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THE STATE OF NEW YORK
BILL TEXT
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2003 NY A.B. 9619

NEW YORK 227TH ANNUAL LEGISLATIVE SESSION

ASSEMBLY BILL 9619

STATE OF NEW YORK
9619
IN ASSEMBLY

FEBRUARY 3, 2004

INTRODUCED BY M. OF A. CAHILL, CYMBROWITZ, O'DONNELL, GRODENCHIK, DINA-POLI,
EDDINGTON--MULTI-SPONSORED BY--M. OF A. BENJAMIN, CLARK, GROMACK,
HEASTIE, LAFAYETTE, MCENENY, ORTIZ, ROBINSON, TOWNS--READ ONCE AND REFERRED
TO THE COMMITTEE ON HEALTH

BILL TRACKING REPORT: 2003 Bill Tracking NY A.B. 9619

2003 Bill Text NY A.B. 9619

VERSION: Introduced

VERSION-DATE: February 3, 2004

SYNOPSIS: AN ACT to amend the public health law, in relation to the prevention of **shaken baby** through education

NOTICE: [A> UPPERCASE TEXT WITHIN THESE SYMBOLS IS ADDED <A]

TEXT: THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Legislative findings. The legislature finds and declares the following:

Shaken baby is a medically serious and often fatal result of violently shaking newborns and children up to the age of three years old. Vigorous shaking of an infant or child can result in serious damage including, but not limited to, bleeding inside the head, causing irreversible brain damage, blindness, cerebral palsy, hearing loss, spinal cord injury, seizures, learning disabilities, and death. While doctors have long recognized that shaking an infant can cause serious injury, many adults remain unaware of how dangerous this practice can be.

Demonstration projects in New York state have shown that voluntary education programs have significantly reduced the number of infant injuries and deaths caused by **shaken baby** where such programs included first-hand information from parent victims of **shaken baby**, and provided alternative techniques to dealing

with the frustration and anger caused by crying infants and young children.

The costs of such prevention programs are minimal compared to the savings of private and state funds in the long-term healthcare needs of children with severe brain damage. Educating parents about **shaken baby** in order to prevent the effects of such a hazard is in the public interest.

Section 2. The public health law is amended by adding a new section 2500-h to read as follows:

[A> SECTION 2500-H. **SHAKEN BABY** PREVENTION PROGRAM. 1. THE COMMISSIONER SHALL ESTABLISH A STATEWIDE **SHAKEN BABY** PREVENTION PROGRAM TO EDUCATE PARENTS AND PRIMARY CAREGIVERS ABOUT THE DANGERS OF **SHAKEN BABY** AND TO PROVIDE ALTERNATIVE TECHNIQUES TO VENTING ANGER AND FRUSTRATION. THE PROGRAM SHALL ALLOW FOR VOLUNTARY PARTICIPATION AND USE MULTIMEDIA EDUCATIONAL VEHICLES, SUCH AS A VIDEO RECORDING, TO TARGET THE PARENTS AND PRIMARY CAREGIVERS OF BABIES FROM BIRTH THROUGH THREE YEARS OF AGE. PARENTS OF NEWBORNS MAY CHOOSE TO SIGN A PARTICIPATION FORM AND FILL OUT AN EVALUATION FORM TO RECORD THEIR PARTICIPATION IN THE PROGRAM AFTER VIEWING THE MULTIMEDIA EDUCATIONAL MATERIALS. THE COMMISSIONER, OR A DESIGNEE, SHALL DEVELOP ANY COMPANION WRITTEN MATERIALS, A PROGRAM PARTICIPATION FORM AND AN EVALUATION FORM. THE COMMISSIONER SHALL DESIGNATE AND ENTER INTO CONTRACTS WITH EXPERTS, HEALTHCARE PROVIDERS, AND OTHER STATE AGENCIES TO DESIGN AND IMPLEMENT SUCH PROGRAM IN ALL HOSPITALS, BIRTHING CENTERS AND CHILDCARE CENTERS. THE COMMISSIONER MAY REQUEST AND SHALL RECEIVE FROM ANY DEPARTMENT, DIVISION, BOARD, BUREAU, COMMISSION OR AGENCY OF THE STATE OR OF ANY POLITICAL SUBDIVISION THEREOF SUCH ASSISTANCE AND DATA AS NECESSARY TO FURTHER IMPLEMENT THIS PROGRAM. <A]

[A> 2. FOR PURPOSES OF THIS SECTION THE FOLLOWING TERMS SHALL HAVE THE FOLLOWING MEANINGS: <A]

[A> (A) "PARENT" MEANS BIOLOGICAL MOTHER AND FATHER, FOSTER-MOTHER AND FATHER, ADOPTIVE MOTHER AND FATHER, STEP-MOTHER AND STEP-FATHER. <A]

