

Safe Sleep



A simple conversation could save a life.



Learning Objective

At the conclusion of this training the caregiver, with use of notes and handout, will be able to:

- Identify ABC's of Safe Sleep. ; baby sleeps safest ALONE, on their BACK, and in a CRIB



According to the 2018 Arizona Child Fatality Review Report:

- 83 infants died in unsafe sleep environments (up from 79 in 2016)
- These deaths accounted for 24% of all preventable deaths, more than drownings (35) and suicides (50).
- 60% of those infants died while co-sleeping/ bed sharing (up from 51% in 2016)
 - 99% of Sudden Unexpected Infant Deaths (SUID) were determined to be preventable (up from 93% in 2016)

Arizona Child Fatality Review (CFR) Program. "Twenty-Fourth Annual Report." 15 Nov. 2017.
<http://azdhs.gov/documents/prevention/womens-childrens-health/reports-fact-sheets/child-fatality-review-annual-reports/cfr-annual-report-2017.pdf> 15 Nov. 2017.

Safe Sleep Environment

This an example of a safe sleep environment, in which the risks of SUID and other sleep-related causes of infant death are low.



Baby is sleeping on their back on a firm sleep surface; and there are no crib bumpers, pillows, blankets, loose bedding, or toys in the sleep area.

According to research, about one in eight “crib deaths” occur among infants who were placed on sofas.

Sleeping Requirements

- Provide each foster child with a bed that is safe and appropriate based on the child's age and special needs.
- A "bed" doesn't include sleeper sofas, rollaway beds, couches, cots, sleeping bags, mats, and portable cribs such as a Pack 'n Play.
- Provided each foster child with a separate bed or crib
- If a foster child is less than the age of six years they should not sleep on the top tier of a bunk bed or similar style bed when the top of the mattress is elevations four or more feet above the floor.
- Place a child 12 months of age and younger on their back to reduce the risk of Sudden Infant Death Syndrome (SIDS)

Room Sharing

A foster child less than three years of age may share a bedroom with a foster parent

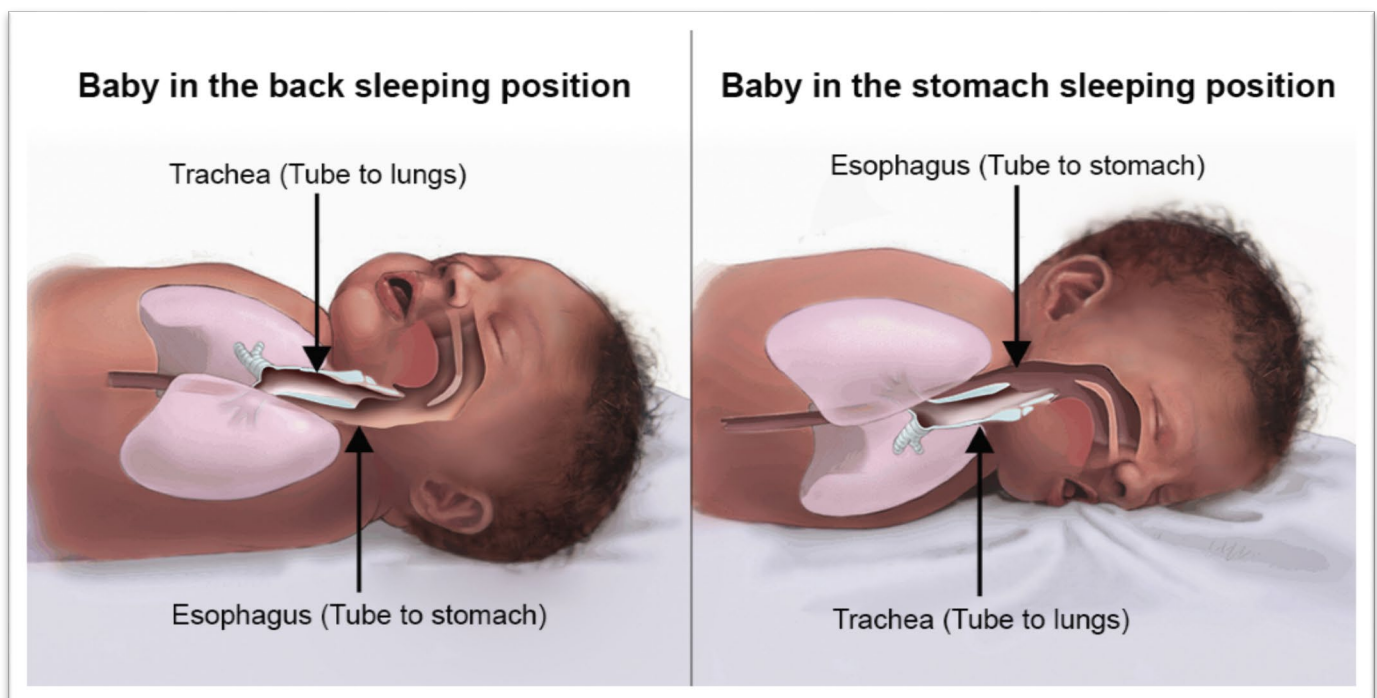


Sleep in the same room, not the same bed.

