

Safer Sleep for Babies

A risk assessment tool for practitioners



On average **6 babies*** die every year in Nottinghamshire where unsafe sleep arrangements were thought to be the cause

*under 15 months of age

This tool should be used with parents / carers to support them to consider how to keep their baby safe and to help identify if their baby is at high risk of Sudden Infant Death Syndrome (SIDS)

Safer sleep advice is given out to all new parents in pregnancy and the first few days and weeks of a baby's life by universal health services. To prevent further deaths, we need everyone working with families in Nottinghamshire to help ensure safer sleep advice is understood and that families have the support to follow it.

This tool supports practitioners to identify, and therefore support, families who may be vulnerable by identifying the risk factors. All practitioners coming into contact with families with infants up to 15 months are encouraged to use this tool to assess the baby's sleeping environment and support a discussion reinforcing safer sleep practices.

REMEMBER, EVERY SLEEP NEEDS TO BE A SAFE SLEEP – whether the baby is sleeping at night or during the day, at home or away from home (staying with grandparents, another parent, friends or

SAFER SLEEP ADVICE FOR PARENTS AND CARERS

- Always put babies on their **BACK** for every sleep.
- Keep your baby **SMOKE-FREE** day and night.
- The safest place for a baby to sleep is in their own **CLEAR, FLAT, SEPARATE SLEEP SPACE** such as a cot or Moses basket in the same room as you for at least the first six months.
- Breastfeeding your baby lowers the risk of SIDS as well as providing many other physical and emotional health benefits. Support to breastfeed is available.
- Use a firm, flat, waterproof mattress in good condition.
- We know some parents choose to bedshare or may do so in an unplanned way. **It is very dangerous to co-sleep with babies if:**
 - you or anyone in the bed has recently drunk any alcohol.
 - you or anyone in the bed smokes.
 - you or anyone in the bed has taken any drugs or medication that make you feel sleepy.
 - your baby was born prematurely (before 37 weeks of pregnancy) or weighed under 2.5kg or 5½ lbs when they were born.
- Avoid letting your baby get too hot.
- Car seats should only be used whilst travelling.
- Don't cover your baby's face or head while sleeping or use loose bedding.
- **To avoid accidents, remove all pillows, soft bedding, cot bumpers and soft toys from the cot.**
- **NEVER SLEEP ON A SOFA OR IN AN ARMCHAIR WITH YOUR BABY**

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A review of child deaths in Nottingham City and Nottinghamshire from April 2008-March 2024 has identified the key characteristics/risk factors of SIDS. They are similar to what is known from National Evidence.

- 70.4% of babies were in an unsafe sleep environment.
- 38.7% of babies were known to social care at the time of their death.
- There was parental smoking in 79.7% of households.
- In 27% of households, one or both parents had taken a drug which could make them drowsy, either prescribed or illegal.
- In 24.3% of households, one or both parents had been drinking alcohol.
- 81% of babies were aged 6 months or less.
- There has been an increase in the incidence of sofa sleeping-either baby alone or with an adult.
- There has been an increase in use of unrecommended sleep products such as pods/nests, pillows, cot bumpers, hammocks and sleep positioners.
- Co sleeping with a breastfeeding mother with no other risk factors has **not** been shown to be a significant hazard but information about safer sleeping should always be provided.

Research Evidence

Key learning from a national review conducted by the National Child Safeguarding Practice Review Panel in 2020. Of the 40 cases of infants who had died of SIDS notified to the panel in one year (June 2018 – August 2019):

- almost all involved parents co-sleeping in unsafe sleep environments with infants.
- often when the parents had consumed alcohol or drugs.
- Frequently wider safeguarding concerns, e.g. neglect, domestic violence, parental mental health concerns and substance misuse.

The report stressed the need for safer sleep advice to be firmly embedded within safeguarding practice and identified a continuum of risks that are reflected in the risk assessment tool below. Click here to view the [full report](#)

In 2022, the National Child Mortality Database (NCMD) child death review identified that one of the most common modifiable factors (a factor that if changed might reduce the risk of future child death) is unsafe sleep arrangements. For babies, this includes hazardous co-sleeping and sleeping a baby on their front.

