

Michigan Infant Safe Sleep Training

Good night. Sleep tight. Sleep safe.

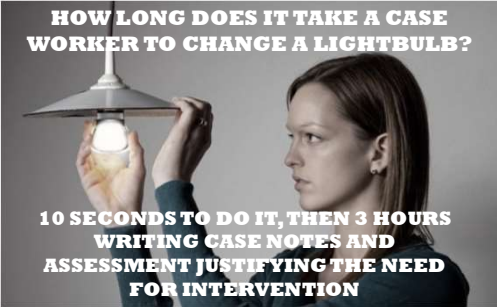
Learn more about the safest way for babies to sleep at michigan.gov/safesleep




Nicole DeWitt, MM
CRP National Conference




HOW LONG DOES IT TAKE A CASE WORKER TO CHANGE A LIGHTBULB?



10 SECONDS TO DO IT, THEN 3 HOURS WRITING CASE NOTES AND ASSESSMENT JUSTIFYING THE NEED FOR INTERVENTION



Sudden Unexpected Infant Death (SUID) Case Registry/ Child Death Review (CDR)



What is Child Death Review (CDR)?

- CDR is a county-level, multidisciplinary process that reviews the circumstances surrounding a child's death in an attempt to understand how and why the child died.
- The goals are to influence policy and practice changes that:
 - Improve death scene investigations
 - Improve the delivery of services to families
 - Prevent future fatalities



Child Death Review in Michigan

- Began in 1994
- All 83 counties in Michigan are represented
- Review approximately 500 cases per year
- Teams report into the National CDR database
- Composition:
 - Six mandated members: Health Department, Medical Examiner, Law Enforcement, Department of Health and Human Services, local Prosecutor, and the local court
 - Other team members may include: CMH, Hospitals, Physicians, Education, EMS, and other local Human Service representatives



SUID Case Registry Database

- A statewide database funded by the CDC that tracks all sleep-related deaths in each of the 83 counties in Michigan and contains comprehensive information about the circumstances associated with the infants' death, as well as information about the case investigation
- Michigan's data is generated from the local Child Death Review (CDR) teams




Sleep-Related Infant Deaths in Michigan




Michigan's Definition of Sleep-Related Infant Deaths

- Sleep-related infant deaths are defined in Michigan as deaths of infants less than 1 year of age that occur suddenly and unexpectedly, including:
 - Suffocation/Positional Asphyxia;
 - Sudden Infant Death Syndrome (SIDS);
 - Undetermined/Sudden Unexpected Infant Death (SUID); and
 - Other causes wherein the sleep environment was likely to have contributed to the death.



Sudden Infant Death Syndrome: "SIDS"

- Historically, sleep related deaths were called SIDS.
- The use of the term "SIDS" has decreased dramatically in Michigan in the last 10 years.
- Due to improved death scene investigations, medical examiners are determining more sleep-related infant deaths to be caused by positional asphyxia (suffocation).
- If medical examiners do not believe that there is enough evidence to make a suffocation determination, they are more often using the term "Sudden Unexpected Infant Death" (SUID), rather than "SIDS."



What Do You Think?

From 2010 to 2017,
how many sleep-related deaths
occurred in Michigan?

- A: 206
- B: 535
- C: 889
- D: 1,136



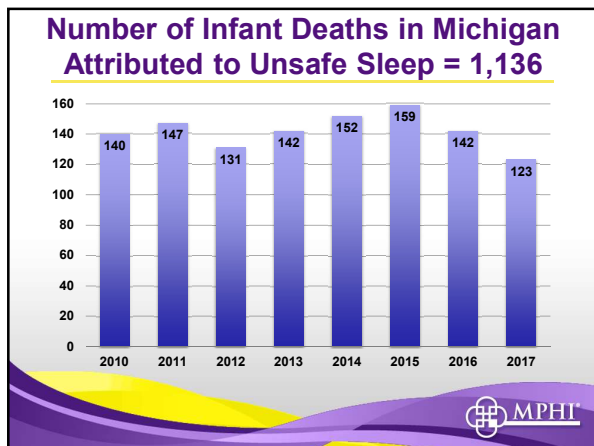
Sleep-Related Infant Death Numbers:

From 2010 to 2017,
there were **1,136**
sleep-related infant deaths
in Michigan.



