

Safer Sleep & Rest Policy



Policy

Tiny Oaks Day Nursery operates a safe rest and sleep policy through our active partnership with parents and by raising awareness of Sudden Infant Death Syndrome (SIDS). Throughout the day children will be given the opportunity to rest and sleep appropriate to their age/stage of development and their individual needs.

The importance of rest and sleep

Rest and sleep are two different things. Rest is about times when the body can relax and stay fairly still but the brain remains active and continues to concentrate on what is happening. Sleep, on the other hand, allows both the body to rest and the brain to change its pattern of activity.

Not having sufficient sleep can have a significant, negative impact on children's development for example:

- Difficulty in concentrating and learning
- Difficulties in managing feelings and emotions
- Impulsivity / difficulty in self-regulating
- Spatial awareness affected
- Difficulty in processing and remembering information
- Immune system may not be as effective
- Higher chance of becoming overweight

What is SIDS?

Sudden Infant Death Syndrome (SIDS) is the sudden and unexplained death of a baby where no cause is found. The vast majority of SIDS deaths happen when babies are less than 6 months old; with the highest number happening at 2-4 months old. There is no advice that guarantees the prevention of SIDS but parents and carers should be informed that by following advice, it is possible to lower the chance of this tragedy occurring. It's important to remember that SIDS can happen at any time, not just at night, so the advice given in this procedure should be followed for all sleep periods.

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Procedure

Sleeping children under one

- Sleeping a baby on their back (known as the supine position)
- All new staff will be trained on our Safer Sleep & Rest Policy and SIDS risk reduction at induction.
- Key persons will talk to parents about their child's home sleep routine (which Parents / Carers must put into writing) and develop a personalised care plan which replicates this. The individual routine will ensure that the sleep routine is carried out with each child's preferences in mind, ensuring the comfort and security of every child. This will be regularly reviewed with the parent and any changes in routine noted. Any changes must be given by Parents / Carers in writing to the nursery. (This can be to the nursery's email address or in letter form)
- **BABIES WILL ALWAYS BE PLACED ON THEIR BACKS TO SLEEP** unless there is a signed sleep position risk assessment on file. A copy of the risk assessment will be placed in the child's file in their room. If the child is under six months of age, this risk assessment must be signed by the child's doctor; a parent or guardian's signature is accepted for children over the age of six months.
- If a practitioner finds that a baby has rolled onto their stomach, the baby should be turned onto their back again. Babies will learn at some point to roll onto their front. When the baby can roll from back to front and back again, on their own, then they can be left to find their own position.
- A member of staff will be in the room at all times.
- Staff must visually check on a sleeping baby a minimum of every 10 minutes. They will be required to look for the rise and fall of the chest and if the sleep position has changed.
- Babies should be checked to ensure that they are a suitable temperature.
- It is important to keep a baby's head uncovered while they are sleeping; therefore babies should be placed on their back in the 'feet to foot' position (i.e. placing the baby's feet to the foot of the cot to avoid them wriggling down under the covers)
- The use of loose bedding, pillows, quilts and duvets will not be used in cots or coracles. Cellular blankets and sleep bags can be used in cots or coracles.

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- All babies under 1 year of age will be placed to sleep in a cot
- Babies should sleep on a firm, flat mattress that is clean and in good condition. A mattress with a waterproof cover will help to keep it clean and dry. Steps will be taken to ensure that the gaps between the bars are less than 6.5cm, and the space between the mattress and cot is no more than 4cm.
- Staff members looking after babies are encouraged to avoid situations where babies may sleep in a pram / buggy, nesting ring, car seat, bouncy chair etc. We do however recognise that this sometimes can be unavoidable or may go against where a baby may have naturally fallen asleep or feels most comfortable. Such situations will be carefully monitored to reduce any risk to a baby or child, with the understanding that a sleeping baby or child will be moved into a cot/ coracle or onto an approved surface. All manufacturer's instructions **MUST** be followed.
- Babies will be allocated individual bedding that is washed at a minimum of weekly and is stored in separate cotton bags.
- Babies will never be put down to sleep with a bottle to self-feed.
- Once a baby is able to roll over, sit up, or push up onto their hands and knees, the mattress support should be lowered in the cot. The higher levels make it easier to take an infant out of the cot, but they're dangerous when the child is able to pull themselves to a standing position.
- Toys and stuffed animals will not be allowed in the child's cot unless it is their comforter. Once the child has fallen asleep under supervision the comforter can be removed.
- Only one baby will be placed in a cot at a time, except in the event of an emergency or during a fire drill when an evacuation cot is used.

Sleeping Children Over one

- Once a baby reaches their first birthday, the key person and parent will discuss and plan for their transition from using a cot to sleep mat if appropriate.
- Children must sleep on a clean sleep mat and must not sleep directly on the floor or sitting at tables.
- Bed linens such as blankets or sheets cannot be substituted for a sleep mat.

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- Sleep mats which are showing any signs of wear and tear, or exposed foam must be disposed of and new beds purchased. (This must be reported directly to the Director so they are made aware)
- The sleep area must not be crowded. Sleep mats must be placed at least 30cm apart, in order to control airborne infections, and ensure that staff members have no difficulty accessing children.
- Children must be positioned so that they face to feet with the child laying on the neighbouring sleep mat.
- The floor on which the sleep mats are placed must be swept, and if needed mopped so that it is clean and free from debris.
- Sleep mats should be placed away from hanging objects that could cause strangulation / entrapment, and shelving where objects may fall down onto them.
- Children must be provided with clean, individual bedding and not share the same bedding or sleep surface with another child. Each child will have their own labelled sleep bag/storage in which their bedding will be stored.
- Bedding must be washed at least weekly, unless soiled.
- Sleep mats must be cleaned daily after use and must be sanitized after they have been contaminated (such as by vomit, mucous, blood, or toileting accidents)
- Bedding must always be checked to ensure it is clean. Staff must never walk over beds that have been made up and when supporting children to get ready for sleep staff must not sit on the beds / bedding in order to avoid the spread of germs.
- Staff must create a calm environment, and help children to relax for example by playing soft music or soothing a child by gently patting their back in line with their care plan.
- If a child lays down to sleep but does not fall asleep within 15 minutes, they will be asked whether they would like to join those children who are awake rather than remain on the sleep mat.
- Staff must visually check on a child a minimum of every 10 minutes. They will be required to look for the rise and fall of the chest this will be documented on the Sleep chart and initialled by the staff member.
- Within our classrooms there are quiet carpeted rest areas with soft cushions where children can go if they wish to rest and relax at any time of the day.

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Parents' requests should be taken into consideration, although staff cannot force a child to sleep, wake or keep a child awake against their will.

Further guidance

- The Lullaby Trust <https://www.lullabytrust.org.uk>
- NHS - <https://www.nhs.uk/conditions/sudden-infant-death-syndrome-sids/>

<i>This policy was adopted on</i>	<i>Signed on behalf of the nursery</i>	<i>Date for review</i>
<i>16/1/2023</i>	<i>m khaira</i>	<i>16/01/2024</i>