

Safe With You

These materials were developed, in part, with federal Child Care and Development Fund resources. This was a collaborative project of the Nebraska Department of Education's Early Childhood Training Center and the Nebraska Department of Health and Human Services.



UPDATED



Training Process

- **Sign in sheets**
- **Evaluations**
- **Consultant Comment form**
- **Certificates of completion**



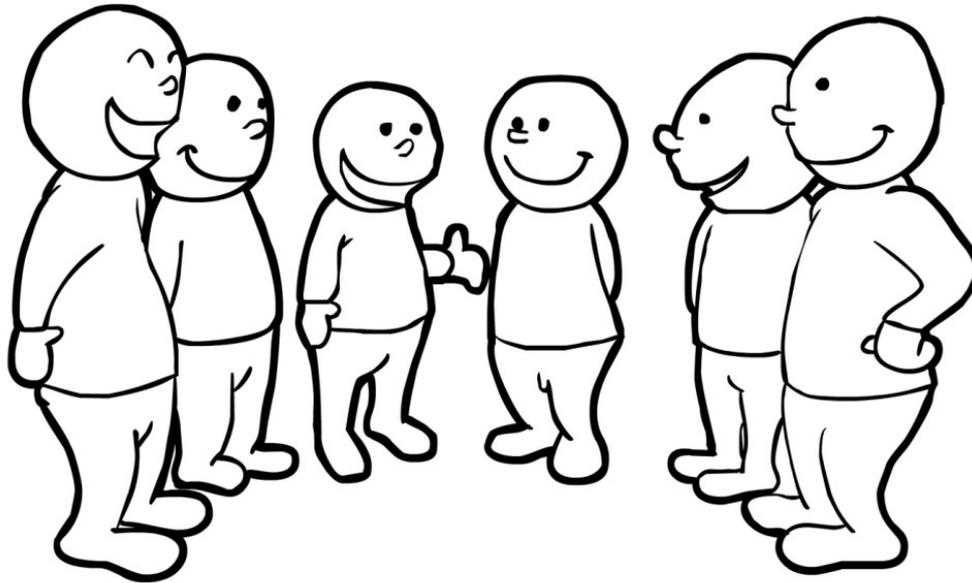
Training Content

- Training needs to meet the intent of the law.



Real Life Stories

- Participant relate their experiences



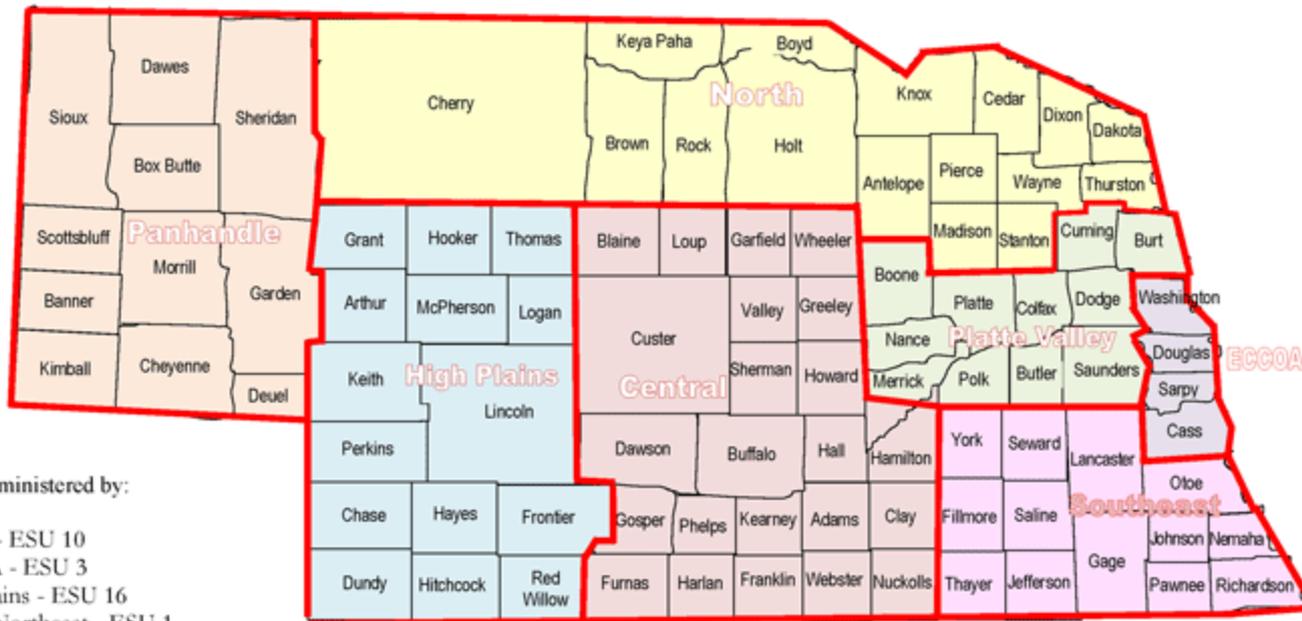
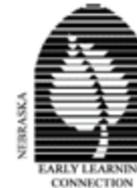
Early Childhood Training Center

- Maintaining a database



Early Learning Connections

Early Learning Connection Partnership Regions (Effective October 1, 2011)



Grant administered by:

