



DCF Office of Family Safety Training Bulletin

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DCF Office of Family Safety Training Bulletin:

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This issue, and previous issues of the Family Safety Training Bulletin can be located on the DCF intranet Document Repository at: <http://www.dcf.state.fl.us/~fsp/newpages/repository/repository.shtml#tb> and on the internet at <http://www.dcf.state.fl.us/publications/> and on the Center for the Advancement of Child Welfare Practice website at: <http://centerforchildwelfare.fmhi.usf.edu/>

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PREVENTION CORNER

September is Child Safety Month!

By Johana Hatcher,
Office of Family Safety

Child Passenger Safety Week is September 21-27 this year, and we want to take this opportunity to remind parents, caregivers and child welfare professionals to use child safety seats in the back of their vehicles, and to restrain all children properly, in accordance with their size and age.

According to research by the National Highway Traffic Safety Administration, three out of four child safety seats are improperly installed in vehicles. Often times, adults are completely unaware that they installed a car seat incorrectly, or they have moved their school-age child from a child restraint to a seat belt prematurely, completely skipping the booster seat stage. The research shows that 8,325 lives have been saved by the proper use of child restraints during the past 30 years. In 2006, among children under age 5, an estimated 425 lives were saved by child restraint use. Research shows that child restraints provide the best protection for all children up to age 8, after which seat belts provide the best protection.

For maximum safety, parents, caregivers and child welfare professionals should refer to the following 4 Steps for Kids guidelines for determining which restraint system is best suited to protect children based on their ages and sizes:

1. For the best possible protection keep infants in the back seat, in rear-facing child safety seats, as long as possible up to the height or weight limit of the particular



seat. At a minimum, keep infants rear-facing until at least age 1 and at least 20 pounds.

2. When children outgrow their rear-facing seats (at least age 1 and at least 20 pounds) they should ride in forward-facing child safety seats, in the back seat, until they reach the upper weight or height limit of the particular seat (usually around age 4 and 40 pounds).
3. 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 the children are 4'9" tall).
4. When children outgrow their booster seats, (usually at age 8 or when they are 4'9" tall) they can use the adult seat belts in the back seat, if they fit properly (lap belt lays across the upper thighs and the shoulder belt fits across the chest).

For further information on child passenger safety, please contact Johana Hatcher at: (850) 488-1929, or by e-mail at: Johana_Hatcher@dcf.state.fl.us ■

Notes from the Editor...

As our tribute to the fact that September is Child Safety Month, we are including information on preventing childhood injuries. Also, the week of September 21-27 is Child Passenger Safety Week, and there is very good information on child safety seat usage; please share these materials with the parents and caregivers with whom you work. As always, we appreciate your feedback and ideas for future articles!



PREVENTING CHILDHOOD INJURIES

According to the National Safety Council, the leading cause of death for children between the ages of one and four is unintentional injury, with almost 4,000 fatalities a year. More than 4.5 million American children are injured every year. Leading causes of unintentional childhood injury and death in Florida include falls, drowning, burns and poisoning. The following pages outline steps parents and caregivers can take to help prevent childhood injuries. Childproofing is an on-going task that increases the amount of time it takes for children to get into dangerous situations, but it is no substitute for adult supervision. Adult supervision is the most effective strategy for preventing childhood injuries.

Preventing Childhood Injury from Falls

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. Caregivers should cover sharp furniture corners with padding, use safety gates to block access to stairs and avoid using mobile baby walkers. Babies can be injured by rolling off of furniture such as a changing table, an adult bed or a sofa. Use the safety strap that comes with the changing table or place the changing pad on the floor to change the baby. Always put babies to sleep on their backs in a crib that meets current safety standards. For information on crib safety, visit www.safekids.org or call 1-800-FLA-LOVE (24 hours a day).

Most toddler falls are from windows and balconies. Caregivers should move furniture away from windows to prevent children from climbing to windows. Screens are designed to keep bugs out; they don't keep children in. Caregivers should install window guards and secure balcony doors with child-resistant latches.

Most falls involving older children are from bikes, skateboards, scooters and playground equipment.

- Avoid hard-surfaced play areas. Seek out playgrounds with wood chips, sand or rubber surfaces.
- Insist that children wear a helmet when riding a bicycle—it's the law! Helmets and protective padding will also decrease the risk of injury from falls off scooters or skates/skateboards.

Children of all ages are often injured when jumping on furniture or running on slippery surfaces. These activities should be replaced with more appropriate choices such as playing outside in an environment designed for safe physical activity.

Preventing Childhood Drowning

DROWNING IS THE LEADING CAUSE OF UNINTENTIONAL INJURY-RELATED DEATH FOR CHILDREN AGES ONE TO FOUR.

Most drowning incidents occur in swimming pools; however, young children can drown in less than two inches of water. Pool submersions involving children happen quickly and silently, with most child drowning victims missing from sight for less than 5 minutes.

