R381-100-22: REST AND SLEEP

This section explains the rules regarding children’s rest and sleep in a child care program. The section also explains the rules that apply to sleeping equipment used by children in care. This includes sleeping equipment that is used during child care hours by the provider’s and caregivers’ own children younger than 4 years old.

Rest and Sleep

1. The provider shall offer children in care a daily opportunity for rest or sleep in an environment with subdued lighting, a low noise level, and freedom from distractions.

Rationale / Explanation

Studies suggest that sleep is essential for the optimal health and growth of children. The Centers for Disease Control and Prevention (CDC) makes the following recommendations.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Recommended Hours of Sleep per Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborn</td>
<td>0-3 months 14-17 hours per 24 hours</td>
</tr>
<tr>
<td>Infant</td>
<td>4-12 months 12-16 hours per 24 hours (including naps)</td>
</tr>
<tr>
<td>Toddler</td>
<td>1-2 years 11-14 hours per 24 hours (including naps)</td>
</tr>
<tr>
<td>Preschool</td>
<td>3-5 years 10-13 hours per 24 hours (including naps)</td>
</tr>
<tr>
<td>School-Age</td>
<td>6-12 years 9-12 hours per 24 hours</td>
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</tbody>
</table>

Most preschool children benefit from scheduled rest periods in the form of a quiet time or actual napping. School-age children should have scheduled times for resting and relaxing activities, such as reading or playing a quiet board game. Children who are overly tired can exhibit health and behavior problems. Conditions conducive to rest and sleep include a quiet place, a regular time for rest, and a consistent caregiver. CFOC 3rd ed. Standard 3.1.4.4. pp. 100-101.

According to the CDC, children who do not get enough sleep are more likely to:
- Be overweight
- Not get enough physical activity
- Suffer from depressive symptoms
- Engage in unhealthy risk behaviors such as drinking alcohol
- Perform poorly in school

Taken from: https://www.cdc.gov/sleep/pdf/publicationsmediaproducts/p0806-school-sleep.pdf

Noncompliance Level

Level 3 Noncompliance

2. Nap or rest times shall not be scheduled for more than 2 hours daily.

Rationale / Explanation

Nap or rest times are crucial for the well being of every child. However, there must be other
activities offered to children to support their physical, social, emotional, cognitive, and language development.

**Compliance Assessment and Guidance**
Refer to the following guideline:
- Nap or rest times may not be scheduled for more than two hours so that children are not forced to stay still or remain in a quiet time when they are no longer tired or in need of rest. However, children who are tired may sleep more than the two-hour rest time.

**Noncompliance Level**
Level 3 Noncompliance

**Sleeping Equipment**
The following guidelines apply to the assessment of sleeping equipment:
- Sleeping equipment includes cots, mats, cribs, bassinets, cradles, porta-cribs, playpens, play yards, and beds.
- Sleeping equipment that will not be inspected includes:
  - Equipment where an infant or child is sleeping at the time of the inspection unless the equipment can be assessed without waking the child, for example, observing if the equipment blocks an exit or that the crib and surrounding area are free of strings, cords, ropes, or other entanglement or strangulation hazards.
  - Cribs and sleeping equipment that are identified as never being used by children in care.
  - Cribs that are used only for evacuation in the case of an emergency and are never used by children for any other purpose.
- A crib that has been converted into a toddler bed will not be inspected as a crib unless it is used to sleep infants. If it is converted back to a crib, it may not be used to sleep any child in care without passing a CCL inspection.

1. **A separate crib, cot, mat, or other sleeping equipment shall be used for each child during nap times.**

**Rationale / Explanation**
Infectious diseases, such as the common cold, can be spread if children share sleeping equipment. Providing separate sleeping equipment and bedding for each child can prevent the spread of these diseases. Providing separate sleeping equipment also prevents young children from injuring one another or spreading disease by breathing directly into each other's faces during rest time. *CFOC 3rd ed. Standard 5.4.5.1. pp. 251-253.*

**Noncompliance Level**
Level 2 Noncompliance

2. **Sleeping equipment shall be kept in good repair, including mats and mattresses that shall have smooth, waterproof surfaces.**

**Rationale / Explanation**
The purpose of this rule is to prevent injury to children from broken equipment. Staff should inspect sleeping equipment often to ensure that hardware is tightened and that there are not any safety hazards. *CFOC 3rd ed. Standard 5.4.5.2. p. 253.*

Mats and mattresses need waterproof surfaces without tears and cracks so they can be

**Compliance Assessment and Guidance**

Refer to the following guidelines:

- Examples of sleeping equipment in disrepair include an unstable crib, a crib with missing slats or a broken railing, or a porta-crib with a hole greater than 2½ inches in diameter in any of the mesh sides.
- To ensure they are in good repair with smooth, waterproof surfaces, sleeping mats or crib mattresses should not have cracks or tears on the side a child sleeps on. One side of a mat or mattress can be repaired with duct tape as long as children do not sleep on the taped side and the mats or mattresses are not stored on top of each other.

