# Sleeping child policy

Parents will be consulted about their child's sleep routine when they complete the 'All about me 'document on the first visit. Parents will be advised that practice guidance suggests young children under 6 months old should be placed flat on their back to sleep. This minimises the risk of SUDI (Sudden Infant Death) and is better for children's posture. Staff will outline all the sleep arrangements available and agree a plan with the parent.

Sleeping children shall be placed in a clean, quiet, comfortable area on a flat mattress, cot, or sleep basket indoors. Children will not be permitted to sleep in car seats or pushchairs due to the risks this poses to young children and the recommended Sleep Safe Guidance. If a child arrives at nursery asleep in a pushchair or car seat they are to be removed, along with any outdoor clothing and placed on a flatbed as above.

The key worker must ensure all the room staff knows the child's sleep requirements. The child's needs must be reviewed as they grow and develop, and staff updated. As the child moves to another room their sleep routine is to be logged on the 'All about me' document and shared with staff.

No child shall be forced to have a sleep but could be encouraged if tried to have a sleep. Though if not asleep within 10minutes they would return to participate in activities. Likewise, children cannot be kept awake if they are falling asleep. If a parent requests a child to be woken up, we will attempt to wake them up once they have had the appropriate daytime sleep for their age.

However, if a child is still asleep, we would attempt to wake them again after 20 mins periods until the child is ready to wake up

# The NHS provide the following information and guidance

An appropriate day time nap is linked to the usual nighttime sleep routine, the NHS provides the following guidance on total day/night sleep according to age.

Your child's age	Recommended sleep time in 24 hours
Infants 4 to 12 months	12 to 16 hours including naps
Children 1 to 2 years	11 to 14 hours including naps
Children 3 to 5 years	10 to 13 hours including naps

https://www.gosh.nhs.uk/conditions-and-treatments/procedures-and-treatments/sleep-hygiene-children/

Advice can vary regarding nap patterns for children according to there age, the nursery has been able to source the following information and will use this a guide when discussing daytime naps with parents.

### https://what0-18.nhs.uk/parentscarers/sleep

### Parents must be informed if their child has a sleep at nursery.

Regular checks must be made to ensure the sleeping child is safe and well, A member of staff must be in the same room as the sleeping child/ren and in visual and audible contact of the child at all times.

Children's sleep time will be logged on IConnect, each child being checked every 10 minutes. Where staff have access to baby monitors these should be used.

This staff member is responsible for passing information to the next person on duty, and other room members.

All children shall be given clean linen. Mattresses are to be turned weekly.

All bibs should be removed before putting a child down to sleep.

Children should not be allowed to sleep with a bottle in their mouths.

### The following quotes are taken from The Early Years Foundation Stage Document.

- Provision should be made for children who wish to relax to relax or sleep without disturbance.
- Providers must have effective systems to ensure that the individual needs of all children are met.
- You must promote positive attitudes to diversity and differences within all children. Children should be treated as individuals and all children are respected.

### P.S.E.D.

- Self-care indicate their own needs.
- Understand that they can expect others to treat their needs with respect.

## Safe Sleep Guidance

Staff will follow the recommended safe sleep guidance which covers the following points:

- Room temperature for sleeping babies is between 16-20/ degrees.
- Babies under 6 months must sleep in the main nursery room.
- No hats or outdoor clothing when sleeping
- 0-6 months to sleep on their backs at the foot of the cot

- Blankets to be tucked in and only up to chest height
- NO sleeping in car seats or pushchairs
- Staff must NOT smoke in their nursery uniform and fully change their clothes whilst smoking.
  This includes e-cigarettes and vaping. This ensure that children are not subjected to second hand smoke
- If a child usually sleeps with a dummy this should be continued in nursery

Further guidance can be found on the website below.

https://safeguardingchildren.salford.gov.uk/parents-and-carers/safe-sleep/

Reviewed May 2024 - no further updates at this point

This policy was updated on: 4 July and amended on 8 August with the updated NHS guidance 2022

Signed on behalf of the Nursery Mangers: Val Worrall, Joanne Kirk, Angela Jones, Debbie

## Appendix 1

### **Sudden Unexpected Death in Infancy (SUDI)**

### **Frequently Asked Questions:**

- 1. What does Sudden Unexpected Death in Infancy mean?
- 2. How can I reduce the risk of Sudden Unexpected Death in Infancy?
- 3. How much clothing/bedding does baby need?
- 4. Is it safe to sleep baby on a baby bean bag?
- 5. What is the safest way to sleep twins?
- 6. Does dummy use reduce the risk of sudden unexpected death in infancy?
- 7. Are there recommendations for car seat or baby seat use?
- 8. How do I carry baby safely in a sling?
- 9. Check list for safe sleeping.

### Safe Sleeping - FAQ

### 1. What does Sudden Unexpected Death in Infancy (SUDI) mean?

SUDI is a term used to describe the sudden and unexpected death of a baby. SUDI may be the result of a serious illness or a problem that baby may have been born with, but most SUDI deaths occur as a result of either SIDS (sudden infant death syndrome) or a fatal sleep accident.

