

# = Prevent = Child Injury

## **Facilitator Guide** **Parent/Caregiver Child Safety Workshop**



## **Our Team**

- Brock University – Behaviour Health Sciences Research Lab
- County of Oxford – Department of Public Health and Emergency Services
- Kingston, Frontenac and Lennox & Addington Public Health
- Niagara Region Public Health
- Ontario Injury Prevention Resource Centre
- Peterborough County-City Health Unit
- The Regional Municipality of York, Community & Health Services Department, Public Health Branch
- Thunder Bay District Health Unit
- Toronto Public Health

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## **Disclaimer**

The views expressed in this publication are the views of the authors and do not necessarily reflect those of Public Health Ontario or the Ontario Neurotrauma Foundation.



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## Introduction to the Guide

This guide is to support you in providing a Child Safety Workshop to parents and caregivers. The goal of the workshop is to improve the participants' ability to recognize and prevent injuries.

After reading this guide, you will be able to:

- Understand the requirements of each component of the workshop (i.e. preamble, main content/interactive activity and conclusion)
- Teach the **“What? So What? Now What?”** concept to prevent injuries among children ages 0-36 months
- Discuss safety issues as they relate to developmental milestones and how these developments can put a child at risk for injury, specifically falls, burns/scalds and poisonings
- Communicate to parents/caregivers about safety-related concerns in the home setting or be able to refer them to appropriate resources for more information

## Fostering a Positive Workshop Environment

The following are strategies to help you prepare and engage parents/caregivers in conversations about supervision and injury prevention during and outside of the workshop.

### Tone of voice

Providing information and advice to parents/caregivers is better than not providing any at all. However, this information must be delivered using the appropriate tone of voice to be effective and not perceived as judgmental. The recommendations listed below are proven to be effective in all social and economic groups, particularly regarding child safety (Department of Children, Schools and Families, 2009).

DOs	DON'Ts
Treat parents/caregivers as equal partners and present information as reminders.	Be overly authoritative. This can seem critical or judgmental.
Be warm and factual. New and surprising facts or practical tips are usually well-received.	Patronize or talk down to parents/caregivers.
Use every day, plain language.	Use high-level language.

## Establishing a trusting and respectful relationship with parents and/or caregivers

Developing positive relationships with each parent/caregiver is key to sustaining engagement (Child Accident Prevention Trust, 2012). Also, interactive approaches often enhance participant's understanding of the information provided. Interactive approaches include:

- Problem-solving
- Discussions where parents/caregivers contribute from their own experience
- Collaborating together as a team to develop an action plan to overcome the barriers to supervision and/or injury prevention

## About the Workshop

**Workshop:** 30-40 minutes in length

**Target:** For any parents/caregivers with children aged 0-36 months

**Injuries:** Falls, burns/scalds, and poisonings

**Primary Focus:** To develop skills for parents/caregivers to apply “What? So What? Now What?”

### Aim

1. Create an environment for open communication between you and participants
2. Introduce the topic of childhood injury prevention to parents/caregivers
3. Make parents/caregivers aware that injuries are preventable
4. Teach parents/caregivers about “**What? So What? Now What?**” and how it can reduce the risk of their child being injured
5. Have parents/caregivers apply the concept of “**What? So What? Now What?**” in a group discussion that is tailored to the ages of those in attendance
6. Promote the tailored email messaging system that has been designed to further assist parents/caregivers in understanding how to keep their child safe as they meet new developmental milestones

### Preparation

In getting started, you will need to:

- Set a date and time for the workshop
- Promote the workshop around your agency
- Include registration information for parents/caregivers

Review the components of the workshop and tailor activities to match the ages of participant’s child(ren) listed on the registrations. If available prior to the workshop, prepare for the “Child Safety Activity” (Appendix A) by filling in the “What” column with **at least three** examples of developmental milestones tailored towards those who have registered. To help you identify key developmental milestones, refer the What? So What? Now What? Key Messages Chart provided (Appendix B). Make sure to leave some blank copies for parents/caregivers to brainstorm other examples; whether as a group or individually (at home).