[A> (B) "PRIMARY CAREGIVERS" MEANS ANYONE WHO IS NOT A PARENT, BUT WHO PROVIDES TEMPORARY CARE TO AN INFANT OR CHILD, INCLUDING BUT NOT LIMITED TO, BABYSITTERS, CHILD CARE PROVIDERS, EXTENDED FAMILY MEMBERS, NANNIES AND CUSTODIANS. <A]

[A> (C) "**SHAKEN BABY**" MEANS THE VIGOROUS SHAKING OF AN INFANT OR A YOUNG CHILD THAT MAY RESULT IN BLEEDING INSIDE THE HEAD; AND 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. <A]

[A> 3. LOCAL HEALTH DEPARTMENTS SHALL ASSIST THE COMMISSIONER IN IMPLEMENTING AND ADMINISTERING THE **SHAKEN BABY** PREVENTION PROGRAM IN LOCAL HOSPITALS, BIRTHING CENTERS, AND CHILDCARE CENTERS. SPECIFIC DUTIES MAY INCLUDE, BUT ARE NOT LIMITED TO, DISTRIBUTING THE MULTIMEDIA PROGRAM MATERIALS, AND ASSISTING IN THE COLLECTION OF THE DATA ON PROGRAM PARTICIPATION AND THE PROGRAM EVALUATION FORMS FOR THE COMMISSIONER'S ANNUAL REPORT. <A]

[A> 4. (A) ALL HOSPITALS, MATERNAL AND PEDIATRIC HEALTH CARE PROVIDERS,

BIRTHING CENTERS, AND CHILD CARE PROVIDER SHALL ENCOURAGE PARENTS AND PRIMARY CAREGIVERS TO PARTICIPATE IN THE VOLUNTARY **SHAKEN BABY** PREVENTION PROGRAM BY: (I) INFORMING PARENTS OF ALL NEWBORN CHILDREN ABOUT THE PROGRAM; (II) MAKING AVAILABLE TO THE PARENT THE **SHAKEN BABY** AWARENESS AND PREVENTION MULTIMEDIA MATERIALS PROVIDED BY THE DEPARTMENT; (III) MAKING PROGRAM PARTICIPATION FORMS DEVELOPED BY THE DEPARTMENT AVAILABLE FOR SIGNING BY THE PARENTS AFTER VIEWING THE MULTIMEDIA MATERIALS; AND (IV) KEEPING ALL PROGRAM PARTICIPATION FORMS AND EVALUATION FORMS ON FILE. <A]

[A> (B) HOSPITALS AND BIRTHING CENTERS AND WHERE APPLICABLE, HEALTH CARE PROVIDERS AND CHILD CARE PROVIDERS, SHALL REPORT TO THE DEPARTMENT BY NO LATER THAN THE FIRST OF NOVEMBER OF EACH YEAR, THE TOTAL NUMBER OF BIRTHS THAT OCCURRED AT THE HOSPITAL OR BIRTHING CENTER THAT YEAR; THE TOTAL NUMBER OF VIEWINGS OF THE **SHAKEN BABY** MULTIMEDIA EDUCATIONAL MATERIALS; THE TOTAL NUMBER OF **SHAKEN BABY** PROGRAM PARTICIPATION FORMS SIGNED. ALL EVALUATION FORMS FILLED OUT DURING THE YEAR SHALL BE FORWARDED WITH SUCH DATA. <A]

[A> 5. THE DEPARTMENT SHALL MAKE AN ANNUAL REPORT TO THE LEGISLATURE OF ITS FINDINGS AND RECOMMENDATIONS CONCERNING THE EFFECTIVENESS, IMPACT AND BENEFITS DERIVED FROM THE **SHAKEN BABY** PREVENTION PROGRAM. SUCH REPORT SHALL BE DELIVERED ON OR BEFORE THE FIRST DAY OF FEBRUARY AND SHALL CONTAIN EVALUATIONS OF SUCH PROGRAM, AND ANY LEGISLATION DEEMED NECESSARY AND PROPER. <A]

Section 3. This act shall take effect on the one hundred twentieth day after it shall have become a law; provided, however, that effective immediately, the addition, amendment and/or repeal of any rule or regulation necessary for the implementation of this act on its effective date are authorized and directed to be made and completed on or before such effective date.

SPONSOR: Cahill

SUBJECT: CHILDREN (91%); CHILD CARE (90%); LEGISLATORS (90%); DISEASES & DISORDERS (90%); HEALTH CARE POLICY (78%); CEREBRAL PALSY (78%); US STATE GOVERNMENT (78%); FAMILY (78%); EDUCATION (77%); ADOPTION (73%); MATERNITY HOSPITALS (73%); HEALTH CARE INDUSTRY (72%); LEARNING DISABILITIES (72%); DISABLED PERSONS (72%); DEAFNESS (72%); LONG TERM HEALTH CARE (70%);

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