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Dido to Dawndev.....

Pros: non
Cons: suction cups dont hold, unsafe because baby falls forward, hard to get baby out of

We experienced the same problems with this seat The suction cups never held down for us either, resulting in having to have quick reflexes! {to catch a falling face first baby} I was very unimpressed with the safety of this product, Safety 1st eh? I had problems getting my son out of the seat. I guess an infant reflex to stiffen the legs when being lifted out of it ??? Those were the times when those sorry suction cups came in handy.....because id have to remove baby, seat and all of the tub to get him out of the thing. Total cost? 10.00 Total uses? about 3 or 4 times cost efficient? i think not! Save your money folks! I found it much easier and SAFER to lay my son flat on his back on one of the tub sponges or to just bathe with him.

Purchase Price: \$10.00

Recommend to other potential buyers? No

What do you think?

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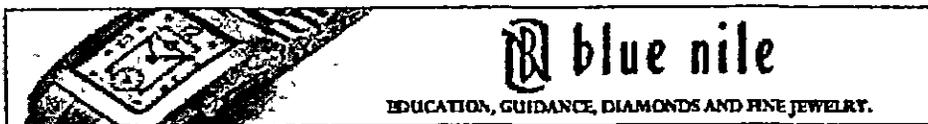
Related Opinions

- An accident waiting to happen.
Swivel on out to the garbage
Bathing Dangers

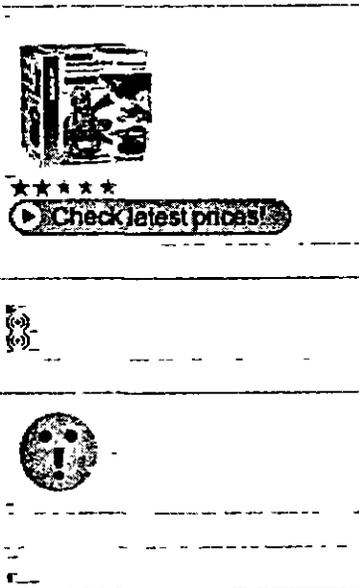
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UPDATE on Dangers with this seat!

★★★★★

Pros: Durable Plastic
Cons: Health Risk to your child

In February, I wrote a review on this seat:

<http://www.epinions.com/kifm-review-7415-7FF3A5C-3899C74A-prod1>

The initial review related my less than satisfactory opinion on the seats function as well as its entertainment level. This update is to voice a greater concern that could be harmful and/or fatal to your child.

About a month ago, I got this seat out and prepared my daughters bath as usual. The seat, as always, floated around in the tub and did not stick to the surface. My concerns about this problem have been minimal because I assumed the weight of my one year old would be sufficient support to hold the seat in place.

The usual bath ensued, and during her playtime, she reached forward for a toy. As she leaned forward, the entire seat went with her and she ended up face down in the water. Thankfully, I was sitting right there and quickly picked her up.

I have always preached about tub safety and the importance of never leaving your child unattended at any time. This is the perfect example of why. Upon researching, I found that many customers have had similar problems with the effectiveness of the suction cups. Because of the early stage of the investigation, it wouldn't be fair to quote numbers but I assure you that this is not an isolated case. My daughter is well within the age and weight requirements stated on the packaging as well.

I implore you not to use this seat with your child unless you do so knowing the safety factor involved. It takes less than two minutes for a child to drown in the bathtub and this seat increases the risk, in my opinion. I threw my seat in the garbage as soon as I had my daughter safely out of the tub. I will opt for the clothes basket method from now on.

Purchase Price: \$14.99




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blue nile

EDUCATION, GUIDANCE, DIAMONDS AND FINE JEWELRY.

Home > Kids & Family > Health & Hygiene > Diapering & Bathing > Bathtubs & Bathing
Seats > **Safety 1st Swivel Bath Seat**



Suction Cup Nightmare

★★★★★

Pros: durable plastic

Cons: suction cup nightmare

★★★★★

[▶ Check latest prices!](#)

After my daughter was old enough to sit up by herself I knew it was time to purchase a bath seat to make my daughter's bath time more enjoyable. I wanted a seat that would provide her with access to her toys while providing me with easy access to wash her little body. After looking around the store at the different brands and types I chose this one. It looked like it would provide just what we needed.



The Safety 1st Swivel Bath Seat is made of durable, brightly colored plastic, it has plastic beads attached on the front of the seat for the baby to play with while getting washed. I thought this would be a great seat to have as it would keep my hands free and my daughter would have extra mobility playing while being safe. The seat attaches to the tub with the suction cups that are located on the bottom of it.

This bath seat swivels all around but I found if my daughter turned to many times around that the suction cups would soon become unhooked from the bottom of my bathtub. The unhooking of the suction cups made this seat a serious safety hazard for my daughter because she would end up tipping over. I would be trying to grab her to get her out of the seat and it was difficult and very cumbersome to achieve this. If I had looked away for even a moment my daughter could have drowned when this happened and thankfully I never did look away and was able to pull her out to safety.

We did try using this seat a couple of more times but the same thing happened. I cannot say if the reason that the suction from the suction cups was broken when my daughter swiveled is because we have a textured tub or not, but in any case I was not happy with this product. We stopped using this seat and I opted to just hold my daughter while I bathed her instead.

Purchase Price: \$12.99



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★★★★★
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Bathing Dangers ● [input field]
★★★★★

Pros: bath upright
Cons: seat may fall over, hard to wash and remove child



The Safety 1st Swivel Bath Seat, is one of those products where strict supervision is required. This so-called "Safety" seat, is closer to an "Un-safety" seat. There are dangers lurking around every tub ring.



Without the necessary supervision this product could be fatal to your child. . It takes only a few minutes for a child to drown in the bathtub. The phone rings, and before you know what happened, your child is face down in the bath water.

The Product:

The concept of this seat is for your infant to be sitting while you give them a bath. At the same time they can be spun around like a "Sit & Spin" to allow you to clean their front and back and all the parts in-between.

This narrow seat has just about enough room to fit a 15-20 pound infant. Any larger and it becomes increasingly difficult to get them into and out of the seat. On hand has to hold the baby, while the other has to maneuver their little chubby legs through the seat and out the leg holes.

