

RELAXATION AND SLEEP POLICY

1. PURPOSE

This policy will provide clear guidelines for the implementation of safe relaxation and sleep practices that meet the individual needs of children attending Annie Dennis.

2. VALUES

Annie Dennis is committed to:

- providing a positive and nurturing environment for all children attending the service;
- recognising that children have different requirements for relaxation and sleep, and being responsive to those needs to ensure that children feel safe and secure at the service;
- consulting with parents/guardians about their child's individual relaxation and sleep requirements/practices, and ensuring practices at the service are responsive to the values and cultural beliefs of each family;
- its duty of care to all children at Annie Dennis, and ensuring that adequate supervision is maintained while children are sleeping, resting or relaxing; and
- complying with all legislative requirements, standards and current best practice and guidelines, including recommendations by Red Nose.

3. SCOPE

This policy applies to the Approved Provider, Persons with Management or Control, the Nominated Supervisor, Persons in day-to-day Charge, all Annie Dennis staff including contractors, students on placement, volunteers, parents/guardians, children and others participating in the Annie Dennis programs.

4. BACKGROUND

The *Early Years Learning Framework* (EYLF) and the *Victorian Early Years Learning and Development Framework* (VEYLDF) include a focus on social, emotional, spiritual and physical wellbeing and health development. Outcome 3 in both framework documents refers to a child's ability to take increasing responsibility for their own wellbeing. One of the indicators for this capacity is that children 'recognise and communicate their bodily needs (for example thirst, hunger, rest, comfort, physical activity)'. The EYLF suggests that to promote this, educators should:

- consider the pace of the day within the context of the community; and
- provide a range of active and restful experiences throughout the day, and support children to make appropriate decisions regarding participation.

The Approved Provider and Nominated Supervisor have a responsibility under the *Occupational Health and Safety Act 2004* (Vic) to provide a safe and healthy working environment. This duty extends to others present in the workplace, including children, volunteers, students on placement, contractors and parents/guardians. Providing a safe environment for children at the service includes complying with current Australian/New Zealand standards in relation to equipment, such as cots and mattresses.

5. DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms refer to the General Definitions section of the Annie Dennis policy manual.

Act: means the *Education and Care Services National Law Act 2010*.

Annie Dennis: Annie Dennis Children's Centre, being an Approved Provider.

Adequate supervision: Entails all children (individuals and groups) in all areas of the service, being in sight or hearing (or both) of an educator at all times including during toileting, sleep, rest and transition routines. Services are required to comply with the legislative requirements for educator-to-

child ratios at all times. Supervision contributes to protecting children from hazards that may emerge in play, including hazards created by the equipment used.

Adequate supervision refers to constant, physically active and diligent supervision of every child at the service. Adequate supervision requires that educators are always in a position to observe each child, respond to individual needs, and immediately intervene if necessary. Variables affecting supervision levels include:

- number, age and abilities of children;
- number and positioning of educators;
- current activity of each child;
- areas in which the children are engaged in an activity (visibility and accessibility);
- developmental profile of each child and of the group of children;
- experience, knowledge and skill of each educator; and
- need for educators to move between areas (effective communication strategies).

Duty of care: A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

Red Nose: (formerly SIDS and Kids), the recognised national authority on safe sleeping practices for infants and children.

Regulations: means the *Education and Care Services National Regulations 2011*.

Relaxation/rest: A period of inactivity, solitude, calmness or tranquillity and can include a child being in a state of sleep.

SIDS (Sudden Infant Death Syndrome): The unexpected and unexplained death of an infant, usually occurring during sleep.

6. PROCEDURES

Annie Dennis is responsible for:

- taking reasonable steps to ensure the sleep and rest needs of children at the service are met, with regard to the age of children, developmental stages and individual needs (regulation 81(1) of the Regulations);
- regularly reviewing practices to ensure compliance with the recommendations of Red Nose in relation to safe sleeping practices for children (refer to attachment 1);
- ensuring sleep and rest environments and equipment are safe (refer to attachment 2);
- providing information and training to ensure staff are kept informed of changing practices in relation to safe sleep practices for children;
- ensuring parents/guardians are consulted about appropriate relaxation and sleep practices for their child;
- protecting children from hazards and harm (section 167 of the Act);
- ensuring cots provided at the service comply with the most current Australian/New Zealand Standards;
- ensuring that hammocks, prams and strollers are not used to settle children to sleep;
- consulting with staff in relation to Occupational Health and Safety issues when purchasing new equipment for the service;
- ensuring compliance with WorkSafe Victoria's *Children's services – occupational health and safety compliance kit*, including in relation to staff lifting children into and out of cots;
- ensuring adequate supervision of children at the service at all times, including during relaxation and sleep;
- ensuring that environments used for sleep and relaxation are well ventilated;

- ensuring that the environments used for sleep and relaxation are adequately lit to ensure visibility of all children at all times;
- ensuring all educators have current first aid and CPR certificates; and
- ensuring that there is adequate space to store bedding in a hygienic manner.

