

# WSK RELAXATION AND SLEEP POLICY

QUALITY AREA 2 | ELAA VERSION 1.0



## PURPOSE

This policy will provide clear guidelines for the implementation of safe rest, relaxation and sleep practices that meet the individual needs of children attending Wilson Street Kindergarten.



## POLICY STATEMENT

### VALUES

Wilson Street Kindergarten is committed to:

- providing a positive and nurturing environment for all children attending the service
- allowing children to be actively involved in decision making, to provide an environment that encourages them to reach their potential
- providing a safe environment where children feel comfortable and safe to play, talk, or relax
- children's safety and wellbeing will be fostered through responsive relationships, engaging experiences and a safe and healthy environment.
- consulting with parents/guardians about their child's individual relaxation and sleep requirements/practices, and ensuring practices at the service are responsive to the values and cultural beliefs of each family
- its duty of care (*refer to Definitions*) to all children at Wilson Street Kindergarten, and ensuring that adequate supervision (*refer to Definitions*) is maintained while children are sleeping, resting or relaxing
- complying with all legislative requirements, standards and current best practice and guidelines, including recommendations by Red Nose (*refer to Sources*).

### SCOPE

This policy applies to the approved provider, persons with management or control, nominated supervisor, persons in day-to-day charge, early childhood teachers, educators, staff, students, volunteers, parents/guardians, children, and others attending the programs and activities of Wilson Street Kindergarten.

RESPONSIBILITIES	Approved provider and persons with management or control	Nominated supervisor and persons in day-to-day charge	Early childhood teacher, educators and all other staff	Parents/guardians	Contractors, volunteers and students
R indicates legislation requirement, and should not be deleted					
Ensuring that obligations under the <i>Education and Care Services National Law</i> and <i>National Regulations</i> are met ( <i>Regulation 81</i> )	R	R	√		√

Ensuring all educators, staff and volunteers comply with the recommendations of Red Nose in relation to safe sleeping practices for children ( <i>refer to Sources</i> )	R	√	√		√
Ensuring educators receive information and induction training to fulfil their roles effectively, including being made aware of the sleep and rest policies, their responsibilities in implementing these, and any changes that are made over time	R	√			
Taking reasonable steps to ensure the sleep/rest needs of children at the service are met, with regard to the age of children, developmental stages and individual needs ( <i>Regulation 81(1)</i> )	R	√	√		√
Ensuring the premise, furniture and equipment are safe, clean and in good repair ( <i>Regulation 103 and National Law: Section 167</i> )	R	R	√	√	√
Ensuring that rooms used for sleep and relaxation are well ventilated; have adequate natural light; and are maintained at a temperature that ensures the safety and wellbeing of children ( <i>Regulation 110</i> )	R	√	√		√
Ensuring sleep and rest environments are free from cigarette, e-cigarette, or tobacco smoke ( <i>Regulation 82</i> )	R	√	√		√
Ensuring adequate supervision of children sleeping and resting, being within sight and hearing distance and are monitoring visually checking the child's breathing and the colour of the child's lips and skin tone ( <i>National Law 165</i> )	R	R	√		√
Developing relaxation and sleep practices that are responsive to: <ul style="list-style-type: none"> <li>• the individual needs of children at the service</li> <li>• parenting beliefs, values, practices and requirements</li> <li>• the length of time each child spends at the service</li> <li>• circumstance or events occurring at a child's home</li> <li>• consistency of practice between home and the service</li> <li>• a child's general health and wellbeing</li> <li>• the physical environment, including lighting, airflow and noise levels</li> </ul>	R	√	√		√
Ensuring that hammocks, prams and strollers are not used to settle children to sleep	R	√	√		√
Conducting regular safety checks of equipment used for sleeping/resting, such as cots and mattresses ( <i>Regulation 103 and National Law: Section 167</i> )	R	√	√		√
Removing any hazards identified in the child's resting or sleeping environment and informing the approved provider, as soon as is practicable	R	√	√		√
Ensuring that any hanging cords, mobiles, curtains and blinds are inaccessible to children who are resting or sleeping	R	√	√	√	√
Ensuring that artificial heating, such as heat bags and hot-water bottles, is not used to provide warmth		√	√		√
Ensuring that each child has their own bed linen, and that the <i>Hygiene Policy</i> and procedures are implemented for the cleaning and storage of cots, mattresses and linen		√	√		√

