

HOUSE OF REPRESENTATIVES  
COMMONWEALTH OF PENNSYLVANIA

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House Bill 2447  
Child Safety Seats and Child Seat Belt Use

\* \* \* \* \*

House Transportation Committee

Milton S. Hershey Medical Center  
500 University Drive  
University Fitness Center, Penn State Sports Medicine  
Hershey, Pennsylvania

Tuesday, August 27, 2002 - 9:15 a.m.

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BEFORE:

Honorable Ronald Marsico, Majority Chairperson  
Honorable Russ Fairchild  
Honorable Jess Stairs  
Honorable Jere Strittmatter  
Honorable Katharine Watson  
Honorable Keith McCall, Minority Chairperson  
Honorable Paul Costa  
Honorable Susan Laughlin  
Honorable David Levdansky  
Honorable Dante Santoni  
Honorable Stephen Stetler

**ALSO PRESENT:**

**Eric Bugaile**  
Majority Executive Director

**Jason Wagner**  
Majority Research Analyst

**Paul Parsells**  
Minority Executive Director

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Written Testimony Submitted By:

Catherine Chase  
Director of State Affairs  
Advocates for Highway and Auto Safety

1 CHAIRPERSON MARSICO: Well, good morning  
2 everyone. I want to welcome everyone to the House  
3 Transportation Committee meeting on child safety seats and  
4 child seat belt use. We have nice accommodations here and  
5 hospitality, thanks to the Milton Hershey Medical Center,  
6 Penn State University. And we appreciate you setting this  
7 up for us and allowing us to be here.

8 I want to also introduce, have the members  
9 introduce themselves and tell us where you're from and  
10 staff that's up here on the panel. So if we could start  
11 down here to my left with Representative Costa.

12 REPRESENTATIVE COSTA: Good morning. Sorry  
13 about that. I'm Representative Paul Costa from Allegheny  
14 County.

15 REPRESENTATIVE FAIRCHILD: Good morning. I'm  
16 Representative Russ Fairchild from Snyder and Union County.

17 MR. PARSELLS: I'm Paul Parsells, Director of  
18 the Transportation Committee for the Democratic Caucus.

19 REPRESENTATIVE McCALL: I'm Representative  
20 Keith McCall. I'm the Minority Chair, and I represent  
21 Carbon County.

22 REPRESENTATIVE STAIRS: Jess Stairs,  
23 Representative of Westmoreland County.

24 REPRESENTATIVE STRITTMATTER: I'm Jere  
25 Strittmatter, legislator from Lancaster County.

1                   REPRESENTATIVE WATSON: I'm Kathy Watson. I  
2 represent a portion of Bucks County.

3                   REPRESENTATIVE LAUGHLIN: I'm Susan Laughlin.  
4 I represent Beaver and Allegheny Counties.

5                   MR. BUGAILE: I'm Eric Bugaile. I'm the  
6 Executive Director of the Transportation Committee.

7                   CHAIRPERSON MARSICO: Okay. Thank you. I'm  
8 Representative Ron Marsico. I represent portions of  
9 Dauphin County. And I'm Subcommittee Chair pinch hitting  
10 for Chairman Geist.

11                   I'm going to ask the members that are here and  
12 also members of the audience that if you have cell phones,  
13 please turn them off. And if you have to use a cell phone,  
14 please go outside to use your cell phone. That's for, I  
15 guess, because of the reaction. So we appreciate if you  
16 would do that. Just go outside if you have to use a cell  
17 phone.

18                   Again, we're here for child safety seats and  
19 child seat belt use, primarily legislation dealing with  
20 House Bill 2447. And the prime sponsor of that bill,  
21 Representative Watson, is going to present some opening  
22 remarks before we get to our agenda. Representative  
23 Watson.

24                   REPRESENTATIVE WATSON: Thank you, Mr.  
25 Chairman. First of all, I'd like to thank Representative

1 Marsico and the members of the Transportation Committee for  
2 the opportunity to hold a hearing on House Bill 2447.

3 I'd also like to thank the Chairman of the  
4 House Transportation Committee, Representative Geist, for  
5 scheduling this hearing and encouraging a full discussion  
6 and analysis of this particular piece of legislation which  
7 I believe is important, an important highway safety issue  
8 that needs to be addressed. And obviously, you all believe  
9 it's important, too, enough to be here. And I appreciate  
10 those who have come to testify, many from a great distance  
11 but have a lot to bring to us.

12 When I was first approached by some highway  
13 safety educators and medical personnel and law enforcement  
14 officers to sponsor legislation to expand the Child  
15 Passenger Safety Law to require children riding in a motor  
16 vehicle to be appropriately restrained in an approved  
17 booster seat up to age 7 years, I immediately said yes.

18 I said yes because I spent 6 years as the  
19 Highway Safety Director for Bucks County. And during that  
20 time, I was not just a highway safety educator but I became  
21 truly educated, as I believe you will today. And that is  
22 about the need to protect our children in the Commonwealth  
23 when they are riding in motor vehicles.

24 And it seems that we have done a good job and  
25 we finally understand how to use infant seats and car

1 seats; though, we still have a problem with them being  
2 properly installed. But we have learned that for our  
3 younger children from birth to 4, and that's what our law  
4 says.

5           But I believe you will hear testimony this  
6 morning that conclusively proves, with medical data to back  
7 it up, that our children who are in that middle ground, the  
8 4 through 7, really need to be properly restrained in a  
9 booster seat.

10           And that in fact while many of us -- very  
11 well-meaning parents all of us -- think that we are  
12 protecting our children and putting them in the back seat  
13 and then putting them in that seat belt, indeed the seat  
14 belt gives a very false sense of security. It does not  
15 properly restrain children simply due to their age and  
16 their size.

17           So it is my hope that today we will learn a  
18 good deal. I have no pride of authorship on this bill.  
19 And in fact, someone said to me this morning, Well, I'm not  
20 happy with this. And I looked. And I said, You know what?  
21 Neither am I. I've learned a lot since it was introduced.

22           And I think we need to do a few corrections.  
23 And I suspect that some of those testifying this morning  
24 will be happy to suggest those corrections to us. Thank  
25 you again, Mr. Chairman, for the opportunity, members of



1 the committee, for taking the time out of schedules to be  
2 here. And I think it will be a very interesting discussion  
3 this morning.

4 CHAIRPERSON MARSICO: Thank you,  
5 Representative Watson. Let me just tell the members that  
6 the mikes are live on time up here, just so you're aware of  
7 that. And testifiers, please pull the mike close to you  
8 and speak directly into the microphone. Thank you very  
9 much.

10 First on the agenda this morning is Shannon  
11 Morris, Project Coordinator, Partners for Child Passenger  
12 Safety; and also Nicholas Lutz, Dr. Nicholas Lutz, Senior  
13 Trauma Fellow, Children's Hospital of Philadelphia. Good  
14 morning, and thanks for being here. You may begin.

15 MS. MORRIS: Thank you. Good morning,  
16 Representative Marsico and members of the committee. My  
17 name is Shannon Morris. I'm the Project Coordinator for  
18 Partners for Child Passenger Safety and a certified child  
19 passenger safety technician at the Children's Hospital of  
20 Philadelphia.

21 Thank you for inviting Children's Hospital to  
22 speak this morning about proposed amendments to  
23 Pennsylvania's traffic laws that would include booster  
24 seats for older children. Such a revision will  
25 significantly increase the safety of children traveling in

1 motor vehicles throughout the Commonwealth.

2 Partners for Child Passenger Safety is a  
3 research collaboration between State Farm Insurance  
4 Companies and the Children's Hospital of Philadelphia that  
5 began in 1997. Today, it is the nation's largest  
6 child-specific crash surveillance system.

7 Partners monitors children in crashes to learn  
8 how and why they are injured. We have information on more  
9 than 173,000 crashes involving 260,000 children. A  
10 multi-disciplinary research team works together to collect  
11 data, conducting in-depth telephone interviews and on-site  
12 crash investigations.

13 We estimate the number of children in crashes,  
14 identify specific safety problems for children in motor  
15 vehicles, suggest solutions to those problems, and evaluate  
16 the real-world effectiveness of vehicle and restraint  
17 safety features.

18 Partners findings are published regularly in  
19 scientific journals. Study results are utilized by the  
20 National Highway Traffic Safety Administration and  
21 legislators to guide public policy. Study results are also  
22 shared with auto and restraint manufacturers to improve  
23 product design. We are unique in that we provide  
24 evidence-based data on real-world car crashes.

25 This morning, I will report the relevant data

1 from our research which addressed the prevalence of  
2 inappropriate restraint and the resulting risk of injury.  
3 I will also demonstrate why booster seats are effective.  
4 Following my report, I will turn the microphone over to Dr.  
5 Nicholas Lutz, a senior trauma fellow and pediatric surgeon  
6 at the Children's Hospital of Philadelphia. Dr. Lutz will  
7 provide a clinical perspective on injuries encountered at  
8 Children's Hospital.

9           According to Partners estimates, more than 1.5  
10 million children are passengers in motor vehicle crashes  
11 each year in the United States. Today alone, more than 750  
12 children will be injured. Nearly 100 of these children  
13 will be seriously injured. The most common injuries will  
14 be to the brain, which can lead to devastating long-term  
15 disabilities.

16           Motor vehicle crashes are very violent events  
17 that occur in the blink of an eye. Our data indicate that  
18 nearly half of crashes involving children occur within 7  
19 minutes of the home. It only takes a split second for an  
20 errand, carpool, or family outing to turn into tragedy.

21           The inappropriate restraint of children in  
22 motor vehicles is an issue of epidemic proportions,  
23 particularly for children between the ages of 3 and 8 years  
24 old. NHTSA recommends that children remain restrained in  
25 car or booster seats until at least 8 years old or until

1 they reach a height of 4 foot, 9 inches.

2           However, in Pennsylvania, 88 percent of 4- to  
3 8-year-olds are inappropriately restrained in an adult seat  
4 belt. Less than 1 percent of children who are 6, 7, and 8  
5 years old are riding in booster seats.

6           The epidemic of inappropriate restraint is  
7 demonstrated by this U-shaped graph. This graph represents  
8 our national data which correlates closely to  
9 Pennsylvania-specific data. While parents generally do a  
10 good job of restraining young infants and toddlers,  
11 appropriate restraint drops to 52 percent beginning at age  
12 3.

13           By age 4, the most prevalent form of restraint  
14 for children is an adult seat belt. Only 24 percent of  
15 children age 4 are in booster seats. By age 7, virtually  
16 no children are in booster seats.

17           Our research shows that these inappropriately  
18 restrained children are at a significantly increased risk  
19 of serious injury in the event of a crash. We have found  
20 that children who are placed in a seat belt rather than a  
21 car or booster seat are 3.5 times more likely to suffer a  
22 serious injury.

23           Conversely, children who are restrained in  
24 booster seats do extremely well in crashes. Partners data  
25 show that the risk of injury for children properly

1 restrained in a car or booster seat is less than 1 percent.  
2 While any form of restraint is better than no restraint at  
3 all, car and booster seats provide an added 60 percent  
4 reduction in injury risk when compared to children in seat  
5 belts through age 7. That's correct, our scientific data  
6 clearly demonstrate that the benefits of booster seats  
7 continue through age 7.

8           Currently, there is not enough data on  
9 8-year-olds to assess their risk because so few 8-year-olds  
10 use booster seats. However, biomechanics and  
11 anthropometrics suggest that up to the height of 4 foot, 9  
12 inches, children would still benefit from booster seats.

13           Why are booster seats far more effective than  
14 adult seat belts in protecting 4- to 8-year-olds in car  
15 crashes? Standard vehicle seat belts are designed for  
16 adults, not children. During a crash, adult seat belts  
17 spread the force of a crash over strong hard bones such as  
18 the hips, shoulders, and chest, and keep the occupant in  
19 place so that the head, face, and chest are less likely to  
20 strike the inside of the vehicle.

21           An adult seat belt fits correctly when the lap  
22 portion of the belt rides low over the hips and the  
23 shoulder portion of the belt crosses the sternum and the  
24 shoulder. A correct seat belt fit is not usually achieved  
25 until a child is 4 foot, 9 inches.

1           At this height, a child's thigh is long enough  
2 to sit against the back of the seat; the hips are  
3 sufficiently developed to anchor the lap belt; and the  
4 child's sitting height is sufficient for the shoulder belt  
5 to fit properly over the shoulder and the sternum.

6           When a child is prematurely graduated to an  
7 adult seat belt, the lap portion of the belt rides up over  
8 the soft abdomen. The shoulder portion crosses the neck or  
9 face, causing many children to move the shoulder belt  
10 behind their back or under their arm.

11           This incorrect fit of the vehicle's belt  
12 places a child at risk for sliding out of the lap belt  
13 during a crash, also known as submarining. In addition,  
14 rapid forward jackknife bending around a poorly positioned  
15 adult seat belt increases the risk of intra-abdominal and  
16 spinal cord injuries, also known as Seat Belt Syndrome.  
17 Brain injury often results due to the impact of their head  
18 with their knees or the vehicle's interior.

