



## Suffolk Safer Sleep Strategy - FAQs

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### Introduction

These FAQs have been developed by Public Health Suffolk and Suffolk Local Safeguarding Children Board. The aim is to equip professionals with the knowledge they need to provide relevant and up to date information on safer sleeping practice to parents.

### What is the Suffolk Safer Sleeping Campaign?

Sudden Infant Death Syndrome (SIDS) (often referred to as cot death) accounts for approximately 300 infant deaths each year in the UK. The Suffolk Safer Sleeping Campaign aims to raise awareness of SIDS and reduce the risk of it happening.

To achieve this, Suffolk Health and Wellbeing Board and its partners are championing a simple set of safer sleep messages that will help parents make informed choices about their baby's sleeping arrangements and minimise the risks.

The messages are,

1. Keep your baby smoke free during pregnancy and after birth.
2. Put your baby to sleep on their back with their feet to the foot of the cot.
3. Place your baby to sleep in a cot, crib or Moses basket – never fall asleep with them on a sofa or chair.
4. Never fall asleep with your baby after drinking or taking drugs/medication.
5. Keep your baby's head and face uncovered and make sure they don't get too hot.
6. Breastfeed your baby if you can – support is available.

These messages are available as a [leaflet for parents](#).

## Where can I find easy to read information on Safer Sleep?

The Suffolk Public Health and LSCB websites provide information to download and print.

<https://www.healthysuffolk.org.uk/advice-services/children/safer-sleep>

<http://suffolkscb.org.uk/parents-and-carers/safer-sleep/>

**The Infant Sleep Information Source (ISIS)** has lots of up to date information.

[www.isisonline.org.uk](http://www.isisonline.org.uk).

The 'Infant Sleeplab' app is also available for Android and Apple phones and devices. It provides information about sleep safety and more general information about managing a baby's sleep. It also has a 'bed sharing quiz' which helps parents evaluate their circumstances and bed sharing risk factors (such as smoking and alcohol).

**The Lullaby Trust** has lots of up to date information for families and can also provide bereavement support. They find much research in this area have a large collection of resources to download and order. These are available in various languages.

[www.lullabytrust.org.uk/SaferSleep](http://www.lullabytrust.org.uk/SaferSleep).

## What are the main risks associated with SIDS?

Based on the available evidence it is not possible to say that co-sleeping in itself *causes* SIDS. The National Institute of Health and Care Excellence (NICE)<sup>1</sup> conclude that co-sleeping by parents who are **smokers, drink alcohol, use drugs, or who have a premature/low birthweight baby** is more strongly associated with SIDS than when these factors are not present.

Other risk factors include:

- **Sleeping with a baby on a sofa** is particularly strongly associated with SIDS.
- Some SIDS infants have been discovered with the **bedclothes** covering the face and head and evidence is starting to emerge that using infant sleeping bags or placing the feet of the infant at the foot of the cot under a tucked cotton sheet reduce the possibility of head covering.
- Dressing the infant in **too many layers**, using duvets and thick quilts and **having the sleeping environment too hot** are all associated with an increased risk of SIDS.
- It is important that the mattress is firm and flat as both **soft bedding and old mattresses** are associated with an increased risk of SIDS.
- Placing the baby to **sleep on their front** increases the risk of SIDS.

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<sup>1</sup> NICE Addendum to Clinical Guideline 37, Postnatal Care. Routine postnatal care of women and their babies. Clinical Guideline Addendum 37.1

## **What advice should I give to parents about co-sleeping?**

- Research suggests that many parents co-sleep. For some this a conscious decision and for others it is unintended and unplanned. For example, falling asleep during or after breastfeeding or co-sleeping when the baby is unwell or teething.
- It is important to help parents make informed choices which take into account the evidence about the risks of co-sleeping, the potential benefits and their personal circumstances.
- It is also important to help parents plan if they think co-sleeping could be a possibility. This will avoid parents doing something in the middle of the night, or at other times that is based on a poorly thought through choice.

It isn't helpful to tell parents what they must or mustn't do; instead, listen carefully and offer information appropriate to their needs. A non-judgemental and holistic approach will help parents discuss these issues openly and make choices that are right for them.

If a parent chooses to co-sleep, guidance is available to help them do this safely. Please see the links on the next page under the Resources section.

