

Washington State
Child Occupant Safety
Policy and Systems Strategies
2012–2016



Policy and Systems Strategies for Improved Child Occupant Safety Among Children Ages 0–13¹

Motor vehicle crashes are a leading cause of unintentional injury death and hospitalization among children ages 0-14. From 2006–2010, 68 children—about two elementary school classes—were killed in motor vehicle crashes in Washington. There were another 460 hospitalizations.² Nationally in 2009, 1,314 children ages 14 years and younger died in motor vehicle crashes and 179,000 children were injured. Child safety seats reduce the risk of death in passenger cars by 71 percent for infants, and by 54 percent for toddlers’ ages 1 to 4 years.³

Evidence shows strong policies that support interventions such as legislation, education, and seat distribution programs are effective in increasing child safety seat use. Enforcing child safety seat laws, implementing safety seat distribution and education programs, conducting community-wide education and enforcement campaigns that include incentive-plus-education programs are all effective interventions.⁴

Despite Washington’s strong child occupant safety law, many children are not restrained or are not correctly restrained. The most recent statewide observational survey of child safety restraint use in Washington was done in 2007. It showed about 51 percent of children weighing less than 40 pounds were in an infant safety seat—a significant decline from 2004, when nearly 71 percent were in safety restraints. The 2007 observations also showed only about 17 percent of children weighing between 40 and 80 pounds were observed in some type of booster seat. In 2004, 49.4 percent of children were observed in booster seats.⁵

Nationally in 2009, among child passenger deaths, 31 percent of children under age 4, and 42 percent of children ages 4 to 7 were unrestrained. These children are at risk for injury and death. Current state law in Washington says:

- Vehicle occupants of any age must be restrained properly. The driver is responsible for properly securing all passengers under age 16.
- Children under age 13 must ride in the back seat, whenever practical to do so.
- Children under age 8 (unless 4’9” or taller) must ride in an appropriate child restraint system—child car seat or booster seat, e.g., children over age 8 or 4’-9” must ride correctly in the vehicle seat belt system.
- Child restraint systems must be secured in the vehicle in accordance with instructions from both the vehicle manufacturer and the child restraint system manufacturer.

The Motor Vehicle Child Injury Prevention Workgroup began in October 2011 after the Washington State Department of Health Injury and Violence Prevention Program was funded through a cooperative agreement with the Centers for Disease Control and Prevention (CDC) to improve policies and systems for child occupant safety. The multi-disciplinary workgroup met four times to develop these policy and systems objectives, strategies, and measures.



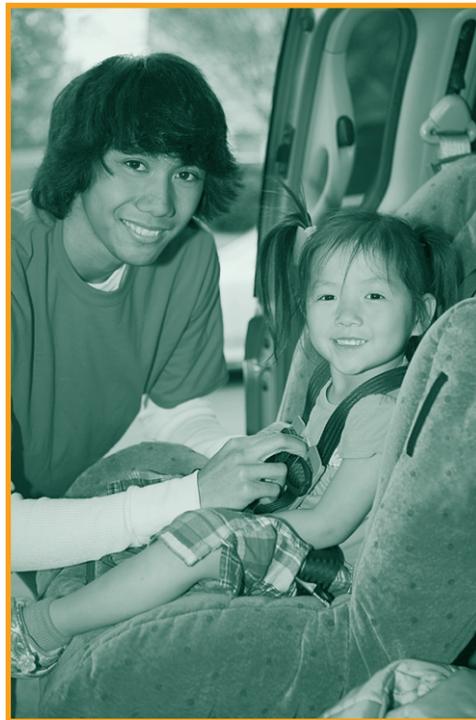
The workgroup identified four priority areas for policy and system change:

- Law enforcement
- Data and surveillance
- Transporting children supported by state programs
- Partnerships and public outreach

For each priority area, the workgroup identified short and long term strategies. The strategies give communities, organizations, cities, counties, and the state specific ways to prevent child occupant deaths and injuries, and to improve child occupant safety

overall. Small workgroups (made up of members from the large workgroup) will assist with and monitor implementation from 2012 through 2016.

