



Department of Early Education and Care

THE COMMONWEALTH OF MASSACHUSETTS

EEC Licensing

POLICY STATEMENT: Safe Sleep for Infants

All of EEC's standards for the licensure of out-of-home care of children require programs to provide care to children in a way that "assures every child a fair and full opportunity to reach his full potential" (See 606 CMR 7.01; 102 CMR 3.00; and 102 CMR 5.00.) In order to reduce the risk of infant death in child care settings from Sudden Unexplained Infant Death (SUID) and Sudden Infant Death Syndrome (SIDS), EEC has established the following policy regarding sleep practices for **all children under 12 months in age**.

Required Safe Sleep Practices:

- In accordance with the recommendations of the American Academy of Pediatrics (October, 2011), all programs serving children under 12 months in age must comply with the following safe sleep practices:
 - Infants under 12 months in age must be placed on their backs for sleeping, unless the child's health care professional orders otherwise, in writing.
 - Each child must nap in an individual crib, port-a-crib, playpen or bassinet; with a firm, properly fitted mattresses and a clean fitted sheet with no potential head entrapment areas. Always use a firm sleep surface. Car seats and other sitting devices are not allowed for routine sleep. Cribs and toddler beds must meet CPSC and ASTM safety standards. Slats on cribs must be no more than 2- 3/8 inches apart.
 - Blankets, comforters, pillows, stuffed animals, wedges, positioners, bumper pads or other soft padded materials or toys must not be placed in the crib with the baby. Sleepers and sleep sacks are good alternatives to blankets. [For family child care and large and small group and school age child care, see 606 CMR 7.11(13)(e); for residential care see 102 CMR 3.08(7)(b); for placement programs, see 102 CMR 5 10(4)(a)].
 - Bottles must never be propped and babies should not sleep sucking on a bottle of milk. Propping the bottle increases the risk of choking and of ear infections. Falling asleep with milk pooled in the mouth leads to serious dental caries in developing teeth.¹
 - Home monitors or commercial devices marketed to reduce the risk of SIDS must not be relied upon for the supervision of sleeping babies.
 - Supervised awake tummy time is required daily to facilitate development and minimize the occurrence of positional plagiocephaly (flat head).

¹ After feeding and before putting an infant to sleep, gently wipe any milk residue from her gums. A pacifier can be offered at sleep time instead of a bottle.

- Children who are younger than six months of age at the time of enrollment must be under direct visual supervision at all times, including while napping. In family child care, direct visual supervision is required specifically during the first six weeks they are in care. [For variations in LGSA, Small Group and FCC regulations on sleep supervision *See* 606 CMR 7.10(5) and 7.10(7)d].
- Group child care programs must include in their written health care policy “a plan to ensure that all children twelve months of age or younger are placed on their backs for sleeping, unless the child’s health care professional orders otherwise in writing” [*See* 606 CMR 7.11(19)(a)9] .

Crib Safety Requirements:

- Beginning December 28, 2012, all cribs in licensed child care programs must comply with current CPSC crib standards. [*See* 606 CMR 7.14(1).] To demonstrate that a crib meets the current CPSC crib standards, one of the following must be observed:
 - A “tracking label”, which is a permanent, distinguishing mark on the crib which contains, at minimum, the source of the product, the date of manufacture, and cohort information, such as batch or run number. (Any date of manufacture on or after June 28, 2011, will be accepted);
 - a registration form including the manufacturer’s name and contact information, model name, model number, and a date of manufacture on or after June 28, 2011;
 - a Children’s Product Certificate (CPC) or test report from a CPSC-accepted third party lab demonstrating compliance with 16 C.F.R. part 1219 or 16 C.F.R. part 1220.²

Training Requirements:

- All educators, residential care staff including programs serving teen parents and foster and adoptive parents caring for children under 12 months in age must be trained on the aforementioned requirements.

