Safe Sleep Instructor Workbook

September 23 & 24, 2021









Kansas Infant Death and SIDS (KIDS) Network Certified Safe Sleep Instructor Training Workbook

What is the KIDS Network?

The Kansas Infant Death and SIDS (KIDS) Network, Inc. serves those individuals who have been touched by the tragedy of infant death, including sudden infant death syndrome (SIDS), and those individuals or organizations who strive to reduce the risk of infant deaths by providing supportive services, community education, professional training, and supporting associated research. The KIDS Network was established as a 501(c)3 July 31, 1998.

The KIDS Network hosts numerous events throughout the state of Kansas each year to provide services, education and research support, including peer support groups, memorials, Safe Sleep Community Baby Showers, Step Up for KIDS 5k and memorial walk, Haley's SIDS Scramble golf tournament and the KIDS Network Safe Sleep Certification Training.

What is a certified Safe Sleep Instructor?

The KIDS Network Safe Sleep Instructor (SSI) program began in 2015. It was developed in collaboration with the University of Kansas School of Medicine-Wichita (KUSM-W) Department of Pediatrics Center for Research for Infant Birth and Survival (CRIBS). Initially funded by a pilot grant from the March of Dimes®, the project has also been supported by the Agency for Healthcare Research and Quality's (AHRQ), Kansas Department of Health and Environment, United Methodist Health Ministries, and generous donations to the KIDS Network.

This train-the-trainer program is intended to exponentially increase the number of professionals, families and caregivers who are educated about the American Academy of Pediatrics (AAP) Safe Sleep Recommendations. The overall objective of the program is to create a paradigm shift to where safe infant sleep is the normative behavior, with the ultimate goal of eradicating sleep-related infant death.

Through the program, SSIs are educated on the AAP Safe Sleep Recommendations (Moon 2016) in order to understand risk reduction strategies to decrease sleep-related infant deaths. SSIs are provided training infrastructure in order to educate parents/caregivers, childcare providers, first responders, health care providers, and other community members about infant safe sleep practices. SSIs are taught to serve as the voice for infant safe sleep by promoting it through standardized training and community outreach. Certification is awarded annually.

Advanced certification is available for SSIs who are interested in supporting their local hospital in achieving Cribs for Kids[©] Hospital Certification or working with a pediatric, obstetric or family medicine outpatient clinic to receive the KIDS Network Safe Sleep Star Certification.





ACTIVITY 1

American Academy of Pediatrics Safe Sleep Recommendations

Overview: Sleep-related infant deaths account for approximately 3,500 infant deaths each year in the United States (CDC 2020). Sleep-related deaths including those attributed to sudden infant death syndrome (SIDS; International Classification of Diseases, 10th Revision [ICD-10], R95), ill-defined deaths (ICD-10 R99), and accidental suffocation and strangulation in bed (ICD-10 W75). Risk factors, and in turn risk-reduction strategies, for these three classifications of deaths are very similar. Since the early 1990's, the American Academy of Pediatrics (AAP) has provided recommendations for infant sleep that can reduce the risk of all sleep-related infant deaths (Moon 2016a).

Activity: Review the 19 AAP Safe Sleep Recommendations in the table below. For each, consider how comfortable you are in your understanding of the recommendation, the science behind it, and your capacity to train others on it. In COLUMN 2, mark "YES" for the recommendations you feel confident about and "NO" for those you are less comfortable with. In COLUMN 4, write notes or questions about the recommendation.

After the training, review the AAP Safe Sleep Recommendations again. Are there any you still have questions about? Use COLUMN 3 to evaluate your comfort and COLUMN 4 to write any additional notes or questions.





ACTIVITY 1: AAP SAFE SLEEP RECOMMNEDATIONS REFLECTION

Recommendation Agreement/ Agreement/ Comments	
Understanding Understanding	
1. Back to sleep for ☐ YES ☐ NO ☐ YES ☐ NO	
every sleep.	
2. Use a firm sleep ☐ YES ☐ NO ☐ YES ☐ NO	
surface.	
3. Breastfeeding is ☐ YES ☐ NO ☐ YES ☐ NO	
recommended.	
4. Same room,	
separate bed.	
5. Keep soft objects	
and loose bedding	
away from the	
infant's sleep area.	
6. Consider offering Service S	
a pacifier at nap	
time and bedtime.	
7. Avoid smoke	
exposure during	
pregnancy and after	
birth.	
8. Avoid alcohol and See See See See See See See See See Se	
illicit drug use	
during pregnancy	
and after birth.	
9. Avoid	
overheating and head covering in	
infants.	
10. Pregnant	
women should	
obtain regular	
prenatal care.	
11. Infants should	
be immunized.	
12. Avoid the use of Service S	
commercial devices	
that are inconsistent	
with safe sleep	
recommendations.	