**In Michigan, an
average of 3 infants
die each week due
to unsafe sleep
conditions**





Sleep-Related Infant Deaths in Michigan

Year	No. of Deaths	No. of Births	Rate per 1,000 Live Births
2010-2017	1,136	907,868	1.3
2010	140	114,717	
2011	147	114,159	
2012	131	112,708	
2013	142	113,732	
2014	151	114,460	
2015	159	113,211	
2016	142	113,374	
2017	123	111,507	

Death data are by county of residence from CDC SUID Case Registry, Michigan Public Health Institute, 2019. Birth data are from Michigan Resident Birth Files, Division for Vital Records and Health Statistics, Michigan Department of Health and Human Services, 2019.

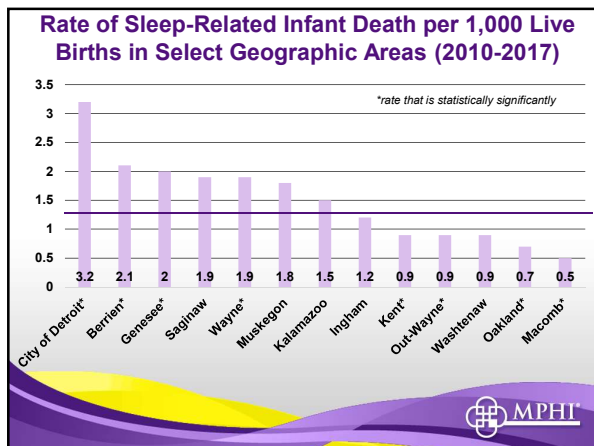
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The Impact of Sleep-Related Infant Deaths





In 2015, twice as many infants died in sleep-related incidents (n=159) than from:

- Motor Vehicle Crashes
- Drowning
- House Fires
- Other Accidents
- Infectious Diseases
- Diseases of the Circulatory System, Respiratory System and Nervous System ... COMBINED (74)

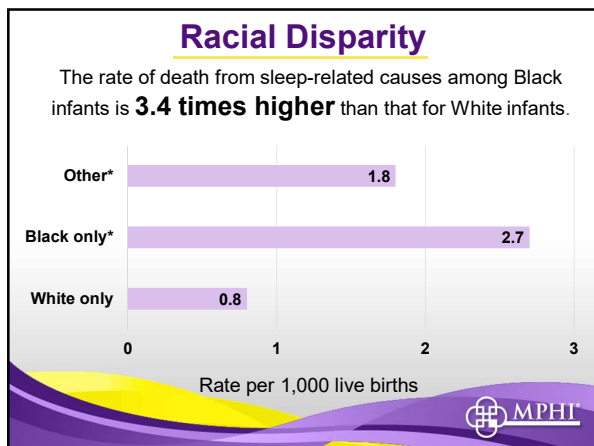
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Of the infants who died of sleep-related causes in Michigan (2010-2017)...

- 78% had publicly-funded healthcare coverage 
- Males accounted for more sleep-related deaths than females (59% vs. 41%) 
- 65% died before the age of 4 months 
- The average age of the mother was 25 years old 


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Racial Disparity

Sleep-Related Infant Deaths by Race, Michigan, 2010-2017

Race	No. of Deaths*	No. of Births
White only	542	666,842
Black only	474	173,833
Other	118	64,292



What do you consider safe sleep?



