

**2013 HOUSE TRANSPORTATION**

**HB 1329**

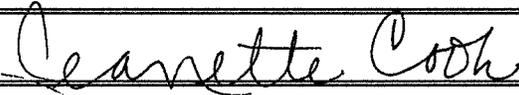
# 2013 HOUSE STANDING COMMITTEE MINUTES

## House Transportation Committee Fort Totten Room, State Capitol

HB 1329  
02-01-13  
Job # 18185

Conference Committee

Committee Clerk Signature



### Explanation or reason for introduction of bill/resolution:

A bill relating to child restraint devices.

### Minutes:

Attachment 1-19

**Chairman Ruby** opened the hearing on HB 1329.

**Representative Mark Sanford, District 17**, introduced HB 1329, provided written testimony, and urged the committee's support for HB 1329. (4:05) See attachment #1.

**Representative Mark Sanford:** Working with these practioners has given me the opportunity to see what parents really want. They are really searching for what is the best way to protect their children. The issue now is that we have two messages: one from state law and one from best practice, each saying different things. This is about getting a consistent message to our families who really want to be involved with the best practices possible.

**Representative Delmore:** Is there also an educational component to this bill so that parents will become aware, because it is a significant change?

**Representative Mark Sanford:** I believe that we have in place the network that can handle and support this very well.

**Chairman Ruby:** Can you tell me why this law should change?

**Representative Mark Sanford:** Previously the research that has been available has primarily focused on very young children. The recent research has focused more on children as they progress in age and size. So, the bill that we have now really addresses the next level of research that expands the body of knowledge for children of an older age.

**Chairman Ruby:** Why has the weight requirement been removed?

**Representative Mark Sanford:** The key factor in the fitting of the seat is height.

**Representative Drovdal:** Will the training be available across North Dakota in the smaller communities and rural areas to learn the proper way to fit these devices?

**Representative Mark Sanford:** Yes, there is a network of professionals that will provide the education needed.

**Carol Meidinger, Certified Child Passenger Safety Technician and Instructor,** testified on her own behalf to support HB 1329 and provided written testimony. See attachment #2. She stated that if the committee wanted to retain the words "contributory negligence" in the bill it would not matter. Some states have taken it out and others left it in. (15:12)

**Representative Vigesaa:** Are all the booster seats the same heights from the seat up to where the child sits? If the seats vary, someone out of these limitations could fit if the booster seat was higher or lower.

**Carol Meidinger:** They do vary in height.

**Representative Vigesaa:** So, someone who is less than the required height could comply because of the size of the car seat?

**Carol Meidinger:** Each one is individual, so that could potentially happen, but we would have shorter booster seats for them. A lot of times it is the depth of the vehicle seat that is the issue and the position of the shoulder belt. We have what we call a five step test to determine if a child can go into a shoulder belt safely. The knees should bend at the edge of the seat; that is the critical component. If a child's knees don't bend at the edge of the seat, the child won't be comfortable. Then the child will slouch to get comfortable, which will bring the lap belt across the soft tissues. If the shoulder belt fits the child, but the knees don't bend, we would recommend the booster seat.

**Chairman Ruby:** That seems to justify the height requirement, but why is the weight being removed?

**Carol Meidinger:** Height is really the best indicator if a car seat fits a child. Weight was put in last time because some booster seats only went up to 80 pounds. Now they go to 100 or more. Technology has changed.

**Chairman Ruby:** If there happened to be a seven year old that was 4 foot 9 inches, would they still not be able to be in a seatbelt?

**Carol Meidinger:** The way the law reads, if they are under 9 years of age, they would be required to ride in a booster seat UNLESS they are 4' 9" tall. So, they could use the seatbelt.

**Representative Becker:** We are concerned about the safety of the children, and the danger has everything to do with their size not their age. Correct? So, at age nine a child is 4' 9" you would have to be at the 96<sup>th</sup> percentile, which means that age nine the vast majority of children are still not at a safe height. So, to get at least half of the kids at an

appropriate height this requirement would have to be until age 11 years and 1 month. So, why not have that in there?

**Carol Meidinger:** You are correct that the 50<sup>th</sup> percentile is closer to 11 years, but we do need to be realistic too. We feel that we are hitting the majority of the children through age eight. We'd be looking at some older kids that may have higher weight and there may not be a product available for those children.

**Representative Delmore:** Have you asked the children about this? How do eight and nine year olds feel about riding in that seat?

**Carol Meidinger:** We work with them individually. We push the issue that they can see out of the car better. It is up to the driver to enforce this.

**Doctor Todd Twogood MD, FAAP, The North Dakota American Academy of Pediatrics,** spoke in support of HB 1329. He provided written testimony. (See attachment #3.

**Carma Hanson, Registered Nurse, Intensive Care Nursery at Altru Health Systems, a car seat technician, and Coordinator of Safe Kids Grand Forks,** spoke to support HB 1329. She provided written testimony. See attachments 4 and 4A. (34:22)

**Kara Johnson, Attorney at Zuger Kirmis & Smith in Bismarck and works with Pat Ward,** provided written testimony in support of HB 1329. See attachment #5.

**Representative Kreun:** You work for the insurance industry. Are you independent from the statistics that you handed out, or are they taken from your industry?

**Kara Johnson:** State Farm did a study with the Children's Hospital of Philadelphia for a group called Partners for Child Passenger Safety.

**Chairman Ruby:** Are there insurance credits for parents that follow this regulation?

**Kara Johnson:** I'm not sure.

Additional supportive testimony was handed out to committee members. See attachment # 7-19.

There was not further support for HB 1329.  
There was no opposition to HB 1329.

**Terry Dwelle, State Health Officer for the North Dakota Department of Health,** spoke in a neutral capacity on HB 1329. He provided written testimony. See attachment # 6. (40:00)

**Representative Delmore:** Are there any penalties associated with parents not following this? Can you explain why we might want to take out part two in the back of this bill?

**Terry Dwelle:** There are no penalties that I am aware of at this point. As far as the removal of the last part of the bill, I would not be the best person to answer that.

**Carol Meidinger:** There is a \$25.00 penalty and one point against the license of the driver. That has not changed. It is the same as it was before. It is covered under The Child Restraint Law.

**Representative Vigesaa:** Why does the bill say "most" instead of "all" children?

**Carol Meidinger:** The reason for that is again the types of products that are available. It recognizes that some children may reach 40 pounds before they are two years of age. Most car seat products that can be faced to the rear only go up to 40 pounds. So, they tend to use most instead of all for that reason.

**Chairman Ruby:** Are car manufacturers starting to put little pull down booster seats in vehicles, and do they comply with the law?