Ensuring that there is adequate space to store bedding in a hygienic manner ( <i>refer to Hygiene Policy</i> )	R	√	√		√
Ensuring compliance with WorkSafe Victoria’s Children’s services – occupational health and safety compliance kit ( <i>refer to Sources</i> ), including in relation to staff lifting children into and out of cots	R	√	√		√
Regularly reviewing practices to ensure compliance with the recommendations of Red Nose in relation to safe sleeping practices for children ( <i>refer to Sources</i> )	R	√	√		√
Providing information and training to ensure staff are kept informed of changing practices in relation to safe sleep practices for children	√	√			
Providing information to families about the service’s relaxation and sleep practices	√	√	√		√
Ensuring parents/guardians are consulted about appropriate relaxation and sleep practices for their child	√	√	√	√	√
Educating families about evidence-based safe sleeping practices	√	√	√	√	√
Assessing whether there are exceptional circumstances for alternative practices where family beliefs conflict with current recommended evidence-based guidelines for safe sleeping practices, seek written support from a medical practitioner and develop a risk management plan	R	√	√	√	√
Implementing the documented sleep regime and risk management strategies where in exceptional circumstances family beliefs conflict with current recommended evidence-based guidelines for safe sleeping practices	R	√	√	√	
Providing a written medical report if their baby/child is not to be placed on their back during sleep. Parents/guardians must communicate alternative resting practices to staff.				√	
Ensuring the educational program provides opportunities for each child to sleep, rest or engage in appropriate quiet play activities, as required	R	√	√	√	√
Ensuring that resting and sleeping practices are not used as a behaviour guidance strategy ( <i>refer to Interactions with Children Policy</i> )		√	√		√
Providing a range of opportunities for relaxation throughout the day		√	√		√
Supervising children displaying symptoms of illness closely, especially when resting or sleeping ( <i>refer to Incident, Injury, Trauma and Illness Policy</i> )		√	√		√
Documenting and communicating children’s rest and sleep times to co-workers during shift changes		√	√		√
Developing communication strategies to inform parents/guardians about their child’s rest and sleep patterns, including times and length of sleep		√	√	√	√
Encouraging children’s independence and assisting children with dressing as needed.		√	√		√



## BACKGROUND AND LEGISLATION

### 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 Early Years Learning Framework* (EYLF) and the *Victorian Early Years Learning and Development Framework* (VEYLDF) include a focus on social, emotional, spiritual and physical wellbeing and health. Development Outcome 3 in both framework documents refers to a child's ability to take increasing responsibility for their own wellbeing. One of the indicators for this capacity is that children "recognise and communicate their bodily needs (for example thirst, hunger, rest, comfort, physical activity)". The EYLF suggests that to promote this, educators should:

- consider the pace of the day within the context of the community
- provide a range of active and restful experiences throughout the day, and support children to make appropriate decisions regarding participation.

Holistic approaches recognise the importance of physical, mental and spiritual wellbeing. Educators who provide a range of active and restful experiences throughout the day support children's individual requirements for health, nutrition, sleep, rest and relaxation.

Employers have a responsibility under the *Occupational Health and Safety Act* to provide a safe and healthy working environment. This duty extends to others present in the workplace, including children and volunteers. Providing a safe sleeping environment for children at the service includes complying with current Australian/New Zealand standards in relation to equipment, such as cots and mattresses (*refer to Sources*).

### LEGISLATION AND STANDARDS

Relevant legislation and standards include but are not limited to:

- Australian Consumer Law and Fair-Trading Act 2012
- Australian Consumer Law and Fair-Trading Regulations 2012
- Australian/New Zealand Standard – Cots for household use – Safety Requirements (AS/NZS 2172:2010)
- Australian/New Zealand Standard – Cots for day nursery, hospital and institutional use – Safety Requirements (AS/NZS 2130:1998)
- Education and Care Services National Law Act 2010
- Education and Care Services National Regulations 2011
- National Quality Standard, Quality Area 2: Children's Health and Safety
- Occupational Health and Safety Act 2004

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: [www.legislation.vic.gov.au](http://www.legislation.vic.gov.au)
- Commonwealth Legislation – Federal Register of Legislation: [www.legislation.gov.au](http://www.legislation.gov.au)



## DEFINITIONS

The terms defined in this section relate specifically to this policy. For regularly used terms e.g. Approved provider, Nominated supervisor, Notifiable complaints, Serious incidents, Duty of care, etc. refer to the Definitions file of the PolicyWorks catalogue.

**Red Nose:** (formerly SIDS and Kids), the recognised national authority on safe sleeping practices for infants and children (refer to Sources)

**Relaxation:** Relaxation or other activity for bringing about a feeling of calm in your body and mind

**Rest:** A period of inactivity, solitude, calmness or tranquillity, and can include a child being in a state of sleep.

**SIDS (Sudden Infant Death Syndrome):** The sudden and unexpected death of an infant under one year of age with an onset of a fatal episode occurring during sleep, that remains unexplained after a thorough investigation, including performance of a complete autopsy and review of the circumstances of death and the clinical history.

