

## Safe Sleeping

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### Facts:

- Babies are safest when sleeping on their backs on a firm mattress in a crib that meets current safety standards.
- Each year in the United States, more than 4,500 infants die suddenly of no obvious cause. These deaths are called Sudden Unexpected Infant Deaths or SUIDs.
- Suffocation and strangulation in bed is the leading cause of injury-related death for infants under age 1.
- Infant deaths due to suffocation, strangulation and Sudden Infant Death Syndrome (SIDS) are highest among infants 1 to 3 months of age.
- The risk for suffocation among infants who sleep in adult beds is **40 times higher** than the risk for suffocation in cribs.
- Babies laid down to sleep without a pacifier in their mouth are more than twice as likely to die of SIDS.
- Soft bedding or lying on or next to an adult or child can lead to suffocation. This could also cause overheating which increases the risk of SIDS.
- The risk of SIDS is 3 times higher for mothers who smoke while pregnant and 2-3 times higher for babies living in smokers' households. After pregnancy, the risk rises depending on the number of smokers in the household and the number of cigarettes smoked by each person.
- The SIDS rate has been declining significantly since the early 1990s. However, Centers for Disease Control (CDC) research has found that the decline in SIDS since 1999 can be explained by increases in other SUID rates (e.g., deaths attributed to someone rolling over on top of the infant, suffocation and wedging).
- Babies that are placed on their stomachs to sleep when they are used to sleeping on their backs are 18 times more likely to die of SIDS.
- Bottle propping (such as using a pillow or something else to “prop” a bottle for feeding) or allowing a baby to bottle-feed alone can cause choking or suffocation.

### Tips:

- Babies should never sleep with an adult or another child.
- Babies should sleep alone, on their back, on a firm, flat surface.
- The safest place a baby can sleep is in a crib, bassinet, Pack ‘n’ Play or cradle located in the same room as the caregiver.
- Cover the mattress with a tightly fitted sheet that tucks well under the mattress pad.
- Babies should never sleep in an adult bed, on a couch, pillow, chair, bean bag, air mattress, waterbed or anything not made for babies to sleep in.
- Do not put anything in the baby’s bed. Pillows, quilts, comforters, sheepskin, stuffed animals, bumper pads and other soft products are not safe for sleeping babies. Use a sleeper or sleep sack, instead of a blanket.
- If your baby needs a blanket, place baby near the front of the crib and tuck a thin blanket below the chest, then tuck the blanket around the sides and the bottom of the mattress.

- Always take off a bib before the baby goes to sleep.
- Babies should sleep on their backs during naps and at night until age 1, unless the baby's doctor says another position is better.
- Babies learn to sleep in the position they are placed from birth. It is important for the baby to start sleeping on their back. This may be hard at first, but parents should not give up. Babies will learn to sleep on their backs!
- Parents should talk about safe sleeping with everyone that takes care of their baby.
- Babies should always sleep in an area with no smoke.
- Offer a pacifier until the baby is one-year-old using the following steps:
  - The pacifier (never a bottle) should be used when placing the baby down to sleep.
  - The pacifier should not be put back in the baby's mouth if it falls out after the baby falls asleep.
  - If the baby does not want the pacifier, do not force it.
  - If breastfeeding, do not use a pacifier until the baby is one-month-old.
- Always hold the bottle when feeding, since propping a bottle up can cause the baby to choke and possibly die.

**References:**

**American Academy of Pediatrics**

<http://www.aap.org/healthtopics/Sleep.cfm>

**The Canadian Foundation for the Study of Infant Deaths**

<http://www.sidscanada.org/steps/backtosleep.htm>

**Centers for Disease Control and Prevention**

<http://www.cdc.gov/SIDS/SUID.htm>

**Florida Department of Health.** Fetal and Infant Deaths (2007). *Florida Vital Statistics Annual Report*.

<http://www.flpublichealth.com/VSBOOK/VSBOOK.aspx>

**Florida Department of Health,** Maternal and Child Health SIDS Training: "Safe Sleep for Infants."

<http://www.doh.state.fl.us/family/mch/training/sids/sids.html>

**Food and Nutrition Service, United States Department of Agriculture.** *Feeding Infants: A Guide for Use in the Child Nutrition Programs*. (July 2002). Chapter 5, pg. 34.

<http://www.fns.usda.gov/TN/Resources/feedinginfants-ch5.pdf>

**Kendall, Callaghan, Lock, Mahoney, Payne, and Verrier.** (2005) "Association Between Pacifier Use and Breast-feeding, Sudden Infant Death Syndrome, Infection and Dental Malocclusion." *International Journal of Evidence-Based Healthcare* 3(6)

**Moon, Calabrese, and Aird.** (2008) "Reducing the Risk of Sudden Infant Death Syndrome in Child Care and Changing Provider Practices: Lessons Learned From a Demonstration Project" *Pediatrics*. Volume 122; pp.788-798

**Prevent Child Abuse Florida.** *2008 Parent Resource Booklet*.

**Scheers, Rutherford, and Kemp.** (2003) "Where Should Infants Sleep? A Comparison of Risk for Suffocation of Infants Sleeping in Cribs, Adult Beds, and Other Sleeping Locations." *Pediatrics*. Vol. 112.4; pp. 883-889.

