

# About Child Safety Week

20 - 26 June 2011

## Accident prevention

Child Safety Week is the Child Accident Prevention Trust's annual flagship community education campaign. It aims to raise awareness of the number of accidents that seriously injure or kill children every year and the steps we can take to help prevent them.

Accident prevention is not about restricting children or wrapping them up in cotton wool, instead it is about creating safer environments, both in the home and elsewhere, to enable children to thrive and lead a healthy active life.

Child Safety Week provides the opportunity to get this message across to parents and children in a fun and engaging way, helping parents learn how to fit safety into their busy lives.

To register for your child safety week toolkit go to [www.childsafetyweek.org.uk](http://www.childsafetyweek.org.uk)

## Local Safeguarding Children Boards

This newsletter is our contribution to Child Safety Week. Published in advance of the week, we aim to provide practical tips for you to take out in your work with children and their families.

Sadly the lessons we learn are when a tragic event brings a child's case to our attention either in a Serious Case Review or through the Child Death Overview Panel. Whilst the numbers of reviews we have to do are few, the learning from each case is real. This year we focus on children with asthma, on water safety and again on safe sleeping for infants. We also highlight the need for children with complex health needs to have up to date health care plans.

We need you to absorb the key messages in your day to day practice so that children are made safer.



Child Safety Week: 20 - 26 June 2011  
Briefing for staff working with young families

## Asthma can kill – what do you know about it?

### What is asthma?

Asthma is a condition that affects the airways – the small tubes that carry air in and out of the lungs. An asthma trigger (something that irritates the airways) causes the muscles around the airway walls to tighten. The airways become narrower and their linings become inflamed and start to swell. Sometimes sticky mucus or phlegm builds up which can further narrow the airways. This makes it difficult to breathe and leads to the symptoms of asthma.

### The symptoms of asthma usually are:

- coughing
- wheezing
- shortness of breath
- tightness in the chest

### How to identify an asthma attack:

- when the reliever inhaler does not help symptoms;
- if symptoms are getting worse; or
- if the child is too breathless to speak, eat or sleep.



Be asthma aware

**What to do in an attack**

Recommended steps (not suitable if using the Symbicort SMART regime):

1. Take one to two puffs of the reliever inhaler (usually blue), immediately.
2. Sit down and take slow, steady breaths.
3. If the child does not start to feel better, take two puffs of the reliever inhaler, (one puff at a time) every two minutes. Up to ten puffs can be taken.
4. If the child still does not feel better after taking the inhaler as above, or if you are worried, call 999.
5. If an ambulance does not arrive within ten minutes and the child is still unwell, repeat step 3.

**How can asthma be managed?**

There is no cure for asthma, but medication can help to control it. Asthma medication should be taken as prescribed and inhalers used properly to get the most benefit from every dose of medicine.

**Nebulisers – a warning:**

Nebulisers are machines that create a mist of medicine, which is then breathed in through a mask or mouthpiece. They are most commonly used to treat severe attacks at a doctor's surgery or at an Accident & Emergency department.

A few people who have severe asthma use these to take their medicine at home.

The doctor must issue details of how to understand the warning signals that show the asthma is getting worse, even with treatment.

A number of children in the UK have died because their worsening asthma was not recognised. Some of these children used nebulisers which disguised the warning signals.

**The facts and figures:****5.4 million**

people in the UK are currently receiving treatment for asthma.

**1.1 million**

children in the UK are currently receiving treatment for asthma.

There is someone with asthma in

**1 in 5**

households in the UK.

Useful links: [www.asthma.org.uk](http://www.asthma.org.uk) and [www.nhs.uk/livewell](http://www.nhs.uk/livewell)

## Health care plans

### What is a health care plan?

- A health care plan is a document that is drawn up for children with more complex health care needs. It summarises the child's medical condition and provides information on the management of their health care needs. It is used within a college, school or early years setting.

### Health care plans are so important:

- they provide information on a child's health care needs;
- they clarify for staff, parents/carers and the child the procedures and level of support needed;
- they indicate who is responsible for each task or procedure;
- they clarify the training and/or resources required for procedures and who will undertake the training;
- they provide consistency when used across a range of settings;
- as a signed document, they give consent to the school or setting to meet the health care requirements set out; and
- they may be required by insurers before an employee can undertake a health care procedure.

### Who needs a health care plan and when?

Many children's health needs can be managed easily without a health care plan. This is the case if their needs are of a short duration (e.g. a course of antibiotics) or of a long term nature but covered by general school policies (e.g. a mild asthma sufferer carrying an inhaler in case it is needed).

