The challenge

Every year, some two million children – that’s about one in five – are seen at hospital Accident and Emergency Units after suffering an unintentional injury. Around 250 children die each year as a result of accidents. These stark facts give an indication of how great a challenge parents, carers and practitioners face in trying to keep children safe.

There is, however, a good deal about which to be positive. Very many of these injuries are preventable. With education, information and the right equipment, we can make a difference to these unacceptable statistics. Childhood deaths from accidental injuries have consistently fallen over recent years, due to legislation, improved safety standards, education campaigns and better medical care. Attendance at hospital continues to be high, however, and there is no room for complacency.

The Guides

An increasing focus on early years learning, development and care brings new opportunities to safeguard children, to promote their safety, health and well-being, and to support parents, carers and practitioners in their day-to-day work with children in many different settings.

This Guide is one of a series of four publications addressing topics in child safety and injury prevention. They are aimed at anyone involved with the safety or care of children who has the opportunity to promote safety to parents, carers and decision makers, or control the environment where children spend their time.

Each Guide addresses a particular issue related to child safety and focuses particularly on the actual experiences of field workers. The principles behind these Guides are:

- to share the experiences of practitioners with a wider audience so that effective interventions can be publicised and common pitfalls avoided
- to get child safety messages and accident prevention strategies to families on low incomes and those whose first language is not English – two groups who are particularly at risk from accidents

The four Guides in the series are:

- Accidents and child development
- Preventing childhood accidents: Guidance on effective action
- Safety equipment schemes
- Safety in day care and play settings

In addition to these Guidelines, we publish information packs, posters and other resources for professionals working with children and families. We also publish a wide variety of leaflets and booklets aimed at parents and carers themselves. See our website www.capet.org.uk for further information.

Join our mailing list for free and you will receive regular news and information about new awareness campaigns, resources and resource promotions – see page 36.
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Accidental injury in childhood is so common that, sadly, we accept it as an inevitable and unavoidable part of growing up. But while it is impossible to prevent every minor bump and grazed, there is much that can be done to prevent more serious injury if parents, carers and practitioners are aware of the links between accidental injury and a child's physical, intellectual and emotional development.

This guide aims to give practitioners an overview of why injuries to children happen and what can be done to prevent them. It concentrates mainly on providing a clear and straightforward guide to the relationship between child development and accidental injury, in order to widen understanding as to why injuries occur.

We have divided the guide into a child's different stages of development and age. Each section is then sub-divided into:

- Facts and statistics
- Abilities and characteristics
- Types of accidents and safety tips
- Education

It can be difficult to walk the line between keeping children safe from accidental injury and overprotecting them. The Trust has always advocated the child's right to explore his or her surroundings with as little interference from adults as possible. However, we also believe that children have the right to grow up in an environment in which they can test their limits without the risk of serious injury. By understanding the relationship between a child's abilities and the injuries they incur, both practitioners and parents can be better equipped to recognise potential danger and minimise it where possible.

This publication is not intended as a complete guide to injury prevention — that would take several volumes. What we do hope is that it provides a useful backdrop to your work with children and their parents and carers.

A word about age and ability

We have deliberately used developmental stages rather than ages when talking about babies and younger children. Although there are generally accepted age bands when children are likely to reach a certain point in their development e.g. most children have started walking by 12 months, every child is different and will reach the various developmental milestones in their own time.

Children have an uncanny knack of catching their parents and carers out and doing something — whether it is crawling, walking or whatever — before the text books tell you they should be doing it. One of the most common phrases heard from parents after a child has been injured is "I didn’t know she could do that" — whether "that" was crawling for the first time or setting down a bottle to be found under the table by a curious tot.

Children are often different to the age range in which events are supposed to be happening. Take a parent who is told that their baby will not be able to roll over until they are four months old, and is potentially dangerous if that baby manages to roll at three days old and on a changing table at the time. So when we do quote an age or age range, it is only intended as a guide. Please remind parents that they know their child best and they need to be one step ahead in safety at all times.

