

**2017 HOUSE TRANSPORTATION**

**HB 1323**

# 2017 HOUSE STANDING COMMITTEE MINUTES

Transportation Committee  
Fort Totten Room, State Capitol

HB 1323  
1/26/2017  
27508

- Subcommittee  
 Conference Committee

Committee Clerk Signature

*Donna Whetham*

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

A bill relating to child restraint devices and use of safety belts for children.

## Minutes:

Attachments #1-5.

**Chairman Ruby:** brought HB 1323 before the committee.

**Representative Owens:** introduced HB 1323 and spoke to support the bill. This is the booster seat bill, after a number of studies and research efforts has been taken to see if we had the proper approach. Research has proven that we might want to change it a little bit to insure the safety of the children on the highway.

**Carol Meidinger, Child Passenger Safety Instructor,** spoke to support HB 1323. Written testimony was provided. (See attachment #1 and #2, pages 1-3). 2:43-9:35

**Carma Hanson, Registered Nurse, certified child passenger safety technician, and Coordinator of Safe Kids in Grand Forks,** spoke to support HB 1323 and provided written testimony. (See attachment #3). (9:48-16:45).

**Representative Sukut:** It seems like age doesn't have much to do with it. If you are 4' 9" tall you are tall enough to wear a normal seat belt. Could the law just talk about the height instead of the age?

**Carma Hanson:** The height is the most important indicator and that is at 4' 9". The reason the American Academy Pediatrics recommendation is there, is that you have that some kids will hit that at 8 and some at 9 and some higher than that. The age is in there because law enforcement officers don't carry a tape measure around so they can ask them their age.

**Representative Sukut:** There are adults that are not taller than 4' 9", what happens then?

**Carma Hanson:** There are break extenders, the vehicle seat will move and you have adjustable height seat belts for these people. It is unrealistic to think a seat belt would fit everyone.

**Chairman Ruby:** I think the attempt was to go to 9 last time.

**Carma Hanson:** Yes the last time the law was changed four years ago it lost by one vote on the floor. This is pretty straight forward what this is supposed to do.

**Vice Chairman Rick C. Becker:** On Line 11 and also lines 15-17. It says that they must be correctly buckled in a safety belt. I was thinking that is already law, they have to be buckled. Are you looking at that it would be illegal if they have the strap behind their shoulder? Is a lap belt be included as a safety belt?

**Carma Hanson:** Safety restraint, anytime there is misuse it could be considered illegal. If parents are giving it a good try most law enforcement would give them grief unless it is flagrant misuse of the that restraint. If the seat belt has been placed behind them, yes it is illegal and a lap belt would not be the recommended mode of transportation and if it is the only alternative left in that vehicle it is considered a restraint and can be used.

**Vice Chairman Rick C. Becker:** So what is your intent by putting this in?

**Carma Hanson:** Our goal is to have a properly used restraint up to age 9. A seat belt would not be a proper restraint for under age 9.

**Vice Chairman Rick C. Becker:** If that is your intent you wouldn't need that language. Unless they are 57" and 9 and above they don't need to use a child restraint system.

**Carma Hanson:** Yes, if they met the 57" but they would still be required to use a seat belt.

**Vice Chairman Rick C. Becker:** To me it seems that is already in law and the only thing this adds is that they need to be correctly buckled. The child weighing more than 40 # may be restrained by a lap belt, and you are striking that. That is why I was asking if a safety belt includes a lap belt. Are you okay with striking the added language on Line 11?

**Carma Hanson:** It is just taking it out of there. That piece of information was back in the law. It doesn't need to be in there anymore, it is outdated and makes the law confusing.

**Carol Meidinger:** It was a clarification issue and to us it is not that big of a deal. We have been questioned on it that it says a child under 9 and in this case under 7 is not required to use a child restraint. Some people interpreted that a child would not have to do anything.

**Dan Ruby:** When was the last time that the guidelines were updated?

**Carma Hanson:** In 2005 was the last time we updated the North Dakota Law. Up until then a child of age 4 could use a seat belt. Then we changed it in 2005 and we were seeing some states using the recommendation and go to age 8, we thought the bill would not pass if the age was that high so we opted to go to age 7. New seats have been made now. At this point these guidelines have been in place for a long time.

**Chairman Ruby:** So at that time the weight requirements that were put into law were part of the guidelines at that time? You said the booster seats couldn't guarantee safety at that

time and in some instances some children in a booster seat with a lap belt could actually do more internal injuries. I was concerned with that and has that changed now because of the design?

**Carma Hanson:** There has been a lot of change in the technology both in the seat belts in the vehicle and also in the booster seats they now go up to 100 and 120 # so the weight can now be taken out.

**Chairman Ruby:** How many states are following the full guidelines that this is asking for?

**Carma Hanson:** I will get that number for you, but I would say we are one of the few states in the country who have not come up to at least age 8.

**Representative Jones:** Are car accidents the number one cause of death for children?

**Carma Hanson:** Yes.

**Representative Jones:** The adjustment strap you are talking about is made so it can be brought down which makes the angle more appropriate for going across the shoulder. As I was looking at your seat that raises the child about 3 3/8" if the strap is brought down with the new adjustments does it get where we do not need that to accomplish the same thing?

**Carma Hanson:** No, it doesn't. It will help with positioning the shoulder strap but the booster seat does more than position the seat belt. The seat belt is designed for an adult so the booster seat helps fill in the side to side room when using the seat belt.

**Chairman Ruby:** I was looking at the scale for the age and weight percentiles. Since we are eliminating weight I was looking for something that would include height.

**Carma Hanson:** Are you referring to the growth chart. Dr. Devlin will speak to that next.

**Kwanza Devlin, a Family Medicine Physician from Minot,** spoke to support HB 1323 and provided written testimony. (See attachment #4, pages 1-4). 33:09-37:35

**Representative Nelson:** I am having a problem understanding that it was until 7 before and now it is age 9 and it was that the children were safe but now most all of them are not.

**Kwanza Devlin, MD:** From the medical perspective, there is some data from North Dakota that we actually do have taller kids here. So when you look at the growth chart, North Dakota kids would be a little bit over. When we look at kids our 9 and 10 years olds are fine versus our 7 and 8 year olds that are just too small.

**Representative Nelson:** The inconsistency that has bothered me is if I have two kids a year apart and one is 8 and one is 9, the youngest one is already over 55" and the older most likely over that. The older one could be exempt from having to use the restraint because they are 9 and the younger one couldn't but he is over the height as well. Just because of the age.

**Kwanza Devlin, MD:** I would agree with you, I have struggled with that same piece as well. I also recognize the logistics of the fact that I have officers in the field that are trying to make this happen in real life. The age part came in trying to make the law fit the real world. I would agree with you knowing the height is the most important of that. In reality we have to make the law fit the real world.

**Chairman Ruby:** I can see removing the reference to the weight. Law enforcement have no equipment to weigh kids. I don't mind that the age is there because we have the height there too.

**Representative Paur:** I did a quick scan of all 50 states. No one that I could find has a requirement of 9 years old. Most are considerably less than ours.

**Carma Hanson:** Most of them are 8 years old.

**Representative Jones:** The requirements you are talking about is the child has to be 4' 9" so they can sit up in the seat and the knees over the edge and feet down on the floor of the car. If the child is 7 in a booster and has the strap pulled over the boney part of his chest, are you telling me that child is not safe?

**Kwanza Devlin, MD:** No, if they are using the regular adult seat belt, then they would have to meet those five steps. If they were in a booster seat that seat is the safe thing for their size.

