



28. Safe Sleep and Rest Policy

Section 2: H&S			
Initial Policy Approved By:	The WonderWorks RSP Ltd	Version Number:	1.3
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Policy Statement:

The purpose of the Safe Sleep and Rest Policy is to provide guidance on how to meet children's need for sleep and rest and to safely and appropriately manage children's routines.

The policy identifies practices for nurseries to adopt which help reduce the risk of sudden infant death syndrome (SIDS), suffocation, neglect or other harm that could occur when a child is resting or asleep.

This policy is to be used alongside the safe sleep risk assessment.

Why sleep and rest is important:

Effective sleep and rest strategies are important factors in ensuring children's wellbeing, enabling them to learn and helping them develop. Every child's needs are different so we will provide flexible opportunities for children to take rests or sleep as they need and desire. Babies and children often need more sleep at times of rapid growth, or when they need to repair after or during an illness.

Staff have a duty of care to ensure that all children are provided with a high level of safety and appropriate supervision when resting or sleeping. Children can be at risk without this.

We respect parental wishes regarding children's sleep, but the welfare of the child is always paramount. At The WonderWorks we are child centred and our ethos centres on providing respectful care. We believe setting sleep limits, or forcing children to stay awake, or to forcibly wake children before they are ready can be detrimental to children's health and wellbeing.

The team will work in partnership with parents, with the aim of ensuring there is an agreed and well communicated approach to their child's sleep and rest routine. When it is mutually agreed that a child is communicating, they are ready to drop their daytime sleeps the child will be encouraged to rest or engage in gentle play rather than to sleep. However, this will be closely monitored and if the dropping of daytime sleeps affects their wellbeing in the nursery, or at home Teachers will review this decision and re-offer and encourage a daytime sleep to support the child.

Children may tell adults in all sorts of ways that they no longer need to sleep in the day. This means adults knowing the child, seeing a change in their behaviours and routines, and picking up on 'clues'. For example, when they no longer fall asleep easily in the day, they are not tired at bedtime and stay awake late when they have had a nap in the day, or they sleep for a very short period during the day. Usually this happens around the age of 3-4. This can be difficult to judge as children are likely to be much more tired at nursery than at home, this is due to their batteries being drained faster through play, sharing, learning and the full day and busier routines in a nursery setting. Often children drop their day sleep at home first, but still need it at nursery. It is communicated clearly to new parents that at The WonderWorks we are child centred and believe setting sleep limits, or forcing children to stay awake, or to forcibly wake children before they are ready may be detrimental to children's development, health and wellbeing.

If a parent expresses concern about their child's sleep routine, and there is evidence to suggest their nursery sleep routine is impacting on the quality of their overnight sleep they will be asked to meet with the Room Leader and Keyperson to discuss if an individual sleep plan should be used. This will be a partnership agreement, based on the needs of the child. It will look at both home and nursery sleep routines and will consider up-to-date research/guidance on good sleep hygiene, routines and sleep cycles. If it is agreed that in the best interests of the individual child that they should have something additional or different to our nursery sleep policy, an Individual sleep plan will be trialled for 2 weeks. This trial period will monitor the impact of any plan on the child's emotional, cognitive and physical health.

Even at the request of a parent should a child never be 'kept awake' when they ask/need a rest/nap at nursery, and no limits, or routines would be put in place that would interrupt a typical first sleep cycle (waking a child before 60 minutes). Any request which could have a negative impact on a child's wellbeing, enjoyment, participation or learning at nursery, would not be considered in line with our ethos, and so therefore not possible.

When a sleep plan is asking an adult to wake a child, this would always be done gently, calmly, respectfully by quietly speaking the child's name "hello **name* sorry to wake you", reassuring them, gently touching/tickling their cheek, gently moving their bedding off them, and sitting with them whilst they wake up slowly. An adult must never wake a child abruptly, especially when in deep sleep.

Definitions:

Sleep is any period when a child is physically asleep, regardless of the length of time or the location of the child. This can include 'naps', children falling asleep on outings or trips, as well as time asleep within any nursery room or area.