- Central - ESU 10
- ECCOA - ESU 3
- High Plains - ESU 16
- North/Northeast - ESU 1
- Panhandle - ESU 13
- Platte Valley - ESU 7
- Southeast - ESU 6



Nothing, but Baby! :

Preventing Sudden
Infant Death Syndrome





You Will Be Able To:

- ✓ Define Sudden Infant Death Syndrome (SIDS)
- ✓ Discuss how research and statistics change the way we do things
- ✓ Develop prevention strategies and identify information to share with parents
- ✓ Develop a sleep policy and create a plan



Nebraska Law 43-2606

The training requirements shall be designed to meet the health, safety, and developmental needs of children and shall be tailored to the needs of licensed providers of child care programs. The training requirements for providers of child care programs shall include, but not be limited to, information on **sudden infant death syndrome**, shaken baby syndrome, and child abuse.



Sudden Unexpected Infant Death Syndrome (SUIDS)

“Sudden unexpected infant deaths are defined as deaths in infants less than one year of age that occur suddenly and unexpectedly, and whose cause of death are not immediately obvious prior to investigation.”

-Centers for Disease Control and Prevention



Sudden Infant Death Syndrome (SIDS)

“Sudden Infant Death Syndrome (SIDS) is defined as the sudden death of an infant less than one year of age that cannot be explained after a thorough investigation is conducted, including a complete autopsy, examination of the death scene, and review of the clinical history.”

-Centers for Disease Control and Prevention





That was then...

- Prior to 1981 babies slept on their tummies
- Cribs were full of blankets, bumper pads, toys, etc.
- Prior to 1985 no warning about the effect of smoking around babies



This is now...

- Place babies on their backs to sleep
- Keep soft objects, stuffed toys, and loose bedding out of your baby's sleep area
- Do not let anyone smoke near your baby



SIDS is the leading cause of death for infants between one month and one year.





Tummy Time.



**Nothin'
but Baby!**



... In a smoke free place



**Use sleep clothing.
Keep baby from
overheating.**



**A pacifier
could help.**



Sharing with parents



**Co-sleeping
can be
dangerous.**



Rank order: Sleep-Associated Death Risk Factors

1. Age-inappropriate sleep surface
2. Pre- or post-natal smoke exposure
3. Bed sharing
4. Found on side or stomach
5. Current/recent respiratory infection
6. Put to sleep on side or stomach
7. Bedding-related issues
8. No known risk factors
9. Furniture-related issues



Sharing With Parents

Breast feeding is
recommended.

After feeding,
place baby in a crib
before **YOU** fall
asleep.



Use of slings





Sharing With Parents

To prevent suffocation and reduce the risk of SIDS . . .

BEFORE & DURING PREGNANCY:

- Quit Smoking
- Avoid Drugs/Alcohol
- See your health care provider early and regularly

-American Academy of Pediatrics





Sharing With Parents

To prevent suffocation and reduce the risk of SIDS . . .

ONCE YOUR BABY ARRIVES:

- Follow safe sleep tips
- Breastfeed your baby
- Keep baby in a smoke free place
- See your healthcare provider if your baby is sick



Child Care Facility _____

INFANT SLEEP SAFETY POLICY



POLICY

Staff will put infants under the age of 12 months on their back when placed in cribs unless there is a medical waiver stating the child should sleep in a different position. Infant care areas will be smoke free. All infant staff will follow the steps below to reduce the risk of sudden infant death syndrome (SIDS) and prevent other sleep related deaths such as suffocation.



POLICY

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Nothin' but Baby!



Nothin' but Baby!
Safe Sleep Tips

Encourage parent/guardians to bring sleep clothing.

- Blankets, bumper pads, pillows, and toys will not be used in the crib.
 - e. Maintain infant care areas to be smoke free.
 - f. Offer infants a pacifier at bedtime.
3. Prior to/or on enrollment,

_____ will give all parent / guardians
staff title/name

of infants a "Nothin' but Baby" brochure. The brochure will be obtained from the Douglas County Health Department website: www.douglascountyhealth.com and printed by the childcare facility. Designated staff member will also encourage the parent/guardian to share this information with alternate care-givers such as grandparents, neighbors, etc. Give extra brochures to parents for alternative caregivers.

- 4. A written note from the infant's physician indicating that the child must sleep in a different position must be obtained, and kept on file. See WAIVER STATEMENT ON INFANT SLEEP POSITION (page C11.)
- 5. It is recommended that child care facilities provide parents/guardians a copy of their safe sleep policy.

INFANT

SAFETY POLICY

Safe Sleep Policy



What does a safe sleep environment look like?

- Baby on back
- No pillows or devices
- Firm mattress
- Blanket sleeper
- Own sleeping place
- Comfortable temperature
- Safe crib
- Smoke-free
- Consider a pacifier
- Tummy time



Activity

One thing I will:

Stop

Continue

Start



Nothin' but Baby!

- ✓ In a crib
- ✓ On his back
- ✓ In a smoke free place

What will you do?



