



Safe Sleep Quality Improvement Workshop Panel

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QTIP January 21, 2024

United States Ranking

- Infant mortality is used as a marker for the nations health.
- The infant mortality rate in the United States is higher than in other high-income countries (1), and there are major disparities by race/ethnicity.
- The US ranks 55 out of 224 nations with 5.8 deaths per 1000 live births (2).

Infant Mortality Rate

- Infant mortality rate (IMR) is the number of babies who die within the first year of life per 1,000 live births.
- According to the National Center for Health Statistics, there was a 3% increase in the infant mortality rate (IMR) in the United States (5.44 infant deaths per 1,000 live births in 2021 and 5.60 infant deaths per 1,000 live births in 2022).

SC Infant Mortality Rate

- Among non-Hispanic White women, 5.2 infant deaths were experienced per 1,000 live births in 2021.
- During the same year, non-Hispanic Black women experience 12.7 infant deaths per 1,000 live births, continuing the huge racial disparity.
- When SC DHEC released data in April 2023 that showed an increase in South Carolina's infant mortality rate (6.5 infant deaths per 1,000 live births in 2020 to 7.3 infant deaths per 1,000 live births in 2021), SC QTIP decided the focus of the Fall workshop would be infant safe sleep.

Babies sleep – so, what's the fuss?

SMART AIM: Appropriate safe sleep screening and guidance for 75% of families with infant under 6 months of age by end of the QI project.

CONTENT EXPERTS:

Barbara M. Ostfeld, PhD Jessica H. Sharp, MAT, IME-E



QTIP SAFE SLEEP WORKSHOP KEY DRIVERS

Primary Drivers

Practice/ Provider buy in.

Parental/Family knowledge and education.

Secondary Drivers

Staff education

Safe sleep screening

Promote breast feeding

EMR Documentation of safe sleep screening /counseling

Safe sleep counseling

Safe sleep resources given

Counseling parents about impaired sleeping

Safe sleep book given

Help parents find safe sleep designated childcare

Promoting safe sleep in the community

Change Ideas

Staff education through lunch and learns

Education materials displayed around the practice

Safe sleep crib demos in the waiting rooms

Safe sleep book given at newborn well visits

Create and update safe sleep designated infant care provider list

Safe sleep screening done at well visits until 6 months of age

Create a breastfeeding friendly practice

Safe sleep education provided by clinical staff at appropriate visits

Crib cards or other education materials given to parents

Community safe sleep promotional events

Incorporate safe sleep screening/ anticipatory guidance into EHR

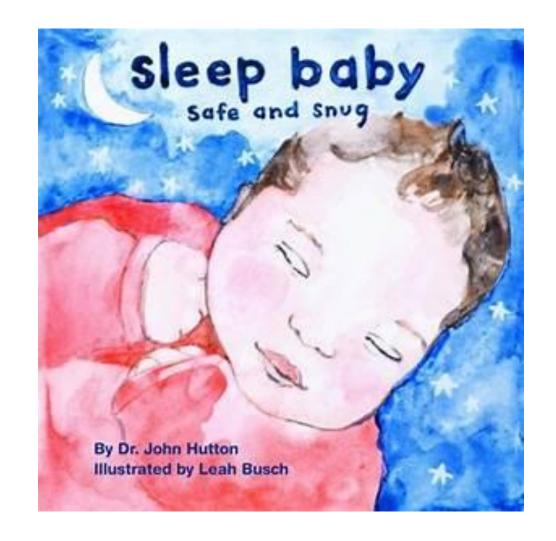
Document discussion about caregivers avoiding Alcohol/tobacco/marijuana

SMART Aim:

Appropriate safe sleep screening and guidance provided for 75% of families with infant under 6 months of age by end of the QI project.



provided practices with safe sleep books that were distributed to infants ages 0 – 12 months.



QTIP Safe Sleep Workshop Survey

Please indicate how often your practice **CURRENTLY** engages in the activities below by selecting always, sometimes, or never. (Always, Sometimes, Never)

- Practice staff is trained on the latest AAP (2022) safe sleep guidelines
- Our practice provides safe sleep screening / counseling at well visits until
 6 months of age
- Our practice documents safe sleep screening / counseling in patient charts
- Our practice distributes safe sleep educational materials to parents
- Our practice promotes breastfeeding
- Our practice has conversations with parents about choosing a childcare provider that follows safe sleep guidelines

QTIP Safe Sleep Workshop Survey

Which specific safe sleep and SIDS / SUIDS interventions or change ideas is your practice **currently** implementing? (Check all that apply.)

- Create and provide a breastfeeding friendly practice
- O Create and update safe sleep designated infant care provider list
- Clinical staff provide safe sleep education at appropriate visits
- Crib cards or other education materials are given to parents
- Document discussion about caregivers avoiding Alcohol/tobacco/marijuana
- Display educational material for families around the practice
- Educate parents on updated AAP (2022) safe sleep guidelines
- Incorporate safe sleep screening / anticipatory guidance into HER
- o Inform parents of support that is available if they have lost a baby to SIDS
- Offer a safe sleep book at newborn well visits
- Offer community safe sleep promotional events
- Provide consistent safe sleep screening / counseling until 6 months of age
- Provide safe sleep crib demos in the waiting room
- Provide staff education through lunch and learns

QTIP Excel QI Tool

Date of visit:

Please identify the age of the patient:

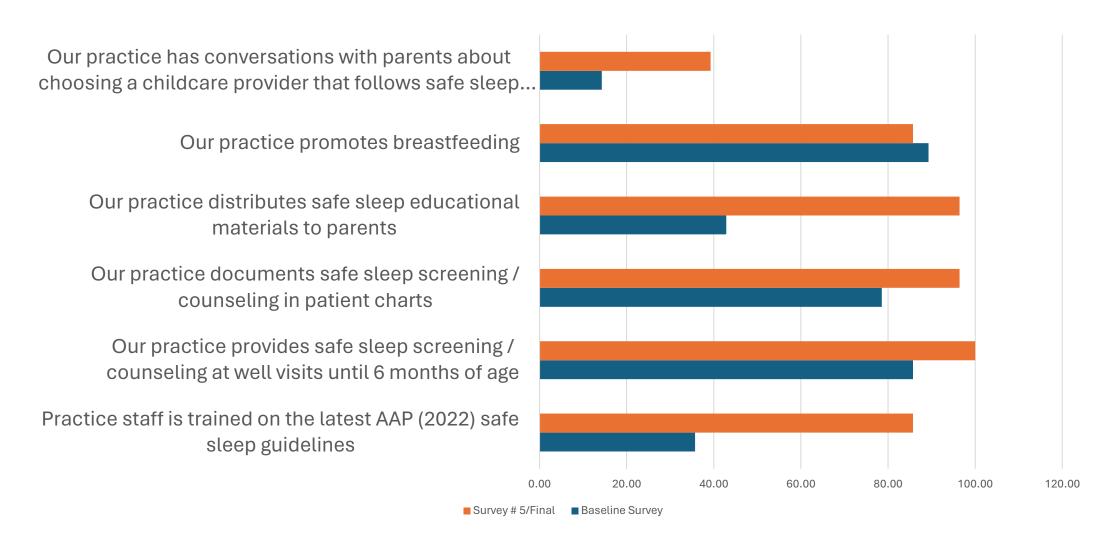
Birth to 3 months (=1), 4 months to 6 months (=2), 7 months to 9 months (=3), 10 months to 12 months (=4)

