

SLEEP AND REST

QUALITY AREA 2 | EEYS VERSION 3.1

Emerge Early Years Services (EEYS) are committed to the safety and wellbeing of all children, and this will be the primary focus of our education, care and decision-making. Our commitment will be enacted through the implementation and monitoring of the Child Safe Standards.

EEYS have zero tolerance to child abuse.

EEYS are committed to providing a child safe environment where children feel safe, secure and empowered and their voices are heard about decisions that affect their lives. Particular attention will be paid to the Cultural safety of Aboriginal Children and children from culturally and/or linguistically diverse backgrounds, as well as the safety of children with a disability.



PURPOSE

This policy will provide clear guidelines to ensure the safety, health and wellbeing of children attending EEYS and appropriate opportunities are provided to meet each child's need for sleep, rest and relaxation.



POLICY STATEMENT

VALUES

EEYS is committed to:

- complying with all legislative requirements, standards and current best practice and guidelines, including recommendations by Red Nose Australia (*refer to Sources*)
- its duty of care (*refer to Definitions*) to all children at EEYS, and ensuring that adequate supervision (*refer to Definitions*) is maintained while children are sleeping, resting or relaxing
- 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
- providing a positive and nurturing environment for all children attending the service
- allowing children to be actively involved in decision making, to provide an environment that encourages them to reach their potential
- providing a safe environment where children feel comfortable and safe to play, talk, or relax
- children's safety and wellbeing will be fostered through responsive relationships, engaging experiences and a safe and healthy environment.

SCOPE

This policy applies to the approved provider, persons with management or control, nominated supervisor, persons in day-to-day charge, early childhood teachers, educators, staff, students, volunteers, parents/guardians, children, and others attending the programs and activities of EEYS.

RESPONSIBILITIES	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
R indicates legislation requirement, and should not be deleted					
Ensuring 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)	R				
Taking reasonable steps to ensure the sleep and rest needs of children at EEYS are met, with regard to the age of children, developmental stages and individual needs (Regulation 84A)	R	R	✓		✓
Conducting a sleep and rest risk assessment at least once every 12 months, and as soon as practicable after becoming aware of any circumstance that may affect the safety, health or wellbeing of children during sleep and rest (Regulation 84C (a)(b))	R	R	✓		
Ensuring the risk assessment considers the following: - the number, ages, and developmental stages of the children - the sleep and rest needs of children (including health care needs, cultural preferences, individual needs and requests from families about a child's sleep and rest) - the suitability of staffing arrangements to adequately supervise and monitor children during sleep and rest periods - the level of knowledge and training of staff supervising children during sleep and rest periods - the location of sleep and rest areas, including the arrangement of cots and beds within the sleep and rest areas - the safety and suitability of any cots, beds and bedding equipment, having regard to the ages and developmental stages of the children who will use the cots, bed and bedding equipment - any potential hazards - in sleep and rest areas - on a child during sleep and rest periods - the physical safety and suitability of sleep and rest environments (including temperature,	R	✓	✓		✓

lighting and ventilation) (<i>Regulations 84C</i>) (<i>refer to Sources</i>)					
Ensuring all risk assessments conducted are recorded and stored (<i>Regulation 84C (4)</i>)	R	✓	✓		✓
Undertaking a risk assessment to mitigate hazardous manual handling (<i>refer to Definitions</i>), such as patting and rocking children to sleep for long periods of time	R	✓	✓		✓
Ensuring all educators, staff and volunteers comply with the recommendations of Red Nose Australia in relation to safe sleeping practices for children (<i>refer to Sources</i>)	R	✓	✓		✓
Ensuring educators 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	R	✓			
Ensuring the premise, furniture and equipment are safe, clean and in good repair (<i>Regulation 103 and National Law: Section 167</i>) including ensuring all equipment used meets any relevant Australian Standards and other product safety standards, such as Australian Competition and Consumer Commission (ACCC) guidelines (<i>Refer to Sources</i>).	R	R	✓	✓	✓
Ensuring the 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	R	R	✓		✓
Ensuring that rooms used for sleep and relaxation are well ventilated; have adequate natural light; and are maintained at a temperature that ensures the safety and wellbeing of children (<i>Regulation 110</i>)	R	✓	✓		✓
Ensuring sleep and rest environments are free from cigarette, e-cigarette, or tobacco smoke (<i>Regulation 82</i>)	R	✓	✓		✓
Ensuring that the premises are designed to facilitate supervision	R	R			
Ensuring adequate supervision of children sleeping and resting, being within sight and hearing distance and are monitoring through visually checks of: • sleeping position • skin and lip colour • breathing • body temperature • head position • airway • head and face, ensuring they remain uncovered	R	R	✓		✓
Ensuring supervision and monitoring procedures are documented, including method and frequency of checking the safety, health and wellbeing of children	R	R	✓		✓

