



Safe-Sleep Self-Instructional Training for Listed Family Homes

This self-instructional training is one of multiple ways to meet the safe sleep training requirement for becoming a Listed Family Home. Human Resources Code Sec. 42.046 states (f) An applicant for a listing to operate a family home shall submit with the application proof of the applicant's successful completion of safe sleep training in accordance with commission rules.

The test at this end of this training must be passed with 80% to receive credit (answering 10 of the 13 questions correctly). The completed test needs to be submitted with the Listed Family Home application. It is recommended that a copy of the completed test also be made and kept for your records.

Introduction

As a child care provider, you play an important role in keeping infants safe in their sleep environment by applying simple, caregiving techniques. This self-instructional training:

- Provides an overview of safe sleep,
- Explains the risks of using equipment not intended for sleep,
- Shares safe sleep tips,
- Takes a look at minimum standards that relate to safe sleep; and
- Highlights the importance of sharing your knowledge with parents.

You will have opportunities to *test your knowledge* while reading the training material and you will take a test for training credit at the conclusion.

What is Safe Sleep?

Safe sleep means putting an infant to sleep in ways that can help protect him/her from dangers, like choking and suffocation (not being able to breathe), and sudden infant death syndrome (also called SIDS).

Safe sleep practices can help lower the risk of sleep-related infant deaths. As a primary caregiver it is important that you learn about what a safe sleep environment looks like and then apply that information when you care for infants. Following safe sleep practices will help the infants sleep safely and give you peace of mind.

Sudden Infant Death Syndrome (SIDS) is the sudden, unexplained death of a baby younger than 1 year of age that doesn't have a known cause even after a complete investigation. This investigation includes performing a complete autopsy, examining the death scene, and reviewing the clinical history.

85% of all sudden and unexpected infant deaths between 1 month and 1 year are due to Sudden Infant Death Syndrome (SIDS). 90% of SIDS occurs from 1 to 6 months of age. SIDS is diagnosed when all other possible causes, such as accidents, abuse, and medical conditions, have been ruled out. While no one single reason for SIDS has been identified, a combination of risk factors may contribute to cause infant death. These risk factors include:

- Age: Most SIDS deaths occur between 2 to 4 months of age but can occur after 4 months as well.
- Ethnicity: African Americans are twice as likely to die of SIDS than Caucasian infants. Native Americans are about three times more likely.

- Smoking, alcohol, or drug use during pregnancy or after birth.
- Little or no prenatal care.
- Prematurity and/or low birth weight.
- Overheating from sleepwear or bedding.
- Stomach sleeping.

SIDS is not:

SIDS is not the cause of every sudden infant death.

Other things that SIDS is not:

- SIDS is not the same as suffocation and is not caused by suffocation.
- SIDS is not caused by vaccines, immunizations, or shots.
- SIDS is not contagious.
- SIDS is not the result of neglect or child abuse.
- SIDS is not caused by cribs.
- SIDS is not caused by vomiting or choking.
- SIDS is not completely preventable, but there are ways to reduce the risk.

Evidence does not support the safety or effectiveness of wedges, positioners, or other products that claim to keep infants in a specific position or to reduce the risk of SIDS, suffocation, or reflux. In fact, many of these products are associated with injury and death, especially when used in baby's sleep area.

Check Your Knowledge

1. Safe sleep practices can help lower the risk of SIDS.

- A. True
- B. False

2. Smoking, alcohol, or drug use during pregnancy or after birth is a risk factor of SIDS.

- A. True
- B. False

Check Your Knowledge Answer Key: 1) A; 2) A

Sleep Equipment

“Sleep-related causes of infant death” are those linked to how or where a baby sleeps or slept. These deaths are due to accidental causes, such as suffocation, entrapment, or strangulation. Entrapment is when the baby gets trapped between two objects, such as a mattress and a wall, and can’t breathe. Strangulation is when something presses on or wraps around the baby’s neck, blocking the baby’s airway.

The following recommendations reduce the risk of SIDS and death or injury from suffocation, entrapment, and strangulation.

