Kidsafe WA
Childhood Injury Bulletin

Child Accident Prevention Foundation of Australia
Western Australia

January 2025

Kidsafe WA
Kidsafe WA is the leading independent not-for-profit organisation dedicated to promoting safety and preventing childhood injuries and accidents in Western Australia. Injuries are the leading cause of death among Australian children and young people aged zero to seventeen, and many of these deaths and injuries can be prevented. Kidsafe WA works to educate and inform parents and children on staying safe at home, at play and on the road.

Perth Children's Hospital Injury Surveillance System
Perth Children's Hospital (PCH) is the only paediatric hospital in Western Australia and is the referral centre for paediatric illness and injury within the state. Each year approximately 64,000 children present to the PCH Emergency Department (ED). The PCH ED Injury Surveillance System is designed to capture data related to all children who present with an injury. This bulletin provides a summary of injury presentations to PCH ED for children aged 0 to 12 months between July 2018 and June 2023.

Injuries to Babies

A snapshot of injuries to babies

- Between June 2018 and June 2023, there were a total of **4,257** injury presentations to PCH ED for babies aged 0 to 12 months.
- **Males** accounted for the majority of injuries to babies, representing 53.1 percent (n= 2,261) of presentations.
- **Aboriginal and/or Torres Strait Islander** babies accounted for 4.6 percent (n=196) of injury presentations.
- **Falls** were the most common cause of injuries to babies accounting for 47.3 percent (n=2,013) of injuries.
- Of the specified locations, the **home** was the most common location for injuries to occur in babies (70.5%, n=416).
- The majority of babies presenting to PCH ED **resided in the Perth Metropolitan Area** (92.1%, n=3,922).
- The most commonly allocated triage category for injuries to babies was **category 4 - Semi-urgent**, accounting for 63.4 percent (n=2,697) of presentations.
- Of all injury-related presentations for babies at PCH ED, 80.9 percent (n=3,444) were **discharged** from hospital with treatment complete.

Partner:

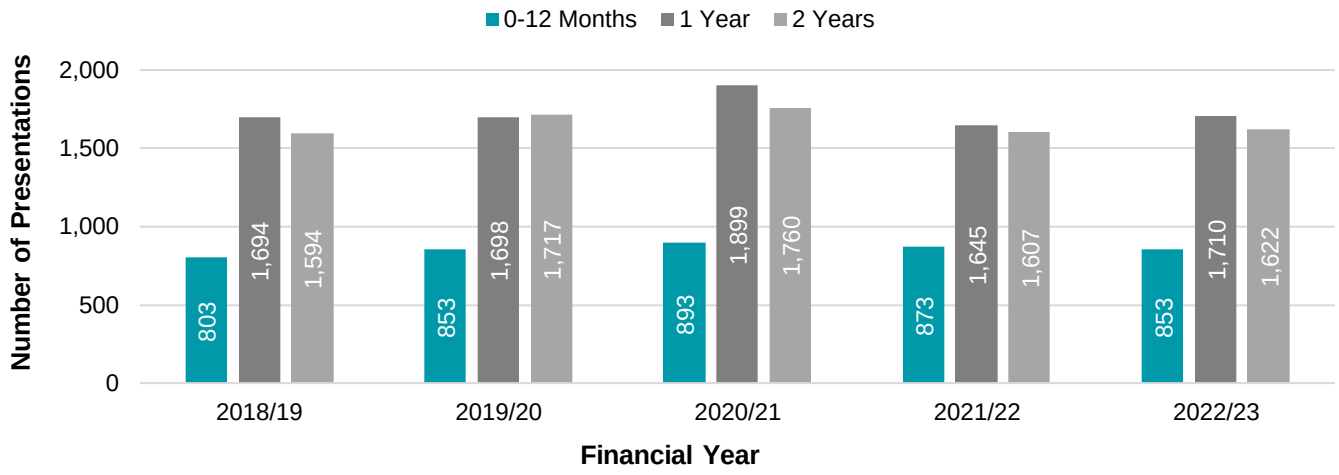
Government of **Western Australia**
Department of **Health**

