

# ***Correspondence***



***ACF-IM-HS-22-07***  
***Reporting Child Health and***  
***Safety Incidents***

ACF Administration for Children and Families	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	
	1. Log No. ACF-IM-HS-22-07	2. Issuance Date: 09/27/2022
	3. Originating Office: Office of Head Start	
	4. Key Words: Child Incidents; Reporting; Health and Safety	

## INFORMATION MEMORANDUM

**TO:** All Head Start Agencies and Delegate Agencies

**SUBJECT:** Reporting Child Health and Safety Incidents

### INFORMATION:

The Head Start Program Performance Standards (HSPPS) at [45 CFR §1302.102\(d\)\(1\)\(ii\)](#) require programs to “submit reports, as appropriate, to the responsible U.S. Department of Health and Human Services (HHS) official immediately or as soon as practicable, related to any significant incidents affecting the health and safety of program participants.” This includes any incident regarding staff or volunteer compliance with laws addressing child abuse and neglect.

This Information Memorandum (IM) clarifies reporting requirements of 45 CFR §1302.102(d)(1)(ii), including the responsible HHS official to whom programs must report and the reporting timeframe. It also outlines the consequences for failure to report during the given timeframe, explains the obligation to report child incidents in blended classrooms, and offers examples of incident types that must be reported. This IM applies to all Office of Head Start (OHS) programs, including Head Start, Early Head Start, Migrant and Seasonal Head Start, and American Indian and Alaska Native Head Start programs.

### “Responsible HHS Official” to Whom Programs Send Reports

For reporting significant incidents regarding the health and safety of children in Head Start programs, the responsible HHS official is the program specialist assigned to your grant or the regional program manager. This is in addition to reporting to local, state, or tribal entities as required by applicable laws.

### Reporting Timeframe

HSPPS 45 CFR §1302.102(d)(1)(ii) requires programs to submit reports, as appropriate, to the responsible HHS official immediately or as soon as practicable. OHS interprets “immediately or as soon as practicable” to mean without delay, but no later than seven calendar days following an incident. Head Start programs should not wait for adjudication through local or state officials. Incidents must be reported to OHS staff within seven days of the incident, regardless of investigations by relevant local, state, tribal, or federal law enforcement.

## Consequences for Failure to Report Incidents “Immediately or as Soon as Practicable”

To make sure programs report significant incidents to their assigned program specialist or regional program manager, OHS reviews publicly available information and reports from the grant period to identify any child health and safety incidents. If OHS discovers a program failed to report a significant incident within seven calendar days from the time of the incident, the program will receive a monitoring finding, which may include a deficiency determination.

It is important to report all incidents involving Head Start staff that affect the health and safety of young children in early childhood settings, including those not funded by Head Start dollars. These actions have broader implications for all children served in the program. For this reason, the requirement to report applies to incidents involving Head Start staff, contractors, and volunteers in all settings, including blended classrooms.

## Types of Reportable Incidents

A program must report all significant incidents affecting the health and safety of children. OHS considers a “significant incident” to be any incident that results in serious injury or harm to a child, violates Head Start standards of conduct at [45 CFR §1302.90\(c\)](#), or results in a child being left alone, unsupervised, or released to an unauthorized adult.

It is not possible to provide an exhaustive list of incidents that threaten children’s health and safety. However, OHS is providing a thorough list of the types of incidents that should be reported. Some examples of significant incidents include, but are not limited to:

- **Child injuries that require either hospitalization or emergency room medical treatment**, such as a broken bone; a severe sprain; chipped or cracked teeth; head trauma; deep cuts; contusions or lacerations; or animal bites.
- **Inappropriate discipline**, which is any type of conduct used to instill fear or humiliate rather than to educate a child, such as poking or pinching a child; making fun of or laughing about a child; using/withholding food or an activity as a punishment or reward; or isolating a child.
- **Potential child abuse and maltreatment**, such as grabbing, shoving, shaking, swatting, or dragging a child; spanking or any other type of corporal or physical punishment; binding, tying, or taping a child; terrorizing a child with threats or menacing acts; or any form of sexual contact.
- **Lack of supervision** while in the care or under the supervision of program staff, which includes leaving a child alone anywhere on the grounds of a Head Start facility (e.g., in a classroom, bathroom, on a playground), as well as outside the facility in a parking lot, on a nearby street, or on a bus or another program-approved transportation or excursion.
- **Unauthorized release** where a child is released from a Head Start facility, bus, or other

approved program transportation to a person without the permission or authorization of a parent or legal guardian and whose identity had not been verified by photo identification.

## **Next Steps**

OHS places the utmost priority on child health and safety. Research shows the impact of child abuse and child maltreatment is associated with adverse health and mental health outcomes in children and families, and those negative effects can last a lifetime. Preventing significant incidents that affect children's health and safety in Head Start programs is everyone's responsibility. We encourage program staff to complete the [iLookOut](#) training, a free online professional development course focused on protecting child safety and preventing and identifying child abuse.

OHS is committed to continuous quality improvement and will continue to provide support and guidance in preventing incidents that jeopardize children's safety. If you have any questions regarding this IM, please contact your Regional Office.

By working together to swiftly identify, report, and correct health and safety incidents, we can better support child health and well-being in Head Start programs. Thank you for your work on behalf of children and families.

/ Katie Hamm /

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