## **Are there any cultural differences in safer sleeping practice?**

Yes. The care of infants is deeply rooted to cultural, religious and personal beliefs. For example, in some cultures co-sleeping is a common practice.

There is some evidence that parents are likely to dismiss inflexible recommendations that they don't agree with, or can't comply with for cultural reasons.<sup>2</sup> So whilst it is important to make all parents aware of the risks associated with co-sleeping, cultural beliefs will influence the choices parents make.

## **How can I promote both breastfeeding and safe sleep practice?**

Many parents and professionals think that bed sharing has a number of benefits, including coping with frequent night time feeds. There is some research evidence to suggest that bed sharing may facilitate longer term breastfeeding.<sup>3</sup> However, there are also risks associated with bed sharing.

As with other decisions regarding safer sleeping, it is important that parents are made aware of how their individual circumstances affect risk and how these may change from night-to-night. Guidance is available about how to minimise the risks should a parent decide to bed share.

Please see the links on the next page under the Resources section.

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<sup>2</sup> Volpe, Ball et al (2013) Night-time parenting strategies and sleep related risks to infants. Social Science and Medicine 79: 92-100.

<sup>3</sup> [https://www.isisonline.org.uk/hcp/where\\_babies\\_sleep/parents\\_bed/why\\_parents\\_bedshare/bedsharing\\_and\\_breastfeeding/](https://www.isisonline.org.uk/hcp/where_babies_sleep/parents_bed/why_parents_bedshare/bedsharing_and_breastfeeding/)

## Resources

- [Lullaby Trust Fact Sheet 3 – Bed sharing](#)
- [https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2011/11/Caring-for-your-baby-at-night\\_online-singles.pdf](https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2011/11/Caring-for-your-baby-at-night_online-singles.pdf)
- <https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2011/11/Caring-for-your-Baby-at-Night-A-Health-Professionals-Guide.pdf>
- [Infant Sleep Information Service \(ISIS\) – Bed Sharing and Safety](#)

By helping parents to weigh up the potential risks and benefits in the context of their particular situation, it is possible to both promote breastfeeding and minimise the risks of SIDS.

### Should babies sleep in a room on their own?

According to NHS guidance, a baby should be in the same room as the parent or carer when they're asleep, both day and night for the first six months (NHS, 2016)<sup>4</sup>.

Research shows that the risk of SIDS is greater for babies who sleep on their own compared to sleeping in the presence of an adult. (Infant Sleep Information Service, 2016)<sup>5</sup>. Sleeping in different rooms also makes it more difficult to respond quickly to the baby's needs.

If there is no room for the baby's cot or crib in the parents' bedroom, parents should consider putting a single bed in the baby's room where a parent could sleep near to the baby in its cot or crib.

### What is a normal temperature for a baby?

Overheating can increase the risk of SIDS (NHS, 2016)<sup>6</sup>. Therefore, it is very important to make sure that the baby is a comfortable temperature.

A normal temperature in babies is about 36.4°C (97.5°F), but this does differ slightly from child to child.

In the UK, a room temperature of 16-20°C, combined with light bedding or a lightweight well-fitting baby sleep bag, offers a comfortable and safe environment for sleeping babies. This feels quite cold to a lot of people, so using a room thermometer can help check the temperature. <sup>7</sup>

<https://www.lullabytrust.org.uk/wp-content/uploads/6-temperature-factsheet-2017.pdf>

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<sup>4</sup> NHS. (2016). *Helping your baby to sleep - Pregnancy and baby guide - NHS Choices*. [online] Available at: <http://www.nhs.uk/conditions/pregnancy-and-baby/pages/getting-baby-to-sleep.aspx> [Accessed 25 Jul. 2016].

<sup>5</sup> Isonline.org.uk. (2016). *ISIS: Room Alone - ISIS Online*. [online] Available at: [https://www.isionline.org.uk/where\\_babies\\_sleep/room\\_alone/](https://www.isionline.org.uk/where_babies_sleep/room_alone/) [Accessed 25 Jul. 2016].

<sup>6</sup> NHS. (2016). *Reduce your baby's risk of sudden infant death syndrome (SIDS) or cot death - Pregnancy and baby guide - NHS Choices*. [online] Available at: <http://www.nhs.uk/Conditions/pregnancy-and-baby/Pages/reducing-risk-cot-death.aspx> [Accessed 25 Jul. 2016].

