



Ohio Legislative Service Commission

Jacquelyn Schroeder

Fiscal Note & Local Impact Statement

Bill: S.B. 276 of the 130th G.A.

Date: March 11, 2014

Status: As Introduced

Sponsor: Sens. Jones and Tavares

Local Impact Statement Procedure Required: Yes

Contents: Requires the Department of Health to establish the Safe Sleep Education Program, hospitals and freestanding birthing centers to implement an infant safe sleep screening policy, and certain entities to adopt an internal infant safe sleep policy

State Fiscal Highlights

- **Department of Health.** The Ohio Department of Health (ODH) estimates that it could experience a minimal increase in costs associated with establishing the Safe Sleep Education Program. Costs include staff time to make the required educational materials available on ODH's website, annual evaluations of the effectiveness of the program, and developing questions for screening procedures.

Local Fiscal Highlights

- **Public hospitals.** Public hospitals could experience an increase in costs to provide a safe sleeping place before discharging an infant if it is determined that the infant does not have a safe crib, portable play yard, or other suitable sleeping place at the infant's residence. Public hospitals would also experience administrative costs to adopt safe sleep policies and screening procedures.
- **Distributing educational material.** Public hospitals and public children services agencies would likely experience an increase in administrative costs, including printing costs, to distribute educational material on safe sleep practices to parents or guardians of a newborn.

Detailed Fiscal Analysis

The bill requires the Ohio Department of Health (ODH) to establish the Safe Sleep Education Program, hospitals and freestanding birthing centers to establish safe sleep screening procedures, and certain other entities to adopt internal infant safe sleep policies.

Safe Sleep Education Program

The bill requires ODH to establish the Safe Sleep Education Program by developing educational materials that present information on safe sleeping practices and possible causes of sudden unexpected infant death. This educational information will be made available on the Department's website. These educational materials must be distributed to parents, guardians, or other individuals responsible for an infant by staff members of obstetricians' offices, pediatric physicians' offices, hospitals and freestanding birthing centers, public children services agencies, and ODH's Help Me Grow Program during home-visiting services. Materials must also be distributed by each child care facility operating in the state to each of its employees. ODH does not expect any additional costs to develop these educational materials, as they are already being developed and are nearly completed.

The bill also expands the ways in which educational materials on shaken baby syndrome must be distributed. Educational materials on shaken baby syndrome and safe sleeping practices are to be distributed in the same way, as outlined above. Each entity or person required to disseminate this information is immune from any civil or criminal liability for injury, death, or loss resulting from dissemination of, or failure to disseminate, the educational materials.

ODH estimates that there will be a minimal increase in costs to post the information on its website. Public hospitals, public children services agencies, and ODH's Help Me Grow Program may experience an increase in administrative costs to distribute the educational material to parents or guardians when receiving services from these entities.

Additionally, beginning in 2015, the bill requires ODH to conduct annual evaluations of the reports submitted by child fatality review boards to assess the effectiveness of the Safe Sleep Education Program. ODH may realize an increase in costs to collect the reports (sudden unexplained infant death investigation reporting forms) submitted from the child fatality review boards and to perform the required annual evaluations of the program.

Infant safe sleep screening procedures

The bill requires hospitals and freestanding birthing centers to implement an infant safe sleep screening procedure to determine whether an infant born at a hospital or freestanding birthing center has a safe crib, portable play yard, or other suitable

sleeping place at the infant's residence. The procedure must consist of questions for the parents, guardians, or other individuals responsible for the infant regarding the infant's intended sleeping environment. The Director of Health is required to develop questions which these facilities may use when implementing safe sleep screening procedures. ODH estimates that there may be a minimal increase in costs to develop the screening questions and make them available on ODH's website. There also may be administrative costs involved for public hospitals to develop their screening procedures.

If a facility determines that the infant does not have a suitable safe sleeping place, the infant may not be discharged from the facility until the facility arranges for the parents to leave the facility with a safe crib or portable play yard at no charge to the parents. Hospitals and freestanding birthing centers may collaborate with or obtain assistance from persons or government entities that are able to procure suitable sleeping places or provide money to purchase those items.

The Ohio Hospital Association (OHA) estimates the bill could cost hospitals between \$3 million and \$5 million statewide, a portion of which would be incurred by public hospitals, to provide a safe sleeping place before discharging an infant if it is determined that the infant does not have a safe crib, portable play yard, or other suitable sleeping place at the infant's residence. Of the 219 member hospitals of OHA, 18 are public hospitals.

Internal infant safe sleep policies

The bill requires the Director of Health to adopt a model internal infant safe sleep policy for use by entities required to distribute safe sleep educational materials and have infants regularly sleeping at a facility under the entity's control. The policy must specify safe sleep practices, include images depicting safe sleep practices, and specify sample content for an infant safe sleep education program that entities and individuals may use when conducting new staff orientation programs. ODH does not estimate any additional costs related to this provision.

Entities that are required to disseminate the safe sleep educational material and have infants regularly sleeping at a facility under the entity's control must adopt their own internal infant safe sleep policies. These policies must specify when and to whom educational materials on infant safe sleep practices are to be distributed to employees or volunteers of the facility and must be consistent with ODH's model internal infant safe sleep policy. Administrative costs may be involved for public hospitals to adopt an internal infant safe sleep policy.