

JOSH GREEN, M.D.  
GOVERNOR



KEITH T. HAYASHI  
SUPERINTENDENT

STATE OF HAWAII  
DEPARTMENT OF EDUCATION  
KA 'OIHANA HO'ONA'AUAO  
P.O. BOX 2360  
HONOLULU, HAWAII 96804

**Date:** 02/07/2023

**Time:** 02:00 PM

**Location:** 309 VIA VIDEOCONFERENCE

**Committee:** House Education

**Department:** Education

**Person Testifying:** Keith T. Hayashi, Superintendent of Education

**Title of Bill:** HB 0942 RELATING TO EMERGENCY MEDICAL RESPONSE.

**Purpose of Bill:** Requires each Department of Education school to establish a critical medical emergency response team. Appropriates moneys.

**Department's Position:**

The Hawaii State Department of Education (Department) supports HB 942 and provides comments.

This bill requires the Department to expand on what is already in place. As such, the Department recommends that the bill clarify the statement on Page 1, Line 15 that states, "administration appoint critical emergency response team members" to read "administration appoint any member of the staff to be a critical emergency response team member." Each school has unique needs and the administrator should have the authority to determine the appropriate staff to be trained.

Lastly, the Department requests that funding is provided as CPR/first aid training and certification are required on a biennial (every two years) basis. Funding will also be vitally important in procuring additional first aid kits, Automated External Defibrillators, communications devices (e.g., alert buttons, radios, public address systems, etc.), and other resources (e.g., full-time positions to manage CPR/first aid programs, manage drills, write reports, etc.) in order to meet the bill's "three-minutes or less" response time requirement.

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



**TESTIMONY OF  
THE DEPARTMENT OF THE ATTORNEY GENERAL  
KA 'OIHANA O KA LOIO KUHINA  
THIRTY-SECOND LEGISLATURE, 2023**

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**ON THE FOLLOWING MEASURE:**

H.B. NO. 942, RELATING TO EMERGENCY MEDICAL RESPONSE.

**BEFORE THE:**

HOUSE COMMITTEE ON EDUCATION

**DATE:** Tuesday, February 7, 2023                      **TIME:** 2:00 p.m.

**LOCATION:** State Capitol, Room 309

**TESTIFIER(S):** Anne E. Lopez, Attorney General, or  
Anne T. Horiuchi, Deputy Attorney General

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Chair Woodson and Members of the Committee:

The Department of the Attorney General (Department) provides the following comments.

The bill requires each Department of Education (DOE) school to establish a critical medical emergency response team and appropriates moneys.

The bill applies to all "public schools," which is defined to include charter schools in section 302A-101, Hawaii Revised Statutes (HRS). (Page 2, line 5). The proposed section 302A- (f), HRS, would state: "Any school with three or more drills resulting in a response time longer than three minutes, shall receive support in their corrective actions by their complex [sic] superintendent." (Page 3, line 19 – page 4, line 2.) Charter schools, however, do not fall within the jurisdiction of complex area superintendents.

If the bill is not meant to include charter schools, we recommend replacing the term "public school" on page 2, line 5, with "department school," which is defined as any school that falls within the definition of "public schools" except for a charter school. See section 302A-101, HRS. Additionally, we recommend inserting the word "area" between "complex" and "superintendent" on page 4, line 2. If the bill is meant to include charter schools, we recommend the following revision to page 4, line 2:

their complex area superintendent[;-] or by the commission.

We also recommend including an additional subsection to the new section that would address the potential liability of critical emergency response team members, such as:

Any person who acts in accordance with the requirements of this section shall be immune from any civil or criminal liability arising from these acts, except where the person's conduct would constitute gross negligence, willful and wanton misconduct, or intentional misconduct.

This suggested wording is modeled after subsection 302A-1164(h), HRS, which provides legal immunity to DOE employees and agents who volunteer to administer insulin or glucagon in an emergency situation or administer or assist with blood glucose monitoring.

Thank you for the opportunity to provide comments on this measure.