- Never place baby to sleep on soft surfaces, such as on a couch, sofa, waterbed, pillow, quilt, sheepskin, or blanket.
- Do not use a car seat, stroller, swing, infant carrier, infant sling or similar products as an infant’s place to sleep.

In infants, there is risk for positional asphyxia which can occur when they are placed in a semi-seated position, like when they are in a car seat, swing, or bouncer. Positional asphyxia is a type of suffocation that occurs when the body is put in a position that restricts airflow. Studies show that infants sleeping in this position can have their blood oxygen level drop to such a low level that brain cell damage occurs.



Positional asphyxia can occur due to the prominence of the occiput (back of the head), as well as the overall lack of neck muscle strength, which forces the head to slouch forward pushing the infant’s chin down against his/her chest. This body position causes the windpipe to narrow or close. Imagine a drinking straw and then bend that straw over. This is what could occur to an infant’s windpipe when their head flops over in restrictive infant equipment while sleeping.

Restrictive infant equipment, such as bouncers, car seats, rockers, infant swings may not be used as sleep equipment in regulated childcare. Parents and childcare providers should transfer infants who fall asleep in one of these devices to a crib, except when the infant is being transported in a vehicle. Infants can suffer serious harm from sleeping in equipment not designed for sleeping. Direct supervision is always required for infants using restrictive infant equipment while awake.

These pictures are just a few examples of Restrictive Infant Equipment that are **not** safe for infant sleep. Please contact Child Care Regulation if you have questions regarding a specific piece of equipment.

An infant should sleep in a crib or play yard (also known as a play pen), whether provided by the home or the child’s parent, and have a firm, flat mattress that the manufacturer designed specifically for the crib or play yard model number that snugly fits the sides of the crib or play yard.



Check Your Knowledge

- 1. Entrapment is when the baby gets trapped between two objects, such as a mattress and a wall, and can't breathe.**
 - A. True
 - B. False

- 2. _____ is always required for infants using restrictive infant equipment while awake.**
 - A. Singing a song
 - B. Watching T.V.
 - C. Cooking and cleaning
 - D. Direct Supervision

Check Your Knowledge Answer Key: 1) A; 2) D

Safe Sleep Tips

There are several ways to reduce the risk of SIDS and other sleep-related causes of infant death.

DO'S

Do put infants to sleep alone on their backs in a crib with a tight-fitting bottom sheet.



The back sleep position (supine) is the safest position for all babies. Babies who are used to sleeping on their backs, but who are then placed to sleep on their stomachs, like for a nap, are at **very** high risk for SIDS.

If baby rolls over on his or her own from back to stomach or stomach to back, there is no need to reposition the baby. Starting sleep on the back is most important for reducing the risk of SIDS.

Do dress the infant lightly and control the room temperature.

Dress baby appropriately for the environment, and do not over bundle. Parents and caregivers should watch for signs of overheating, such as sweating or the baby's chest feeling hot to the touch.

Keep the baby's face and head uncovered during sleep.

Do use pacifiers as it may lower the risk of sudden death.

Do not attach the pacifier to anything—like a string, clothing, stuffed toy, or blanket—that carries a risk for suffocation, choking, or strangulation.

Wait until breastfeeding is well established (often by 3 to 4 weeks) before offering a pacifier. Or, if the baby is not being breastfeed, offer the pacifier as soon as you want. Don't force the baby to use it.

If the pacifier falls out of baby's mouth during sleep, there is no need to put the pacifier back in.

Do Tummy Time to Play and Back to Sleep

Tummy time describes the times when you place your baby on his or her stomach while your baby is awake, and someone is watching. Supervised tummy time helps strengthen your baby's neck, shoulder, and arm muscles.



DON'TS

Don't allow infants to sleep in equipment or on furniture not designed for infant sleeping.

Infants should sleep in equipment designed for sleeping such as a crib or play yard.



Don't put an infant to sleep with blankets, pillows, stuffed animals, or bumper pads.

Keeping these items out of baby's sleep area reduces the risk of SIDS and suffocation, entrapment, and strangulation. Because evidence does not support using them to prevent injury, crib bumpers are not recommended. Keeping these and other soft objects out of baby's sleep area is the best way to avoid these dangers.

