distance at all times, and physically checking children's breathing by observing the rise and fall of their chest and their lip and skin colour at least once every 10 minutes. All such checks should be conducted in person at the cot side (or side of the floor mattress/toddler bed for children who have moved from a cot),

Role	Responsibilities
	<p>and recorded at the time they occur.</p> <ul style="list-style-type: none"> • Checks should not be conducted through a window or by use of CCTV, audio monitors or heart monitors. • Assess risk factors to determine whether any child requires a higher level of supervision while sleeping. • Ensure they are not engaged in other duties (e.g. administrative duties) that will take their attention away from actively supervising sleeping and resting children. • Ensure sleeping spaces are not dark. The lights can be dimmed, but there needs to be sufficient light to allow supervision and to physically check children's breathing, lip and skin colour. • Ensure that the child's clothing is appropriate in kind and there are no loose aspects of that clothing (including but not limited to bibs) that could entangle the child during their rest/ sleep. • Identify and remove all potential hazards from sleep environments, in line with Red Nose safe sleep recommendations. <ul style="list-style-type: none"> • Identify and suggest any potential improvements to service procedures and practice. • Document children's sleep and rest needs and provide information to families about their child's sleep and rest patterns. • Consult families to gather information about individual children's needs and preferences. • Model and promote safe sleep practices and make information available to families. • [For FDC educators] Ensure procedures are relevant to their particular context and FDC residence or venue. • [For FDC educators] Have an agreed and documented practice for the supervision of sleeping children, tailored to the unique layout and safety considerations of their family day care residence or venue, as well as the ages and developmental stages of the children in their care. For example, considerations of how they will supervise and conduct physical checks of sleeping children, whilst also maintaining adequate supervision of other children in their care. • [For FDC educators] Ensure their day-to-day sleep practices, environment and equipment continue to be safe and in line with best practice guidelines. • [For FDC educators] Ensure the needs for sleep and rest of the children being educated and cared for by the service are met, having regard to the ages, developmental stages and individual needs of the children, e.g. provide opportunities and environments for sleep, rest and relaxation.

Role	Responsibilities
Families	<ul style="list-style-type: none"> • Regularly update the service on their child’s sleeping routines and patterns. • Provide informal updates on the previous night’s sleep to assist educators to understand children’s needs for sleep and rest at a service during the day. • Provide specified bedding if required. • Dress their child appropriately for the weather conditions and provide additional clothing, for the child.

The following table will assist you in developing procedures specific to your service’s needs and context. Referring to the Education and Care Services National Regulations when you are writing your procedures will assist you to ensure you are meeting your obligations.

Areas to include in your procedures	Things to consider and outline in each area (this will be specific to the context of your service)	Strategies for monitoring and implementation of procedures	Related policy and/or procedure
<p>Beds and Linen</p> <p>Law: section 167</p> <p>Regs: regulations 103, 105, 106, 116</p> <p>QA2: 2.1.1, 2.1.2</p> <p>QA3: 3.1.1</p> <p>QA7: 7.1.3</p>	<ul style="list-style-type: none"> • Where bedding is stored. • When and how the cots and beds are made. • The cleaning process for cots, beds and linen. • Bedding equipment and products, such as cots, comply with Australian Standards (AS/NZS 2172 and AS/NZS 2195) and other product safety standards. 	<ul style="list-style-type: none"> • Clearly defined roles and responsibility statements. • Consider creating shift descriptions or checklists that include these responsibilities. • Periodic workplace health and safety checks of the physical environment, furniture and resources. (For FDC services, this should also be included as part of reassessments of FDC venues and residences). • Manufacturer standards checked upon purchasing new furniture, linen and resources. 	<p>Health and hygiene Providing a child safe environment</p> <p>[For FDC services] Assessment and reassessment of FDC venues and residences</p>