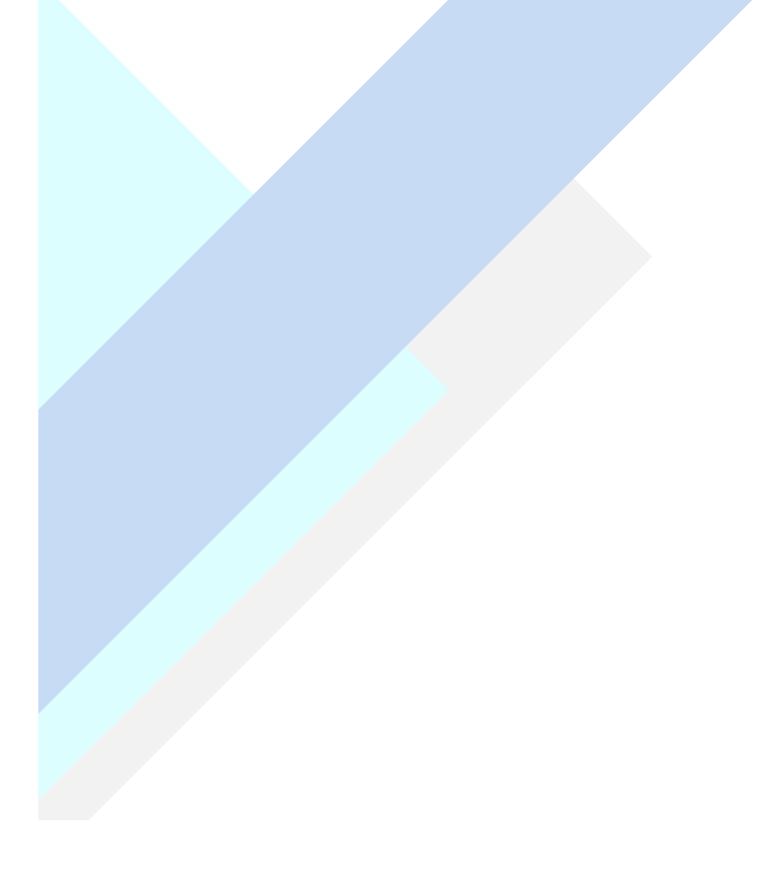




13. Do not use	☐ YES	\square NO	☐ YES	\square NO	
home cardio-					
respiratory monitors					
as a strategy to					
reduce the risk of					
SIDS.					
14. Supervised,	☐ YES	\square NO	☐ YES	\square NO	
awake tummy time					
is recommended.					
15. There is no	☐ YES	\square NO	☐ YES	\square NO	
evidence to					
recommend					
swaddling as a					
strategy to reduce					
the risk of SIDS.					
16. Health care and	☐ YES	\square NO	☐ YES	\square NO	
childcare providers					
should endorse and					
model risk-					
reduction					
recommendations					
from birth.					
17. Media and	☐ YES	\square NO	☐ YES	\square NO	
manufacturers					
should follow safe					
sleep guidelines in					
their messaging and					
advertising.					
18. Continue the	☐ YES	\square NO	☐ YES	\square NO	
"Safe to Sleep"					
campaign.					
19. Continue	☐ YES	\square NO	☐ YES	\square NO	
research with the					
goal of eliminating					
sleep-related					
deaths.					







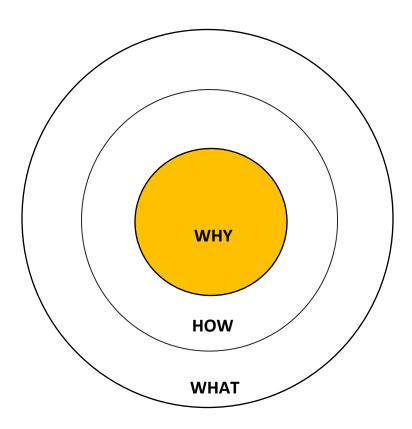




Safe Sleep Instructor: What's Your Why?

Background: Knowing your personal motivation for engaging in an activity or working on a specific issue is crucial because it helps remind you that what you are doing is really important. It also helps to orient your decision-making and to engage other in your cause.

Activity: Think about your reason for becoming a certified Safe Sleep Instructor. In the space provided, describe why promoting infant safe sleep is important to you in two to three sentences.



WHY – Your Purpose

Your motivation? What do you believe?

