



Crumlin | Temple Street | Tallaght | Connolly

Children’s Health Ireland Nursing Practice Guideline

SAFE SLEEP PRACTICES IN THE ACUTE HOSPITAL SETTING

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	CHI at Herberton <input type="checkbox"/>	CHI at Tallaght <input type="checkbox"/>	CHI at Temple Street <input type="checkbox"/>
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1.0 Statement

Sudden Infant Death Syndrome is a leading cause of death among infants in Ireland. Following the introduction of the Safe Sleep Guidelines in 1992, the incidences of these deaths have dropped by 63%. The Safe Sleep Guidelines focus on safe sleeping practices within the home environment. Parental home practices are influenced by what has been observed in hospital. This guideline aims to inform hospital staff on safe sleep positions for infants during an acute hospital stay.

2.0 Definition of Guidelines

Guidelines represent the written instructions about how to ensure high quality services are delivered. Guidelines must be accurate, up to date, evidence-based, easy to understand, non-ambiguous and emphasise safety. When followed, they should lead to the required standards of performance.

3.0 Applicable to

This guideline is applicable to all staff members within the multidisciplinary team.

4.0 Objectives of Guidelines

- This guideline offers direction for staff members to provide a safe sleep environment for infants whilst an inpatient in CHI.
- To ensure that parents receive consistent accurate information regarding the Safe Sleep Guidelines.
- To provide an opportunity for parents to observe recommended safe sleep practices.
- To support parents to continue safe sleep practices when they are in their home environment.

5.0 Definition / Terms

SIDS: SIDS is defined as the sudden unexpected death of an infant less than 1 year of age, with the onset of the fatal episode apparently occurring during sleep that remains unexplained after a thorough investigation including performance of a complete autopsy and review of the circumstances of death and the clinical history.

SUIDS (Sudden Unexpected Infant Death)

The death of an infant less than one year of age that occurs suddenly and unexpectedly, and whose cause of death is not immediately obvious before the investigation. Most SUIDs are reported as one of three types:

- SIDS
- Accidental suffocation
- Unknown cause

Nest: positioning an infant to promote comfort and development using linen to create a confined space.

6.0 Guidelines

In accordance with Safe Sleep Guidelines (Appendix 1; Appendix 2):

- Infants should be placed on their backs, with their feet to the foot of the cot.
- Pillows should not be used for infants under 1 year.
- Infant's head and face should remain uncovered during sleep.
- Infants should sleep on a firm, flat surface with only a single sheet on top of mattress.
- Raising the head of a cot should only be done following advice from the medical team and infants on tilted cots should be nursed on cardio-respiratory monitoring.
- Cots should be kept free of clutter including soft toys, excess clothing and blankets.

- Only essential medical equipment may be stored in the cot, for example, tracheostomy box.
- Excess blankets should be removed to prevent infants from overheating.
- Co-sleeping is not recommended within the hospital.
- If a ‘nest’ has been recommended, the infant should be placed on cardio-respiratory monitoring. When appropriate, nests should be removed under the guidance nursing or physiotherapy staff. All nests should be removed prior to discharge home.
- If swaddled; the wrap should come no higher than the infant’s shoulders; it should be firm not tight. Swaddling is no longer appropriate once the infant shows signs of rolling.
- All parents will be provided with information on safe sleep practices on discharge home.

While an infant is acutely unwell, compliance with the Safe Sleep Guidelines may not always be possible due to the infant’s medical condition. During the resolution of the infant’s acute illness, attempts should be made to adhere to safe sleep practices (Appendix 3).

7.0 Stakeholder involvement

Name	Grade	Location
Caroline O’Connor	NPDC	Temple Street
Susan Keane	CNM 3	Temple street
Siobhan O Connor	NPDC	Tallaght
Fionnuala O’ Neill	NPDC	Crumlin

8.0 Implementation Plan

Staff will be made aware of the Safe Sleep Guidelines during in-house study days and ward-based teaching.