Areas to include in your procedures	Things to consider and outline in each area (this will be specific to the context of your service)	Strategies for monitoring and implementation of procedures	Related policy and/or procedure
<p>Sleeping environment/s are safe and fit for purpose</p> <p>Law: sections 165, 167</p> <p>Regs: regulations 103, 105, 106, 107, 110, 115, 116</p> <p>QA3: 3.1.1</p> <p>QA2: 2.1.2</p>	<ul style="list-style-type: none"> • How your service implements best practice guidelines and safe sleep recommendations from Red Nose and ACECQA. • How your overall designated sleep / rest environment and sleep equipment is safe and fit for purpose. This includes: <ul style="list-style-type: none"> ○ adequate ventilation, temperature control, lighting and any other considerations, specific to your service environment ○ consider how the beds and cots will be placed to minimise infection ○ an appropriate sleep and rest environment, including sufficient spaces in sleep and rest areas and flexible for the age group ○ other considerations, specific to your service environment e.g. number of cot rooms in centre-based services, or the unique layout and safety considerations of each FDC residence or venue, and the ages and developmental stages of the children attending. • That all hazards (e.g. blinds, cords, curtains, necklaces/jewellery, doonas or other loose bedding, soft toys) are removed or controlled, in line with Red Nose and ACECQA guidance. • How you intend to meet regulation 106, 107, 110, 115. 	<ul style="list-style-type: none"> • Clearly defined roles and responsibility statements. • Creating checklists that include these responsibilities. • Periodic WHS checks of the physical environment, furniture and resources. (For FDC services, this should also be included as part of reassessments of FDC venues and residences). 	<p>Health and hygiene Providing a child safe environment</p> <p>[For FDC services] Assessment and reassessment of FDC venues and residences</p>

Areas to include in your procedures	Things to consider and outline in each area (this will be specific to the context of your service)	Strategies for monitoring and implementation of procedures	Related policy and/or procedure
<p>Health, Safety and Supervision</p> <p>Law: sections 165, 167</p> <p>Regs: regulations 81, 82 87, 170, 171</p> <p>QA2: 2.1.1, 2.1.2</p> <p>QA3: 3.1.2</p> <p>QA6: 6.1.2</p> <p>QA7: 7.1.3</p>	<ul style="list-style-type: none"> • How you reflect diversity and inclusion in practices relating to the sleeping environment, whilst maintaining best practice and children’s safety. • How you will keep children safe during their sleep and rest times including: <ul style="list-style-type: none"> ○ identifying the different practices for the varying ages and sleep needs and preferences for children ○ referring to Red Nose and ACECQA for best practice guidance, including in relation to sleep position, sheets, swaddling and clothing. • Outline effective supervision for sleeping and resting children, including: <ul style="list-style-type: none"> ○ how you will closely monitor and record sleeping children and ensure safe sleep practices are being implemented. (section 165; Guide to the NQF, p.166 and p.368) ○ being within sight and hearing distance at all times ○ physical check procedures and routines to ensure supervision is effective, i.e. checking child’s breathing by observing the movement of their chest and their skin colour at the cot side (or side of the floor mattress/toddler bed for children who have moved from a cot) ○ frequency of physical checks e.g. at least once every 10 minutes, but more frequent if deemed necessary upon assessing risks ○ checks conducted in person (not through a window or by use of CCTV or audio monitors) 	<ul style="list-style-type: none"> • Make sure your policy and procedures are available for all to access. • Clearly defined roles and responsibility statements or shift descriptions. • Periodic WHS checks of the physical environment, furniture and resources. (For FDC services, this should also be included as part of reassessments of FDC venues and residences). • Collecting information from families through questions in enrolment documents. • Opportunities for family input and involvement embedded in practice. • Consider creating checklists to ensure health and safety measures are being met. • Supervision plans. • Daily ratio checks. • Sleep check charts. • Timer for regular physical checks of sleeping/resting children. • [For centre-based services] Staff 	<p>Supervision</p> <p>Providing a child safe environment</p> <p>Staffing</p> <p>Interactions with children</p> <p>Enrolment and orientation</p> <p>Dealing with medical conditions in children</p> <p>[For FDC services]</p> <p>Assessment and reassessment of FDC venues and residences</p>

