



Safe Rides Home

A California Department of Public Health
Child Passenger Safety Law Compliance Guide for
Hospitals, Clinics, and Birthing Centers

Previously titled *Child Passenger Safety: Health Care Connection* and initially released in 2002.

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Preface

Road traffic injuries are a leading cause of death and a major cause of morbidity, including long-term disability, with the greatest impact falling on our most vulnerable citizens: children and particularly, children in underserved communities. In turn, these injuries place a heavy burden on health services. The healthcare cost may be as much as 5% of the U.S. gross national product (1) - thus, preventing and reducing road traffic injuries has become an increasing social and economic challenge.

For almost 30 years, California has required the healthcare system to play a part in keeping kids safe in cars. California requires all hospitals, clinics, and birthing centers to provide and discuss specific information on [child passenger safety \(CPS\)](#) with the [parent or person to whom the child is released](#). In addition, laws provide that as a condition of licensing, facilities must have a written policy relating to the dissemination of CPS information. It is fortunate that the healthcare facilities in California, unlike most other states, have this guidance specifically outlined within the law. This creates a clear expectation of the healthcare facility role in CPS, a statewide standard of care, and an important way to manage risk.



As a service to healthcare to encourage that all children leaving healthcare facilities have [Safe Rides Home](#), the California Department of Public Health (CDPH) provides resources like this guide to compliance with the CPS requirements of the law. This guide supersedes CPDH's 2002 publication, *Child Passenger Safety: The Health Care Connection*, and was created based on review and analysis of relevant data and literature with the input of CPS experts and facilities with established CPS programs. This guide proposes a risk-reduction, cost-effective, simple solution that can save children's lives, reduce the shocking burden of road traffic crashes, and promote an environment of *Safe Rides Home* throughout California.

Safe Rides Home (SRH) describes the healthcare goal that this guide supports. The phrase *Safe Rides Home* captures a commitment to helping families travel safely.

Thanks to Heidi Heflin, MN, RN, CPSTI, Child Passenger Safety-Nurse Consultant, Founder Global Child Passenger Safety for her professional expertise in developing *Safe Rides Home*, contract #23-11032. <mailto:carseatrn@gmail.com>

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The information provided in this guide does not, and is not intended to, constitute legal advice or interpretation of California law.





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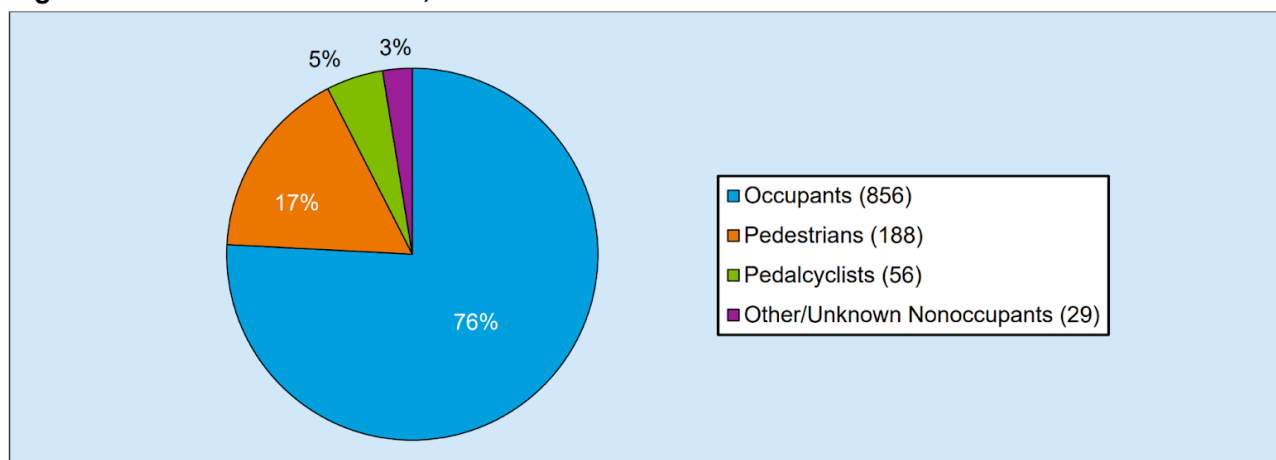
TDD