19           Partners data show that the majority of  
20 injuries to children who are prematurely graduated to seat  
21 belts involve the head. Our data also show that children  
22 in adult seat belts suffer the vast majority of the  
23 reported cases of abdominal injuries, including intestinal,  
24 liver, and spleen injuries.

25           I can demonstrate the safety advantage of a

1 belt-positioning booster seat by this crash simulation.  
2 The above image shows a 6-year-old child properly  
3 restrained in a belt-positioning booster seat. This child  
4 barely moves during the 35 mile per hour frontal crash.

5 This same child is also noted in a simulation  
6 of the same crash below. Here, he is shown improperly  
7 restrained in an adult seat belt. Like many children, he  
8 has slipped the shoulder portion of the belt behind his  
9 back. As you can see, he is thrown forward dramatically.

10 The inappropriate fit of the adult seat belt  
11 and lack of upper body restraint puts the child at risk for  
12 severe head, spine, abdominal, and brain injury.

13 At this point, I would like to introduce Dr.  
14 Nicholas Lutz. As mentioned earlier, he is a senior trauma  
15 fellow and pediatric surgeon at the Children's Hospital of  
16 Philadelphia.

17 DR. LUTZ: Thank you, Mr. Chairman, ladies and  
18 gentlemen. Thank you very much for the opportunity to  
19 testify on such an important issue. As one of only 2 Level  
20 One Pediatric Trauma Centers in Pennsylvania, the  
21 Children's Hospital sees more than 200 admissions each year  
22 involving children who are seriously injured in motor  
23 vehicle crashes. And these children represent about 20 to  
24 25 percent of all trauma admissions.

25 These children are not crash test dummies as

1 you just saw. They're real children. By the time they  
2 reach the hospital, all we can do is the best, is our best  
3 to repair the damage. Unfortunately, most serious injuries  
4 to children in crashes affect the head or the face. Yet  
5 injuries to a child's growing brain can result in a  
6 lifetime of disabilities.

7           Facial scarring and disfiguration often have  
8 significant emotional consequences for a child and his or  
9 her family. Other injuries, such as spine, shoulder, rib  
10 fractures, result from excessive upper body and head  
11 movements during the crash due to the inappropriate  
12 restraint like the premature use of an adult seat belt or,  
13 worse, from no restraint at all.

14           We also see significant abdominal injuries  
15 resulting from blunt trauma to the abdomen caused by the  
16 lap portion of the adult seat belt riding up over the  
17 child's belly. This is known as the Seat Belt Syndrome.  
18 And in fact, studies show that motor vehicle crashes are  
19 the number one cause for blunt abdominal injuries in  
20 children. Such trauma can require surgery, long hospital  
21 stay, and can lead to long-term digestion or nutrition  
22 problems.

23           According to recent analysis of Partners data,  
24 inappropriate restrained children are 4 times more likely  
25 to sustain an intestinal or bladder injury when compared to



1 properly restrained children. So an ill-fitting lap belt  
2 can also compress the vertebrae and potentially cause  
3 long-term back problems.

4           Booster seats help to correct the position of  
5 the belt over the child, lessening the risk of serious  
6 injury. We have too many cases to report that clearly  
7 demonstrate the need for appropriate restraint. Let me  
8 tell you about one child's experience from just a few  
9 months ago. And let's call him Steven.

10           Steven was a healthy 5-year-old child riding  
11 in the family SUV in the Brandywine Valley of Chester  
12 County. His 12 weeks old pregnant mother was sitting in  
13 the front passenger seat while his father was driving.  
14 Steven was restrained in the rear seat with a lap and  
15 shoulder seat belt as suggested by Pennsylvania State law.

16           At an intersection, their SUV was hit on  
17 Steven's side by another car. Steven lost consciousness  
18 for a few seconds. He had to be pulled out of the car by  
19 his mother. All 3 of them were taken to a local hospital  
20 where Steven was diagnosed with a rupture of his left eye,  
21 laceration to his face, and a serious splenic injury.

22           He had to undergo urgent surgery to repair the  
23 spleen and to stop the internal bleeding. Then he was  
24 transferred to the Children's Hospital for further  
25 management of the eye injury. Both parents had to remain

1 in the referring hospital, and they were in good condition.

2           A second operation was then performed the day  
3 after the crash to repair Steven's left eye. Steven's  
4 recovery remained uncertain for a while, especially for the  
5 eye. And a week after the crash, Steven was able to return  
6 home to his family. Nightmares and images of the crash  
7 have haunted Steven's nights.

8           And a third operation had to be, was required  
9 a few weeks later to remove the stitches and check the eye  
10 again. Steven will always have scars from the accident and  
11 may face long-term problems with both vision and digestion.  
12 Fortunately, his spleen was not removed but repaired,  
13 allowing him to continue, allowing the spleen to continue  
14 and protect him against life-threatening infections.

15           Had Steven been appropriately restrained in a  
16 belt-positioning booster seat, according to NHTSA's  
17 recommendations, the adult seat belt system would have  
18 provided more optimal protection. There would have been  
19 less head excursion, possibly preventing the facial and eye  
20 injury.

21           The lap portion of the adult seat belt would  
22 have set low on his hips rather than across his soft  
23 abdomen, preventing the injury to the spleen. Instead,  
24 Steven's injuries may result in a lifetime of disability.  
25 This is a -- this is tragic because it could have been

1 easily prevented by the use of a booster seat. And a  
2 booster seat is much cheaper than the hospital stay.

3           Obviously, no one is immune to the risk of  
4 being involved in a car crash. However, properly  
5 restrained children in a car and booster seats can  
6 significantly reduce the risk of a crash turning into a  
7 tragedy. A child restraint law for Pennsylvania that is in  
8 close alignment with best practices can certainly help  
9 eliminate parents' confusion and improve Pennsylvania's  
10 crash injury statistics for children.

11           As a pediatrician, trauma surgeon, and a  
12 father of 3, I would much rather prevent an injury than to  
13 have to repair the damage. We are greatly encouraged by  
14 booster seat laws recently passed in other states,  
15 including our neighbors New Jersey, Maryland, and Delaware.

16           Recently published research from the Partners  
17 for Child Passenger Safety study show that since 1998,  
18 booster seat use has been increasing approximately 75  
19 percent each year. While booster seat use is still  
20 dangerously low with only 13 percent compliance, this trend  
21 demonstrates that motivated parents are receptive to  
22 booster seat use. And it will take an enforceable,  
23 evidence-based law to make further significant increases in  
24 booster seat law use.

25           Thank you, Representative Marsico and ladies

1 and gentlemen of the committee, for having drafted this  
2 legislation. And if enacted, this law will save lives and  
3 prevent injuries to children.

4 CHAIRPERSON MARSICO: Thank you very much.  
5 Before I ask the members if they have any questions, I want  
6 to recognize Representative Levdansky from Allegheny County  
7 and Representative Santoni from Berks County. Chairman  
8 McCall.

9 REPRESENTATIVE McCALL: One question. I'm  
10 not sure if I should direct it to the Doctor or to Shannon,  
11 but either one can jump in. Tell me. Would it be  
12 better -- when I look at your graph, it was certainly  
13 age-specific where you said, you know, where 6-, 7-, or 5-,  
14 6-, 7-year-olds are not being restrained properly.

15 However, you also refer to children being 4  
16 foot, 9 inches and larger, that they could actually be  
17 restrained by seat belts and not being in a booster seat.  
18 Should the legislation that we try to pass in the  
19 Legislature be directed more toward the height of the child  
20 rather than the age of the child?

21 MS. MORRIS: Best practice recommendations  
22 based on science recommend that height and fit are the best  
23 indicators. However, the enforceability of height may be  
24 very difficult. As scientists and advocates, we recognize  
25 that a model law may not be able to achieve exact alignment

1 with best practice.

2           We think, as scientists, that age is an  
3 acceptable guide for parents for appropriate use. And Dr.  
4 Lutz can comment on growth charts and recommended --

5           DR. LUTZ: I think it's an easy way to tell  
6 the parents age. I mean, if you ask everybody, all the  
7 parents would know the age of their children. And the  
8 height is maybe different. And also, according to the  
9 charts of the, of the, in the United States, more than 95  
10 percent of children will be below a height of 4 foot, 2 up  
11 to age 7.

12           So in other words, if you have a law that uses  
13 age, you will imply more than 95 to 98 percent of the  
14 children within this height.

15           REPRESENTATIVE McCALL: And what about risk to  
16 the larger children, say, above 4 feet, 9 inches, what are  
17 you seeing as far as a risk factor with those children that  
18 are greater than 4 feet, 9 inches?

19           DR. LUTZ: If I understand your question, what  
20 we see with all the children is when they're properly  
21 fitted, when they're higher, they get into the situation  
22 where the seat belt is properly fitted and we don't see,  
23 and we have seen a dramatic decrease in the abdominal  
24 injuries where the seat belt is properly fitted on the hips  
25 and hold the hips so it doesn't have this impact on the

1 abdomen as well as on the face and the shoulders.

2           So this is another way to actually, for us to  
3 really go into this, encourage the use of booster seats.  
4 Actually, we had a kid last week -- I was thinking of you  
5 last week as we had a kid who was from New Jersey, was  
6 using, a 6-year-old girl who was using a booster seat.

7           And she had -- they usually come with a mark  
8 on their abdomen from the seat belt, which is a good way  
9 for us to wonder and to be worried about an intra-abdominal  
10 injury. And she had this mark just above the hip, and she  
11 had no abdomen injury.

12           And I think the fact that she was using the  
13 booster seat has prevented her from having any abdominal  
14 injury.

15           REPRESENTATIVE MCCALL: Very good. Thank you.

16           CHAIRPERSON MARSICO: Thank you. Any other  
17 questions? Representative Levdansky.

18           REPRESENTATIVE LEVDANSKY: Thank you, Mr.  
19 Chairman. Again, a question for either. We had purchased  
20 not a booster seat once the kids sort of outgrow, you know,  
21 the original seat. We purchased a device -- and I want  
22 your opinion on it -- that essentially with Velcro, it  
23 narrowed the angle or sharpened the angle to hold the 2  
24 pieces of the seat belt together. We purchased a couple of  
25 these.

1                   And essentially what they do is they, again,  
2 they bring the shoulder part of the seat belt, you know,  
3 tight a little closer to the lap portion. Have you had any  
4 experience with that mechanism and any opinion about it?

5                   MS. MORRIS: I believe you're referring to a  
6 piece of Velcro or a Velcro device that is not used with a  
7 booster seat. It's placed on the seat belt.

8                   REPRESENTATIVE LEVDANSKY: Yes.

9                   MS. MORRIS: I believe they're called the Safe  
10 Fit, or there may be other names for it. They are not  
11 currently -- they don't pass a standard that is applied by  
12 NHTSA. We do not have any data on them in our study. But  
13 what I can tell you from anecdotal reports is that while  
14 the role of that device is to adjust the shoulder belt, at  
15 the same time, it tends to lift the lap portion of the belt  
16 up over the child's abdomen.

17                   So from anecdotal reports, they are not  
18 recommended. I'm sure there's more people here testifying  
19 who are educators who can better testify on that. But I  
20 know from just anecdotal reports, they have been known to  
21 pull the lap belt up over the abdomen while at the same  
22 time they do adjust the shoulder portion of the belt.

23                   DR. LUTZ: Another anecdote is where I come  
24 from, Switzerland, they're very popular. And I've got 3  
25 boys. And before I came here, I was using that on my 3

1 boys. And indeed, when I came here, we were studying the  
2 data and looking at everything. And now they all have,  
3 they're all using a booster seat.

4 The fact what Shannon was saying is true. The  
5 upper part of the seat belt is adjusted for the shoulder,  
6 but the lower part of the seat belt goes higher. And you  
7 have actually a very clear impression or area. The seat  
8 belt will then be exactly where you don't want it to be, in  
9 the middle of the abdomen instead of very low on the hips.

10 And the other thing is that the booster seat  
11 is also helping for the legs of the child to be dropping  
12 and for his buttocks to be way in the back of the seat.  
13 And if you use this device which you mentioned, it doesn't  
14 affect anything.

15 You still are having an adult seat and a child  
16 sitting on there with his legs being all the way forward  
17 because he cannot let his legs fall properly.

18 REPRESENTATIVE LEVDANSKY: Thank you.

19 CHAIRPERSON MARSICO: Representative Stairs.

20 REPRESENTATIVE STAIRS: Thank you, Mr.

21 Chairman. I guess my question would be to the panel. And  
22 maybe later on, some other people might want to respond to  
23 my thinking. Now, I have no doubt about your scientific  
24 data. And I agree with you. I wear a seat belt.

25 And as a grandparent, I'm going to make sure



1 that my little granddaughter is properly restrained. And I  
2 really appreciate hearing this. But my question is not so  
3 much in doubt or agreement with you, but it's more of the  
4 political end. Should we legislate this idea, or should we  
5 educate?