For More Information

Nebraska Department of Education

Early Childhood Training Center

Nebraska Department of Health and Human Services

Douglas County Health Department

Baby Blossoms

Back to Sleep

American Academy of Pediatrics

U.S. Consumer Product Safety Commission

Centers for Disease Control



Never Shake a Baby:

Preventing Shaken Baby Syndrome (SBS)

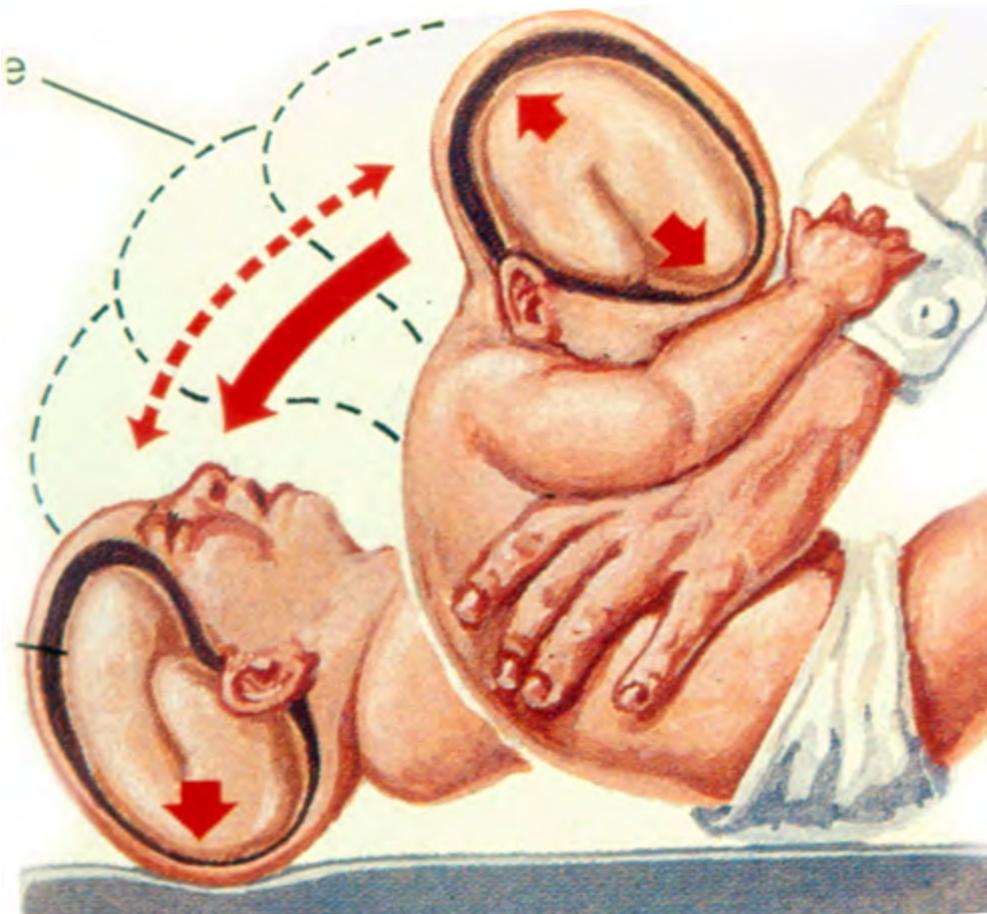




You Will Be Able To:

- ✓ Define Shaken Baby Syndrome
- ✓ Understand the consequences of shaking a baby
- ✓ List different reasons a baby may be crying
- ✓ Create a personal plan





What is Shaken Baby Syndrome?