9.0 Evaluation and Audit

This guideline will be evaluated and audited annually. Safe sleep practices across the hospital will be audited bi-annually by the authors of this document.

10.0 References

- Horne, R. (2019) ‘Sudden infant death syndrome: current perspectives’, *Internal Medicine Journal*, 49 (4), pp. 433-438.
- National Paediatric Mortality Register (2018) *Annual Report 2018*. Available at: [sidsireland.ie](https://www2.hse.ie/conditions/cot-death/where-baby-should-sleep/)
- Health Service Executive (2022) Available at: <https://www2.hse.ie/conditions/cot-death/where-baby-should-sleep/>
- Royal Children’s Hospital Melbourne (2016) *Clinical guidelines (nursing safe sleeping)*. Available at: https://www.rch.org.au/rchcpg/hospital_clinical_guideline_index/Safe_sleeping/

Appendix 1 - HSE Safe Sleep Guidelines (2017)

Safe Sleep for your Baby Reduce the Risk of Cot Death



Key Points

- ✓ Always place your baby on their back to sleep, both night and day.
- ✓ Keep your baby smoke free during pregnancy and after birth.
- ✓ The safest place for your baby to sleep at night is in a cot in your room.
- ✓ Place your baby with their feet to the foot of the cot.
- ✓ Make sure your baby's head and face stays uncovered when asleep.
- ✓ Keep the cot free of soft objects and anything loose or fluffy.
- ✓ Breastfeed your baby, if possible.
- ✗ Don't smoke during pregnancy.
- ✗ Don't smoke or allow anyone to smoke in the home or in the car.
- ✗ Never fall asleep in bed with your baby if you or your partner smokes.
- ✗ Never share a bed with your baby when you have taken alcohol or drugs (including medication that may make you drowsy).
- ✗ It is not safe to bed share if your baby is less than three months old or was born prematurely or had a low birth weight.
- ✗ Never fall asleep with your baby on a sofa or an armchair.
- ✗ Don't let your baby get too hot.

What is cot death?

Cot death is another name for **Sudden Infant Death Syndrome (SIDS)**. It is the sudden and unexpected death of a seemingly healthy baby during sleep. No cause of death can be found, even after a post-mortem examination.

However, cot death does not only happen in a cot. It may happen in a pram, bed, car seat, baby seat or anywhere a baby is sleeping. A seemingly healthy baby is put down to sleep and when next checked they are found dead. There has been no sound or sign of a struggle.

Cot Death is:

- sudden and unpredictable
- a recognised medical disorder
- one of the main causes of death in babies from four weeks to one year of age
- most common between two and four months of age (although it can happen to older babies)
- only diagnosed when all other causes of death are ruled out
- not caused by immunisations
- not caused by vomiting or choking
- not suffocation.

Because we do not know what causes cot death, we cannot completely prevent it. But research has shown that you can take steps to significantly reduce the risk of cot death. If you follow the advice in this booklet you will help reduce your baby's risk as much as possible.

Please share this information with everyone who looks after your baby: family, friends, child-minder, crèche, babysitter etc.

2

Back to sleep

Always place your baby on their back to sleep, both night and day.



Babies who sleep on their tummies have a higher risk of cot death. Always place your baby to sleep on their back, both night and day. This does not increase the risk of choking if they vomit. If a baby vomits/spits up while sleeping on their back, it will go back down the oesophagus as it is underneath the trachea (gravity).

When babies are sleeping on their tummy any vomit will pool at the opening of the trachea making it easier for the baby to choke.



Make sure everyone who looks after your baby uses the back to sleep position.

It is not safe to place your baby on their side to sleep because they may roll onto their tummy.

When your baby is older and able to roll from back to front and back again, let them find their own position to sleep. However you should still place them on their back at the start of sleep time.

3

Plagiocephaly (flat head)

If your baby always lies with their head in the same position they might develop a 'flat head', this is known as plagiocephaly. You can prevent this when putting your baby down to sleep, by turning their head so that sometimes they face left and sometimes they face right.

