



# KIDS Network Safe Sleep Certification Program

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# Wrestling with Safe Sleep: Safe Sleep Advocate Training

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# Wrestling with Safe Sleep: Safe Sleep Advocate Training



Professional Pre-Test  
KIDS Network Safe Sleep Training



Name: \_\_\_\_\_

Which best describes your occupation:

- Physician  Nurse     Social Worker     Other Healthcare Professional  
 Law Enforcement     Fire Department     Emergency Medical Services (EMS)  
 Early Childhood Professional     Parent Educator     Daycare/Childcare Provider  
 Home Visiting/Visitor     Other \_\_\_\_\_

Instructions: Circle the correct answer for each question below related to the American Academy of Pediatrics (AAP) Safe Sleep Recommendations

1. Sleep-related deaths are a category of sudden unexpected infant deaths (SUID), and may include the following:
  - a. Unexplained sudden death in infancy or sudden infant death syndrome (SIDS)
  - b. Infant and caregiver sleeping in the same room on separate surface
  - c. Accidental deaths explained by a physical hazard in the sleep environment
  - d. Both A and C
2. Per the AAP, infants should be placed on their \_\_\_\_\_ to sleep
  - a. Back
  - b. Side
  - c. Stomach
  - d. Both A and B

## Pre-Test



Instructor: Christy Schunn

[redcap.kumc.edu/surveys/?s=RN9C8CP3YA](https://redcap.kumc.edu/surveys/?s=RN9C8CP3YA)