**Carol Meidinger:** They did for a while, and now I am starting to see it again. They do comply with the law.

**Representative Delmore:** How often are people cited for improper use of car seats?

**Carol Meidinger:** I can't speak to the enforcement part of this.

There was no further testimony on HB 1329.  
The hearing was closed on HB 1329.

# 2013 HOUSE STANDING COMMITTEE MINUTES

House Transportation Committee  
Fort Totten Room, State Capitol

HB1329  
02-01-13  
Job #18188

Conference Committee

Committee Clerk Signature

*Jeanette Cook*

**Minutes:**

**Chairman Ruby** brought HB 1329 back before the committee.

**Representative Becker** moved the amendment. (remove the overstrike on lines 1,2,and 3 of page 2)

**Vice Chairman Owens** seconded the motion.

**A voice vote was taken. All aye. The motion carried.**

**Representative Drovdal** moved **DO PASS AS AMENDED** on HB 1329.

**Representative Kreun** seconded the motion.

**Chairman Ruby** reviewed the bill and the amendment.

There was discussion over the reason for the bill. Do we need to tell people what to do to make themselves and their children safe?

**Representative Kreun** believes that over the years the rules have been inconsistent. Simplifying this, to make it less confusing as a law, would be a good idea. It has been very confusing.

**A roll call vote was taken. Aye 9 Nay 4 Absent 1**

**The motion carried.**

**Representative Fransvog** will carry HB 1329.

13.0654.02001  
Title.03000

Adopted by the Transportation Committee

February 1, 2013

2/1/13  
TD

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1329

Page 1, line 7, remove the overstrike over "4."

Page 2, remove the overstrike over lines 1 through 3

Renumber accordingly

Date: 2-1-13  
Roll Call Vote #: 1

2013 HOUSE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. 1329

House Transportation Committee

Check here for Conference Committee

Legislative Council Amendment Number # 13,0654.02001

Action Taken:  Do Pass  Do Not Pass  Amended  Adopt  
Amendment

Rerefer to Appropriations  Reconsider

Motion Made By Becker Seconded By Owens  
Amendment

Representatives	Yes	No	Representatives	Yes	No
Chairman Dan Ruby			Rep. Lois Delmore		
Vice Chairman Mark Owens			Rep. Edmund Gruchalla		
Rep. Rick Becker			Rep. Kylie Oversen		
Rep. David Drovdal					
Rep. Robert Frantsvog					
Rep. Brenda Heller					
Rep. Curtiss Kreun					
Rep. Mike Schatz					
Rep. Gary Sukut					
Rep. Don Vigesaa					
Rep. Robin Weisz					

Total (Yes) \_\_\_\_\_ No \_\_\_\_\_

Absent \_\_\_\_\_

Floor Assignment \_\_\_\_\_

If the vote is on an amendment, briefly indicate intent:

Date: 2-1-13  
 Roll Call Vote #: 2

**2013 HOUSE STANDING COMMITTEE  
 ROLL CALL VOTES  
 BILL/RESOLUTION NO. 1329**

House Transportation Committee

Check here for Conference Committee

Legislative Council Amendment Number 13.0654.02001

Action Taken:  Do Pass  Do Not Pass  Amended  Adopt  
 Amendment

Rerefer to Appropriations  Reconsider

Motion Made By Drovdal Seconded By Kreun

Representatives	Yes	No	Representatives	Yes	No
Chairman Dan Ruby		✓	Rep. Lois Delmore	✓	
Vice Chairman Mark Owens	✓		Rep. Edmund Gruchalla	A	
Rep. Rick Becker		✓	Rep. Kylie Oversen	✓	
Rep. David Drovdal	✓				
Rep. Robert Frantsvog	✓				
Rep. Brenda Heller	✓				
Rep. Curtiss Kreun	✓				
Rep. Mike Schatz		✓			
Rep. Gary Sukut	✓				
Rep. Don Vigesaa	✓				
Rep. Robin Weisz		✓			

Total (Yes) 9 No 4

Absent 1

Floor Assignment Frantsvog

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE**

**HB 1329:** Transportation Committee (Rep. Ruby, Chairman) recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (9 YEAS, 4 NAYS, 1 ABSENT AND NOT VOTING). HB 1329 was placed on the Sixth order on the calendar.

Page 1, line 7, remove the overstrike over "+."

Page 2, remove the overstrike over lines 1 through 3

Renumber accordingly

**2013 TESTIMONY**

**HB 1329**

#1

Chairman Ruby and Members of the Committee--

My name is Mark Sanford and I represent District 17 in the House. I am here to urge your support of HB1329.

The purpose of this bill is update our current law so it is consistent with practices recommended by the American Academy of Pediatrics as well as child safety practitioners from across our state and nation. It is confusing to most people when the state law differs from what they are told by safety practioners and their child's doctor as well as what they read or hear in journals and other forms of media.

The practices we are talking about deal with the use of child restraint systems in motor vehicles. The research is clear that proper use of appropriate child restraint systems saves lives at a significant rate and lessens the degree of child injury experienced in vehicle accidents. As a result the American Academy of Pediatrics and its' membership have developed several evidence based recommendations for best practices in the choice of a child restraint system. These recommendations include the following:

- 1)rear facing car safety seats for most infants up to two yrs. of age
- 2)forward facing car safety seats for most children through four years of age
- 3)belt positioning booster seats for most children through eight years of age
- 4)lap-and-shoulder seat belts for all who outgrow booster seats

Over the past few years I have enjoyed the opportunity to work alongside several Grand Forks car seat technicians and safety experts at car seat check-up events held in partnership with my local church. I have seen first hand how children benefit from their expertise. I have learned much about the benefits that a properly fitting car or booster seat can provide for children in a crash. The expertise and resources are in place in our state to implement this change and better

protect the children of North Dakota. The proposed changes to the law would make a model reference point for parents and care givers to refer to when making decisions about safely transporting their children.

With us this morning are representatives of the practitioners from around the state who focus on child safety issues. I will defer to them to share their thoughts and experiences on this bill since they can provide insights from the field as well as knowledge from the research.

Mr. Chairman and committee members, we request your support for this effort to update the current law regarding child restraint systems. Thank you for your time and attention.

Testimony in Support of HB 1329

Carol Meidinger  
Child Passenger Safety Instructor

Mr. Chairman, Representatives, my name is Carol Meidinger. I am a certified child passenger safety technician and instructor and I am testifying on my own behalf. As technicians, we are trained using a curriculum established by the National Highway Traffic Safety Administration which uses evidence-based research to determine best practices for buckling up children. One of these best practices is the use of boosters for children until the seat belt fits correctly – usually 4'9" tall or when children are between 8 and 12 years of age.

