

Keeping infants & children safe in hospital

The hospital poses an unfamiliar environment filled with medical equipment, medications and hospital grade cleaning products. All of these items, if not handled correctly, can pose risks to children and their families. For this reason, it is important to always remember to maintain a safe environment for infants, children and their families whilst they are in the emergency department.

Caregivers:

Ensure care givers always remain with their child during their stay in the emergency department to oversee their safety. Care givers may have to leave temporarily to go to the toilet, collect belongings from the car or collect other kids from school. If this is the case work with the care giver to ensure someone continues to oversee the care of the child in the emergency environment - this may be in the form of an AIN or hospital volunteer.

Cots and beds:

- Lower the bed close to the ground. This makes it easier for the child to safely get in and out of bed. It also minimises a potential fall from height.
- Ensure bed and cot rails are utilised at all times and educate parents on how operate them.
- For infants ensure Safe Sleeping practices:
 - Place the baby on their back.
 - Ensure the head and face are uncovered.
 - Place their feet at the bottom of the cot.
 - Ensure bedding is tucked in and secure.
 - Remove any bumpers, pillows or soft toys from the cot.

Choking hazards:

Infants and young children will often put objects other than food in their mouth and this can lead to choking. Some examples of potential choking hazards in the emergency department include:

- plastic ampoule tops
- discarded IV bungs
- toys with small pieces
- paediatric pathology tubes or their plastic tops
- small dressings



Poisoning hazards:

Choking is not the only possible consequence on young children putting objects other than food in their mouth - poisoning can also occur. Some examples of poisoning hazards include:

- medications
- cleaning solutions and wipes
- chemicals (such as nail polish remover)
- broken hot or cold packs

Strangulation hazards:

When left unsupervised infants and young children can easily become entangled in cords resulting in strangulation. There are a number of cords in the emergency department such as:

- electrical cords
- intravenous lines
- monitoring leads (such as ECG leads)

Ensure all unused cords are stowed away and monitoring cords should be well clear from the neck region.

Burning hazards:

Burns can result from chemicals, thermal exposure, radiation or electricity. Some examples of potential burn hazards include:

- Hot drinks such as tea and coffee pose a scald risk to infants and young children. Ensure all hot drinks are covered with a lid and out of reach of children.
- Never heat EBM or formula in a microwave. Microwaves have been shown to heat unevenly. This means some of the milk may feel the correct temperature whereas some may be too hot leading to a scald.
- Chemical burns can occur from medications delivered via intravenous canulas that have become dislodged from the vein and into the surrounding tissue - always ensure cannulas are flushed and working well prior to administering IV medications. Hourly IV cannula site checks are required in infants and children.
- SpO₂ probes can cause burns and should be rotated every 2hrs.

Other potential hazards:

- Never leave sharp objects such as scissors, scalpels or needles within reach.
- Ensure equipment is secure and IV poles are not over loaded.
- Ensure all doors remain closed e.g. medication room, dirty utilities, treatment room.



Tips in children

- When completing your bedside suction and oxygen checks at the commencement of your shift take the time to check for any potential hazards for paediatric patients.
- Take the time to explain to care-givers how they can assist in keeping their child safe e.g. ensuring the bed/cot rails are always used, placing lids on hot drinks and notifying a staff member if they need to leave the bedside.

For further information:

[CHQ Fact Sheet: Keeping your child safe from falls \(QH only\)](#)

[CHQ Procedure: Children - Safe Sleeping and Co-sleeping in Hospital \(QH only\)](#)

[CHQ Procedure: Preventing Patient Falls and Harm from Falls](#)

References:

This Queensland Paediatric Emergency Nursing Skill Sheet was developed by the Emergency Care of Children working group (funded by the Queensland Emergency Department Strategic Advisory Panel) with the help of the following resources:

Children's Health Queensland Hospital and Health Service. (2017a). Transition to Paediatric Practice Acute Paediatric Program. In Orientation to Paediatric Practice Module (5th ed., pp. 8–9). Queensland Health.

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- Ensuring informed consent is obtained prior to delivering care.
- Meeting all legislative requirements and professional standards.
- Applying standard precautions, and additional precautions as necessary, when delivering care.
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