CHCECE005
Provide care for babies and toddlers

Learner guide
Version 1

Training and Education Support
Industry Skills Unit
Meadowbank

Product Code: 5781
Acknowledgments

TAFE NSW Training and Education Support Industry Skills Unit, Meadowbank would like to acknowledge the support and assistance of the following people in the production of this learner guide.

Writer
Roslyn Hodgson
Teacher, Early
TAFE NSW

Reviewer
Lisa Wallmeyer
Teacher, Child Studies
TAFE NSW

Project Manager
Gail Horwood
A/Education Programs Manager
TAFE NSW

Further acknowledgments
A considerable amount of the material in this learner resource has been developed from the following TAFE NSW resource:


Enquiries
Enquiries about this and other publications can be made to:

Training and Education Support, Industry Skills Unit Meadowbank
Level 3, Building J, See Street,
MEADOWBANK NSW 2114

Tel: 02-9942 3200 Fax: 02-9942 3257

© TAFE NSW (Training and Education Support, Industry Skills Unit Meadowbank) 2013

Copyright of this material is reserved to TAFE NSW Training and Education Support, Industry Skills Unit Meadowbank. Reproduction or transmittal in whole or in part, other than subject to the provisions of the Copyright Act, is prohibited without the written authority of TAFE NSW Training and Education Support, Industry Skills Unit Meadowbank.

ISBN 978-1-74236-489-6
Table of content

Introduction ............................................................................................................ 9

About this unit ........................................................................................................ 12

Section 1: Sleep and rest times for babies and toddlers ................. 15

Cues or signs that indicate tiredness ................................................................. 15
The environment for sleep / rest ...................................................................... 15
Relaxation ............................................................................................................... 19
Waking up ............................................................................................................. 24
Older babies and toddlers and sleep ................................................................. 26
Hygiene practices for cots / beds ...................................................................... 27

Section summary ................................................................................................. 29

Section 2: Provide positive nappy – changing and toileting experiences ........................................ 31

Nappy changing .................................................................................................... 31
Toilet training ........................................................................................................ 33

Section Summary ................................................................................................. 38

Section 3 - Promote quality mealtime environments ......................... 39

Breastfeeding ........................................................................................................ 39
Bottle feeding ........................................................................................................ 41
Introducing solids ................................................................................................. 42
Nutritious foods ................................................................................................. 44

Section summary ................................................................................................. 50

Section 4 - Create a healthy and safe supporting environment .... 51

Safety and injury prevention ............................................................... 51
Guidelines for infection control ................................................................. 53
Immunisation ........................................................................................................ 56

Section summary ................................................................................................. 58

© TAFE NSW (Training & Education Support, Industry Skills Unit Meadowbank) 2013
Section 5 - Develop relationships with babies and toddlers........ 59

Brain research................................................................. 60
Bonding and attachment .................................................. 63
Culturally sensitive caregiving practices............................... 71
Temperament and individual responses............................... 73
Ways to communicate with babies and toddlers....................... 75
Security ............................................................................. 83
Monitoring babies and toddlers needs and wellbeing ............... 85
Secure and stimulating environments .................................. 92
A safe and healthy environment ......................................... 97
Curriculum for babies and toddlers .................................... 98
Section summary ............................................................... 103

Section 6 - Develop relationships with families ...................... 105

Importance of relationships – families and centre .................. 106
Assist in the transition from home to care........................... 106
Settling in, arrival and departure routines ............................ 108
Section summary ............................................................... 110

Glossary ............................................................................ 111

Appendix 1 – Resources for interacting with babies and toddlers 113

Rhymes ............................................................................. 113
Tickle Rhymes .................................................................... 115
Songs ................................................................................ 116
Books .............................................................................. 117
Games .............................................................................. 118
Sensory play ...................................................................... 121
Singing Games ................................................................. 122

© TAFE NSW (Training & Education Support, Industry Skills Unit Meadowbank) 2013
Section 1: Sleep and rest times for babies and toddlers

Creating sleep routines for babies and toddlers requires communication between educators and parents. Educators need to discuss with parents the baby or toddler’s ‘pattern’ or routine for rest and sleep. For example where they sleep, for how long and do they need a certain routine or objects with them for sleep like a dummy or a ‘comfort’ item. Educators should carry out the rest / sleep routine in a similar way to the parents at home.

As part of this communication, a communication book in which parents can document times and quality of sleep, cues and comforters that their child needs can be very helpful for educators who can then write up in the same book what happens at the education and care service and then it is sent home, again. Other routines such as nappy changing or toileting and meal times can also be discussed and documented this way. This then becomes an excellent example of two way communication between educators and parents. Also a routines chart can be set up on the notice board in the room to document routines at the service and children’s initials can be used instead of full names for confidentiality.

