Understanding Infant & Child Safety

FACILITATOR'S GUIDE

Teach accident prevention in a way that appeals to today's parents

This new, multi-format curriculum allows you to provide important, targeted information in a variety of settings. This includes baby care and safety classes, one-on-one sessions, and at home with online learning. This comprehensive curriculum spans birth to 5 years, including information on childproofing products, car safety, emergency preparedness, home safety, common poisons, and more.

Who should use this product?

- Hospitals
- Pediatrician offices
- WIC centers/Head Start programs
- Teen parenting programs
- Visiting nurse programs

Available Formats

(See p. 3 for detailed information.)

- Video on DVD or USB
- PowerPoint Presentation*
- eClass*

*Customizable formats. Call 800.326.2082 for details.



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Goals & Objectives

This curriculum is designed to teach parents and caregivers how to:

- Keep children safe in and around cars, including current car seat guidelines, backovers and frontovers, and hot-car safety.
- Use safe sleep practices to decrease the risk of sudden unexpected infant death (SUID), including establishing a safe sleep environment, the benefits of breastfeeding, and avoiding overheating.
- Protect Baby from Abusive Head Trauma (AHT) by stepping away when needed and choosing trusted caregivers.
- Ensure that baby gear and furniture are safe and meet current safety standards.
- Use appropriate strategies and safety products to childproof at home.
- Reduce the risk of choking by safely preparing foods and removing choking and strangulation hazards from around the home.
- Reduce the risk of an accidental poisoning by understanding the hazards that are located around the home and learning how to minimize the dangers.
- Practice preventative measures to reduce the risk of drowning.
- Prepare for emergency situations, such as natural disasters, and how to take measures to reduce gunrelated tragedies.
- Find resources and support for infant and child safety.

Chapters	Video Clips*	*Resources/Parent Handouts
Car Safety	 Infant Car Seats Hot Cars & Carbon Monoxide Frontovers & Backovers 	Step-by-Step Car Seat Installation
Safe Baby Care	Safe SleepAbusive Head Trauma	Outdoor/Playground Safety
Safety Products	Safe Baby GearChildproofing Products	Child Proofing by Age
Home Safety	Choking, Suffocation, & StrangulationDrowning Prevention	Room-by-Room Safety Checklist
Poisons	Household Poisons	
Emergency Preparedness	Preparing for Emergencies	Emergency Kit Necessities & Other TipsParent Quiz

Curriculum Overview

*Additional videos and PDFs are included in the eClass

Product Formats & Best Practices

The following pages share some best practices and tips for the specific format your organization has purchased. Prior to working with parents and other caregivers, familiarize yourself with the format you're using, know the content, review the resources and PDFs, and watch the video clips. This better prepares you to answer questions. Also, consider scheduling an in-service where staff can come together to familiarize themselves with the content and discuss teaching ideas. For more teaching ideas, see p. 5.



PowerPoint Presentation

Why choose a PowerPoint? For use in an educator-led class or private session. Colorful slides, fun facts, embedded video clips, and educator notes make this format easy to use while keeping learners engaged. Share parent handouts via email or provide printed copies.

For specific technical and customization instructions, please see the <u>InJoy PowerPoint User</u><u>Guide</u>.

Best Practice:

- Rehearse your presentation ahead of time on the same equipment you'll use for your class.
- Use the Educator Notes as prompts and avoid reading off the slides verbatim.
- Keep the class lively and the learners motivated by adding ice breakers, movement, reflection prompts, discussion questions (see p. 5), games, and hands-on activities.
- Consider having students download a free gamification app on their phones and create an interactive and multi-modal learning experience with discussion questions included in this guide (p. 5) and/or the *Parent Quiz* PDF. This can also help assess learning transfer.
- Please note that after the main presentation, there is a group of bonus slides, including "Find the Mistakes" that can be used for group activities, as well as memes that serve as humor breaks for social-media-savvy parents. You can arrange them into your customized presentation where you feel they fit best or delete them if they aren't of use to you.



Video Program

Why choose a DVD or USB? To present video clips for a class or one-on-one teaching. Share the included parent handouts via email or provide printed copies.

