

Chapter 4

Creating a safe environment indoors and outdoors

Introduction

Children are curious. They love to explore. Make the children's environment, indoors and out, as safe as possible so that they have the freedom to explore without fear of being hurt or adversely affecting their health.

In this chapter, you'll find information on the following topics:

- Child care safety check
- Smoke-free environments
- Indoor air quality and mould
- Protection from air pollution
- Sun safety
- Safe water
- West Nile Virus protection
- Pesticides
- Car seat and booster seat safety
- Pedestrian and sidewalk safety
- Cycling safety
- Playground safety

Tips for success

- Check your centre regularly for unsafe equipment and other potential hazards
- Share information on the above topics with parents and guardians, to encourage home safety practices. Refer to Appendix 4 for resources and pamphlets
- Be safety conscious
- Keep emergency telephone numbers posted by all your telephones. Refer to the *Community resources* section for important numbers

Child care centre safety check

When doing your regular safety checks, here are some areas to consider:

- Make sure the handrails of your staircases are at a level children can reach
- Make sure windows are locked and designed to keep children from falling through them
- Make sure sleeping areas are well ventilated
- Cover all electrical outlets with safety caps and keep extension cords out of reach
- Ensure the temperature of the hot water of any sinks that children have access to (e.g., activity room, washroom and diaper change table sinks) is no higher than 49°C or 120°F. This is to prevent children from scalding themselves (54°C or 129°F if you have an electric hot water heater)
- Make sure that the toys used by infants are not small enough for them to choke on. Be sure to check that toys brought in by parents or housed at the child care centre do not have small, broken, sharp or loose parts
- Check large play equipment, both indoor and outdoor, regularly for broken parts, sharp edges protrusions, entanglements and entrapments. Place mats under indoor climbing equipment
- Store all medications in a locked container/cabinet in an area inaccessible to children
- Ensure that the outside play area is free of dead trees or trees with dead branches
- When using a wading pool:
 - Provide constant supervision
 - Use only with children over the age of three. Refer to Appendix 4 *Play pools*
 - Dump water from the pool at the end of outdoor play time. Refer to the section on *Protecting children against West Nile Virus* in this chapter
- Ensure all cribs, playpens, strollers, high chairs, safety gates, car seats and booster seats comply with current safety standards
- Ensure change tables are properly designed as outlined in section 2:5 *Change area set-up*
- Refer to Appendix 4 *Sample child safety product list*, *Keeping your home safe-checklist* (available in other languages), and *A step ahead...of childhood falls* for further information

A smoke-free environment

Under the Smoke-Free Ontario Act, (SFOA), all Day Nurseries, including licensed private home day care premises must be 100 per cent smoke-free. This requirement applies 24 hours per day, 7 days per week, whether or not the children are present. York Region Community and Health Services encourages unlicensed private home day care premises to keep their facility 100 per cent smoke-free as well.

Refer to Appendix 4 for the following resources: *Breathing Space stickers*, *Steps to make your home smoke free* and the *Smoke Free Ontario Act 2005: How the Act affects Day Nurseries and Private Home Day Care*.

Also under the SFOA, the outdoor grounds of all Day Nurseries that are attached to a school must be 100 per cent smoke-free. York Region Community and Health Services encourages all child care premises, both private and public to make their outdoor grounds 100 per cent smoke-free.

Numerous studies have demonstrated that children are at a greater risk than adults from exposure to second-hand smoke. Children have smaller airways and they breathe more rapidly which means that they inhale more pollutants relative to their total body weight. Children exposed to second-hand smoke are at risk for coughs, Pneumonia, Asthma, ear infections and Sudden Infant Death Syndrome as well as an increased risk for cancers and cardiovascular disease in adulthood.

The SFOA was amended in January 2009 to prohibit smoking in a vehicle, whether moving or stationary, carrying children under the age of 16. This law was supported by the Ontario Medical Association which indicated that smoking in a vehicle is at least 27 times more toxic than in a home, even if the windows are down.

Refer to Appendix 4 for the following resources: *Thanx Mom and Dad for a smoke-free ride* pamphlets and *Kids on Board. It's a smoke-free zone* posters.

Children learn by example and may witness habits that can last a lifetime. As a child care provider you are in an excellent position to encourage smoke-free lifestyles:

- Encourage parents to create a smoke-free environment for their children by making their homes and cars 100 per cent smoke-free
- Be a positive non-smoking role model for both children and parents
- Teach smoke-free lifestyles to the children with fun educational kids activities

For more information on the *Smoke-Free Ontario Act* please visit the Ministry of Health Promotion website at www.mhp.gov.on.ca/english/health/smoke_free/legislation.asp or contact York Region *Health Connection* at 1-800-361-5653 and speak to Tobacco Education and Control at ext. 4825.

