



SAFE SLEEP: LETTER TO PARENT/CAREGIVER
EEC Second Citation of Non-Compliance Findings

Date:

Dear _____ ,

Recently, a representative from the Department of Early Education and Care (EEC) visited our child care program. During this visit, the representative identified, for the second time, issues of non-compliance with infant Safe Sleep procedures that involved your infant or the other infants in care. Specifically, EEC found: _____ .

This non-compliance was corrected immediately, and all infants remained in care.

The non-compliance could not immediately be corrected, and one or more infants were sent home until a safe sleep environment could be provided.

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 legal action on the program's license, up to and including a prohibition from caring for infants and/or revocation of the program's license.

As a result of the recent EEC visit, I have been made aware of the Safe Sleep issues identified and am required to submit a plan of correction to EEC. Please note that this is the program's second violation related to Safe Sleep and that, due to the risk to infants, EEC may restrict or revoke our program's license to care for infants if further non-compliances related to infant Safe Sleep are found.

If you have concerns about your current child care provider and need assistance with identifying an alternative child care option, please contact your local [Child Care Resource and Referral \(CCRR\) agency](#).

Thank you for your continued help in supporting Safe Sleep practices. If you have any questions about the content of this letter, please do not hesitate to contact me.

Sincerely,

Licensee or Designee Signature

Acknowledgement of Parent receipt: Please sign, date, and return to the program.

Parent Signature:

Date:

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