

RULE GUIDANCE

Preventing Shaken Baby Syndrome (SBS) & Abusive Head Trauma (AHT)

LICENSE TYPE AND RULES

Registered Family Child Care (RF)

OAR 414-205-0100(1)

Certified Family Child Care (CF)

OAR 414-350-0180(5)

Certified Child Care Center (CC)

OARS 414-300-0220(2)(a)



WHY THESE RULES ARE IN PLACE

Shaken Baby Syndrome (SBS), which is also Abusive Head Trauma (AHT), is the occurrence of brain injury in newborns, infants, and children younger than 3 years caused by shaking a child. Even mild shaking can cause the brain of the young child to bounce inside of the skull, resulting in brain damage, hemorrhaging, blindness, other serious injuries or even death. SBS is preventable.

Research shows that shaking a child most often occurs in response to an infant crying or other factors that can trigger the person caring for the baby to become frustrated or angry. The fact is that crying—including long bouts of inconsolable crying—is typical developmental behavior in infants. The problem is not the crying, it's how caregivers respond to it. Picking up a baby and shaking, throwing, hitting, or hurting them is never an appropriate response.

Facts about Abusive Head Trauma (from the National Center on Shaken Baby Syndrome):

- Crying is the #1 trigger for Shaken Baby Syndrome
- Most cases of Shaken Baby Syndrome are in babies less than 6 months old
- Abusive Head Trauma is the leading cause of child abuse deaths in U.S.
- 25% of victims die

Possible signs and symptoms of SBS or AHT may include, but are not limited to: extreme fussiness or irritability, trouble staying awake, breathing problems, poor eating, vomiting, pale or bluish skin, seizures, paralysis and/or coma.

According to the Mayo Clinic, sometimes there's bruising on the face, but you may not see signs of physical injury to the child's outer body. Injuries that might not be visible include bleeding in the brain and eyes, spinal cord damage, and fractures of the ribs, skull, legs and other bones. Children with Shaken Baby Syndrome often show signs and symptoms of prior child abuse.

HOW THIS MAY LOOK IN YOUR PROGRAM

When a caregiver is overwhelmed or stressed, they are more likely to have increased frustration with a child in their care. Child care programs can assist caregivers in making intentional steps toward mental and physical wellness, including seeking support from others and establishing routines and good habits.

Caring for ones-self, also called "self-care," is one of the most important – and often one of the most forgotten – things you can do as a caregiver of children. Each person may have their own ways to reduce stress, relax and restore energy, such as: taking a walk, getting extra sleep, calling a friend, playing with their dog, baking a favorite treat or reading a book. If you work alone, self-care is critical.

Consider developing a written policy on preventing SBS in your program.

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 should attempt one or more of the following strategies:

- Rock the child, hold the child close, or walk with the child.
- 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.
- Go outside.

In addition, the child care facility could:

- Allow staff who feel they may lose control to have a short, but relatively immediate break away from the children (while maintaining ratios, group size, etc.).
- Develop a system staff can use to notify someone when they need assistance.
- Ensure that caregivers know how important it is to support each other, and encourage them to ask for help when needed.
- Encourage staff to reflect on what makes them feel stressed or frustrated when working with children.
- Discuss strategies for prevention and proactive self-care.
- Seek out training and information about **Trauma Informed Care** which can benefit both caregivers, children and families.

OCC LICENSING SPECIALIST MAY

- Ask what precautions you take to help prevent Shaken Baby Syndrome and Abusive Head Trauma
- Review your Guidance & Discipline policy
 - Recommend that your policy include how to respond if SBS or AHT occurs in your facility (call 911, follow proper first aid, make a mandatory report, notify your licensor of a serious injury/incident, etc.)

ADDITIONAL INFORMATION

Mandatory reporters

Shaken Baby Syndrome and/or Abusive Head Trauma is a form of child abuse, falls under the mandatory reporting laws and must be reported to the Oregon Child Abuse Hotline (ORCAH). All providers, caregivers and child care staff are mandatory reporters. This applies 24 hours a day. In Oregon, reports of suspected child abuse or neglect are made to the Oregon Child Abuse Hotline (ORCAH) at **1-855-503-SAFE (7233)**.

- SBS and ABT are forms of abuse that will be investigated by law enforcement and can result in incarceration.

OCC Resources Available

- [OCC provider resource library](#) available at OregonEarlyLearning.com
- Guidance & Discipline Policies (PTA-0438)

OTHER RESOURCES

[ODHS Mandatory Reporting Information](#) available in several languages.

Facility Online 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&=#>
- Preventing Shaken Baby Syndrome, the Centers for Disease Control and Prevention, http://centerforchildwelfare.fmhi.usf.edu/kb/trprev/Preventing_SBS_508-a.pdf
- Early Development & Well-Being, Zero to Three, www.zerotothree.org/early-development

Parent Online Resources

- The American Academy of Pediatrics: 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/>

Oregon Administrative Rules, Oregon Department of Education, Early Learning Division, Chapter 414, Divisions 205 [Registered Family Child Care Homes](#), 300 [Certified Child Care Centers](#), and 350 [Certified Family Child Care Homes](#).

You are entitled to language assistance services and other accommodations at no cost. If you need help in your language or other accommodations, please contact the Office of Child Care at 503-947-1400.

Original Issue Date: Jun 2022

Updated: N/A