**Appendix A Safer Sleep in Hospital (ULTH Guidance)**

All mothers should be encouraged to spend time in skin to skin contact with their new baby in an unhurried environment as soon as possible after birth.

There are some important safety considerations during skin to skin:

Vigilance of the baby’s well-being is a fundamental part of postnatal care immediately following and in the first few hours after birth. For this reason, normal observations of the baby’s temperature, breathing, colour and tone should continue throughout the period of skin to skin contact. Care should always be taken to ensure that the baby is kept warm. Observations should also be made of the mother, with prompt removal of the baby if the health of either gives rise to concern.

Staff should have a conversation with the mother and her birth partner about the importance of recognising changes in the baby’s colour or tone and the need to alert staff immediately if they are concerned.

It is important to ensure that the baby cannot fall on to the floor or become trapped in bedding or by the mother’s body. If possible, the height of the bed should be lowered. Mothers should be encouraged to be in a semi-recumbent position to hold and feed their baby. Particular care should be taken with the position of the baby, ensuring the head is supported so the babys airway does not become obstructed.

Observations of the mother’s well-being and level of consciousness should be continued throughout the period of skin to skin contact. Mothers may be very tired following birth and so may need constant support and supervision to observe changes in their baby’s condition or to reposition their baby when needed.

All babies should be routinely monitored whilst in skin-to-skin contact with mother or father. Observation to include:

•Checking that the baby’s position is such that a clear airway is maintained: Observe respiratory rate and chest movement and listen for unusual breathing sounds or absence of noise from the baby.

•Colour: The baby should be assessed by looking at the whole of the baby’s body, as the limbs can often be discoloured first. Subtle changes to colour indicate changes in the baby’s condition.

•Tone: The baby should have a good tone and not be limp or unresponsive.

•Temperature: Ensure the baby is kept warm during skin contact

All mothers should be encouraged to stay close to their babies whatever their preferred infant feeding choice. Skin to skin contact is encouraged during the postnatal period, particularly to establish the mother-baby bond, for settling babies, and for babies who are establishing breastfeeding.

In the hospital setting, separation of mother and baby should only occur where the health of either prevents care being offered together in the postnatal areas.

The safest place for a baby to sleep whilst in hospital is in a cot by the side of mother’s bed.

In the hospital, the mother will usually care for her baby on her bed as this is the most comfortable place for cuddling and feeding her baby and to maintain skin to skin contact. Mothers and babies may on occasion fall asleep together on the mother’s hospital bed.

To reduce the risks to babies when being cared for on the bed staff should discuss the key messages about safer sleep with mothers including:

The safest place for your baby to sleep is in a clear cot by your bed.

There are some circumstances in which co-sleeping with your baby can be very dangerous:

•Either you or your partner smokes

•Either you or your partner has drunk alcohol or taken drugs (including medications that may make you drowsy)

•Your baby was born premature (37 weeks or less)

•Your baby was born at a low weight (2.5kg or 5½ lbs or less)

•Never sleep on a sofa or armchair with your baby, this can increase the risk of SIDS by 50 times

In addition, staff should discuss any other concerns regarding mother’s level of consciousness/sedation, mother’s mobility or mother and baby’s well-being. Mothers also need to be informed they need to take responsibility for protecting their baby from falling out of the bed/entrapment/overheating.

Staff should discuss appropriate sleeping positions for example lying down, rather than sitting up in bed, in the case where the mother falls asleep with or without intention.

Staff should document that a conversation has taken place with the mother about safer sleep and safety in the hospital bed.

The mother and baby should be monitored by staff as frequently as is practicable. If a staff member has concerns that the baby is in an unsafe situation, the mother should be woken and the baby moved to a safe situation with the mother’s permission as soon as this is recognised.

Effective communication with other members of staff and on hand over of care is essential.

In hospital, the bed should be lowered as far as possible. In addition, encourage the mother to keep the curtains or door open so that staff can observe if she inadvertently falls asleep whilst caring for her baby in the bed.

Written information on safer sleep, for example a current Lullaby Trust leaflet, should be given and discussed with all mothers early in the postnatal period. Consideration should be given where English is not the first language of parents, or where parents have any communication difficulties as to how messages can be delivered effectively. The Lullaby Trust leaflets *Safer sleep for babies a guide for p*arents, and *Safer sleep for pre-term babies* and *Safer Sleep easy-read cards* in many different languages are currently available for all parents on the ULHT webpage <https://www.ulh.nhs.uk/services/maternity-services/postnatal-leaflets/> . This webpage is accessible to parents by scanning the QR code on the front of the Red Book.

A full discussion on safer sleep using ULTH Safer Sleep Discussion Form should take place prior to discharge from hospital, at the first postnatal contact by the community midwifery service and prior to discharge from the community midwifery service. If possible, include the mother’s partner and any other carers and grandparents in these discussions. It is likely that new parents will seek advice from their wider family and it is important that these key figures are aware of safer sleeping information. Documentation of discussion regarding safer sleep should be recorded by maternity staff in the mother’s record.

**Neonatal Units**

When babies are preterm or very sick, they may be positioned on their front, side or back and aids to support their bodies such as positioners may be used.

Babies cared for in this way will be under continuous supervision and monitoring to ensure their safety.

As babies’ well-being improves, the level of monitoring and supervision reduces and babies will be positioned on their backs.

Neonatal Unit staff discuss safe sleep with parents while their baby is on the Neonatal Unit and also prior to discharge from the Neonatal Unit. These discussions include highlighting the particular risks of co sleeping when the baby is preterm or low birth weight. Parents are provided with the Lullaby Trust Safer sleep advice prior to discharge both in paper format and available electronically via a QR code linking to maternity postnatal leaflets webpage.

**References:**

Unicef UK (October 2019) Co-sleeping and SIDS: A guide for health professionals [Co-sleeping-and-SIDS-A-Guide-for-Health-Professionals.pdf (unicef.org.uk)](https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2016/07/Co-sleeping-and-SIDS-A-Guide-for-Health-Professionals.pdf) {Accessed online on 19/03/2024}

Unicef UK (November 2022) Caring for your baby at night and when sleeping <https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2018/08/Caring-for-your-baby-at-night-web.pdf> {Accessed online on 19/03/2024}

Unicef UK (February 2021) Sample infant feeding policy (maternity) <https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/implementing-standards-resources/sample-infant-feeding-policies/> {Accessed online on 19/03/2024}

Lullaby Trust Safer sleep advice <https://www.lullabytrust.org.uk/safer-sleep-advice/> {Accessed online 19/03/2024}

Lullaby Trust Co-sleeping with your baby <https://www.lullabytrust.org.uk/safer-sleep-advice/co-sleeping/> {Accessed online 19/03/2024}

Lullaby Trust Safer sleep advice on smoking <https://www.lullabytrust.org.uk/safer-sleep-advice/safer-sleep-basics/smoking/> {Accessed online 19/03/2024}

Rotherham Safeguarding Children’s Partnership (June 2017) 4.8 Safe Sleeping for Infants Guidance <https://rotherhamscb.proceduresonline.com/chapters/p_safe_sleeping.html#in_hosp> {Accessed online on 19/03/2024}