<http://pediatrics.aappublications.org/content/vol112/issue4/index.shtml>

## Coping with Crying

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### **Facts:**

- Shaken Baby Syndrome is completely preventable.
- The Florida Child Abuse Death Review Team found that one of the leading causes of children being shaken or beaten to death is crying.
- Every year an estimated 1,600 children are diagnosed with Shaken Baby Syndrome; 25% of these children will die, while 60% sustain permanent lifelong disabilities. The rest have subtle problems.
- Between 60-66% of the perpetrators in fatal Shaken Baby Syndrome cases are male.
- Research on normal infant development shows that early crying, though frustrating for caregivers, is a part of normal development.
- It is normal for all babies to go through stages of crying.
- Babies will often continue to cry even when someone is trying to comfort them.
- The average newborn cries between one and three hours a day.
- Some children cry more than others. In the past, babies that cried the most were referred to as having “colic.” Researchers now believe this is just one end of the normal range of infant crying.
- Crying usually starts a few weeks after birth, peaks at about six weeks of age and usually improves by the time the baby is 3 to 5-months-old.
- Signs and symptoms of normal crying:
  - Predictable, recurring crying episodes
  - Activity such as fist clenching, tensing up or thrashing around
  - Intense crying that may be impossible to stop through comforting the baby

### **Tips:**

- A plan of action should be prepared to deal with stressful situations.
- Allowing a baby to cry for awhile sometimes is okay if all their needs have been met.
- Parents should educate anyone caring for their child (including spouses, grandparents, siblings, child care providers) on the dangers of shaking a child.
- Parents should also remind any caregivers that it is okay to call for help when they need it.
- If a parent or caregiver knows or suspects a child has been shaken, they should:
  - Immediately call 911, because immediate treatment may prevent serious permanent damage, life threatening injuries or death.
  - Tell the medical personnel that the parent knows (or suspects) that the child has been shaken. Without this knowledge, the doctor may spend precious time looking for other causes of illness or problems.
- **If a baby is crying, parents/caregivers should try:**
  - Feeding the baby: Newborns need to eat every 2 to 4 hours
  - Burping the baby
  - Adding or removing clothes: Babies should be dressed with the same number of layers as adults.
  - Changing the baby’s diaper

- Removing pins, zippers or other items that could be hurting the baby.
- Checking the baby's temperature. If over 100 degrees, call the pediatrician.
- Dimming the lights and providing the baby with quiet time. Some babies can become over-stimulated by light and/or noise.
- **If the parent/caregiver has checked all of the above and the baby still cries, try:**
  - Gently rocking the baby
  - Softly patting the baby on the back
  - Singing or talking softly to the baby
  - Playing soft music
  - Taking the baby for a walk in a stroller
  - Giving the baby a warm bath
  - Constant background sound
  - Gently massage the baby, especially the tummy
  - For breastfeeding mothers, experiment with eliminating foods such as cow's milk, caffeinated drinks and vegetables such as cabbage and broccoli..
  - Changing the type of bottle or nipple on the bottle.
  - Offering a pacifier, if the baby is at least one month old.

**If nothing seems to work and the parent is concerned, they should call the baby's medical provider for advice.**

- **If the parent/caregiver becomes frustrated, they should:**
  - Place the baby in a safe place in order to take a break for a few minutes.
  - Call a good friend or Florida's free and confidential parent helpline:  
1-800-FLA-LOVE
  - Take a deep breath and count to 10
  - Listen to some music
  - Exercise
  - Remember the crying will come to an end
  - No matter how mad, caregivers should never shake a baby.

**References:**

**National Center on Shaken Baby Syndrome**

<http://www.dontshake.com>

**Florida Child Abuse Death Review Annual Report**, December, 2005.

**Alexander, Randell, M.D., Ph.D.**, Statewide Medical Director, Child Protection Team; International Advisory Board Member for the National Center on Shaken Baby Syndrome, October, 2006.

**Mayo Foundation for Medical Education and Research**

<http://www.mayoclinic.com/health/colic/DS00058/DSECTION=1>

**Prevent Child Abuse Florida, The Ounce of Prevention Fund of Florida and Florida Department of Children and Families.** Winds of Change Parenting Today 2009 Parent Resource Booklet.

**American Academy of Pediatrics**

<http://www.aap.org/healthtopics/childabuse.cfm>

## Choosing Caregivers

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### **Facts:**

Experts caution that older siblings should not be left to care for younger siblings until the age 15 or older.

### **Tips:**

- Careful consideration should be given to who watches or supervises your child at any time.
- It is recommended that all caregivers know infant/child CPR.
- Parents should educate anyone caring for their child (including spouses, grandparents, siblings, child care providers) on the dangers of shaking a child.
- Parents should also remind caregivers that it is okay to call for help when they need it.
- **Important features to look for in any child care program include:**
  - Supervision – children should be supervised at all times, even when sleeping
  - Sanitation – caregivers should wash their hands often, especially after diapering and before handling food and eating.
  - Discipline – discipline should be positive, clear, consistent and fair. Florida law prohibits any form of discipline that is severe, humiliating, frightening or associated with food, rest or toileting. Spanking or any other form of physical punishment is prohibited by all child care personnel.
  - Safety – toxic substances and medications should be clearly labeled and stored out of child’s reach. Caregivers should be trained in first aid and CPR. The child care location should be free of radon, lead and asbestos. Indoor and outdoor play areas should be inspected regularly for safety hazards.
  - Responsiveness of the caregiver – caring staff should adapt their approach to meet each child’s needs.
  - Appropriateness of the learning activities – activities should be appropriate to the child’s age and stage of development.
  - Ratio of children to adults – good staff to children ratios allow for individual attention and help build strong relationships with caring, consistent adults. Florida Statutes require child care providers not exceed the following staff to child ratios (by age of child):
    - 0-12 months.....1 to 4
    - 12-23 months.....1 to 6
    - 24-35 months.....1 to 11
    - 36-47 months.....1 to 15
    - 48-59 months.....1 to 20
    - 60 months+.....1 to 25
- **Here is a checklist of things to consider before a parent leaves a child with someone:**
  - Meet the caregiver and check references in advance.
  - It is best if the caregiver has had first aid training and knows infant/child CPR.

- Be sure the caregiver is mature enough to handle common emergencies.
- Have the caregiver spend time with the family before leaving, to meet the children and learn their routines.
- Show the caregiver around the house. Point out fire escape routes and potential problem areas.
- Discuss the child's feeding, bathing and sleeping arrangements with the caregiver.
- Tell the caregiver of any allergies or specific needs the children have.
- Show the caregiver where emergency supplies can be found including a flashlight and first aid supplies.
- Provide the caregiver with contact information and when the parent will return.
- Post the home address, phone number and emergency numbers near the phone.

