SOUTH DAKOTA DEPARTMENT OF HEALTH

South Dakota Safe Sleep Collaborative

APPLICATION DEADLINE: December 19, 2025, at 5:00 pm CST

South Dakota Safe Sleep Collaborative

Point of contact: Laurel Rick – Infant Health Coordinator – laurel.rick@state.sd.us	**Application Release:** November 14, 2025.
	Application Submission Deadline: December 19, 2025, at 5:00 pm CST
Funding available: $40,000	**Tentative Award Notification:** Mid-January 2025.
Number of anticipated awards: 2-4 awards, based on applicants and requested funding	**Project Period:** January 2026 – November 30, 2026.

Apply by emailing your application to **Laurel Rick at Laurel.Rick@state.sd.us,** no later than **December 19, 2025, at 5:00 pm CST.**

For questions, please contact **Laurel Rick at Laurel.Rick@state.sd.us.**

This project is supported by the Preventive Health and Health Services Block Grant, funded by the U.S. Department of Health and Human Services and the Centers for Disease Control and Prevention.

Background

Funding Introduction

To support efforts in reducing Sudden Unexpected Infant Deaths (SUID) and promotion of safe sleep practices in South Dakota, SD DOH will offer funding opportunities for data-driven, community-led projects that empower individuals to promote safe sleep, reduce sleep-related infant deaths, and improve infant outcomes. Infant mortality is an important factor in understanding the overall health of a population, and factors that contribute to infant deaths also affect the health of everyone in the population.

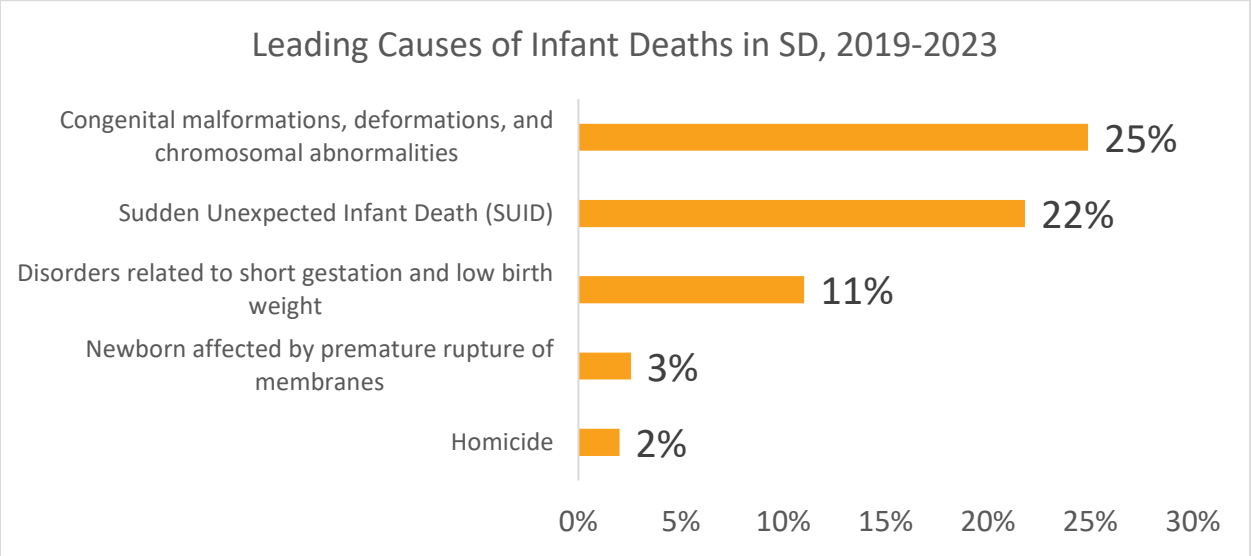
Traditional public health approaches for sudden unexpected infant death reduction do not fully address the barriers families face in practicing safe sleep, especially in communities with limited access to resources and information. By empowering community leaders, organizations, and caregivers to identify and implement targeted interventions, individuals will be more likely to engage meaningfully with the activities and adopt recommendations. Community-led approaches also allow for tailored messaging and outreach methods, increasing impact, promoting sustainability, and building capacity to address persistent gaps in sudden unexpected infant death rates across South Dakota.

In addition to infant mortality rates, South Dakota uses four objective measurements to determine compliance of safe sleep recommendations: percentage of infants placed to sleep on their backs, percentage of infants placed to sleep on a separate approved sleep surface, percentage of infants placed to sleep without soft objects or loose bedding, and percentage of infants room-sharing with an adult during sleep.

Importance of Safe Sleep in SD

South Dakota's infant mortality rate has remained stable over the past decade despite national declines. The following table comes from the South Dakota Infant Mortality Analysis for 2024 data brief. All data for 2024 should be considered provisional and subject to change.

