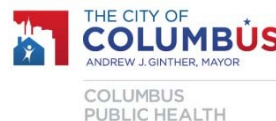




# Franklin County Crib Distribution Plan

Karen Gray-Medina, MS  
Director of Child Fatality Review (CFR) & Infant Safe Sleep  
September 13, 2017



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# EXECUTIVE SUMMARY

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On average, a baby dies every other week in Franklin County due to unsafe sleep practices. Columbus Public Health (CPH) was charged by the Greater Columbus Infant Mortality Task Force under the CelebrateOne initiative to develop a coordinated community process for ensuring high-risk families have a crib. This document describes the CPH plan for all Franklin County families to be educated on infant safe sleep practices, and for all babies to have a safe sleep surface. The goal is that no baby dies due to unsafe sleeping conditions.

CPH has partnerships with many community agencies to assist with crib distribution and safe sleep education for caregivers (Appendix A). This plan is possible through the dedication of multiple partner agencies which care deeply about Central Ohio's babies and families. We invite you to learn more about infant safe sleep practices and educational opportunities at <http://celebrateone.info/babies/#Safe-Sleep-Resources> and <https://www.columbus.gov/publichealth/programs/Infant-Safe-Sleep-Program/>.

Appendix B depicts CPH's process for crib distribution in Franklin County.

# BACKGROUND

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Sleep-related infant deaths account for about 15% of Franklin County's infant mortality rate (IMR). On average, one baby dies every 2 weeks from sleep-related risks. From 2012 to 2015, there were 86 sleep-related infant deaths in Franklin County, many of which could have been prevented. More than three-quarters (79%) of these babies were found sleeping in an adult bed, couch or chair, or other surfaces that were not cribs or bassinets. About 60% were put to sleep sharing a sleeping surface with another child, adult and/or pet. (Source: Franklin County Child Fatality Review data, 2017) Recommendations from multiple public and private organizations, supported by strong and consistent scientific evidence, state that babies are safest sleeping ALONE, on their BACK, in their own safety-approved CRIB ("ABCs" of safe sleep).<sup>1</sup> CPH promotes these safe sleep standards to parents, caregivers and health care professionals.

CPH is charged by the Greater Columbus Infant Mortality Task Force under the CelebrateOne initiative to develop a coordinated community process for ensuring high-risk families have a crib. CPH provides cribs to partner agencies that interact with parents of babies who need a safe sleep surface. CPH will also provide cribs directly to parents of babies who need a safe sleep surface.

A 2016 report by *Community Research Partners* (CRP) concluded that families would be able to access needed cribs with the establishment of more distribution sites in Franklin County. CRP also suggested that distribution sites have extended hours, knowledgeable staff, and be centrally located. Suggested sites include community centers, childcare centers, fire departments, and/or Medicaid prenatal care providers.<sup>2</sup> CRP recommended that all home visiting programs partner with CPH for crib distribution and have the capacity to distribute cribs. Increasing the number of distribution sites and the number of partners to distribute cribs will increase access to families and assist families in getting cribs prior to the birth of their child, thereby decreasing the need for emergency distribution. CRP also recommended that all birthing hospitals in Franklin County have an on-hand supply of cribs that is proportional to the number of families they see who do not have a safe sleep environment.

CPH has signed agreements with over 30 community partner agencies to help with the distribution of cribs (Appendix A). In 2016, CPH and partners distributed over 1,130 cribs to parents/caregivers who needed them.

# OBTAINING A CRIB

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## Eligibility Criteria

Currently, families are eligible for a crib at no cost to them through the CPH/CelebrateOne crib program if the household earns less than 185% of the federal poverty level. Additionally, families must not already have a safe sleep place for their baby. The baby must be less than 1 year of age. Pregnant women are eligible for the crib when they have reached 32 weeks of pregnancy.

## REGULAR BUSINESS HOURS (MONDAY–FRIDAY, 7 A.M.– 6 P.M.)

## Partner Agencies

CPH has signed agreements with over 30 community partner agencies to help with the distribution of cribs. See Appendix A for a list and map of community crib partners. Parents/caregivers who need a crib for their baby and who meet eligibility criteria should work with their non-profit service agency to get a CPH-sponsored crib. Any non-profit agency wishing to establish a partnership with CPH for crib distribution can contact Karen Gray-Medina, CPH's Director of Child Fatality Review (CFR) and Infant Safe Sleep, at [kareng@columbus.gov](mailto:kareng@columbus.gov) or 614-645-2134.