6 And I go back a number of years ago when we  
7 had the original seat belt legislation and personal  
8 privacy, freedom, you know. In my district -- I'm from the  
9 Frontier in Westmoreland County where we, sometimes we bail  
10 against being told what to do from Harrisburg.

11 But many of my senior citizens that go back a  
12 couple years ago, we passed the original seat belt law  
13 where it infuriated that we would dictate, we would mandate  
14 that they wear seat belts. And I'm sure many do now, but  
15 many don't. And then we went to the small children. Now  
16 we're going to be mandating for another age group.

17 I don't disagree with you. I agree with you.  
18 But should we -- the political question is what I asked.  
19 Should we try to educate people and let them do it  
20 voluntarily? And hopefully they do that. Or should we use  
21 the heavy hands of the law that says, Okay, you're going to  
22 be cited?

23 Politically, you know, I get the questions  
24 back home of the, you know, big brother, personal freedoms.  
25 And you can, you know, you can name the gamut of the run.

1 So that's my question I ask the panel. And maybe others  
2 who want to, may answer that later on.

3 MS. MORRIS: We actually conducted a research  
4 study that was funded by the National Highway Traffic  
5 Safety Administration looking at barriers to booster seat  
6 use. And there were multiple barriers, including lack of  
7 knowledge, access to booster seats.

8 But one of the leading barriers was the law  
9 and that it was very much noted to us from these  
10 participants in the focus groups that when they took their  
11 child or children out of car seats at age 4, they were  
12 following the law and that they were very surprised to hear  
13 that after 4 years old, a child still should be using a car  
14 seat or a booster seat because that is what is safest  
15 because they felt that if the law stated that a child  
16 should use a booster seat up till age 4, well, then it must  
17 have been safe enough to not use a booster seat after 4.  
18 So what we know is that parents do look to the law.

19 CHAIRPERSON MARSICO: Representative Costa.

20 REPRESENTATIVE COSTA: Thank you, Mr.  
21 Chairman. I basically had the same questions that  
22 Representative Stairs had. As a parent of 3 children who  
23 strongly enforces seat belts, I actually had a neighbor who  
24 the bottom picture happened to. She had gallbladder  
25 problems and whatnot.

1           But I look at your chart. And this drives me  
2 crazy more than anything: When you're driving down the  
3 road and you see little kids that are sitting in the front  
4 seat or on top of the front seat. But even that the law  
5 says now it's 4 years old, why do we have such a drastic  
6 drop-off from the 2-year-old to the 3-year-old?

7           It's less than 50 percent. And if we do pass  
8 a law, how do we enforce the 4- to 8-year-old range? And  
9 even, Doctor, you mentioned in your testimony we need  
10 something enforceable. What do you recommend that we do?  
11 I mean, granted, we can't have our police officers 24 hours  
12 searching for kids not in a seat belt.

13           But what more can we do? You mentioned  
14 educating them and letting them know. But even though  
15 people know -- and it's on the news. I see it all the  
16 time -- we still have the drastic drop-off of 3-year-olds  
17 and 4-year-olds. How do we get them back?

18           MS. MORRIS: One thing you want to make sure  
19 you know, that this graph indicates appropriate restraint.  
20 We still have -- obviously, there are children -- it may be  
21 against the law -- but that are being placed in seat belts  
22 before age 4.

23           However, the bars indicate the appropriate  
24 restraint for a child at that age. So for example, if a  
25 child was 5 and in a seat belt and should be in a booster

1 seat, they are ranked as not in the appropriate restraint.  
2 So that's why the difference between the 3-year-olds to the  
3 4-year-olds may not necessarily mean that they're not in a  
4 restraint. It just means they're not in the appropriate  
5 restraint for their age.

6 REPRESENTATIVE COSTA: Okay. Thank you.

7 CHAIRPERSON MARSICO: Any other questions?

8 (No response.) Well, thank you very much for being here,  
9 for your expertise and providing information. We certainly  
10 appreciate your time and effort with this. Thank you very  
11 much.

12 Okay. Next on the agenda is Susan Rzucidlo,  
13 Pediatric Trauma Coordinator with the Penn State Children's  
14 Hospital and the coordinator also for the Dauphin County  
15 SAFE KIDS Coalition and also the co-chair of the BOOST  
16 Pennsylvania KIDS. Good morning. Good to see you again.

17 MS. RZUCIDLO: You, too. You have my written  
18 testimony as well as there's a blue folder that has  
19 additional data and information that I'll be referring to  
20 during my testimony.

21 CHAIRPERSON MARSICO: Excuse me a second. Are  
22 Rhonda and Allie Stump going to be part of your testimony?  
23 Do you want to come up now? Good morning.

24 MS. RZUCIDLO: Good morning. Thank you again,  
25 Representative Marsico and to the members of the committee,

1 for taking your time for this important issue. My name is  
2 Susan Rzucidlo. I'm the Pediatric Trauma Nurse Coordinator  
3 at the Penn State Children's Hospital and Penn State Shock  
4 Trauma Center, co-chair BOOST PA KIDS, and coordinator of  
5 Dauphin County SAFE KIDS.

6 Thank you for the opportunity to speak about  
7 enhancing Pennsylvania's Child Passenger Safety Law. In  
8 Pennsylvania, there are 27 accredited trauma centers that  
9 are committed to providing excellent care for the treatment  
10 of injuries as well as the prevention of those injuries.  
11 There are 6 trauma centers that are designated to care for  
12 injured children.

13 Despite ongoing efforts to better protect  
14 children in cars, motor vehicle crashes remain the leading  
15 cause of death and injury for children. We know the best  
16 practices as to how to protect children when they travel.  
17 We know that in order to persuade parents to buckle up  
18 their children, we need to educate them about the benefits  
19 and the consequences of not restraining their children.  
20 However, the law can leave children lawfully restrained but  
21 woefully at risk.

22 In your packet of materials, under the first  
23 tab is rating of the laws. In February of 2001, during  
24 child passenger safety week, the National SAFE KIDS  
25 Campaign published "Child Passengers at Risk in America", a

1 national rating of child occupant protection laws.

2           This is a comprehensive analysis of the  
3 nation's child passenger safety laws. It was found that  
4 many states had laws in place that did not protect children  
5 and especially did not protect children up to booster seat  
6 age. Pennsylvania was one of the states along with nearly  
7 half of all the states that earned "F" ratings, and more  
8 than one-third earned "D" ratings.

9           This prompted local leadership across the  
10 State of Pennsylvania to look at our Child Passenger Safety  
11 Law and make recommendations for upgrading that law. The  
12 information about the study and how Pennsylvania's law was  
13 graded is referenced in your materials.

14           And again, I included the introduction model  
15 legislation from the National SAFE KIDS Campaign, details  
16 of how the bills were looked at. Again, the breakdown was  
17 around the age of the children being restrained, the public  
18 education component, and the penalty enforcement, penalty  
19 enforcement provisions.

20           So that -- and then there's a state map that  
21 included the ratings for our neighboring states and across  
22 the country and then the details of Pennsylvania's rating  
23 at that point.

24           The second study that was conducted was by the  
25 National Insurance Institute. This initial study was

1 released in December of 1999. And included in your  
2 materials, there's been an upgrade in April of 2002. The  
3 state laws were again reviewed looking at many safety  
4 issues from DUI, driving under the influence; use of red  
5 light cameras; motorcycle helmet use; child restraint laws;  
6 and seat belt use.

7           This rating scale, rather than an "A" through  
8 "F" from National SAFE KIDS, looked at good, acceptable,  
9 marginal, and poor. Pennsylvania's child safety law was  
10 again rated as poor. I've included in your materials the  
11 ratings from the states from the National Insurance  
12 Institute.

13           Again, it explains how those rating scales  
14 were adopted and again why Pennsylvania would have received  
15 a poor rating. Both reports cited gaps in Pennsylvania's  
16 Motor Vehicle Code, Title 75, which has led to the ultimate  
17 introduction of Senate Bill 1393 and its companion bill,  
18 House Bill 2447.

19           Included in your materials also from the  
20 National SAFE KIDS Campaign is the current status of the  
21 child passenger safety laws across Pennsylvania. As you'll  
22 note in the National Insurance Institute materials as well  
23 as from the National SAFE KIDS Campaign, with these ratings  
24 and the work of many across the country, many laws have  
25 been upgraded to better protect children.

1           The next tab, if you could turn to, is the  
2 data section. I would like to share with you that all the  
3 statistics and numbers that you will hear throughout the  
4 day represent a child and a family to me. From my own  
5 personal beliefs, one is too many. Many may say it's none  
6 of your business; it's my child; I should be able to do  
7 what I like.

8           However, I would like to counter that,  
9 according to the data provided in your packet from the  
10 Department of Health from 1999, the mean hospital charges  
11 by payer source when injured children are brought either to  
12 the accredited trauma centers or to a local hospital for  
13 treatment after a motor vehicle crash, these numbers  
14 certainly show that it affects all of Pennsylvania's  
15 citizens.

16           For the treatment of injuries, you may be  
17 aware that the first payer would be commercial insurance,  
18 which is motor vehicle coverage. Under Pennsylvania law,  
19 minimum auto coverage is \$5,000. When auto coverage has  
20 been exhausted, which is often early in the child's  
21 treatment and evaluation, secondary coverage -- Blue Cross,  
22 Medicaid, or direct patient billing, self-pay -- is  
23 utilized.

24           As you see from the chart, hospital charges  
25 for children under age 5 is about \$14,000 for commercial,



1 49,000 for Blue Cross, 11,000 for Medical Assistance, and  
2 direct patient billing of almost \$9,000. Please note again  
3 that these are mean charges. Some could be lower; some  
4 could be higher. All of us are impacted by these costs.

5           In the 5- to 9-year-old group, which would  
6 encompass the majority of our booster seat group, children  
7 currently not included in the law, you'll note in some cost  
8 categories the costs are even more significant. I believe  
9 the most tragic cost is the impact on the child's family  
10 who now must care for a child with disabilities who can't  
11 play or go to school.

12           In your packet, I've included several cases  
13 treated at our trauma center to share the cost of caring  
14 for these injured children. The use of a \$30 booster seat  
15 could be deemed priceless if serious injury had been  
16 prevented. Again, I ask, What is the value we place on a  
17 child's life? Parents have related, I didn't know that my  
18 child should have been in a booster seat. It should be the  
19 law.

20           I've also included in your packet information  
21 from the Department of Transportation 1999 crash data. As  
22 you'll see for children 0 to 1 years, child restraint use  
23 was almost 94 percent; age 2, 82 percent; age 3, 65  
24 percent. Under current Pennsylvania law, we should have  
25 100 percent use for these age groups.

1                   As soon as the child reaches their 4th  
2 birthday, current law does not require a child restraint or  
3 a seat belt if the child is not in the front passenger  
4 seat. As you will note, the numbers drop dramatically.  
5 And please remember that seat belts do not safely restrain  
6 young children.

7                   The next section I'd like to address is the  
8 BOOST Pennsylvania KIDS, which is a group of advocates made  
9 up of police, trauma professionals, members from the Bureau  
10 of Highway Safety, many of us across the state, parents  
11 like Mrs. Stump. We would like to share a potential wish  
12 list and some things about legislation.

13                   The first component: Restraints - increasing  
14 the age to under 7 years. I've been asked at meetings in  
15 the last year, If you had one thing, what would you want?  
16 It would be increase that age to under 7. All of the other  
17 things are additive factors. We request the law to be  
18 expanded.

19                   Under current law passed in 1983, it requires  
20 children under 4 to be in restraint. Again, as was shared  
21 previously, children need to be at least 4 foot, 9 inches  
22 tall and weigh approximately 80 pounds. In the last week,  
23 I have cared for several children 4 years of age who were  
24 injured while restrained in adult seat belts.

25                   In one crash, the mother was reaching to get

1 the child back in the seat belt, veered off the road, and  
2 had a significant crash. Again, this injury could have  
3 been prevented had the child been in a booster seat. BOOST  
4 PA KIDS recommends using age, not age and poundage. It has  
5 been shared by police officers there could be issues  
6 proving the child's weight at the time of citation.

7 Standards - Section 1725.1(d). There also  
8 have been questions raised, do we need to define booster  
9 seat? Referencing the Federal Motor Vehicle Standard, 49  
10 CFR 571.213, which reading that was a very difficult task,  
11 which includes detailed descriptions -- that was not in my  
12 written testimony -- includes detailed descriptions of all  
13 types of child restraints, including booster seats and  
14 vehicle seat belt systems we believe would be adequate.

15 Section 4581 (2) - Restraint Systems. Current  
16 language is that the driver will assure that the front seat  
17 passenger is restrained. We would ask the change to  
18 require that the driver be held responsible that 7- to  
19 18-year-olds would be restrained anywhere in the vehicle.

20 This would not only protect children once they  
21 graduate out of the booster seat as well as teens that are  
22 at high risk of injuries as well. This section would  
23 remain a secondary offense, which requires that the driver  
24 be cited for a moving violation.