**Reference:**

**Florida Statutes (Online Sunshine)**

[http://www.leg.state.fl.us/statutes/index.cfm?mode=View%20Statutes&SubMenu=1&App\\_mode=Display\\_Statute&Search\\_String=child+care&URL=CH0402/Sec305.HTM](http://www.leg.state.fl.us/statutes/index.cfm?mode=View%20Statutes&SubMenu=1&App_mode=Display_Statute&Search_String=child+care&URL=CH0402/Sec305.HTM)

**American Academy of Pediatrics**

<http://www.aap.org/healthtopics/safety.cfm>

**Prevent Child Abuse Florida, The Ounce of Prevention Fund of Florida and Florida Department of Children and Families.** Winds of Change Parenting Today 2009 Parent Resource Booklet

## Outdoor Water Safety

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### **Facts:**

- In recent years, unintentional drowning was the leading cause of death for 1 to 4-year-olds in Florida. For this age group, this rate is the highest of any state in the nation and 3 times the national average.
- Most drowning incidents occur in pools, but young children can drown in as little as one inch of water.
- Most childhood drowning deaths occur when the caregiver becomes distracted by the telephone, doorbell or chores around the home.
- Child drowning is silent. Coughs or splashing may not even be heard.
- Each year children drown in swimming pools, buckets, coolers, ponds, ditches, fountains, hot tubs, pet water bowls and wading pools.

### **Tips:**

- Designate someone to watch the children around water and that person must promise to do nothing other than supervise the children (not talking on the phone or to others). If that person has something else to do, he/she should designate another supervisor to take over.
- Install alarms on all doors leading outside so that it will sound if a child has opened a door.
- Ensure there are barriers to areas with water and that locks/latches are out of the reach of children.
- Learn to swim (if you don't know how) and teach children to swim.
- Never rely on flotation devices or a child's ability to swim. Do not use air-filled swimming aids (such as water wings) in place of personal flotation devices (life preservers).
- Children must always be supervised by an adult when in or around water.
- Empty all buckets and coolers.
- If possible, learn infant/child first aid and CPR.

### **References:**

**Florida Department of Health, Office of Injury Prevention**

<http://www.doh.state.fl.us/workforce/InjuryPrevention/index.html>

**Keep Watch**

<http://www.keepwatch.com.au>

**Safe Kids Worldwide**

[http://www.usa.safekids.org/tier3\\_cd\\_2c.cfm?content\\_item\\_id=19010&folder\\_id=540](http://www.usa.safekids.org/tier3_cd_2c.cfm?content_item_id=19010&folder_id=540)

## Bathroom Safety

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### **Facts:**

- The combination of water, medications and electrical appliances makes bathrooms particularly dangerous for children.
- Young children can drown in as little as one inch of water.
- It is estimated that 30 children, each year, drown in buckets containing water that were used for mopping floors and other chores.
- More than 10% of all childhood drownings occur in bathtubs.
- Among children ages 4 and under hospitalized for burn-related injuries, it is estimated that 65% are treated for scald burns.

### **Tips:**

- Safe storage of supplies, constant adult supervision around water and swift cleaning of slick surfaces should be common practice to help reduce the risk of some home injuries.
- Never leave buckets of water unattended.
- Keep trash cans out of the reach of children.
- Keep young children out of the bathroom unless they are closely watched.
- Teach others in the home to keep the bathroom door closed.
- Install a hook-and-eye latch or doorknob cover on the outside of the door.
- Infant bath seats or supporting rings placed in the sink or bathtub are not a substitute for adult supervision.
- Lower the thermostat on your water heater so that the temperature at the tap is less than 120 degrees Fahrenheit to prevent scalding.
- Test the temperature of bath water with your forearm or the back of your hand before placing your child in the water.
- The Home Safety Council advises families to follow these steps to help avoid falls, poisoning, burns and drowning dangers:
  - Install grab bars in bath and shower stalls. Don't use towel racks or wall-mounted soap dishes as grab bars; they can easily come loose, causing a fall.
  - Use a non-slip mat or install adhesive safety strips or decals in bathtubs and showers.
  - Keep the bathroom floor clean and promptly wipe up all spills.
  - If you use a bath mat on the floor, choose one that has a non-skid bottom.
  - Lock medicines, cosmetics and cleaning supplies in a secure cabinet.
  - Keep medicines and cleaning products in their original containers with the original labels intact.
  - As children begin to crawl, use toilet seat locks and keep bathroom doors closed.
  - Always stay within an arm's reach of young children during bath time. Never allow older children to supervise.

**References:**

**Home Safety Council**

[http://www.homesafetycouncil.org/safety\\_guide/sg\\_bathroom\\_w001.aspx](http://www.homesafetycouncil.org/safety_guide/sg_bathroom_w001.aspx)

**American Academy of Pediatrics**

<http://www.aap.org/healthtopics/safety.cfm>

**Safe Kids Worldwide**

[http://www.usa.safekids.org/tier3\\_cd\\_2c.cfm?content\\_item\\_id=19010&folder\\_id=540](http://www.usa.safekids.org/tier3_cd_2c.cfm?content_item_id=19010&folder_id=540)

## Kitchen Safety

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### Facts:

- In the U.S., approximately 2.4 million burn injuries are reported per year, and the age group most frequently admitted to hospitals is children ages newborn to 2-years-old.
- The kitchen is the most frequent area in the home where burn injuries occur for children newborn to 4.
- Scalds are the leading cause of accidental death in the home for children from birth to age 4 and are 40% of the burn injuries for children up to age 14.
- It is estimated that 30 children, each year, drown in buckets containing water that were used for mopping floors and other chores.

