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| <b>POLICY/PROCEDURE NAME &amp; REVIEW PROCESS</b> | <b>SAFE SLEEP and REST POLICY</b><br>This policy and procedure has been created to provide all stakeholders with clear guidelines and transparency to our practices and procedures.<br>We welcome feedback and input from all stakeholders at any time and this policy is subject to review based on feedback or due date of annual review.  |
| <b>NATIONAL QUALITY STANDARD</b>                  | <b>QUALITY AREA 2- CHILDREN'S HEALTH AND SAFETY</b><br><b>2.1 Health</b><br>2.1.1 Wellbeing and comfort<br>2.1.2 Health practices and procedures<br><b>2.2 Safety</b><br>2.2.1 – Supervision<br>2.2.2 – Incident and Emergency Management<br>2.2.3 – Child protection  |
| <b>NATIONAL LAW AND REGULATIONS</b>               | 82-Tobacco, drug, and alcohol-free environment<br>84 A- Sleep and rest<br>84 B- Sleep and rest policies and procedures<br>84 C - Risk assessment for purposes of sleep and rest policies and procedures<br>84 D- Prohibition of bassinets<br>103- Premises, furniture, and equipment to be safe, clean and in good repair<br>105- Furniture, materials, and equipment<br>106-Laundry and hygiene facilities<br>107-Space requirements – indoor space<br>110- Ventilation and natural light<br>115- Premises designed to facilitate supervision<br>168-Education and care service must have policies and procedure<br>170-Policies and procedures to be followed<br>171-Policies and procedures to be kept available<br>172- Notification of change to policies or procedures<br>Section 165- Offence to inadequately supervise children<br>Section 167 -Offence relating to protection of children from harm and hazards |
| <b>RELATED POLICIES and RECORDS</b>               | <ul style="list-style-type: none"> <li>▪ Acecqa Safe Sleep and Rest Risk Assessment</li> <li>▪ Cot safety record</li> <li>▪ Maintenance record</li> <li>▪ Medical risk minimisation and communication record.</li> <li>▪ Nursery sleep room record</li> <li>▪ Risk assessment record- Nursery safe sleep and rest</li> <li>▪ Risk assessment record – 2–5-year-old safe sleep and rest</li> <li>▪ Safe sleep cot to bed transition record</li> <li>▪ Sleep record 2- 5</li> <li>▪ Sleep room check record 2- 5-year-old</li> <li>▪ Safe sleep and rest procedure - Nursery</li> <li>▪ Safe sleep and rest procedure older children</li> </ul>  |
| <b>SCOPE OF POLICY</b>                            | This policy applies to all children, staff, staff, families, management, students, volunteers, and visitors at our service.  |
| <b>AIM OF POLICY</b>                              | To ensure that our service has strong guidelines, procedures, and practices in place regarding meeting regulation and red nose safe sleeping advice by providing safe sleep and rest procedures and opportunities to meet each child's needs. To ensure that all children who attend our service are safe and protected. Our aim is to provide a clear policy, implement the policy, support practices relating to the policy, train staff regarding the policy and maintain and update the compliance of the policy for all our stakeholders.   |
| <b>SERVICE IMPLEMENTATION</b>                     | The Education and Care Services National Regulations require policies and procedures to be in place, in particular, for sleep and rest for children. Our policies and procedures are based on current research and recommended evidence-based principles and guidelines from <a href="#">Red Nose</a> (formerly SIDS and Kids)   |

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and is considered the recognised national authority on safe sleeping practices for infants and children.

**Red Nose states:** *A safe sleeping environment means that all potential dangers have been removed, and the baby is sleeping in a safe place. The ideal place for a baby to sleep is in a safe cot, on a safe mattress, with safe bedding in a safe sleeping place, both night and day.*

*Sleep is essential for baby and toddler growth and learning. As with all areas of development, there are large differences in children's need for sleep, rest, and relaxation. Children of the same age can have quite different sleep patterns and sleep needs.*

*In the first 12 months, when there is a risk of sudden unexpected death in infancy (SUDI), including sudden infant death syndrome (SIDS), a key concern is to ensure that sleep environments are safe.*

*This requires attention to the baby's sleep positioning, the sleep environment, and supervision.*

*Maintaining regular sleep patterns supports healthy development and learning for all babies and toddlers.*

*Consideration of ways to support a sufficient amount and regularity of sleep for children in early childhood education and care (ECEC) services is important. Central to this goal is working in partnership with parents through ongoing two-way communication about sleep and rest needs.*

[Meeting children's sleep, rest and relaxation needs babies and toddlers \(earlychildhood.qld.gov.au\)](https://earlychildhood.qld.gov.au/Meeting-childrens-sleep-rest-and-relaxation-needs-babies-and-toddlers)

#### Implementation

- Our commitment is always to the safety of the child and with that in mind nominated supervisor and staff will regularly review and update sleep and rest policies and procedures to ensure they are maintained in line with best practice principles and guidelines.
- Staff will record and share child/rens sleep with families on the **nursery sleep room record** and, on the Sleep, **room check record 2- 5-year-old**. The **sleep record 2- 5** can be used in conjunction with the sleep room check record however this merely records that a child has slept or has completed quiet activities and is not a substitute for physically checking children whilst sleeping. It is important to note that since the implementation of New legislative requirements October 2023 that it is best practice to physically check a child sleeping and record this process.
- Non-sleepers will be provided quiet activities within the room in an area away from children who are sleeping.
- A quiet place will 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 staff across the service should ensure staff are able to adequately supervise sleeping and resting children at all times.
- Staff will check sleeping children at regular intervals, and ensure 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.
- Staff will ensure that children who **do not** wish to sleep are provided with alternative quiet activities and experiences, while those children who **do** wish to sleep can do so, without being disrupted.
- Staff will ensure that if a child requests a rest, or if they are showing clear signs of tiredness, regardless of the time of day, there will be a comfortable, safe area available for them to rest.
- Staff will acknowledge and respond to children's cues for sleep (e.g., yawning, rubbing eyes, disengagement from activities, crying, decreased ability to regulate behaviour and seeking comfort from adults).
- Staff will avoid using settling and rest practices as a behaviour guidance strategy because children can begin to relate the sleep and rest environment, which should be calm and secure, as a disciplinary setting, staff must minimise any distress or discomfort.
- Staff understand that younger children (especially those aged 0–3 years) settle confidently when they have formed bonds with familiar carers.

