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October 30, 2001

To: Family Day Care Licensees

BRL - DC - Memo 01-03

From: Patty Hammes, Director *Patty Hammes*  
Bureau of Regulation and Licensing

RE: SUDDEN INFANT DEATH SYNDROME (SIDS) RISK REDUCTION LEGISLATION

The purpose of this memo is to alert you to a new state law that requires *all* licensees and child care employees and volunteers working in child care centers licensed to care for children under one year of age to receive training in the most current medically accepted methods of preventing Sudden Infant Death Syndrome (SIDS). Employees and volunteers must receive training on SIDS risk reduction prior to caring for children and providers must receive this training prior to becoming licensed to care for children under age one. This new law took effect on September 1, 2001. This memo provides information on the steps that must be taken to implement the new law. The Bureau of Regulation and Licensing has started the process for promulgating rules to place these provisions in the rules. Under current rule {HFS 45.03(2)(a)}, family day care licensees are required to comply with all applicable statutes. Please share this information with parents and any employees, helpers, substitutes, emergency backup providers and volunteers.

***Current Licensees and employees/helpers/substitutes/emergency backup providers/volunteers***

The new law requires that all child care providers receive training in SIDS risk reduction procedures **prior to providing care** in a center licensed to care for children under 1 year of age or **becoming licensed** to care for children under 1 year of age. However, we believe that in order to protect the children in care, all providers currently licensed to care for children under 1 year of age and any assistants, helpers, substitutes or emergency backup providers must be trained in these procedures and centers must share this information with parents. The Bureau of Regulation and Licensing has been working with the technical colleges, agencies offering DHFS approved courses, local Child Care Resource and Referral agencies and the Infant Death Center of Wisconsin to ensure that information about SIDS risk reduction has been added to all entry level courses and that other workshops in SIDS risk reduction are available.

- **Effective immediately**, any person caring for children in a family day care center currently licensed for children 1 year of age and younger must obtain training in SIDS risk reduction procedures by May 1, 2002 unless s/he has taken an infant/toddler or other entry level course since September 1, 2001 or can document that they have received SIDS risk reduction training previously.
- To ensure that all employees, emergency back-up and substitute providers and volunteers have the information necessary to reduce the risk of SIDS, each licensee must provide an orientation on SIDS risk reduction methods to their employees, emergency back-up providers, substitutes and volunteers. The orientation must be completed and documented by January 1, 2002. This training can be counted as continuing education. The orientation training relating to SIDS prevention must, at a minimum, include the following SIDS risk reduction methods currently recommended by the American Academy of Pediatrics and American Public Health Association:
  - Place infants under 12 months of age on their backs in a crib to sleep (some infants might have health conditions that might require them to sleep on their tummy or side as specified by a child's physician due to breathing, lung or heart problems or other medical problem).

- Use a safe crib--babies should sleep in a crib on a firm tight-fitting mattress and there should be no soft blankets or comforters under the baby. Remove pillows, quilts, comforters, stuffed toys and other soft items from the crib.
  - Do not place the baby to sleep on a soft surface such as a waterbed, sheepskin, pillows, sofa, or other soft surface. Soft toys should not be kept in the crib.
  - If a blanket is used, the infant should be placed at the foot of the crib with a thin blanket tucked around the crib mattress, reaching only as far as the infant's chest. Keep the infant's head uncovered during sleep.
  - Provide "tummy time" for awake non-mobile children.
- In addition, family child care licensees must include information relating to the steps that they will take to reduce the risk of SIDS in the written information supplied to parents. The written information should include current SIDS risk reduction methods and at a minimum include the methods referenced above. The current guidelines for child care centers developed by the American Academy of Pediatrics and American Public Health Association on infant sleep position and surroundings are included in this mailing for your reference along with other SIDS risk reduction resources to assist you.

