



**PA Safe Sleep Program  
One Month Telephone or Email Follow Up**

We are asking that you complete this brief survey on our NEW safe sleep teaching materials. You received these during your hospital stay when you had your baby. Your opinion is important to us. Thank you.

**Today's Date:** \_\_\_\_\_; **Approximate Age of Baby in Weeks:** \_\_\_\_\_  
**Birth Parent's Race:** \_\_\_ White; \_\_\_ Black or African American; \_\_\_ Asian; \_\_\_ Native Hawaiian or Other Pacific Islander; \_\_\_ American Indian or Alaska Native; \_\_\_ Other; \_\_\_ Unknown  
**Mother's Ethnicity:** Hispanic or Latino \_\_\_ YES or \_\_\_ NO  
**Birth Parent's Highest Level Education Level:**  
 \_\_\_ Some High School; \_\_\_ High School; \_\_\_ Some College; \_\_\_ Associate Degree; \_\_\_ Bachelor Degree; \_\_\_ Master's Degree; \_\_\_ Doctoral Degree

<b>Hospital teaching</b>	<b>Not at all</b>	<b>Somewhat</b>	<b>Mostly</b>	<b>Very Much</b>
1. How <b>helpful</b> was the teaching you received about keeping your baby safe while sleeping?	1	2	3	4
2. How <b>helpful</b> were the posters hanging in your room as a reminder to keep your baby safe during sleep?	1	2	3	4
3. How <b>prepared</b> did you feel about placing your baby alone, on his/her back, and in a crib or other safe place to sleep when you left the hospital?	1	2	3	4
4. How <b>prepared</b> did you feel about dressing your baby for safe sleep when you left the hospital?	1	2	3	4
<b>At Home Practices</b>				
<b>Safe Sleep Practices</b>				
5. Where do your <b>usually</b> feed your baby at night? Please select one. Other _____	Chair	Recliner	Sofa	Bed
6. Over the past two weeks, how often would you say that you fell asleep when feeding your baby?	Never	Only Sometimes	A lot	
7. Over the past two weeks, how often would you say that your baby slept in bed with you?	Never	Only Sometimes	A lot	
8. Over the past two weeks, how often would you say that your baby needed a blanket when sleeping?	Never	Only Sometimes	A lot	
<b>Teaching others about Safe Sleep</b>				
9. Since you have been at home, how often have you been telling family and friends about safe sleep practices for your baby?	Never	Only Sometimes	A lot	

**Additional Questions:**

**10. Have you used social media or an Internet website to get information about infant safe sleep.**

**Yes OR No**

**11. Is there anything you would like to share with us about what was helpful about learning about infant safe sleep?**

**12. Is there anything you would like to share with us about what we could do better to improve teaching about infant safe sleep?**