



# OHIO DEPARTMENT OF HEALTH

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John R. Kasich/Governor

Lance Himes/Director of Health

## MEMORANDUM

TO: Ohio General Assembly  
FROM: Lance Himes, Director of Health  
DATE: June 30, 2017  
RE: Annual Safe Sleep Report

In December 2014, Governor Kasich signed Senate Bill 276. The bill provided that the Director of Health shall prepare and submit a written report by July 1st to the General Assembly and the Governor. Pursuant to ORC 3701.67, the Ohio Department of Health submits the attached report. Consistent with the statute, the report includes the following data for 2016:

- The number of safe cribs, portable play yards, or other suitable places to sleep that the facility obtained and distributed by using its own resources;
- The number of safe cribs, portable play yards, or other suitable places to sleep that the facility obtained and distributed by collaborating with or obtaining assistance from another person or government entity;
- The number of referrals to a "Cribs for Kids" site;
- Demographic information specified by the director of health regarding individuals to whom safe cribs, portable play yards, or other suitable sleeping places were distributed and referrals to "Cribs for Kids" sites were made;
- Any other information collected by the facility regarding infant sleep environments and intended infant sleep environments that the director of health determines is appropriate.

Enclosure



## **REPORT TO THE GOVERNOR JULY 1, 2017 INFANT SAFE SLEEP**

### **Background**

Every week in Ohio, three babies die in unsafe sleep environments. The Ohio Child Fatality Review Sixteenth Annual Report notes that from 2011 through 2015, 770 infants died while in a sleep environment, accounting for 16 percent of the 4,825 infant death reviews. Sleep-related deaths were the leading cause of death between one month and one year of age. If all sleep-related deaths were prevented, the Ohio infant mortality rate for 2015 would have been reduced from 7.2 to 6.1 deaths per 1,000 live births. If the sleep-related deaths of black infants were prevented, the black infant mortality rate for 2015 would have been reduced from 15.1 to 12.5 deaths per 1,000 live births.

### **Summary of Requirements**

The Ohio Infant Safe Sleep Law was enacted by Am. Sub. S. B. 276 of the 130th Ohio General Assembly in May 2015. ORC 3701.67 requires birthing centers and hospitals, excluding Critical Access Hospitals, to screen new parents and caregivers prior to discharge to determine if the infant has a safe sleep environment at their residence. If the infant is determined not to have a safe sleep environment, the facility must assist the family in obtaining a safe crib at no charge.

The Ohio Department of Health (ODH) developed a model screening form for facilities to use to identify parents and caregivers who do not have a safe sleep environment for infants. Beginning on January 1, 2017, a new tab was launched within the State's vital records system (Integrated Perinatal Health Information System), to capture infant safe sleep screening data. ODH conducted six regional trainings between November and December 2016 in Akron, Athens, Cincinnati, Cleveland, Columbus, and Toledo on the topic of infant safe sleep and entering safe sleep screening data into the new IPHIS tab. Facilities with IPHIS access are expected to report safe sleep screening data in IPHIS going forward. This data, along with demographic data, is extracted by ODH to monitor the need for safe sleep environments and appropriate action taken by facilities to connect families in need with a safe crib. Facilities without access to IPHIS will continue to submit an annual report to ODH that indicates aggregate safe sleep screening and accompanying demographic data for the year.

## Summary of Hospital Data

In 2016, 77 facilities provided ODH with data. The results indicate that 93,573 caregivers of newborns were screened; of them, 92,106 reported having a safe sleeping crib for their infant at home, and 1,467 reported not having a safe sleeping crib for their infant at home. Fifty-three of the 77 facilities identified between one and 784 caregivers at their facilities who did not have a safe sleep environment. For 24 of the facilities that reported data, all of the caregivers screened (13,145 total) had access to a safe sleep environment and no referrals to cribs were needed.

Among facilities that reported data:

- Facilities provided 116 safe cribs using its own resources;
- Facilities provided 370 safe cribs by collaborating with or obtaining assistance from another person or government entity;
- Facilities made 90 referrals of a parent/guardian/other responsible person to a person or government entity to obtain a safe crib; and
- Facilities made 191 referrals of a parent/guardian/other responsible person to a site designated by ODH to obtain a safe crib.

During the transition to IPHIS in 2016, there was a discrepancy in the data reported by facilities regarding families needing a crib and the provision of resources or referrals provided to those families. Additionally, insufficient demographic, income, and zip code data were reported for caregivers who were referred for a crib; therefore, the results are insufficient to describe these characteristics. With the transition to reporting safe sleep screening through IPHIS, ODH is now extracting and monitoring data on a quarterly basis and following up with facilities that submit incomplete data. It is anticipated that with these changes in data reporting and monitoring, future discrepancies in the data will be minimized.

## Next Steps

In completing a safe sleep screening, facilities must indicate whether a crib or referral was provided for families in need, including whether the facility made referrals to an ODH designated site. ODH funds a network of Cribs for Kids® (CFK) partners to provide free Graco Pack 'N Plays to families who would otherwise be unable to afford a safe crib for their infant. At the time this report is written, 44 ODH-funded partners are implementing CFK programs in 59 Ohio counties. This includes 15 infant vitality partners that are implementing programs in infant mortality hot spots; these partners are charged with ensuring that at least 25% of the cribs distributed in those areas are delivered through home visiting programs. Additionally, the Ohio Commission on Fatherhood's New Beginnings for New Fathers program also provides CFK Pack 'N Plays in Clark, Cuyahoga, Franklin, Hamilton, and Montgomery counties. ODH is considering developing an online referral portal for CFK partners to enter and track data while reducing duplication.

Furthermore, Sub. S. B. 332 of the 131<sup>st</sup> Ohio General Assembly requires ODH to provide annual training classes at no cost to individuals who provide safe sleep education to parents and infant caregivers who reside in the infant mortality hot spots. ODH is in the process of developing the training, which will be made available to enrollees by June 30, 2018.

In 2016, ODH modified the part-time safe sleep coordinator position to a full-time position; the position is dedicated to aligning the work with the safe sleep requirements outlined in Sub. S. B. 332 of the 131<sup>st</sup> Ohio General Assembly. Part of this work includes providing facilities with safe sleep resources and updates through partnerships with the Ohio Hospital Association and the Ohio Injury Prevention Partnership Child Injury Action Group Safe Sleep Subcommittee. The coordinator developed and facilitated the regional IPHIS trainings in 2016, provides technical assistance to facilities, monitors safe sleep data, and follows up with facilities that submit incomplete data. The safe sleep coordinator also oversees the sleep-related deliverables that ODH funds through the Maternal and Child Health Program. This includes defining the program requirements, funding structure, and reporting and monitoring requirements for subgrantees coordinating ODH-funded CFK programs.

## **Conclusion**

ODH anticipates the full implementation of this law will result in a decrease in preventable sleep-related deaths, which is a significant contributor to infant mortality in Ohio. We look forward to continuing collaborations with partners, stakeholders, the legislature and the state enterprise to reduce infant mortality in Ohio.