<sup>7</sup> <http://www.lullabytrust.org.uk/file/Fact-Sheet-Temperature.pdf>

## How can I check if my baby is too hot?

If you're concerned that your baby has a raised temperature, the best first step is to check their temperature with a thermometer. This will help you work out whether you need to call a doctor. If you speak to a doctor or nurse on the phone, it will help them make a decision about the type of medical attention your child needs.

If you do not have a thermometer available, the best way to check a baby's temperature is by putting your hand on the skin on their tummy or the back of their neck. Don't use their hands or feet as a guide as they will always feel cooler than the rest of their body.

A fever is usually considered to be a raised temperature of 37.5<sup>0</sup>C (99.5<sup>0</sup>F) or above. You may be concerned that the baby has a fever if they feel hotter than usual to the touch – on their forehead, back or stomach (NHS, 2016)<sup>8</sup>.

Information for parents and carers about fever and a range of common childhood illnesses in young children can be found on the following links:

<http://suffolk.sensecds.com/cci/fever.html>

<http://www.nhs.uk/Tools/Pages/Childhoodillness.aspx>

## Does breastfeeding reduce the risk of Sudden Infant Death Syndrome (SIDS)?

Research shows that babies who are breastfed are less likely to die of SIDS (M Vennemann et al, 2009<sup>9</sup>; Hauck et al., 2011<sup>10</sup>). Breastfeeding helps to protect babies against illnesses which reduces the risk of SIDS.

It is therefore recommended that breastfeeding should continue until at least 6 months of age. At the age of 6 months the risk of SIDS drops significantly (Unicef, 2016).

Lying down in a bed to breastfeed can be quick and easy for mothers at night. It can also help with frequent feeds, however, parents need to be fully aware of the risks associated with their baby's sleeping places and make the right decisions for their baby.

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<sup>8</sup> NHS. (2016). *How to take your baby's temperature - Pregnancy and baby - NHS Choices*. [online] Available at: <http://www.nhs.uk/conditions/pregnancy-and-baby/pages/how-to-take-your-babys-temperature.aspx> [Accessed 25 Jul. 2016].

<sup>9</sup> Vennemann, M., Bajanowski, T., Brinkmann, B., Jorch, G., Yucesan, K., Sauerland, C. and Mitchell, E. (2009). Does Breastfeeding Reduce the Risk of Sudden Infant Death Syndrome?. *PEDIATRICS*, 123(3), pp.e406-e410.

<sup>10</sup> Hauck, F., Thompson, J., Tanabe, K., Moon, R. and Vennemann, M. (2011). Breastfeeding and Reduced Risk of Sudden Infant Death Syndrome: A Meta-analysis. *PEDIATRICS*, 128(1), pp.103-110.

## **Are there any baby sleeping aids parents should use or avoid to help with sleep safety?**

### **New Products**

There are a range of sleeping products available for babies and new ones emerging all the time, including cots, Moses baskets, bassinets, baby nests/pods, bed hammocks and side care cribs (co-sleepers). There is often a lack of evidence indicating whether these products aid sleep safety or present a risk. However, good general advice is:

- The sleeping surface should be firm, flat and waterproof.
- Baby's head stays uncovered while they are sleeping.
- Remove any soft toys from the cot before each sleep period.
- Avoid using soft or bulky bedding such as quilts, pillows and duvets.
- Avoid using cot bumpers – there have been a number of cases in the UK and abroad where infants have become entangled in the ties and material, or fallen from pulling themselves up on the bumpers.
- Always follow the manufacturer's instructions, make sure they have passed British and European standards testing and look out for the Kite-mark.

### **Mattresses**

The following advice should help parents make an informed decision about what to buy:

- The mattress should be firm, flat and waterproof.
- A cot mattress should be firm, flat and waterproof – that's all! Even a basic foam mattress is safe for a baby if it meets these conditions.
- Some mattresses are coated in PVC for waterproof protection, or you may need a separate, well-fitting waterproof cover. There is no evidence that PVC coating causes SIDS or that a 'breathable' mattress is safer.
- A mattress can be reused as long as it is intact, with no cracks, rips or tears; was waterproof-protected when used; and has been stored safely. Give it a clean before it is used.
- Mattresses that have come from another household may increase the chance of SIDS so consider getting a new one, particularly if it is not waterproof-protected.
- Reusing a cot or crib or using one from another household is fine.

