



Every  Sleep
Counts

Every
Sleep
Counts

Ashburton Hall Housekeeping

Hampshire County Council establishments are subject to a non smoking policy and ask that any smoking is carried out away from the buildings (This includes the courtyards).



Should you require first aid at any time during the event, please contact Facilities Management on 01962 847304 or go to the Reception desk and assistance will be given.



The two primary fire exits are at the entrance to the Hall where you came in, and the two secondary exits are located at the front of the Hall.



This room is fitted with an infrared hearing loop which is permanently switched on. In order to benefit from this system you will need either a neck loop (if you use a hearing aid) or head phones (for amplified sound). Please contact your event host to access the headsets.



The toilets are situated outside the Hall. Turn right outside the Hall and then left before the large yellow pillar.



Please be considerate and turn your mobile to silent, or turn it off.



Visitor Information

- Should fire alarms sound, please make your way back to the main entrance and exit onto Sussex Street. Turn left and walk to the end of Sussex Street, cross the road and go past the white barrier to the Assembly Point, which is outside the Great Hall on Castle Avenue. Someone from HCC will meet you there.
- Should you require any assistance in the event of an evacuation, please make a member of staff aware.
- Alarms are tested at 10:00am on Tuesdays and ring for approx 30 seconds. Do not evacuate unless instructed to do so by a member of staff.
- Should you require first aid at any time during the event, please contact Facilities Management on 01962 847304 or go to the Reception desk and assistance will be given.

Location of Assembly Point



Social media

#everysleepcounts



SIDS Background



<https://www.youtube.com/watch?v=HOik35TCvEk>

Please be aware that the contents of this film may be emotionally distressing

Co-sleeping and sudden infant death syndrome



The cause of sudden infant death syndrome (SIDS) is not fully known.

It is possible that many factors contribute but some factors are known to make SIDS more likely.

These can include:

1. The association between co-sleeping and SIDS whether the co-sleeping was intentional or unintentional and place of sleep (sofa v bed)
2. The association of smoking (mother and partner/carer) and SIDS
3. The association of co-sleeping and SIDS and parent/carer alcohol and drug use
4. The association between SIDS and low birth weight or premature babies.

Across the UK, on any one night, 22% of babies will be in bed with their parents.

Baby Development

1. Young babies will wake frequently during the night and need to be fed and cared for – this is normal and not modifiable
2. Many breastfeeding mothers sit up in bed to try to stop falling asleep, if she unintentionally falls asleep this can make the sleep position dangerous for the baby
3. Babies thrive on comfort and parents can feel that co-sleeping is the only way to settle the baby
4. Young babies are unable to re-position themselves
5. Babies have an immature nervous system and are unable to regulate their body temperature
6. The baby's head is the site of 40% of heat production and up to 85% heat loss – therefore covering the head (with hats/blankets) could result in thermal imbalance, which is associated with SIDs.



Why are we doing this programme



Since April 2016 13 babies have died in Hampshire where unsafe safe sleep was a presenting factor.



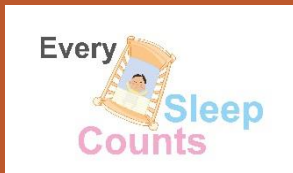
A survey of professionals highlighted the need for consistent messages to be shared with parents/ carers by multiple agencies at stages throughout pregnancy and post birth.



The need for clarity relating to the criminal offence of overlaying.

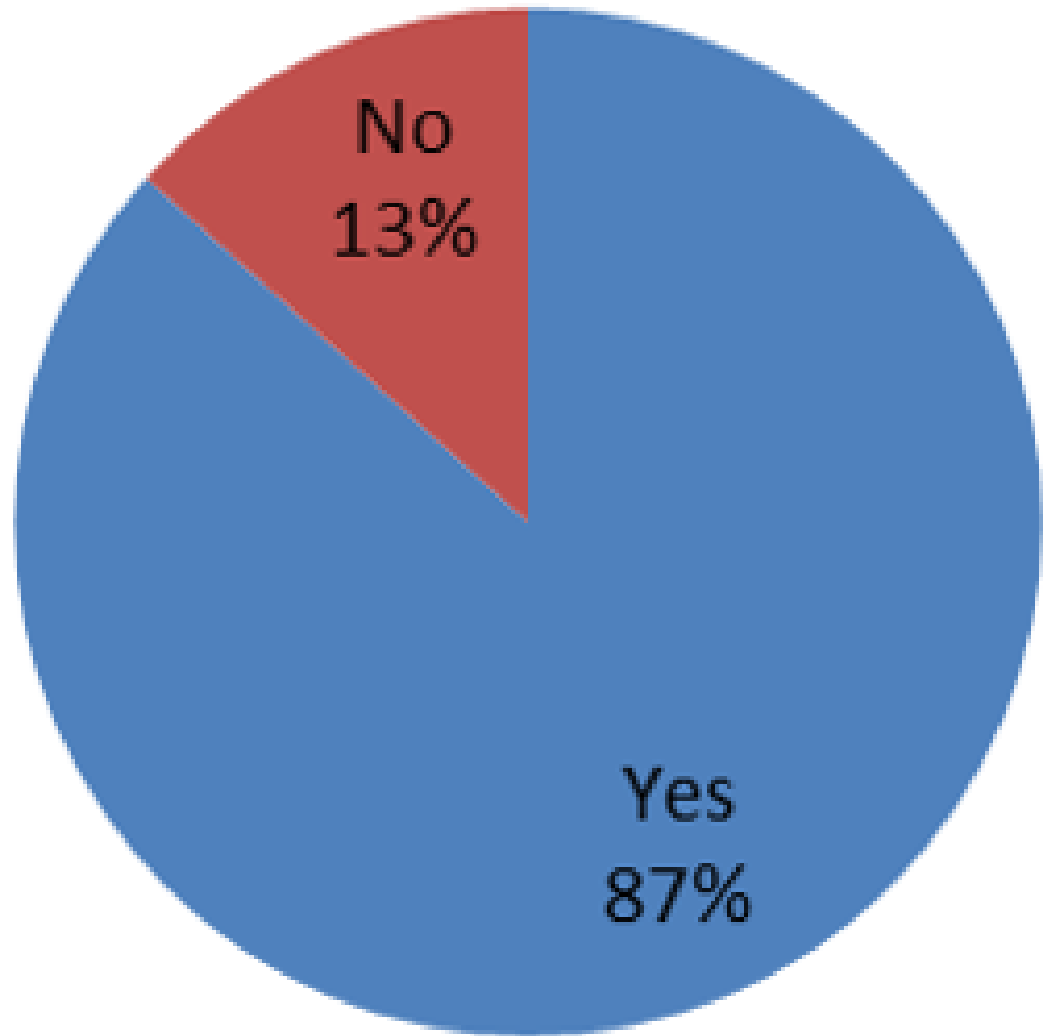


To bring messages regarding safe sleep together in one accessible leaflet.



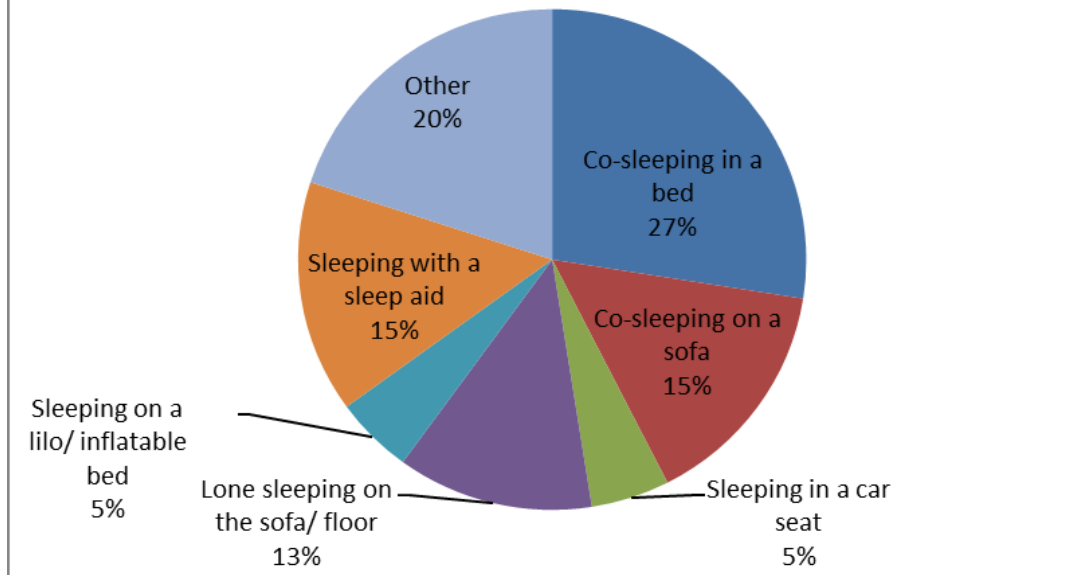
Why are we doing this programme- National Survey findings

All CDOPs across the country were asked- Have you had any deaths in your area where unsafe sleep was a presenting factor?



National Survey findings

How many deaths involved these presenting factors



Co-sleeping in a bed 27%

Co-sleeping on a sofa 15%

Sleeping in a car seat 5%

Lone sleeping on sofa/ floor
13%

Sleeping on a lilo 5%

Sleeping in a sleep aid 15%

Other 20%

Baby found face down on parent's bed

Baby sleeping in a cot wearing too many clothes and an adult duvet- overheated

Co sleeping on the floor with parents on a duvet

Sleeping on a separate part of a sofa to a parent

Lone sleeping on a bed with pillows acting as a barrier

National
Survey
findings-
other



What do we
want to
achieve

Reduction in the number of baby deaths where unsafe safe sleep is a presenting factor.

Support for professionals to give the safe sleep messages.

A consistent message is given to parents/ carers.

Parents/ carers are aware of all sleep risk factors.



What is Every Sleep Counts

- ❖ Every Sleep Counts is a programme of prevention aimed at parents and carers.
- ❖ It supports professionals to deliver consistent key safe sleep messages at numerous touch points during pregnancy and after birth.
- ❖ It brings together information on multiple risk factors associated with unsafe safe sleep.

Every



Sleep
Counts

The message

The safest place for your baby to sleep is on their back in a clear cot or Moses basket in the same room as parents/ carers for the first six months.



The message

Car seats

Car seats should only be used for journey's. If a baby is under six weeks old they should be taken out for a stretch every 30 minutes and every hour once they are over 6 weeks old.