How – Your Process

Specific actions taken to realize your Why

What - Your Result

What do you do? The results of Why. Proof





ACTIVITY 2: MY WHY Why promoting infant safe sleep is important to me: Why promoting infant safe sleep is important to me (updated):





Professional Training

Purpose: Families are more likely to follow the AAP Safe Sleep Recommendations if they hear consistent messages, especially from professionals (e.g., Colson 2006; Von Kohorn 2010). However, while most professionals know and provide counseling about "Back to Sleep", many fail to address other recommendations, such as those regarding sleep surface, crib location or item in the sleep environment (e.g. blankets) (e.g., Eisenberg 2015; Hirai 2019). SSIs can provide training to ensure professionals know the AAP Safe Sleep Recommendations and can share advice on how to best communicate this information with families. Professionals should be trained annually to ensure they have the most current information.

Audience: The Professional Training is appropriate for anyone with a paid or volunteer position related to healthcare, public health, first responders or childcare. This training is <u>not</u> recommended for general audiences such as families, foster parents or babysitters.

Activity: Consider your community and the connections you have there. Who could benefit from the Professional Training? Write the name of the organization in COLUMN 2.

Once you have identified an organization, identify your contact person. Do you know someone within the organization who could organize or champion this training? If not, what are the titles or roles of people you could reach out to about the training? Write the name of the person or title of the position in COLUMN 3.

Finally, consider other factors that may impact your ability to provide a training to this group. Are there already meetings or conferences where you could present? Are continuing education credits required for this group? Make notes of these factors in COLUMN 4.





ACTIVITY 3: PROFFESIONAL TRAINING MAPPNG EXERCISE

Group	Organization	Contact	Comments
	Health C	Care Professionals	
Example: Hospital	ABC Hospital	Newborn Nurse	Nurses need CNE credits
Hospital			
Family Medicine Clinic			
Obstetrical Clinic			
Pediatric Clinic			
Other Healthcare			
	Public He	ealth Professionals	
Health Department Staff			
Home Visitation Program Staff			
Prenatal Education Program Staff			
Parenting Education Program Staff			
Child Protective Service Workers			
Other Public Health Workers			



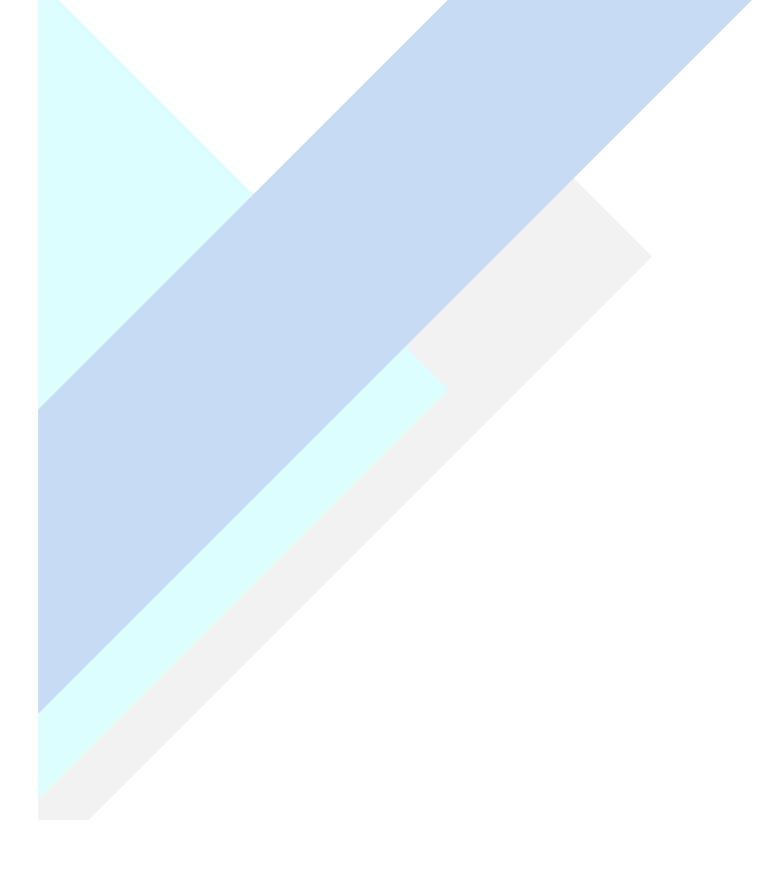


	First	t Responders	
Emergency Medical Technicians (EMTs)			
Firefighters			
Law enforcement*			
Other First Responders			
	Childca	re Professionals	
Licensed Childcare Centers			
Licensed Home Childcare			
Family/Friend			
Childcare Providers			
Other Childcare Providers			
		Other	

^{*} If a training is scheduled with law enforcement, consider having the KIDS Network provide additional Sudden Unexpected Death Investigation (SUDI) training.