Indoor air quality

Canadians spend close to 90 per cent of their time indoors. In order to minimize risks associated with exposure to indoor air pollutants, it is important to recognize and control potential sources of pollutants.

Indoor air pollutants are classified into two groups:

- Biological contaminants – these include living organisms such as mould and bacteria
- Chemical contaminants – these include gases and particles released from items such as new furniture, soil, appliances, etc.

Some major indoor air pollutants and their sources include:

- Tobacco smoke releases carbon monoxide, oxides of nitrogen and harmful organic contaminants
- By-products of combustion (e.g. carbon monoxide and carbon dioxide) from unvented gas heaters, wood and gas burning fireplaces
- Formaldehyde from furniture, vehicle exhaust, stoves
- Other volatile organic compounds from paints, solvents, air fresheners
- Pesticides from garden and lawn maintenance chemicals
- Asbestos from acoustical materials, tiles, insulation
- Heavy metals from paints, soil
- Bio-aerosols from pets, outdoors, humidifiers
- Mould from excessive humidity, inadequate ventilation, flooding

Common symptoms associated with exposure to poor indoor air include:

- Headaches
- Fatigue
- Shortness of breath
- Worsening of pre-existing allergies and asthma
- Sinus congestion, cough and sneezing
- Eye, nose, throat and skin irritation
- Dizziness and nausea

To reduce and control exposure to indoor air pollutants:

- Clean with a good quality vacuum, or simply a damp cloth or wet mop
- Use non-toxic cleaning products
- Air out rooms when using cleaning and disinfection products
- Children and pregnant women should stay away from areas being renovated, to avoid being exposed to potentially harmful substances
- Control and contain all dust

Mould:

Mould requires the presence of nutrients, adequate temperature and moisture to grow. It can affect indoor air quality as it can release spores that can be inhaled and cause possible health effects.

Major causes of mould growth are:

- Excessive humidity
- Lack of ventilation and inadequate ventilation
- Water infiltration e.g., water from an external source
- Water leaks and floods

In order to minimize mould growth, it is important to:

- assess the building structure for damage,
- reduce condensation indoors where possible,
- increase air circulation, and
- clean and dry wet surfaces immediately

Health effects of mould

Health Canada considers that mould growth in buildings may pose a health hazard. Health risks depend on exposure and individual sensitivity. To reduce exposure to mould, Health Canada's Residential Indoor Air Quality Guidelines recommends removing mould growth regardless of the mould species found to be growing in buildings.

Common symptoms associated with mould exposure

There is sufficient evidence that exposure to mould in indoor environments is associated with:

- Asthma and asthma-like symptoms in asthmatic individuals
- Upper respiratory tract symptoms
- Cough and wheezing

Children should see a medical doctor immediately if they experience any of the above symptoms. Where mould is identified in a specific room, it is best practice to relocate children to another room until the mould has been removed and the room has been properly cleaned. For information specific to mould removal/clean-up refer to the Canadian Mortgage Housing Corporation (CMHC) website: <http://www.cmhc-schl.gc.ca>

Questions pertaining to mould and or indoor air quality concerns at your school or child care centre can be directed to the public health inspector at the *Health Connection* line at 1-800-361-5653 or visit our website <http://www.york.ca/Services/Public+Health+and+Safety/Environmental+Health>

Protection from air pollution

Air pollution harms our health

Cars, buses, trucks, and other motorized vehicles are one of the largest sources of outdoor air pollution that have been clearly linked to negative health effects. In addition to road traffic, other neighborhood sources of air pollution, such as factories, asphalt road paving and construction, charcoal barbecues, and back yard burning can also have an impact on local outdoor air quality.

Air pollution can cause health problems in all people; however, those most effected are:

- Young children
- Pregnant women
- Seniors
- People suffering from asthma
- People with heart and lung conditions
- Smokers

Children are at a higher risk from exposure to air pollution because they are outdoors more, their lungs are still developing and they breathe at a faster rate.

Signs and symptoms caused by air pollution include:

- Coughing
- Wheezing
- Chest tightness

Air pollution has been linked to increases in asthma symptoms, hospital admissions and early death rates. Evidence also suggests that long-term exposure to air pollution is associated with an increased risk of Lung Cancer and Heart Disease. In addition, existing heart and lung conditions and sensitivity of asthmatics to allergens may be aggravated.

The Ontario Medical Association estimates that air pollution contributes to an estimated 9,500 premature deaths in Ontario each year.

How to protect your health from air pollution

The Air Quality Health Index or "AQHI" is a health protection tool designed to help you make decisions to protect your health such as limiting short-term exposure to air pollution and adjusting your activity levels during increased levels of air pollution.