Co-sleeping

Babies can not regulate their own temperature and can easily overheat. Duvets and pillows might cover their face and make it difficult to breath. An adult could roll onto the baby causing death or serious harm.

Smoking

Smoking significantly increases the risk of Sudden Infant Death Syndrome.



The message

Drugs and alcohol

Alcohol, street drugs and some prescription or over the counter medication can make you drowsy and may impact your response to a baby.

Travel cot

A travel cot is an ideal place for a baby to sleep when away from home but do not add any extra padding because the mattresses are thinner babies need a firm flat sleep surface.

Makeshift bed

Airbeds, sofa cushions, folded duvets or blankets, footstalls and pouffes are not safe for a baby to sleep on as they can move and are soft.



The message

Sleep aid

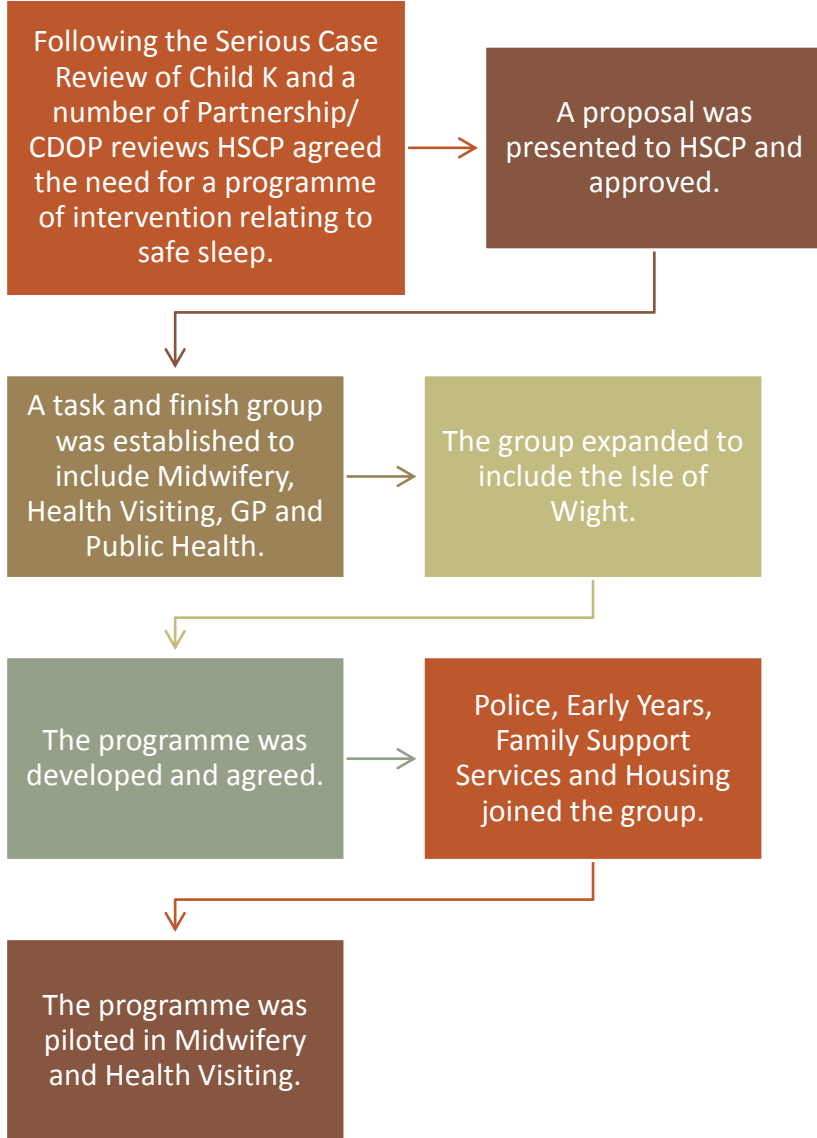
Sleep products are designed for specific ages and sizes, using a product that is not suitable for the babies age/size can be very dangerous. Just because something is made by a brand you know or sold on the high street doesn't make it safe.

Sofa

A sofa is one of the most dangerous places to fall asleep with a baby and increases the risks of Sudden Infant Death Syndrome by up to 50 times.



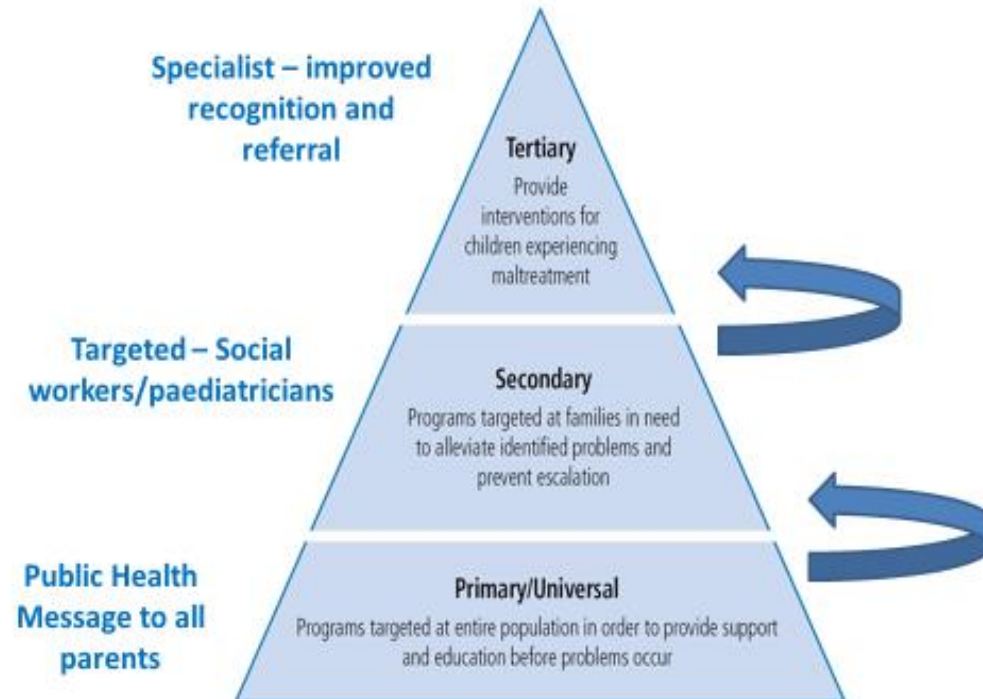
Quiz



Development of Every Sleep Counts

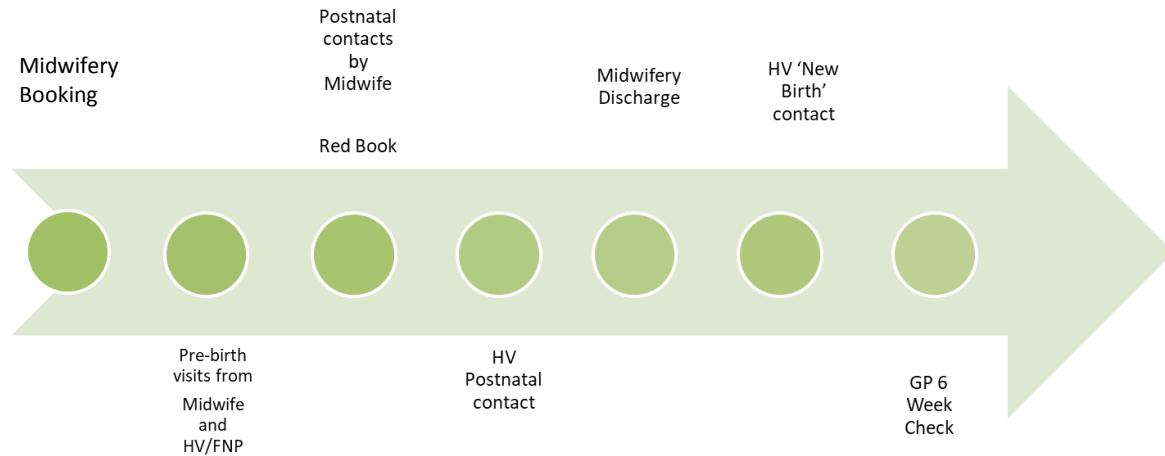
Every Sleep Counts Programme

Every Sleep Counts– Prevention



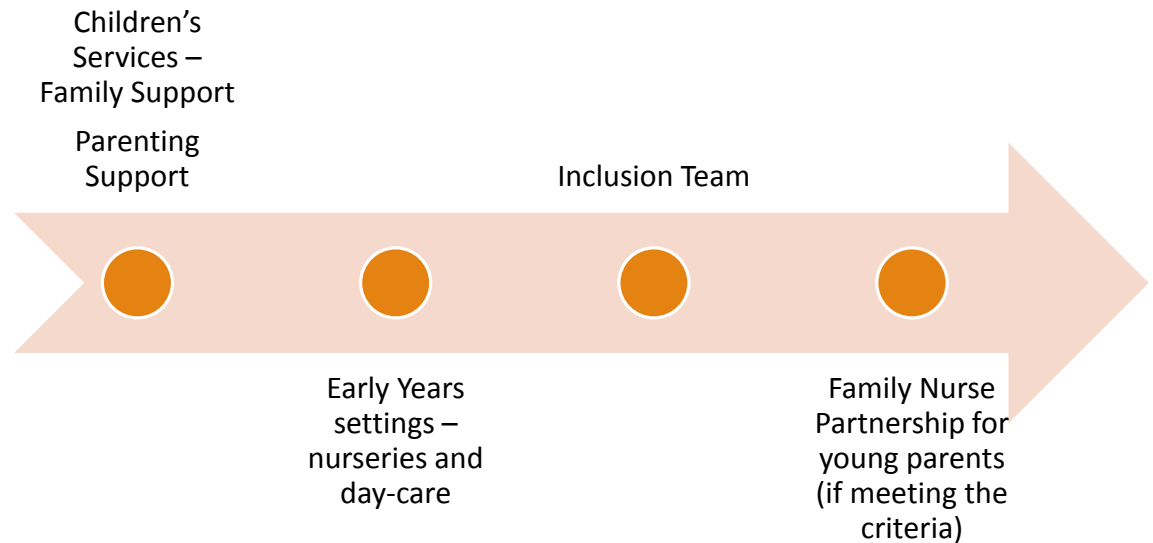


Every Sleep Counts Programme





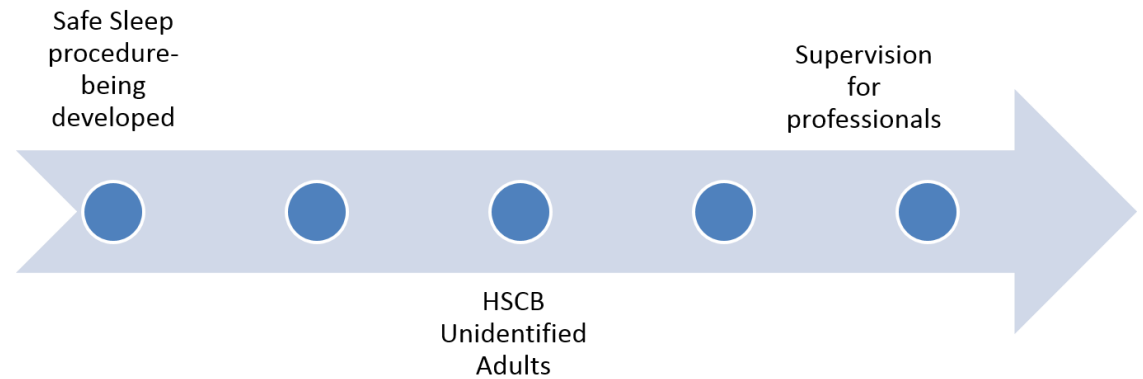
Every Sleep Counts Programme





Tertiary Stage of Prevention

Safe Sleep Programme



Who is currently involved in the programme?