Introduction

In their first twelve months of life, babies are constantly learning new skills as they start to explore the world. During this time of development, babies can be susceptible to injuries as they don't yet have the motor skills, coordination, strength or ability to navigate their world safely[1]. Babies often explore their world by putting items into their mouths and reaching for nearby objects, increasing their risk of injuries such as poisoning, choking, suffocation, and burns and scalds[1]. Other common causes of injury to babies include falls, drowning and submersion[1]. Providing a safe environment in and around the home allows babies to grow and develop new skills in their first year of life, while also reducing their risk of serious injury.

Between July 2018 and June 2023, 4,257 babies aged 0 to 12 months presented to the PCH ED due to an injury, accounting for 4.3 percent of total injury presentations during the five year period. The number of babies in this age range presenting to PCH ED for an injury was consistent across each financial year (Figure 1). While a significant number of babies presented to PCH ED for an injury in their first 12 months, their risk of injury further increases as they grow older and become more mobile. Figure 1 shows the significant increase in injury presentations as babies develop in their first and second year, highlighting the importance of adopting injury prevention measures as early as possible.

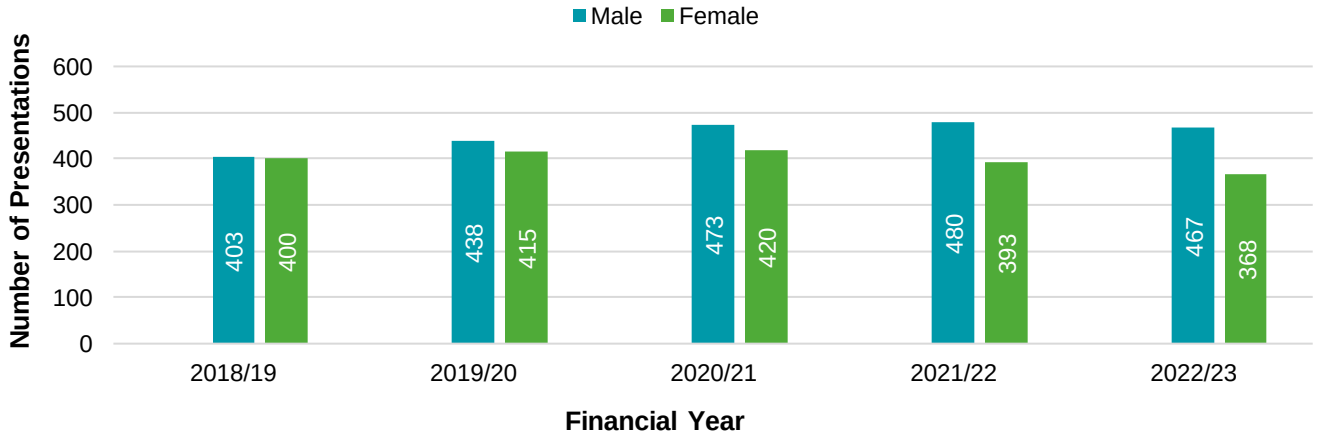
Figure 1: Injuries by Age Group and Financial Year



Demographics

Male babies consistently presented to PCH ED at a higher rate than females accounting for 53.1 percent (n=2,261) of injury presentations (Figure 2). Aboriginal and/or Torres Strait Islander babies accounted for 4.6 percent (n=196) of presentations. The majority of babies who presented to PCH ED resided in the Perth Metropolitan Area (92.1%, n=3,922), while 4 percent (n=170) resided in rural Western Australia.

