

Sudden Unexpected Infant Death (SUID) Prevention Change Package

Purpose

The Sudden Unexpected Infant Death Prevention (SUID) change package includes: 1) a sample aim statement, 2) a driver diagram and 3) a measurement strategy for achieving the aim of reducing deaths to infants less than one year of age resulting from sudden unexpected infant death (Sudden Infant Death Syndrome or SIDS, accidental suffocation and strangulation in bed, and unknown causes).

The SUID prevention change package is intended to spread well-established practices across a large number of pilot sites in states/jurisdictions. We expect the aim to be achieved if you are working across the entire driver diagram (e.g. all drivers, using multiple change ideas) and state/jurisdiction wide. If you are only working in selected areas of the driver diagram, we recommend that you strategically choose reinforcing drivers and change ideas to achieve the greatest impact and then revise your aim statement and goals accordingly.

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Driver Diagram

Primary Driver	Secondary Driver	Change Ideas	Recommended Measures
PD1: Societal level Culture of infant safe sleep practices	SD1: Knowledgeable partners and policymakers	<ol style="list-style-type: none"> Educate policymakers about best practices for SUID prevention programs and policies, including those developed by the American Academy of Pediatrics (AAP) and National Institute of Health (NIH)/National Institute of Child Health and Development (NICHD) Work with the state hospital association to encourage hospitals and birthing facilities to require the provision of infant safe sleep training to health care providers, including NICU staff Work with hospitals and birthing facilities to provide infant safe sleep education (AAP and NIH/NICHD) for parents/caregivers, conduct crib audits, and use an attestation form to verify parent/caregiver receipt of infant safe sleep education Train first responders, including law enforcement, firefighters, and Emergency Medical Services in infant safe sleep to enable them to identify and eliminate safe sleep hazards while on emergency calls (e.g. DOSE program) 	3, 7, 9, 14
	SD2: Multi-stakeholder partnerships	<ol style="list-style-type: none"> Partner with Child Death Review (CDR) teams to increase the understanding of circumstances related to infant deaths Establish and/or expand infant safe sleep partnerships with organizations and systems that serve families of low socio-economic status, immigrant/minority communities, including child protective services, faith-based organizations, Safe Kids, foster care, child care, Cribs for Kids, Emergency Medical Services, Medicaid, AARP and other programs Align the work of all relevant areas and programs within the state health agency (e.g., WIC, MCH, Early Intervention, Healthy Start, Office of Health Equity/Office of Minority Health, Immunization, IVP) to ensure consistent approaches and messaging regarding safe sleep. Engage and educate lay health advisors or “natural helpers” who are trusted individuals and groups that are influential in the lives of mothers, fathers, grandparents and other infant caregivers 	5, 10, 11, 12

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Primary Driver	Secondary Driver	Change Ideas	Recommended Measures
<p>PD2: Organizational level</p> <p>Organizational policies and procedures support the practices and culture of SUID prevention</p>	<p>SD1: Adoption of AAP and NIH/NICHD guidelines for infant safe sleep</p>	<ol style="list-style-type: none"> 1. Recruit participation among hospitals and birthing facilities in the National Safe Sleep Hospital Certification Program 2. Implement and spread best practice infant safe sleep campaigns developed by AAP and NIH/NICHD (Safe to Sleep Campaign, SLEEP SAFE Campaign) with partner organizations and communities 3. Implement well-established infant safe sleep information and education (e.g. ABC brochure in multiple languages) in partnership with organizations and communities to reach vulnerable and high-risk populations (teen mothers; American Indian and Black, non-Hispanic families; parents of premature infants; grandparents; adoptive parents; expectant and pregnant women who smoke and/or drink and their partners; non-breast feeding partners) 4. Implement and spread the use of infant safe sleep checklists and distribution of safe sleep educational materials (e.g. safe sleep door hangers) by home visitors 5. Utilize best practice infant safe sleep educational resources (e.g. “Sleep Baby Safe and Snug,” Charlie’s Kids Foundation) that providers can share with parents and caregivers 	1, 2, 5, 6, 8, 13
	<p>SD2: Policies and state licensing regulations that improve the understanding and prevention of SUID</p>	<ol style="list-style-type: none"> 1. Partner with agencies (e.g. child care, protective services, foster care and welfare) to incorporate infant safe sleep education of providers as part of licensure, on-site safety checks and inspections. 2. Incorporate policies into state procurement that require contractors and state grantees to include safe sleep messages, when appropriate 3. Promote the use of CDC’s Sudden Unexplained Infant Death Investigation Reporting Form (SUIDIRF) investigation guidelines and training curriculum among medical examiners and coroners 4. Establish organizational policy to track all sudden unexpected infant deaths through CDR teams and provide feedback to administrators at birthing hospitals 	1, 15, 16, 17, 18, 22

