



## **Prevention of Shaken Baby Syndrome and Abusive Head Trauma Policy**

### **Belief Statement**

*The Legacy Child Enrichment Center believes that preventing, recognizing, responding to, and reporting shaken baby syndrome and abusive head trauma (SBS/AHT) is an important function of keeping children safe, protecting their healthy development, providing quality child care, and educating families.*

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### **Background**

SBS/AHT is the name given to a form of physical child abuse that occurs when an infant or small child is violently shaken and/or there is trauma to the head. Shaking may last only a few seconds but can result in severe injury or even death. According to North Carolina Child Care Rule (child care centers, 10A NCAC 09 .0608, family child care homes, 10A NCAC 09 .1726), each child care facility licensed to care for children up to five years of age shall develop and adopt a policy to prevent SBS/AHT2.

### **Procedure/Practice**

#### **Recognizing:**

Children are observed for signs of abusive head trauma including irritability and/or high pitched crying, difficulty staying awake/lethargy or loss of consciousness, difficulty breathing, inability to lift the head, seizures, lack of appetite, vomiting, bruises, poor feeding/sucking, no smiling or vocalization, inability of the eyes to track and/or decreased muscle tone. Bruises may be found on the upper arms, rib cage, or head resulting from gripping or from hitting the head.

#### **Responding to:**

If SBS/ABT is suspected, staff will:

- ✓ Call 911 immediately upon suspecting SBS/AHT and inform the director.
- ✓ Call the parents/guardians.
- ✓ If the child has stopped breathing, trained staff will begin pediatric CPR.

#### **Reporting:**

- Instances of suspected child maltreatment in child care are reported to Division of Child Development and Early Education (DCDEE) by calling 1-800-859-0829 or by emailing [webmasterdcd@dhhs.nc.gov](mailto:webmasterdcd@dhhs.nc.gov).
- Instances of suspected child maltreatment in the home are reported to the county Department of Social Services. Phone number: 919-560-8000

### **Prevention strategies to assist staff\* in coping with a crying, fussing, or distraught child**

Staff must first determine if the child has any physical needs such as being hungry, tired, sick, or in need of a diaper change. If no physical need is identified, staff will attempt one or more of the following strategies:

- ✓ Rock the child, hold the child close, or walk with the child.
- ✓ Stand up, hold the child close, and repeatedly bend knees.
- ✓ Sing or talk to the child in a soothing voice.
- ✓ Gently rub or stroke the child's back, chest, or tummy.
- ✓ Offer a pacifier or try to distract the child with a rattle or toy.
- ✓ Take the child for a ride in a stroller.
- ✓ Turn on music or white noise.

In addition, the Legacy CEC will:

- Allow for staff who feel they may lose control to have a short, but relatively immediate break away from the children.
- Provide support when parents/guardians are trying to calm a crying child and encourage parents to take a calming break if needed.

### **Prohibited Behaviors**

Behaviors that are prohibited include (but not limited to):

- Shaking or jerking a child
- Tossing a child into the air or into a crib, chair or car seat
- Pushing a child into walls, doors or furniture

### **Strategies to assist staff members understand how to care for infants**

Staff reviews and discusses:

- The five goals and developmental indicators in the 2013 North Carolina Foundations for Early Learning and Development, [www.ncchildcare.nc.gov/PDF/forms/NC\\_Foundations.pdf](http://www.ncchildcare.nc.gov/PDF/forms/NC_Foundations.pdf)
- How to Care for Infants and Toddlers in Groups, the National Center for Infants, Toddlers and Families, [www.zerotothree.org/resources/77-how-to-care-for-infants-and-toddlers-in-groups](http://www.zerotothree.org/resources/77-how-to-care-for-infants-and-toddlers-in-groups)
- Including Relationship-Based Care Practices in Infant-Toddler Care: Implications for Practice and Policy, the Network of Infant/Toddler Researchers, pages 7-9, [www.acf.hhs.gov/sites/default/files/opre/nitr\\_inquire\\_may\\_2016\\_070616\\_b508compliant.pdf](http://www.acf.hhs.gov/sites/default/files/opre/nitr_inquire_may_2016_070616_b508compliant.pdf)