For relay services for the hearing impaired or speech impaired, please call:
MCI from TDD 1-800-735-2929 or MCI from voice telephone 1-800-735-2922
Sprint from TDD 1-888-877-5378 or Sprint from voice telephone 1-888-877-5379

Introduction

An average of three (3) children were killed and an estimated 429 children were injured every day in traffic crashes in 2022 (2). Occupant fatalities far exceed the other reasons for traffic fatalities of children (Figure 1, sourced from the Fatality Analysis Reporting System (FARS) published by the National Highway Traffic Safety Administration (NHTSA)). Unfortunately, car seats and [booster seats](#) are rarely used correctly (3). One significant study found 95% of newborns leaving their birth hospital improperly secured (4). If used properly, car seats and boosters reduce the risk of death by 28% and reduce the risk of injury by 71% to 82% when compared with children of similar ages in seat belts (5,6,7,8). Of the children who were killed in 2022, 39% were not buckled up at all (2). In the context of improving [proper use](#) of car seats and boosters, the need for healthcare facilities to support Safe Rides Home for all children from their first car ride and every ride thereafter is paramount. CPS programs are among the most cost-effective means of avoiding serious injury and reducing the need for hospitalization and utilization of medical services.

Figure 1. Child Traffic Fatalities, 2022



Source: FARS 2022 Annual Report File (ARF)

Note: Percentages may not add up to 100 percent due to independent rounding.

This guide includes recommendations for healthcare facilities to develop or update CPS policy and procedures, as well as resources that will provide tools to comply with applicable California law. Facilities that have written CPS policy and procedures in place may still find this information helpful to ensure they are up-to-date and compliant since there have been changes to the CPS laws as recently as 2017. To achieve optimal results, these interventions should be used in combination with annual healthcare provider education and training, along with an ongoing relationship between the healthcare facility and a [Child Passenger Safety Technician \(CPST\)](#) and/or a [CPS agency](#) (8). The California Department of Public Health (CDPH) hopes that this guide acts as a catalyst to grow facility-based CPS programs, provide Safe Rides Home for all children leaving healthcare facilities, and improve road safety for all California children.

California Law Requirements for Healthcare Facilities

Three California laws – the **Health and Safety Codes (HSC)** [1268](#) (applies to hospitals), [1204.3](#) (birthing centers), and [1212](#) (clinics) – state that, as a condition of licensure, these facilities must have a written policy on the dissemination of CPS information to patients that includes the following:

1. A summary of current state laws (Vehicle Codes (VC) [27360](#)) requiring car seats, boosters, and seat belts to be used properly when transporting children in motor vehicles.
2. A listing of car seat/booster programs located within the county (prepared by local health departments in conjunction with the Office of Traffic Safety (OTS) as required by VC Section [27360.6](#) and VC Section [27362](#)).
3. Information describing the risks of death or serious injury associated with failure to use a car seat/booster/seat belt.

California Vehicle Code (VC) Section [27363.5](#) states that hospitals, clinics, and birthing centers must provide and discuss with the parent or person to whom the child is released under eight years old, the CPS information listed (below) at the time of discharge:

1. Summary on the current CPS laws – specifically VC [27360](#) (children <8 years). Optional to include: VC [27360.5](#) (children 8-16 years) – requiring proper use of [appropriate](#) car seats, boosters, seat belts, and transportation in the rear seat of the vehicle.
2. Contact information for no-cost or low-cost car seat program, information, and installation assistance. This contact may include one of the following:

- A. The website for the California car seat, booster, seat belt fit inspection locator:

[Who's Got Car Seats?](#)

- B. Resources for locating a nearby inspection site. Visit NHTSA's

[SeatCheck.org](#).

- C. The telephone number of the local office of the Department of the California Highway Patrol (CHP) or the link to the search online at [Find an Office](#).

Who's Got Car Seats?

Local health departments are required to provide and maintain a listing of all local no-cost/low-cost car seat distribution and education programs in each California county. Birthing centers, community child health (clinics), and hospitals shall make the listing available to the public.