- 1 Was the infant preterm? yes (<37 weeks gestation) no (> 37 weeks gestation)
- 2 Is the patient up to date on well child visits?
- 3 Is the patient up to date on routine childhood immunizations?
- 4 ls/was the baby breastfed?
- 5 Does anyone in the home smoke?
- 6 Has this patient's provider/nurse participated in safe sleep education?
- Is there documentation the patient's family has been provided consistent safe sleep screening/counseling? (This includes: sleep onset; after nighttime waking; sleep position (supine); use of a separate sleep space; and use of an approved sleep surface (bassinet, crib, cradle, or playard)).
- 8 Is there documentation the family was provided a Safe Sleep Book?
- 9 Is there documentation the family was provided other Safe Sleep educational materials?
- 10 Is there documentation of discussion of safe sleep practices (SSP) at childcare at the home of friends and relatives?

Safe Sleep Survey Results



Comparison of Baseline to Survey 5

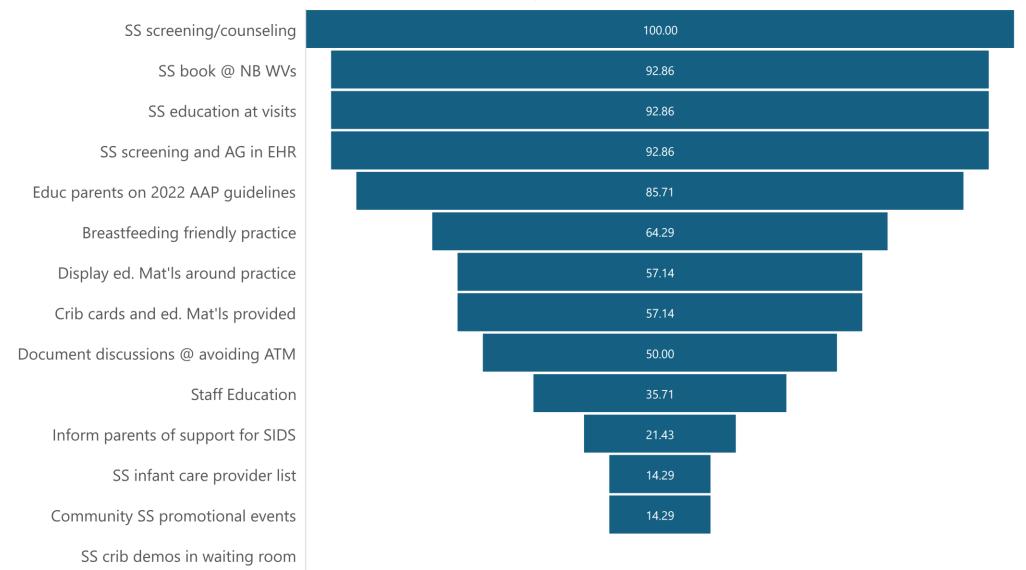


Baseline

SS screening and AG in EHR			71.43			
Educ parents on 2022 AAP guidelines			57.14			
SS book @ NB WVs	57.14					
SS screening/counseling	50.00					
Breastfeeding friendly practice	50.00					
SS education at visits			50.00			
Display ed. Mat'ls around practice			28.57			
Crib cards and ed. Mat'ls provided			28.57			
Staff Education			21.43			
Document discussions @ avoiding ATM			21.43			
SS crib demos in waiting room						
SS infant care provider list						
Community SS promotional events						

Inform parents of support for SIDS

Survey 5



Specific Code

- Z72.823 is a specific ICD-10-CM code that can be used to track patients and follow up with those who are high risk.
- Short description: Risk of suffocation (smothering) under another while sleeping



ABP MOC PART 4

To be Eligible for Part 4 credits:

Review the driver diagram and pick a measure

change idea that you want to work on

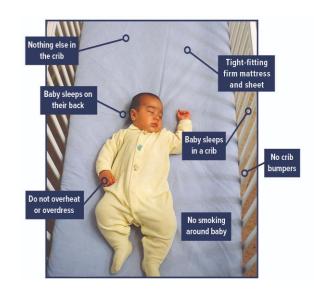
Write your Aim statement

define the denominator, numerator, percentage improvement and time frame

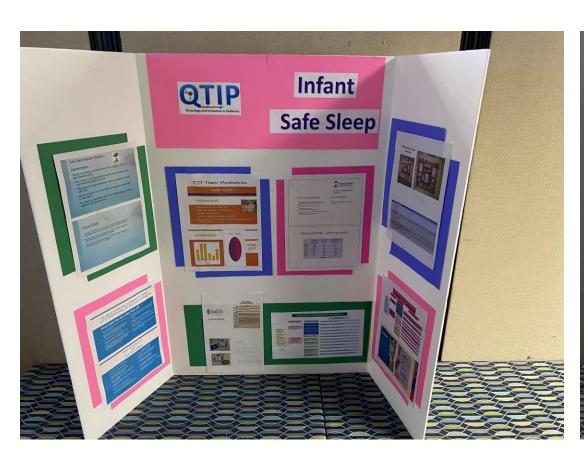
Collect 3(including the baseline) or more data sets and 2 QI Cycles

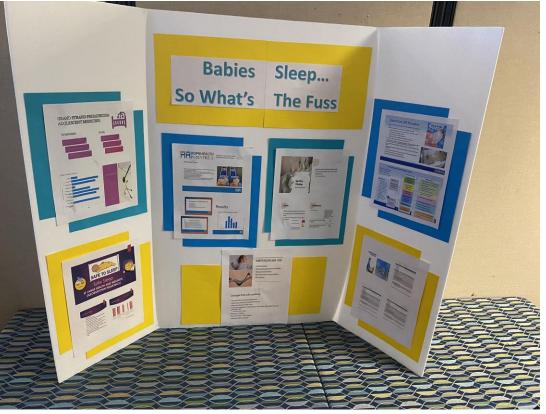
- Do 2 PDSA or QI Techniques during the 11-week period (Sept 19/26- Nov 28/30)
- Complete practice readiness survey at every touch point
- QTIP practices can use excel sheet
- Can use existing projects

Complete the ABP attestation form for Safe Sleep topic and send it to-ramkumarjayagopalan@gmail.com



Safe Sleep Story Board





Clear the Crib Challenge Prize



QTIP Safe Sleep Workshop Award





Children's Hospital Outpatient Center

QTIP Safe Sleep Workshop Award

References

- 1. Chen, A., Oster, E., & Williams, H. (2016). Why is Infant Mortality Higher in the United States than in Europe? American Economic Journal. Economic Policy, 8(2), 89-124. DOI: 10.1257/pol.20140224
- 2. National Association of Neonatal Nurses, Guideline for Safe Sleep Executive Summary: Advances in Neonatal Care. April 2020, Volume 20, Issue 2
- 3. Healthy People, 2030. Washington, DC: U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved from https://health.gov.healthypeople
- 4. SC DHEC, Vital Statistics. January 2022. Infant Mortality and Selected Birth Characteristics, 2020 South Carolina Residence Data

Thank You!