*Hawai'i Children's Action Network Speaks! is a nonpartisan 501c4 nonprofit committed to advocating for children and their families. Our core issues are safety, health, and education.*

To: Representative Woddson, Chair  
Representative Marten, Vice Chair  
House Committee on Education

Re: HB942, relating to emergency medical response  
2:00 p.m., Feb. 7, 2023

Aloha Chair Woodson, Vice Chair Marten and committee members:

On behalf of Hawai'i Children's Action Network (HCAN) Speaks!, mahalo for the opportunity to **testify in SUPPORT of House Bill 942, relating to emergency medical response.**

When parents and families drop their children off at school each morning, they expect that their child will be safe if an unfortunate accident or emergency happens. HB942 will ensure all schools are equipped with a plan if such an emergency happens. It ensures schools practice those plans regularly. And, it provides necessary appropriations so schools can be supported in creating and carrying out plans.

We hope that no school will ever need the plans this bill would require, but we know that hope is not a plan. We believe this is an important measure to make sure schools are ready to support children, faculty and staff in a medical emergency. **Please support HB942.**

Mahalo,

Ke'ōpū Reelitz  
Director of Early Learning and Health Policy

**HB-942**

Submitted on: 2/6/2023 8:21:40 AM

Testimony for EDN on 2/7/2023 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Leilani Kupahu-Marino Kahoano	Caring for Hawai'i Neonates	Support	Written Testimony Only

Comments:

Aloha Legislative Members,

Our organization, Caring for Hawai'i Neonates, inclusive of medical health professionals who are expected to train for life-saving skills that can be administered within the hospital or in our communities. We are advocates for all community members to have a basic level of life-saving skills, especially for other professionals expected to care for our children.

We support the need for critical life-saving trainings and mock drills. Also, that professionals are under a "Good Samaritan Law Hawaii" so they make a choice to do what is right in that moment vs the concern over a policy or rule that hinders rendering life-saving support. Mahalo nui.

Me ke aloha mau,

Leilani Kupahu-Marino Kahoano, RN, NICU | Pediatrics | Hospice

on behalf of Caring for Hawai'i Neonates

**§663-1.5 Exception to liability.** (a) Any person who in good faith renders emergency care, without remuneration or expectation of remuneration, at the scene of an accident or emergency to a victim of the accident or emergency shall not be liable for any civil damages resulting from the person's acts or omissions, except for such damages as may result from the person's gross negligence or wanton acts or omissions.

(b) No act or omission of any rescue team or physician working in direct communication with a rescue team operating in conjunction with a hospital or an authorized emergency vehicle of the hospital or the State or county, while attempting to resuscitate any person who is in immediate danger of loss of life, shall impose any liability upon the rescue team, the physicians, or the owners or operators of such hospital or authorized emergency vehicle, if good faith is exercised.

This section shall not relieve the owners or operators of the hospital or authorized emergency vehicle of any other duty imposed upon them by law for the designation and training of members of a rescue team or for any provisions regarding maintenance of equipment to be used by the rescue team or any damages resulting from gross negligence or wanton acts or omissions.

(c) Any physician or physician assistant licensed to practice under the laws of this State or any other state who in good faith renders emergency medical care in a hospital to a person, who is in immediate danger of loss of life, without remuneration or expectation of remuneration, shall not be liable for any civil damages, if the physician or physician assistant exercises that standard of care expected of similar physicians or physician assistants under similar circumstances. Any physician who supervises a physician assistant providing emergency medical care pursuant to this section shall not be required to meet the requirements set forth in chapter 453 regarding supervising physicians.

(d) Any person or other entity who as a public service publishes written general first aid information dealing with emergency first aid treatment, without remuneration or expectation of remuneration for providing this public service, shall not be liable for any civil damages resulting from the written publication of such first aid information except as may result from its gross negligence or wanton acts or omissions.

(e) Any person who in good faith, without remuneration or expectation of remuneration, attempts to resuscitate a person in immediate danger of loss of life when administering any automated external defibrillator, regardless of where the automated external defibrillator that is used is located, shall not be liable for any civil damages resulting from any act or omission except as may result from the person's gross negligence or wanton acts or omissions.