On the top of the seat, your child can play with some plastic spinning pieces that are attached. Unfortunately, they would rather grab at other object they see in the water.



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On the bottom of the seat are 4 suction cups, designed to anchor the seat to your tub. These suction cups have mixed results. Sometimes they appear to work great, where you can pry them away. (Get a chisel). Other times, they just break free for no apparent reason. That is where the danger lies.

The Use:

Once in the seat, it also becomes difficult to wash them. It's difficult to maneuver your hands in between the plastic supports and wash all their parts.

I guess the seat was mainly designed for a very active baby, they tries to roll over when they are laying down in another type of infant bath.

The worst part is trying to remove the child from the seat too. My son's legs would always get stuck and I thought I was going to pull his feet right off with the force I was using to try to pry him free. They on occasion the suction cups would release and I pulled him and the seat out together.

Conclusion: There are other safer seats out there. Stay away from this one. If you must use this seat, please **never** leave your child unattended.

Purchase Price: \$12.50

Recommend to other potential buyers? Yes

What do you think?

Rate this opinion 

Related Opinions

Suction Cup Nightmare

★★★★★

I hate to disagree but.....

★★★★★

Did not like

★★★★★

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Home > Kids & Family > Health & Hygiene > Diapering & Bathing > Bathtubs & Bathing Seats > **Safety 1st Swivel Bath Seat**



★★★★★
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Not a good product Ⓢ
★★★★★

Pros: keeps baby sitting upright
Cons: suction cups don't stick, hard to get baby out

I received this bath seat as a gift. I'm glad I didn't buy it because if I did then I would say that I wasted my money. For starters, the suction cups on the bottom don't stick. I have a tub with a slip-resistant coating so that's probably why. Most newer homes these days seem to have slip-resistant tubs so why would Safety 1st use suction cups that don't work on this type of tub? Also, my son has always been on the tall side of the height percentile. His legs are long so it was always a chore trying to free him from this bath seat. I've read several reviews here on this product and everyone seems to have the same complaints. My son was another one who didn't take much interest in the beads. He was more interested in watching the water being poured and making the water splash with his feet.

One good thing about this seat is that it helps a sitting baby stay seated in the bathtub. I wouldn't recommend using this with a baby who is still unable to sit up on his or her own though. This seat is meant to hold the baby steady and give mom or dad a free hand. One problem I had was when my son was sitting in the seat it was difficult to get in and clean the diaper area. I didn't end up using this seat for very long. Even though this seat is intended to give the parent a free hand I actually thought it was easier just letting him sit in the tub. Also, our bathroom is not much bigger than a broom closet so we had to store this in the hallway and try not to trip over it. Not easy to do if your baby is going through a tough bout of teething and wakes up every night at 3 AM!

Do I recommend this? NO, unless you have an older tub without the slip-resistant surface and your child is not exceptionally tall.

Purchase Price: \$gift

Recommend to other potential buyers? Yes



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★★★★★

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This is a Terrible seat!! 🗣️

★★★★★

Pros: Absolutely Nothing

Cons: Dangerous

I received the **Safety 1st Swivel Bath Seat** as a shower gift from a dear friend. I honestly don't remember ever using a *seat* like this when my boys were younger. It was a gift and I thought what the heck I would use this for when my daughter was too big for the baby bath, but not big enough to sit on her own, this claims to be a *secure* seat for your child.

Features:

Unique swivel action that rotates 360 degrees.

Safety lock secures or releases the seat.

Includes 4 sturdy suction cups for safety and play beads for baby.

Recommended for ages 6 months to 2 years.

What did I like about this seat?? *Absolutely* nothing, at first my daughter liked this because it was something new to her and she had always enjoyed getting a bath, this was the only likeness to this product.

What I did not like?? First off this seat claims to rotate 360 degrees, it did this for about 2 weeks and then I could not get it to turn at all. This seat is very hard to get your children in and out of, their legs seems to get stuck very easily. It is very hard to clean certain parts of your little ones body with this seat.

This product *claims* to have 4 **sturdy** suction cups for safety, these suction are not, I repeat are not **sturdy**, they do not **secure** this seat at all, the seat slipped repeatedly when I used this in the tub. At first I thought I may have used too much bubble bath, but I also tried this with none and I got the same results. I was very unhappy with this seat and what happened next was terrible, she was seating in her seat and I was holding it as usual, I really don't know why I used this again but, she

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started to topple over and almost went face first into the water. I immediately took her out of the tub, gave her a big hug and threw this piece of trash in the garbage.

Please whatever you do, **DO NOT BUY SAFETY 1st SWIVEL BATH SEAT**, this seat is just an accident waiting to happen. I realize as with all seats, you do not leave your child unattended even for a second, I never did this I was right there when she almost fell face first and it scared the heck out of me.

Purchase Price: \$10.99

Recommend to other potential buyers? No

What do you think?

Rate this opinion:



Related Opinions

A Runaway Bath Seat!

★★★★★

This Bath Seat Swivels Alright, But What About Their Bottom?

★★★★★

Didn't do the job for us

★★★★★

All opinions on this item

majority of the market. Their estimated retail sales of new baby bath seats may range from 700,000 to 1,000,000 annually.

Commission staff estimates that there are between 1.3 and 2 million bath seats available for use in homes with infants. This estimate is based on 1999 survey results that indicated 33 percent of new mothers own bath seats or rings, census data that show about 4 million infants born per year in the United States, and an industry estimate of 2 million bath seats/rings in use.

Prices for infant bath seats range from about \$10 to \$16. Seats that convert from an infant bathtub to an infant bath seat sell for about \$20 to \$25.

C. The Risk of Injury

1. Incident Data

The Commission has reports of 69 deaths and 95 non-fatal incidents and complaints associated with baby bath rings or seats between January 1983 and November 2000.²

The victims involved in the fatal incidents ranged in age from 5 months old to 20 months old. Sixty-one of the victims were between 5 and 10 months of age. The age of victims most frequently involved in the fatal incidents was 7 months (18 of the 69). Sixty-six of the 69 deaths took

²The identified cases do not represent a complete count nor a sample of known probability of selection. The cases do, however, provide information about the types of incidents associated with baby bathing aids

our most precious gift on this world (our babies), it is not worth taking the risk.

