



# SAFE SLEEP

Serving **A**labama **F**amilies: **E**ncouraging  
**S**afe **S**leep **E**nvironment **E**ducation and  
**P**romotion



# March of Dimes Grant

For the Safe sleep initiative we were awarded a March of Dimes \$5,000 Grant. Grant money was awarded for increasing education related to safe sleep with the goal of reducing the risk of sudden infant death syndrome (SIDS) in high-risk communities, consistent with the 2011 policy statement provided by the American Academy of Pediatrics.



March  
of Dimes®  
*Saving babies, together®*

# Overview of Implementation

- \* W&C /Madison Campus NEWBORN NURSERY /MOTHER BABY: SAFE SLEEP PROGRAM which includes HALO IN-HOSPITAL SLEEPSACK PROGRAM/ TAKE HOME PROGRAM
- \* W&C NEONATAL ICU: SAFE SLEEP PROGRAM which includes HALO IN-HOSPITAL SLEEPSACK PROGRAM/ TAKE HOME PROGRAM (*Currently does In-Hospital Program*)
- \* W&C PEDIATRIC/PICU: SAFE SLEEP PROGRAM which includes HALO IN-HOSPITAL SLEEPSACK PROGRAM/ TAKE HOME PROGRAM
- \* Pediatric ER SAFE SLEEP EDUCATION to Patients 12 months and younger.

# PURPOSE

Awareness of the need to educate Parents/Caregivers regarding ways to decrease the risk for Sudden Infant Death Syndrome (SIDS) and Sudden Unexpected Infant Death (SUID) .



# Objectives

- \* Increase understanding of sleep-related deaths
- \* Understand meaning of “Alone, Back, Crib”
- \* Motivate integration of Safe Sleep into nursing practice
- \* Difference Between Sudden Infant Death Syndrome (SIDS) and Sudden Unexpected Infant Deaths (SUIDS)
- \* Assist healthcare professionals in teaching SIDS/SUID risk reduction

# SUID / SIDS

Around 4500 babies die in the United States each year because of sudden unexpected infant deaths. Not all sudden unexpected infant deaths are SIDS; some of these deaths are accidental suffocation.

CDC researchers wrote in the National Vital Statistics report that SIDS is one of the top three causes of infant death.

***There are many things that can be done by health care professionals to model the appropriate SAFE SLEEP for infants***

Chances of SIDS/SUIDS happening go down  
with a few simple changes in how babies sleep



**Since babies have been put to sleep  
on their backs**



**SIDS deaths have ↓'d by 50%**

# Follow ABC's of Safe Sleep

\* **Alone**

\* **Back**

\* **Crib**

**No soft surfaces or bulky bedding**





Shhhhhh.....Baby is sleeping.  
The only way for your baby to sleep is:

**A** ALONE, by him/her self and no one else  
No toys  
No parents  
No blankets  
No animals



**B** BACK, on their backs (face up)  
NOT side,  
NOT tummy  
NOT propped up with blankets or cushions



**C** CRIB  
NO adult bed  
NO couch or sofa  
NO lounge chair  
NO futon



ADPH  
ALABAMA DEPARTMENT OF PUBLIC HEALTH



GAL 1-800-545-1098 + [www.adph.org/gal](http://www.adph.org/gal)

**NO**

Pillows

Loose blankets



Stuffed toys

Bumper pads



# *Recommendations from the American Academy of Pediatrics*

Bed sharing or co-sleeping with an infant should be avoided.

Sharing an adult bed to sleep with a baby increases the chance of SIDS **40 times!!** Research shows that the **safest place for a baby to sleep is in the same room with the parents, but on a separate sleep surface.** Your baby can be brought into your bed for a feeding, comforting or cuddling, but should **ALWAYS** be returned to the crib or bassinet for sleep.



***“Room sharing, not bed sharing!”***



# This might look cozy


But it is **DANGEROUS**



# Danger of entrapment and suffocation

Extremely high risk of death on couches and armchairs





FOR TOO MANY BABIES  
LAST YEAR, THIS WAS THEIR  
FINAL RESTING PLACE.

