



# REST AND SAFER SLEEP POLICY

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## BACKGROUND

At Leaping Lilies, we recognise that appropriate rest and sleep are fundamental to children's physical health, emotional wellbeing, development and ability to engage positively in their nursery day.

We aim to provide safe, comfortable and nurturing environments in which children's individual sleep and rest needs are recognised and responded to.

We work closely with parents and carers to understand children's usual routines and preferences and will seek to reflect these where it is safe and appropriate to do so. However, our professional responsibility for children's welfare and safety takes precedence over parental preference. We will not implement a sleep practice requested by a parent or carer where it conflicts with statutory requirements, safer-sleep guidance or our assessment of safe practice.

Children will never be forced to sleep.

Children who are tired will be given appropriate opportunities to rest or sleep. Sleep will not routinely be withheld from a child who demonstrates that they need it.

These principles support child-led, responsive care while ensuring that our practice reflects the Early Years Foundation Stage (EYFS) statutory framework and current safer-sleep guidance.

Our guidelines are as follows:

## OUR GUIDELINES

### SAFER SLEEP PRINCIPLES

All educators caring for sleeping children must understand and follow the nursery's safer-sleep procedures.

Sleep arrangements must take account of:

- the child's age;
- their individual developmental and health needs;
- their normal sleep pattern;
- the sleep environment;
- room temperature;
- appropriate sleep equipment;
- the number and needs of children sleeping;
- appropriate supervision; and
- the availability and deployment of staff across the provision.

The individual needs of children must always remain central to decisions about sleep.

### BABIES AND CHILDREN UNDER TWO

#### SLEEPING POSITION

Babies must always initially be placed on their back to sleep, unless there is a documented medical reason from an appropriate healthcare professional requiring an alternative position.

Where a baby is able to independently roll from their back to their front and back again, they do not need to be continually repositioned during sleep and may be allowed to find their own comfortable sleeping position.

Educators must nevertheless continue to initially place the baby down on their back.

Babies must never be placed to sleep on their front or side simply because this is their routine at home or at the request of a parent or carer.

### SLEEP SPACES AND EQUIPMENT

#### BABIES AGED 12 MONTHS AND UNDER

Babies aged 12 months and under must be provided with an appropriate cot-based sleep space.

This may include an appropriately designed:

- cot;
- carrycot;
- Moses basket; or
- travel cot,

provided that the equipment is appropriate for the child's age, size and development and is used in accordance with the manufacturer's instructions.

Babies aged 12 months and under must not routinely be placed to sleep on floor beds, sleep pods, coracles or other open floor-based sleep arrangements which do not provide an appropriate cot-based sleep space.

Each baby must have their own separate sleep space.

Babies must not share a cot or sleep surface.

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#### MATTRESSES

Mattresses must be:

- firm;
- flat;
- waterproof;
- in good condition;
- appropriately fitted to the sleep equipment; and
- suitable for the child's age and size.

Mattresses and sleep equipment must be regularly checked and immediately removed from use where there is any concern regarding their condition or safety.

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#### CLEAR SLEEP SPACES

Sleep spaces for babies aged 12 months and under must remain clear.

They must not contain:

- pillows;
- cot bumpers;
- sleep positioners;
- wedges;

- straps or restraints;
- soft toys;
- loose toys;
- quilts or duvets;
- loose or excessive bedding; or
- any other unnecessary item which could obstruct the child's face or increase the risk of overheating, entrapment or suffocation.

A baby's head and face must remain uncovered during sleep.

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#### BEDDING AND SLEEP CLOTHING

Clean, lightweight and age-appropriate bedding must be used.

Where a blanket is used for a baby, the baby must be positioned appropriately within the cot, with their feet towards the foot of the cot, and the blanket must be securely tucked in and no higher than the shoulders.

Appropriately fitted baby sleep bags may be used where suitable for the child and environment.

Bedding must be appropriate to the temperature of the room and the child's clothing.

Each child's bedding must be maintained hygienically and stored appropriately to prevent cross-contamination.

Children must not wear hats, outdoor coats or unnecessary additional layers while sleeping indoors.

