

RISK ASSESSMENT ACTION PLAN – SAFE SLEEP AND REST PRACTICES

The Education and Care Services National Law requires services to ‘ensure that a risk assessment is conducted to identify potential emergencies that are relevant to the service’ (Section 97 (2) and ensure that every reasonable precaution is taken to protect children... from harm and from any hazard likely to cause injury (Section 167). Taking precautions involves carrying out risk assessments within your service to assess the risks and plan how to manage them.

Working in conjunction with the *Risk Assessment Guide* and *Sleep and Rest Policy*, this Risk Assessment Action Plan assists to ensure safe sleeping practices are implemented for all children at our service. Potential hazards or risks are identified to minimise the risk of SUDI (Sudden and Unexpected Death in Infancy) by following recommendations and guidelines as provided by the national authority on safe sleeping practice for infants and children- Red Nose Australia (formerly SIDS and Kids) and outlined within our Sleep and Rest Policy. Risk assessments should involve nominated supervisors, educators and anyone who has a duty of care for those in the service.

IN CASE OF EMERGENCY DIAL 000					
SERVICE DETAILS IN CASE OF AN EMERGENCY					
Service Name	Emmerick Street Community Preschool	Phone Number	9810 4845	Email Address	director@emmerickstreet.com.au
Physical Address	15 Emmerick Street, Lilyfield, NSW			Nearest Cross Street	Perry Street, Lilyfield
Nominated supervisor name	Simone Delagarde	Total number of staff in attendance each day	Approximately 5-7	Number of children attending each day	Up to 26

The risk assessment will be reviewed when necessary or after becoming aware of an incident or circumstance where the health, safety or wellbeing of children during sleep or rest may be compromised. All risk assessments will be regularly assessed and evaluated to facilitate continuous improvement in our service.

If a risk concerning a child's safety during sleep or rest is identified during the risk assessment, the approved provider must update the *Sleep and Rest Policy* and Procedure as soon as possible. The risk assessment must be stored safely and securely and kept for a period of 3 years.

EMERGENCY SITUATION RISK ASSESSMENT STEPS – Refer to the *Risk Assessment Guide*

STEP 1	Identify the hazard or potential hazard. Use <i>Guiding Questions</i> to be aware of potential risks.
STEP 2	Assessing the risk of harm or potential harm. <i>Likelihood and Consequences</i> .
STEP 3	Risk Rating Matrix
STEP 4	Risk Assessment Action Plan
STEP 5	Evaluate and Review

STEP 1: GUIDING QUESTIONS FOR OUR RISK ASSESSMENT	YES	NO	ACTION REQUIRED
Do we have a policies and procedures for providing safe sleep and rest practices (Reg. [<i>Sleep and Rest Policy</i>])	✓		
Has the <i>Sleep and Rest Policy</i> been reviewed and updated regularly?	✓		
Have staff and families been involved in the review of the <i>Sleep and Rest Policy</i> ?	✓		

Is information regarding the <i>Sleep and Rest Policy</i> , and related procedures available to new families as part of the enrolment induction?	✓		
Are risks identified within this risk assessment controlled or managed to reduce harm to children?	✓		
Are appropriate opportunities to meet each child's need for sleep, rest and relaxation including providing children with comfortable spaces away from the main activity area for relaxation and quiet activities provided?	✓		
Do educators respond to children's individual cues for sleep?	✓		
Do educators create a relaxing environment for sleeping children by playing relaxation music, reading stories, cultural reflection, dimming lighting, and ensuring children are comfortably clothed?	✓		
Do educators consider individual children's health care needs when planning sleep and rest?	✓		
Do educators ensure all children are placed in a head-to-toe position with adequate spacing between beds to minimise the possibility of cross contamination between children?	✓		
Do educators consider cultural preferences and requests from families (in accordance with Red Nose Recommendations)?	✓		
If safe sleeping practices are to be modified (or alternative practices requested by the family) has written advice been provided by a medical practitioner?	✓		
Do physical checks of a sleeping child occur at least every 10 minutes?	✓		
Do educators observe children's breathing and colour of their lips and skin whilst children are sleeping?	✓		