Purchase Price: \$8.97

Recommend to other potential buyers? No

What do you think?

Rate this opinion



Related Opinions

Swivel on out to the garbage

★★★★★

I have a Love/hate relationship!

★★★★★

There's Got to Be Something Better

★★★★★

All opinions on this item



TAB L

DRAFT 3/29

CONSUMER PRODUCT SAFETY COMMISSION

16 CFR Part 1500

Baby Bath Seats and Rings; Advance Notice of Proposed Rulemaking; Request for Comments and Information

AGENCY: Consumer Product Safety Commission.

ACTION: Advance notice of proposed rulemaking.

SUMMARY: The Commission has reason to believe that baby bath seats and rings may present an unreasonable risk of injury. The Commission is aware of 69 deaths and 95 non-fatal incidents and complaints from January 1983 through November 2000 involving baby bath seats and rings. In July 2000 the Commission received a petition from the Consumer Federation of America and eight other organizations asking the Commission to ban baby bath seats. This advance notice of proposed rulemaking ("ANPR") initiates a rulemaking proceeding under the Federal Hazardous Substances Act. The Commission solicits written comments concerning the risks of injury associated with baby bath seats and rings, the regulatory alternatives discussed in this notice, other possible ways to address these risks, and the economic impacts of the various regulatory alternatives. The Commission also invites interested persons to submit an existing standard, or a statement of intent to modify or

develop a voluntary standard, to address the risk of injury described in this notice.

DATE: Written comments and submissions in response to this notice must be received by [insert date that is 60 days after publication].

ADDRESSES: Comments should be mailed, preferably in five copies, to the Office of the Secretary, Consumer Product Safety Commission, Washington, D.C. 20207-0001, or delivered to the Office of the Secretary, Consumer Product Safety Commission, Room 502, 4330 East-West Highway, Bethesda, Maryland; telephone (301) 504-0800. Comments also may be filed by telefacsimile to (301)504-0127 or by email to cpsc-os@cpsc.gov. Comments should be captioned "ANPR for Baby Bath Seats."

FOR FURTHER INFORMATION CONTACT: Jacqueline Elder, Office of Hazard Identification and Reduction, Consumer Product Safety Commission, Washington, D.C. 20207; telephone (301) 504-0554, ext. 2254.

SUPPLEMENTARY INFORMATION:

A. Background

In 1994, the CPSC staff prepared for the Commission a briefing package discussing options for baby bath seats. At that time, the staff was aware of 13 infant deaths and seven non-fatal injury incidents that were associated with baby bath seats and rings. Most of the victims were between 6 and 11 months of age. The Commission also had reports of

approximately 30 incidents in which the products failed, but no injuries were reported. The 1994 briefing package reported that in 1992, sales of bath seats/rings were around 660,000 units with a retail value of \$9 million. Bath seats were used by 28 percent of mothers with infants, with an estimated 1.4 million in use in 1992. Approximately 10 out of 66 firms that manufactured or imported bathing accessories for infants were identified as suppliers of baby bath seats/rings. In 1994, staff was not aware of any voluntary or mandatory safety standards for bath seats/rings.

In 1994, the Commission staff recommended that the Commission begin a rulemaking with the publication of an advance notice of proposed rulemaking ("ANPR"). On June 15, 1994, the Commission voted 2-1 against initiating a rulemaking, but instructed the staff to work with industry on a public information campaign. The staff worked with the Juvenile Products Manufacturers Association ("JPMA") to disseminate the message that caregivers should never leave a baby unattended in a tub of water.

In July 2000, the Consumer Federation of America and eight additional organizations petitioned the Commission to ban baby bath seats.¹ In August 2000, an additional

¹ The other petitioners are Drowning Prevention Foundation; Danny Foundation for Crib and Child Product Safety; Intermountain Injury Control Research Center; California Coalition for Children's Safety and Health; California Drowning Prevention Network; Contra Costa County Childhood

organization, U.S. Public Interest Research Group, submitted a letter requesting to be added to the list of petitioners. The petition was docketed under the Federal Hazardous Substances Act ("FHSA") (Petition No. HP 00-4) and a notice requesting comments was published on August 22, 2000 in the Federal Register, 65 FR 50968.

The petitioners state that at least eight babies a year die due to drowning associated with baby bath seats. They state that these drownings "typically occur when the infant tips over, climbs out of, or slides through the product." The petitioners also argue that the bath seats create a "false sense of security," which "leads to increased risk-taking behavior among those using the product even when the irresponsible nature of the caregivers is taken into account."

B. The Product

This rulemaking covers baby bath rings and baby bath seats. Bath rings typically consist of a plastic ring with three or four legs equipped with suction cups. The infant sits directly on the bathtub surface or on a fitted sponge pad within the ring, straddling a bath ring leg. As defined here, bath rings are no longer manufactured for the U.S. market. However, they may still be available in the secondhand market. Baby bath seats are similar to bath

Injury Prevention Coalition; Greater Sacramento SAFE KIDS Coalition; and Kids in Danger.

rings, but provide a molded plastic seat for the infant to sit on. Suction cups are attached to the underside of the molded plastic seat.

Bath seats and rings are not intended to be used with textured or non-skid bathtub surfaces. Textured and non-skid bathtubs represent a substantial portion of the residential tubs sold today.

The Juvenile Products Manufacturers Association ("JPMA"), a trade association of manufacturers, importers, and distributors of juvenile products, noted in its comments on the petition that "bath seats and rings are generally not recommended for use until six months of age or when the children can sit upright unassisted. They are usually discontinued in use when a child seeks to escape the confines of the product or can stand up while holding onto other objects. These [sic] products have a useful product life of several months with both lower and upper limits being determined by the development and ability of the child." Developmental literature indicates that infants begin to pull up on objects around 9 months of age. Based on this information, bath seats/rings are useful with infants from about 6 to 9 months of age.

