



The Oak Partnership

TOP Nursery Sleep Policy

We are committed to safeguarding and ensuring the health, safety and well-being of all pupils in accordance with safeguarding procedures and guidance for staff outlined in the schools' Health and Safety, Child Protection, Security and Safeguarding policies.

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Document Information

	Information		
Document author:	COO in consultation with Early Years Strategic Lead & Nursery Managers		
Review by:			
Approved by:	Executive Team	Date	04/05/2020
Adopted by:	Woodlands Nursery Little Herons Nursery		
Publication date:	2020		
Review date:	September 2025		
Review schedule:	Annual		
Distribution:	Little Herons & Ruishton Website		
Document status:	Version 5.0		

Version Control

Version	Issue Date	Amended by	Comments
1.0	Sep 2020	GM EYSL	New Nursery policy
2.0	Sep 2021	GM EYSL	Review – no update
3.0	Sep 2022	GM EYSL	Reviewed – no update
4.0	Jan 2023	GM EYLS	Reviewed- no update
5.0	Sep 2024	GM EYSL	Reviewed – no update
6.0	May 2025	GM EYSL	Updated in line with Key model policy, and updated sleep records

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1.Aims

This policy sets out clear guidance on sleep arrangements for children in the nursery to ensure their safety, wellbeing, and development. The aim is to create a calm, safe, and responsive environment that supports children’s need for rest and sleep.

1. 2.Legislation and Statutory Responsibilities

This policy is guided by the following statutory requirements and frameworks:

- Statutory Framework for the Early Years Foundation Stage (EYFS), 2021
- The Health and Safety at Work Act 1974
- The Children Act 2004
- The Equality Act 2010
- Ofsted standards and guidance
- Local Safeguarding Children Partnership (LSCP) procedures

3.Roles and Responsibilities

- The Nursery Manager is responsible for the implementation, monitoring, and review of this policy.
- All practitioners are responsible for following safe sleep procedures and for logging checks.
- The Key Person monitors individual sleep patterns and works with families to meet children's individual needs.

4.Equal Opportunities.

The nursery respects and accommodates children's cultural and individual differences around sleep. All children are provided with equitable opportunities to rest in a calm, inclusive environment regardless of background, beliefs, or medical needs.

5. Sleep Procedures

- The nursery provides a designated, calm sleep room for children who need rest during the day.
- Children sleep on individual beds or sleep mats with clean bedding provided.
- Children's sleep needs are discussed with parents and are incorporated into their care plan.
- A practitioner completes sleep checks every 10 minutes. These are logged with time, position, and wellbeing noted.
- The sleep environment is checked before use for cleanliness, hazards, and temperature regulation.
- Staff ensure that children are laid in a safe sleeping position (on their back unless otherwise medically required).

6. Monitoring, Emergencies, and Illness

- If a child becomes unwell during the day and requires rest, their temperature, symptoms, and comfort will be assessed by a senior practitioner.
- If a child experiences a medical episode such as a seizure, emergency medical procedures will be followed, and parents contacted immediately.
- Following a seizure, and only once the child is stable and alert, they may rest in the sleep room under continuous one-to-one monitoring.
- Any incident will be recorded, and a full risk assessment will be completed before the child returns to a regular sleep routine.

7. Partnership with Parents

- Parents are informed daily of their child's sleep duration and behaviour.
- Staff work in partnership with parents to develop consistent routines.
- Any significant change in sleep pattern is discussed with the family.
- Parents are encouraged to share medical or behavioural concerns that may affect sleep.

8. Safeguarding and Health

- All practitioners follow safeguarding procedures in line with the Safeguarding Policy.
- If staff observe any injuries or symptoms of concern during sleep checks, these are reported immediately to the Designated Safeguarding Lead.
- Hygiene protocols are followed rigorously, and bedding is laundered after each use.

Appendix 1

Sleep Monitoring Record

Child's Full Name: _____

Date: _____

Room: _____

Key Person: _____

Time	Staff Initials	Position (Back/Side/Other*)	Breathing Normal (Yes/No)	Comfort Checked (Yes/No)	Notes/Comments

Sleep preferences, health, or observations of concern must be logged in child's daily record or reported to senior staff.

Appendix 2

Individual Sleep Plan Template

Child's Full Name: _____

Date of Birth: _____

Key Person: _____

Preferred sleep time:

Comfort objects (e.g., dummy, blanket):

Sleep position (if medically specified):

Usual duration of sleep:

Settling methods used at home:

Medical considerations (e.g., reflux,
epilepsy):

Action plan if unwell during sleep:

Date agreed with parent: _____

Signed (Parent/Carer): _____

Signed (Key Person): _____

Date for review: _____

Appendix 3

Medical Incident During Sleep – Emergency Response Record

Child's Name: _____

Date: _____

Time of Incident: _____

Staff Present: _____

Lead First Aider: _____

1. Description of Incident:

2. Observations Made (symptoms, breathing, movement):

3. Actions Taken (including emergency services contacted, parental notification):

4. Child's condition post-incident:

- Fully Recovered
- Required Medical Attention
- Rested under observation (state who observed): _____

5. Parental Communication:

Parent/Carer Notified at: _____

Name of Contacted Person: _____

Method: Phone In-Person Other: _____

6. Follow-Up Action Required:

- GP Follow-Up
- Return-to-Nursery Risk Assessment
- Review Individual Care Plan
- Referral to Specialist

Staff Signature: _____

Manager Signature: _____

Date: _____