*Child is defined here as under eight years of age. This guide provides for and encourages the inclusion of children up to 16 years of age, covering VC 27360.5.

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Resources

The following resources are FREE and meet most or all of the VC and HSC requirements:

✓ **Current CPS law**

✗ **Car seat program locator**

✓ **Misuse risks**

✓ **In English and Spanish**



Print from [CHP website](#).

Hospitals may satisfy HSC requirements by demonstrating that they have requested this pamphlet from CHP.

✓ **Current CPS law**

✓ **Car seat program locator**

✓ **Misuse risks**

✓ **In 11 languages**



Print from [CDPH website](#).

Order from vosp@cdph.ca.gov.

This brochure satisfies all of the HSC and VC requirements.



Liability Issues

Providing healthcare can be inherently risky and no facility can completely eliminate it. However, California VC 27363.5, provides that *“a hospital, clinic, or birthing center that **complies with the laws regarding CPS, is not responsible** for the failure of the parent or person to whom the child is released to properly transport the child.”* There is some evidence that courts may find failure to provide the parents of a child being treated in the facility with CPS support as a violation of the standard of care.

A hospital, clinic, or birthing center can minimize risk by:

1. Employing/utilizing a nationally certified CPS Technician (including for staff education, resource selection/review, special transportation needs referrals, policy, and procedure development/review, etc.)
2. Implementing a well-managed policy and procedures system and ensuring it is followed consistently throughout the facility.
3. Creating an ongoing staff education and training program commensurate with the level of involvement in CPS activities.

Always engage Risk Management to advise on the steps to comply with California laws.



Policy and Procedures Development

A well-written policy creates an inclusive hospital-wide standard of care and establishes responsibilities for compliance with the law. Before starting to develop a policy and procedures:

- Identify CPS activities in all departments/units/programs at the facility and in the community to simplify the process.
- Identify the departments/units/programs at your facility which provide services to all children. At a minimum this includes children younger than 8 years old in compliance with VC 27363.5 and covers children with disabilities or who may have permanent or temporary special transportation needs (VC [27363](#)). Care can include children up to 16 years old (VC 27360.5).
- Invite these departments/units/programs to participate in the policy development and implementation process. This develops buy-in, ownership, success with implementation, and reduces risk for the patient, practitioner, and the facility by creating a mutually agreed-upon standard of care.

Policy Development

A policy includes the following sections. These may be titled differently depending on each facility policy template: a Purpose (usually a simple statement describing the reason for the policy) and a Statement (what the facility does to support the purpose).

Procedure Development

Unlike a policy that usually can be applied uniformly across the facility, procedures will vary to reflect the unique services within each department/unit/program. Procedure should still reflect facility-wide consistency in CPS practice, resources, and staff education requirements whenever possible. A procedure contains more detail than a policy and describes the actions that should be taken to implement the policy. Procedures answer important questions such as when, who, how, and what.

When to disseminate the CPS information is spelled out in VC 27363.5 - “at the time of discharge.” However, each unit may choose when the information first will be introduced and then covered again at discharge.

- For families in need of a car seat/booster/[adaptive car seat](#) this information should be given on admission since there is caregiver training involved before a car seat/booster is distributed.
- Recognizing early the need for referrals to a CPS Technician trained in [Safe Transportation for All Children \(STAC\)](#) facilitates a timely discharge and a safe ride home for all children.



How will the information be “discussed” with the parent/person to whom the child is released?

- *Will there be a class or one-on-one discussion?*
- *Is a translator necessary to communicate?*

Who should be named responsible for disseminating and discussing CPS information depends on their qualifications.

- Staff duties should be commensurate with their education and training.

What information is disseminated (pamphlets, websites, telephone numbers, specific referrals)?

Sample Hospital Policy/Procedure

Subject/title: Child Passenger Safety Law - Hospital Requirements

Department: Pediatrics

Purpose: To reduce the incidence of death and injury to children, and to comply with California Vehicle Code 27363.5 and Health and Safety Code 1268, the parent and/or person to whom the child is released must be made aware of child passenger safety information as described in this Policy.