during sleep and rest periods, as per the risk assessment					
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 lighting, airflow and noise levels	R	✓	✓		✓
Ensuring cots (including evacuations cots) provided at the service comply with the most current Australian/New Zealand Standards (<i>refer to Sources and Attachment 1</i>)	R	✓			
Ensuring that all sleeping products meet the Australian mandatory safety standards (<i>refer to Sources</i>)	R	R	✓		✓
Ensuring that bassinets, hammocks, prams and strollers are not used to settle children to sleep	R	R	✓		✓
Conducting regular safety checks of equipment used for sleeping/resting, such as cots and mattresses (<i>Regulation 103 and National Law: Section 167</i>)	R	R	✓		✓
Ensuring that bassinets are not on the education and care service premises at any time (<i>Regulation 84D</i>)	R	R	✓		✓
Ensuring that if a child is brought to the service in a pram or bassinet, the child is transferred into the service's own sleep equipment	R	R	✓		✓
Removing any hazards identified in the child's resting or sleeping environment and informing the approved provider, as soon as is practicable	R	R	✓		✓
Ensuring that any hanging cords, mobiles, curtains and blinds are inaccessible to children who are resting or sleeping	R	R	✓		✓
Ensuring that artificial heating, such as heat bags and hot-water bottles, is not used to provide warmth		✓	✓		✓
Ensuring children's clothing is appropriate during sleep times and does not have any items that are loose, could get tangled and restrict breathing (including but not limited to bibs and jewellery)		✓	✓	✓	✓
Ensuring that each child has their own bed linen, and that the <i>Hygiene Policy</i> and procedures are implemented for the cleaning and storage of cots, mattresses and linen		✓	✓		✓

Ensuring that there is adequate space to store bedding in a hygienic manner (<i>refer to Hygiene Policy</i>)	R	✓	✓		✓
Ensuring compliance with WorkSafe Victoria's Children's services – occupational health and safety compliance kit (<i>refer to Sources</i>), including in relation to staff lifting children into and out of cots	R	✓	✓		✓
Regularly reviewing practices to ensure compliance with the recommendations of Red Nose Australia in relation to safe sleeping practices for children (<i>refer to Sources</i>)	R	✓	✓	✓	✓
Providing information and training to ensure staff are kept informed of changing practices in relation to safe sleep practices for children	✓	✓			
Providing information to families about the service's relaxation and sleep practices	✓	✓	✓		✓
Ensuring parents/guardians are consulted about appropriate relaxation and sleep practices for their child	✓	✓	✓	✓	✓
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 medical practitioner and develop a risk management plan	R	✓	✓	✓	✓
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	R	✓	✓	✓	
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.				✓	
Ensuring the educational program provides opportunities for each child to sleep, rest or engage in appropriate quiet play activities, as required	R	✓	✓		✓
Ensuring that resting and sleeping practices are not used as a behaviour guidance strategy (<i>refer to Interactions with Children Policy</i>)		✓	✓		✓
Providing a range of opportunities for relaxation throughout the day		✓	✓		✓
Supervising children displaying symptoms of illness closely, especially when resting or sleeping		✓	✓		✓
Documenting and communicating children's rest and sleep times to co-workers during shift changes		✓	✓		✓

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.		✓	✓		✓

BACKGROUND AND LEGISLATION



BACKGROUND

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.

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.

Holistic approaches recognise the importance of physical, mental and spiritual wellbeing. Educators who provide a range of active and restful experiences throughout the day support children's individual requirements for health, nutrition, sleep, rest and relaxation.

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 sleeping 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*).

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

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: www.legislation.vic.gov.au
- Commonwealth Legislation – Federal Register of Legislation: www.legislation.gov.au

DEFINITIONS



The terms defined in this section relate specifically to this policy. For regularly used terms e.g. Approved provider, Nominated supervisor, Notifiable complaints, Serious incidents, Duty of care, etc. refer to the Definitions file of the PolicyWorks catalogue.

Hazardous Manual Handling: Manual handling is work where you have to lift, lower, push, pull, carry, move, hold or restrain something. It's hazardous manual handling if it involves:

- repeated, sustained or high force
- sustained awkward posture
- repetitive movements
- exposure to sustained vibration
- handling people or animals
- loads that are unstable, unbalanced or hard to hold.

