

A blue-tinted photograph of a woman with her hands on a baby's head, looking down at the baby. The woman is on the left, and the baby is on the right. The woman's hands are gently resting on the baby's head. The baby is wearing a white onesie and a small hat. The background is a plain, light-colored wall.

North Carolina SIDS Counselor Update

January 18, 2018

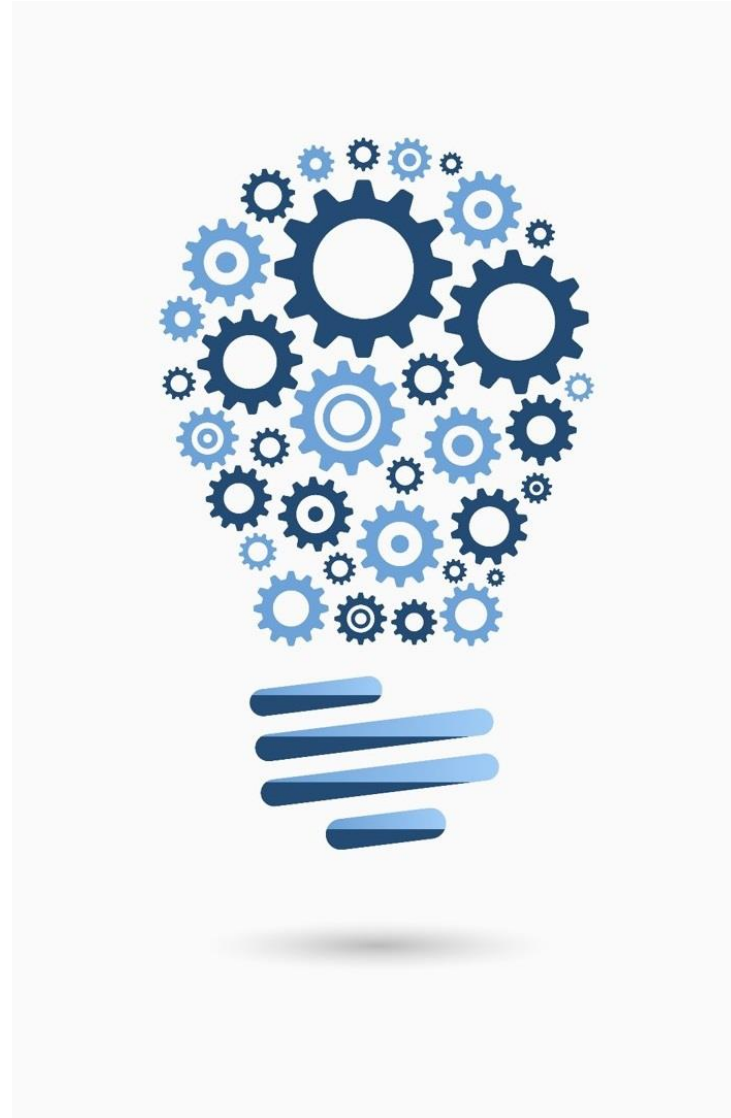


Megan Canady, MSW, MSPH
megancanady@med.unc.edu
919-843-7865



**UNC Center for
Maternal & Infant Health**

Short Evaluation at the End of Training



Learning Objectives

Demonstrate an understanding of infant sleep related deaths in North Carolina

Describe the updated 2016 recommendations for a Safe Infant Sleeping Environment

Enhance communication with families who experience an infant death

Describe strategies to promote self-care

Identify resources for staff trainings, patient materials, and support services for families

Definitions

Sudden infant death syndrome (SIDS) is a cause assigned to infant deaths that cannot be explained after a thorough case investigation that includes a scene investigation, autopsy, and review of the clinical history.