- Fences, barriers and alarms add an extra layer of protection.
- Install fencing, pool alarms, door locks or other barriers whenever possible.
- Always secure safety covers and barriers to prevent children from gaining access to pools, spas or hot tubs when not in use.
- Never disable an alarm or prop open the gate to a pool barrier.
- Learn to swim and teach children how to swim.



PREVENTING CHILDHOOD INJURIES

- Flotation devices and swimming lessons are not a substitute for adult supervision.
- Remove toys from in and around the pool area, especially riding toys.

Each year children drown in bathtubs, buckets, coolers, ponds, ditches, fountains, hot tubs, toilets, pet water bowls and wading pools.

Most childhood drowning deaths occur when the parent or caregiver becomes distracted by the telephone, doorbell or chores around the home. Children can drown in a matter of seconds. If a child is missing, **check the water first.**

- Children must always be supervised by an adult when playing in or around water.
- Never allow a young child to be responsible for a younger sibling or playmate.
- Empty buckets immediately after use and store them upside down and out of a child's reach.
- Keep toilet seats down and consider using a lock or toilet clip to prevent toddlers from opening the toilet.

Preventing Childhood Poisoning

A poison is any substance that can cause harm to your body. Children can be poisoned by swallowing or inhaling poisons or absorbing poisons through the skin.

Common poisons include:

- Cleaning products
- Cosmetics and personal hygiene products
- Art supplies
- Alcoholic beverages
- Houseplants
- Pesticides
- Lead
- Prescription and over-the-counter medicines
- Overdoses of iron-containing supplements, including pediatric multivitamins
- Carbon monoxide from unvented supplemental heaters



Most unintentional poisonings occur in the home:

- Know which household products are poisonous
- Never leave poisonous products within children's reach
- Keep foods and household products separated
- Keep all products in their original containers
- Do not mix cleaning solutions together
- Always read medicine labels and follow dosage instructions
- Always turn on the light when giving or taking medicine so you can see that you have the right medication and dosage
- Never refer to vitamins or medicine as candy
- Avoid taking medicines in front of children and never drink medicines from the bottle
- Store household products and medications in high cabinets and use child resistant cabinet locks
- Remove poisonous plants from in and around the home
- Teach friends and relatives to keep their medications and other potentially poisonous items out of children's reach.

The Poison Control Information Hotline is just a phone call away: 1-800-222-1222

PREVENTING CHILDHOOD INJURIES

Preventing Childhood Burns

- Keep matches and lighters out of children's reach.
- Avoid using portable heaters in rooms where children play or sleep.
- Never leave children alone in a room with candles, space heaters or a burning fireplace.
- Don't allow children to play around outdoor grills or open fires.
- Install a fire extinguisher in the kitchen.
- Install smoke detectors on every level of your home and outside all sleeping areas.
- Test smoke detectors every month and replace the batteries every six months.
- Practice a fire escape plan with your children and make sure children have a safe way to reach the ground from upper floors, such as a non-combustible escape ladder.

Most burns in children under five are caused by scalding liquids.

- Lower the water heater thermostat to 120° Fahrenheit or below.
- Use a cool-mist humidifier in place of a hot water vaporizer to avoid steam burns and scalds often caused by hot water vaporizers.
- Keep hot items in the center of the table and avoid using a tablecloth because children can pull on the cloth causing hot foods or drinks to fall onto the child.
- While cooking, keep children at least three feet away from the stove, use back burners whenever possible and turn pot handles toward the back of the stove.
- Never leave a child alone in the kitchen when food is cooking.
- Never carry a child and hot liquids at the same time.
- Never warm a baby bottle in the microwave.
- Microwaves heat unevenly and a child may be burned by hot spots.
- Stir and test the temperature of foods before giving them to children.



Not all burns are treated the same way; if your child is burned or scalded, call the child's doctor immediately.



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Prevent Child Abuse
Florida

FAMILY SAFETY MEMOS

July 2008 Memos

The notifications listed below were submitted from the Office of Family Safety to the Regional Directors during July 2008. These notifications can be found on the Network drive in the PDFS Resource Management subfolder entitled "2008 Memos Sent to RDs_CAs_CBCs_SOs". Please note that notifications with attachments are divided into folders by the month in which they were submitted.

These notifications can also be found on the DCF Document Repository website, at <http://eww.dcf.state.fl.us/~fsp/new-pages/repository/repository.shtml#fshead> under the Office of Family Safety, along with information posted by other offices.

Please note that in addition to the following policy memos, a wealth of other information is also available to everyone in

the Knowledge Library of the Center for the Advancement of Child Welfare, located at: <http://centerforchildwelfare.fmhi.usf.edu/>

- July 9 – Child Welfare Professional Certification Requirements under Florida Administrative Code 65C-13
- July 17 – July 2008 "Family Safety Training Bulletin"
- July 18 – Death Review Coordinators Statewide Meeting: August 27, 2008
- July 28 – Auditor General Review – Adoption Assistance: Responses Requested by August 7, 2008
- July 30 – Federal Funding – Reconstruction