
HOUSE CONCURRENT RESOLUTION

REQUESTING THAT THE DEPARTMENT OF EDUCATION DESIGN AND IMPLEMENT
A CURRICULUM IN HAWAII PUBLIC SCHOOLS THAT TEACHES STUDENTS
TO PERFORM CARDIOPULMONARY RESUSCITATION AND TO IDENTIFY
SYMPTOMS OF A STROKE.

1 WHEREAS, of the four hundred thousand people who suffer an
2 out-of-hospital cardiac arrest in the United States each year,
3 only six percent survive the episode; and
4

5 WHEREAS, out-of-hospital cardiac arrest is one of the
6 leading causes of death in Hawaii; and
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8 WHEREAS, every year, Hawaii emergency medical services
9 teams treat nearly one thousand one hundred cases of out-of-
10 hospital cardiac arrest, with only nine percent of these victims
11 surviving; and
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13 WHEREAS, the American Heart Association's cardiopulmonary
14 resuscitation guidelines state that in studies of out-of-
15 hospital cardiac arrest, adults who received cardiopulmonary
16 resuscitation from a bystander were more likely to survive than
17 those who did not receive any type of cardiopulmonary
18 resuscitation; and
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20 WHEREAS, cities that have increased training for
21 cardiopulmonary resuscitation have seen cardiac arrest survival
22 rates reach up to sixty percent; and
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24 WHEREAS, thirty-nine states and the District of Columbia
25 have passed legislation requiring cardiopulmonary resuscitation
26 training as a high school graduation requirement and at least
27 seventy-five percent of public high school students in the
28 United States that are graduating this year will have learned
29 lifesaving cardiopulmonary resuscitation in their schools; and



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WHEREAS, the Department of Education has purchased cardiopulmonary resuscitation mannequins and training materials for use by high school health class instructors; and

WHEREAS, seventy percent of Hawaii residents feel helpless to act during a cardiac arrest emergency because they do not know how to administer cardiopulmonary resuscitation; and

WHEREAS, cardiopulmonary resuscitation training can be completed in a single thirty-minute session; and

WHEREAS, strokes are the fifth-leading cause of death in the United States and a major cause of severe, lifelong disability; and

WHEREAS, strokes account for one out of every twenty deaths in the United States each year; and

WHEREAS, someone in the United States dies from a stroke every four minutes; and

WHEREAS, learning the warning signs of a stroke is essential to minimizing the consequences of this potentially life-threatening event; now, therefore,

BE IT RESOLVED by the House of Representatives of the Twenty-ninth Legislature of the State of Hawaii, Regular Session of 2018, the Senate concurring, that the Department of Education is requested to design and implement a curriculum in Hawaii public schools that teaches students to perform cardiopulmonary resuscitation and to identify symptoms of a stroke; and



1 BE IT FURTHER RESOLVED that certified copies of this
2 Concurrent Resolution be transmitted to the Chairperson of the
3 Board of Education and the Superintendent of Education.
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OFFERED BY: 

MAR - 9 2018





**American Heart Association testimony in STRONG SUPPORT
of HCR 236/HR204 “Requesting that the Department of Education design
and implement a curriculum in Hawaii public schools that teaches students
to perform cardiopulmonary resuscitation and to identify symptoms of a
stroke”**

The American Heart Association strongly supports HCR 236/HR 204, but recommends amendments. The American Heart Association’s recommends that the proposed curriculum to be designed and implemented in public schools be implemented as part of Hawaii high school health or physical education curriculum, both of which are required courses for graduation. “Hands-only” CPR training aligns to one of the bench marks under Hawaii DOE health curriculum standards. By adding the curriculum to either of those two classes, an estimated 50,000 new potential lifesavers would be added to Hawaii’s communities every four years.

The American Heart Association is creating a generation of lifesavers by making sure students learn Cardiopulmonary Resuscitation (CPR) before they graduate. As stated in the resolution, to date, 39 states and the District of Columbia have passed legislation requiring CPR training as a high school graduation requirement. At least seventy-five percent of public high school students graduating this year nationally will have learned lifesaving CPR in their schools. Unfortunately, Hawaii is among the 11 states that have not yet passed a policy to ensure that all of its graduating high school students receive this life-saving training.