Partner agencies wishing to establish a partnership with CPH for crib distribution are required to attend a standardized training on the American Academy of Pediatrics (AAP) Safe Sleep Recommendations developed and administered by the CPH Infant Safe Sleep Program, as well as training on how to assemble and disassemble the portable cribs. Additionally, these agencies must adhere to the procedures listed below.

- A. External partner agencies must sign and adhere to the terms and conditions of a Memorandum of Understanding (MOU) in order to receive the cribs.
- B. Agencies' staff who distributes a crib will:
  - Respond to the request for a crib within 2 business days;
  - Ensure that the crib is not distributed until the family/caregiver has reached the 32<sup>nd</sup> week of pregnancy or has delivered;
  - Ensure that the family/caregiver receiving the crib meets WIC income eligibility guidelines;
  - While a home visit and assessment of the sleep environment is preferred, it is acceptable to meet with the infant's family/caregiver at a neutral location to demonstrate how to correctly assemble and disassemble the crib, and to provide education on safe sleep and proper use of the crib;
  - Complete the web-based version of the Safe Sleep Assessment Tool, which includes a Hold Harmless Agreement and follow-up questions, for each crib distributed (Appendix C) ; and,
  - Conduct a follow-up phone call or home visit using the follow-up section of the Safe Sleep Assessment Tool for each recipient of a crib to assess use of the crib within 4-12 weeks of providing the crib.
- C. Agencies' staff shall adhere to infant safe sleep standards at all times as endorsed by the AAP Safe Sleep Recommendations, and specifically promote the "ABCs" of safe sleep, namely that infants should sleep Alone, on their Backs, and in a Crib.

## 311 Call Center

Parents and caregivers who need a crib and are not knowingly served by a partner agency which provides cribs can call the City of Columbus 311 Call Center at **614-645-3111**. The Call Center screens callers regarding their eligibility. If the parent/caregiver caller is believed to meet eligibility guidelines, he/she is placed in a queue which is checked daily, Monday through Friday, by CPH's Infant Safe Sleep program staff. CPH staff contacts the parent/caregiver within 2 business days to make arrangements for her/him or a relative to attend a safe sleep class offered at CPH and to get a portable crib.

If the parent/caregiver is unable to attend a safe sleep class at CPH, the CPH Infant Safe Sleep Education Program Manager makes arrangements to do a home visit with the caregiver, or makes arrangements with an appropriate partner agency (usually a Columbus Recreation and Parks Center or a CelebrateOne Community Connector agency) to deliver a crib.

### **Franklin County Birthing Hospitals**

Franklin County birthing hospitals educate all newly-delivered obstetric clients about the “ABCs” of safe sleep, and assess for the presence of a safe sleep surface at home for the newborn.<sup>3</sup> Most Franklin County birthing hospitals refer caregivers to another community partner, primarily CPH, for a crib; however, hospitals also maintain a few pack ‘n plays onsite for new parents who cannot get a crib elsewhere.

## **NON-BUSINESS HOURS (MONDAY – FRIDAY, 6 PM.–7 A.M. AND WEEKENDS)**

### **Columbus Division of Fire**

In the event that a crib is needed during non-business hours and neither CPH nor its partners are available, the Columbus Division of Fire (CFD) serves as an emergency crib distributor. The 311 website and voice mail instructs callers who call during non-business hours but have an emergency need for a crib to call the Fire Alarm Office at 614-221-3132, ext. 72120. CFD staff will assess caller eligibility and make arrangements for the appropriate fire station EMS Supervisor to deliver a crib to the address of the caregiver needing the crib. Also, when CFD staff (firemen or EMS) witness unsafe infant sleep conditions during emergency runs, they educate caregivers when possible about the ABCs of safe sleep. After the run, they notify the EMS Supervisor if a crib is needed, and the EMS Supervisor delivers a crib and educates the caregivers about safe sleep as soon as possible.

### **Columbus Recreation and Parks**

The following Columbus Recreation and Parks sites located in CelebrateOne priority neighborhoods are also available to provide cribs in the evenings on Tuesday through Friday from 6-9 p.m. and on Saturday from 9 a.m.– 6 p.m. These sites are typically not available from June–August, during spring break and December holiday weeks.

