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## FISCAL IMPACT REPORT

SPONSOR Padilla ORIGINAL DATE 1/22/16  
LAST UPDATED \_\_\_\_\_ HB \_\_\_\_\_

SHORT TITLE Shaken Baby Syndrome Educational Materials SB 149

ANALYST Chilton

### APPROPRIATION (dollars in thousands)

| Appropriation |      | Recurring<br>or Nonrecurring | Fund<br>Affected |
|---------------|------|------------------------------|------------------|
| FY16          | FY17 |                              |                  |
|               | None |                              |                  |

(Parenthesis ( ) Indicate Expenditure Decreases)

Relates to HB 11.

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Children Youth and Families Department (CYFD)

Department of Health (DOH), relative to related HB 11.

Human Services Department (HSD), relative to related HB 11.

Higher Education Department (HED), relative to related HB 11.

### SUMMARY

#### Synopsis of Bill

This legislation requires the Department of Health to develop educational methods for new parents informing them of the risks of shaking their baby, in order to prevent shaken baby syndrome (SBS), one of the most common causes of abusive head trauma (AHT). All birth hospitals and birthing centers would be required to adopt these educational programs and would be required to maintain records of compliance with this requirement.

### FISCAL IMPLICATIONS

No fiscal impact identified, although developing the education materials would take the time of volunteers of of agency personnel. Also, the cost of shaken baby syndrome demonstration dolls, currently \$879 each, would probably be borne by the birth hospitals.

## SIGNIFICANT ISSUES

According to the National Institute for Neurological Disorders and Stroke (NINDS), shaken baby syndrome (SBS) is “a type of inflicted traumatic brain injury that happens when a baby is violently shaken. A baby has weak neck muscles and a large, heavy head. Shaking makes the fragile brain bounce back and forth inside the skull and causes bruising, swelling, and bleeding, which can lead to permanent, severe brain damage or death. The characteristic injuries of shaken baby syndrome are subdural hemorrhages (bleeding in the brain), retinal hemorrhages (bleeding in the retina), damage to the spinal cord and neck, and fractures of the ribs and bones. These injuries may not be immediately noticeable. Symptoms of shaken baby syndrome include extreme irritability, lethargy, poor feeding, breathing problems, convulsions, vomiting, and pale or bluish skin. Shaken baby injuries usually occur in children younger than 2 years old, but may be seen in children up to the age of 5.” On many occasions, the parent or caretaker, not knowing how vulnerable the infant’s brain is, cause grievous injury when frustrated with a crying child. Once the injuries have occurred, however, there is little to remedy the problems caused, which may include blindness, severe developmental dehydration or even death.

From 2003 to 2007, an estimated 780 (0.76 per 100,000 person-years) US children under age 4 years died of AHT, and 1759 (8.6 per 100,000 population; this would translate to approximately five infants dying and 11 infants hospitalized each year in New Mexico) were hospitalized annually. An estimate done by the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention indicates medical costs of \$48,000 over the four years following injury of each child injured through shaken baby syndrome (also called abusive head trauma). Costs for special education, ongoing medical services and therapies, and loss of future earnings are incalculable, but are likely to be very high for each injured child.

In a pilot program developed by UNM researcher Kathy Lopez Bushnell, RNC, EdD, MPH, MSN, pediatric resident Christopher Torrez, MD, and Desiree Torrez, BS, new parents delivering infants at UNM Hospital were trained by nursing staff to see the effects of shaking a newborn’s head, graphically illustrated by a special doll which lights up in areas damaged when the doll’s head is shaken. They also use printed material, and a video entitled “When Babies Cry.”

The results of their work to this point, as reported by Dr. Torrez, suggest that the intervention has been effective. From January 2012 to September 2014 there were 39 cases of diagnosed SBS in infants who were discharged from UNM Hospital units other than those at UNM Hospital where the intervention was carried out. During the same time period there were zero infants discharged from UNM nurseries that were subsequently diagnosed with SBS. This difference is statistically significant.

If this intervention is as successful in New Mexico’s approximately 30 birth hospitals as it appears to have been at UNM Hospital, approximately 15 cases of shaken baby syndrome would be prevented per year. At an average four-year cost of approximately \$48,000 per injured baby, the annual saving would be \$640,000, which does not include the eventual savings in special education and lost adult productivity that would be predicted.

In addition, CYFD notes that it wishes to collaborate with UNM on this project. It cites its PullTogether Initiative, a large effort at prevention of child abuse. CYFD would hope to take this educational message to a broader audience, and avoid any duplication of effort. PullTogether

invites community leaders across the state to join CYFD in a community engagement initiative to work jointly to improve the quality of life for the state's children. CYFD states

Shaken baby syndrome is not limited to just the interaction of children and parents. By taking the educational materials provided by the Health Sciences Center to the larger community that is being drawn together by CYFD's PullTogether initiative, we have the opportunity engage everyone else involved in that child's life: friends, relatives, caregivers. By providing our citizens with the tools to identify, respond to, and prevent shaken baby syndrome, we decrease the risk of child maltreatment, and by extension decrease the risk of preventable fatalities within the state. More, by making those materials available via the PullTogether.org website, we focus efforts in a more comprehensive, less fragmented way.

### **ADMINISTRATIVE IMPLICATIONS**

Each birth hospital and birthing center would have to designate and train personnel to show the video, hand out the printed material, demonstrate the effects of shaking using the doll, and answer parents' questions.

### **ALTERNATIVES**

- Asking birth hospitals and birthing centers to voluntarily train parents in the effects of shaking babies.
- Appropriating funds (as in HB 11) to purchase supplies for use by birth hospitals and birthing centers for their educational efforts.

**RELATES to:** HB 11, which discusses prevention of Shaken Baby Syndrome and appropriates \$50 thousand for materials used by birth hospitals to provide the preventive education to new parents.

### **WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL**

Birth hospitals and birthing centers would not be required to educate parents of the risks of shaken baby syndrome.

LAC/jle/al