

Interventions improve safe sleep practices in NICU

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by Carla Kemp . Senior Editor

Interventions improve safe sleep practices in NICU

 Gelfer P, et al. *Pediatrics*. 2013;131:e1264e1270.

Implementation of several interventions, including a crib card and educational programs for nurses and parents, improved compliance with safe sleep practices in a neonatal intensive care unit (NICU).

Infants who are born prematurely or have low birth weight are at higher risk of sudden infant death syndrome (SIDS) than term infants. Safe sleep practices recommended by the Academy often are not used during hospitalization of these infants due to medical conditions. For example, babies may be put to sleep on their stomachs to improve respiratory mechanics, and extra blankets may be used to improve thermoregulation when transitioning infants from incubators to open cribs.

Because parents are influenced by the way hospital staff position infants, the Academy stresses that NICUs should endorse and model safe sleep practices well before infants are discharged.

A large NICU designed a quality improvement program to increase the percentage of eligible infants following safe sleep practices in the NICU. The program included education of nurses and parents on SIDS risk-reduction strategies; use of a crib card that outlined safe sleep practices; and development of an algorithm to determine when infants were ready to begin safe sleep practices.



The percentage of infants in a neonatal intensive care unit who were placed on their backs to sleep increased from 39% to 83% after a quality improvement program was initiated.

An audit tool was used before and after the program was implemented to determine compliance with safe sleep practices in the NICU, and parents were surveyed to measure their compliance at home.

Results showed compliance with supine sleeping among infants who were ready increased significantly from 39% to 83% in the NICU. Use of a firm sleeping surface increased from 5% to 96%, and removal of soft objects increased from 45% to 75%. The percentage of parents who followed all safe sleep practices increased from 23% to 82%.

The authors noted that a key to the program's success was early involvement of key stakeholders, including nurses, and finding the best time to transition infants to safe sleep practices.