At the time of the 1994 Commission briefing there were approximately 10 firms supplying baby bath seats/rings. Currently, however, there are only two manufacturers of bath seats in the U.S. market, with one of these controlling the

majority of the market. Their estimated retail sales of new baby bath seats may range from 700,000 to 1,000,000 annually.

Commission staff estimates that there are between 1.3 and 2 million bath seats available for use in homes with infants. This estimate is based on 1999 survey results that indicated 33 percent of new mothers own bath seats or rings, census data that show about 4 million infants born per year in the United States, and an industry estimate of 2 million bath seats/rings in use.

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²The identified cases do not represent a complete count nor a sample of known probability of selection. The cases do, however, provide information about the types of incidents associated with baby bathing aids

place when the victim was left unattended (by the caregiver) in the bathtub for a few minutes or longer. The times that the caregiver was out of the room varied from a reported 2 minutes to over one hour. Some of the reasons stated for leaving the child unattended were to respond to unexpected phone calls or company, to retrieve towels or clothing, or to tend to another child in the home. Some caregivers left the victims unattended for more deliberate reasons such as performing household chores, playing video games, or watching television.

The remaining three deaths occurred while the caregiver was with the child in the bathroom. In two of these cases, the caregivers reportedly turned away momentarily and looked back at the victims to find them face down in the water. In the other case, the caregiver saw the incident occur but panicked briefly.

In 26 of the 69 deaths (38%), the victim was put into the bathtub with another child (or children). However, not all of these other children were still in the bathtub when the drownings occurred.

Most of the caregivers involved in the reported incidents were parents. Fifty-eight of the victims were being cared for by a parent or a parent and another family member. The remaining eleven children died while under the supervision of a baby sitter. The youngest caregiver was 11 years old.

2. Hazard Scenarios

The Commission staff has identified six main hazard scenarios associated with bath seat/ring deaths and incidents. The identified scenarios are discussed below.

Bath seat tipping over. In 22 fatalities and 50 non-fatal incidents and complaints the bath seat/ring tipped over submerging the child in the water or allowing the child to escape the confines of the seat. In the incidents in which the seat tipped over, the suction cups may have contributed because they failed to adhere to the tub surface; they adhered but the legs of the seat separated from the suction cups; or the suction cups were missing. It does not appear that one manufacturer's products were involved in significantly more fatal tip-over incidents than any other manufacturer's products.

Infant came out of the seat. In 11 fatalities and 6 non-fatal incidents and complaints the infant was found outside of the upright seat. Presumably in these incidents the child came over the top of the seat when the seat failed to restrain him or her.

Entrapment and submersion. In 3 deaths and 15 non-fatal incidents and complaints the infant slid through the leg opening, becoming trapped and submerged in the water. In 2 of the fatalities the leg openings on the bath seats were large enough for the infants to fit both legs through one opening but not large enough to allow the shoulders and

head to pass through. In the third case, the leg post was broken and the infant slid under the rim. All 3 infants died because their faces were partially or completely submerged in the bath water.

Infant slumped over bath seat. In 8 fatalities and 2 non-fatal incidents and complaints the infant reportedly "slumped over" the bath seat rim. Although the water depth data provided in these cases is limited, water depth could have played a role in these incidents.

Overflowing water. In 2 fatalities the bath water reportedly overflowed. One incident involved a 5-month-old child in a laundry tub. The other incident involved an 8-month-old victim in a bathtub.

Bath seat breaking. The Commission received 7 complaints of bath seats breaking during use. The complaints included bath seat legs breaking or detaching, the rings around the child breaking, mats ripping away from the legs/suction cups and the bath seat cracking.

No scenario determined. In the remaining 23 fatalities and 15 non-fatal incidents and complaints, information was insufficient to determine a hazard scenario. These include incidents where children were found in water, but the position of the bath seat was unknown (16 fatal and 5 non-fatal); incidents where the bath seat was upright, but the position of the child was unknown (2 fatal), and incidents

where the circumstances were unknown or uncertain (5 fatal and 10 non-fatal).

D. 1993 Focus Group

In preparation for the 1994 Commission briefing on bath seats/rings, Human Factors staff worked with a contractor to conduct consumer focus groups to learn more about how consumers use bath seats/rings. The groups provided a variety of information regarding bathing children, bath time supervision habits, and use of bath seats/rings. The following points summarize participants' responses regarding leaving children in the bathtub for a short period of time:

(1) Despite an intellectual knowledge of the hazard of drowning, and agreement that children should never be left alone in the bath, some participants acknowledged having done so, albeit infrequently, and typically for only a few moments.

(2) Responses suggested that, although emergency situations occur, they are not the primary reason that caregivers turn away from a child in the bath. Participants reported that practical, non-emergency reasons, such as needing a towel, pajamas, or a diaper were more likely reasons for leaving the child.

(3) Participants' responses indicated that uneventful experiences with leaving a child unattended in the bath tended to encourage repetition of this behavior.

(4) In general, participants perceived bath rings as convenience items rather than as safety devices. However, responses suggested that some users gained a sense of security from the sets/rings, and believed the child was safer in a bath seat/ring. These included comments that they believed their child was less likely to stand up or slip around if they were restrained in a bath seat/ring.

(5) The sturdier, more luxurious-looking bath rings/seats were preferred by most participants, and were perceived to be safer than more basic models.

E. Research reported by Dr. N. Clay Mann

In the petition, petitioners refer to recent research conducted by Dr. N. Clay Mann under the auspices of the Intermountain Injury Control Research Center at the University of Utah. Dr. Mann compared infant drowning deaths in bathtubs with infant drowning deaths in bathing aids in bathtubs. The petitioners cite two main conclusions from Dr. Mann's paper. First, Dr. Mann concluded that caregivers are more likely to leave a child unattended in the bathtub for conscious, willful decisions if there is a bath seat present in the bathtub. Second, Dr. Mann's analysis found that the water at the time of the fatal incident was significantly deeper in incidents involving baby bath seats than in bathtubs without a bath seat.