HB 1329 will do the following:

1. Increase the age of children required to ride in a child restraint (booster seat) to include 7 and 8 year olds. However, if they are at least 4'9" tall, they may use a seat belt instead.

My experience as a technician has shown that most 7 and 8 year old children who assist are simply not tall enough to properly use a seat belt. These children often place the shoulder belt behind their back or under their arm. The lap belt rides high on the tummy instead of low on the hip bones. This can cause injury to a child in a crash. The booster seat simply raises them up and helps position the seat belt correctly.

An October 2011 report from the Insurance Institute for Highway Safety concluded "that booster seat laws are effective in increasing the use of child safety seats..., and reducing injuries, especially severe injuries, among children covered by the laws."

2. Remove the provision that allows use of a lap belt for children over 40 pounds if lap and shoulder belts are not available.

Essentially, this provision is no longer needed. It was put in the law in 2005 because booster seats require the use of a lap and shoulder belt. Most vehicles now have lap and shoulder belts in all three seating positions in the rear. For those vehicles that still have only lap belts, there are now many child restraints that can be used with just a lap belt.

3. Remove "contributory negligence" section of the law.

This section was put into the law when it was passed in 1983. Some states have removed it; others still have it.

Thank you and I would be happy to try to answer any questions you may have.

## Testimony HB 1329

From: Todd Twogood MD, FAAP

Representing: The North Dakota American Academy of Pediatrics (NDAAP)

My name is Dr. Todd Twogood and I am a Pediatrician at Sanford in Bismarck. I have been practicing here for 16 years. I am the past president and current legislative chairman of the NDAAP. I am speaking on behalf of all the Pediatricians in the state, and our purpose is to be the voice of the children and an advocate for their safety. Today we are challenged with many obstacles to keep up with the growing population of children in our state. The number one killer of children overall is accidents, and car accidents ranks highest among all. Providing laws that ensure our children's safety is the responsible thing to do. Without laws to guide parents, they are many times left confused on how to best provide the safest environment for their kids. We can change that through passing this legislation and bringing forth a better awareness and guidance.

Almost every day, in my Pediatric practice I discuss with parents car seat and booster seat safety. I am surprised at how little some parents know about how to keep their children properly restrained in order to give them the best chance to avoid serious injury or death that may occur with a severe car accident. Some parents seek advice from us, their healthcare professional, and some look toward what is the law (feeling that it truly must reflect "Best Practice"). However there is a true disconnect between what we tell them and what is the current law. It is my plea to you to provide consistency and really give them what is considered the best way to reassure their children's safety if a car accident occurs.

I will leave you with a personal experience I have had as a dad and a Pediatrician. When my daughter was in the second grade, the teachers of her school asked for parent volunteers to transport the kids on a field trip to the Heritage Center. I gladly offered to drive four kids in my Chevy Tahoe. As they piled into the vehicle, I was shocked to see that none of the other parents had provided booster seats for their kids, and when I asked the kids if they had one, my daughter was the only one. I got out of the SUV, went to some other parent's cars and vans and, sure enough, the vast majority of kids were not in a booster seat. The parents and the teacher felt it was OK because "They don't need them anymore". Well they did need them, and we need you now to consider this bill and keep the children of this great state safe.

#4

House Transportation Committee Hearing

House Bill 1329

February 1, 2013

My name is Carma Hanson and I have been a registered nurse in the Intensive Care Nursery of Altru Health System for 25 years, I am a certified child passenger safety technician and I serve as the Coordinator of Safe Kids Grand Forks. Safe Kids Grand Forks is an injury prevention coalition made up of over 140 businesses, individuals and agencies from north east North Dakota. Our mission is to prevent unintentional injury and death to children. I am here today to speak in support of HB 1329 and to lend my expertise to the testimony, in hopes that you will better understand why passing this law will be beneficial to the children AND parents of this state.

Currently, we have a law that says children need to be in a car or booster seat until they are 7 years of age. In 2005 when Senator Espgaard and I worked on this legislation, there were changes going on in the car seat industry and research fields that were beginning to indicate kids should be in a car or booster seat to age 8 or 9. We chose to pick age 7 at that time for various reasons but it is clearly time to update our law to reflect the research that says children to a certain age/height are better protected in booster seats than a seat belt alone and to keep up with the standards being promoted in the injury prevention field.

Let me explain. On average, I take phone calls or e-mails from parents about 3-5 times per week asking the question, "When can my child come out of their booster seat?". My answer is ALWAYS the same. "I am going to give you two answers, the LEGAL answer and the SAFE answer. The legal answer is that in North Dakota, your child can use an adult seat belt at age 7. However, kids are clearly not safe to be in that type of restraint system until much later. The SAFE answer, and the one I hope you follow, is that children need to be in a car or booster seat until the seat belt fits them the way it is intended to fit an adult." When I get this question and answer it, I usually hear next, "Why doesn't our law reflect that then?" You see, many parents refer to the law for guidance on what is safe for their children. The law currently does not promote the BEST practice and the guidelines promoted by the American Academy of Pediatrics, NHTSA, Safe Kids and many other injury prevention experts. When there is a disconnect between the law and the best practice, it causes confusion for parents and makes our educational campaigns difficult to carry out. It is hard to say, "The law says THIS, but you REALLY should do THIS if you want your child to be safest."

Seat belts in vehicles were clearly designed and made to fit adult bodies, not the small stature of young children. If the seat belt does not fit correctly, the child can suffer injuries or even be thrown from the vehicle in a crash, most often resulting in death. Seat belt syndrome is a common injury seen in crashes involving children where the seat belt does not fit correctly. As a former manager for our NICU and Pediatric Unit at Altru Health System, I have seen this injury type numerous times. Most often, it is on

young children who should have been in a booster seat but, who were prematurely moved to the adult seat belt.

A booster seat is designed to do three things that make the adult seat belt fit a child's body.

- Helps to position the seat belt across the hip and pelvic bone, not on the abdomen
- Helps to keep the shoulder strap positioned correctly so it is on the center of the chest and collar bone, not on the neck. If here, it will most likely be placed under the armpit or behind the back of the child, thus not providing the protection that is needed.
- Helps to make the bottom wider, taking up the side-to-side wiggle room that can cause a small child to be thrown from the seat belt, particularly in a roll-over type crash.

To determine when a child is ready to come out of a booster seat, there is a simple 5 step test. The child should:

- Sit with their back against the seat back.
- Have their knees bent at the edge of the seat
- Have their feet flat on the floor
- Have the shoulder belt across the center of their collar bone and chest and NOT on their neck
- Have the lap belt down low across their hip bones and NOT across the soft tissue of their abdomen.

