



BOURKE AND DISTRICT CHILDREN'S SERVICES

QUALITY AREA 2: CHILDRENS HEALTH AND SAFETY

POLICY NAME: SLEEP AND REST

POLICY STATEMENT

All children have individual sleep and rest requirements, which we endeavour to cater for by providing a comfortable, relaxing, and safe space to enable their bodies to rest.

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 risk of Sudden Infant Death Syndrome (SIDS) will be minimised by following practices and guidelines set out by the national authority – 'Red Nose' on safe sleeping practice for infants and children. Guidance from ACECQA, which is informed by recognised and evidence-based principles will also be adhered to.

OVERALL STRATEGIES / HOW WILL IT BE DONE?

All children will be provided with a high level of safety while sleeping and resting and every reasonable precaution will be taken to protect them from harm and hazard.

SAFE EQUIPMENT

- Our organistaion will ensure that no bassinets or portacots are used or stored within any of our services.
- Equipment will not be used in a way that it was not originally intended.
- Equipment will not be used if it has been recalled. All bedding equipment will meet the relevant safety standards (including AS/NZS 2172, AS/NZS 2195 and AS/NZS 8811 1:2013).
- Rockers and bouncers will be used for supervised play time only. Children are on an incline position whilst on this equipment, so they must be actively supervised at all times. Rockers and bouncers will therefore not be used for sleep or rest time.
- Hammocks and prams/strollers are not considered safe equipment to sleep in and cannot be considered a substitute for a cot and therefore will not be used for sleep or rest time.
- Cot sides will remain securely locked into place during use to ensure the safety of those that are using them.

SAFE COT MATTRESS

- Mattresses will always be firm and flat and will remain clean and in good condition.
- A firm sleep surface that is compliant with the AS/NZS Voluntary Standard (AS/NZS 8811.1:2013 Methods of testing infant products - sleep surfaces - test for firmness) will be used.
- Cot mattresses will fit the cot with no more than a 20mm gap between the mattress sides and ends.
- Mattresses will never be elevated or tilted.

SAFE BEDDING

- Light bedding that meets Australian Standards will be used.
- Pillows, quilts, duvets, loose bedding, cot bumpers or any other type of fabric will not be used in cots.

WEIGHTED BLANKETS AND LAP MATS

- The use of weighted blankets and lap mats is incorporated into the Sleep and Rest risk assessment.
- Weighted blankets and lap mats can only be used by children age 3 and above.
- Children can only use a weighted blanket or lap mat if it is appropriate for their age/size as per the manufacturing information.
- Educators must first consult with a child's parent/guardian before offering a weighted blanket or lap mat for sleep time.
- Weighted blankets and lap mats are always to be kept loose (not tucked in under mattress) and are never to be used in cots.
- As per the Sleep and Rest risk assessment, extra supervision is required when weighted blankets and lap mats are in use and educators must ensure that the child's face is never covered.

SUPERVISION DURING SLEEP AND REST

- The space used for sleep and rest will have adequate light so that educators can supervise each child.
- Children sleeping and resting, will always be within sight and hearing distance so that educators can monitor children's safety and wellbeing and respond immediately when a child is distressed or in a hazardous situation.
- Our service will not use CCTV, audio monitors or heart monitors to replace physical checks. If any of these devices are used, they will only be used to support ongoing supervision.



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- Physically check sleeping children at least once every 10 minutes. The circumstance and needs of each child should be assessed to determine any risk factors that may mean physical checks are required more frequently than this. Educators will inspect the child's:
 - Sleeping position.
 - Skin and lip colour.
 - Breathing.
 - Body temperature.
 - Head position.
 - Airway.
 - Head and face, ensuring they remain uncovered.
- Children who are sleeping in the classroom are under continuous supervision and therefore a formal sleep check is not documented.
- A formal sleep check must be documented for any child sleeping in the cot room. The educator conducting the check will complete the Sleep Check sheet to confirm that they have checked each child for all of the above bullet points and that any concerns have been immediately addressed. This must be documented at the time that the check was carried out and not be left for later.
- For children at Childcare, educators will accurately record the time that a child goes to sleep and the time that the child wakes up on the Playground app as a way of sharing this information with families.
- For children at Preschool, educators will provide families with verbal information regarding their child's sleep and rest time while at the service.