Figure 1



SOURCE: Death Records, as provided by the Office of Health Statistics of the SD Department of Health

Sudden unexpected infant deaths (SUID) account for approximately 22% of all infant deaths in SD, remaining consistent over the past decade. Sudden Unexpected Infant Death (SUID) is an umbrella term that includes all sudden, unexpected infant deaths – sudden infant death syndrome (SIDS), accidental suffocation or strangulation in bed (ASSB), other causes, and deaths of unknown causes. Unsafe sleep is a major contributing factor to SUID deaths in South Dakota.

Between 2019-2023, 90 families lost an infant in an unsafe sleep environment (this includes adult beds, couches, chairs, car seats, swings, rock 'n' plays, and unsafe cribs). After review of those 90 sleep-related deaths by SD's Infant and Child Death Review, 87% were deemed preventable. Unsafe sleep practices are one of the leading causes of preventable infant death in South Dakota. Where infants sleep continues to be a critical risk factor among infant deaths as well: 63% of the sleep-related deaths between 2019-2023 occurred in an adult bed.

For more information on infant mortality and sleep-related infant deaths in SD, please visit the South Dakota Department of Health Infant Mortality Dashboard (https://doh.sd.gov/health-data-reports/data-dashboards/infant-mortality/) and 2024 Infant Mortality Provisional Report (https://doh.sd.gov/media/qs5mx5qm/2024-infant-mortality-provisional-data.pdf).

Purpose

Offering funding for community-based projects/interventions will allow SD to address unique factors that influence infant sleep practices and other causes of sudden unexpected infant deaths. By engaging organizations, community leaders, and professionals from these communities, we will build trust, provide targeted support, and ensure safe sleep messaging is consistent, accessible, and sustainable across South Dakota. These grants are intended to support evidence-based or evidence-informed interventions that improve infant survival in South Dakota. Chosen organizations will provide information, reasoning, and evidence for the activities/interventions they will implement, giving insight into what is effective. By empowering trusted leaders and organizations to design and implement interventions, communities are more likely to engage meaningfully with those activities and adopt recommended practices. These interventions promote sustainability by building local capacity and fostering ownership of infant health outcomes, which will help close gaps in SUID rates across diverse populations.

Projects and activities **must** support any of the focus areas mentioned below, following American Academy of Pediatrics most recent safe sleep recommendations (AAP Sleep-Related Infant Deaths Updated 2022 Recommendations for Reducing Infant Deaths in the Sleep Environment):

- Preventing sleep-related infant mortality
- Promoting safe sleep
- Sudden unexpected infant death prevention

Additional infant mortality prevention projects may be considered with approval from Office of Lifespan Health Administrator.

Activities may include but are not limited to:

- Implementation of a safe sleep education or training program, aligned with AAP Safe Sleep Guidelines.
- Safe Sleep Resource Creation that integrates culturally tailored information.
- Community Outreach Campaigns focused on safe sleep promotion and prevention of sleep-related infant deaths.
- Implementation of a safe sleep program that offers guidance on cradleboard creation and safe sleep guidelines for American Indian families, led by community leaders.
- Public health storytelling – offer families with lived experience the chance to share their stories to prevent sleep-related infant deaths.
- Conduct safe sleep focus groups or surveys to understand opportunities and challenges to safe sleep.
- Creation of cultural videos/resources educating on safe sleep and traditions, aligned with American Academy of Pediatrics (AAP) Safe Sleep Recommendations.
- Launch a father-focused initiative using male mentors, coaches, and veteran dads to promote infant/maternal safety and support.
- Host community baby showers to integrate celebration with learning, offering a chance to build community.
- First Responders – become a partner of the Cribs for Kids National Public Safety Initiative - https://cribsforkids.org/national-public-safety-initiative/

- Strengthen current SD DOH safe sleep initiatives by partnering to carry FY26 Infant Domain Safe Sleep Action Plan activities forward in your communities.

Available Funding

Total - $40,000

The amount of funding for each project will be based on the number of applications received and the anticipated outcomes of the projects proposed. An anticipated number of awards is 2-4. Applicants can apply for up to $20,000 for their project.

Eligibility

- Interventions funded through this opportunity must target South Dakota residents and communities.
- Communities experiencing disproportionate rates of sudden unexpected infant death and sleep-related infant death will be prioritized.

Funding Restrictions

- Expenses not directly related to the approved work plan and not in the approved budget.
- Expenses incurred prior to receiving grant agreement.
- Any expenses that do not directly contribute to the activities in the grantee's work plan.
- Bad debts, late payment fees, finance charges, or contingency funds.