#### Babies and Toddlers

*"A safe sleeping environment means that all potential dangers have been removed, and the baby is sleeping in a safe place. The ideal place for a baby to sleep is in a safe cot, on a safe mattress, with safe bedding in a safe sleeping place, both night and day" (Red Nose)*

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The risk of sudden infant death syndrome (SIDS) will be minimised by following practices and guidelines:

#### **Sleep and Rest Time Procedure - Nursery**

- Staff will prepare room according to cot room preparation as per red nose guidelines.
- Babies must have clean faces and hands and have a nappy change prior to rest time unless they have fallen asleep prior to this.
- All head coverings, amber necklaces and jewellery are removed.
- No baby will be permitted to sleep in a pram, rocker, or bouncer. If they fall asleep in these pieces of equipment, staff will transfer the baby to a cot.
- No bassinet will ever be used in the service for an infant to sleep in.
- Staff will ensure that the cot is checked that it is closed and in place and secure after a baby is placed in the cot.
- Staff will initially place baby on their back to sleep but allow them to find their own sleeping position. Once a baby has been observed to repeatedly roll from back to front and back again on their own, they can be left to find their own preferred sleep or rest position (this is usually around 5–6 months of age).
- If a medical condition exists that prevents a baby from being placed on their back, the alternative practice should be confirmed in writing with the service, by the child's medical practitioner and our practices for a medical condition will be followed and considered when making a decision regarding the direction.
- Babies over four months of age can turn over in a cot. When a baby is placed to sleep, staff should check that any bedding is tucked in secure and is not loose. Babies of this age may be placed in a safe baby sleeping bag (i.e., with fitted neck and arm holes, but no hood).
- Only one child per cot is permitted siblings cannot sleep together.
- Babies aged younger than 5–6 months, and who have not been observed to repeatedly roll from back to front and back again on their own, should be re-positioned onto their back when they roll onto their front or side.
- Babies or young children should not be moved out of a cot into a bed too early; they should also not be kept in a cot for too long.
- When a young child is observed attempting to climb out of a cot, and looking like they might succeed, it is time to move them out of a cot. This usually occurs when a toddler is between 2 and 3 ½ years of age but could be as early as 18 months.
- Any transition from cot to bed will be discussed with parents prior to implementation. Nominated supervisor will in collaboration with Lead educator will conduct a meeting with parent/s/guardian/s and if they are happy to proceed a **safe sleep cot to bed transition record** will be completed detailing the meeting minutes and confirmation or denial of the transition.
- No baby will be placed in a cot with a bottle or drink.
- When requested by a parent / guardian, a dummy can be offered during sleep routines. If a dummy falls out of a baby's mouth during sleep, it should NOT be re-inserted and must be removed from the cot.
- Educators must conduct 10-minute sleep checks throughout baby's rest and or sleep time. They must physically enter the room and check the child's breathing and the document on the **nursery sleep room record**.
- If hazards are identified, lodge a report as instructed in the service's policies and procedures for the maintenance of a child safe environment on the service **maintenance record**.

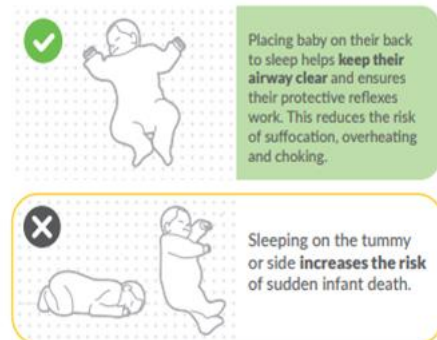
#### **Cot room preparation**

- Cots, bedding equipment and accessories must meet current Australian Standards.
- Cots must be spaced allowing educators to move with ease between and around cots and reduce the risk of cross infection.
- All educators must ensure that the cot room is clear of any equipment and not used for any form of storage.
- Cots must be made as per Red Nose practice: all bottom and top sheets must be tucked in so that they are not loose.
- At no time should a baby's face or head be covered. To prevent a baby from wriggling down under bed linen, they should be positioned with their feet at the bottom of the cot.

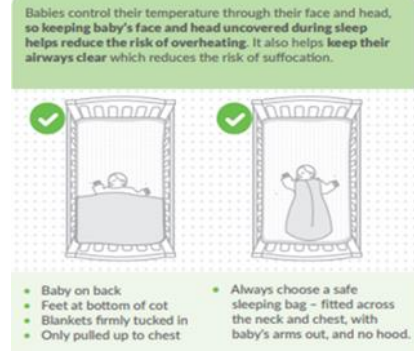
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- Provide children with a safe sleeping environment by ensuring the following: cots are not placed under windows with hanging cords or strings from blinds, curtains, mobiles.
- No electrical devices such as heaters, electric blankets, hot water bottles and wheat bags are in or around cots.
- Ensure that the room temperature and the bedding is appropriate for the current climate.
- Educators will ensure the sleep room is not completely darkened during sleep time and there is enough natural light for educators to observe sleeping babies.
- Educators will ensure that viewing windows into the cot rooms are not obstructed and there is a clear view of all children sleeping.
- Educators will not place anything (e.g., amber teething necklaces) around the neck of a sleeping child.
- The use of teething bracelets (e.g., amber teething bracelets) is also not recommended while a child sleeps.

