



Training Instructions ICCP Annual Training: Sleep 2 Training Hours

COMPONENT 8: HEALTH AND SAFETY

DESCRIPTION

This is a required training for the Idaho Child Care Program. This 2 hour training is available in a variety of formats: online, through the lending library at the Child Care Resource Center, live with a trainer, and in Spanish. It is available at no cost to child care providers, unless it is attended in a live training setting with a trainer.

Learning Objectives

- Recognize the characteristics of quality sleep or rest environments in child care.
- Examine the biological factors of sleep.
- Identify the different sleep needs across developmental stages.
- Examine the difference between typical sleep issues and concerns.

IDAHO EARLY LEARNING EGUIDELINES

- Domain 2: Motor Development, Physical Well-Being, and Health
- Caring for Idaho's Infants and Toddlers

MATERIALS (All materials are included in this file)

- ICCP Annual Training: Sleep
- Checklist of Practices
- Sleep Guidelines
- Temperament Assessment

- Supporting Articles:
 - ✓ *Creating an Environment for Safe and Healthy Sleep in Child Care Programs*
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 - ✓ *Healthy Children are Ready to Learn*
<https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/healthy-children-ready-learn.pdf>
 - ✓ *Just Breathe: The Importance of Meditation Breaks for Kids*
<https://www.healthychildren.org/English/healthy-living/emotional-wellness/Pages/Just-Breathe-The-Importance-of-Meditation-Breaks-for-Kids.aspx>

INSTRUCTIONS

1. Review training instructions
2. Watch training video (approximately 30 minutes)
3. Review handouts (15 minutes)
4. Review supporting articles – 3 links above (30 minutes)
5. Review Reflective Questions - below (15 minutes)
6. Complete Temperament Activity - below (15 minutes)
7. Complete Checklist of Practices (15 minutes)
8. Review IdahoSTARS Training Log to ensure 2 training hours has been entered

REFLECTIVE QUESTIONS

Please take a moment to consider these questions or situations and how you might respond.

1. Consider how the child care setting you work in is different from individual children's homes. How do you think the activity level, noise level, and individual attention differs?
2. If a child attending your program is accustomed to napping on a different schedule than your daily routine, how can you adapt to accommodate their needs while maintaining consistency for the other children?
3. A family might request that you practice something which you know does not align with safe sleep practices, examples might include:
 - Having a baby sleep in a carseat or swing
 - Putting a baby to bed with a sleep positioner
 - Not allowing a child to sleep so they don't stay up too late in the evening
4. How could you address this with the family that is sensitive to them while maintaining best health and safety practices for sleep?

TEMPERAMENT ACTIVITY

Complete the Temperament Assessment keeping in mind a child in your care or that you know well. Consider how their temperament traits might affect their sleep behaviors. For example, does the child wake up slowly and need time to adjust, or do they wake up ready for the next activity? Does the child have difficulty calming their body to rest, or do they lay down fall asleep easily? Compare that to the temperament traits identified on the assessment.

Annual Training: Sleep

Idaho Child Care Program

Checklist of Practice

Always	Sometimes	Not Yet	Caregiver Strategies: What they look like in practice
			1. Watch for and respond to child’s cues that indicate the need for quiet or active time.
			2. Offer quiet activities, rest periods, and nap times in the daily routine.
			3. Wash and sanitize sleep equipment on a regular schedule.
			4. Naptimes have a consistent routine.
			5. Read with child(ren) and babies and practice other calming routines at naptime and bedtime. (Singing songs, listening to music, etc.)
			6. Help children recognize personal signs of fatigue and need for rest.
			7. There is an opportunity for sleep or rest, but sleep is not required. A rest period for older children can include space for quiet play.
			8. During nap time, at least one adult is physically present and within sight and sound of the sleeping or resting children.
			9. Each child who spends more than four hours a day at child care has their own sleeping space/equipment.
			10. None of the sleeping equipment used has been recalled and is in compliance with the U.S. Consumer Product Safety Commission (CPSC).
			11. Remove sleeping infants from their car seat and placed on their back to sleep upon arrival.
			12. Provide a space for a “cozy corner” or one child nap area.
			13. Communicate with parents about children’s sleep habits.
			14. Infants are placed fully on their back when they are sleeping in a safety approved crib for every sleep, unless there is a physician’s note specifying another sleep position is necessary for an individual infant.
			15. Facilities only use safety approved cribs and firm mattresses, and providers keep cribs free of toys, stuffed animals, bumper pads, blankets, and extra bedding.





Idaho Child Care Program Annual Training: Sleep

SLEEP GUIDELINES

- Infants 4 months to 12 months should sleep 12 to 16 hours (including naps) during each 24 hour day.
- Toddlers 1 to 2 years old should sleep 11 to 14 hours (including naps) during each 24 hour day.
- Preschoolers 3 to 5 years old should sleep 10 to 13 hours (including naps) during each 24 hour day.
- Children 6 to 12 years old should sleep 9 to 12 hours during each 24 hour day. Children this age typically do not nap.
- Teens 13 to 18 years of age should sleep 8 to 10 hours during each 24 hour day.

Adequate sleep is associated with improved attention, behavior, learning, memory, emotional regulation, quality of life, and mental and physical health.

“American Academy of Pediatrics Supports Childhood Sleep Guidelines” . American Academy of Pediatrics. www.aap.org/en-us/about-the-aap/aap-press-room/pages/American-Academy-of-Pediatrics-Supports-Childhood-Sleep-Guidelines.aspx

The Temperament Assessment Scale for Children

By answering the following questions, you can increase your understanding of the temperaments of the children you serve.

Activity Level <i>How much does the child wiggle/move when being read to or sitting at a table?</i>						
High Activity	1	2	3	4	5	Low Activity
Regularity <i>Is the child regular about eating times, sleeping times, bowel movements, etc?</i>						
Regular	1	2	3	4	5	Irregular
Adaptability <i>How quickly does the child adapt to changes in schedule/routine, or to new food and places?</i>						
Adapts Quickly	1	2	3	4	5	Slow to Adapt
Approach/Withdrawal <i>How does the child usually react to new people, foods, toys, and activities?</i>						
Initial Approach	1	2	3	4	5	Initial Withdrawal
Physical Sensitivity <i>How aware is the child of slight noises, slight differences in temperature, differences in tastes or clothing?</i>						
Not Sensitive	1	2	3	4	5	Very Sensitive
Intensity of Reaction <i>How strong are the child's reactions? Does he laugh and cry energetically, or smile and fuss mildly?</i>						
High Intensity	1	2	3	4	5	Mild Reaction
Distractibility <i>Is the child easily distracted, or does s/he ignore distractions?</i>						
Very Distractible	1	2	3	4	5	Not Distractible
Mood <i>How much of the time does the child show pleasant behavior compared with crying/fussing behavior?</i>						
Positive Mood	1	2	3	4	5	Negative Mood
Persistence <i>How long does the child continue with one activity? Does s/he continue if it is difficult?</i>						
Long attention span	1	2	3	4	5	Short attention span