



Penn Medicine

Module 1 Suggested PSNA Application Content

“Evidence-based and Best Practices for Safe Sleep with Well Newborns” On-Line Training Module

A. Description of professional practice gap:

Approximately 3500 infants die annually in the United States from sleep related infant deaths, including sudden infant death syndrome (SIDS), ill-defined deaths and accidental suffocation and strangulation in bed (American Academy of Pediatrics [AAP] 2016 policy statement). Philadelphia has a high rate of infant death. Philadelphia’s Department of Public Health’s (PDPH) most recent data published in April 2013, states that “approximately 50 infants per year died suddenly and unexpectedly in Philadelphia. In addition, “34 infants died of accidental suffocation, 10 of which were due to another person laying on top of them. Every one of these 34 suffocation deaths could have been prevented had the infant been placed in a safe sleep environment.”

To enhance HC providers knowledge this module was developed to deliver training on Sudden Unexpected Infant Death (SUID) accidental strangulation and suffocation and SIDS as well as incorporating evidence-based safe sleep practices and risk reduction methods for infants into the clinical setting. This independent-guided learning on-line module was developed to train all nursing staff in the women’s health departments in Pennsylvania birthing hospitals. Module content presents effective ways to promote and role model safe sleep practices and increase awareness of unsafe practices in clinical care.

B. Evidence to validate professional practice gap:

Input from stakeholders such as learners, managers, or subject matter experts
Statistics from AAP Policy Statement and Philadelphia Department of Health
Data cited in section A (current state)

C. Educational need:

This education encompasses knowledge, skill, and practice. It will provide foundational knowledge for the clinical practice nurses to carry out their accountabilities, the skill to recognize when safe sleep practices are not followed and the proper actions to implement to correct the environment and the ability to model and practice safe sleep in their daily practice.

D. Target audience:

RNs at (*name of hospital*) in Women’s Health Department-Obstetrics/Neonatal

E. Desired outcome:

The Nurse will: 1. Define SUID and describe risk factors; 2. Describe, demonstrate, and role model evidence-based best practices related to promoting safe sleep for infants in the hospital environment; 3. Incorporate consistent surveillance of infant’s sleep environment into daily practice; 4. Identify when an unsafe sleep environment exists; 5. Demonstrate proper actions to effectively correct an unsafe sleep environment.

Nursing professional development
Patient outcome

F. Content for this educational activity was chosen from:

Organization

CDC, American Academy of Pediatrics (AAP) – Safe Sleep Guidelines

Peer-reviewed journal articles

American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome. SIDS and Other Sleep-Related Infant Deaths: Updated 2016 Recommendations for a Safe Infant Sleeping Environment. Pediatrics, 2016: 138 (5): 2016 -2938.

American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome. Technical Report. SIDS and Other Sleep-related Infant Deaths: Evidence Base for 2016 Updated Recommendations for a Safe Infant Sleeping Environment. Pediatrics, 2016: 138 (5): 2016-2940.

Expert resource

AAP Task Force on Sudden Infant Death Syndrome

G. Engagement strategies:

- Time for self-check or reflection
- Opportunities for problem-based learning

H. Criteria for successful completion

- Credit awarded commensurate with participation
- Completion/submission of evaluation form

Description of evaluation method:

Self-assessment questions will be integrated throughout the module to test learners' knowledge of the content and application to clinical care. Responses will be tracked and downloaded to evaluate learning, provide a learner specific performance report, and summary data for the overall impact of the module. A safe sleep environmental assessment audit tool has been created to compare results of pre and post-learning module practice compliance.

Short term evaluation option:

Intent to change practice

Long term evaluation options:

- Self-reported change in practice
- Change in quality outcome measure

Qualified Planners and Faculty/Presenters/Authors/Content Reviewers

Appendix A

Content of Activity and CNE Calculation

Objectives		
1. Define SUID and describe risk factors 2. Describe, demonstrate and role model evidence based practices related to safe sleep in the hospital environment 3. Incorporate consistent surveillance of infant's sleep environment into		

<p>daily practices</p> <p>4. Identify when an unsafe sleep environment exists</p> <p>5. Demonstrate proper actions to effectively correct an unsafe sleep environment</p>		
<p>Content based on Objectives</p>	<p>References/Resources</p>	<p>Time Calculation</p>
<p>Background Information: Definition and risk factors related to Sudden Unexplained Infant Death (SUID)</p> <ul style="list-style-type: none"> • Definition of SUID • Types and causes of SUID • Accidental Suffocation and Strangulation in bed (ASSB) • Three types of SUID • AAP recommendations • Incidence and sociodemographic risk • Philadelphia incidence and risk factors • Incidence in the United States • Sociodemographic risks in the United States 	<p>AAP task force on sudden infant death syndrome. (2016) https://www.cdc.gov/sids/ http://www.phila.gov/health/Commissioner/DataResearch.html Becher et al., 2012; Herlenius et al., 2013 Moon et al., 2016 Mitchell EA, Milerad J. 2006; Dietz PM, England LJ et al., 2010). Stratton et al., 2003; Vennemann et al., 2007). Chan et al., 2012; Rubens et al., 2008) Colson et al., 2013). Ruys et al., 2007; Ball et al., 2016; Huang et al., 2013 Kendall-Tacker et al, 2010 Shapiro-Mendoza, 2016 Vennemann et al, 2009; Joyner et al., 2009.</p>	<p>15 min</p>
<p>Practices to Reduce SUID: Evidence based practices related to safe sleep in the hospital environment</p> <ul style="list-style-type: none"> • Recommendations related to: Positioning, Skin to Skin, Preterm Infants, Infants that roll, Sleep surfaces, Sitting Devices, Sleep locations and bed sharing, Feeding 	<p>AAP task force on sudden infant death syndrome. (2016) Batra et al, 2015 Moon, 2016 Ruys et al, 2007 Shapiro-Mendoza et al, 2014 Ball et al, 2016 Colson et al, 2013 Kendall-Tackett et al, 2010</p>	<p>30 min</p>

<p>while in bed, Providing guidance to parents, Crib safety, sitting devices, Environmental safety and temperature control, Swaddling, Tummy time, Breastfeeding, Pacifiers</p>		
<p>Educational Interventions for Parents and Caregivers: Surveillance of safe sleep in daily practices and actions to correct an unsafe sleep environment</p> <ul style="list-style-type: none"> • Education and interventions for parents and caregivers including swaddling evidence, tummy time recommendations, immunizations, hearing screening and environmental toxicants • Safe sleep videos and written education • Modeling Safe Sleep in the Hospital • Media Messages and their role in influencing beliefs and attitudes 	<p>Moon et al., 2016 Joyner et al., 2009 Dietz et al, 2010 Farquhar et al, 2008 Miller et al, 2015 Moro et al, 2015 Vennemann et al 2007 Mitchell & Milerad, 2006</p>	<p>15 minutes</p>
<p>Full Reference List</p>	<p>AAP task force on sudden infant death syndrome. (2016) SIDS and other sleep-related infant deaths: Updated 2016 recommendations for a safe infant sleeping environment.</p> <p>Pediatrics. 138(5): e20162938. Doi: 10.1542/peds2016-2938.</p> <p>Ball H.L., Howel D., Bryant A., Best E., Russell C., & Ward-Platt M. (2016). Bed-sharing by breastfeeding mothers: Who bedshares and what is the relationship with breastfeeding duration? Acta Paediatrica, 105(6):628–634.</p>	

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