**1 Always place baby on their back to sleep**



**2 Keep baby's face and head uncovered**



**Sleeping bag procedure**

- A safe baby sleeping bag is constructed in such a way that the baby cannot slip inside the bag and become completely covered.
- The sleeping bag should be the correct size for the baby with a fitted neck, armholes (or sleeves) and **no hood**. Staff will not place a baby in a sleeping bag that does not meet these requirements.
- When using a sleeping bag, staff will ensure that baby is dressed according to the room temperature.
- In cool climates, staff will dress baby in layers of clothing within the sleeping bag.
- If additional warmth is needed, staff will use a single, lightweight blanket over the sleeping bag, ensuring baby's feet are at the end of the cot and the blanket can only reach as far as baby's chest and is tucked in firmly so it cannot ride up and cover baby's head during sleep.
- Remove sleeping bag once baby is awake and ensure baby is redressed for climate once out of the cot room.

**2 Keep baby's face and head uncovered**



**Benefits of sleeping bag**

- They reduce the risk of bedclothes covering baby's face.
- They delay baby rolling onto the tummy during sleep until baby is past the age of peak risk of SIDS.
- They promote back sleeping as the zipper opens to the front.

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- They will keep baby's temperature at a more constant level while sleeping. (all information sourced directly from red nose website) <https://rednose.org.au/section/education>

#### **Procedure for wrapping a baby.**

- The baby is to be wrapped from below the neck to avoid covering the face.
- Use only lightweight wraps such as cotton or muslin.
- The wrap should be firm but not tight.
- When wrapping infant, allow for hip flexion and chest expansion in other words allow for comfortable breathing.
- Dress the baby appropriately so that they are neither underdressed or overdressed – hotter climate singlet and nappy prior to wrapping. Colder climate a lightweight all in one.
- If a baby is wrapped for sleeping, consider the baby's stage of development. Leave their arms free once the startle reflex disappears at around three months of age and discontinue the use of a wrap when the baby can roll from back to tummy to back again (usually four to six months of age).
- Educators must discuss and advise families that they will discontinue wrapping infant when infant is able to turn onto the tummy during sleep.

#### **Rest period procedure – 2–5-year-old children**

- All children will attend bathroom to wash hands and faces prior to rest time.
- Children can make own beds dependant on skill and age and if struggling educators are to assist them.
- Beds will be placed in a designated area onto clean surfaces keeping beds out of walkways, doorways, entries and exits to the classroom.
- Beds will be positioned to allow space between children and to allow educators to move freely around beds and to minimise children's faces being near one another – example head to toe.
- Educators will create a relaxing atmosphere conducive to rest, playing calm music, ensuring adequate air flow preferably fresh air dependent on climate and weather, ensure that the room is not darkened to the point of not being able to see each child clearly.
- Educators will check that children are comfortable for sleep – remove shoes, ensure they are dressed accordingly no heavy jackets or jumpers or hoodies with cords, no jewellery.
- Service will provide sheets if children attend without any.
- Sleep bags with cords must be removed from children's reach at sleep time.
- Educators may sit alongside or nearby children to encourage rest and relaxation, however children will neither be forced to sleep nor prevented from sleeping.
- A child must never be forced to rest on a bed if they choose not to.
- Educators must not pat and or rock children to sleep or physically close their eyes.
- Sleep and rest environments and equipment will be safe and free from hazards.
- Educators will check sleeping children at regular intervals, and ensure 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.
- The children who **do not** wish to sleep are provided with alternative quiet activities and experiences in an area away from children who **do** wish to sleep so that they can without being disrupted.
- Educators will assist children to pack away sheets and bedding and guide children to return belongings to child's locker or bag so that families are not searching for them at end of day.
- Spare sheets or service supplied sheets will be removed and sent to laundry for washing.
- Educators will assist children to redress to their comfort level after sleep.
- Each bed will be sanitised daily and placed back in storage.
- Sleep room check record 2- 5-year-old** will be checked and completed and on display for families to view at end of day.

#### **In the event of an incident involving a child at rest time**

- Immediately administer first aid by an educator with an approved first aid qualification.
- Ensure an educator informs nominated supervisor or responsible person to call an ambulance.
- Ensure another educator/s removes children away from the area and places them in a safe area where they can be monitored.
- As soon as possible, inform the parents of the child about the incident.

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- Nominated supervisor/responsible person or educator will travel with child in ambulance if parents have not arrived.
- An incident, injury, trauma, and illness form will be completed as soon as possible after the event.
- Nominated supervisor should inform the approved provider and department via phone and lodge a serious incident on the NQAITS portal within 24 hours.

#### **In the event of the death of a child or baby**

- In the event of finding a baby or child who is unresponsive or not breathing the staff member trained in emergency first aid response will respond immediately and commence first aid and CPR.
- An ambulance will be called immediately.
- Only a qualified medical practitioner can declare a person is deceased, therefore nominated supervisor should ensure the parents are only advised that the injury is serious and refer them to the hospital where the child has been taken. This information should be provided in a calm and extremely sensitive manner.
- The educator who was administering first aid will give a detailed account of events to the paramedics on their arrival.
- All educators and staff will follow the direction of the paramedical staff.
- The scene is to be left as it is in the event of an investigation.
- An injury, incident trauma and illness record are to be completed by the educator who found the child.
- Witness statements to be collected from all educators involved in the event.
- Call police.
- Nominated supervisor should inform the approved provider and department via phone and lodge a serious incident on the NQAITS portal within 24 hours.