SLEEP AND REST RISK ASSESSMENT

- The Nominated Supervisor, in collaboration with the educators, will conduct a comprehensive risk assessment to ensure all protentional hazards are identified and specify how any risks identified are managed and minimised in sleep and rest areas in line with Red Nose and ACECQA guidelines
- The risk assessment will be reviewed at least annually, or after an incident or circumstance where the health, safety or wellbeing of children may be compromised during sleep or rest.
- The risk assessment must be stored safely and securely and kept for a period of 3 years.
- Our risk assessment will consider and include the following information:
 - The number, age, medical needs, developmental stages, and individual needs of children.
 - The sleep and rest needs of individual children being educated and cared for (including specific health care needs, cultural preferences, sleep and rest needs of individual children 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.
 - Any potential hazards during sleep and rest periods:
 - In the sleep and rest areas (such as blinds or cords).
 - On a child (such as jewellery and clothing).
 - The physical safety and suitability of the sleep and rest environments (including temperature, lighting, and ventilation).
 - The way in which supervision and monitoring which is conducted during sleep and rest is documented - including the method and frequency of checking children's safety, health, and wellbeing.

SAFE PRACTICES

- As per our Dental Health Policy, bottle fed, babies, toddlers and children will never be put in a cot or bed with a bottle and instead will have their bottle prior to this time.



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- If being used, a dummy will be offered for all sleep periods. Dummy use should be phased out by the end of the first year of a baby's life (in consultation with parents). If a dummy falls out of a baby or toddlers' mouth during sleep, it will not be re-inserted.

SLEEP REQUIREMENTS FOR EACH AGE GROUP

BABIES AND TODDLERS (0-2)

- Babies and toddlers may be placed in a safe sleeping bag provided by families as long as it meets Red Nose guidelines (i.e. with fitted neck and arm holes, but no hood).
- Additional supervision is required if a baby or toddler is wearing a sleeping bag whilst sleeping outside a cot. The sleeping bag should be removed as soon as they wake to avoid risk of falling and injury.
- When a baby or toddler is placed to sleep, educators must check that any bedding is tucked in securely and is not loose.
- To prevent a baby or toddler from wriggling down under the bedding, they should be positioned with their feet at the bottom of the cot or bed.
- At no time should a baby's face or head be covered (i.e. with bedding).
- A baby or toddler will always be placed on their back to sleep but they will be able to find their own preferred sleeping position. If a medical condition exists that prevents them from being placed on their back, the alternative practice should be confirmed in writing with the service, by the baby or toddler's medical practitioner and a risk assessment will be conducted for them.
- If a baby or toddler is observed attempting to climb out of a cot, and looking like they might succeed, they will then move to using a bed.

PRESCHOOLERS (3-5)

- Educators will discuss individual children's sleep and rest needs with their families and include children in decision making in order to support their sense of agency.
- By turning off lights, playing relaxing music and reading stories, we will create a tranquil and calm environment which supports opportunities for rest and sleep.
- Relaxation techniques including breathing exercises may be used to promote rest.
- We will ensure that children are comfortably clothed.
- All sleeping and resting children will closely be monitored to ensure their safety.
- Children will always sleep with their face uncovered.
- Children will be encouraged to rest their bodies and minds during rest time
- Quiet activities such as puzzles, books and drawing will be available for children who do not go to sleep.

