



Safe Sleep for Child Care Providers



We developed this document for infant caregivers in child care settings. It is useful for centers and family child care homes. Some of the recommendations may also be true for parents and families in their home. Others are specific to the child care environment.

If I put a baby to sleep on his back, won't he be more likely to choke?

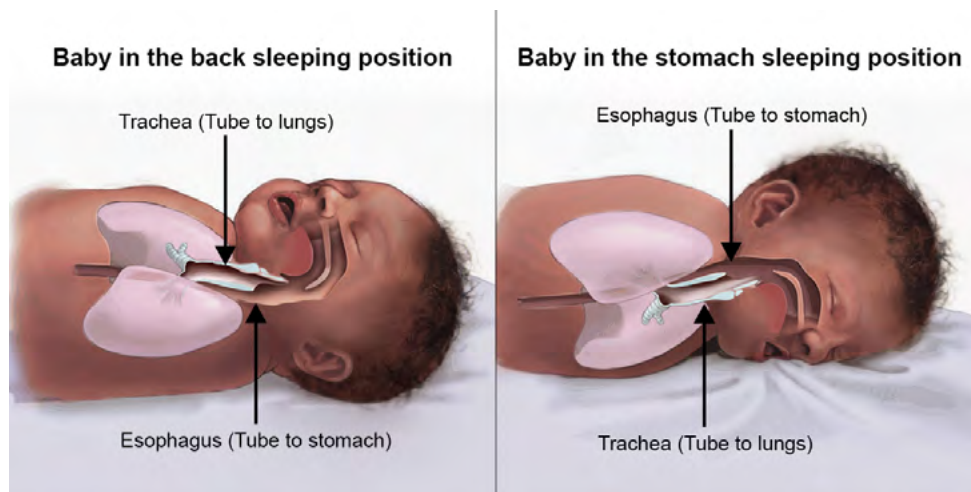
No. A healthy baby naturally swallow or cough up fluids—it's a reflex all people have. A baby may actually clear fluids better when sleeping on their backs!

Here's how it works—

When the baby is in the back sleep position, the baby's airway (the trachea, a tube to the lungs) lies on top of the esophagus (the tube to the stomach).

When a baby is on its back, anything coming up from the stomach would have to work against gravity to enter the baby's airway to cause it to choke.

When the baby is sleeping on its stomach, coming up from the stomach can pool at the trachea opening. That makes choking much more likely.



<https://ct1.medstarhealth.org/content/uploads/sites/10/2017/08/BabyAnatomy-Safe-Sleep.jpg>

It's important to know that fatal choking is very rare except when related to a medical condition. If back sleeping made it more likely for a child to choke, we would see the number of babies who die from choking go up. That hasn't happened! In those few reported cases of fatal choking, most of the infants were sleeping on their stomach.

- Place all babies on their backs for sleep unless the child has a signed doctor's that says different.
- It will not cause the baby to choke--it protects against choking!
- The signed doctor's note should include detailed sleep instructions as well as an end date on the note.



My mom put me on my stomach and I turned out fine, so is it that big of a deal?

We don't know which infants are most at risk for SIDS if they sleep on their tummy. That's why we have all children sleep on their backs!

Some babies are more at risk for dying if they sleep on their tummy.

There's no test we can do to find out who is and who isn't safe sleeping on their tummy.

We don't want to find out a baby was at risk by having them die—so we put all babies to sleep on their backs.

Your mom or grandma or grandpa was following advice based on the evidence available at that time. Since then research has shown that sleeping on the stomach increases the risk for SIDS. Research also shows that sleeping on the back carries the lowest risk of SIDS. That's why the recommendation is “back is best.”

When a baby can roll over on their own can they sleep in any position they want?

Even when a baby can turn over from back to tummy and from tummy to back, place them on their back for sleep. They still do not have the upper body control to move their bodies to get more air if their airway gets blocked. But, if they roll over, you do not need to re-place them on their back.

Make sure that there are no blankets, pillows, bumper pads, or other items in the crib. The baby can roll up against them and suffocate.

Babies usually begin to roll when they are 4-6 months old, which is also the age at which the chance of SIDS decreases. While the rise of SIDS drops a lot after 4-6 months, it does not go away completely until 12 months of age.

If you have a baby who is able to roll, you might want to put a note on the crib or in the child's file saying so. When licensing inspectors visit, it helps them know which infants might be on their stomach because they rolled over.

Won't the baby be fine, if I just keep an eye on them?

Let's be honest—it's hard to keep track of a lot of things at once. And we can't tell from a distance (or sometimes, even up close) that something is wrong with a baby's breathing. Make sure you do both. Put the baby on its back and keep an eye on the baby while it sleeps.

Why can't the baby have a blanket? What about a hats?