Each member of the team plays an important role in the implementation of each policies guidelines, and they are outlined as below but not limited to the following:

#### **The Approved Provider**

- Will ensure that sleep risk assessments are in place and that any necessary updates to the sleep and rest policies and procedures are completed by staff as soon as practicable after conducting the sleep and rest risk assessment.
- Will ensure staff keep a record of each sleep and rest risk assessment conducted and it will be reviewed annually by nominated supervisor and all staff, however if any issues arise that affect the safety wellbeing or health of the children it will be conducted earlier if required.
- Will ensure that bassinets are not available or used at any time within the service.
- Will ensure that the physical environment is safe and conducive to sleep. This means providing quiet, well-ventilated, and comfortable sleeping spaces. Wherever viewing windows are used, all children should be visible to supervising staff. This means not covering viewing windows with artwork murals or posters.
- Will ensure they provide beds and cots that comply with Australian Standards.
- Will ensure provision of all sleep equipment including resources, cots and bedding will be regularly checked for compliance through ongoing maintenance support for the whole service. Any maintenance issues will be completed by educators on the **maintenance record**.
- Will ensure educators are provided information regarding red nose safe sleeping practices and will support educators with online training if required.
- Will ensure educators conduct 10-minute sleep checks in the nursery room and are provided with **nursery sleep records** to complete this process.
- Will ensure educators record sleep patterns in the older rooms, and they are provided with **Sleep room check record 2- 5-year-old** to record this information.
- Will ensure that safe sleep and rest procedures are in place to guide nominated supervisor and all educators for best practice.
- Will ensure that obligations under the Education and Care Services National Law and National Regulations are met.
- Will ensure they take reasonable steps to ensure that the nominated supervisor, staff, staff, and volunteers follow the policy and procedures.

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- Will ensure they provide the nominated supervisor, staff, staff and volunteers the documentation to perform their role, follow policy, procedure, and document according to regulatory and service requirements.
- Will ensure that adequate induction process is provided to all staff to ensure they have time to read and understand policies and procedures and seek further information if unsure.
- Will ensure that the nominated supervisor and staff are equipped with ongoing professional development and training they require to comply with this policy.
- Will encourage feedback from stakeholders regarding the policy's effectiveness, particularly in relation to identifying and responding to child safety concerns.
- Will ensure the policy is kept up to date with current legislation, research, and best practice.

#### The Nominated Supervisor

- Will ensure that **Risk assessment record- Nursery safe sleep and rest** and **Risk assessment record – 2-5-year-old safe sleep and rest** are conducted and that they make any necessary updates to the sleep and rest policies and procedures as soon as practicable after conducting the sleep and rest assessment and that they keep a record of each sleep and rest risk assessment conducted -it will be reviewed annually by nominated supervisor and all staff, however if any issues arise that affect the safety wellbeing or health of the children it will be conducted earlier if required.

The risk assessment must consider the matters set out below:

- The number, ages and development stages of children being educated and cared for.
- The sleep and rest needs of children at the service (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 required to adequately supervise and monitor children during sleep and rest periods.
- The level of knowledge and training of the 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 any cots, beds and bedding equipment and having regard to the ages and developmental stages of the children who will use them.
- Any potential hazards in sleep and rest areas or on a child during sleep and rest periods.
- The physical safety and suitability of sleep and rest environments, including temperature, lighting, and ventilation.
- Will adhere to and implement the obligations under the Education and Care Services National Law and National Regulations.
- Will ensure they take reasonable steps to ensure that the staff, staff, and volunteers follow the policy and procedures.
- Will ensure they provide the staff, staff and volunteers the documentation to perform their role, follow policy and procedure and ensure they are checking the documentation according to regulatory and service requirements.
- Will ensure that a rigorous recruitment process is completed, and a thorough induction process is provided to all staff to ensure they have time to read and understand policies and procedures and seek further information if unsure.
- Will ensure that the staff are supported with ongoing professional development and training they require to comply with this policy.
- Will encourage feedback from stakeholders and staff regarding the policy's effectiveness, particularly in relation to identifying and responding to child safety concerns.
- Will ensure the policy is kept up to date with current legislation, research, and best practice.
- Will conduct regular staff meetings to address policy compliance with legislation, policy implementation, changes to policy and or collect feedback for annual review of policy.

#### Staff

- Will complete **nursery sleep room record** and **sleep room check record 2- 5-year-old** by physically checking the children and then keeping a record of it. Staff will be aware of all their obligations to safe sleep practices as included in this policy.