On the day of the workshop, allow enough time to set-up all materials and electronic equipment (if applicable). If you have access to PowerPoint (and equipment), feel free to use this method during the facilitation of the workshop. Prepare the PowerPoint prior to the workshop. Use the template that has been created and adapt it as necessary to suit your needs and those in attendance. However, be cautious of how much you rely on the PowerPoint during the workshop. The workshop should maintain the core components and remain as interactive as possible to best facilitate learning. The PowerPoint template is also available at [www.preventchildinjury.ca](http://www.preventchildinjury.ca) under the Professional Login section.

## Materials

- Tables and chairs
- Name tags & markers
- Pens or pencils
- “What? So What? Now What?” handouts for the Child Safety Activity (Appendix A)
- Facilitator Guide for reference if needed
- Computer and internet access (*if applicable*)
- Projector & screen to display PowerPoint (*if applicable*)

## Timelines

Invite parents/caregivers to meet before the workshop begins. This gives them the opportunity to socialize with others in the workshop group and allows for a more comforting and open atmosphere to be established. Food could also be provided for the participants during this time.

Timelines for the actual workshop are as follows:

- Preamble: 5-7 minutes
- Main Content/Interactive Activity: 15-18 minutes
- Conclusion: 5-7 minutes

Consider allowing extra time after the workshop to answer any questions or concerns participants may have.

## Workshop Components

### Preamble: 5-7 minutes

The intent of the preamble is to introduce participants to yourself and set the stage for a positive learning experience. This is the opportunity to provide some background information about injuries and injury prevention. Share with participants the following:

#### Introduction

Welcome all the participants and introduce yourself. Depending on the number of participants, consider inviting them to introduce themselves and state the age of their child(ren). If time allows, maybe ask them which childhood injuries are of most concern to them.

#### What is an injury?

Injuries are defined as all the ways an individual can be physically hurt, impaired, or killed, involving intentional or unintentional damage to the body (Ontario Ministry of Health Promotion, 2007).

#### What are the different types of injuries?

Injuries can be intentional or unintentional, depending on the motive or “intent” to cause harm. Intentional injuries include actions such as self-harm, assault, abuse and homicide. Unintentional injuries can include falls, poisoning, burns, scalds, car crashes, or drowning.

#### Why are injuries common in children?

Injuries occur in children as they develop and explore their surroundings. Their bones, muscles, vision, and balance are still developing. They are learning new skills all the time and don't have the risk management skills that adults have to judge whether or not activities are safe. However, injuries can often be prevented by creating an environment, inside and outside the home, that is safe to explore.

#### Statistics

In Canada (McKay et al, 2011; Fuseli et al, 2011; Smartrisk, 2009):

- In Canada, injury is the leading cause of death for children and accounts for approximately 30% of all deaths in the country
- Injury is also the largest health problem that has the greatest potential of being prevented through the provision of safe, healthy environments
- Furthermore, it is estimated that every month 25 children die from injury in Canada, which is equivalent to one classroom of children dying per month
- While every day, 80 children are hospitalized due to unintentional injuries
- Investing in prevention strategies would decrease the overall cost of injuries. For example, every \$1 spent on prevention education by pediatricians, saves \$10 in injury costs.

In Ontario:

- Household injuries are most common among children zero to four years of age (Peden et al, 2008)

Local

If local stats are available, this is a great time to share them with participants.

### **Leading Ontario Child Injuries**

There are many ways a child can be injured. Children under five years old are most often injured from a fall, scald or burn, or they are poisoned (Ontario Injury Prevention Resource Centre, 2012; Yanchar et al, 2012). Falls can happen from change tables, cribs, furniture, or down stairs. Scalds and burns can happen from spilled coffee or tea, bath water that is too hot, or hot foods. Children can be poisoned by prescription or over the counter medication, vitamins, cleaning supplies, hand sanitizer, or make-up. Other less common injuries also happen and are also important to prevent.

### **The importance of play**

Play is an important part of early child development. Through play, children develop their:

- fine and gross motor skills
- language skills through interactions
- social and emotional skills

The aim of promoting child safety is not to reduce children's physical activity or to prevent them from exploring their environment due to the fear of them getting hurt. Therefore, injury prevention efforts are focused on recognizing and reducing the risks for serious injuries so the child can be kept safe during play or any other situation – not to restrict their movements or reduce their play time.

