

WINTER 2011

KIDS



SAFETY

Carpool Conundrum -
Keeping Everyone Safe,
Dangerous "Games" *and more!*



Greater Omaha Chapter
a not for profit 501(c)(3) organization

On a personal note...

Don't Just Count Your Blessings, Share Them!

Recently I had the opportunity to help serve the evening meal at the Stephen Center here in Omaha. This experience really helped me remember to count my blessings and realize how important it is to help those less fortunate. Another plus was that my boys, ages eight and nine, were able to help out too.

We received many warm and heartfelt thank-yous for our efforts, but I really feel like all the thanks for that evening need to go to George Kubat of Phillips Manufacturing. Mr. Kubat supplied the meal and helped serve. He even asked what meal wasn't often served. Everyone was treated to pizza, salad, desserts and drinks.

No matter your economic standing, your occupation or demographic, you have a gift you can share. Share your time, share your talents, share your blessings with those less fortunate. Teach your children the importance of serving others, helping the next generation mature into a caring, thoughtful population. There are many opportunities to volunteer – get out there and find a good fit for you and your family! I think you'll find what you "get" far exceeds what you "give".

So what does this have to do with safety? I saw families, mothers, children, men and women, old and young who needed this help. I realized how hard it is to think about safety when your most basic needs aren't being met. How can you think about car seats when your kids haven't eaten? Will you buy smoke detectors or groceries?

According to Maslow's Hierarchy of Needs, physical needs such as breathing, sleeping and nutrition must be met first for human survival. The next tier of the hierarchy pyramid is safety. Mr. Kubat and the many giving people in our community help take care of those basic needs like food and shelter.

Many of those same people donate their time or dollars to the Safety Council. This makes it possible for our organization to step in and help with car seats, bike helmets, fire safety information, elderly fall intervention and so much more.

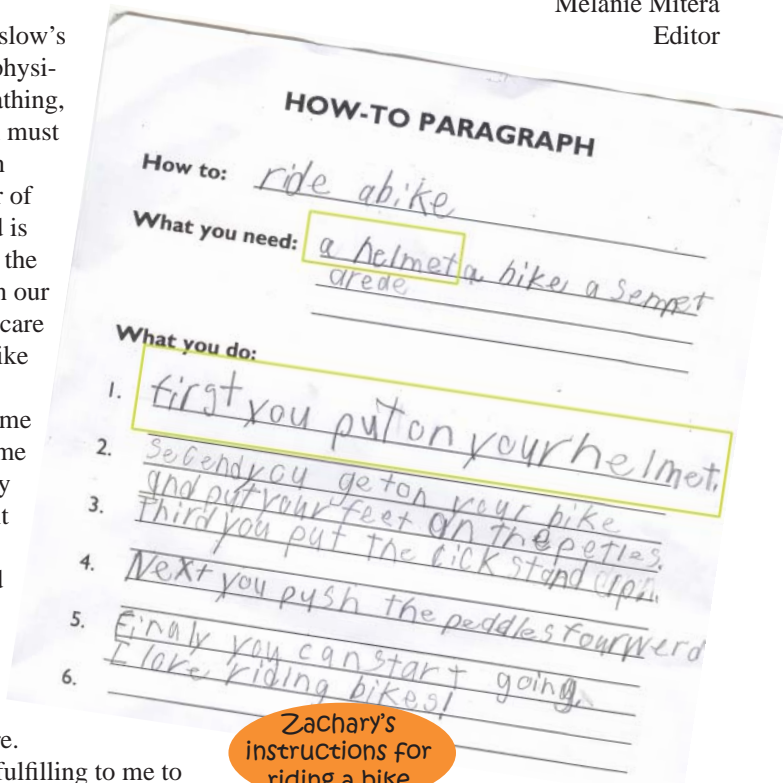
It has been very fulfilling to me to know that my skills have been used to help others. My mother teaches second grade and her students were given the assignment of interviewing someone about their job. I was complimented to have one of the students, Bailey Schwarz, pick me as her interviewee. Among other things Bailey asked me if I like my job. My answer? A huge yes! How great for me that I have been able to put my education and talents to work for a non profit whose mission it is to make the world a safer place! Thanks Bailey for letting me talk about what I do and what it means to me to work at the Safety Council.

My own second grader, Zachary,

recently wrote a how-to paragraph. You can imagine how thrilled I was when I saw his instructions on how to ride a bike. The first item you need? A helmet! The first step to riding a bike? Put on your helmet! Way to go Zach!

