



THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

Testimony in Support of House Bill 989

Hospitals - Care of Infants After Discharge

Dear Chair Pendergrass and Members of the Health and Government Operations Committee:

Every baby born in Maryland should have the opportunity for a healthy and safe sleeping environment in the first year of life. HB989 would require labor and delivery hospitals in Maryland to provide instructions for how to put their infant to sleep safely every night and every nap, and to ensure the newborn has a safe sleep environment after being discharged from the hospital.

Infant mortality is a critical marker of the overall health of a society. From a public health perspective, the death of a child is a sentinel event—the worst possible unexpected outcome—that should urge us to action. Not all infant deaths are preventable; however, infant sleep related deaths are entirely preventable. Almost every newborn in Maryland will be delivered at a labor and delivery hospital, making these institutions the most critical for teaching new caregivers how to put their newborn to sleep safely.

Sleep-related infant death, more colloquially known as SIDS, is the single leading cause of infant death during the first year of life.

Approximately 3,500 infants die annually in the United States from sleep-related infant deaths, including sudden infant death syndrome. In Maryland, there is an average of 56 infant sleep-related deaths each year. Sleep-related infant deaths are the third leading cause of infant death in Maryland and the leading cause of death when an infant leaves the hospital after delivery. In 2018, 13% of Maryland's infant deaths were sleep-related and non-Hispanic black infants were more than twice as likely to die from sleep-related infant deaths compared with non-Hispanic white infants, showing a deplorable racial disparity.

HB989 is based on clear recommendations from the American Academy of Pediatrics, which state that to reduce the risk of sleep-related infant deaths, infants should sleep in a supine position, on a firm sleep surface, sharing a room and not a bed with a caregiver, avoiding any soft bedding or toys, and avoiding overheating. Additional recommendations include avoiding any exposure to smoke during pregnancy, breastfeeding, routine immunization and using a pacifier.

HB989 requires all labor and delivery hospitals to provide spoken and written instructions to the parent or legal guardian on how to perform the tasks necessary to care for the infant at home, which can be supported with a video, and requires each parent or legal guardian sign a standardized form provided by the hospital that confirms the parent or legal guardian understands the instructions provided.

The bill also requires hospitals to ask the parent or legal guardian if they can provide a safe sleep environment that includes a bassinet, crib or portable crib and to provide a list of resources to obtain the items necessary if the parent or legal guardian cannot provide them.

Finally, HB9889 requires no financial or material outlay by Maryland's hospitals for compliance—existing protocol, education and materials can be used to implement the provisions of this bill. We know this thanks to Baltimore City's efforts to prevent sleep-related infant deaths. Their leadership on this issue has ensured that every hospital in the city currently follows the procedures outlined in this bill, which were fulfilled with minimal effort by the hospitals involved.

I request a favorable report.