Don't expose babies to smoke or e-cigarette emissions.

Secondhand smoke is bad for everyone, and that includes babies. Place the crib in an area that is always smoke free.

Don't add extra mattresses or padding to a crib.

Cribs should be used only as directed by manufacturer instructions. Adding additional padding or elevating a mattress can create an entrapment hazard and increase the risk of suffocation.

Don't swaddle an infant.

There is no evidence that swaddling reduces SIDS risk. In fact, swaddling can increase the risk of SIDS and other sleep-related causes of infant death. Certain sleep sacks may be used instead of swaddling.



Appropriate sleep sack for infants

1. Arm and neck openings sized appropriately for a safer fit.
2. Select a material that will not be too warm. Infants overheating is a SIDS risk.
3. Sleeveless to reduce the risk of overheating. (Room temperature should be comfortable for an adult clothed with lightweight material.)
4. Inverted zipper for easy changing.
5. Roomy sack promotes healthy hip development.
6. Sleepwear may never restrict an infant's natural movements.

Never "modify" a sleep sack. All sleepwear must be used in accordance with manufactures instructions.

Check out a short YouTube video of [Where Should Babies Sleep](https://youtu.be/hjNaEl7AZ-w).
(<https://youtu.be/hjNaEl7AZ-w>)



Check Your Knowledge

- 1. All the following are ways to reduce risk of SIDS and other sleep related causes of death except _____.**
 - A.** swaddling an infant
 - B.** using a pacifier
 - C.** dressing the infant lightly and controlling the room temperature.
 - D.** always supervising an infant.
- 2. Crib bumpers are not linked to serious injuries and deaths from suffocation, entrapment, and strangulation.**
 - A.** True
 - B.** False

Check Your Knowledge Answer Key: 1) A; 2) B

Minimum Standards for Safe Sleep

For a listed family home, the permit holder must ensure compliance with minimum standards at all times. The following are the basic care requirements for infants which include following safe sleep practices in your childcare home.

Subchapter E: Basic Care Requirements

§742.501. What are the basic care requirements for an infant?

Basic care for an infant must include:

- (1) Giving individual attention to the infant including, playing, talking, cuddling, and holding;
- (2) Holding and comforting the infant when the infant is upset;
- (3) Giving prompt attention to the physical needs of the infant, such as feeding and diapering;
- (4) Talking to the infant while you are feeding, changing, and holding the infant, such as naming objects, singing, or saying rhymes;
- (5) Storing objects that could cause choking (objects that are less than 1 and 1/4 inches in diameter) out of the infant's reach;
- (6) Providing or having the parent provide an individual crib or play yard (also known as a play pen) for each non-walking infant younger than 12 months of age to sleep in; and
- (7) Providing or having the parent provide an individual cot, bed, or mat that is waterproof or washable for each walking infant to sleep or rest on.

§742.503. What safety requirements must my cribs meet?

- (a) Each crib or play yard (also known as a play pen), whether provided by the home or the child's parent, must have a firm, flat mattress that the manufacturer designed specifically for the crib or play yard model number that snugly fits the sides of the crib or play yard. You may not supplement the mattress with additional foam material or pads.

(b) Each crib or play yard must be bare for an infant younger than 12 months of age, except for a tight-fitting sheet and a mattress cover to protect against wetness. The mattress cover, whether provided by the home or the parent, must:

- (1) Be designed specifically for the size and type of crib and crib mattress that the cover is being used with;
- (2) Be tight fitting and thin; and
- (3) Not be designed to make the sleep surface softer.

§742.505. What types of sleeping equipment am I prohibited from using with infants?

- (a) You may not use a bean bag, waterbed, or a foam pad as sleeping equipment for an infant.
- (b) An infant may not sleep in a restrictive device, unless you have a signed statement from a health-care professional stating that it is medically necessary for the infant to sleep in a restrictive device. If an infant falls asleep in a restrictive device, you must remove the infant from the device and place the infant in a crib as soon as possible.

§742.507. What additional requirements apply when an infant is sleeping or resting?

