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WRITTEN  
ONLY

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DIRECTOR OF HEALTH

In reply, please refer to:  
File:

**Senate Committee on Judiciary and Labor**

**HB 2312, HD2, SD1, RELATING TO TORTS**

**Testimony of Loretta J. Fuddy, A.C.S.W., M.P.H.,  
Director of Health**

**Thursday, March 29, 2012, 10:30am**

1 **Department's Position:** Department of Health supports H.B. 2312, H.D. 2, S.D. 1, as written.

2 **Fiscal Implications:** None as currently stated

3 **Purpose and Justification:** The Department recommends passage of H.B. 2312, H.D. 2, S.D. 1, to  
4 expressly include cardiopulmonary resuscitation (CPR) in Good Samaritan exceptions from civil  
5 liability.

6 The Department supports the advancement of bystander CPR programs that seek to educate,  
7 train, and promote Hawaii citizens to act as Good Samaritans by rendering prompt aid and performing  
8 immediate CPR on a person who is in cardiac arrest.

9 Thank you for the opportunity to testify on this measure.

skills to perform the first 3 links in the American Heart Association chain of survival can make a dramatic difference in survival from SCA.

**THE PROBLEM:** If bystander CPR can markedly improve outcomes, why are our survival rates from out-of-hospital SCA still so poor? The low rate of bystander CPR performed is a significant contributor. Local reports have documented that in many communities, only 15% to 30% of SCA victims receive bystander CPR before Fire or EMS personnel arrive at the scene. Low rates of bystander CPR have been documented even in settings where trained rescuers were present. Given that the time interval for EMS arrival is often 7 to 8 minutes or longer and that survival falls 7% to 10% or each minute without CPR, the lack of bystander CPR has a large impact on outcomes.

In 2007 and again in 2009, the Hawaii Good Samaritan Law (H.B. 1537 pertaining to AEDs) was approved and released bystanders from any liability when using an AED no matter where the AED was located. However the bill did not include documented and stated coverage of a bystander performing CPR in a medical emergency. When teaching in the community every student has the same fear, FEAR of injuring the victim, FEAR of doing the wrong thing, and FEAR of liability. Even with sharing the current Good Samaritan law students will still ask “what if I perform CPR” am I covered. Most citizens believe that because it is not stated in the Good Samaritan Law then they are not covered. This FEAR is one of the reasons why Hawaii has an estimated 5% survival rate.

As the AED Program Coordinator for Hawaii’s largest Public Access Defibrillation (PAD) Program I am here today to testify on behalf of House Bill 2312 Relating to Torts. The DOT-A has been responsible for the public implementation of over 125 Automated External Defibrillators (AED) on six islands and in 13 airports. Each of the AEDs has been placed in a public location for rapid response to a possible cardiac arrest victim. With the installation of the AEDs we felt the most important part of the program was to ensure that there would be a confident citizen to step forward, start chest compressions, and bring the AED to the victim’s side. In the last six years we have educated more than 8000 airport employees, airport users, and concessionaires in a classroom format on how to respond to a cardiac arrest victim and how to perform proper CPR and use the AED. Our goal was to ensure that every airport user had the opportunity to have the education, knowledge, and confidence to save the life of a friend or loved one. The class teaches the student that you really do not need to know very much to save a life. But this is something that you do not



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know unless you are given the education. We share the law with each student but there is still an apprehension and concern about liability.

CPR is a potentially lifesaving intervention that can be implemented by the public without the need for expensive equipment or professional credentials. If the rate and quality of bystander CPR are increased substantially, the potential exists to save the lives of hundreds of victims of SCA in Hawaii each year. We can do the training and education but we need you to pass this bill to help alleviate the FEAR of liability to the potential responder.

Sincerely,

*Pamela Foster, RN*

President and CEO for AED Institute of America, Inc

Founder of Hawaii Heart Foundation (a local non-profit with the mission to improve the cardiac arrest survival rates in Hawaii through *Educating Hawaii to Save Lives*)

PAD Program Director for the Airports of Hawaii

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### Testimony on HB 2312, HD2, SD1 "Relating To Torts"

The American Heart Association supports HB 2312, HD2, SD1.

Hawaii's "Good Samaritan" law currently provides adequate liability protection to members of the public who provide emergency aid. However, the additional language provided in the SD1 version of HB 2312 will provide broader public awareness of the liability protections provided by Hawaii's "Good Samaritan" law for those who perform CPR when appropriate.

With the introduction of the American Heart Association's new CPR guidelines in 2010, eliminating the need for lay people to perform mouth-to-mouth resuscitation, there are few reasonable physical barriers that should prevent members of the public from saving another's life should a medical emergency arise.

Respectfully submitted,

Donald B. Weisman

Hawaii Government Relations/Mission:Lifeline Director

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