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MINISTRY OF JUSTICE
OFFICE OF THE CHIEF CORONER

FEB 24 2015

Ref: 221290

Lisa Lapointe
Chief Coroner
Office of the Chief Coroner
Ministry of Justice
Metrotower II
800 - 4720 Kingsway
Burnaby BC V5H 4N2

Dear Lisa Lapointe:

Re: Review of Unexpected Infant Deaths 2008 - 2012

Thank you for your letter to the Honourable Stephanie Cadieux, Minister of Children and Family Development, and the copy of the above report by the BC Coroners Service Child Death Review Panel. In her response to you, Minister Cadieux asked me to follow up with you regarding our response to recommendation number three in the report, which states:

By the end of 2014, the First Nations Health Authority, the Community Against Preventable Injuries, Ministry of Health, Ministry of Children and Family Development and community stakeholders collaborate to:

- *Identify the specific audience of parents/caregivers who are likeliest to benefit from receiving messaging that is clear about infant safe sleep positioning, sleep environment, and the risks of bed sharing and substance use;*
- *Identify the most effective means for delivering the messaging to the target audience;*
- *Develop and implement a plan that delivers the messaging around infant safe sleep positioning, sleep environment, and the risks of bed sharing and substance use to the target audience.*

Nothing is more important to the Ministry of Children and Family Development (MCFD) than the safety and well-being of children in this province. Unexpected death in infancy is always a tragedy. As identified in your report, the Government of British Columbia has taken steps over the years to provide families, parents and caregivers with information about safe sleeping for infants. MCFD, the Ministry of Health and other

partners have produced various publications that promote safe infant safe sleeping practices and aim to reduce environmental risk factors for infants.

MCFD developed a brochure entitled *Safe Sleeping for Babies* that provides information in six languages to parents and caregivers involved with the ministry including birth parents, foster parents and adoptive parents.

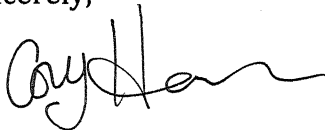
MCFD implemented a practice directive entitled *Addressing Unsafe Sleeping Practices with Infants* with the intent of supporting informed decision-making and healthy choices by parents to promote quality of care for their children. I am attaching a copy for your reference. The practice directive notes that educating parents about safe infant sleeping practices involves more than the provision of written information, it requires discussion within the context of cultural traditions, norms and information received from family, friends and health care practitioners.

In 2013, an inter-ministerial protocol, *Roles and Responsibilities of the Director (Child, Family and Community Service Act) and the Ministry of Health: For Collaborative Practice Relating to Pregnant Women At-Risk and Infants At-Risk in Vulnerable Families* was developed. The protocol supports a coordinated approach that is responsive and effective to ensure a safe environment for a child.

The *Safe Relationships Safe Children* project that is underway is intended to change practice by taking a broad, integrated approach across the various agencies and partners within each community including health, community, and child serving systems to identify and serve the needs of children and families who struggle with parental mental health problems/challenges, problematic substance use and/or intimate partner violence issues.

Thank you for the report. I appreciate the opportunity to respond.

Sincerely,

A handwritten signature in black ink, appearing to read 'Cory Heavener', written in a cursive style.

Cory Heavener
Provincial Director of Child Welfare

Program Area: Child Safety, Family Support and Children in Care Services
Ministry of Children and Family Development

Practice Directive

Effective Date: July 16, 2013

Practice Directive # 2013-05

Amendment Date:

Ref # 212140

ADDRESSING UNSAFE SLEEPING PRACTICES WITH INFANTS

Directive Statement

Under the *CFCSA*, the director is responsible for assessing child safety and risks to children. The *CFCSA* does not specifically include unsafe sleeping environments or bed-sharing as circumstances that indicate a child is in need of protection. However, such circumstances may indicate a likelihood of harm for the child and therefore, be grounds for a child being in need of protection.

Unsafe sleeping practices put infants at significant risk, especially with the presence of other factors (for example, parental use of drugs, alcohol, or cigarettes). When engaging parents who may utilize unsafe sleeping practices with their infants, the intent is to support informed decision-making and healthy choices and to promote quality care for their children.

Key Points

- The most widely accepted strategy for working with parents who utilize potentially unsafe sleeping practices with their infants is to educate them about safe and unsafe sleeping practices, the risks, and how to address those risks.
- Educating parents about safe and unsafe sleeping practices involves more than the provision of written information. It requires a discussion with parents about safe and unsafe sleeping practices within the context of cultural traditions, norms, and information received from family, friends and health care practitioners.
- The Canadian Paediatric Society's recommendations discourage bed-sharing (sharing a sleep surface), a common practice in many parts of the world. Although bed-sharing may promote breast-feeding and bonding with an infant, co-sleeping (sharing a room) is the safe alternative.
- BC Coroners Service statistics indicate that 52 infants died with their sleep environment as a contributing factor since 2010 (2010 – 16 infants; 2011 – 25 infants; 2012 – 11 infants). Ensuring parents have the appropriate education is essential to prevent future infant deaths from unsafe sleeping practices.