- (a) You must place an infant who is not yet able to turn over without assistance in a face-up sleeping position, unless you have a signed statement from a health-care professional stating that it is medically necessary for the infant to sleep in a different sleeping position.
- (b) You may not lay a swaddled infant down to sleep or rest on any surface at any time, unless you have a signed statement from a health-care professional stating it is medically necessary for the infant to be swaddled while the infant is sleeping.
- (c) An infant's head, face, or crib must not be covered by items such as blankets, linens, or clothing at any time.

Check Your Knowledge

1. Which is not a basic care requirement for an infant?

- A. Holding an infant when he/she is upset.
- B. Giving individual attention to an infant including playing, talking, holding, cuddling.
- C. Providing or having the parent provide an individual crib or play yard for each non-walking infant under 12 months.
- D. Allowing an infant to sleep in a restrictive device until you finish cleaning up from lunch.

2. You may supplement a crib or play yard's mattress with additional foam materials.

- A. True
- B. False

Check Your Knowledge Answer Key: 1) D; 2) B

Importance of Sharing Knowledge

As a childcare provider, you serve a very important role in not only the lives of young children, but in their parents' lives as well. Parents see you as an expert in child development and will often come to you first with questions about their children. One of the most impactful conversations you can have with the parent of an infant is regarding safe sleep practices. By talking to parents about a few very important, yet simple techniques to incorporate during sleep times, you can help parents keep their young children safe.



Parents, however, may not know all of these measures, and even if they are aware of safe sleep practices, they may not understand the importance of following the guidelines every single day. Here are the top six topics to cover with parents to ensure they are keeping their babies safe during sleep:

- ✓ **Back to sleep:** Babies are always placed on their backs to sleep every time, even when cared for by grandparents and babysitters.
- ✓ **Temperature:** Keep the temperature of the room comfortable, 70 to 72 degrees. Do not let the baby overheat. Never cover a baby's head during sleep, as the head is the main place where heat is released.
- ✓ **Separate sleep surfaces:** The best place for a baby to sleep is on a separate sleep surface in the room where the parents are sleeping.
- ✓ **Non-usual care provider:** Babies who are used to sleeping on their backs and are then placed on their stomachs to sleep have a much greater risk of SIDS. It is crucial that parents talk to all adults who care for their infants about safe sleep practices.
- ✓ **Breastfeeding:** Research indicates that babies who are breastfed have a lower chance of SIDS than non-breastfed babies.
- ✓ **Smoking:** Parents should never allow their baby to be around smoke. Babies who are regularly exposed to smoke have an increased chance of developing allergies, asthma, and SIDS.

Allow parents time to ask questions and discuss any concerns about their baby's sleeping practices. If you do not know the answer or if you feel uncomfortable talking about a particular issue, gently encourage the parent to discuss the matter with their pediatrician or healthcare provider. Remember that you are often a parent's first point of information, so take this responsibility seriously!

Sources:

Chapter 742 Minimum Standards for Listed Family Homes

<https://www.hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/protective-services/ccl/min-standards/chapter-742-listed-family-homes-march-2021.pdf>

Adapted from "Safe Sleep for Babies: A Community Training". Texas Department of State Health Services and Texas Department of Family and Protective Services. Retrieved from www.dfps.state.tx.us/Room_to_Breathe/Safe_Sleep_Training-English.pdf Accessed on February 5, 2015.

Texas A&M Agrilife Extension <https://agriflifeextension.tamu.edu/>

Safe to Sleep: Public Education Campaign led by National Institute of Child Health and Human Development

