Cribs for Kids®
National Infant Safe Sleep Initiative
Partner Site Training

Sarah J. Massey, B.S. Ed.
Director – ND Infant and Child Death Services Program

Training created by:
Cribs for Kids
Judith A. Bannon
Executive Director and Founder

NORTH DAKOTA DEPARTMENT OF HEALTH
Helping every baby sleep safer
The ABCs of Infant Safe Sleep
What Every Caregiver Should Know

Alone,
on the Back,
in a Crib!
What is SUID or SUDI?

- Sudden Unexpected Infant Death
- The big “umbrella” of all unexplained infant deaths
- SIDS represents a subcategory of SUID
Some causes of deaths that occur suddenly and unexpectedly during infancy

- SIDS
- Accidental suffocation
- Neglect or homicide
- Hypothermia/Hyperthermia
- Unknown
- Metabolic disorders
- Poisoning
The sudden death of an infant under one year of age which remains unexplained after the performance of a complete post-mortem investigation including:

• Autopsy
• Examination of the scene of death
• Review of the case history
SIDS Facts

- Leading cause of infant death between 1 month and 1 year of age
- Highest rates in African American/American Indian/Alaska Native babies
- 2,500 babies die of SIDS each year in U.S.
- Peak incidence between 2 – 4 months of age
- More males than females (60% to 40% ratio)
- Baby apparently healthy, often recent URI (50%)
Risk Factors

- Mothers who smoke during pregnancy (3x greater risk)
- Babies who breathe secondhand smoke (2.5x greater risk)
- Babies who sleep on their tummies (5x greater risk)
- Unaccustomed tummy sleeping (18-20x greater risk)
- Babies who sleep with parent(s) in adult bed (40x greater risk)
- Late or no prenatal care
- Young maternal age
- Prenatal exposure to illicit drug or alcohol use
- Overheating the baby during sleep
- Soft sleep surface
- Prematurity and/or low birth weight

Fact: Prone sleep position rate is increasing in AA babies = higher number of deaths.
Sleep-Related Deaths in Child Care

- Two thirds of US infants younger than 1 year are in nonparental child care.

- 32% of infants are in child care full time.

- Less than 9% of SIDS deaths should occur in child care.

--Ehrle et al, 2001
Sleep-Related Deaths in Child Care

• 20.4% of deaths occurred in regulated child care (1995–1997).
  – 60% in family child care
  – 20% in child care centers
  – 20% in relative care

• Infants tended to be white with older, more educated parents.
  – Moon et al, 2000
Sleep-Related Deaths in Child Care

• Approximately $\frac{1}{3}$ of sleep-related deaths in child care occur in the first week, $\frac{1}{2}$ of these on the first day.

• Something intrinsic to child care? No

• Unaccustomed tummy sleeping? Yes

• Unsafe sleeping environments? Yes
Unaccustomed Tummy Sleeping

- Increased risk of death (20 times!).
- Non-parental caregivers may use tummy sleeping.
- Less ability to lift head in tummy position.
- Later development of upper body strength.

--Mitchell et al, 1999
Why Tummy Sleeping May Lead To Death...

1. Increases the probability of the baby re-breathing his/own expired breath, leading to carbon dioxide buildup and low oxygen levels.
2. Causes upper airway obstruction.
3. Interferes with body heat dissipation, leading to overheating.
4. Baby is less reactive to noise.
5. Baby experiences sudden decrease in blood pressure and heart rate control.
6. Baby experiences less movement, higher arousal thresholds, and longer periods of sleep.

