

Sleep Risk Assessment Form to minimise the risk of SUDI

Educator:

Date:

Does the cot meet Australian Standards? Is it a portable or standard cot? <i>Household Cot: AS/NZS 2172-2003</i> <i>Portable Cot: AS/NZS 2195</i>	
Does your cot have a label displaying that it meets relevant standards? If not, are you able to produce documentation outlining that it meets relevant standards?	
Is the mattress firm, clean, flat and the right size for the cot?	
Is the cot positioned away from hanging cords? <i>E.g blinds, curtains or electrical</i>	
Is the cot positioned away from heaters, appliances, and furniture?	
Is the cot free from electric blankets, hot water bottles and wheat bags?	
Is the cot free from toys, bumpers, loose bedding, pillows and lambswool?	
Is there adequate space between cots and beds for educators to move freely between to safely check sleeping children?	
Is there adequate light to allow for visual supervision of the child? <i>E.g colour of their skin and lips</i>	
Is there appropriate ventilation in the sleep space?	
Are children placed on their back to sleep?	
Are children's faces and head uncovered?	
Are children dressed for the room temperature?	
If children are sleeping in a suit or bag, are they fitted around the neck and arms are completely out of the bag?	
If using sheets or lightweight blankets, are children positioned towards the bottom of the cot and bedding is tucked firmly up to the child's chest only?	

<p>Are children over 7 months old with one toy, comforter or comforting blanket being checked every ten minutes to ensure their face is uncovered? Please specify each child's comforting item. <i>These items should be removed once the child has fallen asleep.</i></p>	
<p>Have any potential hazards in sleep and rest areas or on a child during sleep and rest periods been removed and or managed?</p>	
<p>Do you follow and document safe sleep checks as required by your scheme? <i>e.g. Physical and visual (rise and fall of a child's chest and the colour of their skin and lips) checks from the side of the cots/beds every 10 minutes?</i></p>	
<p>Does the location of the sleep and rest area/s allow for adequate supervision and safe sleep checks?</p>	
<p>Are beds being used close to the ground? <i>E.g. mats, childcare specific stacking beds or toddler beds</i></p>	
<p>If no, what safety measures are in place to prevent falls?</p>	
<p>Pillows are not recommended for children under 2 years old, if any children are under 2yo, is their bed/cot pillow free?</p>	

Other

<p>Do any children have any underlying medical condition/health needs that may require increased supervision when sleeping/resting? Please outline how you will manage this. <i>For example, born prematurely, lung/respiratory conditions, baby with a cold, ethnicity weight, previous history of illness, exposure to environmental stressors (tobacco smoke, etc)</i></p>

How are you managing having children in care awake and asleep at the same time?
Have the ages and developmental stages of the children in your care regarding sleep and rest been considered? <i>This includes the safety and suitability of any cots, beds, and bedding equipment for the children who will use them.</i>
Have you considered specific health care needs, cultural preferences, the needs of individual children, and requests from families about a child's sleep and rest?

Use the risk matrix to determine the risk and outline the control measures to manage and or reduce the risk.

Risk Assessment Matrix		Consequences				
		Negligible No injuries or not requiring first aid	Minor First aid needed	Moderate Medical treatment	Major Serious injury	Severe Death or permanent disability.
Likelihood	Certain to occur Expected to occur in most circumstances	Low	Medium	Medium	High	High
	Very Likely Will probably occur in most circumstances	Low	Low	Medium	High	High
	Possible May occur occasionally	Rare	Low	Low	High	High
	Unlikely Could happen at some time	Rare	Rare	Low	Medium	Medium
	Rare May happen only in exceptional circumstances	Rare	Rare	Low	Low	Low