Sudden cardiac arrest is a leading cause of death in the U.S. Every year, Hawaii EMS teams treat nearly 1,100 cases of out-of-hospital cardiac arrest. Currently, only 9% of those Hawaii witnessed out of hospital cardiac arrest victims survive making it a leading cause of death in Hawaii. Many of those patients die because they didn’t receive timely CPR. Making that statistic even more sad is that nearly 4 out of 5 sudden cardiac arrests happen at home and are witnessed by a loved one. A CPR trained bystander can double, even triple survival rates and improve long term healthcare outcomes. The life that is saved by CPR could be a loved one--a mom, a dad, maybe even a child.

In addition, the American Heart Association/American Stroke Association (AHA/ASA) worked in partnership with members of the Hawaii Stroke Coalition in 2015 to pass legislation requiring all Hawaii acute stroke care hospitals to collect and share stroke patient data with the Department of Health. That data is then compiled in reports and shared with the Stroke Coalition, which consists of medical representatives of the stroke care hospitals, Hawaii state and local EMS agencies, and the AHA/ASA. From that data, both the hospitals and EMS agencies have made significant strides to improve stroke treatment and reduce the treatment time from arrival at a hospital, rising from the bottom tier nationally in treating eligible patients in less than 60 minutes, to now being in the top tier nationally, treating stroke patients on average under 60 minutes at least 77% of the time.

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Time is a key factor in stroke treatment because with each minute that passes without treatment, a stroke patient loses almost 2 million neurons (brain cells). Early, effective treatment can reduce disability, improve stroke patient outcomes, and in some cases reverse stroke deficits in patients.

Unfortunately, one of the most striking results of the first data reports showed that while hospitals and EMS agencies were making great advances in improving stroke patient care, a majority of patients were not seeking help in time to allow for the most advanced treatments to be provided. The early stroke patient data showed that 70% of Hawaii stroke patients arrive at a hospital beyond the allowable time to provide tPA, the clot-dissolving drug that can reduce stroke damage and, in some cases, reverse that damage. It also showed that almost 50% of patients arrive at a hospital by means other than EMS which results in treatment delays while equipment and hospital staff is prepared to treat the patient. When EMS is activated, paramedics begin treatment in route to the appropriate hospital, and hospital staff is alerted to the patient's pending arrival so that tests and treatment can immediately begin when the ambulance arrives. Each minute saved can result in improved patient outcome and a reduction in death and disability risk. Clearly, more public education is needed to inform Hawaii residents about stroke warning signs and actions.

Since 2011, the AHA has worked with the Hawaii Department of Education (DOE) to eliminate potential barriers to implement a CPR in Schools policy. With assistance from AHA volunteers, in 2012 the State DOE used \$20,000, allocated by the Dept. of Health, to purchase CPR training manikins, AHA DVD instructional videos and materials. The AHA also provided volunteer CPR emergency cardiovascular care training volunteers to train DOE health resource teachers, so that they could support classroom teachers in implementing the training to students. AHA trainers provided a follow-up training for health resource teachers in November 2016, and again in August 2017. AHA volunteers remain available to provide additional free training as needed, and to support classroom teachers if necessary. However, the ease of teaching "hands-only" CPR and the availability of the training DVDs should allow for classroom teachers to implement the training to students without additional support. The training would not be "pass or fail" and would only require that the students demonstrate that have learned the CPR motor skills. "Hands-only" CPR can be taught in 30 minutes or less.

The AHA has also worked with community foundations to secure grants to provide almost 30 Hawaii public middle, high, and charter schools with AHA CPR in Schools kits. The kits each contain 10 inflatable manikins, a training DVD and training materials designed specifically for training in schools. The AHA is committed to continue to find and secure grants to purchase additional school kits for Hawaii schools as needed.