### Tips:

- Never leave your child unattended in the kitchen.
- Never leave cooking foods unattended.
- Never leave buckets of water unattended.
- In microwave ovens, use only containers that are made for microwaves. Test food cooked in the microwave for heat and steam before giving it to a child. Never warm a bottle in the microwave. It can heat the liquid unevenly and burn a child.
- Check the temperature of a bottle by shaking a few drops on the wrist. When it feels warm (not hot) on the wrist, it is cool enough to give to a baby.
- Put pans on back burners and turn all pot handles toward the back of the stove.
- Avoid letting appliance cords hang over the side of countertops, where children could pull on them.
- Keep sharp or hot objects away from counter edges.
- Keep children away from the floor by the stove when cooking.
- Parents should not hold a child while eating or drinking hot foods or when cooking.
- Pay particular attention to items sitting on tablecloths or placemats so that young children cannot pull hot food or liquid down and scald themselves.
- Keep stools and chairs away from counters and stove.
- A child safety gate should be used if possible, in the doorway to keep children out of the kitchen completely when a parent is in another room.

### References:

#### **Burn Free**

[http://www.burnfree.com/p\\_pages.asp?page=burnfacts](http://www.burnfree.com/p_pages.asp?page=burnfacts)

#### **American Academy of Pediatrics**

<http://www.aap.org/healthtopics/safety.cfm>

#### **About**

[http://pediatrics.about.com/od/bottlefeedingtips/a/04\\_bottle\\_fding.htm](http://pediatrics.about.com/od/bottlefeedingtips/a/04_bottle_fding.htm)

#### **Safe Kids Worldwide**

[http://www.usa.safekids.org/tier3\\_cd\\_2c.cfm?content\\_item\\_id=19010&folder\\_id=540](http://www.usa.safekids.org/tier3_cd_2c.cfm?content_item_id=19010&folder_id=540)

## Choking, Suffocating and Strangling

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### **Facts:**

- Airway obstruction (including choking, suffocation and strangulation) is the leading cause of unintentional injury-related deaths in children under the age of 1 in the United States.
- One child in the U.S dies from choking every 5 days (two-thirds are under the age of 1) and more than 10,000 children are taken to hospital emergency rooms for related injuries every year.
- Any food that is round and firm can pose a choking hazard to a child.
- The Consumer Product Safety Commission (CPSC) reports that each year over 150,000 children in the U.S. are seriously injured by toys.
- Toy choking is the major cause of toy-related injuries for children ages 6-months to 2 years of age.
- Children ages 4 and under accounted for 88% of deaths and nearly 80% of emergency room visits for airway obstruction injuries.
- Children have died from entanglement of clothing drawstrings, most often hood or neck drawstrings. More than half of drawstring incidents involved playground slides.
- Children can become entrapped and strangle in openings big enough for parts of their bodies, but too small for their heads. These include spaces in bunk beds, cribs, playground equipment, strollers and high chairs.

### **Tips:**

- Make sure children are sitting upright when eating and that they chew and swallow their foods before speaking or laughing.
- Never leave small children unattended while they are eating.
- If possible, learn infant/child first aid and CPR.
- Always supervise children while they eat and play.
- Ensure that children play with age-appropriate toys.
- Remove all drawstrings from children's clothing.
- Do not allow children under the age of 6 to sleep on the top bunk of a bunk bed.
- Be aware that balloons pose a choking risk to children of any age.
- Be aware of older children's actions. Many choking incidents occur when older brothers or sisters give dangerous foods, toys or small objects to a younger child.
- Follow the age recommendations on toy packages. Age guidelines reflect the safety of a toy based on any possible choking hazard as well as the child's physical and mental abilities at various ages.
- Check under furniture and between cushions for small items that children could find and put in their mouths.
- Do not let infants and young children play with coins.
- The following is a list of some of the food items to avoid:
  - Hot dogs
  - Nuts and seeds
  - Grapes or chunks of fruit

- Chunks of cheese or meat
- Raw veggies
- Popcorn
- Hard and/or sticky candy
- Chunks of peanut butter
- Chewing gum
- Marshmallows
- Provide a safe environment by keeping the following list of items away from infants and young children:
  - Latex balloons
  - Coins
  - Marbles
  - Toys with small parts
  - Toys that can be compressed to fit entirely into a child's mouth
  - Small balls
  - Pen or marker caps
  - Small button-type batteries
  - Medicine syringes
  - Plastic caps on door stoppers
- Bibs pose a strangulation risk for sleeping babies and should always be removed before the baby goes to sleep.

**References:**

**Safe Kids**

[http://www.usa.safekids.org/content\\_documents/nskw03\\_report.pdf](http://www.usa.safekids.org/content_documents/nskw03_report.pdf)

[http://www.usa.safekids.org/content\\_documents/AOI\\_facts.pdf](http://www.usa.safekids.org/content_documents/AOI_facts.pdf)

**American Academy of Pediatrics**

<http://www.aap.org/healthtopics/safety.cfm>

**Parenting Magazine**

<http://www.parenting.com/parenting/child/article/0,19840,648471,00.html>

**Moon, Calabrese, and Aird.** (2008) "Reducing the Risk of Sudden Infant Death Syndrome in Child Care and Changing Provider Practices: Lessons Learned From a Demonstration Project" *Pediatrics*. Volume 122; pp.788-798

**Additional Resources:**

**Prevent Child Abuse Florida, The Ounce of Prevention Fund of Florida and Florida Department of Children and Families.** Winds of Change Parenting Today 2009 Parent Resource Booklet

## Handling Emergencies

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### **Tips:**

- Children in the following situations should be taken to the emergency room (ER) right away and all symptoms should be reported to the medical personnel:
  - Difficulty with breathing
  - Change in mental status such as unusually sleepy, difficulty in waking, disoriented, confused or not making sense
  - Stiff neck along with fever
  - Rapid heartbeat that won't slow down
  - Severe bleeding or head trauma
  - Accidental ingestion of poisonous substance or medication
  - Fever with rapidly spreading rash
- In case of an emergency, it is important to know the child's medical history - allergies, past illnesses, injuries, surgeries or chronic conditions. Parents should consider writing it down so it is handy if the parent feels flustered in the chaos of an emergency. Also, making a written record readily available at home will allow anyone caring for the child - such as a babysitter - to provide it if the child is taken to the ER. The medical history should include:
  - Medications the child is taking
  - Allergies
  - History of previous hospitalizations
  - Any previous surgeries
  - Illnesses
  - Relevant family history
- When going to the ER because a child has ingested a particular medication or household product, parents should bring whatever was ingested. If the child has swallowed an object, parents should bring an example of that object, if possible.
- Most ERs have some translation services or someone who can help translate. If the parent or caregiver does not speak English fluently, it is recommended that the family bring along a family member or friend who can help translate as well.

