## Attachment 1: Safe sleep record  Date: / /

|  |  |
| --- | --- |
| **Centre name** |  |
| **Room** |  |

|  |
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| IN CASE OF EMERGENCY DIAL 000 |
| If a child is unresponsive, unable to wake from sleeping, not breathing, or has changes to skin and lip colour, call 000 immediately and begin resuscitation, following the *ELV Administration of First Aid Policy and Procedure*. |
| **Educators are to ensure each sleep check is conducted every 10 minutes and recorded on this Safe sleep record.**  |
| During each sleep check, the following items are to be checked:* Assess each child’s breathing.
* Check the colour of each child’s skin and lips.
* Check the body temperature of each child.
* Ensure each child’s head and face are uncovered.
* Check infants’ position in cot (back or tummy – dependent upon age of infant).
 |
| To ensure a safe sleep environment for all children, educators will:* remove any necklaces/bracelets before placing child in cot/bed
* ensure environment is safe and free from hazards
* ensure the child is suitably dressed
* switch off or remove any heaters
* ensure the temperature of the room is suitable for sleeping and that the room is well ventilated.
 |
| **Safe sleep practices** Educators will ensure:* baby is placed on their back
* baby’s head and face are uncovered at all times
* safe sleep conditions, including safe cot, safe mattress and safe bedding, are met.
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Visit [rednose.org.au/section/safe-sleeping](file:///C%3A/Users/10471631/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/WHZARAQB/rednose.org.au/section/safe-sleeping)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Time**  | **Educator name and signature** | **Time** | **Educator name and signature** | **Time** | **Educator name and signature** |
| 7:00 |  | 10:50 |  | 2:40 |  |
| 7:10 |  | 11:00 |  | 2:50 |  |
| 7:20 |  | 11:10 |  | 3:00 |  |
| 7:30 |  | 11:20 |  | 3:10 |  |
| 7:40 |  | 11:30 |  | 3:20 |  |
| 7:50 |  | 11:40 |  | 3:30 |  |
| 8:00 |  | 11:50 |  | 3:40 |  |
| 8:10 |  | 12:00 |  | 3:50 |  |
| 8:20 |  | 12:10 |  | 4:00 |  |
| 8:30 |  | 12:20 |  | 4:10 |  |
| 8:40 |  | 12:30 |  | 4:20 |  |
| 8:50 |  | 12:40 |  | 4:30 |  |
| 9:00 |  | 12:50 |  | 4:40 |  |
| 9:10 |  | 1:00 |  | 4:50 |  |
| 9:20 |  | 1:10 |  | 5:00 |  |
| 9:30 |  | 1:20 |  | 5:10 |  |
| 9:40 |  | 1:30 |  | 5:20 |  |
| 9:50 |  | 1:40 |  | 5:30 |  |
| 10:00 |  | 1:50 |  | 5:40 |  |
| 10:10 |  | 2:00 |  | 5:50 |  |
| 10:20 |  | 2:10 |  | 6:00 |  |
| 10:30 |  | 2:20 |  | End of day cot check |  |
| 10:40 |  | 2:30 |  |

Source: ELV Sleep and Rest Policy and Procedure