**Representative Jones:** I had a daughter that was 8 and she did not want to sit in a car seat, so I would like to figure out what the balance is between safety and the child. If we have a 7 year old child and he is in a booster seat with the seat belt strapped across the boney parts, why aren't they safe in that?

**Kwanza Devlin, MD:** They are safe, that is what we want the smaller child in.

**Chairman Ruby:** If they reach the height requirements then they don't need the booster seat. What is the age for the actual car seat, not the booster seat?

**Kwanza Devlin, MD:** Age 4.

**Representative Dobervich:** The handout we received the map in the back shows all the states the 8-9 year olds law.

**Kwanza Devlin, MD:** Age 8 or 9.  
**47:50**

**Vice Chairman Rick C. Becker:** We have a map that says age 8 or 9. How many has 9?

**Carol Meidinger:** I don't know the exact number, but about 3 of them that have including the 8 year olds and I believe it is around 30 that has through 7. Nobody has the age 9. What we are purposing is that we go under 9 with this bill which would include the 7 and 8 year olds.

**Representative Grueneich:** Would you be opposed to striking the age and just leaving the height requirement? I understand about the state trooper. It doesn't really say the age is more important than the height.

**Carol Meidinger:** In 1983 and we started with the age and I think it is something parents are used to having. If we strictly went with a height, every 7 and 8 year old child that I checked to gather data, did not fit a seat belt. What we will run into there may be an 11 year old that weigh more than 120# but is not tall enough and we don't have a product to fit that child. We are trying to be realistic with what will work best with the majority of the kids most of the time.

**Chairman Ruby:** I think that is a good point because by removing the age and just having the height you will have up to some teenagers and maybe some adults.

**Representative Paur:** Wyoming has a under 9 requirement and so is 6 under 9, so there is no state that has a 9 year old requirement like you are asking in this bill?

**Carol Meidinger:** We are asking for kids under 9 which is through 8.

**Chairman Ruby:** Are there some states that have under 10, and of those 3 that you mentioned does their language say under 10 or do they say under 9?

**Carol Meidinger:** Those say under 9 or they say through 8, it depends on how the law is written.

**Chairman Ruby:** The majority are capturing the 7 year olds just not the 8 year olds.

**Carol Meidinger:** Yes that is correct.

**Representative Paur:** The Governor's Highway Safety Administration says in Wyoming 8 years and under, they have under 8 years in rear seat.

**Chairman Ruby:** This is under 9 so this is the same as Wyoming. Any more support of HB 1323?

**Cheryl Rising, Nurse Practitioner and Legislative Liaison for the North Dakota Nurse Practitioner Association,** spoke to support of HB 1232. She provided written testimony and proposed an amendment. (See attachment # 5). 55:20-57:08.

**Chairman Ruby:** Isn't Advanced Nurse Practitioner under the supervision of a physician?

**Cheryl Rising, NP:** No they are not under a physician, but a Physician assistant is. The people that have not been doing health care provider have been putting in Advanced Practice Registered Nurse.

**Chairman Ruby:** Any other support of HB 1323?

**Vice Chairman Rick C. Becker:** I need clarification about the 8 and 9 year old thing again. From what I heard there is only 3 states that have the age limit we are proposing here. This

age limit is under 9. According to what you are saying that would make us the same as the 8 year olds on the chart you are showing, correct? We are saying 8 and 9 and then under 8.

**Kwanza Devlin, MD:** The way the graph is if you look at the ages across the bottom, each of those big lines represents the beginning of that age and the entire square includes that entire age range, with the middle being between 8 and 9. The middle line is  $8\frac{1}{2}$  year old, the next notch would be  $8\frac{3}{4}$ . When we say under 9 years old we are saying everyone on the left side in front of the line I drew.

**Vice Chairman Rick C. Becker:** Of the little map we have of blue states, 3 of those have it for under 9 the rest have it for under 8. Current law for North Dakota is under 7.

**Kwanza Devlin, MD:** Correct.

**Chairman Ruby:** Anyone else in support, opposition or neutral on HB 1323? Seeing none we will close the hearing on HB 1323.

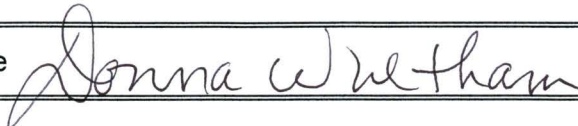
# 2017 HOUSE STANDING COMMITTEE MINUTES

Transportation Committee  
Fort Totten Room, State Capitol

HB 1323  
2/2/2017  
27854

- Subcommittee  
 Conference Committee

Committee Clerk Signature



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

A bill relating to child restraint devices and use of safety belts for children.

## Minutes:

**Chairman Ruby:** brought HB 1323 back before the committee. It doesn't make any changes to the car seat. We did have a request for putting health care provider in. It may be too broad. This is an exempting someone from the requirements. On line 17 they wanted health care provider.

**Representative Weisz:** APRN have prescriptive rights and operate on their own and there is also PA's, I don't know if you just want to say health care provider because that gets pretty broad. We generally would say physician, we could include Advanced Practice Registered Nurse (APRN at least that because they have the ability to practice on their own without being in direct supervision. I think that would make sense.

**Chairman Ruby:** Where it talks about under the age of nine, only 3 or 4 states were that high. I would have felt more comfortable going to under 8. I don't know if that is what the committee thought too.

**Representative Owens:** The proponents of this realize that the 9 may be high they are certainly happy to take the 8 as well. Again it is the height not the weight that is what was important about this.

**Representative Paur:** I was going back to Rep. Weisz thing about positions, you said APRN and adding that in? I think the people here were just social workers.

**Representative Weisz:** This section is talking about an exemption to the law. So this has nothing to do with who is training, it is just saying a physician can say you can't use them for ABCD reason. APRN are out in the clinics so it wouldn't hurt to add that language if this bill would pass.

**Chairman Ruby:** I don't have a problem adding that, it is Rep. Owens bill if he doesn't have a problem with that.



**Representative Owens:** I don't have a problem with that. To clarify to Rep. Paur those were RN's that were testifying at least some of them.

**Chairman Ruby:** We could have a motion for adding APRN's and moving it to 8.

**Representative Paur:** Motion to amend HB 1323 to add APRN's after physician in page 2 line 15 and 17, and replace nine with 8 on page 1 lines 7, 9 and 18.

**Representative Jones:** seconded.

Voice Vote: Almost all ayes. One *no* Motion carried to amend HB 1323.

**Chairman Ruby:** We have an amended bill before us. Any questions?

**Representative Nelson:** I move a Do Pass as Amended on HB 1323.

**Representative Owens:** seconded.

**Chairman Ruby:** I will support the motion and we had the discussion in the past, we worked on it. I think now with the way the booster seats are they are a lot more convenient. The car seats take up so much room where the booster seats are a lot easier. Moving it up a year to be more in line with the recommendations and guidelines and if they are at that height they are already exempt whether they are 7 or 8. I will support the motion.

**Representative Weisz:** We have had this several times and parents can't make decisions for themselves and if the law doesn't say it then it doesn't apply. Maybe we should give parents more credit than we do to take care of their kid if there weren't laws for it.

**Chairman Ruby:** I understand that.

**Representative Jones:** Thank you for amending this bill to 8 because I didn't like it at 9. The new seats are really advanced from the past. I will support this bill.

**Chairman Ruby:** It's a requirement that we all buckle up and it is a primary offense for children and if the seat belts don't fit properly then they are at risk. It keeps them a little safer if they are sitting up a little higher.