Policy Statement: Every parent or person to whom a child is released will be provided the opportunity to discuss the following information:

- A summary of current California laws (VC 27360/27360.5) requiring car seats, boosters, or seat belts, and the transportation of children in the rear seat of motor vehicles.
- A listing of child passenger safety programs (with low- or no-cost car seats/booster) located within the county.
- The risks of death or serious injury associated with failure to properly use an appropriate car seat, booster, or seat belt.

Procedure:

A. All parents and persons to whom the child is released will be provided the child passenger safety information below (as available) upon admission (included in the welcome packet).

- California Department of Public Health brochure California Laws - Keep Your Child Safe in the Car (available in [English](#), [Spanish](#), [Arabic](#), [Chinese](#), [Dari](#), [Hmong](#), [Pashto](#), [Punjabi](#), [Russian](#), [Ukrainian](#), and [Vietnamese](#)).

B. The (staff) should discuss basic car seat information from the brochure before and at discharge. This must include:

- an explanation of the child transportation laws requiring an appropriate car seat, booster, or seat belt to be properly used,
- the rear seating requirement,
- rear-facing requirement to age 2 or 40 lbs. or 40 inches,
- the risk of serious injury and death with failure to use,
- and access to community CPS Technician/CPS programs.

C. A translator may be used, if necessary, to discuss information in the patient's preferred language.

D. If a parent/person to whom the child is released requests additional information or assistance with a special transportation need, the (staff) should make a referral to the hospital Child Passenger Safety Technician or the local California Department of Public Health car seat fitting station found at [Who's Got Car Seats?](#) or to a Child Passenger Safety Technician in the community found on [Find a Tech](#).

E. The (staff) will document the verbal instructions, referrals made, and educational materials provided, or media viewed in the patient's medical record and note if a language translator is used.

F. Parent or person to whom the child is released is responsible for correctly securing the car seat/booster in the car, then placing and harnessing the child in the car seat/booster/seat belt all according to the manufacturer's instructions, vehicle manual, and California law.

Staff Training

Staff competency and confidence are critical for successful policy and procedure adoption. At minimum, staff should be prepared to fulfill the California law requirements, which include:

- Competency in discussing the CPS laws (VC 27360/27360.5) that cover appropriate car seat/booster/seat belt choice, proper car seat/booster/seat belt use, back seat requirements,
- Risks of death and injury associated with failure to properly use a car seat, booster, or seat belt, and
- Resources available to families in need of a car seat/booster/adaptive car seat, education, installation assistance.

National Highway Traffic Safety Administration, American Academy of Pediatrics, Children's Hospital Association, and National Safety Council recommend a CPS Technician, the expert, to educate staff about CPS. CPS Technicians can be contacted through [Find a Tech](#), including those with extra training in STAC.

The National Safety Council offers general awareness training in CPS*. [Car Seat Basics](#) is a free, online, 1-hour module-based educational tool suggested for medical staff. Use code: **CA SRH** when registering. Proof of completion will be provided after successfully finishing all modules.

*Content includes CPS [best practice](#) but does not cover California state laws.

Optional/optimal next steps for staff are to become trained as a nationally certified CPS Technician. Go to [Safe Kids certification](#) for details and to find courses available in your location.

Child Passenger Safety Resources

Consistent patient educational materials used throughout the facility can better ensure correct and up-to-date information is provided to caregivers and the job of periodically reviewing a limited number of educational materials is streamlined. Because the field of CPS is changing frequently, and materials are consistently revised to keep current for accuracy, the direct links provided in this guide may expire as needed.

If you choose to develop your own brochure, it is recommended that you focus on promoting local resources since technical information about CPS (photos of children in car seats, information about the law, or how to select and use car seats) is very complex and rapidly changing. You are encouraged to use material from a state or national agency/organization like CDPH, Center for Disease Control (CDC), National Highway Transportation Safety Administration (NHTSA), or American Academy of Pediatrics (AAP).

Only the materials/organizations named in the laws have been included in this guide. Find more educational materials and resources in [Appendix A](#) (Additional CPS Resources with QR Codes).