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## SOURCES AND RELATED POLICIES



### SOURCES

- Australian Children’s Education & Care Quality Authority, *Safe sleep and rest practices*: <https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safe-sleep-and-rest-practices>
- Australian Competition & Consumer Commission (2016), *Consumer product safety – a guide for businesses & legal practitioners*: <https://www.accc.gov.au/publications/consumer-product-safety-a-guide-for-businesses-legal-practitioners>
- *Belonging, Being & Becoming – The Early Years Learning Framework for Australia* (EYLF): <https://www.acecqa.gov.au/nqf/national-law-regulations/approved-learning-frameworks>
- Current Australian/New Zealand Standards for cots is available on the SAI Global website at: [www.saiglobal.com](http://www.saiglobal.com)
- Red Nose: <https://rednose.org.au/>
- *Victorian Early Years Learning and Development Framework* (VEYLDF): <https://www.education.vic.gov.au/childhood/professionals/learning/Pages/veyldf.aspx>
- WorkSafe Victoria, *Children’s services – occupational health and safety compliance kit*: <https://www.worksafe.vic.gov.au/resources/childrens-services-occupational-health-and-safety-compliance-kit>

### RELATED POLICIES

- Child Safe Environment and Wellbeing
- Hygiene
- Incident, Injury, Trauma and Illness
- Interactions with Children
- Occupational Health and Safety
- Supervision of Children

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## EVALUATION



In order to assess whether the values and purposes of the policy have been achieved, the approved provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service’s policy review cycle, or as required
- notifying all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk (*Regulation 172 (2)*).



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## ATTACHMENTS

- Risk Management Plan
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## AUTHORISATION

This policy was adopted by the approved provider of Wilson Street Kindergarten on 31/08/2023.

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**REVIEW DATE:** 31/08/2026

## Risk Management Plan – Relaxation, Rest and Sleep

Details: Risk Assessment for all groups regarding relaxation, rest and sleep at WSK			
Date(s) Jan 24-Dec 2024	Throughout the year		

Risk assessment					
Activity	Hazard identified	Risk assessment (use matrix)	Elimination/control measures	Who	When
Rest/Sleep	Suitability of staffing arrangements	Low	All educational staff employed at wsk hold a minimum Cert III qualification, the majority hold a Diploma or are a qualified ECT	Staff	At time of employment
Rest/Sleep	Medical knowledge of staff	Low	All educational staff employed at wsk hold a formal qualification in Level 2 First Aid and complete annual training in cpr, asthma and anaphylaxis	Staff	At start of year or when qualification expires
Rest/Sleep	Medical incident	Medium	Children with a medical condition have their own medical kit which is kept in the same room where they rest/sleep. The kit contains their medication, action plan. Each kit has the child's name, photo and dob on	Staff	When child starts ie start of year, reviewed each term

			the outside of the box. Staff review medical situations each term.		
Rest/Sleep	Suitability of staffing	Low	Each group has 3 staff per 24 3YO, 24 3/4YO and 26 4YO children. This allows staff to take a lunch break without the service using lunch time relief cover. This reduces the number of staff on site. All staff hold a WWC or are VIT registered. This is reviewed every 6 months by the HR Manager.	Staff	Throughout year
Rest/Sleep	Privacy and safety	Low	If a staff member is required to change a child's clothes, take them to the toilet they notify their team, the bathroom areas are visible.	Staff	Review at staff mtgs once a term, induction, ongoing
Rest/Sleep	Suitability of rest materials	Low	Families have option to bring a small pillow and blanket for their child to use at rest time, this is kept in a named bag and sent home once a term for washing. The kindergarten has rest mats if required.	Staff/Family	When child starts in the group
Rest/Sleep	Sleep and rest needs of individual children do not follow the child's health care needs, cultural preferences, sleep and rest needs and requests from families about a child's sleep and rest	Medium	Staff to discuss with family/guardian the health, emotional and cultural needs for the child to have sleep and rest	Staff/Family	When child starts in the group, reviewed at start of each term



Plan prepared by	Susan Mulholland		
Prepared in consultation with:	Julie Richards, Marisa Miza, E Bell, P Naidoo		
Communicated to:	All staff members and management		
Venue and safety information reviewed and attached	Yes / No		
<b>Reminder: Monitor the effectiveness of controls and change if necessary. Review the risk assessment if an incident or significant change occurs.</b>			

Risk Matrix						
		Consequence				
		Insignificant	Minor	Moderate	Major	Catastrophic
Likelihood	Almost certain	Moderate	High	High	Extreme	Extreme
	Likely	Moderate	Moderate	High	Extreme	Extreme
	Possible	Low	Moderate	High	High	Extreme
	Unlikely	Low	Low	Moderate	High	High
	Rare	Low	Low	Low	Moderate	High