Safe Sleep Workshop 2023

Test of Change Form or Plan Do Study Act (PDSA) Form

	Title of Your Test					
Objective (What is your change trying to accomplish?)	To provide a handout on safe sleep practices and recommendations to parents of infants at well visits through 12 months of age.					
Prediction (What do you think will happen?)	Staff will provide a handout on safe sleep practices and recommendations to parents at every well visit for infants through 12 months of age.					
Population (Pick a small population to do your first test on)	Patients seeing Dr. Brock and Dr. McFarland for a well visit between the ages of newborn through 12 months of age.					
TEST CYCLE 1	Start Date:	10/06/2023		End Date:	10/13/2023	
Plan (Be specific as possible. What do you plan on doing to make this change?)	Add a education packets alread	onal handout on safe sle ly given at each well visi	eep practic it for infant	es and recomm s ages newborr	endations to the n through 12 mo	e patient education inths of age.
(In detail, break down who is going to do what.)	Nichole will add ahandout on safe sleep practices and recommendations to the patient education packets already given at each well visit for infants ages newborn through 12 months of age. Clinical staff will provide the handout in the patient education packets at each visit and document in EHR.					
(At the end date of the test, study what happened and why)	Chart reviews were done of all well visit for infants ages newborn thorugh 12 months performed between 10/6/23-10/13/23. There was 100% sucess rate for distribution of safe sleep handouts given with patient education packets for patients newborn through 12 months of age at well visits. The addition of a handout to the pre-existing packet was sucessful.					
(Decide if this is a good change. If so, do a larger test or implement. If not, adjust the test or move on to another method of getting to your goal.)	This was a goo	od change and has been	n impleme	nted through 15	months of age.	

SAFE SLEEP **FOR YOUR BABY**

Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Infant Deaths



Place babies on their backs to sleep for naps and at night.



Stav smoke- and vapefree during pregnancy, and keep baby's surroundings smokeand vape-free.



Feeding babies human milk by direct breastfeeding, if possible, or by pumping from the breast, reduces the risk of SIDS. Feeding only human milk, with no formula or other things added, for the first 6 months provides the greatest protection from SIDS.

Use a sleep surface for baby that is firm (returns to original shape quickly if pressed on), flat (like a table, not a hammock), level (not at an angle or incline), and covered only with a fitted sheet.



Stay drug- and alcoholfree during pregnancy, and make sure anyone caring for baby is drugand alcohol-free.



Avoid products and devices that go against safe sleep guidance, especially those that claim to "prevent" SIDS and sleep-related



human milk, like by breastfeeding.



Avoid letting baby get too hot, and keep baby's head and face uncovered during



motion, and other monitors to reduce the risk of SIDS.



Share a room with baby for at least the first 6 months. Give babies their own sleep space (crib, bassinet, or portable play yard) in your room, separate from your bed.



Get regular medical care throughout pregnancy.



Avoid swaddling once baby starts to roll over (usually around 3 months of age), and keep in mind that swaddling does not reduce SIDS risk.



Keep things out of baby's sleep area-no objects, toys, or other items.



Follow health care provider advice on vaccines, checkups, and other health issues for baby.



Give babies plenty of "tummy time" when they are awake, and when someone is watching them.



Offer baby a pacifier for naps and at night once they are breastfeeding well.



For more information about the Safe to Sleep® campaign, contact us:

Phone: 1-800-505-CRIB (2742) | Fax: 1-866-760-5947

Email: SafetoSleep@mail.nih.gov Website: https://safetosleep.nichd.nih.gov Tolocommunications Dalay Carriers 7 4 4



WHAT DOES A SAFE SLEEP **ENVIRONMENT LOOK LIKE?**

The following image shows a safe sleep environment for baby.











their backs to





Room share: Give babies their own sleep space in your room, separate from your bed.

Use a firm, flat. and level sleep surface, covered only by a fitted

Remove everything from baby's sleep area, except a fitted sheet to cover the mattress. No objects, toys,

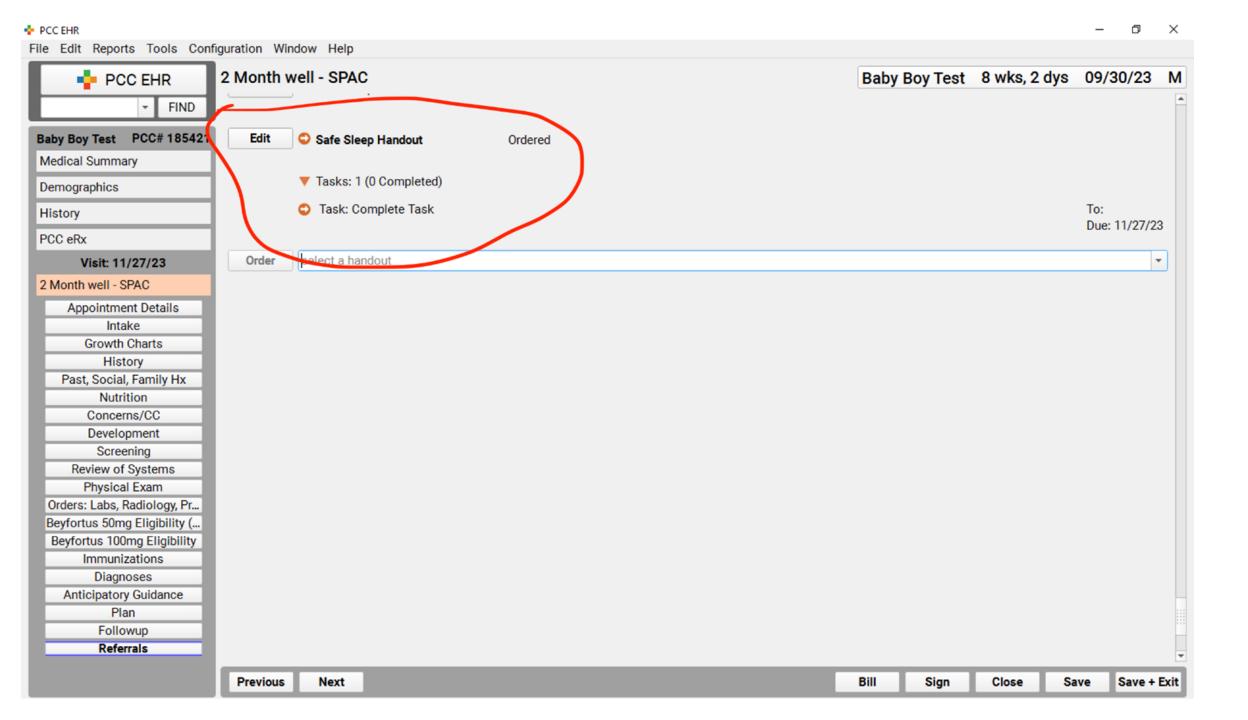
Use a wearable blanket to keep baby warm without blankets and at night. in the sleep area.

