07 Professional Resources

- NICE (2015) (to be updated and published 2020) standards Postnatal Care QS CG37 Statement 4. Infant Health Safer infant sleeping.
 www.guidance.org.uk
- Pan Cheshire LSCB (2019) Infant Safe Sleep Guidance for the Integrated Workforce – http://www.onlineprocedures.co.uk/pancheshirece/procedures/knowl edge-hub/childrens-development/infant-safe-sleepguidance/
- UNICEF (2017) Co-sleeping-and-SIDS-A-Guidefor-Health-Professionals
- 4. UNICEF (2017) Caring for your baby at night
- 5. BASIS (2018) Infant Information Source, formerly ISIS

06 Questions to Consider

- Do we routinely ask about sleeping arrangements and other carers?
- Do we ask parents/carers (not just mothers) about alcohol, drugs, smoking and medication?
- Do we discuss infant safe sleep at each planned contact under the age of 12 months?
- Do we routinely ask the question where does your baby sleep during the day and at night?
- o Do we check the room/s temperature and conditions?
- Are we aware of the current NICE, UNICEF, BASIS and Cheshire Guidance re: infant safe sleep?

01 Background

Sudden Infant Death Syndrome (SIDS) is the sudden, unexpected and unexplained death of an apparently healthy infant. The 'Back to Sleep' campaign in 1991 saw SIDS cases in England and Wales fall by two thirds. In the UK there are still just less than 300 SIDS each year.



05 Safe Sleep Advice Universal Infant Safe Sleep Advice - The safe

Universal Infant Safe Sleep Advice -The safest place for a baby to sleep at night is in their own moses basket, crib or cot, placed at the side of the parental bed. Positioned on their back, with feet to foot of the crib/cot. In a room temperature of 16-20c, wearing appropriate clothing, with head uncovered and outdoor clothing removed. In a smoke, alcohol, drug free environment. Appropriate cellular blankets should be used which can be added or removed according to temperature. Cot should be free from toys and pillows.

Bed-sharing may be planned or unplanned – eg, many breast feeding mothers chose to co-sleep for ease of breast feeding or may unintentionally fall asleep so it is important to have a parent-centred discussion on safety rather than advise never to bed-share.

02 Why it Matters

Although the exact cause of SIDS is unknown, research has shown that there are certain maternal, infant and environmental factors are more commonly associated with babies who die of SIDS than those who survive.

The Pan Cheshire CDOP reviewed a number of infant deaths in which there have been factors associated with unsafe infant sleep evident. SIDS associated with co-sleeping was a more common feature particularly when another additional factor/s were present such as alcohol/drugs, smoking, and co-sleeping on a sofa.

03 Information

Despite many new parents/carers saying that they will never sleep with their infant, evidence suggests that up to 70-80% of UK infants at some time have co-slept with a parent during the first three months.

Infants who are born preterm or of are of a low birth weight have been shown to have an increased susceptibility to SIDS as they have difficulty in regulating heart rate, breathing and temperature

04 Inform Parents/Carers

Inform parents and carers that the association between co-sleeping and SIDS is greater with:

- o parental or carer recent alcohol consumption
- parental or carer drug use
- parental or carer smoking
- Low birth weight or premature infants
- Co sleeping on a chair or sofa

UNICEF UK Leaflet s

Lullaby Trust Leaflets

BASIS resources

CATCH APP

Top Tips to infant safe sleep – Pan Cheshire CDOP Leaflet Safe sleep thermometers

www.NHS.UK - SIDS



Cheshire East Local Safeguarding Children Board