**Representative Jones:** It seems the main problem they had they were telling people one thing and the law said something else. We are not telling them they can't keep them in the seats. This is a reasonable bill.

**Chairman Ruby:** The clerk will take the roll for a Do Pass as Amended on HB 1323.

Roll call vote taken: Yes 10. No 1. Absent 3. Motion passed on Do Pass as Amended on HB 1323.

**Representative Westlind:** Will carry the bill. Hearing adjourned.

2/2/17 DLO

17.0798.01001  
Title.02000

Adopted by the Transportation Committee

February 2, 2017

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1323

Page 1, line 7, replace "nine" with "eight"

Page 1, line 9, replace "nine" with "eight"

Page 1, line 18, replace "nine" with "eight"

Page 2, line 15, after "physician" insert "or advanced practice registered nurse"

Page 2, line 17, after "physician" insert "or advanced practice registered nurse"

Renumber accordingly

Date: 2-2-17  
 Roll Call Vote #: 1

**2017 HOUSE STANDING COMMITTEE  
 ROLL CALL VOTES  
 BILL/RESOLUTION NO. HB1323**

House Transportation Committee

Subcommittee

Amendment LC# or Description: 17.0798.01001

- Recommendation:  Adopt Amendment  
 Do Pass     Do Not Pass     Without Committee Recommendation  
 As Amended     Rerefer to Appropriations  
 Place on Consent Calendar  
 Other Actions:  Reconsider     \_\_\_\_\_

Motion Made By Rep. Paur    Seconded By Rep. Jones

Representatives	Yes	No	Representatives	Yes	No
Chairman Dan Ruby			Rep. Gretchen Dobervich		
Vice Chair. Rick C. Becker			Rep. Marvin Nelson		
Rep. Bert Anderson					
Rep. Jim Grueneich					
Rep. Terry Jones					
Rep. Emily O'Brien					
Rep. Mark Owens					
Rep. Gary Paur					
Rep. Randy Schobinger					
Rep. Gary Sukut					
Rep. Robin Weisz					
Rep. Greg Westlind					

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

Absent \_\_\_\_\_

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

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

Age 8 & under

Motion carried.

Date: 2-2-17  
 Roll Call Vote #: 2

**2017 HOUSE STANDING COMMITTEE  
 ROLL CALL VOTES  
 BILL/RESOLUTION NO. HB 1323**

House Transportation Committee

Subcommittee

Amendment LC# or Description: \_\_\_\_\_

Recommendation:  Adopt Amendment  
 Do Pass  Do Not Pass  Without Committee Recommendation  
 As Amended  Rerefer to Appropriations  
 Place on Consent Calendar  
 Other Actions:  Reconsider  \_\_\_\_\_

Motion Made By Rep. Nelson Seconded By Rep. Owens

Representatives	Yes	No	Representatives	Yes	No
Chairman Dan Ruby	✓		Rep. Gretchen Dobervich	AB	
Vice Chair. Rick C. Becker	AB		Rep. Marvin Nelson	✓	
Rep. Bert Anderson	AB				
Rep. Jim Grueneich	✓				
Rep. Terry Jones	✓				
Rep. Emily O'Brien	✓				
Rep. Mark Owens	✓				
Rep. Gary Paur	✓				
Rep. Randy Schobinger	✓				
Rep. Gary Sukut	✓				
Rep. Robin Weisz		✓			
Rep. Greg Westlind	✓				

Total (Yes) 10 No 1

Absent 3

Floor Assignment Rep. Westlind

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

**REPORT OF STANDING COMMITTEE**

**HB 1323: Transportation Committee (Rep. D. Ruby, Chairman)** recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (10 YEAS, 1 NAYS, 3 ABSENT AND NOT VOTING). HB 1323 was placed on the Sixth order on the calendar.

Page 1, line 7, replace "nine" with "eight"

Page 1, line 9, replace "nine" with "eight"

Page 1, line 18, replace "nine" with "eight"

Page 2, line 15, after "physician" insert "or advanced practice registered nurse"

Page 2, line 17, after "physician" insert "or advanced practice registered nurse"

Renumber accordingly

**2017 SENATE TRANSPORTATION**

**HB 1323**

# 2017 SENATE STANDING COMMITTEE MINUTES

**Transportation Committee**  
Lewis and Clark Room, State Capitol

HB 1323  
3/10/2017  
29015

- Subcommittee  
 Conference Committee

Committee Clerk Signature

*Mary Munder*

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

Relating to child restraint devices and use of safety belts for children.

## Minutes:

Attachments #1-5

**Chairman Laffen:** Called the Senate Transportation Committee to order. Roll Call taken, all present. We will open the hearing on HB 1323. Welcome Representative Mark Owens.

**Rep. Mark Owens:** I am here to introduce HB 1323 on child restraint and safety belts. Science has pointed it out to us that weight really has nothing to do with it, it is the height and where the belts across the shoulders, torso, neck are placed on their body. Everybody in the House Committee was pleased with the bill and we determined that to get it through the House we had to change the age to 8 years old. We have to do what is the best for the children. Experts behind me will answer any questions I can't answer.

**Chairman Laffen:** Any questions? None. Thank you. Further testimony in favor of HB 1323.

**Carma Hanson, a registered nurse from Grand Forks and the Coordinator for Safe Kids Grand Forks. See attachment #1 and 2. (3:07)** Parents look to the law to keep kids safe. Booster seats boost the kids higher so the belts fit them better. I am here to ask for your support of HB 1323.

**Chairman Laffen:** Currently is there a penalty for booster seats? Can they stop someone for not having their child in a restraint?

**Carma:** Yes, it is a \$25.00 fine. Yes, you can actually stop someone who doesn't have their child in a restraint.

**Senator Nelson:** Car seats are only in the back seats?

**Carma:** Recommendation is 12 and under should be in the back seat because of air bags. It is not illegal to ride in the front. It is not a part of our law.

**Chairman Laffen:** Questions? None. Thank you. Further testimony in favor of HB 1323.

**Kwanza Devlin, Family Medicine Physician practicing in Minot, ND. See Attachment #3. (18:15)** This bill is a step in the right direction and I ask for your support on it.

**Chairman Laffen:** Questions? None. Thank you. Further testimony in favor of HB 1323.

**Courtney Koebele, representing the North Dakota Academy of Physician Assistants: (24:05)** See Attachment #4. We are in support of this bill. We also have brought a proposed amendment for the bill.

**Vice Chairman Casper:** Questions?

**Senator Rust:** Define advanced practice registered nurse for me.

**Courtney:** The advanced practice registered nurses are testifying and can explain it so much better than I can.

**Vice Chairman Casper:** Further testimony in favor of HB 1323?

**Cheryl Rising, Family Nurse Practitioner: (26:34).** I am here for support of HB 1323. See Attachment #5. Senator Rust, in answer to your question, Advanced Practice Registered Nurses is Registered Nurses that have had advanced practice with 4 years of nursing education and practice, and then 3 years coming out with a doctorate. They have a full scope of practice meaning that they can have their own staff, they can diagnose and treat patients and prescribe.

**Senator Rust:** Is a physician's assistant an advanced practice registered nurse? Nurse practitioner? Crna?

**Cheryl:** No. A Physician Assistant is not. Included in the advanced practice registered nurse is a Nurse Practitioner, Crna, Midwife, and a Clinical Nurse Specialist. Crna is a certified registered nurse who does anesthesia in the hospital.