Rest is defined as a period of limited activity, solitude, calmness, or tranquillity, where a child is awake.

Sleep Cycle our total sleep is made up of several rounds of the sleep cycle, which is composed of four individual stages. The 'N3 stage' is deep sleep and is particularly important for children's growth & development. Research suggests sleep cycles in babies and children under 5 are usually shorter than adults. Averaging at 45-60 minutes for a baby/toddler, 60 minutes for a typical 3-year-old child and 90 minutes for adults.



Sleep procedures:

As a minimum, nursery staff must:

- Create relaxing and comfortable environments for children in which they are encouraged to be calm and participate in the settling, pre-sleep routine. Ensure children have been fed and changed before sleeping.
- Ensure sleep areas are well-ventilated and appropriately lit (staff should be able to see the children's faces). A comfortable temperature for sleeping is 16-20c. Children should not be left to sleep in direct sunlight or sleep against radiators or heaters. Beds/cots must be well-spaced.
- Regularly check and risk assess the sleep area and sleep equipment. Cot mattresses must be firm, in good repair and the correct size for the cot. Monitors must be tested. Pillows should not be used.
- Ensure that cots, mattresses, and equipment are regularly cleaned. Children must have individualized bed linen that is stored separately, washed at least once a week, or more frequently if soiled and where there is a risk of illness or contamination.
- Ensure children are comfortably ready and appropriately dressed for sleep, minimizing the risk of over-heating (See Appendix 1 below), and removing any hazards from their persons or the vicinity.
- Allow children to have personal comforters or toys, if requested by their parents and deemed safe. These should be named or individualized to prevent any cross contamination and never include any cords or materials that may present a strangulation risk.
- Not allow children to sleep with bottles, to reduce the risk of choking.
- Make sure that children never sleep together, sharing a cot or mattress. Cots should only be shared in an emergency evacuation.
- Sleep mats should be placed with a gap between each mat- allowing for teachers to move between. Where possible they should be laid head to foot- to reduce transmission from germs when heads are close together.

- Babies are placed to sleep in the cot on their back with their feet towards the bottom of the cot (“feet to foot” position) and the bed linen tucked in. Quilts and pillows should never be used, and children’s faces kept always uncovered. Loose linen, ill-fitting sheets and items attached to cots are a risk to sleeping children.
- Be aware that children who are ill, have recently recovered from an illness, have been injured or involved in an accident, or have a high temperature may be at increased risk during sleep, and staff must adapt the routine or procedures accordingly.
- Be mindful of the manual handling risks to both adults and child when lifting children in and out of cots or sleep pods.
- Not force children to sleep but allow them to self-soothe or to offer gentle back or hair stroking. If after 30 minutes of rest and a child has not fallen asleep, Teachers should encourage the child to return to play if they wish- it is assumed that a child who is still awake at this point is probably communicating that they have rested enough.
- Do not force children to wake up, we respect and allow children to wake naturally and when they are ready, unless an agreed sleep plan (ISP) is in place.
- Upon waking, children will be offered a transitional period between sleep and play. They will be offered refreshment and comfort by a teacher before re-joining the group.
- Consider making safe and practical adaptations, where possible to support children with individual needs. For example, a child may need to have a consistent bed space, consistent bedding, consistent story or sleep routine and teachers may need to be understanding of sensory difficulties e.g., heat/light/sound/feel of bedding etc.

We do not encourage children to sleep on sofas, bean bags, carpets or in car seats, buggies, or prams. However, we do recognise that this sometimes can be unavoidable and that some children will arrive at nursery asleep. Children who are asleep in this way will be treated as a sleeping child in line with this policy and be carefully monitored to reduce any risk. They should be moved into a cot or onto an approved, safe sleeping surface as soon as possible to keep them safe.