## **Main Content/Interactive Activity: 15-18 minutes**

The intent of the Main Content/Interactive Activity is to introduce participants to the concept of **“What? So What? Now What?”** as a prevention strategy for child injuries. It comprises of explaining the concept and facilitating a group activity to apply the questions into practice. Share with participants the following:

### **“What? So What? Now What?”**

These are three questions to help participants think about child safety. It helps us identify the new skills a child is developing and determine their risk for injury. Then we can think of ways to keep a child safe.

- What can my child do now?
- So what can hurt my child?
- Now what can I do to keep them safe?

### **What can my child do now?**

Children are always changing and developing new skills. Being able to recognize what they can do based on their stage of development is important when preventing any injury. Therefore, the “What?” question is designed to prompt you to first consider what activities your child can do now or will be doing soon. For example, you identify that your child is starting to roll around. (If you use the Nippissing District Developmental Screens with your families, this is another great resource to share with families to support them in identifying developmental milestones.)

### **So what can hurt my child?**

A child’s risk for injury changes as they develop new motor skills. Being able to identify potential dangers allows you to think ahead and assess your home environment for any possible risks that can affect your child in relation to their newly developed skill. The “So What?” question is designed to prompt you to explore and identify risks for injury. For example, you identify that their child is now at risk for falling from places like change tables and couches because they are starting to roll around.

### **Now what can I do to keep my child safe?**

After new dangers have been identified, it is now time to develop a plan to keep your child safe. Knowing how to prevent these injuries before they happen is the most important step. Therefore, the “Now What?” question is designed to help you find ways to prevent injuries based on your child’s skills and risks. For example, since your child is at risk for falls, placing a hand on your child while they are on a high surface such as a change table, bed, or couch, keeps them from falling off.

“What? So What? Now What?” can assist in the prevention of many childhood injuries. However, for the purposes of this workshop, the main focus will be on falls, burns/scalds and poisonings being that they are the most common injuries in children aged 0-36 months in Ontario (Ministry of Health and Long-Term Care, 2009).

To better understand how “What? So What? Now What?” can be applied to prevent child injuries, discuss the following examples or choose your own example that is representative of the ages of the participants’ children.

What? What can my child do now?	So What? So what can hurt my child?	Now What? Now what can I do to keep my child safe?
My child is starting to roll around.	My child could fall from places like change tables or couches.	I can keep a hand on my baby when placed on any type of furniture.
My child is starting to put things in or near their mouth.	My child could be poisoned if they grabbed a hold of something poisonous.	I can keep any medicine, vitamins, make-up, and cleaning supplies locked up and out of reach.
My child is starting to pull themselves up to stand.	My child could get burned when reaching for hot things on stoves.	I can let my child play on the floor or secure them in their highchair while I prepare meals.

### Interactive Activity (Appendix A and B)

Give each participant the “Child Safety Activity” handout (Appendix A) as well as pens/pencils. There should be at least three skills written in the “What” column based on the ages of the participants’ children. These can be populated in advance based on registration or as a group.

Ask participants to brainstorm answers for the “So What?” and “Now What?” columns based on the “What” column skill. Make sure to work through each example separately to avoid confusion. For the leading injuries of falls, scalds/burns, and poisonings for children ages 0-36 months of age see the “What? So What? Now What? Key Messages Chart” (Appendix B).

If time allows, after working through the three examples of “**What? So What? Now What?**” ask the participants if anyone has another skill they are worried about that they would like to work through as a group. If so, have participants add it to the handout and discuss the risks and prevention strategies as a group. Inform participants that they can take the handout home and fill in more of the boxes as their child continues to develop. This will help participants learn how to use “**What, So What, Now What**” at home.

There are many resources in the community and on the internet on child safety. Many refer to “a child’s level” or “placing things out of reach”. Define these for participants as:

- Child’s level – This is everything a child sees or touches while lying, sitting, standing or climbing based on their stage of development
- Out of reach – This means that a child should not be able to touch anything when reaching, crawling, standing or climbing. Remember that little hands can reach into places that adult hands usually cannot.