Red Nose Australia (formerly SIDS and Kids): Recognised national authority on safe sleeping practices for infants and children (*refer to Sources*)

Relaxation: Relaxation or other activity for bringing about a feeling of calm in your body and mind

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 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.

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 is not immediately obvious.

SOURCES AND RELATED POLICIES



SOURCES

- Australian Children's Education & Care Quality Authority, Safe sleep and rest practices: www.acecqa.gov.au/resources
- Australian Competition & Consumer Commission (2016), Consumer product safety – a Guide for businesses & legal practitioners: www.accc.gov.au
- Belonging, Being & Becoming – The Early Years Learning Framework for Australia (EYLF): www.acecqa.gov.au
- Current Australian/New Zealand Standards for cots is available on the SAI Global website at: www.saiglobal.com
- Red Nose Australia: www.rednose.org.au

- Victorian Early Years Learning and Development Framework (VEYLDF): www.acecqa.gov.au
- WorkSafe Victoria, Children's services – occupational health and safety compliance kit: www.worksafe.vic.gov.au
- Australian Children's Education & Care Quality Authority, Sleep and rest risk assessment Template - [Sleep Rest Risk Assessment Template](#)
- Australian Children's Education & Care Quality Authority, Risk Assessment and Management Tool - www.acecqa.gov.au/media/32166
- Kids Safe Australia - www.kidsafe.com.au
- Compliance code: Hazardous manual handling - <https://www.worksafe.vic.gov.au/resources/compliance-code-hazardous-manual-handling>
- Hazardous manual handling risk assessment and control tool – www.worksafe.vic.gov.au

RELATED POLICIES

- Administration of First Aid
- Child Safe Environment and Wellbeing
- Emergency and Evacuation
- Enrolment and Orientation
- Hygiene
- Incident, Injury, Trauma and Illness
- Interactions with Children
- Occupational Health and Safety
- Staffing
- Supervision of Children

EVALUATION



In order to assess whether the values and purposes of the policy have been achieved, the approved provider 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
- notifying all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk (Regulation 172 (2)).



ATTACHMENTS

- Attachment 1: Cots
- Attachment 2: Procedure for a safe sleep and rest environment (0-12months)
- Attachment 3: Procedure for a safe sleep and rest environment (12 months onwards)
- Attachment 4: Procedures for a safe sleep and rest environment (3- and 4-year-old kindergarten/ pre Kindergarten programs)
- Attachment 5: Safe sleep graphics
- Attachment 6: safe sleep & rest (0–12 months)- staff quick guide

VERSION	DATES	DOCUMENT WRITER	REVISION DESCRIPTION	APPROVED BY
Relaxation And Sleep Policy/Procedure	October 2019	Policy Team	Minor changes	Pauline Butler
Relaxation And Sleep Policy/Procedure V2	V2 October 2023	Policy Team	Legislation changes New format	Pauline Butler
V3	Dec 2025	Policy officer	Elaa changes from 24/10/23	EN
V3.1	April 2026 21/7/26 Finalised 12/10/26	Policy officer	ELAA updates - updates to Australian mandatory safety standards changes 26/02/26 Updated our procedure and created Drop In sessions	EN

AUTHORISATION



This policy was adopted by the approved provider of EEYS on 12/10/2026

NEXT REVIEW DATE: October 2028

ATTACHMENT 1. COTS

There is currently (at the time of printing) one standards that apply to the use of cots:

- Australian/New Zealand Standard – AS/NZS 2172

Services can check current standards on the SAI Global website at: www.saiglobal.com

Household cots usually have a lower base and mattress, and WorkSafe Victoria have expressed concern for staff in relation to the manual handling risks posed when working with cots at a lower height.

Employers should make sure workplaces use cots which minimise the distance employees need to bend and reach.

- Cots should be of a height that will enable employees to lift and lower children into and out of the cots with minimal forward bending of the employee's back.
- If cots have two base positions, set the base to the higher position for infants unable to stand. The higher base position will reduce the need for employees to reach into cots.
- Cots should have sides that drop to reduce the need for employees to bend and reach over the cot side to lift and lower children. At its dropped level, the top of the cot's lowered side should be at least 250mm above the top of the mattress to ensure children cannot roll out of the cot.
- Ensure there is enough clearance under cots for employees to stand with their feet under the edge of the cot to minimise reaching distance.
- Prepare cots in advance so sides are down before employees lift children in or out.
- If cots have wheels, ensure the wheels have locks and keep wheels in the locked position when the cot is not being moved.
- Regularly check and maintain cot wheels, wheel locks and drop-down sides to ensure cots are safe and secure.
- Assess floor surfaces to ensure minimal friction and resistance when wheeling cots. Change floor surfaces so employees can easily move cots.
- Ensure cots meet all relevant structural safety requirements.