Best Practice:

- Review the clips ahead of time on your own.
- Choose to play by clip or by chapter. Avoid information overload by playing one chapter or clip at a time.
- Between clips or chapters, discuss what the parents have watched and answer questions. We've included some discussion question prompts in this guide (see p. 5).
- Use the quiz (see Parent Handout) to reinforce the learning and assess learning transfer.

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eClass

Why choose an eClass? Since some families live in rural areas or many parents/ caregivers have schedules that aren't compatible with attending traditional on-site classes, offering online learning is the perfect solution. It's also a great option for hospitals who can't support an ongoing, on-site safety class. Students learn at their own pace, connecting with your organization (and learning about your services), even if they can't come to an on-site class. This format helps them retain information using videos, animations, quizzes, and extended activities.

Best Practice:

- "Flip your classroom" by offering the online class as a prerequisite to a short, in-person session at your facility.
- Use the *Ask an Educator* feature so that you can have a discussion with parents and answer any questions they may have. (Ask your area sales manager for details).
- Promote your facility's unique services and information. (Ask your area sales manager for details.)

Teaching Tips

- Use of small-group activities, question and answer periods, problem-solving, storytelling, and demonstrations can encourage group engagement, interaction, and reinforce the information being learned.
- With one-on-one sessions, using a laptop or tablet to show videos or display the PowerPoint may be more effective than projecting onto a large screen.
- Practical advice, humor, and the personal style of the instructor all add to the comprehension of the curriculum.
- Don't assume that every person has a husband/wife, a partner, or is even partnered at all.
- As the facilitator, you have a wonderful opportunity to make all your learners feel welcome and safe. This is essential for learning to occur. Ask students to introduce themselves and how they'd like to be addressed. To make everyone comfortable, introduce yourself first and share your own preferred pronouns.
- You're encouraged to customize the material when applicable or include specific details on your facility and region's safety procedures and recommendations (focus on things like regional poisonous plants and emergencies, such as tornadoes or hurricanes)
- Try to gauge how each learner is comprehending information by using the teach-back technique. This communication method is effective because students are asked to "teach back" what they have learned. Learners use their own words to explain what they have learned about their children's safety. Below are some other advantages of the technique:
 - Helps parents remember and understand more information
 - Raises satisfaction by helping parents feel more relaxed and involved
 - Helps you gain the trust of parents and/or care giver
 - Is not time consuming to implement and can take as little as 1 to 2 minutes

Discussion & Demonstration Ideas

Chapter 1: Car Safety

1. Discuss: Before you start the chapter, talk about some common concerns regarding the safety of their children in and around cars.



Use a doll to demonstrate proper car seat use.

2. Ask: Are you aware of the different types of car seats available? When do you switch your child from rear-facing to front-facing?

- Types of seats: rear facing seats, convertible seats, forward facing seats, booster seats.
- General car seat information: All infants and toddlers should ride in a rear-facing seat until they reach the highest weight or height allowed by the car seat's manufacturer.
- Convertible seats have limits that will permit children using them to ride rear facing for 2 or more years before switching them to forward facing.
- Forward-facing seats with a harness should be used until children reach the highest weight or height allowed by the car seat manufacturer.
- Booster seats should be used until the vehicle seat belt fits properly (around age 8-12, depending on height). Remind parents that ALL children younger than 13 should ride in the back seat.
- Remind students that car seat guidelines change often and to be aware when new recommendations are made.
- Share the Step-by-Step Car Seat Installation PDF

3. Ask: What are some things you can do to ensure you (or another caregiver) doesn't accidentally leave your baby in the car?

- Leave purse or phone in the backseat.
- Set reminder on phone.
- Consider downloading an app that can remind them to check the backseat.

Let them know that even the most attentive parents can feel exhausted and any change in routine can increase the risk of accidentally leaving a baby in the car. Remind them to discuss this issue with all the caregivers in their child's life.

4. Ask: Does having a back-up camera prevent backovers?

No. Even back-up cameras do not reduce the risk of backovers. Small children aren't always visible in back-up cameras. Nothing replaces taking precautions before backing out: have someone supervise your child as you leave the house, walk around your car before getting in it, and turn your stereo down in your car before backing up.



After showing students the *Frontovers & Backovers* video, have them create a diagram of the blind spots of their personal vehicle. Discuss fears and ways to reduce the risks to their children.