Conclusion

A growing volume of clinical studies and best practice recommendations suggest that engaging with parents about CPS at each healthcare facility visit is an essential part of the standard of care for treatment of children. Families rely on healthcare facilities to deliver accurate information; for that to happen, everyone involved in a patient's care must be on the same page. The only way to achieve that goal is to have detailed, well-thought-out, and well-maintained policy and procedures that clearly establish the roles and expectations of everyone along the care continuum. From a business standpoint, patient safety is especially important for protecting the facility from potential legal liability—and policy, procedures, staff education, and utilization of a CPST play an important role in doing so.

Some hospitals and clinics have created much goodwill in their communities by proactively implementing CPS programs, thus demonstrating a commitment to saving lives and decreasing injury and suffering among the families they serve. This guide is a good start to assist healthcare facilities in satisfying the minimal standards set by California law, however, it is far from a comprehensive CPS program that is working to meet the needs of all communities. Local Public Health Department CPS programs, along with CDPH, may provide guidance to complete and ongoing support to exceed the requirements of the law.

Glossary

Adaptive car seats: Car seats, car beds, and harnesses made to safely transport children with physical and/or emotional challenges.

Appropriate car seats/boosters/vests/car beds/adaptive car seats/seat belts include consideration of the child's fit, including their physical and emotional development level, to safely transport the child. Equipment selection should consider car seat fit in the vehicle and if the family can and will use it on every ride.

Best practice: In child passenger safety, it is the safest way to transport a child based on a child's weight, age, height, and developmental level.

Booster: A crash-tested seat that raises a child to the right position for the vehicle belt to fit correctly.

Child Passenger Safety (CPS): Requires the consistent use of correctly installed car seats, boosters, harness/vests, car beds, adaptive car seats, and seat belts that are appropriate for the child's size, age, and development and meet the Federal Motor Vehicle Safety Standard.

CPS agency: Child passenger safety agencies, listed by county, which can be located using the [Who's Got Car Seats?](#) website. This is a California-only program.

Child Passenger Safety Technician (CPST): Has passed a national certification course to learn how to educate caregivers and professionals on how to properly use car seats and seat belts. The certification must be maintained through continuing professional education.

Parent/person to whom the child is released/patient: Terms used by California law to refer to the recipient of the required education. Healthcare facilities may choose a different term but when directly citing the law in this guide the exact terminology is used.

Proper use: refers to following the car seat/booster/seat belt manufacturer's instructions, vehicle manual, and the law.

Safe Rides Home (SRH): Many successful state CPS programs have adopted a catchy name or phrase. SRH describes the goal that this healthcare-based guide supports. Using SRH is a way for California healthcare facilities to be a part of something bigger than simply adding or changing a policy. It is a commitment to helping families travel safely beginning with the first trip home.

Safe Transportation for All Children (STAC): Special needs training is provided by the Automotive Safety Program at Riley Hospital for Children in Indianapolis. For more information, go to www.preventinjury.org.

References





- 1 Goldstein JA, Winston FK, Kallan MJ, Branas CC, Schwartz JS. Medicaid-based child restraint system disbursement and education and the vaccines for children program: comparative cost-effectiveness. *Ambul Pediatr*. 2008; 8:58-65
<https://pubmed.ncbi.nlm.nih.gov/18191783/>
- 2 National Highway Traffic Safety Administration (NHTSA). Traffic Safety Facts 2022 Data: Children (Report No DOT HS 813 456). Washington, DC: U.S. Department of Transportation, National Highway Traffic Safety Administration, National Center for Statistics and Analysis; May 2023.
<https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/813575>
- 3 Centers for Disease Control and Prevention (CDC). WISQARS — Web-based Injury Statistics Query and Reporting System. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2023. <https://wisqars.cdc.gov/>
- 4 Unsafe from the Start: Serious Misuse of Car Safety Seats at Newborn Discharge Benjamin D. Hoffman, MD, Adrienne R. Gallardo, MA, Kathleen F. Carlson, PhD
Published: December 18, 2015, DOI: <https://doi.org/10.1016/j.jpeds.2015.11.047>
Effectiveness of belt positioning booster seats: an updated assessment (November 1, 2009) | American Academy of Pediatrics
<https://publications.aap.org/pediatrics/article-abstract/124/5/1281/72162/Effectiveness-of-Belt-Positioning-Booster-Seats-An>
- 5 An evaluation of the effectiveness of forward-facing child restraint systems (July 2004) | Accident Analysis & Prevention <https://pubmed.ncbi.nlm.nih.gov/15094411/>
- 6 Effectiveness of child safety seats vs seat belts for children aged 2 to 3 years (January 2007) | Archives of Pediatrics & Adolescent Medicine
<https://jamanetwork.com/journals/jamapediatrics/fullarticle/569418>
- 7 Effectiveness of child safety seats vs seat belts in reducing risk for death in children in passenger vehicle crashes (June 2006) | Archives of Pediatrics & Adolescent Medicine
<https://jamanetwork.com/journals/jamapediatrics/fullarticle/205063>
- 8 Checklist for Hospital Discharge Recommendations for Safe Transportation of Children (March 25, 2014) | CPS Board
<https://www.cpsboard.org/wp-content/uploads/2020/04/Checklist-for-Hospital-Discharge-Recommendations-for-Safe-Transportation-of-Children.pdf>