No alterations should be made to purchased cots under any circumstances, as this may have serious consequences in relation to liability if an incident occurs.

ELAA does not recommend that services use portable or folding cots, as they present an increased risk of injury or death to a child if erected incorrectly. Portable cots also pose an increased risk of manual handling injuries to staff. If a service requires an extra cot to be available for occasional use, it is possible to purchase a cot that meets the Australian/New Zealand Standard – Cots for household use, and folds flat for easy storage.

Further information on portable or folding cots is available as outlined below:

- Red Nose: <https://rednose.org.au/article/portable-cots>
- Australian Competition and Consumer Commission: www.productsafety.gov.au

Note: Bassinets must not be on the education and care service premises (including centre based care and family day care) at any time that children are being educated and cared for by the service.

ATTACHMENT 2: PROCEDURES FOR A SAFE SLEEP ENVIRONMENT – CHILDREN AGED 0 – 12 MONTHS

Educators must follow this procedure alongside the specific **Sleep and Rest Risk Assessment and Management Plan**.

Supporting Children's Sleep

- Educators will consider **family requests, the child's age and stage of development, and the child's sleep cues** when supporting children to settle for sleep.
- Children who are sleeping or resting must **always be adequately supervised** to ensure their safety and wellbeing.

Educators must be able to **visually monitor**:

- the child's sleeping position
- breathing
- colour of lips and skin
- body temperature
- head position and airway
- that the child's head and face remain uncovered

This is in accordance with **National Law 165**.

EEYS recognises that **continuous supervision** (an educator within sight and hearing of sleeping children at all times) represents **best practice** and will be implemented wherever possible. In situations where continuous supervision is not achievable due to operational circumstances, services must implement additional strategies to **minimise risk and ensure children remain adequately supervised**.

Regardless of supervision arrangements, **safe sleep practices and regular physical checks must always occur**.

Sleep Checks and Documentation

- **Sleep and rest checks must occur every 10 minutes** for children who are sleeping or resting.
- All checks must be recorded on the **"Safe Sleep and Rest – Physical Checks and Time Record"** sheet.
- Sleep and rest times must be **documented daily and communicated to families**.

Safe Sleep Practices

Dummies: Children who have a dummy can use their dummy for sleep and rest periods. If the dummy falls out during sleep it does not need to be returned to the mouth unless the child wakes.

Sleeping Position

- Babies **must always be placed on their back to sleep**.
- Educators must ensure the **baby's head and face remain uncovered**.
- If a baby rolls during sleep, educators must **reposition the baby onto their back**.

When a baby becomes a **competent roller** (regularly rolling from back to front and front to back for several weeks), they will still be placed **on their back initially**, but may be **allowed to find their own sleeping position**.

Swaddling and Sleeping Bags

- Babies may be placed in a **safe infant sleeping bag** or **swaddled using a lightweight wrap** (e.g. cotton or muslin).
- Sleeping bags must:
 - be designed specifically for infants
 - have fitted neck and armholes
 - not contain a hood
- Swaddling must follow **safe wrapping practices**.

Arms removed from sleeping bag and swaddling must stop when:

- the baby shows **signs of rolling**, or
- when the baby's **startle reflex disappears** (usually around 3 months).

Babies may begin rolling **from around 4 months of age**.

If a blanket is used instead of a sleeping bag:

- place the baby **with feet at the end of the cot**
- tuck the blanket **securely under the mattress**
- ensure the blanket **only reaches the baby's chest**

This prevents the blanket from covering the baby's face.

Bedding

- **Soft bedding must not be used** in the sleep environment.

This includes:

- pillows
- doonas
- loose blankets
- bumpers
- lambswool
- soft toys
- loose fabric

Infant Comforters and Soft Toys

To support safe sleep practices for infants while recognising that some families may choose to provide a comforter to assist their child to settle to sleep.

Safe Sleep Recommendation

Red Nose Australia highly recommends that babies under 12 months of age sleep in a cot or sleep space that is free from soft toys, comforters and other soft items. This recommendation is based on the risk of suffocation and Sudden Unexpected Death in Infancy (SUDI).

EEYS will follow this recommendation wherever possible.

