Top Tips for a Safe Home

- Give young children your full and undivided attention when they are in the bathtub or around water.
- Check smoke alarm batteries every six months to make sure they are working.
- Keep cribs clear of objects, and make sure babies sleep alone, on their backs, and in a crib every time they sleep.
- Install safety gates to keep children from falling down staircases and window guards or stops to prevent falls from windows.
- Keep all medicine up and away, even medicine you take every day. Be alert to medicine stored in other locations, like pills in purses, vitamins on counters, and medicine on nightstands.
Executive Summary

Ask a parent what they worry about most when it comes to their children, and you’ll likely hear about getting enough sleep, finishing homework on time or making friends at school. What many parents don’t consider—or don’t imagine could ever happen to them—is their child suffering a serious injury. Yet more than 7,600 children ages 19 and under died from unintentional injuries in 2013, and another 8.3 million were seen in emergency departments. Said another way, nearly every hour a child dies of a preventable injury in the United States, making unintentional injuries the leading cause of death for children.

How do these injuries happen? Many occur on the road; almost half of injury-related deaths among children ages 19 and under involve motor vehicle traffic. It may surprise many parents to learn that a large number of injury-related deaths also happen at home. In fact, every year, more than 2,200 children die from injuries that happen at home. Suffocation, drowning, fires and burns, and falls account for many of these deaths. And for every death, there are many more children who are seriously injured. More than 10,000 children are seen in emergency departments every day for the kinds of injuries that commonly happen in the home.

The good news is that we’ve seen progress; thanks to efforts by parents, policymakers, law enforcement, healthcare professionals and educators, there has been a 60 percent decrease in the death rate from unintentional injuries among children ages 19 and under from 1987 to 2013. Simple steps such as using car seats and seat belts, installing smoke alarms, and storing medicines and chemicals up and away from young children have made a big difference in saving children’s lives.

We are focused on the work that must remain a constant effort to keep kids safe. With injuries happening every day, we wondered how concerned parents are about safety in the home for their children, and what parents do to keep children safe. To explore these questions, Safe Kids Worldwide surveyed 1,010 parents with children ages 12 and under, in a survey made possible by funding from Nationwide.

We learned that while many parents are worried about home safety issues like fires and falls, other important risks aren’t top of mind. For example, only 4 percent of parents surveyed listed poisoning and chemicals as a home safety concern, and just 1 percent mentioned drowning. This is especially alarming given that drowning is the leading cause of injury-related death in the home for children ages 1 to 4.

So what are parents doing to keep children safe in the home? Many parents surveyed—96 percent—say they have a smoke alarm. But 46 percent of parents surveyed say they don’t have a fire escape plan. Fire escape plans are important to have and practice as a family, even at night; while only 20 percent of reported home fires happen between 11 p.m. and 7 a.m., 51 percent of home fire deaths resulted from fires during this time.

We found that a substantial proportion of parents surveyed with at least one child ages 5 and under say they have left their young child alone in the bathtub. Nearly half of parents surveyed say they have left their child unattended, and 1 in 8 say they have left their young child alone in a bathtub for five minutes or longer. Young children can drown in just a few inches of water in the time it takes to answer the phone, which makes these findings all the more troubling.

We also discovered opportunities for education and awareness. On average, eight children ages 5 and under die each year as a result of falling out of windows, and 3,300 children are injured. Yet we found that 70 percent of parents surveyed say they have never used window guards or stops that prevent these falls.

Every parent wants their children to grow up healthy and strong in the place where they deserve to feel safest: at home. The good news is that there are simple and easy steps that families can take to protect their children. By equipping parents and caregivers with this important knowledge, we can help keep children safe at home and make sure that every child has the opportunity to grow up and reach their full potential.
Injuries in the home: What we know

Every year, more than 2,200 children die from injuries that happen at home. Suffocation, drowning, fires and burns, and falls account for many of these deaths.

What are the leading causes of injury-related death apart from motor vehicle crashes? In 2013, more than 1,200 children ages 12 and under died from suffocation, both in and outside of the home (Figure 1). Many of these were the result of unsafe sleep environments; 819 infants under the age of 1 suffocated or strangled in bed.

