

## AIR-O-DOWN CHILD CARE CENTRE

### INFANT ROOM-SLEEP ROOM POLICY AND PROCEDURE

#### A. Purpose

To ensure that all infants get enough sleep in order to properly grow and develop, and to follow best practices while promoting a comfortable and safe environment.

The Infant Room-Sleep Room Policy and Procedure(Sleep Room P&P) will be reviewed annually by all staff and enrolled families at A-O-D CCC.

The Sleep Room P&P reduces the risk of Sudden Infant Death Syndrome(SIDS). SIDS is the unexpected death of a seemingly healthy infant under one year of age, for whom no cause of death can be determined. For more information, please visit the Public Health Agency of Canada:[http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance0-2/sids/ssb\\_brochure-eng.php](http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance0-2/sids/ssb_brochure-eng.php).

Air-O-Down Child Care Centre shall ensure that a child who is younger than 12 months who receives child care is placed for sleep in a manner consistent with the recommendations set out in the document entitled "Joint Statement on Safe sleep: Preventing Sudden Infant Deaths in Canada", published by the Public Health Agency of Canada, as amended from time to time, unless the child's physician recommends otherwise in writing.

Provide that parents of children younger than 12 months will be advised of the licensee's obligation under subsection.

Upon enrollment parents of children younger than 12 months will be advised of the obligation .

#### **Policy**

A designed sleeping area with individually labelled cribs/cots are provided by AODCCC, and all cribs will follow the Canadian Safety Regulations. For more information, visit Health Canada: <http://hc-sc.gc.ca/cps-spc/pubs/cons/child-enfant/sleep-coucher-emg.php#a34>

Infants need sleep and rest periods to help with proper growth and development. Infants mature at different rates and we must meet their varying needs throughout the day. As they grow, it is common for the length and/or frequency of their daytime naps to decrease.

Infants at AODCCC have the opportunity for individual rest or sleep throughout the day. Staff is required to create a comfortable and soothing environment for the infants to rest or sleep(i.e. a quiet area to cuddle up with a book, or a staff member available to comfort them until they fall asleep).

**Parent/Guardian wishes will be taken into consideration; however, staff cannot force an infant to sleep, or keep an infant awake against his or her will.**

In order to maintain safe sleep practices, the Sleep Room P&P must be followed by all staff working with infants:

- Staff will ensure that each crib/cot is labelled with the full name of the infant.
- Each area where the crib/cot is located with sleeping instructions (customs/procedures) initially provided by parents/guardians during time of enrolment.
- The Individual Sleeping Note for infants will be reviewed every four months by a parent/guardian and the Individual Sleeping Note will be updated and maintained for each infant in the sleep room close to his/her designed crib.
- Infants will be placed in their designed crib. Infants will not share cribs.
- All cribs will be placed in the sleep room according to licensing requirements.
- Staff will ensure that all mattresses fit tightly in the crib and that the crib sheet is snug on the mattress.
- In order to reduce the spread of germs, all cribs will be disinfected weekly and/or whenever they are soiled. All sheets will be washed weekly and/or whenever they are soiled. All crib railings will be wiped down daily.
- Crib disinfection will be documented on the Infant Disinfecting Schedule.
- Cribs will only be used for sleeping. Nothing will be stored in or underneath the cribs.

Staff will ensure that they are aware of individual needs of the children under their care. Sleep routines are very intimate part of a child's day. Infants WILL NOT be left to cry themselves to sleep or left for long periods of time to "fall asleep" .

When getting an infant ready to sleep the staff will ensure a number of steps happen:

1. Diaper is changed (infant should have a clean diaper on).
2. Outer clothing and shoes are removed.
3. Infant has been fed or has had a drink.
4. All bibs have been removed.
5. Railing of the crib is pulled up to ensure no infant is able to fall from the crib.

#### B. Procedure

1. Healthy infants must always be put to sleep on their backs (side sleeping is not as safe as back sleeping and is not advised).
2. If parents/guardians request that their child be put to sleep in a position other than on their back, they must provide a Physician's signed note that explains how the infant should be put to sleep and the medical reasons for the position. This note must be kept in the child's file and all staff working in the infant room must be familiar with the infant's prescribed position.
3. Infants are placed to sleep on a separate surface, like a crib, that meets current Canadian Safety regulations, and is appropriate for infants age and weight. Infants are to be placed to sleep on a flat, firm mattress that fits tightly in the crib, and the sheet must fit the mattress snugly (Toronto Public Health, Position Statement for Safe Sleep Environment for Infants). Older

Infants that are 15 months that will be transitioning to the toddler room will sleep on a cot if it is available.