Where a family requests that their infant under 12 months has a comforter to assist them to settle to sleep, educators will follow the procedure below.

Procedure

1. Before sleep

The educator must:

- Discuss the use of the comforter with the family and ensure the service is aware of the family's request.
- Check that the comforter is suitable for use and does not present an obvious safety risk.
- Ensure the comforter:
 - meets relevant Australian Safety Standards;
 - is small in size;
 - is not pillow-like; and
 - does not have long or loose fabric attachments, such as long ears, legs, ribbons or blankets.
- Do not place the comforter in the cot if it presents a risk of suffocation, strangulation, choking or airway obstruction.

2. While the infant is settling

If the comforter is provided to assist the infant to settle:

- The infant must be closely and actively supervised by an educator.
- The educator must monitor how the infant interacts with the comforter while in the cot.
- The comforter must not be allowed to remain in the cot unattended once the infant has fallen asleep.

3. Once the infant falls asleep

As soon as the infant has fallen asleep, the educator must:

- Remove the comforter from the cot.
- Place the comforter in a safe location where it cannot fall back into the cot or create a hazard.
- Continue to follow the service's normal safe sleep and supervision requirements.

4. Immediate removal of the comforter

The educator must remove the comforter from the sleep space **immediately** if the infant:

- covers their face or head with the comforter;
- is unable to move the comforter away from their face or head;
- rests their head on the comforter like a pillow, resulting in a chin-to-chest position that may restrict airflow;
- uses the comforter to pull themselves up in the cot, increasing the risk of falling; or
- places the comforter in their mouth in a way that creates a choking or airway obstruction risk.

If any of these behaviours occur, the comforter must be removed immediately from the infant's sleep space.

5. Ongoing monitoring

Educators must consider the infant's individual development and behaviour when determining whether a comforter remains appropriate.

The use of a comforter must be reviewed if the infant's behaviour, mobility or ability to interact with the item changes.

If an educator considers that the comforter presents an unacceptable risk, the educator must remove it from the sleep space and discuss the concern with the nominated supervisor/educational leader and the family.

6. Family communication

Families will be informed that:

- Red Nose recommends that babies under 12 months sleep in an environment free from soft items.
- The service will prioritise the infant's safety and may remove a comforter at any time if it presents a safety risk.
- The use of a comforter does not replace the service's safe sleep, supervision or risk-management requirements.

7. Further guidance

Educators should refer to current guidance from Red Nose and the Australian Competition and Consumer Commission (ACCC), including the **Keep Baby Safe** resources and Product Safety Australia, when assessing infant products and sleep-related risks.

Cots and Sleeping Equipment

- Babies must sleep in a **cot** until they begin attempting to climb out.
- This typically occurs **between 2 and 3½ years**, but may occur as early as **12 -18 months**.
- When climbing begins, the child must be **moved to a floor mattress or toddler bed**.
- Some children may transition earlier depending room layout, staffing levels and supervision capacity

Educators must ensure:

- the **cot side is fully raised and secure**
- the cot is **away from cords** (blinds, curtains)
- the cot is **away from electrical appliances**

Never use:

- electric blankets
- hot water bottles
- wheat bags

Sleep Environment Safety

- Ensure **nothing covers the child's face**.
 - Keep the **sleep area free from soft toys, beanbags, plastic bags, or similar hazards**.
 - Mattresses must be **firm**.
 - Floor mattresses must be **positioned away from walls** to prevent entrapment.
 - Beds must be placed **away from high-traffic areas**.
-

Temperature and Clothing

There is **no recommended room temperature**, however children must be **dressed appropriately for the environment**.

To check comfort:

- feel the baby's **tummy**, which should feel warm
- cool hands and feet are **normal**

If a baby shows signs of **heat stress** (flushed or clammy skin):

- remove excess clothing or bedding
- offer fluids (breast milk or formula)

Babies around **6 months and older** may be offered **small amounts of cooled boiled water**, but this should not replace breast milk or formula feeds.

Additional Safety Considerations

- If using a pillow to support an **awake infant** (during feeding or tummy time), the infant must **never be left unsupervised**.
 - Bedding and sleep items must be **laundered and cleaned according to service cleaning procedures**.
-

Dedicated Sleep Rooms

Where services have a **designated sleep room**:

- the **door and blinds must remain open** while in use.

This ensures **adequate supervision and access for sleep checks**.

