

model *behavior*



Sample Policy & Procedures

Safe Sleep Practices for the Well Baby Nursery

Parents tend to copy practices that they observe in hospital settings. As a nurse, you play a vital role in ensuring an infant's health and survival after they leave the hospital. This is the most important modeling job of your life.



Sample Policy & Procedures *Safe Sleep Practices for Well Baby Unit*

- Scope of Responsibility:** All health care professionals caring for infants in the Well Baby Unit (WBU)
- Goals:**
1. To provide guidelines that will ensure a safe sleep environment for all newborns by implementing the American Academy of Pediatrics' (AAP) 2005 recommendations regarding safe sleep.
 2. To ensure that all recommendations are modeled for and understood by parents/caregivers with consistent instructions given prior to discharge.
- Purpose:** Sudden Infant Death Syndrome (SIDS) is a sudden and unexplained death that usually occurs while the infant is asleep. Highest risk is between the ages of 1 and 4 months. Although there is no conclusive research on the cause(s) of SIDS, safety measures such as positioning the infant on his back to sleep and other safe sleep guidelines have been shown to reduce the incidence of SIDS.
- Conclusion:** Parents tend to copy practices that they observed in hospital settings. WBU staff should be more vigilant about endorsing and modeling the supine sleep position and safe sleep guidelines before an anticipated discharge.

Intervention

WBU

WBU Parent Education

Sleep Position

- All term infants should be placed to sleep on their backs from the start. (AAP 2005)
- Parents/caregivers need to be told that once well, infants need to always sleep on their backs and that carrying, play and supervised “tummy time” while awake are adequate stimulation for development.
- “Tummy time” is supervised playtime with the infant while he/she is awake and positioned on the tummy. This is important to infants’ development by providing the opportunity for infants to learn to lift and turn their heads, exercise their bodies and strengthen the neck, arm and shoulder muscles.
- Changing the direction that your baby lies in the crib from week to week and supervised “tummy time” will reduce the incidence of positional plagiocephaly or flat spots on the infant’s head.

Bedding/ Soft Materials (Blankets)

- Soft materials such as pillows, quilts, comforters, sheepskin, stuffed toys and loose bedding should not be placed in infants’ sleeping environment.
- If additional warmth is needed for the infant, staff should consider using a wearable blanket as an alternative to loose blankets and model its use for the parents/caregivers.
- Positioning devices (i.e. wedges or rolled up blankets) should not be placed in the sleep environment.
- Parents/caregivers need to be shown and told that no loose or soft items are to be in the crib or bassinet with the infant. Parents should be encouraged to build or find shelves at home to house stuffed toys.
- Parents/caregivers should be asked to compare the normal temperature of their home with that of the WBU and figure out, along with the nursing staff, how to adjust the home environment or the infant’s clothing. Parents/ caregivers should be taught to look for signs of overheating such as fever and sweating and signs of being cold such as cold hands and skin mottling.
- Parents/caregivers can be encouraged to consider using a wearable blanket or dressing the infant in layers as an alternative to loose blankets.

Intervention

WBU

WBU Parent Education

Crib/Bedsharing (Breastfeeding)

- During rooming, it must be made clear that the infant is to sleep in a crib or bassinet. Bedsharing should not take place in the mother's room.
 - Breastfeeding should only occur when the mother and the infant are fully awake. If the mother is getting drowsy, the infant should be placed back into its crib.
 - Mother needs to monitor the nursing to ensure that occlusion of the nose by the breast does not occur, especially during engorgement and initial let down.
- Parents/caregivers must be made aware of the multiple dangers of an infant sleeping in an adult bed prior to discharge. In addition, the extreme danger of bedsharing on couches and with other children must be pointed out.
 - Parents/caregivers should be informed to place their infant to sleep in a crib or bassinet that meets the U.S. Consumer Product Safety Commission's safety standards. Nurses should emphasize that the crib should be firm and can use the WBU cribs as examples for parents as to an 'ideal' firmness.
 - Parents should be encouraged to place the infant to sleep in the same room as the parents.
 - Parents/caregivers should be made aware of the dangers of sleeping during breastfeeding due to the potential risk of smothering.
 - It should be stressed that after going home, parent/caregiver interactions with the infant need to occur under safe conditions when both are awake and alert.
 - The availability of bed-extendors and small cribs near the adult bed to facilitate breastfeeding should be addressed.

Swaddling/ Bundling

- Blankets used for swaddling should come no higher than the infant's shoulders.
- Parents/caregivers should be encouraged to speak with their physician about the need to swaddle. If the physician wants the infant swaddled, the nurse will need to demonstrate.

Intervention

WBU

WBU Parent Education

Smoking

- Smoking is not allowed in the WBU and should not be introduced into the infants' environment.
- Parents/caregivers need to be made aware of the dangers of anyone smoking around the infant.
- Bedsharing may be more dangerous if the mother smokes and should be strongly warned against.
- Parents/caregivers should be encouraged to stop smoking and create a smoke-free environment for the infant.

Pacifier Use

- Suggest to parents that they consider offering a pacifier at nap time and bedtime. Research shows that pacifier use during sleep is associated with a reduced risk of SIDS. Research also shows that the use of a pacifier does not interfere with breastfeeding nor cause dental problems.
- Explain to parents why they should wait one month before offering a pacifier to a breastfeeding baby. The risk of SIDS is very low during the first month and it is important to ensure that the baby is nursing well before introducing a pacifier.
- Tell parents not to use a pacifier as a substitute for nursing or feeding. Pacifiers should be offered after a feeding or when a baby is put down to sleep.
- Tell parents not to put a pacifier back in a baby's mouth if it falls out after he or she falls asleep. Doctors say that babies who use a pacifier at naptime and nighttime are protected, even if the pacifier falls out of their mouth after they fall asleep.
- Tell parents not to force their baby to take a pacifier if he or she does not want it. Encourage parents to try several times during a period of a few weeks before giving up.

Intervention

WBU

WBU Parent Education

Pacifier Use (cont.)

- Tell parents not to coat the pacifier with any sweet solutions.
 - Pacifiers should be cleaned often and replaced regularly.
 - Tell parents not to use a string or anything else to attach pacifiers around the baby's neck or to his or her clothing.
 - Tell parents to limit pacifier use to the baby's first year of life.
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