	<ul style="list-style-type: none"> ○ how you will ensure checks are recorded at the time they occur, not retrospectively ○ ensuring sufficient lighting to allow supervision & effective physical checks. ● [For FDC services] Supervision plan tailored to the unique layout and safety considerations of the FDC residence or venue, as well as the ages and development stages of the children in care. E.g. how will you supervise and conduct physical checks of sleeping children whilst also maintaining adequate supervision of other children in care. ● Think about the differences between the rooms and / or age groups in your service, i.e. specific information for: <ul style="list-style-type: none"> ○ Infants: Monitoring and recording sleep checks and sleep routines, diverse family and cultural preferences. Consideration should be given to infants' room routines based on individual children's needs ○ Toddlers: Monitoring and recording sleep checks, options for rest, supervision for children who choose not to rest. ● How do you develop your partnerships with families with regard to sleep and rest routines, including: <ul style="list-style-type: none"> ○ diverse family and cultural preferences ○ how you will explain to families that you cannot comply with requests that are contrary to Red Nose safe sleep guidance without the written authorisation of the child's medical practitioner. ● How will your service reflect inclusion and children's agency, e.g. children's need or want to sleep or rest, differences in sleep and rest routines/needs for mixed age groups, cultural sleep practices or resources. 	<p>sign in/out sheets.</p> <ul style="list-style-type: none"> ● Clearly marked First Aid Access and Management Plans. ● Safe Sleep Practices information included in educator and staff induction pack and training. ● [For centre-based services] Regular staff meeting agenda items to discuss safe sleep practices and any changes to service procedures. ● [For FDC services] Regular support from FDC coordinator and meetings with other FDC educators and FDC educator assistants in the service to discuss safe sleep practices and any changes to service procedures. 	
--	--	--	--

Procedures created/reviewed

Include the date the procedures were created or reviewed.

Monitoring, evaluation and review

Your service, in consultation with educators and other key staff, families and other stakeholders, should review the effectiveness of these procedures within a set timeframe (at least annually) or earlier if there is a change in relevant legislation.

State when the procedure will be reviewed and who will be responsible for this. Update the procedures if required, and document your service's strengths and areas for improvement in your QIP or self-assessment information.

Checklist

- Do the ***Sleep and rest for children procedures*** align with your ***Sleep and rest for children policy***?
- Have your procedures been written in plain English and can they be easily implemented by an educator new to your service?
- Is it clear who is responsible for the implementation of the procedure?
- Are all educators and other staff aware of the procedures, and can they implement the procedures if required and explain them to families?
- Do you need to develop any resources to monitor and record how the procedure is implemented in your service?

Useful resources

Include links to useful resources that have helped inform the development of your policy and procedures. Be mindful of any state or territory specific content.

Some examples include, but are not limited to:

- [Red Nose](#) is considered the recognised national authority on safe sleeping practices for infants and children. Approved providers and service leaders are encouraged to use Red Nose resources to regularly develop, review and maintain the most up-to-date sleep and rest policies and procedures.
- [Red Nose Safe Sleep video for education and care services](#)

- [Safe sleep and rest practices \(ACECQA\)](#)
- [Sleep health and sleep development \(Queensland Government\)](#)
- [Meeting children's sleep, rest and relaxation needs \(Queensland Government\)](#)
- [Guide to the National Quality Framework \(ACECQA\)](#)
- [Sleep learning for early education professionals \(Queensland Government\)](#)
- [South Australian Safe Infant Sleeping Standards \(South Australian Government\)](#)
- [NSW Health Safe sleep for babies \(New South Wales Government\)](#)
- [Northern Territory Government Safe sleeping \(Northern Territory Government\)](#)
- [Tasmanian Department of Health and Human Services SIDS and Safe Sleeping \(Tasmanian Government\)](#)
- [Kidsafe Family Day Care Safety Guidelines \(7th ed.\) \(Kidsafe\)](#)