Chapter 2: Safe Baby Care

- 1. Discuss: Talk about Sudden Unexpected Infant Death (SUID) and Sudden Infant Death Syndrome (SIDS). Have students share their fears and concerns. Remind them that these feelings are normal, but there are things that they can do to reduce the risk.
- 2. Ask: What are some things parents and caregivers can do to reduce the risk of Sudden Unexpected Infant Death (SUID) and Sudden Infant Death Syndrome (SIDS)?

Emphasize to students that there has been a lot of research around this subject and, as a result, SUID rates are decreasing.

- Put Baby to sleep on their back on a firm mattress in a safe crib or bassinet and in the same room as you, but not in the same bed.
- Keep all items out of crib, including pillows, blankets, bumper pads, and toys that could cause suffocation. Use sleep sacks or sleepers, instead of blankets, to keep Baby warm.
- Never put Baby to sleep on any soft surfaces, such as sofas, chairs, beds, or a breastfeeding pillow. Do not use inclined sleepers, nappers, car seats, swings, or bouncy seats for sleep.
- Room-share with Baby for at least the first 6 months and ideally for the first year of life.
- Breastfeeding is shown to help reduce the risk of SIDS.
- If you think that there's even the slightest possibility that you may fall asleep, push your pillows and blankets away, and don't breastfeed on a sofa or cushioned chair.
- Keep your home and car smoke-free. Be aware of the nicotine that may remain on people's skin, clothes, hair, car and upholstery if they smoke, even if they do not smoke around your child.
- Overheating is associated with SIDS, so once discharged from the hospital don't put a hat on the baby while they are sleeping and keep the room around 70 degrees.

3. Discuss: Talk about Abusive Head Trauma (AHT) and have students create a plan for how they can stay calm and cope with Baby's crying.

4. Ask: What are some ways you can reduce the risk of choking when your baby starts eating solid foods?

- Remove skins from fruit.
- Cut food into pea-sized (half inch) bites or long strips.
- Cook raw vegetables to soften them.
- Cut grapes and hot dogs lengthwise.

Activity

Have students create a list of foods that are choking hazards to children and a list of foods that are safer choices for children. As a group, discuss the ideas everyone came up with and provide insight into the safest way for foods to be prepared and foods that should be avoided for safety.

Chapter 3: Safety Products

1. Ask: What should you do before you use borrowed or second-hand baby equipment?

Make sure that it's in good condition, that all straps and brakes work, and that there are not any sharp edges, broken pieces, or missing parts. For all secondhand/used items, check **Recalls.gov**. Also, if parents get a second-hand car seat ensure that they know the history of the seat. Finally, check that all toys do not have any small parts, accessible batteries, or are not made before 1978 (could have lead paint).

2. Discuss: Talk about various childproofing products available for outlets, cabinets, doors, and toilets, and why they are important.



Share examples of different types of cabinet locks, toilet locks, outlet covers, and door protection. Discuss the pros and cons of each as you pass them around.

Demonstrate the use of straps as an easy method to anchor furniture.

Chapter 4: Home Safety

1. Ask: What are common choking and suffocation hazards around your home?

- Button-size batteries
- Small magnets
- Small toys
- Dog food
- Deflated balloons and plastic bags
- Toy chests without safety latches, air holes, or removable lids
- Unsafe sleep environments

Activity

Brainstorm room-by-room childproofing. This could be done by having the students draw the general layout of their home and create a list of what safety concerns they should be aware of in each room. (Provide the *Room-by-Room Safety Checklist* Parent Handout).

2. Ask: Have you already childproofed your home? If not, when do you plan to?

- Try to start childproofing about a month before the baby's due date.
- They should do another round of child-proofing when Baby starts to roll over (around the age of 3 or 4 months), such as locking up poisons, securing cords, covering outlets, removing anything in Baby's reach that they could choke on, installing gates, and anchoring large furniture and TV's to the wall.
- Remind learners to get down to their baby's level to see if they missed anything.
- Provide the Childproofing By Age PDF.

3. Ask: What are some fall hazards around the home? Discuss ways to reduce the risk.

- Encourage students to use all safety straps, never leave Baby alone in a high chair or shopping cart, and do not place Baby on a high surface while in a car seat or bouncy seat.
- Keep furniture away from windows and don't allow small children to play on high porches, decks, stairs, or balconies.
- Remind them that falls are also a risk outside and on playgrounds—take children to play areas that have shock-absorbing surfaces (Provide the *Outdoor/Playground Safety* PDF).

