

LLR Safer Sleeping Risk Assessment for babies under 12 months

LLR SAFER SLEEPING RISK ASSESSMENT TOOL

Since 2018, across Leicestershire & Rutland an average of 4 babies per year have died suddenly and unexpectedly in unsafe sleeping environments. These deaths are potentially preventable. Safer sleeping practices can reduce the risks of Sudden Infant Death Syndrome and accidental suffocation.

This tool helps practitioners work with families to identify those who are at most risk, identify support needs, and develop a plan to reduce risks. It can be used as a basis for conversations about safer sleeping, and to reinforce safer sleeping messages. It can be used more than once, as family routines change over time.



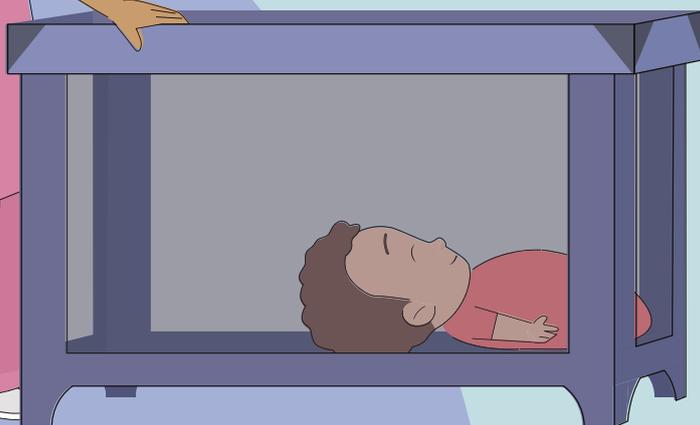
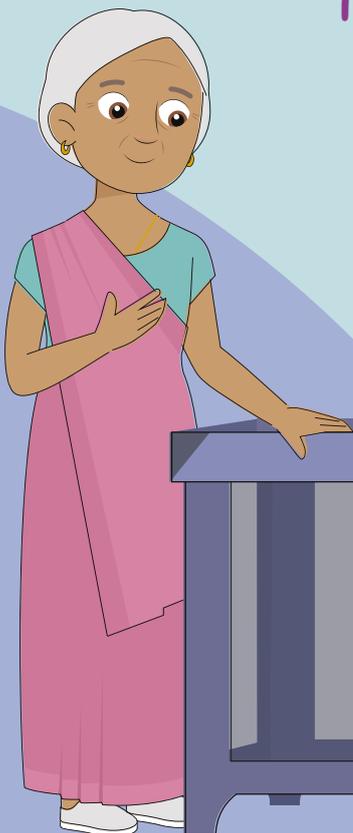
KEY SAFE SLEEP MESSAGES

Lullaby Trust ABC of Safer Sleeping: At every sleep, placed on their Back in a Clear cot or sleep space.

The safest place for a baby to sleep is in a smoke-free environment, in the same room as their parent/carer, for at least the first six months of life. Babies should be placed on their back, with their feet at the foot of the sleep space, on a firm, flat clear surface. We cannot prevent every death, but there are lots of positive steps that can be taken together to reduce the risks.

Things for parents /carers to avoid:

- Never sleep on a sofa or in an armchair with baby – they may become trapped.
- Don't sleep in the same bed as baby if you smoke, drink or take drugs.
- Don't sleep in the same bed as baby if they were premature or were low birth weight (under 2.5kg/5lb 8oz).
- Don't let baby get too hot.
- Don't cover baby's face or head while they are sleeping, and don't use loose bedding.



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The risks of being out-of-routine:

When families are out of their usual routines, whether planned (e.g. staying overnight with a friend) or unplanned (e.g. fleeing domestic abuse), babies still need to be put down to sleep safely. It is important to support families to think ahead about how they can continue to follow safer sleep advice, should their usual routines change. See 'TIPS FOR TALKING WITH FAMILIES ABOUT SAFER SLEEPING' below.

Safer Sleeping & the Law:

If a person of any age co-sleeps with a child on any surface, not under the influence of any drug/alcohol/or substance, and causes his or her death by suffocation, this will be deemed a tragic accident.

If a person of any age co-sleeps with a child on any surface whilst under the influence of any drug/substance/alcohol and cause their death by suffocation, they could be liable to criminal prosecution (Section 5. Offences against the Persons Act 1861).