***New Licensees or employees/helpers/substitutes/emergency backup providers/volunteers***

- If you have a volunteer or if you hire a new employee or helper after September 1, 2001, that person must receive an orientation to your program prior to beginning work that includes the SIDS risk reduction methods described above (back sleep position for children under 1 year of age, the use of safe cribs and firm mattress, no soft items or soft sleep surfaces, keep the infant's head uncovered, provide "tummy time" for awake non-mobile children). The employee or helper then has 6 months to complete the entry level training requirements under HFS 45.04(1)(b)1 and HFS 45.05(1)(b)3.
- Emergency back-up providers and occasional substitute providers and volunteers will need to receive an orientation at the time they are asked to serve in this position. This orientation must cover the SIDS risk reduction procedures you have put into place at your center.
- New licensees will need to complete either the 10 hour Infant/ Toddler care course required under HFS 45.04(1)(b)3 or the 40 hour entry level training course required under HFS 45.04(1)(b)1 before a license can be issued to care for children under 1 year of age.

Sudden Infant Death Syndrome (SIDS) is the leading cause of death in the United States for infants one month to one year of age. Nobody knows exactly what causes SIDS or why it happens. Most deaths from SIDS take place before the end of the sixth month of age. Based on current research, the American Academy of Pediatrics strongly recommends that infants be placed on their backs to sleep to reduce the risk of crib death (SIDS). Research has shown that placing children on their backs to sleep has resulted in a reduction of the number of deaths attributed to SIDS. The tummy down or side sleep position is not recommended except on the specific direction of a physician because of certain health conditions. **One of the most important things that you and parents can do to help reduce the risk of SIDS is to put babies on their backs to sleep.**

The highest risk period for SIDS appears to be when infants are between 2 months and 5 months old. This coincides with the time that most working mothers return to their jobs after childbirth. According to an article in the Child Care Information Center Newsletter – Issue 39, 2001 School-Age Care, a new study suggests that about 20% of SIDS cases (in the 11 states included in the study) occurred in child care facilities, ***most commonly in family child care settings***. Previous research has shown that babies routinely placed on their backs to sleep are 20 times more likely to die from SIDS if they are switched to their stomachs to sleep. Researchers theorize that those children who sleep on their backs are more vulnerable when placed to sleep on their tummies because they haven't developed their upper-body strength as early as stomach sleepers have. This makes it even more important for all child care providers to communicate with parents about the importance of placing infants to sleep on their backs in order to reduce the risk of SIDS. Providers also need to recognize that upon the advice of the child's physician a parent may choose tummy or side sleep position for an infant.

In 1997, as part of a SIDS risk reduction measure in licensed child care programs and to assure parental awareness regarding sleep positions and SIDS risk reduction, the Bureau modified the Intake Form for Infants and Toddlers (CFS - 61) required under the family day care licensing rule (HFS 45.07(2)). This form provides information necessary to coordinate the care a child receives at home with the care provided in the child care setting. It must be completed and returned to the provider prior to the child's first day of attendance at the center. The provider must review the information provided and communicate with parents about this information to ensure a smooth transition for the child. One of the items included in the sleep section of the intake form is a question about sleep position. Parents must indicate the sleep position of the child and if the parent chooses a sleep position other than the child's back, the provider must supply information to the parent about SIDS risk reduction and back sleep position by providing the **Back to Sleep** brochure. The **Back to Sleep** brochure was recently revised to include additional information about SIDS risk reduction procedures. This brochure must be shared with parents choosing a sleep position other than the child's back and it is strongly recommended that you share it with all parents of children under 1 year of age. In a small number of instances, a child's doctor may specify a side or tummy sleep position rather than the back due to a child's health condition. Children should be placed to sleep in the position chosen by the parent.

