# Sleep and rest for children – Policy guidelines for early childhood education and care services

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### **Purpose**

These guidelines are intended to assist approved providers, service leaders and educators in the development of the service's policies and procedures for managing sleep and rest for children in early childhood education and care services.

This document will assist you to:

- Understand the main components to be included in your sleep and rest policies and procedures, and considerations for each component.
- Develop, reflect on and improve your policies and procedures in line with best practice safe sleeping guidelines.
- Understand the considerations to support better practice in safe sleep and adequate supervision.

Under the Education and Care Services National Regulations, an approved provider must ensure that 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 170).

The approved provider, nominated supervisor and family day care educator must take reasonable steps to ensure children's needs for sleep and rest are met, having regard to each child's age, developmental stages and needs. Your policies and procedures should address these requirements.

Ensuring your policies and procedures are informed by advice from recognised authorities and evidence-based principles is one way to demonstrate that you are taking reasonable steps.

In addition, the National Quality Standard sets quality practice and your policies relating to sleep and rest for children and procedures should be directed to achieving that standard.

A guiding principle of the education and care services National Quality Framework is that best practice is expected in the provision of education and care services. Red Nose (formerly SIDS and Kids) is the recognised national authority on safe sleeping practices for infants and children. Approved providers, nominated supervisors and service leaders should consult Red Nose resources for best practice guidance when reviewing and updating sleep and rest policies and procedures: <a href="https://rednose.org.au/section/safe-sleeping">https://rednose.org.au/section/safe-sleeping</a>.

In addition, the Australian Children Education and Care Quality Authority (ACECQA) publishes guidance for Safe Sleep and Rest Practices: <a href="https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safe-sleep-and-rest-practices">https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safe-sleep-and-rest-practices</a>.

Safety requirements for relevant equipment, such as cots, mattresses, bedding and evacuation cots will also need to be considered. How these work in practice should be documented in your procedures.

Every service is different so it is not sufficient to apply generic policies and procedures to

multiple services. You will need to ensure that your policies and procedures are appropriate and adapted to your particular service's operations and its unique context.

### **Policy statement**

The policy statement will reflect your service's philosophy about sleep and rest for children.

#### For example:

The purpose of the *Sleep and rest for children policy* in [name of service] is to ensure the safety, health and wellbeing of children attending our service and appropriate opportunities are provided to meet each child's need for sleep, rest and relaxation.

### **Background**

Your policy needs to include a statement of why this policy is in place.

### For example:

The Education and Care Services National Regulations requires approved providers to ensure their services have policies and procedures in place for children's sleep and rest.

Our **Sleep and rest for children policy** means our educators, management, coordinators, other staff, families and the community can be confident that children's needs for sleep and rest are met while attending the service.

It is important to note that whilst rare, some instances of death have occurred when a child has been sleeping at an education and care service. Relevant Coroners' reports have found that poor sleeping environments, poor sleeping procedures and poor supervision place children at risk.

All children need rest and sleep to be happy and healthy, and this is an area of service policy and procedure that needs to be very carefully considered, monitored and actively reviewed to ensure that these risks are appropriately addressed at all times.

### Legislative requirements

Your policy must be consistent with, and refer to, legislative requirements for sleep and rest for children. The legislation governing education and care services in New South Wales is:

Children (Education and Care Services) National Law (NSW) (the Law)

- Education and Care Services National Regulations (the Regulations)
- Children (Education and Care Services) Supplementary Provisions Act 2011 (State Law)
- Children (Education and Care Services) Supplementary Provisions Regulation 2019 (State Regulations)

Relevant provisions in that legislation include, but are not limited to:

Section 165 of the Law	Offence to inadequately supervise children	
Section 167 of the Law	Offence relating to protection of children from harm and hazards	
Regulation 81	Sleep and rest	
Regulation 82	Tobacco, drug and alcohol-free environment	
Regulation 87	Incident, injury, trauma and illness record	
Regulation 103	Premises, furniture and equipment to be safe, clean and in good repair	
Regulation 105	Furniture, materials and equipment	
Regulation 106	Laundry and hygiene facilities	
Regulation 107	Space requirements – indoor space	
Regulation 110	Ventilation and natural light	
Regulation 115	Premises designed to facilitate supervision	
Regulation 116 (FDC only)	Assessments of family day care residences and approved family day care venues	
Regulation 168	Education and care service must have policies and procedures	
Regulation 169	Additional policies and procedures – family day care	
Regulation 170	Policies and procedures to be followed	
Regulation 171	Policies and procedures to be kept available	
Regulation 172	Notification of change to policies or procedures	

When writing your policy, you will need to explain what is required under each section and regulation and how your service will meet these requirements. The policy must then be put into practice through the procedures you adopt at your service.