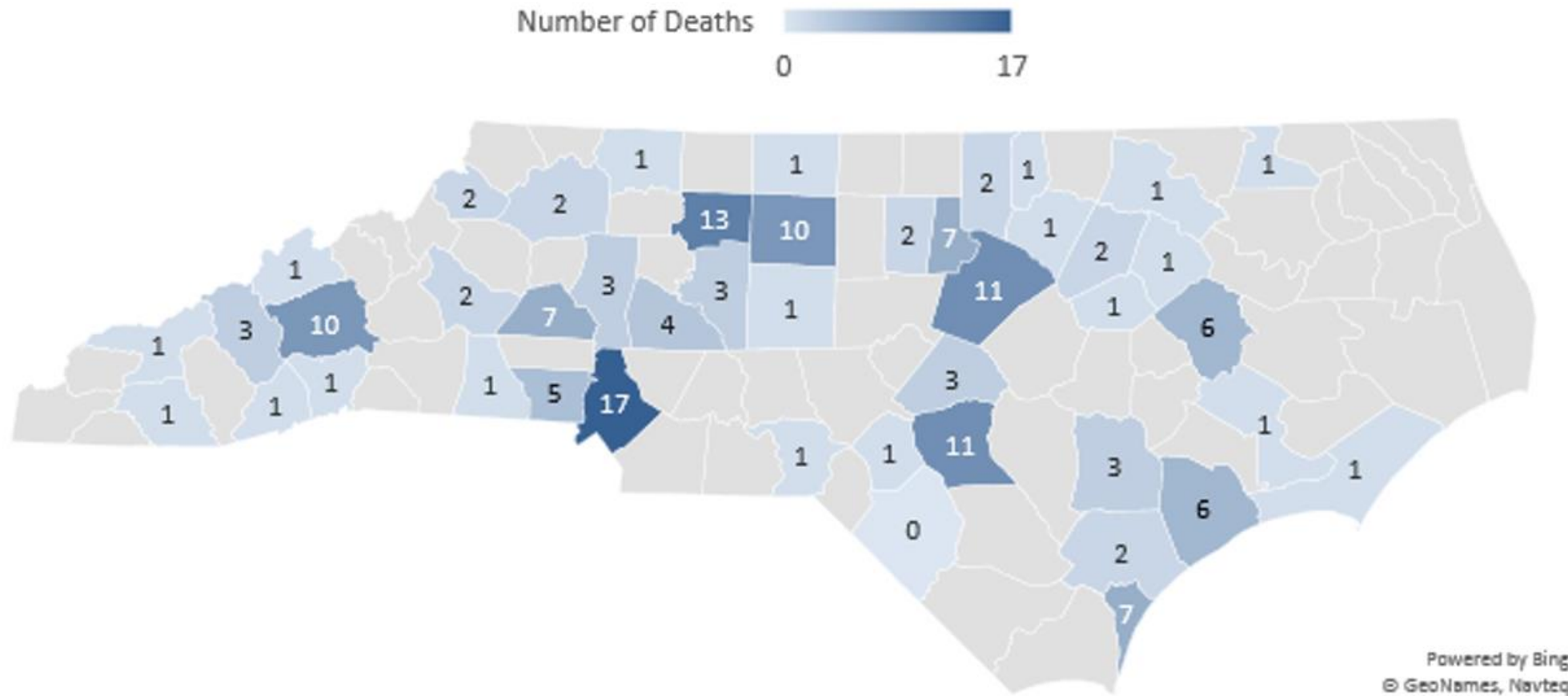
Sudden unexpected infant death (SUID), is a term used to describe any sudden and unexpected death, whether explained or unexplained (including SIDS), that occurs during infancy. After case investigation, SUIDs can be attributed to suffocation, asphyxia, entrapment, infection, ingestions, metabolic diseases, and trauma (accidental or non-accidental).

NC SUID by Listed Cause of Death: 2007-2016

Year	SIDS	Causes of Death Unknown	Accidental Suffocation/ Strangulation in Bed	TOTAL SUID	% of all Infant Deaths	Rate per 1,000 Live Births
2007	98	33	20	151	18.1%	1.3
2008	136	29	21	186	22.4%	1.6
2009	98	48	7	153	18.4%	1.3
2010	53	46	13	112	13.5%	0.9
2011	50	64	11	125	15.0%	1.1
2012	28	92	16	136	16.3%	1.1
2013	23	75	11	109	13.1%	0.9
2014	28	105	11	144	16.7%	1.2
2015	12	113	13	138	15.6%	1.1
2016	13	104	22	139	15.9%	1.2

ICD-10 Codes: SIDS=R95; Suffocation=W75; Unknown=R99

2015 Infant Death in Sleep Environments by County



2016 Updated Recommendations for a Safe Infant Sleeping Environment

Link to full report:

