

1. Policy Statement

St Nicholas is committed to safeguarding every child's health, safety, and wellbeing by providing safe, developmentally appropriate opportunities for sleep, rest, and relaxation.

St Nicholas follows evidence-based safe sleep practices informed by Red Nose, ACECQA, and the NSW Early Learning Commission to minimise risks, including Sudden Unexpected Death Syndrome (SUDI) and Sudden Infant Death Syndrome (SIDS), and to ensure effective supervision at all times.

Regular risk assessments are conducted to maintain safe environments and meet regulatory requirements.

This policy and procedure outlines the responsibilities and practices that support consistent, safe, and appropriate sleep and rest across St Nicholas Early Education Services.

2. Purpose

The purpose of this Policy and Procedure is to:

- Outline the practices St Nicholas Early Education services and employees will implement to promote practices ensuring safe sleep and rest for children
- Ensure families are informed of, and have access to, the service's procedures relating to children's sleep and rest
- Support compliance with the Education and Care Services National Law and National Regulations, which require services to have policies and procedures in place for children's sleep and rest

3. Procedure Direction

Step	Detail
Sleep and rest risk assessment	Educators will conduct a Sleep and Rest Risk Assessment which considers the following, and includes how children will be protected from any risks identified (Regulation 84C). Risk Assessments will address: • the number, ages and developmental stages of the children being educated and cared for • the sleep and rest needs of the children being educated and cared for including 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 the sleep and rest areas, including the arrangement of cots and beds within the sleep and rest areas - the safety and suitability of cots, beds and bedding equipment having regard to the ages of the children using them - any potential hazards in sleep and rest areas or on a child during sleep or rest - the physical safety and suitability of sleep and rest environments including temperature, light and ventilation Sleep and Rest Risk Assessments will be conducted at least once every 12 months, and as soon as practicable after becoming aware of any circumstance that may affect the safety, health or wellbeing of children during sleep and rest.
Sleeping Requirements for Infants under 12 months - in accordance with Sudden Unexpected Death in Infancy (SUDI) guidelines	To reduce the risk of SUDI educators will: - closely monitor sleeping and resting children and remain within sight and hearing distance of sleeping and resting children - conduct sleep checks every 5 minutes, including inspection of the following: - sleeping position - skin and lip colour - breathing - body temperature - head position - airway - head and face, ensuring they remain uncovered - record sleep checks at the time they occur - utilise the Red Nose– Safe Sleeping Guidelines on reducing the risk of SUDI: - put baby on their back to sleep - sleep baby with face uncovered - put baby to sleep at the bottom of the cot so baby cannot slip down under the blankets - ensure the babies face cannot become covered - check baby is tucked in securely - check bedding is not loose - there are to be no quilts, doonas, pillows or cot bumpers in cots - ensure cot side is up - remove necklaces/bracelets, including amber teething products while the infant sleeps - consider the baby’s stage of development for babies who are to be wrapped for sleep. Once the startle reflex disappears at around 3 months of age, babies will be wrapped with their arms free. The use of a wrap will be

	discontinued when the baby can roll from back to tummy and back again (usually around four to six months of age). Only light weight wraps such as muslin or cotton will be used. Ensure the wrap is not too tight and allows for hip and chest wall movement • babies over four months of age, who have been observed to be able to roll over in a cot, may be placed in a safe baby sleeping bag (i.e., with fitted neck and arm holes, but no hood) • babies will be placed on their backs to sleep when first being settled. Babies who have not been observed to be able to roll from back to tummy and back again should be repositioned on their back when they roll onto their tummy or side. Once the baby has been observed to be able to roll from back to tummy and back again, they can be left to find their own preferred sleeping position • remove all comforters (e.g. blankies, soft toys) from cot once babies under 7 months are asleep. Babies over 7 months of age can have one appropriate comforter (no larger than approx. 40cm, and no battery compartments) remain in the cot after falling asleep • ensure babies clothing is not too loose, too hot or too cold, and that hats, beanies and jumpers with hoods, or any other potentially dangerous items have been removed before putting a baby to sleep • give bottle-fed children their bottles before going to bed. Children will not be put in cots or on beds with bottles to drink • encourage families to allow educators to put babies to sleep on a bed once they can stand in a cot and could attempt to climb out
Where Red Nose sleep requirements cannot be supported due to medical conditions.	• If a family requests their child sleeps in a way that is not supported by Red Nose, staff are to provide them with current evidence based educational resources such as Red Nose information statements to facilitate informed decisions in regard to safe sleeping. • If the family is still not in agreement due to a rare medical condition, then a letter from a medical practitioner or specialist must be provided, outlining alternative sleep positions for the child. • This includes cases where parents request their baby sleep in an inclined position and only inclines of less than 7 degrees will be considered. • A risk assessment is then to be completed specifically for the child's individual sleeping needs.
Sleep and rest environments	• Children must have access to a quiet space each day to rest, relax, and recharge. Rest periods are tailored to each child's age, developmental stage, and individual needs. • Children are encouraged to dress comfortably for the room temperature, removing shoes and bulky clothing as needed.

