

EXHIBIT D

The Report of
School based Automated External
Defibrillator (AED) Devices and
Cardiopulmonary Resuscitation (CPR)
Programs
in Arkansas Public Schools

July, 2011

As required by Act 496 of 2009

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Act 496 of 2009, created the “Antony Hobbs III Act” and created school-based automated external defibrillator and cardiopulmonary resuscitation programs. Section 2 (B)(2)(c) of the Act requires an annual report to the Joint Legislative Committees on Public Health, Welfare and Labor by the Commissioner of Education each year regarding the implementation of this section and the status of automated external defibrillator availability on each school campus. Act 1386 of 2009 provided for the Antony Hobbs, III Task Force to provide guidance regarding how AEDs would be dispersed throughout public and charter schools in Arkansas.

This first report will provide an overview of the process of distributing Automated External Defibrillators (AEDs) to schools prior to May 2011 and the Cardiopulmonary Resuscitation programs in school districts as required by Act 496 of 2009. In addition, The AED Incident Report Form is also included.

AED Distribution

The AED Task Force was comprised of six (6) voting members consisting of: Anthony Hobbs II, father of Anthony Hobbs III; Sandra Prater, RN, former Representative from House District 42; Kathey Haynie, RN President of the Arkansas School Nurses Association; Barbara Kumpe, director of government relations with the American Heart Association; Trent Tipton, high school coach; and Amy Irby, Conway Regional Medical Center. Non-voting members of the task force included: Donnie Smith, director of the Center for Health Protection, Arkansas Department of Health; Renee Mallory, Health System Licensing and Regulation Branch Chief, Arkansas Department of Health; and Paula Smith, RNP, State School Nurse Consultant, Arkansas Department of Education and Department of Health.

Funds were provided by the State of Arkansas in the sum of \$325,000 to be spent by June 30, 2011. It should be noted that the AED distribution was completed by December 30, 2010 as our goal was to have the AEDs in the schools as soon as possible in case they were needed. The Arkansas Department of Health contracted with School Health Corporation, through the National Association of State Procurement Officials' (NASPO) contract #SW300 AED with the state of Oklahoma for the cost of \$1023.00 per AED, contract number 46000020464, dated 9/20/2010. The price included shipping, handling and total tax. The AED ordered was a Powerheart G3 Plus Automatic AED, Lithium battery, two sets of adult pads, one set of pediatric pads, carry case, ready kit, software and communications cords.

Prior to the purchase of the AEDs, school districts were surveyed to determine the number of AEDs already owned by each district. There were 26 districts reporting owning no AEDs. Seventy-six (79) districts reported owning some but not enough for one on each campus. Lastly, there were 150 districts that reported having enough AEDs to place one on each campus. Following this determination, the districts reporting owning no AEDs were sent a letter and application to be completed for each campus needing an AED. Then, the districts owning some AEDs but not enough to have one for each campus were sent a letter and application to be completed for each campus that did not have an AED. Finally, those districts that had previously reported owning one for each campus were sent a letter and application to be completed for one AED per district to be placed as the district needed. The total number of AEDs purchased and shipped to school districts was 318.

Cardiopulmonary Resuscitation

Many school districts already have CPR/AED instructors with the American Heart Association or the American Red Cross. They are able to provide CPR/AED training for the staff and faculty. Many schools have staff/faculty who have been trained by Community Health Nurse Specialists (CHNS) employed by the Arkansas Department of Health housed in each Educational Cooperative. In addition, all coaches are required by the Arkansas Activities Association (AAA) to maintain CPR/AED training.

AED Incident Report Form

The AED Incident Report Form will be distributed to all school districts via a commissioner's memo. This form will be completed every time there is a need to use an AED at school or during any school related function occurring after regular school hours, i.e. ballgame, meeting, community function held on school property. These will be collected and reported annually.