Cues or signs that indicate tiredness

Cues that indicate that a baby or toddler is sleepy include: rubbing eyes, crying, rubbing head, less movement or quietly sitting and staring, sucking fingers or thumb, pulling ears, closing eyes, red eyes, inactive, irritable, yawning, putting head down.

The child may indicate one or more of these cues and the educator needs to respond instantly so that the child feels respected and that their needs are being met and this develops trust. Tell the baby or toddler that you are going to put them to bed and make sure they have their comforter. This may include that they need a cuddle and a bottle before they lie down or they may need their dummy or a small piece of material to touch.

Observe babies and toddlers and meet their needs before they become overtired.

Babies and toddlers rest better when they are tired and when you observe and respond to their cues quickly. Having a consistent sleep routine and sleeping in one’s own familiar space provides security and helps children learn how to regulate their own bodies for sleep (Kovach, B and Da Ros – Voseles, d, 2008, p.122).

The environment for sleep / rest

A special rest area for sleep is recommended with:

- Soft natural light
• A room temperature not too cool and not too warm
• Consistent sleep space with no distracting objects
• An attitude that suggests sleep being a natural bodily function
• A quiet, calm, peaceful atmosphere
• Enough time for babies / toddlers to develop their own self soothing techniques
• Time to observe cues for tiredness
• An individual cot, hammock, mattress, mat for each child
• Non restrictive clothing
• Own sheets, blankets
• Babies / toddlers physical needs have been met
• Predictable routines with sleep as part of the sequence
  (Kovach, B, and Da Ros – Voseles, 2008,p.121).

• **Activity 1.1 Settling Babies and Toddlers**

List some of the different ways that educators can use to help babies and toddlers settle and go off to sleep. (These should always be discussed with parents first, before using them):
Activity 1.2 Sleep Routine

What information might you gather from parents to assist you plan a baby’s or toddler’s sleep routine at the education and care service?

Make a list below:

---

Some practical settling techniques

The main point is that distressed babies need physical comfort and holding infants close, rocking and soothing them with song is very appropriate.

Holding the baby

The following is meant as a guide only. You will get to know the babies in your care and quickly be able to discern what sort of comfort or relaxation methods they enjoy. Some things to consider when holding babies:

- Don’t try to comfort a baby when you are feeling stressed or angry. Try to hand the baby on to a relaxed adult and take a break to calm down.
- Hold babies with confidence. Always support the head and back of a young baby, as well as give them support under their buttocks. For both the baby and your safety it’s best to carry the baby in your centre of gravity, i.e. close and towards your middle.

- Some young babies enjoy being wrapped quite firmly. Use open weave cotton or muslin wraps, and tuck their arms in. Sometimes flailing arms can startle the very young baby and add to their distress.

  **A fact sheet for wrapping baby safely can be found at:**

- If you think the baby has wind, and they are under three or four months, you could lay them across your arm or lap on their tummy with their head raised and pat them rhythmically. If they don’t seem to like this try holding them in a sitting position with their back against your tummy. Their head should be just under your chin. Place one hand over their tummy and one under their buttocks for support. Another good remedy for wind is to lay the baby on their back, their head raised with a pillow or cushion and gently 'pump' their legs holding their feet, i.e. push their feet up so the baby’s knees come up to their tummy and down again.

- The ‘over the shoulder’ hold is also quite soothing for babies of most ages, where their head rests on your shoulder and their tummy is against your body.

Gentle rocking and a soothing voice along with some of the above techniques will soon soothe the distressed baby.

---

Figure 1 Babies wrapped securely.
Individual babies will have a preference for arms wrapped either in or left out.

Relaxation

Some babies may not seem distressed but may be tense. Signs of this are constantly clenched fists if the baby is over three months old, or if they do not seem to curl into you when held, instead holding their body stiffly.

The following are some ideas to help babies relax:

- Play soothing music. Perhaps lay the baby under a mobile in a quiet place whilst soft music plays.
- If ratios permit take a few moments to remove them from the hustle and bustle of the centre. If everyone is inside, go out for a few minutes or if everyone is outside, go inside for a while.
- Sing a lullaby.
- Push them in a pram or stroller.
- Baby massage is very helpful, but you can’t really do this if the baby is distressed or too tense. Ironically the baby needs to be able to relax a little for this to be successful, so it’s often a good thing to do after the relaxation bath. (Make sure to talk to the parents first about this).
Activity 1.3 Scenario / Jin - Tang

Consider the scenario below:

Jin-tang, aged nine months, has been attending the centre for ten weeks. He’s a happy baby and settles well when his mother leaves. The only time Jin – Tang becomes distressed is at sleep time. He appears tired but screams when the educators try and get him to sleep. On enrolment his mother said he likes to sleep in a cot with a cloth nappy to hold. The staff tried this but it doesn’t work so they have been rocking him to sleep in their arms.

