

Perinatal/Infant Health Objective 2.2 Safe Sleep Initiatives

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REPORT – October 2021 through September 2022

KIDS Network Infrastructure & Family Support: Title V continues to focus on reducing Sudden Unexpected Infant Death (SUID) rates through safe sleep education and professional trainings/resources offered to local MCH agencies, home visiting programs, hospitals, childcare facilities, and other providers to support safe sleep practices and accurate, consistent safe sleep messages across all sectors in a community. Consistent and current safe sleep education and messaging is critical as we strive to eradicate unsafe sleep practices. Title V has maintained a contractual partnership with the <u>Kansas Infant Death and SIDS (KIDS) Network</u> to reduce infant mortality, specifically with a focus on continued implementation of a comprehensive statewide safe sleep approach.

Safe Sleep Network Infrastructure: Title V provides organizational infrastructure support for the KIDS Network Executive Director and support staff. Safe sleep education and promotion is the predominant focus of the Network's outreach activities, including Safe Sleep Community Baby Showers, Safe Sleep Instructor (SSI) certification trainings, Crib Clinics, dissemination of Safe Sleep education materials and tools (such as, safety approved cribs and wearable blankets), and other health and childcare provider education/training opportunities.

In FY2022, the KIDS Network, in collaboration with their certified SSIs and other partners, assisted 33 Kansas counties in implementing their "Safe Sleep Strategy" to reduce infant mortality. This includes: 49 Safe Sleep Instructor Certifications, 23 Community Baby Showers, 97 Crib Clinics, Safe Sleep Trainings to 67 Parent/Caregivers and 56 Professionals (through Safe Sleep Hospital Certification, Provider Safe Sleep Star Program, and the Provider Outpatient Toolkit trainings). These initiatives are instrumental in providing shared safe sleep messaging and education across the state.



A total of 27,601 individuals were trained on safe sleep and bereavement through presentations at hospitals, universities, online education system (KS Train), conferences, and outreach activities including professional

meetings, community events, social media and KIDS Network events (e.g., Susan E. Bredehoft Candle Lighting, Haley's SIDS Scramble, Step Up for KIDS). Due to continuing health concerns related to COVID-19, health and safety restrictions remained in place to limit transmission of the virus; thus, trainings were held inperson (n=94, 76%) and virtually (n=29, 24%).

Safe Sleep Instructor (SSI) Program: Each year, the KIDS Network hosts two SSI Certification Trainings to certify professionals and caregivers as educators on safe sleep best practices. The curriculum was developed based on the updated 2022 American Academy of Pediatrics (AAP) recommendations and updated annually based on current research and recommendations. Topics discussed in this training include diagnosis and disparity of sleep-related deaths, including sudden infant death syndrome (SIDS), Accidental Suffocation and Strangulation in Bed and undetermined causes of infant death. Training planning with SSI faculty began in the summer of 2022, with monthly meetings. The updated AAP Safe Sleep Recommendations were released in July 2022. Materials including presentations, handouts, the workbook, and evaluation tools were updated to reflect the most recent AAP recommendations. Changes included but were not limited to recommendation for non-inclined sleep surface; utilization of inclusive language (e.g., breast or chest feeding); expansion of "why" behind recommendations; and risks of bedsharing based on infant/parent characteristics. Topics addressed included diagnosis of sleep-related deaths, including SIDS; data trends and disparities in sleep-related infant deaths; safe sleep location, surface, environment, and position; risks of smoking and protective quality of breastfeeding; recommended practices related to temperature regulation and pacifiers; messaging strategies; maternal mental health; and details on the 2022 recommendation changes compared to the 2016 recommendations. Attendees learned to provide a 1-hour safe sleep training, a Safe Sleep Crib Demonstration, and host a Safe Sleep Community Baby Shower or Crib Clinic. Instruction was also provided on data collection, data entry, and grant writing. Following training, SSIs are certified (three levels - Gold, Silver, Bronze) to educate parents/caregivers, childcare providers, health care providers and other members of their communities about safe sleep practices.



