Working with families to promote safe sleep for infants: A new best practice guideline

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Agenda for Today's Workshop

- o Introduction
- o Expectations of participants
- Best Practice Guideline development process
- Review and discussion of practice recommendations
- o Moving from evidence to action
- o Questions and comments



Objectives

- o Share the process for BPG Development
- o Explore the best practice recommendations for safe sleep in infants
- o Explore strategies to apply those recommendations in your practice
- Explore strategies to gain organizational support for adopting recommendations into practice



Definitions

SIDS: The sudden death of an infant under 1 year of age, which remains unexplained after a thorough case investigation, including performance of a complete autopsy, examination of the death scene, and review of the clinical history (Beckworth, 2003).

Sleep environment: Anywhere an infant falls asleep, at any time.

Safe Sleep environment: An infant is in a safe sleep environment when placed in a crib, cradle, or bassinet that meets Canadian safety regulations and that is kept free of any extra items other than the mattress and a fitted sheet.



Definitions

Unintentional injuries: Unintentional injuries result when a series of events leads to someone being hurt, disabled, or killed through unplanned damage to the body (Ontario Ministry of Health and Long-term Care, Health Promotion Division, 2007).

Sharing the same sleep surface: The practice of sharing a sleep surface between adults and infants can include but is not exclusively defined by sharing the same bed. It may also include sleeping on other surfaces, such as sofas and armchairs.



Expectations of Participants

What are you hoping to learn from this workshop?



What is Evidence-Based Practice?

...the conscientious use of the best available research in combination with clinicians' expertise and judgment and patients' preferences and values to arrive at the best decision that leads to quality outcomes

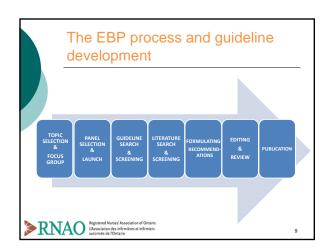
(Melnyk & Fineout-Overholt, 2005)

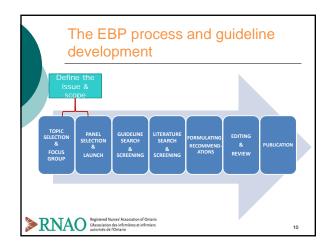


What is the EBP Process?

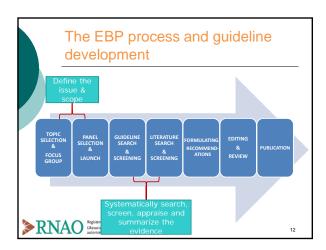
- o **Define** the issue, problem, or question
- o **Search** for the evidence
- o **Appraise** the evidence
- $\circ\,$ Synthesize the evidence
- o Apply the evidence in practice
- o **Evaluate** the performance of the evidence in practice
- o **Identify** areas where more research is needed

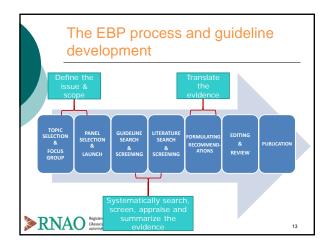




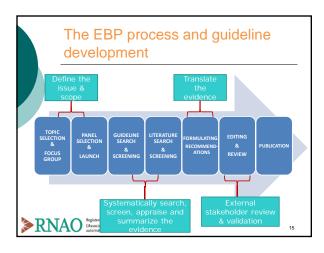












Guiding Principles

The following frameworks were used to guide the literature review and development of recommendations.

- Social Determinants of Health
- Informed Decision Making
- Anticipatory Guidance

Practice recommendations were also organized according to the nursing process (assessment, planning, implementation, and evaluation)



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Assessment Practice Recommendations

- 1.1 At every encounter, assess pregnant women, parents, and other caregivers for factors associated with a higher risk of unexpected death in infants while sleeping.
- 1.2 At every encounter, assess infants for factors associated with a higher risk for unexpected death while sleeping.
- 1.3 At every encounter, assess sleep position and the sleeping environment for factors associated with a higher risk for unexpected death in infants.



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Planning Practice Recommendations

2.1 Collaborate with parent/caregiver, family, significant others and the inter-professional team to develop a mutually agreed upon plan to promote safe sleep in all environments.