*Greater possibility that the baby will ‘sleep himself or herself…to death’.*
Re-breathing Theory

- Infants in certain sleep environments are more likely to trap exhaled carbon dioxide around the face
  - Lie prone and near-face-down/ face-down
  - Soft bedding
  - Tobacco smoke exposure
- Infants rebreathe exhaled carbon dioxide
- Infants die if they cannot arouse/ respond appropriately
Triple Risk Model for SIDS

Critical Developmental Period

Underlying Vulnerability

Exogenous Stressors

SIDS

Kinney, NEJM, 2009
Moon, Pediatrics, 2011
Triple Risk Model

Critical Developmental Period

- First 6 months
- Major physiologic changes in homeostatic controls

Triple Risk Model

Underlying Vulnerability

Brainstem abnormality

- Serotonin (5-HT)
- Impaired arousal
- Affected by
  - prenatal and post-natal
    smoke exposure
    (2nd and 3rd hand)
  - prematurity

Serotonin receptor binding density lower in SIDS cases compared to controls.
**Triple Risk Model**

**Exogenous Stressors**
- Prone and side sleep position
- Loose and soft bedding
- Cluttered sleep environment
- Bed-sharing
- Sleeping with baby on couch
- Overheating
- Tobacco smoke exposure

**Modifiable**
- Prone and side sleep position
- Loose and soft bedding
- Cluttered sleep environment
- Bed-sharing
- Sleeping with baby on couch
- Overheating
- Tobacco smoke exposure

Critical Period of Development

- 90% of SIDS cases prior to 6 months
- Rapid brain growth
- Developmental changes in sleep state organization, arousal, cardiorespiratory control, and metabolism
- Individual differences in the normal physiologic maturation of the brain and brainstem
- Individual variations in development of muscle tone and head control
Figure 1. Five Steps in the Putative Terminal Respiratory Pathway Associated with the Sudden Infant Death Syndrome. Death results from one or more failures in protective mechanisms against a life-threatening event during sleep in the vulnerable infant during a critical period. Complex genetic and environmental interactions influence the pathway.
National SIDS Rate and Sleep Position, 1988-2008

 NICHD Household Survey, SIDS Rate
 Source: National Center for Health Statistics, CDC

Pre-AAP recommendation

Post-AAP

BTS Campaign
SLEEP POSITION for Baby
(United States)

1992

Before Back to Sleep          After Back to Sleep

8,000 babies died annually    2,500 babies die annually

45,000+ babies’ lives have been saved by placing them on their backs to sleep!
AAP Updated Recommendations
October 10, 2005
Key Points

• “Every caregiver should use the back sleep position during every sleep period.”

• “Bed-sharing during sleep is not recommended.”

• “A separate but proximate sleeping environment is recommended.”

• “Consider using a pacifier at nap time and bed time.”
  - At about 1 month of age, after breastfeeding is firmly established.
  - decreases risk of death by 90
Pacifiers and Breastfeeding

Well-designed trials:
- 2 found no association among term infants
- 1 found no association among preterm infants
- 1 found slightly decreased breastfeeding duration at one month if pacifier introduced in first week of life,

but NO difference if pacifier introduced after one month!
Recommendations: Pacifier Use

- Consider using a pacifier at bedtime and nap time during the first year of life
  - If breastfeeding, delay pacifier - 3 to 4 weeks of age
  - Use when baby is falling asleep
  - Do NOT reinsert after baby is asleep
  - Do NOT coat in any sweet solution
  - Clean pacifiers and replace regularly

+ HEALTHY & SAFE
AAP Updated Recommendations
October 17, 2011
Key Points

• “Breastfeeding is associated with a reduced risk of SIDS.”

• “Infant immunization reduces risk of SIDS by 50%”

• “Bumper pads should not be used.”

• “Room-sharing without Bed-sharing is recommended.”
Bumper Pad Fatalities

- Thach study using CPSC data found 3 mechanisms for deaths
  - Suffocation
  - Entrapment
  - Strangulation
Breastfeeding reduces risk for SIDS by 45%

Exclusive breastfeeding at one month halved the risk of SIDS.

Protective effect increased with exclusivity.

More easily aroused.

Decreased incidence of infectious diseases.

Overall immune system benefits.
Break Time...

DON’T KNOW WHERE I’LL GO FOR LUNCH

LEFT OR RIGHT?
**Recommendation:** Infants should be immunized in accordance with AAP and CDC recommendations.
Do not use pacifier attachments
Be Aware…Amber Teething Necklaces - NOT Safe!