Sleep positioners and other similar products including pillows
Do not use sleep positioners and other similar products as they do not prevent cot death or flat head and are a suffocation risk.

Pillows and cushions of any kind are not necessary and should not be used as they are a suffocation risk. Elevating your baby's sleep surface does not reduce reflux and is not recommended.

Keep the cot free of soft objects and anything loose or fluffy (e.g. cot bumpers, duvets, toys, wedges, bedding rolls, etc.).

Sitting and carrying devices

Baby seats, car seats, slings, carriers and other similar products are not recommended for routine sleep for your baby.

Sleeping in a sitting position can cause your baby's head to fall forward and restrict their airway making it difficult for them to breathe.

If your baby falls asleep in a sitting position they should be placed on their back to sleep as soon as possible. Babies should not be left sleeping unsupervised while in a seated position.

Tummy Time

Tummy time helps your baby to strengthen their muscles and helps to prevent flat head. It is important to begin from birth. When your baby is awake place them on their tummy on a firm flat surface, while you supervise.

Never leave your baby alone on their tummy and if your baby falls asleep when on their tummy, be sure to place them onto their back.

4

Smoke-free zone for your baby

Do not smoke during pregnancy.



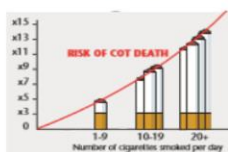
Smoking during pregnancy greatly increases your baby's risk of cot death.

If you smoke during pregnancy your baby is more likely to be born prematurely or have low birth weight.

Premature and low birth weight babies have a higher risk of cot death.

Your baby's risk goes up with every cigarette you smoke and with every smoker in your home.

So if you and your partner both smoke, your baby's risk is higher than if only one of you smokes.



If you can't quit completely, try to cut down the number of cigarettes you smoke daily.

**Remember...
The more you smoke, the higher the risk.**

5

Smoke-free zone for your baby

Do not smoke or allow anyone to smoke in the home or in the car.

Being exposed to cigarette smoke after birth also increases a baby's risk of cot death. It is most important that no one smokes around your baby. When you go out, don't bring your baby into smoky places.

If you or your partner smoke (no matter where you smoke, even if you only smoke outside the home), you should not share a bed with your baby as this greatly increases the risk of cot death.



**Remember...
If you cut out smoking when you're pregnant and keep cigarette smoke away from your baby after birth, you can greatly reduce their risk of cot death.**

You can QUIT and we can help!
You are twice as likely to quit for good with our help.

Contact the HSE QUIT Team
Freephone: 1800 201 203 Email: support@quit.ie
Tweet: @HSEQUITeam
Facebook: www.facebook.com/HSEQUIT
Web: www.quit.ie Freetext: text QUIT to 50100

6

The safest place for your baby to sleep at night is in a cot in your room.



Babies who sleep in a cot in their parents' bedroom are less at risk of cot death than if they are on their own in a separate room.

Keep your baby's cot in your room for at least the first six months.

Do not share a bed with your baby if you or your partner:

- smoke (no matter where you smoke – even if you never smoke in bed)
- have taken alcohol, drugs or medication that may make you drowsy
- are overtired

or if your baby:

- is less than 3 months old
- was premature (born before 37 weeks)
- had a low birth weight (less than 2.5Kg or 5.5lbs).

Bed sharing can be dangerous. It can increase your baby's risk of suffocation as they can slip under the bed covers, roll under an adult, get trapped between the bed and the wall or fall out of the bed. Your baby should not share a bed with your other children.

Remember: a separate cot is safest.

Never fall asleep with your baby on a sofa, couch, armchair or beanbag – this is very dangerous.



7

Feet to foot

Place your baby with their feet to the foot of the cot and keep their face and head uncovered.



Place your baby to sleep with their **feet to the foot** of the cot, Moses basket or pram so they can't wriggle down under the covers. Tuck blankets in loosely but securely, no higher than your baby's shoulders.