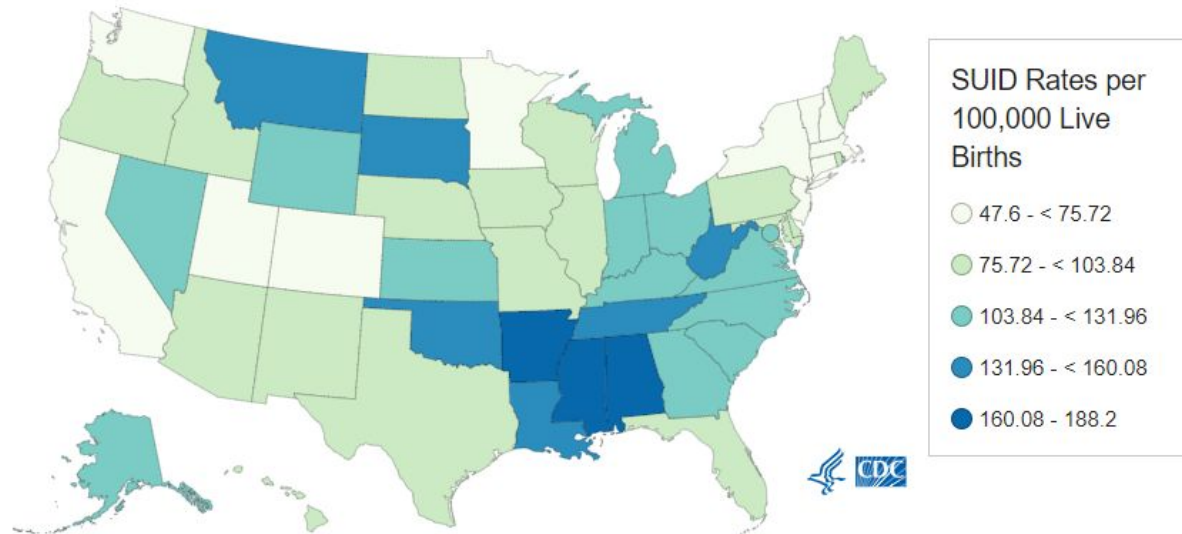


## Data: The Why

# Sudden, Unexpected Infant Death (SUID)

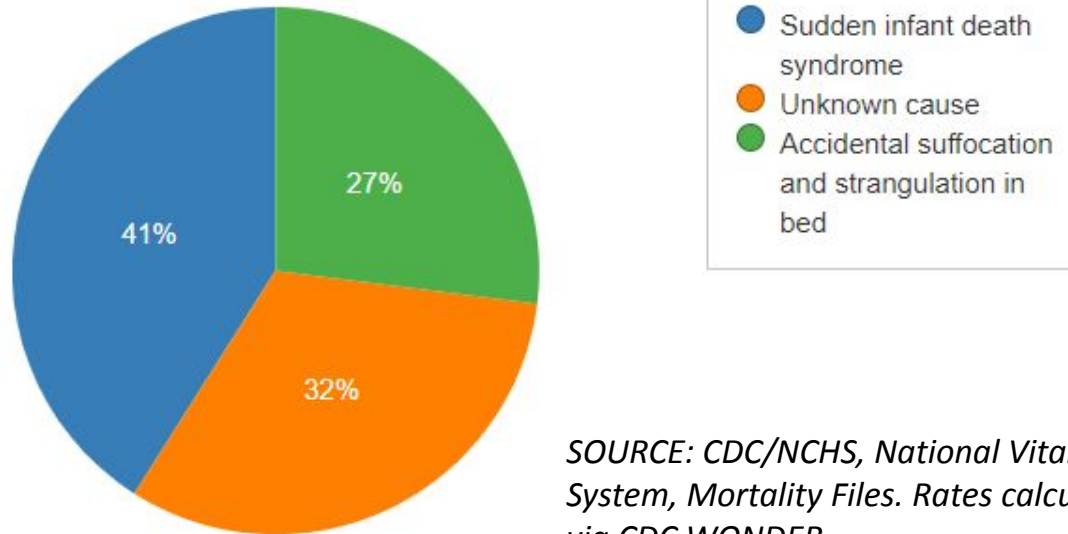
- Sleep-Related Infant Death
  - Unexplained Sudden Death in Infancy or Sudden Infant Death Syndrome (SIDS)
  - Accidental deaths explained by a physical hazard in the sleep environment
- Asphyxia, suffocation, entrapment/wedging, and strangulation

# SUID Rates by State, 2016-2020



SOURCE: CDC/NCHS, National Vital Statistics System, Mortality Files. Rates calculated via CDC WONDER.

# Sudden Unexpected Infant Deaths by Cause, 2020



*SOURCE: CDC/NCHS, National Vital Statistics System, Mortality Files. Rates calculated via CDC WONDER.*

# Infant Mortality Data Kansas in 2020

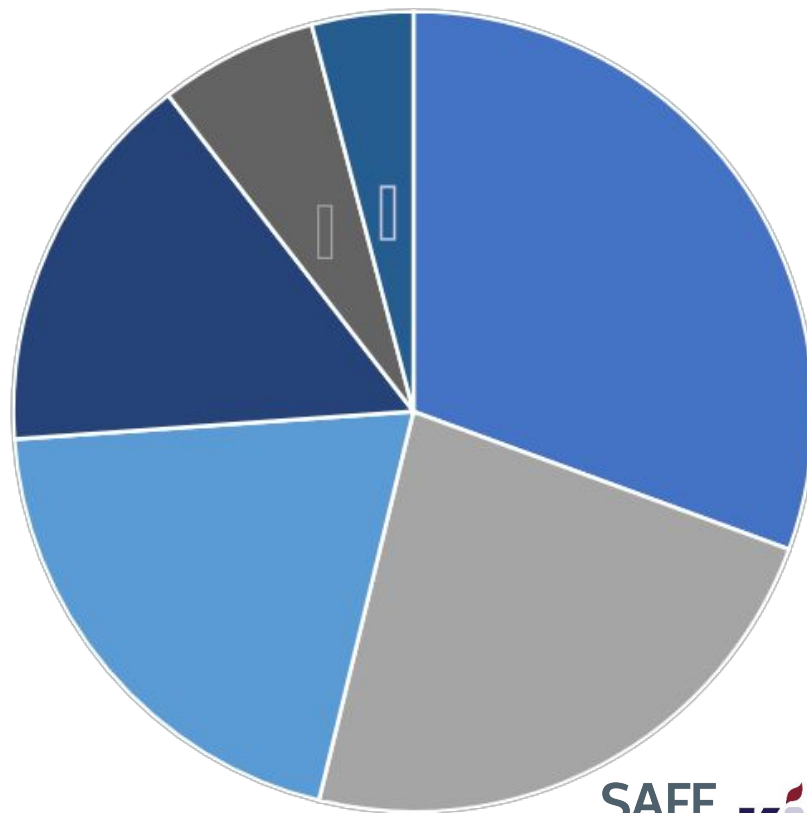
34,368 infants born  
**224** died before their 1<sup>st</sup> birthday

