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The Navy Region, Mid-Atlantic Public Safety, Virginia Beach Safety Storefront publishes this SafetyGram and widest dissemination within your organization as encouraged. Please post on official bulletin boards and route to your staff. Our web site at www.nasoceana.navy.mil/safety also has lots of additional information to improve your safety posture.

Buckle Up America **Child Passenger Safety Week**

February 9–15, 2003



The theme of this year's Child Passenger Safety Week is **4 Steps for Kids**

The **4 Steps for Kids** are:

1. **Rear-facing infant seats** in the back seat from birth to at least one year old and at least 20 pounds.
2. **Forward-facing toddler seats** in the back seat from age one to about age four and 20 to 40 pounds.
3. **Booster seats** in the back seat from about age four and 40 pounds to at least age eight, unless 4'9".
4. **Safety belts** at age eight or older or taller than 4'9". All children 12 and under should ride in the back seat.

Most kids age four to eight need booster seats. NHTSA recommends using booster seats in the back seat for children from about age four and 40 pounds to at least age eight, unless 4'9".

Moving to a safety belt too early greatly increases risk of injury. Children age two to five who are prematurely graduated to safety belts are four times more likely to sustain a serious head injury than those restrained in child safety seats or booster seats. [Winston, F.K., Durbin, D.R., Kallan, M.J., & Moll, E.K. (2000). "The danger of premature graduation to safety belts for young children." *Pediatrics*, 105(6), 1179-1183]

Because many State laws only require children to be in a safety seat up to age four or so, many parents assume older kids are safe in just a safety belt.

However, all children need to be restrained correctly whenever they ride in a motor vehicle. As of December 2002, only 15 States and the District of Columbia had enacted booster seat provisions in their child restraint laws.

The booster seat step is overlooked by the majority of people—across race and income levels.

Sixty-three percent of children who should have been in belt-positioning booster seats, typically children age four to eight, are inappropriately restrained. [Child Passengers at Risk in America: A National Study of Restraint Use, National SAFE KIDS Campaign, 2002]

Many children are placed in the wrong restraint. A third of children (33 percent) age 14 and under ride in the wrong restraint type for their age and size. [Child Passengers at Risk in America: A National Study of Restraint Use, National SAFE KIDS Campaign, 2002]

The vast majority of child safety seats are used incorrectly. According to a 2002 National SAFE KIDS Campaign study, more than 81 percent of child restraints are used incorrectly, including 88 percent of forward-facing toddler seats, 86 percent of rear-facing infant seats and 85 percent of safety belts, as determined at child passenger safety seat inspection stations across the country. This validates the findings of similar research by NHTSA. [Child Passengers at Risk in America: A National Study of Restraint Use, National SAFE KIDS Campaign, 2002]

Child passenger safety technicians have found and corrected numerous installation errors in seats installed by parents and caregivers. To find local inspection stations, go to www.nhtsa.dot.gov/people/injury/childps or www.seatcheck.org.

Office Ergonomics

Hazard Overview: Poor office ergonomics can lead to various types of musculoskeletal problems that range from minor discomfort to serious injury requiring surgery. Ergonomic risks include repetitive motion (like keyboarding or extensive use of a mouse), excessive reach, twisting, constant muscle contraction, extensive force, and poor posture. Office workers faced with ergonomic hazards may get eye strain, carpal tunnel syndrome, ganglion cysts, tendon and nerve disorders, and musculoskeletal disorders of the neck, trunk, arms and legs.

Retaining a fixed posture -- common to office work -- can lead to muscle injury over time. Lifting, reaching and twisting when carrying loads poses the risk of injury and strain. Ergonomic hazards can result in discomfort, fatigue and reduced productivity in addition to safety risk. Early symptoms include pain, numbness, tingling (hands falling asleep), loss of strength and reduced range of motion.

Precautions: Many ergonomic hazards can be addressed with engineering controls. Adjusting the workstation to cause a better fit between worker and environment is the number one way to minimize or eliminate ergonomic hazards. For example, eyestrain can be minimized with proper lighting, reduced glare and increased contrast. Carpal tunnel syndrome can be avoided by reducing wrist flexion with proper keyboard position.