During this new year, don't just count your blessings, share them!!

Melanie Mitera
Editor



Zachary's instructions for riding a bike



Bailey Schwarz and her teacher (my mom!), Meiva Geiser



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Greater Omaha Chapter

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Protect Your Family from Carbon Monoxide Poisoning

An average of 166 people die each year as a result of carbon monoxide poisoning and thousands of others end up in hospital emergency rooms.

Young children are especially vulnerable to the effects of carbon monoxide, because of their smaller bodies. Children process carbon monoxide differently than adults, may be more severely affected by it, and may show symptoms sooner.

Without a working detector, you won't know that you have a carbon monoxide leak. Carbon monoxide is produced as a result of incomplete burning of carbon-containing fuels including coal, wood, charcoal, natural gas, and fuel oil. It can be emitted by combustion sources such as unvented kerosene and gas space heaters, furnaces, woodstoves, gas stoves, fireplaces and water heaters, automobile exhaust from attached garages, and tobacco smoke. Problems can arise as a result of improper installation, maintenance, or inadequate ventilation.

Tips to Avoid Carbon Monoxide (CO) Poisoning

- Have your home heating systems (including chimneys and vents) inspected and serviced annually by a trained service technician.
- Never use portable generators inside homes or garages, even if doors and

windows are open. Use generators outside only, far away from the home.

- Never bring a charcoal grill into the house for heating or cooking. Do not barbeque in the garage.
- Never use a gas range or oven for heating.
- Open the fireplace damper before lighting a fire and keep it open until the ashes are cool. An open damper may help prevent build-up of poisonous gases inside the home.
- Install battery-operated Carbon Monoxide (CO) alarms or CO alarms with battery backup in your home outside separate sleeping areas.
- Know the symptoms of carbon monoxide poisoning: headache, dizziness, weakness, nausea, vomiting, sleepiness, and confusion. If you suspect CO poisoning, get outside to fresh air immediately, and then call 911.

Know the Symptoms of CO Poisoning

Because CO is odorless, colorless, and otherwise undetectable to the human senses, people may not know that they are being exposed. The initial symptoms of low to moderate CO poisoning are similar to the flu (but without the fever). They include:

- Headache
- Fatigue

- Shortness of breath
- Nausea
- Dizziness

High level CO poisoning results in progressively more severe symptoms, including:

- Mental confusion
- Vomiting
- Loss of muscular coordination
- Loss of consciousness
- Ultimately death

Symptom severity is related to both the CO level and the duration of exposure. For slowly developing residential CO problems, occupants and/or physicians can mistake mild to moderate CO poisoning symptoms for the flu, which sometimes results in tragic deaths. For rapidly developing, high level CO exposures (e.g., associated with use of generators in residential spaces), victims can rapidly become mentally confused, and can lose muscle control without having first experienced milder symptoms; they will likely die if not rescued.

Information from National Safety Council (nsc.org) and the Consumer Product Safety Commission (CPSC.gov)

Training Dates for Pediatric FA/CPR/AED

Saturday Daytime Classes	Time	Cost
First Aid Training:	8:00 - 11:00	\$45
CPR Training	11:30 - 2:30	\$50
First Aid and CPR Training	8:00 - 2:30	\$59

Evening Classes	Time	Cost
First Aid Training (Mondays)	6:00 - 9:00	\$45
CPR Training (Wednesdays)	6:00 - 9:00	\$50
First Aid and CPR Training (Mon. & Wed.)	6:00 - 9:00	\$59

Saturdays: Jan. 8, 29, Feb. 5, 19, 26, March 12, 26

Evenings: Jan. 10 & 12, Feb. 21 & 23, March 7 & 9, 21 & 23, April 4 & 6

Exclusive for you - our site or yours (with minimum 10 people).



Call 896-0454 to register- you could save a child's life!

CPR - 3 year certificate, FA - 2 year certificate

Every Trip,
Every Time

Buckle Up

Not Only Is It Safer, It's The Law!