The United States Consumer Products Safety Commission (US CPSC) in conjunction with Mattel, Inc. recently launched a campaign to alert caregivers to the dangers of soft bedding in cribs, play pens and portable cribs and to provide information on SIDS risk reduction. All cribs and playpens should meet the CPSC guidelines and are actually the safest places for infants to sleep. In addition to placing a child to sleep on his/her back, another thing that providers **must** do to help reduce the risk of SIDS is to make sure that the baby sleeps in a crib on a firm tight-fitting mattress with his/her head uncovered. There have been instances where a baby has smothered while sleeping because their flow of air has been restricted. Infants should not sleep on waterbeds, sheepskins, sofas, or other soft surfaces. Pillows, quilts, comforters, sheepskins, and other soft items should be removed from the crib. Crib sheets should fit the mattress snugly and corners should not pull loose if a child squirms. All of these things can cause a child's mouth and nose to be covered which may lead to suffocation.

I am enclosing a SIDS risk reduction fact sheet and a revised copy of the **Back to Sleep** brochure to give you and the parents of children enrolled in your program more information regarding SIDS. The Child Care Information Center (CCIC) has resources on SIDS risk reduction procedures. You can contact them at 1-800-362-7353 and ask for a list of resources. The **Back to Sleep** brochure is now available in an African American and Spanish version. Additional copies are available free of charge from CCIC. A new Resource Kit for Reducing the Risk of SIDS in African American Communities is available and can be ordered at 1-800-505-CRIB (2742). For additional information, we recommend contacting the National SIDS & Infant Death Program Support Center at (800) 638-7437 (<http://sids-id-psc.org/>) or the US Consumer Products Safety Commission at 1-800-638-2772 (<http://www.cpsc.gov/index.html>). Our web site ([www.dhfs.state.wi.us](http://www.dhfs.state.wi.us) click on licensing then click on child care) has links to these web sites and the Wisconsin Department of Agriculture, Trade and Consumer Protection that publishes a monthly recall update. Also available on our web site are copies of some of the DCFS forms.

Thank you for the important work that you do as child care professionals and implementing these new measures to help further reduce the risk of SIDS for our youngest children. If you have any questions about the new SIDS risk reduction requirements, please contact your licensing specialist.

Enclosures

c: BRL Licensing Chiefs/Deputies/Specialists  
Interested Parties

## SUDDEN INFANT DEATH SYNDROME (SIDS) RISK REDUCTION METHODS

### What Should an Infant Sleep Position Policy Say?

The American Public Health Association and the American Academy of Pediatrics have written guidelines for child care centers called *Caring for Our Children--National health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs*. They suggest using the following guidelines regarding infant sleep position and surroundings:

- Infants under 12 months of age shall be placed on their backs on a firm tight-fitting mattress for sleep in a crib.
- Waterbeds, sofas, soft mattresses, pillows, and other soft surfaces shall be prohibited as infant sleeping surfaces.
- All pillows, quilts, comforters, sheepskins, stuffed toys, and other soft products shall be removed from the crib.
- If a blanket is used, the infant shall be placed at the foot of the crib with a thin blanket tucked around the crib mattress, reaching only as far as the infant's chest.
- The infant's head shall remain uncovered during sleep.

(Caring for Our Children, Standard FA 190A)

- Unless the child has a note from a physician specifying otherwise, infants shall be placed in a supine (back) position for sleeping to lower the risk of Sudden Infant Death Syndrome (SIDS).
- When infants can easily turn over from the supine to the prone position, they shall be put down to sleep on their back, but allowed to adopt whatever position they prefer for sleep.
- Unless a doctor specifies the need for a positioning device that restricts movement within the children's crib, such devices shall not be used.

(Caring for Our Children, Standard HP 006)

\*This is excerpted from "Sudden Infant Death Syndrome and The Child Care Provider Setting Policy on Infant Sleep Position" of the National SIDS & Infant Death Program Support Center (NSIDPSC). The NSIDPSC is a cooperative project of the SIDS Alliance, Inc. and the Health Resources and Services Administration's (HRSA) Maternal and Child Health Bureau (MCHB) Sudden Infant Death Syndrome/Infant Death Program.