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|  | <ul style="list-style-type: none"> <li>Will be aware of <b>risk assessment record- Nursery safe sleep and rest</b> and <b>risk assessment record – 2–5-year-old safe sleep and rest</b> and will adhere to the guidelines outlined in risk assessment and will alert nominated supervisor to any issues that may occur or any breaches of risk assessment and or policy.</li> <li>Will adhere to and implement the obligations under the Education and Care Services National Law and National Regulations.</li> <li>Will ensure they take reasonable steps to follow the service policy and procedures and seek advice or further support if unsure.</li> <li>Will ensure they complete and document any related records regarding the implementation of this policy and practice requirements of the service.</li> <li>Will attend any ongoing professional development, in particular <b>Red Nose Sleep training</b> for nursery staff, staff meetings and training they require to comply with this policy and practice requirements of the service.</li> <li>Will provide feedback to the nominated supervisor or approved provider regarding the policy's effectiveness, particularly in relation to identifying and responding to child safety concerns.</li> <li>Will provide feedback regarding policy review when required.</li> </ul> <p><b>Families</b></p> <ul style="list-style-type: none"> <li>Will work in conjunction with staff regarding safe sleep practices however, if a family's request is contradictory to our practices and procedures, safe sleeping guidelines we will need to have written medical advice to support this. We will then seek approved provider approval. If approved, we will put in place a risk management plan and if required a <b>medical risk minimisation and communication record</b>.</li> <li>If a sleep request from a family contradicts red nose safe sleeping practices and is not supported by a medical condition with written medical advice and contradicts our policy, practices, and procedures then it will be denied.</li> </ul> |
| <b>REGULATION IMPLEMENTATION</b>   | The following procedures outline and support all stakeholders to understand and implement the regulatory guidelines of this policy.  |
| <b>In regard to regulation 82- tobacco, drug, and alcohol-free environment</b>   | <p><b>Approved provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that all staff understand their obligation and commitment to the above through a thorough induction process, comprehensive staff handbook and code of conduct.</li> <li>Appoint a suitable nominated supervisor who will be instructed to monitor and enforce this regulation on behalf of the approved provider.</li> <li>Ensure nominated supervisor will implement processes for staff who smoke and ensure that they adhere to this procedure.</li> <li>Ensure nominated supervisor and staff must not be adversely affected by and/or under the influence of drugs or alcohol while performing work duties or representing the service.</li> <li>Ensure staff who have prescribed medication that may impair their ability to perform their role must advise the nominated supervisor or approved provider.</li> <li>Ensure nominated supervisor and staff who smoke must ensure that it is within their designated breaks only and all measures to rid themselves of smoke smell will be taken after returning to the service – recommend wearing a different top to smoke in and thoroughly wash hands afterwards.</li> <li>Consider any breach of this policy to be a reportable offence and will performance manage staff accordingly.</li> </ul>  |
| <b>In regard to Regulation 84 A- Safe sleep and rest and 84 B- Sleep and rest policies and procedures 84C Risk assessment for purposes of sleep and rest policies and procedures and 84 D Prohibition of bassinets</b> | <p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that they recognise and support that Children have different sleep, rest and relaxation needs and all children do not have the same sleep patterns. As per Standard 2.1 (element 2.1.2) of the National Quality Standard, each child's comfort must be provided for and there must be appropriate opportunities to meet each child's sleep, rest, and relaxation needs.</li> <li>Ensure that the need for children to have sleep and quiet rest time periods throughout the day is met according to their needs and cater for child/ren's need for sleep and rest throughout the day as per their comfort level.</li> <li>Ensure staff will never force children to sleep and will always provide an alternative to the child/ren who can't or don't sleep throughout the day.</li> </ul>   |

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|  | <ul style="list-style-type: none"> <li>Ensure staff recognise and will cater to our senior child/ren as they get closer to school attendance and help to prepare them for this important transition by cutting down the sleep time and just allowing for rest.</li> <li>Ensure staff will work with families when changes to children's sleep patterns occur and will encourage families to discuss with staff so that they can best support the children.</li> <li>Ensure a quiet place will be designated for rest and sleep, away from interactive groups. If designated for rest, the space should allow for a calm play experience.</li> <li>Ensure children's sleep and rest environments will be free from cigarette or tobacco smoke.</li> <li>Ensure safe sleep and rest policies and procedures will outline the following:</li> <li>Ensure a current <b>risk assessment record- nursery safe sleep and rest</b> and a <b>risk assessment record – 2-5-year-old safe sleep and rest</b> is in place and all staff have been notified of the risk assessment and are aware of their obligations.</li> <li>Ensure children's health care and issues are considered and catered for thought sleep and rest time through careful monitoring and recording of children's sleep. The records that will be used are <b>Nursery sleep record</b> and <b>Sleep room check record 2- 5-year-old-</b> these records must be completed by physically checking a child at the designated time. In the nursery room this will be conducted every 10 minutes and older rooms 15 minutes, however if a child is unwell, it is good practice to check more frequently or place unwell child close to an educator in the older room.</li> <li>Ensure educators consider families requests and cultural preferences but at no time will this contradict red Nose safe practices. In the event that it does staff will refer family back to nominated supervisor who will consult approved provider.</li> <li>Ensure that educators will be advised of safe sleep rest policy, procedure, and all supporting documents at the time of induction and throughout the year at staff training and meetings.</li> <li>Ensure safe sleep and rest policy and procedure will be communicated to all families at induction.</li> <li>Ensure that sleep risk assessments are conducted regarding safe sleep practices. They will ensure that they have considered areas such as constant active supervision, age requirements for sleeping, children who are unwell, including the frequency and method of checking on children's health and wellbeing. They will make any necessary updates to the sleep and rest policies and procedures as soon as practicable after conducting the sleep and rest risk assessment and that they keep a record of each sleep and rest risk assessment conducted.</li> <li>Ensure that children who are unwell will be monitored more frequently. In the case of the Nursery check staff will increase their monitoring to every 5 minutes. In the case of older children's staff will be trained to place the unwell child's bed in close view to all educators and will advise staff in room including floats to monitor child at regular intervals checking their breathing and colour.</li> <li>Ensure that staff who have concerns about any unwell child must report to approved provider nominated supervisor if they feel that the child is too unwell and are worried about the child's safety.</li> <li>Ensure that bassinets are never bought into the service or used in the service at any time.</li> </ul> |
| <p><b>In regard to regulation 103- Premises furniture and equipment to be safe clean and in good repair and regulation 105- Furniture materials and equipment.</b></p> | <p><b>Approved provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that cots meet current Australian Standards for Cots (AS/NZS 2172:2003) it should have a label stating this.</li> <li>Ensure mattresses will be single, firm, mattress that fits snugly (within 20 mm of sides and ends) into the cot. The mattress must be flat (not tilted or elevated). Firm mattress must be A firm sleep surface that is compliant with the new AS/NZS Voluntary Standard (AS/NZS 8811.1:2013</li> <li>Ensure that there is no use of cot bumpers or soft bedding.</li> <li>Ensure portable cots will NOT be used except in certain circumstances. However, if being used they must meet the mandatory Australian Standard AS/NZS 2195 for portable cots.</li> <li>Ensure bassinets will NOT be used as they do not meet any Australian standards.</li> <li>Ensure staff complete the cot <b>safety record</b> on a monthly basis and any issues are reported immediately to the nominated supervisor, any issues are repaired, if possible, by maintenance and if unable to be repaired that the cot is replaced.</li> <li>Ensure staff clean mattresses and replace bedding regularly in particular when a new child is utilising the cot or bed.</li> </ul>  |