These are NOT meant to be chewed upon or mouthed, and parents may not be aware of this. Poses a strangulation risk, and if mouthed, can break into small pieces and be a choking hazard.
AAP Updated Recommendations
October 17, 2011

Key Points

• “Breastfeeding is recommended and is associated with a reduced risk of SIDS.”

• “Infant immunization reduces risk of SIDS by 50%.”

• “Bumper pads should not be used.”

• “Room-sharing without bed-sharing is recommended.”
We Need to Move Beyond Back to Sleep

She’s on her back to sleep!
Where Should Infants Sleep?
Sheers, Rutherford, and Kemp
Pediatrics, Oct. 2003

• Infants < 8 months, risk of death in cribs: .63 deaths/100,000 infants.

• Infants < 8 months, risk of death in adult beds: 25.5 deaths per 100,000 infants.

Risk for SIDS:
Greatest if sharing a sleep surface.
Intermediate if sleeping in another room.
Least if infant sleeps in same room without bed-sharing
What Can We Do About It??

TALK ABOUT SAFE SLEEP!
To everyone:

- Family members
- Friends
- Neighbors
- Strangers
- Produce guy in grocery store!

--Yes, even him!
Avoiding Potential Pitfalls

- Fear of aspiration
- Fear of positional head molding
- Claims made against the program:
  - Anti-bonding
  - Anti-breastfeeding
About Aspiration...

• Babies are not at a greater risk for aspiration or vomiting on their backs
• There is no evidence of an increase in aspiration or vomiting since back sleeping was recommended
• There is evidence that infants who vomit are at greater risk of choking if they are sleeping face down (AAP, 2000)
The Truth About Back Sleep and Aspiration

Orientation of the Trachea (air pipe) to the Esophagus (food pipe)
Sleep Position

Positional Head Molding...

- Parents concerned about head asymmetries in babies who sleep on their backs should be assured that:
  - Babies only need to be on their backs for nap-time and night-time sleep
  - Babies should have SUPERVISED tummy time when awake
  - Head asymmetry typically resolves itself by 6 to 12 months
Room-sharing!

• Baby in a separate, safe sleeping space.
• Close to parent(s)
• Bring baby into bed for breastfeeding or comforting, but when the mother is ready to fall back to sleep, place baby in his/her safe sleep environment.
About Bonding...
How and When do we Bond with our Baby???
When Babies Roll to their Tummies...

• At about 5 months of age, many babies begin to roll from their backs to their tummies

• This is normal growth and development

• Parents should be taught to always place babies on their backs to sleep, but if they roll to their tummies they do not need to keep flipping them back....

• The **MOST IMPORTANT** point to remember is when they roll, they do so in a safe sleep environment - free from soft bedding, pillows, stuffed toys and other objects
Sitting Devices for Sleep

- Car safety seats, strollers, swings, infant carriers, infant slings
- Not recommended for routine sleep in the hospital or at home
- Infants < 4 months are particularly at risk
  - More likely to assume positions that can create risk of suffocation or airway obstruction
- Infant slings and cloth carriers:
  - Ensure that the infant’s head is up and above the fabric, the face is visible, and that the nose and mouth are clear of obstructions
  - Reposition baby after nursing
- If an infant falls asleep, move infant to a crib or other appropriate flat surface as soon as is practical
- Car safety seats and similar products are not stable on a crib mattress or other elevated surfaces
Bed-Sharing and Infant Death

**FACT:** Half of the infants in the U.S. who die from sudden unexpected death do so while sleeping with their parents

- Bed-sharing and infant death is very different in the U.S. than it is in other cultures
- If babies routinely sleep with their parents in other cultures, they:
  - Use a firm mat on the floor
  - Have a separate mat for the infant
  - Do not use soft bedding
Bed-Sharing
Bed-Sharing
Bed-Sharing with Overlay
Bed-Sharing with Overlay
Safe Sleep Video:
“Rethink Your Position”

- www.youtube.com/watch?v=UeZU
  Aumo-KQ&feature=youtu.be

- Or Go to “You Tube” and search “Safe Sleep Video - Rethink Your Position”
Couch Sleeping
Couch Sleeping
Unsafe Sleep Environment:
Falls from Adult Beds onto Soft Materials
Unsafe Sleep Environment:  
Defective Crib/Entrapment
What is wrong with this picture?
Social Environmental Change is Essential, BUT Social Norms are Against Us
“Oops she did it again”

- Who is she and what did she do?
  
