HCAT

Sleep and Rest Policy

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Version Number	Version Description	Date of Revision
1	Original	Sep 26

HCAT Sleep and Rest Policy

The policy reflects the Early Years Foundation Stage (EYFS) statutory framework for group and school-based providers effective from 1 September 2026 and the Department for Education safer sleep guidance, updated 17 August 2026.

1. Introduction

1.1 Purpose of the policy

HCAT recognises that some children aged three and over may need to sleep or rest during the school day. Sleep and rest are part of meeting children's individual care, health and wellbeing needs. Children will be supported to rest or sleep when they need to, in a safe, clean and appropriately supervised environment.

No child will be forced to sleep or deliberately kept awake when they need rest. Staff will work in partnership with parents and carers and will take account of each child's age, development, health needs, usual routines and preferences.

1.2 Aims

- Provide safe, consistent arrangements for daytime sleep and rest for children aged three and over.
- Meet the safer sleep requirements of the EYFS and have regard to current Department for Education guidance.
- Ensure sleeping children remain within sight and hearing of staff and are checked frequently.
- Provide clear responsibilities for staff, leaders and parents or carers.
- Ensure that sleep arrangements are risk assessed, hygienic and appropriate to the individual child.

1.3 Scope

This policy applies to all staff, volunteers and children using HCAT school nursery and early years provision where admission is from the child's third birthday. It covers planned daytime sleep and occasions when a child falls asleep unexpectedly. It does not authorise overnight childcare.

Because these settings do not admit children under three, the EYFS requirements that are specific to babies and children under two - including cot requirements for babies aged 12 months and under - are outside the normal scope of this policy.

2. Legal and guidance framework

This policy is informed by:

- Early Years Foundation Stage statutory framework for group and school-based providers, effective from 1 September 2026.
- Department for Education, Help for Early Years Providers: Safer sleep, published 20 April 2026 and updated 17 August 2026.
- The school's safeguarding and child protection, first aid, health and safety, infection prevention, medicines and emergency procedures.

The EYFS requires all children to be frequently checked when sleeping and to remain within sight and hearing of staff. These requirements apply to children in HCAT nursery provision.

3. Roles and responsibilities

3.1 Headteacher

- Ensure appropriate premises, equipment, staffing, training and risk assessment arrangements are in place.
- Ensure this policy is implemented consistently and reviewed when national requirements or local provision change.
- Ensure any serious incident is managed and notified in accordance with safeguarding, health and safety and regulatory requirements.

3.2 Early Years Lead

- Brief staff on this policy and monitor day-to-day practice.
- Ensure sleep spaces and equipment are suitable, maintained, cleaned and stored safely.

- Ensure relevant information from parents, carers and healthcare professionals is recorded and shared with staff who need it.
- Maintain and review the sleep and rest risk assessment.

3.3 All staff

- Respond appropriately to signs of tiredness.
- Maintain sight and hearing of sleeping children and carry out frequent checks.
- Act immediately if concerned about a child's breathing, colour, temperature, position, responsiveness or general wellbeing.
- Record sleep information, checks, concerns and incidents accurately.

4. Partnership with parents and carers

Parents and carers will be asked to share relevant information about their child's usual sleep pattern, comfort needs, medical needs and any changes that may affect sleep. Staff will discuss significant sleep information at collection, including unusual drowsiness, difficulty waking, an unsettled sleep or any concern.

Where a child has a medical condition or a specialist sleep arrangement, the school will follow an agreed healthcare or care plan and complete an individual risk assessment where required.

5. Sleep environment and equipment

- The absence of a designated sleep space does not prevent a child from sleeping when they need to. The school will make a safe temporary arrangement for the individual child, with supervision and frequent checks maintained throughout.
- The school does not maintain a permanently designated sleep room or sleep area. If a child needs to sleep, staff will identify a suitable temporary area within the environment and complete a dynamic safety check before the child settles.
- The temporary sleep area must provide a clear, flat, firm and stable individual sleep surface, such as a suitable mattress on the floor. Children will not sleep on sofas, armchairs or other soft furniture.
- The temporary sleep area will be positioned so that staff can see and hear the sleeping child at all times, can reach the child promptly, and can continue to supervise the rest of the provision safely.
- Bedding will be lightweight, clean and individually allocated while in use or laundered between users.
- The temporary sleep arrangement and equipment must not obstruct doors, walkways, fire exits, evacuation routes or the normal safe operation of the nursery.
- Children will not sleep wearing coats, hats or other items that may contribute to overheating or create an entanglement or restricted-breathing risk.
- The area selected for sleep will be smoke-free, uncluttered, appropriately ventilated and maintained at a comfortable temperature. It will be away from avoidable noise, busy thoroughfares and hazards where practicable.