25 Enforcement - Section 4581(b) - Offense:

1 Unfortunately, even with the current law, enforcement is  
2 necessary if families do not choose to follow the law. Two  
3 ways to enforce the law could be fines could be issued  
4 and/or increased and a citation for points. If families  
5 would choose to not follow the Child Passenger Safety Law,  
6 then there are consequences.

7           The most important being the potential of  
8 their child being injured, and perhaps the most horrid  
9 consequence is their child would be killed. However, if we  
10 look at enforcement from fines and points, the current bill  
11 could allow for a fine increase to \$25 to \$100.

12           The citation would include the fine and  
13 additional costs, such as EMS and administrative costs.  
14 The fines as under the current law would be deposited into  
15 a fund administered under the Department of Transportation  
16 Bureau of Highway Safety.

17           The money is used to support a loaner program  
18 for the purchase and distribution of seats. Our facility  
19 is one of the many loaner programs that receive seats  
20 throughout this fund.

21           Contained in House Bill 2447 and the original  
22 Senate Bill 1393 is language for points. The citation  
23 would not be a moving violation; and therefore, they would  
24 not impact the drivers' insurance rates. In my opinion, it  
25 is not as important as increasing the fine and certainly

1 raising the age for the restraint to under age 7.

2 Enforcement - Section 1725.1 - Waiver of Fine:

3 The current language shall be imposed for conviction is  
4 Subsection A. The waiver of the fine if a person receives  
5 a citation issued by the proper authority for violation of  
6 that subsection, a district justice magistrate or judge  
7 shall dismiss the charges.

8 The request from the district justices as well  
9 as many police officers is that the language would be  
10 changed to "may." We would ask that the "may" be  
11 implemented so there could be latitude if the seat is  
12 obviously very old or if there are other issues around the  
13 citation related by the police officer.

14 Law into effect in 120 days. We ask that it  
15 would remain a component of the bill that the changes go  
16 into effect in 120 days. It is important to allow adequate  
17 time for child passenger safety advocates to educate  
18 families about the importance of booster seats.

19 We believe that 4 months will allow time for  
20 families to purchase a seat or obtain a free seat through  
21 many sources that are available, such as Department of  
22 Transportation Highway Safety Programs, SAFE KIDS  
23 Coalition, local police, and many other agencies.

24 The final tab in your packet, there's model  
25 legislation. And I've also included a section, just a few

1 of the resources that are available from Emergency  
2 Medicine, Medical Services for Children, which is an EMS  
3 group, from the National SAFE KIDS Campaign. The Bureau of  
4 Highway Safety has materials. There's many paper education  
5 materials that are available. Some of those I've included  
6 for you.

7 In conclusion, I'd like to again thank the  
8 committee members and Representative Marsico as the Chair  
9 for taking your time during a busy summer to come to  
10 today's hearing. With the current technology and knowledge  
11 about child passenger safety restraints, the time has come  
12 to amend Pennsylvania's Child Passenger Safety Law.

13 I believe that a stronger law coupled with  
14 effective education campaigns is the cornerstone of  
15 Pennsylvania's commitment to children. Trauma  
16 professionals and child safety advocates are dedicated to  
17 whatever measures are needed to assure children travel in  
18 cars as safely as possible. Thank you.

19 CHAIRPERSON MARSICO: Thank you, Susan.

20 MS. RZUCIDLO: I'd like to now introduce Mrs.  
21 Rhonda Stump and gorgeous Miss Allie.

22 MS. STUMP: Thank you for inviting me to share  
23 our story. I commend all of you for considering this vital  
24 issue for the safety of Pennsylvania children like Allie.  
25 Several years ago, my husband Jim, my 2 daughters, ages 6

1 months and 2 years, and I were involved in a major 3-car  
2 crash at 55 miles per hour.

3           Fortunately, we are one of the happy stories,  
4 unlike so many others that you hear. We walked away from  
5 the scene of the crash injuriless thanks to seat belts and  
6 to car seats. Although our new car was totalled, we walked  
7 away unharmed.

8           In fact, the girls were babbling away as  
9 normal -- I can't believe she's being this quiet  
10 actually -- almost oblivious to the fact that we had just  
11 been involved in a serious accident. They had no marks and  
12 no signs of being in an accident.

13           We attribute our accident, we attribute our  
14 injury-free accident not to luck but instead, to following  
15 good safety measures. My husband and I were protected by  
16 our seat belts and air bags. My daughters were protected  
17 by car seats, car seats that were properly installed.

18           Abby, at 2, was in a front-facing 5-point  
19 harness toddler seat. And Allie, at 6 months, was in a  
20 rear-facing infant seat in the middle back seat. Both  
21 seats had been installed by SAFE KIDS trained staff at the  
22 Penn State Hershey Medical Center.

23           To this day, our children have never ridden a  
24 single time in a car without a car seat. They have also  
25 never ridden in the front seat. At ages 5 and 7 now, they

1 are both in high-back booster seats. And at 29 and 30  
2 pounds and 36 and 38 inches respectively, they will be in  
3 them for a very long time to come. And we are happy about  
4 that because we'll know they're being safe.

5 To them, there is no option but riding in  
6 their seats in the back seat. In fact, they get upset when  
7 they see other children not safely restrained. They have  
8 become their own little safety advocates. It is quite  
9 common for my 7-year-old to say to her friends, You need to  
10 be in a booster seat. It keeps you safe. In fact, she  
11 also comments that you can see out the window better, too.  
12 It makes you much higher.

13 I urge parents to use car seats and have them  
14 installed correctly. My kids are living proof that car  
15 seats, when used right, save lives. Kids belong in the  
16 restraint that provides them the best safety for their  
17 small growing body. Grown-up adult belts are not designed  
18 to fit correctly on children. Booster seats are.

19 For kids 40 to 80 pounds, they provide the  
20 best opportunity for your child to walk away from an  
21 accident without injury. It's important to remember height  
22 and weight are the factors and not age.

23 As a founder of Learning Tech at Children's  
24 Health Education Company, I have seen and heard too many  
25 stories of well-meaning, loving parents who just didn't



1 know the important and vital role they play in their own  
2 child's health and safety. In fact, we are in the process  
3 of launching a series of health education books, one of  
4 which is safety, featuring booster seat safety. Parents  
5 can make the difference in their child's health and safety.

6           Regarding your statement to all of us in your  
7 question on whether education alone will meet the need, I  
8 do not think it will. It must be a combination of  
9 education and law. I understand your concerns about  
10 personal freedom and believe, but believe that anyone whose  
11 child is in an accident or injured will consider their most  
12 important vital issue their own child's safety.

13           Thank you. And now Allison has been working  
14 very hard on her speech.

15           ALLIE STUMP: Buckle up in booster seats every  
16 day.

17           CHAIRPERSON MARSICO: Very good. Very good.

18           (Applause.)

19           CHAIRPERSON MARSICO: Are you finished with  
20 those cookies or chips? If you are, can you send them up  
21 here? Well, thanks a lot. We appreciate you being here.  
22 Any questions at all from members?

23           REPRESENTATIVE LAUGHLIN: I don't have a  
24 question. I just want to make a remark. I think you're  
25 right, absolutely correct in saying that, you know, it's up

1 to the parents right from the beginning when the children,  
2 you know, start to ride in the cars.

3           Whenever I was growing up, there were no car  
4 seats. And it's parents like me that, you know, don't know  
5 any better whenever it comes to having children, make sure  
6 that they put on their car seats. I was in an accident,  
7 one accident a few years ago. And I was very fortunate. I  
8 didn't have my car seat on.

9           But I was very fortunate that the air bag blew  
10 up and saved me from any kind of, from any kind of  
11 problems. But I just see right now that, you know, if it  
12 isn't the parents that start right from the beginning, it's  
13 not going to happen because of, you know, my situation.

14           I never had a car seat whenever I was growing  
15 up, even when my children were growing up. But I  
16 didn't -- I don't know if I missed part of your testimony.  
17 Did you mention anything about having classes right in  
18 school to tell the children, you know, how important it is?

19           MS. STUMP: I think Sue will address that  
20 specifically. And I can tell you that my own daughter now  
21 is trying to stimulate her school and class so that she can  
22 start a little safety group at her school that will talk  
23 about things, different health and safety issues like the  
24 importance of booster seats, the importance of different,  
25 educating about different health conditions like asthma and

1 diabetes.

2           And I think it is getting the parents educated  
3 from the beginning and getting the children educated from  
4 the beginning so that they, they don't even know there's  
5 another choice. And they also are good at educating their  
6 peers about the importance of it. But the law is the  
7 grounding point.

8           MS. RZUCIDLO: And I can share from our  
9 facility and my work at the Trauma Center as well as with  
10 the SAFE KIDS Coalition is the children that are injured,  
11 that the parents may not either be following the law if  
12 they're under 4 or if the child's in a booster seat age,  
13 they don't leave without a booster seat.

14           And I had a family last week that they said,  
15 Well, we called the State Police after the crash. And they  
16 said that if the child's over 4, it's not required. And  
17 then I gave them materials and talked to them. And they  
18 left with 2 booster seats.

19           In the classrooms, again, you'll hear from  
20 other testimony that there's extensive public campaigns  
21 through -- the Bureau of Highway Safety covers every county  
22 across Pennsylvania. SAFE KIDS Coalition, again, Ms.  
23 Franchak will talk with you. We have extensive education  
24 networks to get it out. We just need the law changed.

25           MS. STUMP: I would also echo that I know when

1 my mother grew up, they didn't have seat belts and car  
2 seats and things like that. And so when we had children,  
3 she was one of the first ones to start to read up and say,  
4 you know, as a grandparent, what's changed? What do I need  
5 to do as a grandma now? And she has 2 high-back boosters  
6 in her cars just like we do.

7 MS. RZUCIDLO: Representative Marsico, would  
8 we have time, we have a booster seat that for some of the  
9 members that may or may not have children, that we can show  
10 you Allie in an adult seat belt and Allie in a booster  
11 seat?

12 CHAIRPERSON MARSICO: That's fine. Go right  
13 ahead. We have another question, though, first.  
14 Representative Fairchild.

15 REPRESENTATIVE FAIRCHILD: Thank you. I  
16 notice in your presentation under state legislative fact  
17 sheets, one of the recommendations is to include all  
18 vehicles equipped with seat belts, which includes trucks,  
19 vans, taxies, and commercial vehicles.

20 I'm curious. How does this work with, let's  
21 say, commercial busses, especially in our large urban and  
22 city areas where a -- how does a bus, how does one equip a  
23 bus, a commercial bus to be able to handle the unexpected?  
24 Now, when you pull up to a bus stop, there may be zero  
25 children or there may be 20 children.

1                   How do they do that? And also -- I'll make  
2 this a 2-part question -- I think through the testimony  
3 that we've heard so far, you would support the driver being  
4 responsible. If so, how is that bus driver going to be  
5 responsible for ensuring 15 kids are strapped in absolutely  
6 correctly, knowing that we have some liability laws that,  
7 and people like to sue today? Thank you.

8                   MS. RZUCIDLO: The information that's  
9 contained from the National Highway Traffic Safety  
10 Administration certainly looks at the applicability of the  
11 information everywhere. It's the same question with school  
12 busses. And that's one of the things with under 7, you  
13 know, there's a difficulty with the restraints.

14                   And there's testing from the National Highway  
15 Traffic Safety Administration. There's a panel looking  
16 at school busses and the way they're designed. The  
17 legislation -- and my understanding -- and certainly, I've  
18 only begun to understand Title 75 and be able to read  
19 it -- is our current law applies to personal vehicles.

20                   It also applies to a day care setting where  
21 they would, you know, like a KinderCare where there would  
22 be a van that would move 10 children. Again, through the  
23 advocacy side, we're always helping day cares and different  
24 businesses with restraining the children and traveling with  
25 them.

1           So my understanding at least of the current  
2 law would not be applicable to a bus. It does not even  
3 apply to taxicabs. Now, we do -- and again, I was in  
4 Pittsburgh before I moved to the Harrisburg area. We  
5 worked with many of the taxicab groups, you know,  
6 businesses to give them seats that they would have in the  
7 trunks of the car because they were concerned about  
8 transporting the children.

9           Many of the families, if they are carpooling,  
10 they return to work, we have many families that we've  
11 gotten seats. But at least my read of the Title 75, it  
12 would not apply because I believe you would be speaking of  
13 a charter bus, you know, commercial bus.

14           My understanding is there's model language  
15 which is included, but that would not be applicable to  
16 Title 75 in Pennsylvania. Is that correct? That's my  
17 understanding is it would not apply to commercial busses.

18           REPRESENTATIVE FAIRCHILD: So could I -- I  
19 assume then what you're saying here is that the information  
20 you presented was that the top shelf out of a scale of 1 to  
21 10, it would be 10 but you're not necessarily advocating  
22 everything that is in here?

23           MS. RZUCIDLO: No. The information that's  
24 contained in this section under model legislation is  
25 information that would be the sun, moon, stars, you know,

1 every child in every instance. But I think certainly that  
2 the language in the amendment in 2447 does not apply to the  
3 sun, moon, and stars. I think it would be commercial use.