Nebraska Child Passenger Restraint Law

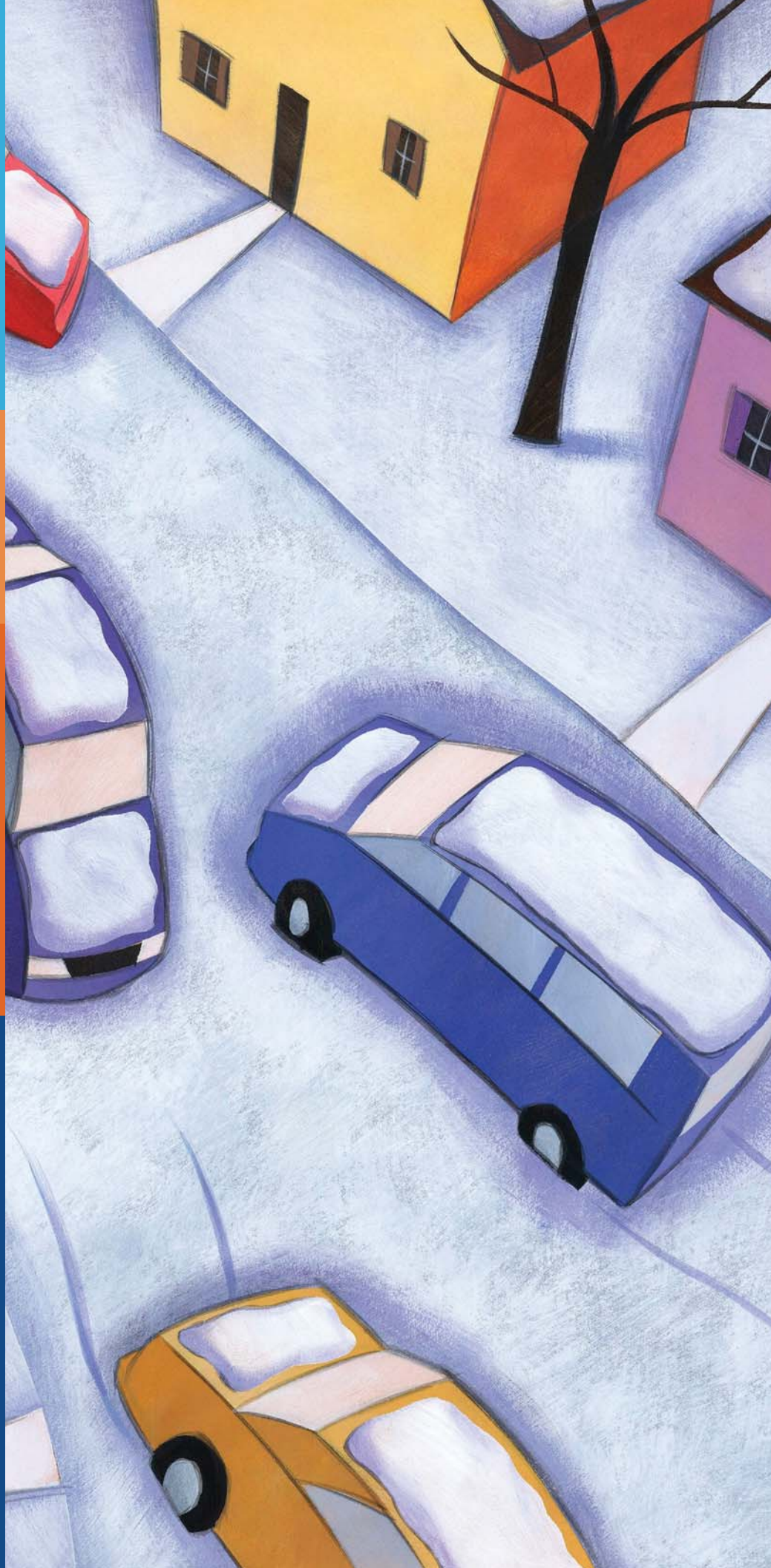
This is a primary law, meaning any person driving in Nebraska can be stopped and ticketed solely for this violation.

- Children up to age six must ride correctly secured in a federally-approved child safety seat (applies to all seating positions).
- Children up to age eighteen are prohibited from riding in cargo areas.
- Child care providers must transport all children securely in an appropriate safety seat or safety belt.
- All children must remain rear facing until they reach one year of age AND weigh 20 pounds or more.

Occupant Protection Law

This is a secondary law, which means drivers are cited for this violation only if stopped for a separate violation.

- Drivers and front seat passengers are required to ride buckled up in a safety belt or child safety seat.
- All children ages six to 18 are required to ride secured in a safety belt (or child safety seat) in all seating positions.



Carpool Conundrum

Danielle Knudson
Team Leader- Click It-Don't Risk It
Child Passenger Safety Technician
National Safety Council,
Greater Omaha Chapter

I am a mom, I get it. The day-to-day operations of parenting are demanding and sometimes simply overwhelming. When we make decisions about our children and the others in our care, they may sometimes seem irrelevant or mindless. Some simple decisions are actually quite profound and will have lasting ramifications.