Arkansas Department of Education

ATTN:
#4 Capital Mall
Little Rock, AR 72205

AED INCIDENT REPORT FORM

BRAND OF AED _____ DATE _____ MONTH DAY YEAR

NAME OF RESPONSE SERVICE: _____

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F
O

PATIENT AGE PATIENT SEX (CIRCLE ONE) M F

SCHOOL DISTRICT _____

PLACE OF EVENT _____

PATIENT RACE (CIRCLE ONE): ASIAN BLACK HISPANIC NATIVE AMERICAN WHITE OTHER

CALL TIMES
(MILITARY)

CALL TO 911

Arrive scene

Depart Scene

PERSON MAKING
CALL TO 911

CHIEF COMPLAINT: _____

PRIOR MEDICAL HISTORY: _____

BRIEF NARRATIVE: _____

SCHOOL STAFF RESPONDING: (names) _____

PATIENT TRANSPORTED TO: _____

TIME	PULSE	RESP	BP	CPR AND AED PROCEDURES					
				<i>Minutes</i>		<i>CIRCLE ONE:</i>			
				TIME FROM ARREST TO CPR	<4	4-8	>9 UNK		
				ARREST TO DEFIBRILLATION	<4	4-8	>9 UNK		
				ARREST TO ALS CARE	<4	4-8	>9 UNK		
				TOTAL NUMBER OF AED					
				DEFIBRILLATION ATTEMPTS	1	2	3 4+		
				AED MALFUNCTION/FAILURE	Y	N			
				CARE TRANSFERRED TO BLS?	Y	N			
				CARE TRANSFERRED TO ALS?	Y	N			
				WITNESSED ARREST?	Y	N	UNK		
				PULSE RESTORED?	Y	N	UNK		
EYES 4 Spontan 3 To speech 2 To pain 1 None				VERBAL 5 Oriented 4 Confused 3 Inapp 2 Garbled 1 None				MOTOR 6 Obeys 5 vocalizes 4 withdraws 3 Flexion 2 extension 1 None	
Glasgow Coma Scale									

RESPONSE OUTCOME: _____

CARE TRANSFERRED TO: _____

NAME OF TRANSFERRING SERVICE (IF CARE TRANSFER): _____

Note: This Form Is To Be Used For Every AED Use.

Stricken language would be deleted from and underlined language would be added to the law as it existed prior to this session of the General Assembly.

Act 496 of the Regular Session

1 State of Arkansas
2 87th General Assembly
3 Regular Session, 2009

As Engrossed: S3/5/09,H3/13/09

A Bill

SENATE BILL 312

4
5 By: Senators Steele, Broadway, Crumbly, Laverty
6 By: Representatives Abernathy, Allen, Gaskill, George, Harrelson, Reep, Saunders, Williams, Word,
7 Flowers, Carroll, T. Baker

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10 For An Act To Be Entitled

11 AN ACT TO CREATE "THE ANTONY HOBBS III ACT"; TO
12 CREATE SCHOOL-BASED AUTOMATED EXTERNAL
13 DEFIBRILLATOR AND CARDIOPULMONARY RESUSCITATION
14 PROGRAMS; AND FOR OTHER PURPOSES.

15
16

Subtitle

17 AN ACT TO CREATE "THE ANTONY HOBBS III
18 ACT" AND TO CREATE SCHOOL-BASED
19 AUTOMATED EXTERNAL DEFIBRILLATOR AND
20 CARDIOPULMONARY RESUSCITATION PROGRAMS.

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23 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

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Section 1. This act shall be known and may be cited as the "Antony
26 Hobbs III Act".

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*SECTION 2. Arkansas Code § 6-10-122 is amended to read as follows:
29 6-10-122. Automated external defibrillators required.*

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*(a)(1) The State Board of Education shall promulgate rules to require
31 that:*

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33

*(A) ~~each~~ Each school campus have an automated external
33 defibrillator ~~if funds are available; and~~*

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35

*(B)(i) Appropriate school personnel be adequately trained
35 on or before May 31, 2011; and*



1 (ii) After May 31, 2011, appropriate school
2 personnel be adequately trained on an ongoing basis.

3 (2) To enhance the potential life-saving capability of each
4 automated external defibrillator, the rules shall include without limitation
5 provisions regarding the availability of the school's automated external
6 defibrillator at school-related activities, such as athletic events.

7 (b) To minimize the financial impact on school districts, each school
8 district may apply for a grant from the Department of Health to purchase an
9 automated external defibrillator or related equipment or to provide training
10 to its personnel, or any combination of purchase of an automated external
11 defibrillator or related equipment or provision of training to personnel.

