Best Practice Guidelines for the Safe Restraint of Children Travelling in Motor Vehicles

Dissemination Plan
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Copies of this document and the guideline can be downloaded from: http://www.neura.edu.au/CRS-guidelines
Dissemination Plan:

_Best Practice Guidelines for the Safe Restraint of Children Travelling in Motor Vehicles_

1. **Dissemination Strategy:**

The primary goal of developing these guidelines was to ensure that the advice given to parents regarding child restraint was evidence-based and consistent across all information sources. Providing advice to consumers and professionals working in road safety is the core business of the co-developer (Kidsafe) and many of the Steering Committee member organizations, particularly the state road authorities and motoring organisations. These steering committee organisations will be the key route of dissemination of the guideline recommendations to parents and carers, and the major drivers for adoption of these guidelines among both professionals and consumers.

There are many routes, direct and indirect, through which this advice is currently provided to consumers. These include:

- Websites
- Telephone hotlines and information services
- Child restraint fitting services (professionals that install child restraints and provide to consumers on their correct use)
- Brochures, DVDs, and other educational materials
- Child restraint fitting days
- Educational materials and training provided for use in schools and child care services

Kidsafe and the steering committee organisations have committed to using these guidelines as the basis for advice given to consumers and in training materials for road safety professionals who provide advice to consumers. The stakeholder organizations will use the guidelines materials as the basis for updating their advice and educational materials.

Specific processes underway to aid this implementation include:

1. Development of consumer documents. These consumer documents will be provided both direct to consumers (parents and carers), and to the steering committee organizations for use in updating their advice and educational materials.
   a. Preparation of consumer documents based on the guidelines by the guidelines developers.
   b. Focus group testing of draft consumer documents by Neuroscience Research Australia and Kidsafe, with both consumers, and child restraint fitters, who would regularly use these materials with parents and carers.

2. Publication of the consumer documents, guidelines document and reports on Kidsafe and NeuRA websites. Links provided from the NHMRC guidelines portal.

3. Adaptation of guidelines and consumer documents by steering committee member organizations and stakeholders for use in consumer information, educational and training materials.
a. Soft copies of recommendations documents will be provided to steering committee members and stakeholders for use in providing advice to consumers. These may be co-branded by Steering committee members, and can be adapted (while preserving the content) to allow for:
   i. Inclusion of local contact information for service providing advice and for restraint fitting services
   ii. Translation into local community languages

   a. This handbook is currently being developed, and will be made available as a web-based resource for child restraint fitters.

2. Implementation considerations:

2.1 High priority issues for implementation

The major considerations for implementation of these guidelines in broader public health practice include the potential for confusion over differences between the ‘best practice’ and the minimum restraint practices required by the National Road Rules, the time lag between completion of the guidelines and widespread adoption and publication by the relevant stakeholder organizations; and

Differences between “best practice” and the National Road Rules, as implemented in each state and territory.
All states and territories have enacted the National Road rules into state law. The high priority areas where these guidelines recommend differences in practice are:
1. Recommending booster seat use beyond the minimum legislated 7 years of age, up to a height of 145-150cm, equivalent to approximately 11-12 years of age.

2. Higher emphasis on achieving correct restraint installation and correct securing of child in the restraint.

3. Recommending that children remain rear seated beyond the minimum legislated 7 years of age, up to and including 12 years of age.

In addition, the guidelines encourage the use of the ‘younger’ age restraint for as long as the child fits within it, which is consistent with the Road Rules as they are written, but which is currently widely misunderstood in the community. For example, a child aged between 4 and 7 years can be legally restrained in either a forward facing child restraint or a booster seat under the Road Rules. After the 7th birthday, a child can be legally restrained in an appropriate child restraint or booster seat or a seat belt. These “best practice” guidelines recommend continuing to use a forward-facing child restraint until the child’s shoulders are above the top harness slot for the forward facing restraint, then using a booster seat until the child is 145-150cm tall and can pass the “5 step test”. However, the Road Rules are widely (mis)interpreted by consumers to mean that a child should start using a booster seat at 4 years and should use a seat belt from 7 years. Communicating these issues clearly is a key goal for successful implementation of the guidelines.
Adoption by Stakeholders.

Key to the success of these guidelines is the widespread adoption of their content, so that all key sources of child restraint information provide consistent advice to consumers. The major stakeholders that provide child restraint advice include the development co-organizers (Kidsafe Australia and state subsidiaries), the state road traffic authorities, early childhood health centres, automobile clubs, and child restraint fitting services and retailers, and other government or non-government organizations with a role in regulating child restraints or road safety. As noted in the Dissemination Strategy, the lead organizations, NeuRA and Kidsafe, will make the consumer documents and the detailed guideline documents available on their websites, and work with Stakeholders to facilitate adoption of the guideline content in consumer communications. Key challenges for implementation for each of the key groups are noted below.

1. **Steering Committee member organizations.** Steering committee organizations include the key consumer organizations, state road traffic authorities, and a subset of the state health department representatives. These organizations have formally endorsed the guidelines, and most have provided funding to support the guideline development (as described in the Administrative Report). They have committed to using the guidelines as the basis for providing consumer advice and in their professional training materials.

   a. **Timing.** Despite endorsement of the guidelines, all stakeholder organizations have their own internal processes for updating and review of content based on the guidelines in the materials that they provide to the public and to practitioners in their organizations. This will require time for these processes to take place, and appropriate practitioner training to be provided.

   b. **Resources.** There will be cost and resource implications for the stakeholders, in updating resources, and providing training in the updated materials. The steering committee organizations are well aware of this, and several have already begun consideration of providing these. The mechanisms for this vary considerably between organizations. Some will make use of the guidelines and consumer documents “as-is”, and others will adapt these documents to suit their specific needs. Some examples of the latter include developing co-branded consumer documents, developing training resources for those who provide advice, and developing an up-to-date handbook for use by child restraint fitters.

2. **Other stakeholders.** The broader stakeholder group whom this project targets includes child restraint manufacturers, restraint fitters not formally aligned with a state road authority or Kidsafe, child restraint retailers and steering committee organizations. While these groups and individuals have been given the opportunity to contribute to the guidelines content through the consultation phases, the degree to which these groups will ‘adopt’ and implement these guidelines is uncertain.

3. **Child Restraint Fitters.** As noted in the Dissemination Strategy section above, a parallel project to develop an up-to-date detailed handbook for child restraint fitters, based on the guidelines content, is in progress, funded by VicRoads and NSW Transport, and expected to be available at a similar time to the guidelines publication (July 2013). This will initially be made available for restraint fitters in these two states, and will be the definitive source of information for accredited restraint fitters in these states, but discussions are beginning with other states for
use of the handbook more broadly. This handbook is planned to be a web-based resource, updated annually.