

**HOUSE OF REPRESENTATIVES STAFF ANALYSIS**

**BILL #:** HB 111 CS                                  Defibrillators in State Parks  
**SPONSOR(S):** Anderson & others  
**TIED BILLS:**    **IDEN./SIM. BILLS:** CS/SB 274

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REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) <u>Health Care General Committee</u>	<u>9 Y, 0 N</u>	<u>Ciccone</u>	<u>Brown-Barrios</u>
2) <u>Agriculture &amp; Environment Appropriations Committee</u>	<u>9 Y, 0 N</u>	<u>Dixon</u>	<u>Dixon</u>
3) <u>Health &amp; Families Council</u>	<u>8 Y, 0 N, w/CS</u>	<u>Ciccone</u>	<u>Moore</u>
4) _____	_____	_____	_____
5) _____	_____	_____	_____

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**SUMMARY ANALYSIS**

House Bill 111 CS creates section 258.0165, F.S., to encourage each state park to have a functioning automated external defibrillator (AED) at all times.

This bill appropriates \$92,000 from the State Park Trust Fund to the Division of Recreation and Parks, Department of Environmental Protection. The appropriated funds are to be used to purchase as many AEDs as possible.

The bill provides an effective date of July 1, 2006.

## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. HOUSE PRINCIPLES ANALYSIS:

This bill does not implicate any of the House Principles.

#### B. EFFECT OF PROPOSED CHANGES:

##### **Present Situation**

Over the last two fiscal years, an average of 18.2 million people visited Florida's state parks. According to the Department of Environmental Protection (DEP), there are approximately 158 state parks and 12 of these already have AEDs. These AEDs were either purchased by the department or received from donors.

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.

##### **Background**

The American Heart Association (AHA) describes a cardiac arrest as:

Cardiac arrest is the sudden, abrupt loss of heart function. It is also called sudden cardiac arrest or unexpected cardiac arrest. Sudden death (also called sudden cardiac death) occurs within minutes after symptoms appear. The most common underlying reason for patients to die suddenly from cardiac arrest is coronary heart disease. Most cardiac arrests that lead to sudden death occur when the electrical impulses in the diseased heart become rapid (ventricular tachycardia) or chaotic (ventricular fibrillation) or both. This irregular heart rhythm (arrhythmia) causes the heart to suddenly stop beating.

According to the AHA, brain death and permanent death start to occur within 4 to 6 minutes after someone experiences cardiac arrest. Cardiac arrest can be reversed if it is treated within a few minutes with an electric shock to the heart to restore a normal heartbeat—a process called defibrillation. The AHA states that a victim's chances of survival are reduced by 7 to 10 percent with every passing minute without defibrillation, and few attempts at resuscitation succeed after 10 minutes.

An AED is an electronic device that can shock a person's heart back into rhythm when he or she is having a cardiac arrest. The AHA estimates that more than 95 percent of cardiac arrest victims die before reaching the hospital. In cases where defibrillation is provided within 5 to 7 minutes, the survival rate from sudden cardiac arrest can be up to 49 percent.

Section 401.2915, F.S., provides the minimum requirements for an individual who intends to use an AED in cases of cardiac arrest, as follows:

- A person must obtain appropriate training, to include completion of a course in cardiopulmonary resuscitation or successful completion of a basic first aid course that includes cardiopulmonary

resuscitation training, and demonstrated proficiency in the use of an automated external defibrillator;

- A person or entity in possession of an automated external defibrillator is encouraged to register with the local emergency medical services medical director the existence and location of the automated external defibrillator; and
- A person who uses an automated external defibrillator is required to activate the emergency medical services system as soon as possible upon use of the automated external defibrillator.

### **Effect of Proposed Change**

The bill would:

- Encourage each state park to have a functioning AED at all times.
- Require state parks that provide an AED to ensure that employees and volunteers are properly trained in accordance with section 401.2915, F.S.
- Require the AED location to be registered with a local emergency medical services medical director.
- Provide that the Good Samaritan Act and the Cardiac Arrest Survival Act applies to AEDs 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 \$92,000 from the State Park Trust Fund to the Division of Recreation and Parks, Department of Environmental Protection, for the purpose of implementing this act. According to the American Heart Association representatives, the average cost of an AED is approximately \$1,500 to \$1,800. Based on that average cost, this appropriation could fund an additional 51 to 61 AEDs for state parks.

#### C. SECTION DIRECTORY:

**Section 1.** Creates s. 258.0165, F.S., regarding defibrillators in state parks.

**Section 2.** Appropriates \$92,000 from the State Park Trust Fund to the Division of Recreation and Parks, Department of Environmental Protection, for the purpose of implementing this act.

**Section 3.** Provides an effective date of July 1, 2006.

## **II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT**

### A. FISCAL IMPACT ON STATE GOVERNMENT:

#### 1. Revenues:

None

#### 2. Expenditures:

Non-Recurring Expense:

Department of Environmental Protection      Fiscal Year 2006-07

State Park Trust Fund \_\_\_\_\_ \$92,000

Total Expense \$92,000

Note: \$92,000 in FY 2006-07 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:**

This 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:

This bill does not appear to require counties or municipalities 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:**

This bill authorizes the Division of Recreation and Parks, Department of Environmental Protection to adopt rules to implement the provisions of section 258.0165, Florida Statutes.

**C. DRAFTING ISSUES OR OTHER COMMENTS:**

None

**IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES**

On April 10, 2006, the House Health & Families Council passed HB 111 CS favorably with one amendment. The amendment:

- Changes the source of the appropriation from the General Revenue Fund to the State Park Trust Fund.

The analysis reflects the bill as a Council substitute.