ATTACHMENT 3: PROCEDURE FOR A SAFE SLEEP AND REST ENVIRONMENT- CHILDREN AGED 12 MONTHS AND OVER

Educators must consider **family routines, developmental needs, and children's cues** when supporting sleep and rest.

Educators must follow this procedure alongside the specific **Sleep and Rest Risk Assessment and Management Plan**.

Children who are sleeping or resting must **always be adequately supervised** in accordance with **National Law 165**.

Educators must be able to visually monitor:

- breathing
- sleeping position
- skin colour
- airway
- body temperature
- head and face (must remain uncovered)

Continuous supervision represents **best practice** and will be implemented wherever possible. Where this cannot occur due to operational circumstances, **risk mitigation strategies must be in place**.

Safe Sleep Practices

Sleep Checks

- **Sleep and rest checks must occur every 10 minutes.**
- Checks must be recorded on the **Safe Sleep and Rest – Physical Checks and Time Record**.
- Sleep and rest times must be **communicated daily with families**.

Dummies: Children who have a dummy can use their dummy for sleep and rest periods. If the dummy falls out during sleep it does not need to be returned to the mouth unless the child wakes.

Sleeping Arrangements

Children may sleep in either:

- a **cot**, or
- a **toddler bed / floor mattress**

Children will remain in a cot **until they begin attempting to climb out**. This may occur **between 12 months and 3½ years**.

Educators will **consult with families** regarding the child's sleep arrangements.

If a child wears a **sleeping bag while sleeping on a mattress**:

- it must be **put on immediately before sleep**
- removed **as soon as the child wakes**

This reduces the risk of **falls while walking**.

Safe Sleep Environment

Educators must ensure:

- mattresses are **firm and meet Australian Standards**
- mattresses are **positioned away from walls**
- sleep areas are **away from high traffic areas**
- the surrounding area is **free from soft toys, plastic bags, beanbags, or hazards**

Children must **only sleep on approved sleep mattresses or beds**.

The following must **not be used for sleep**:

- bean bags
- sofas
- large cushions
- air mattresses

Weighted blankets **must not be used**.

Pillows are **not permitted for children under 2 years of age**.

Bedding

Soft bedding must not be used for children **under 12 months of age** including:

- pillows
- doonas
- loose bedding
- lambswool
- cot bumpers
- soft toys

Children over the age of 12 months may sleep with a comforter however staff will follow guidance from Red Nose

If a comfort item is used, it must:

- meet **Australian Safety Standards**
- be **small in size**
- **not be pillow-like**
- **not include long fabric attachments** (such as long ears, legs, ribbons, or blankets)

Items with long or loose attachments may pose a **risk of suffocation, strangulation, or airway obstruction**.

Guidance regarding safe infant products can be found through the **ACCC “Keep Baby Safe” resources and Product Safety Australia**.

Educators must also **closely monitor how the infant interacts with the item in their sleep environment.**

The comfort item must be **removed immediately** if the child:

- covers their **face or head** with the item
- is **unable to move the item away** from their face or head
- **rests their head on the item like a pillow**, creating a chin-to-chest position which may restrict airflow
- **uses the item to pull themselves up** in the cot, increasing the risk of falling
- **places the item in their mouth**, creating a choking hazard or blocking their airway

If any of these behaviours occur, the comfort item **must be removed from the sleep space immediately.**

If a blanket is used:

- place the child **feet at the end of the bed**
- tuck the blanket **securely under the mattress**
- ensure it **cannot cover the child's head**

Safety Around Sleep Areas

Educators must ensure:

- cot sides are **securely raised**
- sleep areas are **away from cords and blinds**
- beds are **away from electrical appliances**
- stairs and windows are **not accessible**

Electric blankets, hot water bottles and wheat bags **must never be used.**

Temperature and Clothing

Children should be **dressed appropriately for room temperature.**

Check warmth by feeling the **child's torso.**

If a child shows signs of **overheating:**

- remove excess clothing or bedding
- offer fluids such as **breast milk, formula, or water (for older children).**

Rest Periods

Children who do not sleep must still be provided with **opportunities to rest in a calm and safe environment.**

Services will provide **designated rest areas.**

Children who do not wish to rest should be offered **quiet play opportunities**, while ensuring those who are resting **are not disturbed**.

Sleep and rest areas must remain **appropriately supervised**, and **10-minute checks must continue during rest periods**.

ATTACHMENT 4: PROCEDURE FOR A SAFE SLEEP AND REST ENVIRONMENT -3 & 4-YEAR-OLD KINDERGARTEN PROGRAMS/ PRE KINDERGARTEN

Children aged **3–5 years** generally no longer require a daytime sleep. However, some children may still need a **short nap or rest period**, and services must provide opportunities for this throughout the program.

