







Reducing the risk of SIDS

Safe sleeping arrangements

'During sleep there's even more activity and more learning going on in an infant's brain than an adults.' Karmilloff – Smith (2010)

'When young children are sleeping they are learning by consolidating information taken in during the day'. Music (2011)

Research on children's brain development highlights that when a baby is asleep their brain is busy learning. For this reason we ensure every child is cared for meeting their needs and using their own individual routines.

Does Nap Time Help Children Learn?

Food for thought......The University of Sheffield & Ruhr University in Germany have been doing research into how children develop and retain skills they have recently learnt.

A group of 216 babies aged 6-12 month-olds where shown how to remove and manipulate a mitten from a hand puppet and given the chance to perform the actions again after 4 hours had past and then again after 24 hours.

Children who had a nap for at least 30 minutes within four hours of learning the skill were able to actively remember the actions. Those who didn't have that nap within the 4 hours after learning struggled to remember the skill they were shown earlier.

Dr Jane Herbert from the University of Sheffield said, 'These findings are particularly interesting to both parents and practitioners because they suggest that the optimal time for infants to learn new information is just before they have a sleep. Until now people have presumed that the best time for infants to learn is when they are wide-awake, rather than when they are starting to feel tired, but our results show that activities occurring just before infants have a nap can be particularly valuable and well-remembered.' The study examined learning opportunities around naturally occurring naps and shows just how valuable activities like reading books with young children just before they go down to sleep can be.

Our policy

The idea behind our 'safe sleep' policy is to ensure all children and practitioners are safeguarded and protected in every way possible. The belief that implementing procedures for safe sleep could reduce Sudden Infant Death Syndrome form the basis of our policy and is mirrored in the nursery's ethos that leaders and practitioners have an obligation to keep children safe.

During safe sleep we take into account:-

Partnership with parents – Detailed information sharing and effective communication between the key person and the child's family is essential. Building trusting relationships and close attachments ensure that parents and staff openly discuss their child's sleep, any changes in routine and provide consistency of care. A child's sleep routine remains individual and personalised.

Many parents believe that children should not sleep near to being collected in the evening for fear that the child's sleep pattern at night will be disrupted. This can be a conflicting issue between parents and their key person with parents often requesting their child is kept awake after a certain time period. Therefore having an open, trusting relationship where discussions remain informal and valued and parents feel secure that the key person has the child's best interests at heart will assist with the individual development of the child.

Our practitioners are confident and knowledgeable regarding our safe sleep policy which adopts the understanding that children are allowed to sleep to their own individual routine anytime during the day. The child's key person will feedback appropriately to parents the importance of rest and sleep periods when attending the nursery.

Safe sleep procedure

Our trained practitioners supervise the children by sight and sound at all times. This means an appropriately trained and qualified practitioner is actively watching and listening for children who are sleeping, falling asleep, and waking. The sleeping space is lit well enough that practitioners can see each child's face and the colour of his or her skin. As part of active supervision, practitioners regularly make sure sleeping infants' heads and faces are uncovered. They make sure babies are not too warm or too cool. If a baby is sweaty, the practitioner adapts the baby's attire or the temperature of the room. If a baby's hands or feet are cold to the touch, practitioners add an additional layer of clothing (or socks) or adjusts the temperature of the room. While babies are resting, at least one practitioner must be actively supervising them. This practitioner can take care of routine daily tasks during rest time but these must not distract from their primary job of child supervision.

Older children from 12 months are also appropriately supervised with regular (every 10 minutes) visual checks carried out by experienced and qualified practitioners.

Babies are always placed on their back to sleep and not on their front or side.

Sleeping on their back (known as the supine position) is one of the most protective actions we can take to ensure the baby is sleeping as safely as possible. We do not allow young babies to sleep in pushchairs, car seats, rocking cradles, cushioned sleeping pods, dog beds, sofas etc. Our babies sleep in high quality cots free of bumper cushions, pillows and duvets. We do not give bottles as comforters or leave bibs on sleeping children in the cots.