	• Outdoor rest environments may be used when weather, sun safety, and Red Nose safe sleep guidelines are considered. • Educators will create a calm atmosphere using relaxation music, stories, or other soothing experiences, sitting nearby to support children without needing to pat them to sleep and will ensure the area is well lit enough to see if a child's skin colour changes • Children who do not normally sleep will be encouraged to rest. The rest period will depend on the child's individual needs or the dynamics of the room. The rest period provided may include quiet, soothing experiences like guided meditation and yoga exercises or the use of indoor-outdoor rest provisions (for example, on the veranda/deck). • Consideration will be given to those children who are asleep within the environment. • Educators will consult with families to understand each child's individual sleep and rest needs
Family sleep requests	Children who sleep may rest for as long as required, or as guided by family preferences. • If a parent requests their child does not sleep, but the child falls asleep independently, educators will allow a minimum 30-minute rest before respectfully and carefully waking them. Note: a child's full sleep cycle is approximately 45 minutes in length • The child's well-being will always take priority if they fall asleep independently when a parent requests they do not sleep • When early wake up is non-negotiable, children will be woken gently and with care. This could be done by turning off music, opening blinds, turning on low level lighting. • Provide quiet, low level activities for the child after waking
Sleep checks	Educators will: • remain within sight and hearing distance of sleeping and resting children. • conduct 10-minute sleep checks for all children under 3 years and over 2 years • conduct 5-minute sleep checks for all children aged under 2 years. • check each child's: ○ sleeping position ○ skin and lip colour ○ breathing by observing the rise and fall of their chest ○ body temperature ○ head position ○ airway ○ head and face, ensuring they remain uncovered • record sleep checks at the time they occur

Sleep and rest hygiene	- Cots will be stripped of sheets and cleaned appropriately in between use if used by more than one child on any given day. - Children's beds are cleaned after each use with a neutral cleaner and wiped with paper towels, using a fresh paper towel for each bed to ensure a sterile surface. - Sleep and rest areas will be well ventilated - Smoking and vaping are strictly prohibited anywhere on the service premises.
Furniture and equipment	- Bassinets are not to be on the service premises and must not be used under any circumstance (regulation 84D) - Infants/babies must not sleep in a capsule, pram, rocker or bouncer. If they fall asleep in these pieces of equipment transfer the infant/baby to a cot. - Weighted blankets are not to be utilised for sleep times. - All plastic wrapping from mattresses will be removed prior to a baby using it Centre Director/Responsible Person will: - ensure each cot has a firm tightly fitting mattress that meets the Australian and New Zealand Safety Standard AS/NZS 2172. - ensure adequate number of evacuation cots are on the service premises - ensure the sleep products meet mandatory standards, and requirements for sleep and bedding - refer to the Australian Competition and Consumer Commission and/or Product Safety Australia for further information - ensure infant sleep products and inclined non-sleep products are supplied with safety information on the use of the product and warning labels affixed to the product during its lifecycle at the service - ensure air conditioning units are regularly maintained. Filters are to be cleaned if there is an infectious outbreak in the nursery that may spread through the air conditioning units, otherwise a regular routine will be adhered to. Educators will: - ensure infants are placed to sleep on a firm mattress that fits tightly in the cot - ensure cots are arranged a safe distance from heaters, electrical appliances and hanging cords or string. - ensure cots sides are securely locked into place each time a cot is in use. - ensure supervision windows are kept clear to allow safe supervision of sleeping children
Training and staff knowledge	Staff will be required to read and acknowledge the Sleep and Rest Policy and Procedure as well as the Sleep and Rest Risk Assessment specific to the room they are rostered to