Is adequate supervision and educator ratios maintained throughout the sleep/rest period?	✓		
Are educators within sight and hearing distance of sleeping and resting children so they can easily monitor a child's breathing and the colour of their skin?	✓		
Do educators ensure children who are sleeping or resting have their face uncovered at all times?	✓		
Have all staff undertaken current safe sleep practices training?			Training booked for early 2024
Is information regarding the <i>Sleep and Rest Policy</i> and related procedures available to new and existing staff through the induction and orientation program and staff handbook?	✓		
<ul style="list-style-type: none"> Are all staff aware of the Safe Sleep and Rest Practices Procedure? 	✓		
Are staff aware they can contact the Red Nose Australia for more information regarding implementation of safe sleep practices?	✓		
Is consideration provided to the location and arrangement of sleep and rest areas?	✓		
Are rest mats/mattresses used for the correct purpose of sleep and rest only?	✓		
Are mattresses in good, clean condition and comply with Australian Standards AS/NZS Voluntary Standard (AS/NZS 8811.1:2013 Methods of testing infant products – Sleep surfaces – Test for firmness)?	✓		
Are bassinets not used or stored within the service (reg 84D)?	✓		
Are mattresses clean and in good repair, are they wiped over with warm water and neutral detergent or vinegar solution between each use?	✓		

Are the rest mats in good repair and not shared between children?	✓		
Does the risk assessment consider risks and potential hazards in the sleep and rest areas?	✓		
Does the risk assessment consider risks and potential hazards for a child during sleep and rest periods?	✓		
Is the sleep and rest environment safe and free from hazards including cigarette and tobacco smoke?	✓		
Are areas for sleep and rest are well ventilated and have natural lighting?	✓		
Is there sufficient lighting to allow supervision and to physically check children's breathing, lip and skin colour?	✓		
Do educators remove any loose clothing that could entangle the child whilst resting/sleeping?	✓		
Do educators ensure children do not wear amber teething necklaces (bracelets and necklaces of amber beads) when resting/sleeping?	✓		
Hazards that may pose a risk of suffocation, choking, crushing or strangulation to children have been removed from the sleep environment?	✓		
Is information shared with parents and families about safe sleep and rest practices?	✓		
Is information regarding the <i>Sleep and Rest Policy</i> , and related procedures available to new families as part of the enrolment induction?	✓		
Has the risk assessment been reviewed regularly? (every 1-2years)	✓		

SLEEP AND REST (Reg 84D)		STRATEGIES	ACTION REQUIRED
1	The age, developmental stage and individual needs of the child	The team will be aware of particular individual needs including any health/medical needs that may impact on sleep and rest. The team will ask families questions and sleep needs will be more prominent in our enrolment process.	The Director/Admin to communicate any new information to the team when necessary. The team to be up to date with children's needs.
2	The sleep and rest needs of children being educated and cared for (including health care needs, cultural preferences, sleep and rest needs of individual children and requests from families about a child's sleep and rest	The team will ask families questions and sleep needs will be more prominent in our enrolment process.	Make sleep and rest more prominent in the enrolment process. This includes specific questions about individual children's needs.
3	The suitability of staffing arrangements and knowledge of sleep and rest time to adequately supervise and monitor children during sleep and rest periods	The team will discuss safe sleeping practices and go over the policy in a staff meeting. New staff will be inducted and this will be highlighted. The team will do some Red Nose Training in 2024.	Book into Red Nose training for 2024
4	The location of sleep and rest areas, will be suitable and safe	The team will have designated sleep and rest areas and if there is a child who needs sleep outside of usual rest hours, the team will decide on the most suitable position in consultation with the child with the individual needs in mind as well as safety and supervision.	The team to discuss new needs of children related to rest at times outside of usual routine rest times.
5	The safety and suitability of any rest mats/mattresses or any other equipment	The team will scan rest mats for any safety risks and be aware of Australian Standards for any rest mattresses that are used.	Learn about Safety Standards with Sleep equipment related to preschoolers.
6	Any potential hazards in sleep and rest areas on a child during sleep and rest periods. The physical suitability of sleep	The team will scan and monitor any potential dangers in rest environments.	Areas of rest/sleep will be scanned for and potential risks.