## Conclusion: 5-7 Minutes

The intent of the Conclusion is to wrap up the workshop and highlight available community resources. Share with participants the following:

### Places to go for more information

If participants need more information on child safety, encourage families to connect with you or other staff from your agency. Other great sources of information are:

- [www.preventchildinjury.ca](http://www.preventchildinjury.ca)  
This website has information on **What? So What? Now What?** and participants can sign up to receive emails every few months on child safety. The emails are based on the child's date of birth so that they are timed with developmental milestones and use the **What? So What? Now What?** questions as a prompt. Just register with an email address and enter the child's birth date. It is free and you can unsubscribe at any time.
- <http://www.health.gov.on.ca/en/common/system/services/phu/locations.aspx>  
Your local Public Health Unit is another source for more parenting information.
- [www.ndds.ca](http://www.ndds.ca)  
Nippissing District Developmental Screens – free developmental checklists for Ontario parents and caregivers
- [www.parachutecanada.org](http://www.parachutecanada.org)  
Parachute Canada – non-profit national injury prevention organization
- [www.hc-sc.gc.ca/index-eng.ph](http://www.hc-sc.gc.ca/index-eng.ph)  
Health Canada – product safety information as well as information on product recalls
- <http://www.mto.gov.on.ca/english/safety/carseat/choose.shtml>  
Ministry of Transportation – car seats

### Questions

Encourage participants to ask any outstanding question. There is additional child safety information available to support you in having a strong foundation in childhood injury prevention content within Appendix C. Also, you may come across the following:

#### **Q Will my child still be able to play? I want them to be active.**

**A** Yes! Making your home safe helps avoid hazards and is not to stop your child from playing. Play is important for a child's growth and development. These tips are to help make your home safe while your child learns, explores and plays.

**Q If my child has not reached the specific age related milestone, should I be concerned?**

**A** Every child is different. The milestones are general guidelines that are based on what your child may be doing and learning. If you have concerns about your child's growth and development contact your primary care provider.

**Q Is it expensive to make your home safe?**

**A** Most of these safety tips cost little to no money. These messages encourage you to make changes in your home such as moving dangerous objects out of reach and locking up poisonous items. If you are considering making changes to your home, the cost may vary depending on the home safety products that you choose.

**Q How can I find out if my child products are safe?**

**A** To find out if the products you have are safe you can refer to Health Canada's Recalls and Alerts (<http://www.healthycanadians.gc.ca/recall-alert-rappel-avis/index-eng.php>)

**Thank You**

Thank participants for their time in attending the workshop. Make yourself available after the workshop to address and outstanding questions.

## Appendix A: What? So What? Now What? Child Safety Activity

<b>What?</b> What can my child do now?	<b>So What?</b> So what can hurt my child?	<b>Now What?</b> Now what can I do to keep my child safe?

## Appendix B: Developmental Milestones with Children 0-36 Months

The following are examples of developmental milestones for children aged 0-36 months. This table consists mainly of fine and gross motor skill developments; areas that are most applicable to child safety concerns. However, please be aware that social and language developmental milestones are also occurring as children grow. This chart is also accessible at [www.preventchildinjury.ca](http://www.preventchildinjury.ca) under the Professionals Login, Resources tab.

General safety concerns for children		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
Any developmental milestone	Burns/Scalds	Place smoke alarms and carbon monoxide detectors on every level of the home and outside all bedrooms. Change batteries twice a year at daylight saving time so that they are always working.  A child can get third degree burns from hot water in seconds. Reduce tap water temperature on the hot water tank to 49°C (120°F). It will still be hot enough to shower and will protect your child's skin.
Any developmental milestone	Falls	Children can use furniture to climb out the window and fall. Make sure that furniture such as cribs, change tables, or dressers are not placed by a window.
Bring things to mouth	Poisonings	Your child can be poisoned by common items found in the home such as prescriptions, over the counter medicines, vitamins, plants, alcohol, makeup and cleaning supplies. Always keep these items locked up and out of reach.  Post the Ontario Poison Center number by the phone: 1-800-268-9017. Call right away if you think your child has been poisoned.