Safe Sleep Crib Demonstration

Purpose: People have different learning styles that work best for them. Visual learners prefer to read or consult photographs or diagrams. Auditory learners retain information that is spoken, by themselves or others, while kinesthetic learners will retain more information if they have hands on experiences (Russell 2006). The Crib Demonstration is an opportunity to demonstrate how to create a safe sleep environment that can address all of the learning styles.

Below are pictures of what a safe sleep environment should look like for a Crib Demonstration. Only include the infant (doll) on its back, in appropriate clothing and wearable blanket, with only a pacifier in the sleep environment. Especially for visual learners, it is important to only show participants a safe environment as described above. Never place unsafe items in the crib. Instead, hold them up and describe why they are unsafe.

Items that should be discussed in a Crib Demonstrations include:

- ☐ Back position for every sleep
- ☐ Pacifier use to reduce the risk of SIDS
- ☐ Benefits of a wearable blanket
- ☐ Why pillows are risky
- ☐ Risk of loose blankets

- Overheating and why hats are not recommended
- ☐ Why placing burp cloths under the head is risky
- ☐ Risk of diapers/wipes in the crib

Figure 1. Swaddle appropriate for infants <2mo. of age who like to be swaddled

Figure 2. No swaddle for infants who have attempted to roll over, do not like to be swaddled, or are ≥2 mo. of age









Audience: The Crib Demonstration may be used with any audience. It is a required component of the Safe Sleep Community Baby Shower and Safe Sleep Crib Clinic. It is also often done in tandem with a Professional or Parent/Caregiver Training.

Depending on your audience there may be additional items you want to include in your crib kit. For example, in hospitals, bulb syringes are often seen in cribs on the newborn floor (Mason 2013), so might be included in a presentation to hospital staff. Grandparents often fail to recognize u-shaped breastfeeding pillows are unsafe for the infant sleep environment (Chesser 2019), so might be included when speaking to grandparents. Some groups or cultures may be more likely to have other specific items in the crib, such as stuffed animals.

Activity: Think about the group(s) you are most likely to present to about infant safe sleep. Are there other items that might be appropriate to include for a Safe Sleep Crib Demonstration for this audience?

ACTIVITY 4: CRIB KIT EXPANSION PLANNING

Group	Items
Example: Hospital Staff	Bulb syringe, tubing, turn sheet





Parent and Caregiver Safe Sleep Training

Purpose: Many families report never learning about the AAP Safe Sleep Recommendations (e.g., Eisenberg 2015). If they do receive safe sleep education, it is often incomplete or fails to address the reasons behind the recommendations (e.g., Hirai 2019; Pease 2021). SSIs can provide training to families and caregivers to ensure they know and understand the AAP Safe Sleep Recommendations. SSIs can also address both the "how" and the "why" of the recommendations and engage in conversations around the barriers to following safe sleep.

Audience: The Parent and Caregiver Training is appropriate for mothers, fathers, siblings, aunts, uncles, grandparents and other family members. It is also appropriate for foster parents, adoptive parents and babysitters, and may be used with community groups (e.g., health alliance, county commissioners). The training can be used with individuals or large groups. However, if training a pregnant or recently delivered woman, consider whether a Safe Sleep Crib Clinic, which includes breastfeeding and tobacco cessation/avoidance, may be more appropriate. This training is <u>not</u> recommended for professional audiences such as healthcare professionals, public health workers or childcare workers.

Activity: Consider your community and the connections you have there. Who could benefit from the Parent and Caregiver Training? Write the name of the organization in COLUMN 2.

Once you have identified an organization, identify your contact person. Do you know someone within the organization who could organize or champion this training? If not, what are the titles or roles of people you could reach out to about the training? Write the name of the person or title of the position in COLUMN 3.

Finally, consider other factors that may impact your ability to provide a training to this group. Are there already meetings or conferences where you could present? Are continuing education credits required for this group? Make notes of these factors in COLUMN 4.





ACTIVITY 5: PARENT AND CAREGIVER TRAINING MAPPING EXERCISE

Group	Organization	Contact	Comments
Example: Church	St. Mark	Pastor	Bible study group of young
			couples
Churches			
Parent Education			
Groups (e.g. Parents			
as Teacher)			
Informal Parent			
Groups			
Community Health			
Education Groups			
(e.g. Lunch and			
Learn)			
Tribal Leaders and			
Elders			
Sorority/Fraternity			
Members			
Girl Scout/Boy Scout			
Troops			





Safe Sleep World Café

Overview: The World Café Method is an innovative method of exploring real-life concerns and connecting diverse perspectives to harvest a shared knowledge. The format of the activity will allow for the identification of patterns and insights that contribute to collective discoveries. This opportunity for networking and sharing will also facilitate a deeper understanding of barriers to safe infant sleep and enhance confidence in addressing these barriers.

