**Loan of Occupational Therapy, John Hunter Children’s Hospital Car Seats**

<table>
<thead>
<tr>
<th>Sites where Local Guideline and Procedure applies</th>
<th>John Hunter Children’s Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>This Local Guideline and Procedure applies to:</td>
<td></td>
</tr>
<tr>
<td>1. Adults</td>
<td>No</td>
</tr>
<tr>
<td>2. Children up to 16 years</td>
<td>Yes</td>
</tr>
<tr>
<td>3. Neonates – less than 29 days</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Target audience</th>
<th>Paediatric Occupational Therapist, JHCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>This local procedure outlines the steps required to enable safe provision of car seats to patients who require them at John Hunter Children’s Hospital</td>
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</table>

**National Standards**
- 1, 5 Occupational Therapy, Car Seats, Equipment

**Document registration number**
- JHCH 16.2

**Replaces existing document?**
- No

**Related Legislation, Australian Standard, NSW Ministry of Health Policy Directive or Guideline, National Safety and Quality Health Service Standard (NSQHSS) and/or other, HNE Health Document, Professional Guideline, Code of Practice or Ethics:**
- Transport Safety Guidelines for People with a Disability, TranSPOT 2010

**Local Guideline and Procedure note**
This document reflects what is currently regarded as safe and appropriate practice. The guideline section does not replace the need for the application of clinical judgment in respect to each individual patient but the procedure(s) **require mandatory compliance**. If staff believe that the procedure(s) should not apply in a particular clinical situation they must seek advice from their unit manager/delegate and document the variance in the patient’s health record. If this document needs to be utilised in a paediatric clinical setting outside of JHCH please liaise with the JHCH OT service to ensure the appropriateness of the information contained within the Guideline and Procedure.

**Position responsible for and document authorised by**
- Jason Simpson, General Manager /DON

**Contact person**
- Brooke Drelincourt

**Contact details**
- Brooke.Drelincourt@hnehealth.nsw.gov.au

**Date authorised**
- 

**This document contains advice on therapeutics**
- No

**Issue date**
- March 2019

**Review date**
- March 2021
Purpose and Risks

Following surgery or trauma there are a number of inpatients at the John Hunter Children’s Hospital that will require the loan of a car seat to ensure they can be safely transported home. The Occupational Therapy department has a loan pool in which these are scripted from. The purpose of this procedure is to identify the standards and guidelines associated with the loan and modification of car seats. By following this procedure relevant Occupational Therapy staff will be able to recognise the appropriate car seat to loan to patients based on Australian Standards and follow the correct modification procedures if car seat modification is required. The procedure also identifies when to dispose of car seats in accordance with manufacturers guidelines.

The risks associated with this include non-safe car seat transportation with injury to the child being transported in the car seat.

These risks are minimised by:

1. Staff following RMS guidelines in regards to suitable car seat prescription
2. Modification of car seat in accordance with Australian Standard AZ/NZS 1754:3013
3. Identification of Authorised Car Fitting Stations for families to have car seat installed

Risk Category: Clinical Care & Patient Safety

Glossary

<table>
<thead>
<tr>
<th>Acronym or Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>JHCH</td>
<td>John Hunter Children’s Hospital</td>
</tr>
<tr>
<td>OT</td>
<td>Occupational Therapy</td>
</tr>
<tr>
<td>RMS</td>
<td>Roads and Maritime Services</td>
</tr>
</tbody>
</table>

Procedure

This procedure requires mandatory compliance.