The safest place is in a crib. City of Milwaukee Health Department. [www.milwaukee.gov/safesleep](http://www.milwaukee.gov/safesleep)

# Standard of Care

**Every baby should be placed “back to sleep”**

**Every sleep by Every caregiver for the 1<sup>st</sup> year of life .**

**This will now be the Standard of Care at  
Huntsville Hospital**

**For all infants under 12 months old.**



# Hospitals:

“Are we saying one thing, but doing another?”

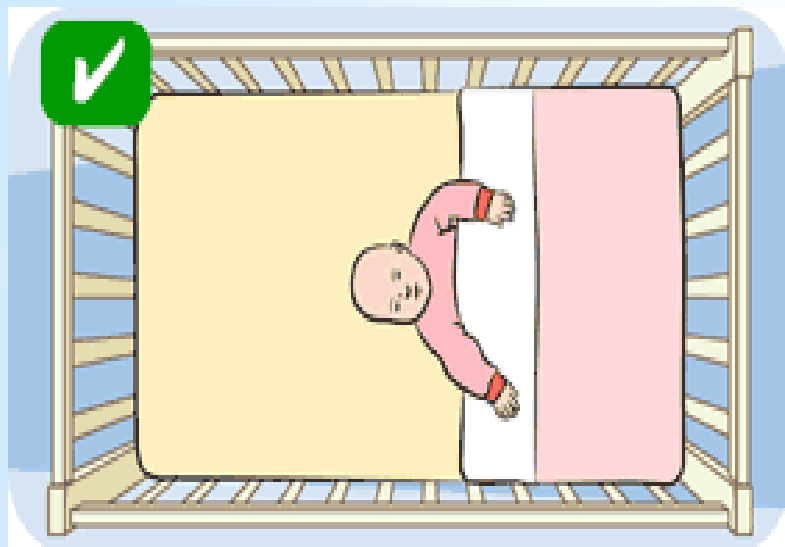


# Modeling Behaviors to Parents and Caregivers

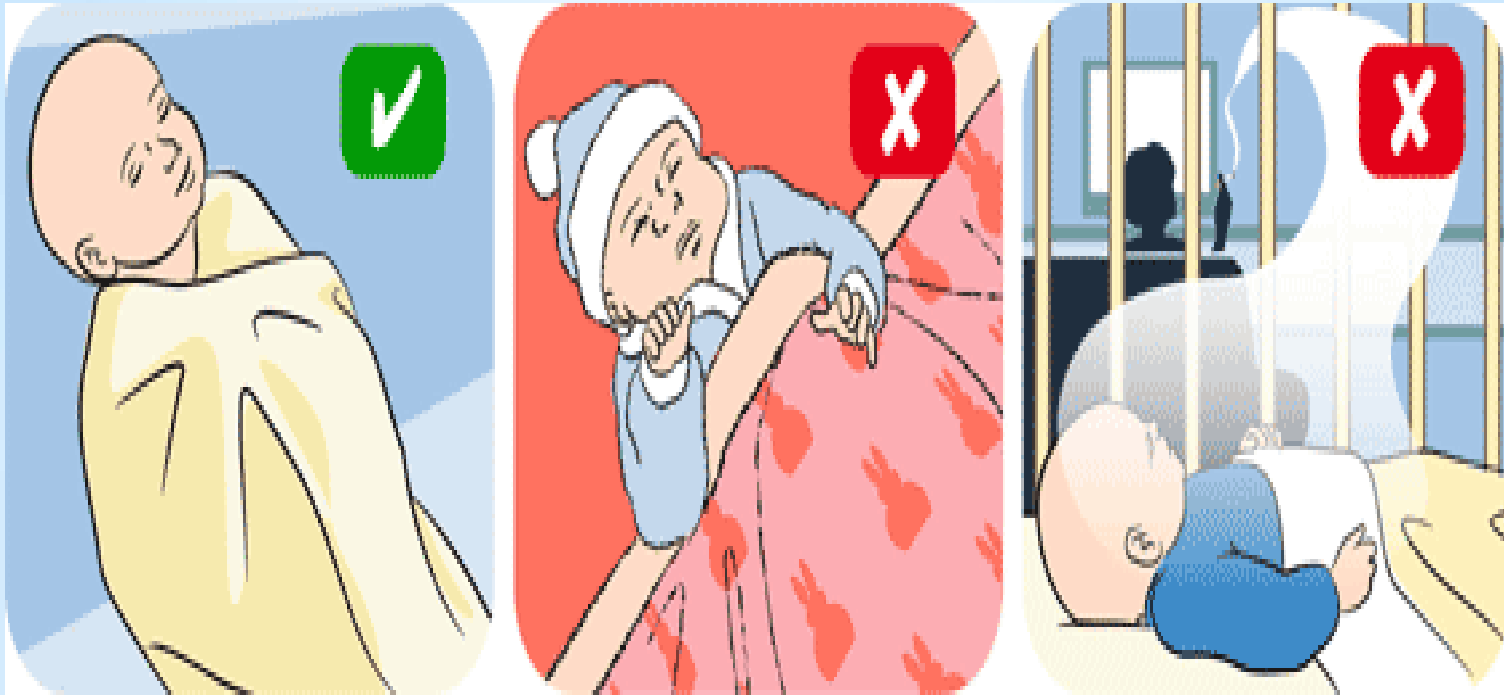
- \* Provide safe sleep practice nursing guidelines to be modeled by caregivers to parents prior to and following discharge from Mother Baby, Pediatrics, PICU , Neonatal and the Pediatric ER.
- \* Modeling safe sleep is particularly important as the infant progresses closer to discharge. Research shows that parents do **what we do, not what we say.**