Drowning is another leading killer; in fact, drowning is the leading cause of injury-related death in the home for children ages 1 to 4. While many parents may think about their children’s safety around swimming pools, bathtubs, toilets and even buckets can present a danger for young children. In 2013, 249 children ages 5 and under drowned at home and elsewhere in swimming pools, 91 children in natural water and 53 children in bathtubs.

Figure 1: Unintentional injury deaths that commonly happen in the home, by mechanism, 2013, children 12 and under

For every death, many more children are seriously injured, requiring visits to emergency departments and hospitalizations. In 2013, 3.5 million children were seen in emergency departments for unintentional injuries related to falls, hits, cuts, burns, poisonings, near-suffocations and near-drownings that occurred both at home and elsewhere (Figure 2). Nearly 2 million children ages 12 and under visited emergency departments for falls alone. Almost 1.1 million children were seen for injuries from hitting or being hit by a person or an object (struck by or against).

Figure 2: Unintentional non-fatal injuries that commonly happen in the home, by mechanism, 2013, children 12 and under

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Top Causes of Injury Deaths that Commonly Happen in the Home

<table>
<thead>
<tr>
<th>Cause</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suffocation</td>
<td>1,207</td>
</tr>
<tr>
<td>Drowning</td>
<td>577</td>
</tr>
<tr>
<td>Fire/burn</td>
<td>263</td>
</tr>
<tr>
<td>Struck by/against</td>
<td>57</td>
</tr>
<tr>
<td>Fall</td>
<td>55</td>
</tr>
<tr>
<td>Poisoning</td>
<td>51</td>
</tr>
<tr>
<td>Cut/pierce</td>
<td>2</td>
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</tbody>
</table>

Top Causes of Non-fatal Injuries that Commonly Happen in the Home

<table>
<thead>
<tr>
<th>Cause</th>
<th>Number of ED Visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>1,955,939</td>
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<tr>
<td>Struck by/against</td>
<td>1,082,809</td>
</tr>
<tr>
<td>Cut/pierce</td>
<td>270,140</td>
</tr>
<tr>
<td>Fire/burn</td>
<td>93,064</td>
</tr>
<tr>
<td>Poisoning</td>
<td>47,273</td>
</tr>
<tr>
<td>Suffocation</td>
<td>20,216</td>
</tr>
<tr>
<td>Drowning</td>
<td>3,741</td>
</tr>
</tbody>
</table>
Making sure that their children are safe is a priority for every parent.
Safety in the home: What parents told us

Making sure that their children are safe is a priority for every parent. Yet as we’ve seen, more than 10,000 children are seen in emergency departments every day for injuries that commonly happen in the home. Given this, we wondered: what’s causing the disconnect, from concerned parents to serious injuries?

To explore this, Safe Kids Worldwide surveyed 1,010 parents in the United States with children ages 12 and under in November 2014. We wanted to better understand what parents are concerned about, what they do to keep kids safe in the home, and what they know about proven safety interventions.

We asked parents what they are most worried about in their homes when it comes to safety for their children in an open-ended question (Figure 3). The top worry among the surveyed parents is fire (16 percent). Fires and burns are a leading cause of injury-related death. In 2013, 263 children ages 12 and under died from fires and burns. The surveyed parents also say that falls and slipping (12 percent) and stairs and steps (3 percent) concern them. Only 4 percent of parents surveyed say that they are worried about poisoning, chemicals and carbon monoxide, and just 1 percent say they are concerned about drowning—despite this being a leading cause of death of young children.

We also learned that many parents are concerned about their child’s safety in other people’s homes; 76 percent of parents surveyed strongly/somewhat agree with the statement, “I worry about my child’s safety in other people’s homes.” Parents also say their homes are safer than others; 77 percent of parents surveyed strongly or somewhat agree that their home is safer than most. Yet we learned that many parents say their child has had a recent experience with a serious injury in the home; 13 percent of surveyed parents say they have had to take their child to an emergency room, clinic or doctor for an injury that happened at home in the last year. Respondents most often say that their child went for a fall (26 percent), a fracture (14 percent) or a head injury (13 percent) (Figure 4).
A Pediatrician’s Perspective: Peter S. Waldstein, M.D., F.A.A.P.