Legal

Issue Brief: Hospitals' Role in Car Seat Safety (2014) | Legal Resource Center for Public Health Policy, University of Maryland Carey School of Law
https://www.miemss.org/home/Portals/0/Docs/EMSC/CPS_Project/Issue-Brief-Hospitals-Role-Car-Seat-Safety.pdf?ver=2020-03-08-222133-693



Appendix A: Additional CPS Resources with QR Codes






California Organizations








ORGANIZATION & CONTENT	QR CODE
<p><u>California Department of Public Health</u></p> <ul style="list-style-type: none"> ✓ CPST Training ✓ CPS Laws and injury data ✓ Brochures 	
<p><u>California Highway Patrol</u></p> <ul style="list-style-type: none"> ✓ Car seat installation videos ✓ Brochures 	
<p><u>California Office of Traffic Safety/Who's Got Car Seats?</u></p> <ul style="list-style-type: none"> ✓ Contact information car seats and education 	
<p><u>California Legislative Information</u></p> <ul style="list-style-type: none"> ✓ Laws 	

Safe Kids California <ul style="list-style-type: none"> ✓ List of Safe Kids Coalitions 	
EpiCenter California Injury <ul style="list-style-type: none"> ✓ Statistical data ✓ Research 	
Injury and Violence Prevention Branch <ul style="list-style-type: none"> ✓ California CPS laws 	

National Organizations

ORGANIZATION & CONTENT	QR CODE
National Highway Traffic Safety Administration <ul style="list-style-type: none"> ✓ Car seat registration ✓ Recall list ✓ Child Safety Seat Ease of Use Ratings 	
Safe Kids Worldwide <ul style="list-style-type: none"> ✓ Choosing & installing car sets ✓ Recalls list ✓ Hot cars 	

<p><u>SafetyBeltSafe U.S.A.</u></p> <ul style="list-style-type: none"> ✓ Parent & Professional training ✓ Free to print educational materials 	
<p><u>Safe Kids Certification</u></p> <ul style="list-style-type: none"> ✓ To find a CPS Technician ✓ To become a CPS Technician 	
<p><u>American Academy of Pediatrics</u></p> <ul style="list-style-type: none"> ✓ Car Seats: Product Listing ✓ Videos 	
<p><u>Kids and Car Safety</u></p> <ul style="list-style-type: none"> ✓ Safety tips for in and around cars ✓ Hot cars 	
<p><u>National Safety Council/Car Seat Education</u></p> <ul style="list-style-type: none"> ✓ <u>Car Seat Basics</u> introduction to CPS for caregivers/professionals in English/Spanish modules ✓ Hot car Resources 	
<p><u>CHOP Center for Injury Research and Prevention</u></p> <ul style="list-style-type: none"> ✓ Information on premature babies in car seats ✓ Installation videos 	