### **Reference:**

#### **Kids Health**

<http://www.kidshealth.org>

## Poison Safety

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### Facts:

- More than half of all poison exposures occur in children under the age of 6.
- When children swallow alcohol, they can have seizures, go into a coma or even die.
- There are many types of alcohol in household products such as the alcohol used in mouthwash, facial cleaners, after-shaves, cologne and antibacterial hand cleaners.
- In the past, the American Academy of Pediatrics (AAP) advised parents to keep ipecac syrup, which causes vomiting, on hand for use if a doctor or poison control center recommended it. The AAP changed its policy after concluding that ipecac does a poor job of removing poison from the body. If you have ipecac, dispose of it.

### Tips:

- Store all poisonous household substances out of sight and out of reach. Locked cabinets are best.
- Keep dangerous substances in the containers they came in. This keeps the safety information on the label right with the product. Do not store these products in cups, jars, soft-drink bottles or milk jugs. Children may think they are OK to eat or drink.
- Help keep children safe by storing dangerous substances properly and teaching children about the dangers of poisons around the house.
- Make sure prescription medications come with child-resistant caps and that containers are closed right after using them.
- If a child is unconscious, having convulsions or having difficulty breathing, call 911 immediately or take him or her to the closest hospital emergency room. If a child is conscious, call 1-800-222-1222 which connects callers with the local poison control center. Parent should have the following information ready:
  - The child's age and weight
  - Descriptions of contents and other facts printed on product containers or medicine bottles
  - Time that the poisoning may have occurred
  - Parent's telephone number
- Symptoms of poisoning:
  - Sleepiness even though it's not nap time
  - Inability to follow you with his or her eyes
  - Burns or stains around the mouth
  - Strange-smelling breath
- The Food and Drug Administration (FDA) recommends that over-the-counter (OTC) cough and cold medicines not be used with children under 2 years of age because they can cause serious side effects and even death.

**References:**

**American Academy of Pediatrics**

<http://www.aap.org/healthtopics/safety.cfm>

**Mayo Foundation for Medical Education and Research**

<http://www.mayoclinic.com/health/child-safety/HQ01263>

**US Food and Drug Administration**

[http://www.fda.gov/Cder/drug/advisory/cough\\_cold\\_2008.htm](http://www.fda.gov/Cder/drug/advisory/cough_cold_2008.htm)

## Gun Safety

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### **Facts:**

- Unintentional shootings account for nearly 20% of all firearm-related fatalities among children ages 14 and under, compared with 3% for the entire population.
- Nearly two-thirds of parents with school-age children who keep a gun in the home believe that the firearm is safe from their children. However, one study found that when a gun was in the home, 75 to 80% of first and second graders knew where the gun was kept.
- Before the age of 8, few children can reliably distinguish between real and toy guns or fully understand the consequences of their actions. One study found that half of boys ages 8 to 12 who found a real handgun were unsure whether or not it was a toy.
- Children as young as age 3 are strong enough to pull the trigger of many handguns available in the United States.
- **Florida Statute Title XLVI:**  
**790.174 Safe storage of firearms required.**  
(1) A person who stores or leaves, on a premise under his or her control, a loaded firearm, as defined in s. 790.001, and who knows or reasonably should know that a minor is likely to gain access to the firearm without the lawful permission of the minor's parent or the person having charge of the minor, or without the supervision required by law, shall keep the firearm in a securely locked box or container or in a location which a reasonable person would believe to be secure or shall secure it with a trigger lock, except when the person is carrying the firearm on his or her body or within such close proximity thereto that he or she can retrieve and use it as easily and quickly as if he or she carried it on his or her body.  
(2) It is a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083, if a person violates subsection (1) by failing to store or leave a firearm in the required manner and as a result thereof a minor gains access to the firearm, without the lawful permission of the minor's parent or the person having charge of the minor, and possesses or exhibits it, without the supervision required by law.

### **Tips:**

- **Guns and Pretend Play:** Whether parents allow their children to have a toy gun is a personal decision, as is how to respond to a child's pretend shooting action during the course of play. Keep in mind that even if children are not allowed to have a toy gun, a child's friend may have them. So it is wise to explain to all children that real guns (unlike toy guns or the guns shown on TV, in movies, or in video games) can seriously injure or even kill a person.
- The National Rifle Association (NRA) recommends the following steps be taught to children, in case he or she comes into contact with a gun:
  - Stop.
  - Don't touch.
  - Leave the area.
  - Tell an adult.

- It's particularly important that children leave the area where the gun is located to avoid being harmed by another person who doesn't know not to touch it.
- It's also important for children to understand the importance of telling an adult about a gun that's been found.
- If there is a gun in the home:
  - Take the ammunition out of the gun.
  - Lock the gun and keep it out of reach of children.
  - Lock the ammunition and store it apart from the gun.
  - Store the keys for the gun and the ammunition in a different area from where you store household keys. Keep the keys out of the reach of children.
  - Lock up gun-cleaning supplies, which are often poisonous.
- If a parent has a gun or has found a gun and wants to dispose of it, the parent should call the local police station. Laws differ between states, but generally, the firearm will be checked to ensure it was not part of a criminal investigation and then it will be destroyed.