12 (c) Beginning in 2011, the Commissioner of Education shall provide a
13 report to the Senate Committee on Public Health, Welfare, and Labor and the
14 House Committee on Public Health, Welfare, and Labor on or before July 1,
15 each year regarding the implementation of this section and the status of
16 automated external defibrillator availability on each school campus.

17
18 SECTION 3. Arkansas Code Title 6, Chapter 10, Subchapter 1 is amended
19 to add an additional section to read as follows:

20 6-10-123. School-based automated external defibrillator and
21 cardiopulmonary resuscitation programs.

22 (a) The State Board of Education, after consultation with the
23 Department of Health, shall develop rules based on guidelines for automated
24 external defibrillator and cardiopulmonary resuscitation training that
25 incorporates at least the following:

26 (1) Health care provider oversight, including planning and
27 review of the selection, placement, and maintenance of automated external
28 defibrillators;

29 (2) Appropriate training of anticipated rescuers in the use of
30 the automated external defibrillator and in cardiopulmonary resuscitation;

31 (3) Testing of psychomotor skills based on the American Heart
32 Association scientific guidelines, standards, and recommendations for the use
33 of the automated external defibrillator, as they existed on January 1, 2009,
34 and for providing cardiopulmonary resuscitation as published by the American
35 Heart Association, American Red Cross, or in equivalent course materials, as
36 they existed on January 1, 2009;

1 (4) Coordination with the emergency medical services system; and

2 (5) An ongoing quality improvement program to monitor training
3 and evaluate response with each use of the automated external defibrillator.

4 (b) Automated external defibrillator and cardiopulmonary resuscitation
5 training shall count fully toward the existing professional development
6 requirements for teachers and school personnel.

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/s/ Steele

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APPROVED: 3/19/2009

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ARKANSAS DEPARTMENT OF EDUCATION RULES GOVERNING SCHOOL-BASED AUTOMATED EXTERNAL DEFIBRILLATOR (AED) DEVICES AND CARDIOPULMONARY RESUSCITATION (CPR) PROGRAMS IN ARKANSAS PUBLIC SCHOOLS

1.0 PURPOSE

- 1.01 The purpose of these Rules is to establish the requirements and procedures for governing school-based Automated External Defibrillator (AED) devices and Cardiopulmonary Resuscitation (CPR) programs in Arkansas Public Schools.

2.0 REGULATORY AUTHORITY

- 2.01 These Rules are promulgated pursuant to Ark. Code Ann. §§ 6-11-105, 6-10-122, 6-10-123, and Act 496 of 2009.

3.0 DEFINITIONS

For the purpose of these Rules, the following terms mean:

- 3.01 **Arkansas Public Schools:** includes all public and charter school;
- 3.02 **AED:** Automated External Defibrillator means a device that:
- 3.02.1 Is used to administer an electric shock through the chest wall to the heart;
- 3.02.2 Has built -in computers within the device to assess the patient's heart rhythm and judge whether defibrillation is needed;
- 3.02.3 Has audible or visual prompts, or both, to guide the user through the process;
- 3.02.4 Has received approval from the United States Food and Drug Administration of its pre-market modification, filed pursuant to 21 U.S.C. 360 (k);
- 3.02.5 Is capable of recognizing the presence or absence of ventricular fibrillation and rapid ventricular tachycardia and is capable of determining without intervention by an operator whether defibrillation should be performed; and
- 3.02.6 Upon determining the defibrillation should be performed, either automatically charges and delivers an electrical impulse to an individual's heart or charges and delivers an electrical impulse at the command of the

operator.