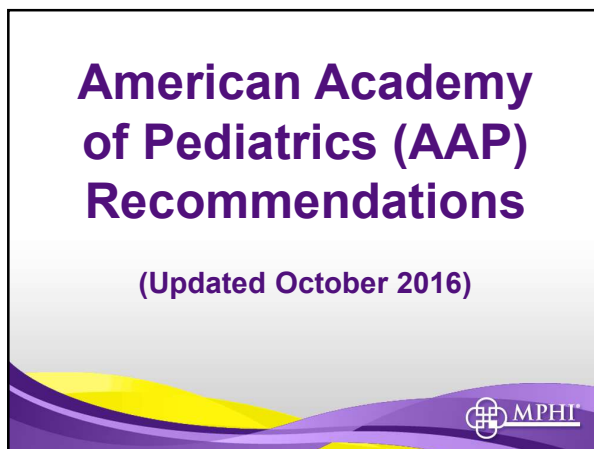
The 's of Safe Sleep

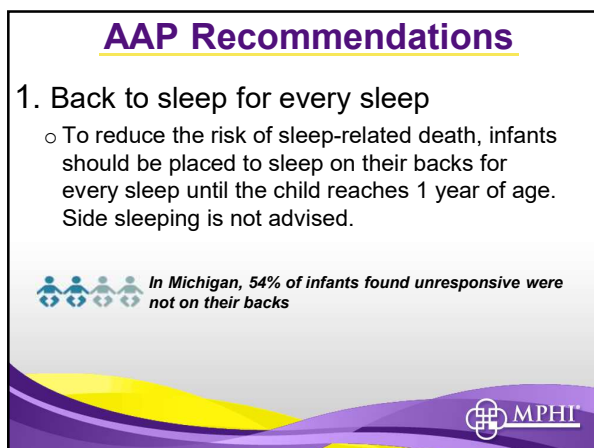
 **Alone**
Not with other people, pillows, blankets, or stuffed animals.

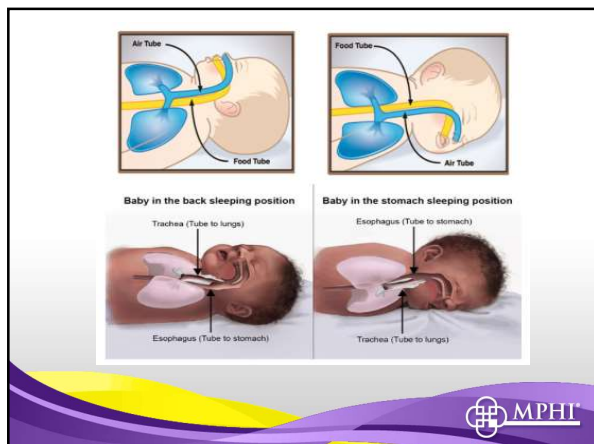
 **on my Back**
Not on the stomach or side. 

 **in my Crib**
Not on an adult bed, sofa, cushion, or other soft surface.










Sleeping on Back

- Infants sleeping on their stomachs are more likely to trap exhaled carbon dioxide around the face
- Babies arouse more frequently when slept on their backs which:
 - Allows them to wake up more easily if in a compromising situation (i.e. low oxygen)
 - Explain this to parents



Reflux, GER, or GERD

- “Gastroesophageal reflux (GER) is when liquids or foods in the stomach flow “back up” into the esophagus (the tube where food passes from your mouth to your stomach).” -AAFP
- The risk of sleep-related death outweighs the benefit of prone or lateral sleep position



Safe Alternatives for Reflux, GER, or GERD

- Hold baby upright after feedings
- Burp frequently during and after feedings
- Give more frequent, smaller feedings
- Limit activity after feedings



AAP Recommendations

2. Use a firm sleep surface

- Infants should be placed [alone] on a firm sleep surface (eg, mattress in a safety-approved crib) covered by a fitted sheet with no other bedding or soft objects to reduce the risk of suffocation
- A firm surface maintains its shape and will not indent or conform to the shape of the infant's head when the infant is placed on the surface.



In Michigan, 75% of sleep-related deaths occurred in an unsafe sleep location. A crib, bassinet or portable crib was not present in the home in 15% of these deaths.