**Vice Chairman Casper:** Anything further committee? None. Thank you. Any further testimony on HB 1323? Opposition?

**Senator Rust:** I just have one more question. Why isn't a PA in that group?

**Cheryl:** PA's go to a separate school and they are just a separate health care provider.

**Senator Nelson:** I have a PA and she works in consult with the doctors. She is very good.

**Vice Chairman Casper:** Any further testimony in opposition? We will close the hearing on HB 1323 and will wait for Chairman Laffen to see what he wants to work on. Let's meet back here at 10:00 am.



# 2017 SENATE STANDING COMMITTEE MINUTES

**Transportation Committee**  
Lewis and Clark Room, State Capitol

HB 1323  
3/10/2017  
29025

- Subcommittee  
 Conference Committee

Committee Clerk Signature

*Mary Munder*

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

Relating to child restraint devices and use of safety belts for children.

## Minutes:

**Chairman Laffen:** Called the Transportation Committee back to order and we will go to HB 1323.

**Carma Hanson:** The reason we put age 9 in the bill is once you hit that age kids are about that size on average. Kids really don't start to hit that 4'9" until they are about 9 years old. House moved it back to 8, can we live with that? Yes, because we know that the height and weight is what they should come out at that age. Currently when they are 8 they are out of the booster seat. But if they are 6 and super tall then they will be out and in a safety belt.

**Chairman Laffen:** Committee, we really don't have to take into account what the House does, we can do what we want to do, but I can tell you, just by visiting with some of them, that if we raise the bill to age 9, the bill won't survive in a conference meeting with them.

**Senator Rust:** Understand when I vote on a bill I am not voting ideally or what people think. I'm voting on what does this bill say and to do that I need to understand the bill. What I am getting at this time is legally.

**Carma:** Laws are hard to write and in the real world you have to do something realistic and easy for law enforcement to enforce. The bill was written to protect the kids and in a clean and simple way we need to have it so the parents and law enforcement can understand it. The way we want this bill to read is a child has to be in a booster seat until the age of 8 unless they reach the height of 57" before that age.

**Senator Rust:** Another thing this bill does is eliminate the weight.

**Carma:** Yes, the weight is out.

**Chairman Laffen:** Discussion on the amendment. Fill me in on what it does please as I was at another hearing and missed that part of the meeting.

**Senator Nelson:** I would approve the amendment because it was brought by Courtney to include the physician's assistants. The House added the advanced practice registered nurse.

**Chairman Laffen:** We are adding one more medical position to the list.

**Senator Nelson: Yes. I move that amendment**

**Senator Casper: Seconded.**

**Senator Nelson:** Is there a card or something that law enforcement can pass out to the parents or the driver of the vehicle that tells them how that child is to be restrained in the vehicle, or maybe the physician could pass out the information.

**Carma:** The answer is yes. We also do a lot of education on this too, and pointing them in the right direction to help with the booster seats, car seats, belts, etc.

**Senator Nelson:** When did we switch from seat belts to safety belts?

**Carma:** I can't answer that. The two phrases mean the same and are used both ways.

**Chairman Laffen: Any further discussion on the physician assistant amendment?  
None.**

**Roll Call taken: Yeas-6, Nays-0, Absent-0.**

**Chairman Laffen: Amendment passes.**

**Senator Casper: I move for a Do Pass on HB 1323 as amended.**

**Senator Campbell: Seconded**

**Chairman Laffen: Motion and second on HB 1323. Any other discussion?**

**Roll Call taken: Yeas-6, Nays-0, Absent-0**

**Senator Rust will carry the bill.**

17.0798.02001  
Title.03000

Adopted by the Senate Transportation  
Committee

March 10, 2017

CJ  
3/16/2017  
1 of 1

PROPOSED AMENDMENTS TO ENGROSSED HOUSE BILL NO. 1323

Page 2, line 15, after "physician" insert "physician assistant."

Page 2, line 18, after "physician" insert "physician assistant."

Renumber accordingly

Date: 3-10-17  
Roll Call Vote #: 1

2017 SENATE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. "Enter Bill/Resolution No." 1323

Senate Transportation Committee

Subcommittee

Amendment LC# or Description: 17-0798-02001 Title# 03000

Recommendation:  Adopt Amendment  
 Do Pass     Do Not Pass     Without Committee Recommendation  
 As Amended     Rerefer to Appropriations  
 Place on Consent Calendar  
Other Actions:  Reconsider     \_\_\_\_\_

Motion Made By Nelson Seconded By Casper

Senators	Yes	No	Senators	Yes	No
Chairman Lonnie J. Laffen	✓		Senator Carolyn Nelson	✓	
Senator Tom Campbell	✓				
Senator David Rust	✓				
Senator David Clemens	✓				
Vice Chairman Jonathan Casper	✓				

Total (Yes) 6 No 0

Absent 0

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

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

Date: 3.10.17  
Roll Call Vote #: 2

2017 SENATE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. "Enter Bill/Resolution No." HB 1323

Senate Transportation Committee

Subcommittee

Amendment LC# or Description: 17.0798.02001 Title# 03000

Recommendation:  Adopt Amendment  
 Do Pass  Do Not Pass  Without Committee Recommendation  
 As Amended  Rerefer to Appropriations  
 Place on Consent Calendar

Other Actions:  Reconsider  \_\_\_\_\_

Motion Made By Casper Seconded By Campbell

Senators	Yes	No	Senators	Yes	No
Chairman Lonnie J. Laffen	✓		Senator Carolyn Nelson	✓	
Senator Tom Campbell	✓				
Senator David Rust	✓				
Senator David Clemens	✓				
Vice Chairman Jonathan Casper	✓				

Total (Yes) 6 No 0

Absent 0

Floor Assignment Rust

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

**REPORT OF STANDING COMMITTEE**

**HB 1323, as engrossed: Transportation Committee (Sen. Laffen, Chairman)**  
recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends  
**DO PASS** (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). Engrossed HB 1323  
was placed on the Sixth order on the calendar.

Page 2, line 15, after "physician" insert ", physician assistant."

Page 2, line 18, after "physician" insert ", physician assistant."

Renumber accordingly

**2017 TESTIMONY**

**HB 1323**

Testimony in Support of HB 1323

Carol Meidinger  
Child Passenger Safety Instructor

HB 1323  
1-26-17  
#1

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. I have been involved in child passenger safety in North Dakota for over 30 years. In fact, I testified in support of the original child passenger safety law that was passed in 1983. When that law was passed, it mirrored recommendations from national health and safety organizations for that time period. When I look back, it's hard to believe that I supported a law that allowed a three-year old child to ride in a seat belt, but that was appropriate for that year. Since then, the North Dakota Legislature has updated the child passenger safety law four times, using new information, technology, research and data from national experts and from our own experiences in working with parents and children in our state. The last update was made in 2005, twelve years ago.

We are again requesting that the North Dakota Legislature update our child passenger safety law, so that it reflects best practice recommendations from the American Academy of Pediatrics and what we are seeing here in North Dakota.

The primary purpose of this bill is to increase the age for children required to ride in a booster seat (child restraint) from "under seven," to "under nine," unless they are 4'9" tall, when they can safely use a seat belt. We are requesting that the weight limit of 80 pounds be removed, because height is the primary indicator of correct seat belt use. Other changes in the bill are to remove outdated information or clarify language in the law.

Why is this change being requested? In addition to following best practice recommendations, my experience as a technician has shown that most seven and eight year old children who I assist are simply not tall enough to correctly use a seat belt. The shoulder belt often crosses the neck and the lap belt rides high on the tummy. This is uncomfortable, so children place the shoulder belt behind them or under the arm. This is a danger practice and can cause injury to the child. Booster seats elevate the child and help position the seat belt correctly, with the shoulder belt across the chest and the lap belt low on the hips.