- Barnett Community Center - 1184 Barnett Rd., Columbus, OH 43227
- Douglas Community Center - 1250 Windsor Ave., Columbus, OH 43211
- Far East Community Center - 1826 Lattimer Dr., Columbus, OH 43227
- Feddersen Community Center - 3911 Dresden St., Columbus, OH 43224
- Linden Community Center - 1254 Briarwood Ave., Columbus, OH 43211

Parents/caregivers needing a crib can go to one of these Columbus Recreation and Parks sites and ask for a crib at the service desk. Eligibility criteria are the same as for 311 calls, partners’ and CPH’s distribution of cribs.

# SUMMARY

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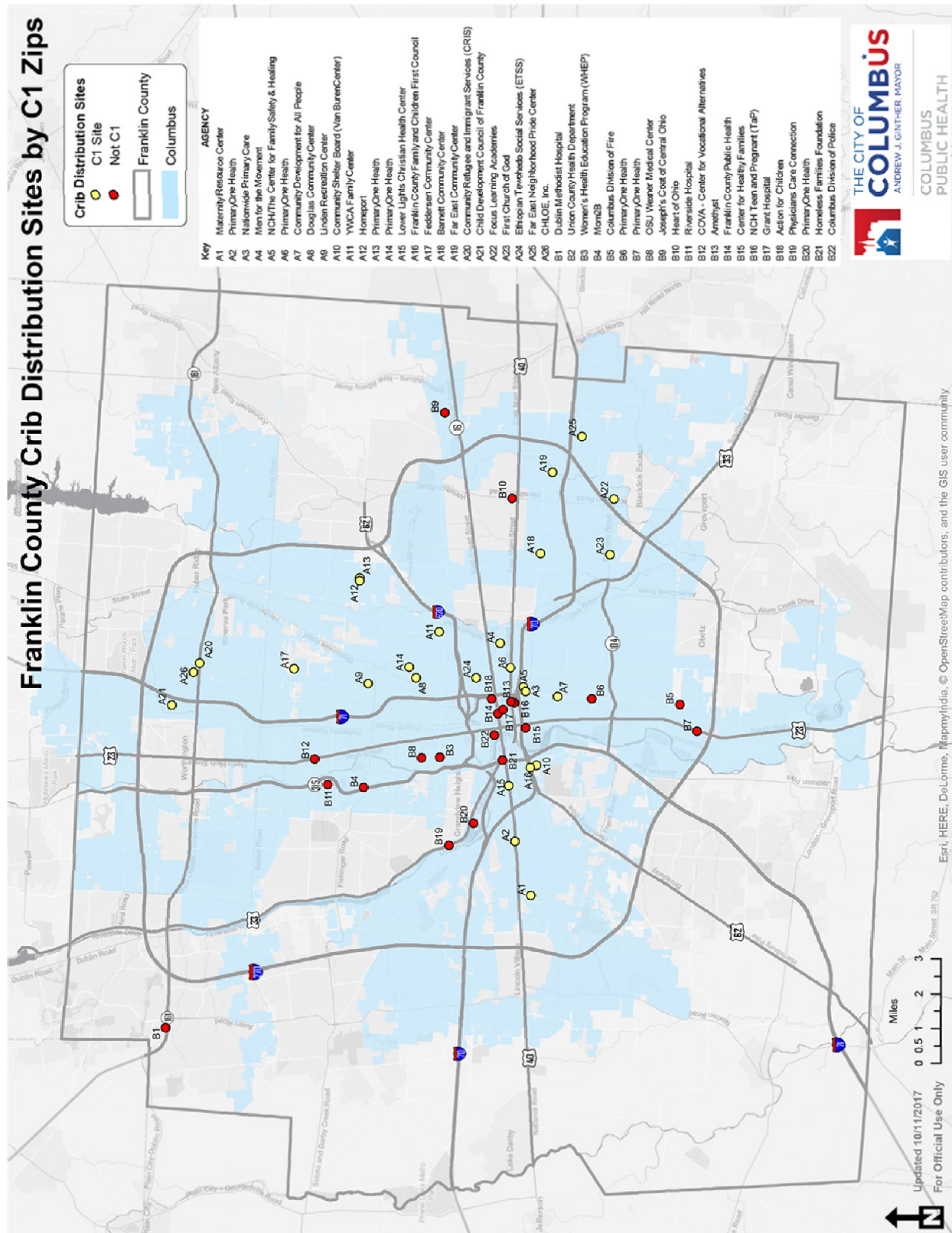
The best time for parents to get a crib for their baby is prior to delivery. Working with a community partner to get the crib is optimal, because the agency often provides additional wrap-around services to assist new parents. If a community agency is not involved, parents/caregivers can call 311 during regular business hours to get a crib. During non-business hours, CFD and select Recreation and Parks sites can provide a crib.