New Federal Crib Requirements

5 New Federal Requirements:

- ❗ Traditional drop-side cribs cannot be made or sold; Immobilizers and repair kits not allowed
- ❗ Wood slats must be made of stronger woods to prevent breakage
- ❗ Crib hardware must have anti-loosening devices to keep it from coming loose or falling off
- ❗ Mattress supports must be more durable
- ❗ Safety testing must be more rigorous



www.cpsc.gov

Beginning June 20, 2011 all cribs sold in the United States must meet new federal requirements for overall crib safety.



Crib Safety

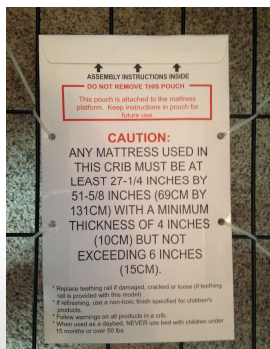
- Do not use cribs that are broken or modified.
- Cribs with missing hardware should not be used because many deaths are associated with cribs that are broken or with missing parts (including those that have presumably been fixed)



Crib Safety

- Make sure there are no gaps larger than two fingers between the sides of the crib and mattress.





New Federal Play Yard Requirements

KEEP BABY SAFE IN PLAY YARD SPACE

Starting February 28, 2019, bedding for play yards will be under strict regulation. Play yards that meet new safety standards must have:

- **Mesh sides:** Mesh sides must be made of a material that is strong enough to prevent a child from climbing out of the play yard.
- **Mesh openings:** Mesh openings must be small enough to prevent a child's head from getting stuck.
- **Mesh strength:** Mesh must be strong enough to prevent a child from pulling it down over their face.

SAFE SLEEP TIPS:

- Always place baby on back to sleep.
- Only use the mattress sold with the play yard.
- Keep pillows, quilts, comforters, and cushions out of play yards, cribs, and bassinets.
- Dress baby in footed pajamas for warmth.

A baby must be in a standard sleeping position with all limbs and head on the mattress at all times. All baby and toddler car seats, strollers, and cribs must be used in accordance with the manufacturer's instructions. Do not use any other bedding or padding in play yards.

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⚠ WARNING!
INFANTS CAN SUFFOCATE

- In gaps between a mattress too small or too thick and product sides
- On soft bedding
- **NEVER** add a mattress, pillow, comforter, or padding.
- Use **ONLY** the mattress provided with the Playard.
- **NEVER LEAVE INFANT IN PLAYARD WITH SIDES DOWN.** Infant may roll into space between pad and loose mesh causing suffocation.

See bottom panel and instruction manual for warnings.

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Pack N' Play

Napper

Changer

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AAP Recommendations

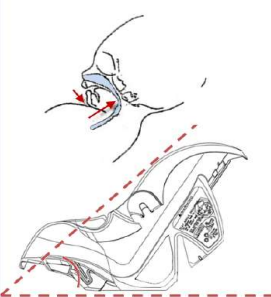
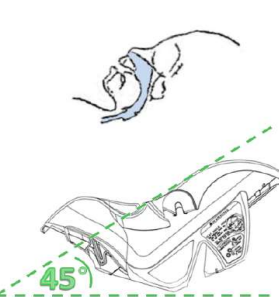
- Sitting devices, such as car seats, strollers, swings, infant carriers are not recommended for routine sleep.




Cribs are for sleeping... ...Car seats are for traveling

- A car seat is designed to protect a child during travel. It is not for use as a replacement crib in the home.
- Sitting devices are not sleeping devices
- If an infant falls asleep in a sitting device, he or she should be removed from the product and moved to an appropriate flat surface as soon as is safe and practical



<h4>Placed on the Ground</h4> <p>Placed at an angle greater than 45°, airway may become obstructed</p> 	<h4>Placed in the Car</h4> <p>Placed at a 45° angle, airway is unobstructed</p> 
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AAP Recommendations

3. Breastfeeding is recommended


- o Breastfeeding is associated with a reduced risk of sleep-related death

 Overall, 78% of mothers in Michigan planned to are initiated breastfeeding. Of the infants who died of sleep-related causes, only 51% had ever been breastfed.



Other Definitions

- Room-sharing: Parent(s) and infant sleeping in the same room on separate surfaces.
- Bed-sharing: Parent(s) and infant sleeping together on any surface (Bed, couch, chair).



