



Birchland Tree House Play Care Ltd.

Rest Time Policy

Rest time is an important part of an active child’s daily routine. Rest time will begin after lunch time and bathroom routine is completed. All children attending the 3-5 Group Care must participate in rest time.

Nap or Quiet time Definition

Parents will may the decision as to whether or not their child shall nap or have a rest. Choosing to nap time means your child will be provide an opportunity to sleep. Choosing a rest time means your child will be provided an opportunity to rest and will not be expected to sleep but will be required to rest their bodies for a period of time.

Nap time

Children napping will have their own mat, sheet, blanket and cuddly toy if needed. Children will be toiletted and their shoes removed prior to lying down. The staff will supervise the nap room at all times. The children will be relaxed through low lighting, soft music and rubbing their backs by a staff member if desired.

Children who fall asleep will be allowed to sleep as long as necessary or until 2:30pm, this usually means a maximum o 1 hr, 45mins of sleep time. As children wake, staff will be available to assist the children to join in play as they are ready.

Children whose parents have asked that their children nap, but do not fall asleep that day, will be encouraged to lay quietly for at least 30 mins. After they have laid quietly for a specific period of time they will be allowed to join the rest of the children who are not asleep in other quiet activities.

Rest Time

Children whose parents have chosen rest time will have an opportunity to be quiet for 30 mins. Children will be expected to be in their own space, which may be on a mat or desired area. If children gradually fall asleep on its own, they will be unbothered (meaning we will not wake them up). If children are awake, they may listen to quiet music, read books or a video. After 30 mins of quiet time alone, the children may play quietly with activities that will not wake the other children.

Parents’ Choice:

I want my child _____ to have: Nap Time ____ Rest Time ____

Parent/Guardian’s Signature

Date