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Primary Driver	Secondary Driver	Change Ideas	Recommended Measures
<p>PD3:</p> <p>Relational/ individual level</p> <p>Families and care givers knowledgeable in SUID prevention</p>	<p>SD1:</p> <p>Providing safe sleep resources to families and caregivers</p>	<ol style="list-style-type: none"> 1. Distribute free or discounted federally approved cribs/Pack n' Plays to parents/caregivers through Cribs for Kids or similar programs 2. Distribute safe sleep educational materials with birth certificates, at infant pediatric visits, through WIC, Early Intervention, Healthy Start and other home visiting programs 3. Make culturally appropriate resources about SUID prevention available to families/caregivers (e.g. ABC brochure in multiple languages) 4. Work with retailers (e.g. grocery store, pharmacies, "baby stores") to display and advertise appropriate and safe sleep environment messages both in-store and online 5. Include infant safe sleep in the curriculum for babysitting classes 6. Utilize social media, blogs, infographics to increase parents/caregivers' understanding of SUID 	<p>1, 4, 19, 20, 21, 22</p>

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Measurement Strategy

Select the measures that will give you the best indication of improvement from working on your drivers and change ideas. Your state/jurisdiction is encouraged to choose up to 5 - 7 (or more if needed) measures. More than one change idea may be necessary to move a given measure. We encourage all states/jurisdictions to report on the 3 state/jurisdiction process measures, monthly or quarterly, and to explore the ability to collect data that is more current.

Note: The measurement strategy does not include a specific measure for each change idea. When selecting measures, consider the set of change ideas that will be necessary to move a measure. This may include change ideas that do not have a “recommended measure” listed in the driver diagram. If you would like guidance on selecting or adding measures, please contact CSN for technical assistance.

State/Jurisdiction Outcome Measures	Process Measures
<ul style="list-style-type: none"> • Rate of sudden unexpected infant deaths • Percent of safe sleep behaviors 	<ol style="list-style-type: none"> 1. Number of organizations/agencies that participate in implementing and/or spreading best practices infant safe sleep campaigns 2. Number of hospitals and birthing facilities providing infant safe sleep training to health care providers 3. Number of hospitals and birthing facilities providing infant safe sleep education to parents/caregivers 4. Number of organizations/agencies that distribute free or discounted Pack n' Plays or cribs to parents/caregivers 5. Number of organizations/agencies serving vulnerable and at-risk populations with best practices infant safe sleep information and education 6. Number of new parents/caregivers, including those in vulnerable, at-risk communities, who receive best practices infant safe sleep education and information 7. Number of first responder agencies receiving training on infant safe sleep hazards 8. Number of home visitor program sites using infant safe sleep checklists and distributing safe sleep educational materials 9. Number of policymakers receiving best practices information and education on SUID 10. Number of partnerships developed and/or expanded to promote and spread best practices infant safe sleep education 11. Number of state health agency programs that align work to ensure consistent approaches and messaging regarding infant safe sleep

