

Stricken language would be deleted from and underlined language would be added to present law.
Act 1208 of the Regular Session

State of Arkansas *As Engrossed: H3/15/13 S4/1/13 S4/4/13 S4/5/13*

89th General Assembly

A Bill

Regular Session, 2013

HOUSE BILL 1492

By: Representative Hammer

By: Senator J. Woods

For An Act To Be Entitled

*AN ACT TO BE KNOWN AS CARTER'S LAW; TO CREATE A
COMPREHENSIVE PROGRAM OF EDUCATION REGARDING SHAKEN
BABY SYNDROME; AND FOR OTHER PURPOSES.*

Subtitle

*TO BE KNOWN AS CARTER'S LAW; AND TO
CREATE A COMPREHENSIVE PROGRAM OF
EDUCATION REGARDING SHAKEN BABY SYNDROME.*

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code § 20-9-102 is repealed.

~~20-9-102. Shaken baby syndrome educational materials.~~

~~(a) A hospital or a free-standing birthing clinic shall ensure that each woman who gives birth in a hospital or a free-standing birthing clinic receives educational materials before being discharged describing the nature of, the dangers of, and methods for the prevention of shaken baby syndrome.~~

~~(b) The Department of Health shall develop and disseminate the required materials under subsection (a) of this section to hospitals and free-standing birthing clinics in the state.~~

~~(c)(1) The department may adopt rules to implement this section.~~

~~(2) The rules adopted under subdivision (c)(1) of this section shall include without limitation rules establishing procedures for reporting compliance with this section.~~

SECTION 2. Arkansas Code Title 20, Chapter 9, is amended to add an



additional subchapter to read as follows:

Subchapter 13 – Carter’s Law: The Shaken Baby Syndrome Education Program

20-9-1301. Definitions.

As used in this subchapter:

(1) “Child care facility” means a facility licensed under the Child Care Facility Licensing Act, § 20-78-201 et seq.;

(2) “Free-standing birthing center” means a facility, institution, or place, which is not an ambulatory surgical center or a hospital or in a hospital, organized to provide family-centered maternity care for women and childbearing families in which births are planned to occur in a homelike atmosphere away from the mothers’ residences following a low-risk pregnancy;

(3) “Hospital” means an institution that has been licensed, certified, or approved by the Division of Health Facilities Services of the Department of Health as a hospital;

(4)(A) “Maternity unit” means a unit or place in a hospital in which women are regularly received and provided care during all or part of the maternity cycle.

(B) “Maternity unit” does not include an emergency department or similar place dedicated to providing emergency health care;

(5) “Parent” means:

(A) Either parent;

(B) If the parents are separated or divorced or their marriage has been dissolved or annulled, the parent who is the residential parent and legal custodian of the child; and

(C) A prospective adoptive parent with whom a child is placed; and

(6) “Shaken baby syndrome” means signs and symptoms resulting from the violent shaking or the shaking and impacting of the head of an infant or child, including without limitation:

(A) Retinal hemorrhage;

(B) Subdural hematoma; and

(C) Cerebral edema.

20-9-1302. Shaken baby syndrome education program established.

(a) The Director of the Department of Health shall establish the shaken baby syndrome education program by:

(1) Not later than one (1) year after the effective date of this subchapter, developing educational materials that present readily comprehensible information for new parents on shaken baby syndrome; and

(2) Making available on the Department of Health website in an easily accessible format the educational materials developed under subdivision (a)(1) of this section.

(b)(1) An individual or entity may create educational materials concerning shaken baby syndrome.

(2) An individual or entity that develops educational materials under subdivision (b)(1) of this section shall submit the materials for approval by the department before distributing the educational materials.

(3) If the department approves educational materials submitted under subdivision (b)(2) of this section, the individual or entity may distribute the educational materials at the individual's or entity's expense.

(c)(1) Annually beginning on or before January 1, 2014, the director shall assess the effectiveness of the shaken baby syndrome education program.

(2) The department shall submit a biennial report of the assessment under subdivision (b)(1) of this section to the Chair of the House Committee on Public Health, Welfare, and Labor and the Chair of the Senate Committee on Public Health, Welfare, and Labor.

20-9-1303. Distribution of shaken baby syndrome educational materials.

(a) A copy of the shaken baby syndrome educational materials developed under § 20-9-1302 or comparable material shall be distributed:

(1) By a child birth educator, a pediatric physician's office, or an obstetrician's office to an expectant parent who uses the services of the child birth educator or staff;

(2) By a hospital or freestanding birthing center in which a child is born to the child's parent who is present at the hospital or freestanding birthing center before the child is discharged from the facility;

(3) By a child care facility to the parent with whom the child resides; and

(4) By a child care facility to each employee of the child care

facility.

(b) An entity or a person required to distribute educational materials under subsection (a) of this section is not subject to civil or criminal liability for an injury, a death, or a loss to a person or property resulting from the dissemination of, or failure to disseminate, the educational materials.

20-9-1304. Data on shaken baby syndrome.

(a) At the conclusion of a child maltreatment investigation under the Child Maltreatment Act, § 12-18-101 et seq., if a child has been shaken, or has an abusive or nonaccidental head trauma, the investigative agency shall identify the type of physical abuse in the child welfare information system.

(b) The Department of Human Services shall include data on the number of children who suffer abusive head trauma, nonaccidental head trauma, and shaken baby syndrome in the annual Arkansas Child Welfare Report Card required under § 9-32-204.

20-9-1305. Rules.

The State Board of Health shall adopt rules to implement this subchapter.

/s/Hammer

APPROVED: 04/12/2013