I’ve been a pediatrician for 37 years. One of the most difficult parts of my job is treating a child with an injury that could have been prevented.

Most parents are unaware that preventable injuries are a serious issue. These are good parents who care deeply about their kids and they just need the right education.

Pediatricians are an important partner in this effort. When parents bring their children into the doctor’s office, safety and prevention need to be addressed in addition to the medical issues usually covered in a routine check-up.

I try to educate parents in a very calm manner. At different ages, we discuss different strategies for keeping kids safe, including constant supervision around water; installing baby gates and window guards; creating and practicing a fire escape plan; and ensuring babies sleep alone, on their backs and in a crib. As the kids get older, we discuss the importance of swim lessons, bike helmets, and staying hydrated when playing sports.

It doesn’t have to be overwhelming or complicated. I explain to the parents that if you take these simple steps there is less chance of an injury happening. My overall message is prevention matters.

Dr. Peter Waldstein, F.A.A.P., is a leading pediatrician in Los Angeles.

So what are parents doing—and not doing—to keep their children safe in their homes?

In the kitchen

Few rooms in the house seem to pose a greater risk to children’s safety than the kitchen. There are hot stoves and ovens, dangerous cleaning chemicals and sharp knives. While kitchens aren’t the only place where a fire can start, it’s certainly a place where fires can happen. Kitchens are the leading room for home fires to start, with 2 in 5 home fires originating there.4 We learned from parents that fire is their greatest worry when it comes to safety for their children in their home.

The majority of parents surveyed—96 percent—say they have a smoke alarm in their house, and half of those say they have a smoke alarm on every floor (Figure 5). But parents often forget or don’t know that it’s important to check smoke alarm batteries to make sure they’re working. Forty-two percent of parents surveyed say they check the batteries less often than every six months, which is recommended by experts (Figure 6). And 14 percent of surveyed parents say they never check their batteries. However, we know that working smoke alarms reduce the risk of dying in a reported home fire by half.7
Figure 6. How often do you check to see if your smoke alarm batteries are working?

Children can also get burned or scalded by hot objects in the kitchen, such as stoves and hot beverages. A study found that on average, there are five emergency department visits every hour for an injury related to a stove for children and adults, and that 41 percent of injuries are among children ages 19 and under. To prevent injuries around the stove, use the back burner and turn pot handles away from the edge.

While keeping young children away from the stove and oven might seem logical, what else do parents need to consider in the kitchen? We learned that many parents store cleaning products in places where children can easily reach them. Cleaning products can contain chemicals that, when used improperly or accidentally swallowed by a child, can cause irritation, stomach upset and even serious burns. Yet 68 percent of parents surveyed say they store cleaning products in a cabinet below the counter or sink in the bathroom or kitchen (Figure 7).

Among respondents who store cleaning products and medicines on a low shelf or in a cabinet, 59 percent say they are not in a locked container or in cabinets with child safety locks on the doors. However, this varies by how old their children are. More surveyed parents whose youngest child is age 2 or younger keep their cleaning products or medications in a locked container or in cabinets that have child safety locks on the doors (70 percent), compared to those whose youngest child is older; 3 to 5 years (56 percent), 6 to 9 (29 percent), or 10 years or older (20 percent). That 3 in 10 parents with a toddler keep medicines and cleaning products on a low shelf or in an unlocked cabinet suggests that parents aren’t always following the recommendation to keep these items up high and out of sight of young children. Compare this to the overwhelming number of children riding buckled up in a car; 99 percent of children ages 1-3; 96 percent of children 4-7; and 91 percent of children 8-12. How is it that conscientious parents who protect their child in a car might not have considered dangerous products in reach of kids in the home?

Figure 7. Where in your home do you currently keep cleaning products?

The majority of parents say they store cleaning products below the counter or sink in the kitchen or bathroom.
255 children under age 5 are seen in emergency departments every day for stair-related injuries.