- 3.03 **CPR/AED Provider:** A member or employee of a campus who has completed training in CPR in addition to knowledge and understanding of an AED's operation and use under the requirements set forth in this regulation.
- 3.04 **Cardiac arrest:** A condition, often sudden, that is due to abnormal heart rhythms called arrhythmias. It is generally the result of some underlying form of heart disease.
- 3.05 **Cardiopulmonary Resuscitation (CPR):** A combination of rescue breathing and chest compressions and external cardiac massage used to sustain a person's life until advanced assistance arrives.
- 3.07 **Defibrillation:** Administering the electrical impulse to an individual's heart in order to stop ventricular fibrillation or rapid ventricular tachycardia.
- 3.08 **Department:** Arkansas Department of Education
- 3.09 **Emergency Medical Services (EMS):** The transportation and medical care provided the ill or injured prior to arrival at a medical facility by a licensed emergency medical technician or other health care provider and continuation of the initial emergency care within a medical facility subject to the approval of the medical staff and governing board of that facility.
- 3.10 **Extra-curricular event:** Any school sponsored program or voluntary activity sponsored by the school, local education agency, or an organization sanctioned by the local education agency where students are competing for the purpose of receiving an award, rating, recognition, or criticism, or qualification for additional competition or including preparation for and involvement in public performances, contests, athletic competitions, demonstrations, displays and club activities.
- 3.11 **FDA:** Federal Food and Drug Administration
- 3.12 **School-Personnel:** School Board approved/contract employee of the district that is required to follow school policy and procedures
- 3.13 **Program Coordinator:** An individual, appointed by the school district, who is responsible for administration of the Automated External Defibrillation program for their respective campus.
- 3.14 **Protocol:** Currently approved and accepted procedures describing specific steps a provider must follow in assessing and treating a patient.
- 3.15 **Renewal:** Period training and demonstration of competence in the application and use of automated defibrillation equipment.

- 3.17 **School campus:** Any public school building or cluster of buildings, including grounds, with an ADE-issued LEA number, that is used for any purpose, including, without limitation: an extracurricular activity, organized physical activity course defined in Ark. Code Ann. § 6-16-137, pre-kindergarten education, or district administration.
- 3.18 **School sponsored event;** Any event or activity sponsored by the school or school system which includes but is not limited to athletic events, booster clubs, parent-teacher organizations, or any activity designed to enhance the school curriculum whether on school-campus or not.
- 3.19 **Sudden Cardiac Arrest (SCA):** SCA is a sudden or unexpected cessation of heart function, most often caused by a sudden arrhythmia, such as ventricular fibrillation (VF). When this occurs, the heart's electrical impulses suddenly become chaotic and ineffective. Blood flow to the brain abruptly stops and the victim collapses and quickly loses consciousness. Death usually follows unless a normal heart rhythm is restored within minutes.
- 3.20 **Ventricular Fibrillation (VF):** The most common arrhythmia that causes cardiac arrest. It is a condition in which the heart's electrical impulses suddenly become chaotic, often without warning, causing the heart's pumping action to stop abruptly.

4.0 REQUIREMENTS

- 4.01 Each school campus must have an Automated External Defibrillator on or before May 31, 2011.
- 4.02 Appropriate school personnel must be adequately trained on or before May 31, 2011 as outlined in 9.0 Quality Training.
- 4.03 After May 31, 2011, appropriate school personnel must be adequately trained on an ongoing basis as outlined in Section 9.0 of these Rules.

5.0 AUTOMATED EXTERNAL DEFIBRILLATOR MODEL

- 5.01 Defibrillators acceptable for use in Arkansas public schools are:
- 5.01.1 Federal Drug Administration (FDA) approved;
- 5.01.2 Automated type requiring provider intervention to initiate a defibrillation shock; and
- 5.01.3 Capable of automatically collecting data.

5.02 No modifications will be made to defibrillation equipment, by the provider or the service, which results in:

5.02.1 Deviation from the original manufacturer's specifications, or

5.02.2 Deviation from AED protocols which are: Early access- calling 911; Early CPR - starting CPR immediately; Early Defibrillation - utilizing the onsite AED within 3-5 minutes of onset; and Early Advanced Care - trained health care providers arriving to provide advanced care.

6.0 DEFIBRILLATOR PREVENTATIVE MAINTENANCE/REPAIR

6.01 Each school district shall designate appropriate personnel to be responsible for the maintenance of the AED(s).

6.02 All components of the AED and integrated data recording system shall be inspected by a qualified service technician at least one (1) time per calendar year or as recommended by the manufacturer to ensure:

6.02.1 The equipment meets original manufacturer's specifications;

6.02.2 The equipment maintains the currently approved treatment protocols based on the current American Heart Association scientific guidelines, standards, and recommendations for the use of the AED.

