



Safer Sleep Policy

Policy owner	Nursery Manager / Early Years Lead
Approved by	Trust board
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Applies to	Nursery provision

Policy statement

At Aurora Academies Trust, we recognise that sleep and rest are important for children's health, wellbeing, growth and development. We are committed to providing a safe, comfortable and nurturing environment where children can rest or sleep in response to their individual needs.

Any child within the Early Years who may sleep during the day will be appropriately supervised physically checked and cared for in accordance with the Early Years Foundation Stage safeguarding and welfare requirements, relevant safer sleep guidance, and the setting-specific safer sleep risk assessment.

Whilst this policy outlines the care of children within the EYFS, staff should ensure that appropriate supervision is maintained and that a suitable place is provided for any older child who falls asleep during the school day. This may be necessary, for example, if a child becomes unwell and is awaiting collection.

Aims

- Promote children's health, wellbeing and development.
- Provide a safe and suitable environment for sleep and rest.
- Ensure sleeping children are effectively supervised, seen and heard, and physically checked at agreed intervals.

- Work in partnership with parents and carers to understand individual sleep needs.
- Ensure staff understand and fulfil their responsibilities.
- Reduce foreseeable risks through clear procedures, training, monitoring and risk assessment.
- Maintain children's dignity and privacy during sleep and rest times while ensuring effective safeguarding practices are upheld.

1. Roles and responsibilities

The Senior Leadership Team and EY Lead/Manager will

- Ensure this policy, the safer sleep risk assessment and associated procedures are implemented and reviewed.
- Ensure suitable sleep equipment, records and a clearly displayed sleep-check checklist are available.
- Ensure staff receive induction, training and regular opportunities to refresh their understanding.
- Monitor the quality and consistency of safer sleep practice and address concerns promptly.
- Ensure sleeping arrangements are reflected in evacuation and lockdown procedures.

All staff will

- Follow this policy, the risk assessment and the agreed sleep-check procedure.
- Remain alert to each child's individual needs and any information shared by parents or carers.
- Complete and record checks accurately and at the required intervals.
- Act immediately if they have any concern about a child's wellbeing or safety (specific details then outlined in the RA) Report unsafe practice through the school's safeguarding and whistleblowing procedures.

2. Safer sleep risk assessment

The nursery will maintain a setting-specific safer sleep risk assessment. It will be reviewed annually or following an event where practices need to be reviewed and whenever there is a significant change to the children, environment, staffing, equipment or procedures.

The risk assessment will consider:

- the location and layout of the sleep area;
- sleep mats, bedding and other equipment
- staffing, supervision and visibility;
- room temperature, ventilation and environmental hazards;
- individual medical, developmental or additional needs;
- children who arrive at, or return to, the setting asleep;
- evacuation, invacuation and lockdown arrangements;
- induction arrangements for temporary and agency staff;
- recording, information sharing and monitoring.

3. Sleep environment and equipment

Babies and children must be placed down to sleep safely. For children under 2 years old, the following requirements apply:

- Children must be placed down on their back in their own separate sleep space on a firm flat surface such as a cot, bed or mattress on the floor.
- Babies aged 12 months and under must only be placed to sleep in a cot. 2
- Sleep spaces must only contain a firm, flat, waterproof mattress and lightweight bedding which is firmly tucked in around the child below their shoulders to prevent head covering. Alternatively, a well fitted baby sleep bag may be used. Check the manufacturer recommendations before using a baby sleep bag.
- Where blankets are used, the child is placed feet-to-foot at the bottom of the cot, with blankets tucked in.
Cots must not contain extra items such as toys, pillows, extra blankets, bumpers, wedges or straps.
- Children should not get too hot or cold. The recommended room temperature for babies is 16 – 20°C.
- Children's heads must not be covered.
- Babies under six months of age must always have an adult with them in the same room for every sleep. All children must be frequently checked when sleeping.
- Children must always be within sight and hearing of staff when sleeping.

4. Procedures before sleep

- Respond to the child's individual need for sleep rather than applying a rigid routine.
- Check information supplied by parents or carers, including changes to sleep patterns, health or medication.
- Encourage the child to use the toilet before resting, where appropriate.
- Check that the child has finished eating and that their mouth is clear of food or other objects.
- Prepare and inspect the mat, bedding and surrounding area.
- Check the room temperature and ventilation.
- Ensure clothing is appropriate and the child's head and face are uncovered.
- Record the child's name and the time sleep begins.

5. Procedures during sleep

Sleeping children will remain within sight and hearing of staff at all times and will never be left unattended. A monitoring device, if used, does not replace direct supervision or physical checks.

Staff will complete and record a physical wellbeing check at least every 10 minutes. More frequent checks will be carried out where professional judgement, a risk assessment, a healthcare plan or an individual child's needs indicate this is necessary.

Each check will include

- Breathing: observe the rise and fall of the chest and the rate and ease of breathing.
- Airway: confirm that the mouth and nose are clear and the face is unobstructed.
- Temperature: touch the chest or back of the neck and consider the room temperature, clothing and bedding.
- Presentation: observe skin colour, particularly around the mouth and fingers, and look for sweating, rash or another change.
- Position and comfort: confirm that the child is safely and comfortably positioned with the head and face uncovered.
- Environment: confirm that the mat, bedding and surrounding area remain safe and clear.
- Response: where there is any concern, gently check the child's responsiveness and act immediately.