The American Academy of Pediatrics has issued a policy statement on child restraint use. It states that:

**“All children whose weight or height is above the forward-facing limit for their Child Safety Seat should use a belt-positioning booster seat until the vehicle lap-and-shoulder seat belt fits properly, typically when they have reached 4 feet 9 inches in height and are between 8 and 12 years of age.”**

I would like to further examine the 4'9", (or 57") that is stated in this requirement as again, this will be the height at which the 5 step test criteria are met.

If you look at the graph that I have provided, you will see a copy of the Center for Disease Control's Growth Chart for girls (pink) and boys (blue). You will also notice that a line has been drawn at 57" or the height noted above. Now, following that line with the one that intersects with it, you will notice that around 9 years of age, boys BEGIN to reach the 57" and girls are slightly after that at 9 ¼ years of age. This intersecting line has been drawn at the 97% or where the LARGEST kids would meet these criteria. You will notice that it is many more years before the smallest of our children are ready to be taken out of a booster seat based on having the recommended height for a safe ride. That being said, advancing the law to age 9 will simply start to get some kids into the safe realm of seat belt use. This would clearly be more in line with the recommendations that are being taught in the physician offices, at our car seat check-up events, at public health locations, on web sites and at other venues in our state and nation.

Safe Kids will continue the work that we do of educating parents and caregivers and in hosting car seat check-up events to assure that parents get the hands on assistance that they need. We will also continue to help parents that financially need assistance with car seats. I would note that this bill will not create an additional need for seats as children of age 5 and 6 would already be using them; it would simply extend the number of years that they need a seat of this type. I am asking for your help in creating a law that better promotes the BEST practice for kids and avoids confusion for parents and caregivers. Help us in our messaging and promotion of motor vehicle safety standards so as to keep kids safe from their number one killer, motor vehicle crashes.

I thank you for your time today and would take any questions that you may have.