**Around the stairs**

After fires and burns, falls are the biggest home safety concern for parents. One place where many falls happen is on stairs. A study found that on average, each year more than 93,000 children under the age of 5 are seen in emergency departments for stair-related injuries.\(^9\) One of the easiest ways to prevent stair injuries is to use safety gates. A study found that parents who had a young child injured from falling from furniture were 65 percent more likely to not use safety gates than those who did not have an injured child.\(^10\) Experts recommend that parents and caregivers use approved safety gates at the top and bottom of the stairs, and attach them to the wall if possible.

**In the living room**

Where else can falls happen? Many parents may not consider that their children could be seriously injured falling off of furniture, or being hit by falling furniture or a television. Forty-two percent of parents in our survey say they have found their child climbing on bureaus, dressers, bookshelves or counters. Serious injuries can happen when furniture and other heavy items become unbalanced. According to the U.S. Consumer Product Safety Commission, 18,900 children ages 9 and under are seen in emergency departments each year from injuries caused by TV, furniture and appliance tip-overs.\(^11\) It’s important to secure TVs by mounting them to the wall or placing them on a low, stable piece of furniture, and to use brackets, braces or wall straps to secure top-heavy or unstable pieces of furniture to the wall.

However, we learned that 48 percent of surveyed parents say they haven’t secured TVs and furniture to prevent them from tipping over (Figure 8). While we found that some parents are mounting their televisions (24 percent), using furniture straps (11 percent) or putting televisions on a low, stable piece of furniture (24 percent), we hope to reach the half of parents who aren’t aware of this problem, or who don’t know what to do to prevent serious injuries caused by tip-overs.

**Figure 8. Have you secured televisions and furniture to prevent them from tipping over?**

- Yes, I use a television mount
- Yes, I have put a TV on a low, stable piece of furniture
- Yes, I use furniture straps
- Yes, I use a television strap
- No, I haven’t secured televisions and furniture to prevent them from tipping over
Many parents told us they were concerned about the safety of toys that their children play with; 25 percent of parents surveyed say they often or sometimes worry about their child being hurt by a toy. In 2013, the U.S. Consumer Product Safety Commission received reports of nine toy-related deaths among children. Another 178,100 children were seen in emergency departments for toy-related injuries. To prevent these injuries, it’s important that parents read warning labels and instructions to make sure that toys are appropriate for their child’s age, and keep toys separate for children of different ages.

In the bathroom

Parents may be surprised to learn that drowning is the leading cause of injury-related death in the home for children ages 1 to 4. In 2013, 157 children ages 1 and younger drowned, and 24 percent of them were in a bathtub. We asked parents with at least one child ages 5 and under about their child’s bath time. We learned that 49 percent of parents surveyed say they have left their young child alone in a bathtub (Figure 9). One in 8 respondents say they have left their young child alone in a bathtub for five minutes or longer. A study from 2003 found that 31 percent of families surveyed with children ages 5 and under said they had left their children alone while they were bathing. While we found that a higher percentage of parents admit to leaving their children alone in a bathtub, both studies found that getting towels was the top reason parents left their child unsupervised. In our survey, the top reasons parents gave were getting towels (65 percent), checking on other children (22 percent) and cooking (14 percent).

**Figure 9: What is the longest time you have left your child in the bathroom alone while in the bathtub?**

Young children can drown in just a few inches of water, and in the time it takes to get a towel in the hallway. In a review of home drownings, 34 percent of fatalities in bathtubs among children under the age of 5 involved a lapse in supervision, such as when the caregiver went to answer a phone or to get a towel. It’s important that parents know to never leave a child unattended around water, and to give young children your full and undivided attention when they are in or around water.
Drowning isn’t the only worry for parents in the bathroom. Many families store pills, capsules, creams and liquid medicines in the bathroom where it’s easy to remember to take them. However, if not stored properly, kids can easily get into these products. In 2013, poison centers answered more than 1 million calls about children ages 5 and under who were exposed to medicine, cleaning products, or another potentially dangerous product. In our survey, we learned that 73 percent of parents say they store medicines on a high shelf or cabinet above the counter or sink in the bathroom or kitchen (Figure 10). But 9 percent of respondents say they keep medicines on a nightstand or in a nightstand drawer, and 7 percent say they leave them on the counter or sink in the bathroom or kitchen. In a previous survey, Safe Kids found that more grandparents who regularly care for young children identified electrical outlets than medicine as a safety concern—yet 36 times more children go to emergency departments for medicine poisoning. It’s important that families remember to put all medicines—even ones for parents, older children and grandparents—up and away and out of sight of young children.