Educators must consider:

- family requests
- children's individual needs
- signs of tiredness

when supporting children to sleep or rest.

Children who are sleeping or resting must always be **adequately supervised** in accordance with **National Law 165**.

Safe Sleep Practices

Sleep Checks

- Sleep and rest checks must occur **every 15 minutes**.
- Checks must be recorded on the **Sleep chart Kindergarten**
- Sleep and rest times must be **communicated to families daily**.

Sleeping Arrangements

Where possible, children who require sleep or rest will be provided with a sleep mat or mattress in a designated rest area. The sleep environment will be arranged away from high-traffic areas where practicable, while ensuring educators can maintain adequate supervision of children at all times.

Mattresses must:

- be **firm**
- meet **Australian safety standards**
- be **positioned away from walls**

Where possible, children who require sleep will be provided with an approved sleep mattress, bed or other suitable sleep surface.

Where the service does not have sufficient approved mattresses available, educators will provide children with an appropriate alternative rest space and sleep surface that is suitable for the child's age, developmental needs and circumstances.

Bean bags and air mattresses **must not be used as a sleep surface**. They may, however, be used in designated rest areas when children are awake and supervised.

Children who are resting on a couch or other elevated surface should be closely monitored. If an educator observes that a child is becoming tired and may fall asleep, the educator should, where practicable, encourage and assist the child to move to a safer, lower sleep surface **before they fall asleep**.

If a child falls asleep in a location that is not considered a safe or appropriate sleep environment, such as a couch, educators must:

- Closely monitor the child while assessing the safety of the sleep environment.
- Where the location presents a safety risk, gently wake the child.
- Assist the child to move to an appropriate and safer sleep or rest space.
- Continue to supervise the child in accordance with the service's sleep and rest procedures.

Educators must use their professional judgement and consider the child's age, developmental abilities, the sleep environment and any identified risks when determining whether a sleep location is safe and appropriate.

Safe Sleep Environment

Educators must ensure:

- sleep areas are **free from hazards**
- bedding does **not cover the child's face**
- the environment is **away from cords and electrical appliances**

Comfort toys may be used but educators must **closely monitor how the child interacts with the item in their sleep environment**.

Weighted blankets **must not be used**.

Pillows **may be used**, as children are over two years of age.

Children aged 3–5 years can **independently find their sleeping position** and do not need to be repositioned during sleep.

Temperature and Comfort

Educators must monitor:

- room temperature
- ventilation
- lighting
- children's clothing

Children should be **dressed appropriately for the environment**.

If signs of **heat stress** occur:

- remove bedding or clothing
 - offer **water**.
-

Rest Periods

Children who do not require sleep must still be provided with **opportunities to rest in a calm environment**.

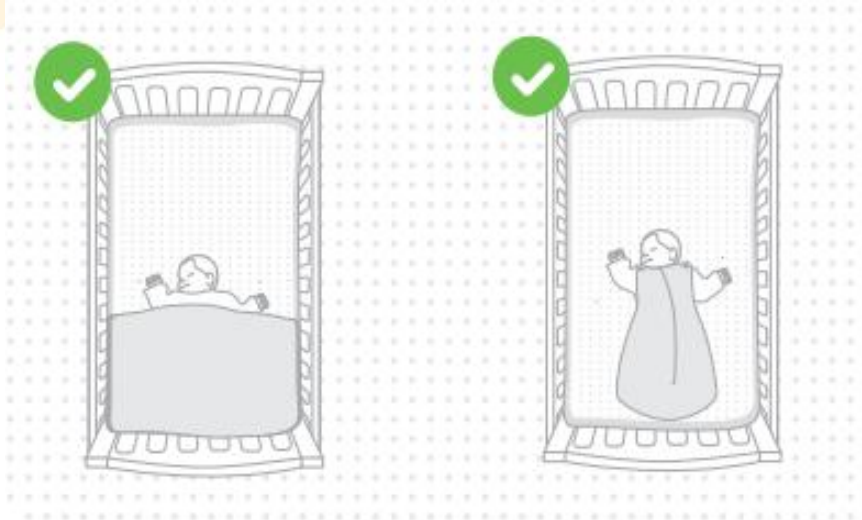
Services will provide **designated rest areas**.