*All infants in an open crib must be positioned supine for correct modeling of safe sleep practices for parents*

# Right and wrong way

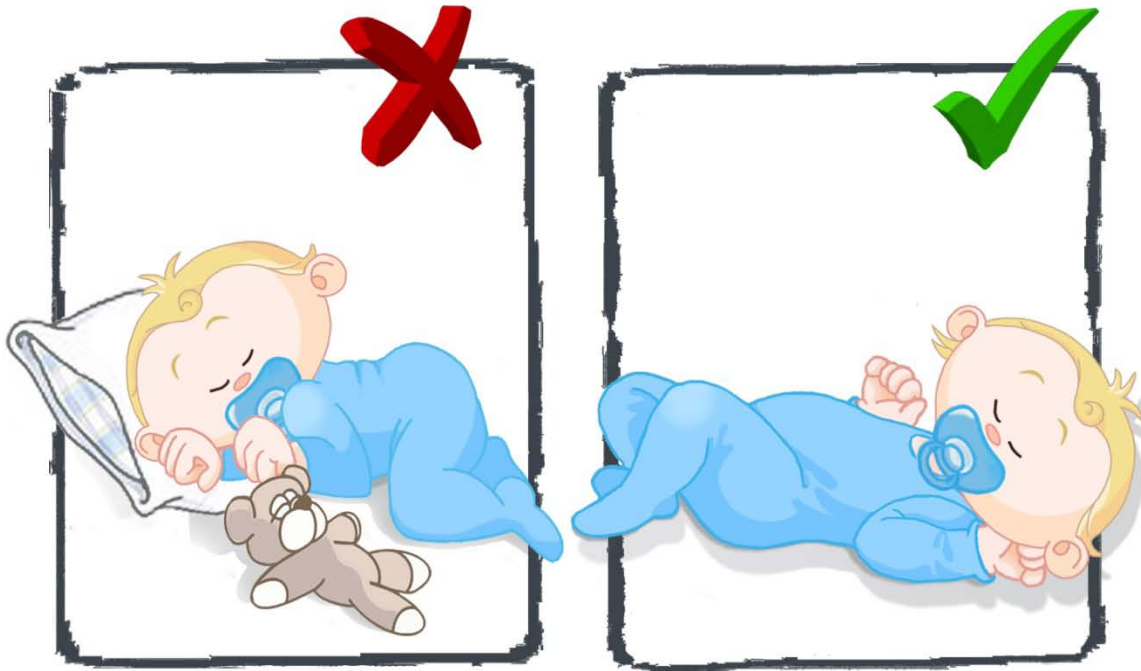


# Right and wrong way



Overheating has been linked with SIDS so **don't overdress baby** or put him to bed wearing a **beanie or hat**. A good guide is to dress baby as you would dress yourself, that is, to be comfortable and warm but not hot.