Activity: The Safe Sleep World Café will involve four rounds of discussion regarding barriers to following the AAP Safe Sleep Recommendations. The space below allows you to draw images, write thoughts or jot notes during the four rounds.

ACTIVITY 6: SAFE SLEEP WORLD CAFÉ

Rou	nd 1
Issues:	Ideas:





Rou	nd 2
Issues:	Ideas:





Rou	nd 3
Issues:	Ideas:





Rou	nd 4
Issues:	Ideas:





ACTIVITY 7

Addressing Safe Sleep Questions

Overview: The American Academy of Pediatrics (AAP) not only provides recommendations to reduce the risk of sleep-related infant deaths (Moon 2016), but also provides a detailed technical report that addresses the research supporting those recommendations (Moon 2016b). This resource can be very helpful in addressing questions from professionals and caregivers that you train.

Activity A: Review the AAP's Evidence Base for the 2016 recommendations (Moon 2016b) to help you address the questions in Table 7A. You can record the page number in the middle column to help you find the information again easily. If you are using a digital version of the report, consider searching key words. It is available at:

http://www.kidsks.org/uploads/4/9/1/4/49142465/peds.2016-2940.full. technical.pdf

Activity B: New products for infants are released all of the time and both professionals and parents/caregivers may ask you questions about the safety and appropriateness of these items for infant sleep. Use the Consumer Product Safety Commission website answer the product questions in Table 7B. The website is available at: https://www.cpsc.gov/

Activity C: Another great resource for addressing questions is the Safe Infant Sleep - Evidence-Based Facebook Group. Join the group and then check out the guides or tips to answer the questions in Table 7C.





ACTIVITY 7A: ADDRESSING SAFE SLEEP QUESTIONS WITH THE AAP TECHNICAL REPORT

Qu	estion	Page	Answer
		#	
1.	What does the AAP say about		
	pacifier use?		
2.	What should I say about		
	wearable blankets and if they		
	reduce SIDS?		
3.	Do home cardiorespiratory		
	monitors reduce SIDS?		
4.	Why doesn't the AAP		
	recommend bumper pads?		
5.	Do fans reduce SIDS?		
6.	How would you respond to		
	someone who wants to use an		
	infant sleep box?		
7.	Are bed-side sleepers		
	recommended for infant sleep?		
8.	Are hats recommended during		
	sleep?		

ACTIVITY 7B: ADDRESSING SAFE SLEEP QUESTIONS WITH THE CONSUMER PRODUCT SAFETY COMMISSION

Question		Answer
1.	Why was the Rock 'n Play	
	Sleeper recalled?	
2.	What does the CPSC say about	
	inclined sleepers for infant	
	sleep?	

ACTIVITY 7C: ADDRESSING SAFE SLEEP QUESTIONS WITH THE SAFE INFANT SLEEP - EVIDENCE-BASED FACEBOOK GROUP

Qı	uestion	Answer
1.	I am curious about the Nested	
	Bean Zen Sack. Is there anything	
	about it you might know?	
2.	What about using the Zipadee	
	Zip? Is it safe for infant sleep?	





Safe Sleep Training Decision Tree Scenarios

Purpose: It is important to provide the appropriate level of training for the learning needs of specific audiences. For example, professionals may be more interested in statistics and physiological research regarding sleep-related infant deaths than caregivers. As such, the KIDS Network has developed different presentations and corresponding data collection tools to meet the needs of specific audiences.

A decision tree has been developed to assist SSIs in determining the most appropriate training for a given situation. It is important to note that this decision tree was developed to cover the majority of SSIs trainings that have occurred in terms of settings and participants. Questions that cannot be determined based on the decision tree should be addressed by the SSI Director, for example, if a crib will be provided to a legal guardian/caregiver (e.g. grandparent).

Activity: Consider the scenarios below. What type of training would you provide? Use the decision tree on the next page to help you determine the most appropriate version of the training to use.