The priority areas and strategies do not cover all child occupant safety issues. However, progress in these areas, if it can be sustained over time, will improve safety among children riding in vehicles. These priorities and strategies serve as our state’s “roadmap” and can be used by all stakeholders at any level.



¹ Data will track children ages 0–14

² Washington State Department of Health, Center for Health Statistics, Death Records (2008 Release) and Comprehensive Hospital Abstract Reporting System (CHARS-2009 release)

³ Department of Transportation (US), National Highway Traffic Safety Administration (NHTSA), Traffic Safety Facts, 2009 Data: Children. Washington (DC): NHTSA; 2010. [cited 2010 August 2]

⁴ Guide to Community Preventive Services, “Motor Vehicle-Related Injury Prevention: Use of Child Safety Seats,” www.thecommunityguide.org/mvoi/childsafetyseats/index.html

⁵ Greenspan AI, Dellinger AM, Chen J. *Restraint use and seating position among children less than 13 years of age: Is it still a problem?* Journal of Safety Research 2010. 41: 183-18

Law Enforcement

VALUE: Correct use of child restraints, like seatbelts, saves lives and is a priority for Washington.

RATIONALE: Because law enforcement officers can't always see if correct restraint is in use from outside the vehicle, many of them report being unsure about stopping a vehicle for violating the child occupant safety law. Research shows drivers are more likely to follow adult⁶ safety laws if they believe they'll be ticketed for not following the laws. Therefore, increasing enforcement of all occupant restraint laws may increase child occupant safety, and reduce risk for injury and death.

2012 – 2013

STRATEGIES:

- Regularly include child occupant safety in curricula of initial law enforcement training academies, either online or in classrooms.
- Assure online or classroom continuing education updates and refreshers on child occupant safety are available at law enforcement training academies.
- Promote consistent enforcement of child safety seat violations as part of regular law enforcement traffic patrols.
- Encourage stops for education, warnings, and ticketing, as appropriate.
- Conduct high-visibility seat belt and child safety seat restraint enforcement campaigns.

MEASURES OF SUCCESS:

- Law enforcement training academies include child occupant safety in standard occupant protection curriculum.
- Law enforcement training academies regularly offer classes on enforcing child occupant safety laws.
- Law enforcement officers regularly take introductory and continuing education courses on enforcing all occupant protection laws.
- Increased enforcement (warning/informational or notice of infraction) of Child Occupant Protection Laws as measured by at least a 5 percent increase in police traffic stops of violators.⁷

⁶ Shults RA, Nichols JL, Dinh-Zarr TB, Sleet DA, Elder RW. *Effectiveness of primary enforcement safety belt laws and enhanced enforcement of safety belt laws: a summary of the Guide to Community Preventive Services systematic reviews.* Journal of Safety Research. 2004;35(2):189-96.

⁷ Administrative Office of the Courts: in 2011, law enforcement issued 5,631 child passenger safety tickets. A five percent increase will be at least 5,912 tickets in 2012 and 2013.

⁸ Administrative Office of the Courts: in 2011, law enforcement issued 5,631 child passenger safety tickets. A five percent increase between 2014 and 2016 will be at least 6,475 tickets.

2014 – 2016

STRATEGIES:

- Assure crash investigation experts have the skills needed to identify child restraint misuse that results in serious injuries and deaths.
- Recommend car seat technician training for at least one county-level law enforcement officer to be the safety restraint expert consultant for law enforcement agencies and crash investigators.