Prohibited Uses:

- Provide inpatient services
- Make cash payments to intended recipients of health services
- Purchase/improve land, purchase/construct/permanently improve any building, or purchase major medical equipment
- Satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds; or
- Provide financial assistance to any entity other than a public or nonprofit private entity.

Unallowable Costs:

- Purchase of naloxone
- Purchase of syringes
- Drug disposal programs (drop-boxes, bags, or other devices, and/or take-back events) are not permissible.
- Clinical care (except as allowed by law)
- Publicity and propaganda (lobbying)
- Funds cannot be used for the preparation, distribution, or use of any material (publicity/propaganda) or to pay the salary or expenses of grants, contract recipients, or agents that aim to support or defeat the enactment of legislation, regulation, administrative action, or executive order proposed or pending before a legislative body, beyond normal, recognized executive relationships.

Funds can be used to reimburse for services provided through September 30, 2026. Services provided on or before September 30 but not invoiced until after September 30 would be eligible for payment. Invoices must be submitted by October 10, 2026.

Requirements

1. Project must meet required criteria above.
2. Project must follow the most updated American Academy of Pediatrics Safe Sleep Recommendations - Sleep-Related infant Deaths: Updated 2022 Recommendations for Reducing Infant Deaths in the Sleep Environment: https://www.aap.org/en/news-room/news-releases/aap/2022/american-academy-ofpediatrics-updates-safe-sleep-recommendations-back-is-best/
3. Meet with Infant Health Coordinator prior to project implementation to determine deliverables and strategize to evaluate effectiveness of project/programming.
4. Any changes to the submitted application must be approved by SD DOH Infant Domain before moving forward.
5. Receive prior approval before executing any changes to the agreed upon budget.
6. All products purchased and resources created using the grant funds must be approved by SD DOH Infant Domain prior to project implementation and align with American Academy of Pediatrics (AAP) Safe Sleep Recommendations.
7. Awardee will work alongside SD DOH to ensure aligned safe sleep programming and shared vision for reducing sleep-related infant mortality. Consistency is important to reduce confusion.
8. Complete progress report by January 28, 2026, and final report by December 1, 2026. Template will be provided for both reports. These dates are subject to change.
9. Funds can be used to reimburse for services provided through September 30, 2026. Services provided on or before September 30 but not invoiced until after September 30 would be eligible for payment.
10. All project leads are required to complete the free Cribs for Kids Safe Sleep Ambassador training before implementation of project, which can be found at this link: https://cribsforkids.org/safe-sleep-ambassador/
11. Progress updates (phone calls, emails, Zoom/Teams meetings, etc.) with Infant Health Coordinator might be required.
12. Monthly reports are required for each funded applicant. Report templates will be provided by the SD DOH.
13. Awardees must submit and give permission to share a success story using the provided success story template at the conclusion of the project.
14. Awardees must be willing to work with SD DOH following implementation of the project to determine longer-term effectiveness.

Deliverables**:**

- Implement evidence-based or innovative/promising practice interventions based on the objectives proposed in the application.
- Complete monthly reports using provided template.

- Complete a progress report by January 28, 2026, and final report by December 1, 2026. Templates will be provided for both reports. Dates are subject to change.
- Submit at least one success story and give SD DOH permission to share.

Grant Agreement

Each grantee must formally enter into a grant agreement. The grant agreement will address the conditions of the award, including implementation for the project. Grantee should read the grant agreement, sign, and once signed, comply with all conditions of the grant agreement.
No work on grant activities can begin until a fully executed grant agreement is in place and the State's Authorized Representative has notified the Grantee that work may start.

The funded applicant will be legally responsible for assuring implementation of the work plan and compliance with all applicable state requirements including worker's compensation insurance, nondiscrimination, data privacy, budget compliance, and reporting.

Resources

South Dakota Infant Mortality Analysis – 2024 (Provisional Data). South Dakota Department of Health; 2025. https://doh.sd.gov/media/qs5mx5qm/2024-infant-mortality-provisional-data.pdf

South Dakota Department of Health Infant Mortality Dashboard - https://doh.sd.gov/health-data-reports/data-dashboards/infant-mortality/

Sleep-Related infant Deaths: Updated 2022 Recommendations for Reducing Infant Deaths in the Sleep Environment: https://www.aap.org/en/news-room/news-releases/aap/2022/american-academy-ofpediatrics-updates-safe-sleep-recommendations-back-is-best/

AAP Infant Safe Sleep Toolkit: https://www.aap.org/en/patient-care/safe-sleep/

Cribs for Kids Safe Sleep Ambassador Training: https://cribsforkids.org/safe-sleep-ambassador/

Cribs for Kids Safe Sleep Academy: https://safesleepacademy.org/

Safe to Sleep: https://safetosleep.nichd.nih.gov/

Charlie's Kids: https://charlieskids.org/

Key Definitions

Term	Definition
Sudden Unexpected Infant Deaths (SUID)	A sudden and unexpected death that occurs during infancy (under the age of one), whether explained or unexplained, and often in a sleep environment or during sleep.
Sudden Infant Death Syndrome (SIDS)	The sudden death of an infant under the age of one that doesn't have a known cause, even after a thorough investigation.