I was recently conducting a safety belt check in an elementary school parking lot and was reminded of just such a decision that many of us make each day, the safe transportation of our children and those we carpool with to school and back.

Hopefully, we have taught our own children the importance of buckling up each time they get into any vehicle. In my car, everyone is buckled 100% of the time.

I remind the kids that I transport to buckle up, even if they don't appear to be familiar with the practice. Do our kids buckle up if no one is watching or reminding them when they travel with other friends or parents? Have you ever asked them? Do you tell people who transport your kids your rules about wearing a seat belt, every trip, every time and in every seating position?

Remember that ALL kids should ride in the backseat until their thirteenth birthday. Seem excessive? Consider the fact that it isn't just about their height and weight, as there is a large discrepancy at that age, but rather joint development and gross motor skill development.

According to the Center for Disease Control (CDC), "all children ages 12 years and younger should ride in the back seat. Putting children in the back seat eliminates the injury risk of deployed front passenger-side airbags and places children in the safest part of the vehicle in the event of a crash. Child passengers should never be seated in front of an airbag. Airbags can injure or kill children in a crash that might otherwise have been survivable." The CDC also states, "...for children less than 16 years, riding in the back seat is associated with a 40% reduction in the risk of serious injury."

Another risky decision occurs when a child buckles up and places the shoulder part of the belt behind his back. This is not

how a safety belt is designed to work. It could result in the passenger being ejected from the seat or they may fling forward and hit the object in front of them.

A lot of tweens are in the habit of this practice because the safety belt cuts across their neck and is uncomfortable or not fitting correctly. If a safety belt isn't fitting well, a child may still need to be in a booster seat. According to the National Highway Traffic Safety Administration (NHTSA), "Children from about age four to at least age eight should ride in a booster seat. Once children outgrow their forward-facing seats they should ride in booster seats, in the back seat, until the vehicle seat belts fit properly. Seat belts fit properly when the lap belt lays across the upper thighs and the shoulder belt fits across the chest." To determine the weight recommendations for a booster seat you should always read the child seat instruction manual, as each manufacturer provides specific instructions regarding proper use and installation of their child seats.

Follow this five-step guide from www.car-seat.org when deciding whether or not you child is ready to ride without a booster:
The 5 Step Test

If you answer "No" to any of these questions, your child must be in a booster seat:

1. Does the child sit all the way back against the auto seat?
2. Do the child's knees bend comfortably at the edge of the auto seat?
3. Is the lap belt touching the top of the thighs, not the tummy?
4. Is the shoulder belt centered on the shoulder and chest?
5. Can the child stay seated like this for the whole trip?

BELT-POSITIONING BOOSTERS CANNOT be used with only a lap belt!

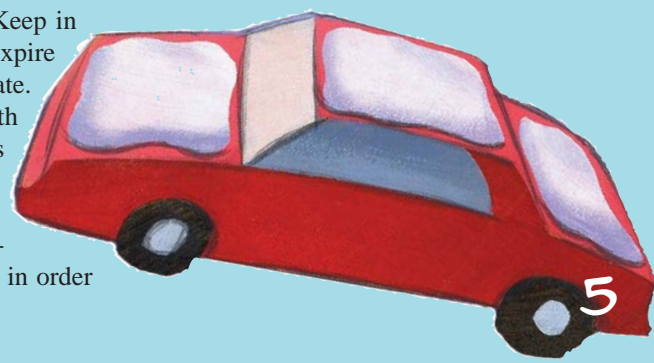
Booster seats are readily available and reasonably priced. If you transport children that are under 4'9" and less than 80 pounds, consider keeping a spare booster seat in your vehicle for them to ride in. Keep in mind that child passenger seats expire six years after the manufacture date. Do not use expired seats, seats with missing labels or second-hand seats if you are not familiar with the seat history. NHTSA recommends that child safety seats be replaced following a moderate or severe crash in order

to ensure a continued high level of crash protection for child passengers. They also state that child safety seats do not automatically need to be replaced following a minor crash. If a seat that was in a minor crash does not meet the following criteria, it should be replaced.