A review of deaths in Leicester & Leicestershire from 2018 to 2022 found the following common factors in cases where unsafe sleeping was identified:

- Co-sleeping with an adult on a chair or sofa.
- Baby was born preterm (more than 3 weeks early / before 37 weeks).
- Baby with low birth weight (less than 2.5kg or 5lb 8oz).
- Parental smoking.
- Sharing a sleep space with an adult who has recently had alcohol, drugs that cause drowsiness or used drugs (including cannabis).
- Crowded or cluttered housing.
- Previous or current domestic abuse.
- Families (for whatever reason) being out of their usual routines.



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Parent/Carer Name

Name of practitioner completing assessment

Assessment Date

CHILD

- *Baby born premature (over 3 weeks early)?
- *Birth weight under 5lb 8oz / 2.5kg?

If yes to either, then safer sleeping is even more important to help keep baby safe.



PARENTING CAPACITY

- *Parent/carer on medicine causing drowsiness?
- *Parent/carer smoking currently?
- *Excessive parent/carer tiredness?
- *Parent/carer drug use?
- *Parent/carer alcohol use?
- Parent/carer learning needs?
- Smoking in pregnancy?

Baby's name:

Date of birth:

FAMILY, ENVIRONMENT & SLEEP SPACE

- Any smokers living in the household?
- Domestic abuse?
- Is there adequate space for a cot/Moses basket?
- Poor quality housing (e.g. damp/poor heating)?

BABY'S SLEEP SPACE

- Has there been a recent change in circumstances /family routine?
- Is there a safe sleep space for daytime sleeping?
- Is there a safe sleep space for night-time sleeping?
- Are parents choosing to co-sleep (share a sleep space)?

***If any red star areas ticked, co-sleeping is potentially very risky and parents/carers should be strongly advised not to co-sleep.**

Together with the parent/carer, what risks have you identified?

Agreed actions for parents/carers:

Together with the parent/carer, what actions have been agreed having completed the risk assessment?

Agreed actions for practitioner:

Review date due:

Remember:

If you have completed the risk assessment electronically save it to the adult/child's case file/record.
If you have completed a paper copy, add/scan/upload to the adult/child's case file/record.
Don't forget to give the parent/carer a copy, so they have a record of the discussion too.

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USING THE TOOL, IF ANY RISK FACTORS ARE IDENTIFIED, FOLLOW THESE STEPS:

- Check the family's knowledge & understanding of safer sleeping advice.
- Ensure that the Lullaby Trust information is given in the family's first language (the Easy Read card is available in a number of languages <https://www.lullabytrust.org.uk/professionals/publications/>).
- Explore what might be preventing the family from following the advice – this could be a range of things including advice from wider family members. Put a support plan in place and follow up as much as your professional role allows.
- Consider referring onto other services for support including mental health services, domestic abuse services and smoking cessation services. Try to explore why they have not engaged before and follow up on any referrals made.
- Complete the individual Risk Assessment Form below.
- If you have concerns seek advice from your agency's safeguarding lead and:
 - Liaise with other professionals working with the family.
 - Consider whether the family would benefit from an Early Help assessment.
 - Seek advice via Children's Social Care / complete Multiagency Referral Form (MARF)
 - Consider using the LLR Neglect toolkit (www.lcitylscb.org/information-for-practitioners/safeguarding-topics/neglect)
- If, having completed the Risk Assessment, there are repeated concerns about advice not being followed, this needs to be considered as an additional risk factor, and should be used to inform timely escalation.

Additional resources

The Lullaby Trust

Safer Sleep Information:

www.lullabytrust.org.uk/safer-sleep-advice/#

Lullaby trust video resources to share with professionals & families:

www.lullabytrust.org.uk/professionals/video-resources/

Lullaby Trust Easy Read card (also available in other languages):

www.lullabytrust.org.uk/wp-content/uploads/Easy-read-card-English-web.pdf

LLR Resources for parents:

www.lrsb.org.uk/icon

Health for under 5's, HomeStart, Early Help, Infant Feeding, Young Parents, Dad Pad.