**References:**

**Insurance Information Institute**

[www.iii.org](http://www.iii.org)

**Centers for Disease Control**

[www.cdc.gov](http://www.cdc.gov)

**Safe Kids Worldwide**

[www.safekids.org](http://www.safekids.org)

**Home Safety Council**

[www.homesafetycouncil.org](http://www.homesafetycouncil.org)

**Children's Hospital of Pittsburgh**

[www.chp.edu](http://www.chp.edu)

**National Rifle Association**

[www.nra.org](http://www.nra.org)

**Florida Statutes (Online Sunshine)**

[http://www.leg.state.fl.us/Statutes/index.cfm?App\\_mode=Display\\_Statute&Search\\_String=&URL=Ch0790/SEC174.HTM&Title=->2006->Ch0790->Section%20174#0790.174](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=Ch0790/SEC174.HTM&Title=->2006->Ch0790->Section%20174#0790.174)

## Outdoor Play

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### **Facts:**

- Playground injuries are the leading cause of injury to children in childcare and to children ages 5 to 14 in schools.
- Lack of supervision is associated with 40% of playground injuries. A recent study found that children play without adult supervision more often on school playground (32 % of the time) than playgrounds in parks (22 %) or childcare centers (5 %).
- The leading cause of playground equipment-related fatalities is strangulation, and the majority of these deaths occur on home playgrounds.
- According to the Insurance Information Institute, backyard grilling accidents result in more than 2,000 fires, 300 grill-related injuries and 30 or more deaths in the United States each year.

### **Tips:**

- Check playground equipment for signs of deterioration or corrosion, including rust, chipped paint, splitting or cracked plastic components or loose splinters.
- Slides and platforms for climbing equipment should not exceed heights of 6 feet for school-age children or 4 feet for pre-school children.
- Beware of entrapment or entanglement hazards. A child's head can be trapped in openings between 3.5 and 9 inches wide.
- Watch for possible tripping hazards such as rocks and roots. Clear this debris from your child's play area.
- Always supervise children when they are using playground equipment.
- Clear sidewalk and pathways of toys and clutter and repair cracked, chipped surfaces.
- Never apply charcoal lighter fluid after charcoal has been lit. The fire may return into the fluid container and explode.
- Do not allow children to play near the grill equipment until it is completely cooled.
- Keep grills at least 3 feet away from other objects including the house and any shrubs.
- Never bring a barbecue grill indoors, or into any unventilated space. This is both a fire and carbon monoxide poisoning hazard.
- Keep children inside the home while mowing the lawn or using other dangerous tools.
- Fill the mower with gasoline before starting and only refill after it has completely cooled down.
- Before mowing prepare area and remove all rocks, toys and twigs-anything that could be thrown by the equipment.
- Never give a child or anyone a ride on the lawnmower.
- Refuel gasoline-powered equipment outside, away from cigarettes and other sparks and flames.
- Clean up spills promptly.
- Store automotive fluids and pesticides outside, in their original containers and out of the reach of children (preferably in a locked cabinet).
- Use gasoline as a motor fuel only.
- Use gasoline outside.

- Store gasoline in small amounts and in an approved container.
- Keep all garden tools out of children's reach and store them with tines, blades or spikes pointing downward.
- Ladders should be stored at all times, when not being used.
- Children should not cross the street alone if younger than age 10.
- Children should never play in the street.
- Children should never play with a ball near the street, since children may chase the ball if it rolls into the street.
- Always try to walk on paths or sidewalks. If there are no sidewalks or paths, walk facing traffic.
- Look both ways for danger before and while crossing the street.
- When crossing, walk, do not run, into the street.
- Dress in bright colors or wear retro-reflective materials.

**References:**

**Insurance Information Institute**

[www.iii.org](http://www.iii.org)

**Centers for Disease Control**

[www.cdc.gov](http://www.cdc.gov)

**National Safe Kids Campaign**

[www.safekids.org](http://www.safekids.org)

**Home Safety Council**

[www.homesafetycouncil.org](http://www.homesafetycouncil.org)

**Children's Hospital of Pittsburgh**

[www.chp.edu](http://www.chp.edu)

## Pet Safety

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### **Facts:**

- Infants and children less than 5-years-old are more likely than most people to get diseases from animals. This is because young children often touch surfaces that may be contaminated with animal feces (stool), and young children like to put their hands in their mouths.
- For some animal diseases, young children are more likely than others to get very sick.
- Children are also 3 times more likely to be dog bite victims than adults. The majority of dog attacks (61%) happen at home or in a familiar place.
- The vast majority of biting dogs (77%) belong to the victim's family or friend.

### **Tips:**

- Children should always be supervised around animals.
- Proper hand washing should be practiced after handling pets. Children's hands should be washed thoroughly with running water and soap.
- Children should not be allowed to kiss pets or to put their hands or other objects into their mouths after handling animals.
- Clean up animal accidents immediately and wash the area thoroughly.
- Keep cat litter well out of reach of children. Pregnant women should also exercise caution when changing litter boxes since a serious disease called Toxoplasmosis can cause health problems.
- Don't let pets sleep with children.
- Make sure dogs receive rabies vaccinations and that they are de-fleaed frequently.
- The Centers for Disease Control (CDC) recommends that infants and children under 5- years-old avoid contact with the following animals:
  - Reptiles (lizards, snakes, and turtles)
  - Amphibians (frogs, toads, newts, and salamanders)
  - Baby chicks
  - Ducklings
  - Petting zoos
- Reptiles, amphibians, baby chicks and ducklings can carry salmonellosis which causes diarrhea, vomiting, muscle ache, headache, rash, fevers or cough.

### **References:**

**Centers for Disease Control**

<http://www.cdc.gov/>

**Canadian Food Inspection Agency**

<http://www.inspection.gc.ca/>

## Fire Safety

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### **Facts:**

- Children of all ages set over 35,000 fires annually. Approximately 8,000 of those fires are set in homes.
- Children make up 15-20% of all fire deaths.