4. Discuss: Talk about some water-safety tips around the home, pools, and beaches.

Chapter 5: Household Poisons

- 1. Ask: What are some ways to reduce the risk of an accidental poisoning in your home?
 - Keep poisons locked away or out of reach.
 - Do not keep medications in your purse or a backpack (if you do, keep these things stored away from children).
 - Remember that food extracts can be poisonous to children.
 - Put away all personal care items in your bathroom (toothpaste, mouthwash, bath salts, etc.).
 - Program the poison control number in your phone and/or post it in your home.
 - Remind caregivers, especially grandparents, to lock away medications.
 - Lock up toxic substances found in sheds and garages, such as glue, pesticides, paint thinner, gasoline, etc.
 - Make sure that none of the plants in your home are poisonous.

Activity

Have students look at a variety of "dead ringers" such as detergent pods that look like candy, and compare the safe vs unsafe options. You can expand this activity and lay out a variety of options and see if they can identify everything that is safe without looking closely at them—this shows them how difficult it can be for a child to distinguish.

2. Ask: What should you do if you think your child is exposed to something that could be potentially poisonous?

- Explain that the AAP says that if your child is unconscious, not breathing, or having convulsions or seizures, call 911 or your local emergency number immediately. If your child isn't breathing, administer CPR until help arrives.
- Share these scenarios:
 - Swallowed poison: Have them spit it out and never give children ipecac syrup.
 - Swallowed or put a battery in their ear, nose, or throat: Go to the ER right away.
 - Poison in their eyes: Hold open and flush eyes with a stream of water in the inside corner of eye for 15 minutes.
 - Poison on their skin: Remove clothes and rinse skin with water for at least 15 minutes.
 - Inhaled poisonous fumes: Immediately go outside into fresh air.
- 3. Discuss: Talk about the dangers of adult substances for infants and children (eCigarettes, vaping, alcohol, marijuana edibles, etc.).

Chapter 6: Emergency Preparedness

- 1. Ask: What are some common causes of fires in the home?
 - Combustible items near the stove, such as dish towels and wooden spoons.
 - Overloaded electrical outlets.
 - Plugging more than one heat-producing appliance (microwave, coffee maker, space heater) into an outlet or using an extension cord.
 - Candles/lighters/matches.
 - Lint buildup in and around dryers.
 - Smoking in your home, especially if there is portable oxygen in use.

2. Ask: What should be included in an emergency kit?

- Being prepared means having food, water, and other supplies to last for at least 72 hours.
- This kit is for all family members of the family, including pets.
- In addition to food and first-aid materials, they should also include personal hygiene items, medications, and important documents in their kit.
- Provide copies of the *Emergency Kit Necessities & Other Tips* PDF.



Bring in an emergency kit to share with students.

3. Discuss: Depending on what natural disasters are common in your region (floods, tornadoes, earthquakes, tornadoes, wildfires, etc.), talk about evacuation plans and other preparedness measures families should take.



If your class doesn't cover CPR, suggest that students take an infant and child CPR and first-aid class. Even if they have taken a class in the past, it is good to take a refresher as the suggestions may have changed. Hand out the *Infant and Child CPR* PDFs.

4. Ask: What are the risks of Carbon Monoxide (CO)?

- Burning wood, coal, and gas release CO and if fireplace vents and exhausts are not cleaned regularly, CO levels can rise to dangerous levels in the home.
- It is very dangerous because you cannot see it, taste it, or smell it.
- CO detectors should be on every floor of your home and outside all sleeping areas (in many newer homes these may be combined with fire alarms).
- Signs of CO poisoning include sleepiness, headache, dizziness, blurred vision, vomiting, shortness of breath, and convulsions—get outside immediately and call 911 or go to your nearest Emergency Room.

Quiz: Provide the *Parent Quiz PDF* to assess what students have learned. Students can take the quiz one-on-one, as a group, share answers and discuss, or you can make it interactive by using a gamification app.

Consultants:

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Additional Understanding Curriculums

InJoy's *Understanding* curriculums allow you to share consistent, evidence-based information at every touchpoint and are available in a variety of formats for all the ways you teach.

Core Curriculums:



Curriculums for Targeted Audiences:



For details and additional products, visit InJoyHealthEducation.com