

# ***SECTION 1. OVERVIEW***

## ***INJURY PREVENTION***

### **Objectives for General Injury Prevention Section; Participants will be able to:**

- Explain the difference between an accident and an injury.
- List the most common types of injuries occurring in child care settings.
- Apply the Injury Triangle to realistic situations.
- Perform a safety assessment of their child care environment on their own time.
- Identify relevant injury problems in their respective child care agency and brainstorm solutions.
- Describe abuse and neglect reporting responsibilities and requirements.
- Identify personal barriers to injury prevention and brainstorm solutions.
- Access resources to develop an injury prevention action plan on their own time for their center.

### **Topics:**

- A. Injuries are Preventable (35 minutes)
- B. Intentional Injuries (5 minutes)
- C. Day Care Rules Pertaining to Safety (7 minutes)
- D. Barriers to Injury Prevention and the Injury Prevention Action Plan (13 minutes)

### **Handouts Available**

- H1-1 = Was this an Accident?
- H2-1 = Injury Facts
- H3-1 = Injury Triangle
- H4-1 = Safety Checklists
- H5-1 = Safety Inspection Checklists
- H6-1 = Child Development Chart
- H7-1 = Warning Signs of Child Abuse/Neglect
- H8-1 = County Children Services Agencies
- H9-1 = Incident Report Form
- H10-1 = Injury Prevention Plan
- H11-1 = Action Plan Sheets
- H12-1 = Safety Resources

### **Transparencies/Slides Available:**

- T1-1 = Is this an Accident?
- T2-1 = Questions for Story
- T3--1 = Injuries are NOT Accidents!
- T4-1 = Injury Facts
- T5-1 = Common & Serious Injuries to Children
- T6-1 = Children are vulnerable to injury because:
- T7-1 = Children are vulnerable to injury because:
- T8-1 = Injury Triangle
- T9-1 = Injury Prevention Strategies
- T10-1 = Change the Environment
- T11-1 = Supervision is Important
- T12-1 = Change the Behavior
- T13-1 = Prevention Tips
- T14-1 = Injury Triangle Example

**Transparencies/Slides Available (continued):**

T15-1 = Why talk about abuse in this course?

T16-1 = Recognizing Abuse

T17-1 = Steps to Take

T18-1 = Completing the Incident Form

T19-1 = Suggestions

T20-1= The Injury Prevention Plan



► **Note to Instructor:** Ask the participants the following questions. Allow them to respond but offer suggestions if they do not come up with appropriate answers.

### T2-1 Questions for Story

- Was this an accident?
- What could have been done to prevent this from happening?

#### **T** Use T2-1 Now

- **Was this an ACCIDENT?**

**Desirable Participant Response:** Even though, it was not intentional (no one wanted this to happen or directly contributed to it happening), there are very clear points where interventions could have taken place to prevent the injuries from happening.

- **What might have been done to prevent this injury from happening?** (*Record responses on the board/overhead*)

**Desirable responses:**

1. Improving supervision.
2. Not allowing her to play on equipment which is too big for her and redirecting her attention to a piece of play equipment she can safely climb on.
3. Positioning yourself where you can see all children or moving around to supervise more effectively.
4. Adding more appropriately-sized equipment for young children.
5. Removing concrete from play areas.
6. Making sure that an adequate covering of wood chips is covering the ground underneath play equipment at all times.
7. Clearing sticks and other sharp objects away from beneath the play equipment.

Some of these interventions such as concrete removal and purchasing new equipment can be quite expensive and may not be possible for your center. However, the majority of suggestions, such as supervising closely, clearing sticks and sharp objects, adding more wood chips are easy and inexpensive to carry out. They just take a little bit of thought and effort.

#### **Injuries are Not Accidents** **T** Use T3-1 Now

The word ACCIDENTS suggests something random and unpredictable - not preventable. Most INJURIES are predictable and preventable. We have a great deal of information about when, where, how, why and to whom injuries occur. This information can be used to predict patterns of injuries and to prevent them from occurring. Using the word "accident" leads us to believe that nothing could have been done. Therefore, injuries are not accidents!