Substance Misuse services:

Turning Point Leicester: www.turning-point.co.uk/services/leicester

Turning Point Leicestershire & Rutland: www.turning-point.co.uk/services/leicestershire

Smoking cessation/having a smoke-free home:

QuitReady Leicestershire & Rutland: www.quitready.co.uk/

Live Well Leicester City: <https://livewell.leicester.gov.uk/services/stopping-smoking/>

Domestic abuse:

LLR-wide – Freedom from Violence & Abuse (Freeva): www.freeva.org.uk/



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GUIDANCE FOR PRACTITIONERS: TALKING WITH FAMILIES ABOUT SAFER SLEEPING

The Risk Assessment Tool is the basis for starting conversations with families around safer sleeping.

When talking with families, it's really important to:

- explain reasons behind safer sleeping advice.
- work together with families to help them identify the particular risks for their baby.
- work together with families to help them find ways to plan and reduce risks for their baby.

CHAT:

Ideas for starting curious conversations:

Who else looks after your baby?
Do they know about safer sleeping advice, & how to keep your baby safe?

If you go to visit a friend and you make a last-minute plan to stay the night there, how could you make sure your baby has a safe sleep place?

Where did your baby sleep last night?
Where did they wake up this morning?
Is this where they normally sleep?

If one of you are going out with friends, and you plan to have a drink, how could you plan ahead to avoid sharing a sleep space with your baby when you come home?



SHOW:

Lullaby Trust Easy Read Card: www.lullabytrust.org.uk/wp-content/uploads/Easy-read-card-English-web.pdf

- The Easy Read card is available in lots of different languages via the Lullaby Trust website

Lullaby Trust also have lots of different animations about how to reduce the risk of SIDS: The Lullaby Trust safer sleep video resources - The Lullaby Trust

PLAN:

The LLR 'My Baby's Safer Sleeping Plan' can be given to families to use as a basis for discussion and planning. It might be helpful to make a list of three things they could do to make sleep time safer for their baby – having this list visible somewhere in the house can be a helpful reminder.

Examples for a list of 3 ideas to make sleep time safer:

- I will cut down on my smoking.
- I will speak to others in the house about not smoking indoors.
- I will move the cuddly toys out of the cot.
- I will make sure the cot is always kept clear, so it is ready to use.

Planning ahead – questions to start a conversation:

- If I'm cuddling my baby and I feel tired, do I have a safe space ready to put them down?
- If I'm planning on having a drink, how will I make sure that I have planned ahead for baby to sleep safely?
- If I have to leave home in a hurry and stay elsewhere, what do I need to keep baby's sleep space safe?
- If I am staying with baby overnight with friends, where will they sleep?
What will I need to keep their sleep space safe?

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My Baby's Safer Sleeping Plan

Baby's name:

Parent name(s):

Remember: The safest place for my baby to sleep at every sleep, is on their back, in a clear cot or sleep space, in the same room as me, for the first 6 months.

Things I can do to make my baby's sleep time safer at every sleep:

- Have a smoke-free house.
- Breastfeed if I can.
- Keep baby's sleep space ready and clear of clutter (including stuffed toys, pillows or duvets, cot bumpers).
- Always put baby to sleep on their back to sleep.
- Make sure that baby's head and face are free from being covered by loose bedding.
- Make sure that baby does not get too hot.
- Never fall asleep with baby on a chair or sofa.



Sharing a sleep space:

- I should only ever let baby share my sleep space if they were:
 - born at full term (more than 37 weeks) AND
 - born weighing more than 5 pounds, 8 ounces (2.5 kg)
- I should only ever let baby share my/our sleep space if I/we:
 - are sober.
 - do not smoke at all, and did not smoke during the pregnancy
 - are not taking medication which causes drowsiness.
 - are not under the influence of recreational drugs.

My change in routine plan:

If my baby and I are sleeping somewhere different:

Where will baby be sleeping at night?

Where will baby be sleeping during the day?

What things do I need to have with me or to get, to give them a safe sleep space?

My baby won't settle:

What will I do if my baby won't settle in their usual sleep space, to help them sleep safely?

Who do I need to share this plan with?

Who else looks after my baby?

Who can I go to for help, support and information?



Name of parent(s) completing this plan:

Name of professional supporting this plan:

Date:

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Acknowledgements

With agreement and thanks, the following resources were used & localised:
Safer Sleeping – A risk assessment tool for practitioners – Nottinghamshire Safeguarding Partnership & Nottingham City Safeguarding Children Partnership