Make sure baby's head and face

Place babies on Couches and armchairs are not sleep, for naps safe for baby to sleep on alone, with people, or with pets.

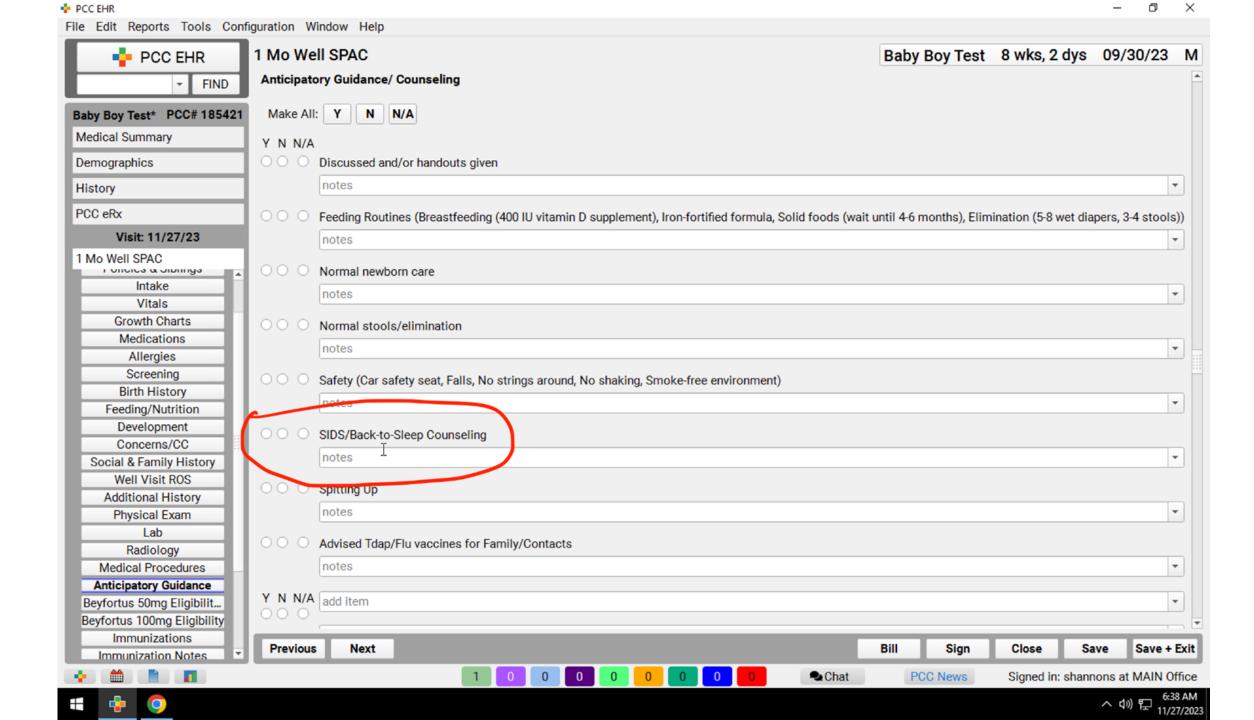
surroundings smoke/vape





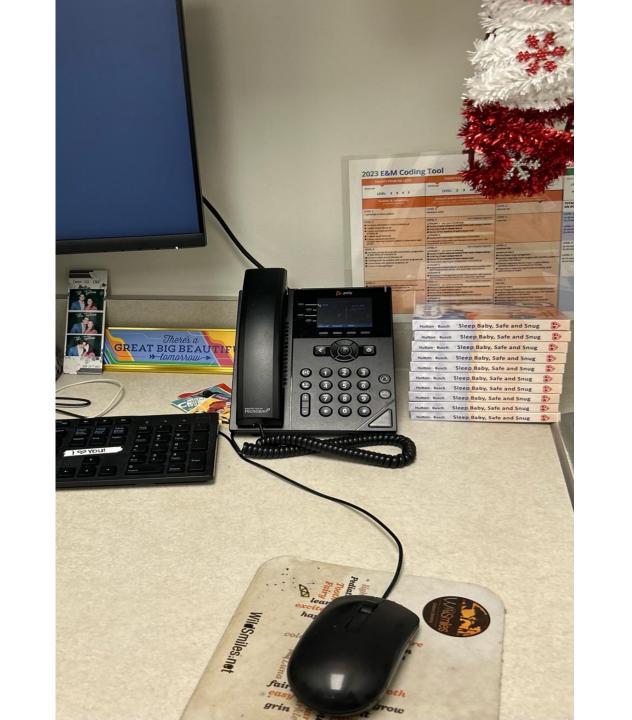
<u>Test of Change Form or</u> <u>Plan Do Study Act (PDSA) Form</u>

Title of Your Test					
Objective (What is your change trying to accomplish?)	To document anticipatory guidance regarding safe sleep practices and recommendations to parents of infants at well visits through 12 months of age.				
Prediction (What do you think will happen?)	Providers will document that safe sleep education and anticipatory was provided during the well visit on visit form for patients through 12 months of age.				
Population (Pick a small population to do your first test on)	Patients seeing Dr. Brock and Dr. McFarland for a well visit between the ages of 2 weeks - 4 months of age.				
TEST CYCLE 1	Start Date:	09/19/2023	End Date:	09/26/2023	
Plan (Be specific as possible. What do you plan on doing to make this change?)	Provide a click box on the well visit template in the EHR to enable quick and easy documentation of anticipatory guidance and education for safe sleep.				
(In detail, break down who is going to do what.)	Caroline will add a safe sleep check box to the anticipatory guidance section of the well visit templates for 2 weeks - 4 months month well visits. Dr. Brock and Dr. McFarland will click the box on the well visit template once they have provided anticipatory guidance and education regarding safe sleep on patient's 2 weeks - 4 months during their well visit.				
(At the end date of the test, study what happened and why)	Chart reviews were done of all well visit for infants ages 2 weeks - 4 months performed between 9/19/23-9/26/23. There was 100% sucess rate for documentation of safe sleep education and anticipatory guidance for these well visits. The addition of a click box to document made it easy for providers to document quickly and efficiently the education and guidance they were already providing.				
(Decide if this is a good change. If so, do a larger test or implement. If not, adjust the test or move on to another method of getting to your goal.)	practice.	ld be to add the click box for d		e available to all providers in the	