I now want to show you a few facts about child injuries so that you can see what a large problem it is. Then we will discuss steps that we can each take to do something about the problem.

### T3-1 Injuries are not Accidents

- **Accidents** = Random and unpredictable
- **Injuries** = Predictable and Preventable

### T4-1 Injury Facts

- Leading cause of death and disability among children ages 14 and under in U.S.
- Half of these deaths occur to children 4 and under.
- 1 in 4 children require medical attention each year for injuries.
- Estimated that 9 out of 10 injuries can be prevented.

### H2-1 Injury Facts

### T5-1 Common & Serious Injuries to Children:

- Falls
- Burns
- Poisonings
- Motor Vehicle Crashes
- Pedestrian-motor vehicle crashes
- Drowning
- Choking

### T6-1 Children are vulnerable to injury b/c:

- heads are larger in proportion to their bodies
- internal organs are not mature
- large body surface area for their size
- small fingers
- small airways
- immature swallowing mechanism
- bones are still growing

## Injury Facts

### **T H** Use T4-1 Now and refer participants to H2-1

- Unintentional injury is the leading cause of death and disability among children ages 14 and under in the US.
- Children ages 4 and under are at greater risk of unintentional injury-related death and disability and account for nearly half of these deaths among children ages 14 and under.
- 1 in 4 children (or more than 14 million children ages 14 and under) sustains injuries that are serious enough to require medical attention each year. As former Surgeon General C. Everett Koop said on the subject of childhood injury, "If some infectious disease came along that affected one out of every four children in the United States, there would be a huge public outcry and we would be told to spare no expense to find the cure--and be quick about it." But often child injuries are thought of only as tragic accidents.
- It is estimated that as many as 90% (9 out of 10) of unintentional injuries can be prevented.

### **T** Common and Serious Injuries to Children **T** Use T5-1 Now

The most common and serious injuries to young children are from:

- Falls
- Burns
- Poisonings
- Motor Vehicle Crashes
- Pedestrian-motor vehicle crashes
- Drowning
- Choking

I'm now going to discuss some of the physical and developmental reasons why children are at a greater risk for injury than adults.

### **Physical Characteristics which make infants and/or children more vulnerable to injury:** **T** Use T6-1 Now

- Children's heads are larger in proportion to the rest of their bodies than adults by about 30%. The neck muscles and spine which support the head are not as strong as those of adults. This increases the risk of severe head or neck injury.
- Their internal organs are not mature and are not well protected by their rib cage and pelvis bones.
- They have a large body surface area for their size and thus are more susceptible to temperature extremes (e.g. frostbite, heat exhaustion), burns and fluid loss.
- They have small fingers that fit into small, dangerous spaces, such as electrical outlets.
- They have small airways that allow for easy choking.
- They have an immature swallowing mechanism which also may allow for easy choking.
- Their bones are still growing and break more easily.

**T7-1 Children are vulnerable to injury b/c:**

- Natural explorers of their environment.
- May not understand “NO”.
- Fearless.
- Put things in their mouths.
- Can’t judge speed and direction of sound.
- Lack balance and coordination.
- Imitate adult behaviors.

**T8-1 Injury Triangle**

Child  
Environment      Agent

**H3-1 Injury Triangle**

**T9-1 Prevention Strategies:**

- Change the Environment
- Change the Behavior

**Developmental characteristics which make infants and children vulnerable to injury:**

**T Use T7-1 Now**

- They are natural explorers of their environment.
- They may not understand the word “NO”.
- They are fearless and may not be afraid of dangerous situations.
- They naturally put things in their mouths to learn about them, thus increasing the risk of choking, poisoning, or electrical shock.
- They can not accurately judge speed and direction of sound and movement (e.g. an oncoming car)
- They lack balance and coordination to avoid injuries from events such as falls or hot liquid spills.
- They imitate adult behaviors such as taking medicines or using tools, thus increasing their chances of poisoning, choking, electrical shock or severe wounds.

**The Injury Triangle (10 minutes)**

There are many different approaches to predicting and preventing injuries. We are going to explore one of these ways today: The Injury Triangle.