Training must include viewing EEC’s training *Reducing the Risk of SIDS in Child Care*, available in multiple languages at: <http://www.mass.gov/edu/birth-grade-12/early-education-and-care/licensing/licensing-resources-for-family-child-care-providers/professional-development-and-online-trainings.html>[For family child care and group child care programs, *See* 606 CMR 7.09(15)(d) and 7.09(17)(a); for residential programs serving children and teen parents, *See* 102 CMR 3.04(7)(g); for agencies offering child placement and adoption services, *See* 102 CMR 5.10(13)].

² While manufacturers, importers, and retailers are not required to supply CPCs or test reports to consumers, many will provide these documents upon request, or they post them on their websites. A CPC or test report indicating compliance with any of the following standards is acceptable for full size cribs: F1169-10, 10a, or 11. A CPC or test report indicating compliance with any of the following standards is acceptable for non-full size cribs: F406-10I 10a, 10b, 11, 11a, 11b, 12, or 12a. If a crib purchased after June 28, 2011 does not have a tracking label or registration form, contact CPSC’s Office of Compliance and Field Operations at jjrgl@cpsc.gov. Receipts alone are not an indicator of compliance and should only be used to support the documents identified above when determining compliance.

All family child care educators must renew training in infant safe sleep with every licensing cycle. Documentation of this training must be submitted with each 3-year license renewal. Training may include viewing of EEC's training *Reducing the Risk of SIDS in Child Care*, or via another authorized vendor such as those offered by local hospitals or the Department of Public Health.

EEC requires that all group child care educators who work with infants renew their infant safe sleep training with each 2-year licensing cycle. This includes all staff that may provide coverage, even on an occasional basis, in an infant classroom.

All new staff in group programs and any assistants caring for infants in family child care programs must be trained on safe sleep practices prior to caring for infants.

Required Information for Parents:

- Family child care and group child care programs must provide information to families in writing prior to enrollment of their child regarding SIDS risk reduction practices, including the practice of sleeping infants on their backs. [See 606 CMR 7.08(6)(j)].
- Residential programs serving teen parents must provide information to those parents in writing regarding SIDS risk reduction practices, including the practice of sleeping infants on their backs. Parents should be provided an opportunity to review EEC's *Reducing the Risk of SIDS in Child Care* at:
<http://www.mass.gov/edu/birth-grade-12/early-education-and-care/licensing/licensing-resources-for-family-child-care-providers/professional-development-and-online-trainings.html> or safe sleep training. [See 102 CMR 3.07(1)].

Results of Failure to Comply: Failure to comply with EEC's regulations and policies regarding Safe Sleep places infants at serious risk of injury or death. If EEC determines noncompliance with infant safe sleep, programs will be required to;

- Within 10 days of the citation, retrain all educators in infant safe sleep. Training must include informing educators on resources about Sudden Infant Death Syndrome (SIDS) and safe sleep practices through resources such as;
 - Reducing the Risk of SIDS in Child Care (training) at <http://www.mass.gov/edu/birth-grade-12/early-education-and-care/licensing/licensing-resources-for-family-child-care-providers/professional-development-and-online-trainings.html>
 - MA EOHHS website on safe sleep resources at: <http://www.mass.gov/eohhs/gov/departments/dph/programs/community-health/dvip/injury-prevention/infant-safe-sleep.html>
 - American Academy of Pediatrics at www.aap.org
 - Healthy Children. Org - <http://www.healthychildren.org/English/ages-stages/baby/sleep/pages/A-Parents-Guide-to-Safe-Sleep.aspx>
 - Health Child Care America - <http://www.healthychildcare.org/sids.html>
 - Safe to Sleep - <http://www.nichd.nih.gov/sts/Pages/default.aspx#skipnav>