KIDS Network continues to provide technical assistance to SSIs to ensure consistent messaging and continuity of existing supports. FY22 SSI certification trainings were provided in-person to assure the continuation of efforts as pandemic precautions ensued training faculty continue to implement the following COVID-19 safety guidelines: Recommended mask wearing; assigned seating, with 6 ft. between individual seating locations; hand sanitizer; prepacked lunch and snacks; routine cleaning of the training area. Enrollment was reduced to 50% usual capacity to allow for adequate social distancing. The smaller cohort also allows SSI faculty to better facilitate small group discussions and hands on activities.

In addition to updating all SSI certification training materials, the KIDS Network also updated the SSI web portal, videos, posters, crib cards, postcards, and social media pages. The executive director presented at numerous conferences and workshops updating state agencies, public health entities, hospitals, early childhood programs and child abuse prevention programs across the state on the updated safe sleep recommendations.

Community Baby Shower (CBS) Model: This model goes beyond the traditional health fair by providing education, service access and data to measure the effectiveness of the strategy. A memorandum of understanding was established by the BFH, KIDS Network, KBC, and the Bureau of Health Promotion/KS Quitline to collaboratively support the CBS model statewide through staffing, education, and the provision of resources and referrals. This brings together key lead agencies to help provide consistent safe sleep messaging and comprehensive services to a greater reach of perinatal people and their support individuals. This multi-agency approach also supports cross-sharing of accurate and reliable information related to safe sleep, breastfeeding, mental health, and tobacco cessation. Goals established for each of these priority areas include:

- Safe Sleep: increase education and adherence of safe sleep practices (e.g., back position only, safe location, no unsafe items in bed)
- Tobacco Cessation: identify three or more ways to avoid secondhand smoke; identify at least three tobacco cessation resources
- Breastfeeding: increase confidence in ability to breastfeed for at least 6-months; identify at least three resources for breastfeeding support
- Maternal Mental Health: increase understanding of perinatal mood and anxiety disorders (PMADs) as a potential complication of pregnancy and the postpartum period; identify strategies for reducing PMAD symptoms; identify at least three external resources for PMAD support

A total of 968 individuals attended these CBS events. Of those, 675 pregnant or postpartum people were educated about safe sleep, breastfeeding, maternal mental health and tobacco cessation through demonstrations at KIDS Network Safe Sleep CBS/Crib Clinics. Kansas Pregnancy Risk Assessment Monitoring System (PRAMS) data shows improvement of infants being placed to sleep "mostly on the back" from 80.2% in 2017 to 82.2% in 2021, suggesting that the years of safe sleep collaboration and work is resulting in positive change. During the COVID-19 pandemic, many communities began offering local CBS events virtually. KIDS has provided support and technical assistance to local SSIs on adapting this model to a virtual format. Review of evaluation results from this format was completed to determine its effectiveness and practicality for continuation beyond the pandemic. Although in both event formats most participants reported being more confident regarding safe sleep practices, avoiding secondhand smoke, breastfeeding, their ability to follow safe sleep recommendations even when receiving conflicting advice, and recognizing the signs and symptoms of perinatal depression or anxiety, the data showed less posttest response from those attending virtual crib clinics. Further interpretation of results indicate that virtual events may also further marginalize groups who are at high risk for poor birth outcomes. Strategies to increase technology access, recruit priority populations, and ensure disparities are not exacerbated have been addressed through in-home visits for delivery of the safety-approved crib and wearable blanket. QR codes have also been designed to ease the completion of both pre and post-tests.