MIDWIFERY

HEALTH
VISITING

GP'S

FAMILY
SUPPORT
SERVICES

POLICE

EARLY YEARS

HOUSING

Adult mattresses
are not made to
be safe for babies

Pictures in the
media don't
support safe sleep
messages



Neglect- Overlay Offence

DCI Liam Davies

#everysleepcounts

Overlay Offence

Where the cause of death for an infant under 3 years is suffocation (not caused by disease/ foreign body etc.)

The infant was in bed with a person who has attained the age of 16 years.

& that person was **under the influence of drink or a prohibited drug** either when they went to bed or at any later time before the suffocation.

N.B. includes any kind of furniture or surface used for the purpose of sleeping



Why do we need this offence?

#everysleepcounts



Police Response



If there is suspicion then **-sensitive** however we must secure evidence:

- Arrest & seizure
- Request evidential toxicology samples
- Interview
- Present cases to CPS

Even where there is no suspicion..

- Request a voluntary sample at hospital
- Part of the coroners process allowing the influence of alcohol or drugs to be excluded.

Wider Neglect Considerations (wilful)

- Those who allow others to sleep with their child when they know they are under the influence of drink/ drugs?
- Co-sleepers on prescription drugs which increase the risk- clearly warned about the dangers of co sleeping?
- Those who are not providing a safe sleep environment despite repeated clear warning?- sofa/ lilo?

Key points



- Prevention is the key- we all must play a role
- Clear messaging to parents about risk and the offence (and why it exists)
- Clear recording of direction parents/ carers to show wilfulness
- We do not want to criminalise parents/ carers but all children have a right to life and we have a duty therefore to investigate offences where apparent.

#everysleepcounts

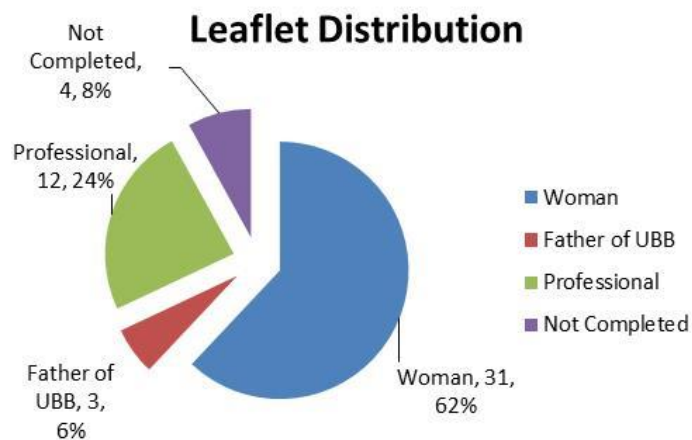






Pilot findings

Pilot Findings – HHFT (Maternity)



100% of parent/carer responders plan to follow the advice in the leaflet

92.31% of professionals believe the leaflet will help discussions with parents/carers

Parents/Carers			
		Yes	No
Before being given the leaflet, had you heard of safe sleep advice?		78.79%	15.15%
Were you aware of the risk factors relating to safe sleep?		72.73%	15.15%
Has the leaflet changed your awareness and knowledge regarding safe sleep?		81.82%	18.18%
Do you plan to follow the advice in this leaflet?		100.00%	0.00%
Professionals			
		Yes	No
Do you think the leaflet will increase your confidence in discussing safe sleep with parents?		84.62%	0.00%
Do you think the leaflet will help your discussion with parents?		92.31%	0.00%
Did the leaflet increase your knowledge about safe sleep?		69.23%	23.08%

Pilot Findings – HHFT (Maternity)

Really good but need crosses by the pictures in the leaflet, not just crosses on the poster (Dad - Marketing Manager)

No because I know this already, but I think this is a good idea to keep it close that information is where you need it

Yes ! I would feel confident chatting to parents about safe sleeping

Yes its made me more aware about the risks

I didn't know the suffocation law but it is a good law

Do you plan to follow the advice in this leaflet?

100% yes (Dad)

Yes, however, pictures can be misleading - needs to be obvious at a glance what pictures are demonstrating unsafe practice

It's a good tool to use with parents to help lead a conversation and ensure you cover all points

I will follow the advice in this leaflet

Yes, it is helpful but I do not like how it is set out. The main picture looks like the baby is strapped down rather than being under a thin blanket

Clear and detailed information on leaflet. Picture of baby asleep in a cot looks like she is being strapped down - doesn't look like a blanket. Not obvious what

Findings from the Feedback

- Client feedback was very positive in that 75% clients found the leaflet useful and commented that it increased their knowledge. 25% felt they already had knowledge of the information.
- Raising the awareness of the car journey information was the most reported benefit.
- 100% of clients said they would follow the advice given.
- 72% of Professionals found the leaflet useful as it was easy to follow, colourful and had good visuals. 27% of professionals felt they already had this discussion.
- Feedback on changes for the leaflet were given and then implemented.
- 100% of professionals felt It assisted the discussion of safe sleep and provided a focus point.

OUR VALUES





Embedding in practice



Safe Sleep
Message

Midwifery

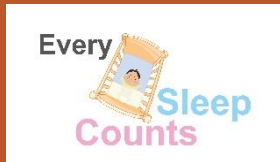
Health
Visiting

and Primary
Care

Dawn Oliver Named Midwife Hampshire
Hospital Foundation Trust

Amanda Martin Health visitor, Specialist
Practice Mentor

Dr Clare Harris Named GP Safeguarding
Children Hampshire and Kim Jones
Designated Nurse for Safeguarding Children
Hampshire



Leaflet to be included in Booking Pack



Discussion between 28-34 weeks
signpost to toolkit



Discussion at term



Day 1 Postnatal, practical discussion



Discharge from Maternity Ward/Birth
Centre



Every contact postnatally

Embedding Every Sleep Counts

Healthy Child Programme

- Antenatal (after 28 weeks or after 16 weeks if on the Teenage pregnancy pathway)
- New Birth Visit.
- Post natal contact.
- Movement into area.
- Making every contact count

Writing of the points for discussion for professionals.

OUR VALUES



Role of Primary Care in Promoting Safe Sleep



- 6-8 week postnatal mother and baby check is an opportunity to reinforce the safe sleep message
- GPs hold other information that may influence risk e.g. prescribing potentially sedative medication.
- Survey of Hampshire GPs (December 2018)
43% routinely discuss safe sleep at the 6 week check



Implementation of the Safe Sleep Message in Primary Care (1)



Education

GPs like evidence and data!

Study published May 2018 ***Qualitative analysis of serious case reviews into unexpected infant deaths***

Garstang, J.J. and Sidebotham, P., 2019. Qualitative analysis of serious case reviews into unexpected infant deaths. *Archives of disease in childhood*, 104(1), pp.30-36.

Child K risk factors were consistent with study findings

- Drug or alcohol abuse 66%
- Parental mental health problems 51%
- Domestic abuse 33%
- Parental criminal record 48%
- Neglect was feature in 55%
- Known to children's Services 70%(52% were on a CPP)
- Non engagement with professionals (including health) 66%



Implementation of the Safe Sleep Message in Primary Care (2)



- Promoted the safe sleep message at local primary care training events to over 250 Hampshire GPs and practice nurses
- Added a prompt to the GP postnatal check IT template
- Gathered feedback on the safe sleep leaflet

“Very useful reminder for GPs about the safe sleep message also easy to understand format”

“clear message and user friendly, will be useful to discuss at the postnatal check”

“This leaflet was a useful prompt in consultation to facilitate the conversation of the importance of sleep safety at a 6 week baby check, and also opportunistically when seeing new parents.”



Every



Partnership
Working

Sharon Pratt- Inclusion
Team Leader Services for
Young People

Andy Kennedy- Family
Support Services Manager
Children's Services

Sam Smith- District and
Borough Councils

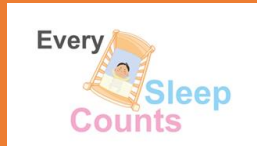


Services for
Young
Children
supporting
early years
providers and
families in
Hampshire

Services for Young Children offer advice, training and support to early years settings to enable them to provide a high quality, inclusive and safe environment for children before they start school.
Hampshire currently have:

697 preschools and
nurseries

1,184 childminders



Services for
Young
Children
supporting
early years
providers
and families
in
Hampshire

We will deliver the safe sleep message to these providers and to our teams who visit them by:

- delivering training in February and March via our 14 support groups for the safeguarding leads in each setting
- via a recorded webinar for those providers who are unable to attend our safeguarding lead support groups
- discussions at a range of other support groups, e.g. Provider Briefings aimed at managers, Birth to 4 aimed at practitioners and SENCo support groups for setting SENCOs
- raising awareness in our monthly Bulletin Blog sent to all settings
- raising awareness through team meetings to all staff who visit settings and homes to ensure consistent safe sleep messages are given

Family Support Service

FSS is part of the 'early help' provision for Hampshire run by the County Council for families with children aged 0 to 19 years (or up to 25 for young adults with learning difficulties and/or disabilities) to provide a joined-up, whole-family service to those who have high levels of need.



