Senate Transportation Committee

Peter O'Neill 271-4151

SB 118-FN, requiring children under the age of 2 years to be restrained in a motor vehicle.

Hearing Date: January 24, 2023

 Time Opened:
 1:15 p.m.
 Time Closed:
 2:10 p.m.

Members of the Committee Present: Senators Ricciardi, Watters, Ward, Gendreau and Fenton

Members of the Committee Absent : Senator Watters

Bill Analysis: This bill requires children under the age of 2 years old to be restrained in a rear facing child restraint in a motor vehicle.

Sponsors:

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Sen. Fenton	Sen. Gannon	Sen. Prentiss
Sen. Watters	Sen. Gendreau	Rep. Telerski
Rep. Sykes	Rep. Crawford	Rep. J. MacDonald

Who supports the bill: Sen.Fenton, Sen. Gendreau, Sen. Prentiss, Sen. Watters, Dan Goodman; AAA, James Esdon; Dartmouth Health, Thomas Leach; Dartmouth Health, Courtney Tanner; Dartmouth Health, Nick Perencedich; NH Medical Society, Jackson Bouley; NH Auto Dealers, Paula Minnehan; NH Hospital Association, Michael Padmore; NH Medical Society, Abby Rogers; DHHS, Joseph Colella; Juvenile Products Manufacturers Association, Pamela DiNapoli; NH Nurses Association, David Henderson; National Safety Council of Northern New England Adam Rembisz, Neil Moore, Jessica Penn, Richard Goodwin, Michelle Sullivan, Sam Audette, Wendi Grant, Sara Boulanger, Jason Smedick, Tess Swift, Larissa Pyer, Katherine Lajoie, Kristen Gibson, Polly Campion, Ashley Tommila, Carol Townsend, Sandra Vilchock, Marsha Dow, Heidi Carlson, Cythina Rogers, Rebecka Hart, Carla Smith, Alison Zirpolo, Susan SMith, Deborah Leavitt, Janet Insolia, Phil Hatcher, Karel Crawford, Marcy Doyle, Korin White, Kristine Baber, Sue Centner, Cynthia Tuttle, Kristen Evans, Diana Schuman

Who opposes the bill: None

Who is neutral on the bill: Rep. Pat Abrami

Summary of Testimony Presented:

Senator Fenton, SD 10

• Sen. Fenton introduced and testified in support of SB 118.

- Rear facing car seats gives more time for children to develop correctly. Using the correct car seat can also reduce injuries and death.
- Rear facing car seats are not more expensive than front facing car seats.
- This bill would not overlap existing laws in New Hampshire and not a single group or individual contested the safety aspect of the bill.

Rep. Abrami

- Rep. Abrami discussed that SB 118 was similar to HB 251 in 2021.
- A joint committee was formed with Senate and House members in order to gather data.
- 53% of states do not have laws related to this, which includes Maine and Massachusetts. Different states have laws in place to protect one year or two year old kids based on their weight, height, or manufactures specifications of the car seats.
- The committee looked at the science of different research institutions. The Children's Hospital of Philadelphia, University of Virginia, and the University of Michigan. All three institutions had studied mechanical engineering and physics of the rear facing car seat. Studies showed that rear facing car seats are the best for children ages 0 to 2.
- Newborns heads are about 25% of body weight. Due to most accidents being forward collisions, it is important to protect the newborns head. The younger the child is, the less formed the muscles in their neck is.
- The joint committee reviewed data from the Department of Health and Humans Services. This included public health, admission, and hospital data.
- From 2001-2004, the average of children being admitted into the ER due to crashes was about 247.5 visits with children from ages 0 to 4. The bill is focused on children ages 0 to 2. By 2016-2019, those ER visits dropped to 126.25 visits.
- From 1995-1999, there was an average of 5.6 admissions of children ages 0 to 4 year. By 2015 to 2016, the statistics went down to 1.8 admissions based on the hospital data.
- The committee also reached out to the Department of Safety and the Department of Motor Vehicles to check on other data sets. There are two ways in which accident data is collected. It is through manual entry form and the Model Minimum Uniform Crash Criteria system or MMUCC for short.
- Police officers must make judgments on injuries, regardless of the two ways of collecting data. They categorize them as no apparent injury, possible injury, suspected minor injury, suspected serious injury, or unknown.

