FIRST REGULAR SESSION

HOUSE BILL NO. 426

102ND GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE PERKINS.

0187H.01I

3

6

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal sections 167.624 and 170.310, RSMo, and to enact in lieu thereof three new sections relating to automated external defibrillators in schools.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Sections 167.624 and 170.310, RSMo, are repealed and three new sections enacted in lieu thereof, to be known as sections 160.111, 167.624, and 170.310, to read as follows:

160.111. 1. As used in this section, the following terms mean:

- 2 (1) "Automated external defibrillator" or "AED", a device that:
 - (a) Is used to administer an electric shock through the chest wall to the heart;
- 4 (b) Has built-in computers within the device to assess the patient's heart rhythm, 5 determine whether defibrillation is needed, and administer the shock;
 - (c) Has audible or visual prompts, or both, to guide the user through the process;
- 7 (d) Has received approval from the U.S. Food and Drug Administration of its 8 pre-market modification filed under 21 U.S.C. Section 360(k), as amended;
- 9 (e) Is capable of recognizing the presence or absence of ventricular fibrillation 10 and rapid ventricular tachycardia and is capable of determining without intervention 11 by an operator whether defibrillation should be performed; and
- 12 (f) Upon determining defibrillation should be performed, either automatically 13 charges and delivers an electrical impulse to an individual's heart or charges and
- delivers an electrical impulse at the command of the operator;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

15 (2) "Cardiac arrest", a condition, often sudden, that is due to abnormal heart 16 rhythms called arrhythmias and that is generally the result of some underlying form of 17 heart disease;

- (3) "Cardiopulmonary resuscitation" or "CPR", a combination of rescue breathing, chest compressions, and external cardiac massage used to sustain an individual's life until advanced assistance arrives;
- (4) "Defibrillation", administering an electrical impulse to an individual's heart in order to stop ventricular fibrillation or rapid ventricular tachycardia;
 - (5) "Department", the department of elementary and secondary education;
- (6) "Emergency medical services", the transportation and medical care provided to the ill or injured prior to arrival at a medical facility by a licensed emergency medical technician or other health care provider and the continuation of the initial emergency care within a medical facility subject to the approval of the medical staff and governing board of that facility;
- (7) "Extracurricular event", any school-sponsored program or voluntary activity sponsored by the school, local education agency, or an organization sanctioned by the local education agency at which students compete for the purpose of:
 - (a) Receiving an award, rating, recognition, or criticism;
 - (b) Qualifying for additional competition; or
- (c) Preparing for and involvement in public performances, contests, athletic competitions, demonstrations, displays, and club activities;
- (8) "Program coordinator", an individual, appointed by the school district, who is responsible for administration of the AED program for such individual's public school campus;
- (9) "Protocol", currently approved and accepted procedures describing specific steps a provider is required to follow in assessing and treating a patient;
- (10) "Provider", school personnel of a public school campus who have completed training in CPR in addition to having knowledge and understanding of an AED's operation and use under the requirements of this section;
 - (11) "Public school", the same definition as in section 160.011;
- (12) "School campus", any public school building or cluster of buildings, and grounds around such public school building or cluster of buildings, used for any public school purpose including, but not limited to, an extracurricular activity, organized physical activity courses, early childhood education programs, or school district administration;

