



# SAFE SLUMBER PROGRAM

## PORTABLE CRIB DISTRIBUTION

Ensuring that...

- Everyone has access to a Cradle of Hope partnering agency where portable cribs are distributed.
- Families can obtain a portable CRIB for their baby.
- **EVERY BABY** has a **SAFE** place to **SLEEP!**



# EVERYONE HAS ACCESS TO A CRADLE OF HOPE PARTNERING AGENCY WHERE PORTABLE CRIBS ARE DISTRIBUTED.

## BECOME A CRADLE OF HOPE PARTNERING AGENCY:

- ONCE A PARTNER YOU CAN USE YOUR DESIGNATED CRIB FUNDS FOR OTHER NEEDS.
- COMPLETE THE COH PARTNERING AGENCY ONLINE APPLICATION OR SEND TO COH AT:

EMAIL: [CRADLEOFHOPE@CRADLEOFHOPE.ORG](mailto:CRADLEOFHOPE@CRADLEOFHOPE.ORG)

FAX: (651) 631-2642

## THE PROCESS:

- YOU'LL RECEIVE 6 PORTABLE CRIBS TO KEEP AT YOUR AGENCY. WHEN A CLIENT ARRIVES, COMPLETE THE COH APPLICATION, REVIEW SAFE SLEEP INFO, AND THEN GIVE THEM THE PORTABLE CRIB TO TAKE HOME. (WE CAN ACCOMMODATE REQUESTS FOR MORE/LESS PORTABLE CRIBS IF NEEDED)
- SEND THE COH APPLICATION TO COH AND YOUR CRIB SUPPLY WILL BE REPLENISHED.

*IF THERE ARE ANY ISSUES WITH THE COH APPLICATION, WE'LL DISCUSS THEM WITH YOU.*

*I CAN ASSURE YOU THAT PORTABLE CRIBS WILL ALWAYS BE REPLENISHED.*



# FAMILIES CAN OBTAIN A PORTABLE CRIB FOR THEIR BABY. (THE REVISED COH APPLICATION)

## 1. PAGE 1:

- COMPLETE ALL FIELDS

## 2. PAGE 2:

- **CRISIS: CHECK THE 1<sup>ST</sup> BOX...**  
*I NEED A SAFE PLACE FOR MY BABY TO SLEEP.*
- **PLAN OF ACTION: CHECK THE 1<sup>ST</sup> BOX...**  
*I WILL ENSURE THAT MY BABY SLEEPS SAFELY IN A CRIB BY FOLLOWING THE SAFE SLEEP INSTRUCTIONS.*
- **RELEASES: CLIENT SIGNS AND DATES**  
*THIS IS WHEN YOU REVIEW THE SAFE SLEEP INFO WITH THE CLIENT*

## 3. PAGE 3: NOT NEEDED

## 4. PAGE 4: (THIS IS COMPLETED BY THE ADVOCATE)

- PLEASE MAKE SURE ALL INFORMATION IS FILLED IN OR CIRCLED
- PLEASE SIGN & DATE THE BOTTOM OF THE PAGE.



SEND COMPLETED APPLICATIONS TO COH

# EVERY BABY HAS A SAFE PLACE TO SLEEP!

**AGE: CLIENTS MUST BE PREGNANT OR HAVE A BABY 12 MONTHS OR YOUNGER.**

**(NOTE: THIS NEW AGE RANGE IS FOR PORTABLE CRIBS ONLY)**

**VERIFICATION: IT'S UP TO YOU HOW YOU VERIFY THAT THE CLIENT IS A MN RESIDENT.**

- **YOU MAY REQUIRE A PHOTO ID, MAIL WITH THEIR NAME ON IT, OR ... SIMPLY ASK THEM AND USE THEIR VERBAL RESPONSE.**
- **IF SOMEONE IS REQUESTING A CRIB SO THEIR BABY CAN SLEEP SAFELY, WE WANT TO MAKE SURE THEY RECEIVE A PORTABLE CRIB. WE REALIZE THERE ARE SOME THAT MAY TAKE ADVANTAGE BUT IT IS MORE IMPORTANT FOR US TO ERROR ON THE SIDE OF SAFETY AND PREVENT INFANT RELATED DEATH.**