# Right and Wrong way



# More things that protect babies from SIDS/SUID

**So what do breastfeeding and Safe Infant Sleep have in common? Both significantly reduce the risk SIDS and together, they can help a baby stay healthy!**

Breastfeeding



Immunizations



# What does a safe sleep environment look like?

Lower the risk of sudden infant death syndrome (SIDS).

Don't forget Tummy Time when the baby is awake and is being watched.



Use a firm mattress in a safety-approved\* crib covered by a fitted sheet.



Make sure nothing covers the baby's head.

Place your baby on his or her back to sleep for naps and at night.

Use sleep clothing, such as a one-piece sleeper, instead of a blanket.

Do not use pillows, blankets, sheepskins, or pillow-like bumpers in your baby's sleep area.

Do not let anyone smoke near your baby.

Keep soft objects, stuffed toys, and loose bedding out of your baby's sleep area.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
National Institutes of Health  
Eunice Kennedy Shriver National Institute of Child Health and Human Development

\*For more information on crib safety guidelines, call the Consumer Product Safety Commission at 1-800-638-2772 or visit their Web site at <http://www.cpsc.gov>.



# Sleep Blanket or Sleep Sacks

- \* At HH W&C and Madison campuses we will begin utilizing the HALO®SleepSack in all areas for all inpatient infants 6 months and less . In the Neonatal unit they will be used after transition to crib.
- \* Sleep sacks or sleep blankets allow for warmth, swaddling and containment without the need for extra bedding in the crib with the infant.
- \* If a HALO®SleepSack is not available and a baby blanket is used, teach families that covering an infant should be at the level of the shoulders or arms in and hands at midline for hand-mouth consoling.



Reduce the Risk  
of SIDS

# Safe Sleep for Your Baby

## Peace of Mind for You



## HALO® 2-in-1 SleepSack™ Swaddle

### Swaddling Made Simple and Safe.

The HALO® SleepSack™ Swaddle is uniquely designed to prevent the swaddle from being placed too high on the body and near baby's face. The 2-in-1 HALO® SleepSack™ Swaddle allows you to remove the swaddle and use it as a regular HALO® SleepSack™ wearable blanket when your baby outgrows swaddling.

### The Safer Way to Sleep®

Regular baby blankets in the crib can be dangerous! The HALO® SleepSack™ wearable blanket eliminates the need for loose blankets and is the **#1 choice of parents, hospitals and leading experts** for keeping your baby safe and warm all night long. For safe sleep tips, visit [www.halosleep.com](http://www.halosleep.com)



Unique 2-in-1 design removable swaddle allows you to use as a regular HALO® SleepSack™ wearable blanket when babies outgrow swaddling.

### Reduce the Risk of SIDS

Designed by a parent who lost an infant to SIDS, and now used in hospital nurseries nationwide, the HALO® SleepSack™ wearable blanket replaces loose blankets that can cover your baby's face and interfere with breathing. It's the only product that carries the gold seals of the leading SIDS organizations in both the U.S. and Canada.

### Functional and Fun

HALO offers a fashionable variety of fabrics, prints and sizes from preemie to age 5. The HALO® SleepSack™ wearable blanket is not only safe but cute, too!



The American Academy of Pediatrics, leading SIDS organizations and health professionals suggest the use of wearable blankets. A percentage of our sales go to support SIDS research and education in the U.S. and Canada.