**T H Use T8-1 & H3-1 Now**

As I mentioned before, injuries often follow predictable patterns. These patterns can be identified by looking at the child, the environment and some injury-causing agent(s). These are the 3 corners of the triangle. The agent can be almost anything -- a toy, a piece of furniture, a wading pool, a food item, another child. In the picture here, we see that the injury-causing agent is the baby walker (which is **NOT** recommended for use at any time). The stairs are part of the injury-causing environment and the child rolling toward the stairs unsupervised is the injury-causing behavior. We want to train ourselves to avoid harmful situations by recognizing the injury triangle and problem environments, agents, or behaviors.

**T Use T9-1 Now**

There are two main ways to control harmful situations and injuries:

- Change the Environment
- Change the Behavior

Changing the environment is the easiest, but changing behaviors may have the longest lasting effect. A good injury prevention program uses both methods.

### **T10-1 Change the Environment**

- Train yourself to look at the center the way a child might.
- Use Safety Checklist to perform safety check of center.
- Ongoing Job

### **H4-1 Safety Checklist H5-1 Safety Inspection Checklist**

### **T11-1 Supervision is Important!** (Picture)

### **T12-1 Change the Behavior**

Learn about injury risks at each stage of a child's development so that you can prevent injuries from occurring.

### **H6-1 Child Development Chart**

## **Changing the Environment**

**T Use T10-1 Now**

- In general a good way to change the environment is to train yourself to look at your center as a child might. Get down on your hands and knees to take a child's perspective. Bright colors, shiny objects, wires, cords, water, things that look good to eat are things that might attract a young child. Rusty surfaces, sharp edges and furniture can also create hazards.
- **H** Handout H4-1 provides some other guidance in thinking about a safe child care environment. I (we) hope that you will use this check list in your center to perform a safety check.
- **H** Handout H5-1 may help you keep track of inspections; which areas, when they were inspected, what was found and what steps are being taken to correct the situation.
- Remember that changing the environment to promote safety and protect the children in your care is an ongoing job, because the environment is ever-changing. Every time a new child enters, a new toy appears, or a new activity is taught, changes are produced that need to be assessed for safety and health risks.

## **Supervision is Important!**

**T Use T11-1 Now**

Remember that childproofing can NEVER replace good supervision. Children can get into a lot of trouble when we are not looking. Good supervision is a key ingredient to controlling injuries. If we are paying attention and watching the children in our care, we will be prepared to act quickly to potentially dangerous situations. A child who is supervised will not have the opportunity to find pills in a purse, find bleach under the sink, wander out the door or fight with another child.

## **Changing Behavior**

**T Use T12-1 Now**

Changing behaviors can be a more difficult task but it can produce lasting results. At each stage of a child's development, the potential for harm from certain injuries changes. Children learn by exploring their environment. We know that infants place objects in their mouths, while the 2 year old is in the "age of mobility". Being aware of the developmental stages helps us foresee the risks and prevent injuries. We can teach the 2 year old how to climb stairs safely, and the 5 year old how to walk instead of run. We can teach children age 3 and up how to stop, drop & roll if they catch on fire.

We do not have time to review risks for each developmental period but a child development chart has been included in your handouts.

**H Refer participants to H6-1).** I also strongly recommend that you take a child growth and development course. The more familiar you are with the developmental periods and their related risks, the better equipped you will be to predict injuries and prevent them from occurring.

### T13-1 Prevention Tips

1. Perform a Safety Check of your center regularly.
2. Maintain good supervision of children.
3. Learn about injury risks at each developmental stage.

### Review General Injury Prevention Tips

**T** Use T13-1 Now

For now, I want to quickly review 3 general steps you can take to help prevent injuries from occurring.

1. Perform a Safety Check of your center regularly. Use the enclosed handout that we enclosed.
2. Maintain good supervision of children.
3. Learn about injury risks at each developmental stage.

### Applying the Injury Triangle

I now want to hear about some of the safety problems and/or injury situations that you have witnessed in your own centers or with your own children? What are the injuries you have seen?

