

Infant safe sleep policy

BackPR

Fill in the [brackets], train every staff member and substitute who cares for babies before they start and give a copy to each baby's family. This policy follows AAP and NICHD Safe to Sleep guidance. Your state's licensing rules may require more, such as how often to check sleeping babies, so check them and ask your health consultant to review the policy before you use it.

Our policy

We follow the safe sleep recommendations of the American Academy of Pediatrics (AAP) and the Safe to Sleep campaign for every baby in our care until their first birthday, for every nap.

How we put babies to sleep

- On their backs, for every nap, every time.
- In their own crib, bassinet or play yard that meets current federal safety standards from the U.S. Consumer Product Safety Commission (CPSC). One baby per crib.
- On a firm, flat, level mattress with only a fitted sheet.
- With nothing else in the crib: no blankets, pillows, bumper pads, stuffed toys, positioners or wedges.
- Not in a car seat, swing, bouncer, stroller or sling, or on a couch or adult bed. If a baby falls asleep somewhere else, we move them to their crib as soon as it's safe to do so.
- Dressed for the room temperature, with the head and face uncovered. No hats indoors, and no bibs, necklaces (including teething necklaces) or clothing with ties or hoods.
- Sleep sacks: [Whether babies may wear a sleep sack (wearable blanket) for warmth.] We never use weighted sleep sacks, swaddles or blankets.
- Swaddling: [Your rule. Set it with your health consultant and your state's licensing rules. CFOC says swaddling isn't necessary or recommended in childcare, and some states don't allow it without a health care provider's written order. If you allow it, stop as soon as a baby starts trying to roll over.]
- Pacifiers: If you send one, we'll offer it at sleep time but won't force it. We never attach a pacifier to clothing, a stuffed toy or the crib.
- Rolling: Babies who can roll both ways on their own are still put down on their backs, and they can stay in the position they choose. If a baby rolls onto their tummy but can't yet roll back, we gently turn them onto their back.

Watching sleeping babies

- Staff can see and hear every sleeping baby at all times.
- The room is light enough for staff to see each baby's face, skin color and breathing.
- Staff check each sleeping baby every [number] minutes [or as often as our state's rules require] and write down each check.
- The room is smoke-free and vape-free, and kept at a comfortable temperature so babies don't get too hot.

Awake time

Babies get tummy time every day while they're awake and a staff member is watching.

If your baby needs a different sleep position

Back sleeping is safest for nearly all babies, including babies born early and babies with reflux. We place a baby in another position only with written instructions signed by the baby's health care provider, saying the position, the

medical reason and how long to use it [and only if our state's rules allow it]. We keep the instructions in your baby's file.

If a baby isn't breathing or won't wake up

- Shout for help and start infant CPR right away while another staff member calls 911 on speaker. If you're alone, call 911 on speaker and start CPR as the dispatcher guides you.
- Tell the director, then call the baby's parents or guardians.
- Keep the other children safe and supervised.
- Report it to [licensing agency] as our state's rules require, and fill out an incident report.

What families can do

- Tell us how your baby falls asleep and what helps them settle, so naps here feel familiar.
- Please don't send blankets, pillows, bumpers or stuffed toys for the crib.
- Tell us when your baby starts to roll over.
- Ask us if you have questions. You can also learn more at safetosleep.nichd.nih.gov.

Staff training

Every staff member, substitute and volunteer who cares for babies learns this policy before they start [and takes safe sleep training as our state requires]. We review it with staff [every year].

Policy review

Last reviewed (date and by whom) _____

Health consultant (name and phone) _____

Acknowledgment

Baby's name _____

Parent or guardian's printed name _____

I have received and read the infant safe sleep policy. Parent or guardian signature

Date _____

Free to use and change, but not legal or medical advice. Check your state's licensing rules and your insurer's requirements, and have a lawyer review any consent or waiver language.

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