ROLES AND RESPONSIBILITIES

APPROVED PROVIDERS AND NOMINATED SUPERVISORS WILL

- Ensure there are policies and procedures in place for sleep and rest and take reasonable steps to ensure those policies and procedures are followed.
- Ensure that obligations under the Education and Care Services National Law and National Regulations are met.
- Ensure all staff (including casual staff) receive information and induction training to fulfil their roles effectively, including being made aware of the Sleep and Rest Policy, their responsibilities in implementing it, and any changes that are made over time.
- Ensure students, visitors and volunteers have knowledge of and adhere to this policy.
- Ensure the needs for sleep and rest of children being educated and cared for by the service are met, having regard to the ages, developmental stages, and individual needs of the children.
- Ensure that children's safety, health, and well-being are upheld at all times.
- Undertake a risk assessment to ensure adequate supervision and monitoring of children during periods of sleep and rest is conducted and documented, including the method and frequency of checking children's safety, health, and wellbeing.
- Ensure the premises, furniture and equipment are safe, clean and in good repair.
- Ensure 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 – examples of things to consider are, if the baby, toddler or child might:



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- Roll over in their sleep.
- Climb out of a cot.
- Become trapped between a sleep surface and wall.
- Become trapped face down in bedding.
- Find that their breathing becomes impeded from weighted sleep products.
- Ensure sleep and rest environments are free from cigarette or tobacco smoke.
- Ensure that the premises are designed to facilitate supervision.
- Ensure children are supervised during periods of sleep and rest.
- Not endorse practices requested by a family if they differ from Red Nose safe sleeping recommendations. If any requirements differ from Red Nose sleeping recommendations, a risk assessment will be completed for the child and written authorisation from a medical practitioner and the child's parents will be required and shared with educators.
- Maintain up to date knowledge and training regarding safe sleeping practice and communicate this information to educators and families.
- Ensure there is a procedure for educators to record the time and observation of physical checks of children sleeping.

EDUCATORS WILL:

- Ensure at all times that the sleep and rest environment is well supervised to ensure the safety, health and wellbeing of children attending our service.
- Ensure that indoor spaces used for sleep and rest are air conditioned where necessary to maintain an appropriate temperature and that they are adequately ventilated.
- Consult with families about children's individual sleep and rest needs and be sensitive to each child's needs so that sleep and rest times are a positive experience.
- Ensure that beds/mattresses are clean and in good repair and that they are sprayed with disinfectant and wiped over at the end of each use
- Ensure all beds are stored safely.
- Ensure that bed linen is clean, in good repair and is washed before use by another child.
- Identify and remove potential hazards from sleep environments as per risk assessment matrix.
- Arrange children's beds and cots to allow easy access for children and staff.
- Ensure the environment is tranquil and calm and that a relaxing atmosphere has been created.
- Develop secure attachments with children and provide sensitive and responsive care.
- Sit near resting children and support them as necessary by encouraging them to relax and listen to music or stories.
- Not force children to sleep (this includes by patting them to sleep). By providing a quiet, tranquil environment, children will choose to sleep if their body needs it.
- Promote children's agency and decision making by providing routines and environments, both indoors and outdoors, that facilitate sleep and rest opportunities.

FAMILIES WILL

- Be requested to provide educators with regular updates on their child's sleeping routines and patterns.
- Understand that although they are not required to provide this, any bedding which they choose to provide must comply with Red Nose recommendations and ACECQA guidelines.
- Understand that if any requirements for their child's sleep, differs from Red Nose sleeping recommendations then written authorisation from a medical practitioner will be required.

CONTINUOUS IMPROVEMENT/REFLECTION

Our Sleep and Rest Policy will be reviewed annually, or earlier if there are changes to legislation, ACECQA guidance, or any incidents related to the policy. This review will be conducted in consultation with children, families, and staff.

CHILD SAFE STANDARDS

Standard 1	Child safety is embedded in organisational leadership, governance, and culture
Standard 3	Families and communities are informed and involved
Standard 4	Equity is upheld and diverse needs are taken into account
Standard 5	People working with children are suitable and supported
Standard 7	Staff are equipped with the knowledge, skills, and awareness to keep children safe through continual education and training



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Standard 8	Physical and online environments minimise the opportunity for abuse to occur
Standard 10	Policies and procedures document how the organisation is child safe

NATIONAL QUALITY STANDARD (NQS)

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2.1	Health	Each child's health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest, and relaxation.
2.2	Safety	Each child is protected.
2.2.1	Supervision	At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard.