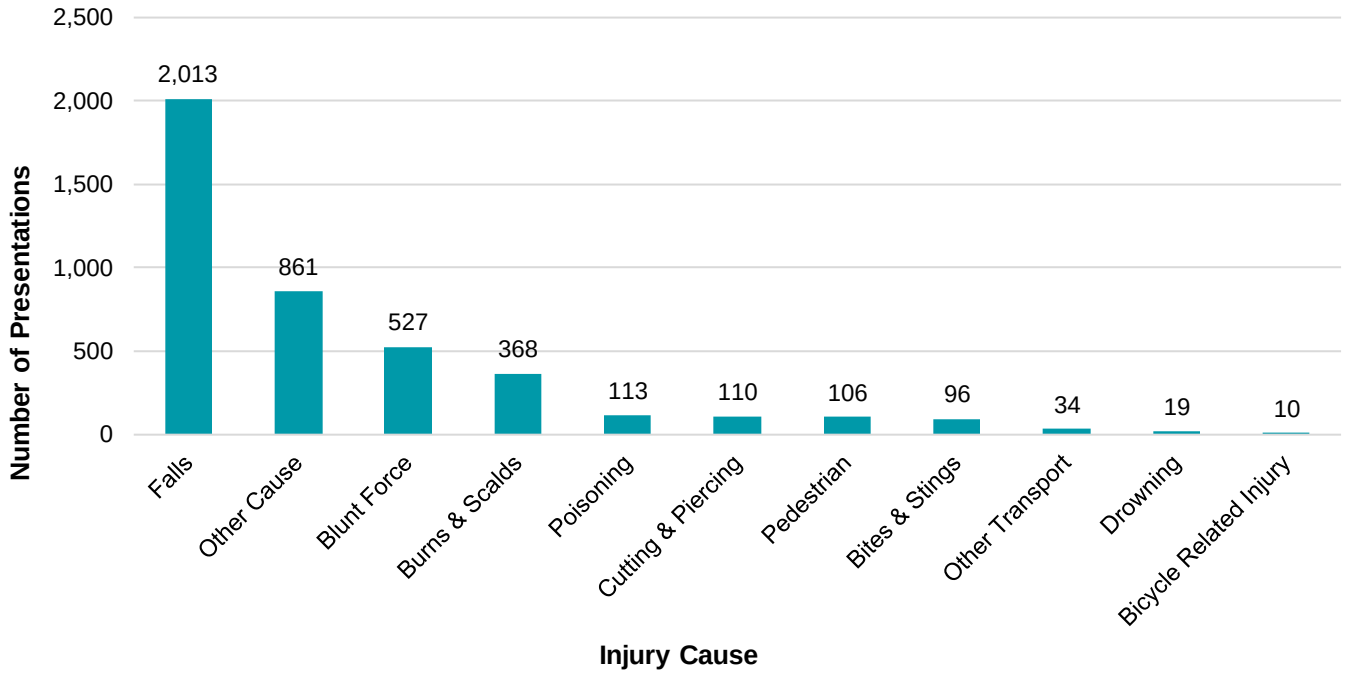
Figure 2: Injuries to Babies (0-12 Months) by Sex



Injury

Falls are the main cause of injuries to babies accounting for 47.3 percent of total injuries (n=2,013) (Figure 3). Other common causes of injury to babies included blunt force (12.4%, n=527), burns and scalds (8.6%, n=368), poisoning (2.7%, n=113), cutting and piercing (2.6%, n=110), and pedestrian-related injury (2.5%, n=106). Other injury causes were related to bites and stings, transport, drowning and bicycles.

Figure 3: Injuries to Babies (0-12 months) by Injury Cause



While falls are the most common cause of injury to babies, the nature and severity of the injury can vary depending on the height of the fall experienced. Of all fall-related injuries to babies presenting at PCH ED, 25.7 percent (n=1,096) were from a height less than one metre, 12.4 percent (n=528) were from a height greater than one metre, with the remaining 9.1 percent (n=389) from a fall on the same level. Babies are particularly vulnerable to fall injuries as they learn to walk and crawl, or if they are left unsupervised or unrestrained on a raised surface i.e. bed, couch, change table, or highchair.

