GEMS TINEY HOME NURSERY

HOME FROM HOME CHILDCARE

Sleep Policy

Purpose and agreed routines

We provide safe, responsive sleep and rest at Gems tiney Home Nursery. Gemma discusses sleep patterns, health, settling and changes with parents and ensures assistants understand each child's needs. Home preferences are considered alongside current safer sleep requirements; we do not agree to an unsafe arrangement.

Children are not forced to sleep or routinely kept awake when they need rest. We discuss requests to limit naps in the context of the child's wellbeing. Children who do not sleep have calm supervised alternatives.

Sleep spaces and position

Children under two are placed on their backs in their own separate sleep space on a firm, flat surface. Babies aged 12 months and under are placed to sleep only in a suitable cot, which includes a suitable carrycot, Moses basket or travel cot, used within its manufacturer limits. Floor beds and low-sided sleep pods do not meet this requirement for that age group.

For older children we provide a suitable separate cot, bed or mattress arrangement assessed for age, mobility and safe access. Sleep equipment and mattress fit are checked and manufacturer instructions followed. Adults do not sleep with a child on a sofa, chair or shared sleep surface.

For under-twos, the sleep space contains only a firm, flat, waterproof mattress and suitable light bedding tucked securely below shoulder level, or a correctly fitted sleep bag used according to instructions. Where blankets are used, place the child feet-to-foot with bedding securely tucked in. No pillows, toys, bumpers, wedges, positioners, extra bedding or restraint straps are placed in cots.

Temperature clothing and settling

Keep heads uncovered and avoid overheating or excessive layers. We monitor the room and the child; the recommended room temperature for babies is 16–20°C. Outdoor clothing and hats are removed for indoor sleep. Sleep bags and clothing are selected for the conditions and manufacturer advice.

We use calm voices, familiar routines and suitable reassurance. Comfort toys may help while settling with an adult but are removed from the under-two sleep space before sleep. Dummies, if used, must have no attached cord, clip, ribbon or toy in the sleep space.

We place babies down on their backs each time. Once a baby can confidently roll both ways, follow current NHS advice about allowing their chosen position while keeping the cot clear. An unusual prescribed sleep position requires documented healthcare advice and review; parental preference alone is insufficient.

Sight hearing and physical checks

Babies under six months always have an adult in the same room for every sleep. Sleeping children remain within sight and hearing of staff and receive frequent physical checks. A monitor must not replace the adult in the room for an under-six-month-old.

For older babies and children, any video and audio monitor used must allow them to be seen and heard continuously, be checked for reliable operation and have a safe response plan for failure. It supplements frequent physical checks and does not replace them or allow staff to be too far away to respond promptly.

Our setting carries out and records physical checks at least every ten minutes, more frequently where individual risk or circumstances require. We observe breathing, colour, position, head covering, temperature and comfort without relying only on a device display. Ten minutes is the setting's maximum interval, not a universal statutory checking interval.

Record sleep start and end, physical checks, significant concerns and action. App entries are brief and must not distract from supervision. A secure written backup is used if the app is unavailable.

Travel illness and emergencies

Cots or other age-appropriate approved sleep spaces are used for planned naps. Car seats, bouncers and inclined products are not routine sleep spaces. If a child falls

asleep during travel, maintain safe transport and supervision and transfer them to a suitable flat sleep space as soon as it is safe and practical.

Review illness, breathing concerns, medicines, prematurity or other individual risks with parents and relevant professionals. No sedating treatment is used simply to make a child sleep. If a child is unresponsive, breathing abnormally or otherwise seriously unwell, call 999 and begin appropriate first aid immediately; do not wait for parent contact.

Hygiene surroundings and review

Each child has individual clean bedding. Launder at least weekly and promptly when soiled and clean mattresses and equipment appropriately between users. Keep sleep areas free of smoke, pets, cords, small items and other hazards and ensure evacuation can be achieved with the adults present.

Parents receive daily sleep information and significant changes or concerns are discussed promptly. Gemma reviews the arrangements as children grow and this policy annually or sooner after an incident or guidance change. References: EYFS childminder framework effective September 2026, sleeping arrangements; Department for Education Safer sleep guidance; NHS SIDS advice and The Lullaby Trust.

Policy owner: Gemma Bayley
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