The AQHI translates air pollution levels into a 10 point scale. The higher the number, the greater the health risk associated with the air quality. Based on the AQHI number the health risk is categorized as low, moderate, high or very high. For each risk category, the index provides

advice on how the general public and those sensitive (such as children and the elderly) to air pollution can protect their health during these periods of increased air pollution.

To find out the current and forecasted AQHI reading for your local area visit the AQHI website (www.airhealth.ca) and select either Newmarket (northern York Region) or Toronto (southern York Region) monitoring stations.

Refer to Appendix 4, call York Region *Health Connection* at 1-800-361-5653 TTY 1-866-252-9933 to obtain the AQHI brochure – “*The Air Quality Health Index: Protect your health. Know the numbers*” or visit www.york.ca

How those most affected may be protected

During episodes of poor air quality levels, the following actions can be taken to minimize exposure to air pollutants.

- Check the AQHI daily (www.airhealth.ca) as well as registering with the MOE’s Smog Alert Network (www.airqualityontario.com)
- Be aware of every child who has a medical condition that may be moderately or severely aggravated by high air pollution levels
- Monitor any children who fall into the above category during all outside activities between May and September
- Be ready to seek medical attention for these children and contact their parents or guardians as required
- Reschedule outdoor activities to another time when air pollution levels are not high.
- Avoid strenuous exercise activities during high pollution times
- Keep children away from high traffic areas to reduce exposure to vehicle exhaust
- Consider energy conservation actions to reduce your facility’s contribution to local air pollution

Help reduce air pollution levels

Child care centers should take the following actions and refrain from activities that could worsen the air quality:

- Limit the use of cars. Walk, cycle, carpool or take public transit

- Reduce unnecessary idling of your vehicle at all times. If you are going to be stopped for more than 10 seconds (except in traffic), turn off your engine
- Consider designating your child-care centre an idle free zone.
- Restrict the use of oil-based paints, solvents, glues, gas-powered engines (such as lawnmowers and leaf blowers), charcoal barbecues and back yard burning
- Conserve energy; turn down the air conditioner and turn off lights you are not using. Use energy efficient light bulbs. Install low-flow showerheads and aerators in faucets to conserve water
- Consider purchasing products with the Energy Star rating label

For further information on air quality issues, contact York Region *Health Connection* at 1-800-361-5653 TTY 1-866-252-9933 and speak to a public health inspector.

Refer to Appendix 4 for the *20/20 The Way to Clean Air Planner Brochure*, filled with tips to reduce your energy use, or contact the Clean Air Partnership at 1-866-583-2020 or visit www.cleanairpartnership.org/2020

Extreme Heat

Although extreme heat can affect everyone, infants and children are more at risk than others for heat-related illnesses. Heat-related illnesses range from heat rash and muscle cramps, to more dangerous hot weather emergencies like heat stroke and heat exhaustion. During extreme heat, it is important to keep children cool and avoid additional stress on their bodies.

Here are some important tips to stay safe and keep cool:

- Check for York Region [Heat Advisories](#) and your local [weather forecasts](#) for temperature, humidex advisories, the Air Quality Health Index and UV index
- Stay indoors in cool, well-ventilated areas
- Keep children hydrated by drinking plenty of water
- Schedule physical outdoor activities in the morning and evening hours when it is cooler
- Reduce children’s activity and rest often in shady areas
- Promote the use of lightweight, light-coloured, loose fitting clothing, wide brimmed hats, sunglasses with UV protection and sunscreen with SPF 30 or higher
- Know the symptoms and treatment of heat-related illness

For more information on extreme heat and children, please visit Health Canada’s page “[Keep children cool! Protect Your Child from Extreme Heat](#)” or www.york.ca; or call Health Connection at 1-800-361-5653, TTY 1-866-252-9933 to speak to a Public Health Inspector.

Sun safety

Protecting children from the harmful effects of the sun can greatly reduce their lifetime risk of developing Skin Cancer. According to the Canadian Cancer Society (2001), one in seven children born today will develop Skin Cancer during their lifetime. In fact, the majority of lifetime exposure to the sun will occur before a child reaches the age of 18 (World Health Organization, 2001).

As child care providers, it is important to protect children by following the *SunSense Guidelines*, developed by the Canadian Cancer Society.