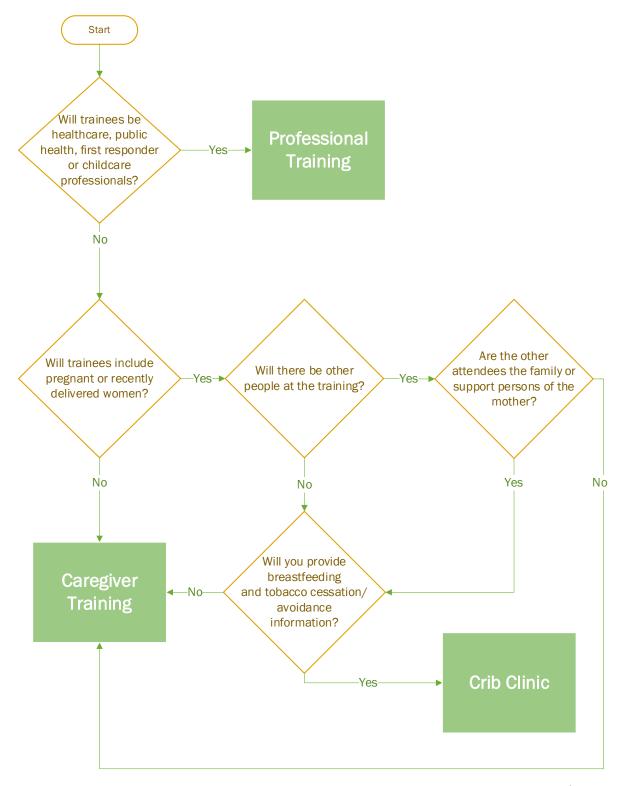
ACTIVITY 8: SAFE SLEEP TRAINING DECISION TREE SCENARIOS

Scenario 1: Foster care providers Training Type: Scenario 2: Pregnant women, fathers, other family members, and some community members all attending the same training Training Type: Scenario 3: Staff at a family practice medical clinic, including front desk staff, medical assistants, nurses and physicians Training Type: Scenario 4: Babysitters Training Type: Scenario 5: Pregnant woman and her support person Training Type:





SSI Training Decision Tree: SSIs are certified to provide several types of training, including Professional Training, Parent and Caregiver Training and Crib Clinics. The following decision tree can help you determine the appropriate training materials to use depending on your audience.







Safe Sleep Stories

Background: "Tell me a fact and I'll learn. Tell me the truth and I'll believe. But tell me a story and it will live in my heart forever." – Indian Proverb

Data moves systems, but stories move people. Effective instructors are able to use personal stories, shared experiences or meaningful stories from others in order to affect their audiences. Stories are so impactful because they engage our thinking and emotions, and even the creation of mental imagery (Green & Brock 2000). The experience of learners is to react to stories almost automatically, and, in a sense, participate in the action of the narrative (e.g., Polichak & Gerrig 2002).

Activity: Think about your personal experience, the experiences of those you know or a story you have heard about others' experience with infant safe sleep or with sleep-related infant death. Write down a story that you can share when you facilitate Safe Sleep Trainings.

ACTIVITY 9: MY SAFE SLEEP STORY					









Safe Sleep Community Baby Shower Planning

Purpose: Safe Sleep Community Baby Showers are grassroots events that were developed by the Wichita Black Nurses Association and the KIDS Network (e.g., Ahlers-Schmidt 2019; 2020) to address sleep-related deaths. The goal of the Safe Sleep Community Baby Showers is to use the culture and tradition of such events (Moon 2016c) to engage pregnant and recently delivered women from high-risk communities. Along with education, resources to create a safe sleep environment are often provided, including a portable crib and wearable blanket. The anticipated results are that participants will know: (1) to place their infant supine for every sleep; (2) to place infants on a safe sleep surface (i.e., crib); (3) to remove all loose bedding from the sleep area; (4) there is risk reduction related to breastfeeding and resources to support it; (5) there is increased risk with tobacco exposure and ways to avoid it; and (6) strategies for self-care and the importance of addressing mental health concerns.

Audience: The Safe Sleep Community Baby Shower is for groups of pregnant or recently delivered women and their support people. Priority should be given to addressing those in the community with the highest risk factors for sleep-related death.

Activity A: Committee. Consider your community. Who could collaborate with you to host a Safe Sleep Community Baby Shower? Write the name of the person in COLUMN 1. Consider why they would want to participate in the planning committee and add this to COLUMN 2. This information can help you connect with their "why" when you ask them to join. Also consider what they can bring to the table to help make the event a success. Do they have great event planning skills? Access to space to hold the event? Include your thoughts on this in COLUMN 3.

Activity B: Locations. Think about your community. What locations might be best to hold the event. COLUMN 1 has some ideas to get you started. You can add organization names and contact people to COLUMNS 2 and 3, respectively. For COLUMN 4, look at example layouts on the following page. Finally, in the last two COLUMNS, include important information such as cost, availability, capacity, and other considerations to help you decide which location is best.