AAP Recommendations

4. It is recommended that infants sleep in the parents' room on a separate surface designed for infants, ideally for the first year of life, but at least for the first 6 months

- There is evidence that sleeping in the parents' room, close to the parents' bed, but on a separate surface decreases the risk of sleep-related death by as much as 50%
- In addition, this arrangement is most likely to prevent suffocation, strangulation, and entrapment that may occur when the infant is sleeping in the adult bed



In Michigan, 58% of sleep-related deaths involved an infant sharing a sleep surface



AAP Recommendations

5. Keep soft objects and loose bedding away from the infant's sleep area to reduce the risks of suffocation, entrapment, and strangulation



- Keep soft objects, such as pillows and pillow-like toys, quilts, comforters, sheepskins, and loose bedding out of the infant's sleep area



Bumper Pads

- Bumper pads should not be used in cribs. There is no evidence that bumper pads prevent injuries, and there is a potential risk of suffocation, strangulation or entrapment.



AAP Recommendations

6. Consider offering a pacifier at naptime and bedtime

- o Although the mechanism is yet unclear, studies have reported a protective effect of pacifiers on the incidence of sleep-related deaths. Even if the pacifier falls out of the infant's mouth.
- o For breastfed infants, pacifier introduction should be delayed until breastfeeding is firmly established.



AAP Recommendations

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

- o Wedges, positioners and other devices placed in the adult bed for the purpose of positioning or separating the infant from others in the bed are not approved



Safe for Sleep?

- Does the product have extra padding, soft surfaces, bumper-like pads, or heavy, thick coverings?
- Does it allow your baby to sleep on an incline?
- Does it have straps?
- Are there soft objects in the sleep area?
- Does the information on the product say that it is safe for your baby to sleep on his stomach?
- Does the information on the product say that it prevents Sudden Infant Death Syndrome (SIDS)?



Other Recommendations

- Avoid smoke exposure during pregnancy and after birth
- Avoid alcohol and illicit drug use during pregnancy and after birth
- Avoid overheating and head covering in infants
- Supervised, awake tummy time is recommended to facilitate development and to minimize development of positional plagiocephaly [flat head].



Infant Safe Sleep: Then vs. Now



What Would You Do?











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Boppy® Pillow Warning-



DO NOT REMOVE THIS TAG. IT CONTAINS IMPORTANT SAFETY INFORMATION.

SLEEP

WARNING

Possible Suffocation Hazard.
Never allow baby to sleep on the Boppy® pillow. Do not allow baby to lie face down on a Boppy® pillow. To prevent positional asphyxia, keep baby's airway open at all times. For proper breathing when using the pillow for propping, do not allow baby to be curled up in the crease of the pillow area or be propped up too high on the pillow. Do not use in cradle, bassinet, stroller, play yard, or car seat. Always use with the baby alone or with a caregiver who may fall asleep while feeding the baby. Do not leave baby unattended - adult supervision is required. Improper use of this product could result in serious injury or death.



0m feeding
2m propping
4m tummy time
6m sitting

Never use for sleeping • No usar para dormir • Ne pas utiliser pour le sommeil

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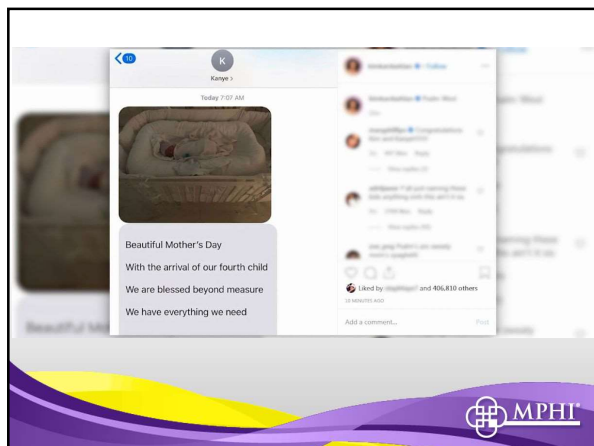