Breaking up the *Sleep and rest for children policy* into separate sections/topics may help staff members to follow the policy and understand their roles and responsibilities. For example, you may wish to have separate sections for:

- Safe sleeping bedding and equipment.
- Safe physical environment for sleeping and rest.
- Supervision of sleeping children.

### Principles to inform your policy

The development and implementation of your procedures should be carried out in accordance with the principles of your service's **Sleep and rest for children policy**. Examples of principles could include, but are not limited to:

- Our approach to supporting and promoting children's health and physical activity, including safe sleep, is informed by current recognised guidelines and up-to-date information.
- Our service's safe sleep and rest procedures and practice follow Red Nose guidelines (the recognised National authority in this area) and guidance from ACECQA (as the national authority under the NQF) as well as the Department (as the NSW Regulatory Authority).
- Educators, staff and management each have a duty of care to ensure children are
  provided with a high level of safety when sleeping and resting, that adequate
  supervision is maintained, and that every reasonable precaution is taken to
  protect them from harm and hazard whilst sleeping and resting.
- Our educators, staff and management are required to know and understand how to implement Red Nose best practice guidance, and be able to explain this to families.
   They must also know and understand our service's policy and procedures regarding safe sleep and rest.
- Children sleeping and resting will always be within sight and hearing distance so that educators can monitor children's safety and wellbeing.
- Educators must physically check the child's breathing and the colour of the child's lips and skin tone regularly.
- Educators will maintain active supervision, and will not perform programming or administrative duties that would take their attention away from sleeping and resting children.
- Children will be provided safe sleeping equipment and environments, including adequate ventilation and adequate lighting to enable effective supervision.

- Effective sleep and rest strategies are important factors in ensuring every child feels secure and is safe at our service.
- Opportunities will be provided to meet each child's sleep, rest and relaxation needs and ensure children feel secure and safe.
- We will consult with families about their child's routine for sleep and rest at home and carry this out at the service where possible and safe to do so, but noting the prevailing safe sleep practices advocated by Red Nose, ACECQA and the NSW Regulatory Authority.
- Child safety is our first priority. Educators can confidently refer to the service's **Sleep** and rest for children policy and procedures if families make requests that are contrary to best practice and increase risk to children.

### Considerations for adequate supervision

The NSW Regulatory Authority requires the following considerations to be addressed when determining if supervision is adequate, including:

- During periods of children's sleep and rest, active monitoring and supervision with the ability to see and hear the child is best practice in both family day care and centre-based care settings.
- In all service types, adequate supervision requires physical checking of a sleeping child. Physical checking means educators must check that the child is breathing by checking the rise and fall of the child's chest and the child's lip and skin colour from the side of the cot (or floor mattress/toddler bed for children who have moved from a cot).
- To guide better practice in sleep supervision, services should consider conducting regular physical checks of all sleeping children, for example, every 10 minutes for children under two years of age. The circumstances and needs of each child in care should be assessed to determine any risk factors that may mean physical checks are required more frequently. For example, babies or children with colds, chronic lung disorders or specific health care needs may require a higher level of supervision and more frequent checks while sleeping.
- The NSW Regulatory Authority does not consider that a service/educator using CCTV, audio monitors or heart monitors instead of physical checks demonstrates adequate supervision. Looking through a window to conduct a check is not adequate. Educators must physically check sleeping children in person at the cot side (or side of the floor mattress/toddler bed for children who have moved from a cot).
- The service should have in place procedures for recording the time and observation of the physical checks. Educators are required to record all checks at the time they occur, not retrospectively.

# Additional supervision considerations for family day care

- During periods of children's sleep and rest, active monitoring and supervision with the ability to see and hear the child is best practice in family day care. It is crucial that the family day care educator conduct regular, high quality physical checks, and implement other safe sleep practices and risk mitigation strategies, to ensure adequate supervision.
- A family day care service should have a documented practice for the supervision of sleeping children, tailored 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.
- For example, the service should ensure that children are not placed in a bedroom if they would not be adequately supervised, or would have access to medication or other dangerous items.
- A family day care educator must consider and have a documented procedure for the manner in which they will supervise and conduct physical checks of sleeping children whilst also maintaining adequate supervision of other children in their care.
- To guide better practice in sleep supervision, a family day care educator should consider conducting regular physical checks of all sleeping children, for example, every 10 minutes for children under two years of age. However, the circumstances and needs of each child in care should be assessed to determine any risk factors that may mean physical checks are required more frequently than this.

