Bubup Womindjeka Family and Children's Centre

RELAXATION AND SLEEP POLICY

Policy Number	P-Q2-M005	**Version Number**	3.00
Drafted by	Director of Education	**Approved Date:** **Review Date:**	February 2025 September 2027
Responsibility	The Board of Bubup Womindjeka Family and Children's Centre Association (Inc.)		
Related Service Policies	▪ Child Safe Environment Policy ▪ Hygiene Policy ▪ Incident, Injury, Trauma and Illness Policy	▪ Interactions with Children Policy ▪ Occupational Health and Safety Policy ▪ Supervision of Children Policy	
Legislation and Standards	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 household use – Safety Requirements (AS/NZS 2172:2010) • 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* • *National Quality Standard*, Quality Area 2: Children's Health and Safety • *Occupational Health and Safety Act 2004*		
Sources	▪ Australian/New Zealand Standards: (at the time of printing) the current relevant standards are: Australian/New Zealand Standard – Cots for household use – Safety Requirements (AS/NZS 2172:2003), and 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.acecqa.gov.au/sites/default/files/2018-02/belonging_being_and_becoming_the_early_years_learning_framework_for_australia.pdf ▪ Australian Competition & Consumer Commission (2016), *Consumer product safety – a guide for businesses & legal practitioners*: https://www.productsafety.gov.au/system/files/Product%20Safety%20-%20a%20guide%20for%20businesses%20and%20legal%20practitioners.pdf ▪ Australian Children's Education & Care Quality Authority, *Safe sleep and rest practices*: https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safe-sleep-and-rest-practices ▪ WorkSafe Victoria, *Children's services – occupational health and safety compliance kit*: https://www.worksafe.vic.gov.au/resources/childrens-services-occupational-health-and-safety-compliance-kit ▪ *Victorian Early Years Learning and Development Framework* (VEYLDF): https://www.education.vic.gov.au/Documents/childhood/providers/edcare/veyldframework.pdf ▪ Red Nose Australia, *Safe Sleep Training* https://rednose.org.au/ ▪ Better Health betterhealth.vic.gov.au ▪ Raising Children raisingchildren.net.au ▪ Early Learning Victoria Sleep and rest policy | earlylearning.vic.gov.au		

Bubup Womindjeka Family and Children's Centre

AUTHORISATION

This policy was adopted by the Bubup Womindjeka Family and Children's Centre Board of Governance on 15th of August 2016.

PURPOSE

This policy will provide clear guidelines for the implementation of safe relaxation and sleep practices that meet the individual needs of children attending Bubup Womindjeka Family and Children's Centre.

PRINCIPLES

Bubup Womindjeka Family and Children's Centre 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 (refer to *Definitions*) to all children at Bubup Womindjeka Family and Children's Centre, and ensuring that adequate supervision (refer to *Definitions*) is maintained while children are sleeping, resting or relaxing
- complying with all legislative requirements, standards and current best practice and guidelines, including recommendations by Red Nose (refer to *Sources*).
- understanding that even if a child sleeps well at night, they still may need a daytime nap or two until at least around the age of 2 ½ - 3 years (betterhealth.vic.gov.au)
- understanding signs of fatigue in toddlers including clumsy physical movements, tasks take longer to perform, irritated behaviour including crying, emotional tension (betterhealth.vic.gov.au)
- understanding children aged 3-5 years need 10-13 hours of sleep at night. Some might also have a day nap of about an hour (raisingchildren.net.au)
- understanding sleep is important for pre-schooler's health, growth and development and when children get enough good-quality sleep, they're more settled and happy during the day (raisingchildren.net.au)
- providing for each child's wellbeing and comfort, including appropriate opportunities to meet each child's need for sleep, rest and relaxation

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Persons in day-to-day Charge, educators, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Bubup Womindjeka Family and Children's Centre.

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

Adequate supervision: (In relation to this policy) entails all children (individuals and groups) in all areas of the service, being in sight and/or hearing 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, 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
- 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 (refer to *Sources)*

Relaxation/rest: A period of inactivity, solitude, calmness or tranquillity.

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

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
- provide a range of active and restful experiences throughout the day, and support children to make appropriate decisions regarding participation.

Employers have a responsibility under the *Occupational Health and Safety Act* to provide a safe and healthy working environment. This duty extends to others present in the workplace, including children and volunteers. 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 (refer to *Sources*).