The WonderWorks Sleep ‘zone’ for The Burrow Room (Over 2’s room)

The Burrow routine and room moves into a ‘sleep zone’ after lunch between 12.30pm and 2.30pm every day. This means providing a special sleep area for those needing to sleep after lunch. Blinds are pulled down and lights dimmed to create a soft, sleepy atmosphere. Some relaxing music may be played softly in the background as children first fall asleep. A Teacher will sit on the floor with children, encouraging them to sleep, reading a story, doing some relaxation breathing, and encourage children to lie down, snuggle and relax. Usually by 2pm the room is beginning to return to its awake state as most of the children are awake and playing, and at 2.30pm the room moves out of its ‘sleep zone’ and all usual activities have fully recommenced. If a child wanted to stay asleep, we would not actively wake them up, but we would anticipate that the change in atmosphere and noise in the room is likely to bring them to a waking state naturally.

Please note if your child attends the nursery and is not requiring a daytime sleep our teachers ensure they are able to rest or play and learn by using the other areas of the nursery room and gardens. Their experience is not negatively impacted by the 'sleep zone'.

Supervision and monitoring of sleeping children:

Children who are sleeping or resting must be adequately supervised and regularly monitored. There is no express permission given within the EYFS to relax ratio requirements for sleeping children.

Managers must therefore risk assess sleeping routines to ensure that children are kept safe and comfortable, and there is appropriate consideration of managing changes to circumstances or events such as children waking, becoming active, or ill, needing the toilet or there being a fire or evacuation. How this looks like may vary from setting-to-setting dependent on the complexity of issues and numbers of children involved. As a basic minimum and with the smallest number of children, there must always be at least one member of staff supervising sleeping children and one at hand to support a change in circumstances. This basic minimum will not be appropriate for every nursery or room, for instance 15 under-twos sleeping will clearly require a higher level of supervision.

Visual and auditory supervision of sleeping children is always required. Staff must visually check children at a minimum interval of every 10 minutes, more frequently if there is an additional risk identified or if the child is new. Staff must look for the rise and fall of the chest, if the sleep position has changed and check for any new hazards, e.g. ensuring that the child's face remains uncovered.

Children must be monitored every 10 minutes, regardless of where they have fallen asleep, and a sleep chart completed for all sleeping children.

Children at Rest:

All children need time for rest and for calm. Creating opportunities during the nursery day for 'quiet time' enables children to manage their own emotions or energy, and to engage in activities that are less socially, emotionally, or physically demanding. This can help children maximize their learning during a nursery day.

All settings must have restful areas, such as a 'cosy corner' or den, a cushion, or a reading area that children can independently access. Staff will also provide small group times or activities that can offer children quite or structured calmness. Resting children must always be included in any ratio management decisions and considered awake and fully participating.

Rest periods should not be imposed on children solely for the adult's convenience or to allow the adults to carry out work routines.

In planning the nursery routine, or trips and outings, staff should consider how they best provide children for opportunities for rest and manage children's transitions between activity and calm and vice versa.

Further Reading and advice:

<http://www.lullabytrust.org.uk/safer-sleep>

<http://bliss.org.uk/safe-sleeping>

[Sleep and young children - NHS \(www.nhs.uk\)](#)

[Sleep hygiene in children and young people | Great Ormond Street Hospital \(gosh.nhs.uk\)](#)

[Infant Sleep Cycles: How Are They Different From Adults? | Sleep Foundation](#)

Appendix 1: Preventing Overheating

Merseyside Child Death Overview Panel Multi-Agency Safe Sleeping Guidance (May 2015)

The following is a helpful guide to calculating children's clothing and covering at sleep to prevent overheating. Staff should ensure children have no more than 12 Tog units, including both clothing and bedding.

Tog Table:

Baby Clothing	Tog	Bedding	Tog
Vest	0.2	Sheet	0.2
Babies grow	1.0	Old blanket	1.5
Jumper/cardigan	2.0	New blanket	2.0
Trousers	2.0	Quilt (check instruction)	9.0
Sleep suit	4.0	Wrapped in single sheet	0.8
Disposable nappy	2.0	Wrapped in single blanket	8.0

Tog ratings for sheets and blankets are based on them being used as a single wrap e.g. blankets and sheets should not be folded over as this will increase their Tog rating.

Duvets and pillows are not safe for use with babies under one year of age as they could cause overheating and/or increase the risk of accidents from suffocation.