The Nominated Supervisor and Persons in day to day Charge are responsible for:

- taking reasonable steps to ensure the sleep and rest needs of children at the service are met with regard to the age of children, developmental stages and individual needs (regulation 81(2) of the Regulations);
- ensuring the educational program provides opportunities for each child to sleep, rest or engage in appropriate quiet play activities, as required;
- ensuring safe sleeping practices are on display in sleep and rest environments;
- protecting children from hazards and harm (section 167 of the Act);
- removing any hazards identified in the child's resting or sleeping environment and informing Annie Dennis, as soon as is practicable;
- ensuring all staff and educators comply with the recommendations of Red Nose in relation to safe sleeping practices for children (refer to attachment 1);
- educating families about evidence-based safe sleeping practices;
- ensuring sleep and rest environments and equipment are safe (refer to attachment 2);
- assessing whether there are exceptional circumstances for alternative practices where family beliefs conflict with current recommended evidence-based guidelines for safe sleeping practices, and seeking written support from the child's medical practitioner and developing a risk management plan;
- ensuring all staff and educators comply with WorkSafe Victoria's *Children's services – occupational health and safety compliance kit* in relation to lifting children into and out of cots;
- ensuring adequate supervision of children at the service at all times, including during relaxation and sleep;
- ensuring all educators have current first aid and CPR certificate;
- ensuring that environments used for sleep and relaxation are well ventilated;
- ensuring that the environments used for sleep and relaxation are adequately lit to ensure visibility of all children at all times;
- ensuring relaxation music or static noise is played at a volume that does not prevent educators/staff from hearing a child (educators/staff must be able to hear the children at all times);
- ensuring support services are available to counsel educators and staff in the event a child is found not breathing; and
- storing items such as bedding in a hygienic manner to prevent cross-contamination.

All educators and staff are responsible for:

- providing each child with appropriate opportunities for relaxation and sleep according to their needs;
- complying with the recommendations of Red Nose in relation to safe sleeping practices for children (refer to attachment 1);
- developing relaxation and sleep practices that are responsive to:
 - the individual needs of children at the service;
 - parenting beliefs, values, practices and requirements;
 - the length of time each child spends at the service;
 - circumstance or events occurring at a child's home;
 - consistency of practice between home and the service;
 - a child's general health and wellbeing; and

- the physical environment, including room temperature, lighting, airflow and noise levels (refer to attachment 3);
- educating families about evidence-based safe sleeping practices;
- ensuring sleep and rest environments and equipment are safe and reporting any hazards to the Nominated Supervisor (refer to attachment 2);
- implementing the documented sleep regime and risk management strategies where in exceptional circumstances family beliefs conflict with current recommended evidence-based guidelines for safe sleeping practices;
- minimising distress or discomfort for the children in their care;
- ensuring that resting and sleeping practices are not used as a behaviour guidance strategy;
- providing a range of opportunities for relaxation throughout the day and areas for children to relax on their own;
- complying with WorkSafe Victoria's *Children's services – occupational health and safety compliance kit*, including in relation to lifting children into and out of cots;
- providing input in relation to Occupational Health and Safety issues when new equipment is purchased for the service;
- conducting regular safety checks of equipment used for sleeping/resting, such as cots and mattresses;
- removing any hazards identified in the child's resting or sleeping environment and informing the Nominated Supervisor or Annie Dennis, as soon as is practicable;
- ensuring that any hanging cords, mobiles, curtains and blinds are inaccessible to children who are resting or sleeping;
- providing adequate supervision of all children, including during sleep, rest and relaxation (including checking children at a minimum of every 10 minutes);
- supervising children displaying symptoms of illness closely, especially when resting or sleeping;
- ensuring that artificial heating, such as heat bags and hot-water bottles, is not used to provide warmth;
- ensuring that children are not positioned in front of heaters to rest or sleep;
- ensuring cots and mattresses are arranged to allow for easy access for other children and educators;
- ensuring that each child has their own bed linen, and that the *Hygiene Policy* and procedures are implemented for the cleaning and storage of cots, mattresses and linen;
- documenting and communicating children's rest and sleep times to co-educators during shift changes;
- providing information to families about the service's relaxation and sleep practices;
- developing communication strategies to inform parents/guardians about their child's rest and sleep patterns, including times and length of sleep;
- ensuring that environments used for sleep and relaxation are well ventilated;
- ensuring that the environments used for sleep and relaxation are adequately lit to ensure visibility of all children at all times;
- ensuring relaxation music or static noise is played at a volume that does not prevent educators and staff from hearing a child (educators/staff must be able to hear the children at all times);
- completing a report if a hazard is found as instructed in the service's policies and procedures for the maintenance of a child safe environment;
- storing items such as bedding in a hygienic manner to prevent cross-contamination; and
- encouraging children's independence, and assisting children with dressing as needed.