- Reduce sun exposure between 11 a.m. and 4 p.m. (especially when the UV Index is over three), as the sun's rays are strongest between these hours. Try to plan your outdoor activities before 11 a.m. or after 4 p.m.
- Seek shade or create your own, especially between 11 a.m. and 4 p.m. Trees, umbrellas, and shade structures can provide protection from the sun's harmful rays
- Wear protective clothing. Choose clothing that is loose fitting, tightly woven, lightweight and covers your arms and legs
- Wear a wide-brimmed hat that covers your head, face, ears, and neck. Hats such as baseball caps do not provide enough protection
- Wear sunscreen with a Sun Protection Factor (SPF) of 15 or higher. Look for a "broad spectrum" sunscreen which offers protection against both UVA and UVB rays. Sunscreen should be applied generously 20 minutes before outdoor activities, and re-applied at least every two hours (and after swimming or perspiration). Use sunscreen along with shade, clothing and hats, not instead of them
- Keep babies under one year of age, out of the direct sun. Babies need extra protection because their skin is very sensitive. Keep their stroller, playpen, or carriage in the shade. Do not apply sunscreen on babies under six months old

In addition to following SunSense Guidelines, child care centres can practice and promote sun safety by:

- Having a written sun safety policy. Health professionals are available to assist in creating a policy that provides guidelines for outdoor activities for both children and staff. Call York Region *Health Connection* at 1-800-361-5653 to speak to a public health nurse
- Establishing a routine for going outside that includes wearing hats and protective clothing, and applying sunscreen
- Providing or encouraging parents to provide their own sunscreen for their child.

- Obtain written permission from parents for child care providers to apply sunscreen to their children. In addition, encourage parents to provide hats and protective clothing
- Ensuring the children's play area has natural and/or built-in shade structures for protection from the sun
- Integrating sun safety education into programming:
 - Play the video *Sun Safe Play Everyday* (Canadian Dermatology Association)
 - Read the storybook *Block the Sun, Not the Fun* (Canadian Paediatric Association)
 - Host a silly hat day
 - Celebrate Sun Awareness Week
 - Draw and colour pictures of sun safe outdoor play
 - Play shadow games
 - Post the UV index daily
- Distributing sun safety information to staff and parents
- Encouraging staff to be sun safe role models

For more information please call York Region *Health Connection* 1-800-361-5653 and speak to a public health nurse or refer to Appendix 4 for resources, pamphlets and website links.

Safe water

Safe water is essential for life and health. Child care centres rely on potable (drinkable) water for many different activities throughout their centres. Whether water is used for drinking and cooking, sensory play stations or swimming at the beach, it is important the water is safe.

Drinking water supply

Municipal

Child care facilities on municipal water have a water supply that is constantly monitored and treated. York Region and each municipality are required to sample the water in accordance with the *Drinking-Water Systems Regulation* administered by the Ministry of the Environment.

Water quality reports for the municipal water supply are available on the York Region website at http://www.york.ca/Services/Water/Water+Quality+Reports/default_Annual_WQ_Reports_New.htm. This site explains how our water is treated, what tests are performed and includes water sampling results. It also links to each municipality and townships water quality reports.

Private well

Child care facilities that obtain their water from a private well are also required to comply with the Ministry of Environment's regulation, *Drinking-Water Systems Regulation 170/03*. Testing, treatment and reporting requirements are detailed in this regulation. Adverse water quality results must be reported to York Region Community and Health Services Public Health Inspector by calling, *Health Connection* at 1-877-464-9675, during regular business hours or 905 505-5399 after hours.

Remember to protect your well from contamination. Do not store, use or dispose of manure, gas, salt and garbage or any other contaminant near your well. Conduct routine checks of your well to ensure it is properly maintained and not damaged. The well seal and well cap should be securely in place and watertight. If the well cap is damaged, replace it immediately, otherwise contaminants have direct access to the well. The ground surrounding the well casing should slope away from the well to prevent standing water. Do not store or use chemicals around the well. If your well needs to be upgraded or repaired, it must be done by a licensed well contractor.

York Region Community and Health Services can provide your child care centre with information on the following:

- How to disinfect your well
- Emergency water treatment
- How to correctly sample your well water
- Water treatment devices
- General information on your well
- What to do in the event of a water outage

Boil water advisories

Boil water advisories can be issued to any child care facility regardless of whether municipal water or a private well services your centre. Boil water advisories can be issued if the safety of the drinking water servicing your centre is affected. If a boil water advisory is required, York Region Community and Health Services will contact your centre. Your centre will be advised of the requirements that must be taken during the advisory. Notification will be given when the boil water advisory is lifted, and normal use of the water may resume. Refer to Appendix 3 *Enteric Outbreak Control Guidelines for Child Care Centres*.

Contingency plans

All child care centres should have a contingency plan in place (“What to do if...”) in the event of a boil water advisory or a water outage. This contingency plan will ensure that an adequate safe water supply is available for drinking, cooking, cleaning, handwashing and other uses necessary for the operation of your centre. The contingency plan should also address when centres will be closed due to prolonged water outages. A plan for an alternative water source should be included. Generally, an alternate source means a municipally treated supply or bottled water. Refer to Appendix 4 for fact sheets on *Emergency Water Treatment* and *What to do When You Have No Water at Your Child Care Centre*.