CPSC staff analyzed the bath seat and bathtub data Dr. Mann used in his research. Although the staff's analysis

yielded slightly different results, the basic conclusions were the same. CPSC staff found that when a bath seat was involved caregivers were more likely to cite a conscious or willful decision for leaving the child alone than when there was a bathtub drowning with no bath seat involved. Staff also found a slightly higher water depth for those deaths where children were in bath seats.

The reasons for leaving the child unattended in the bathtub with or without a bath seat/ring were classified by Dr. Mann and by CPSC staff as either a willful decision or an impulsive decision. Willful decisions were defined as watching television, performing household chores, and getting clothing for the victim. Impulsive decisions were defined by Dr. Mann as answering the telephone, responding to the doorbell, responding to a distressed child and tending to cooking food. Dr. Mann's finding that consumers leave a child unattended in a bath seat more often for willful reasons than for impulsive reasons agrees with the results from a CPSC focus group study conducted in 1993 (see discussion in Section D). The focus group participants indicated that when using a bath seat non-emergency (willful) reasons were more likely to draw them away from the child than emergency (impulsive) reasons.

According to Dr. Mann, as far as the water depth is concerned, the actual water level is not as important as the fact that consumers appear to use more water when a bath

seat is in use. According to CPSC staff's analysis of the hazard scenarios, the water depth may be an issue in the situations in which the bath seat is upright and the infant slumps over the seat rim or when the infant comes out over the top of the seat; however, the water depth data was very limited and therefore no conclusions could be made.

F. Relevant Statutory Provisions

The petition was docketed under the FHSA, 15 U.S.C. 1261 *et seq.* Section 2(f)(1)(D) of the FHSA defines "hazardous substance" to include any toy or other article intended for use by children that the Commission determines, by regulation, presents an electrical, mechanical, or thermal hazard. 15 U.S.C. 1261(f)(1)(D). An article may present a mechanical hazard if "in normal use or when subjected to reasonably foreseeable damage or abuse, its design or manufacture presents an unreasonable risk of personal injury or illness." 15 U.S.C. 1261(s).

Under section 2(q)(1)(A) of the FHSA, a toy, or other article intended for use by children, which is or contains a hazardous substance accessible by a child is a "banned hazardous substance." 15 U.S.C. 1261(q)(1)(A).

Section 3(f) through 3(1) of the FHSA, 15 U.S.C. 1262(f)-(1), governs a proceeding to promulgate a regulation determining that a toy or other children's article presents an electrical, mechanical, or thermal hazard. As provided in section 3(f), this proceeding is commenced by issuance of

this ANPR. After considering any comments submitted in response to this ANPR, the Commission will decide whether to issue a proposed rule and a preliminary regulatory analysis in accordance with section 3(h) of the FHSA. If a proposed rule is issued, the Commission would then consider the comments received in response to the proposed rule in deciding whether to issue a final rule and a final regulatory analysis. 15 U.S.C. 1262(1).

G. Regulatory Alternatives

One or more of the following alternatives could be used to reduce the identified risks associated with baby bath seats and rings.

1. *Banning rule.* The Commission could issue a rule declaring baby bath seats and bath rings to be banned hazardous substances.

2. *Mandatory standard.* The Commission could issue a standard that would ban any baby bath seats or rings that did not comply with the specified standard. Thus, if the Commission found that some modifications to baby bath seats/rings were possible that would adequately reduce or eliminate the risk of injury associated with the current product, the Commission could issue such a standard-setting rule.

3. *Mandatory labeling rule.* Similarly, the Commission could issue a rule banning bath seats and rings that did not contain specified warnings if it found that such warnings

could sufficiently reduce the risk of injury associated with baby bath seats/rings.

4. *Voluntary standard.* If the Commission determined that a voluntary standard was adequate to address the risk of injury associated with the product, the Commission could defer to the voluntary standard in lieu of issuing a mandatory rule.

H. Existing Standards

When the Commission first examined baby bath seats in 1994, no mandatory, voluntary or international standards addressed drowning in baby bath seats and rings. Currently, the Commission is aware of one voluntary standard relating to bath seats, the ASTM F1967-99 Standard Consumer Safety Specification for Infant Bath Seats (first published in June 1999). During August and September 1999, additional requirements for improved performance of suction cups and latching/locking mechanisms were balloted; ASTM estimates that the revised standard will be published by July 2001.

1. Provisions of the Bath Seat Voluntary Standard

According to the statement of scope in the standard, "This consumer safety specification establishes performance requirements, test methods, and labeling requirements to promote the safe use of infant bath seats." A summary of the major requirements in this standard follows:

Stability. This requirement addresses the bath seat's resistance to tipping over during normal use. The provision

is intended to ensure that new bath seats' suction cups properly attach to the bathtub surface.

Restraint System. Bath seats must provide a passive crotch restraint to prevent the occupant from sliding out through the product. For bath seats on the market this requirement is met by a fixed vertical bar between the infant's legs. The standard also specifies that bath seats shall not include additional restraints that require action by the user. The rationale for this requirement was that a redundant system would give the caregiver a false sense of security.

Resistance to Folding. If the bath seat folds, it is required to have a latch or locking mechanism to prevent the unit from unintentionally folding during use.

Labeling. The standard requires a warning label on the product, instructions, and packaging consisting of the safety alert symbol (an equilateral triangle surrounding an exclamation point) and the following exact wording:

 **WARNING**
Prevent drowning

ALWAYS keep baby within arm's reach

The warning label printed above is the minimum specified size. The warning must be located on the product so that it is visible to the adult caregiver and must be a contrasting color to the background. If the bath seat is not recommended for use on a slip-resistant surface, an additional warning label stating this is required only on the package.

2. Concerns about the Bath Seat Voluntary Standard

After reviewing the voluntary standard, the staff is concerned that provisions for stability of the seat, suction cup operation, occupant retention and labeling may not adequately address the drowning hazard.