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State/Jurisdiction Outcome Measures	Process Measures
<ul style="list-style-type: none"> • Rate of sudden unexpected infant deaths • Percent of safe sleep behaviors 	<ol style="list-style-type: none"> 12. Number of lay health advisors or “natural helpers” engaged and educated to promote infant safe sleep messages 13. Number of hospitals and birthing facilities that participate in the National Safe Sleep Hospital Certification Program 14. Number of state hospital associations that request and support hospitals and birthing facilities to require the provision of infant safe sleep training for health care providers, including NICU staff 15. Number of state agencies (e.g. child care, protective services, foster care and welfare) that require safe sleep education of providers as part of licensure, on-site safety checks, and inspections 16. Number of medical examiners and/or coroners who utilize the CDC SUIDIRF investigation guidelines and training curriculum 17. Number of local CDR teams who routinely collect information on sudden unexpected infant deaths 18. Number of CDR teams that report sudden unexpected infant deaths back to birthing hospitals 19. Number of hospitals/organizations distributing infant safe sleep educational materials with birth certificates, at infant pediatric visits, or through home visiting programs. 20. Number of retailers (e.g. grocery stores, pharmacies, “baby stores”) that display and advertise appropriate and safe sleep environment messages both in store and online. 21. Number of organizations including infant safe sleep messages in the curricula of babysitting classes 22. Number of infants sleeping according to AAP recommendations (e.g. placed on her back to sleep every time; on firm sleep surface such as a crib mattress covered by a fitted sheet; with room-sharing, not bed-sharing; no soft objects or loose bedding in crib (e.g. stuffed animals, crib bumpers, pillows); dressed appropriately for the environment, to avoid overheating; with no exposure to alcohol, smoking or illicit drugs)

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State/Jurisdiction Outcome Measures

Measure	Numerator	Denominator	Data Collection Methods	Reporting Frequency
Rate of sudden unexpected infant deaths	Total number of sudden unexpected deaths among infants under age 1	Total number of live births in the same year	Work with state epidemiologist, using the Sudden Unexpected Infant Death (SUID) Outcome Data Worksheet	Monthly or Quarterly depending on what is feasible for your state/jurisdiction
Percent of safe sleep behaviors	Total number of infants under age 1 sleeping according to the AAP recommendations for safe infant sleep	Total number of infants under age 1 whose parent/guardian responded to the survey	Pregnancy Risk Assessment Monitoring System (PRAMS) National Survey of Children's Health	Yearly

Process Measures

Note: Review the data collection column for guidance on operationalizing process measures. You may need to conduct assessments or administer questionnaires to determine your population of interest.

Name	Goal	Data Collection	Reporting Frequency
1. Number of organizations/agencies that participate in best practices infant safe sleep campaign	Total number of organizations/agencies you aim to reach	Establish your goal. Define "participate." Track the aggregate number of organizations/agencies that participate in the campaign. Additional data you may find useful to track: Number and type of sites/organizations in your state.	Monthly

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Name	Goal	Data Collection	Reporting Frequency
<p>2. Number of hospitals and birthing facilities providing infant safe sleep training to health care providers</p>	<p>Total number of hospitals and birthing facilities you aim to reach</p>	<p>Establish your goal.</p> <p>Define “providing infant safe sleep training to health care providers.”</p> <p>Track the aggregate number of hospitals and birthing facilities that provide infant safe sleep training to health care providers.</p> <p>Additional data you may find useful to track: Type of organization; type of training; copy of training curriculum; the number of health care providers who receive training; the number of parents/caregivers who receive education through providers; the number of infants reached; the number of crib audits conducted by providers; the number of attestation forms used to verify parent/caregiver receipt of safe sleep education.</p>	<p>Monthly</p>
<p>3. Number of hospitals and birthing facilities providing infant safe sleep education to parents/caregivers</p>	<p>Total number of hospitals and birthing facilities you aim to reach</p>	<p>Establish your goal.</p> <p>Track the aggregate number of hospitals and birthing facilities that are providing infant safe sleep education to parents/caregivers.</p> <p>Additional data you may find useful to track: Type of organization; type of education; the number of health care providers giving education; the number of parents/caregivers who receive infant safe sleep education; the number of crib audits conducted; the number of attestation forms used to verify parent/caregiver receipt of safe sleep education; the number of infants reached.</p>	<p>Monthly</p>