Immediately report planned or unplanned water outages due to plumbing or water main breaks, to your local municipal works department (if your facility is serviced by a municipal water supply) and to the York Region Community and Health Services, *Health Connection* at 1-877-464-9675 during regular business hours, or 905 505-5399 after hours and speak to a Public Health Inspector.

Call *Health Connection* for clarification or for any additional information regarding drinking water at 1-800-361-5653.

Bathing beaches

York Region Community and Health Services staff routinely sample and monitor public beaches within the Region. Samples are taken weekly during the summer months and monitored for bacteria levels as well as issues that may affect the health and/or safety of the bather.

Look for the beach water quality signs (below) posted at your local beach. The blue sign indicates water is safe for swimming whereas the red sign indicates the water is not safe for swimming. Also, it is not recommended to swim at the beach within 48 hours after a heavy rainfall.

York Region Community and Health Services offers a beach monitoring hotline that is routinely updated. Child care centres can check the status of the beaches within the region by calling the York Region Community and Health Services, *Health Connection* at 1-800-361-5653. Beach information is also available through the York Region website at www.york.ca/beaches.

**BEFORE you swim
... look for the sign**



The image shows two beach water quality signs side-by-side. The left sign is red and features a white square with a red circle and slash over a swimmer icon. Below the icon, it says 'WARNING UNSAFE FOR SWIMMING'. The right sign is blue and features a white square with a white umbrella icon. Below the icon, it says 'NOTICE'. Both signs have small text at the bottom regarding the date of the last sample and the location.

Red Sign

Blue Sign

UNSAFE to swim

York Region Health Services advises that you **do not** go into the water when you see this sign.

SAFE to swim, unless there has been a heavy rainfall within the last 48 hours.

York Region Health Services advises that you **do not** go into the water if it has rained heavily at the beach site within the last 48 hours.

York Region

For more information please call York Region Health Services Health Connection at 1-800-361-5653.

Please call *Health Connection* at 1-800-361-5653 during the summer months for further information on the status of your local beach.

Pesticides

A pesticide is any substance used to repel, destroy or prevent the development of a pest. Many commonly found household products are pesticides, including lawn and garden products such as weed killers (herbicides), insect repellents and sprays (insecticides) and mice poisons, (rodenticides).

Pesticides, if misused, can be poisonous to humans, especially to children. People can be exposed to pesticides by inhaling them, by absorption through the skin or by ingestion. Children are at greater risk because pound per pound of body weight, children breathe more, eat more, and have faster metabolisms. It is important to store all hazardous substances out of reach of children.

All pesticides for sale or use in Canada are registered under the *Pest Control Products Act* and managed through Health Canada's Pest Management Regulatory Agency (PMRA). Provincially, the *Pesticides Act* is regulated by the Ontario Ministry of the Environment (MOE). The MOE is responsible for regulating the sale, use, storage, transportation and disposal of pesticides.

Ontario's cosmetic pesticides application ban came into effect on April 22, 2009. The requirements of the ban are detailed in Ontario Regulation 63/09 and the Pesticides Act, which was amended by the Cosmetic Pesticides Ban Act, (CPBA) 2009. Under the CPBA 2009, pesticides cannot be used for cosmetic purposes on lawns, vegetable and ornamental gardens, patios, driveways, cemeteries, and in parks and school yards. The provincial ban supersedes local municipal pesticides bylaws to create one clear and understandable set of rules across the province.

York Region Community and Health Services recommends that any indoor chemical products be only used as a last resort and be applied when children are not in the facility and applied strictly according to the label directions. Children should not be able to come in contact with pesticides or pesticide residue. Be sure to dispose of empty pesticide containers at your local Household Hazardous Waste (HHW) centre. You can find the closest HHW centre by calling 1-877-464-9675 ext. 5702.

If you have concerns or questions about pest control or any hazardous material you can contact the Ministry of the Environment at 1-800-565-4923 or www.ene.gov.on.ca, the Health Canada Pest Management Regulatory Agency 1-800-267-6315 or www.pmra-arla.gc.ca, or York Region *Health Connection* at 1-800-361-5653 and speak to a public health inspector.

Refer to Appendix 4 or call York Region *Health Connection* at 1-800-361-5653 and speak to a public health inspector to obtain further information or visit <http://www.ene.gov.on.ca/en/news/2009/030401mb.php> for more information.

Protecting children against West Nile virus

West Nile virus

West Nile virus is a mosquito-borne virus that can cause serious illness in humans. West Nile virus appeared in North America in 1999. The first known human case of West Nile virus in Ontario was reported in 2002.

West Nile virus can cause severe illness, although the risk of becoming seriously ill because of infection is low. Most people who become infected experience no symptoms or very mild illness.

How is West Nile virus spread?

West Nile virus is mainly passed to humans by the bite of an infected mosquito. Mosquitoes become infected when they bite an infected bird. The virus is not spread by person-to-person contact through touching, coughing, sneezing or drinking from the same cup.