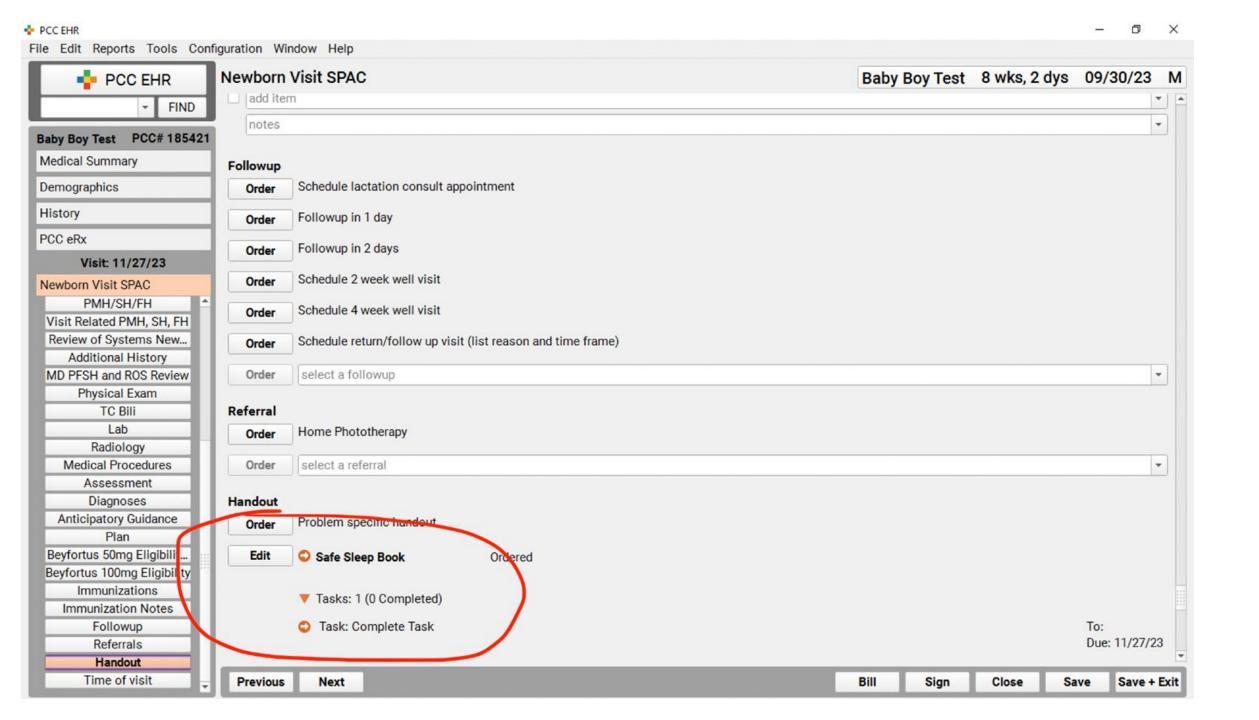


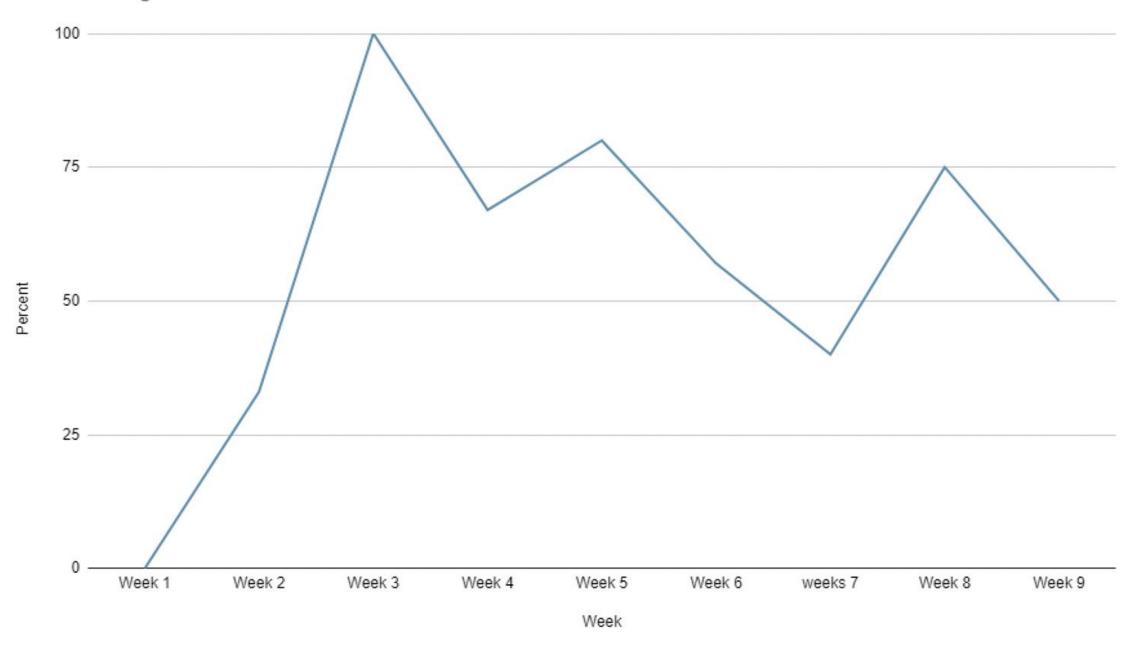
<u>Test of Change Form or</u> <u>Plan Do Study Act (PDSA) Form</u>

	Title of Your Test					
Objective (What is your change trying to accomplish?)	To provide a safe sleep book to parents at all newborn visits.					
Prediction (What do you think will happen?)	Staff will provide a safe sleep book to all infants seen at their newborn visit.					
Population (Pick a small population to do your first test on)	Patients seeing Dr. Brock and Dr. McFarland for a newborn visit.					
TEST CYCLE 1	Start Date:	09/25/2023	End Date:	10/02/2023		
Plan (Be specific as possible. What do you plan on doing to make this change?)	Books will be provided by DHEC short term. Books will be stored at each nurses station to distribute to patients being seen by Dr. Brock and Dr. McFarland for a newborn visit.					
(In detail, break down who is going to do what.)	Nurse or MA will provide the safe sleep book to parents at the beginning of their well visit when providing other educational handouts. Books will be stored at each nurses station to distribute. Distribution will be documented in a nurse task on the visit.					
Study (At the end date of the test, study what happened and why)	Nurses were not successful at giving out the book. Staff cited having too many other task to do in order to get the patient ready for the provider to see and were not consistent with distrubution. Only 10% of newborns got the book the first week. Difficulty to tell if more were actually distributed and perhaps not documented.					
Act (Decide if this is a good change. If so, do a larger test or implement. If not, adjust the test or move on to another method of getting to your goal.)	This change w time anticipato	vas not successful. We will adju ory guidance is provided. We w	ist distribution to hill also add a click	have it be done by the provider at the box to document book distribution.		

















Help Your Baby Sleep Safe

Remember the ABCs of sleep: Babies sleep safest Alone, on their Backs, in a firm safety-approved Crib, and without blankets, pillows, bumper pads, or toys.



Tips for Creating a Safer Sleep Plan

It is remainf for habous to wake often at right, but it can be challenging. Home a plan to make sleep rafer when carring for your buly.



 Share your room with haby, not your hed. Keep baby in your room close to your bed, but on a separate sleep surface designed for infants.



2. Seep laby after during night time care and feeding of you bring below into your bed feeding, remove all and items and bedding from the area. Fut body back in their own sizes paper when feeding, remove 2. 2. Comider setting a timer on your phone to wake you in care you fall arises, if you fall arise you high feeding or caring for your baby in your bed, place him or her back in the experts sleep are as soon as you wate back in the experts sleep are as soon as you wate.



 Couches and armchairs can be very dangerous for bally. Be modiful of how tired you are, and avoid couches and armchairs for feeding or caring for baby if you think you might ful asleep.



you come you may be an assess, Ask semement to steep with you while you're feeding or caring for buby to keep you awake in to place the buby into a safe sheep area if you fall asleep. Or consider saling turns. This means that one caregives carry for the buby, while the other gets time to sleep.