<p><u>Automotive Safety Program</u></p> <ul style="list-style-type: none"> ✓ Adaptive transportation information ✓ Printable brochures ✓ STAC (Safe Travel for All Children) training 	
<p><u>American Automotive Association (AAA)</u></p> <ul style="list-style-type: none"> ✓ In-person classes 	
<p><u>Hudson Center for Prenatal Vehicle Safety</u></p> <ul style="list-style-type: none"> ✓ Seat belts in pregnancy 	
<p><u>Safe Ride News</u></p> <ul style="list-style-type: none"> ✓ Program information ✓ Fact sheets ✓ Resources 	
<p><u>Insurance Institute for Highway Safety</u></p> <ul style="list-style-type: none"> ✓ STATS ✓ State CPS laws 	
<p><u>cpsboard.org</u></p> <ul style="list-style-type: none"> ✓ CPST training ✓ CPS Program support 	
<p><u>Injury Control Resource Information Network (CDC)</u></p> <ul style="list-style-type: none"> ✓ Facts ✓ Resources ✓ Tools 	

Best Practice Publications

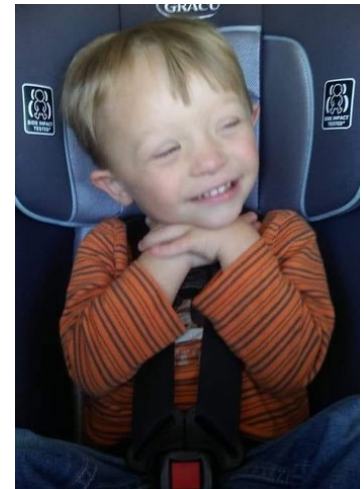
Checklist for Hospital Discharge Recommendations for Safe Transportation of Children (March 25, 2014) | CPS Board
<https://www.cpsboard.org/wp-content/uploads/2020/04/Checklist-for-Hospital-Discharge-Recommendations-for-Safe-Transportation-of-Children.pdf>

Child Passenger Safety (November 2018) | American Academy of Pediatrics
<https://pediatrics.aappublications.org/content/142/5/e20182460>

Safe Transportation of Newborns at Hospital Discharge (October 1, 1999) | American Academy of Pediatrics
<https://pediatrics.aappublications.org/content/104/4/986>

Safe Transportation of Preterm and Low Birth Weight Infants at Hospital Discharge
Marilyn J. Bull, MD; William A. Engle, MD; The Committee on Injury, Violence, and Poison Prevention and the Committee on Fetus and Newborn Pediatrics (2009) 123 (5): 1424–1429.
<https://doi.org/10.1542/peds.2009-0559>






Transporting Children with Special Health Care Needs (May 2019) | American Academy of Pediatrics
<https://pediatrics.aappublications.org/content/143/5/e20190724>





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Appendix B: QR Codes for Document Links

California Vehicle Codes






VEHICLE CODE	QR CODE
VC Section 27360 ✓ <8 years in a car, booster, or seat belt in the rear seat, <2 years rear facing	
VC Section 27360.5 ✓ Children 8-16 years properly restrained transport law	
VC Section 27360.6 ✓ County/City Health Department CPS funds	
VC Section 27362 ✓ Sale or resale of CPS restraints to meet Federal Motor Vehicle Safety Standards	
VC Section 27363 ✓ Transport Exemptions for children	




<p>VC Section 27363.5</p> <p>✓ Healthcare policy</p>	
<p>VC Section 27315</p> <p>✓ Adult restraint law with proper restraint definition</p>	

California Health and Safety Codes

HEALTH AND SAFETY CODE	QR CODE
<p>HSC 1268</p> <p>✓ Hospital</p>	
<p>HSC 1204.3</p> <p>✓ Birthing center</p>	
<p>HSC 1212</p> <p>✓ Clinic</p>	

Child Passenger Safety Resources

RESOURCE	QR CODE
CHP: <i>Child Passenger Safety Laws and Guidelines</i> pamphlets	
CDPH (California laws): <i>Keep Your Child Safe</i> pamphlets	
<i>Who's Got Car Seats?</i>	
NHTSA	
NHTSA: Proper Seat Belt Fit	

American Academy of Pediatrics: Best CPS practice	
Federal Motor Vehicle Safety Standard 213	
Safe Kids Worldwide: Find a Tech	
CHP: Find an Office	