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|   | <ul style="list-style-type: none"> <li>Ensure there are sufficient number of beds and cots for all children and staff clean mattresses, beds and replace sheets etc on a regular basis in particular when a new child is utilising the cot or bed.</li> <li>Ensure beds will be stored in a clean and hygienic area once they have been cleaned at the end of rest period.</li> <li>Ensure nominated supervisor will provide sheeting to children who do not bring any and will ensure there are sufficient sheets for children.</li> <li>Ensure that maintenance is carried out on a regular basis and nominated supervisor and staff are completing the maintenance schedule record and nominated supervisor is ensuring that <b>maintenance record</b> is being completed.</li> <li>Ensure any maintenance that is recognised to be of a compliant issue must be reported to the approved provider immediately and rectified as soon as possible. Approved provider will instruct nominated supervisor as to how to keep area safe until fixed.</li> <li>Ensure any broken equipment that cannot be fixed is removed and replaced.</li> <li>Ensure regular cleaning is occurring in the service and supply support documentation to record this process.</li> <li>Ensure all staff are responsible for alerting nominated supervisor to the maintenance of equipment and resources.</li> <li>Ensure that nominated supervisor conducts walk throughs of the service to check that building, equipment and resources are compliant and check and collate documentation records.</li> </ul> |
| In regard to regulation 106-Laundry and hygiene facilities              | <p><b>Approved provider will</b></p> <ul style="list-style-type: none"> <li>Ensure all staff have access to laundry facilities at the service.</li> <li>Ensure that these areas must be kept clean, tidy and are not a risk to health and safety. They must not be accessible to children all laundry doors must be locked.</li> <li>Ensure all staff in younger rooms should have access to a soiled clothing bin. This should have a lid that closes fully, all soiled clothing placed in a plastic bag in the bin with child's name on bag, be out of reach of children and the nominated supervisor should implement a process for families to be made aware of soiled clothing- tags on personal bags/ email alert / notice at sign in etc.</li> </ul>  |
| In regard to regulation 107-Space requirements – indoor space           | <p><b>Approved provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that for each child there is 3.25 square metres of unencumbered space.</li> <li>Ensure a waiver is sought from the regulatory authority especially in the event of a renovation that will decrease the access of indoor space to the children.</li> <li>Ensure staff be mindful of setting up rooms to allow for children to freely move around the areas.</li> </ul>   |
| In regard to regulation 110- Ventilation and natural light              | <p><b>Approved provider will</b></p> <ul style="list-style-type: none"> <li>Ensure staff understand that open windows and fresh air are to be used if weather permits instead of air conditioners and heating, this will be monitored by nominated supervisor on walk throughs throughout the day.</li> <li>Ensure staff must not control temperatures to suit their needs and if the use of an air conditioner is required, they are set at 24 degrees.</li> <li>Ensure staff will ensure the sleep room and cot room is not completely darkened during sleep time and there is enough natural light for staff to observe sleeping babies and children at all times in particular when monitoring the cot room to check on breathing and colour of skin.</li> <li>Ensure that no posters or paintings are adhered to viewing windows to cot rooms and bathrooms. Clear vision must be available at all times.</li> </ul>  |
| In regard to regulation 115-Premises designed to facilitate supervision | <p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that the dignity and rights of the child is maintained at all times when staff are actively supervising, in regard to bathroom and change tables.</li> <li>Ensure thorough recruitment and induction of all staff is completed and active supervision is discussed at induction.</li> <li>Ensure staff are aware of the role and the complete understanding of active supervision and their obligation to uphold it.</li> <li>Ensure nominated supervisor monitors and supports staff to facilitate active supervision through role modelling and guidance.</li> </ul>  |