- Brittany Spears places her infant son in a high risk situation
Changing Societal Norms

• The public outcry indicated public awareness of the risks to infants in cars
• The public is educated to the need to use an infant safety seat
• This event provided a major prevention opportunity
What did Jennifer Lopez & Marc Anthony do?

- Shared pictures of their twins’ luxurious nursery
- Described co-sleeping with the twins

This did not generate a loud and immediate public outcry...indicating limited awareness of sleep environment risks
What is wrong with this picture?

Jennifer Lopez’s nursery
Unsafe Sleep Images in Advertisements

SO SAFE & COMFORTABLE, THEY WON'T WANT OUT

Every RECARO Convertible Seat features
(1) Original RECARO Side Impact Protection,
(2) an adjustable headrest and (3) a 5-point harness.

With safety features like these, you might start to wonder why you’d ever take your child out of one.

For more information, call or visit us online
1.800.8.RECARO www.recarokids.com

don’t get cute. get RECARO

Sears
Today’s Parent

NEW BABY CONTEST
Enter to WIN!
From the day your baby enters this world, you know only the best will do. That’s why Today’s Parent has partnered with Sears Canada to offer six chances to win a $2,000 Sears Gift Card to use toward any baby merchandise available in-store.
Enter today for your chance to WIN!

WIN $2,000 Sears Gift Card
Dangerous Products:
Nap Nanny

Product has been recalled due to deaths
Dangerous Products:
Babocush
Baby Boxes
Ideal Infant Safe Sleep Space

1. Baby sleeps in a crib/pack and play/bassinet
2. Baby sleeps on the back
3. Nothing in the sleep area
4. Baby’s face uncovered
5. No smoking around the baby
6. Do not overheat or overdress
7. Firm mattress, tight-fitting sheet
8. No soft bedding in sleep area
9. Use sleeper or SleepSack
Safe Sleep Environment

- Safe crib, firm mattress.
- Avoid chairs, sofas, and water beds.
- No excess bedding, comforters, or pillows.
- Bumper pads and wedges NOT needed.
- No toys or stuffed animals in crib.
What do we do in North Dakota?

- ND Infant and Child Death Services Program
  - Support to families
  - Education on safe sleep

- Cribs for Kids®
  - Currently over 20 sites statewide!
What is Cribs for Kids®?

- Created in 1998 by Judy Bannon, Executive Director of S.I.D.S. of PA
- Provides sleep-related death risk reduction, safe sleep education, and portable cribs to low-income families.
- To date has acquired 620+ partners across the US.
- In Allegheny County, hospital-based program.
- Since 1998, has provided over 25,500 cribs to families in Allegheny County, Pittsburgh, PA
Why do we need Cribs for Kids®?

- Provide a safe sleeping environment for babies in families that may not be able to afford a safe crib on their own
- Consistent safe sleep message to all care providers
  - Parents
  - Grandparents
  - Child care centers
  - Babysitters
What’s included in the kit?
Cribs for Kids®
Graco Pack ‘n Play® Portable Crib
Please Keep Me Safe

Back to Sleep

For naps & at night to reduce the risk of SIDS & accidental suffocation

Now I lay me down to sleep,
Alone in my crib, without a peep.
On my back, in smoke-free air,
Thank you for showing me that you care.