The following steps must be followed:

1. Assess child’s transport needs - the Occupational Therapist will assess the child with additional positioning needs for suitable transport options which may include using the families existing car seat, a car seat that meets Australian Standards loaned from the OT Department JHCH or if neither of these options possible recommend ambulance transfer home and document this need in the medical record

2. If loaning a car seat from the JHCH OT department ensure the following national child restraint laws are followed:
   - Children up to the age of six months must be secured in an approved rearward facing restraint
   - Children aged from six months old but under four years old must be secured in either a rear or forward facing approved child restraint with an inbuilt harness
   - Children under four years old cannot travel in the front seat of a vehicle with two or more rows
   - Children aged from four years old but under seven years old must be secured in a forward facing approved child restraint with an inbuilt harness or an approved booster seat
   - Children aged from four years old but under seven years old cannot travel in the front seat of a vehicle with two or more rows, unless all other back seats are occupied by children younger than seven years in an approved child restraint or booster seat
Children aged from seven years old but under 16 years old who are too small to be restrained by a seatbelt properly adjusted and fastened are strongly recommended to use an approved booster seat.

Children in booster seats must be restrained by a suitable lap and sash type approved seatbelt that is properly adjusted and fastened, or by a suitable approved child safety harness that is properly adjusted and fastened.

All car seats owned by JHCH OT Department will be engraved with date of purchase and disposed of 10 years after purchase date or in the event the have been involved in a car accident as per manufacturers guidelines.

3. If modifications are required to the car seat document all modifications, recommendations and advice given to parent/carer in the child’s medical record. Complete the letter template (Appendix B) describing the process and letter for the RMS and provide copies to the parent/carer. When modifying any restraint, the parent/carer must be informed that modifications have been performed. This is of particular importance when using restraints that have had major modification, such as extended crotch straps, even if the restraint was modified by the manufacturer. The parent/carer must be aware that the restraint is to be used only for the child for whom it was modified. Only soft modifications to the restraint should be attempted by anyone other than the restraint manufacturer. Examples of soft modifications include towel padding and soft sleeves that may cover part of the webbing or buckle. Under no circumstances should one attempt to alter the hard shell or anchorage system. Webbing should only be altered in consultation with the manufacturer.

The general principle to apply, when using padding, is that the firmer the padding, the greater the support during a crash. The following important points should be considered:

- The harness should be fitted first and then the padding should fill all gaps and spaces. The padding beneath and behind the child should be firm, as soft padding will crush on impact.
- Total padding should not exceed 2kg in weight.
- Padding should be secured under the seat cover.
- Folded cloth nappies or towels are suitable for use as support.
- Avoid placing padding/foam between the child and the harness.
- Foam used should be of a minimum density of mauve H42-500, core density 42kg-44kg/m3.

4. If a car seat needs to be re-installed to the family vehicle the OT must provide the family with the list of Authorised Restraint Fitting Stations in NSW. The RMS has current list of authorized fitters on their website. Fitting stations close to this hospital include (as of Oct 2018) are in Appendix A.

IMPLEMENTATION, MONITORING COMPLIANCE AND AUDIT

The implementation of this will be communicated via staff meeting for all OT staff and the document will be monitored for effectiveness and compliance through existing orthopaedic competency assessments. All new staff are required to complete these competency guidelines.

The guideline and procedure will be audited on an annual basis as part of annual file reviews.

File audits, implementation of orthopaedic competencies will be completed by Brooke Drelincourt/Amanda Orr, Heads of Department, Paediatric Occupational Therapy.

FEEDBACK

Any feedback on this document should be sent to the Contact Officer listed on the front page.

