

### 1.9 Safe Sleep

#### Policy Statement

At Kamelia Kids we recognise that babies and young children need to rest and sleep throughout the day. Parents' and carers' wishes should be respected about their children's sleep requirements, provided that the child's welfare is not compromised, and we will try to accommodate each child's individual needs. It is especially important that babies and young children do have all the sleep they need as *"During sleep there's even more activity and more learning going on in an infant's brain than an adults."* "Karmilloff - Smith (2010)".

#### Procedures

##### Staff training

- All educators will receive training on our Safe Sleep Policy during induction, with follow up at probation and in supervision. They will read the NHS advice on sudden infant death syndrome [Sudden infant death syndrome \(SIDS\) - NHS](#).
- No smoking is permitted on the premises and key persons who smoke/vape will ensure that their clothes and breathe do not smell of smoke when caring for babies or any other children within the nursery.
- All educators will receive training on lifting and carrying babies and young children and manual handling at work to protect their backs, health, and wellbeing e.g. leaning over a cot, carrying babies and young children.

#### Rest and sleep plans

When babies and young children start with us, the Key Person will ask for information regarding sleep routines to develop a sleep plan. This will be regularly reviewed at handovers, received by email, to implement adjustments to the sleep plan.

- Educators will be responsive to individual's needs, and how these needs change will be dependent on parental discussion and agreement in writing and what is best for the individual baby or child.
- Educators will consult with parents and carers regarding how long to try for sleep before stopping and trying again later, usually at handover, a phone call or in writing.
- Educators will consult with parents and carers on how best to put their child to sleep e.g., stroking head, stroking tummy. Educators will also ascertain with parents and carers if babies can roll front to back and back again.

### How much sleep does your baby and young child need?

Babies' and young children's sleep patterns vary. From birth, some babies need more others less. Below shows the average amount of sleep babies and young children need during a 24-hour period, including daytime naps.

#### New-born

Most

new-born babies are asleep more than they are awake. Their total daily sleep varies but can be from 8 hours up to 16 or 18 hours.

#### 3 to 6 months

Some

babies will sleep for 8 hours or longer at night, but not all. By 4 months, they may be spending around twice as long sleeping at night as they do during the day.

#### 6 to 12 months

For babies aged 6 months to a year, night feeds may no longer be necessary, and some babies will sleep for up to 12 hours at night. Teething discomfort or hunger may wake some babies during the night.

### Sleep requirements from 12 months.

- Babies will sleep for around 12 to 15 hours in total after their first birthday.
- Most 2-year-olds will sleep for 11 to 12 hours at night, with 1 or 2 naps in the daytime.
- 3 to 4 years old will need about 12 hours sleep, but this can range from 8 hours up to 14 hours. Some younger children will still need a nap during the day.

### Preparing for Sleep

It is important that each baby and young child is kept safe and comfortable to ensure a restful sleep, by ensuring they have:

- For babies and children under 2 the sleep space should only contain a firm, flat, fitted waterproof mattress and lightweight bedding, which is firmly tucked in around the child below their shoulders to prevent head covering.
- A calm and relaxing transition to sleep e.g., time to allow their food to digest.
- A clean face and hands.
- A dry, clean nappy.
- Loose clean clothing, removing thick clothing and shoes have been removed.
- A dummy can bring enormous comfort and reassurance to babies and young children, especially when they are new to nursery and during rest and sleep times.
- The safest cot is a clear cot. That means removing comforters and soft toys for babies under 12 months. Babbies and children may use sleep comforters aged 12 months and older.
- Poppy and pre-school room to have sleep mats/camp beds ready.

- Sleep music on to set sound e.g., white noise, lullaby. Ensure all music system cables are secure and out of children's reach.
- *Babies under 6 months **must** always have an educator with them in the same room for every sleep and they will be in a cot.*
- *Babies 6 months to 12 months will always have an educator with them in the same room for every sleep and they will be in a cot.*
- *Babies and children 12 months to 24 months will always have an educator with them in the same room for every sleep and they will use sleep mats or coracles.*
- *Toddlers (24 months+) and pre-school children (36 months+) will always have an educator with them in the same room for every sleep and they will use sleep mats or camp beds.*
- *Babies, toddlers and children will always be within sight and hearing of staff when sleeping.*

### Position Sleeping Children

- Babies and children under 2 years are placed down on their back, feet-to-foot in their own separate sleep space on a firm flat surface such as a cot, coracle, camp bed or mattress on the floor.
- Once babies can move from their back to their front and back again by themselves, they can find their own sleeping position. However, continue to place them on their back to sleep.
- Cots, coracle beds, sleep mats and camp beds will be placed away from doors, windows, main walk routes in the room, and radiators to ensure babies and children do not overheat during sleep or in a draught.
- Cots, coracle, sleep mats and camp beds must have room for educators and children to move between them safely and to ensure that babies and children can be clearly seen by educators and CCTV.
- Babies and young children will be positioned in cots, coracle beds, sleep mats and camp beds top to tail - to reduce the risk of spread of infection.
- Some babies have medical conditions that require stomach sleeping. If the parent wishes that their baby be placed on their stomach or side to sleep, they will be asked to provide a letter from the baby's doctor that specifies the sleeping position; this letter will be placed in the child's information file.
- Babies and children **must not** sleep in a nesting ring, car seat, push chairs, buggies, bouncy chair, bean bags.