The SSI training is also being evaluated using the RE-AIM framework. Reach, effectiveness (R-E) and maintenance (M) are evaluated at SSI certification trainings and recertification webinars. Outcomes related to adoption and implementation (A-I) are assessed following the trainings. To enhance the success of future SSI Trainings, the following action steps have been implemented:

- Reach:
 - o Continue to promote the training at conferences and meetings.
 - Continue to engage in targeted outreach by identifying and connecting with early childhood education, other home visiting programs, and child protective services.
- Effectiveness:
 - Based on feedback from the new SSI trainees, the SSI certification pre- and post-tests have been modified to address language that was unclear or confusing.
- Adoption:
 - The number of SSIs who complete the post-certification requirements has decreased since COVID-19; in addition, those facilitating hospital or outpatient clinic certifications remains low. As such, we have restructured to provide increased support. The executive director oversees

the outpatient clinic certifications, which increases the amount of support the program director provides to SSIs related to professional trainings, caregiver trainings, Safe Sleep CBS/Crib Clinics and hospital certifications.

- o Develop and disseminate an SSI Newsletter with SSI spotlight in each issue.
- SSI Director coordinates English and Spanish Safe Sleep Virtual Crib Clinics for SSIs to facilitate. This assists SSIs in meeting recertification requirements.
- SSIs are being asked to co-present with SSI faculty of the SSI Program at state conferences.
- The SSI faculty are working to link SSIs with funding opportunities (e.g., injury prevention grants, MCH Title V funding, early childhood grants and families first funding).
- o The SSI director works with SSIs on promotion, reorganization, and incentives.
- An awards program to highlight and recognize SSIs will be included in the KIDS Network's 25th Anniversary celebration in 2023.
- Implementation:
 - Historically the same pre- and post-tests have been used for the SSI certification training and the SSI-led professional trainings. New SSI trainees noted some groups they planned to train, especially childcare workers, may struggle with the high readability and complexity of the questions. As such, the evaluation team modified the assessment tools for the SSI-led professional training to be simpler and at a lower readability level.

Hospital Safe Sleep Certification Program: The Safe Sleep Hospital Certification initiative was developed by Cribs for Kids to identify and recognize hospitals that demonstrate a commitment to community leadership for best practices and education on infant sleep safety. SSIs who complete all training requirements can participate in the Safe Sleep Hospital Certification Program to promote safe sleep education in hospitals and hospital systems.



Safe Sleep Star Outpatient Toolkit – SSIs who complete all training requirements can participate in the Safe Sleep Star Program to promote safe sleep education in outpatient clinics (e.g., obstetrics, pediatrics, family medicine).

The Safe Sleep Star Outpatient Toolkit was launched in FY18 to address infant mortality by providing implementation strategies to help outpatient maternal and infant healthcare providers improve safe sleep promotion utilizing evidence-based/informed practices, including the <u>Safe Sleep Toolkit</u> targeted to health care providers. To maintain the earned stars, practices must continue to report compliance on an annual basis. Practices may upgrade their status at any time a higher level is reached. The certification program identifies three designations: bronze, silver, and gold. These are explained in the following image.

KIDS Network Safe Sleep Star: Levels for Outpatient Clinics



Limitations associated with the pandemic slowed progress with the certification program. Many clinics halted or slowed the process due to restrictions on visitors being allowed to present non-mandatory trainings. These barriers have been assessed and contact has been made with 19 clinics in 13 counties (Geary, Shawnee, Johnson, Saline, Coffey, Harvey, Hodgeman, Leavenworth, Lyon, Reno, Riley, Crawford and Sedgwick). The executive director is working with a pediatric consultant and local SSIs to increase implementation across the state.

Examples of impact of the above strategies and initiatives, from the FY22 Instructor-Led Training Annual Report (published July 2022) produced by the Center for Research for Infant Birth and Survival (CRIBS), KIDS Network evaluator, highlight the following changes pre-to-post education intervention evaluation:

	Pre-Survey (n=173) n (%)	Post-Survey (n=170) n (%)	Total Change P
Anticipated sleep position			p<0.001
Back only	148 (86)	166 (98)	
At least one unsafe position	25 (14)	4 (2)	
Anticipated sleep locations			p<0.001
Only safe locations (crib or bassinet only)	124 (72)	159 (94)	
At least one unsafe location	49 (28)	11 (6)	
Anticipated crib items			p<0.001
Only safe items (firm mattress, fitted sheet, or wearable blanket only)	104 (60)	156 (92)	
At least one unsafe item	69 (40)	14 (8)	
Have or plan to discuss safe sleep with others			p<0.001
Yes	113 (65)	167 (98)	
No	60 (35)	3 (2)	

Table 2. Changes in Intended Safe Sleep Practices

*p-value <.05 indicates statistically significant difference between pre and post-survey responses.

