Standards and Practice for Safe Sleep Environments
Assessing the Safety of An Infant's Sleep Environment

PRACTICE GUIDE
To be used in conjuction with DCF Policy 44-12-8

Purpose
The purpose of this Practice Guide is to provide DCF staff with evidence-based knowledge to assess the safety of an infant's sleep environment and to educate caregivers about how to create a safe infant sleep environment.

Definitions
DCF staff means Social Workers, Social Work Supervisors and all other staff that visit the home and engage with parents or caregivers of children ages 0-12 months.

Infant means a child younger than twelve months of age.

Rationale

Sudden Infant Deaths in Connecticut:
Largely Attributed to Unsafe Sleep Environment

Sudden unexpected infant death (SUID), also known as sudden unexpected death in infancy (SUDI), is a term used to describe any sudden and unexpected death, whether explained or unexplained (including SIDS), that occurs during infancy. SUID or SUDI can be attributed to suffocation, asphyxia, entrapment, infection, ingestions, metabolic diseases and trauma (accidental or non-accidental). Scene investigations can help to identify the root cause of SUID and SUDI.

Monthly reviews by the Connecticut Child Fatality Review Committee and of DCF Critical Incident reports have identified unsafe sleep conditions as a contributing factor in many recent infant deaths. These sleep-related deaths are fully preventable.

Recent evidence suggests that infants reported to child protective services have a heightened risk of SIDS and other SUID; therefore, it is crucial that DCF address these modifiable causes of sleep-related infant deaths.

In 2011, the American Academy of Pediatrics (AAP) Task Force on Sudden Infant Death Syndrome revised its recommendations for safe sleep environment for infants to include the following:

- always place a baby on his or her back to sleep for every sleep, every nap, and with every caregiver
- use a firm sleep surface (never a couch or chair)
- infants should share a room with adult caregivers without bed-sharing.
- keep soft objects and loose bedding out of the crib
- avoid smoke exposure during pregnancy and after birth
- avoid alcohol and illicit drug use during pregnancy and after birth
- breastfeeding should be promoted
- use a pacifier at nap time and bedtime for infants who will take one
- avoid overheating.
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Rationale (con't)

The AAP Task Force also supported the expansion of the campaign to reduce the incidence of Sudden Infant Death to include a major focus on the safe sleep environment and ways to reduce the risks of all sleep-related infant deaths, including SIDS, suffocation and other accidental deaths.

As part of its campaign, the AAP Task Force made recommendations about other sleep situations. Key recommendations include the following:

- use a firm sleep surface such as a crib, bassinet or portable crib or play yard that conforms with the safety standards of the Consumer Product Safety Commission
- do not use sitting devices such as car safety seats, strollers, swings, infant carriers and infant slings for routine sleep in the home

Recommendations for Practice

DCF staff, especially Social Workers, shall provide educational information to all soon-to-be parents as well as parents of infants (birth, foster, adoptive, etc.) regarding safe sleep environments, including the 2011 recommendations of the American Academy of Pediatrics.

DCF staff, especially Social Workers, shall also advise parents of infants that the leading cause of preventable death of infants in Connecticut is death caused by unsafe sleeping conditions.

Social Workers shall

- during each home or placement visit for an infant, ask to observe the infant's sleep environment.
- engage caregivers of infants in problem solving regarding safe sleep barriers.
- discuss any concerns with the caregiver and make recommendations for resolution. If a risk factor is identified during a visit and cannot be resolved, the Social Worker shall immediately consult with the Social Work Supervisor as well as the pediatrician for the infant and any home visiting or parents' support services in place.
- if a caregiver is lacking safe sleeping furniture or equipment, assist the family in securing such items as soon as practicable with the support of the Area Office
- provide support to caregivers and families to make the sleep environment for infants as safe as possible by ensuring that families have a safe crib, portable crib or bassinet and, if not, ensure that the family is able to procure one
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Recommendations for Practice (con't)

- emphasize regularly to caregivers that the safest sleeping environment for infants is on their back, in a crib or bassinet with a firm mattress and without bedding, blankets, bumpers or pillows, in a position proximate to the caregiver, such as next to the caregiver’s bed or in the same room as the caregiver, but not in bed with a caregiver
- remind caregivers that sitting devices such as car safety seats, strollers, swings, infant carriers and infant slings are not recommended for routine sleep in the home. If an infant falls asleep in a sitting device, he or she should be moved to a crib or other appropriate flat surface as soon as is practical.
- be sensitive to cultural child-rearing practices including bed-sharing and work with families to implement best practices and maximize safety.

Documentation

Social Workers shall document in case record

- safe sleeping discussions with the caregivers
- the infant’s sleeping environment
- all actions taken to resolve concerns with the infant’s sleep environment.