Safe Sleep Can be Hard. Your Baby is Worth It.



Help Your Baby Sleep Safe

Remember the ABCs of sleep: Babies sleep safest Alone, on their Backs, in a firm safety-approved Crib, and without blankets, pillows, bumper pads, or toys.



Tips for Creating a Safer Sleep Plan

. It is normal for babies to wake often at night, but it can be challenging. Have a plan to make sleep safer when caring for your baby.



- Share your room with baby, not your bed. Keep baby in your room close to your bed, but on a separate sleep
- surface designed for infants. It Keep baby safer during night-time care and feeding. If

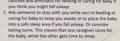


2. Keep baing salar during night-time care and feeding, if the keep bring balay safer during night-time care and remove all soft items and bedding from the area. Put bably back in the rown sleep space when finished, to wake you in case you fall saleep, if you fall askeep while feeding or caring for your ball saleep. If you fall askeep while feeding or caring for your ball saleep, if you fall saleep while feeding or caring for your ball saleep. If you should saleep while feeding or caring for your ball saleep. If you should saleep should saleep the you wake ball saleep. If you should saleep should saleep should saleep should saleep should saleep. If you should saleep should sal





baby. Be mindful of how tired you are, and avoid couches and armchairs for feeding or caring for baby if









Safe Sleep Can be Hard. Your Baby is Worth It.





Safe Sleep Beaufort Pediatrics



Prior to the Sleep Study Workshop:

We were already at 100% with discussing and documentation of safe sleep practices with our newborn families.

Safe sleep discussion is built into our templates for our first newborn visits.

New parents are provided a "Newborn Bag" which is a small bag of information and samples at the first visit.

Improvements:

During the workshop we implemented a few changes to what we were previously doing.

- We created a Safe Sleep Bulletin Board in our well baby waiting room with information for parents.
- We posted Safe Sleep information in each exam room in the well baby clinic.
- We had staff watch the video- SIDS Can Happen to Anyone with Dr. Sam Hanke
- We added the Sleep Baby books to our newborn bags as well as additional safe sleep handouts.



Cycle Data:

	Cycle 1	Cycle 2	Cycle 3
Number of Newborns	11	16	15
Documentation that Safe Sleep Book was given	5	10	5 *(We ran out of English Books during this cycle)
Percentage	45%	63%	33%
Documentation that Safe Sleep was discussed	100%	100%	100%

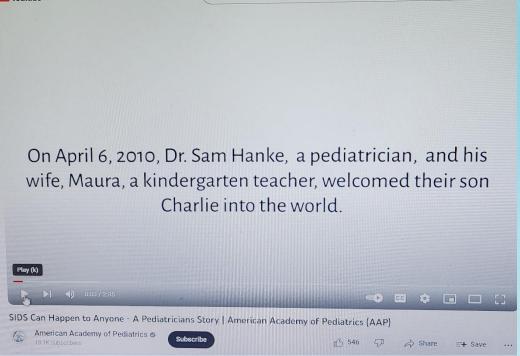
Future Goals:

Moving forward we plan to continue our Safe Sleep program and continue supplying parents with the information needed for our babies to thrive.

We will continue with our Newborn bag program and supply handouts on Safe Sleep, Breastfeeding and Car Seat Safety.

We plan to focus on documentation of the Newborn Bags being given so that we have data to show our efforts.





Search

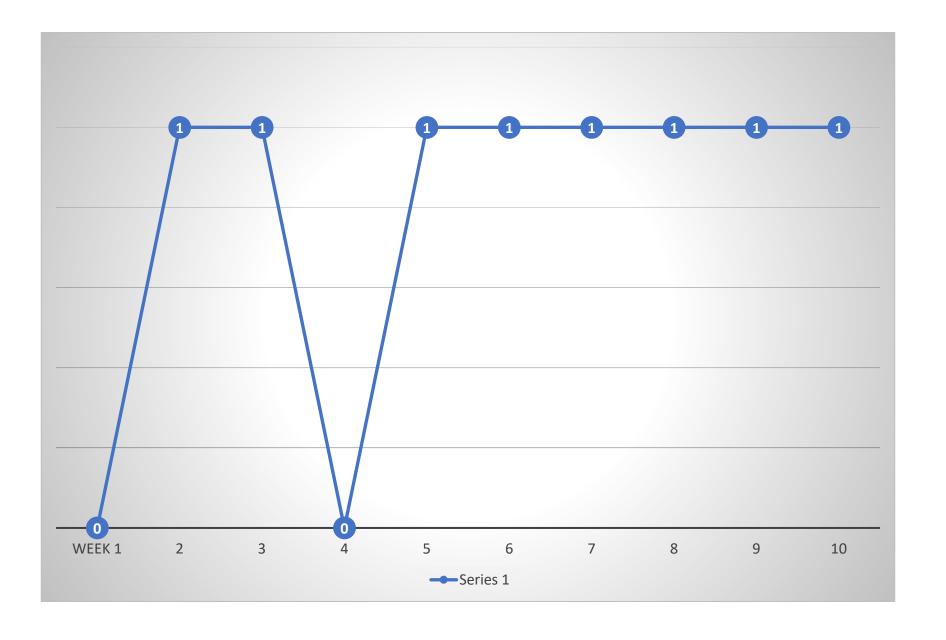
MUSC Moncks Corner

Safe Sleep





	QTIP Safe Sleep Chart Review Tool	Chart 1	Chart 2	Chart 3	Chart 4	Chart 5	Chart 6	Chart 7	Chart 8	Chart 9	Chart 10
	Date of Visit	9/7/2023	9/11/2023	9/12/2023	9/18/2023	10/3/2023	3 10/05/22	10/16/2023	10/23/2023	10/23/2023	########
	Please identify the age of the patient:										
	Birth to 3 months (= 1)										
	4 months to 6 months (= 2)		1	1	4	1	2	1	4	1	2
	7 months to 9 months (= 3)										
	10 months to 12 months (= 4)										
1	Was the infant preterm?	no	no	no	no	no	no	no	no	no	yes
	Yes (< 37 weeks gestation)										
	No (> 37 weeks gestation)										
2	Is the patient up to date on well child visits?	yes	yes	yes	yes	yes	yes	yes	yes	yes	yes
3	Is the patient up to date on routine childhood immunizations?	yes	no	yes	no	yes	yes	yes	no	no	yes
4	Is/was the baby breastfed?	yes	yes	no	no	yes	yes	yes	no	yes	no
5	Is your home a smokefree environment?	yes	yes	yes	yes	yes	yes	yes	yes	yes	no
6	Has this natient's provider/nurse participated in safe sleep education?	Ves	Ves	Ves	Ves	Ves	Ves	Ves	Ves	Ves	Ves
	Is there documentation the patient's family has been provided consistent safe sleep screening/counseling? (This										
	includes: sleep onset; after nighttime waking; sleep position (supine); use of a separate sleep space; and use of an	no	yes	yes	no	yes	yes	yes	yes	yes	yes
	approved sleep surface (bassinet, crib, cradle, or playard)).										
8	Is there documentation the family was provided a Safe Sleep Book?	no	yes	no	no	yes	no	yes	no	yes	yes
	Is there documentation the family was provided other Safe Sleep educational materials?	no	yes	no	no	no	no	yes	no	yes	yes
10	Is there documentation of discussion of safe sleep practices (SSP) at childcare at at the home of friends and relatives?										
	1 = yes 0 = no	0	1	1	0	1	1	1	1	1	1



HOPEHEALTH PEDIATRICS

Michael K. Foxworth II, MD, FAAP Fall QTIP Workshop-Safe Sleep



QTIP SAFE SLEEP WORKSHOP KEY DRIVERS

Change Ideas

Primary Drivers

Secondary Drivers

Staff education through lunch and learn

Practice/ Provider buy in.

