Educating Parents on Newborn Health and Safety

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Educating Parents on Newborn Health & Safety

Newport, VT
Jenna Rose Dafgek
April 2019
Mentors: Dr. DiSantos, Dr. Lippman, Dr. Malik
Problem Identification

- More than 90% of unintentional injuries in children aged 5 years or younger occur in and around the home.
- Unintentional falls and poisonings are major causes of death and disability among infants.
- In Orleans County, there are 81 PCPs for every 100,000 people.
- Well child visits are allotted 40 minutes which includes checking in, vitals, history taking, and physical exam.
  - This leaves little time to discuss health and safety topics.
- In a national study, up to 45% of mothers reported receiving either no advice or a recommendation inconsistent with advice from health care professionals.
- Nationally, adherence to infant care practices remains below target goals (i.e. vaccines, breast feeding, infant sleeping position).

Recommended infant care practices are below targeted goals nationally. Adherence to these recommendations increases when parents receive appropriate advice from multiple sources, including physicians.
Cost Considerations

**Car Safety**

- In the USA, 723 children ages 12 years and younger died as occupants in motor vehicle crashes and more than 128,000 were injured during 2016.
- Restraining children in rear facing seats reduces fatal injury risk by around 75% for children up to age 3.

**Safe Sleeping**

- Sudden infant death syndrome (SIDS) accounts for 4000+ deaths annually in the USA.
- Key sleep risk factors for SIDS include prone sleeping position, smoking, bed sharing, and blanket use.
- In one study, more than 90% of SIDS cases involved bed sharing.
Parents are not getting their education from programs or healthcare, but rather “from their parents, which is not terribly reliable”

Parents that lacked good role models while growing up may be ill-prepared for their own child

“No caregiver sets out to hurt or shake their child.” These issues tend to crop up when the parent is stressed and not receiving appropriate resources and help

Cindy Wells – Family Support Programs Coordinator
Caledonia, Lamoille, Orleans & Essex Counties
Prevent Child Abuse Vermont
Community Perspective (4B)

- Parents get their education from friends and family
- Practices that one’s parents used are no longer recommended, however patients are not always aware of this
  - Example: Putting a blanket on a baby so they don’t get cold was commonplace, now we know this increases the risk of SIDS
- Practices to decrease the risk of SIDS, such as properly wrapping a baby and lying a child on their back, are important to teach new parents
- “Mommy to be appointments are great opportunities for patient education"

Kristy Mattson – RN and new mom
Intervention and Methodology

Educational handouts were created for parents designed for specific age ranges.

1. Address the common safety and health issues for newborn babies
2. Emphasize home health and empower parents to feel in control of their child’s health
3. Provide inexpensive/free and local resources for parents
4. Ensure safety topics are covered during well child visits
5. Act as a spring board for conversations with health care providers
Results/Responses (6A)

Handouts distributed at the Newport Primary Care Office, as well as to mentors Dr. DiSantos, Dr. Malik, Dr. Lippman, and Dr. Keith. Handouts to be kept in their offices

Four handouts targeted to specific age ranges:

- 0-1 m
- 1-4 m
- 4-9 m
- 9-12 m

Fever

A child whose fever might be febrile, uncomfortable, warm to the touch, flushed, or irritable. They can also suffer sleeplessness, crying spells, or diarrhea, and sleeping the child in lightweight clothing. Never use rubbing alcohol on the child’s skin or grab the child's arm to bring the fever down.

If an: 0-6 months or younger has a temperature of 100.4°F or higher, call your doctor or go to the emergency department right away.

Water Temperature

Set the thermostat on your hot water heater to 120°F or use the “low medium” setting.

Always test bath water with your elbow or the inside of your wrist before putting your child in.

Fooding

Stick to breast milk or formula.

Meat: avoid meats until child is ready for feeding with a spoon.

Look for signs of readiness to feed or hunger, such as moving the hands to the mouth, sucking on fingers, and crying.

Consider vitamin D supplements

By the fifth day after birth, look for at least 6 wet diapers and 3 or more bowel movements a day

AILs of Safe Sleep

Avoid: • Safety should always be kept in the back of your mind. Be aware of the risk of sudden infant death syndrome, your infections, coughs, colds, respiratory problems, and teeth decay.