0-2 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
Can hold head up and begins to push up when lying on tummy  Makes smoother movements with arms and legs (e.g., kicks legs)	Falls	Before your baby can roll over they can wiggle and move their arms and legs. Always keep a hand on your baby when they are on a high surface such as a change table, bed, or couch to keep them from falling off.  Infant car seats are unsteady and can easily fall from high places. Place them on the floor (safest place) and not on the counter, table or other high places.
Makes smoother movements with arms and legs (e.g., kicks legs)	Burns/Scalds	A hot drink can badly burn your baby's skin. Avoid holding your baby and a hot drink at the same time, or put the hot drink in a travel mug with a tight lid.

3-4 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
<p>Pushes down on legs when feet are on a hard surface</p> <p>May be able to roll over from tummy to back</p> <p>When lying on stomach, pushes up to elbows</p>	Falls	<p>Before your baby can roll over they can wiggle and move their arms and legs. Always keep a hand on your baby when they are on a high surface such as a change table, bed, or couch to keep them from falling off.</p> <p>Car seats are unsteady and can easily fall from high places. Place them on the floor (safest place) and not on the counter, table or other high places.</p> <p>If using a baby sling or front carrier, make sure it fits your baby properly. It should support their head and shoulders and have small leg openings, so they can't slip out. If you bend over, hold your baby against you with one hand so they won't fall.</p>
Can hold a toy and shake it and swing at dangling toys	Burns/Scalds	A hot drink can badly burn your baby's skin. Avoid holding your baby and a hot drink at the same time, or put the hot drink in a travel mug with a tight lid.

5-6 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
<p>Rolls over in both directions (front to back, back to front)</p> <p>Begins to sit without support</p> <p>When standing, supports weight on legs and might bounce</p> <p>Rocks back and forth, sometimes crawling backward before moving forward</p>	Falls	<p>Buckle the straps tightly and lock the tray in every time you use a high chair or a kitchen booster seat so your child doesn't fall out</p> <p>Lower the crib mattress before your baby can push up on their hands and knees to prevent them from falling out of the crib</p>
<p>Brings things to mouth</p> <p>Shows curiosity about things and tries to get things that are out of reach</p>	Poisonings	<p>Clean up anything that could harm your baby, such as ashtrays, left over alcoholic drinks, and poisonous plants right away.</p> <p>Everyday things like batteries, magnets or makeup can poison your baby. Keep these items out of reach.</p>

7-9 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
Crawls Pulls up to stand Stands, holding on Can get into sitting position Sits without support	Falls	<p>Once your baby starts to roll, crawl or walk they can easily get to the stairs. Install wall-mounted gates at the top of the stairs and pressure-mounted gates at the bottom of the stairs so they don't fall down.</p> <p>Before your baby can pull to stand in their crib, lower the crib mattress to the lowest position and keep the rails up to prevent them from falling out of the crib.</p> <p>Window screens will not keep your baby from falling through the window. Put quick release guards on all windows above the first floor and keep balcony doors closed and locked.</p>
Puts things in mouth Looks for things they see you hide Pulls up to stand	Poisonings	<p>Visitors may have prescription medication, tobacco or other items in their purses or bags that could poison your child. Make sure to place them off the floor and out of your child's reach.</p> <p>When your baby can pull to a stand they can reach things on tables and shelves. Clean up anything that could harm your baby, such as ashtrays, left over alcoholic drinks, and poisonous plants right away.</p>

10-12 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
May take a few steps without holding on May stand alone	Falls	<p>When your baby starts walking they can quickly get to the stairs. Install sturdy wall-mounted gates at the top of the stairs and pressure-mounted gates at the bottom of the stairs so they don't fall.</p>
Pulls up to stand Walks holding on to furniture ("cruising")	Burns/Scalds	<p>Let your child play on the floor or secured in their highchair while you prepare meals. Playing with pots, spoons, and plastic bowls lets them safely copy what you do, while keeping them away from hot items.</p> <p>Once your baby can stand they can reach hot things on the stove. Make sure to turn pot handles in and use the back burners as much as possible.</p>
Pulls up to stand Walks holding on to furniture ("cruising")	Poisonings	<p>Throw out any poisonous plant in your house or garden. Use this website to figure out if your plants are poisonous: <a href="http://www.ontariopoisoncentre.com/ontariopoisoncentre/customer/plantSafety08.pdf">www.ontariopoisoncentre.com/ontariopoisoncentre/customer/plantSafety08.pdf</a></p>

