



Sleep Policy and procedure

Responsible governors	Children's Learning and Development Committee
Last review date	Autumn 2025
Date of next review	Autumn 2026
The policy is available for staff at:	School offices and shared drive
And for parents/carers at:	School offices

Policy audit

V1, September 2024, Helen Currie, Pauline France. Adapted from Suffolk NHS Guidance for nurseries.

V2, Autumn 2025, Alison Emmett, Helen Currie. Accessibility improved: no tables, logo description, language level decreased; added protocol for iPads

1. Policy statement

- 1.1. Sleeping children must be frequently checked to ensure that they are safe. Being safe includes ensuring that cots and bedding are in good condition and suited to the age of the child, and that babies are placed down to sleep safely in line with the latest NHS safety guidance on [Sudden infant death syndrome \(SIDS\)](#)
- 1.2. Practitioners may also find it helpful to read NHS advice on safety of sleeping children: Reduce the risk of sudden infant death syndrome (SIDS) - NHS (<https://www.nhs.uk/baby/caring-for-a-newborn/sudden-infant-death-syndrome-sids/>)
- 1.3. Before a child starts, we ask all parents or carers to fill in our 'All About Me' form. This includes information about sleep habits. They talk to their child's Key Person about everything on the form. Settling in has two sides. The children, parents, and carers learn about us. We learn about the children and their families. This includes learning about the child's sleep and rest time.
- 1.4. Staff find out about each child's needs, likes, and dislikes. Where possible, we want their rest routine in school to mirror their home life.

2. Safe sleeping guidance

- 2.1. The nursery has a 'Sleep Chart' document for young toddlers. We monitor them every 10/15 minutes during their sleep time. Each time the member of staff in charge checks them, they sign the chart. When older children sleep, we tell their parents or carers and add them to the list for that day.
- 2.2. When children are sleeping/resting a member of staff is present at all times.
- 2.3. Some children have medical conditions, certain emotional needs, or sleep training programmes. The nursery will try to watch these children more closely. Parents or

carers should talk about this with their child's Key Person and the senior teacher (or the assistant headteacher).

- 2.4. We check all children's mouths before they go to sleep.
- 2.5. All play rooms have good ventilation. We do our best to keep room temperatures between 16 and 22°C (NHS guidelines). In summer months this can be hard. We use electric fans to control temperature. There are thermometers in the playrooms to monitor temperatures. This allows staff to report temperature concerns to the school business manager.
- 2.6. Nursery staff will discourage children regularly sleeping in pushchairs and will not put a child to sleep in a car seat.
- 2.7. We check mattresses regularly for any signs of damage. We turn and air them regularly.
- 2.8. We label bedding with the child's name and wash it in the week. Extra bedding is available so soiled bedding can be changed.
- 2.9. STAFF MUST NOT HAVE ANY DEVICE THAT CAN TAKE A PHOTOGRAPH IN THE SLEEP ROOM.

3. Safe sleeping checks: whilst sleeping

- 3.1. Staff check children:
 - That they are sleeping in a safe position
 - That they aren't tangled in a sheet/blanket.
- 3.2. Staff check each child's breathing in one of two ways:
 - They place a gentle hand on the child's chest. This is to feel for movement.
 - They put the back of their hand near the child's mouth. This is to feel for breath.
- 3.3. Staff make sure the children are not hot or cold.

4. Settling sleepers

- 4.1. Before a child starts, we ask all parents or carers to fill in our 'All About Me' form. This includes information about sleep.
- 4.2. Staff find out about each child's needs, likes, and dislikes. Where possible, we want their rest routine in school to mirror their home life.
- 4.3. Some families ask us to help their child settle. Other families ask us to let their child settle themselves.
- 4.4. Families can send in comforters, muslins, dummies, or soft toys from home. This can help. We keep these with the child's personal belongings.
- 4.5. Some families ask us to pat/stroke their child's stomach or back as they settle. Some ask us to stroke the side of their child's face.
- 4.6. While a child settles themselves, a member of staff sits close by.
- 4.7. Some children sleep with a dummy. This can fall out of their mouth while they sleep. We won't put a dummy back in a child's mouth unless they wake.
- 4.8. Some families ask us to give their child milk from a bottle to help them settle. We say no to this.
- 4.9. Sometimes we play soothing music.
- 4.10. Staff attend annual safeguarding training. We often review what are safe ways to comfort a child.

5. Rest time

- 5.1. 'Rest time' is between 12 noon and 1pm. After their midday meal, children either rest or do activities with less physical input. Sometimes a child needs to rest for longer than an hour. When their family agrees, they sleep for longer.

- 5.2. All the play rooms have a 'cosy corner' area. Children snuggle up and rest when they need to. This helps them learn to listen to their bodies.
- 5.3. By age 3, most children tend not to have an afternoon sleep. Some still do. Staff arrange either:
 - they sleep in the main nursery room,
 - they join the 'sleepers' in the 2-year-old room.
- 5.4. Staff talk to families about how their child's sleep / rest routine falls within the nursery day. Children might need to adapt sleep times. There are 2 reasons:
 - so we have enough staff to take care of children's needs
 - so we have enough safe areas to sleep
- 5.5. Nursery staff strive to give children as many learning opportunities as possible. We want to get the balance between rest and play time right. Staff talk to families about this.

end