The Lullaby Trust has warned that some popular sleeping products for babies do not conform to safer sleep guidelines. Items such as cushioned sleeping pods, nests, baby hammocks, cot bumpers, pillows, duvets and anything that wedges or straps a baby in place can pose a risk to babies under 12 months. Evidence shows that sleeping a baby on anything but a firm, flat surface, or using soft, heavy bedding, can increase the risk of sudden infant death syndrome (SIDS). They can lead overheating or potentially obstruct a baby's airway if they roll or their face becomes covered by loose bedding.

It may seem convenient to let baby continue sleeping in their carriers, but these carriers are not approved sleep surfaces. It is simply not safe to let a child continue sleeping in an unapproved device. We are responsible for a child's safety once a parent drops him or her off. The carrier might be overturned with the child strapped inside, or dangling toys could interfere with the child's breathing. Children should only sleep in approved safe sleep environments at the setting. Parents or caregivers should be asked to remove their child from the carrier and place him or her in the cot. This helps reinforce to parents the importance of safe sleep habits.

There is substantial evidence from around the world to show that sleeping the baby on their back at the beginning of every sleep or nap (day and night) significantly reduces the risk of Sudden Infant Death Syndrome (SIDS).

Think carefully about the placement of the cot. If children are too close together, they may distract each other, preventing a calm sleep environment, or spread illnesses.

Twinkly and low lights can help create a calm environment – **BUT** ... we must ensure that no trailing wires / lights pose a risk to the children. Babies might not be able to move far, but they can reach and grab for things that catch their eye.

Some babies have been strangled by looped cords hanging into their cot. This could be a string from a bag, or fairy lights, or a blind cord, or a ribbon trailing into the cot. We do not provide cot toys when baby goes to sleep. We ensure there are no cords nearby, like blind cords, making sure baby can't reach anything that could cause them harm.

If baby has a dummy, we remove any cord or string on the dummy to prevent it getting looped around baby's neck. Although it might be annoying to keep retrieving lost dummies, having no cord on them is safer than tying them to baby's clothes.

The safety and well-being of the babies and children is our prime concern.

To reduce the risk of SIDS:

- place baby on their back to sleep, in a cot for at least the first 12 months
- keep baby's head uncovered their blanket should be tucked in no higher than their shoulders
- if wearing baby in a sling or carrier, do not cover their head with the sling material or with a muslin
- place baby in the "feet to foot" position, with their feet at the end of the cot
- do not let baby get too hot or cold
- do not share a bed with baby
- never sleep with baby on a sofa or armchair
- do not smoke during pregnancy or breastfeeding, and do not let anyone smoke in the same room as baby

Place baby on their back to sleep from the very beginning for both day and night sleeps. This will reduce the risk of cot death.

Do not put baby to sleep on their side or tummy.

Once baby is old enough to roll over, there's no need to worry if they turn onto their tummy or side while sleeping.

To put baby in the feet to foot position:

- tuck the covers in securely under baby's arms so they cannot slip over their head use 1 or more layers of lightweight blankets
- use a baby mattress that's firm, flat, well-fitting, clean and waterproof on the outside cover the mattress with a single sheet

We do not use duvets, quilts, baby nests, wedges, bedding rolls or pillows.

If you use a sling or carrier, make sure you use it safely.

The Lullaby Trust has more information and advice about swaddling your baby and using slings

Do not let baby get too hot or too cold - Overheating can increase the risk of SIDS. Babies can overheat because of too much bedding or clothing, or because the room is too hot.

Our trained, qualified and experienced practitioners closely supervise the babies as they sleep.

All of our practitioners are trained in paediatric first aid and know how to keep babies safe while sleeping and how to respond to them when they are poorly.