QUALITY AREA 3: PHYSICAL ENVIRONMENT

3.1	Design	The design of the facilities is appropriate for the operation of a service.
3.1.2	Upkeep	Premises, furniture, and equipment are safe, clean, and well maintained.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS AND NATIONAL LAW

Sec. 165	Offence to inadequately supervise children
Sec. 167	Offence relating to protection of children from harm and hazard
82	Environment to be free from tobacco, vaping devices, vaping substances, drug and alcohol
84(a)	Sleep and rest
84(b)	Sleep and rest policies and procedures
84(c)	Risk assessment for purposes of sleep and rest policies and procedures
84(d)	Prohibition of bassinets
87	Incident, injury, trauma and illness record
103	Premises, furniture, and equipment to be safe, clean and in good repair
105	Furniture, materials, and equipment
106	Laundry and hygiene facilities
107	Space requirements-indoor space
110	Ventilation and natural light
115	Premises designed to facilitate supervision
168	Education and care services may have policies and procedures
170	Policies and procedures to be followed
171	Policies and procedures to be available
172	Notification of changes to policies and procedures
176	Time to notify certain information to Regulatory Authority

STATUTORY LEGISLATION & CONSIDERATIONS

[Education and Care Services National Law Act 2010 \(Amended 2023\)](#)
[Education and Care Services National Regulations \(Amended 2023\)](#)
[Smoke Free Environment Act 2000](#)
[Work Health and Safety Act 2011](#)

SOURCES

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Australian Children's Education & Care Quality Authority (ACECQA). (2025).
Australian Children's Education & Care Quality Authority (ACECQA). Safe sleep and rest practices:
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Australian Competition and Consumer Commission (ACCC). (2013). Find out more: [Keeping baby safe Early Childhood Australia Code of Ethics. \(2016\)](#).
Australian Government Department of Education. (2022). [Belonging, Being and Becoming: The Early Years Learning Framework for Australia.V2.0, 2022](#).



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Early Childhood Australia Code of Ethics. (2016).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017). (Amended 2023).

Guide to the National Quality Framework. (2017). (Amended 2025). [Guide to the National Quality Framework](#).

NSW Department of Education. (2022). [Sleep and rest for children-Policy guidelines for early childhood education and care services. \(updated\)](#).

Red Nose: <https://rednose.org.au/section/safe-practices>.

Red Nose: Cot to bed safety https://rednose.org.au/downloads/RN3356_Cot_Bed_DL_Oct2018_Online.pdf.

Revised National Quality Standard. (Amended 2025).

RELATED POLICIES

- Dental Health Policy
- Emergency and Evacuation Policy
- Enrolment and Orientation Policy
- Family Participation and Communication Policy
- First Aid Policy
- Interactions with Children Policy
- Physical Environment Policy
- Providing a Child Safe Environment Policy

RELATED DOCUMENTS

- Childcare Sleep Check Sheet
- Sleep and Rest Risk Assessment

POLICY REVIEWED	NEXT REVIEW DATE	POLICY REVIEWED BY
OCTOBER 2025	OCTOBER 2026	Charlotte Parnaby
MODIFICATIONS	<ul style="list-style-type: none"> • Annual policy maintenance • Updated legislation and other links where necessary 	
POLICY REVIEWED	PREVIOUS MODIFICATIONS	POLICY REVIEWED BY
NOVEMBER 2024	<ul style="list-style-type: none"> • Rearranged content within policy for ease of implementation • Merged some areas to avoid repetition and for ease of implementation and understanding by educators and families • Weighted blankets section added • Additional information to risk assessment section added • Updated legislation, related policies and related documents 	Prue Ritchie
OCTOBER 2023	<ul style="list-style-type: none"> • New policy format • Child Safe Standards added • Major updated to comply with regulation changes effective October 2023 	Prue Ritchie
JANUARY 2021		Prue Ritchie