Every Sleep Counts Pilot – Primary Care (Maternity Services) Promotion of Safe Sleep advice

Background

Since April 2016 13 babies are known to have died in Hampshire where unsafe safe sleep practice was a presenting factor. Evidence suggests there are a number of risk factors which increase the risk of Sudden Infant Death Syndrome (SIDS), smoking, parental substance misuse, co-sleeping, overheating, postural hypotension etc; and much of the information and advice given by professionals mirrors the national guidance (NICE 2015), however, anecdotal evidence suggests there are inconsistencies in the advice given to carers around co-sleeping and lack of awareness of current guidance regarding products and room temperature recommendations.

A survey of professionals confirmed the need for consistent messages to be shared with parents/ carers by multiple agencies throughout pregnancy and post birth. The survey also identified the need for clarification relating to the criminal offence of overlay; although there have been no prosecutions for overlay during the reporting period, it is not that overlay was not suspected.

Following the Serious Case Review of Child K (a Hampshire child) and a number of Partnership/Child Death Overview Panel reviews, Hampshire Safeguarding Children Partnership agreed the need for a programme of intervention relating to safe sleep. Also identified, was a need to bring public health messages regarding safe sleep together into one accessible leaflet.

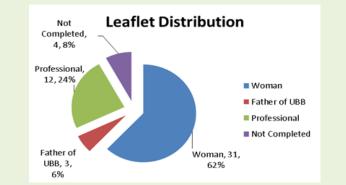
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About the Pilot	Methodology
The leaflet was piloted at Basingstoke and North Hampshire Hospital (BNHI three areas; Antenatal Clinic, Antenatal Ward and the Postnatal Ward. A Fo Group of 6 professionals was also held and facilitated by a Community Mid in the Basingstoke area. The main aim of the pilot being for patient/practit feedback. A total of 50 leaflets were distributed	 Community Midwife (CMW) and Named Midwife Safeguarding Children (NMSC) who were part of the steering group would attend the maternity unit on an afternoon in November 2019 and the CMW would attend a Community meeting to facilitate a focus group consisting of community staff working in and around the Basingstoke area, also in November 2019. As the incentive was to obtain feedback on the proposed leaflet a script for professionals on how to start/introduce the key discussion points with parents/carers, produced by steering group, was not used as the questions on the evaluation form were deemed appropriate for parent/carer and professional feedback 37 leaflets were given to women and their partners/supporters at random (23 in the Antenatal Clinic where women were attending for Obstetric Clinic and Ultrasound Scan Appointments; 11 on the postnatal ward which included women/supporters who had had their baby in the previous 3 days and 3 on the antenatal ward to
Basingstoke and Deane is a district in Hampshire with an estimated populat of 175,729 (ONS 2015). Its demographic is predominately White British (88 its 0-19 years' population is 24.3% compared to 23% across South East Engl and 23.7% nationally; its 20-39 age group of 24.3% mirrors that of South East	
England but is lower than that of the National 26.5%. Basingstoke and Dea District is considered to be in the top 20% of least deprived areas in the cou On average 3000 women birth their babies at BNHH, all women are offered ultrasound scan at around 13 weeks and 20 weeks gestation and therefore	
be seen in the antenatal clinic. Women booked to have or have had their babies at BNHH, will most likely l the Basingstoke and Deane District and the surrounding areas towns such a	women awaiting Induction of Labour) and 7 to professionals working within the unit during this period. Participants were given an evaluation form at the same time as the leaflet and were
Reading, Newbury, Alton and Andover. However, there are occasions when	n encouraged to complete them and add any comments that they had regarding the

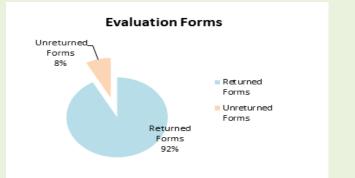
layout and content of the leaflet, all recipients were asked if they needed support with reading or writing.

Results

40 evaluation forms were received from participants at BNHH (91%). The focus group consisted of 6 community staff and the return was 100% which gave an overall return of 92%. Women who were pregnant or who were new mothers completed 31 evaluation forms; expectant fathers completed 3, professionals 12 and as noted 4 remain unreturned.



women who live in the Surrey area will book their pregnancy with BNHH.



79 % of parents/carers were aware of safe sleep advice prior to being given the leaflet

72% reported that they were aware of risk factors relating to unsafe sleep

81% stated that the leaflet had changed their awareness and 100% of responders reported that they plan to follow the advice in the leaflet 84% of professionals reported that the leaflet will increase their confidence when discussing safe sleep with parents/carers 92% stated they felt the leaflet will help their discussions with parents/carers and 62% reported that the leaflet had increased their knowledge about safe sleep practices

Recommendations

Recommended Maternity Service Touchpoints

- 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.**

Work needs to continue to engage maternity staff in promoting Every Sleep Counts, with the introduction of further materials, social media and future campaigns. Training needs to be prioritised to promote the importance of the consistency of the public health universal message around safe sleep