Vigorous shaking of an infant or small child

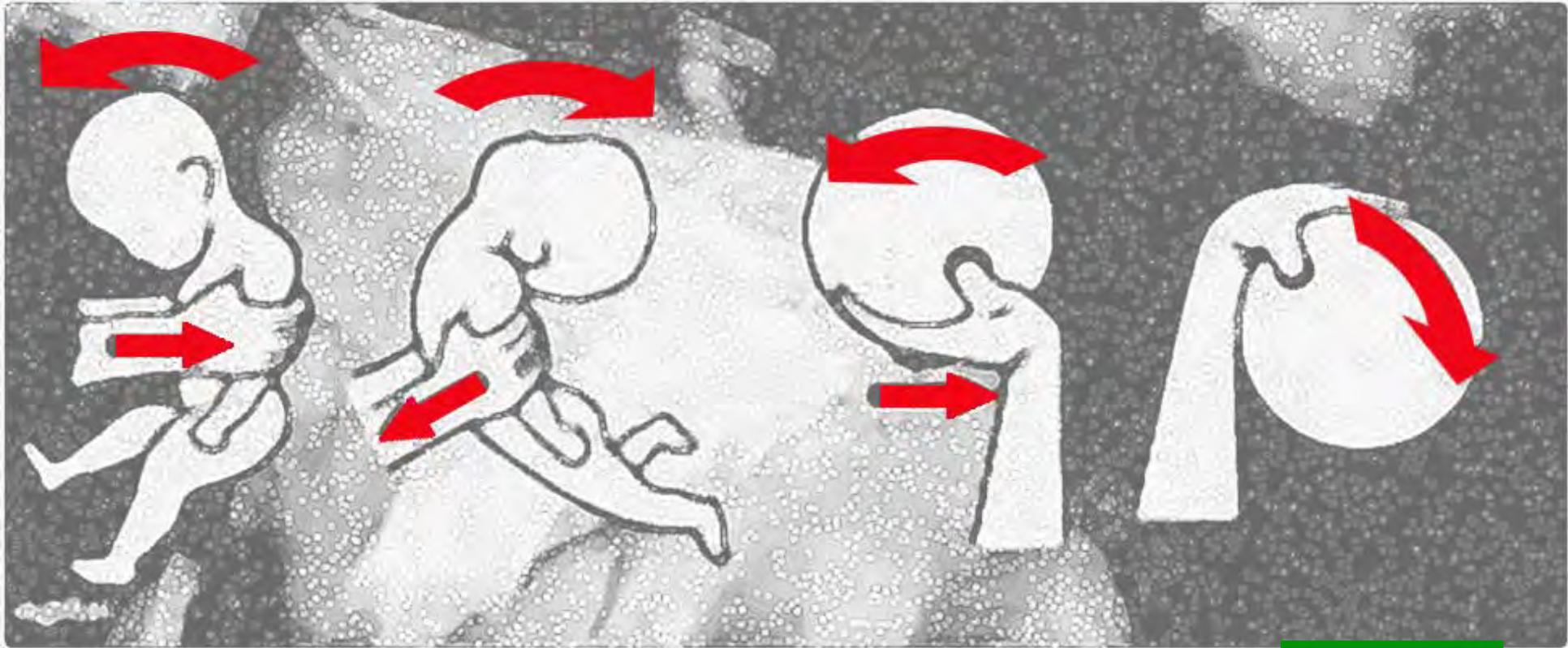


Why are infants vulnerable to injury from shaking?

- **Small**
- **Weak neck muscles**
- **Very soft brain tissue**
- **Large head relative to body size**
- **Unable to defend themselves**
- **Perpetrators often 10-20x infant's size**



Shaken Baby



How Many Babies are Shaken?

- 3 to 4 babies a day experience severe or fatal head injuries*
- About 25% of Shaken Baby Syndrome victims will die**
- Of those who survive about 80% will suffer permanent disability**



Who is the Shaken Baby Syndrome Victim?

- Age: 2-4 months (typically less than 1 year)
- During peak infant crying time
- Male infants
- Prematurity, low birth weight, disability
- Being one of a multiple birth
- Prior abuse or shaking