- From children ages 0-6, 93.5% of the children had no apparent injury in the reported accidents. 2.1% had possible injuries, 1.9% had a suspected minor injury, 0.15% had serious injuries, and 2.4% were categorized as unknown. By going backwards from ages 0 to 1, 80.8% had no injuries, 2.3% had possible injuries, 1.5% had suspected minor injuries, 0% had serious injuries, and 15.4% was categorized as unknown. These were for combined data sets in accidents of rear and forward-facing car seats.
- The MMUCC data sets from 2020-2021 showed only 37 children at the age range of 0 to 2 were involved in accidents with rear facing car seats. An average of 1.5 children were involved in accidents with forward facing car seats. Of the data set, 96.1% of children were in rear facing car seats and 3.9% of children were in forward-facing car seats.
- Rep. Abrami said it seemed as though parents put their kids in rear facing car seats already.
- The committee recommendations were for the state continuing efforts to have Police Departments adopt the MMUCCU systems. It costs money which is why they don't have them yet.
- The committee suggested that the appropriate police agencies and healthcare agencies may want to get together to see why the hospital data was higher than data the police had.
- Rep. Abrami said there seemed to be some incomplete reporting going on. Reinforcing the importance of this policy would help the reporting of this information.
- Rep. Abrami had concerns about the bill would be enforced. The bill would make sure manufacturer height and weight limits were applied. However, how would the police would know if a car seat was installed properly or not. The police would also have trouble in identifying how old a child is to determine which car seat they should be in.
- Data capture needs to be refined so the data is accurately reported.
- Rep. Abrami said he originally voted yes on the bill when it came up but he said he wasn't sure if he would do it again since the law seems unenforceable.
- Sen. Ward asked how much is one of the MUCC instruments.
 - Rep. Abrami said he did not know but that the New Hampshire State Police would know. However, it could be very expensive for smaller communities.
 - Sen. Ward said it seemed that rear seats are installed by professionals. If you can't afford a rear facing seat, there are agencies that could provide parents with one. She asked if that was true.

• Rep. Abrami agreed and said that was correct.

Dan Goodman, AAA

- Mr. Goodman said he supported the bill and submitted testimony already. However, he wanted to cover high level issues raised by Rep. Abrami.
- All children start in the rear facing car seat. This helps defray costs longer in keeping children in a rear facing seat.
- Changing the behavior around the rear facing car seats requires education, enforcement, and engineering. Currently, the enforcement is lacking. Making recommendation to parents isn't exactly enforcement.
- On most car seats, there are height and weight requirements printed on the sides of them.
- The consensus from medical communities say that rear facing car seats provide the best protection for kids. The science is clear on that conclusion.
- There is a lot of state data but the issue is across all states. One child injury is too many. If it is preventable, there should be an effort to try. The bill would help keep the most vulnerable passengers safer.
- The national data suggests that most parents don't put their children in car seats correctly. Anywhere from 52% to 81% of children nationwide are int eh wrong seat due to not being installed correctly, being the wrong weight, or the wrong height.
- This bill, if passed, could potentially save lives immediately.
- Senator Ricciardi asked about children being in the wrong car seats based on their weight and height nationally. She said she was unclear how a law would change that.
 - Mr. Goodman said that the number of injuries would go down and the percentage of misuse of car seats would go down as well.
 - Sen. Ricciardi said if most people are doing it and pediatricians are educating parents, if the bill passes, what is the plan to educate more people. What would be the follow up strategy for this bill.
 - Mr. Goodman said when a pediatrician makes a recommendation, parents don't have to follow it because there isn't a law behind it. Many parents still don't know this information.
 - Sen. Ricciardi said how will this information get out. What would change if the bill passes comparing to what is already accessible.
 - Mr. Goodman said partners like AAA, Office of Highway Safety, and Dartmouth-Hitchcock Hospital could work together to broaden the

education with PSAs and social media campaigns. It is very important to get the message out.