Emergency procedures

If a child is found not breathing staff will:

- commence first aid immediately (resuscitation);
- call 000;
- notify the Nominated Supervisor who will notify the parent/guardian;
- take the other children to another environment or area, if possible; and
- follow the direction of the paramedics.

All parents/guardians are responsible for:

- reading this Relaxation and Sleep Policy;
- discussing their child's relaxation and sleep requirements and practices prior to commencing at Annie Dennis, and when these requirements change;
- providing information on the child's information form if the child requires special items while resting or sleeping e.g. a comforter or soft toy;
- providing a written medical report if their baby or child is not to be placed on their back during sleep. Parents/guardians must communicate alternative resting practices to the Nominated Supervisor and educators or staff.

Contractors, volunteers and students, while at the service, are responsible for following this policy and its procedures.

7. EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, Annie Dennis will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness;
- monitor the implementation, compliance, complaints and incidents in relation to this policy;
- keep the policy up to date with current legislation, research, policy and best practice;
- revise the policy and procedures as part of the service's policy review cycle, or as required; and
- notify parents/guardians at least 14 days before making any changes to this policy or its procedures unless a lesser period is necessary because of a risk.

8. RELATED POLICIES

- *Child Safe Environment Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Interactions with Children Policy*
- *Occupational Health, Wellbeing and Safety Policy*
- *Supervision of Children Policy*

9. RELEVANT LEGISLATION

Relevant legislation and standards include but are not limited to:

- *Australian Consumer Law and Fair Trading Act 2012*
- *Australian Consumer Law and Fair Trading Regulations 2012*
- Australian/New Zealand Standard – Cots for day nursery, hospital and institutional use – Safety Requirements (AS/NZS 2130:1998)
- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*

- *Occupational Health and Safety Act 2004*

10. LINK TO NATIONAL QUALITY STANDARDS

This policy is linked to Quality Area 2: Children's Health and Safety

11. SOURCES

- Australian/New Zealand Standards: the current relevant standards are:
 - Australian/New Zealand Standard – Cots for day nursery, hospital and institutional use – Safety Requirements (AS/NZS 2130:1998)Current standards are available on the SAI Global website at: www.saiglobal.com
- *Belonging, Being & Becoming – The Early Years Learning Framework for Australia* (EYLF): <https://www.education.gov.au/>
- *Grow and Thrive, Sleep*, volume 2 number 1, February 2013, Centre for Community Child Health: <https://www.rch.org.au/home/>
- Product safety: a guide for businesses and legal practitioners: <https://www.consumer.vic.gov.au/>
- Red Nose: Evidence-based information and advice about safe sleeping practices across ages and stages at <https://rednose.com.au/>
- WorkSafe Victoria, *Children's services – occupational health and safety compliance kit*: <https://www.worksafe.vic.gov.au/>
- *Victorian Early Years Learning and Development Framework* (VEYLDF): <http://www.education.vic.gov.au/Pages/default.aspx>
- Australian Children's Education and Care Quality Authority, *Safe Sleep and Rest practices* (October 2017): <https://www.acecqa.gov.au/resources/information-sheets/safe-sleep-and-rest-practices>

12. ATTACHMENTS

Annie Dennis relaxation and sleep practices are further detailed in the following:

- Attachment 1: Annie Dennis safe sleep practices for children
- Attachment 2: Annie Dennis safe environments and equipment
- Attachment 3: Annie Dennis meeting children's sleep, rest and relaxation needs

13. APPROVAL AND REVIEW

This policy was adopted by Annie Dennis on 21 May 2018. Date for review May 2020

ATTACHMENT 1

Annie Dennis safe sleep and rest practices

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 or 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.

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 and staff 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 (ie. with fitted neck and arm holes, but no hood). At no time should a baby's face or head be covered (ie 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. 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, and 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.

ATTACHMENT 2

Annie Dennis safe environments and equipment

Safe cots

Cots used at a service comply with the most current Australian/New Zealand Standards (Australian/New Zealand Standard – Cots for day nursery, hospital and institutional use – Safety Requirements (AS/NZS 2130:1998). www.saiglobal.com

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 and they should be clean, firm and flat. Mattresses should fit the cot base with not more than a 20mm gap between the mattress sides and ends.

Mattresses should not be elevated or tilted.

Remove any plastic packaging from mattresses.

Ensure waterproof mattress protectors are strong, not torn, and a tight fit.

Safe bedding

Light bedding is the preferred option. Bedding 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 or puffy bedding in cots is not necessary and may obstruct a child's breathing.

Safe placement

Ensure a safety check of sleep and rest environments is undertaken on a regular basis.

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 place anything (eg amber teething necklaces) around the neck of a sleeping child. The use of teething bracelets (eg amber teething bracelets) is also not recommended while a child sleeps.

ATTACHMENT 3

Annie Dennis meeting children's sleep, rest and relaxation needs

Individual children

Ensure that children who **do not** wish to sleep are provided with alternative quiet activities and experiences.

Ensure that 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.

Look for and respond to children's cues for sleep (eg 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 emotional bonds with familiar educators.

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.