MEASURES OF SUCCESS:

- Crash investigators are trained to find and report safety restraint misuse or non-use issues that contribute to injury or death.
- Child safety seat expert is consulted for fatal and serious injury crashes to children ages 0–13.
- At each crash, on-scene law enforcement officers either document the safety seats with pictures, or leave the safety restraint seats exactly as found.
- Increased enforcement (warning/informational or notice of infraction) of Child Occupant Protection Laws as measured by at least a five percent increase in police traffic stops of violators.⁸



Data & Surveillance – Safety Seat Inspections

VALUE: Through surveillance and analysis of incorrect installation and misuse of safety restraints, we can work to prevent future tragedies.

RATIONALE: Washington needs reliable, timely data to analyze child safety seat misuse issues. A priority need is to understand and mitigate misuse that can lead to catastrophic results. There is no central reporting for incorrect installation data. A standard data collection form and system is needed to regularly track how many child deaths and hospitalizations that occurred due to the absence or incorrect use of a child safety seat. This information will be used by child occupant safety advocates for messaging to help educate the public.

2012 – 2013

STRATEGIES:

- Adopt one statewide child safety seat inspection data collection form and system.
- Encourage all of Washington’s nationally-certified car seat technicians to use the standard inspection form.
- Make educational materials and resources for correct child safety seat usage available in multiple languages and formats that reflect the diversity of people living in Washington.
- Pilot test a statewide newspaper clipping surveillance system of child fatalities and serious injuries for ages 0–14, for the time period of June 1 to December 31, 2012.

MEASURES OF SUCCESS:

- One child safety seat inspection form is successfully pilot tested.
- Results from pilot tests are used to improve the surveillance and inspection systems.
- Training on using the new form and data submission is completed.
- Newspaper surveillance pilot is analyzed for usefulness, and stopped if not useful.

2014 – 2016

STRATEGIES:

- Assure that certified child passenger safety technicians document their car seat inspections using the one-form system.
- Assure quality control is in place for tracking and reporting data.
- Use lessons learned about incorrect use of safety restraints to inform and educate people who transport children.
- Develop a sustainability plan to keep educational material updated, and to include new best practices.
- Develop and implement quality control to track data gathering and reporting compliance.

MEASURES OF SUCCESS:

- Data system is in place. All state certified child passenger safety technicians in Washington submit data from car seat checkup to the central data repository.
- Usefulness of current and future data sources are regularly tracked and evaluated.
- Supplemental forms developed on incorrect safety seat use is completed and turned in to the data repository at least 95 percent of the time.



Transporting Children who are Supported by State Programs⁹

VALUE: The use of child safety restraints saves lives; Washington's children are transported correctly every time they ride in a vehicle.

RATIONALE: Washington recognizes the need for safe transportation of all children, including those transported for Medicaid, foster care, and Child Protective Services. Transporters of state-supported children need initial and continuing training so they can safely transport these children.

2012 – 2013

STRATEGIES:

- Conduct inventory of agencies and programs that transport children, and are licensed by or receive financial support from the state.
- Better define standards and training needs for transporters of children supported by state programs.
- Adapt, from in-person training curriculum, an online, standardized, basic training for transporters of children supported by state agency programs.

MEASURES OF SUCCESS:

- Completed inventory of agencies and program that transport children and are licensed by or receive financial support from the state.
- Agency and organization rules and policies are updated with the latest child occupant safety information. Examples are: Department of Early Learning, Department of Licensing, child care centers, Head Starts, and Early Childhood Assistance Programs (ECAPs).
- Online standardized basic training curriculum for transporters of children supported by state agency programs is available.



2014 – 2016

STRATEGIES:

- Promote the online child occupant safety seat awareness class to transporters of state-supported children.
- Assure refresher training or an information update system is available online for transporters of children.
- Assure data tracking and reporting of transport incidents and injuries through Department of Social and Health Services (DSHS) and Health Care Authority (HCA) systems, including ages and injury severity data.
- Include early learning staff, child care providers, child protective services, and foster parents in child occupant safety training opportunities.
- Provide quality improvement audit and support for transporters.

MEASURES OF SUCCESS:

- Increase the number of transporters who take trainings on safe transport of children.
- The tracking system for Medicaid transport data runs smoothly and easily accessed.
- The number of transporters who take initial basic or refresher training course.