### **Tips:**

- Install smoke alarms on every level of the home.
- Familiarize children with the sound of the smoke alarm.
- Test the smoke alarm each month and replace the battery at least once per year.
- If parents keep the door of the baby's bedroom closed, there should be a working smoke alarm in the room and parents should use a baby monitor to hear when the alarm sounds.
- Replace the smoke alarm every 10 years, or as recommended by the manufacturer.
- Matches, lighters and other heat sources are the leading cause of fire deaths for children. Never underestimate a child's curiosity about fire, nor their ability to strike matches or start a lighter.
- Store matches and lighters out of children's reach and sight, preferably in a locked cabinet.
- Remember, even child-resistant lighters are not childproof and should be stored securely as well.
- When a child is curious about fire or has been playing with fire, calmly and firmly explain that matches and lighters are tools for only adults to use carefully.
- In addition, instruct toddlers to tell an adult when they find a match or lighter.
- Never use matches or lighters as amusement for children. They may imitate these actions.
- Children as young as 3-years-old can follow a fire escape plan they have practiced often. Yet, many families don't have detailed escape plans and those that do usually don't practice them.
- Parents should draw a basic diagram of the home, marking all windows and doors, and plan 2 routes of escape out of each room. Consider various fire scenarios when creating the plan and develop actions for safe escape in each case.
- Remember to plan for each member of the family, including babies and toddlers who may be unable to escape on their own.
- Keep exits clear of debris and toys.
- Keep the child's bedroom door closed. If a hallway fire occurs, a closed door may hinder the smoke from overpowering the baby or toddler, giving firefighters extra time to rescue.
- Teach toddlers not to hide from firefighters. Their uniforms can be scary in times of crisis. Teach children that firefighters are there to help in an emergency.
- Teach children how to crawl under the smoke to reduce smoke inhalation.
- Also, teach children how to touch closed doors to see if they are hot before opening. If so, use an alternate escape route.

- Have a safe meeting place outside the home and teach children never to go back inside.

**Reference:**

**US Department of Homeland Security/U.S. Fire Administration**

<http://www.usfa.dhs.gov/safety/>

**Additional Resources:**

**U.S. Fire Administration** “Prepare. Practice. Prevent the Unthinkable. A Fire Safety Campaign for Babies and Toddlers.” (Free posters, videos, brochures, etc.)

<http://www.usfaparents.gov/materials/>

## Car Safety

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### **Facts on hypothermia (heat stroke) in children:**

- The total number of hyperthermia (heat stroke) deaths of children left in cars, 1998-2004 is 230 compared to the number of hurricane deaths in the U.S, 1998-2004: 178
- In a study where the circumstances that led to child hyperthermia fatalities were examined, the following were contributing factors:
  - 39% - child “forgotten” by caregiver
  - 27% - child playing in unattended vehicle
  - 20% - child intentionally left in vehicle by adult
  - 4% - circumstances unclear
- Even during mild weather, temperatures inside a car can rise to dangerous levels in minutes. When left in a hot car, children’s body temperatures rise much more quickly than adults, often causing permanent injury or death.
- Deaths from hyperthermia have occurred on days when the temperature was relatively mild. (i.e., 70 degrees F).
- Children have also died after becoming trapped in a car they entered without the caregiver’s knowledge.

### **Tips:**

- Parents should **NEVER** leave a child unattended in a motor vehicle, even with the windows down and even if it is just for a minute.
- Parents should always lock the car doors and trunks, even when at home.
- Parents should place a reminder where they can see it before leaving the motor vehicle, so that they do not accidentally leave the child inside. Reminders can be a teddy bear or diaper bag in the front seat, placing a briefcase or purse next to the car seat, or hanging a tag on the rear view mirror. These reminders can save a child’s life.
- Parents should teach children not to play in, on or around cars.
- Keep keys away from children’s reach.
- Use window shades or a light covering over the seat of a parked motor vehicle to keep child safety car seats and safety belts from becoming too hot.
- If a child becomes locked in a car, immediately dial 911.

### **References:**

**Florida Child Abuse Death Review Annual Report**, December, 2008.

**Departments of Geosciences:** Hyperthermia Deaths of Children in Vehicles. Summary Sheet, July 22, 2005.

**Guard, A & Gallagher, S.S.** Heat related deaths to young children in parked cars: an analysis of 171 families\_ U.S., 1995-2002. Injury Prevention 11, 33-37.

**Prevent Child Abuse Florida, The Ounce of Prevention Fund of Florida and Florida Department of Children and Families.** Winds of Change Parenting Today 2009 Parent Resource Booklet

### **Question:**

What safety devices do you use to keep your child(ren) safe while riding in a vehicle?

### **Facts on car safety devices:**

- Florida law states: If a child is 5 years or younger, the person driving the vehicle must provide a crash-tested, federally approved restraint device. For children 3 and under, the restraint device must be a separate carrier or a vehicle manufacturer's integrated child seat. For children ages 4 through 5 years, a separate carrier, an integrated child seat or a seat belt may be used.
- The National Highway Traffic Safety Administration (NHTSA) states: Children who have outgrown child safety seats should be properly restrained in booster seats until they are at least 8-years-old, unless they are 4'9" tall.
- The NHTSA also recommends that all children 12 and under be restrained in the rear seat. Researchers estimate that putting a child in the back seat instead of the front reduces the chance of injury and death by more than 30%, whether or not the car has a passenger air bag.
- In a study conducted for the NHTSA, 73% of the child safety restraints inspected were used incorrectly.
- Child safety seats reduce the risk of fatal injury in infants by 71% and for toddlers by 54% in passenger cars.

### **Tips on Vehicle Safety:**

- Parents should **NEVER** leave a child unattended in a motor vehicle, even with the windows down and even if it is just for a minute.
- Parents should always lock the car doors and trunks, even when at home.
- Parents should place a reminder where they can see it before leaving the motor vehicle, so that they do not accidentally leave the child inside. Reminders can be a teddy bear or diaper bag in the front seat, placing a briefcase or purse next to the car seat, or hanging a tag on the rear view mirror. These reminders can save a child's life.
- Parents should teach children not to play in, on or around cars.
- Keep keys away from children's reach.
- Use window shades/clings or a light covering over the seat of a parked motor vehicle to keep child safety car seats and safety belts from becoming too hot.
- If a child becomes locked in a car, immediately dial 911.