<http://pediatrics.aappublications.org/content/early/2016/10/20/peds.2016-2938>

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

Modifiable Factors



Protective Factors

Breastfeeding

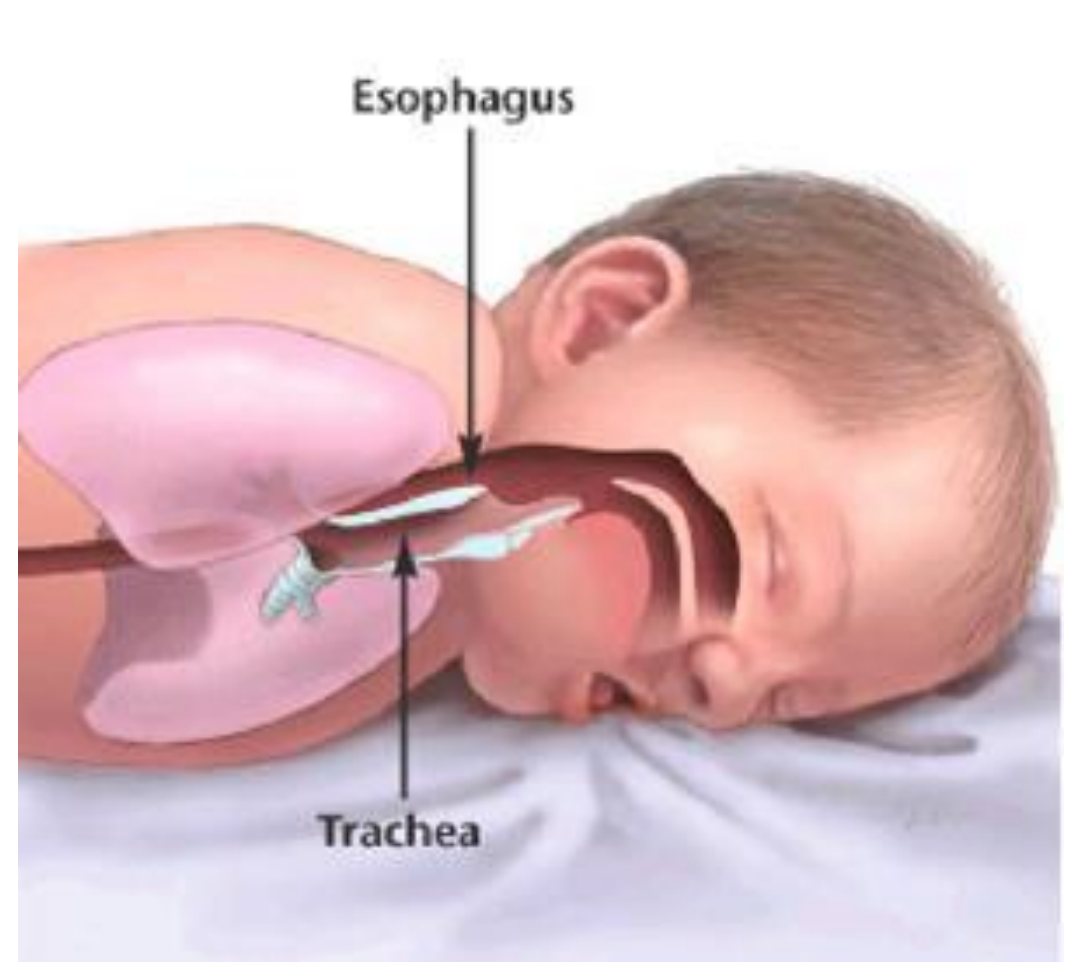
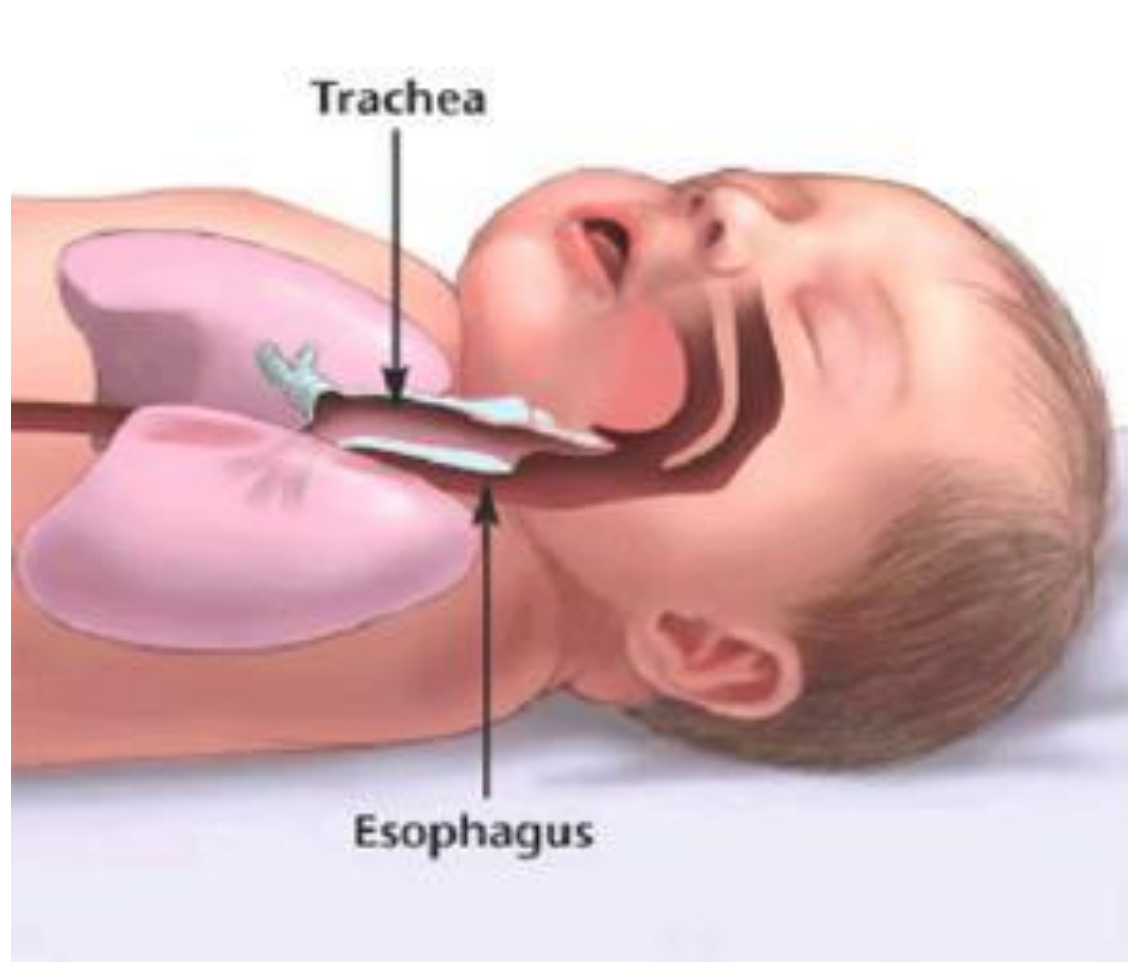
Use of a Pacifier at
Nap and Bedtime

