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Please note that any items in italics are an example of text in the link provided.

February/March 2017

Hello again to all our readers.

Following last month's reference to the Royal College of Paediatrics and Child Health report entitled:

[State of Child Health Report 2017](#)

A colleague forwarded this response in the BMJ (extract below) which may be of interest to you:

We are pleased that one of the under resourced public health areas – accident prevention, was acknowledged as a leading cause of death. Inequality in risk of injury is clear.

For example, children living in the most disadvantaged areas of the country have a 50% higher risk of being burned, scalded or poisoned than those living in the most advantaged areas. However, it has to be noted that in the past much success has occurred in relation to accident prevention and that much more could be done, both in homes and on the roads.

WATSON M C and TILFORD S, 2017

[Re: UK children have “alarming gap” in health between rich and poor, report finds.](#)

British Medical Journal Rapid Response 30th January 2017.

Here at Kid Rapt we are hearing time and time again of lack of funding to provide accident prevention services within Early Years which seems to disregard the need and the evidence.

Alarming rate of Children Centre Closures:

The following article from February 2017 highlights the alarming rate of closures of Children Centres:

The number of children's centres that have been closed or downgraded has increased by more than 100 in the past 10 months, taking the total to 1,130 since 2010.

This means there are now 2,501 official children's centres in England compared to 2010 when there were 3,631 children's centres across the country.

The figures above do not include planned closures for 2017!

http://www.cypnow.co.uk/cyp/news/2003116/childrens-centres-disappear-at-rate-of-10-a-month#163961_20170203024340

Life Chances Strategy and Child Poverty Unit:

Given the connection between risk of injury in childhood and inequality; the following information will also be of interest:

TACT is greatly disappointed by the government's decision to abolish the cross-departmental [child poverty unit](#), and to not publish its' strategy to boost the life chances of the poorest children in the country. It is understood that the government will instead bring forward a social justice green paper in the new-year.

<https://www.tactcare.org.uk/news/tact-disappointed-government-will-not-publish-life-chances-strategy/>

As you know from previous editions of the newsletter – we have worked closely with Luton Public Health on a programme called 'Tubes of Life'.

The programme is about raising awareness of how easily availability of oxygen to a baby can be compromised; often unknowingly.

It highlighted how the position of a baby can affect the 'airway' in a detrimental capacity; including increasingly long lengths of time a baby spends in products such as infant car seats.

The Lullaby Trust then issued a press release on some research Professor Peter Fleming had undertaken in conjunction with The Lullaby Trust on [oxygen level deprivation of babies in car seats](#).

The following article is highlighting other issues which arise from leaving children in this type of product for long periods of time.

A study found strapping toddlers in one position hampers the development of their core strength and balance, making everyday tasks a challenge.

All in all – car seats are for only when necessary (travelling in the car) and there are necessary breaks needed even then to ensure a babies healthy development; mental and physical.

Using a car seat to then attach to a set of wheels for a day shopping or similar, cannot be a sensible choice.

<http://www.express.co.uk/life-style/health/555459/Strapping-babies-into-car-seats-causes-them-health-problems>

A lie flat car seat for very young babies is available.

Although the article below is from 2015, I found it of interest as it gives quite a good insight into how a situation develops when parents are tired and have other siblings, culminating in a new baby being taken into bed with the parents with tragic consequences.

Also of interest is the parent's response to the coroner's verdict.

<http://www.dailymail.co.uk/news/article-3272503/Parents-allow-babies-sleep-bed-risking-lives-Coroner-s-stark-warning-newborn-starved-oxygen-dozing-father.html>

Hot drink accident prevention session plan:

The link below takes you to a training session plan on Hot Drink Scald prevention created by Children in Wales.

<http://www.childreninwales.org.uk/wp-content/uploads/2014/03/Scalds-training-pack-English.pdf>

Hook on Chairs – Portable type of highchair:

I have highlighted the following article from the CPSC in the US as it relates to a product sold in the UK; example [here](#).

The compliance on this type of product is:

BS EN 1272:1998

As you can see, the above standard is long overdue for an update.

The injuries they have experienced in the US include one fatality.

NEISS injury data, staff grouped the incidents into three broad categories:

- Compromised attachment (45%)
- Fall or slip out of the hook-on chair (35%)
- Fall of unknown type (remaining)

For non-NEISS incidents, staff grouped the incidents into six broad categories:

- Compromised attachment (53%)
- Restraint or containment issues (19%)
- Unintended release of seat fabric fastenings (10%)
- Seat fabric separation due to breaking or tearing component (5%)
- Broken structural components (10%)
- Other (remaining)

It would be easy to see how on some examples of the product in the UK market that children (if left unattended) would be able to wriggle or stand and try to get out perhaps trapping a part of their body or even their head which would lead to a high risk situation.

One of the hazards the CPSC cite which led to a recall on one manufacturer was:

A second hazard occurred when the chair detached; children's fingers were able to be caught between the bar and clamping mechanism, posing an amputation hazard.

The CPSC looks at the European Standard mentioned above and hopes to make their standard more stringent using the detailed injury data they have above to ensure safety standards are adequate.

Two of the five reports of injuries involved children's fingers being severely pinched, lacerated, crushed or amputated.