- Minor crashes are those that meet ALL of the following criteria:
- The vehicle was able to be driven away from the crash site;
- The vehicle door nearest the safety seat was undamaged;
- There were no injuries to any of the vehicle occupants;
- The air bags (if present) did not deploy; AND
- There is no visible damage to the safety seat

Every child deserves the right to their own safety belt. If you were 10 and told by a friend's mom to share a belt, would you have the courage to ask for your own? A safety belt is not designed to work with two bodies; in fact it could lead to the ejection of both individuals in a crash. The Brain Injury Association of America warns that, "Every person in a vehicle should have his or her own seat belt. In the event of a motor vehicle crash, sharing a seat belt can cause extreme injury and even death as the two sharing the seat belt crash into each other." Ask yourself if you could live with the responsibility of causing harm to another mother's child.

These tips may seem like over doing it, but remember we can never predict when a crash will occur; we only know that most drivers will be in a crash at some point. We need to be prepared for when the crash will occur, not if it will occur. It is our responsibility to keep our passengers safe. We don't want to be in the position of apologizing to a parent when their child has been injured in our care when it could have been prevented. These decisions don't have to be confusing, keep it simple and stick to what you know is safe.



Know What Your Tweens and Teens May Be Doing

Mark Seip
Omaha Public Power District

There are some new dangerous games out that the kids are playing, and I'm not talking Chutes and Ladders here. I'm talking about games like "The Choking Game". This is where someone actually tries to strangle themselves, or have a friend strangle or choke them, until they pass out. Why do they do it? To get high, from lack of oxygen to the brain. Unfortunately, too many of these kids who pass out, especially those choking themselves when alone, don't ever wake up.

It is important to recognize the warning signs if you suspect your kids might be playing this game. According to the Centers for Disease Control and Prevention signs can include talking about the choking game and side effects like:

- bloodshot eyes and/or marks on their neck
- frequent, severe headaches
- being disorientated after spending time alone
- finding belts, ropes, or scarves knotted or tied to bedroom furniture or door-knobs

As with other topics you try to talk to your teen about, you might bring the topic up by asking them if they know whether any of their friends or anyone at school ever talks about playing the choking game.

Drug abuse has taken a new twist too. The same drugs are still around today that have been around forever: marijuana, cocaine, speed, LSD (acid), meth and of course alcohol. But, with the laws cracking down on these illegal drugs our teens are becoming more resourceful in finding ways to get high with products found in most homes.

"Huffing" is one of these methods. It consists of inhaling canisters of aerosol whipped cream. The nitrous oxide replaces the oxygen in the lungs, giving the user a feeling of euphoria. Because the brain is deprived of oxygen, and person can pass out and/or die of asphyxiation.

Another is called "Hard Candy" which is nothing more than going thru household medicine cabinets and gathering up pills.



The most sought after medications are Vicodin, Valium, Xanax, Ritalin, Adderall, and Oxycontin; however they will take whatever other prescription medications they can find. The pills are dumped into a bowl, mixed and eaten like candy. Fatal interactions and overdoses are common.

We as parents also need to be aware of possible side effects from drugs and alcohol which include any of the following:

- attitude changes: more irritable, secretive, withdrawn, overly sensitive, inappropriately angry, defiant, and

euphoric

- extreme mood swings (e.g., depression, and anger)
- less responsible: late coming home, late for school or class, and dishonesty
- changing friends or changing lifestyles: new interests, unexplained cash
- physical deterioration: difficulty in concentration; loss of coordination; loss of weight; slurred speech; red or glassy eyes; sniffling or runny nose; appearing spaced out
- unexplained deterioration in school performance
- behavior problems: high-risk behavior, such as stealing or sexual promiscuity
- changes in relationships or eating habits
- changes in hygiene
- presence of drugs or paraphernalia (e.g., cigarette papers, pipes, clips, spoons)

The fact that some of the warning signs of drug abuse may be present in your teen, doesn't necessarily mean that they are definitely using drugs. There could be other causes for some of these behaviors. Even the life stage of adolescence is a valid reason for many of these signs to exist. But, on the flip side, do not ignore the warning signs of teenage drug abuse.

Many parents hesitate to discuss alcohol and other drug use with their child. Some of us believe that our children couldn't become involved with illegal substances. Others delay because we don't know what to say or how to say it, or we are afraid of putting ideas into our children's heads.

Don't wait until you think your child has a problem. Many young people in treatment programs say that they had used alcohol and other drugs for at least two years before their parents knew about it. Begin early to talk about alcohol and other drugs, and keep the lines of communication open.

Don't be afraid to admit that you don't have all the answers. Let your child know that you are concerned, and that you can work together to find answers.