HB 426 3

57

58

60

61

70

76

77

79

- 50 (13) "School personnel", a school district employee approved by the school board or a contract employee of the school district who is required to follow school 51 52 policy and procedures;
- 53 (14) "School-sponsored event", any event or activity sponsored by the public 54 school or school district including, but not limited to, athletic events, booster clubs, parent-teacher organizations, or any activity designed to enhance the school curriculum 55 56 whether on the school campus or not;
 - (15) "Ventricular fibrillation", the most common arrhythmia that causes cardiac arrest and a condition in which the heart's electrical impulses suddenly become chaotic, often without warning, causing the heart's pumping action to stop abruptly.
 - 2. For the 2024-25 school year and all subsequent school years:
- Each school campus shall install automated external defibrillators as **(1)** 62 required in this section;
- 63 (2) Appropriate school personnel shall have been adequately trained in the use of such AEDs as required under this section before the beginning of the 2024-25 school 64 65 year; and
- 66 (3) Appropriate school personnel shall be trained annually in the use of such 67 AEDs as required under this section.
- 68 3. (1) An automated external defibrillator meets the requirements of this section 69 if such AED is:
 - (a) Approved by the U.S. Food and Drug Administration;
- 71 (b) An automated kind of external defibrillator requiring provider intervention to initiate a defibrillation shock; and 72
- 73 (c) Capable of automatically collecting data.
- 74 (2) No modifications shall be made to AED equipment by the provider or the 75 service that results in deviation from:
 - (a) The original manufacturer's specifications; or
 - (b) AED protocols, which are:
- 78 a. Early access, which is calling 911;
 - b. Early CPR, which is starting CPR immediately;
- 80 c. Early defibrillation, which is using the on-site AED within three to five 81 minutes of onset; and
- 82 d. Early advanced care, which is trained health care providers arriving to 83 provide advanced care.
- 84 Each school district shall designate appropriate personnel to be 85 responsible for the maintenance of each automated external defibrillator.

89

90

91

92

93

94

95

96

97

98

99

100101

102

103

104

107

108

109

110111

112

113

114

116

117

118

86 (2) All components of each AED and integrated data recording system shall be 87 inspected by a qualified service technician at least one time per calendar year or as 88 recommended by the manufacturer to ensure that the AED equipment:

- (a) Meets original manufacturer's specifications; and
- (b) Maintains the currently approved treatment protocols based on the current American Heart Association scientific guidelines, standards, and recommendations for the use of the AED.
- (3) The battery of the AED shall be maintained and replaced in accordance with manufacturer's specifications.
- (4) All maintenance and repairs shall be performed by a qualified service technician recognized by the manufacturer.
- (5) Written records shall be maintained for all maintenance, repairs, and inspections performed on all components for mandated annual state reporting purposes.
- 5. (1) Each public school shall designate appropriate school personnel to be responsible for ensuring the availability of each automated external defibrillator as provided in this subsection.
 - (2) The regular location of each AED shall be based on the following:
 - (a) The size and physical layout of the school campus;
 - (b) The number and ages of individuals on the school campus;
- 105 (c) Types and locations of curricular, extracurricular, and school-sponsored 106 events; and
 - (d) Design features that are unique to particular buildings on the school campus.
 - (3) During school hours, an AED shall be placed at designated locations. Such locations shall be specific to each school campus but shall allow such AED to be easily seen by school personnel. Such locations shall allow school personnel to retrieve such AED outside of normal school hours.
 - (4) In conjunction with the location standards listed in subdivisions (2) and (3) of this subsection, AEDs shall be placed in areas where there is likely to be high traffic or congregation, such as auditoriums, cafeterias, or gymnasiums, and areas where risk of injury may be elevated on each school campus, in an easily accessible location of such areas, to be determined after consultation with the local emergency medical services system or emergency medical response agency.
 - 6. The program coordinator shall:
- 119 **(1)** Maintain current provider status in CPR and the use of an automated 120 external defibrillator;
- 121 **(2)** Ensure that providers on the school campus receive appropriate training in 122 the use and maintenance of the public school's AEDs;