⁹ For the purpose of this document at this time, "children supported by state programs" includes children on Medicaid, children in foster care, and children under the care of Child Protective Services.

Partnerships and Public Outreach

VALUE: The use of child safety restraints saves lives.

RATIONALE: Strong, coordinated local, state, and federal partnerships are vital to preventing injuries and deaths of children in motor vehicle crashes. Partnerships can help deliver consistent messages and education to all people who transport children, and can support and enhance resources. Correct use of restraint systems for all ages reduces the risk of death, disability, and serious injury.

SUPPORT NEEDED FOR POLICY CHANGE: Policies and systems do not just change automatically. Education and stakeholder, media, and public outreach are needed so that everyone impacted understands and supports the following issues:

- What changes are needed
- Why the proposed changes are needed and what problems they will solve
- What specific policy actions are needed
- How the changes will improve their lives
- When the changes will take place

2012 – 2013

STRATEGIES:

- Build and enhance partnerships with local and national organizations, associations, agencies, and coalitions involved in child occupant safety, including but not limited to:
 - AAA – Washington
 - Centers for Disease Control and Prevention
 - Children's Safety Network
 - Emergency medical service and fire agencies
 - Families
 - Harborview Injury Prevention and Research Center
 - Head Start
 - Hospitals and clinics
 - Injury and Violence Prevention Technical Advisory Committee of the Emergency Medical Services and Trauma Systems Steering Committee
 - Insurance companies
 - Law enforcement training facilities
 - Local health jurisdictions
 - Local law enforcement agencies
 - National Highway Traffic Safety Administration
 - Parent Teachers Associations
 - Safe Kids Coalitions,
 - Seattle Children's Hospital
 - Target Zero Managers
 - Washington Chapter – American Academy of Pediatrics
 - Washington State Department of Early Learning
 - Washington State Department of Health
 - Washington State Department of Licensing
 - Washington State Department of Social and Health Services
 - Washington State Health Care Authority
 - Washington State Patrol
 - Washington State Safety Restraint Coalition
 - Washington Traffic Safety Commission
- Create opportunities for networking and collaboration on child occupant safety.
- Update the Washington driver guide section on child occupant protection.

MEASURES OF SUCCESS:

- Child Occupant Safety Network is established and meets at least twice yearly.
- Washington's driver guide is updated and available online.

2014 – 2016

STRATEGIES:

- Identify and address emerging issues in child occupant safety.
- Maintain training and education opportunities for transporters, law enforcement, and parents.

MEASURES OF SUCCESS:

- Emerging issues, law changes, and changes in best practices are tracked and communicated to partners.
- Increase the number of people trained and updated on child occupant safety.



Washington State Child Occupant Safety Policy and Systems Workgroup October 2011 – June 2012

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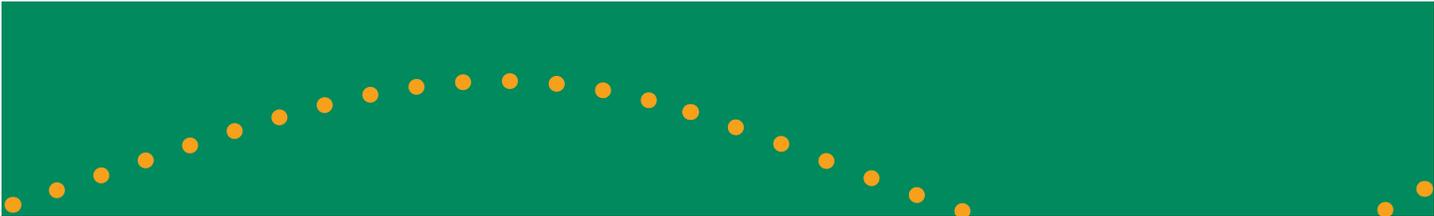
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