Any person, including an employer, who provides for an automated external defibrillator or an automated external defibrillator training program shall not be vicariously liable for any civil damages resulting from any act or omission of the persons or employees who, in good faith and without remuneration or the expectation of remuneration, attempt to resuscitate a person in immediate danger of loss of life by administering an automated external defibrillator, except as may result from a person's or employer's gross negligence or wanton acts or omissions.

(f) Any physician or physician assistant who administers an automated external defibrillator program without remuneration or expectation of remuneration shall not be liable for any civil damages resulting from any act or omission involving the use of an automated external defibrillator, except as may result from the physician's or physician assistant's gross negligence or wanton acts or omissions.

(g) Any person who in good faith, without remuneration or expectation of remuneration, attempts to rescue a person in immediate danger of loss of life by use of a rescue tube, regardless of where the rescue tube that is used is located, shall not be liable for any civil damages resulting from any act or omission except as may result from the person's gross negligence or wanton acts or omissions.

The owner or operator of any premises, property, or facility that is adjacent to navigable waters, where a rescue tube is located shall not be liable for any civil damages resulting from any act or omission relating to the storage, maintenance, or use of the rescue tube.

(h) This section shall not relieve any person, physician, physician assistant, or employer of:

(1) Any other duty imposed by law regarding the designation and training of persons or employees;

(2) Any other duty imposed by provisions regarding the maintenance of equipment to be used for resuscitation; or

(3) Liability for any damages resulting from gross negligence, or wanton acts or omissions.

(i) For the purposes of this section:

"Automated external defibrillator program" means an appropriate training course that includes cardiopulmonary resuscitation and proficiency in the use of an automated external defibrillator.

"Good faith" includes but is not limited to a reasonable opinion that the immediacy of the situation is such that the rendering of care should not be postponed.

"Rescue team" means a special group of physicians, basic life support personnel, advanced life support personnel, surgeons, nurses, volunteers, or employees of the owners or operators of the hospital or authorized emergency vehicle who have been trained in basic or advanced life support and have been designated by the owners or operators of the hospital or authorized emergency vehicle to attempt to provide such support and resuscitate persons who are in immediate danger of loss of life in cases of emergency.

"Rescue tube" means a flotation device used for water rescues that helps support the victim's and rescuer's weight. [L 1969, c 80, §1; am L 1974, c 44, §1; am L 1979, c 81, §2; am L 1980, c 232, §35; am L 1983, c 33, §1; gen ch 1985; am L 1998, c 160, §2; am L 2004, c 191, §1; am L 2007, c 91, §§2, 3; am L 2009, c 17, §1 and c 151, §§23, 24 ; am L 2018, c 145, §2]

**HB-942**

Submitted on: 2/6/2023 10:34:47 PM

Testimony for EDN on 2/7/2023 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Darlyn Chen Scovell	Hawaii FASD Action Group	Support	Written Testimony Only

Comments:

**To: The Honorable Representative Justin H. Woodson, Chair**

**The Honorable Representative Lisa Marten, Vice Chair**

**Members of the House Representative Committee on Education**

**POSITION: STRONG SUPPORT – HB 942**

My name is Darlyn Chen Scovell, a volunteer advocate for families and children with FASD (Fetal Alcohol Spectrum Disorder) and the Hawaii FASD Action Group. Being the voice of children who have none and individuals with FASD who have been marginalized, unrecognized, and without help, attention, and services for many years. I am writing in **STRONG SUPPORT of HB 942.**

More than 326,000 emergency medical services-assessed out-of-hospital cardiac arrests occur annually in the United States. Of this figure, an estimated 6,300 out-of-hospital cardiac arrests happen to children. CPR, which is being recommended for Hawaii schools, can be taught by one Certified CPR Instructor under the DOE and can be considered for continuing education for teachers.

This Bill aims to secure Hawaii Children’s Safety in schools.

