Prevention of Shaken Baby Syndrome and Abusive Head Trauma
SAMPLE Policy

Belief Statement
We, ______________________ (name of facility), believe 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.

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 death1. 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 will3:
  - 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 CPR4.

Reporting:
- Instances of suspected child maltreatment in child care are reported to Division of Child Development and Early Education (DCD&E) by calling 1-800-859-0829 or by emailing webmasterdcd@dhhs.nc.gov.
- Instances of suspected child maltreatment in the home are reported to the county Department of Social Services. Phone number: ______________________

Prevention strategies to assist staff* in coping with a crying, fussing, or distraught child
Staff 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 strategies5:

- 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.
- Other _____________________________________________________________
- Other _____________________________________________________________

In addition, the facility:
- Allows for staff who feel they may lose control to have a short, but relatively immediate break away from the children6.
- Provides support when parents/guardians are trying to calm a crying child and encourage parents to take a calming break if needed.
- Other _____________________________________________________________
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Prohibited behaviors
Behaviors that are prohibited include (but are 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, [ncchildcare.nc.gov/PDF_forms/NC_Foundations.pdf](http://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 take 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 review and discuss:
- Brain Development from Birth video, the National Center for Infants, Toddlers and Families, [www.zero-to-three.org/resources/156-brain-wonders-nurturing-healthy-brain-development-from-birth](http://www.zero-to-three.org/resources/156-brain-wonders-nurturing-healthy-brain-development-from-birth)

Resources
List resources such as a staff person designated to provide support or a local county/community resource:

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](http://dontshake.org/family-resources)
- The Period of Purple Crying: [http://purplecrying.info/](http://purplecrying.info/)
- Other ______________________

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)
- Other ______________________
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References
1. The National Center on Shaken Baby Syndrome, www.dontshake.org
2. NC DCDEE, nccchildcare.dhhs.state.nc.us/general/mb_ccrulespublic.asp
6. Caring for Our Children, Standard 1.7.0.5: Stress http://cfoc.nrckids.org/StandardView/1.7.0.5

Application
This policy applies to children up to five years of age and their families, operators, early educators, substitute providers, and uncompensated providers.

Communication
Staff*
- Within 30 days of adopting this policy, the child care facility shall review the policy with all staff who provide care for children up to five years of age.
- All current staff members and newly hired staff will be trained in SBS/AHT before providing care for children up to five years of age.
- Staff will sign an acknowledgement form that includes the individual’s name, the date the center’s policy was given and explained to the individual, the individual's signature, and the date the individual signed the acknowledgment.
- The child care facility shall keep the SBS/AHT staff acknowledgement form in the staff member’s file.

Parents/Guardians
- Within 30 days of adopting this policy, the child care facility shall review the policy with parents/guardians of currently enrolled children up to five years of age.
- A copy of the policy will be given and explained to the parents/guardians of newly enrolled children up to five years of age on or before the first day the child receives care at the facility.
- Parents/guardians will sign an acknowledgement form that includes the child’s name, date the child first attended the facility, date the operator’s policy was given and explained to the parent, parent’s name, parent’s signature, and the date the parent signed the acknowledgement.
- The child care facility shall keep the SBS/AHT parent acknowledgement form in the child’s file.

* 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.

Effective Date

This policy was reviewed and approved by:

Owner/Director (recommended) Date
DCDEE Child Care Consultant (recommended) Date
Child Care Health Consultant (recommended) Date

Annual Review Dates

The North Carolina Child Care Health and Safety Resource Center
www.healthychildcarenc.org • 800.367.2229
The NC Resource Center is a project of the Department of Maternal and Child Health, UNC Gillings School of Global Public Health
Developed November 2016
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Parent or guardian acknowledgement form

I, the parent or guardian of _____________________________________________ Child’s name

acknowledges that I have read and received a copy of the facility’s Shaken Baby Syndrome/Abusive Head Trauma Policy.

Date policy given/explained to parent/guardian ________________________________ Date of child’s enrollment ________________________________

Print name of parent/guardian ________________________________________________

Signature of parent/guardian ________________________________________________ Date ________________________________
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Staff acknowledgement form:

I __________________________ (name) acknowledge that I have read and received a copy of the facility’s Shaken Baby Syndrome/Abusive Head Trauma Policy.

Date policy given/explained to staff person

__________________________
Staff signature

__________________________
Date