	Pre-Survey n (%)	Post-Survey n (%)	Total Change	
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Anticipated sleep position				
Back only	454 (85)	521 (97)	< 0.001*	
At least one unsafe position	81 (15)	14 (3)		
Anticipated sleep locations			< 0.001*	
Only safe locations (crib or bassinet only)	487 (88)	535 (97)		
At least one unsafe location	65 (12)	17 (3)		
Anticipated crib items			< 0.001*	
Only safe items (firm mattress, fitted sheet, or wearable blanket only)	372 (73)	487 (95)		
At least one unsafe item	138 (27)	23 (5)		
Have or plan to discuss safe sleep with others			< 0.001*	
Yes	378 (69)	544 (99)		
No	167 (31)	1 (1)		
Know at least one person who will support Safe Sleep			N/A	
Yes		548 (99)		
No		5 (1)		

Note. Missing data: anticipated sleep position (n=24); anticipated sleep location (n=7); anticipated crib items (n=49); talk to others (n=14); support safe sleep (n=6).

*p-value < .05 indicates statistically significant difference between pre- and post-survey responses.

Additional examples, from the FY22 Safe Sleep Community Baby Shower and Crib Clinic Report (published July 2022) produced by the Center for Research for Infant Birth and Survival (CRIBS), KIDS Network evaluator, highlight the following changes pre-to-post education intervention evaluation:

		Pre-Test Score	Post-Test Score	Change
Concept	Question	N (%)	N (%)	(%)
Diagnosis	SIDS, a form of sleep-related death, is:	443 (72)	496 (79)	7
Location	The American Academy of Pediatrics states the safest place for an infant to sleep is:	200 (32)	349 (56)	24
Position	Per the American Academy of Pediatrics, infants should be placed on their to sleep:	541 (86)	615 (98)	12
Environment	The recommended infant safe sleep environment includes which of the following:	538 (86)	609 (97)	11
Environment/ Tobacco	Recommendations to reduce sleep-related death include:	286 (46)	528 (84)	38
Breastfeeding	Which statement is true regarding the relationship between SIDS and breastfeeding?	554 (88)	591 (94)	6
Pacifier	Because of concern that pacifiers will interfere with breastfeeding initiation many health care providers recommend:	298 (48)	512 (82)	34
Swaddling/ Temp	Recommended options for controlling a baby's temperature at home during sleep include:	449 (72)	585 (93)	21
Multiples	Which statements is NOT an American Academy of Pediatrics safe sleep recommendation?	492 (79)	580 (93)	14
Messaging	Evidence suggests the most effective strategy to influence parents to follow the safe sleep guidelines is:	495 (79)	506 (81)	2

Table 3. Comparison of Trainees Pre- and Post-Survey Performance by Question

Kansas Perinatal Community Collaboratives / Becoming a Mom[®]: Training on the SIDS/Safe Sleep integration component is recorded and available online for new KPCCs preparing to implement the BaM curriculum, as well as new BaM facilitators. Annual review and updates to the safe sleep content in the BaM curriculum and associated implementation resources are made in partnership with the KIDS Network. Updates during this reporting period focused on updated guidance from the AAP, more information on the updates can be found in the Safe Sleep Instructor (SSI) Program section above. Updates to Safe Sleep

posters and magnets are underway, as well as translation and creation of equivalent resources in Spanish. Printing is hoped to be completed by the end of calendar year 2022, for early 2023 distribution to KPCC sites, as well as to all local Title V supported programs and partnering WIC, Title X, MICEHV, TPTCM and PMI programs. To support messaging within the BaM curriculum, program incentives align with recommendations and guidelines. Every site includes the pack-n-play crib distribution as part of the incentive-based program, which provides a safety-approved crib for expectant mothers with limited resources.

