

Step 6

ADDITIONAL NOTES



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Step 6: Additional Notes

Bottles: If you are using bottles, be sure they are suitable for your baby's age. This will ensure he is completing his bottle efficiently. If completing the bottle takes too long, he may become frustrated or easily become drowsy while he is feeding.

First stage of sleep: It is very important to make sure your child is kept awake so he is not drowsy or sleepy when putting him in his crib for bedtime and naptime, when he feeds after waking up from his naps, and during a night time feeding. If he is sleepy or drowsy going into his crib, he has already entered the first stage of sleep. This will not allow him the best opportunity to develop independent self-soothing sleep strategies on his own.

Fussing vs. crying: Fussing noises are common sounds for your baby to make, especially when he is winding down and preparing to fall asleep. He does not require a check-in when he is fussing as this would likely make him more stimulated and lead to crying. However when he is crying, he will require some reassurance from you (following the Techniques as outlined in the Guide).

Illness & Teething: Teething and illness can certainly disrupt sleep. The good news is that a child with good sleep habits will handle sleep better during times. If you suspect teething or illness is bothering him, it is important to address the problem by offering pain relief (as directed by your doctor) to help ease the pain, ensuring he can feel more comfortable during sleep time. Picking him up to hold him for a few minutes without rocking or bouncing can be helpful. The most important thing is to address the teething or illness. Then put him back into his crib awake if it is sleep time and remember to not use an old sleep prop at this time.

Monitors: Be cautious when using a baby monitor. With a monitor we respond to our babies at the slightest whimper instead of allowing our babies a chance to find their own way back to sleep. By keeping a monitor at a low setting, it may provide your baby with a few minutes to self soothe before responding immediately, and allow you to have a more restful sleep.

Siblings: It is every parent's fear that having one child wake in the night is going to wake up the other child who is sleeping well. It is normal to feel this way. It is a good idea to have a conversation with an older child to assure him know his parents are helping the baby sleep better. He may hear him wake and cry in the night and they, as parents, are taking care of him. A sibling will likely not be listening for a sibling when he wakes like mom and dad are, and should continue to sleep well until the morning. Again, after a couple of weeks, this will not be a concern once the sleep training period is complete.

Sleep debt: As a child begins to repay his sleep debt, it is very normal for him to appear sleepier and at times clingier than usual during his awake period. This is a symptom of him catching up on his sleep debt. As he begins to sleep better and becomes more rested, he will be more alert during this time. It is also common for parents to feel a bit more tired as they go

through the process. You will begin to have more consolidated sleep and have your own sleep debt to resolve.

Sleepy cues: You will use the Ideal Schedule as a guide for when naptimes will begin and end. You will also need to consider when your child is showing signs of tiredness. Some of the most signals include rubbing eyes, red-rimmed eyes, rubbing or pulling ears, yawning, arching his back, and turning his face into your body. If he is showing strong sleepy cues prior to bedtime, it may need to be moved earlier as well.

Take turns: It is important for your child to become familiar with both parents implementing the sleep routines.

Tummy time: After 13 weeks of age, many babies will begin to practise rolling from front to back and vice versa. Please provide your baby with lots of tummy time so he can practice (3-4 times/day). Doing this will allow him to perfect his developmental skills more quickly and will eliminate the chance of waking during sleep time because he is “stuck” on his back or side.



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