

Fiscal Estimate Narratives

DHFS 6/21/2005

LRB Number	05-0788/8	Introduction Number	SB-221	Estimate Type	Updated
Subject					
Shaken baby syndrome education and training					

Assumptions Used in Arriving at Fiscal Estimate

Under current law, the Department is required to prepare informational materials on Sudden Infant Death Syndrome (SIDS) and to distribute these materials in such a way that they are available to parents. The Department is also required to promulgate rules requiring day care workers to receive training on SIDS.

This bill requires that the Department provide similar information regarding shaken baby syndrome, as defined in the bill, and to promulgate rules for certification of day care providers that include training regarding shaken baby syndrome. SB 221 requires the Department to prepare or contract with a nonprofit organization to prepare printed and audiovisual materials relating to shaken baby syndrome and to make these materials available to hospitals, maternity homes, and nurse-midwives. The Department must also make these materials available to county departments and Indian tribes that provide home visitation services and providers of prenatal, postpartum and young child care coordination (PNCC).

The bill requires parents of newborns to be provided with a copy of written materials by the appropriate health care provider. In addition, health care providers are required to request new parents to view the audiovisual materials before being discharged from a hospital or birthing facility, or within seven days of the birth, as appropriate. Providers of PNCC are required to provide information regarding shaken baby syndrome to the recipients of this program. County departments and Indian tribes that provide home visitation services are also required to provide this information to recipients of these services.

SB 221 requires certified and licensed day care providers to receive training on shaken baby syndrome. The bill also requires the Department to identify children with shaken baby syndrome by using the statewide automated child welfare information system (WISACWIS) and child fatality information compiled by the Department of Justice.

SB 221 creates an appropriation and appropriates \$68,200 GPR annually for the costs of the provisions in this bill. The bill also creates 1.0 GPR FTE nursing position to administer the activities specified in this bill.

It is estimated that the initial cost of printing and mailing information about shaken baby syndrome to approximately 5,700 day care providers will be \$20,100 GPR. The cost of providing this information to the approximately 770 new providers which the Department licenses each year will be \$2,700 GPR annually. One time costs of developing, producing, and distributing written and audiovisual materials for parents to health care providers, counties, tribes, and PNCC providers about shaken baby syndrome are estimated to be \$43,100 GPR. On-going costs of reproducing and distributing this information to medical facilities, tribes, county departments, and PNCC providers, for distribution to new parents, are estimated to be \$11,200 GPR annually.

The cost of a Nurse Clinician 2 position to administer this program are estimated to be \$73,500 annually. One-time costs for the positions will be \$2,500 GPR.

Minor changes will be required for WISACWIS to document children with shaken baby syndrome that result in minimal costs to the Department. The Department will be able to absorb these costs within its existing budget.

The provisions of this bill are not expected to have a fiscal effect on local departments, tribes, and PNCC providers, who will receive information on shaken baby syndrome for distribution from the Department.

Total one-time costs to the Department from SB 221 are estimated to be \$65,700 GPR. Annual costs will be \$87,400 GPR.

Updated estimate

The bill allocates 1.0 FTE nursing positions to DHFS. Senate Amendment 1 revises the bill to provide a non-nursing position rather than a nursing position. As a result, the cost to the Department would be less. Assuming a 1.0 FTE Public Health Educator at a cost of \$63,100 per year, the total fiscal effect of the bill as amended would be \$65,700 GPR in one-time costs and \$77,000 GPR in ongoing costs.

Long-Range Fiscal Implications

Fiscal Estimate Worksheet - 2005 Session

Detailed Estimate of Annual Fiscal Effect

Original
 Updated
 Corrected
 Supplemental

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Subject			
Shaken baby syndrome education and training			
I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):			
Development of informational materials \$65,700			
II. Annualized Costs:		Annualized Fiscal Impact on funds from:	
		Increased Costs	Decreased Costs
A. State Costs by Category			
State Operations - Salaries and Fringes		\$60,100	
(FTE Position Changes)		(1.0 FTE)	
State Operations - Other Costs		16,900	
Local Assistance			
Aids to Individuals or Organizations			
TOTAL State Costs by Category		\$77,000	\$
B. State Costs by Source of Funds			
GPR		77,000	
FED			
PRO/PRS			
SEG/SEG-S			
III. State Revenues - Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, ets.)			
		Increased Rev	Decreased Rev
GPR Taxes		\$	\$
GPR Earned			
FED			
PRO/PRS			
SEG/SEG-S			
TOTAL State Revenues		\$	\$
NET ANNUALIZED FISCAL IMPACT			
		State	Local
NET CHANGE IN COSTS		\$77,000	\$
NET CHANGE IN REVENUE		\$	\$
Agency/Prepared By		Authorized Signature	Date
DHFS/ Ellen Hadidian (608) 266-8155		Andy Forsaith (608) 266-7684	6/20/2005