

135.119 Shaken baby syndrome prevention program.

1. For the purposes of [this section](#):

- a. “Birth center” and “birthing hospital” mean the same as defined in [section 135.131](#).
- b. “Child care provider” means the same as a child care facility, as defined in [section 237A.1](#), that is providing child care to a child who is newborn through age three.
- c. “Family support program” means a program offering instruction and support for families in which home visitation is the primary service delivery mechanism.
- d. “Parent” means the same as “custodian”, “guardian”, or “parent”, as defined in [section 232.2](#), of a child who is newborn through age three.
- e. “Person responsible for the care of a child” means the same as defined in [section 232.68](#), except that it is limited to persons responsible for the care of a child who is newborn through age three.

f. “Shaken baby syndrome” means the collection of signs and symptoms resulting from the vigorous shaking of a child who is three years of age or younger. Shaken baby syndrome may result in bleeding inside the child’s head and may cause one or more of the following conditions: irreversible brain damage; blindness, retinal hemorrhage, or eye damage; cerebral palsy; hearing loss; spinal cord injury, including paralysis; seizures; learning disability; central nervous system injury; closed head injury; rib fracture; subdural hematoma; or death. Shaken baby syndrome also includes the symptoms included in the diagnosis code for shaken infant syndrome utilized by Iowa hospitals.

2. a. The department shall establish a statewide shaken baby syndrome prevention program to educate parents and persons responsible for the care of a child about the dangers to children three years of age or younger caused by shaken baby syndrome and to discuss ways to reduce the syndrome’s risks. The program plan shall allow for voluntary participation by parents and persons responsible for the care of a child.

b. The program plan shall describe strategies for preventing shaken baby syndrome by providing education and support to parents and persons responsible for the care of a child and shall identify multimedia resources, written materials, and other resources that can assist in providing the education and support.

c. The department shall consult with experts with experience in child abuse prevention, child health, and parent education in developing the program plan.

d. The program plan shall incorporate a multiyear, collaborative approach for implementation of the plan. The plan shall address how to involve those who regularly work with parents and persons responsible for the care of a child, including but not limited to child abuse prevention programs, child care resource and referral programs, child care providers, family support programs, programs receiving funding through the early childhood Iowa initiative, public and private schools, health care providers, local health departments, birth centers, and birthing hospitals.

e. The program plan shall identify the methodology to be used for improving the tracking of shaken baby syndrome incidents and for evaluating the effectiveness of the plan’s education and support efforts.

f. The program plan shall describe how program results will be reported.

g. The program plan may provide for implementation of the program through a contract with a private agency or organization experienced in furnishing the services set forth in the program plan.

3. The department shall implement the program plan to the extent of the amount appropriated or made available for the program for a fiscal year.

[2009 Acts, ch 7, §1](#); [2010 Acts, ch 1031, §291](#)