As it stands now, North Dakota's law is different than what we recommend for seven and eight year old children. Parents are receiving different messages and it is confusing for them.

Mr. Chairman, Representatives, requesting changes in our law is not something we take lightly, but child passenger safety is an ever changing field with new and emerging issues. We address many of these issues through education, but our law should not be in conflict with the education we are providing.

I'd like to close with extending my thanks to the North Dakota Legislature for their support in past sessions with helping to keep North Dakota kids safe from one of their leading causes of death and injury. It is my sincere hope that you will see the value in this legislation and will give it a "do pass" recommendation. Thank you and I would be happy to try to answer any questions you may have.



# North Dakota's Proposed Child Passenger Safety Legislation

## Frequently Asked Questions – HB 1323

HB1323  
1-26-17  
#2  
Page 1



### What will this legislation do?

- ◆ It will require 7 and 8 year old children to ride in a booster seat unless they are 4'9" tall.

### Why is this legislation needed?

- ◆ North Dakota's current child passenger safety law allows 7 and 8 year old children to ride in a seat belt, without a booster. However, seat belts do not properly fit most 7 and 8 year old children, which puts them at risk for injury or death in a crash.
- ◆ North Dakota's law has not been updated for over 10 years, and does not reflect "best practice" recommendations identified by national health and safety organizations.
- ◆ The American Academy of Pediatrics recommends "belt positioning boosters for most children through 8 years of age."<sup>1</sup>

### Why can't we educate instead of legislate? Can't parents decide for themselves what's best for their children?

- ◆ The North Dakota Department of Health, Safe Kids Coalitions and other health and safety organizations educate parents about "best practice" recommendations, but some parents simply look to the law for guidance on buckling up their children.
- ◆ When parents in North Dakota were surveyed about where they get information on how to best restrain their children, North Dakota law was the second most credible source of information, right behind their health care provider.
- ◆ Parents are often confused about what is "legal" compared to what is "safest" for their child.
- ◆ It is important that North Dakota's child passenger safety law not be in conflict with "best practice" information that is provided to parents, health care providers and others.

*"Most parents want to do the right thing for their children and they trust that their legislators would not require something that is not safe for their children."*

Kwanza Devlin M.D., Family Medicine Physician in Minot, ND.

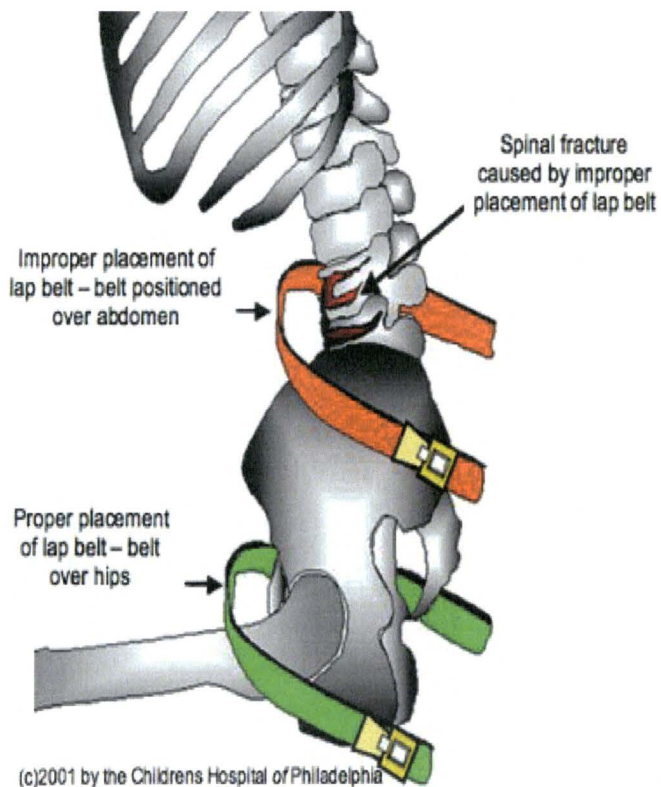
## Why is a booster safer than a seat belt for these children?

- ◆ Seat belts are designed for adult-sized bodies and do not properly fit most 7-8 year old children.
- ◆ In order for a seat belt to do its job, it must be placed correctly on the child. The shoulder belt should fit across the chest and the lap belt should fit low and snug on the hips.
- ◆ When the seat belt does not fit correctly, the child often places the shoulder belt under the arm or behind the back. **THIS IS A DANGEROUS PRACTICE.** The lap belt often sits high on the tummy, which can cause internal injuries to the child in a crash.

**Incorrect:** Shoulder belt across neck. Lap belt too high



**Correct:** Booster seats elevate the child, helping with correct fit of the lap and shoulder belt. Most have small belt guides that keep the lap belt low on the hips.



(c)2001 by the Childrens Hospital of Philadelphia

Doctors call the injury this caused "the seat belt syndrome."

An October 2016 news story from Henrico, Virginia explains the importance of booster seats. Excerpts from a WWBT television station report include:

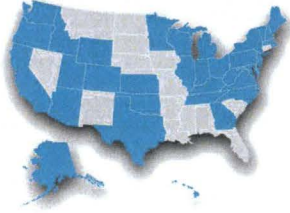
*A Henrico girl is lucky to be alive after she survived a bad car crash. She is recovering from several surgeries. Her mother is making a plea to every parent out there so they don't make the same mistake she did.*

*Dr. Bagwell explained the graphic details: "Where you could see the stripe of the seat belt is an enormous bruise across her abdomen, as well as the fact that the edge of the belt had actually cut through her abdominal wall."*

*Samantha should have been in a booster seat, but she wasn't. Her parents thought she had outgrown it. They made another mistake so many parents have seen: Samantha put the shoulder belt behind her, which increased the force of the lap belt on her stomach.*

## How does North Dakota's child passenger law compare to other states?

- ◆ All states have child passenger safety laws that vary with regard to ages, weights, and penalties. Nearly 75 percent of the states already require child restraint (booster seat) use for children up to age 8 or 9.



*Blue states on the map are the ones with child restraint (booster) laws for children to age 8 or 9.*

## Will this legislation pose a burden on families?

- ◆ It should not. Since 6-year old children are already covered by this law, they should already have a booster seat that they can continue to use.
- ◆ Boosters are very affordable. They can be purchased for as little as \$15.
- ◆ Boosters are also available through some public health agencies and Safe Kids coalitions for families who cannot afford to purchase one. These seats are offered for a reduced price or free as needed. North Dakota TANF (Temporary Aid for Needy Families) also helps with covering the cost of child restraints for their clients.

## How will parents and caregivers know about changes in the law?

- ◆ The North Dakota Department of Health, North Dakota Department of Transportation, Safe Kids Coalitions, and other state and local agencies are prepared to implement a statewide public information and education campaign to inform parents and caregivers of any changes in the state's child restraint law.

### **For more information on child passenger safety, contact:**

Dawn Mayer  
ND Department of Health  
[drmayer@nd.gov](mailto:drmayer@nd.gov)

Carma Hanson  
Safe Kids Grand Forks  
[chanson@altru.org](mailto:chanson@altru.org)

Carol Meidinger  
Child Passenger Safety Instructor  
[carolm@bektel.com](mailto:carolm@bektel.com)

<sup>1</sup>Policy Statement – Child Passenger Safety, American Academy of Pediatrics, Committee on Injury, Violence, and Poison Prevention, Pediatrics, ISSN Numbers: Print, 0031-4005; Copyright 2011

My name is Carma Hanson and I have been a registered nurse for nearly 30 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 200 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 1323** 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 Espeguard 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 lots has changed in that time and 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.