### **Baby Sleeping Bags**

Although there is little research evidence that sleeping bags reduce the likelihood of SIDS they are a popular choice for parents. They are thought to aid sleep as they avoid a baby kicking off blankets and becoming cold. They may also avoid the use of excessive bedding which is a risk factor for SIDS<sup>11</sup>.

Sleeping bags should be well-fitted around the neck and shoulders. Follow the manufacturer's guidelines and use the most appropriate tog rating for the time of year and amount of clothing your baby has on to make sure they don't get too hot.

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<sup>11</sup> [https://www.isisonline.org.uk/hcp/sleep\\_and\\_health/sleep\\_aids/sleep\\_bags/](https://www.isisonline.org.uk/hcp/sleep_and_health/sleep_aids/sleep_bags/)

## Car Seats

Car seats are essential for keeping babies safe when travelling, but they are not designed to be slept in for long periods of time. Some lie-flat car seat models are available but make sure they fit in your car.

If you use a standard car seat, try and take regular breaks so your baby isn't in a seated position for too long – some guidelines recommend no more than 2 hours.

For more information on mattresses, bedding and car seats please see the link below:

Source: <http://www.lullabytrust.org.uk/file/-----internal-documents/Fact-Sheet- Mattresses-bedding-and-cots.pdf>

## Dummies

Some research suggests that using a dummy when putting a baby down to sleep could reduce the risk of SIDS but it is advised to wait until after breastfeeding is established.

<https://www.lullabytrust.org.uk/wp-content/uploads/fact-sheet-dummies-2016.pdf>

## Slings and Baby-carriers

Slings and baby carriers are used around the world, where babies are carried by their mothers (and fathers, siblings and community members) throughout the day. Carrying a baby in a sling while they sleep may benefit them, while also allowing the parent to have their hands free.

Little research has looked specifically at the benefits of carrying babies in a sling while they sleep. However, research in related areas suggests that keeping close contact may have benefits for both mother and baby.<sup>12</sup>

Although there is no reliable evidence that slings are directly associated with SIDS, there have been a number of deaths worldwide where infants have suffered a fatal accident from the use of a sling. These accidents are particularly due to suffocation, and particularly in young infants.

The risk appears to be greatest when a baby's airway is obstructed either by their chin resting on their chest or their mouth and nose being covered by a parent's skin or clothing.

The UK Sling Manufacturers and Retailers consortium recommends that baby sling wearers follow the 'TICKS' rule for safe use:

- **T**ight - baby slings should be tight enough to keep your baby close to your body.
- **I**n view at all times - your baby's face should be visible simply by glancing down.
- **C**lose enough to kiss - position your baby as close to your chin as possible – a good test is to see whether you can bend down to kiss your baby's head or forehead.
- **K**eeP chin off the chest - ensure there's always a space of at least a finger width between your baby's chin and chest, allowing your baby to breathe easily.
- **S**upported back - a young baby should be held comfortably close to the baby- sling wearer so their back is supported in its natural position, with their tummy and chest against you.

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<sup>12</sup> [https://www.isisonline.org.uk/sleep\\_health/sleep\\_aids/slings/](https://www.isisonline.org.uk/sleep_health/sleep_aids/slings/)

## Swaddling

Some believe swaddling young babies can help them settle to sleep. The Lullaby Trust do not advise for or against swaddling, but do urge parents to follow the advice below. If a parent decides to adopt swaddling, this should be done for each day and night time sleep as part of a regular routine:

- Use thin materials.
- Do not swaddle above the shoulders.
- Never put a swaddled baby to sleep on their front.
- Do not swaddle too tight.
- Check the baby's temperature to ensure they do not get too hot<sup>14</sup>.



**Public Health Suffolk**

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<sup>13</sup> Lullabytrust.org.uk. (2016). *Swaddling and slings - Lullaby Trust - Lullaby Trust*. [online] Available at: <http://www.lullabytrust.org.uk/swaddling-slings> [Accessed 9 Aug. 2016].