#### COMFORTERS AND DUMMIES

Any use of a dummy must take account of the child's established routine, age and individual needs.

If a dummy falls from a child's mouth once they are asleep, educators do not need to continually replace it.

For babies aged 12 months and under, soft toys, comforters or other loose objects must not remain within the cot or sleep space while the baby sleeps.

Where a comforter forms an important part of a child's settling routine, it may be used appropriately to support settling but must be removed from the sleep space once the child has settled and before the educator leaves the immediate settling interaction.

## TEMPERATURE AND OVERHEATING

Children must not become excessively hot or cold while sleeping.

For babies aged 12 months and under, the recommended sleep-room temperature is 16°C to 20°C.

Educators must consider:

- room temperature;
- ventilation;
- the child's clothing;
- bedding;
- environmental conditions; and
- the individual child's presentation.

A child's temperature should be assessed by feeling their chest or the back of their neck rather than relying upon their hands or feet.

Where a child feels hot, sweaty or clammy, their clothing, bedding or environment must be adjusted appropriately.

Professional judgement must be exercised during periods of unusually hot or cold weather.  
Sleep areas must have appropriate ventilation and airflow.

## SUPERVISION OF SLEEPING CHILDREN

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### SUPERVISION OF SLEEPING CHILDREN

Sleeping children must always be appropriately supervised.

As an organisational safeguarding standard, Leaping Lilies requires at least one adult to be physically present and directly supervising whenever children are sleeping, regardless of the age of the children.

This standard applies even where the EYFS would permit sight and hearing to be maintained through other appropriate arrangements for children over six months.

The supervising adult must:

- remain physically present within the room or designated sleep area;
- be positioned so that effective supervision of the sleeping children can be maintained;
- remain alert and actively responsible for the sleeping children;
- be able to easily and immediately summon additional assistance;
- hold an appropriate current paediatric first aid qualification; and

- undertake physical sleep checks in accordance with 'physical sleep checks' Section of this policy.

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#### BABIES UNDER SIX MONTHS

The EYFS requires an adult to remain physically present in the same room for the entirety of every sleep for babies under six months of age.

This is a statutory safer-sleep requirement and must always be observed.

A monitoring device does not replace the requirement for an adult to be physically present.

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#### CHILDREN OVER SIX MONTHS

For children over six months, the EYFS permits appropriate monitoring arrangements to support the requirement for sleeping children to remain within sight and hearing of staff.

However, Leaping Lilies adopts a higher organisational standard and requires an adult to remain physically present and directly supervising sleeping children regardless of their age.

Video and audio monitoring equipment may still be used as an additional safeguarding measure, where appropriate, but must not be used within our settings as a replacement for physical adult supervision.

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#### RELATIONSHIP WITH STAFFING RATIOS

The requirement for an adult to physically supervise sleeping children must not be confused with the statutory staff-to-child ratio.

The presence of one adult directly supervising a sleep area does not mean that all educators represented within the applicable whole-provision ratio are required to be physically present in that room.

Statutory ratios continue to apply across the whole provision. Other appropriately eligible staff may therefore be deployed elsewhere within the nursery, provided that they are genuinely available for deployment when required and all requirements set out within Sections of this policy are met.

Staff deployment must be reviewed and adjusted promptly as children wake or their needs change.

### **PHYSICAL SLEEP CHECKS**

Leaping Lilies requires a recorded physical sleep check at least every 10 minutes for every sleeping child.

Ten minutes represents the maximum routine interval between physical checks.

Children must be checked more frequently where their:

- age;
- health;
- individual needs;
- presentation; or
- circumstances

indicate that more frequent monitoring is appropriate.

During a physical sleep check, the educator must observe the child sufficiently closely to establish that they appear safe and well.

The check should include, as appropriate:

- breathing and general appearance;
- sleeping position;
- whether the child's head and face remain uncovered;
- signs of overheating or becoming too cold;
- bedding;
- the immediate sleep environment; and
- any change from the child's normal presentation.

Checks must be accurately recorded on the nursery's designated sleep record.

