

General risk assessment Topic of risk assessment Safe sleep and rest

Under the Education and Care Services National Regulations (National Regulations), education and care services in scope of the National Quality Framework must comply with risk assessment requirements for the sleep and rest of children being cared for at a service.

To comply with regulation 84C of the National Regulations, the Department for Education requires services to:

- undertake a sleep and rest risk assessment at least once every 12 months and as soon as practicable after becoming aware of any circumstances that may affect the safety, health or wellbeing of children during sleep and rest
- consider, as part of the risk assessment, the matters listed in regulation 84C(2) (note these are detailed in the department’s safe sleeping and resting for infants and young children procedure)
- make any necessary updates to services’ sleep and rest policies and procedures as soon as practicable after conducting a risk assessment
- keep a record of each risk assessment.

Educator name:		Date of assessment:	
Educator address:		Review Date:	

Details of topic to be assessed:	Safe day sleep and rest including sleeping environments
<p>Non-negotiable elements of this risk assessment: (determined after the risk assessment):</p> <ul style="list-style-type: none"> • Educators must review their sleep practices and environments regularly to ensure practices are consistent with recommended safe sleep practices. • Refer to the following FDC operational guides: Non-standard hours care and overnight care, Safe sleep and rest practices, Beds, cots, bedding and safe sleep environments. • Model and promote safe sleep practices and provide information to families. 	
<p>Reminder: Monitor the effectiveness of controls and change if necessary. Review the risk assessment if an incident or significant change occurs</p>	

Risk Assessment – please use the [Risk Assessment and Management tool](#) (Risk Matrix page 20) to assess level of risk.

SLEEP AND/OR REST NEEDS OF CHILDREN		
HEALTH CARE NEEDS Do any children have health support needs that impact their sleep or rest at the service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, the health support needs and the relevant measures in place for safe sleep and rest should be documented in an appropriate agreement or care plan and risk management plan. List relevant agreements or plans below or include as attachments.
CULTURAL PREFERENCES Have any families expressed cultural preferences that may impact sleep or rest practices?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, describe the cultural preferences that have been communicated and how the service is addressing them (or if already documented elsewhere, provide as an attachment).
REQUESTS FROM FAMILIES Have any families made requests about a child’s sleep or rest?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, describe the requests that have been made and how the service is addressing them (or if already documented elsewhere, provide as an attachment).
SAFE SLEEPING CHECKLIST		
Safe sleep practices	Infants are placed safely in cots: <ul style="list-style-type: none"> • on their back to sleep • with head and face uncovered • with feet touching the bottom of the cot • with no loose bedding and bedclothes tucked in securely • with no quilts, doonas, pillows, cot bumpers, sheepskins, soft toys or any other items which could pose a suffocation risk 	<input type="checkbox"/> Yes
Sleeping environment	<ul style="list-style-type: none"> • Cots are kept away from hanging cords, mobiles, electrical appliances, and curtains, have an unobstructed gap to enable free movement by an educator, and are positioned away from heaters (to reduce risk of overheating), and are appropriately maintained. • Bed clothes are clean and hygienic. • Sleep and rest environments are smoke-free. • Infants’ amber teething necklaces & bracelets, other necklaces and chains, string beads, hair bands & clips (eg any object that may detach and become a choking hazard) are removed. • Infants are not ‘propped up’ with a bottle to settle unsupervised (as this is a choking risk). 	<input type="checkbox"/> Yes

Prams	<ul style="list-style-type: none"> • Prams are not used unsupervised & are not used as a sleeping environment. Children who fall asleep in such equipment are removed & placed in an appropriate bed, cot or mattress. • No bassinets are present on the service's premises for any reason. 		<input type="checkbox"/> Yes	
Does the service use any of the following sleep and rest equipment?	Cots <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	Do cots comply with the current mandatory Australian Standard for cots (AS/NZS 2172) and portable cots (AS/NZS 2195)?	<input type="checkbox"/> Yes
			Are cots fitted with safe mattresses that are the right size, firm, clean, in good condition and placed flat (not tilted or elevated)?	<input type="checkbox"/> Yes
			To reduce the risk of SUDI, there are no soft or loose bedding, bumpers or soft toys used in cots	<input type="checkbox"/> Yes
			Are cot mattresses compliant with the Australian voluntary standard AS/NZS 8811.1.2013 'Methods of testing infant products – Sleep Surfaces – Test for firmness'?	<input type="checkbox"/> Yes
			Have the cots been assessed as appropriate sleeping surfaces for the developmental stage of the child/ren who use them? (Note that a cot may not be safe for children who can climb over the sides of a cot)	<input type="checkbox"/> Yes
	Dummies <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	Has the dummy been properly cleaned and sanitized?	
			Is the teat of the dummy in good condition?	
			Is the dummy cord, chain or ribbon removed?	
			Are the dummy shields large enough to prevent blocking the airway? Does the dummy shield have ventilation holes to allow airflow?	<input type="checkbox"/> Yes
	Infant wraps <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	Has the service discussed the use of wraps with the relevant child/ren's family, including risks of using wraps?	
Are infants wrapped in accordance with Red Nose safe wrapping recommendations ?			<input type="checkbox"/> Yes	
Infant slings or carriers <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	Has the service discussed the use of slings or carriers with the relevant child/ren's family, including risks of using slings or carriers?		
		If using a sling or carrier for an infant which is at higher risk of injury (ie low birthweight or premature, breathing difficulties, or aged under 4 months) have educators requested evidence of medical consent from the family before using the sling or carrier?	<input type="checkbox"/> Yes	