The only way to find out why a baby has died suddenly and unexpectedly is to perform an autopsy, review the clinical history and to thoroughly investigate the circumstances of death, including the death scene. When no cause can be found for the death it is called SIDS.

### 2. What steps can I take to reduce the risk of Sudden Unexpected Death in Infancy?

Create a safe sleeping environment for babies and young children;

- Put baby on the back to sleep from birth
- Sleep baby with head and face uncovered
- Avoid exposing babies to cigarette smoke before birth and after
- Sleep baby in a safe cot and in a safe environment
- Sleep baby in its own cot or Moses basket in the same room as the parents for the first 6-12 months
- Breastfeed baby

### 3. How much clothing/bedding does baby need?

Babies control their temperature through the face. Sleeping baby on the back and ensuring that the face and head remain uncovered during sleep is the best way to protect baby from overheating and suffocation. Sleeping baby in a sleeping bag will prevent bed clothes covering the baby's face.

If blankets are being used instead of a sleeping bag, it is best to use layers of lightweight blankets that can be added or removed easily according to the room temperature, and which can be tucked underneath the mattress.

When dressing a baby you need to consider where you live, whether you have home heating or cooling and whether it is summer or winter. A useful guide is to dress baby as you would dress yourself – to be comfortably warm, not hot or cold. Ensure that baby is dressed appropriately for the room temperature. A good way to check baby's temperature is to feel baby's chest, which should feel warm (don't worry if baby's hands and feet feel cool, this is normal). Another way to prevent overheating is to remove hats or bonnets from baby as soon as you come indoors or enter a warm car, bus or train, even if it means waking the baby.

#### 4. Is it safe to sleep baby on a baby bean bag?

No. A bean bag, defined as a material sack encasing a large quantity of polystyrene foam beads that is usually a pyramid-shaped sack used for seating, poses a suffocation risk to babies and small children if they inhale the beads. Concern has been raised about the potential of some bean bags being capable of contouring around a baby's face, resulting in a risk of suffocation.

### 5. What is the safest way to sleep twins?

The safest way to sleep twins is to place them in their own cot following the steps to safe sleeping. However, sometimes you may need to sleep twins in the same cot, for example when you are travelling or visiting and there is insufficient room for two cots. If this is the case, place each twin at opposite ends of the cot as this will minimise the risk of one twin covering the face of the other. When the babies are able to move freely around the cot, put them to sleep in separate cots.

#### 6. Does dummy use reduce the risk of sudden unexpected death in infancy?

Some studies have shown that using a dummy at the start of every sleep may reduce the association with SIDS and that stopping or inconsistent use of the dummy increases the association with SIDS.

If parents choose to use a dummy, practitioners should make them aware that:

- If the baby is breastfed that the use of a dummy can undermine breastfeeding especially before at least 6 weeks of age or until breastfeeding has become established.
- It should be offered when settling the baby at **every** sleep episode (the protective factor appears to occur as the baby falls asleep).
- If the dummy falls out of baby's mouth once asleep, do not put back in.
- If your baby does not seem to want the dummy, do not force them.
- Do not coat the dummy in a sweet liquid.
- Always clean and regularly replace dummies.

Try to wean your baby off their dummy by the age of one year.

### 7. Are there recommendations for car seat or baby seat use?

Some studies have shown that some infants, particularly pre-term infants or those with pre-existing health conditions are at risk of respiratory problems and/ or can experience slightly lower levels of oxygen in the blood if left for long periods in car seats. Also being left in a semi-upright position for long periods may place strain on a baby's developing spine.

Practitioners should advise parents that car seats are designed to keep babies safe whilst travelling so therefore should:

- · Remove infants from car seats and place in Moses basket or cot.
- Once inside the nursery or home, transfer baby into a cot or Moses basket and remove any outdoor clothing.
- When travelling on long journeys make regular stops and take baby out of the car seat for breaks.

### 8. How do I carry baby safely in a sling?

Slings are carriers that allow an adult to carry an infant hands-free. The sling straps around the adult's neck, allowing the infant to lie in front of the adult, curved in a C-shape position.

If you choose to carry baby in a sling, at all times ensure that:

- baby's airways are free at all times
- you can see baby's face

Babies can suffocate lying with a curved back with the chin resting on the chest or the face pressed against the fabric of the sling or the wearer's body. At particular risk from these products are babies with a low birth weight, those that were born prematurely, or have breathing issues such as a cold.

#### 9. Checklist for safe sleeping

- 1. Has baby been placed on the back to sleep?
- 2. Is baby sleeping in a safe Moses basket or cot away from hazards?
- 3. Does the cot meet British safety Standards for cots?
- 4. Is the mattress firm?
- 5. Does the mattress fit the cot /Moses basket well?
- 6. Is the mattress clean and in good condition and flat (not titled or elevated)?
- 7. Is baby's face and head uncovered?
- 8. Have any pillows, duvets, lamb's wool, cot bumpers and soft toys been removed?
- 9. If using a baby sleeping bag, does it have a fitted neck, armholes or sleeves and no hood?

- 10. Remember never to sleep baby on a sofa, beanbag, waterbed or pillow?
- 11. If using blankets rather than a sleeping bag, has baby been placed to sleep with feet touching the bottom of the cot /Moses basket with blankets securely tucked in.