Source: KDHE, Annual Summary of Vital Statistics for 2020



# Kansas Infant Mortality 2016-2020

Source: Bureau of  
Epidemiology and Public  
Health Informatics,  
KDHE



# Infant Mortality Data

## State Child Death Review 2022 Report

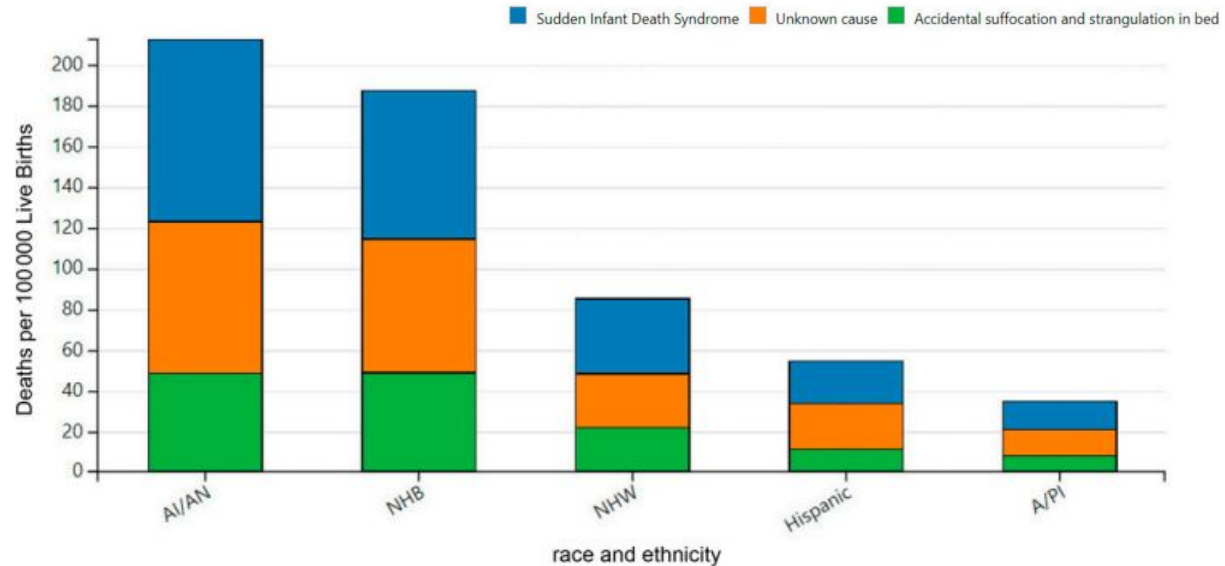
2020 Sleep-Related Deaths = 52

- 98% had evidence of one or more unsafe sleep practices.
  - 81% occurred when the infant was sleeping in a place other than a safe crib or bassinet.
  - 58% were put to sleep on an adult bed and 12% were put to sleep on a couch.
  - 60% were not placed to sleep on their back.

From 2016 through 2020 (N=221) there have been 35 deaths in which the caregiver reportedly fell asleep while breast (21) or bottle (14) feeding the infant.

# Sudden Unexpected Infant Death by Race and Ethnicity—2014-2018

Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System



# Reducing Infant Mortality

Parents/caregivers are most likely to follow the safe sleep guidelines if they:

- Received information from healthcare providers
- Received consistent messages from multiple healthcare providers
- Received consistent messages from trusted female friends and relatives
- Observed healthcare providers following the recommended behaviors





# Protective Factors



## Sleep-Related Infant Deaths: Updated 2022 Recommendations for Reducing Infant Deaths in the Sleep Environment

Rachel Y. Moon, MD, FAAP<sup>1</sup>; Rebecca F. Carlin, MD, FAAP<sup>2</sup>; Ivan Hand, MD, FAAP<sup>3</sup>  
THE TASK FORCE ON SUDDEN INFANT DEATH SYNDROME AND THE COMMITTEE ON FETUS AND NEWBORN

Each year in the United States, ~3500 infants die of sleep-related infant deaths, including sudden infant death syndrome (SIDS) (International Classification of Diseases, 10th Revision [ICD-10] R95), ill-defined deaths (ICD-10 R99), and accidental suffocation and strangulation in bed (ICD-10 W75). After a substantial decline in sleep-related deaths in the 1990s, the overall death rate attributable to sleep-related infant deaths has remained stagnant since 2000, and disparities persist. The triple risk model proposes that SIDS occurs when an infant with intrinsic vulnerability (often manifested by impaired arousal, cardiorespiratory, and/or autonomic responses) undergoes an exogenous trigger event (eg, exposure to an unsafe sleeping environment) during a critical developmental period. The American Academy of Pediatrics recommends a safe sleep environment to reduce the risk of all sleep-related deaths.

This includes supine positioning; use of a firm, noninclined sleep surface; room sharing without bed sharing; and avoidance of soft bedding and overheating. Additional recommendations for SIDS risk reduction include human milk feeding; avoidance of exposure to nicotine, alcohol, marijuana, opioids, and illicit drugs; routine immunization; and use of a pacifier. New recommendations are presented regarding noninclined sleep surfaces, short-term emergency sleep locations, use of cardboard boxes as a sleep location, bed sharing, substance use, home cardiorespiratory monitors, and tummy time. Additional information to assist parents, physicians, and nonphysician clinicians in assessing the risk of specific bed-sharing situations is also included. The recommendations and strength of evidence for each recommendation are included in this policy statement. The rationale for these recommendations is discussed in detail in the accompanying technical report.