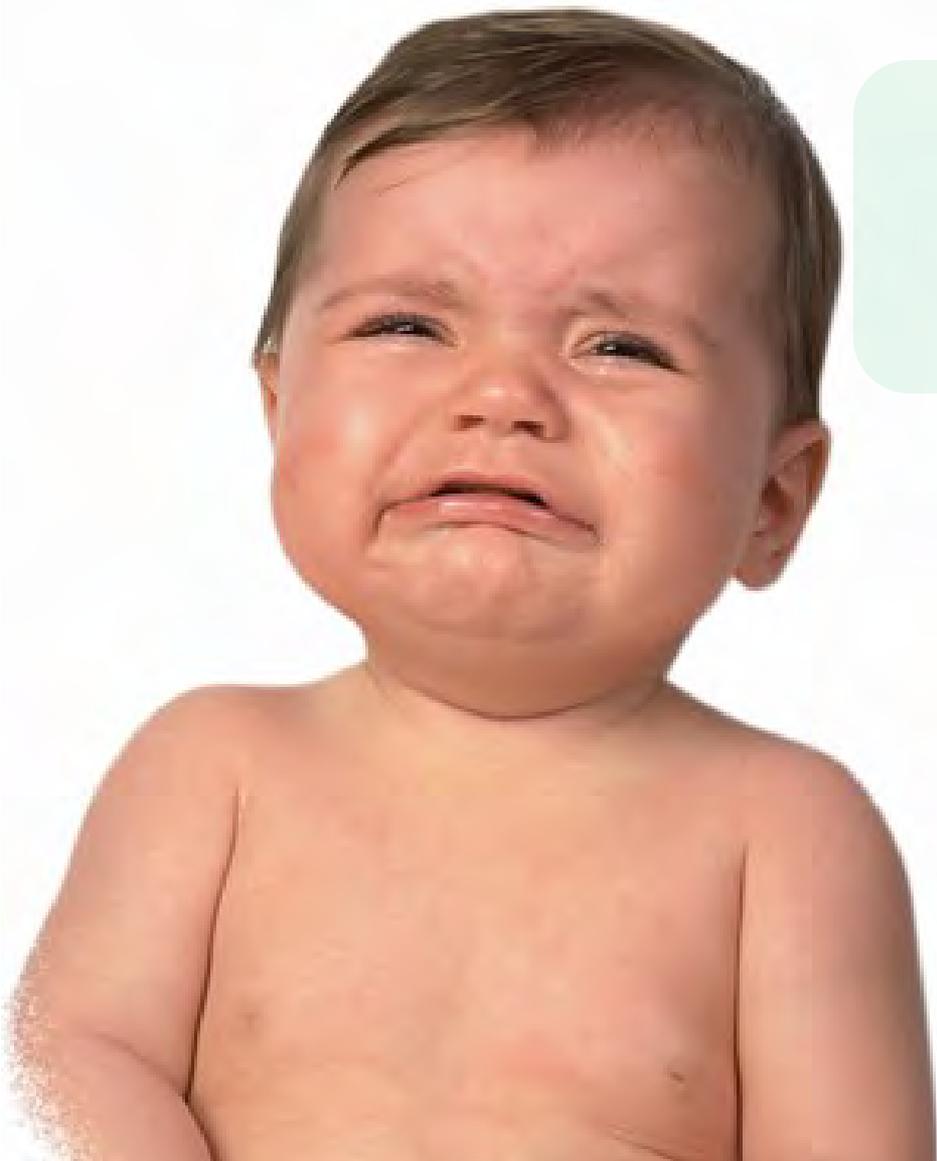
-Centers for Disease Control



What we don't know about Shaken Baby Syndrome

- How many
- How long
- How little

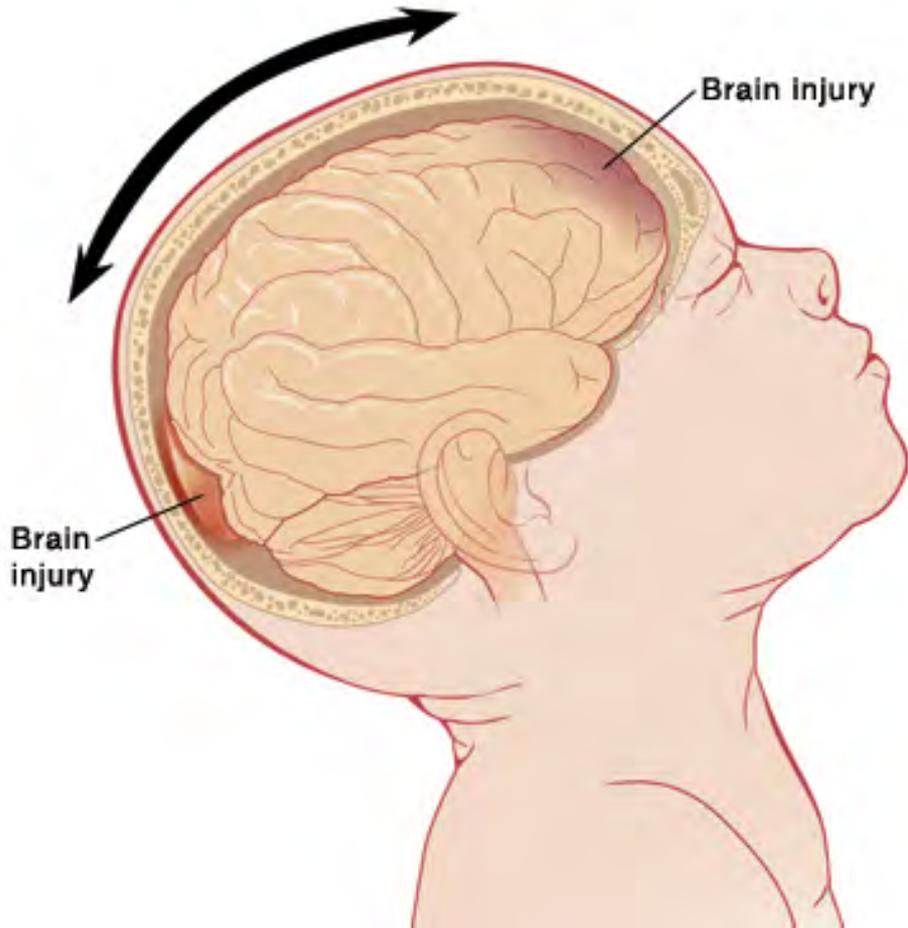




Shaken Slam Syndrome

- Also *Shaken Impact Syndrome*
- Shaken and slammed into a hard surface causing sudden solid impact
- May have a skull fracture or other injuries





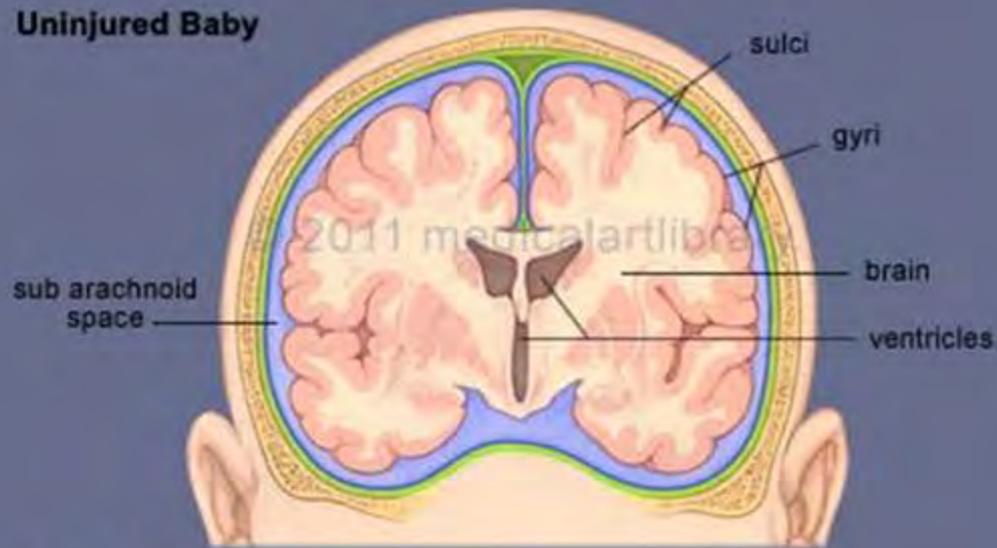
Shaken Baby Syndrome causes brain injury.

Often severe enough to cause DEATH!

