



IDAHO DEPARTMENT OF HEALTH & WELFARE

Infant Safe Sleep Practices Tip Sheet for Idaho Child Care Providers

Federal law, and ICCP program rules, focus on promoting safe sleep practices for infants (0-12 months old) that reduce the risk of SIDS/SUID (Sudden Infant Death Syndrome/Sudden Unexplained Infant Death). These practices should be observed at all times, and will be required to successfully complete required health and safety inspections for all **ICCP** participating providers.

- **Follow current American Academy of Pediatrics recommendations concerning safe sleep practices including SIDS/SUIDS risk reduction.**
- **Supervise napping or sleeping children.**
 - Child care providers must be within sight or hearing of the children at all times, including nap time, and must be available and able to immediately assist a child in an emergency.
 - *Supervision by sight and hearing is always recommended.*
 - Napping children who are not within sight of a staff member, must always be within easy hearing distance.
 - All children (including the provider's children), asleep or awake, count towards ratio requirements.
 - Video equipment or baby monitors are not a substitute for supervision or monitoring.
- **All cribs, bassinets, "play pens," and "pack-n-plays" must be in good repair and approved by the Consumer Product Safety Commission (CPSC) as infant/toddler sleep devices.**
 - Bouncers, swings, car seats, hammocks, boxes, Boppy's, Bumbos, and Dock-a-Tots are NOT acceptable sleep devices.
 - If a child falls asleep in a device or location that is not acceptable for sleep, the child must be moved to CPSC approved sleep device.
 - Mattresses must fit snugly and be made specifically for the size crib in which they are placed.
 - Bed linens used under children on cots, cribs, and playpens must be tight-fitting.
- **Place an infant to sleep on their back, on a flat sleep surface.**
 - If an infant turns over while sleeping, the child care provider must return the infant to his or her back until the infant is able to independently roll from back to front and front to back.
 - *This developmental skill should be easily observed when an infant is awake or asleep.*
 - If there is a medical requirement for a child to be in *any* other sleep position, a physician's note (on professional letterhead with contact information for the medical doctor) must be on file at the facility, and made available to the inspector.
 - *A note from a physician is not an exclusion of liability for a child care provider.*

- **Sufficiently light the room to be able to observe skin color in case of changes.**
 - Monitor children’s breathing patterns through visual observation, and note any changes.

- **Allow infants to follow their own sleep patterns.**
 - Infants need to sleep when they are tired and not according to a schedule determined by the early learning provider.

- **Do not allow loose blankets, stuffed toys, pillows, crib bumpers, or similar items inside a crib.**
 - Infant sleep clothing, such as sleep sacks or pajamas, may be used to keep infants warm.
 - After an infant first exhibits signs of attempting to roll (around 3 months old), swaddling must not be used.
 - *The use of sleep sacks is recommended if swaddling is practiced.*
 - *Swaddling should be snug around the chest but allow ample room at the hips and knees to avoid hip dislocation or hip dysplasia.*

- **Items that pose a strangulation, fall, or entrapment hazard must be kept well out of an infant’s reach while in the crib, bassinet, or other approved sleep equipment.**
 - Carefully consider the placement of electrical cords, cords for blinds and shades, lamps, baby monitors, blankets, televisions, toys, blankets, towels, wall hangings, pictures, etc. to ensure that there is no way a child could reach them from their sleep location.
 - Do not use strings to hang any object (mobile, toy, diaper bag, etc.), on or near the crib.
 - Pacifiers may be used. However, pacifiers should not be clipped, pinned, or tied to an infant’s clothing, and they should not be tied around an infant’s neck, wrist, or other body part.

- **Do not allow a blanket or any other item to cover or drape over an occupied crib, bassinet, or other equipment where infants commonly sleep.**
 - Items draped over a crib impair an early learning provider’s ability to see and hear the infant.
 - Draped items could fall on top of infant creating a risk of suffocation or entanglement.

- **Do not allow clothing to cover any portion of an infant’s head or face while sleeping, and readjust these items when necessary.**
 - Clothing covering an infant’s head could impact their ability to breathe.

- **Prevent infants from getting too warm while sleeping. It is a good practice to dress an infant in one more layer of clothing than you are wearing to be comfortable in the same environment.**
 - Signs that an infant is too warm or in distress include, but are not limited to:
 - *Sweating*
 - *A sudden rise in temperature*
 - *Flushed, pale, or hot and dry skin, warm to the touch*
 - *Vomiting*
 - *Refusing to drink*
 - *Depressed fontanelle (“soft spot”)*
 - *Irritability*