### abstract

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*Dr Moon, Carlin, and Hand approved the final manuscript as submitted and agree to be accountable for all aspects of the work.*

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All policy statements from the American Academy of Pediatrics automatically expire 5 years after publication unless reaffirmed, revised, or retired at or before that time.

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# AAP Safe Sleep Recommendations


# American Academy of Pediatrics Safe Sleep Recommendations

Back to sleep for every sleep


Use a firm, flat, noninclined sleep surface to reduce the risk of suffocation or wedging/entrapment



Feeding of human milk is recommended to reduce SIDS.  
Room-share with the infant on separate sleep surface x 6 mo.



Keep soft objects and loose bedding out of the infant sleep area



Offer a pacifier at naptime and nighttime




Avoid smoke and nicotine exposure, alcohol , marijuana,

# American Academy of Pediatrics Safe Sleep Recommendations

Pregnant people should seek and obtain regular prenatal care.



Infants should be immunized in accordance with AAP and CDC guidelines.




Do not use home cardiorespiratory monitors as a strategy to reduce the risk of SIDS.

Supervised, awake tummy time is necessary



Health care providers, newborn nursery/NICUs staff, & childcare providers should endorse and model the safe sleep recommendations from birth.



Media and manufacturers should follow safe sleep



# Safe Sleep for Babies Act—2021

**CRIB BUMPERS AND INCLINED SLEEPERS FOR INFANTS:** Consumer Product Safety Commission states regardless of the date of manufacture, crib bumpers and inclined sleepers shall be considered a banned hazardous product.



## SLEEP POSITIONER WARNING—2010

U.S. Consumer Product Safety Commission (CPSC) and the U.S. Food and Drug Administration (FDA) today warned consumers to stop using infant sleep positioners.

# Unsafe Sleep Environments

- Car seats
- Strollers
- Swings
- Infant Carriers
- Infant Slings



# Commercial Devices



Avoid the use of commercial devices that are inconsistent with safe sleep recommendations



# Maintain Temperature

- ❑ Make sure the baby's head remains uncovered during sleep...no hats.
- ❑ Dress the baby in light sleep clothing.
- ❑ Consider using a wearable blanket as an alternative to loose blankets.
- ❑ Keep the room at a temperature that is comfortable for an adult.



# Swaddling

Swaddle a baby who wants to be swaddled

- Not too hot
- Not too tight
- Not able to flip over
- Nonweighted



# Safe Sleep and Breastfeeding



- Feeding of **human milk** is recommended for at least the first 6 months of life.
- There is a 68% decreased risk of SIDS for infants who are exclusively breastfed.
- There is a 32% decreased risk for SIDS for infants who are breastfed at all.

# Parent-Infant Bed Sharing Risks

In the following situations the infant faces double or more risk of death if bedsharing:

- With someone who is **fatigued** or using sedating medications or substances.
- With **current smoker** or if the pregnant parent smoked during pregnancy.
- With anyone who is not the infant's parent, including nonparental caregivers and other children.
- With soft bedding accessories, such as pillows or blanket
- When full term, normal weight, aged <4 mo, even if neither parent smokes and even if the infant is breastfed.
- When preterm or low birth weight infant, even if neither parent smokes.
- On a soft surface, such as a waterbed, old mattress, sofa, couch, or armchair.



# World Café Discussion about Safe Sleep



# World Café Process and Etiquette

- 10 min round of conversation
- Designate a note-taker to present 1-2 things from your discussion to the larger group



# World Café: Bedsharing

- *Bed-sharing is protective.*
- *My baby won't breastfeed as long if I don't sleep with her.*
- *Bed-sharing can be done safely if I exclusively breastfeed, don't smoke, don't use alcohol, etc.*
- *My husband and I have decided to do a family bed.*
- *I am exhausted and have to be able to go to work.*
- *My baby won't sleep if they aren't next to me.*
- *Can't take the crying. Baby sleeps when bedsharing.*
- *Bedsharing is common and encouraged in my culture.*

Strategize ways to respond to these statements.

# Report Out



# Tummy Time



- Needed to develop strong muscles
- For babies who are awake and being observed
- Offered for short periods of time beginning soon after hospital discharge, increasing incrementally to at least 15–30 min total daily by age 7 wk.

# SIDS in Child Care

Rachel Y. Moon, MD, Children's National Medical Center, Washington, D.C.

