



SLEEPING ARRANGEMENTS

NYS Regulations

416.7

417.7

(l) Other than for school age children, sleeping and napping arrangements must be made in writing between the parent and the program. Such arrangements shall include: the area of the home where the child will nap; whether the child will nap on a cot, mat, bed or a crib; and how the napping child will be supervised, consistent with the requirements of section 417.8 of this part.

(m) Sleeping arrangements for infants require that the infant be placed flat on his or her back to, unless medical information from the child's health provider is presented to the program by the parent that shows that arrangement is inappropriate for that child.

416.8

417.8

(b) (1) With prior written permission of the parent, children who are napping or sleeping may do so in a room where an awake approved caregiver is not present, the doors to all rooms must be open; the approved caregiver must remain on the same floor as the children; and a functioning electronic monitor must be used in any room where children are sleeping or napping and an awake approved caregiver is not present

(2) When a functioning electronic monitor is in use, napping and sleeping children must be physically checked every 15 minutes.

(3) For evening and night care, the caregiver may sleep while the children are sleeping only if functional electronic monitors are in use in each room where children are sleeping. The registrant (licensee) must obtain the written permission to do so from a parent of each child receiving evening or night care in the (group) family day care home. In the event written permission is not obtained from all parents, the caregiver must remain awake at all times and physically check sleeping children every 15 minutes.

PARENT/GUARDIAN NAME: _____

NAMES OF CHILDREN IN CARE:

Day and Hours of Care: _____

Area of the home where child/children will nap/sleep: _____

Sleeping Arrangements: mat cot crib bed (circle one)

How will the children be supervised: _____

The (Group) Family Day Care uses electric monitors: YES NO (circle one)

I give permission for my Provider to use electric monitors during nap time/night time to supervise my children. YES NO

(Parent/Guardian)

(Date)

(Provider)

(Date)