Staff education

Education materials displayed around the practice

Safe sleep screening

Safe sleep book given at newborn well visits

Promote breast feeding

EMR Documentation of safe sleep screening /counseling

Safe sleep screening done at well visits until 6 months of age

Parental/Family knowledge and education.

Safe sleep counseling

Create a breastfeeding friendly practice

Safe sleep resources given

Crib cards or other education materials given to parents

Counseling parents about impaired sleeping

Incorporate safe sleep screening/ anticipatory guidance into EHR

Safe sleep education provided by clinical staff at appropriate visits

Safe sleep book given

Document discussion about caregivers avoiding Alcohol/tobacco/marijuana



SMART Aim:

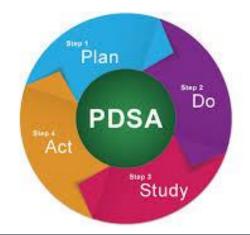
By the end of the Safe Sleep QI Workshop, 75% of families with infants under 6 months of age will receive appropriate safe sleep screening and guidance

- Does your baby sleep by themselves, in their own sleep space with no other people? (Yes/No)
- Do you place your baby on their back to sleep? (Yes/No)
- Do you use a crib, bassinet, or portable play yard with a firm, flat mattress and a fitted sheet? (Yes/No)
- Safe Sleep Education Provided (Yes/No)
- Breastfeeding Encouraged (Yes/No)
- Advised for caregivers to avoid Alcohol/Tobacco/Drugs (Yes/No)
- Safe Sleep Book Given Once in 1st 6 months of Life (Yes/No)



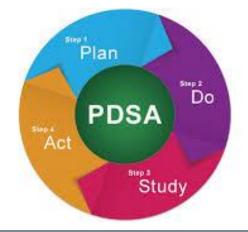


- Plan: Discussed plan with HH Providers. MA/Nurse to provide safe sleep education materials and complete first 4 screening questions of safe sleep screening. Provider to complete screening, provide anticipatory guidance, and provide safe sleep book.
- Do: Carry out plan, starting October 2
- Study: 7 missed opportunities, none documented
- Act: Foxworth back from vacation next week, let's try again!



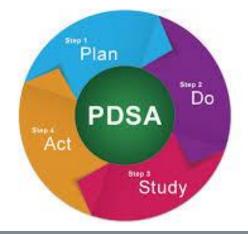


- Plan: MA/Nurse to provide safe sleep education materials and complete first 4 screening questions of safe sleep screening. Provider to complete screening, provide anticipatory guidance, and provide safe sleep book. No changes.
- Do: Carry out plan, starting October 9
- Study: 11 missed opportunities, none documented
- Act: Reminders given that this time, we're REALLY starting!



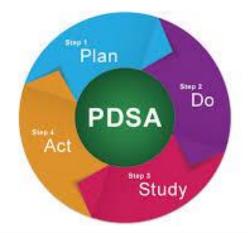


- Plan: MA/Nurse to provide safe sleep education materials and complete first 4 screening questions of safe sleep screening. Provider to complete screening, provide anticipatory guidance, and provide safe sleep book. No changes.
- Do: Carry out plan, starting October 16
- Study: 10/20 (50%), Realized that MA/Nurses weren't consistently asking first 4 screening questions.
- Act: Reminders for completion of screening questions.



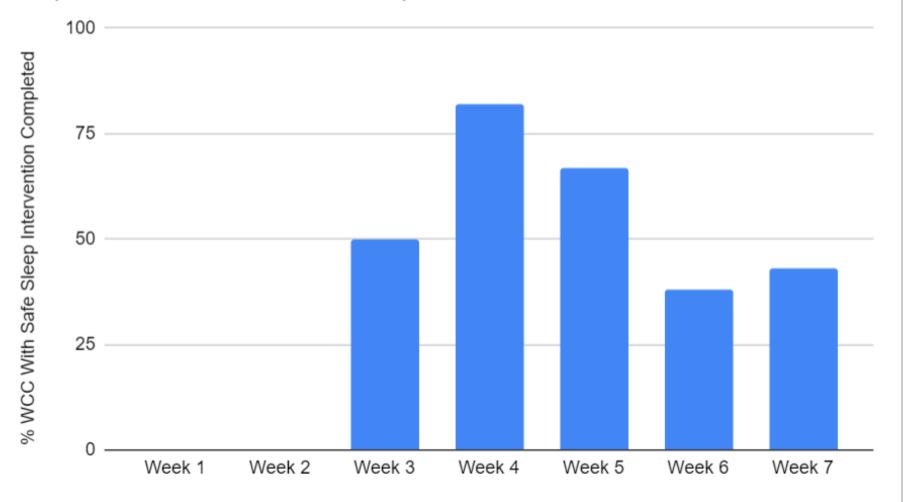


- Plan: MA/Nurse to provide safe sleep education materials and complete first 4 screening questions of safe sleep screening. Provider to complete screening, provide anticipatory guidance, and provide safe sleep book. No changes.
- Do: Carry out plan, starting October 23
- Study: 9/11 (82%)
- Act: Yay!!! Let's keep going!





Implementation of Safe Sleep Intervention at 0-6 Month WCC





Comparison to AIM Statement

- Somewhat close...kind of
- Top Performing: 77%
- Middle Performing: 74%
- Lowest Performing: 8%
- Who had the highest percentage of 6 months and younger WCC?



Lessons Learned

- During check-ins, reminders to utilize QR codes for safe sleep videos
- Difficulty with ordered supplies, need for improvisation
- Scheduling a lunch and learn with all staff is easier said than done
- Individuals can really impact your data, "we're all in this together", communication is key
- We've talked A LOT more in depth about safe sleep with our patients
- We've got room for more improvement, so more QI opportunities!





South Carolina Department of Health and Environmental Control

Clear the Crib Challenge

& DHEC Safe Sleep Video



South Carolina Department of Health and Environmental Control

Safe Sleep Resources

Elizabeth Biddle and Janet Duff
SCDHEC Bureau of Maternal and Child Health



dhec South Carolina Department of Health and Environmental Control

Safe Sleep, Every Sleep

Over the last year, many safe sleep related materials have been developed and/or updated.

October is Safe Sleep Awareness Month, but the message is important yearround.