Safe sleep practices

<u>Babies and toddlers</u>

- Babies should be placed on their back to sleep when first being settled. Once a baby has been observed to repeatedly roll from back to front and back again on their own, they can be left to find their own preferred sleep or rest position (this is usually around 5–6 months of age). Babies aged younger than 5–6 months, and who have not been observed to repeatedly roll from back to front and back again on their own, should be re-positioned onto their back when they roll onto their front or side.
- If a medical condition exists that prevents a baby from being placed on their back, the alternative practice should be confirmed in writing with the service, by the child's medical practitioner.
- Babies over four months of age can generally turn over in a cot. When a baby is placed to sleep, educators should check that any bedding is tucked in secure and is not loose. Babies of this age may be placed in a safe baby sleeping bag (i.e. with fitted neck and arm holes, but no hood).At no time should a baby's face or head be covered (i.e. with linen). To prevent a baby from wriggling down under bed linen, they should be positioned with their feet at the bottom of the cot.
- If a baby is wrapped when sleeping, consider the baby's stage of development. Leave their arms free once the startle reflex disappears at around three months of age, and discontinue the use of a wrap when the baby can roll from back to tummy to back again (usually four to six months of age). Use only lightweight wraps such as cotton or muslin.
- If being used, a dummy should be offered for all sleep periods for children under one.
- For older children, the use of dummies should be informed by parental choices.
- Babies or young children should not be moved out of a cot into a bed too early; they should also not be kept in a cot for too long. When a young child is observed attempting to climb out of a cot, and looking like they might succeed, it is time to move them out of a cot. This usually occurs when a toddler is between 2 and 3 ½ years of age, but could be as early as 18 months.

Children of all ages

- Children should sleep and rest with their face uncovered.
- A quiet place should be designated for rest and sleep, away from interactive groups. If designated for rest, the space should allow for a calm play experience.
- Children's sleep and rest environments should be free from cigarette or tobacco smoke.
- Sleep and rest environments and equipment should be safe and free from hazards.
- Supervision planning and the placement of educators across a service should ensure educators are able to adequately supervise sleeping and resting children.
- Educators should closely monitor sleeping and resting children and the sleep and rest environments. This involves checking/inspecting sleeping children at regular intervals, and ensuring they are always within sight and hearing distance of sleeping and resting children so that they can assess a child's breathing and the colour of their skin.

Safe environments and equipment

Cots

- The following information is referenced from: www.sidsandkids.org.au, www.saiglobal.com, Australian/New Zealand Standards – Cots for day nursery, hospital and institutional use – Safety Requirements (AS/NZS2130:1998).
- All cots sold in Australia must meet the Australian Standards for Cots and be labelled AS 2172. Cots that are not labelled with the Australian Standards will not be used by the service.
- Educators will ensure that all cots are placed in area that is a safe distance from heaters, electrical appliances and hanging cords or strings.
- Educators will not place an extra mattress or padding under or over the manufacturer's cot mattress.
- Educators will look for the following hazard signs: no loose or broken parts; missing or loose knobs, screws or sharp catches; peeling, cracking paint or splintered wood; and any design flaw that reduces the safety of the cot. For example, missing or broken safety latches to sides.
- Staff will report any hazards as detailed in the service's Building and Equipment Maintenance Policy

Safe bedding

- Light bedding is the preferred option; it should be tucked in to the mattress to prevent the child from pulling bed linen over their head.
- Remove pillows, doonas, loose bedding or fabric, lambs wool, bumpers and soft toys from cots.

Safe placement

- Ensure a safety check of sleep and rest environments is undertaken on a regular basis.
- If hazards are identified, lodge a report as instructed in the service's policies and procedures for the maintenance of a child safe environment.
- Ensure hanging cords or strings from blinds, curtains, mobiles or electrical devices are away from cots and mattresses.
- Keep heaters and electrical appliances away from cots.
- Do not use electric blankets, hot water bottles and wheat bags in cots.
- Do not place anything (e.g. amber teething necklaces) around the neck of a sleeping child. The use of teething bracelets (e.g. amber teething bracelets) is also not recommended while a child sleeps.

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, 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).
- Ensure that sleep and rest practices consider the needs, rights, preferences and autonomy of each child
- It is important that opportunities for rest and relaxation, as well as sleep, are provided.
- Consider that there are a range of strategies that can be used to meet children's individual sleep and rest needs.
- Look for and respond to children's cues for sleep (e.g. yawning, rubbing eyes, disengagement from activities, crying, decreased ability to regulate behaviour and seeking comfort from adults).
- Avoid using settling and rest practices as a behaviour guidance strategy because children can begin to relate the sleep and rest environment, which should be calm and secure, as a disciplinary setting.
- Minimise any distress or discomfort.
- Acknowledge children's emotions, feelings and fears.
- Understand that younger children (especially those aged 0–3 years) settle confidently when they have formed bonds with familiar carers.
- 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.

