

House File 65 - Introduced

HOUSE FILE _____
BY SMITH, HEATON, and L. MILLER

Passed House, Date _____ Passed Senate, Date _____
Vote: Ayes _____ Nays _____ Vote: Ayes _____ Nays _____
Approved _____

A BILL FOR

1 An Act establishing a shaken baby syndrome prevention program in
2 the department of public health.
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
4 TLSB 1715HH 83
5 jp/nh/14

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1 1 Section 1. NEW SECTION. 135.119 SHAKEN BABY SYNDROME
1 2 PREVENTION PROGRAM.
1 3 1. For the purposes of this section:
1 4 a. "Birth center" and "birthing hospital" mean the same as
1 5 defined in section 135.131.
1 6 b. "Child care provider" means the same as a child care
1 7 facility, as defined in section 237A.1, that is providing
1 8 child care to a child who is newborn through age three.
1 9 c. "Family support program" means a program offering
1 10 instruction and support for families in which home visitation
1 11 is the primary service delivery mechanism.
1 12 d. "Parent" means the same as "custodian", "guardian", or
1 13 "parent", as defined in section 232.2, of a child who is
1 14 newborn through age three.
1 15 e. "Person responsible for the care of a child" means the
1 16 same as defined in section 232.68, except that it is limited
1 17 to persons responsible for the care of a child who is newborn
1 18 through age three.
1 19 f. "Shaken baby syndrome" means the collection of signs
1 20 and symptoms resulting from the vigorous shaking of a child
1 21 who is three years of age or younger. Shaken baby syndrome
1 22 may result in bleeding inside the child's head and may cause
1 23 one or more of the following conditions: irreversible brain
1 24 damage; blindness, retinal hemorrhage, or eye damage; cerebral
1 25 palsy; hearing loss; spinal cord injury, including paralysis;
1 26 seizures; learning disability; central nervous system injury;
1 27 closed head injury; rib fracture; subdural hematoma; or death.
1 28 Shaken baby syndrome also includes the symptoms included in
1 29 the diagnosis code for shaken infant syndrome utilized by Iowa
1 30 hospitals.
1 31 2. a. The department shall establish a statewide shaken
1 32 baby syndrome prevention program to educate parents and
1 33 persons responsible for the care of a child about the dangers
1 34 to children three years of age or younger caused by shaken
1 35 baby syndrome and to provide alternate techniques for venting
2 1 anger and frustration. The program plan shall allow for
2 2 voluntary participation by parents and persons responsible for
2 3 the care of a child.
2 4 b. The program plan shall describe strategies for
2 5 preventing shaken baby syndrome by providing education and
2 6 support to parents and persons responsible for the care of a
2 7 child and shall identify multimedia resources, written
2 8 materials, and other resources that can assist in providing
2 9 the education and support.
2 10 c. The department shall consult with experts with
2 11 experience in child abuse prevention, child health, and parent
2 12 education in developing the program plan.
2 13 d. The program plan shall incorporate a multiyear,
2 14 collaborative approach for implementation of the plan. The
2 15 plan shall address how to involve those who regularly work
2 16 with parents and persons responsible for the care of a child,
2 17 including but not limited to child abuse prevention programs,
2 18 child care resource and referral programs, child care
2 19 providers, family support programs, programs receiving funding
2 20 through the community empowerment initiative, public and

2 21 private schools, health care providers, local health
2 22 departments, birth centers, and birthing hospitals.
2 23 e. The program plan shall identify the methodology to be
2 24 used for improving the tracking of shaken baby syndrome
2 25 incidents and for evaluating the effectiveness of the plan's
2 26 education and support efforts.
2 27 f. The program plan shall describe how program results
2 28 will be reported.
2 29 g. The program plan may provide for implementation of the
2 30 program through a contract with a private agency or
2 31 organization experienced in furnishing the services set forth
2 32 in the program plan.
2 33 3. The department shall implement the program plan to the
2 34 extent of the amount appropriated or made available for the
2 35 program for a fiscal year.