Family Support Service – Early Help

How the Every Sleep Counts message is incorporated into Family Support Service:

Secondary level of intervention so support is targeted at Level 2 and 3

The message is delivered in parenting groups, aimed at Early Years

Parents of young children who are asking for help with Every Sleep Counts will be invited to SOS clinic

Build awareness within CS through meetings, training opportunities, include Every Sleep Counts in work plans

Target families and build awareness through Early Help Hub Multi-agency meeting

Direct 1:1 work with families with young children

Build awareness with partner agencies – workshops and training opportunities



District and Borough District and Borough District and Borough Housing Services



- To establish current practice across all district and Borough Housing Services when placing families who are expecting a child/ have a baby.
- To produce best practice guidance for the placement of families who are expecting/ have a baby.
- To ensure that safe sleep is considered in all placements, by supporting awareness raising and training of housing professionals

Materials

Overview



Workforce Development



Practical Tools



Resources



Case Scenarios



Tell us about your good
practice



[Every Sleep Counts toolkit](#)

Materials

NHS

The safest place for me to sleep...



Every Sleep Counts




In the morning I wake up in my own safe cot

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface

This is the safest place for me to sleep, in my own cot or Moses basket in the same room as my parents/careers for the first six months.

Always put me to sleep flat on my back with my feet at the bottom of the cot/Moses basket for every sleep.

A room temperature of 16-20°C with light bedding or a lightweight, well-fitting baby sleep bag is comfortable and safe for me.

You should use a new firm and flat mattress that is protected by a waterproof cover.

My cot should be as clear as possible with no soft toys, cot bumpers, covers or pillows and the cot should adhere to British Safety Standards.

Breastfeeding, if possible, can help to reduce the risk of Sudden Infant Death Syndrome (SIDS).

Having a smoke-free household helps to reduce the risk of Sudden Infant Death Syndrome (SIDS).

Keep pets away from my cot or Moses basket even when I'm not in it.

Everything you buy for me needs to comply with British Safety Standards.

Journeys - car seat

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface

I need to go in my car seat when I am being driven somewhere.

If I am under six weeks old please sleep every 30 minutes and take me out of my car seat for a stretch, if I am older than six weeks then please take me out for a stretch every hour.

Please make sure that my car seat is fitted properly as per the manufacturer's own steps after the use as a service when you buy my car seat.

If you see that I have slumped forwards in my car seat please take me out as soon as it is safe to do so as this can make it hard for me to breathe.

Car seats should only be used for travel or sleeping, not for baby naps or sleeping in overnight.

Bedtime - co-sleeping

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface

If you decide you want me to sleep in your bed or if you fall asleep with me accidentally after feeding me be aware:

- I find it difficult to regulate my own temperature and can easily overheat. I am more at risk of Sudden Infant Death Syndrome (SIDS) if I get too hot.
- The covers and pillows might cover my face and stop me breathing.
- I could get rolled on by a person bigger than me or I could fall out causing a serious injury.
- Please don't drink flat whites with me or any other drinks if you have drunk alcohol, taken drugs or medicine that might make you drowsy.

All these risks are increased if I was born before 37 weeks or very small, or if I am or have been breast.

If an adult consumes alcohol and/or a prohibited drug and causes the death of a child under three years old through suffocation, by overfeeding and/or sleeping in the same bed, this is a criminal offence.

Smoking

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface

Smoking is harmful to both of us and significantly increases the risk of Sudden Infant Death Syndrome (SIDS).

Make sure my home is smoke-free and consider changing your clothes and washing your hands after smoking as harmful chemicals will stay on your clothes.

Drugs and alcohol

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface

Alcohol and illicit drugs can make you feel drowsy and impact your response to me. Some prescription and over the counter medications can also make you feel drowsy, make sure you ask your GP or pharmacist about this.

Please make sure there is always a sober carer who can respond to me and meet my needs.

Nap time - travel cot

A travel cot is a really great place for me to sleep when I'm not at home because the mattress is flat and firm.

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface



Please remember to soft toy, cot bumpers or pillows in the cot with me just like at home.

Nap time - makeshift bed

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface

Arbids are not a safe place for me to sleep, whether I am on my own or with someone else, they are soft and may move under my weight.

Soft cushions are not safe, they are too soft and can move around and trap me.

Laying down or business upholstery for me to sleep on is not safe as I can overheat.

Floor mats and carpets are not safe to sleep on as they are too soft and I might fall out.

If I am sleeping in a different place or with different people, please make sure I will not be too early in a cot, Moses basket or travel cot.

Nap time - sleep aid

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface

Everything you buy for me should comply with British Safety Standards.

British Safety Standards mean the product has passed safety tests for fire and durability. British Safety Standards do not test for safe sleep.

If you do buy something new, you must follow the instructions exactly. If you buy second hand items please make sure you have all of the parts and get a copy of the instructions from the manufacturer.

Sleep products are designed for specific ages/stages. Check a product that is not suitable for my developmental stage can be very dangerous.

Just because a product is made by someone you know or sold on the high street does not make it safe.

Nap time - sofa

The safest place for me to sleep is in a cot or Moses basket on a flat and firm surface

It is easy to get all cozy on the sofa where we can both easily fall asleep.

Falling asleep on the sofa with me increases the risk of Sudden Infant Death Syndrome (SIDS) by up to 50 times.

I cannot regulate my own temperature yet so I can easily overheat or fall off the edge of the sofa when you move in your sleep. There is also a risk that I might be rolled over the back of the sofa making it difficult for me to breathe.

Remember

- Every sleep counts.
- Having a safe sleep environment for me is one of the most important things you can do.
- Keep it simple, all that is needed to create the safest sleep environment for me is a cot or Moses basket which has a flat firm surface.
- Always put me to sleep flat on my back with my feet at the bottom of the cot/Moses basket for every sleep.
- All risks are increased if I was born before 37 weeks or very small.
- If you are worried that I am unwell, follow the safe sleep advice and reach medical advice from your GP or call NHS 111. In an emergency call 999.
- I can't regulate my own temperature and can therefore overheat if I am not in an appropriate sleep environment.
- Even one risk factor may increase the risk of Sudden Infant Death Syndrome (SIDS) and different risks become more apply at different times.
- Rollins should sleep in the same room as you for the first six months, even during the day.
- Remember, if an adult consumes alcohol and/or a prohibited drug and causes the death of a child under three years old through suffocation, by overfeeding and/or sleeping in the same bed, this is a criminal offence.

Further information and support is available through your midwife or health visitor.

If you are concerned that your baby is unwell please seek medical advice via your GP or call NHS 111. In an emergency please call 999.



For more information on safe sleep please visit: Lullaby Trust www.lullabytrust.co.uk

Witness: Healthissue Together www.healthissue.org.uk

Book: www.babysafe.org.uk

©2019 Hampshire Safeguarding Children Partnership

Materials

The **safest**
place for me to
sleep...



...is in a cot or
moses basket
on a flat and
firm surface



Materials



Materials



Every



Sleep
Counts

Questions



Every



Sleep
Counts



#EVERYSLEEPCOUNTS

DadPad®

Tel: 07403 274757

Email: hello@thedadpad.co.uk

The Health & Wellbeing Innovation Centre,
Treliske, Truro, Cornwall TR1 3FF

 [@dadpaduk](https://twitter.com/dadpaduk)

Introducing DadPad®

New dads will feel excited, but may also feel left out, unsure and overwhelmed.

The DadPad can help.

The DadPad gives new dads and dads-to-be the knowledge and practical skills necessary to support themselves and their partner, so that babies get the best possible start in life.



“There comes a point where we need to stop just pulling people out of the river. We need to go upstream and find out why they’re falling in.”

Archbishop Desmond Tutu

Why now?

With Maternity Transformation being mid-programme (Better Births Strategy), and with Clinical Perinatal Infant Mental Health Networks, Public Health Teams and safeguarding initiatives all aiming for similar outcomes in terms of building resilient new families, there is still little being done to include and engage new fathers. Before these programmes finish and as new plans are made, now is the time to “think family” and make including fathers a priority.



Dads-to-be queuing to buy their copy of the DadPad and to speak with Julian at a Mothercare Expectant Parent Event in 2018.

The Better Births Strategy affords us a once-in-a-generation opportunity to build and grow a dad-inclusive empowerment strategy that can only serve to benefit us all, as a society.

Why now?

Fathers/Men's MH Speaker @M... 2d
 NEWS:: WE HAVE DONE IT!!! AFTER YEARS OF CAMPAIGNING. OMG NOW WE CAN TELL YOU!!! ITS BEEN A JOURNEY.....
 @DrAndyMayers

Dad Matters @dad_matters 2d
 Yes!!!!!!! This is huge news!!! To all those that came before Dad Matters in Greater Manchester, well done! Now let's move forward for all dads everywhere! @MarkWilliamsFMH @DrAndyMayers @dadpaduk @thedadsnet @dad

Dr Andy Mayers @DrAndyMayers
 It's official! campaign...
 @MarkWilliamsFMH
 others we...
 listened to. There...
 need to do but it's a great start @NHSEngland @CamillaRosan @PMHPUK @MMHAlliance @AshCurryOcd @DorsetMind @DorsetHealth @bournemouthuni



Gavin liam russell @gavin_liam 2d
 Superb achievement by @MarkWilliamsFMH I was lucky a Mother & Baby Unit made... and saw our family a Dads & families were... lucky. Helping dad's to... helping experts to be a... is essential @SPSP MH



Cheryl Mercer @CherylIMercer 2d
 AT LAST!! Massive news for all Dads going undiagnosed with PND, PTSD, Perinatal Anxiety. You matter too! Well done @MarkWilliamsFMH @DrAndyMayers for your relentless... for this to be... StartGN

BREAKING NEWS!!!

Retweeted
 @FathersNetScot
 recognising not only
 natal issues too, but that
 ew mothers is deeply
 porting the skills and
 ir children's fathers." A
 rom @fatherhoodinst
 #DadUp



NHS to offer mental health treat...
 Thousands of new fathers are to be offered screening and ...
 thetimes.co.uk

The Guardian
 The NHS is no longer treating preg...
 NHS is at last recognising that men
 e postnatal issues too, says Jack ...
 theguardian.com



mental health ch...
 England to offer
 e partners ...

NHS to offer mental health treatme...
 Thousands of new fathers are to be offered screening and treatment fo...
 thetimes.co.uk

Initiatives are great but, ultimately, engagement is crucial for successful implementation. We offer you the opportunity to do this with DadPad.

What are we aiming to achieve?

“Unsurprisingly, 18+ years of evidence-based research demonstrates that positive parenting by dads has a **significant impact** on the family dynamic, yet efforts to engage and empower dads have been **underwhelming and sporadic**.

What I have witnessed during the development of the DadPad is the coming of a **golden opportunity moment** whereby men in our society are ready, want to, and are needed to play a full part in their family’s life.