	and rest environments (including temperature, lighting and ventilation)		
STEP 2: ASSESSING THE LIKELIHOOD		ASSESSING THE CONSEQUENCES	
Almost certain	Has occurred on an annual basis (or more frequently) in the past	Critical	Extreme risk. Death or permanent disability or multiple serious injuries. Loss of or catastrophic damage to premises. Risk needs careful planning and consideration required before going ahead- consultation and guidance required-policies/procedures/external professionals (RFS, SES)
Likely	Has occurred in the past few years	Major	High risk. Complete a risk assessment and consider if risk is worth accepting. Serious long-term injury or illness could occur. Major damage to premises.
Possible	May occur at some stage (has occurred at least once in the history of the Service)	Moderate	Medium risk. Deal with the hazard as soon as possible. Complete risk assessment to implement control measures to manage and reduce risk. Medical attention may be required. Damage to premises may occur.
Unlikely	Has never occurred within the Service but has been known to infrequently occur in similar early education and care services in the local geographic area	Minor	Low risk. Deal with the hazard when able-implement effective control measures to reduce risk. First aid may be required. Minor damage to premises. Unlikely to cause long-term problems.
Practically impossible	It is not known to have occurred in any similar early education and care service within the local geographic area	Insignificant	Very low risk. Deal with the hazard when able. No first aid required. No interruption to general operations. Damage to premises unlikely.

STEP 3: RISK RATING MATRIX. Use the Risk Score Matrix to identify and assess risks. Record the Risk Ranking within the Risk Assessment below

		CONSEQUENCE LEVEL				
		Critical	Major	Moderate	Minor	Insignificant
LIKELIHOOD	Almost Certain	Extreme	Extreme	Extreme	High	Medium
	Likely	Extreme	Extreme	High	Medium	Medium
	Possible	Extreme	High	Medium	Medium	Low
	Unlikely	High	Medium	Medium	Low	Very Low
	Practically Impossible	Medium	Medium	Low	Very Low	Very Low

STEP 4A: RISK ASSESSMENT ACTION PLAN – Management of risks and potential hazards for sleep and rest areas						
ITEM	EVENT OR ACTIVITY	HAZARD IDENTIFICATION (What could go wrong?)	RISK RANKING (use matrix)	ELIMINATION OR CONTROL MEASURES	RESPONSIBILITY	
					WHO	WHEN
1	Children on rest mats	Children could choke on bedding or an item near them or on them	M	The team to scan the children for any potential choke hazards on or near a child.	All staff	At each rest time
2	Children with a medical issue related to respiratory or other	Children may develop SIDS	L	The team to be aware of individual children's medical needs and learn more about sleeping and rest needs from families. The team to learn more about preschooler SIDs from some training and Red Nose resources. New staff will be inducted and given relevant information about children's health and safety.	All staff	Ongoing

STEP 5: EVALUATE AND REVIEW						
THIS SLEEP AND REST RISK ASSESSMENT HAS BEEN DEVELOPED IN CONSULTATION WITH MANAGEMENT OF THE SERVICE						
Plan prepared by	Full Name	Simone Delagarde & Heidi Lee	Role/Position	Dir/Admin	Signature	
Communicated to all relevant staff	Y / N	Comment if needed				
Approved provider authority	Full Name	Amynta Stavliotis	Signature		Date	
Risk assessment evaluation and review date Monitor the effectiveness of the controls and change if necessary	Date	As needed	Actions required			