Carma Hanson, MS, RN

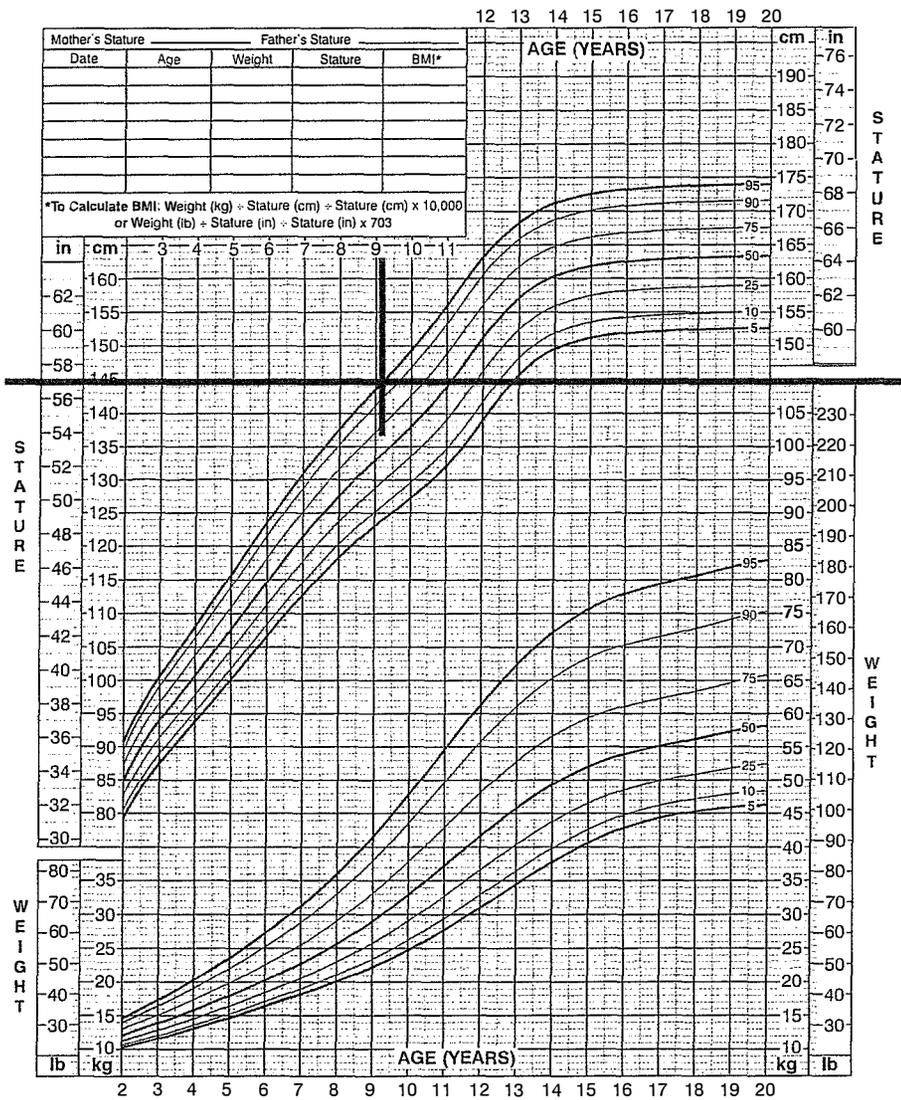
Coordinator – Safe Kids Grand Forks

Altru Health System

#4A

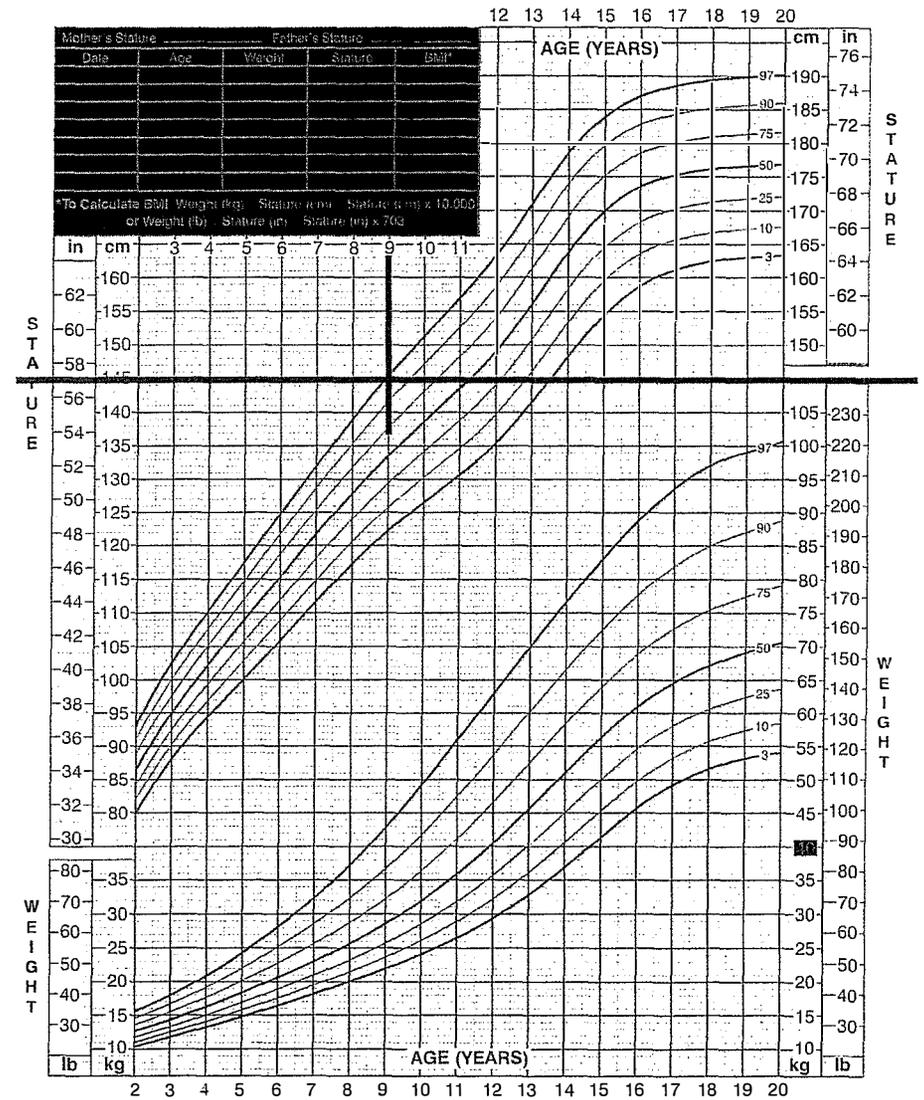
2 to 20 years: Girls  
Stature-for-age and Weight-for-age percentiles

NAME \_\_\_\_\_  
RECORD # \_\_\_\_\_



2 to 20 years: Boys  
Stature-for-age and Weight-for-age percentiles

NAME \_\_\_\_\_  
RECORD # \_\_\_\_\_



Published May 30, 2000 (modified 11/21/00).  
SOURCE: Developed by the National Center for Health Statistics in collaboration with  
the National Center for Chronic Disease Prevention and Health Promotion (2000).  
<http://www.cdc.gov/growthcharts>



SAFER • HEALTHIER • PEOPLE

Published May 30, 2000 (modified 11/21/00).  
SOURCE: Developed by the National Center for Health Statistics in collaboration with  
the National Center for Chronic Disease Prevention and Health Promotion (2000).  
<http://www.cdc.gov/growthcharts>



SAFER • HEALTHIER • PEOPLE

**Testimony in Support of House Bill 1329  
House Transportation Committee  
February 1, 2013**

Good morning Chairman Ruby and Committee Members. My name is Kara Johnson. I am an attorney at Zuger Kirmis & Smith here in Bismarck where I work with Pat Ward. I am here today on behalf of State Farm Insurance Companies in support of House Bill 1329, relating to child restraint devices.

The leading cause of unintentional death for children occurs is motor vehicle accidents. Approximately, one-half of the children killed in car accidents between the ages of 4 and 7 are not properly restrained.

Children between the ages of 4 and 8 years old are often too small for the safety belts in vehicles that are designed for adults. As a result, children may be injured because they are not properly restrained by the safety belt, or because the safety belt itself causes injuries to the child due to the improper fit.

According to Partners for Child Passenger Safety, a project of the Children's Hospital of Philadelphia and State Farm Insurance, booster seats reduce the risk of injury by 59% in children ages 4 through 7, as compared to using safety belts alone. Children saw the most benefit from booster seats in side-impact crashes. In near-side crashes, children showed a 68% reduction in injuries. In far-side crashes, injuries were reduced by 82%.

Booster seats lift a child to a level that allows the adult safety belt to fit a child correctly. With the proper use of belt-positioning booster seats, there have been no reported injuries from safety belts to children's abdomens, necks, spines, backs or lower extremities; however, there have been reports of injuries to every area of the body on children who were using safety belts alone.

While some opponents to this bill may cite the cost of the booster seats as a reason for opposition, there is a federal incentive program to provide funds to states to provide booster seats to low-income families. Given the benefits of the use of the booster seats, cost should not be a deterrent to passing this bill.

Studies reveal that adults who did not utilize belt repositioning booster seats did not understand their purpose and simply relied on state law to guide their safety behaviors. State Farm fully supports increasing the age for using a booster seat from age seven to age nine.

I encourage you to place a “do pass” on House Bill 1329.

#6

**Testimony  
House Bill 1329  
House Transportation Committee  
Friday, February 1, 2013  
North Dakota Department of Health**

Good morning, Chairman Ruby and members of the House Transportation Committee. My name is Terry Dwelle. I am the State Health Officer for the North Dakota Department of Health. I am here to testify on House Bill 1329.

House Bill 1329 will update the North Dakota child passenger safety law to better reflect what the American Academy of Pediatrics and the National Highway Traffic Safety Administration recommends.

Our department receives many calls each week from the public. Parents are often confused about the difference between what is the safest practice for their children versus what is legal. Current law states that seat belts can be used by children 7 years of age or older. To be safe, a child needs to be 4 foot 9 inches tall to use a lap-shoulder seat belt. If they are less than that height, the shoulder strap often crosses the neck versus the chest and the lap portion commonly covers the abdomen versus the pelvis. In a crash, these situations can result in spinal cord or other organ injuries and can result in severe complications and death. Children ages 4-8 in booster seats are 45 percent less likely to sustain injuries in crashes than kids restrained by seat belts alone.

As per growth chart information from the Centers for Disease Control and Prevention, an average American child measures 4 foot 9 inches tall between 10-11 years of age. There is quite a bit of variation based on location, genetics and even gender; therefore, the American Academy of Pediatrics feels that a good general recommendation on the transition from booster seats to lap-shoulder seat belts would be somewhere between 8 and 12 years of age. A study conducted years ago from the National Center for Health Statistics demonstrated that children in the Midwest may be up to an inch taller than the national average. A transition at 9 years of age from booster to regular lap-shoulder seat belts may be reasonable.

This completes my testimony. I would be happy to answer any question you may have.



#7

---

4950 13<sup>th</sup> Ave. S., Ste. 15  
Fargo, ND 58103-7268

(701) 282-6222 x 274  
Fax (701) 282-8952  
[eladoucer@aaand.com](mailto:eladoucer@aaand.com)

January 29, 2013

Representative Dan Ruby  
Chairman, House Transportation Committee  
4620 46<sup>th</sup> Ave NW  
Minot, ND 58703

Dear Mr. Chairman,

On behalf of The Auto Club Group and AAA North Dakota, I would like to express our support for House Bill 1329, which would upgrade the state's child passenger safety law to align with the guidelines established by the American Academy of Pediatrics.