The article below is really interesting as there is so much detail included in it including the proposed test procedure.

https://www.cpsc.gov/s3fs-public/pdfs/blk_media_Notice-of-Proposed-Rulemaking-for-Portable-Hook-On-Chairs.pdf

<http://www.cpsc.gov/en/Newsroom/News-Releases/2016/CPSC-Approves-New-Federal-Standard-for-Portable-Hook-On-Chairs/>

British Burn Association:

I have provided some links below to highlight the activities from Burns Awareness Day in 2015 & 2016.

As this is a collation from the BBA Prevention Committee it provides useful information on what they felt had a positive impact.

They talk about the three 'C's in burn prevention.

Cool – the area

Call – for help

Cover – with cling film

There are some graphics showing examples of the promotional material around the three 'C's.

The Hastag *#beburnsaware* was successful during the campaign and you can still search this now online.

[2015](#)

[2016](#)

[Useful Parents Leaflet BBA](#)

Public Health Matters Blog:

There are some interesting and relevant topics which come up on these blogs on the Public Health website.

For example:

We've produced a [new guide](#) with the [Child Accident Prevention Trust \(CAPT\)](#) that equips all staff who work with children under five to help reduce the number of deaths and injuries – so whether you work for a health service, early years education, play schemes, nurseries or are a childminder, this guide will help you help parents and carers keep their children safe from injuries.

[Preventing Accidents in the Under Fives](#)

There is also information on the [Universal Five Health Visiting Checks](#) which include a reference to safety and prevention.

US Kids in Danger – Newsletters:

The 'Kids in Danger' newsletter is always of interest.

I have provided a link for you below, but I would recommend if you can, to subscribe and receive these direct.

There is some information in this Kids newsletter which is directly relevant to the trend of providing baby boxes both in the US and the UK. As regular readers know, this was discussed in the last edition in relation to the Pro Safe report on permeability in a sleep space for baby.

Recipients of these baby boxes are being given mixed messages if the sleep space provided lacks the ability for air flow as it then has the same risks as a product added to a sleep space. We are not teaching parents about why air flow matters and to ensure it is present to minimise the risk of oxygen depletion and overheating.

I would suggest that the programme could be adapted to provide a breathable bedside crib (with no drop access side).

This article is interesting as it clearly states that these boxes are not supported by American Academy of Paediatrics: The article states:

'The organization acknowledges Finland's low infant mortality rate but points out that the country never collected data on whether the boxes were the reason for this. There are many factors that may contribute to the country's low infant mortality rate: Women receive excellent prenatal care; there is very little smoking in the country; and almost all babies sleep on their backs,'

'Cribs have more air flow than baby boxes, lowering the chances that a baby could overheat in them.'

Patricia Gabbe, M.D., a clinical professor of paediatrics at Ohio State University Wexner Medical Center, tells SELF that she's been analyzing them for a year and can't endorse them just yet. Her hospital provides free pack 'n' plays (portable/travel cots) to lower income families and points out that those are more durable and portable, and have a longer shelf life than a cardboard box. "We feel that until the baby boxes have been researched carefully, we can't support giving them out in place of the pack 'n' plays," she says.

<http://www.self.com/story/what-are-baby-boxes>

Recipients currently of the Baby Boxes have to engage with Baby Box University and complete the course to receive the box.

The same type of programme could be set up for breathable cribs and or travel cot.

Accident prevention could be an integral element of the programme.

http://www.kidsindanger.org/docs/newsletters/pubs_action_2017_s.pdf

Sleepyhead UK – Dock a TOT US:

The two products above have again been featured within the newsletters; however an article I have come across below which reinforces the concerns around parents increased use of these styles of products.

It is not just a suffocation risk; but also a risk of oxygen depletion which can affect healthy brain development and therefore future well being.

The article also highlights what we see here in the UK – marketing and instructions for safe use, which are supplied with the product, often are contradictory.

http://www.slate.com/articles/life/the_kids/2017/03/infant_loungers_bouncers_rockers_and_swings_can_be_unsafe_for_sleeping.html

Bath Seats – false sense of security:

The following article describes how two adults often used to leave their baby and toddler in a bath together and the mother specifically refers to leaving the baby in a bath seat:

‘Had been left in an upstairs bath seat in the couple's home’

The little one 13- months old - was being ‘supervised’ by his two year old sibling.

Bath seats are cited in drowning in the bath often – they offer no real benefit and can lead to a false sense of security by the parents.

<http://www.bbc.co.uk/news/uk-england-hereford-worcester-39482497>

Marketing to parents – no wonder products are used in an unsafe manner!

I want to show you an article on a new product into the marketplace and how this has been marketed which is in total contradiction to safe use.

This is a press release to the UK Nursery Sector and it is clear that the product being used in the manner shown in the release would not be safe. T

Parents are using these products as they are marketed and not as per their instructions for use which usually states that a baby should never be left unsupervised in this product used in this manner. Infact, look at the image – in my link below and you will see that an adult is supervising the babies but is in bed (inference is about to go to sleep also).

The product also shows cot bumpers which are not recommended by safety bodies as they add suffocation risk.

The text within the release is clearly advocating using the product as a co sleeper however – I have also included a link to the instructions for use which clearly states the following:

Do not leave your child unattended in the Babybay® cot without the side rail being in place

<http://www.nursery-online.com/prodview.php?id=1207§ion=42>

https://www.nsauk.com/wp-content/uploads/2015/08/UK_Assembly_Instructions_Babybay_Convertible_Maxi.pdf