Where an educator has any concern about a sleeping child's breathing, colour, temperature, responsiveness or general presentation, they must act immediately in accordance with the nursery's emergency procedures.

### **STAFFING, RATIOS AND DEPLOYMENT DURING SLEEP**

Statutory staff-to-child ratios continue to apply while children are sleeping.

EYFS ratios are considered across the whole provision and are not required to be replicated separately within each individual room.

The nursery may therefore deploy staff flexibly across the provision during sleep periods.

The number of staff physically present within a sleep room does not, by itself, determine whether statutory ratios are being met.

There is no separate statutory numerical staff-to-child ratio specifically for sleeping children or for a sleep room, and there is no requirement for the full number of educators represented by the whole-provision ratio to remain physically within a room solely because children in that room are sleeping.

A sleeping area may therefore be directly supervised by one suitably deployed adult where this is safe and appropriate, provided that:

- statutory staff-to-child ratios remain met across the whole provision;
- all applicable safer-sleep supervision requirements within this policy are met;
- the supervising adult is able to supervise the sleeping children effectively;
- the supervising adult holds an appropriate current paediatric first aid qualification;
- sufficient appropriately eligible staff remain present and immediately available for deployment should they be required;
- the supervising adult can easily and immediately summon assistance;
- children's needs elsewhere within the provision are not compromised; and
- staff deployment is reviewed and adjusted promptly as children wake, their needs change or circumstances otherwise require additional support.

The nursery will not impose an artificial room-based staffing ratio during sleep periods where this is not required by the EYFS.

Equally, the whole-provision approach must never be used to justify staffing arrangements which do not provide effective supervision or which cannot respond safely to children's needs.

#### **STAFF WHO ARE AVAILABLE WITHIN THE WHOLE PROVISION**

Subject to the usual EYFS requirements concerning staff suitability, qualifications and eligibility to be included within ratios, staff do not have to be physically positioned within a sleep room in order to form part of the nursery's overall staffing deployment.

This may include appropriately eligible:

- educators deployed elsewhere within the provision who remain available to provide support;
- additional educators who are not otherwise required to maintain the immediate staffing needs of another group of children; and
- members of the nursery management team who are present, available and able to be immediately deployed to work directly with children.

Management staff may therefore form part of the whole-provision staffing arrangements where they meet the relevant requirements and are genuinely available to work directly with children.

They are not required to remain physically within the sleep room solely because they form part of the nursery's overall staffing arrangements.

The determining factor is whether staff are genuinely available to respond and be deployed when required, rather than their job title or the room in which they are physically positioned.

#### **STAFF WHO ARE NOT IMMEDIATELY AVAILABLE**

A member of staff must not be relied upon as immediately available support where they are:

- on an unpaid or uninterrupted break;
- absent from the premises;
- attending a meeting which prevents immediate deployment;
- undertaking an activity or responsibility which they cannot safely leave;
- already required to supervise children elsewhere in circumstances which would prevent their redeployment; or
- otherwise unavailable to work directly with children when required.

Managers must consider the actual availability and deployment of staff, rather than simply the total number of adults physically present within the building.

#### **RESPONDING AS CHILDREN WAKE**

Staffing arrangements during sleep periods must remain dynamic and responsive.

As children wake, their needs and the level of active supervision required will change.

Additional staff must therefore be deployed promptly where required to ensure:

- statutory ratios continue to be met;
- effective supervision is maintained;
- children's care needs can be met appropriately; and
- the safety of children elsewhere within the provision is not compromised.

Managers and educators must maintain awareness of staffing across the whole provision so that assistance can be provided without delay.

### **ONE EDUCATOR SUPERVISING SLEEPING CHILDREN**

The presence of one educator within a room containing sleeping children does not, in itself, mean that statutory staffing or safeguarding requirements are not being met.

Where one educator directly supervises sleeping children, the arrangement must nevertheless be safe and appropriately managed.

The educator must:

- remain connected to and supported by the wider staffed provision;
- be able to summon another member of staff easily and immediately;
- have access to an effective means of communication or assistance;
- hold an appropriate current paediatric first aid qualification;
- remain able to supervise the sleeping children effectively; and
- receive additional support immediately where children's needs or circumstances change.