Our goal must now be to help build **strong, resilient families** who are **empowered** to support each other and who are able to **access** help and information at the **earliest point**, where it is most positive for them to do so.”

BRIEFING

Centre for
Mental Health



Lorraine Khan

50: Fatherhood: the impact of fathers on children's mental health

Summary

There is growing awareness about the importance of mothers' mental health and the impact they can have on their children's mental health. However, less is known about fatherhood and the impact fathers can have on their child's mental health. This briefing paper explores the direct and indirect impact of fathers on children's mental health, from positive supervision and language development, to emotionally buffering mother and child against environmental stresses.

From pregnancy to adolescence, fathers are a major influence on a child's emotional and behavioural health. The relationships a father builds within a family are far more important to a child's mental health than traditionally valued paternal characteristics such as

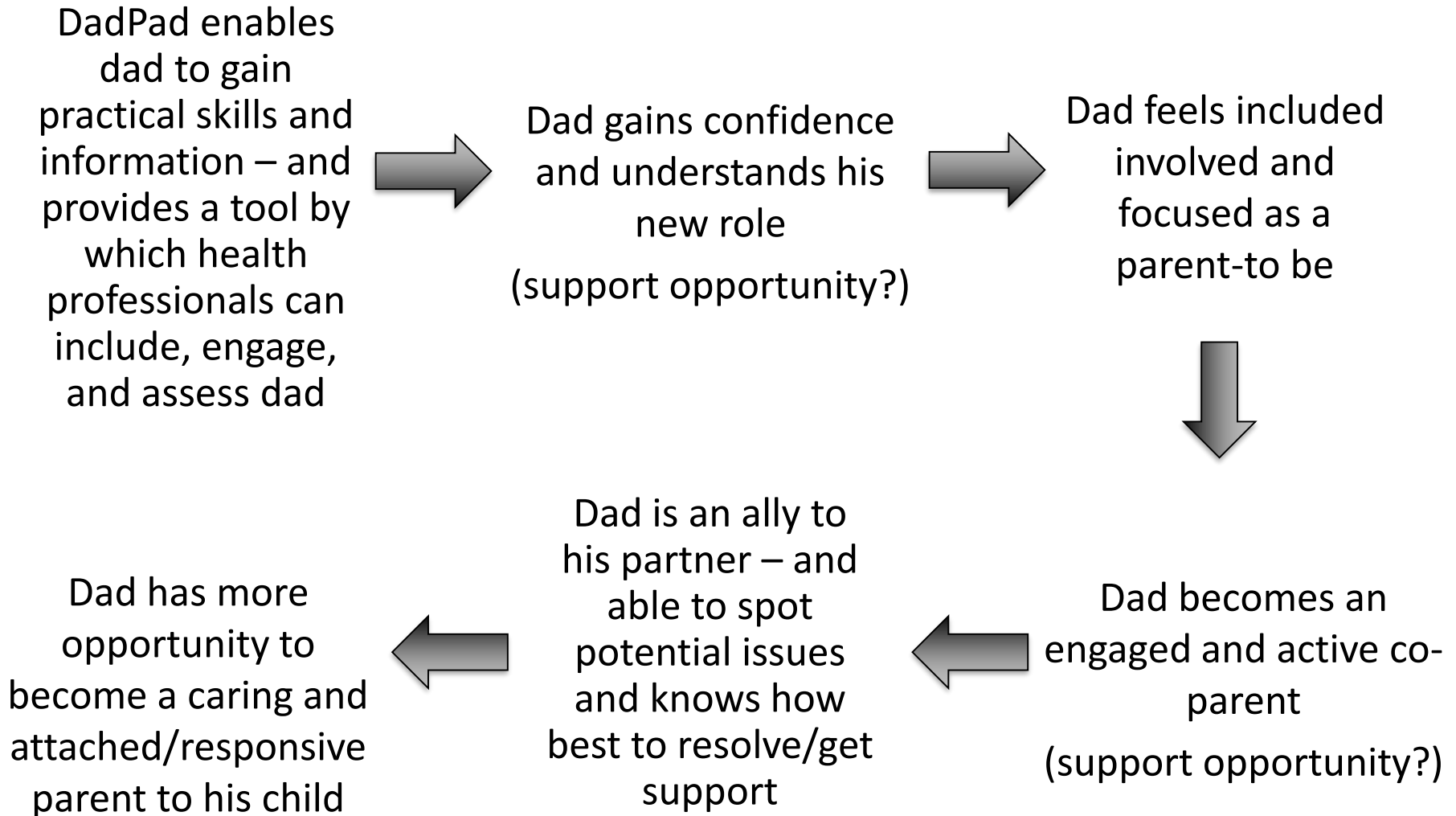
intellect or masculinity. Fathers can create a high quality co-parenting alliance with their partners, including when fathers are not living with their children, and help their children to build positive, trusting relationships.

However, fathers have received little support to be the best parents they can be, and the importance of fathers' own mental health has been neglected. Chaotic or conflict-ridden family circumstances, work pressures and stereotypes about masculinity can get in the way of being the best parent they can be.

This briefing specifically explores the role of fathers and focuses on their positive potential to have an impact on the wellbeing of their children. ▶

IF YOU WANT
SOMETHING YOU'VE
NEVER HAD,
THEN YOU'VE
GOT TO DO
SOMETHING YOU'VE
NEVER DONE.

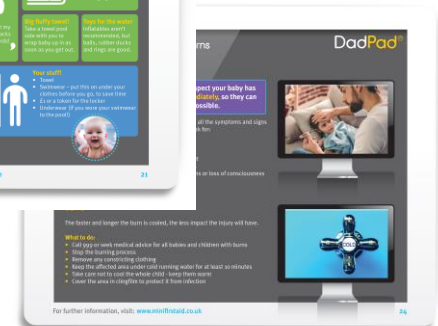
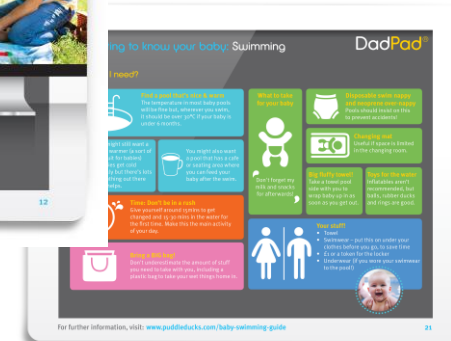
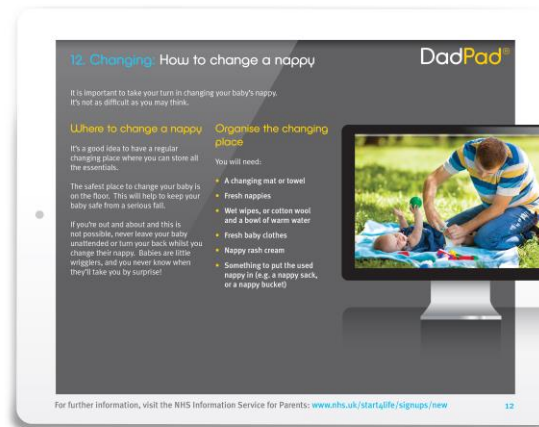
Our assertion:



What's included?

By bespokeing DadPads, the contents can be customised according to need. However, the standard version coverage includes:

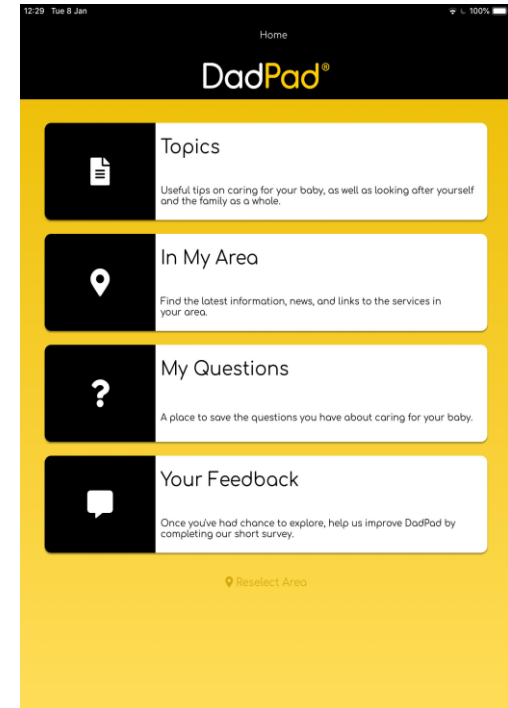
- The Midwifery service
- Health Visitor team
- Feeding
- Holding
- Crying
- Changing
- Cleaning
- Getting to know your baby
- Home safety & First aid
- Child development & milestones
- Supporting each other (including mental health information)
- Legal information
- Parenting advice and support



More thorough information on current general content can be found on our website: <https://thedadpad.co.uk/get-dadpad/>

Where is DadPad®?

DadPad has already been adopted 11 separate NHS areas across England since its initial launch in 2012. Individual areas have commissioned both hard copy DadPads and/or app versions.



Who have we worked with?

At DadPad, we have experience of working with a wide range of groups and organisations in developing bespoke content, including:

- Perinatal Mental Health Teams/Networks
- Maternity and Health Visiting Teams
- Maternity Voices Partnerships (MVPs)
- Public Health Teams
- Safeguarding Boards
- Multi-Agency Boards e.g. the Hampshire High Impact Board

...and of course **ICON** from Hampshire!!!

DadPad & ICON

9. Crying: When the crying will not stop

DadPad®

What do you do when you have taken care of the obvious things, like feeding and changing, but your baby will not stop crying?

Here are some things that might help:

- **Go for a walk or a drive** – sometimes, a change of scenery or the gentle, soothing motion will help your baby calm down.
- **Sing** – try something repetitive, like a nursery rhyme.
- **Talk to baby using a quiet voice** – baby likes your voice and will find it soothing.
- **“Rock-a-bye-baby”** – sometimes the simplest things – like gently rocking your baby in your arms – can be the most effective.

If your baby's crying seems different in any way – such as being very high-pitched, or a whimper – or you think that they may be unwell, talk to your Health Visitor or GP. Trust your instincts – you know your baby best!

NEVER EVER:

- **Shake your baby** – this can cause serious, lasting damage, including blindness, brain damage and even death.
- **Get angry** – if you feel yourself getting angry, put your baby safely in their cot and go into another room for ten minutes, until you calm down.
- **Shout** – this will upset your baby more, and make the crying worse.