Risks to children

Everyone who is outside during the spring and summer months is at risk and should take steps to prevent being bitten by mosquitoes.

People who have chronic illnesses and those over 50 years of age should take special care to avoid mosquito bites as they are at greater risk of developing serious illness if they are infected with West Nile virus.

Although the chances of being bitten by an infected mosquito are rare, if you are bitten, approximately four out of five people infected with West Nile virus do not show any signs of illness at all.

The mosquitoes that most commonly cause West Nile virus are not generally active during the daytime; they are more active during the early evening and early morning (dusk and dawn). That is why it is important to minimize the time spent outdoors during these periods when mosquitoes are most active.

Children who go out on field trips during the daytime are also at minimal risk of exposure. However, if the field trip is to an area with heavy tree cover, or that is known for high mosquito activity, or if the trip is between dusk and dawn, you will need to take precautions against mosquito bites.

Preventing mosquito bites

Cover up

Mosquitoes are attracted to darker colours, so wear light coloured clothing when going outside during times when mosquitoes are most active. Long sleeved shirts or jackets, long pants and socks should be worn. Pant legs can be tucked into socks for added protection.

Use insect repellent

Child care providers are advised to obtain written permission from parents before applying insect repellents on children.

Consider using an insect repellent containing DEET (N-diethyl-m-toluamide). The concentration of DEET should be no greater than 30 per cent for adults and no greater than 10 per cent for children. Do not use DEET on children under six months of age - use mosquito netting to cover infants. Federally regulated non-DEET products are also available. For more information about personal insect repellents please visit the Health Canada Pest Management Regulatory Agency web page: <http://www.hc-sc.gc.ca/hl-vs/iyh-vsv/life-vie/insect-eng.php>

- Follow the instructions on insect repellent labels carefully
- Apply repellent sparingly on exposed skin and clothing. Do not use under clothing
- Do not use repellent on open wounds or irritated or sunburned skin
- Do not get repellent in the eyes. If this happens rinse with water immediately
- Wash skin with soap and water when you return indoors or when protection is no longer needed
- Avoid breathing mist from spray-type repellent. Always apply in well ventilated areas
- Never spray repellent inside a tent. Do not use near food
- Parents should check their children for sensitivity to repellents by applying repellent to a small area of skin on the arm and waiting for 24 hours before use
- Apply sunscreen first, followed by the insect repellent
- There is no evidence that there is a hazard to the unborn or breastfeeding child associated with the use of DEET by pregnant or lactating women when used as recommended by the manufacturer
- Refer to Appendix 4 *How to protect yourself from West Nile Virus* for additional information

Clean up around the child care centre

The best way to keep mosquitoes away is to clean up areas of stagnant water (i.e., water that has been sitting without moving) where they are likely to breed. Look around your property and get rid of places that are potential mosquito breeding sites, including:

Containers of stagnant water

- Clean up and empty containers where water collects, such as in old tires, flower pots, wheelbarrows, barrels or tin cans that are outdoors
- Change the water in bird baths every seven days
- If appropriate, drill holes in the bottoms of containers so water can't collect

Swimming or wading pools

- Turn over wading pools when not in use
- Immediately remove water that collects on pool covers
- Make sure the pool pump is circulating
- Refer to Appendix 4 for further information on play pools
- The York Region Health Protection Division does not recommend the use of play pools for children, especially for those children that are not yet fully toilet trained

Eaves and drains

- Clear leaves and twigs from eaves troughs, storm and roof gutters throughout the summer
- Make sure drainage ditches are not clogged
- Check flat roofs frequently for stagnant water

Yard and lawn

- Decaying debris can end up in storm sewers and become a food source for mosquito larvae
- Turn over compost frequently and fill in depressions in lawn areas
- Clear out dense shrubbery where mosquitoes like to rest
- Make sure door and window screens are tight fitting and in good repair

How to dispose of a dead bird:

- Do not use bare hands to handle a dead bird. Always wear leak-proof rubber gloves or use two layers of a leak-proof plastic bag inverted over your hand.
- Bury the bird at least two feet deep on your property
- Do not dispose of dead birds through the municipal garbage systems.
- After disposing of a dead bird, wash your hands thoroughly with soap and warm running water.

Car seat safety

According to Health Canada, motor vehicle collisions are the leading cause of death and injury for children one to nine years old. In Ontario alone, collisions took the lives of nine child passengers and injured another 1768, all under the age of nine (Ministry of Transportation, *Ontario Road Safety Annual Report, 2007*).

Using the correct seat for a child's weight, height and developmental ability, installing the car seat tightly, and properly harnessing a child in their seat are all vital aspects of safe car seat use.