Managers must ensure that room layout, visibility, communication arrangements and staff deployment support safe practice.

Nothing within this section permits staffing to fall below statutory whole-provision ratios or allows an arrangement which compromises children's safety, supervision or individual needs.

Where a baby under six months is sleeping, the separate requirement for an adult to remain physically present in the same room throughout that baby's sleep must always be observed.

### **CHILDREN ARRIVING ASLEEP**

Leaping Lilies does not accept children into the nursery while they are asleep.

Parents and carers must ensure that their child is awake at the point of handover to nursery staff.

This enables educators to:

- complete an appropriate face-to-face handover;
- observe the child's presentation and wellbeing on arrival;
- receive any relevant information from the parent or carer;
- safely transition the child into the nursery environment; and
- ensure that, where the child subsequently requires sleep, they are settled into an appropriate sleep space in accordance with this policy.

Where a child falls asleep during the journey to nursery, parents or carers should allow the child to wake before completing handover.

If exceptional circumstances arise, the nursery manager must assess the situation and determine the safest course of action. Any decision to accept a sleeping child must ensure that the child is transferred promptly to an appropriate sleep space and that all requirements of this policy are met.

Children must never remain asleep in a car seat, pushchair or other travel equipment as their normal sleep arrangement within the nursery.

#### **CHILDREN WHO ARE UNWELL**

Children who become unwell at nursery will be managed in accordance with the nursery's illness, exclusion and emergency procedures.

Where an unwell child sleeps while awaiting collection or during an appropriate period of care, their condition must be taken into account when determining the frequency and level of supervision required.

Enhanced observation must be provided where appropriate.

Any change in:

- breathing;
- responsiveness;
- colour;
- temperature; or
- general presentation

which causes concern must be responded to immediately.

Where emergency assistance is required, staff must follow the nursery's emergency and paediatric first aid procedures without delay.

#### **TODDLER SLEEP AND REST**

Toddler sleep opportunities will be responsive to children's individual routines, age, development and wellbeing.

Children will be provided with an appropriate safe sleep or rest space.

Children who do not require sleep will be provided with appropriate opportunities for quiet or calming activity without unnecessarily disturbing sleeping children.

No child will be forced to sleep.

Equally, a tired child will not routinely be prevented from sleeping simply to conform to a fixed room routine.

#### **PRESCHOOL SLEEP AND REST**

Preschool children will not ordinarily have a formal group sleep period.

As children develop, most will naturally require less daytime sleep, and the preschool environment will provide opportunities for quiet and restorative activity.

However, sleep and rest remain individual needs.

Where a preschool child demonstrates that they are tired and need to sleep, they will be provided with an appropriate, safe and comfortable sleep or rest space.

A child will not be deliberately prevented from sleeping solely because:

- they have entered the preschool room;
- other children in the room do not sleep; or
- they are approaching school age.

Quiet and comfortable rest opportunities will also be available to children who do not wish to sleep but would benefit from a period of reduced activity.

#### **PARTNERSHIP WITH PARENTS AND CARERS**

Parents and carers will be asked about their child's usual sleep patterns and routines as part of the child's care arrangements.

Educators will seek to reflect familiar routines where these are:

- safe;
- developmentally appropriate;
- compatible with nursery practice; and
- consistent with statutory and safer-sleep requirements.

Parental preference cannot override safer-sleep requirements.

The nursery will therefore not adopt an unsafe sleep practice because it is routinely used at home or specifically requested by a parent or carer.

This includes, but is not limited to, requests to:

- place a baby to sleep on their front where there is no documented medical requirement;
- use inappropriate or prohibited bedding;
- use an unsuitable sleep surface or equipment; or
- otherwise depart from safer-sleep requirements.

Where there is a medically required deviation from normal safer-sleep practice, appropriate written information from the relevant healthcare professional must be obtained and an individual plan agreed.

#### **WAKING CHILDREN AND PARENTAL SLEEP REQUESTS**

We recognise that parents and carers may wish to share information about their child's usual sleep routine, including preferred sleep times and concerns about the impact of daytime sleep upon sleep at home.