Approximately 20% of SIDS deaths occurred while the infant was in the care of a nonparent caregiver:

- 60% in family child care
- 20% in child care centers

$\frac{1}{3}$  of SIDS-related deaths in child care occur in the first week

$\frac{1}{2}$  of these on the first day



# Implementation Strategies

# National Evidence Informed Safe Sleep Strategies

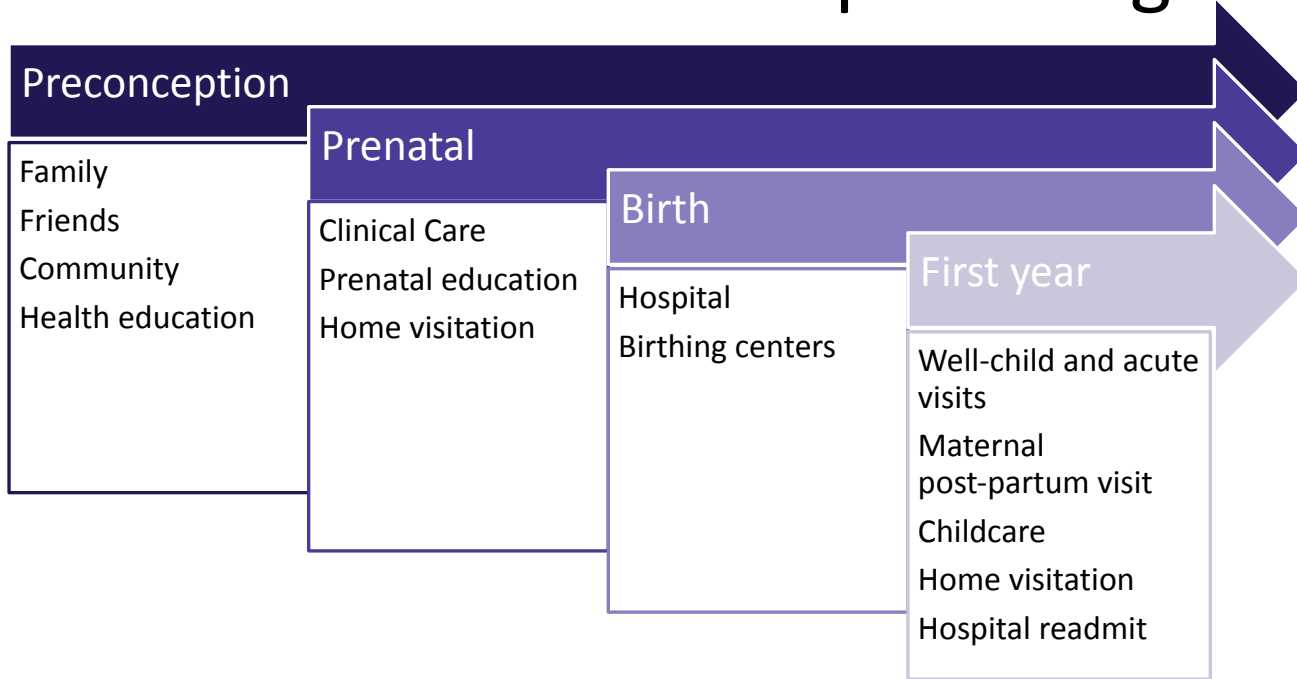
The national experts have identified the following approaches to be evidence-based safe sleep interventions:

- Safe Sleep Community Baby Showers
- Crib distribution programs
- Child care legislation
- 60-day mobile health program

KIDS Network is building comprehensive safe sleep tools to implement consistent safe sleep across a continuum.



# Strategy: Consistent Safe Sleep Messages





# Partnership: Safe Kids and KIDS Network

- Funding
  - In-kind—printing
  - Mini grants
  - Cribs
  - Website
  - Injury Burden Data Report
- Communication
  - Webinars
  - News Releases
  - Social Media
- Strategic Partners
  - Department of Children and Families

# Safesleepkansas.org



safe sleep  
Alone, on their Back and in a Crib

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## Welcome to the Safe Sleep Website

- [Safe Sleep Kansas Home](#)
- [Preparing for Baby](#)
- [Bringing Baby Home](#)
- [Making the Crib Safe](#)
- [Special Care](#)
- [Choose High Quality Child Care](#)
- [Tell Everyone](#)
- [Putting it all Together](#)
- [Safe Sleep Booklet](#)
- [Safe Sleep Magnet](#)
- [Contact Information](#)

DVD Quality Video - 70 MB  
Standard Quality Video 35 MB  
Video Transcript  
Safe Sleep on YouTube

Spanish DVD Quality Video - 80 MB  
Spanish Standard Quality Video 40 MB  
Spanish Video Transcript  
Spanish Part 1 on YouTube  
Spanish Part 2 on YouTube