Jin - Tang’s mother is very concerned. At home now he screams when he’s put in his cot at night. Before coming to the centre he would just lie down and go off to sleep. Ngoc, the educator, realises there is a problem in Jin - Tang’s routine at home and at the centre. There isn’t any consistency between the two sleep routines. She organises a meeting with Jin - Tang’s parents.

At the meeting Ngoc discovers that Jin - Tang’s mother doesn’t want him rocked to sleep as she has a back injury and can’t possibly rock him at home.

She also learns that if Jin – Tang is distressed his older sister will sing to him for a little while to help him settle. At home they always play soft music in his room, which he shares with two older brothers.

Make a list below:
Promote safe sleep

How much sleep does a baby or toddler need? This will vary enormously from child to child. Some babies sleep a great deal, some sleep for long periods of time; some catch enough in short, frequent snatches. As babies grow, they need less sleep and have longer wakeful periods for play, watching and interaction. Most babies gradually develop a regular pattern of sleep and wake periods, although it may seem to you as though as soon as you have identified it, the pattern changes. Toddler's pattern for sleep is also very individual. Some toddlers need a morning and an afternoon sleep while others only need one sleep during the day.

Some toddlers outgrow a day sleep around two years and only sleep at night while others enjoy and need a day sleep until they go to school. It is very individual and educators need to communicate closely with parents to carry out the needs of individual children that follows as far as possible, their home pattern.

Keeping in mind the wide variation you will find between individual babies and toddlers, here is a rough guide to common sleeping patterns at different stages:

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborns</td>
<td>Newborns may sleep anywhere between 12 and 20 hours out of every 24 hours, in around four to six sleep periods. They don't usually have a regular sleep pattern, although a pattern may emerge after about the sixth week of life.</td>
</tr>
<tr>
<td>From three months</td>
<td>Many three month old babies sleep approximately 15 hours out of every 24 hours, in about four sleep periods, with longer wakeful periods for feeding and sleeping in between. Some may sleep for a long period at night; some still wake a couple of times at night for feeds.</td>
</tr>
<tr>
<td>From six months</td>
<td>More predictable sleeping patterns start to develop after six months of age, with a long sleep at night and two or three naps during the day. Some still wake at night.</td>
</tr>
<tr>
<td>From 12 months</td>
<td>After the first birthday many babies are sleeping for 10 to 13 hours in each 24 hours and have one daytime nap of one to three hours. This pattern will probably remain stable through the toddler years.</td>
</tr>
</tbody>
</table>
You need to be aware that night waking varies a great deal between individual babies and toddlers. Some babies and toddlers sleep through the night while others will wake during the night for a feed or cuddle.

**Sudden Infant Death Syndrome (SIDS)**

The risk of Sudden Infant Death Syndrome (SIDS) can be reduced markedly by taking care with sleep practices at the centre. The organisation SIDS Australia have come up with guidelines about making up cots to lessen the chance of SIDS occurring. Up-to-date information about preventing SIDS can be found by looking at the SIDS website or by contacting SIDS Australia by phone and asking for information sheets and pamphlets.

Current information published by National SIDS Council of Australia Ltd and endorsed by NSW Health advises that:

- Babies should always be placed on their back when sleeping.
- The baby’s head should always remain uncovered during sleep.
- Use a firm mattress
- All sheets, blankets and other bedding should be secured, tuck the bottom half under the mattress.
- Lie baby at the foot of the cot (feet closest to the end of the cot) to avoid baby from slipping under covers.
- Have NO quilts, doonas, pillows, bumpers, fluffy toys etc. in the cot.
- Don’t overheat the baby.
- Provide a smoke free environment and avoid persons with colds or other respiratory infections.
- Never use water beds, sheep skins, or anything loose in the bed.
- Encourage and support breast feeding.

It is important to remember that SIDS can occur at any time. It is not exclusive. It can happen during a day or night sleep. Another misconception is that it only occurs to children sleeping in cots. It’s important to adapt these recommendations for any form of bedding. SIDS can occur when a child is sleeping in a cot, hammock, pram, capsule (car restraint used with infants under six months of age), etc.

Educators need to implement SIDS prevention recommendations in all rest environments with children under two years of age. This information is constantly updated in response to research. Ensure you have accessed the most recent information.