The last update to the legislation was made in 2005 and just as technology and standards have changed in many areas of our motor vehicles, they too have changed with how we protect children in cars. Since 2005, we have seen the advent of car features such as on-star and navigation systems that help guide us to our destination and assist in an emergency lane departure warning systems that tell drivers if they are straying out of their lane of traffic. We can auto start our vehicle and warm it up from inside a sports arena or count on it to use the auto braking system if we get too close to another vehicle. These changes in the vehicle are due to research and technology that has advanced. Just as these technologies have helped drivers and passengers, car and booster seat manufacturers have also updated their products to better fit the needs to young kids to keep them safe in motor vehicles. In 2005 when our last update to this law was made, some of the technologies and features available today were not on the market or were difficult or expensive to obtain; that is not the case today.

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.

As Carol stated, children most often reach this criteria when they are about 4'9" tall, somewhere between 8-12 years of age. Until then, it is important that they have the mechanism and technology that will keep them safe in a vehicle, that being a car or booster seat.

Recently, Safe Kids Grand Forks conducted a survey of nearly 300 parents and caregivers in our state. When asked where they seek out information on how to buckle up their children, the doctor's office, public health offices and Safe Kids Coalitions were the most common place. However, the state law was referenced by 1 in 3 parents as to where they get their information. This causes us concern for two reasons. One, the best practice given out by the first noted sources differs substantially from the state law and parents find that to be very confusing. Secondly, if parents are looking to the state law for guidance and recommendations, we need to have a law that is more reflective of the national recommendations, not those that were in place many years ago.

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, Safe Kids and many other injury prevention experts. When there is a disconnect between the law and the best practice, as I noted, 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."

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. Please 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

HB1323  
1-26-17  
#4  
Page 1

Testimony in Support of HB 1323  
Kwanza Devlin, MD

Mr. Chairman and Members of the Committee, good afternoon. My name is Kwanza Devlin. I am a Family Medicine Physician who has practiced in Minot for nearly 6 years. My colleagues have already explained HB 1323 and the safety reasons to support this measure. I would like to address some of the other medical issues surrounding this bill.

Carma already discussed how a child who is not big enough for an adult seat belt can be seriously injured or even killed in an accident. 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. This is part of why the American Academy of Pediatrics (AAP) has issued a policy statement on this particular part of 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.”***

The American Academy of Family Physicians has stood by that policy. You might be thinking, “I think my 7 year old is big enough for an adult seat belt.” This is a common misconception that I wanted to review. 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” (4’ 9”). Now, following that line with the one that intersects with it, you will notice that around 9 years of age, only the very tallest children (those at the 95%ile) would be big enough for an adult seat. If your child is completely average (at the 50%ile), then they

likely would be safest in a booster seat until around 11 years old. This is why the AAP policy was written as it was. 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 medical recommendations.

The last point that I want to make is more difficult for me as a physician. Even though the societies and organizations that govern us as physicians have made these recommendations, AND even though parents when surveyed often listed their healthcare provider as a resource for child passenger safety guidance, we do a horrible job at making sure parents know how to keep their kids safe in the car. I wasn't taught about child passenger safety in my medical school. In residency, I learned more. The expectation is that these conversations occur at well child visits. However, the reality of a system which drives 15 minute appointments plus the need to focus on more medical issues (developmental milestones, growth, age appropriate screenings and immunizations), often push safety discussions to a handout that many parents forget and leave in the room. We need to do better at this, but I don't think we can do this alone. As physicians we have to work together with our health department, car-seat technicians, law enforcement and legislators to keep the children of North Dakota safe. As Carma indicated, parents seek guidance for keeping their kids safe in vehicles from a variety of sources, and it would be best if all those places, including the doctor's office, the printed materials from places like the health department, and our state law were consistent with each other. I think this bill is a step in the right direction. I thank you for your time today and would take any questions that you may have.







HB 1323  
1-26-17  
#5



TESTIMONY TO:

TRANSPORTATION COMMITTEE

65<sup>TH</sup> NORTH DAKOTA LEGISLATIVE ASSEMBLY

HOUSE BILL 1323 1/26/2017

Chairman Ruby and Committee Members:

I am Cheryl Rising, Family Nurse Practitioner (FNP) and Legislative Liaison for the North Dakota Nurse Practitioner Association (NDNPA). I am here to testify in support of House Bill 1323 a bill to amend and reenact section 39-21-41.2 and 39-21-41.4.

Advance Practice Registered Nurse's (APRN) are primary care providers throughout the state of North Dakota. On page 2 line 15 and 17 we recommend the word physician be changed to health care provider. This would eliminate any barriers to our scope of practice.

This concludes my testimony and I entertain any questions.

Cheryl Rising, RN, MS, FNP-BC

701-527-2583

[crisingnp@gmail.com](mailto:crisingnp@gmail.com)

Attachment # 1 pg 1  
HB 1323 3-10-17

Senate Transportation Committee Hearing

House Bill 1323

March 10, 2017

My name is Carma Hanson and I have been a registered nurse for nearly 30 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 200 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 1323** 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.

This primary purpose of this bill is to increase the age for children required to ride in a booster seat (child restraint) from "under seven," to "age eight," unless they are 4'9" tall, when they can safely use a seat belt. We are requesting that the weight limit of 80 pounds be removed, because height is the primary indicator of correct seat belt use. Other changes in the bill are to clean up or clarify language.

Why is this change being requested? In addition to following best practice recommendations, my experience as a technician has shown that most 7 year old children are simply not tall enough to correctly use a seat belt. The shoulder belt often crosses the neck and the lap belt rides high on the tummy. This is uncomfortable, so children place the shoulder belt behind them or under the arm. This is a danger practice and can cause injury to the child. Booster seats elevate the child and help position the seat belt correctly, with the shoulder belt across the chest and the lap belt low on the hips.

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 lots has changed in that time and 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.

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As stated, children most often reach these criteria when they are about 4'9" tall, somewhere between 8-12 years of age. Until then, it is important that they have the mechanism and technology that will keep them safe in a vehicle, that being a car or booster seat.

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Attachment #1 pg 3

3-10-17 HB 1323

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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

## North Dakota's Proposed Child Passenger Safety Legislation Frequently Asked Questions – HB 1323



### What will this legislation do?

- ◆ It will require 7 and 8 year old children to ride in a booster seat unless they are 4'9" tall.

### Why is this legislation needed?

- ◆ North Dakota's current child passenger safety law allows 7 and 8 year old children to ride in a seat belt, without a booster. However, seat belts do not properly fit most 7 and 8 year old children, which puts them at risk for injury or death in a crash.
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### Why can't we educate instead of legislate? Can't parents decide for themselves what's best for their children?