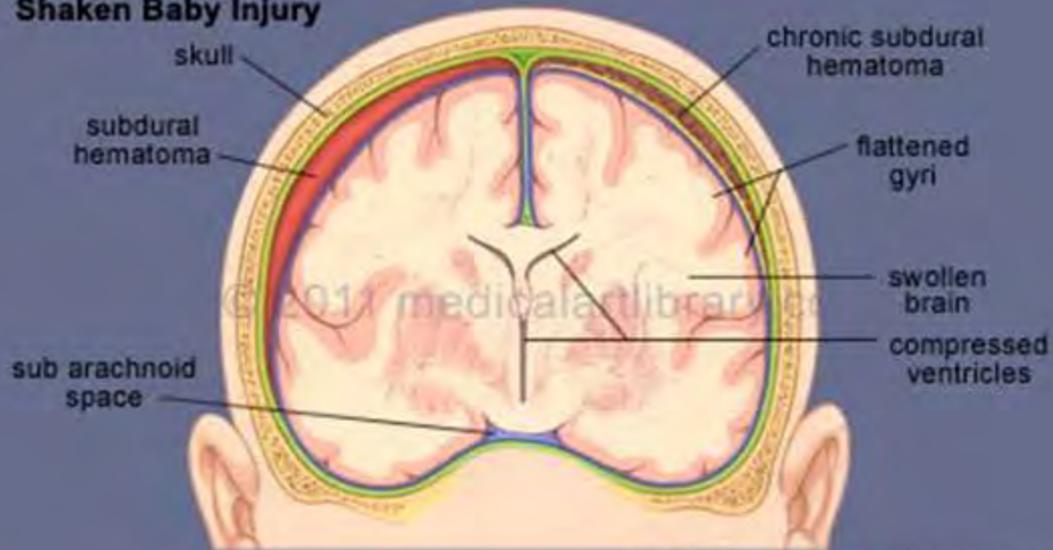
- Centers for Disease Control



Uninjured Baby



Shaken Baby Injury



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Physical Results of Shaken Baby Syndrome

- Cerebral edema (brain swelling)
- Subdural hematoma (bleeding in the brain)
- Retinal hemorrhages (bleeding in the eye)
- Massive blood clots

-National Center on Shaken Baby Syndrome



Physical Signs/Symptoms

- Irregular, difficult, or stopped breathing
- Extreme crankiness
- Seizures or convulsions
- Vomiting
- Tremors or shakiness
- Limp arms and legs
- No reaction to sound or acts lifeless
- Difficulty staying awake
- Uncontrollable crying
- Inability to nurse or eat
- Head/forehead appears larger
- Soft spot appears bulging
- Can't lift head
- Can't focus or track
- Pupils different sizes
- No smiling or vocalization
- Decreased muscle tone
- Rigidity



What do you do?

The sooner the child receives medical attention the better their prognosis and chance of survival.



Injuries of SBS

The treatment of survivors falls into three major categories:

1. Medical
2. Behavioral
3. Educational



Shaken Baby Injuries Seen at Children's Hospital, Omaha, NE



- 2007: 12 cases
- 2008: 16 cases
- 2009: 16 cases
- 2010: 14 cases
- 2011: 14 cases + 2 deaths

