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# **SLEEP POLICY AND SUPERVISION**

Each child who receives childcare for six hours or more in a day has a rest period each day not exceeding two hours in length.

A child in a toddler or preschool group is <u>permitted to sleep, rest or engage in quiet activities</u> based on the child's needs.

The parents of all children who regularly sleep at the childcare centre will be advised of the centre's policies and procedures regarding children's sleep.

The parents will be consulted respecting a child's sleeping arrangements, required accommodation or precautions at the time the child is enrolled and at any other appropriate time, such as at transitions between programs or rooms or upon a parent's request.

Our staff periodically performs a direct visual check of each sleeping toddler by being physically present in the room while the child is sleeping and looking for indicators of distress or unusual behaviours. We are not using electronic sleep monitoring devices.

There is always sufficient light in the sleeping area or room to conduct direct visual checks.

Each child has assigned an individual cot. The cots are labeled with names of children using that particular cot for sleeping. The labels will be checked before children are put into sleeping in order to verify whether there is a change to the assignment of cribs and cots.

We will advise staff, students and volunteers on each child's sleep preferences as documented in **Child Info Sheet** or in special cases in **Individualized Support Plan.** The staff, students and volunteers will be trained in required procedures and sign training sheet.

We will communicate the observance of any **significant changes in a child's sleeping patterns or behaviours** during sleep to parents and will adjust the manner in which the child is supervised during sleep.

We will also discuss details regarding the performance of direct visual checks, including how frequently direct visual checks will be performed and how direct visual checks will be documented.

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We will consider parents' input, the sleep environment at the premises and the proximity of the sleeping area or room to the child care provider when the child is sleeping.

The current recommendation is that children <u>younger than 12 months</u> of age be placed on their <u>backs</u> for sleep. This has been Health Canada's recommendation since 1993, as a means to reduce the risk of Sudden Infant Death Syndrome (SIDS).

It is important to note that once <u>infants are able to roll</u> from their backs to their stomachs or sides, it is not necessary to reposition them onto their backs.

### Sleep monitoring (only toddlers)

All sleeping children must be checked at 10-15 minute intervals. Staffs who are working in the rooms are all responsible for checking the children.

Checking children while sleeping should involve:

- a direct visual check of each sleeping child by physically going over to the child while the child is sleeping and
- look for indicators of distress or unusual behaviours.
- check the child is breathing
- ensuring that each child is well
- ensuring that each child is not too hot or too cold
- ensuring that all sheets or blankets are not wrapped around the child

The sleep monitoring chart is used to record the checks and is signed by the member of staff carrying out the check. A record of each child's daily sleep pattern is recorded too.

We recognize that infant children do not have set rest/sleep schedules and will need to rest/sleep based on each child's individual needs.

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# INDIVIDUALIZED SLEEP ARRANGEMENT TRAINING

Child's name:						
Trainer's name: Date:						
Trainer's Signatur	e:					
(please check one) Parent:			Physician:			
This signifies that y arrangement/prefer				ınderstand t	he s	special sleep
We also require an	annual signa	ature,	once it ha	as been revi	iewe	ed.
Staff's Name	Date		Signature		Witness	
Volunteer/Student	Date	Signature		Witness		Trainer's Name
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