- ◆ The North Dakota Department of Health, Safe Kids Coalitions and other health and safety organizations educate parents about "best practice" recommendations, but some parents simply look to the law for guidance on buckling up their children.
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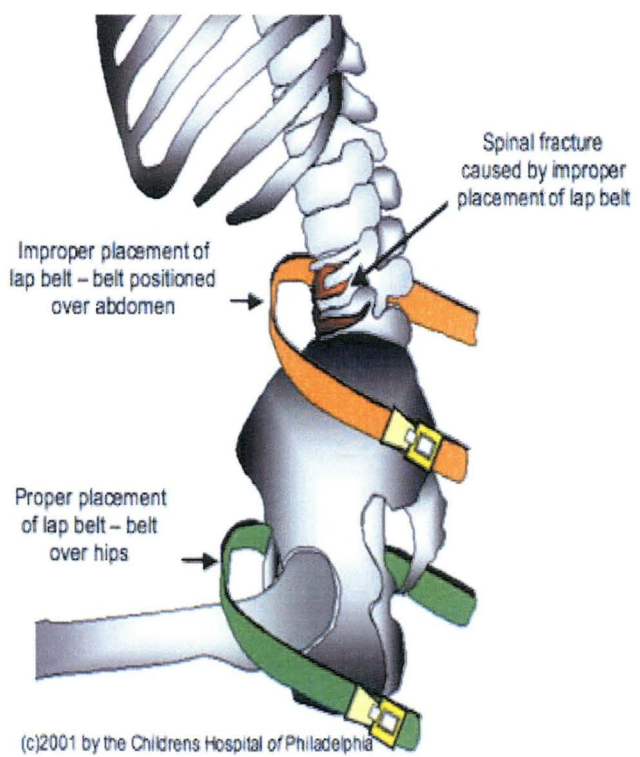
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**Correct:** Booster seats elevate the child, helping with correct fit of the lap and shoulder belt. Most have small belt guides that keep the lap belt low on the hips.



(c)2001 by the Childrens Hospital of Philadelphia

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Attachment # 3 pg. 1  
2-10-17 HB 1323

Testimony in Support of HB 1323  
Kwanza Devlin, MD  
3/10/17 – ND Senate Transportation Committee

Mr. Chairman and Members of the Committee, good afternoon. My name is Kwanza Devlin. I am a Family Medicine Physician who has practiced in Minot for nearly 6 years. My colleague has already explained HB 1323 and the safety reasons to support this measure. I would like to address some of the other medical issues surrounding this bill.

Carma already discussed how a child who is not big enough for an adult seat belt can be seriously injured or even killed in an accident. 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<sup>1</sup>. This is part of why the American Academy of Pediatrics (AAP) has issued a policy statement on this particular part of child restraint use<sup>2</sup>. 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.”***

The American Academy of Family Physicians has stood by that policy. You might be thinking, “I think my 7 year old is big enough for an adult seat belt.” This is a common misconception that I wanted to review. 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” (4’ 9”). Now, following that line with the one that intersects with it, you will notice that around 9 years of age, only the very tallest children (those at the 95%ile) would be big enough for an adult seat. This is why the AAP policy was written as it was. Most children

will reach 4'9" tall between 8 and 12 years old. That being said, advancing the booster seat law to at least include 7 year olds would clearly be more in line with the medical recommendations.

The last point that I want to make is more difficult for me as a physician. Even though the societies and organizations that govern us as physicians have made these recommendations, AND even though parents when surveyed often listed their healthcare provider as a resource for child passenger safety guidance, we do a horrible job at making sure parents know how to keep their kids safe in the car. I wasn't taught about child passenger safety in medical school. In residency, I learned more. The expectation is that these conversations occur at well child visits. However, the reality of a system which drives 15 minute appointments plus the need to focus on more medical issues (developmental milestones, growth, age appropriate screenings and immunizations), often push safety discussions to a handout that many parents forget and leave in the room. We need to do better at this, but I don't think we can do this alone. As physicians we have to work together with our health department, car-seat technicians, law enforcement and legislators to keep the children of North Dakota safe. As Carma indicated, parents seek guidance for keeping their kids safe in vehicles from a variety of sources, and it would be best if all those places, including the doctor's office, the printed materials from places like the health department, and our state law were consistent with each other. I think this bill is a step in the right direction. I thank you for your time today and would take any questions that you may have.

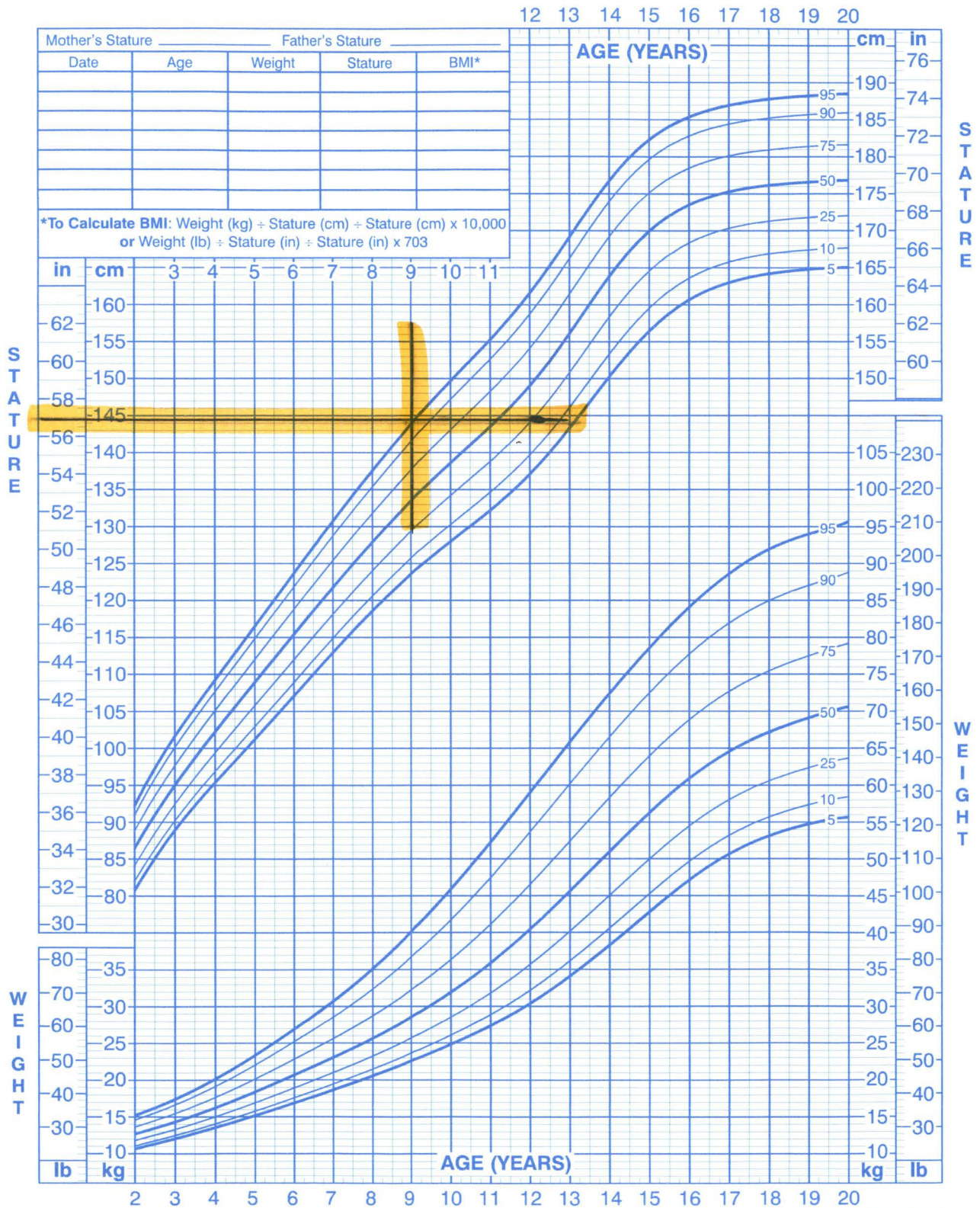
1. Arbogast KB, Jermakian JS, Kallan MJ, Durbin DR. *Effectiveness of belt positioning booster seats: an updated assessment*. Pediatrics 2009; 124; 1281-6.
2. Committee on Injury, Violence, and Poison Prevention. *Child Passenger Safety*. Pediatrics 2011; 127 (4); 788-93.