13-15 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
May walk alone May walk up steps and run May start to climb	Falls	Before your child starts to climb, keep drawers closed and locked with latches. This way they cannot use the drawers to climb onto counter tops or furniture.  Place chairs and stools away from counters or other high places where your child can climb. This way your child won't be able to reach dangerous things on the counter or fall and hurt themselves.
Pulls toys while walking	Burns/Scalds	Your child can be burned if they touch a hot appliance. Keep cords for electrical appliances such as irons, kettles, and hair straighteners out of reach.
Explores things in different ways, like shaking, banging, throwing	Poisonings	There is no such thing as a child proof container. When determined, children can always find a way to get at what is inside. Keep medicine and vitamins locked up and/or out of reach.

16-18 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
May walk alone May walk up steps and run May start to climb	Falls	When your child starts to climb they can pull furniture such as TV's and bookshelves down on top of themselves. Attach TVs and furniture to the wall so they can't tip onto your child.  If your home has a balcony, make sure not to leave any furniture on it that your child could use to climb over the railing and keep the door closed and locked at all times.  Move your child to a toddler bed or mattress on the floor once they can climb out of their crib or become taller than 90 cm (35 inches). Children under the age of 6 years should not sleep or play on the top of a bunk bed.
Walks alone (now more things are in reach of the child)	Burns/Scalds	Always keep lighters and matches locked up and out of reach of children. Teach your child that these are not toys.
Drinks from a cup Eats from a spoon Walks alone (now more things are in reach of the child)	Poisonings	Children can be poisoned by both prescription and over the counter medications, even vitamins. Always keep all medicines and vitamins locked up and out of reach.

19-24 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
<p>Begins to run/jump</p> <p>Climbs onto and down from furniture without help</p> <p>Walks up and down stairs holding on</p>	Falls	<p>Once your child can open or climb over the stair gate it no longer keeps your child away from the stairs. Take down your baby gates when your child is approximately two years old and teach them how to go up and down the stairs safely using the handrail.</p> <p>Jumping on the bed or couch is dangerous if your child falls off. Once your child starts jumping create fun floor games together and teach them to jump on the floor.</p> <p>When playing outside with your child make sure all personal play sets are on a soft surface such as pea gravel, sand or wood chips. It is dangerous for children under 5 to play on anything higher than 5 feet off the ground.</p>
<p>Climbs onto and down furniture without help</p> <p>Stands on tiptoe</p>	Burns/Scalds/ Poisonings	<p>Now that your child can climb and stand on their tip toes, they can touch things that used to be out of reach. Remove anything that could burn, choke or poison your child or lock them up.</p>

25-36 months		
What?	So What?	Now What?
What can my child do now?	So what can hurt my child?	Now What can I do to keep my child safe?
<p>Climbs well</p> <p>Runs easily</p> <p>Hops and skips</p> <p>Pedals a tricycle (3-wheel bike)</p> <p>Walks up and down stairs, one foot on each step</p> <p>Copies adults and friends</p>	Falls	<p>Teach your child to wear a helmet to keep their head safe. Put a fitted helmet on your child every time they ride a tricycle, go sledding or skate.</p> <p>Your child loves to copy what you do. Show them how to go up and down the stairs safely using the handrail.</p> <p>Before your child starts to climb, keep drawers closed and locked with latches. This way they cannot use the drawers to climb onto counter tops or furniture.</p>
<p>Screws and unscrews jar lids or turns door handles</p>	Poisonings	<p>Calling medicine and vitamins candy can make your child think they can eat them anytime. Instead, use the right name for all medicines and vitamins.</p>

## Appendix C: Additional Resources in Preparation for Questions

### Regulated and Unregulated Children's Products

#### Regulated Products for Children

Regulated products are ones that must meet the legislative requirements of the Canada Consumer Product Safety Act before they can be sold or distributed in Canada. These requirements are set out by the government which regulates the manufacturing of the following:

- Baby gates
- Cribs, cradles & bassinets
- Hockey helmets and face protectors
- Playpens (Note: These are regulated for play not sleep)
- Strollers

#### Unregulated Products for Children

Unregulated products are any products in Canada that are not governed by safety rules or regulations before they are advertised and sold for use in Canada. Therefore, discretion should be used when parents/caregivers are considering these products:

- Activity/play centres
- Cupboard locks
- Door knob covers
- Fresh food feeders
- Highchairs
- Jolly jumpers

#### Prohibited Products for Children

Prohibited products are products that are not allowed to be sold, advertised or imported into Canada.