Cribs for Kids
Helping every baby sleep safer
www.cribsforkids.org

Available in English & Spanish
Safe Sleep Survival Kit $79.99

Safe Sleep Components

Pack ‘n Play®

Components of the Safe Sleep Survival Kit:
- Graco Pack ‘n Play
- Halo Sleep Sack
- Graco Pack ‘n Play Sheet with "safe sleep message"
- Safe Sleep ABC Photo Magnet
- Philips Soothie Pacifier
- Safe Sleep Educational Material
- Safe Sleep DVD ...10 minutes
- "Sleep Baby Safe and Snug" Children’s Book

Available in English and Spanish
Crib for Kids®

North Dakota offers a Crib for Kids® program designed to help babies have a safe place to sleep.

Families in need can receive crib kits, including:

- A Graco® Pack 'n Play® crib
- A crib sheet
- A pacifier
- A Halo® SleepSack®

For more information about the Crib for Kids® program and to find a local partner site near you, visit www.ndhealth.gov/cribsforkids.

Crib for Kids® is a National Infant Safe Sleep Initiative, headquartered in Pennsylvania. For more information about safe sleep for babies, visit:

- www.cribsforkids.org
- facebook.com/CribforKidsHeadquarters

For more information about the North Dakota Crib for Kids® Program, safe sleep or SIDS, contact:

Infant and Child Death Services
Division of Family Health
North Dakota Department of Health
701.328.2493 or 800.472.2286
E-mail: familyhealth@nd.gov
www.ndhealth.gov/sids

A Guide for Parents and Caregivers

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number 84HC001586. Maternal and Child Health Services, total award amount for the period of October 1, 2014 through September 30, 2015 is $1,714,000.00. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.
Did you know that Sudden Infant Death Syndrome, or SIDS, is the leading cause of infant death for babies one month to one year old? Here are some things you can do to help reduce your risk.

- Breastmilk helps make me healthy and strong.
- Help keep me safe by not smoking, drinking alcohol, or using drugs before I am born and while caring for me.
- The safest way for me to sleep is on my back.
- Light sleep clothing, like a sleep sack, helps me to sleep comfortably without overheating.
- I sleep safely alone in my crib on a firm mattress.
- Share a room, not a bed.
- Clean smoke-free air is what I need to stay healthy and safe.

Breastmilk helps make me healthy and strong.
Help keep me safe by not smoking, drinking alcohol, or using drugs before I am born and while caring for me.
The safest way for me to sleep is on my back.
Light sleep clothing, like a sleep sack, helps me to sleep comfortably without overheating.
I sleep safely alone in my crib on a firm mattress.
Share a room, not a bed.
Clean smoke-free air is what I need to stay healthy and safe.
CRIBS FOR KIDS PROGRAM HOLD HARMLESS AGREEMENT
NORTH DAKOTA DEPARTMENT OF HEALTH
FAMILY HEALTH
SFN 60603 (10-2015)

Name

In exchange for a Graco® Pack 'n Play® portable baby crib, receipt of which is hereby acknowledged, I, the above-named agree to indemnify, defend and hold harmless the Cribs for Kids® program, the North Dakota Department of Health, distribution sites, 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.

Signature

Date

Witness Signature

Date

Distribution Site

Return completed form to: North Dakota Department of Health
Cribs for Kids Program
600 E. Boulevard Ave., Dept. 301
Bismarck, ND 58505-0200

Helping every baby breathe.
# Crib for Kids Program Education and Screening

**North Dakota Department of Health**  
**Family Health**  
SPN 5938 (10-2018)

<table>
<thead>
<tr>
<th>Distribution Site</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>Infant Name</td>
<td>Infant Date of Birth/Due Date</td>
</tr>
<tr>
<td>Parent/Guardian Name</td>
<td>Parent/Guardian Date of Birth</td>
</tr>
</tbody>
</table>