Figure 10: Where in your home do you currently keep medications?

- On the counter or sink in the bathroom or kitchen
- In the hallway, laundry room or garage, on a high shelf or cabinet
- On a nightstand or in a nightstand drawer
- In the bathroom or kitchen in a cabinet below the counter or sink
- In the bathroom or kitchen, on a high shelf or cabinet above the counter or sink

Percent of parents

In the bedroom

The bedroom can seem like the safest room in the house; after all, it’s free of hazards like hot stoves, cleaning chemicals and bathtubs. But there are still reasons why it’s important for parents to consider safety in bedrooms.

Suffocation is one of the leading causes of death for young children, especially babies; more than 819 infants under the age of 1 suffocated or strangled in bed in 2013. In a readership survey of new moms, Safe Kids and the magazine American Baby found that while 96 percent of mothers surveyed know that their baby should sleep alone, on their back and in a crib, many are not following these recommendations. For example, 73 percent of respondents say they place items in the crib with their baby, including blankets, bumpers and stuffed animals—all of which can be suffocation hazards. Keep cribs clear of objects, and make sure that babies sleep alone, on their backs, and in a crib every time they sleep.
Parents should also consider the safety of their older children during the night. We learned that 46 percent of parents say they don’t have a fire escape plan for their home. Of those who do, 45 percent say they never practice their fire escape plan with their children. Why is it important to have and practice a fire escape plan, and to consider it during a time when families are usually sleeping? According to the National Fire Protection Association, 20 percent of reported home fires happen between 11 p.m. and 7 a.m.—but 51 percent of home fire deaths resulted from fires during this time. It’s important to develop and practice a home fire escape plan, with two ways out of the house in case of a fire.

We also found that while the majority of parents surveyed say they have a smoke alarm in their home, only 56 percent say they have a carbon monoxide detector. In 2013, poison centers answered 2,590 calls about carbon monoxide exposures for children ages 12 and under.

Parents told us that window safety may not be top of mind: 70 percent of parents surveyed say they have never used window guards or stops that prevent windows from opening (Figure 11). According to the U.S. Consumer Product Safety Commission, on average eight children ages 5 and under die each year as a result of falling out of windows, and 3,300 children are injured. Window guards screw into the side of a window frame and have bars no more than 4 inches apart. Install window guards or window stops to keep children from falling out of windows. Screens are not a substitute for window guards or stops, as they’re not designed to prevent children from falling out.

In addition to the risk of window falls, parents also need to consider window blind cords. On average, a child dies almost every month from strangling in window blind cords. We found that 73 percent of surveyed parents say they have heard of children strangling in window blind cords, but only 23 percent say they have made changes to their window blinds such as removing the cord or installing tension devices. Keep cords and strings out of reach of children, and move cribs, beds and furniture away from windows and cords.

A Mom’s Mission to Promote Window Safety

The day before the day that changed my life forever had been unseasonably warm for late October in Vancouver, Washington, where I live with my husband, Jason, and our three children, Bailey (older sister), Zane and Thomas (twin 4-year-old boys). We took advantage of the weather by opening our windows to air out the house.

The next day when the boys went down for their naps, Zane was in a deep sleep and Thomas was having quiet time. Then I heard a noise. I ran upstairs. When I got in Thomas’ room, I yelled, “Thomas! Thomas!” and looked around frantically. We found Thomas on the cement outside the house. It was a moment I’ll never forget.

Thomas stayed in the PICU in a medically-induced coma for eight days. We spent the next few years focusing on his emotional and physical health and trying to heal our whole family.

This story takes me back to the worst place I’ve ever been. But I continue to tell it in hopes that it prevents other children from falling out of a window. Please check your windows and use window guards. It only takes a moment but it can make a world of difference.