According to Transport Canada, 75 per cent of collision-related deaths and injuries could be prevented by the correct use of an infant or child car seat.

The *Ontario Highway Traffic Act* includes child care providers in the broader group of drivers who are required to use car seats and booster seats when traveling with babies and children.

Child care providers are in an excellent position to promote car seat safety to parents/caregivers, as they are frequently in a position to observe parents/caregivers dropping off and picking up children in their vehicles.

Some tips for helping ensure that children are riding safely

- Read the car seat and vehicle manuals for correct installation and use
- Make sure babies are **rear-facing until all three of these criteria are met:**
 1. have a minimum weight of 10 kg (22 lbs)
 2. can walk unassisted, and
 3. are at least one year of ageOnce all three criteria are met, the child can be forward-facing, until they are at least 18 kg (40 lbs)
- Depending on the year of the vehicle, car seats can be installed with either the new LATCH system **or** the vehicle seat belt; check your vehicle manual for the option(s) available to you. Pull the LATCH or seat belt tight to hold the car seat in place. There should be no more than 2.5 cm (1 inch) of movement where the car seat is belted. A seat belt locking clip is only to be used if the vehicle manual says to do so. Forward-facing car seats must also be tethered to one of the designated anchor locations in the vehicle, with the tether strap pulled tight
- Check that only **one** finger can be put between the shoulder harness and the child's collarbone
- Check that the chest clip is at the child's armpit level

- Refer to the related car seat safety resources for more information, or call York Region *Health Connection* at 1-800-361-5653 and speak to a public health nurse

Booster seat safety

A booster seat works with the existing seat belt system to raise a child so that the seat belt fits correctly across their shoulder, chest and hips. Booster seats provide 60 per cent more protection than seat belts alone, and substantially reduce the risk of serious injury.

The *Ontario Highway Traffic Act* states that once children reach a minimum weight of 18 kg (40 lbs), children can move from a forward-facing car seat into a booster seat, and remain in a booster seat until one of these three criteria is met:

- reached a standing height of 145 cm (4 feet 9 inches)
- reached a weight of 36 kg (80 lbs)
- are eight years of age reached a weight of 36 kg (80 lbs)

From a safety point of view, **height is the most important sign that a seat belt alone will properly fit a child.**

New legislation passed October 31, 2006 requires that every vehicle has as many seatbelts as passengers. Drivers are responsible for ensuring each passenger under 16 years of age has and wears a seatbelt.

Tips for booster seat use

- Read the booster seat and vehicle manual before installing a booster seat
- A booster seat is not a substitute for a car seat for a child under 18 kg (40 lbs)
- High back boosters and backless boosters **must be used with a lap/shoulder seat belt**
- With the backless style, it is important to ensure that the vehicle seat and/or head rest are high enough to provide head and neck protection for a child
- Be aware that seat belt adjusters are not regulated for use in Canada. In fact, crash tests in the U.S. have shown that they often increase the likelihood of injury or death
- Discuss booster seat use with parents/caregivers to help ensure they have the correct information

Refer to the *Booster Seat* resource for more information, or call York Region *Health Connection* at 1-800-361-5653.

Pedestrian and sidewalk safety

Facts to consider

According to Safe Kids Canada (2008):

- More than 2,412 Canadian children are seriously injured by vehicles every year
- Child pedestrian incidents are a leading cause of injury-related death for children under the age of 14
- Approximately 30 children die each year due to pedestrian injuries
- Most incidents occur between 3 p.m. and 6 p.m., when many Canadians are driving home from work

How to prevent injuries

- **Teach children the “5 steps to safely crossing the street”**
 1. Stop
 2. Look both ways
 3. Listen for traffic
 4. Wait until the street is clear and keep looking until they have crossed the street
 5. Make eye contact with drivers to be sure they see you
- **Under age nine? Don’t cross alone.** Children under age nine should be accompanied by an adult, or an older child, when crossing the street
- **Sidewalks are safest.** Teach children to always walk on the sidewalk. In areas without sidewalks, teach them to walk as far away from traffic as they can and to walk facing approaching traffic
- **Follow the same rules you want children to follow.** You may want to cut across the street in the middle of the block, but you want children to learn to cross at the intersection. Be a positive role model
- Refer to the related resource *A step ahead...of traffic injuries*

Cycling safety

Facts to consider

- Every year, over 50,000 children are seriously injured in bike-related mishaps
- 25 per cent of all the children injured are under seven years of age
- According to Safe Kids Canada, head injuries are the number one cause of serious injury and death to kids on wheels
- A fall from 60 cm (two feet) can cause permanent brain damage; a fall at a speed of 20 km/hour can result in death
- According to the *Highway Traffic Act*, every cyclist under the age of 18 must wear an approved bicycle helmet. Parents or guardians will not knowingly permit cyclists under 16 to ride without a helmet.
- Wearing a bicycle helmet reduces the risk of head injury by 85 per cent and reduces the risk of brain injury by 88 per cent
- Children under the age of ten do not have the physical and mental skills necessary to drive a bicycle on the road