Blankets and other soft items in the crib can limit how much air the baby gets while he or she is asleep. A baby can't roll over or move the item if it blocks their airway like an adult or an older children can. This means they could suffocate while on their tummy sleeping.

Hats and other soft items can slide off and block their airway, too.

So, what do you do to make sure the baby stays warm?

Instead of using loose blankets, use a sleeper, wearable blanket, or other sleep clothing. You can also dress the baby in layers. If the baby becomes flushed and sweaty take a layer off!

In general dress the baby with one more layer than what would be comfortable for an adult.

Another way to make sure the baby doesn't get too cold is to set the temperature just right.

You can also make sure the temperature in the room is set just right! The temperature in the room where baby sleeps should be comfortable for a lightly clothed adult.

Here are recommended temperatures for child care centers:

- Summer: 74 to 82 degrees with 30 to 50 percent humidity
- Winter: 68 to 75 degrees with 30 to 50 percent humidity



What's wrong with letting the baby sleep in a bouncer or car seat?

If a baby falls asleep in a car seat, stroller, swing, carrier, or sling, move the baby to a firm sleep surface as soon as possible.

Sleeping in bouncers or car seats puts the baby at risk for what we call positional asphyxiation. That means the baby can move or slip into a position that blocks their airway. A baby doesn't have strength to move its head when their bodies shift into positions that block their airway. This means it can suffocate and die in car seats and bouncers.



Can I put the baby to sleep on his side?

Nope! Side sleepers can easily fall forward onto their tummies.

If baby is a tummy or side sleeper, there is a 2 to 3 times higher risk for SIDS. The side position is as dangerous as placing the baby on the tummy.

When a baby who is to sleeping on its back get placed to sleep on its tummy, they are 18 times more likely to die from SIDS.¹ That's because it are not able to roll over out of danger if it cannot breathe.

When you change a baby from their usual position of sleeping on a tummy to their back, guess what? They are not at a greater risk of SIDS.

[1] Davis BE, Moon RY, Sachs HC, Ottolini MC. Effects of sleep position on infant motor development. Pediatrics 1998;102:1135-40

Should a baby be swaddled?

Some state rules say swaddling is OK, others do not.

Even if your state rules allow swaddling, it is not necessary or recommended. Learn more in the Caring for Our Children standards.

Swaddling can increase the risk of:

- SIDS/SUID if baby can roll over from back to stomach
- Hip dysplasia, which is where the hip joints do not develop correctly.
- Overheating if excessive swaddling occurs.

If you worry about the child being warm or snuggled enough, put the baby in a one-piece sleepers or a sleep sack.

If you DO swaddle, be sure to stop swaddling when the baby starts showing signs it is ready to roll or flip while it sleeps!

Should a preemie be swaddled? I've heard that they should be.

Every child is different. With infants, especially preemies, you want to be sure you, the parent and the pediatrician are all on the same page when it comes to safe sleep!

Even though you may have heard swaddling is best for preemies, have a conversation with the family first before you swaddle the infant. Ask if there are any doctor's notes or orders for the child. If there are none, work with the parents and follow any state regulations about swaddling.

Also, if you or the parents have concerns about the premature infant's sleep at all, partner with the family and reach out to the pediatrician.

Doesn't back sleeping cause a flat head?

Pressure on the same part of the baby's head can cause flat spots if you lay a baby down in the same position too often or for too long. Flat spots are usually not dangerous and usually go away on their own once the baby starts sitting up.

Make sure the baby gets enough Tummy Time. Limiting the time spent in car seats (once the baby is out of the car!) and changing the direction the baby lays in the sleep area from week to week also can help to prevent these flat spots.

You can check out: [Other Ways To Help Prevent Flat Spots on Baby's Head](#) for more ideas.

Doesn't a baby startle more easily when she is on her back?

Kind of—but that could be a good thing!

Research has shown that a baby who sleep on its tummy sleeps longer and deeper. That deep sleep can be dangerous for some infants. If the baby has a problem breathing while it is asleep, it will have more difficulty waking up when it is in a deep sleep.

Sleep-related deaths may occur when a baby does not have enough oxygen. It can also happen when a baby breathes too much carbon dioxide. Researchers think that this may be why sleeping on the tummy places increases a baby's risk of death.

Parents sometimes tell me that they sleep with their baby. I've hear that is dangerous, but I don't know exactly how to talk about it with parents! What is the difference between co-sleeping and bed sharing and room-sharing. Are any of them safe?

Co-sleeping includes surface sharing or room sharing; it's both!

Surface sharing means when you share a bed or couch with the baby.

Room sharing is when the baby sleeps on their own bed/crib/etc. in the same room where the parent sleeps.

The American Academy of Pediatrics (also called AAP) recommends room-sharing without bed-sharing. Room-sharing may lower your baby's risk of SIDS and other sleep-related causes of death.