			If an infant falls asleep when carried in a sling or carrier, are they transferred to a cot?	
	Infant sleeping bag <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes:	Is the sleeping bag the correct size for the infant(s) with a fitted neck, arm holes (or sleeves), and no hood, so that the infant(s) cannot slip inside the bag and become completely covered?	<input type="checkbox"/> Yes

Identified risk / hazard. (people, information, physical assets & finances, reputation)	Control measures to minimise risk	Level of risk Using risk matrix – consequence x likelihood (major x likely = high)
Location of sleep and/or rest areas and supervision and monitoring of sleeping and/or resting children. Describe your supervision and monitoring practices for children, and monitoring of all children including who are ill or who have additional needs.	<p>The daily sleep record documentation of 15-minute sleep and rest checks is a requirement even when educators remain in the same room/environment as sleeping children and must include the time the child is checked, and the educator’s initial or signature.</p> <p>Prompting questions:</p> <ul style="list-style-type: none"> How are these recorded? Where are the sleep checks stored? How you will ensure a higher level of supervision is provided in instances where additional risk factors are present. If the sleep and rest area is in the main play space, what measures do you have in place to ensure the safety of sleeping children? How do you manage and supervise children who do not sleep? Do they have access to other play spaces? How do you monitor children sleeping in another area of the premise? How you manage adequate supervision for sleep or rest areas separated from non-sleep or rest areas? How are cots or beds arranged to ensure children’s safety and adequate supervision? 	

<p>Safety and suitability of cots/mattresses/beds Describe how you manage the safety and suitability of cots/mattresses/beds to ensure they are appropriate for the developmental stage of the children who use them.</p>	<p>Prompting questions: How you will keep cots/mattresses/beds maintained for safety and kept hygienically clean. All cots meet AS and evidence been provided to your scheme office Explain what intentional teaching strategies you will put in place to support children to use furniture safely. Outline any mattresses that may be used on the floor for sleeping children. Do mattresses they meet the density test? How will you know and manage when a child is ready to move from a cot to a bed?</p>	
<p>What potential hazards are present in sleep and/or rest areas? Describe your practices to ensure any potential hazards are eliminated.</p>	<p>Prompting questions: Describe your practices to ensure any potential hazards are eliminated for example with.</p> <ul style="list-style-type: none"> ● blinds and or curtains ● hanging cords ● electrical appliances ● heaters ● furniture <p>How you will place the cot/s and bed/s to ensure they are away from hazards, such as window, blind cords, heaters, fans How the beds are positioned to ensure a gap between beds and or furniture. Identify hazards or potential hazards in sleep and rest areas i.e. small items, toiletries, medication, storage, describe how you will ensure these do not pose a risk to children. If you have animals on the premises, describe how do you ensure they are kept away from areas where children sleep and while children sleep?</p> <p>Children will not be given bottles to go to sleep and all bottles will be removed from the sleep room when they are emptied. Children will not be left alone with a bottle in the sleep room.</p>	

<p>Lighting, temperature and ventilation</p> <p>Describe your practices to ensure rooms are adequately ventilated a suitable temperature and have adequate lighting to enable visually checking the child's breathing and the colour of the child's lips and skin tone?</p>	<p>Prompting questions:</p> <p>How is an adequate temperature achieved in the sleep space. How is adequate ventilation achieved in the sleep space. How you ensure cots/beds are positioned away from heaters to reduce the risk of infant/children overheating How do you ensure there is sufficient lighting to visually check the child's breathing and the colour of the child's lips and skin tone?</p>	
<p>Hygiene of bedding and storage.</p> <p>Describe the hygiene practices such as frequency of washing bedding and how are cots or beds stored when not in use? Refer to Staying Healthy 6th Edition.</p>	<p>Prompting questions:</p> <p>How are beds and bedding equipment stored safely when not in use. How are beds and bedding equipment maintained and kept hygienically clean. Outline your processes for airing and hygienically cleaning mattresses. How is used bed linen, including mattress protectors stored for the individual child. What is your process for laundering bedlinen. What is your process for changing of linen. How do you launder contaminated linen or beds and mattresses.</p>	
<p>Describe the process for managing clothing with zippers or hoods, jewellery (including cultural and teething jewellery), comfort toys and dummy cords.</p>	<p>Prompting questions:</p> <p>Explain how you ensure children do not sleep in clothing with zippers or hoods, jewellery (including cultural and teething jewellery), comfort toys and dummy cords.</p>	
<p>How do you keep your safe sleep and rest practices current?</p>		

<p>What are the risks posed to the safety, health or wellbeing of the child or children during overnight care?</p>	<p>See overnight care risk assessment if appropriate.</p>	
<p>Overall level of risk</p>		