### **Tips on Car Seats for Infants and Toddlers:**

- Use a certified Child Passenger Safety Technician to install the car seat.
- A newborn will need to ride facing the rear of the vehicle in a safety seat reclined halfway back or as instructed by the angle indicator on your car seat. This gives the best protection for the head and neck while keeping the airway open.
- The center of the back seat is the farthest away from a possible side impact, so always try first to install a safety seat there. If the safety seat cannot be firmly secured in the center or there is more than one child in the car, use a side seating position. If there are 2 young children in the family, it may be necessary to separate them (for various behavioral reasons, and particularly if one is a vulnerable newborn) and not use the center seat for either one.

- If a safety seat must be installed in the front seat of a pickup truck, disable the air bag by using the air bag on-off switch. Installing a safety seat in the front seat of any vehicle increases the risk of death to children by more than 30%, so a pickup truck without a back seat is not the safest choice for transporting a child.
- For newborns, placing rolled receiving blankets on each side of the child's body can give support needed by filling the spaces to the sides. Be sure to keep the blankets outside of the harness and out from under the baby. If necessary, place a diaper wedge between the crotch and crotch strap to reduce slumping.
- A child born prematurely may require special testing and different type of safety seat.
- When identifying the best safety seat, look for at least one set of very low harness strap slots, so that the straps come up and over the baby's shoulders.
- There should be nothing added under the baby. Blankets can go over the harness.
- A child can go from a rear-facing to a forward facing seat when he/she is at least 12-months-old and at least 20 pounds. Most convertible safety seats can be used facing the rear up to 30 pounds and a few to 35 pounds. So there is no reason to turn the child forward before the child is 12-months-old and risk spinal injury.
- Do not use an infant-only seat if the child's weight is over the maximum (20-22 pounds) or if her head is within an inch of the top edge of the seat.
- When using a convertible seat rear-facing, make sure the child's head is below the top of the safety seat, so that the head is not exposed to contact with the vehicle interior.

**Tips on Car Seats for Children over 3-years-old:**

- Once children outgrow their forward-facing seats (usually around age 4 and 40 pounds), they should ride in booster seats, in the back seat, until the vehicle seat belts fit properly. Seat belts fit properly when the lap belt lays across the upper thighs and the shoulder belt fits across the chest (usually at age 8 or when they are 4'9" tall).
- If the child is not using a booster, try the simple test below. The child may not yet be ready to use a safety belt without a booster.

**The 5-Step Test:**

1. Does the child sit all the way back against the auto seat?
2. Do the child's knees bend comfortably at the edge of the auto seat?
3. Does the belt cross the shoulder between the neck and arm?
4. Is the lap belt as low as possible, touching the thighs?
5. Can the child stay seated like this for the whole trip?

If the answer is "no" to any of these questions, the child needs a booster seat to make both the shoulder belt and the lap belt fit right for the best crash protection. The child will be more comfortable, too!

- If the car has lap-shoulder belts on the sides only, older children in boosters or belts alone should sit on the side instead of using a lap-only belt in the center. Seat belts are not designed for children. Young children are too small for seat belts and too large for toddler seats. A booster seat raises the child up so that the seat belt fits right and can better protect the child. The shoulder belt should cross the child's chest and rest snugly on the shoulder, and the lap belt should rest low across the pelvis or hip area - never across the stomach area. The child's ears shouldn't be higher than the vehicle's seat back cushion or the back of a high-back booster seat.

- The shoulder belt should never be placed behind a child's back or under the arm. Otherwise, the child could be seriously injured or killed in a crash.
- Replace a booster seat that has been in a crash. The seat might have defects that are not visible.
- The back seat is the safest part of the car for all passengers. Children should ride in the back seat until at least age 13.

**References:**

**National Highway Traffic Safety Administration**

<http://www.nhtsa.dot.gov/>

**Florida Highway Patrol**

<http://www.fhp.state.fl.us/CPS/>

**Florida Statutes (Online Sunshine)**

[http://www.leg.state.fl.us/Statutes/index.cfm?App\\_mode=Display\\_Statute&Search\\_String=&URL=Ch0316/Sec613.HTM](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=Ch0316/Sec613.HTM)

## Stairways/Fall Safety

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### **Facts:**

- Falls account for over 40% of all nonfatal injury hospitalizations in Florida.
- Falls are the leading cause of unintentional injuries to children.
- The majority of fall-related injuries in children ages birth to 5 occur at home.
- Most infant falls are from furniture, stairs or baby walkers.
- Most toddler falls are from windows and balconies.
- Children of all ages are often injured when jumping on furniture or running on slippery surfaces.
- Babies can be injured by rolling off changing tables, beds and sofas.

### **Tips:**

- Use a safety strap with a changing table or use a changing pad to change the baby on the floor.
- Move furniture away from windows.
- Do not rely on window screens to protect a child. Install window guards and secure doors leading to a balcony with child-resistant latches.
- Do not let young children play on fire escapes, high porches/decks or balconies.
- Keep stairs clear. Clutter on the stairs increases the risk of tripping and falling.
- Install safety gates. Block a toddler's access to stairs with safety gates. If putting a safety gate at the top of a staircase, make sure to attach it to the wall.
- Secure area rugs. Use foam carpet padding, double-side tape or a rubber pad under area rugs to keep them from sliding.
- Avoid extension cords. It's easy to trip on extension cords.

### **References:**

**Mayo Foundation for Medical Education and Research**

<http://www.mayoclinic.com/health/child-safety/FL00003>

**Prevent Child Abuse Florida, The Ounce of Prevention Fund of Florida and Florida Department of Children and Families. Winds of Change Parenting Today 2009 Parent Resource Booklet**