

# Your guide

Tamariki Ora Whanau Ora



Creating safe home environments for children to live, play and learn is a key injury prevention strategy.

## I'm interested in this project. What do I do now?

- A good place to start is to read the 'What is the injury prevention e-toolkit?' page. This should answer some tentative questions you may have about the e-toolkit. Once you have read this page, you will be directed back to this guide and the points below.
- A suggested next move is to print 1 each of the toolkit's components so that you can refer to them during the next few steps. The resources you will need to print are as follows:
  - the parent information sheet
  - the implementation manual
  - the manual cover sheet
  - the quick tip sheets

The majority of these documents are available in PDF format only, so you will need Acrobat Reader to print them off. Visit <http://get.adobe.com/reader/> to download the latest version of Adobe Reader.

**The implementation manual** is designed to be printed in booklet format (A5). You can do this by uploading the PDF manual document, and clicking on File; Print; Properties; Layout; Print Type and selecting "booklet".

**The manual cover sheet** is formatted in Word so that you can incorporate your organisation's name and logo. Simply save this document to your computer before printing so that you

can do this.

Once you have printed the resources above, the next step is to read the implementation manual to get a good understanding of what is involved in the project. The manual is your step-by-step guide for project implementation. From here, you will be able to see the project's simplicity and make an informed decision about whether or not to introduce the project with families and whanau in your area. Take special note of the "Before you Begin" section on pages 6 and 7 of the manual. This is very important.

- After having completed the above steps, here's a suggested guide for what to do next.
- A good place to start is to get a project team together which includes the community workers involved in project implementation. Together this team will collaborate and make important decisions to get this initiative up and running. Let's take a look at how this could be accomplished. This section is titled project development.

## Project development

- Initially, the project team needs to get together to understand the project in its entirety and make collaborative decisions around:
  - the number of injury prevention issues to include in the project. For example, does the team want to focus solely on falls prevention, or does the team want to include all four injury prevention issues in the project (e.g. falls, hot water burns,



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- poisonings, and child car restraint safety)?
- the number of families/whanau to include in the project (e.g. does the team want to implement the project with 10 families or 50 families?)
- the inclusion and acquisition of supplementary resources for the project (e.g. does the team want to include stair guards and bath thermometers in the project? Where can these resources be obtained?)
- the inclusion of home visit 4 on child car restraint safety. If your project team chooses to do this visit (which we strongly recommend) you will need NZTA Fact Sheet 7 for this visit, and home visitors will need to be Safe2Go trained before the project begins (see page 7 of the implementation manual for further information)
- the timeline for each home visit (e.g. will each visit be one month apart, 6 weeks or 2 months? Will each visit fit in with your existing home visit schedule? If so, what is the timeline for this?)
- decide how the project will be managed during its implementation phase (e.g. will the project team have monthly team meetings or fortnightly meetings to support home visitors during the implementation phase? Who will arrange these meetings and where will they take place? Who will home visitors report to if they are having issues during project implementation?)
- decide how implementation manuals will be kept during the implementation phase to prevent them from getting lost or mislaid.
- evaluating your project. If you decide not to evaluate your project then you will not need to include home visit 5 into your project. It is recommended, however, that you ask families the pre-intervention questions during

each visit as stated in the implementation manual. This information provides a good record of what has been covered in each visit and where families might need some extra support and encouragement.

Once the project team have completed the development phase of the project, it is time to gear up for project implementation.

## Gearing up for project implementation

- For the most part, gearing up for project implementation involves two important things:
  - collating all of the project resources required for project delivery, and
  - ensuring that home visitors are trained in what they need to do.
- Collating project resources entails printing off the necessary components of the toolkit and matching this to the number of families participating in the project. For example, if you have decided to do this injury prevention initiative with 10 families, then you will need to print 10 copies of the following:
  - the parent information sheet (one per family/whanau)
  - the implementation manual (one per family/whanau)
  - the manual cover sheet (to accompany each of the implementation manuals)
  - 10 each of the quick tip sheets (one set per family/whanau)

Collating project resources also means getting



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together any additional resources or information you have chosen to supplement your project.

Ensuring that home visitors are trained in project delivery involves going over their responsibilities during each home visit. It might be worth doing a role play of one home visit so that home visitors are aware of what is required. We certainly found this useful during the implementation of the Kawerau injury prevention project back in 2008.

Once the supplementary resources have been collated and home visitors are trained in project delivery, it is time to gear up for project implementation.

Remember, if you are incorporating home visit 4 on child car restraint safety then visitors will also need to be Safe2Go trained prior to project implementation.

## Project implementation

- During project implementation home visitors will need to be supported. This can be achieved by scheduling a monthly meeting to:
  - explore issues related to the project as it is being implemented
  - provide a forum where home visitors can discuss their thoughts, feelings and experiences about the project
  - assess individual needs, and
  - provide feedback to home visitors where necessary.
- Make sure there is a process for keeping implementation manuals safe during project implementation.

Once the project has been delivered, it is time to collect all of the completed implementation manuals, to evaluate the project's effectiveness.

## Project evaluation

- If you are incorporating evaluation into your injury prevention project, congratulations!! A ready-to-use excel spreadsheet has been incorporated into the e-toolkit for this very purpose. Simply save the excel spreadsheet to your desktop and enter in the data collected during the pre and post-implementation surveys according to the pre-determined values highlighted on the spreadsheet.
- The excel spreadsheet has four pages:- Instructions, Data Entry Comparison, and Data Summary. Make sure you read the 'Instruction' page before you start.

The excel spreadsheet will automatically calculate total number of responses to each question gained and calculate percentages. The spreadsheet will also compare difference in responses during pre and post-implementation surveys so that you can see any knowledge and behavioural changes.

This information can then be synthesised into an evaluation report. An example of an evaluation report for this project is also on the Toi Te Ora website. Simply go to [http://www.toiteorapublichealth.govt.nz/healthy\\_homes](http://www.toiteorapublichealth.govt.nz/healthy_homes) and have a look at the Kawerau home safety and home health links.