3 1 EXPLANATION

3 2 This bill establishes a shaken baby syndrome prevention
3 3 program in the department of public health in new Code section
3 4 135.119.

3 5 Terms are defined in the bill, largely based on existing
3 6 Code definitions.

3 7 "Birth center" means the same as defined in Code section
3 8 135.131: a facility or institution, which is not an
3 9 ambulatory surgical center or a hospital or in a hospital, in
3 10 which births are planned to occur following a normal,
3 11 uncomplicated, low-risk pregnancy. "Birthing hospital" means
3 12 the same as defined in Code section 135.131: a licensed
3 13 private or public hospital that has a licensed obstetric unit
3 14 or is licensed to provide obstetric services. "Child care
3 15 provider" means the same as "child care facility", as defined
3 16 in Code section 237A.1: a licensed child care center,
3 17 preschool, or a registered child development home, that is
3 18 providing care to children who are newborn through age three.
3 19 "Family support program" means a program offering instruction
3 20 and support for families in which home visitation is the
3 21 primary service delivery mechanism.

3 22 "Parent" means the same as "parent", "guardian", or
3 23 "custodian", as defined in Code section 232.2, of a child who
3 24 is newborn through age three. Under Code section 232.2,
3 25 "custodian" means a stepparent or a relative within the fourth
3 26 degree of consanguinity to a child who has assumed
3 27 responsibility for that child, a person who has accepted a
3 28 release of custody, or a person appointed by a court or
3 29 juvenile court having jurisdiction over a child; "guardian"
3 30 means a person who is not the parent of a child, but who has
3 31 been appointed by a court or juvenile court having
3 32 jurisdiction over the child, to have a permanent
3 33 self-sustaining relationship with the child and to make
3 34 important decisions which have a permanent effect on the life
3 35 and development of that child and to promote the general
4 1 welfare of that child; and "parent" means a biological or
4 2 adoptive mother or father of a child but does not include a
4 3 mother or father whose parental rights have been terminated.

4 4 "Person responsible for the care of a child" means the same
4 5 as defined in Code section 232.68, except that it is limited
4 6 to persons caring for a child who is newborn through age
4 7 three. Under Code section 232.68, the term means a parent,
4 8 guardian, or foster parent; a relative or any other person
4 9 with whom the child resides and who assumes care or
4 10 supervision of the child, without reference to the length of
4 11 time or continuity of such residence; an employee or agent of
4 12 any public or private facility providing care for a child,
4 13 including an institution, hospital, health care facility,
4 14 group home, mental health center, residential treatment
4 15 center, shelter care facility, detention center, or child care
4 16 facility; and any person providing care for a child, but with
4 17 whom the child does not reside, without reference to the
4 18 duration of the care.

4 19 "Shaken baby syndrome" means the collection of signs and
4 20 symptoms resulting from the vigorous shaking of a child who is
4 21 age three or younger that may result in bleeding inside the
4 22 head and may result in any of a number of conditions listed in
4 23 the bill.

4 24 The department is required to establish a statewide shaken
4 25 baby syndrome prevention program directed to parents and
4 26 persons responsible for the care of a child, as these terms
4 27 are defined in the bill. The bill specifies various elements
4 28 to be included in a program plan to be developed by the
4 29 department.

4 30 The department is required to consult with various experts
4 31 in developing the program plan. The program plan is required

4 32 to incorporate a multiyear, collaborative approach and address
4 33 how to involve various programs, health services providers,
4 34 and agencies that work with the target population.
4 35 The program plan is also required to identify the
5 1 methodology for improving the tracking of shaken baby syndrome
5 2 incidents and evaluating program results and to describe how
5 3 program results will be reported.
5 4 The program plan may provide for implementation of the
5 5 program through a contract with a private agency or
5 6 organization experienced in furnishing the services set forth
5 7 in the program plan.
5 8 The department's implementation of the program plan is
5 9 limited to the extent of the amount appropriated or made
5 10 available for the program for a fiscal year.
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5 12 jp/nh/14