- Sen. Ward said isn't it true that you can't leave hospitals without having a rear facing car seat
 - Mr. Goodman said yes.
 - Sen. Ward said a lot of parents already have these rear facing car seats because they need them in order to leave the hospital.
 - Mr. Goodman said that was correct but the concern is that the legislation could close the loophole of changing children to a forward facing car seat too early.
 - Sen. Ward said the education piece would be important to not switch the children early due to the height and weight requirements.
 - Mr. Goodman said that was a good point. Educating parents to keep their children in a rear facing car seat for as long as possible is ideal.

Thomas Leach, Dartmouth Health, Child Passenger Safety Coordinator for NH

- Mr. Leach spoke in favor of the bill. He said he was a part of the process a few years ago and there was a lot of good information that came out of the first attempt at the bill.
- The medical field feels very strongly in favor for the bill.
- Problems with children can pop up much later in life than injuries of adults.
- Everyone who leaves the hospital needs to have a rear facing car seat. The key is to keep children in rear facing car seats until they reach the limits of that seat.
- There are a lot of labels on the car seat to inform you if the child is ready to switch or not. These are abridged instructions on what the weight and height requirements are, as well how to install it.
- Rear facing only seats are usually about \$75.
- In 2011, the academy of pediatrics encouraged the use of rear facing car seats until the child reaches the weight limit.
- Mr. Leach said there can't be enforcement without education. Officers need to have the guidance about what the violation of the law is.
- 250 certified technicians are ready to teach others to help inform people of these laws.
- There is a robust data collection operation that is sponsored by the New Hampshire Safety Council.
- Care givers need the little extra push but need some guidance. Mr. Leach said this law would help with it. The bare minimums will help to guide parents.

- The message is not getting out there without pediatricians. BCsmartnh.com is also a good website to help with the education of this.
- The bottom line is that this bill is to help promote highway safety. This will help close gap so we don't have a small number of kids that will have neck issues for the rest of their lives.

Abby Rogers, Legislative Liaison of the Division of Public Health Services

- The Department fully supports the bill.
- Data collection limited data. Serious injuries, specifically neck injuries, can go unnoticed and not reported. This leads to lifelong injuries of an infant. Trauma can be caused and could result in long term financial hardships.
- Between 2015 to 2020, approximately 626 New Hampshire children ages 0 to 4 were seen in emergency rooms after car crashes. The estimated claims cost were around \$700 to \$8,000. Seven children were seen in inpatient care which cost over a million dollars.
- The Department agrees with American Academy of Pediatrics to have parents using these car seats.
- The existing law, RSA 126: 107-a states all children under the age of 7 or bigger than 57 inches needs to be properly fastened in their car seat.
- The Department felt the proposed legislation would be beneficial.

Nick Perensedish

- Mr. Perensedish spoke in favor of the bill. He said he was an old trauma surgeon and worked in Concord for over 30 years. He has been active for the last few years as well.
- He said he was a representative on the Board of Medicine for 17 years and was also a member of the New Hampshire Medical Society. He spent time keeping track of what had happened with children who experienced trauma.
- The New Hampshire Medical Society could help AAA and pediatrics would help market this and get the word out.
- There are more cases of children in accidents than the state will detect. Patients will often come in later.
- Mr. Perensedish had told the committee a story of a 2-year-old involved in a car crash. The parents were in bad shape but baby was in terrible shape. There had been a perforation of the child's intestine and had never seen the injury in a child before. This operation became a case report soon afterwards. The report determined that if the child had been reversed, the injuries would have been

minimal and there would not have been trauma of the head, neck, abdomen, spleen, liver, and intestine. Worrying about spleen, liver, and intestine.

• The important part of the story is knowing that having children in rear facing car seats can help limit injuries and trauma.

Courtney Tanner, Director of Government Relations at Dartmouth Health

- Mrs. Tanner said she supported the bill.
- She said she was a big supporter of having a rear facing car seat and, as a mother, appreciated having guidance documents accessible to her.

PJO Date Hearing Report completed: January 25, 2023