### **Strategies to ensure staff members understand the brain development of children up to five years of age**

All staff will take online training on SBS/AHT within first two weeks of employment. Training includes recognizing, responding to, and reporting child abuse, neglect, or maltreatment as well as the brain development of children up to five years of age. Staff will review and discuss:

- ✓ Brain Development from Birth video, the National Center for Infants, Toddlers and Families, [www.zerotothree.org/resources/156-brain-wonders-nurturing-healthy-brain-development-from-birth](http://www.zerotothree.org/resources/156-brain-wonders-nurturing-healthy-brain-development-from-birth)
- ✓ The Science of Early Childhood Development, Center on the Developing Child, [www.developingchild.harvard.edu/resources/inbrief-science-of-ecd/](http://www.developingchild.harvard.edu/resources/inbrief-science-of-ecd/)

## Resources

Parent web resources

- The American Academy of Pediatrics: [www.healthychildren.org/English/safety-prevention/at-home/Pages/Abusive-Head-Trauma-Shaken-Baby-Syndrome.aspx](http://www.healthychildren.org/English/safety-prevention/at-home/Pages/Abusive-Head-Trauma-Shaken-Baby-Syndrome.aspx)
- The National Center on Shaken Baby Syndrome: <http://dontshake.org/family-resources>
- The Period of Purple Crying: <http://purplecrying.info/>

Facility web resources

- Caring for Our Children, Standard 3.4.4.3 Preventing and Identifying Shaken Baby Syndrome/Abusive Head Trauma, [http://cfoc.nrckids.org/StandardView.cfm?StdNum=3.4.4.3&="+](http://cfoc.nrckids.org/StandardView.cfm?StdNum=3.4.4.3&=)
- Preventing Shaken Baby Syndrome, the Centers for Disease Control and Prevention, [http://centerforchildwelfare.fmhi.usf.edu/kb/trprev/Preventing\\_SBS\\_508-a.pdf](http://centerforchildwelfare.fmhi.usf.edu/kb/trprev/Preventing_SBS_508-a.pdf)
- Early Development & Well-Being, Zero to Three, [www.zerotothree.org/early-development](http://www.zerotothree.org/early-development)

## References

1. The National Center on Shaken Baby Syndrome, [www.dontshake.org](http://www.dontshake.org)
2. NC DCDEE, [ncchildcare.dhh.state.nc.us/general/mb\\_ccrulespublic.asp](http://ncchildcare.dhh.state.nc.us/general/mb_ccrulespublic.asp)
3. Shaken baby syndrome, the Mayo clinic, [www.mayoclinic.org/disease-conditions/shaken-baby-syndrome/basics/symptoms/con-20034461](http://www.mayoclinic.org/disease-conditions/shaken-baby-syndrome/basics/symptoms/con-20034461)
4. Pediatric First Aid/CPR/AED, American Red Cross, [www.redcross.org/images/MEDIA\\_CustomerProductCatalog/m4240175\\_Pediatric\\_ready\\_reference.pdf](http://www.redcross.org/images/MEDIA_CustomerProductCatalog/m4240175_Pediatric_ready_reference.pdf)
5. Calming Techniques for a crying Baby, Children's Hospital Colorado, [www.childrenscolorado.org/conditions-and-advice/calm-a-crying-baby/calming-techniques](http://www.childrenscolorado.org/conditions-and-advice/calm-a-crying-baby/calming-techniques)
6. Caring for Our Children, Standard 3.7.0.5.Stress <http://cfoc.nrckids.org/StandardView/1.7.0.5>

*\*For purposes of this policy, "staff" includes the operator and other administration staff who may be counted in ratio, additional caregivers, substitute providers, and uncompensated providers.*