**Check for crib recalls**

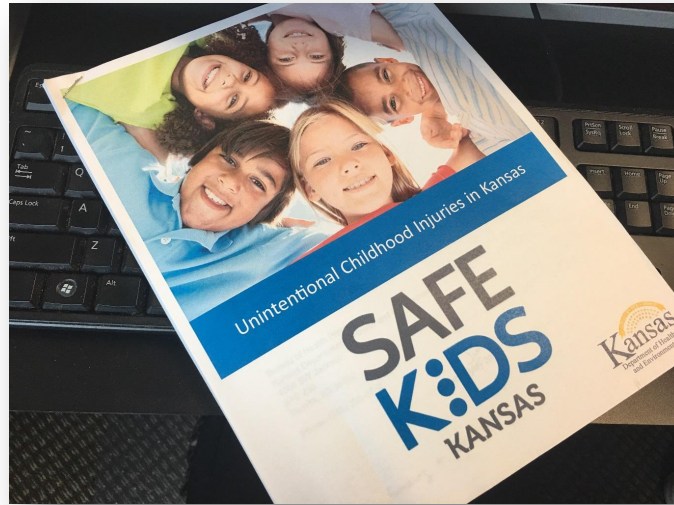
[www.Recalls.gov](http://www.Recalls.gov)

### ABC's of Safe Sleep

Babies are safest when they are:

- ★ Alone
- ★ On their back
- ★ In a crib

# Burden Report on Unintentional Injuries



# Policy Work

## The Power of Partnerships Lexie's Law: Making Change Happen in Kansas

National Association of Regulatory Administration  
Licensing Seminar  
September 13, 2011

Rachel Berroth, Director  
Early Care and Youth Program Section  
Mary A. Murphy, Director  
Compliance and Regulation Development Unit



Our vision is "healthy Kansans living in safe and sustainable environments".  
The state belongs to all of us - "Kansas Don't Spoil It"

- Lexie's Law
  - Testimony presented through collaboration
  - Parent involvement
  - KDHE regulation change followed legislation
    - Training
    - Supervision
- What followed Lexie's law were changes in hospital policies

# Hospital Survey



# Research: Birthing Hospitals

Research purpose:

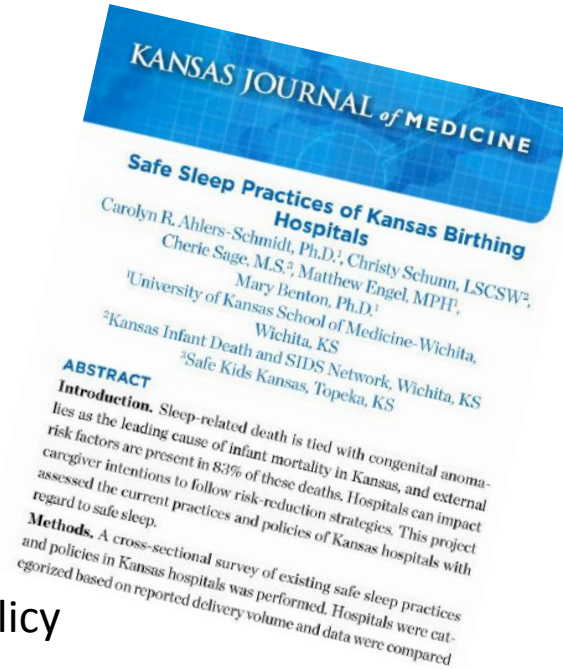
Assessment of current safe sleep practices & policies

Results

- 42% response rate (N=73)
- Hospital Units reporting
  - 68% Newborn/well-baby
  - 29% Non-nursery
  - 3% Neonatal Intensive Care
- 58% were trained on safe sleep
- 44% held annual safe sleep training
- 39% had safe sleep policy
- Only 33% audit compliance with policy

Conclusions

- Access to safe sleep materials
- Need assistance with auditing
- Hospital not solely responsible for safe



# The KIDS Network Safe Sleep Instructor (SSI) Certification Project

1. Objective: Enhance safe sleep promotion by building capacity to disseminate education strategically to priority audiences, including families, communities, and professionals (e.g., hospitals, maternal/infant clinics).
2. Instructors attend a 2-day training designed to build the skills necessary to implement established, evidence-supported safe sleep programs.  
  
This train-the-trainer model provides the foundation for sustainability and expansion of safe sleep campaigns and creates the vehicle for delivery of the KIDS Network Safe Sleep Community Baby Shower model.  
  
communities existing efforts.