The ultimate aim is that every baby in Columbus sleeps safely every day. For questions about this plan, contact Karen Gray-Medina at [kareng@columbus.gov](mailto:kareng@columbus.gov) or 614-645-2134.



# APPENDIX A:

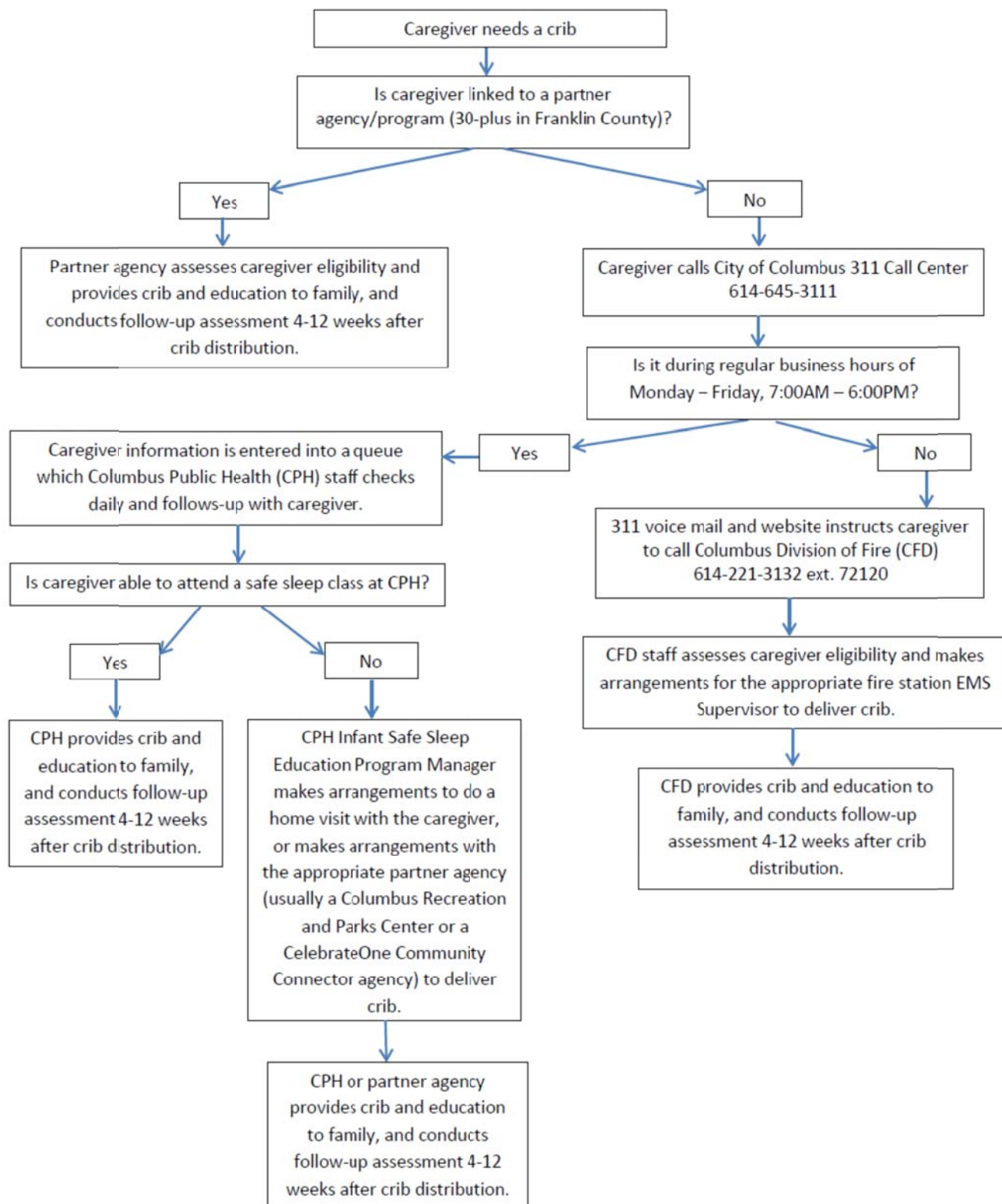
## Franklin County Crib Distribution Sites By CelebrateOne ZIP Codes