The stability of the seat is greatly affected by the performance of the suction cups. If suction cups are missing or detach from the tub surface or the bath seat, it is more likely that the bath seat will tip over when the occupant leans out over the rail. The stability test in the voluntary standard addresses suction cup performance but not performance over time or on non-smooth or dirty surfaces. The suction cups operate by creating an air or watertight seal between the bathtub surface and the bottom of the suction cup material. A leak in the seal between the suction cup and bathtub surface allows air or water to leak under the suction cup resulting in detachment of the suction cup from the tub surface. A rough tub surface would allow such a leak to occur. The suction cups used on bath seats

will not adhere to textured bath surfaces or slip resistant surfaces. Dirt or soap scum build up could also degrade the performance of the suction cups.

The occupant retention system currently required by the ASTM F1967 standard for bath seats is a passive crotch restraint. A center post is the most common form of passive restraint used on bath seats and is intended to prevent the infant from slipping down and out of the bath seat. However, the standard does not have any leg opening size requirements, and staff is aware of three deaths when infants got both legs through a leg opening and became trapped and submerged under water because their shoulders and head could not pass through the opening.

Moreover, this type of passive restraint does not prevent the infant from climbing out of the bath seat. To prevent the occupant from climbing out of the product, the restraint system would have to prevent the infant from lifting his bottom off the bath seat or tub. However, because this would make it difficult to wash the infant's lower body, it would reduce the utility of the product. Also, the ASTM F1967 bath seat standard does not allow additional user activated restraints because the subcommittee believed that this would provide the caregiver with a false sense of security and could increase the likelihood that a parent might leave a child unattended.

According to the Division of Human Factors, warning labels have limited effectiveness on user behavior when the product is familiar and perceived to be benign. Consumers who have used bath seats over time and have not had any indications that the seat could tip over or that the infant could climb out of or slide under it are led to believe the infant is secure in the seat. In addition, the more often consumers use the product, the less likely they are to notice and read the product labels. Thus, the arm's reach warning label required in the voluntary standard becomes less effective with each use of the product.

The voluntary standard also requires a label on the packaging of the product, but not the bath seat itself, advising consumers not to use the product on non-skid bathtub surfaces. This label is likely to have limited effectiveness because (1) it fails to explain to the user the hazard of using the product on a slip-resistant surface (i.e., suction cup failure), and (2) the product's packaging is not likely to remain with the product and the message is lost to anyone who does not see the packaging. This type of product is likely to be handed down to family and friends with young children or sold at garage sales without the packaging.

3. Voluntary Standard for Slip Resistant Tub Surfaces

The Commission is aware of an ASTM standard for slip-resistant bathtub surfaces, ASTM F 462-79 (reapproved 1999)

"Standard Consumer Safety Specification for Slip-Resistant Bathing Facilities." According to the Plumbing Manufacturers Institute ("PMI"), this standard is used for most enameled-coated steel tubs but not for plastic tubs. Suction cups will not adhere to slip resistant surfaces. Therefore, this standard could affect the performance of bath seat suction cups.

I. Public Comments on the Petition

The Commission published a Federal Register notice asking for comments on the petition when it docketed the petition. 65 FR 50968 (August 22, 2000). The Commission received 66 comments in response to the notice. Of those 66 comments, 45 were a form letter expressing the same concerns as those of the petitioner and asking the Commission to support the petition to ban bath seats. Seventeen other comments also supported the petition and expressed concerns about the hazards involving bath seats. Three comments discussed in-depth why the CPSC should deny the petition. Finally, one consumer provided information both supporting and opposing the petition.

Discussed below are the eight primary issues raised in the comments and the Commission's responses to those issues. The numbers found in parentheses after a comment refer to the commenter number assigned by the Office of the Secretary. The letters "FL" refer to the form letter used by many of the commenters.

1. Unreasonable Risk

Comment: According to most commenters, 66 deaths from January 1983 to June 2000 and 37 near-drownings are too many. They note that when the Commission first looked into the hazards involving bath seats there had been 13 deaths in 10 years. In the following 6 years, 53 additional deaths occurred. They viewed this as an unreasonable risk because of the "alarming" number of deaths with a product that they stated had a useful life of only 2 months. (FL, #20, 24, 28, 56, 58, 60)

CPSC Response: The Commission is also concerned about the number of deaths. CPSC staff has identified 69 deaths and 95 non-fatal incidents from January 1983 to November 2000.

2. False Sense of Security

Comment: Many commenters quoted research conducted by Dr. N. Clay Mann that suggests parents and caregivers of infants who use bath seats engage in more risk-taking behavior than non-bath seat users. These commenters argue that bath seats are viewed as safety devices and thereby provide the user with a false sense of security. The petitioners and almost all of the comments from consumers in favor of granting the petition indicated that the product leads the user to believe that the child is "safe" in the bath seat in the water. (FL, #1, 54, 56, 59, 60, 62)

Some commenters stated that the product may not claim to be a "safety device" but it certainly gives the impression it is, especially those with the brand name "Safety 1st" on the package. (#13, 16, 28, 40, 64)

One commenter, who opposes the petition, stated that the product does not cause a false sense of security, but rather the caregiver undertakes risky behavior because previous behavior resulted in no injury. (#53)

Another commenter, who also opposes the petition, stated, "The unreasonable actions of caregivers who leave infants unattended in bathtubs, whether or not a bath seat or ring is used, results in the hazards, with tragic consequences. This behavior itself defies the common sense approach used by 99.999% of the population and is unreasonable. As we have noted, the products themselves performed properly and as intended. It was not the normal or even foreseeable misuse of the product that creates the hazard, but rather the unreasonable behavior of the caregiver. No standard, whether mandatory or voluntary, can address this risk." (#63)

CPSC Response: Various sources³ indicate that many consumers purchase the product for safety and convenience reasons. Consumers may not be ready to bathe their infants in a regular size bathtub and, therefore, are looking for a

³ Sources included: CPSC focus groups results, IDIs, consumer opinions on internet website and marketing information

device to help them contain a wet, slippery, squirmy infant. Some caregivers may perceive that the product provides a greater degree of safety than it does, and this false sense of security about the product may lead them to leave the child alone. Leaving the child alone could be considered a foreseeable misuse of the product.