### Clothing and Bed Covers

- Babies and children **must** not have their heads covered.
- For babies and children under 2 the sleep space should only contain lightweight bedding, which is firmly tucked in around the child below their shoulders to prevent the head from being covered.
- Individual bedding will be used and stored in the child's own sleep bag, labelled with a picture/ name, and stored under sleep mat when in use.
- Bedding to be laundered once per week, or sooner if soiled/dirty.
- Fitted bedding used on all cots, coracles and mats.
- Clean sleep mats and cot mattresses will be used. Sanitizers will be used to clean and ensure they are dry before and after each use.
- A safety approved cot with a firm fitting mattress and tight-fitting sheet will be used. Check The Lullaby Trust for the latest guidance.
- Loose clean clothing, removing thick clothing and shoes.

### Monitoring and Recording

- Babies and young children will not be left to cry themselves to sleep, comfort from the Educator is given.
- A ratio of 1 to 3 is required when babies and 1 to 4 for young children are being taken into the sleep room and soothed to sleep. Educators must ensure that ratio is applied in the sleep room, until all are asleep.
- While babies and young children are sleeping, a level 3 Educator must remain with the children, one in Sunflower and one in Rose room.
- The Educators will check each sleeping child every 5 minutes by: checking for a rising chest, checking breathing, observing colour of skin, looking to ensure child is comfortable but not in a position that may be dangerous, e.g., a baby sleeping face down and checking the temperature of the room.
- If a baby or child is sleeping at any other time a level 3 educator will remain with the child and carry out sleep checks every 5 minutes by: checking for a rising chest, checking breathing, observing colour of skin, looking to ensure child is comfortable but not in a position that may be dangerous, e.g., a baby sleeping face down and checking the temperature of the room.
- The 5-minutes checks will be recorded, including the time they fell asleep and time they woke up and if they tried for a sleep.
- Babies and children should not get too hot or cold. The recommended temperature is 16 - 20c, if outside of this consult with the Nursery or Deputy Nursery Manager. Fans/ AC used to cool the room and the door to Rose room can be opened. If staffed the windows and sensory garden door can be open.
- If a baby or child has an accident at sleep time this must be record and reported as per the accident procedures.

### Travelling

For babies aged 12 months and under that fall asleep whilst travelling:

- They must be transferred to their cot once in the nursery. Hats and extra clothing should be removed as soon as they are in the nursery even if it means waking the baby.

For children aged over 12 months that fall asleep whilst travelling:

- They should, where possible, be transitioned to their own separate sleep space on a clear, flat, firm surface such as a cot or mattress on the floor. Coats and hats should be removed to prevent overheating.
- If a baby or child of any age falls asleep whilst travelling in a car seat, they must be transferred to a separate sleep space as soon as they are in the nursery.

### Emergency

- Should an educator be concerned about a baby or young child, they will immediately call for help from another educator and the Nursery or Deputy Nursery Manager.
- Apply Paediatric First Aid training.
- Call 999 for an ambulance if a baby or child: stops breathing or turns blue, is struggling for breath, is unconscious or seems unaware of what is going on, will not wake up or has a fit for the first time, even if they seem to recover.
- Call parents and or carers.
- The evacuation cot must not be used to sleep babies and must be ready for emergency use.
- Babies and children must not sleep in 'just' a nappy in case of an evacuation.

### Safer Sleep Advice

We follow the guidance of the Lullaby Trust [www.lullabytrust.org.uk](http://www.lullabytrust.org.uk)

While sudden infant death syndrome (SIDS) is most common for infants under 6 months of age, it can occur in children aged between 6-12 months and occasionally in children older than 12 months. SIDS does not always happen in a cot: it can occur wherever an infant is sleeping, and very rarely while an infant is awake. There is no sign of a struggle, or of any distress.

The causes of death are not yet fully understood, although there is a growing knowledge of risk factors associated with it. To reduce the risks, we follow the Lullaby Trust guidance of:

- Put baby to sleep on their back.
- Place baby in their cot in the "feet to foot" position.

- Offer a dummy when baby sleeps - we will not force a baby to take a dummy or put it back in if the baby spits it out. The dummy should be offered for every period of sleep, including daytime naps. If the dummy falls out while baby is sleeping, we will not wake to put it back in. However, if the baby wakes up, we will offer the dummy again. We will not use a neck cord and never coat a dummy in anything sweet. It is recommended that dummies are stopped between 6 and 12 months.

### Calculating the age of a premature baby with regards to SIDS/SUDC

If a baby was born prematurely (before 37 weeks) or weighing less than 2.5kg or 5.5lb, you should follow the safer sleep advice for a year from their due date, rather than when they were born.

### Legal framework

Statutory Framework for the Early Years Foundation Stage

### Further guidance

NHS [Sudden infant death syndrome \(SIDS\) - NHS](https://www.nhs.uk/conditions/sudden-infant-death-syndrome/sids/)

<https://www.nhs.uk/conditions/pregnancy-and-baby/getting-baby-to-sleep/>

Birth to five <https://www.publichealth.hscni.net/publications/birth-five>

Lullaby Trust <https://www.lullabytrust.org.uk/safer-sleep-advice/>

Manual Handling at Work Brief guide

<https://www.hse.gov.uk/pUbns/indg143.pdf>