When you check baby, make sure they're not too hot. If baby is sweating or their tummy feels hot to the touch, take off some of the bedding. Do not worry if their hands or feet feel cool – this is normal. It's easier to adjust for the temperature by using layers of lightweight blankets. Remember, a folded blanket counts as 2 blankets. Lightweight, well-fitting baby sleeping bags are a good choice, too. Babies do not need hot rooms. All-night heating is rarely necessary. Keep the room at a temperature that's comfortable – about 16 to 20C is ideal.

If it's very warm, baby may not need any bedclothes other than a sheet.

Even in winter, most babies who are unwell or feverish do not need extra clothes.

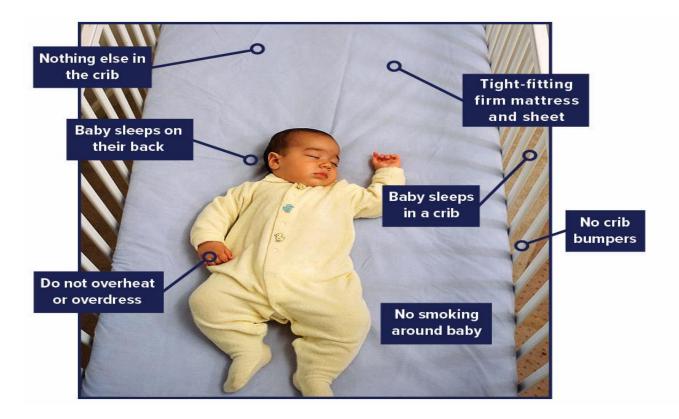
Babies should never sleep with a hot water bottle or electric blanket, next to a radiator, heater or fire, or in direct sunshine.

Babies lose excess heat through their heads, so make sure their heads cannot be covered by bedclothes, slings or carriers while they're asleep.

Remove hats and extra clothing as soon as you come indoors or enter a warm car, bus or train, even if it means waking your baby.

Do not share a bed with baby

The safest place for baby to sleep for the first 6 months is in a cot – under close supervision.



Feeding, dummies and SIDS

Breastfeeding reduces the risk of SIDS.

!! Urgent Safety Alert issued for baby self-feeding pillows !!

We do not use self-feeding pillows. The Office for Product Safety and Standards has urged the public to stop using baby self-feeding pillows immediately and dispose of them safely. When used as intended, even whilst under the supervision of a caregiver, it could lead to immediate, serious harm or death from choking or aspiration pneumonia.

It's possible using a dummy at the start of a sleep also reduces the risk of SIDS. But the evidence is not strong and not all experts agree that dummies should be promoted.

If you do use a dummy, stop giving them the dummy when they're between 6 and 12 months old.

Babies often have minor illnesses that you do not need to worry about.

All of our practitioners are trained in paediatric first aid and are able to respond appropriately when babies of children are poorly.

We will always recommend that parents seek medical help quickly if baby is unwell

Give baby plenty of fluids to drink and do not let them get too hot. If baby sleeps a lot, wake them up regularly for a drink.

It can be difficult to judge whether an illness is more serious and needs urgent medical attention.

See <u>spotting the signs of serious illness</u> for guidance on when to get help.

Important things to remember ...

You should always place the baby on their back to sleep and not on their front or side (unless your doctor has advised you of a medical reason to do so)

Sleeping a baby on their front or side greatly increases the chance of SIDS

Babies should sleep in a cot and older children will sleep on comfortable rest mats. Laying flat on their backs, children are able to enjoy restful sleep.

We also encourage sleeping outdoors to aid deep levels of sleep.

If the baby rolls onto their tummy

If the baby has rolled onto their tummy, you should turn them onto their back again. Once baby can roll from back to front and back again, on their own, they can be left to find their own position.

The importance of routine in reducing the risk of SIDS

The best way to make sure baby sleeps on their back is to do this from day one, and keep putting them to sleep on their backs for every day and night time sleep.

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References

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NHS - https://www.nhs.uk/conditions/baby/caring-for-a-newborn/reduce-the-risk-of-sudden-infant-death-syndrome/