Click here to view the [full report](#)

Breastfeeding and skin-to-skin care

A recent research study (United States) concluded that increasing rates of breastfeeding initiatives and skin-to-skin care are associated with decreasing SUDI prevalence in the first 6 days after birth (this is additional to the already known long-term protection of breastfeeding). [Read the paper here](#)

How to use this tool

This tool helps you to identify who is most at risk of sudden unexpected death in infancy due to unsafe sleep practices.

It is designed for use by any practitioner working with families with young babies. Health professionals with access to the 'red book' will continue to use this to complete safer sleep risk assessments. The tool will be used in conjunction with the red book to identify key risk factors and may be completed if a referral to social care is made on the basis of continued unsafe sleep practices.

For practitioners that don't use the red book, for example Family Hub practitioners, children's social care, housing services, voluntary sector services, domestic abuse and substance use services, we encourage the tool to be embedded into assessment processes for families with young babies whenever possible. The tool can help support you with giving advice and guidance when there are concerns about unsafe sleeping practices (either observed, shared with you in conversation, or if the parental circumstances mean safe sleep may be an issue e.g. fleeing domestic abuse), or if parents / carers are asking for advice and support.

The tool should be **completed together with the parent(s) or caregiver(s)** and used to guide a conversation about safer sleep practices. Having open conversations and creating an environment where families can discuss their individual situation, worries and queries without fear of judgment is crucial. It's really important that dads and partners are included in the conversation whenever possible.

At the end of this document you will find some tools that can be shared with parent(s) or caregiver(s). A copy of the action plan (not the whole assessment), the 'red flags' list and the 'sharing a bed with your baby' checklist can be discussed and left with them.

You can complete the risk assessment below either by using a printed paper copy or electronically, depending on what works for you and the family, or as guided by your organisation.

IT'S NOT ABOUT HOW MANY BOXES ARE TICKED; THE FACTORS BELOW ARE ALL RISKS IN THEIR OWN RIGHT AND SOME ARE MORE DANGEROUS THAN OTHERS.

Safer Sleep for Babies – Assessment Tool

Child's Name Click or tap here to enter text.

Date Click or tap to enter a date.

Form completed with (insert parent / caregiver name/s) Click or tap here to enter text.

Date of Review Click or tap to enter a date.

Predisposing Vulnerability and Risk (Child)

- ☐ Low birth weight (<2.5kg or 5 pounds 8 ounces)
- ☐ Prematurity (<37 weeks)

Predisposing Vulnerability and Risk (Parenting / Family circumstances)

- ☐ Smoking in pregnancy
- ☐ Smoking in household
- ☐ Parent / caregiver mental health difficulties
- ☐ Parent / caregiver alcohol or substance use
- ☐ Domestic abuse

Wider and Environmental factors

- ☐ Sleeping with the baby on a sofa or chair
- ☐ Unsafe sleep environment e.g. position, sofa, cluttered cot, excess covers or clothing, unsafe or unsuitable products used for sleeping in (such as pods or nests), too close to a radiator
- ☐ Socio-economic deprivation
- ☐ Poor or overcrowded accommodation
- ☐ Adverse childhood experience of parents impacting on parenting ability
- ☐ Ongoing and cumulative neglect ([Neglect - Nottingham City Council](#))
- ☐ Relationship breakdown and/or new partners
- ☐ Limited or concerning engagement with services e.g. missed or no access appointments, late booking, hostile to professionals, disguised compliance
- ☐ Parental criminal behaviours

Situational risks / out of routine incidents

- ☐ Altered sleeping arrangement without a plan in place
- ☐ Alcohol or drug use on the night in question, including use of prescription drugs causing drowsiness
- ☐ Temporary Housing
- ☐ Change of partner



Red Flags – if these are present then further action is required*

Bed-sharing with associated risk factors

- ☐ Parent or anyone in the bed has recently drunk any alcohol
- ☐ Parent or anyone in the bed smokes
- ☐ Parent or anyone in the bed has taken any drugs or medication that may make them sleepy
- ☐ Baby was born prematurely (before 37 weeks of pregnancy) or weighed under 2.5kg or 5½ lbs when they were born
- ☐ Other children or pets in the household who share a bed with parents some or all of the night. (including if your baby is one of a multiple birth [Safer sleep for twins - The Lullaby Trust](#)).
- ☐ Sharing a bed when a parent / carer or baby is unwell or has had a recent illness, or if you or anyone in the bed feels excessively tired (too tired to respond to the baby)