To find a retailer near you, visit:

[www.halosleep.com/togo/2226](http://www.halosleep.com/togo/2226)  
or call 888-999-HALO (ext. 2226)

# HALO® Sleepsack Swaddle

*The HALO® company was founded by Bill Schmid and his wife after they lost their first baby to SIDS. The HALO mission is to “Help Babies Sleep Safely”.*

*HH W&C and Madison Campuses have joined in this mission and will use the HALO sleepsacks in an effort to provide good sleep practices for parents to follow once discharged home with their babies.*

# HALO® Sleepsack

- \* The HALO® Sleepsack is a wearable blanket swaddle which will replace blankets currently used for swaddling.
- \* It is available in various sizes, including preemie, for infants under 5lbs, Newborn 6-10lbs and Newborn Small 10-18 lbs.
- \* It is available in 100% cotton fabric and will have the HH logo for W&C and Madison.



# HALO® Sleepsack



- \* The HALO® Sleepsack was designed with temperature regulation in mind.
- \* Each sack is sleeveless and designed to be worn over a light-weight sleeper or pajamas to prevent overheating, a SIDS risk factor.
- \* The front is designed with a zipper which zips from the top to the bottom, allowing EKG wiring and Pulse Ox cords to exit from the bottom of the sack.

Arm and neck openings sized for a safer fit.

Sleeveless to help reduce the risk of overheating.

Inverted zipper for easy diaper changes.

"Back is Best" message reminds all caregivers to put babies to sleep on their backs.

Premium fabrics - always. Added chemicals - never.

Roomy sack design promotes healthy hip development. International Hip Dysplasia Institute approved.



# Yes! to Blanket Sleepers

- \* After 37 weeks and prior to discharge swaddling with a blanket during sleep is not recommended.
- \* Preterm infants in Neonatal with thermoregulation difficulties may require a second blanket.



... in every place,  
for every sleep,  
check that I am safe

- ✓ face up
- ✓ face clear
- ✓ smokefree



# For NICU Staff

- \* Safe Sleep teaching will begin on Admission to the NICU....It is important to explain to parents why we use the prone position. i.e. ease of respirations, feeding intolerance, CPAP.
- \* Babies born < 34 weeks gestation that are **medically stable** will begin the transition to supine sleeping without nests or any other developmental supports.
- \* By 34 weeks gestation or when infant has successfully transition to an open crib and is medically stable, infant should sleep supine, without nest in a flat crib, unless medically ordered to have HOB elevated.
- \* NAS babies should start supine positioning as soon as possible. These infants will require extra parent teaching on Safe sleep positioning and the safe use of swings, bouncy seats etc. Infant is not to be left alone while in car seat, bouncy seat, swing or car seat. Infants should not be allowed to sleep in "U" shaped pillows.

# Swaddling Infants

**Infants should be swaddled/bundled no higher than the axillary or shoulder level.**

- \* A “sleep sack” may be used. Sleep sacks may be used on infants < 38 pounds and 1 year of age.
- \* If temperature instability occurs, infants may have an additional blanket used by tucking the blanket around the mattress and covering the infant no higher than the Axillary or shoulder level.
- \* It is not recommended that infants sleep in hats
- \* If a blanket is used, place infant with feet to foot of the crib and tuck a thin blanket around the crib mattress, covering infant only as high infant’s “nipple line”.





# Swaddling with a blanket

Swaddling a baby too tightly can increase the risk of overheating or developing a respiratory infection. Swaddling a baby in a way that prevents his or her hips or knees from being able to move can also increase the risk of developmental dysplasia of the hip

If you swaddle a baby, be sure to practice safe sleep habits. Always place a swaddled baby on his or her back to sleep. Stop swaddling when a baby learns to roll onto his or her stomach. A swaddled baby on his or her stomach might have difficulty breathing. Stop swaddling by 2 months. Wearable Blankets are preferred.



# HALO® IN-HOSPITAL SLEEPSACK PROGRAM

- \* Specially designed HALO® SleepSack® Swaddle wearable blankets for in-hospital use, made of durable fabric with easy access to monitor leads.
- \* FREE safe sleep educational materials for parents and staff training.
- \* Marketing and public relations support materials to promote your hospital's safe sleep practices

# HALO® HOSPITAL TAKE HOME PROGRAM

*1 year give away*

- \* We will provide parents with a new HALO® SleepSack to take home at discharge the kick off year 2014. This has a retail value of \$20.00
- \* The HALO® SleepSack or wearable blanket will have the W&C or Madison hospital logo embroidered on it.
- \* Free safe sleep educational materials for parents and staff training.
- \* Marketing and public relations support materials to promote the hospital's safe sleep practices.
- \* HH will gain recognition as a leader in safe sleep education.

