

RELAXATION AND SLEEP POLICY

MANDATORY – QUALITY AREA 2



PURPOSE

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

POLICY STATEMENT

VALUES

Highvale Preschool 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 Highvale Preschool, 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*).

SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, Centre Supervisors, educators, other staff, students on placement and volunteers at Highvale Preschool.

BACKGROUND AND LEGISLATION

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*).

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*

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- *National Quality Standard, Quality Area 2: Children’s Health and Safety*
- *Occupational Health and Safety Act 2004*

DEFINITIONS

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.

SOURCES AND RELATED POLICIES

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 2172:2010), 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.education.gov.au/>
- *Grow and Thrive, Sleep*, volume 2 number 1, February 2013, Centre for Community Child Health: <https://www.rch.org.au/home/>
- Product safety: a guide for businesses and legal practitioners: <https://www.consumer.vic.gov.au/>
- Red Nose: Evidence-based information and advice about safe sleeping practices across ages and stages at <https://rednose.com.au/>
- WorkSafe Victoria, *Children’s services – occupational health and safety compliance kit*: <https://www.worksafe.vic.gov.au/>
- *Victorian Early Years Learning and Development Framework* (VEYLDF): <http://www.education.vic.gov.au/Pages/default.aspx>

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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*

PROCEDURES

THE APPROVED PROVIDER IS 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)
- consulting with staff in relation to OHS issues when purchasing new equipment for the service
- ensuring compliance with WorkSafe Victoria's *Children's services – occupational health and safety compliance kit* (refer to *Sources*)
- ensuring adequate supervision of children at the service at all times, including during relaxation and sleep

THE NOMINATED SUPERVISOR IS RESPONSIBLE FOR:

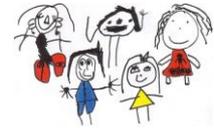
- taking reasonable steps to ensure the sleep/rest needs of children at the service are met with regard to the age of children, developmental stages and individual needs (Regulation 81(2))
- ensuring the educational program provides opportunities for each child rest or engage in appropriate quiet play activities, as required
- protecting children from hazards and harm (Section 167)
- ensuring all staff and educators comply with the recommendations of Red Nose in relation to safe sleeping practices for children (refer to *Sources*)
- 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
- 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

THE CENTRE SUPERVISORS AND OTHER EDUCATORS/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

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- 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
- 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
- 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.

ALL 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

VOLUNTEERS AND STUDENTS, WHILE AT THE SERVICE, ARE RESPONSIBLE FOR FOLLOWING THIS POLICY AND ITS PROCEDURE

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
- 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.

ATTACHMENTS:

- Attachment 1: Rest and Relaxation

AUTHORISATION:

Adopted by Highvale Preschool Association Inc. on 21st June 2018 and will take effect from 5th July 2018

REVIEW DATE: June 2021



Attachment 1: Rest and Relaxation

Safe Sleep and Rest Practices- Children of all ages

- Children should sleep and rest with their face uncovered.
- A quiet place should be designated for rest and sleep, away from interactive groups. If designated for rest, the space should allow for a calm play experience.
- Children’s sleep and rest environments should be free from cigarette or tobacco smoke.
- Sleep and rest environments and equipment should be safe and free from hazards.
- Supervision planning and the placement of educators across a service should ensure educators are able to adequately supervise sleeping and resting children.
- Educators should closely monitor sleeping and resting children and the sleep and rest environments. This involves checking/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. Service providers should consider the risk for each individual child, and tailor Sleep and Rest Policies and Procedures (including the frequency of checks/inspections of children) to reflect the levels of risk identified for children at the service. Factors to be considered include the age of the child, medical conditions, individual needs and history of health and/or sleep issues.

Whilst Highvale Preschool does not have a formal sleep time, staff are aware of the need for rest and relaxation during the day.

Staff have in place strategies for rest and relaxation.

These include:

- Quiet play areas within in the room
- Sensory water mattress for rest and reflection on
- Yoga and meditation via online applications
- Cushioned quiet areas for reading of books

In the event that a child should fall asleep or require sleep, educators would provide a comfortable area for the child to be in.

Staff would monitor the child throughout their rest period and if it was considered appropriate, parents/carer may be contacted, especially if child appeared unwell.