Sleep-Related Infant Death	A SUID that occurs during an observed or unobserved sleep period, or in a sleep environment.
Accidental Suffocation or Strangulation in Bed (ASSB)	A death in the sleep environment with a confirmed cause of the infant's nose and mouth being covered or the neck/chest compressed from soft or loose bedding, overlay, or wedging.
Infant Mortality	The death of a live-born infant during the first year of life.
Room Sharing	Parent(s) and infant sleeping in the same room on separate surfaces.

Definitions provided by American Academy of Pediatrics Sleep-Related Infant Deaths: Updated 2022 Recommendations for Reducing Infant Deaths in the Sleep Environment.

Timeline

Grant Application Release	November 14, 2025
Applications Due	December 19, 2025, by 5:00 pm CST
Award Notice	January 2026
Invoices Due	September 30, 2026
Project Start & End Date	January 2026 –November 30, 2026

All applications will be reviewed by SD Department of Health staff.

Point of Contact

Laurel Rick – Infant Health Coordinator – laurel.rick@state.sd.us

Applications should be submitted via email to: Laurel Rick, Infant Health Coordinator (laurel.rick@state.sd.us).

Please submit your completed application by: December 19, 2025, at 5:00 pm CST.

South Dakota Safe Sleep Collaborative

Funding Application

(Provided by South Dakota Department of Health)

Please complete the following application, save digitally, and email to Laurel.Rick@state.sd.us.

Organizational Profile:

Name of Agency or Organization:		
Agency Street Address:		
City:	**State**:	**Zip Code**:
Organization Description:		
Project Lead Contact Name:		**Phone #**:
Project Lead Email:		**Date**:

Project Description

Project Title:
Focus Area (Select All That Apply): ☐ Preventing sleep-related infant mortality ☐ Promoting Safe Sleep ☐ Sudden unexpected infant death prevention ☐ Other (please describe relationship to sleep-related infant deaths/improving infant outcomes):
Description of Project:

Target Community and Needs:

Social Drivers of Health **Select all that apply and briefly explain.*

☐ Economic Stability – income, employment, poverty, access to housing
☐ Education – level of education, access to education
☐ Healthcare Access and Quality – insurance coverage, healthcare provider access, quality of care
☐ Neighborhood and Built Environment – safety, quality of housing, transportation
☐ Social and Community Context – social support, community and cultural norms
☐ Environmental Factors – air and water quality, toxin exposure, health food access

Involved Partners and Community Members (Names and Organizations):

Program Setting(s): **Select all that apply*

☐ Business, corporation or industry
☐ Child care center
☐ Community based organization
☐ Faith based organization
☐ Home
☐ Local health department
☐ Medical or clinical site
☐ Parks or playgrounds
☐ Rape crisis center
☐ Schools or school district
☐ Senior residence or center
☐ State health department
☐ Tribal nation or area
☐ University or college
☐ Work site
☐ Other, please specify: _____

Evidence Source for Intervention: **Select all that apply*

☐ Best Practice Initiative (U.S. Department of Health and Human Services)
☐ Guide to Clinical Preventive Services (Task Force on Community Preventive Services)
☐ MMWR Recommendations and Reports (Centers for Disease Control and Prevention)
☐ Model Practices Database (National Association of City and County Health Officials)
☐ National Guideline Clearinghouse (Agency for Healthcare Research and Quality)
☐ Promising Practices Network (RAND Corporation)
☐ Other (describe):

Anticipated Outcomes and Impact

- What do you hope to achieve by the end of the project?
- How will your project increase safe sleep knowledge, awareness, or behavior change in your community?
- How will you track or measure success? (Examples: number of families reached, training certificates collected, surveys, stories/testimonials).

Goals and Objectives (should include goals for the number of people impacted by the proposed activity):

Anticipated Deliverable(s) to Monitor and Report on Effectiveness:

Sustainability:

- How will you continue or build upon this project after the award period?
- Are there opportunities to integrate safe sleep messages into ongoing community programs?

Anticipated Project Barrier(s) and Possible Solutions:

How can SD DOH support your efforts, if your project is not selected for an award?

Additional Information You Would Like SD DOH to Know While Making Funding Determinations:
Anticipated Implementation Timeline:

Project Budget

Item	Justification	Total
Total requested (maximum of $20,000 per project)		