3-10-17 HB1323

**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>



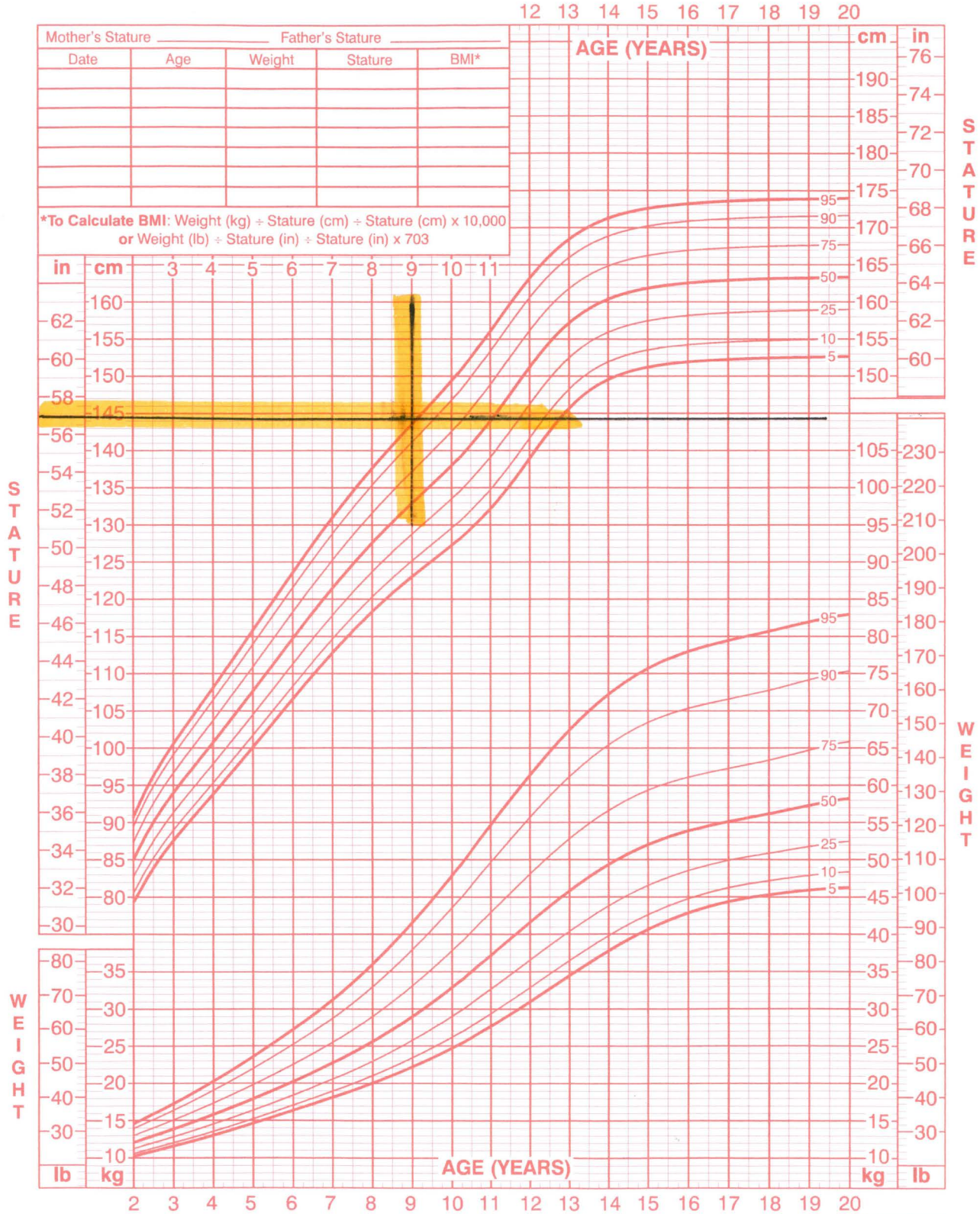
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Figure 21. Clinical growth chart 5th, 10th, 25th, 50th, 75th, 90th, 95th percentiles, 2 to 20 years: Boys stature-for-age and weight-for-age

**2 to 20 years: Girls  
 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>



Figure 22. Clinical growth chart 5th, 10th, 25th, 50th, 75th, 90th, 95th percentiles, 2 to 20 years: Girls stature-for-age and weight-for-age

Pediatric patient at health-supervision visit  
Assess age, weight, height, and presence of special health needs.

Does child have significant special health needs?

Consult complementary AAP policy and other resources for best-practice recommendations

What is child's age?

<2 y

2-8 y

>8 y

Infant-only CSS

Convertible CSS

What type of CSS is child using?

Has child outgrown weight or height limit for seat?

Is weight or height < rear-facing limit for convertible CSS?

Is weight or height < forward-facing limit for convertible or combination CSS?

Does child fit properly in the vehicle seat belt—usually around 4' 9" in height?

**1. Best-practice recommendation**  
Infant-only or convertible CSS used rear-facing

**2. Best-practice recommendation**  
Convertible or combination CSS used forward-facing

**3. Best-practice recommendation**  
Belt-positioning booster seat

**4. Best-practice recommendation**  
Lap-and-shoulder vehicle seat belt

**5. Best-practice recommendation**  
All children younger than 13 y should be restrained in the rear seats of vehicles for optimal protection.

Senate Transportation Committee

March 10, 2017

HB 1323

*Attachment # 4 pg 1*  
*3-10-17 HB 1323*

Chairman Laffen and members of the Senate Transportation committee. I'm Courtney Koebele and I represent the North Dakota Academy of Physician Assistants. Physician assistants (PAs) undergo rigorous medical training and must graduate from an accredited PA program in order to take the national certifying exam to be licensed. Like physicians and nurse practitioners, PAs must complete extensive continuing medical education throughout their careers.

PAs are licensed healthcare providers that practice medicine to include the diagnosis and treatment of medical conditions, ordering of diagnostic studies, and have prescriptive privileges for medications. Physician assistants also are primary care providers like physicians and advanced practice registered nurses. Therefore, we are asking that physician assistant be amended into the bill, as the House put in advanced practice registered nurses.

Thank you for your time today. I would be happy to answer any questions.

Proposed amendments to House Bill 1323

Page 2, Line 15, after "physician" insert ", physician assistant"

Page 2, Line 18, after "physician" insert ", physician assistant"



TESTIMONY TO:

SENATE TRANSPORTATION COMMITTEE

65<sup>TH</sup> NORTH DAKOTA LEGISLATIVE ASSEMBLY

HOUSE BILL NO. 1323 3/10/2017

Chairman Laffen and Committee Members:

I am Cheryl Rising, Family Nurse Practitioner (FNP) and Legislative Liaison for the North Dakota Nurse Practitioner Association (NDNPA). I am here to testify in support of House Bill 1323 a bill to amend and reenact section 39-21-41.2 and 39-21-41.4.

Advance Practice Registered Nurse's (APRN) are primary care providers throughout the state of North Dakota. On page 2 line 16 and 18 Advance Practice Registered Nurse was added. We work with individuals of all ages. This addition would eliminate any barriers to our scope of practice.

This concludes my testimony and I entertain any questions.

Cheryl Rising, RN, MS, FNP-BC

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