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Name	Goal	Data Collection	Reporting Frequency
4. Number of organizations/agencies that distribute free or discounted Pack n' Plays or cribs to parents/caregivers	Total number of organizations/agencies you aim to reach	<p>Establish your goal.</p> <p>Track the aggregate number of organizations that provide Pn'P or cribs to parents/caregivers; the number of parents/caregivers who receive Pn'P or cribs</p> <p>Additional data you may find useful to track: Type of organization(s); organizations offering the service; educational materials provided with the Pn'P or crib; waitlist and time on a waitlist.</p>	Monthly
5. Number of organizations/agencies serving vulnerable and at-risk populations with best practices infant safe sleep information and education	Total number of organizations/agencies you aim to reach	<p>Establish your goal.</p> <p>Define vulnerable and at-risk populations.</p> <p>Define "serving."</p> <p>Track the aggregate number of organizations serving vulnerable and at-risk populations; report the number of individuals trained; report the type of education program provided to parents/caregivers; report the number of parents/caregivers who receive education; report the number of infants reached.</p> <p>Additional data you may find useful to track: Type of organization; demographics of population reached; type of educational curriculum</p>	Monthly
6. Number of new parents/caregivers, including those in vulnerable, at-risk populations who receive best practices safe sleep education and information	Total number of new parents/caregivers you aim to reach	<p>Establish your goal.</p> <p>Define vulnerable and at-risk communities.</p> <p>Track the aggregate number of parents and caregivers of infants who participated in a best practices infant safe sleep program (partial or complete participation).</p> <p>Additional data you may find useful to track: Type of site(s); type of best practices infant safe sleep program(s); completion of training by participants.</p>	Monthly

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Name	Goal	Data Collection	Reporting Frequency
<p>7. Number of first responder agencies receiving training on infant safe sleep hazards</p>	<p>Total number of agencies you aim to reach</p>	<p>Establish your goal.</p> <p>Track the aggregate number of responder agencies receiving training on infant safe sleep hazards.</p> <p>Additional data you may find useful to track: Type of first responder agency; job title of trainees; ; name and type of curricula or training program(s); number of individuals trained; number of families reached (you may need to estimate this); number of infants reached; number of families referred to Cribs for Kids or similar organizations. You may need to estimate the number of infants reached (e.g. infants less than one year of age whose parents/caregivers receive infant safe sleep kits).</p>	<p>Monthly</p>
<p>8. Number of home visitor program sites using infant safe sleep checklists and distributing infant safe sleep educational materials</p>	<p>Total number of home visitor program sites you aim to reach</p>	<p>Establish your goal.</p> <p>Track the aggregate number of home visitor program sites using infant safe sleep checklists and distributing infant safe sleep educational materials.</p> <p>Additional data you may find useful to track: Number of home visitors who use infant safe sleep checklists and distribute safe sleep educational materials; number of checklists completed; number of infants reached. You may need to estimate the number of infants reached (e.g. number of infants less than one year of age served by each home visitor).</p>	<p>Monthly</p>

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Name	Goal	Data Collection	Reporting Frequency
9. Number of policymakers receiving best practices information and education on SUID	Total number of policymakers you aim to reach	<p>Establish your goal.</p> <p>Define “receiving best practices information and education on SUID.”</p> <p>Track the aggregate number of policymakers educated in infant safe sleep.</p> <p>Additional data you may find useful to track: Number and type of interactions with policymakers. Any policy initiatives or other infant safe sleep-related activity resulting from interactions with policymakers.</p>	Monthly
10. Number of partnerships developed and/or expanded to promote and spread best practices infant safe sleep education	Total number of partnerships you aim to develop and/or expand	<p>Establish your goal.</p> <p>Track the aggregate number of organizations that participate in a partnership designed to increase infant safe sleep behaviors.</p> <p>Additional data you may find useful to track: Number of families reached by each organization.</p>	Monthly
11. Number of state health agency programs that align work to ensure consistent approaches and messaging regarding infant safe sleep	Total number of programs you aim to reach	<p>Establish your goal.</p> <p>Define “align work to ensure consistent approaches and messaging.”</p> <p>Track the aggregate number of programs that align work to ensure consistent approaches and messaging regarding infant safe sleep.</p> <p>Additional data you may find useful to track: Names and type of program(s); number of staff trained in infant safe sleep; materials and tools that are aligned with infant safe sleep messages.</p>	Monthly