Assessment and Planning Practice Recommendations

How would you apply these recommendations in your practice?



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Implementation Practice Recommendations

- 3.1 Model safe sleep practices by placing infants on their back (supine position) for every sleep, unless medically contraindicated.
- 3.2 Educate parents/caregivers about safe sleep environments.
- 3.3 Encourage placing infants to sleep in an age appropriate crib, cradle or bassinet that meets current Canadian safety regulations.



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Implementation Practice Recommendations

- 3.4 Educate parents/caregivers and families about the benefits of sharing the same room with their infants for at least the first 6 months of life.
- 3.5 Educate parents/caregivers about the risks of sharing a sleep surface with their infant.
- 3.6 Support parents/caregivers in making an informed decision regarding pacifier use.



Implementation Practice Recommendations

How would you apply these recommendations in your practice?



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Implementation Practice Recommendations (cont'd)

- 3.7 Provide health education about the risk of smoking during pregnancy and SIDS.
- 3.8 Provide smoking cessation counseling before, during, and after pregnancy to women, family members and other caregivers identified as tobacco users.
- 3.9 Encourage women, family members and other caregivers to promote a smoke-free environment during and after pregnancy.
- 3.10 Provide health education about the risks associated with SIDS and alcohol and substance use and their potential effect during pregnancy and while caring for an infant.



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Implementation Practice Recommendations

How would you apply these recommendations in your practice?



Implementation & Evaluation Practice Recommendations

Implementation

- 3.11Provide health education before, during, and after pregnancy to promote breastfeeding as a protective factor against SIDS.
- 3.12 Provide health education before, during, and after pregnancy about routine immunization of infants as a protective factor against SIDS.

Evaluation

4.1 Evaluate parents'/caregivers' knowledge and implementation of safe sleep practices for infants.



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Education Recommendations

- 5.1 Perform self-reflection on knowledge, judgment, perceptions, practices and beliefs regarding safe sleep environments to reduce barriers to health teaching and modeling of recommendations.
- 5.2 Include content about safe sleep practices for infants in all foundational nursing education programs.
- 5.3 Provide continuing education and educational resources regarding safe sleep practices for nursing staff of organizations involved in prenatal, postnatal, and community-based family care.



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Organization & Policy Recommendations

- 6.1 Advocate for education, training and resources for alternate caregivers regarding safe sleep practices for infants
- 6.2 Participate in research regarding morbidity and mortality as it relates to infant sleep.
- 6.3 Advocate for improved systems for reporting and monitoring of morbidity and mortality related to infant sleep.
- 6.4 Develop policies that support the implementation of safe sleep practice recommendations in all organizations involved in prenatal, postnatal, and community-based family care.



Next steps: Moving from evidence to action

How do you begin to implement guideline recommendations?

Toolkit: Implementation of Clinical Practice Guidelines (2nd edition)

- An evidence-based guide to guideline implementation
- Available for free download
- www.rnao.ca
- English and French



Moving from evidence to action: start with a gap analysis

- The guideline implementation team will benefit by measuring the evidence-to-practice gap:
 - the gap that exists between evidencebased clinical recommendations from high quality clinical practice guidelines and current practice in the organization
 - Identified through a "gap analysis"





How do you mind the Gap?

Assess your current practice:

- What recommendations are being implemented? (strengths to build on)
- What recommendations are being partially implemented? (first targets for change efforts)
- What recommendations are not being met? (longer term practice change)
- What current practices are contrary to the recommendations?
- o What recommendations are not applicable?



Focus on Needed Practice Change

- Not all practice will change when implementing a new clinical practice guideline
 - Guidelines provide support for current practice & direction for practice improvement
 - It is critical to compare current practice to the recommendations
 - Implementation can then be directed towards reinforcing & sustaining existing best practices, and targeting specific areas for practice improvement



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Wrap up

o Final thoughts





For more information please visit the RNAO website

www.RNAO.ca/bpg

- o Access the guideline Working With Families to Promote Safe Sleep for Infants 0 -12 Months of Age
- o Access the *Toolkit: Implementation of Clinical Practice Guidelines*
- o Get more details regarding RNAO's various implementation resources

Questions? Contact Glynis Gittens ggittens@rnao.ca