6. Sleep procedure

1. Respond to the child's signs of tiredness and consider whether illness, injury, medication or an unusual change in behaviour could be contributing to drowsiness.
2. Identify a suitable temporary sleep area and complete a dynamic safety check. Check that the individual sleep surface is clean, clear, flat, firm, stable, appropriately positioned and free from hazards, and that evacuation routes remain clear.
3. Remove outdoor clothing and any item that could cover the child's face, cause overheating or create an entanglement risk.
4. Settle the child calmly on their own separate sleep surface within the agreed temporary sleep area.
5. Record the time the child goes to sleep.
6. Keep the child within sight and hearing of staff and complete frequent observations in accordance with the setting's risk assessment and local recording procedure.
7. At each check, observe the child's position, breathing, colour, temperature and general comfort and take immediate action if there is any concern.

8. When the child wakes, support them to wake gradually and rejoin the session. Record the waking time and share relevant information with parents or carers.

7. Supervision and sleep checks

Sleeping children must always remain within sight and hearing of staff and must be checked frequently. Staffing arrangements and ratios continue to apply while children are asleep.

The school will set a written local checking interval through risk assessment. Checks will be increased where a child's health, individual needs, unusual drowsiness or other circumstances indicate closer observation. A monitor, if used, is supplementary and does not replace staff supervision or physical observations.

Time	Child	Observation / action	Initials

8. Children who fall asleep unexpectedly

If a child falls asleep somewhere that is not suitable for safe sleep, staff will remain with and supervise the child and, as soon as it is safe to do so, move them to an appropriate temporary sleep arrangement that meets this policy.

9. Illness and emergency action

Unusual drowsiness or difficulty waking may indicate illness. If a child is difficult to wake, breathing abnormally, an unusual colour, very hot or cold, or otherwise appears unwell, staff will:

- attempt to rouse the child and summon a designated paediatric first aider immediately;
- follow the school's first aid and emergency procedures, including calling 999 and beginning appropriate first aid where required;
- inform the Headteacher or Designated Safeguarding Lead and contact the parent or carer; and
- record the event and complete any required safeguarding, regulatory or health and safety notification.

10. Hygiene and infection prevention

- Inspect sleep equipment before use and remove damaged or contaminated equipment from service.
- Clean and dry waterproof surfaces after use and following contamination, in line with manufacturer instructions and the school's infection prevention procedures.
- Allocate bedding to an individual child while in use and launder it routinely and immediately after soiling or suspected infection.
- Store clean bedding separately from used bedding and store mattresses so they remain clean, dry and undamaged.

11. Risk assessment

The Early Years Lead will maintain a written risk assessment covering the arrangements for temporary sleep areas, equipment, room use, temperature, fire evacuation, supervision, staff deployment, cleaning, storage and individual children's needs. Because there is no permanently designated sleep space, staff will also complete a dynamic safety check each time a temporary sleep area is established. The assessment will be reviewed when provision changes, after an incident or near miss, and when relevant national guidance changes.

Check	Expected arrangement
Supervision	Every sleeping child can be seen and heard and staff can reach the child promptly.
Sleep surface	Separate, clear, flat, firm, stable and suitable for a child aged three or over.
Environment	Comfortable, ventilated, uncluttered and free from avoidable hazards.

Check	Expected arrangement
Evacuation	Clear routes and a workable plan for safely evacuating sleeping children.
Hygiene	Equipment is clean, dry, intact and stored to prevent contamination.

12. Records and confidentiality

The school will retain relevant sleep information, individual care or healthcare plans, sleep check records, incident records and risk assessments in line with its records retention schedule and data protection policy. Information will be shared only with staff and agencies that need it to protect or care for the child.

13. Training and monitoring

Staff who supervise sleeping children will receive appropriate induction and refresher information on this policy, safer sleep, recognising illness, paediatric first aid, recording and emergency action. The Early Years Lead will monitor practice and records and address any shortfall promptly.

14. Related HCAT and school policies

- Safeguarding and Child Protection Policy
- First Aid and emergency procedures
- Health and Safety Policy and risk assessments
- Infection prevention and control procedures
- Supporting Pupils with Medical Conditions / administration of medicines
- Intimate Care Policy
- Data Protection and records retention arrangements

15. Review arrangements

This policy will be reviewed annually, or earlier following a relevant change to the EYFS, Department for Education safer sleep guidance, local provision, or a significant incident or near miss.

16. Sources

Department for Education, Early Years Foundation Stage statutory framework for group and school-based providers, effective 1 September 2026.

Department for Education, Help for Early Years Providers: Safer sleep, published 20 April 2026; updated 17 August 2026.