# Annual Safe Sleep Instructor Certification Training

## Bronze SSI

Train 10+ professionals/caregivers  
Host Safe Sleep Community Baby Shower

## Silver SSI

Includes Bronze level **and**  
Hospital Certification **or**  
Safe Sleep Star Outpatient Toolkit

## Gold SSI

Includes Silver level **and**  
Hospital Certification **and**  
Safe Sleep Star Outpatient Toolkit





# Safe Sleep Community Baby Shower Objectives

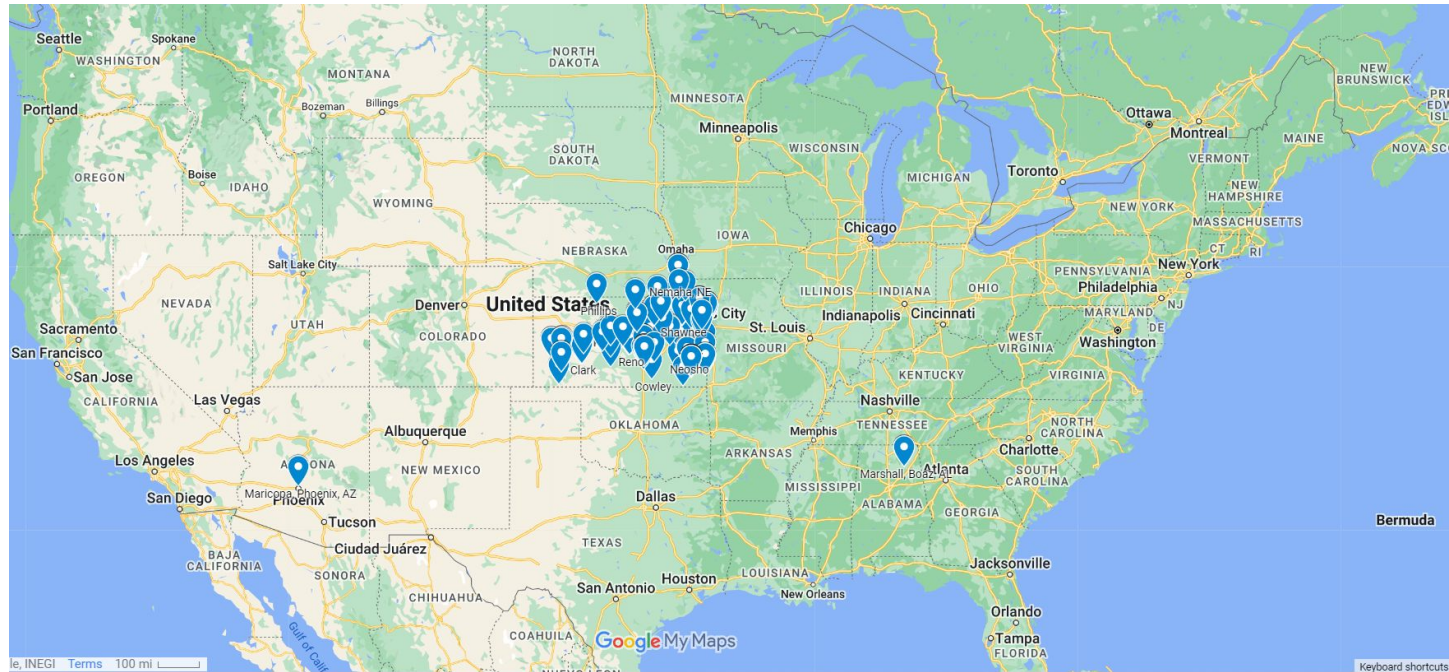




# Safe Sleep Community Baby Shower Outcomes FY22

		Post
Safe Position: Back Only	85%	97%*
Safe Location: Crib, Bassinet, Portable Crib	88%	97%*
No Unsafe Items: Blankets, Bumpers, etc.	73%	95%*
Will educate others who care for their baby	69%	99%*
	Pre	Post
Very Likely to Breastfeed	75%	78%*
Confident Able to Breastfeed $\geq 6$ months	45%	48%
Identify $\geq 3$ local resources for breastfeeding support	26%	50%
	Pre	Post
Identify $\geq 3$ ways to avoid 2 <sup>nd</sup> hand smoke	74%	97%*
Identify $\geq 3$ local resources for cessation	16%	37%*
<b>FY22 Results: Perinatal Mental Health</b>	<b>Pre</b>	<b>Post</b>
Knowledge of safe ways to reduce risk of depression, anxiety, and other mood disorders	93%	93%
Know at least one person to who will support mental health concerns	45%	48%
Knowledge of at least 3 perinatal mental health resources	-	99%

# Certified Safe Sleep Instructors



- Nebraska = 8
- Pennsylvania = 1
- Michigan = 1
- Colorado = 1

The **ABC**s of **SAFE SLEEP**

Place crib in same room where you sleep.