Infant Immunization



Common Questions & Concerns

Won't My Baby Choke If He Sleeps On His Back?



*I Want to Co-Sleep with My Baby
Or
I Sometimes Fall Asleep with My Baby*



My Mother and Grandmother Say I Should Place My Baby On Her Stomach-Should I listen to Them?



How To Help Families Who Have Experienced the Death of an Infant?



What to Say and Do

- Use simple and straightforward language
- Be comfortable showing emotions
- Listen to the parents
- Answer questions honestly
- “I’m sorry”
- “I wish things would have ended differently”
- “Do you have any questions?”

Source: [Guidelines for health care professionals supporting families experiencing a perinatal loss](#)

What NOT To Say or Do

“It’s best this way”

“It could be worse”

“You can have more children”

“It’s good your baby died before you got to know him or her well”

Do not use medical jargon

Do not argue with parents

Do not avoid questions

Source: [Guidelines for health care professionals supporting families experiencing a perinatal loss](#)

Self-Care for SIDS Counselors



Self-Care for SIDS Counselors

Maintain
good
overall
healthy
habits and
wellness

Share or
debrief your
experience
with
someone
you trust

Give
yourself
extra
margin in
your day to
process

Don't be
surprised if
you feel a
range of
emotions that
you did not
expect

Know that
you cannot
take away the
family's pain

Support Resources for Families

Click [here](#) to see current list



Update to SIDS Home Visit/Contact Form

Question 35 has been expanded to capture electronic cigarette/vaping use

This is a new electronic form and should be completed and submitted online to Cheryl Davis-Dukes. The form is password protected, contact Cheryl for the password at Cheryl.davis-dukes@dhhs.nc.gov