3. Bath Seat Incompatible with Bathtubs

Comment: Several comments pertained to the current voluntary standard, ASTM F 462-79 (reapproved 1999) "Standard Consumer Safety Specification for Slip-Resistant Bathing Facilities." This standard establishes slip-resistance surface requirements to minimize injuries in tubs and showers. The commenters indicated that suction cups that are used to adhere the bath seats to the tub surface do not work on slip-resistant surfaces. (FL, #2, 28, 59, 60, 64)

Another commenter, who opposes the petition, stated, "As we have noted, the products themselves performed properly and as intended." However, that same commenter indicated that the data show suction cups on the seats failed on smooth surface bathtubs not just slip-resistant surfaces. (#63)

CPSC Response: According to CPSC Engineering Sciences staff, adherence of the suction cup to the bathtub surface requires an adequate seal between the mating surfaces. Suction cups used on bath seats will not adhere to textured

bath surfaces or slip-resistant surfaces. Dirt or soap scum build up could also degrade the performance of the suction cup. However, dissolved or suspended particles in the bath water such as oils and soap should not affect the suction cup adherence to the tub.

The Commission disagrees with the commenter's statement that the "products themselves performed properly and as intended." In 22 of the 69 fatalities and 50 reported non-fatalities, the bath seats detached from the tub surface and tipped over. In addition, many consumers reported on an opinion website that they were using the bath seat when all of a sudden, without any warning the seat tipped over and the child was under the water. In some of these incidents the consumers stated that they had used the product a number of times before and occasionally had difficulty removing the suction cups when bath time was over. Other consumers indicated that right from the start they had trouble with the suction cups only working some of the time.

CPSC data are inconclusive about the types of surfaces on which the tip-overs occurred, so CPSC is unable to verify the commenter's assertion that data show seats failed on smooth surface tubs. However, there were a number of comments on the Internet in which consumers specifically state that their tubs had smooth surfaces and the suction cups failed.

4. Labeling - Slip resistant surfaces

Comment: A few commenters stated that the label warning against the use of the bath seat on non-skid tubs should be on the product, not just the package. Due to the short useful life of the product, the bath seat is likely to be passed on to other family members or friends without the box. This makes the label ineffective for these other users. (#2, 59)

CPSC Response: CPSC agrees with the comments that a warning label only on the packaging and not on the product is likely to be less effective than a label placed on the product. The effectiveness of this label is limited for two reasons. First, it fails to explain to the user why the product should not be used on non-skid bathtub surfaces (suction cup failure). Second, the product's packaging is not likely to remain with the product; therefore, the message is lost to anyone who does not see the packaging.

5. Labeling - Keep child within arm's reach

Comment: Regarding the labeling warning to keep the child within arm's reach, a commenter who is against the petition, referenced information from CPSC focus groups that were conducted in 1993. The commenter states "Almost all of the parents surveyed recalled the warnings on the product, packaging or instructions and view it as an important reminder that the consequences of leaving an infant alone in the bathtub could be drowning. This fact undercuts the

Petitioners' argument that the warnings are not noticed and are ineffective." (#63)

CPSC Response: The Commission disagrees with the commenter's conclusion that the focus group results which showed that consumers recalled the warning label are evidence that undercuts the arguments that warnings are not noticed and ineffective. According to the focus groups, consumers were able to recall the warning not to leave a child unattended. However, the focus group members also reported situational variables that made them comfortable leaving a child unattended. Those variables include using a bath ring/seat, having an older sibling in the bath, and being able to see and hear the child even though they had physically left the bathroom.⁴ Judging from the focus group's comments and the actions of the caregivers in the fatal and non-fatal incident data who left the child alone in bath rings/seats, the warnings are ineffective.

6. Water Depth

Comment: A couple of commenters expressed the belief that if parents are not given proper guidance they will fill the tub with more water than is necessary. They stated that the bath seats should be marked with a "water line" so caregivers don't fill the water higher than the "safe

⁴ "A Focus Group Study to Evaluate Consumer Use and Perceptions of Baby Bath Rings/Seats CPSC-R-93-5839" by Shugoll Research

level", since too much water increases chances of drowning.
(#2, 64)

One comment from a consumer against the petition states, "The marker should be set at a point where in case the baby fell out of the seat, he or she would not be in danger of drowning." (#53)

CPSC Response: The Commission disagrees with the need for a "waterline" on the product. A waterline suggests that there is a "safe" water level. Since infants have drowned in as little as 2 inches of water, the more critical hazard is leaving the child unattended in the bath seat.

7. Bath Seat vs. Bathtub Drownings

Comment: One of the comments against the petition states that on average 4 children per year drown in bath seats while "in excess of 50 infants under one year of age are estimated to drown because caregivers fail to watch infants in bathtubs." This commenter believes that "statistically, it seems that children are safer when caregivers use bath seats compared to when they are not in use." (#63) Another comment, also against the petition, stated that on average there are 9 bath seat drownings and 41 bathtub drownings as a result of the primary caregiver leaving the child alone. (#61)

CPSC Response: According to CPSC data, from 1993 to 1997, the latest 5 years for which CPSC has complete data on deaths, 41 deaths occurred in bathtubs, or about 8 deaths

per year. The cited 50 deaths per year include deaths in bathtubs with other products, including bath seats.

To address the relative risk of children drowning in bathtubs with a bath seat and without a bath seat, CPSC staff compared bath seat-related deaths to bathtub-related deaths. CPSC Hazard Analysis staff evaluated data for 1996 and 1997, since CPSC investigated most of the infant bathtub drownings during this time period. In these two years, 16 children 5 to 10 months of age drowned in bath seat-related incidents compared to 28 drownings of children 5 to 10 months in bathtubs without bath seats. For purposes of this analysis, the staff assumed that owners of bath seats used them during baths and non-owners bathed their children in the bathtub without any bath aids. Staff also assumed that the total number of children in the population and the number of bath seat users are uniformly distributed from age 1 day to 1 year. These assumptions were used to calculate a relative risk of death for bath seat use versus bathtub use for 5 to 10 month-old children in 1996 and 1997 as shown in the table below.