*Bed sharing with a breastfeeding mother with none of these risk factors has NOT been shown to be a significant hazard but information of how to make the bed a safer place for co-sleeping should always be provided

What to do next

Remember, **every sleep needs to be a safe sleep** – whether the baby is sleeping at night or during the day, at home or away from home.

If you identify any of the above risk factors, follow these steps:

- Explore with the family their understanding of the safer sleep advice, why it is important to help keep their baby safe and what the barriers to them being able to follow it might be. Help them think about what they will do on nights which might be more challenging such as when they are very tired, their baby is unwell, or is crying for a prolonged period. [More information about soothing crying babies is available for parents here](#)
- If there is high risk of out of routine or emergency situations, discuss content from the Lullaby Trust [‘Safer sleep advice for emergency situations’](#)
- Where you can, put in place support and follow up as much as your professional role allows.
- Consider referral to other services such as the Nottinghamshire County Healthy Family Teams or Nottingham City Children’s Public Health 0-19 Nursing Service. Consider referrals to relevant support services such as smoking cessation, mental health or domestic abuse. Follow up any referral you make.
- Liaise with other professionals working with the family.
- Share the Lullaby Trust Guide for parents in their first language (an easy read card is available in 25 languages and can be downloaded using the link below (click on safer sleep easy read card-translated versions)).

[Professionals resources | The Lullaby Trust](#)

- Signpost to relevant videos or specific guidance if risk factors identified (link below).

[Video resources | The Lullaby Trust](#)

If there are ongoing unmet needs or concerns consult the Threshold of Need document (Nottingham city) [nottingham-city-threshold-of-needs-2023_2025pdf.docx](#) or the Pathway to Provision document (Nottinghamshire county) [pathwaytoprovisionhandbook.pdf](#). This will help you to understand the level of need and identify the services that may be available, including whether or not a safeguarding referral is required. The neglect toolkit [Neglect - Nottingham City Council](#) may help you to further assess the level of concern.

Remember: Risk assessments should be saved and uploaded to children’s/family records. **Don’t forget to give the parent/carer a copy of the Safer Sleep plan of care** (not the full assessment as indication of some concerns, for example domestic abuse, highlighted on a document may place people at greater risk).

Tools for use with parents and carers (replicated in the 'red book' child health record).

Our Safer Sleep plan of care

<insert name of baby and parents / carers>

What are the things which will help keep your baby safe whilst sleeping?	
What are the things that might put your baby at risk of sudden infant death syndrome?	
What actions have we agreed that you will take as a result of our talk around safer sleep for your baby, based on your particular circumstances and choices? Remember every sleep needs to be a safe sleep so you need to make a safe plan for whether your baby is sleeping at night or during the day, at home or away from home.	
Date action plan filled in with parent(s)/caregiver(s).	
Date when we will look at this again.	

Sharing a bed with your baby – checklist to help you co-sleep more safely

The safest place for a baby to sleep is in their own clear, flat, separate sleep space. However, we know that being a parent isn't easy and many parents find themselves co-sleeping whether they mean to or not. Wherever you're planning for your baby to sleep we recommend making your bed a safer place for your baby. [The Lullaby Trust advice on co-sleeping with your baby will tell you how](#)

It is never safe to co-sleep with your baby on a sofa or armchair. This increases the risk of your baby dying from Sudden Infant Death Syndrome (SIDS) by up to fifty times.

If you choose to co-sleep with your baby or think it might happen even though you plan not to, it is important that you review the red flags and checklist below with the people supporting you. This will help you see if there are risk factors that would make co-sleeping very dangerous for your baby.

If you answer yes to any of the questions below you are advised not to co-sleep/bed share due to the increased risk of SIDS. We understand this may be hard and want to support you to keep your baby safe.