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Name	Goal	Data Collection	Reporting Frequency
12. Number of lay health advisors or “natural helpers” engaged and educated to promote infant safe sleep messages	Total number of lay health advisors or “natural helpers” you aim to reach	<p>Establish your goal.</p> <p>Track the aggregate number of lay health advisors or “natural helpers” who are engaged and educated to promote infant safe sleep messages.</p> <p>Additional data you may find useful to track: How advisors and helpers are identified; number of infant safe sleep contacts each lay health advisor or “natural helper” makes.</p>	Monthly
13. Number of hospitals and birthing facilities that participate in the National Safe Sleep Hospital Certification Program	Total number of hospitals and birthing facilities you aim to reach	<p>Establish your goal.</p> <p>Track the aggregate number of hospitals and birthing facilities that participate in the Certification Program.</p> <p>Additional data you may find useful to track: Number of hospitals/birthing facilities that achieve Certified Safe Sleep Hospital status, Certified Safe Sleep Leader status, Certified Safe Sleep Champion status.</p>	Monthly
14. Number of state hospital associations that request and support hospitals and birthing facilities to require the provision of infant safe sleep training for health care providers, including NICU staff	<p>Total number of state hospital associations you aim to reach</p> <p>N/A</p>	<p>Establish your goal.</p> <p>Track the aggregate number of state hospital associations that request and support hospitals and birthing facilities to require the provision of infant safe sleep training for health care providers.</p> <p>Additional data you may find useful to track: Copies of communication between state health associations and hospitals and birthing facilities encouraging requirement of infant safe sleep training.</p>	Quarterly

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Name	Goal	Data Collection	Reporting Frequency
15. Number of state agencies that require safe sleep education of providers as part of licensure, on-site safety checks, and inspections	Total number of state agencies you aim to reach	<p>Establish your goal.</p> <p>Define “require safe sleep education of providers as part of licensure, on-site safety checks, and inspections.”</p> <p>Track the number of state agencies that require safe sleep education of providers.</p> <p>Additional data you may find useful to track: Number of providers trained; number of safety checks and inspections completed.</p>	Monthly
16. Number of medical examiners and/or coroners who utilize the CDC SUIDIRF investigation guidelines and training curriculum	Total number of medical examiners and/or coroners you aim to reach	<p>Establish your goal.</p> <p>Track the aggregate number of medical examiners and/or coroners who utilize the SUIDIRF investigation guidelines and training curriculum.</p> <p>Additional data you may find useful to track: Number of investigations completed using SUIDIRF.</p>	Monthly
17. Number of local CDR teams who routinely collect information on sudden unexpected infant deaths	Total number of CDR teams you aim to reach	<p>Establish your goal.</p> <p>Define “routinely collect information on SUID.”</p> <p>Track the aggregate number of local CDR teams that collect information on SUID.</p> <p>Additional data you may find useful to track: Number of SUID cases reported on by state, county and local CDR teams</p>	Quarterly

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Name	Goal	Data Collection	Reporting Frequency
18. Number of CDR teams that report sudden unexpected infant deaths back to birthing hospitals	Total number of CDR teams you aim to reach	<p>Establish your goal.</p> <p>Define “reported back to birth hospitals by CDR teams”</p> <p>Track the number of CDR teams that report SUID cases back to birthing hospitals</p>	Quarterly
19. Number of hospitals/organizations distributing infant safe sleep educational materials with birth certificates, at infant pediatric visits, or through home visiting programs	Total number of hospitals/organizations you aim to reach	<p>Establish your goal.</p> <p>Track the number of hospitals and organizations (e.g. vital records offices, home visiting programs and pediatric practices) distributing infant safe sleep materials.</p> <p>Additional data you may find useful to track: Type of materials distributed; number of materials distributed; how materials are distributed; when materials are distributed; by whom materials are distributed</p>	Monthly
20. Number of retailers that display and advertise appropriate and infant safe sleep messages both in store and online	Total number of retailers you aim to reach	<p>Establish your goal.</p> <p>Define “promote appropriate safe sleep messages.”</p> <p>Track the number of retailers who promote infant safe sleep messages.</p> <p>Additional data you may find useful to track: Type(s) of messages; customer responses to messages.</p>	Monthly
21. Number of organizations including infant safe sleep messages in the curricula of babysitting classes	Total number of organizations you aim to reach	<p>Establish your goal.</p> <p>Track the number of organizations that agree to include evidence-based infant safe sleep training in their babysitting curriculum.</p> <p>Additional data you may find useful to track: Number of courses conducted; number of individuals trained.</p>	Monthly

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Name	Goal	Data Collection	Reporting Frequency
22. Percent of infants sleeping according to AAP recommendations	Total number of infants you aim to reach	<p>Establish your goal.</p> <p>Track the number of infants sleeping according to AAP recommendations. You may want to consider PRAMS as a data source.</p> <p>Additional data you may find useful to track: Number of organizations that record safe sleep behaviors among infants.</p>	Annually

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