Safe Sleep video



- <u>Safe Sleep, Every Sleep for Infants | SCDHEC</u>
 - https://youtu.be/DBoN- hwwDIA



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Safe Sleep Flyer

Flyer is available in English and Spanish.





scdhec.gov/safe-sleep-every-sleep-infants

fb.com/scdhec

twitter.com/scdhec

h linkedin.com/company/scdhec/



Safe Sleep Brochure

English and Spanish versions are available.

- <u>Safe Sleep, Every Sleep</u> (scdhec.gov)
- Safe Sleep, Every Sleep (Spanish) (scdhec.gov)
- Both can be ordered at no cost through DHEC's website.

<u>How to request SS brochures from DHEC</u> <u>Library.pdf (scdhec.gov)</u>



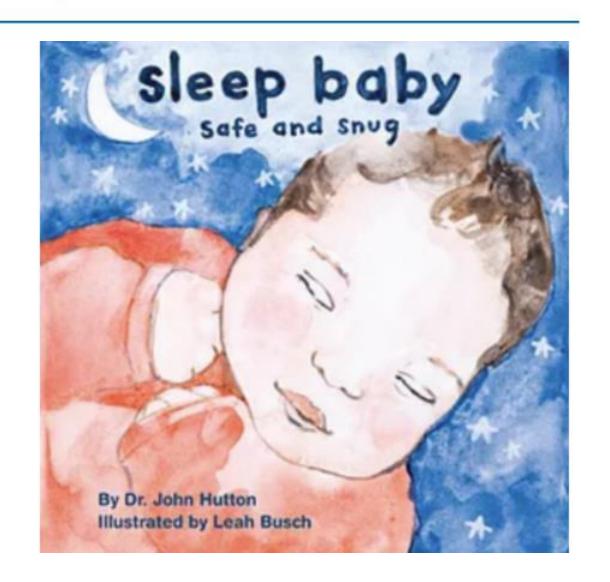




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Charlie's Kids Foundation board books

Books sent to DHEC regional and local offices





Public Outreach Activities

- Clear the Crib Challenge
- Photo Contest through social media
- Interactive quiz <u>https://forms.office.com/g/3ZCd</u> v5dxRM





South Carolina Department of Health and Environmental Control

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Stay Connected













Learning
Collaborative
Clear the
Crib
Challenge

- 1. Your newborn baby has a small tummy and needs to eat often. Keeping up with their feeding schedule is exhausting! How do you balance feeding and safe sleep?
 - a. Take a nap on the recliner while the baby feeds.
 - b. Place baby in a crib or pack 'n play next to your bed. When baby needs to eat, bring them in the bed to breastfeed, then put them right back when they're done.
 - c. Since you're breastfeeding, you keep the baby in bed with you and your partner.

- Place baby in a crib or pack 'n play next to your bed. When baby needs to eat, bring them in the bed to breastfeed, then put them right back when they're done.
 - Instead of bed sharing, share a room with your baby. This means keeping your baby's sleep area in the same room where you sleep for at least the first 6 months. Place your baby's crib, bassinet, portable crib or play yard in your bedroom, close to your bed. Room sharing can decrease the risk of SIDS by as much as 50%!



- For a newborn, where do you think the safest place to locate the crib in your house?
 - a. In front of the window with the blinds to keep it dark.
 - b. In the baby's nursery, down the hall from where you sleep.
 - c. At your mother's house.
 - d. In the same room where you're sleeping, close to your bed.

- 2. In the same room where you're sleeping, close to your bed.
 - •The American Academy of Pediatrics recommends that your baby sleep in their own crib, bassinet, portable crib or play yard, in their parent's room for at least the first 6 months of their life.



- 3. What should you put in your baby's crib?
 - a. Firm mattress and tightly fitted sheet.
 - b. Some stuffed animals, blankets, and bumpers for the sides of the crib.
 - c. Firm mattress, tightly fitted sheet and bumper for the side of the crib so the baby will not hit their head.

 Your crib is assembled and ready for a baby! What should go in it?
 A firm mattress and tightly fitted sheet.

• A firm mattress means that it shouldn't indent when your baby is lying on it. Make sure your crib mattress is designed for your specific crib and that it fits tightly. Use a fitted sheet only - nothing else should be in the crib with your baby.



- 4. You are leaving your 3-month-old with a babysitter for the first time. What should you tell her to do when it comes time to put baby to bed?
 - a. Lay baby on their stomach.
 - b. Prop baby up with a pillow so they can sleep on their side.
 - c. Lay baby on their back.

4. You're leaving your 3-month-old with a babysitter for the first time. What should you tell her to do when it comes time to put the baby to bed? Lay baby on their back

 Baby should always be placed to sleep on their back!



- 5. You are at a friend's house with your 2-month-old, but you forgot to bring the pack n play. When it's time for the baby to nap, what is your safest option?
 - a. look for a bed in the house with a firm mattress. Place baby on her back in the center of the empty bed. with a tight- fitting sheet, with no blankets or pillows near the baby.
 - b. Lay baby on her back in an empty drawer on the ground.
 - c. Put baby in the car seat.
 - d. Lay baby on the sofa.

- 5. ... but you forgot to bring the pack 'n play! When it's time for the baby to go down for a nap, what's your safest option! Lay baby on her back in an empty drawer on the ground
- While it is good to use a firm mattress with a tight-fitting sheet and no blankets or pillows in the baby's sleep space, baby should not sleep on an adult bed, chair, couch, hammock. In an emergency, you can temporarily put your baby to sleep in a box, dresser drawer or something similar. It should have thin, firm padding. Move your baby to an approved sleep surface as soon as you can.

6. Safe sleep can be a matter of life or death. On average, how many babies die due to SIDS and suffocation every year in South Carolina?

a. About 20

c. About 75

b. About 50

d. About 100

6. Safe sleep can be a matter of life or death. On average, how many babies die due to SIDS and suffocation every year in South Carolina?

About 50

- 7. Your baby's pacifier fell out while they were sleeping, what should you do?
 - a. Find the pacifier without waking them.
 - b. Relax, and let them sleep, because you now have 2 hours of quiet time.
 - c. Don't worry, the baby didn't lose it because it's attached to their PJ by a string.



 Your baby's pacifier fell out while they were sleeping, what should you do?

- Relax, and let them sleep,
 because you now have 2
 hours of quiet time.
- Pacifier can be in crib, but it can't have a string or be attached to their clothing.

- 8. Your best friend and her 4-month-old son have been at your house for a couple hours. It's time for your friend's son and your 7-month-old daughter to take a nap, where should your babies sleep?
 - a. Put one baby in the crib and the other baby in the pack 'n play.
 - b. Put one baby in the pack 'n plan and the other baby in the swing, that way both babies are in one room and near you.
 - c. Put one baby in the crib and the other baby on your mattress after you've cleared off all the blankets, top sheet and pillows.
 - d. Side by side in a pack 'n play, it's big enough to share

• Your best friend and her 4month-old son have been at your house for a couple hours. It's time for your friend's son and your 7-month-old daughter to take a nap, where should your babies sleep? Put one baby in the crib and the other baby in the pack 'n play.

• Each baby should sleep alone, in their own safe sleep space, on their back.



Safe Sleep, Every Sleep Video