ROLE RESPONSIBILTIES

The Approved Provider (Board of Governance) are responsible for:

The Bubup Womindjeka Family and Children's Centre Board is the Approved Provider and has ultimate responsibility for the management and control of the service.

The Board delegates operational responsibility and day to day management of the service to the Nominated Supervisor and monitors the performance of the organisation, including responsibilities contained in this policy, through regular reporting and by ensuring appropriate resources are available to carry out the organisation's functions.

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

- taking reasonable steps to ensure the sleep/rest needs of children at the service are met, with regard to the age of children, developmental stages and individual needs (Regulation 81(1))
- regularly reviewing practices to ensure compliance with the recommendations of Red Nose in relation to safe sleeping practices for children (refer to *Sources*)
- 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)
- educating families about evidence-based safe sleeping practices
- assessing whether there are exceptional circumstances for alternative practices where family beliefs conflict with current recommended evidence-based guidelines for safe sleeping practices, seek written support from a professional and develop a risk management plan
- removing any hazards identified in the child's resting or sleeping environment and informing the Approved Provider, as soon as is practicable
- 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 OHS issues when purchasing new equipment for the service
- ensuring that rooms used for sleep and relaxation are well ventilated

- ensuring the educational program provides opportunities for each child to sleep, rest or engage in appropriate quiet play activities, as required
- ensuring all staff and educators comply with the recommendations of Red Nose in relation to safe sleeping practices for children (refer to *Sources*)
- ensuring all staff and educators comply with WorkSafe Victoria's *Children's services – occupational health and safety compliance kit* (refer to *Sources*) 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
- storing items such as bedding in a hygienic manner to prevent cross-contamination (refer to *Hygiene Policy*).
- Ensure each room has a documented Relaxation, Sleep and Rest Risk Minimisation Plan that is tailored to the individual needs of children and the room environment.

Educators and other 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 *Sources*)
- 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
  - the physical environment, including room temperature, lighting, airflow and noise levels
- educating families about evidence-based safe sleeping practices
- 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 (refer to *Interactions with Children Policy*)
- providing a range of opportunities for relaxation throughout the day
- complying with WorkSafe Victoria's *Children's services – occupational health and safety compliance kit* (refer to *Sources*), including in relation to lifting children into and out of cots
- providing input in relation to OHS 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 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 (refer to *Definitions*) of all children, including during sleep, rest and relaxation
- supervising children displaying symptoms of illness closely, especially when resting or sleeping (refer to *Incident, Injury, Trauma and Illness Policy*)
- ensuring that artificial heating, such as heat bags and hot-water bottles, is not used to provide warmth
- 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-workers 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
- encouraging children's independence, and assisting children with dressing as needed.
- Regularly adhere to, monitor, and review the room's Relaxation, Sleep and Rest Risk Minimisation Plan to ensure safe sleep and rest practices are consistently implemented and responsive to the individual needs of each child.

Parents/guardians are responsible for:

- discussing their child's relaxation and sleep requirements and practices prior to commencing at the service, and when these requirements change
- providing information on the child's enrolment 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/child is not to be placed on their back during sleep. Parents/guardians must communicate alternative resting practices to staff.

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

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Nominated Supervisor 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
- 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.

Relevant Forms/Documents
Enrolment Form

Version History			
Date	**Version**	**Author/s**	**Details**
July 2014	1.00	Public officer	New policy
April 2016	2.00	Chief Executive Officer	Revision for updated format, document ID, related policies and relevant legislation and standards. Addition of definitions and evaluation.
January 2020	3.00	Director of Education	Policy reviewed and updated.
January 2021	3.00	Director of Education	Policy reviewed and minor editorial amendments made.
January 2022	3.00	Director of Education	Policy reviewed and minor editorial amendments made.
February 2023	3.00	Director of Education	Policy reviewed and changes made to include best practice guidance from betterhealth.org and raisingchildren.net
February 2024	3.00	Director of Education	Policy reviewed and no changes made.
February 2025	3.00	Director of Education	Policy reviewed and no changes made.
July 2026	3.00	Director of Education	Policy reviewed, a point added under individual child needs reflecting source from Early Learning Victoria. Links updated

September 2026	3.00	Director of Education	Policy reviewed. Responsibilities for the **Nominated Supervisor** and **Educators and Other Staff** have been added to clarify expectations regarding the implementation, monitoring, and regular review of the Relaxation, Sleep and Rest Risk Minimisation Plan.