4 CHAIRPERSON MARSICO: Okay. We have one more  
5 question. Chairman McCall.

6 REPRESENTATIVE McCALL: Very briefly, Susan,  
7 maybe just to pick your mind and your expertise. I take it  
8 the information that you have included in your testimony,  
9 Department of Transportation crash data, that's  
10 Pennsylvania Department of Transportation?

11 MS. RZUCIDLO: Yes, that's correct.

12 REPRESENTATIVE McCALL: And you note -- or I  
13 take it the Department of Transportation crash data says 94  
14 percent for children 0 to 1 for seat belt use. And then  
15 that drops to 65 percent at age 3. What do you see, or  
16 what do you hear is the reason for that significant drop?

17 MS. RZUCIDLO: In my opinion, there's 2  
18 things. The first is when the child's under 1 -- and  
19 through advocacy, again, through all the hospitals across  
20 Pennsylvania and there's even been more awareness from the  
21 Academy of Pediatrics, many other groups -- we're very  
22 diligent with the baby doesn't leave unless they're in a  
23 car seat.

24 Then as the child gets to age 1, they also  
25 develop the I don't want to sit in my car seat phenomena.

1 The 2-year-old, to get them to do anything is very  
2 difficult. You know, my talk to the parent is they'll be  
3 like they don't want to sit in their seat. They're a  
4 2-year-old. And I very gently am like who's the parent is  
5 my theme.

6           You know, there are many things that they  
7 don't like. Here's diversions. Here's things that you can  
8 do. Here's ways to make it better, you know, special toys  
9 in the car, blah, blah, blah. So I think there's issues  
10 around the child and the parent willing to deal with it.

11           The other part is many families' return to  
12 work happens around then. The car seat, leave it at a day  
13 care between vehicles. It doesn't become as convenient.  
14 Then once -- the other part is, is that I don't believe  
15 with the current language and meeting with magistrates,  
16 district justices, as well as many police officers that are  
17 certified technicians across the state, the law is not very  
18 enforceable right now.

19           If they take a 20-year-old car seat -- or  
20 there's been stories where the family goes to a department  
21 store, gets a seat. And then it's known, because of the  
22 work of the police officers with those department stores,  
23 that the person returns it after they took it and talks  
24 about how, Oh, I got a citation. I took it. Now I'm  
25 returning it.



1           So with the current language of shall  
2 dismiss -- and it's actually the charges where the  
3 subsection says fines. I don't perceive that there's a  
4 consequence to the public. Certainly, whenever the child's  
5 injured, if their child dies, they know of the consequence.

6           But it's not a perception that this is  
7 something that we're giving a message that it's very  
8 important. And I think, again, we spend extensive time  
9 educating, distributing seats. But when I take care of the  
10 families that are injured -- let me tell you the 4 kids  
11 right now that are in this age group that aren't protected,  
12 they sure wish they had.

13           So that I think that those are the things that  
14 I think that are really the child and the family issues and  
15 then with the law and it being enforced.

16           CHAIRPERSON MARSICO: Okay. Thank you. If  
17 you want to go ahead and give a demonstration. The Chair  
18 would like to note the presence of Representative Stetler  
19 of York County who's at the very, very far left of the  
20 Chairman. Good morning.

21           MS. RZUCIDLO: This is one of the booster  
22 seats that we use. And you can see that Allie is very able  
23 to carry it. It is not a heavy thing at all and which she  
24 does in her cars all the time. And this is what's called a  
25 low-back booster seat.

1           The vehicle has a headrest and has a -- you  
2 can see that this vehicle seat, even as a demonstration,  
3 that she's able to just sit in this seat. And again, the  
4 purpose is raising her up. It tilts her back a little bit  
5 so that her legs aren't so extended. Then we're going to  
6 buckle Allie in. And you can see what happens then.

7           She's not comfortable because it's not fitting  
8 her right yet. You can see again that already we've raised  
9 it up. The belt, there's extensions on the seats so that  
10 the belt isn't riding across her abdomen. The seat itself  
11 is going to take all those forces.

12           Then the last thing that we need to do is just  
13 what she was trying to do, is get this away. There's a  
14 belt positioning clip. And what that does is it helps to  
15 keep the buckle so that the shoulder harness is going to  
16 properly fit her.

17           So what this will do then is this will help to  
18 adjust -- and again, this seat belt would usually be  
19 here -- but this will help to adjust so that the belt will  
20 fit across her chest. And in the vehicle then, once the  
21 child -- each time when this is put in, you just release  
22 the belt. The child gets back in, and they can buckle  
23 themselves.

24           My niece and nephews have this seat, and it's  
25 very easy. The child, no problem. And it does exactly the

1 right thing. This seat is \$20 retail. We get it through  
2 SAFE KIDS Coalition, some BOOST America. We have free ones  
3 sitting in storage because the families aren't real  
4 interested right now because it's not the law.

5 The second part is is that we get the seats at  
6 cost for \$15 for distribution. So it's very little cost.  
7 Okay. Now I'd like to show you with Allie sitting in it  
8 without the booster seat.

9 MS. STUMP: I don't think she'll know what to  
10 do. She's never been in one without a booster seat.

11 MS. RZUCIDLO: So you can see what it does  
12 with her positioning. And then buckle you back up. And so  
13 you can see she's going to do all kinds of things. The  
14 belt's riding right across her abdomen. In a crash, she's  
15 going to again ride out. Depending on the crash, she could  
16 ride up over it.

17 The kids usually will do this type of thing to  
18 put it behind them because it's across their neck. Again,  
19 that puts them at extreme risk for their shoulder injuries.  
20 And you can see she's totally inappropriately restrained.

21 CHAIRPERSON MARSICO: Thank you very much.

22 (Applause.)

23 CHAIRPERSON MARSICO: Good job, Allie.

24 ALLIE STUMP: Thank you.

25 CHAIRPERSON MARSICO: Okay. We're running a

1 few minutes behind schedule. So if we can have Ted Leonard  
2 come up and present testimony. Ted is the Executive  
3 Director of the Pennsylvania AAA Federation. Good morning.  
4 Welcome. Thanks for being here.

5 MR. LEONARD: Good morning. That's a tough  
6 act to follow. Good morning, Mr. Chairman and members of  
7 the House Transportation Committee. Thank you for this  
8 opportunity to present views on the very important issue of  
9 child passenger safety.

10 According to figures from NHTSA, automobile  
11 crashes are the number one killer of our nation's children.  
12 In 2000, motor vehicle crashes killed nearly 2,400 children  
13 under the age of 14 and injured another 300,000. Of these  
14 2,400 fatalities, 529 were children under 5 years of age  
15 and 251, or 47 percent, were totally unrestrained.

16 This issue is particularly relevant to AAA  
17 this year, which is in its 100th year celebration. And  
18 we've chosen child passenger safety as our top priority.  
19 Our goal is to reduce the number of children who are killed  
20 or injured each year in motor vehicle accidents.

21 As part of the campaign to improve child  
22 passenger safety, AAA has created a brochure, which I  
23 believe you have in front of you, entitled "The Guide to  
24 Child Passenger Safety", which outlines 4 stages of child  
25 passenger restraint. And I've placed several other copies

1 of the guide along with my statement.

2           The factors contributing to the death and  
3 injury of children in motor vehicle crashes include lack of  
4 use of any child restraints; improper selection,  
5 installation, and use of child restraints, including the  
6 inappropriate graduation from child safety seats to seat  
7 belts; and the improper seating position within the  
8 vehicle.

9           A study in the November 2001 issue of the  
10 American Journal of Preventative Medicine concluded that  
11 the proper installation and use of child safety seat  
12 restraints reduces fatal injuries by 70 percent for infants  
13 and by 54 percent for children 1 to 4 years of age.

14           NHTSA figures show that while infant restraint  
15 use for children between the ages of 0 and 4 is fairly high  
16 at 91 percent, restraint use plummets to 69 percent after  
17 the age of 5. All too often, children over the age of 4  
18 are graduated to installed restraint systems that are  
19 designed and tested for 168-pound adult males; but these  
20 could cause serious or even fatal injuries to a child.

21           Parents look to the law to determine what is  
22 best for their children. A recent AAA survey of parents  
23 who transport children ages 4 through 8 revealed that most  
24 did not use a booster seat because the law did not require  
25 it.

1           A recent study by NHTSA and DaimlerChrysler  
2 found that 9 out of 10 parents believe that if they adhere  
3 to their state's current child passenger safety laws, they  
4 are taking the steps necessary to protect their child.  
5 Insufficient educational efforts coupled with laws that  
6 provide minimal coverage for children over the age of 4  
7 create a false sense of security that parents are taking  
8 the necessary precautions to ensure their child's safety.

9           AAA supports NHTSA guidelines for child  
10 restraint, including children up to 1 year and 20 pounds  
11 placed in a rear-facing child safety seat and children over  
12 1 year and who have exceeded the upper limit of the  
13 rear-facing seat should be placed in forward-facing child  
14 safety seats until they are 40 pounds.

15           Safety experts suggest that the best practice  
16 for children between 4 and 8 years of age and who are under  
17 4 foot, 9 inches is to restrain them in belt-positioning  
18 booster seats. Adult seat belts without the benefit of a  
19 mechanism to properly place and fit the restraints can  
20 seriously injure children.

21           However, there's some confusion about whether  
22 booster seat limits should be set on the basis of age,  
23 weight, height, or some combination. NHTSA has not  
24 published specific guidelines in the form of Federal Motor  
25 Vehicle Safety Standards for children who weigh more than

1 50 pounds.

2           The largest NHTSA child crash test dummy is a  
3 6-year-old, 50-pound dummy. Consequently, no standards  
4 exist against which manufacturers can test their seats.  
5 While it is clear that booster seats provide added  
6 protection for children under 50 pounds, it is currently  
7 unclear how long children should remain in them.

8           According to the Center for Disease Control  
9 growth charts, 75 percent of the children who are 6 years  
10 old weigh 50 pounds and under. Therefore, as an age  
11 component would make the law more enforceable than  
12 requiring a police officer to judge the weight, the age  
13 limit of under 7 stated in the bill would strengthen the  
14 current law. Two states that have enacted laws this year,  
15 Maryland and Nebraska, have done so on the basis of age.

16           A second component to improving child  
17 passenger safety in addition to strengthening the laws is  
18 an educational campaign to raise the awareness of the  
19 problem and solutions. Studies have shown that neither of  
20 these 2 mechanisms when used independently of each other is  
21 as successful as the combination of the 2.

22           Education is key to convincing parents and  
23 children to use booster seats. A study by Wirthlin  
24 Worldwide found that although 88 percent of parents are  
25 aware of booster seats, only about 23 percent of them use

1 them for their children.

2 Parents must be educated to understand booster  
3 seats are an important tool in properly restraining their  
4 child. AAA recommends a statewide education and  
5 information component possibly funded by the collection of  
6 fines.

7 While we have today focused on child safety  
8 seats and specifically on the use of booster seats, there  
9 are other actions which can be taken to improve child  
10 passenger safety. AAA also recommends that states extend  
11 child restraint laws to cover older children.

12 The AAA guide to child passenger safety  
13 recommends that children under the age of 13 be properly  
14 restrained in the back seat. AAA has also requested NHTSA  
15 to further study booster seat effectiveness and establish  
16 booster seat performance standards.

17 The good news is that according to NHTSA  
18 figures, child passenger fatality rates have recently  
19 declined slightly. The better news is that we have an  
20 opportunity in Pennsylvania to make even greater  
21 improvements.

22 I thank you for this opportunity to present  
23 our views on this very important issue. And I'd be happy  
24 to answer any questions.

25 CHAIRPERSON MARSICO: Any questions by



1 members? Representative Laughlin.

2 REPRESENTATIVE LAUGHLIN: Just one quick  
3 question. As far as I know, there are no seat belts on  
4 school busses. Do you recommend that we need to get the  
5 seat belts on school busses?

6 MR. LEONARD: It's our current position that  
7 seat belts are not necessary on school busses. NHTSA has  
8 conducted a study, a preliminary study that because of the  
9 strength in construction and frames of school busses, that  
10 seat belts would be: 1, very difficult to enforce; and 2,  
11 we found that in states where seat belts have been  
12 installed, that they have created some difficulty in the  
13 submarining effect that was mentioned earlier.

14 And also, it's awful difficult for a single  
15 school bus driver to make sure that everyone is buckled in  
16 properly. And that kids were in fact in one state -- I  
17 believe it was Iowa -- fastening the belts across the aisle  
18 to trip other kids and swinging the belts around and doing  
19 those sorts of things. So the short answer is no, not at  
20 this time.

21 CHAIRPERSON MARSICO: Chairman McCall.

22 REPRESENTATIVE MCCALL: Thank you, Mr.  
23 Chairman. One quick question as well, Ted. I'm not sure  
24 if you even have the answer. But I'm just wondering. Is  
25 there anything that the National Transportation Safety

1 Board has before them that would require automobile  
2 manufacturers to address this issue at all?

3 MR. LEONARD: I believe there is. And we have  
4 an NTSB, I think, rep who's going to be coming up here to  
5 testify later. To my knowledge, yes, they are working with  
6 auto manufacturers to require improvements in child  
7 restraints.