A sleeveless baby sleeping bag may be used instead of blankets; it should be low-tog, with no hood, the correct size for your baby and conform to current safety standards.

Check regularly to make sure your baby's face and head stays uncovered. If blankets slip over their face and head while they are asleep, they are at increased risk of cot death and suffocation.

Use a cot mattress that is clean, firm, flat (not elevated or tilted), that fits the cot correctly so your baby can't get trapped in a gap between the mattress and the edge of the cot. The mattress should preferably be new, or if used in good condition (no tears). It also should have a removable and washable cover.

Remember...

Face up, face free for a safe sleep.

8

Don't let your baby get too hot.

Overheating can increase your baby's risk of cot death. A baby can overheat when asleep because of too much bedding or clothes or because the room is too hot.

Cotton cellular blankets are best, as the tiny holes allow air to circulate. Don't wrap your baby in too many blankets. You can adjust the temperature by adding one or taking one away.



Do not use duvets, quilts or pillows.

Your baby should not wear a hat when being put down to sleep, as babies lose heat through their head.

To check how warm your baby is, look for sweating or feel their tummy, it should feel warm but not hot. Other signs include flushed or red cheeks and fast breathing.

Don't worry if your baby's hands and feet feel cool - this is normal.

Do not overdress your baby - a nappy, vest and babygro are sufficient, use less clothing in warmer weather.

If your baby has a fever use less bedding than normal and seek medical advice if necessary.

Make sure the room your baby sleeps in is a comfortable temperature - not too warm or too cold. The **room temperature** should range from **16-20°C** (62-68°F). Use a room thermometer so that you can easily check the temperature.

Never place the cot or pram next to a radiator, heater/fire or in direct sunlight.

Remember...

Overheating can increase your baby's risk of cot death.

9

Breastfeed your baby



Breastfeeding your baby reduces the risk of cot death. Aim to breastfeed your baby for as long as you can.

Some mothers like to bring their baby into bed to breastfeed. But pay careful attention to the advice on page 7 of this booklet.

It's safe to feed your baby in bed as long as you put them back in their own cot to sleep.

Soothers

Some research suggests that giving a baby a soother (dummy) every time they are being put down to sleep *may* reduce the risk of cot death.

If you choose to give your baby a soother, make sure you offer it to them **every time** they are going to sleep. But do not force it.

If you are breastfeeding and you choose to give your baby a soother, wait until after one month of age to make sure breastfeeding is well established.

Don't worry if the soother falls out while your baby is asleep.

Do not force your baby to take a soother if they refuse it.

Do not attach strings, ribbons or cords to soothers as these could strangle your baby or cause them to choke.

Keep soothers clean and never dip them in sugar, honey or other food and drinks.



10

Monitors

Apnoea or breathing monitors cannot prevent cot death. These monitors alert parents/carers to apnoea (stopped breathing) or an apparent life-threatening event.

If your baby seems unwell, get medical advice early and quickly.

If your baby seems unwell and you find it hard to tell whether the illness is something minor or more serious, seek medical advice from your doctor or public health nurse.

**IN AN EMERGENCY
PHONE 999 or 112
Ambulance • Fire • Gardaí**

Please note:
Cot death is still quite rare.
Don't let fear spoil this precious time
with your baby.



This booklet was produced by the National Paediatric Mortality Register in partnership with the HSE Child Safety Programme, Department of Public Health – Midlands.

If you would like more information please contact:

National Paediatric Mortality Register
George's Hall, Temple Street Children's University Hospital,
Temple Street, Dublin 1.
Tel: 01 8788455
npmr@cuh.ie
www.sidsireland.ie

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Copies of this booklet can be ordered from
www.healthpromotion.ie or from your Public Health Nurse.