Health care plans are usually only drawn up for children with complex health or medical needs, when:

- a registered health professional has identified that a school or setting requires detailed guidance to manage a child's health care needs; or
- a child may need emergency procedures to be in place whilst away from home e.g. if the child has severe asthma, diabetes, epilepsy or an allergic reaction to a particular food

The school or setting has a duty of care to ensure that the health care plan is in place. It is good practice to identify a named person who will liaise with all involved parties to make sure the health care plan is in place and implemented.

### More information and useful contacts:

Managing Medicines in Schools an Early Years Settings:  
[www.nationalstrategies.standards.dcsf.gov.uk/node84514](http://www.nationalstrategies.standards.dcsf.gov.uk/node84514)

## Water safety

It is approaching the time of year when everyone hopes to enjoy the better weather, relaxing and having fun with children.

### Tips on how to keep children safe in and around water

#### ...at the coast:

- swim at a beach patrolled by lifeguards;
- never swim alone;
- never use inflatables in strong winds or rough seas;
- if you get into trouble in the sea, stick your hand in the air and shout for help;
- if you see someone else in trouble, tell a lifeguard, or call 999 or 112 and ask for the coastguard;
- supervise children;
- don't go into the sea after drinking alcohol;
- know your flags;
- signs of a rip tide are discoloured brown water, foam on the surface, and debris. These currents can quickly take you from shallow water to water beyond your depth. If this happens, stay calm do not try to swim against it. If you can stand, wade, don't swim. Raise your hand and shout for help. Swim parallel to the shore until free of the rip, then make for shore;
- know the tide times so you don't get cut off; and
- watch out for waves: even small ones can knock a child over, especially dumping waves that break with great force in shallow water and occur at low tide.

#### ...in ponds, lakes, canals and rivers:

- always watch your children while at the beach, lake or other natural bodies of water;
- never let older children swim in unsupervised areas like quarries, canals or ponds, as many children underestimate the depth of water; and
- make sure your child wears a personal flotation device when in or near natural bodies of water. Swimming aids such as water wings are not safety devices, and are not a suitable substitute.



#### ...at the pool:

- never leave children alone in or around a swimming pool or hot tub/spa; and
- teach children how to swim by qualified instructors, they are ready to learn usually after age three.

#### This doesn't make children 'drown proof', so:

- teach children water safety habits – don't run, push others, jump on others, dive or jump in shallow water or swim during lightning storms or bad weather;
- keep a telephone, emergency phone numbers and rescue equipment at the poolside; and
- empty inflatable pools and store out of children's reach when not in use.

#### ...dive safely:

- do not let children dive unless an adult is present and knows the depth of the water is greater than five feet;
- never allow children to dive into above-ground pools;
- teach children to dive safely and teach them to keep their dives simple; and
- do not permit children to run and dive

Useful link: [www.watersafetykids.co.uk](http://www.watersafetykids.co.uk)

## Safe sleeping

### What is SIDS?

Sudden infant death syndrome (SIDS) is defined as the sudden unexpected death of an infant less than one year of age, with onset of the fatal episode apparently occurring during sleep, which remains unexplained after a thorough investigation. Such deaths are also called cot death.

### What are the risks of co-sleeping?

Your baby is at a higher risk of SIDS if the baby's mother or partner:

- is a smoker, even if they never smoke in bed or at home;
- has been drinking alcohol;
- takes medication or drugs that makes them drowsy;
- feels very tired; or
- if the baby was born before 37 weeks and/or weighed less than 2.5 kgs (5 ½ lbs) at birth.

### How to reduce the risks

The advice is:

- Cut smoking in pregnancy – fathers too! And don't let anyone smoke in the same room as the baby.
- Place the baby on their back to sleep, not on the front or side.
- Do not let the baby become too hot, keep the baby's head uncovered indoors.
- Place the baby with their feet to the foot of the cot to prevent them wriggling down under the covers, or use a baby sleep bag.
- Never sleep with the baby on a sofa or armchair.
- The safest place for the baby to sleep is in a crib or cot in a room with its parents for the first six months.
- Breast feed the baby – establish this before starting to use a dummy
- Accidents can happen – the parents might roll over whilst asleep and suffocate the baby, or baby could get caught between the wall and bed or could roll out of an adult bed and be injured.

In the North Yorkshire and York area there have been at least fifteen deaths described as SIDS or unascertained over the last three years. Six of these were whilst the infant was sharing a bed or sofa with an adult. Useful link: [www.fsid.org.uk](http://www.fsid.org.uk)



## Digital music players and roads don't go

Every year there are several serious accidents on the roads involving teenagers listening to music. Like mobile phone use and car driving, iPods and other music players distract. The message must be a simple "don't wear headphones when you are cycling or out and about on roads".

Useful links: [www.safekids.co.uk](http://www.safekids.co.uk) [www.crucial-crew.org](http://www.crucial-crew.org) [www.rospa.com](http://www.rospa.com)