**Noncompliance Level**

Level 2 Noncompliance

(5) Each crib shall:

- (a) have a tight-fitting mattress;
- (b) have slats spaced no more than 2-3/8 inches apart;
- (c) have at least 20 inches from the top of the mattress to the top of the crib rail, or at least 12 inches from the top of the mattress to the top of the crib rail if the child using the crib cannot sit up without assistance;
- (d) not have strings, cords, ropes, or other entanglement hazards on the crib or within reach of the child; and
- (e) meet CPSC standards.

**Rationale / Explanation**

An infant or young child can suffocate if its head or body becomes wedged between the mattress and a crib side. Crib mattresses should fit snugly and be made specifically for the size crib in which they are placed. *CFOC 3rd ed. Standard 5.4.5.1. p. 252; Standard 5.4.5.2. p. 253.*

Children have strangled because their head or neck became caught in a gap between the slats. Deaths by asphyxiation resulting from the head or neck becoming wedged in parts of a crib are well documented. *CFOC 3rd ed. Standard 5.4.5.2. pp. 253-254.*

Children can be injured if the top of the crib or other piece of sleeping equipment is not high enough to prevent infants and children from falling out. *CFOC 3rd ed. Standard 5.4.5.2. pp. 253-254.*

Caregivers should never use strings to hang any object, such as a mobile, toy or diaper bag, on or near sleeping equipment. Infant monitors and their cords, and other electrical cords should never be placed near or in sleeping equipment. Cribs and other sleeping equipment should be placed away from window blinds and draperies if the cords are within reach. These items present a potential hazard if they can be reached and/or pulled down by an infant or young child. Objects that dangle from cords or strings can wrap around a child’s neck causing strangulation. *CFOC 3rd ed. Standard 5.4.5.1. p. 252; Standard 6.4.1.3. p. 285.*

More infants die every year in incidents involving cribs than with any other nursery product. Standards have been developed to define crib safety, and providers should make sure that cribs used in the facility meet these standards to protect children and prevent injuries or death. Significant changes to the ATSM and CPSC standards for cribs took effect as of June 28, 2011. For information about these standards, refer to:
Compliance Assessment and Guidance
Refer to the following guidelines:

- To determine if a crib has a tight-fitting mattress
  - Move the mattress to one corner of the crib and as close as possible to the head or foot of the crib
  - If this creates a gap between the mattress and any side of the crib, place a choke tube vertically at the widest point of each gap (if a choke tube is not available, you could use the width of two adult fingers together). If the tube fits entirely between the crib side and the mattress, the mattress is not tight fitting.
- A firm material such as wood may be added to a crib frame to create a tight-fitting mattress, as long as the material is flush with the top of the mattress.
- It is not in compliance if any item such as a blanket, eggshell mattress, or foam is wedged in between the mattress and the crib frame.
- It is out of compliance if:
  - One end of a mattress is propped up making the distance between that end of the mattress and the top of the crib railing less than 20 inches.
  - A hinged crib side is folded down and not in the up position resulting in a measurement that is less than 20 inches from the mattress to the top of the crib side. It is out of compliance even if a caregiver is next to the crib.
- No strings, cords, ropes, or other entanglement or strangulation hazards must be on or in the crib, or within 36 inches of any part of the crib.
- It is out of compliance if any strings or cords are longer than 8 inches and are in or on the sleeping equipment, or within 36 inches from the surface of the sleeping equipment. This includes pacifier cords, mobiles hanging over a crib, and electrical cords that might be on furniture or the floor next to the crib.
- A crib that has been previously approved by CCL for compliance with CPSC crib standards does not need to be inspected again unless the crib has been replaced or repaired.
- To determine CPSC compliance:
  - Look at the manufacturing date on the crib or the registration form that may have been supplied when the crib was purchased.
  - The manufacturing date can be found usually on the board that holds the mattress or on the lower part of the crib frame.
  - A purchase receipt is not adequate documentation.
  - Confirm that the label or form shows the crib was manufactured on or after June 28, 2011.
- If a provider believes the crib meets federal standards but does not have a manufacturing date or registration form, the provider may:
  - Contact the manufacturer or retailer and ask for documentation that the crib is in compliance with 16 CFR Part 1219 or 16 CFR Part 1220.
  - Submit the documentation to CCL before using the crib to sleep children in care.

Noncompliance Level
Level 2 Noncompliance

(6) When in use, sleeping equipment such as cribs, cots, and mats shall be placed at least 2 feet apart.