- For Family Child Care, the educator must sign EEC's *Provider Safe Sleep Pledge*.
- For Group Child Care, the director must conduct random inspections at least weekly of the infant room and safe sleep practices including documentation of the dates, times, teachers, number of children, and what was observed. Documentation must be available for EEC review.
- As of September 1 2014, any Family Child Care or Group Child Care program cited for failure to follow EEC's Safe Sleep Regulations and Policy is required to provide, within 2 days of the citation, written notification of the noncompliance and plans to immediately correct it to the parents of infants involved in the noncompliance. Educators must use the attached: Safe Sleep Parent Letter - First Visit of Noncompliance Findings. (Per 707.8(8)(f) and 7.07.6(5)). A copy of each letter, signed by the parent(s) is to be retained by the program in the child's file.
- As of September 1, 2014 any Family Child Care or Group Child Care program cited for failure to follow EEC's Safe Sleep Regulations and Policy a **second** time is required to provide, within 2 days of the citation, written notification of the noncompliance and plans to immediately correct it to all parents of infants enrolled at the program of the safe sleep noncompliance and the program's plan for compliance. Educators must use the attached "Safe Sleep Parent Letter - Second Visit of Noncompliance Findings". This letter also shares that the program may be at risk of EEC restricting or revoking the program's license to care for infants. (Per 707.8(8)(f) and 7.07.6(5)) A copy of each letter, signed by the parents is to be retained by the program in the child's file.
- Non-compliance with Safe Sleep requirements may result in legal sanctions against or limitations on a program's license. Sanctions may include a freeze on infant enrollment, required training of staff and other limitations including a prohibition from the care of infants.

SAFE SLEEP PARENT LETTER
First Visit of Noncompliance Findings

Date: _____,

Dear _____,

Recently, a Licensor from the Department of Early Education and Care (EEC) visited the program. During this visit, the Licensor identified issues of noncompliance with our infant safe sleep procedure which involved your child. Specifically, the licensor found:

_____.

In order to reduce the risk of infant death in a child care setting from Sudden Unexplained Infant Death (SUID) or Sudden Infant Death Syndrome (SIDS), EEC has established a policy regarding safe sleep practices for all children under 12 months in age. All programs are required to follow this policy while providing care to infants. This policy also states that repeated non-compliance with Safe Sleep requirements may result in action on the program's license up to and including a prohibition from caring for infants.

As a result of the recent EEC visit, I have been made aware of the safe sleep issues identified in our program and have submitted a plan for compliance to EEC. This plan includes:

_____.

I assure you that we will follow this plan and, in doing so, comply fully with EEC Safe Sleep Policies and Regulations in the future.

For additional information regarding Safe Sleep practices, see:

- Reducing the Risk of SIDS in Child Care (training) at <http://www.mass.gov/edu/birth-grade-12/early-education-and-care/licensing/licensing-resources-for-family-child-care-providers/professional-development-and-online-trainings.html>
- MA EOHHS website on safe sleep resources at: <http://www.mass.gov/eohhs/gov/departments/dph/programs/community-health/dvip/injury-prevention/infant-safe-sleep.html>
- Health Child Care America - <http://www.healthychildcare.org/sids.html>
- Safe to Sleep - <http://www.nichd.nih.gov/sts/Pages/default.aspx#skipnav>

If you have any questions about the content of this letter, please do not hesitate to contact me.

Sincerely,

Program Director or Family Child Care Provider

Acknowledgement of Parent receipt: _____ Date

Parent Signature

SAFE SLEEP PARENT LETTER
Second Visit of Noncompliance Findings

Date: _____,

Dear _____,

Recently, a Licensor from the Department of Early Education and Care (EEC) visited this program. During this visit, the Licensor identified, for the second time, issues of noncompliance with our infant safe sleep procedure which involved your infant or the other infants in care. Specifically, the licensor found:

_____.

This was a second visit of noncompliance findings for this program regarding infant safe sleep.

In order to reduce the risk of infant death in a child care setting from Sudden Unexplained Infant Death (SUID) or Sudden Infant Death Syndrome (SIDS), EEC has established a policy regarding safe sleep practices for all children under 12 months in age. All programs are required to follow this policy while providing care to infants. This policy also states that repeated non-compliance with Safe Sleep requirements may result in action on the program's license up to and including a prohibition from caring for infants.

As a result of the recent EEC visit, I have been made aware of the safe sleep issues identified in our program and have submitted an plan for compliance to EEC. This plan includes:

_____.

I assure you that we will follow this plan and, in doing so, comply fully with EEC Safe Sleep Policies and Regulations in the future.