2021 BaM outcome data showed significant improvement in knowledge and intentions for safe sleep position (87.2% "On his/her back ONLY" to 94.3%) and location (91.0% "In a crib/basinet or portable crib ONLY" to 97.3%) following the provided education (Figures 39 and 40).



In 2020, in an effort to determine if parents/caregivers were following through with intentions expressed during their pregnancy, KDHE began gathering data on actual sleep position through participant feedback following their infant's birth via the BaM Birth Outcome Card. This evaluation data, included in the 2021 BaM State Aggregate Report, showed even greater improvement in knowledge and intended behavior among those who initially reported an intended sleep position and location that was not recommended as safe (Figures 41 and 42).



Local MCH Agencies:

- Barton County Health Department's DAISEY reports show 337 instances of Safe Sleep education provided in the reporting period. They met their goal of holding two CBS during the year. They held one at the beginning of the year and one at the end and saw increased attendance at the second event, due in part to earlier and increased promotion on social media. They partnered with the local fire department's safe sleep instructor to provide education at the events. They also received a grant to purchase cribs and smoke detectors for baby shower participants. They educated individual clients during their 3rd trimester and gave them the book "Sleep Baby Safe and Snug". Barton County Health Department met with their local hospital to assist them with becoming a safe sleep certified facility.
- Kearny County Hospital's DAISEY reports show 822 instances of Safe Sleep education provided in the reporting period. Education was provided during prenatal classes and one-on-one prior to discharge from the hospital. They saw an increase in patients from Eastern Colorado due to Lamar's Hospital closing their OB unit. They are the closest delivering facility for much of Eastern Colorado within a 2hour radius.

- Leavenworth County Health Department's DAISEY reports show 88 instances of Safe Sleep education
 provided in the reporting period. There is not a hospital in Leavenworth County that provides OB care.
 100% of clients were provided with Safe Sleep information during their prenatal care, which was
 consistent with their baseline. Education was provided both verbally and in the form of information
 sheets.
- Rooks County Health Department's DAISEY reports show 9 instances of Safe Sleep education
 provided in the reporting period. They provided the community education on Safe Sleep through social
 media posts, during home visits, and during well infant appointments. They were also able to provide
 sleep sacks to home visiting clients. One client had moved to the area from Dallas, TX and was a new,
 first-time mom. She didn't have any family around or support from the baby's father. Health
 department staff helped her obtain a cell phone so she could communicate with them any time she
 needed assistance. She called the health department once a week to ask questions and gain
 reassurance.
- Sedgwick County Health Department's DAISEY reports show 376 instances of Safe Sleep education provided in the reporting period. Their Healthy Babies home visiting program completed a safe sleep assessment with each family. Families who scored negative for a safe sleep environment were provided a pack and play, education, and a referral to meet with a Safe Sleep Instructor.
- Saline County Health Department's DAISEY reports show 275 instances of Safe Sleep education provided in the reporting period. All clients served by MCH/BaM programs received safe sleep education to include risk factors such as smoking, drinking, illegal drug use, positioning of the infant, items in the crib, and examples of unsafe sleep environments. They presented a program on infant mortality and safe sleep on KSAL radio in October. 1:1 safe sleep crib clinics/demonstrations were provided to five mothers during this reporting period.
- Crawford County Health Department (TPTCM Agency) reports 100% of clients were offered the In Joy Videos titled "Positive Discipline" Volumes 1-3, as well as the Safe Sleep video in SFY2022. Educational material was printed out and distributed to clients. The case manager provided handouts at visits on topics such as prenatal care, postpartum depression/ depression and anxiety, and infant care and post maternal warning signs to name a few more. The agency also ensured all clients of TPTCM had initiated first trimester prenatal visits according to ACOG guidelines.