Baby should sleep in their own crib with a firm mattress and tight, fitted sheet.

<p><b>A</b> Alone</p> <p>Baby should sleep in parent's room, separate sleep surface.</p>	<p><b>B</b> Back</p> <p>Baby should always sleep on their back for every sleep.</p>	<p><b>C</b> Clutter-Free Crib</p> <p>Avoid using soft bedding including crib bumpers, blankets, pillows and soft toys.</p>
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Learn more about safe sleep at:  
[KidsKS.org](https://www.KidsKS.org)

SAFE KIDS KANSAS  
 KIDS  
 Kansas Infant Death and SIDS Network

# Safe Sleep Poster

[KIDSKS.org](https://www.KidsKS.org)

# Safe to Sleep Campaign Materials

[nichd.nih.gov](http://nichd.nih.gov)

## WHAT DOES A SAFE SLEEP ENVIRONMENT LOOK LIKE?

The following image shows a safe sleep environment for baby.




-  Room share: Care babies their own sleep space in your room, separate from your bed.
-  Use a firm, flat, and level sleep surface, covered only by a fitted sheet.
-  Remove everything from baby's sleep area, except a fitted sheet to cover the mattress. No objects, toys, or other items.
-  Use a wearable blanket to keep baby warm without blankets in the sleep area.
-  Place baby on their backs to sleep, for naps and at night.
-  Couches and armchairs are not safe for baby to sleep on alone, with people, or with pets.
-  Keep baby's surroundings smoke/vape free.

The Consumer Product Safety Commission sets safety standards for infant sleep surfaces such as a mattress, and sleep spaces like a crib. Visit <https://www.cpsc.gov/CPSCPages/16-learn-more>.




## ¿CÓMO ES UN AMBIENTE DE SUEÑO SEGURO?

La siguiente imagen muestra un ambiente de sueño seguro para los bebés.




-  Comparta su habitación con el bebé. Ponga al bebé a dormir en un lugar separado pero en su misma habitación y cerca de su cama.
-  Use una superficie firme, plana y nivelada, cubierta solo con una sábana ajustable para cubrir el colchón. Nada de objetos, juguetes u otros artículos.
-  Quite todo del lugar donde duerme el bebé, excepto una sábana ajustable para cubrir el colchón. Nada de objetos, juguetes u otros artículos.
-  Use un saco de dormir para mantener al bebé abrigado, durante la noche.
-  Coloque a los bebés boca arriba para dormir, durante la noche.
-  Los sillones y los sofas no son lugares seguros para que el bebé duerma, ya sea solo, con personas o con mascotas.
-  Mantenga el área del bebé libre de humo o vapor.

La Comisión de Seguridad de Productos del Consumidor (CPSC) por sus reglas en inglés establece normas de seguridad para los superficies como el colchón y los lugares como la cuna en los que duermen los bebés. Visite <https://www.cpsc.gov/CPSCPages/16-learn-more> para más información.




# FOLLOW US ON SOCIAL MEDIA



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**Christy Schunn KIDS**



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# Post-Test



Professional Post-Test  
KIDS Network Safe Sleep Training



Name: \_\_\_\_\_

**Instructions: Circle the correct answer for each question below related to the American Academy of Pediatrics (AAP) Safe Sleep Recommendations**

1. The AAP recommends that for at least the first six months of life infants sleep in the following:
  - a. In a safety-approved sleep surface in baby's room
  - b. In a safety-approved sleep surface in the parent(s) room
  - c. In the adult bed
  - d. In a swing or car seat
2. Which of the following statements is TRUE:
  - a. Breastfed babies do not need to follow safe sleep
  - b. Pacifier use reduces the risk of sleep-related deaths
  - c. Home cardiorespiratory monitors can reduce the risk of sleep-related death
  - d. Immunization may increase the risk of sleep-related deaths
3. Per the AAP, infants should be placed on their \_\_\_\_\_ to sleep:
  - a. Back
  - b. Side
  - c. Stomach
  - d. Both A and B
4. To reduce the risk of sleep-related death, the AAP recommends feeding only human milk (breast- or chest-feeding) for at least the first \_\_\_\_\_.
  - a. One (1) month of life
  - b. Three (3) months of life
  - c. Six (6) months of life
  - d. No specific amount of time



Instructor: Christy Schunn

[redcap.kumc.edu/surveys/?s=CMX4NF3XWH](https://redcap.kumc.edu/surveys/?s=CMX4NF3XWH)

# Contact Info



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Thank you.



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