Finally – if it all gets too much:

Don't be ashamed to ask for help. It's always better to ask for help than to risk hurting your baby. Ask someone you trust – like a friend, family member, or your Health Visitor – for help and advice.

If the crying ever feels too much to bear and there is no-one there to help you, you could call the **CRY-SIS** helpline on **08451 228 669**. They provide help for parents and carers with crying and sleepless babies.

Remember – This phase will stop! Be an **ICON** for your baby and cope with their crying.



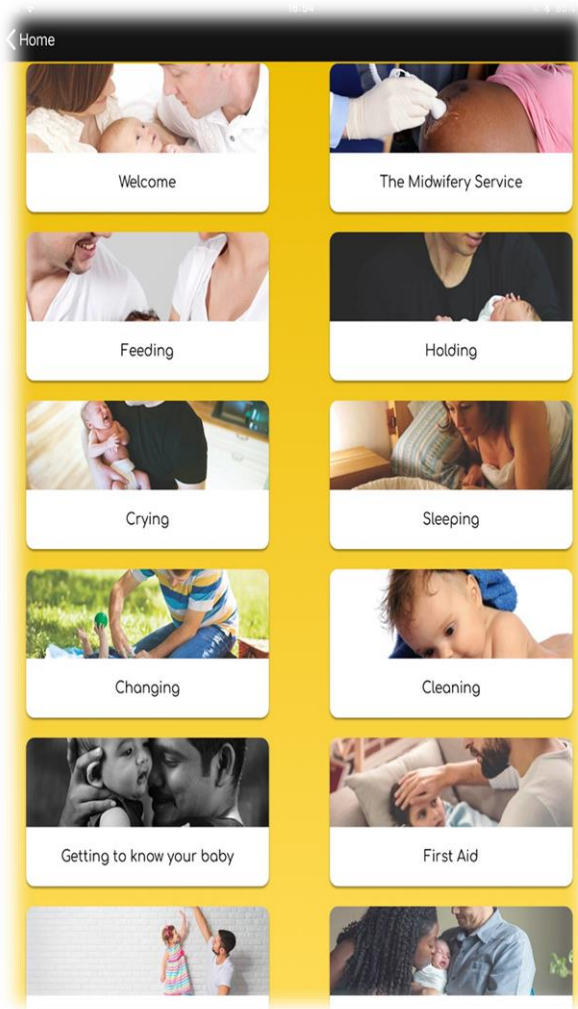
Babies Cry,
You can Cope!

- I** Infant crying is normal and it will stop
- C** Comfort methods can sometimes soothe the baby and the crying will stop
- O** It's OK to walk away if you have checked the baby is safe and the crying is getting to you
- N** Never ever shake or hurt a baby.



© Copyright reserved. Image courtesy of NHS West Hampshire Clinical Commissioning Group.

The DadPad® App & Quick Read Guide



In the last 24 months, we have worked with a trusted team of developers to produce a DadPad app.

This is the perfect complementary resource for new dads who want to look at information on their electronic devices in-between spending time with their baby.

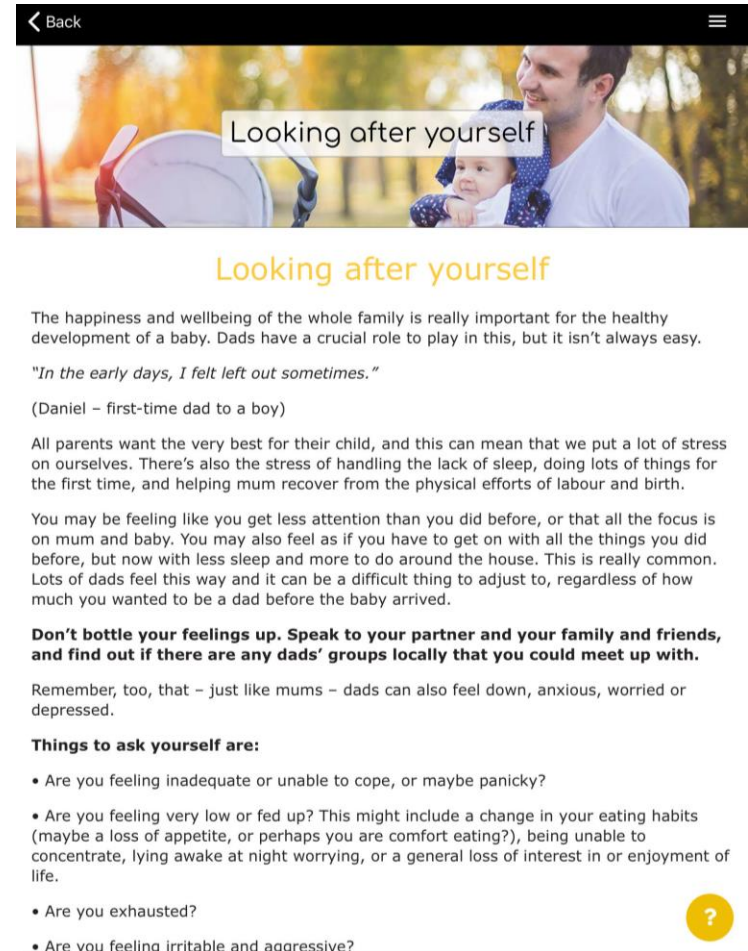
As well as allowing access to the content and visuals, the app gives dads the opportunity to record and store any questions they have. These can then be accessed and discussed later when talking with their baby's mum, family, friends, or their health professional.

Commissioning areas can also upload information and contact details on sources of local support and send out information, drawing dads' attention to important new local or national initiatives.

The DadPad[®] App

Analytics give each commissioning area the ability to gather feedback from the dads as they start their parenting journey, which will help tailor services.

The app is available on a yearly licence-fee basis.



The screenshot shows a mobile app interface. At the top, there is a black navigation bar with a white back arrow and the text 'Back' on the left, and a white hamburger menu icon on the right. Below the navigation bar is a large image of a man smiling and holding a baby. Overlaid on the image is a white text box with the title 'Looking after yourself'. Below the image, the title 'Looking after yourself' is repeated in a yellow font. The main content area contains several paragraphs of text, a quote, and a list of bullet points. At the bottom right of the content area, there is a yellow circular icon with a white question mark.

Looking after yourself

Looking after yourself

The happiness and wellbeing of the whole family is really important for the healthy development of a baby. Dads have a crucial role to play in this, but it isn't always easy.

"In the early days, I felt left out sometimes."

(Daniel – first-time dad to a boy)

All parents want the very best for their child, and this can mean that we put a lot of stress on ourselves. There's also the stress of handling the lack of sleep, doing lots of things for the first time, and helping mum recover from the physical efforts of labour and birth.

You may be feeling like you get less attention than you did before, or that all the focus is on mum and baby. You may also feel as if you have to get on with all the things you did before, but now with less sleep and more to do around the house. This is really common. Lots of dads feel this way and it can be a difficult thing to adjust to, regardless of how much you wanted to be a dad before the baby arrived.

Don't bottle your feelings up. Speak to your partner and your family and friends, and find out if there are any dads' groups locally that you could meet up with.

Remember, too, that – just like mums – dads can also feel down, anxious, worried or depressed.

Things to ask yourself are:

- Are you feeling inadequate or unable to cope, or maybe panicky?
- Are you feeling very low or fed up? This might include a change in your eating habits (maybe a loss of appetite, or perhaps you are comfort eating?), being unable to concentrate, lying awake at night worrying, or a general loss of interest in or enjoyment of life.
- Are you exhausted?
- Are you feeling irritable and aggressive?

Safe Sleeping & DadPad

Baby Basics: Sleeping - Safe sleeping

DadPad™

The safest place for your baby to sleep until they are 6 months old is in a cot in the same room as you.

Wait 4 to 6 weeks before you start a bedtime routine at home.



Baby Basics: Sleeping - Putting baby to bed

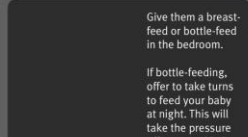
DadPad™



Start getting ready for bed with a warm bath.



Put on their night clothes.



Give them a breast-feed or bottle-feed in the bedroom.

If bottle-feeding, offer to take turns to feed your baby at night. This will take the pressure off mum and help give you more bonding time.



Keep the lights dim.



Safe Sleeping

KEEP YOUR BABY SAFE

Becoming a parent is a very special time, but it can also be worrying, too. Following these top tips will help to keep your baby safe and healthy, and reduce the risk of sudden infant death (also known as cot death). More information and advice on safer sleeping for your baby and you is available from organisations such as The Lullaby Trust:

www.lullabytrust.org.uk

Sharing a bed with your baby if you have consumed alcohol or drugs is especially dangerous. You could end up lying on top of your baby, causing your baby to die, which is a criminal offence, so take care NEVER to do this.

Baby bedtime basics

- The safest place for your baby to sleep for the first six months is in a cot in the same room as you. Keeping your baby in your room means that you will hear your baby wake, so you do not need to lie awake, waiting for them to stir.
- Start a bedtime routine with a warm bath, night clothes and a breast or baby in the cot when they seem sleepy.
- When putting your baby down for a sleep, place them on their back, with their feet at the foot end of the cot. Don't let them get too hot – 16-20°C is comfortable.
- It is dangerous for your baby if you fall asleep with them on a sofa or in an armchair, so take care never to do this.
- Make sure that your baby is not exposed to cigarette smoke, as this increases their risk of sudden infant death. Stop smoking in pregnancy if you can (and this applies to dad, as well as mum!), and make sure that no-one else smokes around your baby.
- Support baby's mum to breastfeed for as long as possible. Remember that night-time breastfeeds make more milk, so the effort that baby, mum and you put into these will pay off by increasing breastmilk supply, which will help your baby grow strong and healthy.
- Breastfeeding also helps reduce baby's risk of sudden infant death.
- You can talk to your Midwife or Health Visitor about all aspects of the challenge of looking after your baby at night.



Safe Sleeping & DadPad

Baby Basics: Sleeping - Safe sleeping

DadPad®

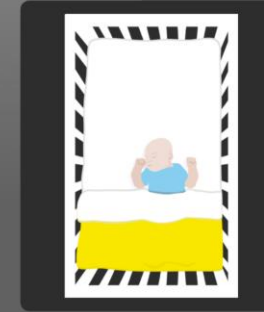


17

Baby Basics: Sleeping - Putting baby to bed

DadPad®

Place your baby in the cot when they seem sleepy.



Don't let them get too hot. The best room temperature is between 16-20 degrees centigrade.

Their feet should be at the end of the cot.