Activity C: Volunteers. Volunteers for the event are a critical part of its success. Think about how many volunteers you will need. Are there organizations or groups you could contact about volunteering? Consider the ideas in COLUMN 1. COLUMNS 2 and 3 have space to add organizations and contacts, while COLUMN 4 can be used to include other notes.

Activity D: Information and Community Organizations. Whether you are holding a Safe Sleep Community Baby Shower for 5 families or 150 families, you will want to connect participants to other organizations, such as insurance resources, maternal and child health programs, and childcare resources. Consider the resources available in your community. Again, COLUMN 1 has some ideas to get you started. You can add organization names and contact people to COLUMNS 2 and 3, respectively.





ACTIVITY 10A: BABY SHOWER PLANNING COMMITTEE

Who?	Why is Safe Sleep or Maternal Child Health important to them?	What can they bring to the table?	Comments
Example: Jane Doe	Expecting 1 st	Has planned great	Might ask book club
	grandchild	parties and events	to volunteer or
			donate





ACTIVITY 10B: SAFE SLEEP BABY SHOWER POTENTIAL LOCATIONS AND LAYOUTS

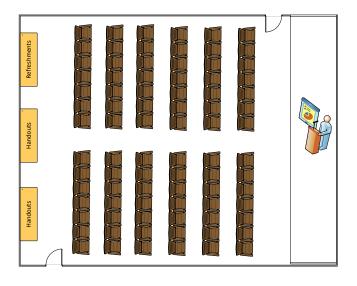
Location	Organization	Contact	Layout	Cost	Comments
Example: Community Center	ABC Community Center	Activities Director	B (see next page)	Free	Holds 100 people; only available the 3 rd Saturday
Community Center					
Church					
School					
Library					
Civic Organizations					



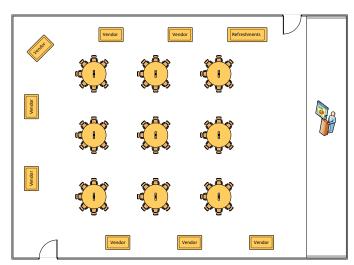


LAYOUT IDEAS

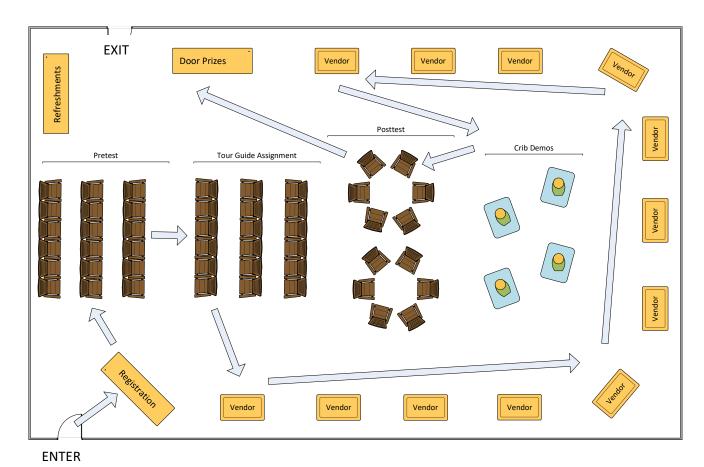
A. Auditorium or Classroom



B. Gymnasium with Tables



C. Large Gymnasium with Tour Guides









ACTIVITY 10C: SAFE SLEEP BABY SHOWER POTENTIAL VOLUNTEERS

Volunteers	Organization	Contact	Comments
Example: Students	ABC College	Instructor	Offered to provide students extra credit for volunteering
University, College or High School Students			
Organizations Serving Priority Groups			
Church Groups			
Sororities/Fraternities			
Athletic Groups			
Coworkers			
Friends/Family			
Public Safety Workers			





ACTIVITY 10D: SAFE SLEEP BABY SHOWER INFORMATION AND COMMUNITY ORGANIZATIONS

Topic/Organization	Organization	Contact	Comments
Example: Safe Sleep	Health Department	Safe Sleep Instructor	Offered to provide cookies for participants
Safe Sleep*			
Breastfeeding*			
Tobacco*			
Perinatal Mental Health*			
Health Insurance			
Delivery Hospital or Birth Care Center			
Health Department (WIC, MCH, Home Visiting)			
Prenatal/Parenting Education			
Licensed Childcare			