We have divided each chapter into types of injury. Some of the information and advice given will apply to more than one age or stage — for example, smoke alarms are essential safety devices whatever a child's age — but it will be mentioned in each chapter to which it is applicable to ensure that each section is complete in itself.

* The statistics provided in each chapter came from the Department for Transport, the former Department of Trade and Industry, and the Secretariat Office of the Deputy Prime Minister. For up-to-date statistics, see also at end of Guidelines (page 15).
Facts and statistics

Every year:
- around 22,000 babies under six months are injured in accidents.
- four in five of these accidents happen in the home.

Abilities and characteristics

Very young babies depend utterly on their parents and carers for all their needs. They have absolutely no control over their environment and need an adult to keep them healthy and safe.

New-born babies have:
- very thin skin – some fifteen times thinner than an adult’s.
- very large heads compared to their bodies.
- a skull that is still fusing together, leaving a “soft spot” – the fontanel – on top.
- immature bone development.
- little or no voluntary control over their limited movement.
- the ability to grip an object if it is placed in their hands.
- the ability to lift their heads for two or three seconds.
- the ability to wriggle, kick and flail their arms.

Before babies acquire more deliberate movement such as reaching or rolling, any accidental injury they suffer is generally as a result of someone else’s actions, rather than their own, so it is entirely down to parents and carers to keep babies safe from harm.

By three months, babies may be able to:
- roll over independently when placed on their backs or stomachs (although babies of a few days may wriggle their way over while flailing arms and legs about).
- reach for and grasp an object.

By six months, babies may be able to:
- remain in a sitting position on the floor.
- roll greater distances to get to objects.
- do simple manual tasks such as pushing and pulling.
- start crawling.

Common accidents in close-up and safety tips

Falls

From raised surfaces: Babies can suffer serious injury in falls from comparatively low levels. Even the youngest baby can wriggle his or her way to the edge of a bed or changing table if left unattended. Sometimes the movement is not even that of the baby – in the US recently, a baby suffered a skull fracture after his parents strapped him into his baby car seat and left him on top of a washing machine in mid-cycle. The vibration of the machine moved the car seat far enough to tip the baby off the edge on to the floor.

Many parents use baby-bouncing chairs, but if these are left on a table or work surface even the small movements of a baby could cause the chair to move enough to fall.

Safety tips
- Babies should never be left unattended while on a raised surface.
- Nappy changing is safest done on the floor.
- Baby car seats and bouncy chairs should always be placed on the floor.
**Downstairs** One of the most common ways for a baby of this age to be injured on the stairs is when she is being carried by a parent or carer and they slip or trip. Busy parents will take other objects up and down stairs while carrying their child, leaving no hands free to hold on.

Toys and other objects left on the stairs can also cause falls, as can other children playing on or around the stairs. Children have also been injured when the adult carrying them has tried to climb over the safety gate rather than opening it and tripped.

Young children should not be allowed to carry the baby up or down the stairs.

**Safety tips**
- Stairs should be kept clear of clutter.
- Anyone carrying a baby in child up or down stairs should keep one hand free to hold on.
- Before a baby starts to crawl or climb, a safety gate or barrier is needed at the bottom of the stairs to stop him or her starting to climb the stairs and then falling.
- At the top, the gate or barrier needs to stop a crawling baby getting to the stairs. It is better not to place it directly across the top of the stairs for two reasons:
  - some gates have a bar across the bottom and this can be a tripping hazard. If the gate is at the top of the flight, a trip can lead to a fall down the stairs, which is much worse than simply falling over the bar
  - adults and older children sometimes climb over the barrier or gate rather than opening it. Again, this can lead to a fall down the stairs

It's safer to put the gate or barrier across the landing or even across the baby's bedroom door.

**Suffocation**

**By bedding** Very young babies have limited and involuntary movement and they can be suffocated by clothing, bedding or other material that they are not able to push away. Position him or her in the 'feet to foot' position so that he or she cannot wriggle down under the blankets. Soft padded bedclothes such as pillows and duvets are therefore unsuitable for children under a year old (by this age, children have sufficient movement to push bedding away from their face). There have also been cases of babies suffocating when left unattended on bean bag cushions and pillows outside the cot.