Educators must ensure:

- resting children are **not disturbed**
- children who do not wish to rest have **quiet play opportunities**

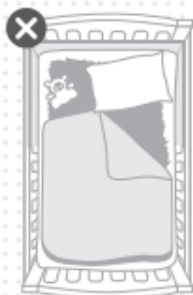
Rest periods must also include **15-minute supervision checks** and documentation.

ATTACHMENT 5: SAFE SLEEP GRAPHICS



✗ No soft surfaces or bulky items

No need for soft items in the cot. Toys, pillows or doonas can be dangerous for bub. They increase risk of suffocation and overheating.



- ✗ Doonas or loose blankets
- ✗ Pillows
- ✗ Cot bumpers
- ✗ Lambs wool
- ✗ Soft toys like a teddy



Safe Sleeping Monitoring Checklist

- ✓ Please make sure you can see and hear me, and check me frequently when I'm sleeping!
- ✓ Is my head and face uncovered?
- ✓ Are my skin and lips a normal colour for me?
- ✓ Is my chest rising and falling?
- ✓ Is my bed clear of soft and loose items?
- ✓ Am I warm but not too hot?

Red Nose acknowledges the Traditional Owners of the lands in which we work, live and visit.

Red Nose Safe Sleep Advice Hub
1300 998 698 (during business hours AEST/AEDT)
rednose.org.au/safesleep

© 2023. The NSW Department of Education has funded the development of these resources under the Sector Development Program. Red Nose has licensed these resources from the NSW Department of Education, unless otherwise identified.

This document is provided for information purposes only and those referring to it should obtain their own independent expert advice. Any copy of this document that has not been downloaded from the Red Nose website is an unauthorised copy and may not be current. Refer to the Red Nose website for the most current copy and the full acknowledgment and disclaimer applicable to the use of this document.

red nose
saving little lives

 rednose.org.au

ATTACHMENT 6: SAFE SLEEP & REST (0–12 MONTHS)- STAFF QUICK GUIDE

CRITICAL SAFETY RULES

- ✓ Back to sleep (always)
- ✓ Head & face uncovered
- ✓ Cot clear
- ✓ 10-min checks + record
- ✓ Adequate supervision
- In line with Red Nose Australia

SUPERVISION

- ✓ Must be able to SEE each child
- ✓ Check breathing
- ✓ Check skin colour
- ✓ Check position & airway
- ✓ Ensure face uncovered
- ✓ Monitor temperature

SUPPORTING SLEEP

- ✓ Follow family routines
- ✓ Respond to cues
- ✓ Consider age & development
- ✓ Settle calmly

SLEEP CHECKS

- ✓ Every 10 minutes
- ✓ Physically check child
- ✓ Record each check
- ✓ Record sleep times daily
- ✓ Share info with families

SAFE SLEEP PRACTICES

- ✓ Always place on back
- ✓ Reposition if rolled
- ✓ Competent roller: allow to settle
- ✓ Use safe sleeping bag
- ✓ Lightweight swaddle only
- ⊘ Stop swaddling at rolling/~3 months

NO SOFT ITEMS (0–12 MONTHS)

- ✗ Pillows
- ✗ Doonas
- ✗ Soft toys/ Comforters
- ✗ Loose blankets
- ✗ Bumpers
- ✓ Cot must be CLEAR of comforters
- See Policy Attachment 2 for procedures for when families wish child to have comforter.

DUMMIES

- ✓ Allowed for sleep
- ✓ Do NOT reinsert if asleep

COTS & EQUIPMENT

- ✓ Cot sides fully up
- ✓ Away from cords/power
- ✓ Use until climbing begins
(approx. 18 months–3.5 years)
- ✗ No electric blankets
- ✗ No hot water bottles

ENVIRONMENT

- ✓ Firm mattress
- ✓ No hazards
- ✓ Away from traffic areas
- ✓ Floor beds away from walls

TEMPERATURE

- ✓ Dress appropriately
- ✓ Check tummy (warm)
- ✓ Hands/feet cool = normal
- ⚠ Overheating: remove layers
- ✓ Offer feeds if needed

ADDITIONAL NOTES

- ✓ Cooled Boiled Water from ~6 months (small amounts)
- ✓ Does not replace milk feeds
- ✓ Never leave on pillows unattended
- ✓ Clean bedding regularly

SLEEP ROOMS

- ✓ Doors & blinds OPEN

⚠ KEY REMINDERS

- ✓ Safe sleep = **Clear cot + Back to sleep + Supervision**
- ✓ Follow service policy & risk assessments
- ✓ When unsure → **choose the safest option**

In line with Australian Children's Education & Care Quality Authority and best practice guidelines.