^{*} Required





REFERENCES

- Ahlers-Schmidt CR, Schunn C, Engel M, Dowling J, Neufeld K, Kuhlmann S. Implementation of a Statewide Program to Promote Safe Sleep, Breastfeeding and Tobacco Cessation to High Risk Pregnant Women. J Community Health. 2019 Feb;44(1):185-191. doi: 10.1007/s10900-018-0571-4. PMID: 30187364.
- Ahlers-Schmidt CR, Schunn C, Hervey AM, et al. Redesigned community baby showers to promote infant safe sleep. Health Education Journal. 2020;79(8):888-900. doi:10.1177/0017896920935918
- Centers for Disease Control and Prevention (CDC). Sudden Unexpected Infant Death and Sudden Infant Death Syndrome: Data and Statistics. Available at: https://www.cdc.gov/sids/data.htm. Last updated: 2020 Nov 10. Last accessed: 2021 May 14.
- Chesser AK, Ahlers-Schmidt CR, Schunn C. Grandparent Knowledge of Infant Safe Sleep. Glob Pediatr Health. 2019 May 31;6:2333794X19852008. doi: 10.1177/2333794X19852008. PMID: 31211184.
- Colson ER, Levenson S, Rybin D, et al. Barriers to following the supine sleep recommendation among mothers at four centers for the Women, Infants, and Children Program. Pediatrics. 2006; 118(2). Available at: www.pediatrics.org/ cgi/content/full/118/2/e243 8.
- Eisenberg SR, Bair-Merritt MH, Colson ER, Heeren TC, Geller NL, Corwin MJ. Maternal report of advice received for infant care. Pediatrics. 2015;136(2):e315–e322pmid:26216322
- Green, M. C., & Brock, T. C. (2000). The role of transportation in the persuasiveness of public narratives. Journal of Personality and Social Psychology, 79, 401-421.
- Hirai AH, Kortsmit K, Kaplan L, Reiney E, Warner L, Parks SE, Perkins M, Koso-Thomas M, D'Angelo DV, Shapiro-Mendoza CK. Prevalence and Factors Associated With Safe Infant Sleep Practices. Pediatrics. 2019 Nov;144(5):e20191286. doi: 10.1542/peds.2019-1286. PMID: 31636142.
- Mason B, Ahlers-Schmidt CR, Schunn C. Improving safe sleep environments for well newborns in the hospital setting. Clin Pediatr (Phila). 2013 Oct;52(10):969-75. doi: 10.1177/0009922813495954. PMID: 23872346.
- Moon RY, TASK FORCE ON SUDDEN INFANT DEATH SYNDROME. SIDS and Other Sleep-Related Infant Deaths: Updated 2016 Recommendations for a Safe Infant Sleeping Environment. Pediatrics. 2016a Nov;138(5):e20162938. doi: 10.1542/peds.2016-2938. Epub 2016 Oct 24. PMID: 27940804.
- Moon RY; TASK FORCE ON SUDDEN INFANT DEATH SYNDROME. SIDS and Other Sleep-Related Infant Deaths: Evidence Base for 2016 Updated Recommendations for a Safe Infant Sleeping Environment. Pediatrics. 2016b Nov;138(5):e20162940. doi: 10.1542/peds.2016-2940. PMID: 27940805.





- Moon RY, Hauck FR, Colson ER. Safe Infant Sleep Interventions: What is the Evidence for Successful Behavior Change? Curr Pediatr Rev. 2016c;12(1):67-75. doi: 10.2174/1573396311666151026110148. PMID: 26496723.
- Pease A, Garstang JJ, Ellis C, et al. Decision-making for the infant sleep environment among families with children considered to be at risk of sudden unexpected death in infancy: a systematic review and qualitative metasynthesis. BMJ Paediatrics Open 2021;5:e000983. doi:10.1136/bmjpo-2020-000983
- Polichak, J.W., & Gerrig, R.J. (2002). Get up and win: Participatory responses to narrative. In Green, M. C., Strange, J. J. & Brock, T. C. (Eds.), Narrative impact: Social and cognitive foundations, (pp. 71-96). Mahwah, NJ: Erlbaum.
- Russell SS. An overview of adult-learning process. Urologic Nursing. 2006 Oct;26(5):349-370.
- Simon Sinek. How Great Leaders Inspire Action. Ted Talk. Available at: https://www.ted.com/talks/simon sinek how great leaders inspire action?language=en
- Sinek S. Start with Why: How Great Leaders Inspire Everyone to Take Action. Portfolio;
 Illustrated Edition (December 27, 2011).
- Von Kohorn I, Corwin MJ, Rybin DV, Heeren TC, Lister G, Colson ER. Influence of prior advice and beliefs of mothers on infant sleep position. Arch Pediatr Adolesc Med. 2010;164(4):363-369.
- World Café Method. Available at: http://www.theworldcafe.com





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