Retrieved from <https://safetosleep.nichd.nih.gov/> Accessed on April 21, 2021

Retrieved from <https://www.helpandhope.org> Accessed on April 22, 2021

Healthy Child Care Iowa: Infant Sleep Positioning 1. Caring for Our Children National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care. Second Edition (2002). Standard 5.074. 2. American Academy of Pediatrics, Committee on Injury and Poison Prevention and Committee on Fetus and Newborn. Safe Transportation of Premature and Low Birth Weight Infants. *Pediatrics* 1996; 97:758-760 3 Ojadi VC, Petrova A, Mehta R, Hegyi T. Risk of Cardio-respiratory Abnormalities in preterm Infants placed in car seats: a cross-sectional study. *BMC Pediatrics* 2005;5:28 4 Merchant JR, Worwa C, Porter S, Coleman JM, deRegnier RA. Respiratory instability of term and near-term healthy newborn infants in car safety seats. *Pediatrics* 2001;108:647-652 5 Bass JL, Bull M. Oxygen Desaturation in Term Infants in Car Safety Seats. *Pediatrics* 2002;110:401-402 6 Kinane et al. (2005). Comparison of Respiratory Physiologic Features When Infants are Placed in Car Safety Seats or Car Beds. *Pediatrics* 2005;118:522-527. 7. Cote A, Bairam A, Deschenes M, Hatzakis G. Sudden Infant Deaths in Sitting Devices. *Arch. Dis Child.* 2007;10:1136 8. Tonkin SL, Vogel SA, Bennet L, Gunn AJ. Apparently life threatening events in infant car safety seats. *BMJ* 2006;333:1205-1206. 9. Consumer Product Safety Alert: Infants Can Die When Their Heads Become Trapped in Strollers. CPSC Document 5096. 10. Consumer Product Safety Alert: Baby Products Safety Alert. CPSC Document 250 11. Consumer Product Safety Alert: Safety Tips for Infant Carrier Seats. CPSC Document 5048 12. Aronson SA. Car Seats and Swings Are Not Safe for Sleeping.

Safe Sleep Self-Instructional Training

Post Test

Name: _____

- 1. Safe sleep is putting an infant to sleep in ways that can help to protect him/her from dangers like, _____, _____, and _____.**
 - A. Colic, skin problems, and acid reflux.
 - B. Choking, suffocation, and SIDS.
 - C. Colds, diaper rash, and vomiting.
 - D. Congestion, bacterial infections, and viruses.

- 2. ____ percent of SIDS occurs from ages 1 to 6 months.**
 - A. 90
 - B. 35
 - C. 82
 - D. 28

- 3. All of the following risk factors may contribute to infant death except _____.**
 - A. Stomach sleeping.
 - B. Overheating from sleepwear and bedding.
 - C. Prematurity and/or low birth rate.
 - D. Using a separate, firm sleep surface in the room with a parent.

4. Sleep related infant death can be due to accidental causes such as suffocation, entrapment, and/or strangulation.

A. True

B. False

5. _____ is when the baby gets trapped between two objects, such as a mattress and a wall, and can't breathe.

A. Entanglement

B. Entrapment

C. Strangulation

D. Positional asphyxia

6. Placing a baby on a soft surface to sleep such as a quilted blanket, couch, sofa, waterbed, or pillow is not dangerous.

A. True

B. False

7. In regulated childcare, restrictive equipment, such as car seats, bouncers, rockers and infant swings may not be used as sleep equipment.

A. True

B. False

8. _____ is a type of suffocation that occurs when the body is placed in a position that restricts airflow.

A. Choking

B. Strangulation

C. Positional Asphyxia

D. Smothering

9. Infants should not be placed to sleep with blankets, pillows, stuffed animals or bumper pads.

- A. True
- B. False

10. An infant who is not able to turn over without assistance while sleeping must be placed _____ sleeping position.

- A. in a face up
- B. on a stomach
- C. in an elevated
- D. on a side

11. If an infant falls asleep while in restrictive equipment, transfer the infant to a crib or play yard _____.

- A. once he/she is sound asleep and won't wake up if moved
- B. as soon as possible.
- C. 1 hour after the infant has been sleeping.
- D. never. The parent has asked you to let the infant sleep in the equipment.

12. Positional Asphyxia can occur in infants when they are placed _____.

- A. in a crib on their back.
- B. on a soft surface.
- C. in a semi-seated position.
- D. in the bathtub.

13. One of the most impactful conversations you can have with the parent of an infant is regarding _____.

- A. what day of the week you will get paid.
- B. the type of services you provide.
- C. safe sleep practices.
- D. gossip about other families.