Becca Cunningham is the author of a children’s book about window safety called If Kids Could Float.
Public policy for home safety

Making our kids safer in the home involves a partnership of families, the private sector, the healthcare community and public safety educators like Safe Kids. It also includes a role for governments at the federal, state and local levels. Smart public policy has made homes safer, and it can help lead to greater progress. There has been a dramatic decline in childhood injury deaths across all risk areas, from 23.29 deaths per 100,000 population (16,501 kids) in 1987 to 9.3 deaths per 100,000 population (7,645 kids) in 2013 (Figure 12).23

Along the downward slope of this steady decrease in fatalities, we can plot laws passed, rules and standards set, corporate reforms implemented and education/awareness campaigns mounted, all of which have contributed to the positive direction.

Figure 12. Number of unintentional injury deaths among children 19 and under, 1987-2013, across all risk areas

The following outlines the effective role that public policy can play in making the home a safer environment for kids, through the work of the U.S. Consumer Product Safety Commission. To learn more, visit www.safekids.org/public-policy.

Product Safety in the Home. A good example of the role of government in creating safer homes is protecting kids from dangerous or defective products. The Consumer Product Safety Commission was established in 1971,24 and was strengthened significantly with passage of the Consumer Product Safety Improvement Act of 2008.25 The CPSIA, which expanded the agency’s mission and power, highlighted the important role of protecting children.

Recalls. The United States has developed the gold standard for warning consumers about defective products that should be taken out of the market.26 In most cases, recalls are made through a consensus reached by government agencies and the private sector, with agencies retaining powers of enforcement.

The increased vigilance by the CPSC and industry has paid off. In recent years, the number of toys recalled has declined significantly. In 2014, toy recalls totaled 30, compared to 172 in 2008.29
CPSC is responsible for protecting kids from many dangers in the home, including:

- Carbon monoxide poisoning;
- TV and furniture tip-overs;
- Window falls and window blind cord strangulation;
- Unsafe sleep environments;
- Drowning, based on the Virginia Graeme Baker Pool & Spa Safety Act;
- Products that pose a fire, electrical, chemical or mechanical hazard.

**Public policy prescriptions**

**Increased Awareness About Recalls.** The CPSC and other federal consumer safety agencies have done a good job of identifying products that pose a risk and negotiating voluntary recalls. However, recall notifications do not get the wide distribution they deserve. The public safety community must work with agencies and the private sector to amplify news about important recalls, which might be achieved through a creative public-private partnership.

**Sustainable Funding for Poison Control.** One of the best examples of a public-private partnership that helps save young lives at home is the network of 55 poison centers around the country. They are funded by a variety of sources, public and private, and the return on investment is high—including $1.8 billion in costs saved each year because people were able to avoid going to hospitals. Congress has authorized modest yearly federal funding of $28.6 million, but appropriations have been reduced to $18.8 million. Safe Kids continues to inform Congress on the return on investment of this critical program and advocates for an annual appropriation of the full $28.6 million.

**Understanding Sudden Unexpected Infant Death.** Sudden Unexpected Infant Death (SUID) is an umbrella term to describe infant deaths resulting from Sudden Infant Death Syndrome (SIDS), accidental suffocation and strangulation in bed, and other ill-defined/unspecified causes of death for infants under 1 year of age. SIDS is the fourth-leading cause of infant mortality in the United States. The American Academy of Pediatrics’ position statement on recommendations to reduce SIDS and SUID deaths emphasizes the importance of safe sleeping environments, such as room-sharing instead of bed-sharing; using a firm sleep surface; and keeping soft objects like pillows, blankets and toys out of the infant’s sleeping environment. Because evidence is the foundation for smart policy solutions, we need a national surveillance system to help us understand why these unexplained deaths occur at a rate of about 2,000 per year. Further, a uniform model for death investigations must be established to support the surveillance system.

**Providing Resources for Fire and CO Poisoning.** Safe Kids supports state and local governments that have passed legislation to increase alerts for fire and carbon monoxide dangers, including laws requiring detectors with 10-year power capacity. We have supported federal, state and local legislation to provide more community resources for CO awareness.

Public policy has played, and can continue to play, an effective role in making homes safer. Of course the most effective actors in efforts to make our homes safer are parents and caregivers. To learn more, visit www.safekids.org/public-policy.

**Emerging Hazards:**

What’s new in your home?