If you need help to think about how you can make this work for you and your baby ask the people supporting you, for example Public Health Practitioners (health visitors). You can text them anytime of the day or night. Out of hours you will receive a return text with emergency contact numbers in case you need them, but someone from the service will still pick up the text in working hours and get back to you to offer advice and support the next working day.

- Nottinghamshire County (Healthy Family Teams).

Telephone the advice line Tel: **0300 123 5436**. Or text Parentline **07520 619919**

- Nottingham City (Children's 0-19 Public Health Nursing Service).

Telephone the Children's Health Advice Hub on 0300 300 0040. Or text the 'Text Health' Messaging Service on **07480 635002**

There are times when it is very dangerous to share a bed with your baby.

Do not share a bed with your baby if:



You or anyone in the bed has recently drunk any alcohol.



You or anyone in the bed smokes or you smoked during pregnancy.



You or anyone in the bed has taken any drugs or medication that make you feel sleepy.



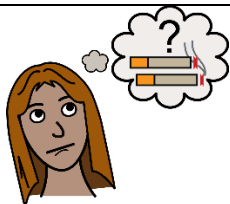

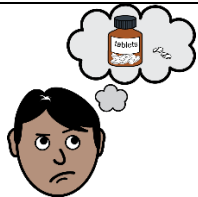



Your baby was born prematurely (before 37 weeks of pregnancy) or weighed under 2.5kg or 5.5lb when they were born.


In these circumstances it is **always** best to put your baby in their own safe sleep space, such as a cot or Moses basket. Keeping the cot or Moses basket next to your bed might make this easier.

It is **not safe** to share a bed with your baby with other children or pets in the bed.

If you have twins, take a look at this advice: www.lullabytrust.org.uk/safer-sleep-advice/safer-sleep-basics/twins/

You should **not share a bed** with your baby if you, the baby or anyone in the bed is unwell or has had a recent illness, or if you or anyone in the bed feels excessively tired (too tired to respond to the baby).

	Question	Yes/No	Why this increases the risk of your baby dying?
	Do you or anyone in the bed smoke? (this includes smoking during pregnancy)		<p>Smoking increases the risk of SIDS</p> <p>Lullaby Trust/safer sleep advice/smoking</p> <p>There is currently no research relating to e-cigarettes and SIDS. NHS advice is to keep your baby away from e-cigarette vapour. The Lullaby Trust advises that you do not share a bed with your baby if you vape.</p>
	Will there be nights when you or anyone in the bed will have had any alcohol?		Any alcohol use changes your sleep pattern and increases the risk of SIDS
	Will there be nights when you or anyone in the bed has taken any drugs or medication that make you feel sleepy?		Taking any drugs or prescribed medication that can make you feel sleepy increases the risk of accidental death whilst bedsharing
	Do you have a plan of how you will settle your baby in their own clear, flat, separate sleep space if you feel excessively tired?		If you or your partner feel excessively tired-too tired to respond to the baby-this may increase the risk of accidental death whilst bedsharing
	Was your baby born early (before 37 weeks) or weighed less than 2.5kg or 5.5. pounds?		Babies who are born early or who are very small are at higher risk of SIDS
	Do you have other children (including if your baby is one of a multiple birth), or pets, who come into your bed some or all of the night?		Babies who sleep in a bed with other children, or pets, are at increased risk of accidental death whilst bedsharing

	<p>Do you have a plan of how you will settle your baby in their own clear, flat, separate sleep space if you or they are unwell or are recovering from an illness?</p>		<p>Babies who are unwell, or who have had a recent illness, are at higher risk of death whilst bedsharing. If you or your partner are unwell this may increase the risk of accidental death whilst bedsharing</p>
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Below are links to more information about safer sleep and soothing crying babies that you might find helpful.

	<p>Safer Sleep advice for babies</p> <p>The Lullaby Trust</p> 
	<p>Safer Sleep video resources</p> <p>Some short videos for parents and carers</p> <p>The Lullaby Trust</p> 
	<p>Co-sleeping with your baby</p> <p>The Lullaby Trust advice on how to co-sleep more safely</p> 
	<p>Soothing a crying baby</p> <p>NHS advice for parents</p> 