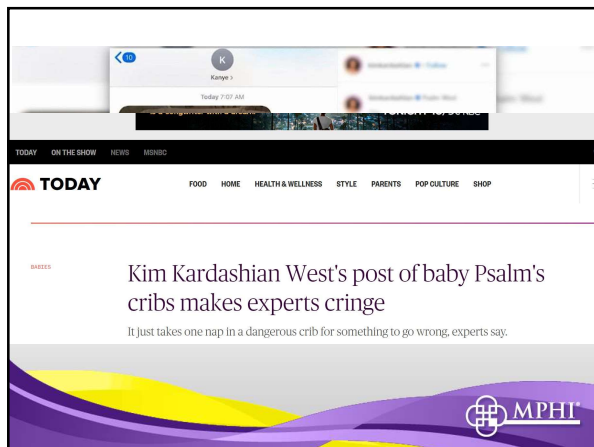
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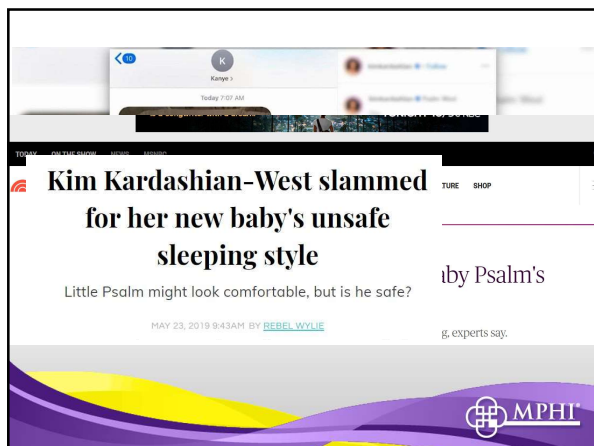
Celebrity Baby Nurseries




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Death Scene Reenactments




State Legislation



Legislation- House Bill 4962 Infant Safe Sleep Act No. 122

- Approved by the Governor- May 12, 2014
- Effective Date- August 12, 2014
- **Hospitals shall provide to parents information and educational material regarding safe sleep practices**
 - Materials must explain the risk factors associated with infant death due to unsafe sleep practices and emphasize infant safe sleep practices
- **Hospitals shall prescribe the form of a parent acknowledgment statement**
 - Form may include a place for a parent to sign, acknowledging that the parent has received the educational materials provided on the risk factors associated with infant death due to unsafe sleep practices and infant safe sleep practices



MDHHS Policy Requirements



Policy Requirements-

PSM 713-01 states: During any CPS investigation or an ongoing CPS case involving a child 12-months of age or younger living in a home, CPS must conduct a home visit to observe the infant's sleep environment and record the observation in the narrative of the DHS-154, CPS Investigation Report. The documentation should address whether (12-1-2017):

- The infant is sleeping alone.
- If the infant has a bed, bassinet or portable crib.
- If there is anything in the infant's bed.
- If the mattress is firm with tight fitting sheets.

Inform the parents of safe sleep practices by providing established safe sleep educational materials.


If the infant does not have a crib or other appropriate infant bed and tight fitted sheets, the worker will make attempts to assist the family in obtaining these items. MDHHS may utilize the following to help secure a crib or other appropriate infant bed and tight fitted sheets:

- The family's friends/family members.
- Community resources.
- Local office funds.

Policy Requirements-

When a sudden and unexplained infant death occurs, evidence of the following should be considered and may affect the case disposition:

- **Substance use-** the parent/caregiver was under the influence of alcohol or substances, including prescribed medications, and there was evidence that his/her behavior or judgment was impaired and/or adversely affected his/her ability to safely care for the infant.
- **Supervision-** the parent/caretaker did not check on the infant at a reasonable frequency consistent with the infant's age and medical or developmental needs, or the parent left the infant with a person he/she knew or should have known was incapable of safely caring for the infant.
- **Hazardous environment-** the environmental conditions in the home were hazardous or unsanitary and adversely affected the safety of the infant.