# APPENDIX B:

## Algorithm for Columbus Public Health's/CelebrateOne's Distribution of Cribs for Kids® Survival Kits



# APPENDIX C:

## SAFE SLEEP ASSESSMENT TOOL



### ODH/CPH Safe Sleep Assessment Tool



Intake Date: \_\_\_/\_\_\_/\_\_\_ Date Safe Sleep Education Completed: \_\_\_/\_\_\_/\_\_\_ Date Crib Rec'd: \_\_\_/\_\_\_/\_\_\_

Parent/Caregiver Name: \_\_\_\_\_ Crib # \_\_\_\_\_

Marital Status: ☐ Married ☐ Single Do you have a medical card or are you WIC-Eligible? \_\_\_\_\_

Mother's Due Date: \_\_\_/\_\_\_/\_\_\_ OR Infant's Birthdate: \_\_\_/\_\_\_/\_\_\_  
(Pregnant women must have reached 32<sup>nd</sup> week of pregnancy OR has delivered OR baby must be less than 12 months old)

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Mom's 1<sup>st</sup> Language: ☐ English ☐ Spanish Other: \_\_\_\_\_ Interpreter needed: Yes ☐ No ☐

What agency referred you to the Cribs for Kids program? \_\_\_\_\_

Hospital where/will deliver(ed): \_\_\_\_\_

<b>Infant's Race:</b> <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Other _____		<b>Infant's Ethnicity:</b> <input type="checkbox"/> Native American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Spanish, Hispanic or Latino <input type="checkbox"/> Not of Spanish, Hispanic or Latino Origin	
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1. What safe sleep options are in the home?	<input type="checkbox"/> Crib <input type="checkbox"/> Bassinet <input type="checkbox"/> Pack n' Play	<input type="checkbox"/> None	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided <input type="checkbox"/> Referral made
2. Where does infant usually sleep/Where will infant sleep?  Sleep environment should be placed away from drapes or curtains, window blinds or shutters, electric cords, furnace vent or radiator, space heater or other heat sources, infant monitor, any other item that could burn, cut, or become wrapped around your infant.	<b>For Naps:</b> <input type="checkbox"/> Crib <input type="checkbox"/> Bassinet <input type="checkbox"/> Pack'n Play <input type="checkbox"/> Couch <input type="checkbox"/> Recliner <input type="checkbox"/> Swing <input type="checkbox"/> Car Seat <input type="checkbox"/> Bouncy Seat <input type="checkbox"/> Floor <input type="checkbox"/> With an adult, child or pet <input type="checkbox"/> Other _____	<b>At Night:</b> <input type="checkbox"/> Crib <input type="checkbox"/> Bassinet <input type="checkbox"/> Pack'n Play <input type="checkbox"/> Couch <input type="checkbox"/> Recliner <input type="checkbox"/> Swing <input type="checkbox"/> Car Seat <input type="checkbox"/> Bouncy Seat <input type="checkbox"/> Floor <input type="checkbox"/> With an adult, child or pet <input type="checkbox"/> Other _____	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
3. Are there stuffed animals, toys, pillows, quilts, blankets, wedges, positioners, other loose bedding or bumpers in the infant's sleep environment?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
4. Does infant ever share a sleep surface with a sibling, adult or pet?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided

5. Does your infant ever share a sleep surface in a bed, couch, recliner, or other?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
6. When infant sleeps, he/she is placed on:	For Naps: <input type="checkbox"/> Back <input type="checkbox"/> Side <input type="checkbox"/> Stomach At Night: <input type="checkbox"/> Back <input type="checkbox"/> Side <input type="checkbox"/> Stomach	<input type="checkbox"/> Observed <input type="checkbox"/> N/A <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
7. Do you and/or other caregivers smoke?	<input type="checkbox"/> Yes: <input type="checkbox"/> Inside <input type="checkbox"/> Outside <input type="checkbox"/> No Smoking (Skip to #9)	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
8. If you smoke outside, do you change your clothes before holding your infant?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
9. Is the infant dressed for the temperature of the home?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
10. Is the infant breastfeeding?	<input type="checkbox"/> Yes: <input type="checkbox"/> Breastfeeding only <input type="checkbox"/> Breast Milk & Formula <input type="checkbox"/> No: <input type="checkbox"/> Formula only <input type="checkbox"/> N/A	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
11. Does your infant use a clean dry pacifier that is not attached to a string or a stuffed animal?	<input type="checkbox"/> Yes <input type="checkbox"/> Use Clean, Dry Pacifier <input type="checkbox"/> Is attached to String <input type="checkbox"/> Is attached to Stuffed Animal <input type="checkbox"/> No: <input type="checkbox"/> Does not use Clean, Dry Pacifier <input type="checkbox"/> Is not attached to String <input type="checkbox"/> Is not attached to Stuffed Animal <input type="checkbox"/> N/A <input type="checkbox"/> Does not use pacifier <input type="checkbox"/> Infant has not yet been born.	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
12. Do you provide supervised tummy time while the infant is awake?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Observed <input type="checkbox"/> Parent/Care-giver reported	<input type="checkbox"/> Education Provided
13. Staff presented and reviewed ODH ABCs of Safe Sleep materials.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Parent(s)/Caregiver declined <input type="checkbox"/> Safe sleep referral made	Others Educated: <input type="checkbox"/> Father of the infant <input type="checkbox"/> Grandparent <input type="checkbox"/> Other _____	
14. How did you hear about this program?	<input type="checkbox"/> Home Visit <input type="checkbox"/> WIC <input type="checkbox"/> Friend/Relative <input type="checkbox"/> Prenatal Provider	<input type="checkbox"/> Other _____	
15. Home visiting program participation status:	<input type="checkbox"/> Currently enrolled <input type="checkbox"/> Home Visiting Referral made <input type="checkbox"/> Parent/Caregiver declined	<input type="checkbox"/> Information Provided	