Rationale / Explanation
The American Academy of Pediatrics and the American Public Health Association recommend at least three feet of space between children's sleeping equipment. This will reduce the spread of
infectious diseases by children breathing in one another's faces during sleep. Adequate spacing between sleeping equipment is also necessary to facilitate evacuation of sleeping children in case of an emergency. *CFOC 3rd ed. Standard 5.4.5.1. pp. 251-253.*

**Compliance Assessment and Guidance**

Refer to the following guidelines:

- If there is not enough room to place the sleeping equipment 2 feet apart, some sides of the equipment may be placed one foot apart if:
  - There is at least a 2-foot-wide, clear pathway from each piece of sleeping equipment to the exit, and
  - Children are positioned in a way that maintains at least a 2-foot distance between their faces. This may be accomplished by positioning the children head to toe.
- The following diagrams illustrate a few possible arrangements of sleep equipment.

![Example 1](image1)

![Example 2](image2)

![Example 3](image3)

- Cribs may be spaced end to end if the end of the crib is solid (wood, plexiglass, etc.), so children do not breath on each other. Porta-cribs may be placed side by side with a barrier between each crib if the ends are the same height as the sides. In this case, 2 feet will not be required between the cribs since the provider has access to the child and the barrier is preventing children from breathing on each other.

**Noncompliance Level**

Level 2 Noncompliance

(7) **Sleeping equipment shall not block exits.**

**Rationale / Explanation**

The purpose of this rule is to prevent resting children from getting stepped on by people exiting or entering the room, and to allow a quick and easy exit from the building in the event of an emergency. *CFOC 3rd ed. Standard 5.1.4.3. p. 207.*

**Compliance Assessment and Guidance**

Refer to the following guidelines:

- Sleeping equipment can be placed in front of a door or opening to a room, as long as there is at least one other doorway from the room that is not blocked and could be used in an emergency.
- Sleeping equipment may not block exits even when it is low and can be stepped over.
• Sleeping equipment must be far enough away from a door that if the door were to open inward, there would be enough clearance for the door to fully open (or swing 180 degrees).

**Noncompliance Level**
Level 2 Noncompliance

(8) **During nap time, a sheet and blanket or acceptable alternative shall be made available to each child 12 months or older. These items shall be:**
(a) clearly assigned to one child,
(b) stored separately from other children’s bedding, and
(c) laundered as needed, but at least once a week, and before use by another child.

**Rationale / Explanation**
For the health and comfort of the children, no child should sleep on a bare, uncovered surface. An appropriate covering, such as a sheet and blanket, should be offered to each child 12 months or older for use at nap time. Each child’s bedding and any special sleep item should be stored separately from those of other children. Bedding should be laundered as needed, at least weekly, and before use by another child. *CFOC 3rd ed. Standard 5.4.5.1. p. 252.*

Lice, scabies, and ringworm are among the most common infectious diseases in child care. These diseases can be spread if children share sleeping equipment. Providing separate sleeping equipment and bedding for each child can prevent the spread of these diseases. *CFOC 3rd ed. Standard 5.4.5.1. pp. 251-253.*

Using cleanable, waterproof, nonabsorbent rest equipment enables the staff to wash and sanitize the sleeping surfaces. Clean linens should be provided for each child on a regular basis and as needed. Beds and bedding should be washed between uses if used by different children. *CFOC 3rd ed. Standard 5.4.5.1. pp. 251-253.*

**Compliance Assessment and Guidance**
Refer to the following guidelines:
• A sheet and blanket or acceptable alternative must be made available to the children. However, children do not need to cover themselves (including their heads) with these items or use them if the children choose not to.
• Swaddling a child with a blanket will be considered an acceptable alternative to a sheet and blanket.
• A sleeping bag will be considered an acceptable alternative to a sheet and blanket.
• Bedding can be stored in bins, cubbies, or bags that are individually labeled with the child’s name.
• Bedding in a cubby labeled with the child’s name can be considered assigned to one child.
• Mats or cots can be clearly assigned to one child by labeling with each child’s name, by identifying each child’s mat or cot with a number or color code, or by labeling the container where the mats or cots are stored.

**Noncompliance Level**
Level 3 Noncompliance
(9) Sleeping equipment that is clearly assigned to and used by an individual child shall be cleaned and sanitized as needed and at least weekly.

**Noncompliance Level**
Level 2 Noncompliance

(10) Sleeping equipment that is not clearly assigned to and used by an individual child shall be cleaned and sanitized before each use.

**Noncompliance Level**
Level 2 Noncompliance

(11) The provider shall store sleeping equipment so that:
(a) the surfaces children sleep on do not touch each other, or
(b) the provider shall clean and sanitize sleeping equipment before each use.

**Rationale / Explanation**
From time to time, children drool, spit up, or spread other body fluids on their sleeping surfaces. Infectious diseases can spread if sleeping surfaces come in contact with each other. Storing sleeping equipment and bedding separately can prevent the spread of these disease.
*CFOC 3rd ed. Standard 5.4.5.1. pp. 251-253.*

**Noncompliance Level**
Level 2 Noncompliance