- Baby walkers
- Infant self-feeding devices
- Jequirity beans (red or orange bead-like objects with black ends – from tropical areas)
- Yo-yos with long cords
- Balloon blowing kits
- Relight candles
- Lawn darts with elongated tips

For more information, refer to the Canada Consumer Product Safety Act.

<http://www.hc-sc.gc.ca/cps-spc/legislation/acts-lois/ccpsa-lcspc/index-eng.php>

## Second-Hand Products

If parents/caregivers receive a product second-hand, it is recommended that they use it with caution. An assessment of the product, such as the year, number of owners, appearance, and sturdiness should be completed prior to use. Any product that has passed its expiration date or does not meet current safety standards is unsafe and should not be used.

Health Canada recommends that parents/caregivers do not purchase used products for fear of the product being unsafe or over-used. However, this is seen as a cost-savings measure for parents/caregivers and is common practice. Therefore, recommend that parents/caregivers use their own judgment when considering products that are second-hand and refer them to the resources below if they require additional information on specific products.

### Expiry Dates

Please be aware that some regulated products have expiry dates. These expiry dates serve a purpose and can be identified on the product sticker.

Many are unaware that products, especially car seats, expire. This is due to wear and tear of the product which can make it unsafe for use. Car seats are made of plastic, which over time degrades and warps due to the changing conditions it is exposed to. Car seat expiration dates are based on the date of manufacture and not the date of purchase or first use.

### Checking Recalls

Health Canada also helps protect the public by posting updates on potential or current safety hazards with any consumer product. It is important to advise parents/caregivers to check for recalls, advisories and safety alerts on products in order to keep their child and everyone free from injury.

If a recall does occur, let parents/caregivers know that they need to check online to verify they have the product in question (e.g., model, year, etc.) and should then proceed to follow what is outlined in the manufacturer's instructions. Advise parents/caregivers not to give the product to someone else because if it is unsafe for them, it is unsafe for everyone to use. Make sure to also advise them to dispose of the product in a safe manner.

To stay informed, recommend to parents that they can register for updates about product recalls through the Health Canada website.

For more information, refer to Health Canada:

- Safety of Second Hand Products [http://www.hc-sc.gc.ca/cps-spc/pubs/cons/info\\_secondhand-produits-eng.php](http://www.hc-sc.gc.ca/cps-spc/pubs/cons/info_secondhand-produits-eng.php)
- Recalls and Alerts <http://www.hc-sc.gc.ca/index-eng.php>

## Ways to Inform Parents/Caregivers that Childhood Injuries are Preventable

### Barriers to Childhood Injury Prevention

1. Parental views about injury prevention (e.g., feel it is “just a part of growing up” or other misconceptions)
2. Time pressures
3. Not understanding the real risks
4. Not understanding the stages of childhood development

### Overcoming these Barriers

(Adapted by the Department of Children, Schools and Families, 2009)

1. Small and simple steps can help protect a child from preventable injuries. All they need to know is what the most common and serious risks are, and the small things they can do to avoid them.
2. Many of these steps cost little to no money and can easily fit into busy lives. These include things like using a spill proof lid on their cup of tea or coffee and always strapping their child into their car seat or high chair.
3. Explain that building small steps to safety into their everyday routine means that these habits will become second nature and not forgotten.
4. Help parents/caregivers understand that babies and toddlers often make sudden breakthroughs in their physical development, which can open up new safety hazards around the home. Using the “**What, So What, Now What**”, strategy can help parents/caregivers assess what new skills their child is developing and the steps they should take to guide them in reducing their child’s risk for injury.

### Room by Room Checks

It is important to complete room by room checks to make sure their home is safe for their child. When performing these safety checks, encourage parents/caregivers to follow the steps below:

1. Put yourself at your child’s level
2. Use the “**What, So What, Now What**” saying to help you recognize any hazards or safety concerns
3. Make the necessary changes or adjustments to keep your child safe. Continue to do this for each room in your home; even the basement

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