### Considerations for overnight or extended care

- Services providing overnight or extended care will need to develop sleep and rest
  policies and procedures specific to this type of care (or incorporate overnight care
  into overarching policies and procedures), as overnight practices will differ to those
  used during the day.
- Policies and procedures should consider: the risks and physical safety of the child's sleeping environment; plans for the supervision of the child while they are sleeping, including how they will be monitored during the night; access the child may have to other parts of the house during the night; access other people may have to the child's sleeping environment; and night time emergency evacuation procedures/lockdown (e.g. in the case of a fire, intruder, etc.).

# Considerations for the physical environment

 The policy/procedure will need to address suitable bedding equipment and how the service/ educator will meet the relevant Australian Standards that govern the use and maintenance of such equipment. These standards include:

Mandatory Australian Standard for cots	AS/NZS 2172
Mandatory Australian Standard for children's portable folding cots	AS/NZS 2195
Voluntary Australian Standard for sleep surfaces – test for firmness	AS/NZS 8811.1:2013

- Providers and services should not use any equipment or products in a way that was not originally intended, do not meet relevant safety standards, or have been recalled.
- All services should follow the Red Nose safe sleep recommendations to create safe sleeping spaces. This includes removing any soft items from the cot, such as loose blankets, pillows and soft toys.
- Children should be clothed appropriately and not have any items that are loose and could get tangled and restrict breathing such as bibs.
- All children should be given choices and opportunities for sleep, rest and relaxation to
  ensure their individual comfort and wellbeing. Services need to consider how they will
  ensure that the physical environment caters for non-resting children as well as
  resting/sleeping children. For example, consider separate resting spaces, and
  incorporating quiet activities into the program.
- The policy will also need to address how quality, age-appropriate practices are put in place for every child in care.
- The policy will need to reflect inclusion and families' cultural practices, with consideration
  to how these may influence the physical environment. If there is a possible conflict with
  your safe sleeping guidelines, you will need to establish how that conflict will be
  addressed to ensure risks are managed and the physical safety of the child's sleeping
  environment is not compromised.

# Key terms

To make it easier for your audience, provide definitions of key terms that may not be used every day. For example:

Term	Meaning	Source
ACECQA – Australian Children's Education and Care Quality Authority	The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources and services to support the sector to improve outcomes for children.	http://www.acecqa.gov.au
Infant	A young child between the ages of birth and 12 months.	
Rest	A period of inactivity, solitude, calmness or tranquility, and can include a child being in a state of sleep.	
Relaxation	Recreation or other activity for bringing about a feeling of calm in your body and mind.	
Adequate supervision	<ul> <li>Adequate supervision means:</li> <li>that an educator can respond immediately, particularly when a child is distressed or in a hazardous situation</li> <li>knowing where children are at all times and monitoring their activities actively and diligently.</li> </ul>	Guide to the NQF
Sudden and Unexpected Death in Infancy (SUDI)	A broad term used to describe the sudden and unexpected death of a baby for which the cause	What does SUDI mean
Sudden Infant Death Syndrome (SIDS)	The sudden and unexpected death of an infant under one year of age with an onset of a fatal episode occurring during sleep, that remains unexplained after a thorough investigation, including performance of a complete autopsy and review of the circumstances of death and the clinical history.	What is SIDS

# Links to other policies

Refer to related policies and procedures, for example:

- the administration of first aid
- enrolment and orientation
- interactions with children
- providing a child safe environment
- staffing
- emergency and evacuation.

## Induction and ongoing training

The policy should require that induction and ongoing training on safe sleep and the contents of the service's **Sleep and rest for children policy and procedures** be provided to educators and that a record kept of all such training.

The policy should set out how the policy and procedures will be used in induction training, and the frequency of ongoing training and information sharing to assist managers, coordinators, educators and other staff (including relief/casual educators and family day care educator assistants) to fulfil their roles effectively.

# Policy created/reviewed

Include the date the policy was created, reviewed or changes were made.

# Monitoring, evaluation and review

State when the policy will be reviewed and who will be responsible for this.

Update the policy if required, and document your service's strengths and areas for improvement in your Quality Improvement Plan (QIP) or Self-Assessment Working Document.

# Checklist

Have you referenced the relevant regulations and are these reflected in the policy?
Does the title provide a clear and concise statement identifying the intent of the policy?
Have you checked the policy requirements and referenced relevant legislation that applies to your service type?
Does your policy statement provide a framework for decision-making and ensure consistent practice?
Does your policy statement reflect your service philosophy?
Is it clear why this policy exists?
Are best practice principles for sleep and rest for children reflected in your policy?
Are the most up-to date sleep and rest policies and procedures from Red Nose (the recognised national authority) and ACECQA (the national authority under the NQF) reflected throughout your policy and procedures?