This information will be considered as part of the child's overall care. However, Leaping Lilies will not routinely wake a child from sleep simply to preserve a preferred bedtime, reduce daytime sleep or follow a parent-directed sleep schedule.

A nursery day is physically, emotionally and cognitively demanding. Where a child falls asleep, this may indicate that they require rest in order to regulate themselves and continue to participate safely and positively in the remainder of the day.

For this reason:

- children will not be forced to remain awake when they are showing a clear need for sleep;
- children will not routinely be woken before they naturally wake;
- parental preference alone will not be considered sufficient reason to interrupt a child's sleep;
- educators will use professional judgement based upon the individual child's age, presentation, wellbeing and needs; and
- the child's welfare and ability to regulate themselves throughout the nursery day will take precedence over maintaining a particular sleep schedule at home.

Parents and carers are encouraged to discuss concerns regarding sleep with the nursery. Educators may share observations and consider whether any wider adjustments to the child's routine are appropriate, provided these do not involve routinely restricting or interrupting sleep where the child demonstrates a genuine need for it.

A child may be woken where there is an appropriate welfare, health, safety, medical or operational reason to do so. This may include, for example:

- a concern regarding the child's health or presentation;

- a medical requirement;
- an emergency or evacuation;
- the child needing to leave the nursery; or
- another circumstance where continuing to sleep would not be appropriate or safe.

Any decision to wake a sleeping child should be reasonable, proportionate and based upon the child's best interests.

Children will never be forced to sleep.

#### **RECORDING SLEEP**

All sleep periods must be appropriately recorded.

Records should include:

- the time the child went to sleep;
- required physical sleep checks;
- relevant observations;
- the time the child woke; and
- any significant concern, intervention or change.

Records must be accurate and completed contemporaneously.

Sleep information will be shared with parents and carers as part of the child's daily care information.

Any unusual sleep pattern, presentation or concern must be communicated to the parent or carer and escalated to nursery management where appropriate.

#### **HYGIENE AND MAINTENANCE**

Sleep equipment must be maintained to a high standard of hygiene.

Each child must be provided with clean bedding appropriate to their sleep arrangements.

Bedding must be individually stored where appropriate to prevent cross-contamination.

Cots, mattresses, sleep mats and other equipment must be cleaned in accordance with the nursery's hygiene arrangements.

Sleep equipment must be routinely inspected.

Any item which is:

- damaged;
- excessively worn;
- unsuitable;
- contaminated; or
- otherwise considered unsafe

must immediately be removed from use.

Equipment must be used in accordance with the manufacturer's instructions.

#### **STAFF RESPONSIBILITIES**

All educators have a responsibility to understand and implement this policy.

Educators caring for sleeping children must:

- understand safer-sleep principles;
- follow the required sleeping-position guidance;
- maintain safe and clear sleep environments;
- undertake and record required physical checks;
- monitor children's temperature and general presentation;
- understand the supervision requirements applicable to the child's age;
- remain alert to changes in children's needs;
- summon assistance immediately where required; and
- escalate any concern without delay.

Staff must never assume that because a child is sleeping they require no active supervision.

#### **MANAGEMENT RESPONSIBILITIES**

Nursery management is responsible for ensuring that:

- educators understand this policy;
- safer-sleep requirements form part of induction;
- appropriate ongoing training and updates are provided;
- appropriate sleep equipment is available and maintained;
- room deployment and staffing arrangements remain safe;
- statutory whole-provision ratios are maintained;
- staff relied upon as available support are genuinely available;
- sleep records are completed consistently;

- monitoring equipment is suitable and operational where used;
- safer-sleep practice is regularly observed in practice; and
- concerns, incidents and near misses are appropriately reviewed.

Managers must actively monitor practice rather than relying solely upon written sleep records.

This should include periodic observation of:

- children's sleeping positions;
- sleep spaces and equipment;
- bedding;
- supervision arrangements;
- completion and quality of physical checks;
- temperature management;
- staff knowledge;
- availability of immediate support; and
- whether staff deployment changes appropriately as children fall asleep and wake.