Back: • Back should be set for the child to sleep.

Crib: • Use state-approved cribs, don’t let your baby sleep on a couch, chair, or bed.

Tobacco Exposure

Secondhand smoke increases a child’s risk of sudden infant death syndrome, your infections, coughs, colds, respiratory problems, and teeth decay.

Help to create a smoke-free environment:

- Don’t smoke in your home or near your child.
- Make sure your car is smoke-free.
- Choose a smoking area that doesn’t smoke.
- Remove your child from places where smoking is allowed.

Car Seats

Car seats are a leading cause of death for children ages 0 to 18. The best seat to use among children is a rear-facing car seat. It will protect them and are made to move with your child to reduce impact in the event of a crash.

Select a car seat based on your child’s age and size. Choose a seat that fits in your vehicle. Use it every time you drive with your child.

Smoke Detectors

- Always follow all manufacturer’s age recommendations.
- The smoke detector should be placed on each floor of the house.
- If possible, choose a detector with a long life battery.
- If using a regular battery, remember to replace them every year.
- Never take batteries out of a smoke detector to turn it off—if you forget, just replace it.

Toy Safety

- Everyday items in your home can cause injury to children.
- Be aware of these items and avoid them.
- Medication safety: over-the-counter cold medicines are not recommended for children under 4 years old.
- Never use leftover medications.

North Country Hospital Primary Care

Infant Safety: Weeks 1 - 4

North Country Hospital Primary Care

Infant Safety: Months 1 - 4

North Country Hospital Primary Care

Infant Safety: Months 1 - 4

North Country Hospital Primary Care

Infant Safety: Months 1 - 4

Medicine Safety

- Always follow all manufacturer’s age recommendations.
- The smoke detector should be placed on each floor of the house.
- If possible, choose a detector with a long life battery.
- If using a regular battery, remember to replace them every year.
- Never take batteries out of a smoke detector to turn it off—if you forget, just replace it.

Toy Safety

- Everyday items in your home can cause injury to children.
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- Medication safety: over-the-counter cold medicines are not recommended for children under 4 years old.
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Sleeping Patterns

Babies sleep up to 16 hours a day for the first six months of life. Infants may sleep as long as 8 hours at a time until they are hungry.

At 3 months, a baby averages about 14 hours of sleep daily, with 9 hours at night and 5-6 during naps.

Babies can cry and make all sort of noises during light sleep. The goal is for babies to fall asleep by themselves, and hear to that themselves should they wake up. If a baby under 4 months continues to cry, there is time to respond.
Results/Responses (6B)

Choking
A child may be choking if he/she can’t breathe, is gasping or wheezing, can’t cry or make noise, turns blue, appears panicked, or becomes limp or unconscious.
It is recommended for parents to get trained in both CPR and the Heimlich maneuver; call 911 for any serious choking situation. If you have not been trained, wait until help arrives.
Don’t reach into the mouth to grab the object or pat the child on the back. Either of these steps could push an object farther down the airway.

Solid Food
Babies who are ready to eat solids are interested in foods, hold their heads up well, have oral motor skills needed to eat, and are usually twice their birth weight.
Wait until your baby is at least 4–6 months old and shows signs of readiness before introducing solids. Solids should be fed after a nursing session so that your baby fills up on breast milk.

Teething
You will likely see the first tooth start pushing through your baby’s gum line between 4 and 7 months. The first teeth to appear usually are the two bottom teeth.
You can help make teething easier.
- Gently wipe baby’s face often to remove drool and prevent rashes
- Rub baby’s gums with a clean finger
- Give your baby something to chew on. Ensure it’s big enough that it cannot be swallowed.
- Chill the teething ring in the refrigerator, but NOT the freezer
- Never tie a teething ring around a baby’s neck or any other body part – it could get caught and strangle the baby

Teething can be uncomfortable, but if your baby seems very fussy, talk to your doctor.