18

Baby Basics: Sleeping - Safe sleeping

DadPad®



19

Baby Basics: Sleeping - Safe sleeping

DadPad®



20

What do people say about DadPad®?

The Dads...

“It’s been my Bible.”

Dad at a Mothercare Expectant Parent Event

“Dads are important too and this toolkit is subtly brilliant in its approach to support educate new and nervous fathers! Great stuff!”

Dad-to-be

“...getting the pack means I’m involved and I thought it was really cool... The child development part is my favourite bit, but there’s things in there – like things about mental health – that I didn’t know about and that I didn’t know you needed to know about.”

22yo father-to-be

“...it’s an amazing resource!”

Manchester-based dads’ group Twitter Account

“...@dadpaduk...is needed in all hospitals.... it’s fantastic.”

Dad and mental health campaigner

“@dadpaduk brilliant resource and brilliant work, as a father of 3 children I suffered with depression after the birth of my first – 20 years ago and would have welcomed this support and advice.”

Dad via Twitter

What do people say about DadPad®?

The Health Professionals...

“There was a cross-section of dads [on our wards], from the most vulnerable to the motivated and well-educated. The responses were very similar from all; they felt that the DadPad was an excellent resource that they would find useful. They felt that there are many similar resources on the market, but they are aimed at mothers only, so it was good to see something specifically for dads.”

Midwife

“The DadPad booklets and app provide a great resource for dads, full of ideas and information.”

ICON Twitter Account

“Excited to have these in our young parent boxes.”

Practice Development Midwife

“DadPad is such a good idea for new dads, bringing together a range of information in a handy and convenient pack.”

Professor Consultant Neonatologist

“The @dadpaduk is such a good resource and guide. I tell all of my friends who are expecting to get one as I know they will need this.”

Nurse and Service Improvement Lead

“@dadpaduk is a great tool to introduce to dads at the beginning of their journey.... fantastic resource to use with dads.”

Health Visitor

What do people say about DadPad®?

The Commissioners...

“This is about dads being prepared for some of that tension and strain of being a new parent, but without being overwhelmed, and knowing that it’s not just mums who can access the help and advice that’s available, even if they don’t live with their partner.”

Programme Manager for Women & Children at NHS Kernow CCG

“@dadpaduk is a great resource for new fathers.”

Hampshire Safeguarding Board Twitter Account

“Excellent app and book to support new dads...”

SCN Programme Manager

“A fantastic resource for Dads and Dads-to-be.”

Salford Public Health Team Twitter Account

“...the DadPad gives support to new fathers who can often feel left out and unable to help when they’re needed most, and this can put a strain on both parents. Simple and effective tools like this can help dads prepare for that life-changing moment...”

NHS England Associate National Clinical Director
for Perinatal Mental Health

What do people say about DadPad®?

Working with DadPad...

“The process of customising the document for our Maternity Unit has been smooth from start to finish. Julian was very amenable to the changes that we wanted to make, to both text and illustrations. We have now a beautiful document that we will be very happy to use with dads in our hospital.”

Lead Midwife for Service Improvement

What next for DadPad®?

On Father's Day 2018, we launched the DadPad Neonatal.



Plans for the future...

- Updates to the DadPad app & DadPad eBook
- Developing the DadPad Neonatal eBook & App?
- MumPad
- Home Birth DadPad
- and much, much more...!

How can we help you?

- Providing step-by-step guidance and support, from quotation to launch
- Advising on funding options and sources
- Working with you to update, edit and add to existing DadPad content – text and images – to suit your needs and wishes
- Developing and writing wholly new content with you, as required
- Liaising with our trusted team of designers and developers to bring your ideas to life

Summary

There is an acknowledged gap in provision for dads, and a real and proven need for it to be filled, to benefit society as a whole.

The team at DadPad have a proven track record, with constant and growing interest.

We are offering a co-produced, measurable, value-for-money, prevention model-based engagement and information tool for new dads.

DadPad™

the guide for new fathers

Julian Bose

Inspire Cornwall C.I.C.

Mobile: 07403 274757

Email: julian@inspirecornwallcic.org.uk

Web: www.inspirecornwallcic.org.uk



...engaging dads, strengthening families...



@dadpaduk

julian@thedadpad.co.uk

www.thedadpad.co.uk



ICON – Babies Cry, You Can Cope Prevention Programme update

February 2020

**Kim Jones –
Designated Nurse, West Hampshire CCG**

What is Abusive Head Trauma?

- AKA 'Shaken Baby Syndrome'
- Child Abuse
- Catastrophic injuries
- Causal mechanism rarely confirmed

- **It is preventable**

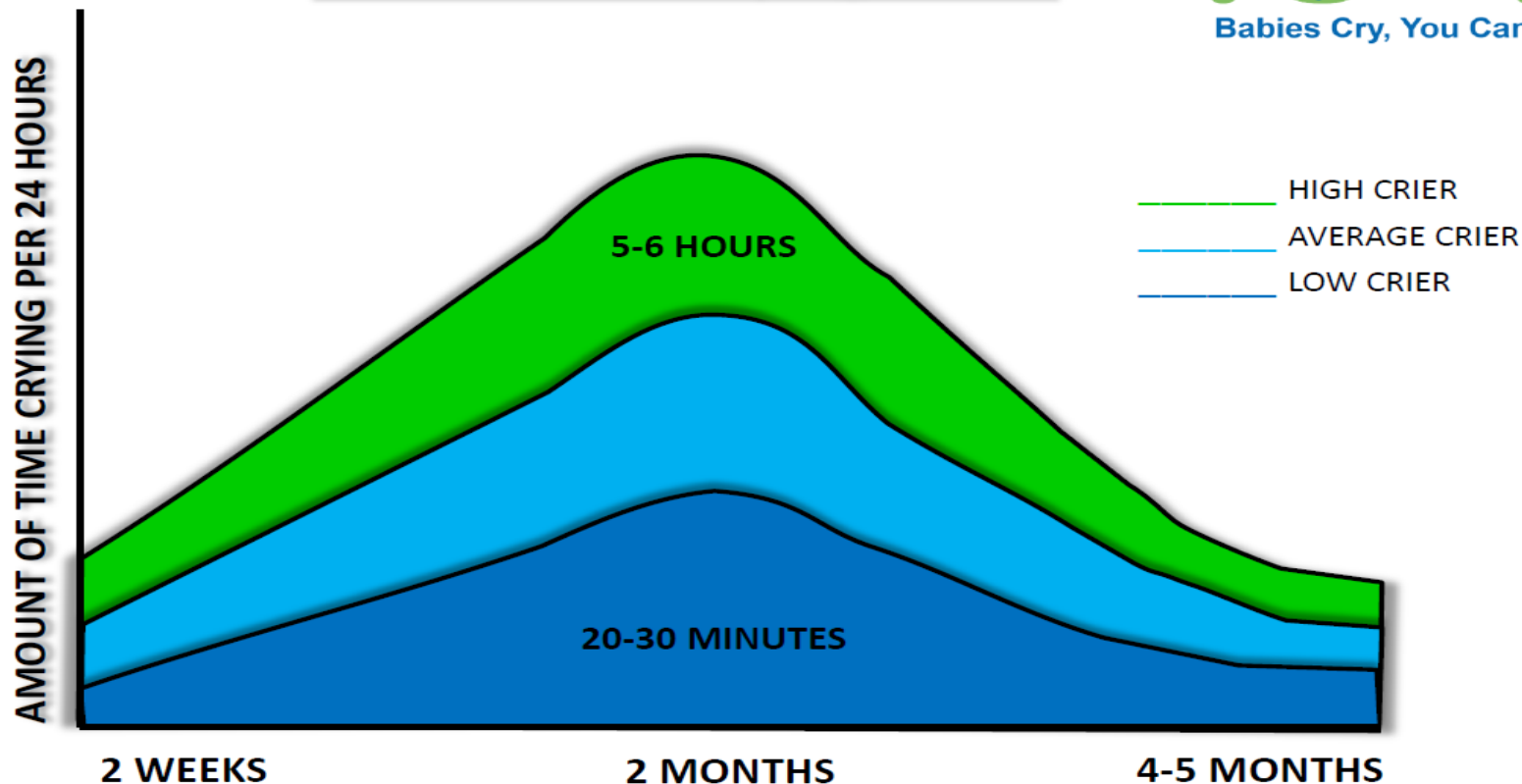
Incidence

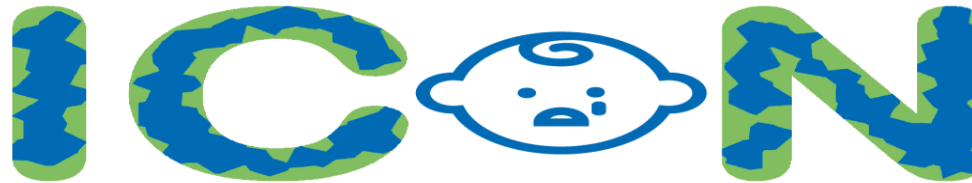
- Nationally, Abusive Head Trauma (AHT) affects up to 25 children per 100,000 in the UK
- The evidence suggests that around one third of severely shaken infants subsequently die as the result of being shaken and more than half of children aged 0-4 years injured by abusive head trauma will die before they turn 21 years old
- The triennial review of Serious Case Reviews highlighted that nationally the highest category of fatal physical abuse amongst children was a severe non-accidental head injury, including intracranial bleeds from suspected shaking injuries

WHO SHAKES and WHY?

- Evidence suggests that males are responsible for inflicting AHT, in approximately 70 per cent of cases however, depending on the research paper this figure can fluctuate anywhere between 60 and 90%
- Nationally, a review of Serious Case Reviews suggests that AHT occurs in every socio-economic group
- Caregivers lose control and shake – baby stops crying
- Demonstrable relationship between the normal peak of crying and babies subject to AHT

The Normal Crying Curve





Babies Cry, You Can Cope



Infant crying is normal and it will stop!

Babies start to cry more frequently from around 2 weeks of age.

The crying may get more frequent and last longer.

After about 8 weeks of age babies start to cry less each week.




Comfort methods can sometimes soothe the baby and the crying will stop.

Think about are they:

- hungry
- tired
- in need of a nappy change

Try simple calming techniques such as singing to the baby or going for a walk.



It's k to walk away if you have checked the baby is safe and the crying is getting to you.

After a few minutes when you are feeling calm, go back and check on the baby.



Never, ever shake or hurt a baby.

It can cause lasting brain damage or death.

If you are worried that your baby is unwell contact your GP or call NHS 111.

Speak to someone if you need support such as your family, friends, Midwife, Health Visitor or GP.



