Safe Sleep Practices Policy

Child's name:	Date of birth:
Parent/Guardian name:	
Safe Sleep Practices/Policies:	
	to sleep unless a physician's written statement authorizing another n statement must include how the infant shall be placed to sleep wed.
2) Cribs shall be in compliance with CPCS and AS free from hazards.	STM safety standards. They will be maintained in good repair and
3) No objects will be placed in or on the crib wit toys, pillows, quilts, comforters, bumper pads, sheep	h an infant. This includes, but is not limited to, covers, blankets, skins, stuffed toys, or other soft items.
4) No objects will be attached to a crib with a sle and mobiles.	eeping infant, such as, but not limited to, crib gyms, toys, mirrors
	kets provided by the parent/guardian and that fit according to the ip up around the infant's face may be worn for the comfort of the
7) Infants who arrive at the center asleep or fall to a safety-approved crib for sleep.	asleep in other equipment, on the floor or elsewhere, will moved
8) Swaddling will not be permitted, unless a phy provided. The written statement must include instru-	vsician's written statement authorizing it for a particular infant is ctions and a time frame for swaddling the infant.
	monitors will not be permitted unless a physician's written provided. The written statement must include instructions on
I acknowledge that the director or designee has a	advised me of the safe sleep practices followed by the facility.
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