Hawaii can achieve better survival rates through a well-educated community and teachers all working with children trained in life-saving CPR, First Aid, and AED. Many states have much better survival rates than Hawaii’s, so we know we can do better. Cardiac arrest can occur without warning or symptoms from an electrical short circuit in the heart. No one is immune to it - not even children, athletes, and seemingly healthy adults. However, cardiac arrest can also be related to blockages of the coronary arteries, as might occur with a heart attack.

“Although injury deaths have traditionally been viewed as “accidents,” injury-prevention science that evolved during the latter half of the 20th century increasingly shows that such deaths are preventable with evidence-based approaches.”

**Please Support and Pass HB 942 - Critical Medical Emergency Response Plans in Hawai’i’s Public Schools**



**Taking Care of our Tomorrow Today**

Mahalo Nui Loa, for your kind consideration and your unfailing support.

Always with Gratitude.

Respectfully yours,

Darlyn Chen Scovell MA, CSAC, ICADC, RBT

February 4, 2023

**TO:** The 2023 Hawai'i State Legislature

**RE:** HB942 & SB830

Critical Medical Emergency Response in the Hawai'i Department of Education Public Schools

To be very honest from the start, this legislation was authored, unfortunately, after a choking incident with our son.

Our research has indicated that there are many other states that were not able to support this kind of reform until after a death and/or lawsuit. **Fortunately**, however, our son is alive and well and our 'ohana can continue to believe firmly in *prevention* as the best medicine.

In early January of this year our son, a public middle school student, began choking on a piece of pork that was a part of his school lunch and his teacher, **rightfully and appropriately**, responded by giving him abdominal thrusts and his airway was cleared enough for him to start breathing again. We got a call from the school nurse about 30 minutes after the lunch period saying he needed to be picked up because he was throwing up. It wasn't until we were in the Emergency Room at Pali Momi (*where he could not stop vomiting*) that we got an email from his teacher informing us of the full incident (*this was about 3 hours later*).

We would like to make it clear that we *appreciate and support this teacher wholeheartedly*, but this experience (*especially the procedures and notification mechanisms*) really jarred us, and we wanted to not only understand, but to **help**.

As we learned more and more (*from the teacher, then the vice principals, then the principal, then the complex superintendent's office, and eventually the Director of Safety, Security and Emergency Preparedness for the Department of Education*) about the technicalities of policies and procedures around incidents of this type, we came to realize there really **weren't any**. It was at the safety directors' prompting that "statute would be important" that we proceeded.

So, we went to our community. Of the friends and family (*all public-school parents*) that we casually surveyed after this incident, 33 of 37 assumed this was already "a thing" (*26 actually incorrectly thought all teachers were actually CPR/First Aid trained as a normative requirement*). Folks just didn't know.

We then spoke with representatives from every relevant organization that we could think of before developing these bills, including reaching out directly to the Board of Education (BOE). Among many others we called the Hawai'i State Teachers Association (HSTA), the Hawai'i Government Employees Association (HGEA), as well as the Occupational Services and Health Administration (OSHA) and the American Red Cross (ARC). We understand that there are complexities in our systems that are often difficult to navigate for large groups, such as the Department of Education, but not one person disagreed with this concept.

The language in these bills simply asks that all schools be required to have a critical medical emergency response **PLAN** and to practice it. *NOT* that all teacher/staff be trained in CPR/First Aid. *NOT* that all schools have the same blanket requirements. It creates consideration for unique ratios, campus size, and communication mechanisms. It is not financially burdensome (*many organizations will even train school staff for free*) and can fit in with currently existing drill schedules and quality improvement mechanisms. Previous legislation around CPR in schools has been more absolute and overarching.

Our family are several generations of "*public school kids*" from Hawai'i. Several of our family members are currently and have been public schoolteachers. Amanda works in social and human services in intergenerational trauma and early development, and Kainoa works for the Hawai'i National Guard Medivac. We are prevention people and KNOW from firsthand experience that planning and preparedness are literal LIFE SAVERS.

We honestly hope that passing this legislation is an uncontroversial and uncomplicated matter.