How to prevent injuries

- **Wear a helmet.** Make sure children wear certified, properly fitted **bicycle** helmets (refer to manufacturer's instructions) **every** time they ride their bike.
 - Hockey, baseball or other sports/activity helmets are not designed to absorb the type of impact that may occur in a cycling crash or fall
 - Helmets should not be worn when playing on playground equipment
 - The Canadian Standards Association (CSA) has introduced bicycle helmet certification standards for children under the age of five. Helmets that meet these requirements have a permanent yellow label informing purchasers that the helmet is designed for children under five years
 - Bicycle helmets must comply with one of the following safety standards, identified by stickers printed on the inside of the helmet: CSA, Snell, ASTM, CPSN, NOSCAE
 - Do not buy a helmet second-hand, as you may not know how old it is or if it has been in a crash
- **Make sure the child's helmet fits properly** – use the **2VI shake shake shake rule**:
 - **2** – the helmet should sit two finger widths above their eyebrows
 - **V** – the straps should form a V shape under their ears
 - **1** – only 1 finger should fit between their chin and the straps

- **Shake Shake Shake** – make sure their helmet is snug; it should not move around when they shake their head
- **Remember** to remove anything that could interfere with the way a helmet fits such as baseball caps, big hair clips, ponytails and headphones.
- **Ensure supervised riding.** Young children should cycle with an adult, as most do not have the skills to cycle safely without supervision. After the age of ten children need lots of practice and training before they can ride on the road or alone.
- **Make sure the bike fits.** A bike that is too big or small is unsafe. How to check: when a child sits on their bike, their toes should touch the ground on both sides
- **Be a role model.** Set a positive example when cycling with children and wear **your** helmet **every time you ride!**
- Refer to the related resources *Got Wheels? Get a Helmet!* and *It's your head, use it!*

Playground safety

Facts to consider

According to Safe Kids Canada:

- Each year about 2,500 children aged 14 and under are hospitalized due to falls on playgrounds
- Children ages five to nine have the highest risk of playground injury
- About four out of five hospitalizations for playground injuries are the result of broken bones; about 14 per cent are the result of head injuries, which are some of the most serious injuries that can occur on the playground
- For most injuries, boys are injured much more often than girls, but this is not the case with playground injuries; boys have only a slightly higher risk for playground injuries than girls (53 per cent for males vs. 47 per cent for females)
- Young children (between ages one and four) are also at risk for playground injury; they are often injured because they are still developing their balancing and climbing skills, putting them at risk for falls

Spotting the hazards

Do you have a safe playground at your centre? The three key areas of prevention are surfacing, equipment and active supervision.

Surfacing

Safe surfacing beneath playgrounds will reduce the severity of injuries from falls. A fall onto a shock-absorbing surface is less likely to cause an injury than a fall onto a hard surface. Follow the *National Standard of Canada - CAN/CSA Z614-07, Children's Playspaces and Equipment*, for the appropriate material and depth to be used. For a copy of the *National Standard of Canada - CAN/CSA Z614-07, Children's Playspaces and Equipment* contact the Canadian Standards Association at www.csa.ca or phone 1-800-463-6727. The protective surfacing beneath the playground structure is to be maintained on a daily basis to ensure that it does not become compressed and that it is free of any hazardous objects.

Equipment

Playground equipment is designed for two age groups: 18 months to five years; and five to 12 years. Ensure that children in your care use equipment designed for their appropriate age and ability level. Inspect your playground structures daily for signs of wear, missing safety rails, vandalism or any other possible hazard. Refer to related resources *Playground Safety*, *Playground-danger of strangulation*, and *Outdoor Sandbox Safety* for additional information.

Active supervision

Young children need to be supervised at all times. Active supervision also includes:

- Recommending parents remove drawstrings on children's clothing
- Ensuring that shoelaces are tied
- Recommending that children wear a neck warmer instead of a scarf
- Ensuring any loose clothing is tucked in
- Not allowing skipping ropes or other ropes to be tied to any part of the play structure
- Taking off all helmets before using playground equipment because they may cause an entrapment and strangle a child
- Guarding younger children (18 months to five years) on equipment as their hands or feet may slip unexpectedly

Educate children on safe behaviour when at playgrounds. Children must learn:

- To wait their turn
- That bullying is unacceptable. Refer to Chapter 9 *Preventing Bullying*
- To only go feet first down slides
- That only one child at a time is permitted on play equipment
- That they should always use the handgrips that are provided
- To stay away from the front and back of moving swings
- Refer to, *A step ahead...at the playground*