North Country Hospital Primary Care
Infant Safety: Months 4 – 9

Childproof Home
Avoid waiting until your child starts crawling to think about babysproofing your home. Below is a list of common household hazards to remove from your infant’s path...
- Purchase childproof safety latches for all cabinets in your home regardless of what they contain.
- Move the crib mattress to the lowest position and remove all objects that he could climb up onto to get out of the crib.
- Drapes and cords pose a strangulation hazard to be hung up and out of reach.
- Always keep drawers closed.
- Close outlets with safety plugs or safety covers that snap shut when the outlet is not being used.
- Make sure all area rugs are secured with non-slip backing and repair loose flooring to prevent tripping.
- Have all worldly furniture replaced or built children-resistant plates in the floor to prevent toppling over.
- Keep garage inside a locked cabinet.
- Cover sharp-edged tables with cushioned strips or pointed guards.
- Fender stirrups to prevent falls.

Poison Control
There are certain ways to prevent children from eating or tasting poisonous substances.
- Keep all medicines – prescription and nonprescription – out of sight and out of reach, preferably in a locked cabinet.
- Never sit a child that is curious beside the medicine cabinet.
- Keep any cleaning products and some cleaners in a high cabinet out of reach.
- Some household products are poisonous and must be kept out of reach.
- When your child is eating, move your baby to another area of the house.
- Move on other to a place that is inaccessible to the child.

Sun Protection
Babies have thinner skin and undeveloped melanin, so their skin burns easily. Too much unprotected exposure to the sun’s ultraviolet rays can cause skin damage, eye damage, immune system suppression, and skin cancer.
The American Academy of Dermatology recommends that all kids – regardless of their skin tone – wear sunscreen with an SPF of 30 or higher. Apply a generous amount and re-apply often.
Try to stay in the shade when the sun is the strongest (usually from 10 am to 4pm). One of the best ways to protect skin is to cover up.

Juice Intake
It is recommended to avoid the use of juice in children before 1 year of age.
A 6-ounce glass of fruit juice is equal to one serving of fruit. However, fruit juice offers no nutritional advantage over whole fruit. Additionally, high intake of juice can contribute to diarrhea, mouth ulcers, and dental cavities.

If drinking juice, have your child drink out of a cup rather than a bottle to prevent dental caries.

North Country Hospital Primary Care
Infant Safety: Months 9 – 12

Baby Bottle Tooth Decay
Even though they are temporary, baby teeth are still susceptible to cavities. You can help prevent tooth decay.
- After each feeding, wipe child’s gums with a clean, damp washcloth or pad.
- Brush teeth with a child-size toothbrush and a grain of rice-sized amount of fluoride toothpaste until age 2.
- Infants should brush their teeth and rinse bottles before going to bed.
- Ensure pacifiers are clean. Don’t dip them in sugar or honey.
- If your child is not receiving adequate fluoride from water, fluoride drops may be recommended.

Milk
Stick with breast milk or formula and avoid cow milk until 12 months. Babies that need the fat is whole milk for normal growth and brain development, so try whole cow’s milk when your child is 12 months.
Evaluation of Effectiveness and Limitations

Evaluation of Effectiveness:
Due to time constraints of this project, the effectiveness of the intervention was not assessed.

Future assessment may involve:
1. Survey to parents at North Country Hospital Primary Care regarding
   • Their ability to understand the handouts
   • Whether the handouts provided them with new information
   • Whether the handouts led to a change in their child care habits
   • Whether they are more likely to discuss newborn care and safety with their provider after reading the handouts
2. Focus group of Newport newborn parents

Limitations:
• Limited follow-up to gauge handout utilization and response
• Effectiveness relies on adequate distribution
• Effectiveness relies on patient English literacy
• Handouts cover common safety and health concerns for first year of life only
Recommendations for Future Interventions

- Connecting to Prevent Child Abuse Vermont to coordinate accessible parent classes and programs in Newport
- Creating an online forum for newborn safety that embraces social media and emerging technology
- Incorporating parent education into online health record to ensure topics are discussed
- Expand newborn safety handouts to years 2-5
- Address parental stress and expectation management as a barrier to newborn health and safety
References

Interview Consent Form

Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview.

Consented
Name: Cindy Wells
Name: Kristy Mattson