



COUNCIL OF THE DISTRICT OF COLUMBIA

THE JOHN A. WILSON BUILDING 1350

PENNSYLVANIA AVENUE, NW

WASHINGTON, D.C. 20004

KENYAN R. McDUFFIE
Councilmember, At Large
Chair Pro Tempore
Chair, Committee on Business and
Economic Development

Committee Member
Executive Administration and Labor
Housing
Recreation and Youth Affairs

November 9, 2023

Nyasha Smith, Secretary
Council of the District of Columbia
1350 Pennsylvania Avenue, N.W.
Washington, DC 20004

Dear Secretary Smith,

Today, I am introducing the Cardiac Planning and Response (“CPR”) Amendment Act of 2023, along with Councilmembers Brianne K. Nadeau, Charles Allen, Anita Bonds, Janeese Lewis George, Robert C. White, Jr., Zachary Parker, Matthew Frumin, and Brooke Pinto.

In 2015, I introduced the “Office of Unified Communications Training, CPR, and Modernization Amendment Act of 2015”. Among other things, this bill required: MPD and FEMS providers to complete joint training classes with OUC call-takers and dispatchers; OUC to provide continuing education classes and training including CPR on an annual basis; OUC to implement a smartphone application to alert and summon citizens trained in CPR while medical services providers are en route to an emergency event; and OUC and FEMS to conduct a District-wide CPR training program for District students, employees, and residents.

The Council expanded upon and incorporated this bill in the Fiscal Year 2017 Budget Support Act of 2016. The Public Safety Telecommunicator and District School CPR and Training subtitle additionally mandated the placement of an AED in every school that would be readily available for every athletic event; required AED use and CPR training for every athletic coach, trainer, and school nurse; and mandated public and public charter high schools to provide CPR and AED training. This law also required schools to establish procedures for responding to cardiac arrest.

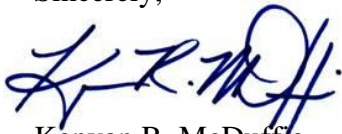
The CPR Amendment Act of 2023 would enhance the prior law by requiring schools to develop an evidence-based cardiac emergency response plan (“CERP”) to respond to incidents involving an individual experiencing cardiac arrest or a similar life-threatening emergency while on school grounds. It would also require middle and high schools with an athletic department or organized athletic program to develop a CERP to respond to incidents involving an individual experiencing cardiac arrest or a similar life-threatening emergency while attending or participating in an athletic practice or event while on school grounds.

There is a national focus on making sure all students and student athletes, in particular, can receive the same high quality, and immediate lifesaving care that six-time heart attack survivor and former student athlete Miss District of Columbia Jude Maboné, Damar Hamlin, Bronny James, Christian Eriksen, and so many others have received. According to the Centers for Disease Control and Prevention, roughly 2,000 young, seemingly healthy people under the age of 25 in the United States die each year of sudden cardiac arrest.

This bill is supported by the American Heart Association, Miss District of Columbia Jude Maboné, DC Medical Society, and American College of Cardiology.

Please contact my Legislative Director, Doni Crawford, at dcrawford@dccouncil.gov if you have any questions.

Sincerely,



Kenyan R. McDuffie

1 Brianne K. Nadeau

2 Councilmember Brianne K. Nadeau

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4 AKM

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6 Councilmember Anita Bonds

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8 R.C.W.

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10 Councilmember Robert C. White, Jr.

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12 Matthew Frumin

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14 Councilmember Matthew Frumin

K.R. McDuffie

Councilmember Kenyan R. McDuffie

Charles Allen

Councilmember Charles Allen

Janeese Lewis George

Councilmember Janeese Lewis George

Zachary Parker

Councilmember Zachary Parker

BE R

Councilmember Brooke Pinto

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22 A BILL

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27 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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32 To amend the Public Access to Automated External Defibrillator Act of 2000 to define the term
33 cardiac emergency response plan, and to establish cardiac emergency response plans.
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35 BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this
36 act may be cited as the “Cardiac Planning and Response (“CPR”) Amendment Act of 2023”.

37 Sec. 2. The Public Access to Automated External Defibrillator Act of 2000, effective
38 April 27, 2001 (D.C. Law 13-278; D.C. Official Code § 7-2371.01 *et seq.*), is amended as
39 follows:

40 (a) Section 2 (D.C. Official Code § 7-2371.01) is amended as follows:

41 (1) A new paragraph (1A) is added to read as follows:

42 “(1A) “Cardiac Emergency Response Plan” or “CERP” means a written document
43 that establishes the specific steps to be taken to reduce death from cardiac arrest in any setting,
44 be it a school, community organization, workplace, or sports facility.

45 (b) New section 3d is added to read as follows:

46 “Sec. 3d. Establishment of Cardiac Emergency Response Plans.

47 (a) Beginning in the 2024–2025 school year, each school shall develop a cardiac
48 emergency response plan that addresses the appropriate use of school personnel to respond to
49 incidents involving an individual experiencing cardiac arrest or a similar life-threatening
50 emergency while on school grounds.

51 (b) Beginning in the 2024-2025 school year, each middle and high school with an athletic
52 department or organized athletic program shall develop a cardiac emergency response plan that
53 addresses the appropriate use of school personnel to respond to incidents involving an individual
54 experiencing cardiac arrest or a similar life-threatening emergency while attending or
55 participating in an athletic practice or event while on school grounds.

56 (c) School officials shall work directly with local emergency service providers to
57 integrate the CERP into the community’s emergency medical services responder protocols. Each
58 plan shall integrate evidence-based core elements, such as those recommended by the American
59 Heart Association, American Red Cross, or another nationally recognized, evidence-based
60 standard/core elements.

61 (d) The CERP shall integrate, at a minimum, the following guidelines:

62 (1) Establishing a cardiac emergency response team

63 (2) Activating the team in response to a cardiac arrest

64 (3) Implementing AED placement and routine maintenance within the school

65 (4) Disseminating the plan throughout the school campus

66 (5) Maintaining ongoing staff training in CPR and AED use

67 (6) Practicing cardiac emergency response protocols through the use of drills

68 (7) Integrating local emergency medical services with the plan

69 (8) Ongoing and annual review and evaluation of the plan

70 (e) Appropriate AED placement shall be dictated by the CERP and in accordance with
71 guidelines set by the American Heart Association, American Red Cross, or another nationally
72 recognized, evidence-based standard.

73 (f) Appropriate school staff shall be trained in first-aid, CPR, and AED use that follow
74 evidence-based guidelines set forth by the American Heart Association, American Red Cross, or
75 another nationally recognized, evidence-based standard. Staff trained shall be determined by the
76 CERP, including but not limited to licensed coaches, school nurses, and athletic trainers.

77 (g) The Mayor may establish a procedure for monitoring school adherence to the
78 requirements set forth in subdivision of this section.

79 Sec 3. Fiscal impact statement.

80 The Council adopts the fiscal impact statement in the committee report as the fiscal
81 impact statement required by 4a of the General Legislative Procedures Act of 1975, approved
82 October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

83 Sec. 4. Effective date.

84 This act shall take effect following approval by the Mayor (or in the event of veto by the
85 Mayor, action by the Council to override the veto), a 30-day period of Congressional review as
86 provided in sections 602(c)(1) of the district of Columbia Home Rule Act, approved December

87 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the district of
88 Columbia Register.