Acutey Printers Ltd 7721239

Appendix 2 - HSE Safe Sleep Poster



The poster features a central image of a baby in a cot. Surrounding the image are six circular callouts with safety instructions. At the top, there are logos for the National Paediatric Mortality Register, HSE (with the text 'Inbheanacht na Seirbhíse Sláinte Health Service Executive'), and the Children's Health Ireland (CHI) logo. The title 'Safe Sleep for your Baby' is prominently displayed in large, bold, teal letters. At the bottom, there is a teal banner with the text 'Share this information with everyone who looks after your baby'. Below this banner, there are three columns of text: contact information for the National Paediatric Mortality Register, emergency contact numbers (999, 112, Ambulance, Fire, Gardai), and a website link for more information on child safety.

Safe Sleep for your Baby

Always place your baby on their back to sleep.

Make sure your baby's head and face stay uncovered when asleep.

Keep your baby smoke free during pregnancy and after birth.

The safest place for your baby to sleep at night is in a cot in your room.

Never fall asleep with your baby on a sofa or an armchair.

Breastfeed your baby if possible.

Share this information with everyone who looks after your baby

If you would like more information, please contact:
National Paediatric Mortality Register
Georgie's Hall, Temple Street Children's University Hospital, Temple Street, Dublin 1
Telephone: 01 878 8455 www.aidireland.ie

IN AN EMERGENCY
Phone 999 or 112
Ambulance • Fire • Gardai

Visit www.hse.ie/childsafety for more information on child safety and the prevention of injuries (accidents).

Appendix 3 - CHI Parent Information Leaflet

References

HSE: Safe Sleep for your Baby – Reduce the Risk of Cot Death 2017.

Available at: www.healthpromotion.ie/hp-files/docs/HPM00078.pdf

National Paediatric Mortality Register (2018) Annual Report 2018.

Available at: www.sidsireland.ie




Remember: Ask your nurse if you are unsure about anything about your child's care.

Additional instructions

Developed by Theresa Nyhan, CNF, St. Peter's Ward

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Children's Health Ireland

Information for teachers/ carers of a child

SAFE SLEEP FOR YOUR INFANT IN HOSPITAL



Children's Health Ireland

SAFE SLEEP GUIDELINES

Sudden Infant Death Syndrome is a leading cause of death of infants in Ireland.

Following the introduction of the Safe Sleep Guidelines in 1992 the incidences of these deaths have dropped by 63%.

The Safe Sleep Guidelines focus on safe sleeping practices within the home environment.

While your infant is acutely unwell, it may not be possible to follow all aspects of these guidelines.

This may be due to a variety of reasons, which will be advised to you by nursing or medical staff.

While in hospital it is important for you to follow the Safe Sleep Guidelines as closely as possible.

SAFE SLEEP ENVIRONMENT IN HOSPITAL

- Cot flat
- No pillows for any infant under two years
- Infant's head and face should remain uncovered during sleep
- Firm surface, only a single sheet should be under your infant
- Infant with feet at the end of the cot
- No toys or other materials in cot
- Avoid overheating
- If possible, use a cellular blanket



RAISED HEAD

- If your acutely unwell infant requires their head to be in raised position, please liaise with staff to 'tilt' the cot, pillows should never be used.

NESTS

- If a 'nest' has been recommended for your infant, they must be monitored at all times.
- When appropriate, nests will be removed under the guidance of nursing or physiotherapy staff. All nests should be removed prior to discharge home.

SWADDLE

- A swaddle wrap must be no higher than your infants' shoulders.

PLAY TIME

- When awake, it is important for your baby to experience other positions, such as side-lying and tummy time.
- When your infant is in these positions, it is important that they are supervised or monitored.

- Please liaise with nursing staff or your physiotherapist if you have any questions regarding this.

GOING HOME

When your infant's medical status begins to improve, all attempts to follow the Safe Sleep Guidelines should be made with the guidance of the nursing and medical staff.

The ultimate goal is for your infant to be following Safe Sleep guidelines prior to discharge.

Please contact your nurse or physiotherapist if you have any questions regarding safe sleep either in hospital or at home.