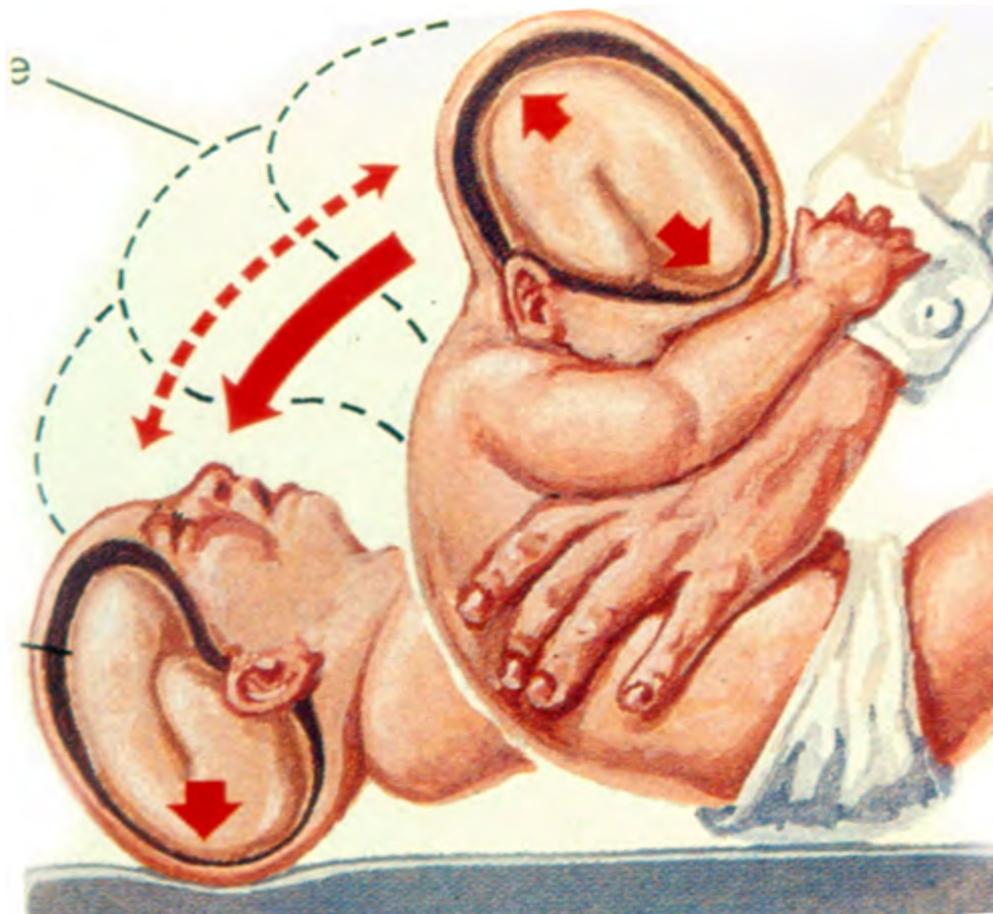
-Children's Hospital, Omaha, Nebraska



Shaken Baby Cases in Nebraska

- Several child care providers
- Convicted of Shaken Baby Syndrome
- Charged with a felony
- Serving time in prison





**No one
wants you
to shake a
baby.**



Why are babies shaken?

1 cause:
INCONSOLABLE
CRYING



The Period of **PURPLE** Crying

A New Way to Understand Your Baby's Crying

P

**PEAK OF
CRYING**

Your baby may cry more each week. The most at 2 months, then less at 3-5 months

U

UNEXPECTED

Crying can come and go and you don't know why

R

**RESISTS
SOOTHING**

Your baby may not stop crying no matter what you try

P

**PAIN-LIKE
FACE**

A crying baby may look like they are in pain, even when they are not

L

**LONG
LASTING**

Crying can last as much as 5 hours a day, or more

E

EVENING

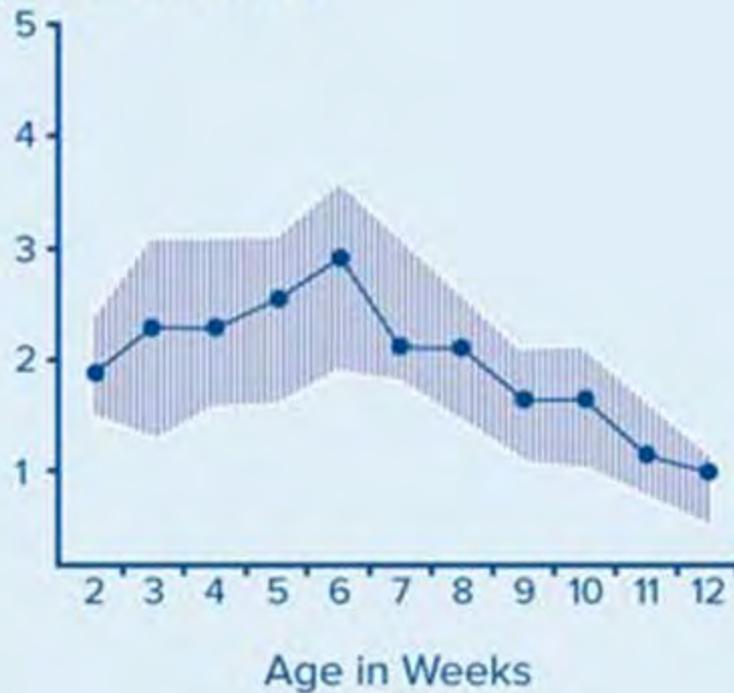
Your baby may cry more in the late afternoon and evening



Babies Cry.



Hours of Fussing per 24 Hours



- The key here is that crying is *normal* and is not the problem.

- Crying begins to increase around 2 to 3 weeks.

- Crying peaks around 6 to 8 weeks.

-Centers for Disease Control



**How do you
calm a crying
baby?**



Triggers:

- Frustration & fatigue
- Limited coping skills
- Young parent
- Unstable family environment
- Low income
- Substance abuse
- Unrealistic expectations about child development
- Feelings of inadequacy, isolation, or depression
- Caring for too many children

*-Centers for Disease Control &
Department of Health and Human Services*



How Can I Calm Myself?

Gently lay the baby down on its back in a crib. Go to another room. Then give yourself a short break.

- Take deep breaths and count to 10 slowly
- Call a friend or relative to talk
- Exercise nearby
- Listen to music
- Read aloud to the other children
- Sing with the other children
- Ask for help
- What else?

**Go back and check on the baby in 5 or 10 minutes.
Remember sometimes babies cry no matter what you do.**



Take a **SAFE** break. . .

Gently put the baby in a safe place.

**DO NOT GO BACK
TO THE CRYING
BABY UNTIL YOU
ARE CALM!**



- **Educate parents**
- **Work as a team**
- **Share information**
- **Share what works**
- **Support families**



**You have the power to
protect yourself and
the baby.**

What will you do?



For More Information

Early Childhood Training Center

Nebraska Department of Health and Human Services

Project Harmony

American Academy of Pediatrics

Centers for Disease Control

Nebraska Children and Families Foundation

National Center on Shaken Baby Syndrome





Power to Protect: Preventing Child Abuse and Neglect





You Will Be Able To:

- ✓ Define child abuse and neglect
- ✓ Identify the physical characteristics of child abuse and neglect
- ✓ Explore cultural issues
- ✓ Know when and how to report
- ✓ Identify ways to reduce the risk



In Nebraska:

The law mandates that all adults report child abuse and neglect.