AHA volunteer leaders presented information on the efforts listed above to the State BOE in 2016, and in 2017 worked through the BOE chair to request a meeting with BOE Member Maggie Cox to discuss developing a policy proposal to add CPR training to the high school health class curriculum. The meeting request was declined. American Heart Association Board Member Beth Giesting, chair of the AHA Hawaii Division Board's CPR in Schools Task Force, reached out to DOE Superintendent in the Fall 2017 to request a meeting to discuss the issue. That request was declined, but Ms. Giesting was guided by

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the superintendent's staff to contact Assistant Superintendent Suzanne Mulcahy, who oversees curriculum, to request a meeting. Ms. Giesting's repeated attempts to reach out to Ms. Mulcahy also went without response. HCR 236/HR 204 intent is to help initiate development and implementation of a BOE/DOE policy that would tackle two of Hawaii's leading health risks and could lead to significant healthcare cost savings over time.

Seventy percent of Hawaii residents feel helpless to act during a cardiac or stroke emergency because they don't know how to administer CPR, recognize stroke warning signs, and are reluctant to activate the 9-1-1 emergency medical system. HCR 236/HR204 would help to change that.

The American Heart Association strongly urges legislators to support HCR 236/HR204. Thank you for your consideration of this life-saving resolution.

Respectfully submitted,

A handwritten signature in black ink that reads "Donald B. Weisman".

Donald B. Weisman
Hawaii Government Relations/Communications Director

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STATE OF HAWAII
DEPARTMENT OF EDUCATION
P.O. BOX 2360
HONOLULU, HAWAII 96804

LATE

Date: 03/16/2018

Time: 02:10 PM

Location: 309

Committee: House Education

Department: Education

Person Testifying: Dr. Christina M. Kishimoto, Superintendent of Education

Title of Resolution: HCR 236 REQUESTING THAT THE DEPARTMENT OF EDUCATION DESIGN AND IMPLEMENT A CURRICULUM IN HAWAII PUBLIC SCHOOLS THAT TEACHES STUDENTS TO PERFORM CARDIOPULMONARY RESUSCITATION AND TO IDENTIFY SYMPTOMS OF A STROKE.

Purpose of Resolution:

Department's Position:

The Department of Education (Department) supports the intent of HCR 236/HR204 related to curriculum design and implementation for performing cardiopulmonary resuscitation (CPR) and identifying symptoms of a stroke for Hawaii public school students. The Department would respectfully like to provide comments on this measure for the committee's consideration.

Within the Hawaii Content and Performance Standards III for Health, CPR instruction and stroke symptom identification may occur as part of the topic, "Promoting Safety and Preventing Violence and Unintentional Injury," which is 1 of 7 health topics. Injury prevention instruction in Health may include but is not limited to first aid, personal safety, work safety, and accident prevention.

CPR instruction and stroke symptom identification might be addressed in existing health curriculum selected by schools; therefore, curriculum design for these topics is not needed at this time. The Department will work collaboratively with community partners.

Thank you for this opportunity to provide testimony on this measure.

The Hawaii State Department of Education seeks to advance the goals of the Strategic Plan which is focused on student success, staff success, and successful systems of support. This is achieved through targeted work around three impact strategies: school design, student voice, and teacher collaboration. Detailed information is available at www.hawaiipublicschools.org.

Hawaii Stroke Coalition

March 16, 2018

Committee on Education
House of Representatives
The Twenty-Ninth Legislature
Regular Session of 2018
State of Hawaii



Re: House Resolution 204

Chairman Woodson and Vice-Chair Kong:

As officers of the Hawaii Stroke Coalition (HSC), we write to you in strong support of House Resolution 204 that you are considering today.

The Hawaii Stroke Coalition is a multidisciplinary community stakeholder organization composed of public, private, and non-profit healthcare organizations working together for the common purpose of improving stroke outcomes throughout Hawaii. Coalition members include representatives from Emergency Medical Services Injury Prevention System Branch (EMSIPSB), hospitals participating in the stroke system of care, and other stakeholder groups. The HSC was formed as a task force through Senate Concurrent Resolution No. 155 SD 1. of the Twenty-Seventh Legislature of the State of Hawaii, Regular Session 2013, and continued by Act 211, HB589 HD1 SD1 in 2015 “to provide a mechanism to evaluate and improve stroke care in the State.” To fulfill this mission, we meet together bimonthly to review and discuss our state-level and hospital-specific stroke quality data to recommend changes in hospital treatment protocols and EMS triage of stroke patients.