Policy Requirements-

FOM 722-06H states: In lieu of private discussion with a child under 13 months, the caseworker **must** view the child's sleeping arrangement and verify that safe sleep guidelines are being followed. Safe sleep information can be found by following the link below (5-1-2015):

http://www.michigan.gov/dhs/0,4562,7-124-5453_7124_57836_58080---,00.html

Note: Face-to-face contact with the infant is still required during the home visit.

MiSACWIS Documentation

Caseworkers must identify whether a private meeting (which includes safe sleep verification) occurred for each child participant in the Participant screen within the Social Work Contact section of MiSACWIS.

Safe Sleep Resources



Consumer Product Safety Commission

www.cpsc.gov



New Federal Standard to Improve Safety of Infant Bouncer Seats



Rock N' Play Recall- April 12, 2019



Infants on Air Mattresses

DEADLY DANGER!
INFANTS ON AIR MATTRESSES

Infants can suffocate on an air mattress or can become entrapped between the mattress and bed frame or mattress and wall.

CPSC has received reports of 40 infant suffocation deaths in the last five years, of infants who were placed to sleep on air mattresses.

NEVER
Never place infants ages 15 months old and younger to sleep on an inflatable air mattress.

FOR A SAFER SPACE FOR BABY:

ALWAYS
Place baby to sleep on his or her back in a crib or play yard that meets current standards.
Remember, a bare crib is baby's best sleeping area.

- CPSC has received reports of 40 infant suffocation deaths in the last five years, of infants who were placed to sleep on air mattresses.
- Never place infants ages 15 months old and younger to sleep on an inflatable air mattress.



MDHHS Clearinghouse
Michigan Department of Health & Human Services

Welcome to the Michigan Department of Health and Human Services Clearinghouse. On this site you will find materials produced by MDHHS that can better help you serve your community and improve your health and well-being. These materials are funded by the Michigan Department of Health and Human Services.

Materials are free of charge and intended for Michigan residents only.

Please call 1-800-353-4227 if you have a question, would like to place an order or check the status of your order.

- Abstinence
- Cancer
- Children's Health Care
- Crime Victims
- Gambling
- Immunizations
- Infant Safe Sleep
- Informed Consent
- Mandatory Reporter - Child Abuse & Neglect
- Medicaid
- Mold
- Nutrition & Exercise
- Patient Bill of Rights
- Sexual Assault
- Substance Abuse
- Tobacco
- Violence
- West Nile Virus

SS100	Safe Sleep for your Baby Brochure Rev 4/16	ADD TO CART
SS100a	Safe Sleep Brochure - Arabic	ADD TO CART
SS100s	Safe Sleep Brochure - Spanish Rev 4/16	ADD TO CART
SS101	Safe Sleep for your Baby Poster 18" x 24"	ADD TO CART
SS101s	Safe Sleep for your Baby Poster - Spanish 18" x 24"	ADD TO CART
SS102	Safe Sleep for your Baby Poster 8.5"x11" Rev. 4/16	ADD TO CART
SS102s	Safe Sleep for your Baby Poster 8.5x11" - Spanish	ADD TO CART
SS103	Safe Sleep - Decals ENGLISH ONLY	ADD TO CART
SS104	"Safe Sleep" What Every Parent Needs to Know DVD	ADD TO CART

Safe Sleep 201

The training acknowledges the challenges that parents experience in following the infant safe sleep guidelines and the multitude of factors that influence how infants sleep including parent's trauma experiences, cultural norms, family history, and current circumstances. It encourages an honest and open conversational approach using techniques that are strength-based and that promote resilience.

Safe Sleep 201

- This training is considered an advanced training. Individuals taking this training should be knowledgeable of the AAP recommendations for a safe infant sleeping environment. To schedule an in-person session of this training, a child welfare supervisor or other manager from the local county office can contact Colleen Nelson at 517-335-1954 or nelsonc7@michigan.gov.
- The online version can be accessed at www.michigan.gov/safesleep > Information for Professionals > Training Resources.



**Thank you for
your hard work
and
dedication!**



Contact Information

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