Early reporting is an important prevention tool that can work when employees are trained to recognize the signs and symptoms of ergonomic ailments. Training also provides workers with the information they need to self-monitor and adjust their workstations. In addition to training and hazard identification, a comprehensive ergonomics program includes management leadership and employee participation, incident reporting and recordkeeping.

Allowing employees to rest muscles or use different muscles provides time for overused muscles to recover. Jobs involving constant muscle use (static contractions, such as prolonged grip of pen or keyboarding) and jobs with constant repetition both require schedules for muscle relaxation to avoid accumulation of muscle fatigue.

Many checklists and tables exist that provide specific recommendations for workstation positions including: chair height; table height and leg clearance; reach; seat pan depth and width; elbow angle and lighting. For computer users, keyboard, chair and monitor location are critical adjustments.

Some guidelines for computer workstations:

1. Adjust the chair seat height so thighs are horizontal and parallel to the floor. Feet should ideally rest on a footrest or at least flat on the floor.
2. Position arms on armrests so that the inside elbow angle is 90 degrees; forearms should be horizontal and parallel to the floor. Shoulders and elbows should be relaxed and close to the body. Keep wrists in neutral position, not flexed up or down or to the left or right.
3. Adjust the chair backrest so it supports the lower back.
4. Position monitor so the top of the screen is slightly lower than the user's eyes and is approximately an arm's length away.
5. Maintain posture so that head and neck are straight and not flexed.
6. Position documents next to the screen with a document holder.
7. Reduce glare by lowering overhead lighting and shading windows. Use a glare guard if necessary, keep monitor clean and set screen type at high contrast (for example, black type on white background).
8. Position the mouse as close to the center as possible to minimize arm extension.
9. Only rest the palm of the hand on a wrist rest, never the wrist. Resting the wrist adds the weight of the arm to the already compressed carpal tunnel nerve.
10. Take breaks or rest muscles by alternating activities.

Tips for the Day (Living Longer & Staying Younger)

Coming Up Rosemary - Here's another herb to add to your rack of antioxidant-rich spices: rosemary. According to research, rosemary contains potent antioxidants that may help to inhibit free radical damage to cells. Rosemary was revealed to have an even greater antioxidant capacity than health-friendly paprika. Use rosemary to season fish, vegetables, and egg-white omelets. **RealAge Benefit: Getting the right amount of antioxidants through diet or supplements can make your RealAge 6 years younger.**

Caffeine Chasers - If you're trying to minimize your stress levels, cutting your caffeine intake could help. In one study, people who consumed the caffeine equivalent of about four small cups of coffee over the course of a workday experienced increases in their blood pressure readings, heart rates, and stress hormone levels. Researchers speculate that, overtime, such physiologic responses could hurt heart health.

Fiber Fill-Up - **Want** to lower your risk of heart disease? Add an apple and some carrot sticks to your daily lunch break. Eating a high-fiber diet may lower your risk of heart disease. In a recent study, getting just 8 additional grams of dietary fiber per day was associated with a significant decrease in heart disease risk and heart attack risk. Eight grams of fiber is equivalent to a medium apple and a handful of carrot sticks.

Hand Washing, Why Is It So Important??

HAND WASHING PROTECTS HEALTH AND PREVENTS DISEASE

"Hand washing is the single most important means of preventing the spread of infection."

Source-U.S. Centers for Disease Control and Prevention

Hands to food: Germs are transmitted from unclean hands to food, usually by an infected food preparer who didn't wash their hands after using the restroom. The germs are then passed to those who eat the food.

Food to hand to food: Germs are transmitted from raw, uncooked foods, such as chicken, to hands; the germs are then transferred to other foods, such as salad.

Nose, mouth, or eyes to hands to others: Germs that cause colds, eye infections and other illnesses can spread to the hands by sneezing, coughing, or rubbing the eyes and then can be transferred to other family members or friends.

Food to hand to infants: Germs from uncooked foods are transferred to hands and then to infants. If a parent handling raw chicken, for example, doesn't wash his or her hands before tending to an infant, they could transfer germs such as salmonella from the food to the infant.

Infected infant to hands to other children: During diaper changing, germs are passed from an infant to hands of parent. If a parent does not immediately wash their hands, germs can be passed to another child.