- If required, staff will undertake specific training to assist with the individual health care needs of a child in relation to sleep and rest
- The St Nicholas quick reference visual guide poster will be displayed at the entrance to all cot rooms, and new staff shown the location/s

4. Roles and Responsibilities

Role	Responsibility
Approved Provider	• Ensure that the obligations under the <i>Education and Care Services National Law</i> and <i>National Regulations</i> are met. • Take reasonable steps to ensure that St Nicholas staff members, educators and visitors follow the policy and procedures
Centre Director Responsible Person	• Induct new St Nicholas team members on best practices for children's sleep and rest. • Support St Nicholas team members to engage in safe sleep training • Ensure each child has access to sufficient furniture to meet their sleep and rest requirements • Provide information to families regarding safe sleep and rest practices as required • Provide information regarding St Nicholas Sleep and Rest Policies and Procedures to parents/guardians • Take reasonable steps to ensure that the policy and procedures are current, reviewed regularly, and communicated to educators, staff and stakeholders • Take reasonable steps to inform and support educators and staff of their responsibilities in implementing the policy and procedures at all times • Guide and mentor educators and staff to be able to follow the policy and procedures
St Nicholas Staff Educators	• Adhere to St Nicholas policies and procedures
Parent / Guardian	• Understand children's requirement for sleep and rest • Communicate child's sleep and rest patterns with St Nicholas team members • Work in partnership with St Nicholas team members to determine child's sleep and rest requirements in the service. • Be aware of, support and follow the service's policies and procedures

5. Related Documents

Policies and Procedures

- Enrolment and Orientation Policy and Procedure
- Providing a Safe Environment Policy and Procedure
- Interactions with Children Policy and Procedure
- Emergency and Evacuation Policy and Procedure
- Staffing Policy and Procedure
- Administration of First Aid Policy and Procedure

Legislation

- [Education and Care Services National Regulations \(2011 SI 653\) - NSW Legislation](#)
Regulations: 82, 84A, 84B, 84C, 84D, 103, 105, 107, 110, 115
- [Children \(Education and Care Services\) National Law \(NSW\) No 104a of 2010 - NSW Legislation](#)
Sections: 135, 167

Other References

- Sleep and rest Policy and Procedure guidelines. ACECQA, March 2026
- [Sleep and rest legislative requirements | ACECQA](#)
- [Red Nose Australia](#)
- [Home | ACCC Product Safety](#)
- [SUDI, SIDS & fatal sleep accidents | Raising Children Network](#)

Other Related St Nicholas Documents

- St Nicholas Risk Assessment
- St Nicholas Enrolment Form (digital)
- St Nicholas Sleep Check (digital)

6. Definitions

Term	Definition
Sudden Unexpected Death in Infancy (SUDI)	The sudden and unexpected death of an infant under one year of age, where the cause is not immediately obvious.
Sudden Infant Death Syndrome (SIDS)	The sudden and unexpected death of an infant under one year of age, occurring during sleep, which remains unexplained after a thorough investigation, including a post-mortem, death scene examination, and medical history review. It is a subset of SUDI.
Educator	A St Nicholas team member whose primary role is working directly with children

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Staff	A St Nicholas team member whose primary role is not working directly with children, including cooks, support office team members, administration team members, support workers, volunteers
Nominated Supervisor	A person with management or control of an education and care service, responsible for its day-to-day management.

7. Document Review

- 7.1. This Policy will be reviewed when there is a legislative change, organisational change, delegations change, technology change or at least every 1 - 2 years to ensure it continues to be current and effective.

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