Congratulations!

Fire Prevention Contest Winners

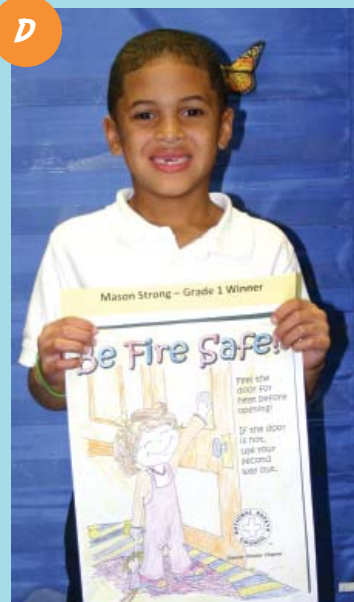
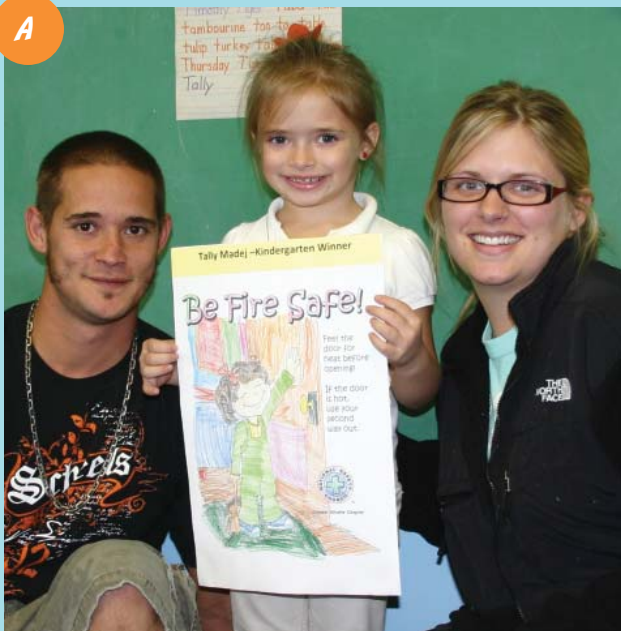


Photo A: Joe Elliot, Natalia Madej and Alishia Madej
 Photo B: Max Grace and his parents
 Photo C: Mrs. Heimerman, Camille Duryea and Peter Duryea
 Photo D: Mason Strong
 Photo E: Christian Rjha
 Photo F: Catie Tangeman and her parents
 Not pictured: Kevin Polomares

FUN + GAMES

The Maine (Snow)Man! Did you know?

The record for the world's largest snowman was set in 2008 in Bethel, Maine. The snowwoman stood 122 feet 1 inch tall.

The previous record was also a snowman built in Bethel, Maine, in February 1999. It was 113 feet 7 inches tall and weighed over 9,000,000 pounds!



WINTER WORD FIND

Find words of the season and from articles in this issue—hidden horizontal, vertical and diagonal.

A	O	C	O	C	D	N	E	G
P	L	V	H	A	K	S	N	Y
N	W	U	F	R	H	E	I	T
F	I	R	E	P	L	A	C	E
V	R	L	X	O	R	T	I	K
N	Q	E	H	O	E	B	D	W
O	I	Y	E	L	T	E	E	O
S	G	W	M	Z	N	L	M	N
A	M	U	S	V	I	T	W	S
E	Z	K	R	J	W	N	H	C
S	L	E	D	D	I	N	G	Q
G	E	L	K	C	U	B	Y	R

1. FREEZING
2. MEDICINE
3. DRUG
4. SEATBELT
5. BUCKLE
6. SNOW
7. CARPOOL
8. WINTER
9. SEASON
10. SLEDDING
11. FIREPLACE
12. COCOA

Word Find Answer

G	Y	T	E	K	W	O	N	S	C	O	R
E	N	I	C	I	D	E	M	W	H	G	Y
N	S	E	A	T	B	E	L	L	N	N	B
D	K	H	L	R	E	T	N	W	I	J	U
E	A	R	P	O	O	L	Z	V	J	D	C
C	O	H	F	E	X	H	E	M	S	R	D
C	V	U	R	L	E	Y	W	K	K	L	L
A	O	L	W	R	Q	I	G	M	Z	L	E
A	P	N	L	V	Z	N	O	S	A	E	S

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**Carpool Safety, Fire Prevention Contest
Winners, Know What Your Tweens and
Teens May be Doing and more!**