Age of Child	# Deaths per 500,000	#Deaths per 500,000
5 months-old	4.8	0.0
6 months-old	7.2	3.4
7 months-old	7.2	3.4
8 months-old	7.2	8.0
9 months-old	7.2	8.0
10 months-old	4.8	9.1

Source CPSC databases (DTHS, IPII, INDP), Baby Products Tracking Study and NCHS data

The data suggest that children 5 to 7 months old are more at risk of death when bathed in a bath seat as opposed to being bathed in the bathtub without other bathing aids. At 8 to 10 months old, the risk of death is greater in a bathtub as opposed to a bath seat. Although CPSC does not know the reason why the risk of bath seat drowning is less than bathtub drowning at 8 months of age, one possible explanation may be related to the diminished utility of the product as children reach this age. At this age, children are beginning to stand and are getting "big" for the bath seat. The risk analysis assumes that the number of bath seats being used is constant for 5 through 10 months of age. If, in fact, fewer bath seats are being used by older children, then the risk of bath seat drowning would be greater than that shown in the table.

8. Current Bath Seat Voluntary Standard

Comment: Three of the comments supporting the petition stated that the current ASTM F1967-99 "Standard Consumer Safety Specification for Infant Bath Seats" is ineffective in addressing the hazard of bath seat drownings. One consumer called the standard a "performance" standard rather than a "safety" standard. (#40) Another stated that the standard failed to adequately address the leg opening problem, the efficacy of suction cups, the lack of a water line, and the failure to label the product regarding non-skid surfaces. (#2) The third consumer felt the standard

was inadequate because it called for "no significant structural changes to existing bath seat designs." (#54)

One comment against the petition states that "the voluntary standard addressed most of all of the CPSC staff recommendations." (#63)

CPSC Response: The Commission agrees that there are concerns with the adequacy of the voluntary standard. These concerns are discussed in detail in section H.2. above. As noted, the current voluntary standard does not address leg-opening requirements. CPSC is aware of 3 fatalities and 15 non-fatalities in which infants slipped partially through the leg opening and became trapped and submerged under water. Although the voluntary standard has requirements for testing the stability of the seat, the test is performed using a new bath seat on a simulated bathtub surface and does not address suction cup performance over time or suction cup performance on non-smooth or dirty surfaces. CPSC data show 22 fatalities and 50 non-fatalities occurred when the seat tipped over. In most of these cases the suction cups played a part in the tip-over by either failing to adhere to the tub surface; adhering to the surface but separating from the seat legs; or from being missing. The adequacy of the requirement for labeling on the package concerning non-skid surfaces is also questionable because it does not specifically identify the hazard and because the label is only required for the package.

The voluntary standard does not require a water line, but CPSC agrees with this. There is no "safe" water level and therefore, it would be misleading to consumers to put a water line mark on the product.

The staff recommendations that were provided to the voluntary standards' working group were intended to make bath rings/seats less dangerous. The staff's position as reported in the May 1994 briefing package stated: "Based on current research, labeling is known to have limited effect on user behavior, particularly when the product is familiar and perceived to be benign. Judging from the IDIs, the effectiveness of the current label is questionable, but for the sake of those who may read and heed it, a more specific and direct warning such as 'Stay in arm's reach of baby in bath seat...' was recommended." Also, staff recommended leg-opening requirements that were not included in the standard.

J. Solicitation of Information and Comments

This ANPR is the first step of a proceeding that could result in a mandatory rule for baby bath seats and rings to address the described risk of injury. All interested persons are invited to submit to the Commission their comments on any aspect of the alternatives discussed above. In accordance with section 3(f) of the FHSA, the Commission solicits:

1. Written comments with respect to the risk of injury identified by the Commission, the regulatory alternatives being considered, and other possible alternatives for addressing the risk.

2. Any existing standard or portion of a standard which could be issued as a proposed regulation.

3. A statement of intention to modify or develop a voluntary standard to address the risk of injury discussed in this notice, along with a description of a plan (including a schedule) to do so.

In addition, the Commission solicits the following specific information:

1. Information on the useful life of currently produced bath seats;

2. Information on the potential effect of any regulatory action on firms, including small entities;

3. Information on potential loss of consumer utility from any regulatory action;

4. Any other information available related to the potential costs and benefits of a rule.

Comments should be mailed, preferably in five copies, to the Office of the Secretary, Consumer Product Safety Commission, Washington, D.C. 20207-0001, or delivered to the Office of the Secretary, Consumer Product Safety Commission, Room 502, 4330 East-West Highway, Bethesda, Maryland 20814; telephone (301) 504-0800. Comments also may be filed by

telefacsimile to (301)504-0127 or by email to cpsc-os@cpsc.gov. Comments should be captioned "ANPR for baby bath seats." All comments and submissions should be received no later than [insert date that is 60 days from publication].

Dated:

Sadye E. Dunn, Secretary
Consumer Product Safety Commission

List of Relevant Documents

1. Briefing memorandum from Ronald Medford, Assistant Executive Director, Office of Hazard Identification and Reduction and Celestine Kiss, Project Manager, Division of Human Factors, to the Commission, March ____, 2001.

2. Petition HP 00-4 from the Consumer Federation of America, The Drowning Prevention Foundation, et al. to Ban Baby Bath Seats, July 25, 2000.

3. Memorandum from Mary F. Donaldson, Directorate for Economic Analysis, "Baby Bath Seat Petition, HP-00-4," February 16, 2001.

4. Memorandum from Suad W. Nakamura, Ph.D., Physiologist and Sandra E. Inkster, Ph.D., Pharmacologist, Directorate for Health Sciences, "The Pathophysiology of Drowning," December 7, 2000.

5. Memorandum from Debra Sweet, Division of Hazard Analysis, "Hazard Analysis Memorandum for Bath Seat Petition," January 29, 2001.

6. Memorandum from Celestine T. Kiss, Division of Human Factors, "Human Factors Response to Bath Rings/Seats Petition (HP-00-04)," January 25, 2001.

7. Memorandum from M. Kumagai, Directorate for Engineering Sciences, "Review of BATH SEAT ASTM STANDARD F1967 and Response to Comments to Petition HP 00-4," March 2, 2001.

8. Memorandum from M. Kumagai, Directorate for Engineering Sciences, "Evaluation of Bath Seat Design," March 2, 2001.