► **Note to Instructor:** List participants' responses of the safety problems that they identify in their own centers on a blank overhead or board. Limit time and discourage participants from telling long stories. After you have a short list (4-7) of incidents, pick one incident on which to focus. Once you have selected your incident, ask the group to apply the injury triangle. Ask the questions which follow below. If the group does not respond with any incidents of their own, use the Injuries are NOT Accidents example or choose an example from one of the scenarios.

### T14-1 Injury Triangle

#### Example

- What factors contributed to this injury? Think of the behavior, environment & injury-causing agent..
- What could have been done to possibly prevent the injury?
- What are some of the barriers?
- What strategies would be best for this situation?

**T** Use T14-1 Now

- What factors contributed to this injury? Think about the 3 corners of the Injury Triangle: environment, behavior and injury-causing agent (s).
- What could have been done to prevent the injury?
- What are some barriers to changing the corners of the triangle in this situation?
- What strategies would be best for this situation (i.e. changing the behavior, environment or injury-causing agent)? What are some of the pros and cons for intervening at each stage?

► **Note to Instructor:** Point out that it's not always possible to affect all areas. You need to think about the best strategy for a given situation. The easier the strategy is to carry out, the more likely it will be carried out.

## B. Topic: Intentional Injuries (5 minutes)

### T15-1 Why talk about abuse in this course?

1. Abuse/neglect can cause injury and illness to children.
2. They happen often enough that most will see these problems at some time.
3. Under Ohio law, you are required to report suspected abuse/neglect.

### T16-1 Recognizing Abuse

- Accept that it happens!
- Train yourself to ask: "Could this be abuse?" whenever a child has an unusual or suspicious injury.
- Become familiar with the warning signs.

### H7-1 Abuse Checklist & Steps to Take

### Introduction

**Not all injuries which happen to children are unintentional.**

Children can also be physically and emotionally injured by violence and abuse. This next section of the program is briefly devoted to the subject of abuse and neglect. There is a 6-hour abuse and neglect course that is required for center staff to take. Resources are provided in your reference section. We will touch briefly on the issue in this course for several reasons. **T Use T15-1 Now**

1. Abuse/neglect can cause injury and illness to children.
2. Abuse/neglect are widespread enough that most child day care providers will see these problems at some time.
3. Under Ohio law, child day care providers are required to report suspected child abuse or neglect.

### Have any of you taken a child abuse/neglect course?

If you haven't taken the course, I recommend taking it when it is next offered in your area. A child's caregiver can be his/her best line of defense against the damage caused by abuse or neglect.

**►►Note to Instructor:** *If a number of participants have completed the child abuse course, you may want to make this section more interactive by asking the participants questions instead of just presenting the information. Either way, limit time to 5 minutes.*

### Definitions

- **Abuse** is an act done to a child by another which inflicts pain, injury or emotional trauma. It can be physical, emotional or sexual.
- **Neglect** is an act of omission: it is something that a child needs for survival and well-being that is withheld or withdrawn, such as adequate food, clothing, shelter, and medical care.

### Warning Signs

**T Use T16-1 Now**

- **IMPORTANT:** The first step in recognizing abuse or neglect is to accept that they exist. Child abuse is a big problem. There are about 650,000 **confirmed** cases of child abuse per year in the U.S. Whenever a child comes to your center with an unusual or suspicious injury, train yourself to assess, "Could this be abuse?"
- The next step in recognizing abuse is being familiar with some of the physical and behavioral warning signs. We do not have time to review all of the warning signs of abuse or neglect but some of the most common are listed in **H** Handout H7-1.