## Cribs for Kids® Hold Harmless Agreement

In exchange for the grant of a Graco® Pack 'n Play® portable baby crib, receipt of which is hereby acknowledged, I, \_\_\_\_\_, agree to indemnify, defend and hold harmless the Cribs for Kids® program, and the City of Columbus, as well as officers, agents and employees of the above from all claims or losses accruing or resulting to any person, firm, or corporation who may claim to be injured or damaged as a result of acts or omissions involving the placement and/or use of the portable cribs provided within this Cribs for Kids® program.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_\_\_

### AUTHORIZATION TO RELEASE INFORMATION

I, \_\_\_\_\_ ( \_\_\_\_\_ )  
*Last Name First Middle Maiden Name Date of Birth*

am allowing **Columbus Public Health** and \_\_\_\_\_ to release the  
*Name of Organization*  
 following information about my health care to **Franklin County Department of Job and Family Services**.

**Information to be released:**

☐ Demographic information included in the ODH Safe Sleep Assessment Tool.

**Information is to be released for the purpose of:**

☐ Grant requirements.

**Amount of information to be released includes:**

☐ Document completed on date crib received.

Columbus Health Department **MAY NOT** deny treatment based on whether you sign this authorization.

This information is not re-released unless a court order forces the release.

I understand that I may cancel this authorization at any time by sending a written request to the Columbus Health Department. This request will not apply to information already released.

**This authorization will remain in effect for one year after the date I sign it unless another date or event is specified here:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship if other than self: \_\_\_\_\_ Witness: \_\_\_\_\_

I HEREBY CANCEL THE ABOVE AUTHORIZATION AS OF THIS DATE:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of interpreter, if used: \_\_\_\_\_

**Redisclosure of alcohol and drug abuse information:** This information has been disclosed to you from records protected by Federal Confidentiality Rules (42 CFR Part 2). The Federal Rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is not sufficient for this purpose. The Federal Rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient (52 FR 21809, June 9, 1987; 52 FR 41997, November 2, 1987)

#### Follow-up Attempts

Date of 1<sup>st</sup> Follow-up \_\_\_\_\_

Date of 2<sup>nd</sup> Follow-up \_\_\_\_\_

Date of 3<sup>rd</sup> Follow-up \_\_\_\_\_

#### Follow-up Questions

1. Where does baby sleep?

\_\_\_\_\_

2. What is in the crib when baby is sleeping?

\_\_\_\_\_

3. How do you put baby down to sleep?

\_\_\_\_\_

Staff reviewed ABCs of Safe Sleep materials.

Yes ☐ No ☐

# REFERENCES

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1. AAP TASK FORCE ON SUDDEN INFANT DEATH SYNDROME. SIDS and Other Sleep-Related Infant Deaths: Updated 2016 Recommendations for a Safe Infant Sleeping Environment. *Pediatrics*. 2016;138(5):e20162938
2. Infant Safety Planning: Unified Community Plan. Community Research Partners, November, 2016.
3. Ohio Revised Code 3701.67: Infant Safe Sleep Screening Procedure.  
<http://codes.ohio.gov/orc/3701.67> Accessed July 12, 2017.