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|   | <ul style="list-style-type: none"> <li>Ensure staff will be supported with ongoing training and development if identified support is required.</li> <li>Ensure staff will actively supervise cot rooms, this will mean physically walking into the cot room to check on sleeping babies, check breathing and colour of skin. This will be completed every ten minutes and once checked will be recorded on a <b>nursery sleep room record</b>. Staff will monitor older children sleeping by walking around the room at rest time checking on sleeping children breathing and colour of skin and complete the <b>sleep room record check 2- 5-year-old</b> as per the <b>safe sleep and rest policy</b>.</li> </ul>  |
| <b>In regard to regulation 168- Education and care service must have policies and procedures.</b> | <p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that obligations under the Education and Care Services National Law and National Regulations are met.</li> <li>Ensure they take reasonable steps to ensure that the policy and procedures are current, reviewed regularly and communicated to staff, staff, and stakeholders.</li> <li>Take reasonable steps to inform and support staff and staff regarding their responsibilities in implementing the policy and procedures at all times.</li> <li>Take reasonable steps to ensure that nominated supervisor, staff, staff, and volunteers follow the policy and procedures.</li> <li>Ensure copies of the policy and procedures are readily accessible to nominated supervisor, staff, staff, stakeholders, and volunteers and are available for inspection.</li> <li>Notify families at least 14 days before changing the policy or procedures if the changes will: <ul style="list-style-type: none"> <li>Affect the fees charged or the way they are collected or</li> <li>Significantly impact the service's education and care of children or</li> <li>Significantly impact the family's ability to utilise the service.</li> </ul> </li> <li>Ensure policies and procedures regarding regulatory requirements are in place at the service.</li> <li>Ensure that a suitable Nominated supervisor is in place and will monitor practices and procedures relating to all policies in the service.</li> <li>Ensure policies and procedures are reviewed at least annually and changes are made if required prior to this review.</li> <li>Ensure all stakeholders are involved in the review.</li> <li>Ensure the service is conducive to a child safe environment and guidelines set out in the policy and procedure are clearly outlined.</li> </ul> |
| <b>In regard to regulation 170- Policies and procedures to be followed.</b>                       | <p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that all staff and volunteers are made aware of Regulatory policies and procedures by ensuring that this forms a part of the induction process.</li> <li>Ensure probationary reviews will be conducted once new staff are appointed at the 3- month and 6-month mark to ensure that they are following policy and procedure and to review and revise regulatory policies.</li> <li>Ensure staff meetings will be conducted on a regular basis to allow for review of policy and procedure and further training and revision of procedural practices in relation to policy and procedure.</li> <li>Ensure annual review and revision of policies and procedures will be conducted, and all staff will be given the opportunity for input.</li> </ul>   |
| <b>In regard to Regulation 171- Policies and procedures to be kept available.</b>                 | <p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure that policies and procedures are available to all staff and the location and availability will form a part of the induction process.</li> <li>Ensure policies will be available on request for all staff members to have access when required.</li> <li>Ensure policies will be available when required for staff members to download copies and/or print out if required in order to complete assignments or to form part of their research and/ or update their knowledge.</li> <li>Ensure policies will be available for all stakeholders when requested and when updating.</li> </ul>   |
| <b>In regard to Regulation 172- Notification of change to policies or procedures</b>              | <p><b>Approved Provider will</b></p> <ul style="list-style-type: none"> <li>Ensure staff meetings will be conducted on a regular basis to allow for review of policy and procedure, provide further training and allow for input if required in relation to policy and procedure.</li> </ul>   |

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|  | <ul style="list-style-type: none"> <li>Ensure stakeholders will be invited to provide feedback for policies and procedures at any time, not just on annual review but will also be invited to add feedback at review time or after an event that may require change to policy or procedure.</li> <li>Ensure policies and procedures will be emailed or put on display in the foyer for stakeholders to have the ability to provide feedback.</li> <li>Ensure feedback will be considered from stakeholders and educators and may result in a change in policy.</li> <li>Ensure policy and procedure may be changed at any time if there has been an incident in the service that has required a change to be implemented for the safety and health of children and or educators.</li> <li>Ensure in the event of a change to a policy after feedback or a situation that occurs, we will provide 14 days' notice to all stakeholders before the change takes effect.</li> </ul>   |
| <b>LAW IMPLEMENTATION</b>  | The following laws and procedures outline and support all stakeholders to understand and implement the regulatory guidelines of this policy.  |
| <b>In regard to Section 165- Offence to inadequately supervise children.</b>                       | <p><b>Approved provider and Nominated supervisor</b></p> <ul style="list-style-type: none"> <li><b>Approved Provider</b> will ensure that all children being educated and cared for by the service are adequately supervised at all times that the children are in attendance of the service. Penalty: \$11 400, in the case of an individual. \$57 400, in any other case.</li> <li><b>Nominated supervisor</b> will ensure that all children being educated and cared for by the service are adequately supervised at all times that the children are in attendance of the service. Penalty: \$11 400.</li> </ul> <p><b>Approved provider and Nominated supervisor must ensure the following:</b></p> <ul style="list-style-type: none"> <li>Educator to child ratios is kept at all times considering the proficiency of staff, ability of staff to respond in a crisis and read cues of children playing.</li> <li>Rostering is crucial in ensuring that there is a balance of competent staff to guide and support less competent staff.</li> <li>Staff are actively involved with children knowing where children are at all times and how many children are in their care.</li> <li>Approved provider or nominated supervisor will observe staff abilities to adapt their levels of supervision based on the age of the children in their care.</li> <li>Sleeping children will be adequately supervised and monitored and all results of this monitoring will be recorded on the <b>nursery sleep room check record</b> and for the older rooms will be recorded on the <b>sleep room check record 2–5-year</b>.</li> <li>Children will be supervised at all times in bathrooms and staff will follow nappy change procedure when attending to babies' nappies. Approved provider and or nominated supervisor will conduct nappy change checks regularly and monitor all activities throughout the service via walk throughs, audits, camera surveillance and active supervision role modelling.</li> <li>Staff will alert other members of staff if they need to leave the supervision area for any reason and approved provider and nominated supervisor will be responsible for monitoring this process</li> </ul> |
| <b>In regard to Section 167- Offence relating to protection of children from harm and hazards.</b> | <p><b>Approved Provider and Nominated Supervisor</b></p> <ul style="list-style-type: none"> <li><b>Approved Provider</b> must ensure that every reasonable precaution is taken to protect children being educated and cared for by the service from harm and from any hazard likely to cause injury. They must have the service must have policies and procedures in place to support the protection of children from harm and hazards, including health and safety matters. Penalty: \$11 400, in the case of an individual, \$57 400, in any other case.</li> <li><b>Nominated supervisor</b> must ensure that every reasonable precaution is taken to protect children being educated and cared for by the service from harm and from any hazard likely to cause injury. Penalty: \$11 400.</li> </ul> <p>All methods of precaution must be implemented in the form of safety checks and recorded and monitored by approved provider or nominated supervisor. Such as the following:</p> <ul style="list-style-type: none"> <li>Monitoring sleeping children and all results of this monitoring will be recorded on the <b>nursery sleep room check record</b> for the nursery cot room and for the older rooms will be recorded on the <b>sleep room check record 2–5-year</b>.</li> <li>Daily safety checks of the environment and equipment and regular checking that the checks are being completed.</li> </ul>  |