<p><b>T17-1 Steps to Take</b></p> <ul style="list-style-type: none"> <li>• Report the abuse/neglect to the Children’s Service Agency in your county.</li> <li>• It is your legal responsibility even if you just suspect it.</li> <li>• Become familiar with how to assist a child who discloses abuse</li> </ul> <p><b>H8-1 List of Children’s Service Agencies</b></p>	<p><b>Steps to Take</b> <span style="float: right;">Ⓣ <i>Use T17-1 Now</i></span></p> <p>As a child care provider, you see children on a daily basis. In this situation, you may be the first to suspect abuse or neglect. Quick action can be critical to breaking the cycle of abuse and neglect by helping parents and children receive needed treatment and preventing further injury or harm to abused children.</p> <ul style="list-style-type: none"> <li>• If you suspect child abuse or neglect, report the abuse to the Children’s Services Agency in your county. A list is included on Ⓜ Handout H8-1.</li> <li>• As a child care provider, <b><i>this is your legal responsibility - even if you just suspect it!</i></b></li> <li>• Ⓜ Handout H7-1 also provides some tips for assisting a child who discloses abuse to you. Please become familiar with these as you may be the first and only person whom the child speaks to about the abuse. <b><i>Your reaction will be critical.</i></b></li> </ul> <p>Please keep this issue in mind as we examine different types of injuries later in the program.</p>
<p><b>C. Day Care Rules (7 minutes)</b></p>	<p><b>Introduction</b></p> <p>If you are not already familiar with day care licensing rules concerning the health and safety of children, I strongly encourage you to become familiar with them on your own. The rules are designed to help keep children safe in centers. They can be used to child-proof your center and design injury prevention activities.</p> <p>I am not an expert on the rules. <b>If you have specific questions about the rules, please call your licensing specialist.</b> Also, check in your center. Licensing inspection reports must be posted. The report will provide you with an excellent opportunity to see what you can do to improve safety in your center.</p> <p><b>Documenting Injuries</b></p> <p>As I am sure everyone in the room would agree, caring for children requires a great deal of time. Having an understanding of your time constraints, I (we) ask one more important task of you: documentation. Documenting injuries means that you record:</p> <ul style="list-style-type: none"> <li>• what type of injury occurred</li> <li>• when it occurred</li> <li>• how it happened</li> <li>• where it happened and</li> <li>• what steps were taken to care for the child.</li> </ul> <p>Licensed centers are required by the Ohio Department of Human Services to complete an Incident Report Form when a child is injured, receives Syrup of Ipecac or is transported by EMS.</p>

### **Importance of Documentation**

Why do you think that documentation might be important?

▶▶**Note to Instructor:** List participants' responses on the board. If the participants do not respond, highlight the following point.

#### Main Points:

1. Documentation allows you to see patterns of injuries occurring in your center. It provides important information about the Injury Triangle and allows you to design an appropriate injury prevention plan and injury prevention activities.
2. Documentation helps protect your center from liability. By not documenting and reporting injuries, your center becomes vulnerable to formal complaints and law suits.

### **Review of Incident Report Form**

Let's now look at the Incident Report Form. If your center uses a different version of this form, that is fine. The important point is that the incidents are being documented in an appropriate way. I want to make sure that each of you feels comfortable in completing an incident form before we leave today.

**T H Use T18-1 now & refer participants to H9-1**

▶▶**Note to Instructor:** Briefly review the Incident Report Form by referring to the notes below. Ask the participants if they have any questions about the form.

#### **T18-1 Completing the Incident Form**

- Fill out soon after incident so details will be fresh.
- Be specific. Include factual detail.
- Be objective. Give the facts not your opinion.
- Write clearly.
- Give a copy to child's parent and keep a copy on file.

#### **H9-1 Incident Report Form**

- Fill the form out as soon as possible after the incident so that the details will be fresh in your mind. Keep a supply of the forms in each classroom so they will be available when you need them.
- Try to be specific in answering each question. Include as much factual detail as you remember.
- Be objective. Give the facts of what happened, not your opinion of what happened.
- Write clearly so others may understand what you have written.
- **TIME PERMITTING:** Let's take our example from (use either "Injuries are Not Accidents" situation or example from Injury Triangle) and document the injury.
- Always remember to give a copy of the form to the child's parent/guardian or whoever picks up the child on the day of the incident. Keep a copy on file in your center.

We are now going to be discussing how you can use injury prevention activities in your own center and what barriers might exist to carrying out those activities.