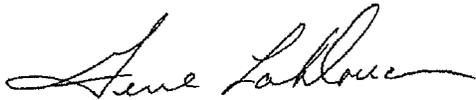
As you're aware, motor vehicle crashes are the leading cause of death and injury among children ages 14 and under. Through education, enforcement and legislation, we can make the children of our state safer while riding in cars. House Bill 1329 will help to protect the children of our state and ensure they have a safe ride and a safe tomorrow. Consider the following:

- Research shows belt-positioning booster seats lower the risk of injury to children in crashes by 45 percent compared to the use of vehicle seat belts alone.
- Studies have found that parents believe if they adhere to their state's current child passenger safety laws, they will be taking the necessary steps to protect their children. Parents may be under a false sense of security following the current law, and, in the process, are unknowingly endangering their children.
- On a small child, the adult lap belt rides up over the stomach and the shoulder belt cuts across the neck. In a crash, this could cause lap belt syndrome, a serious or even fatal injury. Out of position lap belts place forces on areas of the abdomen that can cause serious injuries to the liver, spleen or bowel. As the upper body jack-knives over the high lap belt, the spine may pivot at a point that can cause lumbar fractures or paralysis.
- Booster seats are designed to elevate a child so the shoulder belt fits properly across the collarbone and the lap belt across the pelvis. Research shows that poorly fitting adult belts can injure children and that booster seats help ensure proper adult belt placement. Seat belts in vehicles were manufactured to fit an adult male, so it's no surprise when they don't fit young children properly.

AAA has been a leader and advocate for the safety of travelers since its founding in 1902. Representing more than 60,000 members in the state, AAA North Dakota is part of The Auto Club Group, the second largest AAA club in North America with approximately 8.8 million members. As child passenger safety has been, and continues to be, one of our priority safety initiatives, your support of HB 1329 would be greatly appreciated.

If AAA North Dakota can be of any assistance to you, please don't hesitate to contact me at 701-282-6222, Ext. 274. Thank you for your leadership on this important safety initiative.

Sincerely,

A handwritten signature in cursive script that reads "Gene LaDoucer". The signature is fluid and elegant, with a long horizontal flourish at the end.

Gene LaDoucer  
Senior Public Affairs Representative  
The Auto Club Group/AAA North Dakota

cc: House Transportation Committee Members



#8

January 29, 2013

Dear Chairman Ruby and Members of the House Transportation Committee:

The North Dakota Safety Council is in support of a 'do pass' on House Bill 1329. It is our mission to work toward a safer and healthier North Dakota, and we believe that passage of this bill would take us one step further in that direction.

The American Academy of Pediatrics (AAP) best practices recommend children ride in a booster seat until a seat belt properly fits a child. Passing this law would bring the ND law closer to these best practices, and help to reduce injuries and save lives on our roadways.

Together, we can create a safer and healthier North Dakota for all citizens. We urge you to pass House bill 1329 to help protect the wellbeing of the future generation of our great state.

Sincerely,

A handwritten signature in cursive script that reads 'Serena Schmit'.

Serena Schmit  
Home & Community Coordinator  
North Dakota Safety Council

1640 Burnt Boat Drive • Bismarck ND 58504

PHONE: (701) 223-6372 • TOLL FREE: (800) 932-8890 • FAX: (701) 223-0087 • WEBSITE: [www.ndsc.org](http://www.ndsc.org)



#9



January 29, 2013

Dear North Dakota House Members,

As I write this letter of support for HB 1329, I pause to offer the mission of Altru Health System.

**Mission:** *Improving Health, Enriching Life*

**Why we serve:**

To achieve optimum health for all residents in our region.

**How we serve:**

By providing health education, preventive services, early intervention, and appropriate care.

**Whom we serve:**

The more than 200,000 residents of northeast North Dakota and northwest Minnesota.

**Who we are:**

A community of over 3,000 health professionals and support staff committed to serving the region for more than 100 years.

As a healthcare organization, we seek to enhance the lives and health of the people we serve. As you can see, we promote health education and preventive services, the most cost effective way to provide care and intervention. One aspect of that care is engaging in efforts to prevent injuries and death to those we serve. We live out this mission each and every day and support efforts to that end. Our Trauma Services Department works tirelessly on strategies to keep our ER free from those who suffer tragic injuries or death. We serve as the lead agency for Safe Kids Grand Forks, a community and region wide coalition that focuses on preventing unintentional injuries and death to children.

While many of our programs focus on health education, we are aware that effective strategies for injury prevention are multifaceted in nature. Passage of effective (and proven) legislation is one component to a comprehensive injury prevention program. With that, we urge the North Dakota legislature to pass House Bill 1329. This bill will enhance the safety of children riding in motor vehicles. It will make the North Dakota law in line with what are national and well thought out standards for car and booster seat usage. Our practitioners will have a law and best practice standards that are "in sync" and thus, will cause less confusion for parents attempting to keep their children safe.

We, as a health system, will continue our efforts of keeping the people of our community and region safe and healthy but, we ask for the partnership of the North Dakota legislature by passing HB 1329. Thank you in advance for your support of this bill.

Sincerely,

A handwritten signature in cursive script that reads "Renee Axtman".

Renee Axtman – Administrative Director of Primary Care

Altru Health System

#10



January 31, 2013

Dear North Dakota House Members,

Thank you for allowing me to provide a letter of support for House Bill 1329, a bill impacting child passenger safety in North Dakota. As a pediatrician, I see patients routinely that would benefit from this legislation and parents that would be less confused as our law is not reflective of best (and safest) practices. I often have parents ask me, "When can my child come out of their booster seat?" Currently, our law only requires children under age seven to be in a car or booster seat. However, the American Academy of Pediatrics, an organization of which I am a member, says that children should be in a booster seat until somewhere between the ages of 8-12. The proposed legislation of HB 1329 has strategically chosen to raise the ND age requirement to age nine. This is the age at which most kids hit the recommended height where it is safe to use an adult seat belt (57"). The proposed law also affords parents of children reaching that height earlier, to discontinue the use of a booster seat. When parents ask me the above noted question, I struggle to answer in that the law says one thing and yet does not follow the best practice recommendation known to protect children and supported by my professional organization of physicians.

Throughout my years as a physician, I have witnessed children injured by seat belts that are designed to fit adults, but are in fact dangerous for children when not used in conjunction with a booster seat. A common injury seen in even minor crashes (Seat Belt Syndrome), is easily preventable in a crash by having a proper fitting seat belt. Booster seats are very cost effective and make the seat belt fit a child the way it is intended to fit an adult.

