HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 359 CS Automated External Defibrillators in Law Enforcement Vehicles

SPONSOR(S): Bilirakis and others

TIED BILLS: none IDEN./SIM. BILLS: CS/SB 328

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) Criminal Justice Committee	8 Y, 0 N	Bond	Kramer
2) Health Care General Committee	12 Y, 0 N	Schiefelbein	Brown-Barrios
3) Justice Appropriations Committee	9 Y, 0 N, w/CS	Burns	DeBeaugrine
4) Justice Council	9 Y, 0 N	Bond	De La Paz
5)			

SUMMARY ANALYSIS

An Automated External Defibrillator (AED) is a small, lightweight device used to assess a person's heart rhythm, and, if necessary, administer an electric shock to restore a normal rhythm in victims of sudden cardiac arrest. AEDs are designed to be used by people without medical backgrounds, such as police, firefighters, flight attendants, security guards, and lay rescuers.

This bill creates a grant program, administered by the Department of Law Enforcement, to assist local governments in purchasing AED's for law enforcement vehicles.

This bill does not have a fiscal impact on state or local governments.

This document does not reflect the intent or official position of the bill sponsor or House of Representatives. STORAGE NAME: h0359g.JC.doc

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I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Provide limited government -- This bill creates a new government program.

Maintain public security -- This bill increases public resources devoted to public security.

B. EFFECT OF PROPOSED CHANGES:

When a person suffers a sudden cardiac arrest, chances of survival decrease by 7 to 10 percent for each minute that passes without defibrillation. A victim's best chance for survival is when there is revival within 4 minutes. An Automated External Defibrillator (AED) is a small, lightweight device used to assess a person's heart rhythm. If necessary, it administers an electric shock to restore a normal rhythm in victims of sudden cardiac arrest. Built-in computers assess the patient's heart rhythm, judge whether defibrillation is needed, and then administer an appropriate level of shock. Audible and/or visual prompts guide the user through the process. Anyone trained to use cardiopulmonary resuscitation (CPR) can be trained to use an AED. Most AEDs are designed to be used by people without medical backgrounds, such as police, firefighters, flight attendants, security guards, and lay rescuers.1

A person, other than a medical professional, who uses an AED is generally immune from civil liability, 42 U.S.C.A. § 238q.

Effect of Bill

This bill makes legislative findings that:

- Placing automated external defibrillators (AEDs) in law enforcement vehicles will save lives.
- Law enforcement officers have an established public role as guardians of public safety and are in a unique position to help reduce death from sudden cardiac arrest.
- This bill intends to promote and encourage law enforcement agencies to equip their vehicles with AEDs.

This bill requires the Florida Department of Law Enforcement (FDLE) to administer a grant program to provide funds to law enforcement agencies to purchase AEDs in law enforcement vehicles. Eligible law enforcement agencies are defined as any "law enforcement service provider, including a municipal police department, a county sheriff's office, and the Florida Highway Patrol."

Law enforcement agencies serving rural communities, as defined in s. 288.0656, F.S.², are required to provide a 10% match, and have priority in receiving the grant. Law enforcement agencies that are not serving a rural community do not have priority, and must provide a 25% match.

FDLE is required to adopt rules for administering this grant program by September 1, 2005.

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¹ From the American College of Emergency Physicians, at http://www.acep.org/1,2891,0.html

² Section 288.0656(2)(b), F.S., defines rural community for purposes of administering the Rural Economic Development Initiative. The following counties, and cities within those counties, currently qualify: Baker, Bradford, Calhoun, Columbia, DeSoto, Dixie, Flagler, Franklin, Gadsden, Gilchrist, Glades, Gulf, Hamilton, Hardee, Hendry, Highlands, Holmes, Jackson, Jefferson, Lafayette, Levy, Liberty, Madison, Nassau, Okeechobee, Putnam, Sumter, Suwannee, Taylor, Union, Wakulla, Walton, Washington.

C. SECTION DIRECTORY:

Section 1 creates the AED grant program.

Section 2 provides an effective date of upon becoming law.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

\$1,500,000 from non-recurring General Revenue (see fiscal comments)

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

Revenues:

None.

2. Expenditures:

Indeterminate but up to \$375,000 based on \$1,500,000 state appropriation. In reality, local costs will be a function of the extent to which local governments elect to participate in the grant program.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

The current version of the House General Appropriations Act (HB 1885) contains \$1.5 million for the AED grant program authorized by this bill (see section 1201).

Consumer prices for purchase of a single AED unit range from \$1,245 to \$2,906.3 It is likely that competitive procurement of several units would allow local governments to purchase units at a lower cost.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable.

2. Other:

A local community's decision not to participate in the grant program, or to participate in the program and purchase a specific brand of AED, appear to be planning level functions for which such communities would be immune from civil liability under the doctrine of sovereign immunity.

³ From http://www.aedsuperstore.com/ h0359g.JC.doc 4/27/2005

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B. RULE-MAKING AUTHORITY:

This bill requires rulemaking by the Department of Law Enforcement. This bill appears to have adequate authority for the agency.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

On March 22, 2005, the Justice Appropriations Committee adopted CS/HB 359 which removed the \$4.8 million appropriation.

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