

## Let there be light!

Why we need to get rid of blackout blinds in cot rooms.

Sleep.

What an intense conversation topic particularly amongst new parents, whose group gatherings often sound like this: “Who sleeps through the night? When do you transition from three naps to two? From two to one? Who has used a sleep consultant? Did they help? Is your baby self-settling? Have you tried the RiffRaff? White noise? How about a Lulladoll?”

For educators (particularly those working with babies and infants) new children to the room come with their own very individual routines. Often these routines include extremely specific sleep requests, including ‘pitch black room’. What if we were to tell you that ‘pitch black room’ may not be contributing to the quality of a child’s sleep but instead can be a huge factor in entirely preventable deaths in early childhood settings?

All too often when questioning certain practices in Early Childhood centres across Australia, I am met with the justification of ‘but the parents like/want it’. This is often the response when discussing the use of worksheets, phonics, and rewards charts but when I am met with that reasoning regarding pitch black cot rooms, my response takes a darker turn. Because when we are making practice decisions because the parents want it and those decisions can result in the death of a child, it’s time to arm ourselves with knowledge and have a conversation about why we will not black out the cot rooms. Just like changing the mindset around the practices mentioned above, PARENT EDUCATION is the magic ingredient here.



So, imagine you are a part of a team who have decided that child safety is paramount to your practices. You are getting rid of the blackout blinds in the cot rooms, and you're making sure that you can see the colour of every child's skin while they sleep. (You have also added this to your QIP, referencing 2.2.1-Supervision) Parents are noticing this new sleep environment and are asking questions, worried that their child won't have their usual daily nap. What points will you discuss?

1. OUR NATIONAL QUALITY STANDARD. Highlight to parents that Standard 2.2.1 tells us that we need to ensure 'At all times, reasonable precautions and adequate supervision ensure children are protected from harm and hazard'. Really point out that ensuring there is enough light to see the colour of children's faces while they sleep is paramount. We need to be able to see if a child is turning blue and hear their breathing. This supervision requires physical presence in a cot room, not just glancing through a glass window or a monitor screen.

2. ACECQA. The Australian Children's Education and Care Quality Authority updated their information of safe sleeping in October 2017, and as outlined in the link below 'An inquest into the death of Indianna Rose Hicks in 2012 found Indianna, who was five months old when she died suddenly and unexpectedly while in care, died from Sudden Infant Death Syndrome (SIDS).



A recommendation was made via the Consultation Regulation Impact Statement on proposed options for changes to the National Quality Framework (NQF), that Regulation 168 in the National Regulations, 'Education and care service must have policies and procedures' be amended to include a requirement for a policy on 'Sleep and rest for children and infants', including matters set out in Regulation 81 (Sleep and rest).'

3. THE EDUCATION AND CARE SERVICES NATIONAL REGULATIONS, REGULATION 101.  
Ventilation and natural light.

The approved provider of an education and care service must ensure that the indoor spaces used by children at the education and care service premises—

- (a) are well ventilated; and
  - (b) have adequate natural light; and
  - (c) are maintained at a temperature that ensures the safety and wellbeing of children.
- Penalty: \$2000.

'Adequate' means that the light in a cot room needs to ensure all team members can easily see the colour of children's skin on their faces, as well as enough light to see the state of the bedding and ensure children are not covered or buried within it.

4. SLEEP ROUTINES AND RITUALS: Early Childhood Australia has some great parent resources around sleep routines and rituals. Our job is to ensure that we embed and communicate our own sleep routines and rituals at our centres. If we truly see children as capable, then we know that they will be capable of differentiating between home and centre, and be able to navigate the new sleep environment. Its also worth noting that at home there are (usually) not 7 other children sharing a bedroom with a child, so the sleep environment is already very different to their bedroom at home.

We have such an immense responsibility to the children and families that we work with every single day, a responsibility to care for and educate and above all else, to return them to their families in the state they were dropped off in. Children have the right to the safest possible sleep environments that we can provide, environments full of natural light and regular checks in person.

ACECQA: <https://www.acecqa.gov.au/resources/supporting-materials/infosheet/safe-sleep-and-rest-practices>

National Regulations: <https://www.legislation.nsw.gov.au/view/html/inforce/current/sl-2011-0653>

ECA Sleep associations and rituals: <http://www.earlychildhoodaustralia.org.au/parent-resources/sleeping/#sleep-association-and-bedtime-rituals>

Written by Ange Day, facilitator at Phoenix Support for Educators.