6.03.2 The battery of the AED shall be maintained and replaced in accordance with manufacturer's specifications.

6.03.3 All maintenance and repairs shall be performed by a qualified service technician recognized by the manufacturer.

6.03.4 Written records shall be maintained for all maintenance, repairs, and inspections performed on all components for mandated annual state reporting purposes.

7.0 AVAILABILITY OF AUTOMATED EXTERNAL DEFIBRILLATOR

7.01 Each school shall designate appropriate personnel to be responsible for ensuring the availability of the AED.

7.02 The location of AED's shall be based on the following:

7.02.1. Size and physical layout of the buildings;

7.02.2 Number and ages of individuals in the building;

7.02.3 Types and locations of curricular, extracurricular, and school-sponsored events;

7.02.4 Design features that might be unique to the building; and

7.02.5 Each school shall report, in a format approved by the Department, maintenance records and any use of an AED.

7.03 During school hours, the AED will be placed at designated locations.

7.03.1 These locations shall be specific to each school but should allow the device to be easily seen and accessed by staff.

7.03.2 The locations should allow staff members to retrieve the device outside of normal school hours.

8.0 SCHOOL APPOINTED PROGRAM COORDINATOR

8.01 The school appointed program coordinator shall:

8.01.1 Maintain current provider status in CPR/AED;

8.01.2 Assure that the CPR/AED providers on campus receive appropriate training in the use and maintenance of the school's AED(s);

8.01.3 Oversee training operations for the school and maintain organizational training reports;

8.01.4 Ensure 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 the AED;

8.01.5 Provide professional development opportunities annually for AED providers and all school employees, if applicable;

8.01.6 Verify credentials of personnel functioning as an AED provider within the school; and

8.01.7 Review each use of the AED.

9.0 QUALITY TRAINING

9.01 Appropriate training of anticipated rescuers in the use of the AED and in CPR will incorporate at least the following:

9.01.1 Testing of psychomotor skills based on the American Heart Association scientific guidelines, standards, and recommendations for the use of the AED, as they existed on January 1, 2009;

9.01.2 Providing CPR as published by the American Heart Association, American Red Cross, or in equivalent course materials as they existed on January 1, 2009;

9.01.3 Coordination with the emergency medical services system; and

9.01.4 An ongoing quality improvement program to monitor training and evaluate response with each use of an AED.

10.0 PROFESSIONAL DEVELOPMENT REQUIREMENTS

10.01 Automated external defibrillator and cardiopulmonary resuscitation training shall count fully toward the existing professional development requirements for teachers and school personnel as noted in the Arkansas Department of Education Rules Governing Professional Development.

11.0 REPORTING

11.01 Beginning in the year of 2011, the Commissioner of Education shall provide a report to the Senate Committee on Public Health, Welfare, and Labor and the House committee on Public Health, Welfare, and Labor on or before July 1, each year. Schools shall annually report to ADE:

11.01.1 The implementation and status of the AED availability on each school campus will be reported annually by May to the Department of Education;

11.02 The AED Incident Report Form shall be completed and submitted to the Director of Special Programs within thirty (30) days following an event. This form shall include:

11.02.1 Relevant information regarding the incidence and use of the AED and the client outcome.

Application for Automated External Defibrillator for School
Fax to 501-661-2055 attn: Linda Haltiwanger
School LEA Information

(There must be one completed application for each LEA requesting an AED)

Name of School District _____

Name of School _____

Physical Address of School _____

City _____ Zip Code _____

Phone (____) _____ Fax(____) _____

Shipping Information (Must be a Physical Address)

Complete only if shipping location is different from physical address above.

Name _____

Address _____

City _____ Zip Code _____

Is there someone available at this address Monday thru Friday to accept shipment during business hours? Y__N__

If no, what is the first date after summer break when someone will be available Monday thru Friday during business hours to accept shipment? _____

Contact Information

Name of Contact Person _____

Phone _____ E-Mail _____

By completing the information above I certify the above school LEA does not have an automated external defibrillator currently available.

Name Title Date

