

Lisa Musielewicz

Legislative Service Commission

Am. S.B. 144

127th General Assembly (As Passed by the Senate)

Sens. Stivers, Goodman, D. Miller, Schuler, Gardner, Schuring, Padgett, Morano, Austria, Boccieri, Clancy, Faber, Fedor, Harris, Kearney, Mason, R. Miller, Mumper, Niehaus, Roberts, Sawyer, Schaffer, Spada, Wilson, Cafaro, Buehrer

BILL SUMMARY

- Establishes the Shaken Baby Syndrome Education Program in the Department of Health.
- Provides civil and criminal immunity for harm resulting from the dissemination of, or failure to disseminate, program materials to entities required to disseminate those materials.
- Requires the Department of Job and Family Services to record all reported cases of child abuse involving shaken baby syndrome and annually report to the Director of Health the number of such reported cases.

CONTENT AND OPERATION

Background--shaken baby syndrome

(R.C. 3701.63(A)(7))

Under existing law there is no definition for "shaken baby syndrome." The bill defines shaken baby syndrome as damage to the brain of an infant or young child, including, but not limited to, swelling that impedes the supply of oxygen to the brain or any degree of brain damage that results from the infant or young child having been forcefully shaken.

The Shaken Baby Syndrome Education Program

(R.C. 3701.63(B) and (C))

The bill requires the Director of Health to establish a Shaken Baby Syndrome Education Program by developing educational materials that present readily comprehendible information on shaken baby syndrome and to post these materials on the Department of Health web site within one year after the bill's effective date. These materials must be presented in a format that will not impose an administrative or financial burden on any of the entities or persons required to distribute the materials.

Work group

(R.C. 3701.63(D))

The bill requires the Director to convene a work group to advise the Director on the educational materials described above, comprised of at least one representative from each of the following groups:

- Child abuse prevention advocates;
- The staff of the "Help Me Grow" program:
- Experts in the field of infant care, particularly in the area of infant calming methods;
- Maternity unit directors;²
- Parenting skills educators;
- Child care facilities.³

³ The bill defines "child care facility" as a child day-care center, a type A family day-care home, or a certified type B family day-care home (R.C. 3701.63(A)(1) and (2)).



¹ The "Help Me Grow" program is established in R.C. 3701.61 for the purpose of encouraging early prenatal and well-baby care.

² The bill defines "maternity unit" as any unit or place in a hospital where women are regularly received and provided care during all or part of the maternity cycle, except that "maternity unit" does not include an emergency department or similar place dedicated to providing emergency health care (R.C. 3701.63(A)(5)).

The Director has discretion to add to the work group representatives of other professions whose members have practical experience regarding shaken baby syndrome and representatives of citizens' organizations whose members are knowledgeable about shaken baby syndrome.

Distribution of the educational materials

(R.C 3701.64)

The bill requires the educational materials developed by the Director of Health and the work group to be distributed to expectant and current parents.⁴ Child birth educators and the staff of pediatric physicians' offices and obstetricians' offices must distribute the materials to every expectant parent who uses their services. The hospital⁵ or freestanding birthing center⁶ where a child is born must distribute the educational materials to the child's parent before the child is discharged. The staff of the "Help Me Grow" program must distribute the materials to the child's parent during home-visiting services and each child care facility operating in this state must distribute the materials to each of its employees.

Each entity and person required to distribute the materials is immune from any civil or criminal liability for injury, death, or loss to any person or property resulting from the dissemination of, or failure to disseminate, the educational materials.

⁴ The bill defines "parent" as either parent, unless the parents are separated or divorced or their marriage has been dissolved or annulled, in which case "parent" means the parent who is the residential parent and legal custodian of the child, and also means a prospective adoptive parent with whom a child is placed (R.C. 3701.63(A)(6)).

⁵ "Hospital" is defined in the bill as a hospital classified pursuant to Department of Health rules as a general hospital or children's hospital (R.C. 3701.63(A)(4)).

⁶ The bill defines "freestanding birthing center" as any facility in which deliveries routinely occur, regardless of whether the facility is located on the campus of another health care facility, and which is not licensed as a level one, two, or three maternity unit or a limited maternity unit (R.C. 3701.63(A)(3) by reference to R.C. 3702.51).

Child abuse reports and the statewide automated child welfare information system

(R.C. 3701.63(B)(3))

The bill requires each employee of a public children services agency to make a notation on the statewide automated child welfare information system of each case of child abuse where there is an indication that the child may be a victim of shaken baby syndrome.

Beginning March 1, 2009, the Department of Job and Family Services must report to the Director of Health the number of reports involving a victim of shaken baby syndrome during the preceding calendar year. This report will continue annually thereafter, every March 1. (R.C. 5101.135.) The Director must evaluate these reports to assess the effectiveness of the Shaken Baby Syndrome Education Program.

HISTORY

ACTION	DATE
Introduced	04-17-07
Reported, S. Health, Human Services & Aging	05-22-07
Passed Senate (32-0)	05-30-07

S0144-PS-127.doc/ejs