Any unsafe practice must be addressed immediately.

## **TRAINING**

Safer sleep will form part of relevant staff induction and ongoing safeguarding and welfare training.

Staff working with babies and young children must be familiar with the nursery's procedures and current safer-sleep principles.

Managers must ensure that changes to statutory requirements or organisational procedures are communicated to staff and embedded into practice.

Where staff are uncertain about the correct application of this policy, they must seek clarification from management rather than make assumptions.

## **MEDICAL EXCEPTIONS AND INDIVIDUAL NEEDS**

Where a healthcare professional advises that a child requires a sleep arrangement which differs from standard safer-sleep practice, the nursery must obtain appropriate written information before implementing the arrangement wherever circumstances permit.

An individual care or risk-management plan must be established where appropriate.

The plan must clearly identify:

- the child's individual requirement;
- the professional advice received;
- any specific supervision requirements;
- required equipment or positioning;
- responsibilities of staff; and
- arrangements for review.

Parental preference alone does not constitute a medical exception.

## **EMERGENCY RESPONSE**

Where an educator identifies that a sleeping child:

- is not breathing normally;
- is unresponsive;
- has an unusual colour;
- appears seriously unwell; or
- otherwise presents an immediate concern,

the educator must respond immediately.

Appropriate paediatric first aid and emergency procedures must be initiated and additional assistance summoned without delay.

Emergency services must be contacted where required.

The child's parent or carer must be informed as soon as reasonably practicable in accordance with the nursery's emergency procedures.

Any serious incident must subsequently be managed, recorded and notified in accordance with applicable safeguarding, regulatory and organisational requirements.

## **PROFESSIONAL JUDGEMENT**

No policy can anticipate every individual circumstance.

Educators and managers are expected to exercise appropriate professional judgement while remaining within:

- the EYFS statutory framework;
- current safer-sleep requirements;
- this policy;
- children's individual care arrangements; and
- the nursery's wider safeguarding procedures.

Where there is uncertainty regarding the correct course of action, the safer option must be adopted and advice sought from nursery management.

Where management remains uncertain about a statutory or regulatory requirement, clarification must be obtained rather than assumptions being made.

#### **COMMITMENT TO CHILD WELFARE**

Leaping Lilies is committed to ensuring that every child's sleep and rest needs are supported safely, respectfully and responsively.

Our approach combines:

- current statutory requirements;
- evidence-informed safer-sleep practice;
- effective supervision;
- appropriate staff deployment;
- professional judgement;
- partnership with families; and
- recognition of each child's individual needs.

Safe sleep is a shared responsibility.

All staff must remain vigilant and recognise that effective supervision continues throughout a child's sleep.

#### **POLICY REVIEW AND REFERENCE MATERIAL**

This policy takes effect on 1<sup>st</sup> September 2026 and has been prepared to reflect the statutory and safer-sleep requirements applicable from that date.

It will be formally reviewed at least annually and earlier where:

- the EYFS statutory framework changes;
- the Department for Education updates its safer-sleep guidance;
- Ofsted provides relevant regulatory clarification;
- NHS safer-sleep advice materially changes;
- an incident or near miss identifies a need for review; or
- internal monitoring identifies a necessary change to practice.

The nursery will have regard to the current:

- Early Years Foundation Stage statutory framework for group and school-based providers - effective 1<sup>st</sup> September 2026;
- Department for Education - Safer Sleep guidance for early years providers;
- NHS guidance on reducing the risk of Sudden Infant Death Syndrome (SIDS);
- Ofsted guidance concerning staff deployment and staff-to-child ratios; and
- relevant evidence-based safer-sleep information, including guidance published by The Lullaby Trust.

Where external guidance is updated, statutory requirements and current government guidance take precedence over any conflicting provision within this policy pending formal policy review.

| Version | Updated | By           | Authorisation Status |
|---------|---------|--------------|----------------------|
| 1.1     | 05/2023 | Area Manager |                      |
| 1.2     | 03/2024 | Area Manager |                      |
| 1.3     | 02/2025 | Area Manager |                      |
| 2.0     | 08/2026 | Director     |                      |