Locally, and around our state, parents are supported in their efforts to get booster seats in the event that they cannot afford them. They are easily accessible, inexpensive, and proven effective from the number one cause of unintentional injury and death to children – motor vehicle crashes.

The American Academy of Pediatrics does not create and issues position statements haphazardly. They are issued after careful research and consideration by physicians and experts in the field. I would ask that you support HB 1329 so that our state is in line with the BEST practices of keeping children safe rather than settling for a lesser standard of practice.

Should you have further questions, please feel free to contact me at [elunn@altru.org](mailto:elunn@altru.org) Again, I thank you in advance for your support of HB 1329.

Sincerely,

A handwritten signature in black ink that reads "Eric R. Lunn".

Eric R. Lunn, MD

Pediatrician

Chief Medical Executive – Altru Health System

#11

To: Rep. Dan Ruby, Chair and the House Transportation Committee

From: Marie Remz and Karen Medd on behalf of the Grand Forks Director's Association

Date: January 29, 2013

Re: Testimony in HB 1329

The Grand Forks Director's Association membership consists of all of the child care center directors or a designated representative in the Grand Forks area, including Head Start and Early Head Start.

Collectively, our organization consists of over 16 centers.

We urge your support for HB 1329, amending and reenacting section 39-21-41.2 of the North Dakota Century Code relating to child restraint devices.

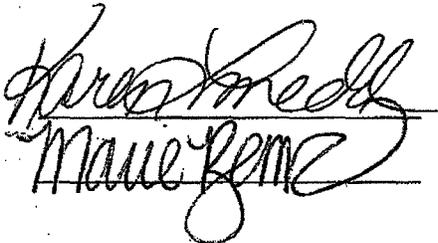
As child care directors we want what is best for the children we serve and we know that raising the age from 7 to 9 in the boosters seat law is the safest way for children to ride.

Many of us transport children to and from school from our child care centers. This law will not affect the way we transport the children because most of us already have the maximum number of booster seats in our vehicles and so this amendment to the law will not be a financial hardship for us. Again we want what is best for the children we serve and we want them to continue to ride safely in their personal vehicles also.

Research shows that approximately 97% of children reach 4'9" around the time of their 9<sup>th</sup> birthday or soon after. Passage of this law would help assure that more children are riding safely and our law would be in line with the best practices recommended by the American Academy of Pediatrics, the National Highway Transportation Safety Administration and various other injury prevention organizations. We also know that parents look to the law for guidance on how their child should ride. Currently, the inconsistency between the law and best practice recommendations are confusing. We, as an association feel that the safest way for children to ride is in a booster seat until they are 9 or have reached the height of 4'9" and support the recommended change to the law.

The Grand Forks Director's Association urges your support of HB 1329 as another great step in keeping our children safe in North Dakota.

Sincerely,



Karen Medd  
Marie Remz



**Public Health**  
Prevent. Promote. Protect.

# Walsh County Health District Public Health & WIC

Administration Building • 638 Cooper Avenue ~ Suite 3 • Grafton, ND 58237

(701) 352-5139 • Fax (701) 352-5074

#2

Wednesday, January 30, 2013

To Whom It May Concern,

My name is Donna Holand; I am a Licensed Practical Nurse and have been a Child Passenger Safety Technician for 5 years. I work for Walsh County Health District in Grafton, ND. I am contacting you regarding House Bill No. 1329.

We hope that you will support this legislation, so that the law and best practices as recommended by The American Academy of Pediatrics and National Highway Safety Administration will reflect the same message for parents.

We need to do all we can to keep our children safe. So many times as I am explaining to parents what is best for their children, they will ask if that is the law also. Children are safest kept in booster seats until they are 57 inches so that the seatbelt can fit them properly. Most children are over the age of 9 years before they reach that height. When seatbelts don't fit properly kids will put them behind their back or under their arm. In a crash this can cause serious injury to a child.

I believe parents will better comply with what is best practice for their children if it is also the law.

Please support House Bill No. 1329. You may contact me at 701-352-5139.

Thank you,

Donna Holand

#13



[www.healthygff.org/](http://www.healthygff.org/)

January 31, 2013

North Dakota Legislators,

I am writing this letter on behalf of the Coalition for a Healthy Greater Grand Forks, whose mission is "to promote health and wellness in the greater Grand Forks area". The child passenger safety legislation HB 1329 is an important piece of legislation that follows the American Academy of Pediatrics recommendation for "belt positioning boosters for most children through 8 years of age." It is important to match laws with safety recommendations in order to prevent injury and death among our children riding in vehicles.

The CHGGF also supports primary enforcement of seat belt laws. North Dakota ranks highest in car crashes per capita. 63% of the people who died in the car crashes could have lived if they had been wearing a seat belt.

We know that laws save lives. We also know that people need laws to help them make good choices, often making the difference between life and death.

The CHGGF encourages North Dakota legislators to enact HB 1329 for booster seats for children and primary enforcement seat belt laws.

Thank-you for your consideration.

Sincerely,

A handwritten signature in cursive script that reads "Cindy Janssen".

Cindy (Schinda) Janssen, PhD, OTR/L  
President of the Coalition for a Healthy Greater Grand Forks

#14

To: Rep. Dan Ruby, Chair, House Transportation Committee and House Transportation Committee Members

From: Jennifer Beck and Jo-Anne Yearwood on behalf of the North Dakota Association for the Education of Young Children.

Date: January 30, 2013

Re: Testimony in HB 1329

NDAEYC's mission statement is to serve and act on the behalf of the needs, rights, and education of all young children. We are a statewide organization with close to 300 members, that include students, childcare providers, early childhood and early elementary teachers, as well as college professors.

We are asking for your support on HB 1329, raising the legal age of the booster seat law to 9.

Currently, our booster seat law only covers children to age 7. The proposed legislation would increase the use of booster seats to age 9. The rationale behind this is that most seatbelts do not properly fit an average 7-8 year old. The lap belt rides too high on their soft stomach tissue and could cause internal damage during a crash. The shoulder belt tends to ride across the child's neck or face and the child puts the seat belt behind them which can lead to the child being thrown from the vehicle. The American Academy of Pediatrics released 5 evidence based recommendations on child passenger safety in 2011, the 3<sup>rd</sup> one being that children ride in a belt positioning booster through their 8<sup>th</sup> birthday.

As an organization, we believe in following best practices especially as they are recommended by the American Academy of Pediatrics and other experts in the injury prevention field. Requiring a child to sit in a booster seat until his or her 9<sup>th</sup> birthday follows best practices and is the best way to guarantee the safety of North Dakota children. However, families may be confused at the discrepancy between the law and best practices; they look to the law for guidance. Having this law in place sends a strong message regarding the safety of young children.