Mahalo nui,

  
**Amanda & Kainoa Luning**

Public School Parents, Local Public Servants

(*AND firm believers that 'systems' are just people trying their best with what they have, and we should all really just help each other out!*)

# MINUTES MATTER

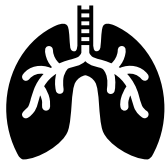
Please Support  
Critical Medical Emergency  
Response Plans  
In Hawai‘i’s Public Schools  
**HB942 & SB830**



Unintentional  
accident/injury related  
death remains the  
leading cause in the  
United States for person  
ages 1-44. (3)



“CPR, especially if  
administered immediately  
after cardiac arrest, can  
double or triple a person’s  
chance of survival.” (1)



“Choking can  
kill an  
individual  
within minutes,  
and quick  
intervention is  
needed to save  
the victim’s  
life.” (4)



“Although injury deaths have traditionally been  
viewed as “accidents,” injury-prevention science that  
evolved during the latter half of the 20th century  
increasingly shows that such deaths are preventable  
with evidence-based approaches.” (2)

1) <https://cpr.heart.org/en/resources/cpr-facts-and-stats>

2) Cunningham RM, Walton MA, Carter PM. The major causes of death in children and adolescents in the United States. N Engl J Med 2018;379:2468-2475.

3) <https://wisqars.cdc.gov/data/lcd/home>

4) <https://www.abc10.com/article/news/family-childs-choking-death-at-school-could-have-been-prevented/103-398868292>

**HB-942**

Submitted on: 2/5/2023 8:06:21 AM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Nicole Loria	Individual	Support	Written Testimony Only

Comments:

As a mother of a 6 year old who attends public school I was in disbelief when I heard about the lack of critical emergency measures in the DOE through Amanda's experience. Frankly, it is terrifying and requires immediate action. Mahalo nui.

**HB-942**

Submitted on: 2/5/2023 11:55:53 AM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Elizabeth Evans	Individual	Support	Written Testimony Only

Comments:

This should have been done years ago!!

**HB-942**

Submitted on: 2/5/2023 1:55:35 PM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Keala Lee	Individual	Support	Written Testimony Only

Comments:

Emergency protocols and procedures is a MUST and an IMPORTANT NEED for our Keiki!! It is our Kuleana (responsibility) to keep them safe. They are Hawaii's future.

**HB-942**

Submitted on: 2/5/2023 3:43:57 PM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Judy B	Individual	Support	Written Testimony Only

Comments:

Please pass this legislation that will then provide more expedient care for childelren who experience medical needs while in the public school system.

Thank you for voting in favor

**HB-942**

Submitted on: 2/5/2023 4:24:17 PM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Charlee Tanuvasa	Individual	Support	Written Testimony Only

Comments:

This is great, please vote for it!



**HB-942**

Submitted on: 2/5/2023 6:46:04 PM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Jon evans	Individual	Support	Written Testimony Only

Comments:

This is a good idea.

**HB-942**

Submitted on: 2/6/2023 12:14:38 AM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Carrie Archibald	Individual	Support	Written Testimony Only

Comments:

I am in support of this bill as a public educator and family friend of the Lunings. I am grateful that I have yet to be in a position, as a classroom teacher and school employee, to have been faced with a life and death situation but I realize after hearing of Noah's incident that I wouldn't be able to act and all I have ever been told to do is to call an administrator and 911. However, minutes matter and I cannot imagine that calling someone other than someone who is on campus and is prepared to respond, would provide the required timely response that can make the difference between life and death. Parents send their children to public school every day, in fact they are required to do so, and it is assumed that the school will act and care for their child as responsibly and professionally as the parent themselves. This gap in policy MUST be filled and this bill will do so.

**HB-942**

Submitted on: 2/6/2023 8:10:41 AM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Lauren Rapoport	Individual	Support	Written Testimony Only

Comments:

I support this bill and urge all committee members to likewise push this bill forward.

**HB-942**

Submitted on: 2/6/2023 10:32:08 AM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Rebecca Marple	Individual	Support	Written Testimony Only

Comments:

I support this bill 100%.