APPROVAL

CPGAG – December 2018
JHCH CQ&PCC – February 2019
## APPENDICES

### Appendix A

### RMS Authorised Car Fitting Stations (as of Oct 2018)

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Can fit restraints requiring vehicle modifications?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Altapec</td>
<td>94 Park Avenue, Kotara, 2289</td>
<td>(02) 49581666</td>
<td>Yes</td>
</tr>
<tr>
<td>Adamstown Car Doctors</td>
<td>49 Park Avenue, Adamstown, 2289</td>
<td>(02) 49571866</td>
<td>No</td>
</tr>
<tr>
<td>Ultrasound Gosford</td>
<td>3/147 Newcastle Road, Wallsend, 2287</td>
<td>(02) 49501344</td>
<td>No</td>
</tr>
<tr>
<td>Child Safe Hunter Valley</td>
<td>Mobile in Hunter Valley Area, Werallah, 2290</td>
<td>(02) 49213374</td>
<td>Yes</td>
</tr>
<tr>
<td>Jax Quickfit Newcastle</td>
<td>22 National Park Street, Newcastle West, 2302</td>
<td>(02) 49811261</td>
<td>No</td>
</tr>
<tr>
<td>Autobahn Warners Bay</td>
<td>Unit 4, 240-260 Hillsborough Road, Warners Bay, 2282</td>
<td>(02) 49537461</td>
<td>No</td>
</tr>
<tr>
<td>Gerry Bubbers Autosseics</td>
<td>17 Pacific Highway, Gateshead, 2290</td>
<td>(02) 49427755</td>
<td>Yes</td>
</tr>
<tr>
<td>Tyre Power Gateshead</td>
<td>Unit 7, 18 Oakdale Road, Gateshead, 2290</td>
<td>(02) 49462666</td>
<td>No</td>
</tr>
<tr>
<td>Trigg's Motors</td>
<td>88 Excelsior Parade, Toronto, 2283</td>
<td>(02) 49592122</td>
<td>Yes</td>
</tr>
<tr>
<td>Jax Tyros Heatherdrae</td>
<td>Unit 3, 4 Hank Street, NSW, 2324</td>
<td>(02) 49075555</td>
<td>No</td>
</tr>
<tr>
<td>D &amp; A Scecco Mechanical Repairs</td>
<td>12 Lake Road, Swansea, 2281</td>
<td>(02) 49713361</td>
<td>No</td>
</tr>
<tr>
<td>Mirrabooka Motors Mechanical &amp; Fuel Supplies Pty Ltd</td>
<td>99 Fishery Point Road, Mirrabooka, 2294</td>
<td>(02) 49733107</td>
<td>Yes</td>
</tr>
<tr>
<td>Heritage Motor Group</td>
<td>Corner New England Highway and Dunlop Street, Marrickville, 2282</td>
<td>(02) 49320779</td>
<td>No</td>
</tr>
<tr>
<td>Autobahn</td>
<td>60 Shipley Drive, Rutherford, 2280</td>
<td>(02) 49323459</td>
<td>No</td>
</tr>
<tr>
<td>Monssen Batteries</td>
<td>35 Gateway Boulevard, Monssen, 2284</td>
<td>(02) 49704321</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Appendix B

Letter Template for Family/RMS/Medical Record

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**Medical Certificate Re: Car Restraint and Requirements to Wear Seatbelt**

**Re:** __________________________

**DOB:** __________________________

_________________________ has recently undergone orthopaedic surgery at the John Hunter Children’s Hospital as a result of his/her medical condition ______________________. As a result, he/she is unable to be transported in a way that is approved by the Australian Standards committee (AS/NZS 1754:2010).

Various child restraint options have been considered and the safest and most practical option has been implemented by the treating medical specialist and occupational therapist. This option has been discussed with the manufacturer of the child restraint and it has been recognised that this is the safest option for transporting a child following this surgery.

The following modifications have been made:

- [ ] Modified/extended crotch strap fitted to Safe ‘n’ Sound car seat
- [ ] Up to 2 kg of additional padding (towels) used to maintain appropriate sitting position
- [ ] Other __________________________

_________________________’s parents/carers are aware that he/she must be restrained within the car at all times, that the restraint is not to be used by other children and that no further modifications should be made to the restraint without input. The parent/carer will abide by the manufactures instructions for installation and contact information for companies providing installation assistance has been provided by the Occupational Therapist.

If further discussion is required, please contact:

**Paediatric Occupational Therapy Department**
**John Hunter Children’s Hospital**
**Ph: (02) 4921 3700**

**Medical Practitioner signature:** __________________________ **Date:** __________________________

**Medical Practitioner name:** __________________________

**Occupational Therapist name:** __________________________

**Parent/Carer signature:** __________________________ **Date:** __________________________

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**NSW Health**
**Hunter New England Local Health District**