However, if EEC finds further findings of noncompliance relative to infant safe sleep, I must share with you that due to the risk to infants, EEC may restrict or revoke this program's license to care for infants.

For additional information regarding Safe Sleep practices, see:

- Reducing the Risk of SIDS in Child Care (training) at <http://www.mass.gov/edu/birth-grade-12/early-education-and-care/licensing/licensing-resources-for-family-child-care-providers/professional-development-and-online-trainings.html>
- MA EOHHS website on safe sleep resources at: <http://www.mass.gov/eohhs/gov/departments/dph/programs/community-health/dvip/injury-prevention/infant-safe-sleep.html>
- Health Child Care America - <http://www.healthychildcare.org/sids.html>
- Safe to Sleep - <http://www.nichd.nih.gov/sts/Pages/default.aspx#skipnav>

If you have any questions about the content of this letter, please do not hesitate to contact me.

Sincerely,

Program Director or Family Child Care Provider

Acknowledgement of Parent receipt: _____ Date _____
Parent Signature

Questions and Answers about Infant Safe Sleep

Q: What will happen if my child's program is cited by EEC for not following safe sleep procedures?

A: If an EEC licensor finds that your program is not following safe sleep requirements, the program will be cited and be required to immediately correct the unsafe sleep situation. The licensor will return within 7-10 days to ensure that the program is in compliance. The program will also be required to;

- Retrain all educators on EEC's infant safe sleep training. Training must include informing educators on resources about Sudden Infant Death Syndrome (SIDS) and safe sleep practices through resources such as;
 - Reducing the Risk of SIDS in Child Care (training) at <http://www.mass.gov/edu/birth-grade-12/early-education-and-care/licensing/licensing-resources-for-family-child-care-providers/professional-development-and-online-trainings.html>
 - MA EOHHS website on safe sleep resources at: <http://www.mass.gov/eohhs/gov/departments/dph/programs/community-health/dvip/injury-prevention/infant-safe-sleep.html>
 - American Academy of Pediatrics at www.aap.org
 - Healthy Children. Org - <http://www.healthychildren.org/English/ages-stages/baby/sleep/pages/A-Parents-Guide-to-Safe-Sleep.aspx>
 - Health Child Care America - <http://www.healthychildcare.org/sids.html>
 - Safe to Sleep - <http://www.nichd.nih.gov/sts/Pages/default.aspx#skipnav>
- For Family Child Care, the educator must to sign EEC's *Provider Safe Sleep Pledge*.
- For Group Child Care, the director must, at least weekly, conduct random inspections of the infant room and safe sleep practices including documentation of the dates, times, teachers, number of children, and what was observed. Documentation must be available for EEC review.
- For the First Visit of Safe Sleep Noncompliance, as of September 1, 2014 EEC requires that all programs cited for safe sleep violations inform the family of the infant involved in the safe sleep noncompliance. Please see the "Safe Sleep Parent Letter - First Visit of Noncompliance Findings".
- For the Second Visit of Safe Sleep Noncompliance, as of September 1, 2014, EEC requires that all programs cited again for safe sleep violations inform all the families of infants enrolled in the program of the safe sleep noncompliance and the program's plan for compliance. Please see the " Safe Sleep Parent Letter - Second Visit of Noncompliance Findings".
- Repeated non-compliance with Safe Sleep requirements may result in sanctions against or limitations on a program's license, up to and including a prohibition from caring for infants.

Q: What type of blanket may be used for infants?

A: As of January 1 2015, no blankets of any type may be used for the napping of children under 12 months in age. EEC is aligning its policy with the latest research and recommendations of the

National Institutes of Health and the American Academy of Pediatrics that recommend children be slept in a bare crib with no blankets. Blanket-sleeper type pajamas or sleep sacks are a good alternative to a blanket.