THE ICON PROGRAMME

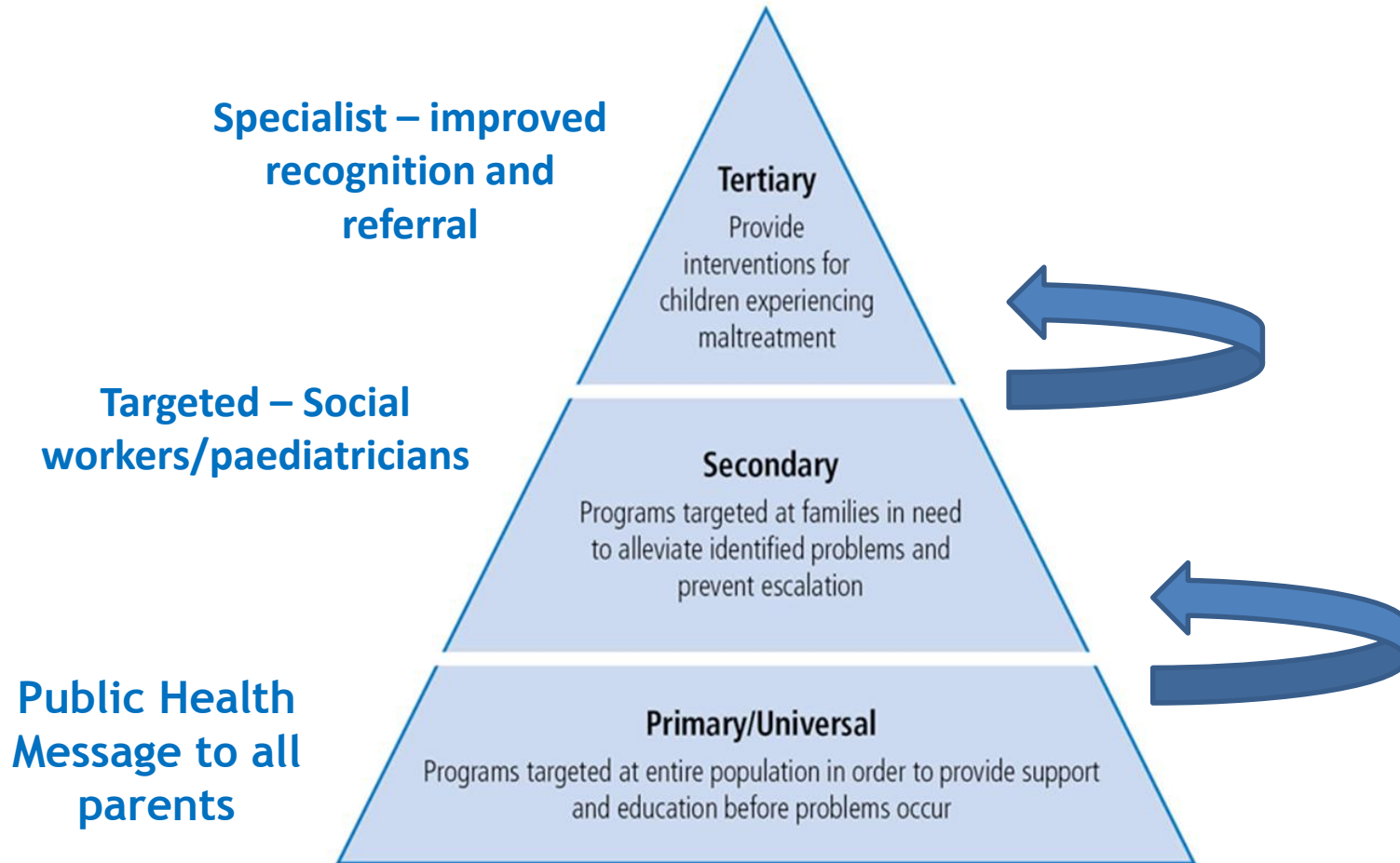
- The ICON Programme is a programme of intervention, which reinforces a simple message to parents and carers regarding how to cope with infant crying.
- The core message delivery is completed by universal services, in a touch point format – generally starting with midwifery professionals, then health visitors and GPs.
- Children will also receive information about AHT (in an age appropriate manner) in upper secondary school, and this will be incorporated into the PHSE lessons.
- Secondary and tertiary services, such as Children’s Services and Early Years Settings also reinforce the ICON messages, such as within parenting classes or within nursery settings.



THE ICON PROGRAMME

- This is supported by research which suggests that public health campaigns educating new parents and care givers in coping with their baby's crying can reduce rates of AHT by up to 75%
- The ICON programme was developed by multi-agency professionals, parents and carers who have been affected by AHT, those who have not and children and young people.

ICON PREVENTION STRATEGY





IMPACT OF ICON

Coping with Crying: My Personal ICON Plan

I

Infant crying is normal - Remember: Babies Cry, You Can Cope

C

Comfort methods I can try...

Think about if the baby is hungry, tired, in need of a nappy change or unwell? Consider skin to skin contact, singing a lullaby or taking a walk outside....

-
-
-

Who I will call if the crying won't stop? (Include contact numbers: friends, family, midwife, health visitor & GP)

-
-
-
-

What will I do if I need a few minutes to myself? What makes me feel better?

-
-
-
-

O

Remember: It's OK to walk away if you are feeling stressed. Return to check the baby after a few minutes

N

Never ever shake or hurt a baby



Primary Care Audit

- In 2018 when ICON was piloted – **only 10%** of GPs routinely asking about coping with crying.
- In 2019, 121 GP practices were asked to audit practice. **The return rate was 84%.**
- The findings indicate that overall **95%** of practices in Hampshire are now discussing coping with crying at the six week check.



- 84% of GP practices are **fully aware** of the ICON programme and 9% said they were partially aware.
- 77% of GP practices stated that the ICON information helps discuss crying with parents and carers and 16% said that it partially helps them.



BBC INSIDE OUT



Shaken Inside Out Prog 7-10-19.mp4

HAMPSHIRE PATIENT STORY





ICON WWW.ICONCOPE.ORG

I Infant crying is normal and it will stop! Babies start to cry more frequently from around 2 weeks of age. After about 8 weeks of age babies start to cry less.

C Comfort methods can sometimes soothe the baby and the crying will stop. Is the baby hungry, tired or in need of a nappy change?

I It's ok to walk away if you have checked the baby is safe and the crying is getting to you. After a few minutes when you are feeling calm, go back and

N Never, ever shake or hurt a baby. It can cause lasting brain damage or death.

Babies Cry, You Can Cope

Speak to someone if you need support such as your family, friends, Midwife, Health Visitor or GP.

Share the ICON message!

It isn't just parents who get frustrated at a baby's cry. Think very carefully about who you ask to look after your baby.

Share the ICON message with anyone who may look after your baby.

Check that caregivers understand about how to cope with crying before you decide to leave your baby with them and share this ICON leaflet with them.

Reminder about Safe Sleeping:

- The safest place for your baby to sleep is a separate cot or Moses basket in the same room as you for the first 6 months, even during the day.
- When putting your baby down for a sleep, place them on their back, with their feet at the foot end of the cot.
- Don't let them get too hot – 16-20 degrees celsius is comfortable.
- It is dangerous to sleep with a baby on a sofa or in an armchair, never do this.
- Make sure that your baby is not exposed to cigarette smoke, as this increases their risk of cot death.

You can talk to your Midwife or Health Visitor about all aspects of crying and safe sleeping.

Further information and support

Health Visiting Services
ChatHealth is text messaging service which supports parents, carers and families of under 5's in Hampshire. How to use: Text the dedicated number **07520 615720**

Each GP surgery has a health visiting team assigned to it, so to find your local health visiting team, please access www.southernhealth.nhs.uk

Midwifery Services
The contact number for your midwife can be found on your maternity notes.

Hampshire Children's Services
Tel: 0300 555 1384
Tel: 0300 555 1373 (out of hours)

NHS Choices
The NHS Webpage has information on how to soothe a crying baby which can be accessed via www.nhs.uk

Wessex Healthier Together
www.what0-18.nhs.uk

National Society for the Prevention of Cruelty to Children (NSPCC)
Tel: 0800 800 5000
www.nspcc.org.uk

Family Lives Charity - Providing help and support
Tel: 0800 800 222
www.familylives.org.uk

For a translation of this document, an interpreter or a version in



please contact
NHS West Hampshire CCG
0800 456 1633

Website: iconcope.org



Infant crying and how to cope



Information for parents and carers



Crying: When the crying will not stop

What do you do when you have taken care of the obvious things, like feeding and changing, but your baby will not stop crying?

Here are some things that might help:

- **Go for a walk or a drive** – sometimes, a change of scenery or the gentle, soothing motion will help your baby calm down.
- **Sing** – try something repetitive, like a nursery rhyme.
- **Talk to baby using a quiet voice** – baby likes your voice and will find it soothing.
- **“Rock-a-bye-baby”** – sometimes the simplest things – like gently rocking your baby in your arms – can be the most effective.

If your baby's crying sounds different – in any way – such as being very high-pitched, or a whimper – or you think that they may be unwell, talk to your Health Visitor or GP. Trust your instincts – you know your baby best!

NEVER EVER:

- **Shake your baby** – this can cause seizures, brain damage, including blindness, brain damage and even death.
- **Get angry** – if you feel yourself getting angry, put your baby safely in their cot and go into another room for 10 minutes – until you calm down.
- **Shout** – this will upset your baby more, and make the crying worse.

Finally – if it all gets too much:

Don't be ashamed to ask for help. It's always better to ask for help than to risk hurting your baby. Ask someone you trust – like a friend, family member, or your Health Visitor – for help and advice.

If the crying ever feels too much to bear and there is no-one there to help you, you could call the **NSPCC** helpline – on **0800 300 6000**. They provide help for parents and carers with crying and sleepless babies.

Remember – This phase will stop! Be an ICON for your baby and cope with their crying.

ICON Babies Cry, You Can Cope!

- I** Infant crying is normal and it will stop
- C** Comfort methods can sometimes soothe the baby and the crying will stop
- I** It's OK to walk away if you have checked the baby is safe and the crying is getting to you
- N** Never ever shake or hurt a baby.

© Copyright reserved. Single courtesy of NHS. Best reproduced. (Printed on recycled paper)

For further information: www.cry-sts.org.uk



ICON ACCOLADES AND PARTNERS



England

DadPad
Top tips for new dads



Improving the health of children and young people in Dorset, Hampshire and the Isle of Wight





Thank you



Hampshire
Safeguarding
Children
Partnership