**Safety tips**
- Do not use duvets or pillows for children under the age of one year
- Put babies down to sleep on their backs
- Never leave a baby unattended on a cushion or bean bag.

**Other types of suffocation** Sadly, some babies have been accidentally suffocated by their parents or carers. This usually happens when a parent falls asleep while feeding or just holding a baby. The baby may then become trapped under the adult's body and suffocate. We should emphasise that this is not a common occurrence and many parents and young babies sleep quite happily together in the same bed. However, parents who have been drinking or taking drugs (legal or otherwise), who are particularly tired, or who smoke, should not let the baby sleep in their own bed.

Young babies who have been put down for a sleep on sofas or adult beds next to walls have suffocated when their heads become trapped in gaps between cushions or between the bed and the wall.

Cats, who instinctively head for warm places, have been known to curl up on top of babies, suffocating them. Young children sometimes regard tiny babies as dolls to be dressed or covered up, and this needs to be borne in mind.

**Safety tips**
- Do not sleep with or hold a baby if your health or judgement is impaired
- Avoid leaving babies to sleep on sofas or adult beds
- Use cat nets on prams and cot to deter cats
- Keep an eye on toddlers and young children around the baby.
Choking

Choking is related to suffocation in that it causes an obstruction to breathing. The most common form of choking, whatever the age, is from food or drink. Young babies have automatic sucking instincts, but will only start to learn how to deal with more solid food after a few months. A baby should never be left alone to feed from a propped-up bottle, as they may choke and be unable to push the bottle away.

There is also the possibility of older children trying to "feed" if the baby unsuitable foods such as sweets, peanuts and fruit.

Safety tips

- Always stay with a baby when bottle feeding
- Keep an eye on older children and teach them not to put anything in the baby's mouth
- Keep small objects away from a baby's grasp.

Strangulation

By clothing Regulations have reduced the few risks associated with baby clothing. Ribbons and other ties, which in the past have been as long as the designer wanted them to be, are now restricted to a length which is not long enough to pose a strangulation threat. However, these regulations do not cover home-made clothes such as knitted hats and cardigans. If a long ribbon at the neck of a baby gets caught on the side of a cot, car seat or other item, there is a danger of strangulation. There is also a small danger from collars and neckless catching in a similar way. An related hazard is that of a baby's fingers or toes catching in knitted or nylon clothing. The wool can wind around the digit, cutting off the blood supply which can result in fingers or toes being amputated.

By other ribbons and jewellery Anything placed around the neck of a small baby is potentially hazardous. Necklaces, dummy's on ribbons and other items hung around a baby's neck should always be avoided.

Safety tips

- Always make sure babies' clothing is not too tight around the neck
- Trim ribbons on home-made garments as short as possible
- Keep an eye open for fingers and toes caught in knitted or nylon items
- Never put necklaces or dummy's on ribbons or other threads around a baby's neck
- Never hang things such as bags with cords or strings over a baby's cot.

Burns and scalds

Babies have extremely thin, delicate skin that is easily damaged. They can suffer severe burns and scalds at temperatures that may only sting an adult. Their immature body size also means that a small area of heat or a few drops of boiling water cause a proportionally larger amount of damage. Babies are also unable to move away from the source of heat, so whereas an adult will jump away from a spilt hot drink to avoid further injury, a baby will suffer the full effects.

From hot liquid It has become common practice for parents and carers to heat bottles of milk in microwaves. While this is quick and convenient, the milk is heated unevenly and there may be hot spots in the milk that can scald a baby's mouth. Another potential hazard is if the parent or carer has a hot drink while feeding the baby. A jogged elbow, the baby suddenly flailing its arm, the cup slipping through fingers or someone - including pets - bumping into you could result in serious scalding. Liquid can remain hot enough to scald a baby for at least 15 minutes after boiling - long after it would hurt an adult's skin.

This principle applies to bathing a baby as well. There are many bath thermometers available to buy these days, but the old-fashioned elbow in the water technique is just as effective. A good rule is to run the cold water first, then add the hot to bring it up to a comfortable temperature. The water should not feel either hot or cold.