## D. Topic: Barriers to Injury Prevention & the Action Plan (13 minutes)

### **Introduction**

As we have been talking about, caring for children can be one of the most challenging jobs that there is.

### **Barriers to Injury Prevention**

What are some issues or barriers that you face on a day to day basis that might inhibit safety in your center?

▶▶**Note to Instructor:** Allow the participants to respond. List their responses on the board/overhead. If they are not responding, suggest the following barriers.



- Children demand much attention and need constant supervision.
- Time and resources are limited.
- It is difficult enough just doing your job.
- There is always something that needs to be done.
- If it weren't for all the other rules, I might have time.

### **Problem-solving the barriers**

Now, let's take a few moments to think of some tips or solutions to these barriers. Does anyone have any suggestions or ideas of things that have worked in their own center?

▶▶**Note to Instructor:** Allow the participants to respond. List their responses on the board/overhead. If they are not responding, suggest the following ideas.

### **T19-1 Suggestions**

- Use the "Safety Checklist" to scan for hazards as you clean.
- Rotate roles with staff each week.
- Use injury prevention activities with children
- Organize a safety event that includes one of the day care rules.

### **Suggestions:**

**T** Use T19-1 Now

- Incorporate injury prevention activities into clean-up time. Use the "Safety Checklist" included in your handouts to scan for hazards as you clean.
- Share or rotate roles each week. One staff person could be responsible for a safety check once a day.
- Use injury prevention activities with children. This will provide a learning opportunity while children are being supervised and it will help to improve safety at the same time. Use age-appropriate methods to help children think about injuries as preventable. There are injury prevention resources available to assist you in working with children. Some are listed in your handouts.
- Organize a safety event which includes one of the day care rules. For example, hold a fire drill and practice your emergency evacuation plan. Invite a local firefighter to speak to your center about fire prevention. This could be targeted to staff or children.

## H10-1 Injury Prevention Action Plan

## H11-1 Action Plan - Planning Sheet

## H12-1 Safety Resources

## T20-1 Injury Prevention Plan

- Involve all staff.
- Review incident reports.
- Use the injury triangle.
- Plan a safety activity each month.
- Write down important dates in a calendar.
- Develop a schedule for safety activities.
- Use your resources.

### ***The Injury Prevention Action Plan***

Our final topic in part one of the program is the Injury Prevention plan. We don't have time to develop an individual plan for everyone, but I would like to point out some information in your handbook that may be helpful. Turn to **H** Handout H10-1, the Injury Prevention Action Plan.

In developing a plan, try not to overwhelm yourself. Take small steps but do SOMETHING now. Write down one thing that you will be able to do the next time you are in your center. Take a moment now. **H** Handout H11-1 may be helpful to you as you develop your own plan. **H** Handout H12-1 contains a list of many state and national safety resources.

### ***Developing a Plan***

#### ***T Use T20-1 Now***

To develop your injury prevention plan, sit down with other staff and develop a plan for the year. Some ideas to get your started are:

- Look at incident reports from the previous year. What are the major injuries occurring in the center. What changes could be made to the environment or to behavior to make the center safer. Remember the injury triangle.
- Plan a safety activity each month for staff or children. Most months have an awareness topic. For example, October is Sudden Infant Death Syndrome (SIDS) awareness month. You could invite a speaker to talk to staff about preventing SIDS. Or you could invite a local firefighter to speak to the children about fire safety during Fire Prevention Week.
- Write important dates down in your calendar. For example, check the batteries in smoke detectors on the same day of every month. In that way, you won't forget.
- Use safety resources such as the safety checklist. Develop a schedule for safety activities. For example, rotate staff roles so that each week a different person is responsible for safety checks.
- Use your available resources. Many areas have local SAFE KIDS Coalitions that are available to speak about safety or provide injury prevention materials. Some groups can assist with bicycle helmet fittings and child safety seat fittings. Other local volunteer groups also work on child safety issues.

As we proceed through the program, we will be returning to the concepts of injury prevention and applying them to more specific situations. But, no matter how safe we are, sometimes injuries happen even in the best of situations. We will now turn our attention to responding to emergencies.