It seems like there are new products available to families on a near-daily basis. Smaller gadgets, more efficient cleaners, and flat-panel televisions are finding their way into our homes. But what happens when parents don’t consider how these new products could potentially be dangerous to children? Coin-sized button batteries, like those found in small electronics such as watches, remote controls and greeting cards, can get stuck in the throat and cause life-threatening burns if swallowed by young children.

Concentrated laundry packets can be harmful if a child bites into one and swallows it; poison centers received more than 11,700 calls about young children exposed to laundry detergent packets in 2014. Serious effects can include trouble breathing, pneumonia, seizures and coma. Even moving a large, tube-style television to a bedroom to make room for the new flat screen can create a hazardous situation. Heavy TVs on unstable pieces of furniture, such as a bedroom dresser, can seriously injure or kill a young child climbing the drawers.

While new products bring added convenience, when bringing anything new into the home, take a moment to consider how it could impact a child’s safety.
Safe Kids, Safe Homes: Top Tips

Every parent wants their child to grow up healthy, strong and safe. These simple tips can protect children in your home.

• Use approved safety gates at the top and bottom of the stairs, and attach them to the wall if possible.

• Give young children your full and undivided attention when they are in and around water.

• Keep cribs clear of objects, and make sure that babies sleep alone, on their backs, and in a crib every time they sleep.

• Develop and practice a home fire escape plan, with two ways out of the house in case of a fire.

• Make sure there is a smoke alarm on every level of your home, and test the batteries every six months.

• Cook on the back burner of the stove and keep pot handles turned away from the edge.

• Install carbon monoxide alarms on every level of the home, especially near sleeping areas.

• Keep all medicines up and away and out of sight of young children, even medicine you take every day. Be alert to medicine stored in other locations, like pills in purses, vitamins on counters, and medicine on nightstands.

• Store all household cleaners and other toxic products out of children’s sight and reach.

• Secure TVs by mounting them to the wall or placing them on a low, stable piece of furniture.

• Remember, kids love to climb, so use brackets, braces or wall straps to secure top-heavy or unstable pieces of furniture to the wall.

• Keep window cords and strings out of reach of children, and move cribs, beds and furniture away from windows and cords.

• Install window guards or window stops to keep children from falling out of windows.

• Keep toys separate for children of different ages and read labels and instructions to make sure that toys are age-appropriate.

Sign up to receive our newsletter and recall alerts at www.safekids.org.
Simple tips can help keep children safe where they should feel safest: in the home.
Methodology

The online survey was completed by 1,010 adults with children ages 12 and under. The survey included 55 questions, lasted 15 minutes, and was fielded from November 11 to 25, 2014, using probability sampling-based GfK-Knowledge Networks KnowledgePanel®.

References

26. Food safety recalls are conducted by the Food and Drug Administration and the Food Safety Inspection Service, while vehicles and car seats are within the jurisdiction of the National Highway Traffic Safety Administration.
28. Primarily, the CPSC’s role is an educational one. A bill sponsored by Sen. Amy Klobuchar (D-Minn.), supported by Safe Kids and other groups, would provide more resources to prevent CO poisoning. It passed out of the Senate Commerce Committee in late 2014 but did not advance to a floor vote. Nicholas and Zachary Burt Memorial Carbon Monoxide Poisoning Prevention Act of 2013, S. 1793, 113th Cong. (2013). Available at: https://www.congress.gov/bill/113th-congress/senate-bill/1793?q=%7B%22search %22%3A%5B%22Nicholas+and+Zachary+Burt+Memorial+Carbon+Mono xide+Poisoning+Prevention+Act%22%5D%7D. Accessed February 9, 2015.
31. Working with a strong coalition, Safe Kids supported Congressman Frank Pallone (D-NJ), and Senators Kelly Ayotte (R-ME) and Sherrod Brown (D-OH) on passage of a bill that created a pathway towards surveillance and model practices when an infant dies from unexplained reasons. Sudden Unexpected Death Data Enhancement and Awareness Act, P.L. 113-236. Available at: https://www.congress.gov/bill/113th-congress/senate-bill/1793?q=%7B%22search %22%3A%5B%22Sudden+Unexplained+Infant%22%5D%7D. Accessed February 9, 2015.
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