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|  | <ul style="list-style-type: none"> <li>Regular walk throughs from approved provider or nominated supervisor to check on compliance and staff behaviours.</li> <li>Secure storage of hazardous products including chemicals.</li> <li>Thorough maintenance process and implementation of repairs to equipment.</li> <li>Risk assessments for all areas of the service including for excursions and regular transportation.</li> <li>Purchasing products that meets Australian Standards - for example, cots and playground equipment and softfall.</li> <li>Chemical data sheets and correct training of all staff in chemical usage, safety plugs in electrical outlets and careful placement of electrical equipment.</li> <li>Adequate protection from environmental elements such as equipment placement and use of age-appropriate resources, weather, sun protection and adequate supervision.</li> <li>Procedures for releasing children only into the care of authorised persons and ensuring that all staff are aware of the process.</li> <li>The implementation of ongoing safety should be conducted regularly through the review of risk assessments to identify potential hazards and strategies to protect children. The National Law does not require services to eliminate all risk and challenge from children's play or environments.</li> </ul>   |
| <b>CONTINUOUS IMPROVEMENT</b>                          | <p>We are dedicated to the ongoing improvement of our practices and procedures through the following actions:</p> <ul style="list-style-type: none"> <li>Conducting regular reviews and updates of this policy with all stakeholders.</li> <li>Actively seeking feedback from children, families, and staff members.</li> <li>Providing targeted skill development and training for staff when areas for improvement are identified or when gaps in policy and procedure implementation are observed.</li> </ul>   |
| <b>KEY TERMS</b>                                       | <ul style="list-style-type: none"> <li><b>ACECQA</b> – Australian Children's Education and Care Quality Authority. The independent national authority that works with all regulatory authorities to administer the National Quality Framework, including the provision of guidance, resources, and services to support the sector to improve outcomes for children.</li> <li><b>CPR</b>- cardiopulmonary resuscitation is a first aid technique that can be used if someone is not breathing properly or if their heart has stopped.</li> <li><b>NQAITS portal – National Quality Agenda It System</b> – is an online portal for approved providers or nominees to lodge changes or alerts to the regulatory authority.</li> <li><b>Sudden and Unexpected Death in Infancy (SUDI)</b> - A term used to describe the sudden and unexpected death of a baby for which the cause is not immediately obvious.</li> <li><b>Sudden Infant Death Syndrome (SIDS)</b>- The sudden and unexpected death of an infant under one year of age with an onset of a fatal episode occurring during sleep, which remains unexplained after a thorough investigation, including performance of a complete autopsy and review of the circumstances of death and the clinical history.</li> <li><b>Stakeholder</b> - a person or group of people who have an interest in a business, a person such as an employee or customer. They have a sense of responsibility toward it and an interest in its success.</li> </ul> |
| <b>WE GRATEFULLY ACKNOWLEDGE THE FOLLOWING SOURCES</b> | <ul style="list-style-type: none"> <li>Australian Children's Education &amp; Care Quality Authority. ACECQA</li> <li>Code of Ethics</li> <li>Education and Care Services National Regulations.</li> <li>Education and Care Services National Law Act 2010.</li> <li>Guide to the Education and Care Services National Law and the Education and Care Services National Regulations.</li> <li>Guide to the National Quality Framework.</li> <li>Kidsafe <a href="https://kidsafe.com.au/">https://kidsafe.com.au/</a></li> <li>Meeting children's sleep, rest and relaxation needs - <a href="https://eprints.qut.edu.au/114096/3/114096c.pdf">eprints.qut.edu.au/114096/3/114096c.pdf</a></li> <li>National Quality Standard.</li> <li>Red nose website: <a href="https://rednose.com.au/">https://rednose.com.au/</a></li> <li>Safe sleep and rest practices - <a href="https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safesleep-and-rest-practices">www.acecqa.gov.au/resources/supporting-materials/infosheet/safesleep-and-rest-practices</a></li> <li>Sleep health and sleep development - <a href="https://earlychildhood.qld.gov.au/aboutUs/Documents/factsheetsleep-health.pdf">earlychildhood.qld.gov.au/aboutUs/Documents/factsheetsleep-health.pdf</a></li> </ul>   |

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- Sleep learning for early education professionals - [earlychildhood.qld.gov.au/about-us/publicationsand-research/sleep-learning-for-early-education-professionals](http://earlychildhood.qld.gov.au/about-us/publicationsand-research/sleep-learning-for-early-education-professionals).
- United Convention on the Rights of the Child

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