We are asking you to take some of the confusion out of what is best for the children of ND and support HB 1329.

#15

Tuesday, January 29, 2013

Dear ND Legislature Representative,

My name is Sadie Ripley and I live at 2930 Legend Lane, in Grand Forks, North Dakota. I am a mom of three boys (Toby-6, Grady-4, and Ethan-2). I am also a Certified Car Seat Technician with Safe Kids. I volunteer when time permits for the Grand Forks Safe Kids Coalition. I am sure that you are already very familiar with the Safe Kids organizations across the state and nation. Our local coalition is quite active, under the direction and organization of Carma Hanson. It is through my connections with Safe Kids, whose mission is to prevent accidental injury, that I have become so passionate about car seat legislation, which brings us to the topic at hand...the proposed changes to the bill for child restraints in North Dakota.

As a mom, volunteer, and technician, I encourage you to review and support this forthcoming proposal. As many as 30 other states in our nation already have a law requiring children who are eight years old to use a booster; some states include nine years olds as well. I have included a video I found on line that gives a visual aid to review which supports the change. <http://www.youtube.com/watch?v=AccYpfcEITs>

I know you as legislators are inundated with requests to support this and support that. Our state is looking to you, to take these child restraint safety facts into account and set the bar for safety and well-being higher than it currently is. Seatbelts are not universally made for all sizes, which is why child restraints were originally invented. A booster seat is used to elevate a child in the vehicle, to help with the correct fit of the lap and should belt. When children sit in a vehicle seat, many times the shoulder belt crosses the neck or face and the lap portion rides high on the tummy, not down on the hips...riding like this, puts a child at risk of injury. In a crash, improperly-fitted safety belts can cause internal injuries, spinal cord damage or ejection from the vehicle.

Please support these changes. You will have many individuals on board to help inform parents and caregivers about these changes, such as The North Dakota Department of Health, North Dakota Department of Transportation, Safe Kids Coalitions, and other state and local agencies. We are willing and ready to implement a statewide public information and education campaign to inform parents and caregivers of any changes in the state's child restraint law.

Thank you for your consideration,

*SadieMae Ripley*

Sadie M. Ripley  
2930 Legend Lane, Grand Forks, ND 58201

My name is Jolaine Knain I currently work for Grand Forks County Social Services. Prior to this position I worked for Healthy Families a program that works with families with new born and young children. During my 12 years with Healthy Families I became trained as a car seat technician with Safe Kids in Grand Forks that allowed me to help parents install the car seats and help educate them on best practice using the car seat correctly. Many of the parents I worked with were low income families as are some of the families I work with now. Purchasing a car seat can be an expensive cost for families the one thing about this bill it would not cost parents more money as they already have the seat required for the upgrade to this law. Furthermore, if parent do need assistance with a booster seat at an earlier age, resources are in place in the state and community to support that need and provide a seat.

The reason I want you to support this law is it promotes best practice, creates less confusion between what the current law says and what the practices are. Many families hear conflicting information about when they can stop using a booster and just use the lap/shoulder belt for their child. I believe if both law and best practice are the same it would make the decision of when to stop using the booster clear for everyone.

I ask you to support HB 1329!

Jolaine Knain

Parent Aide Grand Forks County Social Services

#17

# Child Passenger Safety Committee



January 30, 2013

To Whom It May Concern:

The Child Passenger Safety Committee of the Bismarck-Mandan Safety Council is in support of HB 1329 which would improve North Dakota's child passenger safety law by requiring children ages 7 and 8 to use a booster seat instead of just a seat belt.

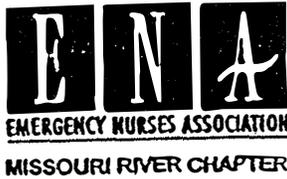
Our organization sponsors monthly car seat checkups in Bismarck and Mandan and provides education to parents and caregivers on "best practices" for buckling up children. It is our experience that most children in this age group do not correctly fit in a seat belt and the children often place the shoulder belt behind their back or under their arm – both of which can cause injury.

The most common question we receive from caregivers relates to the age when their child can move from the booster to the seat belt. Parents are receiving conflicting information from their pediatricians, the media, online resources and state law. We educate these parents on what is "safest" compared to what is "legal" and demonstrate how a seat belt should fit, i.e., across the shoulder blade and low on the hips. Parents are often surprised that their older children should still be in booster seats. There is a common belief that the law offers maximum protection for children.

We encourage a "Do Pass" recommendation on this bill. Thank you.

Sincerely,

Kurt Guenther  
Chair



#18

HB 1329

To whom it may concern:

Emergency nurses see and treat on a daily basis children with injuries from motor vehicle crashes. Many of these injuries could be prevented or decreased in severity with the use of proper age-appropriate restraints. HB 1329 addresses the recommendations by the American Academy of Pediatrics for the use of belt-positioning booster seats. The North Dakota Emergency Nurses Association strongly supports this bill.

*Mary Scott RN, BSN, CEN*

Mary Scott RN, BSN, CEN

Emergency Nurses Association of North Dakota Institute for Quality,  
Safety and Injury Prevention Chairperson

#19

Owens, Mark S.

---

**From:** Casey Shrum <caseys5990@gmail.com>  
**Sent:** Wednesday, January 30, 2013 9:23 AM  
**To:** Owens, Mark S.; Delmore, Lois M.; Kreun, Curt E.; Oversen, Kylie  
**Subject:** HB1329

Dear Representatives,

I would like to give you my input on HB 1329, regarding Child Passenger Safety Regulations.

The American Academy of Pediatrics has released a recommendation for children through the age of 8 to be in a booster seat. Children in booster seats are 45% less likely to be injured in a car accident if in booster seats. Children under 9 can not wear a seat belt properly, and risk spinal cord injuries or being ejected from the vehicle if not properly restrained.

I am a social worker for low-income housing in Grand Forks. I know that one concern people may have is that it will cost a lot and be a burden to the families. This is not true. Because the booster seat is required for a 6 year old child, families will already have one, and can continue to use it through the age of 8. Families who don't have the funds to buy carseats and booster seats, can get help from agencies, and will already have one. Therefore, there is no extra cost to families in extending the age of the requirement of a booster seat.

Changing the law will help those who do not necessarily know that what is legal, is not necessarily the safest. And the Safe Kids Coalitions, the ND Dept of Health, and the ND dept of Transportation will help inform families of this law, and how it will be much safer for the children. With the change in legislation, will come a much better response from parents, and protect our future by preventing child passenger deaths.

If ND cares about Child Passenger Safety, we will pass this legislation and require children to be in a booster seat until the age 9.

Thank you,

Casey Shrum