



Chairman Huffman, Vice Chair Johnson, Ranking Member Antonio, and members of the Senate Health Committee, thank you for the opportunity to weigh in on House Bill 47 which would require all school districts, community schools, STEM schools, college-preparatory boarding schools, and chartered nonpublic schools to place an AED in each school under its control and establish an emergency action plan (EAP) for each building within the district that should be used to determine the appropriate location, use, and response plan in case of an emergency situation such as an sudden cardiac arrest (SCA).

Sudden cardiac arrest is the leading cause of sudden death in young athletes and most commonly occurs during or just after physical exertion, while engaged in practice sessions, organized competition, or other sports activities. With only seconds to react and every minute crucial, having an appropriate plan in place during a sudden cardiac emergency can make a difference in survival. The American Heart Association supports the establishment of cardiac emergency response plans in all schools, school activities, practices, and completions. The establishment of this plan will empower and train school personnel on providing lifesaving care between the time when the victim collapses and emergency medical services arrive. Each minute following sudden cardiac arrest, survival decreases, however, when treated with defibrillation within 3–5 minutes, survival rates increase 50%–70%.

Emergency action plans are designed to enhance safety for students, staff, and visitors at schools. To be effective, these plans need to be coordinated, practiced, and evaluated. Although a school's primary mission is to educate, they have the responsibility to keep our kids safe and be prepared in the case of emergencies, such as fires, earthquakes, and other potential mass-casualty events at school. Emergency plans should extend to provide lifesaving responses during medical crises as well, such as an SCA.

One way to successfully maintain an emergency action plan is to have a clear and concise district policy that is practiced and reviewed. This legislation does call for practice of the EAP quarterly, however there is no requirement for annual evaluation of the plan. We urge the committee to consider including language to require an annual evaluation, require that the model EAP follow nationally approved and recognized guidelines, ensure the emergency action plan covers the appropriate location and use of the AEDs, and to ensure athletic facilities and venues are explicitly covered by this legislation.

The AHA applauds Reps. Brown and Bird for introducing this important legislation, including provisions that require schools to develop and maintain a comprehensive EAP and believes that appropriations should be considered, if possible, to support the development, implementation, and evaluation of EAPs in schools. Where related appropriations are lacking, EAPs should still be in effect, using indirect sources of community or EMS-related support.

Again, thank you for the opportunity to discuss the American Heart Association's thoughts on House Bill 47.