Sleep Positioning

Back sleeping does not increase the risk of choking.

In fact, babies may be better able to clear fluids when they are on their backs, possibly because of anatomy.

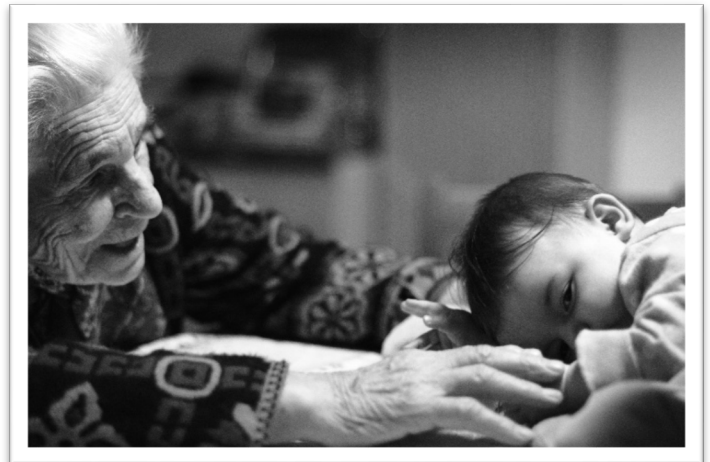


Safe to Sleep® campaign, Eunice Kennedy Shriver National Institute of Child Health and Human Development, <http://www.nichd.nih.gov/sids>; Safe to Sleep® is a registered trademark of the U.S. Department of Health and Human Services.

Everyone Can Help!

A foster parent shall use careful and sensible judgment in selecting an adult to provide short-term care or supervision for a foster child and shall ensure that the adult has the ability to meet the specific needs of a foster child.

Making sure all caregivers with infants know how to reduce the risk of SUID and other sleep-related causes of infant death is more important than ever.



Safety Tips for Baby

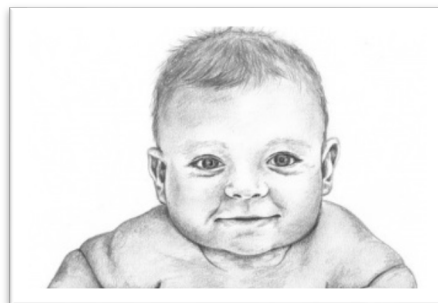
- Baby sleeps safest alone, on their back, and in a crib
- Share your room but not your bed
- Keep bedding away from baby's face
- Do not overdress the baby
- Empty the crib (except for the mattress) prior to placing baby in it.
- Use the foam mattress, do not use pillows
- Keep pets away from/out of the crib to keep it clean
- Make sure that anyone who watches baby knows about safe sleep



Other considerations to Remember:

- To avoid Overheating- keep the room at a good temperature, use breathable fabrics, avoid blankets, and do not swaddle too tight.
- Keep in mind that “tummy time” is good for baby's development but should only happen when they are awake and supervised. There is no air space when they are sleeping on their tummy and they take in exhaled air (carbon dioxide).
- Avoid bottle propping and propping to avoid the risk of choking and/or suffocating.
- Do not leave babies in a car seat or swing for extended periods of time, babies can roll or slide off. Babies do not have the neck support to be in this position for extended amounts of time so they may stop breathing.
- Consider where baby will be sleeping while families are out of the home; encourage them to bring a portable pack and/or play pen.
- Encourage parents to talk to other caregivers about safe sleep.

You won't hear a baby suffocate; it is a silent death and babies can suffocate in less than a minute



Transitioning to a Toddler Bed

Considerations/timing

- Consider transition when they begin climbing out of the crib. Usually between 1 ½ & 3 ½ years of age and about 35 inches tall.
- Is the crib a convertible (where the front panel can be removed)? The toddler bed should also have rails for the sides of the bed to avoid getting stuck between wall and bed.
- Put the bed in the same spot the crib occupied if possible, this maintains consistency/comfort during a transition.
- Try to avoid changes around sleeping during at the same time as other transitions such as potty training.



- Ease into the transition. Begin by allowing them to nap in the toddler bed.
- Have the child involved. (Example: Let them select sheets with characters).
- Re-evaluate your child proofing as the child will be readily mobile (Example: Gates for stairways).
- Be prepared for nighttime visits for drinks of water, bad dreams, etc.
- Do not lock a child in their bedroom
- Do not use a crib tent or netting



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**To learn more about Safe Sleep,
please visit:**

dcs.az.gov/Services/Safe-Sleep