**Gift Shop will offer**

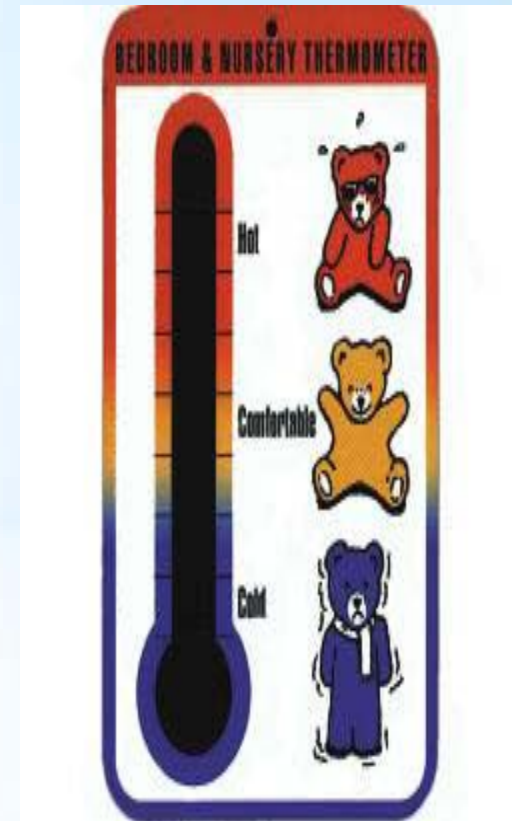
**The Halo® wearable  
Sleepsacks swaddle and  
wearable blankets will be  
available in the GIFT  
SHOPS AT W&C/Madison  
Campus**



# Discharge Education



- \* Always teach “Back to Sleep”
- \* Smoke-free environment
- \* Use sleep clothing or *wearable* blankets rather than blankets
- \* Firm mattress with tightly fitted sheets
- \* Avoid over-heating with clothing (no hats), blankets and environmental heating (room 70-72 degrees)



# Discharge Education

- \* Avoid wedges and positioning devices
- \* Keep crib free of stuffed animals, toys, and soft objects
- \* Face and head to stay uncovered during sleep
- \* ***“Share your Room, Not your Bed”***
- \* Teach families to tell others about the baby’s sleep plan (grandparents, caregivers, babysitters)



# Discharge Education

It is imperative that while modeling safe sleep practices, nurses engage parents/caregivers in conversations about sleeping environments at home.

- \* *Tell me in your own words what safe sleep means?*
- \* *What are things you can do to prevent your baby from dying from SUID or suffocation*
- \* *Where will your baby sleep when he/she goes home?*
- \* *Please demonstrate for me how to use the Halo sleep Sack?*
- \* *Can you describe your crib to me?*
- \* *Does anyone in your home smoke?*



# Safe Sleep needs to start with us!

We need to **teach** parents Safe Sleep

AT HH W&C and Madison Campuses

We will **model** Safe Sleep

As our

**STANDARD OF CARE**





HALO's mission is to help babies  
sleep better and safer.

At HH, by teaching parents to use the  
SleepSacks and Safe Sleep  
techniques, we will increase  
SIDS/SUID awareness. If we prevent  
just one SIDS/SUID death with this  
campaign then it was absolutely the  
Right Thing To Do.



# Patient Safety is our Goal

By this SAFE SLEEP initiative we are continuing our focus on patient safety.

Many of our initiatives are focused around The Joint Commission's National Patient Safety Goals. However, we work proactively to identify additional ways to make improvement in safety.

**It is not just one persons job**

Our goal is that everyone in our organization will show our patients and their families how we advocate for patient safety each and every day!