Advisory Information

When any child protection response involves a child under the age of two years, assessment and ongoing intervention includes:

- Consideration of Sudden Unexplained Death in Infancy (SUDI) risk factors (using the information in this directive as a guide), including confirmation of safe sleeping arrangements and routines in all environments where the infant sleeps; and,
- Provision of appropriate information, educational materials, and direction to parents and other individuals caring for the child, with in-person discussion of safe sleeping issues during initial and subsequent contacts, whenever unsafe sleeping concerns are indicated by observation, child protection reports, or other assessments.

Adherence to this Practice Directive is also required in all circumstances where:

- A child under two years of age comes to live with a family through an ongoing intervention, a court order, or an out-of-care placement arrangement; or
- A child under two years is reunified with the parent(s) or another person providing care.

In either of these situations, visit the home and address safe sleeping issues prior to placing the child with the caregiver(s) or returning the child to the care of the parent(s) or another person.

Infants living with foster families:

The sleeping arrangements for infants and young children are to be specified in the care plan. The *Standards for Foster Homes* state that all children in care sleep in their own bed, crib, or cradle that meets all safety regulations. Foster parents are advised to always discuss any changes to the infant's sleeping arrangements with the child's worker and their resource worker.

When Child Protection practitioners become aware of SUDI risk factors and other protection issues for a family with whom they are working, a referral to the local public health nurse, in addition to safe sleeping issues, is discussed with the family.

Safe Sleeping Environments

- An infant is always placed to sleep (at night and for naps) on his/her back in a crib, cradle, or bassinet that meets Canadian safety regulations (www.healthcanada.gc.ca/cps).
- Safe crib, safe mattress, safe bedding: The crib has a firm mattress and tight fitting sheet. There are no spaces between the mattress and head or footboard and railings. There are no bumper pads, heavy blankets, sheepskin, pillows or toys. A light blanket is the only thing sharing an infant's sleeping area and, if used, is firmly tucked under the sides and bottom of the mattress with the infant's arms free.
- BC Ministry of Health recommends that parents and care providers keep the infant's crib beside their bed for the first six months (room sharing or co-sleeping). This location is safest for the infant, close by but separate from where parents are sleeping. This is an important distinction: co-sleeping is sharing a room; bed-sharing is sharing a sleep surface. Co-sleeping protects against SUDI and is a safe alternative to bed-sharing.
- When an infant is sleeping away from home, planning occurs in advance to ensure the infant's sleeping environment is safe.
- Playpens, strollers, car seats, infant carriers, and swings are not intended for infant sleeping. Should an infant fall asleep in any of these items, he/she is carefully supervised until being transferred to a safe sleep surface.
- A smoke-free environment is safest for infants both during pregnancy and after birth.

Risk Factors

Bed-sharing:

- There is a very high risk of SUDI and fatal sleeping accidents when an infant shares a bed or other sleep surface with an adult, other children, or pets.
- Risks to the infant are increased when adults in the bed smoke and/or use alcohol or drugs.
- The bed-sharing risks include:
 - Overlay of the infant by someone overtired, under the influence of alcohol or sedating drugs, unwell, or unaware that the infant is in the bed;
 - A fall from the bed;
 - Entrapment between two surfaces (mattress and wall or bed railings); and,
 - Suffocation from pillows or bedding.

Adult Sleep Surfaces:

- There is a very high risk of SUDI and fatal sleeping accidents when an infant is placed to sleep on an adult sleep surface such as a pillow-top mattress, soft mattress, waterbed, featherbed, or on other soft surfaces like a cushion, pillow, couch, sofa, armchair, or recliner.
- The bedding (sheets, blankets, quilts, duvets, pillows) associated with adult sleep surfaces poses a suffocation risk to infants.
- Mothers should be advised to use caution when breastfeeding in bed or any situation where they may fall asleep with their infant.

Ministry Policy and Practice Guidelines

MCFD Practice Guidelines for using Structured Decision Making Tools

http://icw.mcf.gov.bc.ca/manuals/docs/reflist/SDM_guide.pdf

MCFD Child and Youth Safety and Family Support Policies, Chapter 3: Child Protection Response

http://icw.mcf.gov.bc.ca/manuals/docs/cfdev/cic/child_protection_response_policies.pdf

References related to safe sleeping information for parents:

MCFD Safe Sleeping for Babies brochure

http://icw.mcf.gov.bc.ca/manuals/docs/cfdev/cic/safe_sleeping_english.pdf

B.C. Ministry of Health Baby's Best Chance

<http://www.bestchance.gov.bc.ca/tools-and-resources/video/#/babys-best-chance-chapter-1>

B.C. Ministry of Health Every Sleep Counts!

<http://www.bestchance.gov.bc.ca/tools-and-resources/key-resources/index.html>

Canadian Pediatric Society Caring for Kids

http://www.caringforkids.cps.ca/handouts/safe_sleep_for_babies

Public Health Agency of Canada, Safe Sleeping for Your Baby

http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance_0-2/sids/pdf/sleep-sommeil-eng.pdf

References related to safe sleeping and public policy:

Alberta Health Services: The Practice of Bed Sharing: A Systematic Literature and Policy Review, May 15, 2009

<http://www.albertahealthservices.ca/ps-1029951-safe-sleep-bed-sharing.pdf>

- Focus on child protection workers providing information/education to parents, and assisting with risk-reduction strategies when required.

Inter-Agency Council on Child Abuse and Neglect (ICAN): "Safe Sleep for Baby" Campaign to Reduce Infant Deaths

<http://www.safesleepforbaby.com>