**HB-942**

Submitted on: 2/6/2023 3:29:08 PM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Candace Pang	Individual	Support	Written Testimony Only

Comments:

I was surprised to hear that there were no health response plans in place already in the DOE that would support emergency care for students, teachers or visitors on campus including having staff/teachers at least learn basic CPR and first aid. For older students, this could be extremely helpful for them to learn as well! I fully support this bill! Let's make sure our schools are safe for everyone!

**HB-942**

Submitted on: 2/6/2023 5:29:51 PM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Ed Akabane	Individual	Support	Written Testimony Only

Comments:

Support

**HB-942**

Submitted on: 2/7/2023 12:44:40 AM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Ranya Agcaoili	Individual	Support	Written Testimony Only

Comments:

House Bill 942

Senate Bill 830

I am in support for House Bill 942 and Senate Bill 830.

I agree that we can figure out a bill that will protect the liability for our teachers, staff members in our schools, parents, and our students. There is also the Samaritan Law for liability and safety. There can be ways to get funding from the state and federal to enhance the bill upon receiving money for instructors, CPR Trainings, staffing, more jobs for our people in the schools and communities, supplies, etc.

It is possible to pass a bill that relies for the safety of our children, students, and teachers. We just got to come together and see all the different angles which the House Bill 942 and Senate Bill 830, can encompass the liability and funding in order for the bills to be passed.

I strongly believe that it is vital and essential to have a Medical Emergency Plan for the safety and the lives of our students, teachers, parents, staff members in the schools and for our communities.

Section 8A

Each plan shall include:

- (1) a method for establishing a rapid communication system linking all parts of the school campus, including outdoor facilities and practice fields, to the emergency medical services system and protocols to clarify when the emergency medical services system and other emergency contact people shall be called;
- (2) a determination of emergency medical service response time to any location on campus;
- (3) a list of relevant contacts and telephone numbers with a protocol indicating when each person shall be called, including names of professionals to help with post-emergency support;
- (4) a method to efficiently direct emergency medical services personnel to any location on campus, including to the location of available rescue equipment;
- (5) safety precautions to prevent injuries in classrooms and on the facilities;
- (6) a method of providing access to training in cardiopulmonary resuscitation and first aid for teachers, athletic coaches, trainers and other school staff, which may include training high school students in cardiopulmonary resuscitation; and
- (7) in the event the school possesses an automated external defibrillator, the location of the device, whether or not its location is either fixed or portable and those personnel who are trained in its use.
- (8) Plans shall be developed in consultation with the school principal, school nurse, school athletic director, team physicians, coaches, trainers and local police, fire and emergency personnel, as appropriate. Schools shall practice the response sequence at the beginning of each school year and periodically throughout the year and evaluate and modify the plan as necessary. School officials shall review the response sequence with local fire and police officials at least 1 time each year and shall conduct periodic walk-throughs of school campuses. Plans shall be submitted to the board of education, the local police department and the local fire department. Plans shall be updated in the event of new construction or physical changes to the school campus as determined by the local police department.

Included in each initial and subsequent filing of a medical emergency response plan, each school district shall report on the availability of automated external defibrillators in each school within the district, including, the total amount available in each school, the location of each within the school, whether or not the device is in a fixed location or is portable, those personnel or volunteers who are trained in its use, those personnel with access to the device during regular school hours and after and the total estimated amount of automated external defibrillators necessary to ensure campus-wide access during school hours, after-school activities and public events.

(b) The department of elementary, intermediate and high school education, in consultation with the department of public health, shall develop a cost-neutral model medical emergency response plan in order to promote best practices. Model plan shall be made available to each school



committees, charter schools, or any school organization, to be open and have access for the public to be informed.

**LATE**

**HB-942**

Submitted on: 2/7/2023 11:55:58 AM

Testimony for EDN on 2/7/2023 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Ariel Cruz	Individual	Support	Written Testimony Only

Comments:

I support Bill HB942 that requires each Department of Education schools to establish a critical medical emergency response team and to be properly trained with CPR/First aid certified when having children/students in their care and/or supervision. Knowing proper and effective response to any medical crisis/emergency when medical professional not available to first respond.