4. No extra items, such as toys, stuffed animals, blankets, pillows, bumper pads, loose bedding or positioning devices (unless ordered by a health care provider) can be in the crib.
5. Overheating is one of the risk factors for SIDS. To avoid overheating:
  - a. Staff must ensure that the room is kept at a temperature that is comfortable for a lightly clothed adult. (At minimum of 20°C as per The Child Care Modernization Act, 2014).
  - b. Staff must ensure that only one light blanket and only crib sheets are used, and the infants are not overdressed when they sleep.
6. The infant's head must remain uncovered when he/she sleeps.
7. When an infant under a year is able to roll from back-to-side-to-stomach, staff will ensure that the infants are placed to sleep on his/her back.
8. Sleeping infants must be visually checked every 30 minutes. The infant's chest is rising and falling as he/she breathes.
9. Infants must not share cribs.
10. Infants must never be put to sleep on a cushion in the room.
11. Non sleeping infants should be offered quiet activities in the playroom.
12. The playroom must always have natural lighting. The infant playroom cannot be dark at any time. One infant sleep room light switch can be turned off. Turn on sleep music on low sound.
13. Pacifier use has been shown to decrease the risk for SIDS. Infants may be offered a pacifier when they are in the crib if the parent offers it at home. Pacifiers must not be attached by string or to the infant clothing when sleeping. Pacifiers must not be placed back into the infant's mouth if it falls out after the infant is asleep.
14. All pacifiers must be stored in the designed "pacifier container" located in the playroom and must be labelled with the child's name. According to Health Canada, pacifiers should be replaced at least every two months. Pacifiers should be inspected every day. If there are any signs of breakages, they should be thrown away. Broken or loose pieces are choking hazards; <http://hc-sc.gc.ca/cps/pubs/cons/child-enfant/sleep-coucher-eng.php#a61>.
15. If the infant has not gone to sleep after 15 minutes the staff member should consider taking the infants out of the crib/cot and placing the infant down again later. The infant room staff should discuss this with the parents/guardian and establish a time limit for trying to get the infant to sleep, which should be communicated to all staff members and be written on the infant's Individual Sleeping Schedule.
16. Infants are not to be placed to sleep for external periods of time in carriages, strollers, car seats, infant bouncers, swings. (Health Canada; Toronto Public Health, Position Statement for Safe Sleep Environment for Infants).

If the infant falls asleep in the arms of a staff member, the infant should be placed in his/her designed crib so he/she can continue to sleep. If the infant has fallen asleep unexpectedly and it is not possible to remove his/her outer clothing or have his/her diaper changed, the infant's

clothing should be slightly loosened. Staff should be aware that the infant needs his/her diaper changed when he/she wakes up.

### C. Sleep Monitoring

All sleeping children must be checked on at 30-minute intervals; a timer is used for this. All infant room staff is responsible for checking the children and ensuring that the timer is set every 30 minutes if a child or children are sleeping.

Checking a child while sleeping should involve the following:

1. Staff should place their hand on the child's chest to check that they are breathing or putting the back of their hand near to the child's mouth to feel for breath.
2. Ensuring that each child is well.
3. Ensuring that each child is not too hot or too cold.
4. Ensure that all infants are sleeping in the sleep room.
5. All infant room staff is to conduct regular checks during naptime and MUST ENTER the sleep room to conduct these checks.
6. The Sleep Monitoring Chart(see below) must be used to record the checks, and must be signed by the staff member conducting the check. A record of each child's daily sleep pattern must be recorded on the Daily Chart for each infant. The sleep Monitoring Chart must be placed in the sleep room in a designated spot.
7. If there are three or more infants in the sleep room, one staff member must stay in the room and continue to monitor the sleeping children. The other staff members will be in the playroom.
8. If all the children are sleeping, the monitoring staff is allowed to: fill out the Observation Charts, Portfolios, and Individual Daily Charts: work on Developmental Reviews; or work on other tasks related to infant or Staff responsibilities.
9. NO CELL PHONES OR COMPUTERS or other electronics are allowed in the sleep room.
10. If there are less than three infants sleeping in the sleep room, the monitoring staff will return to the playroom and the monitoring of the infants sleeping will continue every 30 minutes or more frequently when needed.
11. A staff will be present in the sleep room when ratios allow. ie. During the afternoon, if more than three infants are sleeping and there are two staff in the room, one staff will stay in the sleep room as long as the other staff doesn't have more than 3 infants in the classroom, the same applies to the monitoring at all times including am activities , sleep time, pm activities, sleep time scheduled.
15. Any other specific request by parents will be discussed and addressed based on the children's needs.

Infant room staff must document the monitoring of the infants sleeping in the sleep room on the chart. This chart will be checked every 30 minutes.

Infant sleep room Monitoring Charts must be displayed at all times. During the day the chart must be kept in the sleep room and once all the children are awake the chart should be placed back in the designated area.

A children's sleep chart is located at the entrance of the sleep room indicating which child is sleeping the crib/cot.

Completed forms will be kept on file for one year.

References:

Health Canada(2012). Consumers Product Safety: Is Your Child safe? Sleep Time. Retrieved October 5,2015 from Health Canada: <http://hc-sc.gc.ca/cps-spc/pubs/cons/child-enfant/sleep-coucher-eng.php#a5>.

Public Health Agency of Canada(revised2014). Safe Sleep for Your Baby. Retrieved October 5,2015 from:[http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance-0-2/sids/ssb\\_brochure-eng.php3safe-sleep](http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance-0-2/sids/ssb_brochure-eng.php3safe-sleep).

Toronto Public Health, Position statement for Safe Sleep Environment for Infants, revised Sept 2015.

Air-O-Down Child Care Centre

Infant Crib Sleep Room Chart

1. The Infant Crib Sleep Room Chart will be placed on the left hand side of the wall next to the door by the sleep room gate.
2. The layout of the cribs on the chart must correspond with the layout of the cribs in the sleep room.
3. Each crib should be labelled with the child's name.
4. Each child will have a nametag. The nametag will be placed on the Infant Crib Sleep Room Chart at the same time the child is placed into the crib. Staff placing the infants into the cribs are responsible to ensure that the nametag is placed in the correct spot.
5. When an infant wakes up, or is taken away from the sleep room, the nametag must be placed into a general position by the staff taking an infant from the sleep room.

The nametag will be laminated and labelled with each child's name.

**AT ALL TIMES ,STAFF MUST BE AWARE OF THE NUMBER OF THE SLEEPING INFANTS AND THE NUMBER OF INFANTS IN THE PLAY ROOM.**