## Safe Sleep Education Checklist

- Safe sleep video viewed.
- Demonstrate how to place babies in cribs on their backs with reinforcement of what sleep-related deaths (such as SIDS) are and an emphasis on the higher risk when baby is sleeping on tummy or side.
- No pillows, toys, stuffed animals, crib bumpers, blankets or other soft items in crib.
- Use a firm mattress and a tightly-fitted sheet in the crib.
- The use of blankets is not recommended. Sleep sacks are a safe alternative. Do not allow baby to overheat.
- Don't put baby to sleep on sofas, recliners, waterbeds, bean bags, air mattresses, fluffy bedding or adult beds.
- Car seats, swings, infant seats and similar devices are not safe sleeping environments.
- An adult bed is dangerous. The baby could roll off, become trapped or suffocate in the bedding, and/or another child or adult could roll on top and suffocate the baby.
- Do not smoke around the baby or in the baby's environment.
- Consider offering baby a pacifier when placing baby down to sleep.
- Place crib away from windows to keep baby from getting tangled in the blinds or curtain cords.
- Discuss safe sleep practices with all child-care providers and family members.

### Educational Materials Provided

- Safe Sleep for your Baby (NICHD brochure)
- Safe Sleep for Babies (ND brochure)
- Other (specify): ________

## Screening Guidelines for Crib for Kids® Kit

- **Do you have a safe crib for your baby?** Cribs should **NOT** have the following: corner posts that baby's clothing can catch on, slots wider than 2 3/8 in. (about the width of a soda can) cutouts on head or footboard, drop sides, broken or missing parts, or a mattress that fits loosely in the crib.
- **Yes** | **No**

- **Do all of your baby's planned caregivers have safe cribs?** Such as child-care providers, grandparents, friends, etc.
- **Yes** | **No**

- **Crib for Kids® kit provided to client?** If NO give reason:
- **Yes** | **No**

- **Instructional video showing crib set-up viewed by client.** Required if given crib.
- **Yes** | **No**

- **Re-demonstration of crib set-up completed correctly.** Required if given crib.
- **Yes** | **No**

## Client Signature

## Staff Signature

Return completed form to:  
North Dakota Department of Health  
Crib for Kids Program  
500 E. Boulevard Ave., Dept. 301  
Bismarck, ND 58505-0200
# Cribs for Kids Program Compliance Questionnaire

**North Dakota Department of Health**

**Family Health**

**SPN 19224 (10-2015)**

<table>
<thead>
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<tr>
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<td>Infant Date of Birth</td>
</tr>
<tr>
<td>Parent/Guardian Name</td>
<td>Parent/Guardian Date of Birth</td>
</tr>
<tr>
<td>Date Crib was Given to Client</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Compliance</th>
<th>Yes</th>
<th>No</th>
<th>Sometimes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you use the Graco® Pack ’n Play® every time your baby sleeps?</td>
<td></td>
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<tr>
<td>Do you keep blankets, stuffed animals, pillows and other soft items out of the crib when baby is sleeping?</td>
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</tr>
<tr>
<td>Do you ever put your baby to sleep on a sofa, adult bed, recliner, waterbed, bean bag, or mattress, car seat, bouncy seat or swing?</td>
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</tr>
<tr>
<td>Does your baby sleep with you or anyone else?</td>
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<td></td>
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<tr>
<td>Do you or others smoke around your baby?</td>
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<tr>
<td>Have you ever discussed safe sleep for your baby with your child-care provider, friends, grandparents, etc.?</td>
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</tr>
<tr>
<td>Does your child-care provider have a safe crib for your baby? If so, please list type of crib:</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Do you offer your baby a pacifier when putting him or her down to sleep?</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Positions You Lay Your Baby Down to Sleep (mark all that apply)**

- [ ] Back
- [ ] Side
- [ ] Tummy
- [ ] Other

**Comments**

**Staff Signature**

---

Return completed form to: North Dakota Department of Health
Cribs for Kids Program
600 E. Boulevard Ave., Dept. 301
Bismarck, ND 58505-0200
“Five Ladies and a Forklift”
The Cribs for Kids® Crew

Pictured left to right

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www.cribsforkids.org
We have the knowledge today to keep babies safer during sleep...

“Knowing is not enough; we must apply. Willing is not enough; we must do.”

- Goethe
Questions??

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