N.C. Department of Health and Human Services
Division of Public Health
Women's and Children's Health Section
Women's Health Branch

SIDS Home Visit/Contact

1. Infant's Last Name		First Name		MI
2. SIDS Case #				
3. Date of Birth (MM/DD/YYYY)				
4. Date of Death (MM/DD/YYYY)				
5. Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> Unknown <input type="checkbox"/> White				
6. Ethnic Origin <input type="checkbox"/> Hispanic Cuban <input type="checkbox"/> Hispanic Mexican American <input type="checkbox"/> Hispanic Other <input type="checkbox"/> Hispanic Puerto Rican <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unreported				
7. Gender <input type="checkbox"/> Female <input type="checkbox"/> Male				
8. County of Residence (3-digit code)				
9. County of Death (3-digit code)				
10. Cause of death: <input type="checkbox"/> SIDS <input type="checkbox"/> Other				
11. Autopsy requested by counselor: <input type="checkbox"/> Yes <input type="checkbox"/> No				
12. Death reported by:				
13. Counselor's name/address for mailing of grief package:				
14. Counselor's phone:				
15. Date counselor informed of death: (MM/DD/YYYY)				
16. County:				
17. Medical Examiner:				
18. Pathologist:				
19. Date program informed of death: (MM/DD/YYYY)				
20. Date material sent to family: (MM/DD/YYYY)				
21. How counselor learned of death: <input type="checkbox"/> Parent/Family <input type="checkbox"/> Caretaker <input type="checkbox"/> Vital records <input type="checkbox"/> First responder <input type="checkbox"/> SIDS Hotline <input type="checkbox"/> OCME <input type="checkbox"/> Hospital <input type="checkbox"/> Obituary <input type="checkbox"/> Other (specify):				
22. Location of death: <input type="checkbox"/> Private home (immediate family) <input type="checkbox"/> Other private home <input type="checkbox"/> Home-based child care provider/sitter <input type="checkbox"/> Licensed daycare provider <input type="checkbox"/> Hospital (admitted prior to death) <input type="checkbox"/> Other (specify):				
23. Mother's Name (first, last): Age: _____ Address: _____ Telephone: _____				
24. Father's Name (first, last): Age: _____ Address: _____ Telephone: _____				
25. Other family members/relations affected:				
26. Date of initial contact with family:				
27. Date of initial visit with family:				
28. Date autopsy report received:				
29. Date of autopsy review visit:				
30. Date(s) of additional contacts:				
31. If counseling was <input type="checkbox"/> refused <input type="checkbox"/> not done specify reason:				
32. Material given to family: <input type="checkbox"/> Mailed <input type="checkbox"/> Delivered personally <input type="checkbox"/> Standard packet from SIDS office <input type="checkbox"/> Information from Local Health Department (specify):				
33. Family referred to other resources: <input type="checkbox"/> SIDS Alliance <input type="checkbox"/> Another SIDS family <input type="checkbox"/> Support group <input type="checkbox"/> Therapist/Mental health <input type="checkbox"/> National SIDS Program <input type="checkbox"/> Other (specify):				
34. Birthweight: _____ lbs. _____ oz.				
35. Smoking: Yes No Electronic Cigarettes/Vaping: Yes No				
36. Position at Death: Stomach Side Back				

DHHS 3723 (Revised 11/2017)
Women's Health (Review 11/2020)

NC Safe Sleep Contact Information

 **UNC Center for Maternal & Infant Health**
Improving the health of North Carolina's women and infants

Home About Us ▾ Key Services ▾ Patient Education Materials Resources for Practice ▾

Search MomBal 🔍

Safe Sleep



Safe Sleep is a crucial component of infant health

Erin McClain, MA, MPH
erin_mcclain@unc.edu
919-808-0989

Megan Canady, MSW, MSPH
megancanady@med.unc.edu
919-843-7865

MomBaby.org

Please Complete Short Evaluation

https://www.surveymonkey.com/r/SIDS_Update2018