PLAN – October 2023 through September 2024

KIDS Network Infrastructure & Family Support: To promote and support safe sleep practices and crosssector initiatives to reduce the sudden unexplained infant death (SUID) rate, Title V will continue the strong partnership with the <u>Kansas Infant Death and SIDS (KIDS) Network</u> through organizational infrastructure support and to strengthen/enhance the KIDS <u>Network Safe Sleep Strategy</u> which includes: Safe Sleep Instructor (SSI) Certification Project; Safe Sleep Community Baby Showers; Safe Sleep Hospital Certification Program; and Safe Sleep Star Certification Program.

This will be accomplished by providing technical assistance, advanced training opportunities, and annual reporting requirements for each of these certifications or program models. During the COVID-19 pandemic and recovery period, little traction was made in expanding these models in the state. Reenergizing these efforts will be an ongoing focus during FY24.

MCH-KIDS Network-Becoming a Mom[®] (*BaM*) *Program-Kansas Perinatal Community Collaboratives* (*KPCC*) *Collaboration:* While our efforts to provide training opportunities, curriculum content and other resources across programs to ensure message consistency have been very successful over the past several years, we are committed to continuing this work in FY24. Safe sleep curriculum, PowerPoints, lesson and

activity plans, as well as other resources originally developed for the BaM group prenatal education program, will continue to be adapted and shared for implementation in other settings and with disparity populations. Special focus will be given to developing a version of these resources for low-literacy populations. Integration efforts between BaM and MCH programs such as home visiting, Teen Pregnancy Targeted Case Management and Pregnancy Maintenance Initiative will be a focus of the Perinatal/Infant (P/I) Health Consultant workplan in FY2024. Safe sleep education and support will be a primary component of these efforts. In addition, support will be provided to local KPCC to strengthen provider and birth facility partnerships aimed at engaging these entities in safe sleep initiatives such as the Safe Sleep Hospital Certification Program and Safe Sleep Star Certification Program.

Local MCH Agencies:

- Finney County Health Department in partnership with Russell Child Development Center will organize a Community Baby Shower (CBS) and a community health fair where they provide safe sleep education. Russell Child Development Center currently has a safe sleep instructor (SSI) and FCHD will have one of their nurses trained as an SSI.
- Linn County Health Department will education 20 MCH clients on safe sleep practices. They have a home visitor who is also their SSI. In the last program year, they educated 16 clients and with continued outreach through BaM and CBSs, they will have opportunity to provide one-on-one safe sleep education through scheduled home visits.
- Miami County Health Department (MCHD) will partner with Parents as Teachers (PAT), the Health Department Advisory Council, and partners such as Elizabeth Layton Center, KanCare Outstations, WIC, East Central Kansas Action Network to plan and host a CBS. MCHD and PAT have the only SSIs in the county. They will leverage funding from a Kansas Department of Health and Environment Injury Prevention mini grant to partially fund the event.
- Nemaha County Community Health Services held their first CBS last grant year. Their goal is to hold another CBS this year with 90% of participants noting an increase in awareness of safe sleep practices. They will promote the CBS through social media and local hospitals and clinics.
- Rooks, Norton, and Graham counties will increase documentation of safe sleep education in DAISEY to provide an accurate picture of the safe sleep work they're doing. They provide education and a sleep sack to MCH families. Currently, 13% have safe sleep education documented. This will increase to 100% of clients after staff are trained on safe sleep practices and how to properly document safe sleep education in DAISEY.
- Shawnee County Health Department will continue to serve as the lead agency for Shawnee County's Fetal Infant Mortality Review (FIMR) program. Their goal is to decrease the infant mortality rate from 8.8 per 1,000 births which is higher than the state rate. They will achieve a decrease by providing safe sleep education at one Community Baby Shower, during BaM (known locally as Baby Basics) classes, and at home visits.

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