A small percentage of injuries to babies have an associated risk factor that contributes to the injury. Bedding including bunk beds, cots, and mattresses were an associated injury factor of 16.7 percent (n=712) of presentations. Furniture, including chairs, sofas, tables, and cupboards were an injury factor in 12.0 percent (n=512) of presentations while baby equipment, including play pens, changing tables, highchairs, walkers and prams were an injury factor for 9.2 percent (n=391) of presentations. Other injury factors include building components including doors, windows, floors and walls (6.7%, n=285) and poisoning factors (2.7%, n=117).

For many injuries to babies, the location of injury is recorded as other place (86.1%, n=3,667) referring to an unspecified location or one that does not fit within an existing category. Of the specified locations, the home is the most common place for an injury to occur (70.5%, n=416).

Each child that attends PCH ED is allocated a triage category based on the urgency of medical attention required. The majority of babies presenting to PCH ED for an injury were triaged as 4 - Semi-urgent (63.4%, n=2,697). The remainder were triaged as 3 - Urgent (25.4%, n=1,080), 2 - Emergency (10.3%, n=439), 1 - Resuscitation (0.8%, n=33), or 5 - Non-urgent (0.2%, n=8). The majority of babies who presented for an injury were discharged after treatment (80.9%, n=3,444), with 17.7 percent (n=754) being admitted to hospital for further treatment. Almost all of the injuries to babies seen at PCH ED were unintentional (98%, n=4,172).

Prevention

In their first 12 months of life, babies are at an increased risk of injury and are dependent on caregivers to provide a safe environment for them. The following steps can help reduce the risk of injury to babies:

Falls

- Never leave babies unattended on raised surfaces including change tables, beds, couches or furniture, even if they have never shown signs of rolling.
- Have everything you need close by when changing babies. Always use the safety strap if available and keep one hand on the baby at all times.
- Use gates and barriers to restrict access to stairs until babies are old enough for you to teach them how to navigate stairs safely.
- Secure any unstable furniture to the wall or floor using furniture brackets and/or anchors.

Burns and Scalds

- Never drink hot tea or coffee while holding a baby. Hot drinks are a common cause of scalds when they are accidentally spilt or knocked over.
- When bottle feeding, always check the milk temperature before feeding it to babies. Microwaves heat milk unevenly, so always shake the bottle to mix the contents.
- Keep hot items such as irons, hair straighteners and curlers out of reach of babies.
- Always check the bath water temperature before bathing babies. Bath water should be no more than 38°C.
- Dress babies in low fire risk clothing that is close fitting and made of low flammable material.

Poisoning

- Always keep potentially poisonous items out of reach and store in a locked cupboard at least 1.5m above the ground.
- Use child-resistant locks on cupboards and cabinets if you cannot store poisons up high.
- Always read the label, dosage and instructions carefully before giving medications to babies.

Choking and Suffocation

- Ensure babies are sitting down when they are eating and always provide active supervision.
- Avoid giving hard food to babies – food such as raw carrots, celery sticks and apples can be grated, par-boiled or mashed to reduce the risk of choking.
- Choose a firm mattress when using a cot. Using soft mattresses, bean bags, and water beds can increase the risk of suffocation for babies**.**
- Don't use pillows or bumper pads in a cot as these can be a suffocation risk.
- Choose a sling or carrier that is the right size for the baby and always follow the manufacturer's instructions for use.

For more information on how to provide safe environments for babies to reduce their risk of serious injury, see Kidsafe WA's '*A Parent's Guide to Baby's First Year*' available at:
www.kidsafewa.com.au/uncategorized/a-parents-guide-to-babys-first-year/

References:

1. Australian Institute of Health and Welfare. (2024). *Injuries in children and adolescents 2021–22.* Retrieved from https://www.aihw.gov.au/reports/injury/injuries-in-children-and-adolescents-2021-22.

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