Q. What is an “approved” crib, bassinet, port-a-crib etc?

A: Any piece of sleep equipment used must be approved by the U.S. Consumer Product Safety Commission. Beginning December 28, 2012, all programs must be prepared to show documentation that their cribs meet the new standards ([16 CFR 1219](#) for full size cribs or [16 CFR 1220](#) for non-full size cribs). Beginning June 28, 2011, all cribs manufactured or offered for sale, lease, or resale were required to meet the new crib standards. Cribs should have slats that are spaced no more than 2 3/8 inches apart. A firm mattress must be snug to the crib, port-a-crib etc. The space between the mattress edge and crib should not be more than the width of 2 adult size fingers. The mattress must have a tight fitting sheet. Bumper pads may not be used.

Q. How long can I use a bassinet for sleep?

A. Bassinet use should be discontinued once the infant reaches five months old, or once an infant begins moving and turning around unassisted (whichever comes first).

Q. Can I use a bassinet swing for sleep?

A. A bassinet swing (an infant swing which is intended for use by a child lying completely flat), may be used for sleep provided that the surface remains completely flat both while in motion and while at rest. The infant using the bassinet must not exceed the length or weight limits recommended by the manufacturer. Use of all other infant swings for sleep is prohibited.

Q. How long can I use a crib to nap a toddler?

A. Toddlers should not be placed in a crib to sleep once they are able to climb out independently. Usually children who are 35” tall and/or are between 18 and 30 months old are able to climb over the side railings of a crib, and should be moved to another sleep surface. Before children reach that age, the crib mattress should be moved to a lower level to protect a baby who can push up on his hands and knees, sit or stand. Further, cribs should *only* be used for napping purposes, and may not be used to “restrain” or “contain” a toddler for the convenience of staff.

Q. When can I transition a child to a mat for napping?

A. EEC regulations require that infants (children from birth to 15 months old) be placed in individual cribs, portacribs, playpens or bassinets for napping. As a general rule, children may be transitioned to a mat or other approved sleep surface for napping at 15 months old. However, under certain circumstances infants age 12 months or older may be transitioned to a mat or cot for rest. EEC Policy “Alternative Napping for Infants 12 to 15 Months” at http://www.eec.state.ma.us/docs1/regs_policies/group_schoolage_policies/20101018_alternative_napping4infants.pdf for required considerations.

Q: What should educators do when an infant falls asleep while they are outside?

A: Educators should not disrupt their program activities if an infant falls asleep while outside, as long as they are safely in a stroller or back-pack. They should still follow all procedures, including not over bundling infants in strollers in the winter, making sure they are not overheated in the summer, making sure they are supervised and making sure nothing interferes with breathing (stroller straps secure but not too tight, no blankets or soft objects in strollers with infants; baby is positioned so that s/he can breathe freely).

Q: What should an educator do if a parent drops off an infant in a car seat and says that the infant just fell asleep? Does the educator have to remove the infant's outerwear and move the infant to a crib?

A: If a parent drops off an infant in a car seat, that infant must be moved to a crib, bassinet, or port-a-crib. The educator must assure that the infant is not dressed too warmly for the indoor environment, which may require removing outdoor clothing.

Q: If the infant falls asleep in a swing is it okay to leave them in the swing?

A: If an infant falls asleep in a swing, the infant must be moved to a crib, bassinet, or port-a-crib.

Q: If an infant rolls over on their own, should the educator re-position the infant on their back?

A: Once an infant is able to roll over on their own, the infant should not be rolled back over during nap. The educator must always place the infant to sleep on their back initially and must follow all other safe sleep regulations. The educator must be sure that the infant has enough supervised tummy time while awake and alert so that the infant can develop proper head and neck control and become comfortable with this position.

Q: What should an educator do if a parent brings in a special sleep toy?

A: The educator must share the program's SIDS reduction practices which prohibit stuffed animals or other soft padded material in cribs, bassinets, port-a-cribs etc. An educator may use the special sleep toy to comfort the infant before they go to sleep.

Q: What if an infant uses a pacifier to go to sleep?

A: Use of a pacifier can help reduce the risk of SIDS. The educator may offer the pacifier to the infant while placing them to sleep. The pacifier should not have cords or clips that might be a strangulation risk.

Q: How close can the cribs, bassinets, port-a-cribs be to each other?

A: They must be at least 2 feet apart.