8 REPRESENTATIVE McCALL: Very good. Thank you.

9 CHAIRPERSON MARSICO: I believe Eric Bugaile  
10 has a question.

11 MR. BUGAILE: Ted, as a parent, my children  
12 always rode in the back seat. And I just wanted to -- how  
13 do you -- have you surveyed your membership on things  
14 like -- as a kid gets to be 5, 6 years old, they tend to be  
15 pretty social and going to soccer games and things.

16 And you're taking a lot of carpools with  
17 parents taking other children from other families. So  
18 really, what we're saying here is perhaps, you know, you  
19 don't just need a booster seat for your child but you need  
20 a booster seat for all the other children you're taking in  
21 the vehicle with you.

22 You might take 5 kids in the car to a soccer  
23 game, for instance. How do your members, how do they feel  
24 about having to purchase these different devices?

25 MR. LEONARD: We haven't surveyed on that.

1 But I understand the concern that carpooling is very, very  
2 popular. Kids start playing soccer today at 5 years old.  
3 And if you're going to take the team around, there  
4 certainly has to be concern with making sure that they're  
5 all properly restrained.

6 MR. BUGAILE: Thank you.

7 CHAIRPERSON MARSICO: Any other questions?

8 (No response.) Thanks, Ted, for being here. Appreciate  
9 your input.

10 MR. LEONARD: Thank you.

11 CHAIRPERSON MARSICO: Next on the agenda is  
12 Anne Franchak, Director of the Pennsylvania SAFE KIDS  
13 Coalition. Good morning. You may begin.

14 MS. FRANCHAK: Good morning. Thank you. I'm  
15 very happy to be here. I am Anne Franchak, the Director of  
16 the Pennsylvania SAFE KIDS Coalition. I am a certified  
17 instructor in the NHTSA child passenger safety course. And  
18 I have been involved in child passenger safety education  
19 for 15 years.

20 I'm not going to get into a lot of statistics.  
21 You've heard a lot of that. I can certainly answer  
22 questions about that. And you'll be hearing more from our  
23 next speakers. But to paraphrase a wise man, former  
24 Surgeon General, C. Everett Koop, if we had a vaccine that  
25 would prevent children from dying because of an epidemic

1 and it was not used, we would be outraged and we would  
2 demand that that vaccine be available to our children.

3           Well, we do have an epidemic of children who  
4 are being injured and killed every day in automobile  
5 crashes. I think Shannon mentioned the number of 100  
6 children a day are injured in automobile crashes. And we  
7 have the vaccine of prevention, which is child safety  
8 seats.

9           The first dose of the vaccine is infant and  
10 convertible seats, which are providing good results in  
11 preventing injuries. The second dose of prevention, just  
12 like your children get their measles shots in various doses,  
13 is the booster seat. Booster seats enable our older  
14 children, ages 4 to 7, to ride safely secured in vehicles.

15           Parents and families want to protect their  
16 children from harm, and we can help them to do that by  
17 providing booster seats. Booster seats are a good thing  
18 for everyone: The children, who would be protected; their  
19 families, who will be shielded from dealing with the sorrow  
20 and the consequences of unnecessary injuries; and society  
21 in general, which will not have to shoulder the cost of  
22 caring for the children who suffer life-threatening  
23 injuries, hospitalization, and perhaps long-term disability  
24 as a result of vehicle crashes.

25           There really is no economic barrier to

1 protecting children. Booster seats can be purchased for as  
2 little as \$16. And indeed, the timing of this bill is  
3 good. Sue alluded to the fact that last summer,  
4 Pennsylvania participated in BOOST America, a program of  
5 the United Way and Ford Motor Company, which donated 9,000  
6 booster seats to Pennsylvania. Many of those seats are  
7 still accessible through PennDOT's highway safety programs  
8 and the Pennsylvania State Police.

9           Some of the local chapters and coalitions of  
10 SAFE KIDS have partnered with United Way this summer on a  
11 similar project, and they also have seats available. Those  
12 programs, combined with the continuing support of General  
13 Motors to Pennsylvania SAFE KIDS and the 13 coalitions and  
14 26 chapters across the Commonwealth, will enhance the  
15 availability of booster seats to at-risk families.

16           The time is now to save lives and protect  
17 children from injury. The vaccine is available. Booster  
18 seats work. Let's give Pennsylvania children the advantage  
19 of their protection. I ask for your support of House Bill  
20 2447. And thank you for your attention.

21           CHAIRPERSON MARSICO: Thank you. Any  
22 questions from members? Representative Watson.

23           REPRESENTATIVE WATSON: Thank you, Mr.  
24 Chairman. Ms. Franchak, you allude to the fact in your  
25 testimony about the BOOST America Program and the

1 availability or the possibility of the availability of  
2 booster seats for families that might not otherwise be able  
3 to afford.

4           And I believe that Mrs. Rzucidlo, in her  
5 previous testimony, talked about the 20, somewhere in the  
6 20 to \$30 range for those who could afford. You mentioned  
7 PennDOT's Highway Safety Programs. And recognizing that  
8 they're not here specifically this morning, but I know you  
9 work closely with them.

10           Could you allude a little bit to what that  
11 program is, your knowledge of that and how, much like SAFE  
12 KIDS, you formed this network of highway safety education  
13 and opportunity to provide something like the booster  
14 seats?

15           MS. FRANCHAK: Yes, I'd be happy to comment on  
16 that. Having been involved in the education of the  
17 community for the past 15 years, exactly what  
18 Representative Watson said, we formed this network of  
19 people across the state. And we worked very closely with  
20 the PennDOT Highway Safety coordinators.

21           I believe there are 16 or 18 programs which  
22 cover every county in Pennsylvania. And we do a lot of  
23 education. We do a lot of car seat checks in combination  
24 with PennDOT, with the State Police, and the local police  
25 to make parents aware of whether or not their seats are

1 being used correctly.

2 REPRESENTATIVE WATSON: Thank you.

3 CHAIRPERSON MARSICO: Any other questions?

4 (No response.)

5 MS. FRANCHAK: Thank you.

6 CHAIRPERSON MARSICO: Thank you very much.

7 Next on the agenda is Carole DeAngelis Miller, Public

8 Education Coordinator for the Bucks County Emergency

9 Services SAFE KIDS Coalition. Good morning.

10 MS. MILLER: Good morning. My name is Carole

11 DeAngelis Miller, and I'm the Public Education Coordinator

12 for the Bucks County Emergency Health Services. I also

13 serve as coordinator of the Bucks County SAFE KIDS

14 Coalition as well as being a certified emergency medical

15 technician and a certified child passenger safety

16 technician/instructor.

17 Holding these positions has allowed me a

18 closer look at child passenger safety. Pennsylvania's

19 current child safety restraint law does not go far enough

20 in protecting our children between the ages of 4 and 7.

21 Our current law only requires children from birth to age 4

22 to be in secured child restraints.

23 After the age of 4, most families will allow

24 their children to ride using the vehicle's safety seat belt

25 system because it is more convenient for the parent and

1 also because it is easier for the child to use.

2           According to NHTSA, the National Highway  
3 Traffic Safety Administration, seat belts must fit the  
4 standard crash dummy in the most forward sitting position,  
5 plus 4 inches. The dummy, based on 1960 statistics,  
6 represents what NHSTA says is a 95th percentile male. In  
7 other words, it represents a male who is 6 feet tall and  
8 215 pounds. This same seat belt must provide protection  
9 for our children who are ages 4 through 7 and weigh a mere  
10 40 to 60 pounds.

11           Most parents are unaware of this information.  
12 If they only knew how ill-fitted the seat belt system is to  
13 their child and the injuries that can be caused by this  
14 factor, they would certainly change their minds to booster  
15 seats.

16           EMS providers see a variety of injuries  
17 because of the improper fit of seat belts on children. The  
18 following are actual statistics from pre-hospital patient  
19 care reports in Bucks County from January 1st, 2000 to June  
20 30th of 2002:

21           Of the total 33 records reported on children  
22 ages 4 through 8 who were restrained in some type of child  
23 restraint, their only reported injuries were open and  
24 closed soft tissue injury to the facial area. Of the total  
25 104 records reported for children ages 4 through 8 using



1 lap belts and lap/shoulder belts, the number of injuries  
2 greatly increased.

3           The injury area included the head, face,  
4 spine, and abdomen, to name a few. In your blue folders,  
5 if you look at the attachments, you'll see more in-depth  
6 look at all the injuries. I have also enclosed a detailed  
7 list of the statistics provided by the State Department of  
8 Health outlining the total number of children ages 0 to 8  
9 that were involved in crashes between 1994 and 2000.

10           This is by age and injury outcome, injury  
11 outcomes by restraint category, and restraint usage by the  
12 year. These statistics show how important legislation is  
13 because it shows the impact of increased use of restraints  
14 from 1994 to 1995 when child restraint law went into  
15 effect.

16           It is apparent that legislation is changing  
17 behaviors. State statistics show a decrease in the  
18 severity of injuries with the use of child safety seats.  
19 Passing House Bill 2447 would increase booster seat use and  
20 would lessen the severity of injuries for children ages 4  
21 through 7 who would then be seated properly in the  
22 vehicle's restraint system.

23           So when should a child use a booster seat? A  
24 child who has outgrown a convertible child safety seat  
25 weighing over 40 pounds; a child who weighs between 40 and

1 80 pounds; and a child who cannot sit with his back  
2 straight against the vehicle seat cushion or who cannot sit  
3 with knees bent over the vehicle's seat without slouching.

4 As EMS providers, we not only provide care for  
5 the patient but also provide education for the community in  
6 which we work. Bucks County Emergency Health Services is  
7 the lead agency for the Bucks County SAFE KIDS Coalition.  
8 By joining forces with other Coalition members, we have  
9 increased the number of certified child passenger safety  
10 technicians who are involved in the EMS, police, and fire  
11 services.

12 We will stay involved to help this bill become  
13 a law. When it is passed, we will continue our commitment  
14 to education. This is why we urge you to pass this bill  
15 for the safety of our greatest resource, our children who  
16 are the leaders of tomorrow. Thank you.

17 CHAIRPERSON MARSICO: Thank you very much.  
18 Are there any questions? (No response.) Thank you very  
19 much for your testimony.

20 MS. MILLER: Thank you.

21 CHAIRPERSON MARSICO: Appreciate it. Next, we  
22 have Bruce Edwards, President of the Pennsylvania State  
23 Troopers Association. Good morning, Bruce. Good to see  
24 you. And welcome.

25 MR. EDWARDS: Mr. Chairman, first, I'd like to

1 thank you for including the Troopers Association and myself  
2 in this hearing. I believe this is a very important  
3 subject. And many of my members, all my members feel very  
4 strongly about this since we're the ones responding to the  
5 results of accidents where seats are not properly used.

6 A lot of the testimony so far you heard,  
7 you're hearing facts and figures. I'm not here to give you  
8 that. I'm going to give you a more personal insight from a  
9 police officer's standpoint. The Pennsylvania State  
10 Troopers Association represents over 4,000 sworn members of  
11 the Pennsylvania State Police.

12 Members of the Pennsylvania State Police  
13 respond to motor vehicle accidents every day, and they see  
14 firsthand child safety seats save children's lives and  
15 prevent injuries. Child safety seats for children under  
16 age 4 are now required in Pennsylvania.

17 It has been demonstrated that adult restraints  
18 for children between the age of 4 and 7 are unsafe. There  
19 are presently no requirements on how a child between the  
20 ages of 4 and 7 is to be secured in a vehicle.  
21 Furthermore, children age 4 and above are not required to  
22 be secured in any manner when they are not in a front  
23 seating position.

24 As a parent myself of 3 children, when I am  
25 driving, it is personally very distressing to see any young

1 children in vehicles unsecured, standing, and moving  
2 around. Requiring booster seats for children age 4 to 7  
3 could significantly reduce or prevent injuries, and making  
4 it a primary violation is imperative.

5           The Pennsylvania State Troopers Association  
6 supports House Bill 2447 introduced by Representative  
7 Watson. However, I recommend that it be placed in Title 75  
8 of the Vehicle Code under 4581, Restraint Systems.  
9 Finally, I'd like to state in closing, our children are our  
10 most precious resource. They can't protect themselves.  
11 It's our duty to do the best of our ability to protect  
12 them.

13           Mr. Chairman, at this time, I'd like to  
14 expound on a couple of my points before questions. Some of  
15 the things I'm going to say now are from my personal  
16 experience as an officer for over 17 years and also what  
17 I've seen from other officers and what they've had to say.

18           But when properly used, child safety seats  
19 actually provide better protection for children than seat  
20 belts do for adults. Examples of this was many accidents  
21 that I've arrived on where parents, adults wearing the seat  
22 belt and even in combination with air bags have minor  
23 injuries.