- **(3)** Oversee training operations for the public school and maintain 124 organizational training reports;
 - (4) Ensure that AED equipment is maintained according to manufacturer and treatment protocol specifications based on the current American Heart Association scientific guidelines, standards, and recommendations for the use of each AED and submit maintenance records to the department as required by the department;
 - (5) Provide professional development opportunities annually for providers and all school personnel, if applicable;
 - (6) Verify credentials of school personnel functioning as a provider within the public school;
 - (7) Review each use of each AED; and
 - (8) Report, in a format approved by the department, each use of an AED. Such report shall be completed and submitted to the department within thirty days following such use. Such form shall contain at least relevant information regarding the incidence and use of the AED and the client outcome.
 - 7. Appropriate training of providers and anticipated rescuers in the use of an automated external defibrillator and in CPR shall incorporate at least the following:
 - (1) Testing of psychomotor skills based on the American Heart Association scientific guidelines, standards, and recommendations for the use of each AED, as in existence on January 1, 2022;
 - (2) Providing CPR as published by the American Heart Association, American Red Cross, or in equivalent course materials, as in existence on January 1, 2022;
 - (3) Coordinating with the local emergency medical services system or emergency medical response agency; and
 - (4) An ongoing quality improvement program to monitor training and evaluate response with each use of an AED.
 - 8. Automated external defibrillator and cardiopulmonary resuscitation training shall count fully toward professional development requirements under section 168.021.
 - 9. Before April thirtieth in each school year, each public school shall report to the department on the implementation and status of automated external defibrillator availability on each school campus. The department shall compile such data and submit a report to the general assembly before the end of each school year.
 - 10. The department may promulgate all necessary rules and regulations for the administration of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable

HB 426 6

10

11 12

13

14

15 16

17

3

5

6

8

10

13

15

160 and if any of the powers vested with the general assembly pursuant to chapter 536 to 161 review, to delay the effective date, or to disapprove and annul a rule are subsequently 162 held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2023, shall be invalid and void. 163

167.624. 1. Each school board in the state, if the school district does not presently 2 have a program as described below, may develop and implement a program to train the students and employees of the district in the administration of cardiopulmonary resuscitation and other lifesaving methods, as they determine best, and may consult the department of public safety, the state fire marshal's office, the local fire protection authorities, and others as the board sees fit. The board may make completion of the program a requirement for graduation. Any trained employee shall be held harmless and immune from any civil liability for administering cardiopulmonary resuscitation and other lifesaving methods in good faith and according to standard medical practices.

2. For the 2023-24 school year and all subsequent school years, district training implemented under this section shall include appropriate training in the use of an automated external defibrillator as required in section 160.111. Each school district shall comply with all applicable provisions of sections 160.011 and 190.092 relating to placement, maintenance, testing, and inspection of automated external defibrillators. Any trained employee shall be held harmless and immune from any civil liability for the use of an automated external defibrillator in good faith and according to standard medical practices.

170.310. 1. For school year 2017-18 and each school year thereafter, upon graduation from high school, pupils in public schools and charter schools shall have received thirty minutes of cardiopulmonary resuscitation instruction and training in the proper performance of the Heimlich maneuver or other first aid for choking given any time during a pupil's four years of high school.

2. Beginning in school year 2017-18, any public school or charter school serving grades nine through twelve shall provide enrolled students instruction in cardiopulmonary resuscitation. Students with disabilities may participate to the extent appropriate as determined by the provisions of the Individuals with Disabilities Education Act or Section 504 of the Rehabilitation Act (29 U.S.C. Section 794), as amended. Instruction shall be included in the district's existing health or physical education curriculum. Instruction shall be based on a program established by the American Heart Association or the American Red 12 Cross, or through a nationally recognized program based on the most current national evidence-based emergency cardiovascular care guidelines, and psychomotor skills development shall be incorporated into the instruction. For purposes of this section,

16 "psychomotor skills" means the use of hands-on practicing and skills testing to support cognitive learning.

- 3. For the 2023-24 school year and all subsequent school years, instruction in cardiopulmonary resuscitation under this section shall include appropriate instruction and training in the use of an automated external defibrillator as required under section 160.111.
- [3:] 4. The teacher of the cardiopulmonary resuscitation course or unit shall not be required to be a certified trainer of cardiopulmonary resuscitation if the instruction is not designed to result in certification of students. Instruction that is designed to result in certification being earned shall be required to be taught by an authorized cardiopulmonary instructor. Schools may develop agreements with any local chapter of a voluntary organization of first responders to provide the required hands-on practice and skills testing.
- [4-] 5. The department of elementary and secondary education may promulgate rules to implement this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2012, shall be invalid and void.

✓