The member of staff completing each check will record the time, their initials and any action taken. Records will be completed contemporaneously, stored securely and retained in line with the setting's record-management procedures.

6. If there is a concern

If a child appears unwell, is difficult to rouse, is not breathing normally, has an obstructed airway, or shows another sign of acute concern, staff will respond immediately in line with their paediatric first-aid training and the setting's emergency procedures. Emergency services will be contacted where required, parents or carers will be informed, and the incident will be recorded and escalated through safeguarding procedures as appropriate.

7. After sleep

- Support children to wake naturally where possible and reorientate them sensitively.
- Record the time the child wakes and any relevant observation.
- Return bedding and equipment for cleaning or safe storage.
- Share significant changes, concerns or unusual sleep patterns with parents or carers.

8. Children who arrive or return asleep

Parents and carers will be informed of the setting's arrangements for a child who arrives asleep. The child will not remain asleep in a car seat, pushchair, pram or buggy as their main sleep space. Staff will work with the parent or carer to transfer the child, as soon as practicable and without avoidable risk, to the setting's approved firm, flat sleep mat. Hats, coats and excessive layers will be removed or adjusted to prevent overheating. The child will then be supervised and checked in accordance with this policy.

9. Individual needs, medical conditions and comfort items

- Parents and carers must inform the nursery of any medical condition, sleep-related concern or change in the child's health.
- Where needed, an individual healthcare plan and risk assessment will be agreed before sleep arrangements are implemented.
- Comfort items will only be used where they are suitable for the child's age and assessed as safe. They must not cover the face, obstruct the airway or restrict breathing or circulation.
- Where possible, parental preferences regarding sleeping arrangements will be considered. However, the setting's safeguarding responsibilities and adherence to safer sleep guidance will always take precedence. As a result, some requests may not be accommodated if, upon review, they are found to be inconsistent with these requirements.

10. Partnership with parents and carers

- The policy and key procedures will be made available to families via the school's website and as part of the admissions process
- Parents and carers will be invited to share the child's usual sleep pattern, preferences and relevant health information.
- The nursery will explain any difference between home routines and the safer arrangements required in the setting.
- Families will be informed of significant changes, concerns or incidents relating to sleep.

11. Emergency evacuation, invacuation and lockdown

The safer sleep risk assessment and emergency plans will explain how sleeping children will be supervised, woken, moved or evacuated safely. Staff will know their roles and the location of essential equipment and records. Sleep mats and furniture must not obstruct exits or evacuation routes. Arrangements will be practised or reviewed sufficiently often to maintain staff confidence, including in settings where children do not routinely nap.

12. Staff induction, training and wellbeing

- All staff involved in sleep arrangements will be inducted in this policy, the setting's risk assessment, sleep-check record and emergency arrangements before undertaking the role.
- Staff involved in sleep arrangements will complete recognised safer sleep training and refresh it annually.
- Staff will read the relevant NHS safer sleep advice and be directed to current Department for Education and Lullaby Trust resources.
- Leaders will periodically check staff understanding through supervision, discussion, observation and review of records.
- Sometimes a child who will not settle/crying can be stressful, so care for staff is always considered

13. Agency and temporary staff

Agency, temporary or newly appointed staff will not take responsibility for safer sleep procedures unless they have received a full setting-specific induction, understand the risk assessment and recording system, and have been authorised by the SLT and Nursery Manager or Early Years Lead. Until then, they may support the room only under the direction of an inducted permanent member of staff.

14. Safeguarding, whistleblowing and allegations

All staff have a duty to challenge and report unsafe sleep practice. Concerns about a colleague's practice must be reported promptly in accordance with the safeguarding, managing allegations and whistleblowing procedures. Immediate action will be taken where practice may place a child at risk.

15. Review

This policy will be reviewed annually, or sooner if there are changes to statutory guidance, local procedures, best practice recommendations, or following any incident relating to sleep arrangements.

16. Reference guidance

- [Department for Education: Safer sleep](#)
- [NHS: Sudden infant death syndrome \(SIDS\)](#)
- [The Lullaby Trust: Safer sleep advice](#)
- [Foundation Years: EYFS safer sleep requirements FAQs](#)

Appendix A: Ten-minute wellbeing sleep check

At every recorded check, confirm:

- breathing is regular and unobstructed;
- mouth and nose are clear;
- head and face are uncovered;
- skin colour and presentation are normal for the child;
- temperature is comfortable;
- position is safe and comfortable;
- mat, bedding and surrounding area remain safe;
- time, initials and any action are recorded.

Appendix B: Policy implementation checklist

Implementation check	Complete	Evidence / action
Policy approved and shared with staff	☐	
Setting-specific risk assessment completed	☐	
Sleep mats and bedding checked	☐	
Room thermometer available	☐	
Ten-minute sleep-check record ready	☐	
Checklist displayed in sleep area	☐	
Emergency and lockdown arrangements updated	☐	
Staff induction completed	☐	
Annual safer sleep training scheduled/completed	☐	
Agency staff restrictions communicated	☐	
Parent/carer information shared	☐	
Monitoring and review dates recorded	☐	