An important aspect of our mission to improve stroke outcomes in Hawaii involves public education about the signs and symptoms of stroke, the limited time window for effective stroke treatments, and the importance of calling 9-1-1. Research on previous public education campaigns using television, radio, and print ads has shown that the positive effects on 9-1-1 call rates rarely last longer than the duration of the advertising campaigns themselves. We believe that a strategy for stroke education through the schools has great potential for longer-lasting positive effects.

The Hawaii Stroke Coalition is committed to improving public awareness of stroke

signs and symptoms and the understanding that treatment options are often time-limited. Our organization would enthusiastically work with the Department of Education to assist with the development of the stroke education content and implementation of the program, if this resolution is passed.

Sincerely,

Huidy Shu, MD, PhD
Chair, Hawaii Stroke Coalition

Kazuma Nakagawa, MD
Vice Chair, Hawaii Stroke Coalition

Matthew Koenig, MD
Immediate Past Chair, Hawaii Stroke Coalition



**Friday, March 16, 2018 at 2:10 pm
Conference Room 309**

LATE

House Committee on Education

To: Representative Justin Woodson, Chair
Representative Sam Satoru Kong, Vice Chair

From: Huidy Shu, MD, PhD
Medical Director of Neurology Services -- Pali Momi Medical Center

Re: HCR 236/HR 204– Testimony in Support

My name is Huidy Shu and I am the Medical Director of Neurology Services for Pali Momi Medical Center. With 118 beds and more than 400 physicians on its medical staff, Pali Momi Medical Center offers a full range of services for the communities of Central and West O'ahu. The hospital has delivered many medical firsts for the community, including Central and West O'ahu's only interventional cardiac catheterization units to detect and treat heart disease, a fully integrated minimally invasive surgical suite, a comprehensive women's center, CT scan and MRI services, and the state's first retina center. The hospital is an affiliate of Hawai'i Pacific Health, one of the state's largest health care providers and a not-for-profit health care system with over 70 locations statewide including medical centers, clinics, physicians and other caregivers serving Hawai'i and the Pacific Region with high quality, compassionate care.

I am writing in support of HCR 236 and HR 204 which request that the Department of Education design and implement a curriculum in our public schools that teaches students to perform CPR and to identify symptoms of a stroke. An important aspect of improving stroke outcomes involves public education about the signs and symptoms of stroke and the urgency of calling 911 immediately. There is only a limited window of time for effective stroke treatments, making the public's response to signs and symptoms of a stroke critical. Thus, an effective strategy of stroke education beginning in the public schools with school-age individuals will have positive long-lasting potential regarding stroke awareness and may improve outcomes for stroke victims.

Thank you for this opportunity to testify.



To: The Honorable Justin H. Woodson, Chair
The Honorable Sam Satoru Kong, Vice Chair
Members, Committee on Education
Paula Yoshioka

From: Paula Yoshioka, Vice President of Government Relations and External Affairs, The Queen's Health Systems

Date: March 15, 2018

Hrg: House Committee on Education Hearing; Friday, March 16, 2018 at 2:10AM in Room 309

Re: **Support for HCR 236 and HR 204**

My name is Paula Yoshioka and I am a Vice President at The Queen's Health Systems (Queen's). We **support** HCR 236 and HR 204. This resolution requests that the Department of Education design and implement a curriculum in Hawaii public schools that teaches students to perform cardiopulmonary resuscitation and to identify symptoms of stroke.

At Queen's we are committed to providing care for all the people of Hawaii. Established in 1996, Queen's Neuroscience Institute's mission is to provide state-of-the-art medical care to patients with neurological and neurosurgical diseases through the integration of clinical excellence, education and research. In 2016, Queen's Neuroscience Institute became Hawaii's first Comprehensive Stroke Center, the highest level of stroke accreditation designated by The Joint Commission.

We concur with the testimony of the Hawaii Stroke Coalition. Improving stroke outcomes in Hawaii involves public education about the signs and symptoms of stroke, the limited time window for effective stroke treatments, and the importance of calling 9-1-1. Research on previous public education campaigns using television, radio, and print ads has shown that the positive effects on 9-1-1 call rates rarely last longer than the duration of the advertising campaigns themselves. We believe that a strategy for stroke education through the schools has great potential for longer-lasting positive effects.

Thank you for your time and attention to this important issue.