-Nebraska Revised Statute 28-711



In Nebraska:

When an adult has reasonable cause to believe that a child has been subjected to abuse or neglect or observes such child being subjected to conditions or circumstances which reasonably would result in abuse or neglect...

-Nebraska Revised Statute 28-711



391 NAC 6-001:

The child care provider shall report to the Nebraska Department of Health and Human Services within 24 hours or next business day when the following conditions occur within the child care program: death of any child; any accident to children which requires hospitalization; or treatment at a medical facility

The child care provider who has reason to believe child abuse or neglect may be occurring in the family child care home, in the child's home, or elsewhere, shall immediately file a report with the Child Abuse-Neglect Hotline **1-800-652-1999**, and or appropriate local law enforcement agency.



In Nebraska:

Reports are to be made to this toll free number:

1-800-652-1999

(Child Abuse and Neglect Hotline)

If it is an emergency call **911**.

-Neb. Rev. Stat. 28-711



Why Should We Know About Child Abuse and Neglect?

It is the responsibility of all adults to protect children.



Why Should We Know About Child Abuse and Neglect?

And perhaps the most important reason. . .

- Your job can be very stressful
- Anyone can lose control



Nebraska Family Helpline:

1-888-866-8660

Trained counselors available 24/7



Causes of Child Abuse and Neglect

The American Academy of Pediatrics notes the major reasons for mistreatment of children are feelings of isolation, stress, and frustration



Characteristics

Common characteristics of those who have abused children:

- Feeling isolated
- Didn't reach out to others for help
- Serious stressors in personal life
- May have no prior criminal history
- May have no prior history of child abuse



In Nebraska...

there are child care providers in prison for causing the death of children in their care.



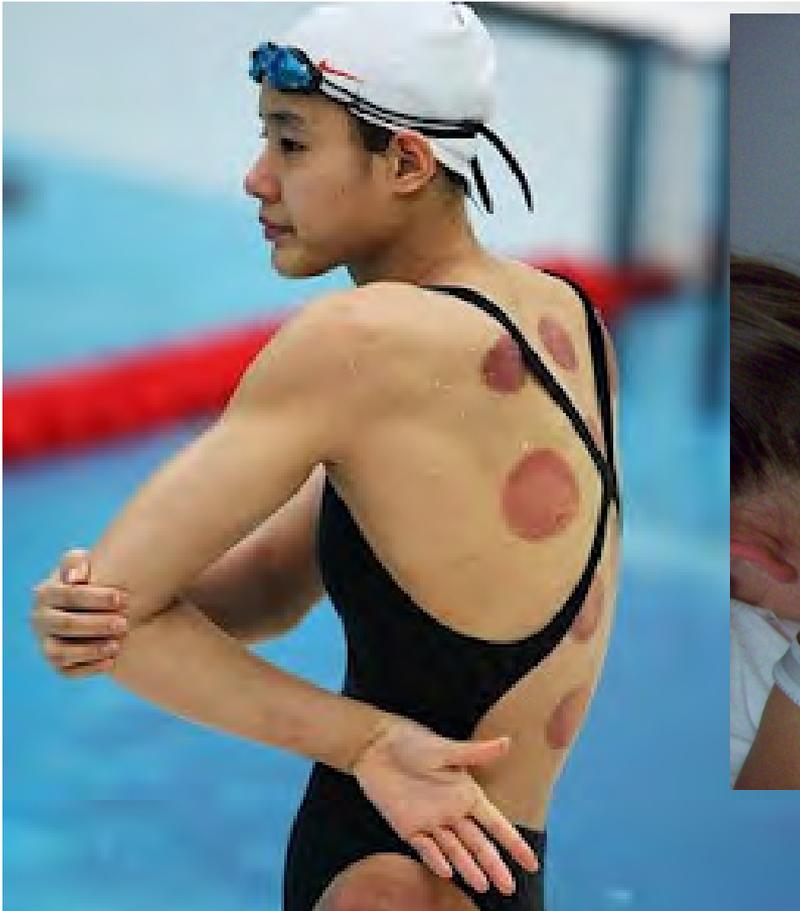
Coining



Cupping



Cupping



Mongolian Spot





When and how to report?

If you suspect abuse or neglect:

- Physical
- Emotional
- Sexual



What if a Child Care Provider is Accused?

- Same process occurs
- Child care licensing is informed of report
- If not accepted by CFS. . . child care licensing will investigate licensing regulations
- If accepted . . . child care licensing, CFS, and law enforcement partner to investigate
- Secure legal representation



Scenario Activity



Ways to Minimize the Risk for Parents and Providers

- ✓ Communication
- ✓ Access



Written Accident Reports



Written Policies



Appropriate Expectations



Rethink Your Reaction



Ask for Help

- Asking for help is a sign of strength. If you are frustrated and need help call the Nebraska Family Helpline [1-888-866-8660](tel:1-888-866-8660)
- Talk to a family member or friend



Create a Plan



It is the responsibility of all adults to protect children.



For More Information

Early Childhood Training Center

Nebraska Department of Health and Human Services

Project Harmony

American Academy of Pediatrics

Centers for Disease Control

Nebraska Children and Families Foundation

Child Welfare Information Gateway



Questions?



Contact the Training Center before you schedule a training.

You will be receiving your training materials soon.

