

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

The bill does not implicate any of the House Principles.

B. EFFECT OF PROPOSED CHANGES:

Background

Each year, more than 350,000 Americans die from sudden cardiac arrest.¹ In cardiac arrest, the heart quivers uncontrollably, contractions in the ventricles become uncoordinated, and the heart cannot pump blood through the body. Minutes and even seconds can mean the difference between life and death. One way to provide aid during a cardiac arrest is to utilize an AED device, which does not require extensive training. An AED determines the patient's heart rhythm to determine if a shock should be provided, and if needed, adjusts the level of energy to deliver an appropriate shock to the patient's heart when a rescuer pushes a button. The shock stops the abnormal rhythm and allows a normal pumping action to resume.² To increase the chances of surviving a sudden cardiac arrest, an electrical defibrillation shock must be delivered quickly.

Public access to AEDs has increased survival rates by up to 50 percent for those suffering a sudden cardiac arrest.

Under section 401.2915, F. S., it is the intent of the Legislature that an AED may be used by any person for the purpose of saving the life of another person in cardiac arrest. In order to ensure public health and safety:

- All persons who use an AED must obtain appropriate training, which includes completion of a course in cardiopulmonary resuscitation or successful completion of a basic first aid course that includes cardiopulmonary resuscitation training, and demonstrate proficiency in the use of an AED.
- Any person or entity in possession of an AED is encouraged to register with the local emergency medical director the existence and location of the AED.
- Any person who uses an AED is required to activate the emergency medical services system as soon as possible upon the use of the AED.

Section 768.13, F. S., the Good Samaritan Act, provides immunity from civil liability to any persons, including those licensed to practice medicine, who gratuitously and in good faith render emergency care or treatment either in direct response to emergency situations related to and arising out of a state of emergency which has been declared pursuant to section 252.36, F. S., or at the scene of an emergency outside of a hospital, doctor's office, or other place having proper medical equipment. Specifically as it relates to the use of an AED, section 768.1325, F. S., the Cardiac Arrest Survival Act, provides immunity from liability for a person who uses or attempts to use an AED.

¹ http://www.skyaid.org/Skyaid%20Org/Medical/sca_survivalink.htm

² <http://www.ncsl.org/legis/lbriefs/LEGIS1031.htm>

Currently, 11 state parks out of 158 state parks have either purchased AED or have received AED from donors. More than 19.1 million people visited Florida's award-winning state parks last fiscal year, setting an all-time record for attendance.

Effect of Proposed Changes

The bill:

- Encourages each state park to have a functioning AED at all times.
- Requires state parks that do provide an AED to ensure that employees and volunteers are properly trained in accordance with section 401.2915, F. S.
- Requires the AED location to be registered with a local emergency medical services medical director.
- Provides that the Good Samaritan Act and the Cardiac Arrest Survival Act applies to AED used by employees and volunteers.

The bill provides that the Division of Recreation and Parks, Department of Environmental Protection, may adopt rules pursuant to section 120.536(1), F. S., and section 120.54, F. S., to implement the provisions of this section of statute.

The bill appropriates the sum of \$92,000 from the General Revenue Fund to the Division of Recreation and Parks, Department of Environmental Protection, for the purpose of implementing this act during the 2005-2006 fiscal year. Based on conversations with the American Heart Association, the average cost of an AED is approximately \$1,500 to \$1,800. Based on that average cost, this appropriation may fund an additional 118 to 142 AEDs for state parks.

C. SECTION DIRECTORY:

Section 1. Creates s. 258.0165, F.S., to encourage each state park to have a functioning AED; appropriates the sum of \$92,000 from the General Revenue Fund to the Division of Recreation and Parks, Department of Environmental Protection, for the purpose of implementing this act during the 2005-2006 fiscal year.

Section 2. Provides that the act will take effect upon becoming law.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues: None

2. Expenditures:

³ http://www.dep.state.fl.us/secretary/news/2004/july/0721_1.htm

Non-Recurring Expense:

Department of Environmental Protection	FY 2005-06
General Revenue Fund	<u>\$92,000</u>
Total Expense	\$92,000

(\$92,000 in FY 2005-06 is appropriated to the Division of Recreation and Parks, Department of Environmental Protection, for the purchase of as many AEDs as possible.)

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None

2. Expenditures:

None

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

The bill would benefit the successful bidder on a contract to provide AEDs to state parks.

D. FISCAL COMMENTS:

None

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable because this bill does not appear to: require cities or counties to spend funds or take actions requiring the expenditure of funds; reduce the authority that cities or counties have to raise revenues in the aggregate; or reduce the percentage of a state tax shared with cities or counties.

2. Other:

None

B. RULE-MAKING AUTHORITY:

The bill authorizes the Division of Recreation and Parks, Department of Environmental Protection, to adopt rules to implement the provisions of section 258.0165, F. S. However, the bill does not include criteria to guide the agency in exercising this authority.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

On March 30, 2005, the Judiciary Committee adopted one amendment to HB 127 CS. The Committee Substitute differs from the bill as filed in that the Committee Substitute provides an appropriation of \$92,000 for AED rather than \$214,000.