24           They were protected properly, but they have  
25 contusions to their head. They might have banged their

1 head on the side window. They have abrasions, minor  
2 injuries. A child properly installed in a safety seat is  
3 unmarked, unscathed, and are always the best protected.  
4 And I emphasize properly installed.

5 As was stated before, our department is very  
6 active. And we have people coming to our stations on a  
7 regular basis making sure that they are installed properly.  
8 Another thing a lot of people don't think about, you don't  
9 need an accident to have a tragedy.

10 You're driving down the road in a residential  
11 area 25 to 30 miles an hour. A child runs out between 2  
12 cars. A ball comes out. The parent slams on their brakes.  
13 That child who was standing up between the 2 front seats  
14 now becomes a missile and hits the windshield at 30 miles  
15 an hour.

16 This is something that happens on a regular  
17 basis as far as having to stop. And I don't know how many  
18 times I've driven down the road in my own car wherever and  
19 there is a child standing in the rear, which is not against  
20 the law, right between the 2 front seats. And a sudden  
21 stop, and that's what they become, a missile traveling at  
22 the speed that car was.

23 I've heard a lot of excuses from parents  
24 saying my kids won't stay in the seats. It's too hard to  
25 make them do that. Well, I have 3 children. And we put

1 them in those seats from the age from when they were born.  
2 My children remind me, Daddy, don't leave yet. I don't  
3 have my seat belt on. Daddy, you didn't put your seat belt  
4 on.

5 I always wear my seat belt. But I'm one of  
6 those people that have the car in gear and are backing out  
7 of the driveway as I'm putting my seat belt on. My  
8 children let me know to put it on. And they also tell me  
9 when they're in other people's car that they weren't  
10 wearing them or whatnot. But my children always do, and  
11 they're very conscientious on that.

12 It's up to the parent. And if you instill  
13 that on them from when they are an infant, you will not  
14 have a problem. And if you have a problem with a child  
15 that young who will not do it, what kind of problem are you  
16 going to have with them when they're age 16 and they turn  
17 rebellious?

18 My daughter's now 16 going on 26 and very  
19 trying. She's getting ready to drive, just got her permit.  
20 But safety always comes first. And the way you instill it,  
21 tell the children -- you pull over to the side of the  
22 road -- we're not moving until that goes back on. But you  
23 won't even have that problem if you start from the  
24 beginning.

25 Another thing to look at -- and I don't think

1 it was mentioned here today -- one of the things booster  
2 seats do do -- children are inquisitive. And when you get  
3 them out of the child seat and they're at that inquisitive  
4 age, you sit them down in the back seat, they can't see out  
5 of the window. So of course they want to get out of the  
6 belt to see.

7           When you put them in the booster seat, it  
8 raises them above the level of the window; and they now can  
9 see out. And their curiosity is satisfied, and they don't  
10 have to worry about getting up. And they're that low, they  
11 cannot see out. The booster seat gives them that advantage  
12 to now see what's going on so they don't have to get out of  
13 that seat.

14           I don't know if it was a concern why the bill  
15 was placed under Title 18 to begin with. But if you want a  
16 floating fine 25 to 100, that can be accommodated in Title  
17 75. And I also recommend that and give the latitude to the  
18 DJ. There are some circumstances where a person deserves a  
19 lower fine. There are others, with the testimony of the  
20 officer, that maybe the maximum fine is mandated.

21           Finally, my final statement, the PSTA and the  
22 State Police are both united on this issue. We support  
23 making this and all seat belt laws a primary violation that  
24 officers can stop for. Thank you again. Thank you, Mr.  
25 Chairman. Any questions, I'll be happy to answer them.

1                   CHAIRPERSON MARSICO: Any questions from any  
2 of the members? Representative Watson.

3                   REPRESENTATIVE WATSON: Thank you, Mr.  
4 Chairman. Mr. Edwards, I just wanted to say thank you. We  
5 have talked before over the telephone. Recognizing that my  
6 bill -- you and I have discussed some things such as moving  
7 some things around in the bill. And I had said earlier  
8 that I'm certainly amenable to amendments. And I think we  
9 can make this the kind of bill that protects our children  
10 but also works for the benefit of our law enforcement  
11 officers and gives them a feeling -- because I can't  
12 imagine how awful it must be to come upon an accident time  
13 after time and involving children and know there are ways  
14 that we could keep children safe and you wouldn't have to  
15 see that.

16                   So for parents and for you folks, too, I think  
17 we can do a good job. Thank you.

18                   MR. EDWARDS: Thank you.

19                   CHAIRPERSON MARSICO: Any other questions from  
20 the members? Representative Santoni.

21                   REPRESENTATIVE SANTONI: Thank you, Mr.  
22 Chairman. Mr. Edwards, I just have a question. It's my  
23 understanding the State Police have a program that they  
24 have, like an outreach program to educate people on how to  
25 install child safety seats. Is that correct?



1 MR. EDWARDS: That is correct.

2 REPRESENTATIVE SANTONI: Okay. And I  
3 know -- is that just for infant seats?

4 MR. EDWARDS: No, any child safety seat. They  
5 basically -- if you come in to make an appointment, come  
6 into the station, they will install it for you. And  
7 unfortunately, many of these seats are complicated to  
8 install. And these people have been trained on it. And  
9 I've seen them sometimes take a half an hour to properly  
10 install a seat.

11 But the statistics -- and again, I said I  
12 wasn't going to say that. But I know that a lot of times,  
13 it's in the 80 or 90 percent that they're not totally  
14 installed correctly.

15 REPRESENTATIVE SANTONI: And I was just  
16 wondering, as part of that outreach program, whether you  
17 advise parents that when the child -- even though it's not  
18 state law -- are over the age of 4, to encourage the use of  
19 a booster seat, if that's part of that program or not?

20 MR. EDWARDS: To tell you the truth, I don't  
21 know if it's part of the program. I believe it is because  
22 I'll tell you from personal experience, as was stated by  
23 somebody else, people think, Well, if I'm obeying the law,  
24 it's all right.

25 People call all the time about the law and

1 what you're required, and then they ask our recommendation.  
2 And I know every officer I've talked to or have seen will  
3 say, This is what the law states. But you should be using  
4 child safety seats. I use them personally. You need them  
5 to protect your child until they're of an age and size when  
6 they can safely fit in an adult seat.

7 REPRESENTATIVE SANTONI: I think that would be  
8 a good idea, if you're not doing it, to encourage that as  
9 part of the educational process. Thank you.

10 CHAIRPERSON MARSICO: Okay. Thank you very  
11 much, Bruce.

12 MR. EDWARDS: Thank you.

13 CHAIRPERSON MARSICO: Appreciate your  
14 expertise and your personal experiences that you gave to  
15 us. Thank you. Moving right along, we have next on the  
16 agenda Michael Carroll, Chief of Police of the West Goshen  
17 Township and also the President of the Pennsylvania Chief  
18 of Police Association. Michael is not here.

19 We are a little bit ahead of schedule here,  
20 which is amazing. What about Danielle Roeber? Is Danielle  
21 here? Okay. Good. Come on up, Danielle. Danielle is the  
22 Alcohol Safety and Occupant Protection Coordinator of the  
23 National Transportation Safety Board. Good morning, and  
24 thank you for being here.

25 MS. ROEBER: Good morning, members of the

1 Committee on Transportation. As an admitted chocoholic,  
2 it's my pleasure to be here in Hershey, Pennsylvania. I  
3 want to thank you for holding this hearing and for allowing  
4 me to present the position of the National Transportation  
5 Safety Board.

6           The Safety Board investigates  
7 transportation-related crashes. I suspect you've seen us  
8 at the site of airplane crashes and, more recently,  
9 railroad crashes. But we also investigate crashes in the  
10 marine and highway safety area. And from these crashes, we  
11 issue recommendations, which are our primary product. We  
12 don't have regulatory or grant making authority.

13           Now, the Safety Board is particularly  
14 concerned with highway safety because over 90 percent of  
15 transportation-related fatalities occur on the highway.  
16 And highway crashes are the leading cause of death for  
17 children. The bill before you addresses children and what  
18 we sometimes refer to as the forgotten child, the 4 to 8  
19 age range.

20           And I pulled data from the Fatality Analysis  
21 Reporting System that said children in that age range, from  
22 1994 to 2000, there were 3,500 children who died while  
23 riding on our nation's highways and 84 percent were  
24 unrestrained or in an adult seat belt.

25           Therefore, I want to make 3 points today.

1 Booster seats are necessary for children in that 4 to 8 age  
2 range to achieve proper seat belt fit. Once children no  
3 longer need a child seat or a booster seat, they should be  
4 in seat belts in every vehicle seat. And legislation is  
5 the key to getting parents and care givers to use the right  
6 restraint all times.

7           In 1996, the Safety Board conducted a study of  
8 occupant protection systems and their interaction with  
9 children. What we found was that the failure to use the  
10 appropriate restraint for the child posed a greater danger  
11 as the crash severity increased.

12           When we were looking at children in the proper  
13 restraint using them properly, none of the children died no  
14 matter of the crash severity. But the same couldn't be  
15 said for children in the improper restraint or with the  
16 restraint placed improperly in the vehicle.

17           If you were looking at children from our study  
18 who were appropriately restrained in seat belts, they had a  
19 lower overall injury severity than children inappropriately  
20 restrained in seat belts. Of the children who were not  
21 using seat belts properly, either maybe because they had  
22 the shoulder portion behind their back or it wasn't placed  
23 properly on the child, most of them sustained moderate to  
24 severe injuries. And poor seat belt fit was cited as the  
25 reason why they weren't using the seat belt properly.

1           From our study, we found that improper use of  
2 the seat belt decreased as the child's height increased  
3 above 50 inches. Seat belts in vehicles are designed with  
4 adults in mind. And you've heard that. Children and seat  
5 belt users of the adult age have to be able to sit back in  
6 the vehicle seat with their back all the way back against  
7 the seat back.

8           Their knees should be able to break over the  
9 seat edge, and the seat belt should not be cutting into  
10 their neck and should be over their torso. Just one  
11 example of the problem for children in the 4 to 8 age  
12 range. We found that most children in that age range have  
13 thighs that are shorter than the average vehicle seat base.  
14 Therefore, booster seats correct for the improper fit that  
15 you find if they're just using the vehicle seat.

16           Another issue is that once children no longer  
17 need child seats or booster seats, they should be riding  
18 with seat belts in every vehicle seat position. Current  
19 Pennsylvania law allows children to ride unrestrained in  
20 the rear seat once the CPS law ends at age 4.

21           Once again, I pulled information from the  
22 Fatality Analysis Reporting System. And I found that there  
23 were 3,500 children in the 9 to 18 age range, range of  
24 which they should be in seat belts, who were involved in  
25 fatal crashes from 1994 to 2000. Fifty percent of those

1 children were riding unrestrained.

2           When I looked at children who died riding in  
3 motor vehicles for the '94 to 2000 time period, 57 percent  
4 were unrestrained. Laws are the key to increasing use of  
5 seat belts and child seats, booster seats for Pennsylvania  
6 children.

7           Educational efforts are certainly important.  
8 They play a role. But they are short-lived, vary in  
9 quantity and frequency, and are limited by their resources.  
10 One of the primary methods for education is the child seat  
11 inspection, whether it be the temporary or calling your  
12 police officer to ask for assistance.

13           Well, a recent survey by DaimlerChrysler found  
14 that 4 of 10 parents and care givers still didn't know  
15 where to find a child seat technician or child seat  
16 inspection site. When we did our study, the Safety Board  
17 was particularly concerned with the number of children who  
18 are not in the appropriate restraint or not using their  
19 restraint properly.

20           And today, we know that best practice says 4  
21 to 8 age range, those children should be in booster seats.  
22 But the booster seat use rate is an abysmal 10 percent.  
23 Therefore, the Safety Board has recommended and continues  
24 to recommend that states should require, by law, children  
25 be in booster seats through the age of 7; and after that,

1 children 8 and older should be in seat belts.

2           Legislation does raise use of proper  
3 restraints. Child seat use went from 15 to 51 percent in  
4 the first 7 years after laws were introduced, and it's now  
5 well over 90 percent. Seat belt use went from 14 to 59  
6 percent in its first 7 years of legislation being  
7 introduced, and it's now at about 73 percent.

8           And the concept of mandating booster seats by  
9 law has been catching on with the states. There are 13  
10 states, including Virginia, Maryland, Delaware and New  
11 Jersey, as well as the District of Columbia, which have  
12 passed booster seat laws. There are about 40 states that  
13 when the CPS law stops, they will require children to be in  
14 seat belts.

15           Booster seats are necessary for proper seat  
16 belt fit. And once children no longer need booster seats,  
17 they should be in seat belts in every vehicle position.  
18 Legislation is very key to making sure that parents use  
19 these booster seats, child seats, and seat belts all the  
20 time.

21           Thank you again for letting me speak on behalf  
22 of the Safety Board. And I'm available for any questions.

23           CHAIRPERSON MARSICO: Thank you. Chairman  
24 McCall.

25           REPRESENTATIVE McCALL: Danielle, I don't know

1 if you were here when I asked the question prior. Can you  
2 expound on that? Is there anything, any recommendations  
3 made by the Safety Board to the manufacturers?

