coffee or tea + child =

by Eric ANDLAUER
Email : andlauere@sofreavia.fr
Coffee or tea + child = ?????

- One year ago I was like:
  - JAA
  - Airlines
  - Crews
  - many doctors
  - most persons drinking coffee or tea with children running around.

- Who knows that "coffee or tea" + child = ?????
Coffee or tea + child = danger
Coffee or tea + child = Danger

- Presentation:
  - Case study
  - Survey
  - On going work
  - Early recommendations
  - Conclusions
Coffee or tea what’s new

- More and more kids are travelling by air
  - vacation first and last days show a massive increase in child or family proportion among aircraft passengers on some destination
  - Family migration take place on charter like flights
  - More and more kids are travelling long haul
- Early wake up after a long haul flight = danger
  - cabin is messy
  - pax are not completely awake
  - children are lying asleep and awaking
  - crew is tired

=> Good environment for accidents
Coffee or tea Study case 1/4

- Return from French West Indies vacation
- Start of local vacation; during French continental vacation
- Charter flight
- Many families with children
- B747 full up “to the roof”
- At wake up (5 AM French continental time 1 AM West Indies time)
- Mummy, daddy and child (3 years old) on a lateral row. Child sleeping across parents legs
Coffee or tea Study case: 2/4

- The family is two rows from galley
- Crew asks: “Coffee or tea?” -> “Coffee please”
- Crew asks previous row passenger to raise his seat
- Crew lays the coffee pot to help passenger
- The coffee pot is destabilised
- The coffee pot falls, opens and
- A full boiling coffee pot is spread on the leg of the child

=> Stupid accident
Coffee or tea Study case : 3/4

- The baby pyjama trousers are taken off.
- The crew apply fresh water on the burned parts.
- A large part of the leg is burned (10 Cm high and nearly all around tight).
- The skin is peeling… Nothing really impressive.
- The family is sent after landing to the airport medical centre.
- The burn parts are treated with special cream and recovered with gauze and bandage.
Coffee or tea  Study case :  4/4

● Family is sent home for the weekend !!!!!
● On Monday

● hospital for 10 days with a threat of skin graft ?
Coffee or tea real danger?

- Is it a bad luck situation, a stupid accident?
  - child against aisle
  - proximity from galley (very hot and full coffee pot)
  - unexpected fail

- but:
  - “little burn” child hospital services are full with coffee, tea or herb tea spillage accident; most of the time at home.
  - at Paris hospital two cases in a one year time in an aircraft
  - Hopefully the baby wears “diaper”…

=> Coffee or tea accident survey
Coffee or tea accident survey 1/3

- Survey description
  - One major European Airline
  - Medical reports from crew to airline medical centre (each time the on board medicine kit is used)
  - Only hot liquid spillage relative cases
  - Length 7 month
  - One page accident description sheet
Coffee or tea accident survey 2/3

- 23 cases of hot liquid spillage (only 2 were not tea or coffee related) all in calm air
- 5 children were burned (including a baby)
- 3 cases of Blistered (in depth burn)
  - 2 adults
  - 1 Child => possibly similar to study case
- 4 medical assistance (on board or on ground)
- 7 cases during service
  - including 3 cases of default cups
- 2 cases of pot spillage
Coffee or tea accident survey 2/2

● Conclusion
  – Coffee or tea + child = real danger
  – Consequences are generally underestimated.
    ✗ Information should be made.
    ✗ Preventive action should be taken.
  – Treatment should be improved.
Coffee or tea on going work

- Work on prevention
- Work on treatment protocol (with hospital)
- Provide industry with an information paper
Coffee or tea early recommendation 1/2

- Information:
  - authorities
  - operators and crews
  - families

- Prevention:
  - Improve cup reliability
  - Improve pots to limit falls and spillage
    - fixed thermos + pomp?
  - Limit “boilers” temperature to 65°C
    - as at home
  - promote cold drinks only flights
    - short haul first
Treatment:
- Study specific cabin adapted treatment (coolgel ?...)
- Provide operators crew with in flight adapted protocols
- Provide operators operation with adapted protocols
  - during flight
  - after landing
- Provide airport medical centres with adapted protocols