4 MS. ROEBER: The Safety Board has a couple of  
5 recommendations on that issue, one of which is to make sure  
6 that there are lap and shoulder belts in the rear center  
7 seat. As you may know, a lot of cars currently only have  
8 the lap belt in the rear center seat. But at the same  
9 time, the center seat is the safest place for children.  
10 And booster seats only work if you have the lap/shoulder  
11 belt.

12 So we had a recommendation to require the  
13 lap/shoulder belt. We also said that there should be  
14 adjustable upper anchorages. If you look in the front seat  
15 of your car -- even my Corolla has this, '99 Corolla -- you  
16 can adjust the shoulder portion.

17 As I understand it -- this predated my term at  
18 the Safety Board -- the auto manufacturers were concerned  
19 from an engineering standpoint and a cost-effectiveness  
20 standpoint whether they could do that. We are seeing them  
21 put them in the vehicle seat as opposed to on the vehicle  
22 frame itself. And that would compensate for the issue of  
23 shoulder belts cutting into the necks.

24 REPRESENTATIVE McCALL: Very good. Thank you.

25 CHAIRPERSON MARSICO: Representative



1 Strittmatter.

2 REPRESENTATIVE STRITTMATTER: Thank you very  
3 much. I thought it would probably be appropriate for  
4 yourself to remind all of our viewers. I know everyone in  
5 the room here today is very familiar with crashes and the  
6 fact that they happen a lot.

7 But I sort of find that most people think they  
8 have a better chance of winning the lottery than they do of  
9 being in a crash. And really, to win the lottery, some of  
10 the big lotteries, you have a better chance of being struck  
11 by lightning twice than you do of winning and that your  
12 chances of being in an automobile crash a year, I believe,  
13 are 1 in 7.

14 Is that figure still correct, that it's 1 in 7  
15 automobiles would have a crash this year?

16 MS. ROEBER: You have stumped me. I'm not  
17 sure what the statistic is as far as odds of being in a  
18 crash; although, I'd be happy to find out for you. I do  
19 know and I've seen regularly from NHTSA material that your  
20 chance of being murdered is lower than your chance of being  
21 killed in a car crash.

22 REPRESENTATIVE STRITTMATTER: But, you know,  
23 the point today is the fact that crashes are quite common.  
24 In fact, we stopped in Pennsylvania calling them accidents  
25 any longer because a lot of times people think accidents

1 are something, well, that you tolerate and put up with.

2 But crashes are things we shouldn't tolerate,  
3 and we have too many of them. And if you could get back to  
4 the Chairman or myself. I'd like to make sure my  
5 statistics are still correct. Being a former police  
6 officer years ago and being on the Transportation Committee  
7 now for 12 years, I believe it's 1 in 7.

8 So our viewers should know that you have a  
9 pretty good chance of being in a crash. And no one should  
10 be surprised when they are in a crash, and many people are.  
11 That's why they say, Well, I'm, if I had known I was going  
12 to be in a crash. Well, they should assume every time you  
13 get behind the wheel -- 1 in 7 is pretty good -- that  
14 you're going to be in a crash sometime this year. Thank  
15 you.

16 CHAIRPERSON MARSICO: Anymore questions? (No  
17 response.) You had mentioned your support of House Bill  
18 2447, which is before the committee. And Representative  
19 Watson's the prime sponsor. And I just wanted to know if  
20 you had anything specific to add or take out of that bill  
21 or any changes you recommend? Did you get a chance to look  
22 at it in detail?

23 MS. ROEBER: The Senate bills that I know  
24 passed the Senate and are before the House go up to age 8.  
25 Whereas, Representative Watson's bill, I believe, goes up

1 to age 7. The Safety Board recommendation is that you go  
2 up through age 7 or up to age 8.

3 The reason for that, we looked at the height,  
4 weight, age charts from the CDC in 1996. And it was felt  
5 that if you went up to age 8, you would capture the largest  
6 body of children that need to be in booster seats. Other  
7 than that, the other part was that you addressed our  
8 recommendation which says children, after the CPS law  
9 stops, should be in seat belts in every seating position.

10 And I know that Pennsylvania law lets you ride  
11 unrestrained after the CPS law stops. And this bill would  
12 correct it. So we are very much in support of that.

13 CHAIRPERSON MARSICO: Okay. Thank you very  
14 much for being here. Appreciate it. Thanks.

15 MS. ROEBER: Thank you.

16 CHAIRPERSON MARSICO: We have one more  
17 speaker, testifier, I believe, scheduled. Hold on for a  
18 second. Yeah. For the members, note that we did have  
19 testimony provided to us from the Advocates for Highway and  
20 Auto Safety. That should be in your packet on your table.

21 And it's the Director of State Affairs of  
22 Advocates for Highway Auto Safety, which is, they're out of  
23 Washington, D.C. So please note in your packet testimony  
24 from them. We're going to just recess for 5 minutes and be  
25 back. Thank you very much.

1 (A brief recess was taken.)

2 CHAIRPERSON MARSICO: Okay. It's 11:15. And  
3 the Transportation Committee will reconvene. We're glad to  
4 see that Michael Carroll, Chief of Police of West Goshen  
5 Township, President of the Pennsylvania Chief of Police  
6 Association, is right on time. We appreciate that very  
7 much. Good to see you.

8 MR. CARROLL: Nice to see you. Thank you.  
9 Good morning. Members of the House Transportation  
10 Committee, thank you for this opportunity to testify in  
11 reference to House Bill 2447 regarding child passenger  
12 safety seats.

13 As you said, my name is Michael Carroll. I am  
14 the Chief of Police in West Goshen Township in Chester  
15 County, Pennsylvania. I currently serve as the President  
16 of the Pennsylvania Chiefs of Police Association. I am  
17 also a member of the Executive Board of the International  
18 Association of Chiefs of Police.

19 The sworn oath of every police officer is to  
20 protect and to serve. In my mind, there is no one group  
21 that deserves our protection more than children.  
22 Throughout my career, I have been witness to countless  
23 tragedies, all of them difficult and heart-wrenching.  
24 However, when a child is involved, it is even harder to  
25 accept than to understand.

1           Too many children die needlessly, and too many  
2 of these deaths could have been prevented. If this bill is  
3 passed, it could prevent those deaths. And many of my  
4 brothers and sisters in blue will be spared the task of  
5 informing a young parent that their baby has died an  
6 untimely death.

7           Many improvements have been made to make our  
8 highways safer. Automotive technology has done the same  
9 for our vehicles and has made them safer and more reliable.  
10 These advancements have saved many lives. But regardless,  
11 traffic crashes still occur.

12           Seat belt and child safety seats are proven  
13 lifesaving and injury-reducing devices. When properly  
14 used, child safety seats decrease the risk of fatalities to  
15 infants by 71 percent and their risk to toddlers by 54  
16 percent. These numbers hold true when applied to older  
17 children as well when they are placed in appropriate safety  
18 restraint devices.

19           Strong and well-enforced child occupant  
20 protection laws have proven to be the most effective  
21 methods of increasing child safety seat use and raising  
22 public awareness of child passenger safety issues. Since  
23 child occupant protection laws were introduced in the early  
24 1980s, child restraint rates have increased and the annual  
25 number of children ages 0 to 4 who are killed in crashes

1 have steadily declined.

2           Since awareness of child passenger safety  
3 issues substantially increased in the 1990s, even more  
4 dramatic declines have been noted in this age group.  
5 Fatality statistics for children ages 5 to 9, to whom most  
6 child occupant protection laws do not apply, have remained  
7 relatively steady.

8           Any reduction that was recorded in most, is  
9 most likely due to vehicular structural improvements.  
10 Overall public awareness of the need to use child safety  
11 seats and booster seats for children in this age bracket is  
12 extremely low.

13           A recent study by the National Highway Traffic  
14 Safety Administration shows, however, that children who  
15 ride in appropriate restraints are significantly less  
16 likely to suffer serious injuries than children who are  
17 restrained only by adult safety belts.

18           Although safety belts used alone afford some  
19 measure of protection to young children, it is far less  
20 than protection provided when belts used in combination  
21 with age and size-appropriate safety seats. In fact, there  
22 are some indicators to suggest that injury may be caused by  
23 the use of seat belts in the 4- to 7-year-old age group  
24 simply because they are designed for an adult passenger.

25           When used alone, the adult lap belt can ride

1 over the child's stomach; and the shoulder belt can cut  
2 across the child's neck. In a roll-over crash, a small  
3 child may still be ejected when a seat belt is the only  
4 restraint device used.

5           There are many technical experts who can tell  
6 you exactly what happens to children who are moved to adult  
7 seat belts too soon. The enactment of House Bill 2447  
8 would bring Pennsylvania law into close alignment with the  
9 best practice guidelines for these forgotten children in  
10 the 4 to 7 age group as recommended by the American Academy  
11 of Pediatrics, the National Highway Traffic Safety  
12 Administration, the National Transportation Safety Board,  
13 and the National SAFE KIDS Campaign.

14           These experts urge us to strengthen our child  
15 passenger safety laws on an almost daily basis. This bill  
16 would accomplish that and allow law enforcement the tool it  
17 needs to help protect the children of the Commonwealth.

18           Additionally, the issue of municipal police  
19 use of radar has also come before this committee. Radar as  
20 a means of speed detection on local roads is another proven  
21 way to reduce traffic crashes and save lives. These 2  
22 tools combined would finally bring Pennsylvania into the  
23 21st Century in the area of traffic enforcement and crash  
24 prevention. We are far behind and not giving our citizens  
25 what they deserve.

1 I agree wholeheartedly with this bill and  
2 these recommendations. I commend Representative Watson for  
3 her cosponsor, and her cosponsors for introducing this  
4 helpful legislation. I pledge to you the full  
5 participation and support of the law enforcement community  
6 to immediately begin necessary enforcement when this bill  
7 is passed.

8 My family and I insist that my 6 grandchildren  
9 are secured in properly fitting and age and  
10 size-appropriate safety seats. I applaud each of you who  
11 vote favorably for this bill and insist on the same for  
12 your loved ones and all the children of this Commonwealth.

13 Our association supports this bill. And we  
14 certainly thank you for the opportunity to appear before  
15 you this morning. Thank you.

16 CHAIRPERSON MARSICO: Thanks, Chief. Any  
17 questions? Eric Bugaile.

18 MR. BUGAILE: Chief, I had asked a question  
19 earlier of the AAA. And perhaps maybe you can make a  
20 suggestion. One of the problems that we have is a lot of,  
21 a lot of times, kids in the older age groups, actually from  
22 about 5 on are in things like soccer and softball,  
23 baseball.

24 And you have a lot of times coaches taking the  
25 kids places. You have parents that volunteer in a carpool.



1 Would you suggest -- how would you suggest that they get  
2 around that problem? Maybe you happen to take 5 kids, 4  
3 kids in the car.

4 Would you say that they would be forced to  
5 purchase car seats for those people that in the eventuality  
6 that they be taking other kids in the car?

7 MR. CARROLL: Well, most of the car seat  
8 restraining devices that we're talking about are basically  
9 portable. They can move from vehicle to vehicle with the  
10 child. So if a coach is picking up 3 or 4 children, if the  
11 parents are complying with the law that we're talking  
12 about, the car seat is already there. They just go with  
13 the child.

14 And it takes some time to hook them into the  
15 car. They'll have to make use for that. It takes a lot  
16 longer to get over the death of a child.

17 MR. BUGAILE: Okay. Would you recommend  
18 that for things like rental cars and taxies and things,  
19 too?

20 MR. CARROLL: Yes, sir. Absolutely.

21 MR. BUGAILE: Okay. Thank you.

22 MR. CARROLL: You're welcome.

23 CHAIRPERSON MARSICO: Any other questions?

24 (No response.) Well, thanks for being here. We appreciate  
25 it very much. Your testimony means a lot to this

1 committee.

2 MR. CARROLL: Well, we appreciate the  
3 opportunity. Thank you very much.

4 CHAIRPERSON MARSICO: This concludes the  
5 Transportation Committee meeting on House Bill 2447. Let  
6 me again thank Penn State Medical Center and all the  
7 members that were present here today and all the testifiers  
8 as well as Pennsylvania Cable Network. Thank you very  
9 much.

10 (Whereupon, at 11:22 a.m., the hearing  
11 adjourned.)

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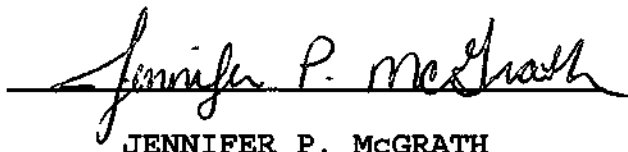
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1 I hereby certify that the proceedings and  
2 evidence are contained fully and accurately in the notes  
3 taken by me during the hearing of the within cause and that  
4 this is a true and correct transcript of the same.

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11 JENNIFER P. McGRATH

12 Registered Professional Reporter

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17 My Commission Expires:

18 April 30, 2002

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