

CPR/AED TRAINING REQUIRED IN CURRICULUM AND CONTENT GUIDELINES

Phone: (517) 373-8080
<http://www.house.mi.gov/hfa>

Senate Bill 647 (S-1) as passed by the Senate
Sponsor: Sen. Tonya Schuitmaker
House Committee: None (Placed directly on Second Reading)
Senate Committee: Education
Complete to 6-6-16

Analysis available at
<http://www.legislature.mi.gov>

BRIEF SUMMARY: Senate Bill 647 would amend the Revised School Code to describe the cardiopulmonary resuscitation (CPR) and automated external defibrillators (AED) training requirements the Michigan Department of Education (MDE) must incorporate into the model core academic curriculum content standards and subject area content expectations and guidelines for health education, under Section 1278a of the Code, not later than the 2016-2017 school year.

Section 1278a lists the requirements for award of a high school diploma, which include the successful completion of specific credit requirements of the Michigan merit standard before graduating from high school. In order to fulfill the health requirement, a student must either: (1) complete at least one credit in subject matter that includes both health and physical education aligned with the MDE's guidelines and approved by the State Board of Education, or (2) complete at least half a credit in that subject matter and be awarded half a credit for approved participation in extracurricular athletics. Senate Bill 647 is understood to incorporate CPR and AED training into this health requirement.

The Senate-passed substitute of this bill (S-1) is identical to the H-2 substitute of House Bill 5160, which was reported with recommendation by the House Education committee on May 12, 2016, and is on Second Reading on the House Floor.

FISCAL IMPACT: The bill could increase costs, by an indeterminate amount, for the state, and could increase costs, by an indeterminate amount, for intermediate school districts (ISDs), school districts, and public school academies (PSAs).

The Michigan Department of Education could incur minimal increased administrative costs, by an indeterminate amount, to ensure that the model of core academic curriculum content standards for Health Education and the subject area content expectations and guidelines for Health Education provide for instruction in cardiopulmonary resuscitation (CPR) and automated external defibrillators (AED). The bill could also increase costs to schools that are not already requiring instruction in CPR and AEDs. While not required, additional costs to schools could include certification of teaching personnel to provide certification card or status training to students.

THE APPARENT PROBLEM:

According to the American Heart Association, approximately 357,000 Americans suffer sudden cardiac arrest outside a hospital each year, and only about eight percent survive. CPR can nearly triple victim survival rates by providing assistance until emergency medical technicians arrive. Often, bystanders to the incident want to provide help but, lacking proper training, are only able to call for help. Meanwhile, the chances of recovery dwindle; for each minute that passes without CPR or defibrillation (provided by an AED), the chances of survival decrease by 7-10%.

THE CONTENT OF THE BILL:

CPR and AED Instruction

The MDE must ensure that the model core academic curriculum content standards for health education and the subject area content expectations and guidelines for health education (Section 1278a) provide for certain training in CPR and the use of AEDs.

For all students in grades 7 to 12, the standards and guidelines must provide for instruction in CPR and AEDs. They must also ensure that the psychomotor skills necessary to perform CPR are incorporated into the instruction (which indicates that students must practice the respirations and chest compressions in addition to receiving instruction). Finally, they must ensure that the instruction is based on either (1) an instructional program developed by the American Red Cross or American Heart Association or (2) nationally recognized, evidence-based guidelines for CPR.

An AED is a medical device that analyzes the heart's rhythm and, if necessary, delivers an electric shock which helps the heart re-establish effective rhythm.

Qualifications of instructor

A certificated teacher may facilitate, provide, or oversee instruction on these topics even if not an authorized CPR/AED instructor. However, if the CPR instruction described above would result in a pupil earning a CPR certification card or status, that instruction must be taught by an authorized CPR/AED instructor.

Schools encouraged to use local resources

The bill also encourages school districts and governing bodies to use locally available resources to provide the required instruction, including emergency medical technicians, paramedics, police officers, firefighters, representatives of the American Heart Association or American Red Cross, or properly trained teachers or other school employees.

Proposed MCL 380.1168

BACKGROUND INFORMATION:

Even basic hands-only CPR training, provided the hand placement is correct, can keep oxygenated blood moving, and keep a person alive until medical help arrives. This bill

proposes to provide students in grades 7-12 with basic CPR and AED training, which a representative of the American Heart Association testified would take approximately 30 minutes, and could mean the difference between life and death.

Kentucky became the 29th state to require CPR training in high schools when it passed legislation to that effect on April 9, 2016.¹ Subsequently, South Carolina and Wisconsin passed similar laws in late April to bring the total number of states to 31. For twenty-five years, only one state required CPR training for high school students—Alabama, which enacted that legislation in 1983. The other 30 states have enacted that legislation since 2009. Several of these states require CPR to be incorporated into the health curriculum, as this bill would do, rather than setting a separate requirement.

ARGUMENTS:

For:

Proponents of a similar House bill recounted stories in which individuals were saved by CPR or AEDs, and when others died because no one near them knew how to administer these life-saving procedures. The bill's supporters framed it not just as a way to provide an important skill to high school students, but as a way to provide training quickly and easily to approximately 100,000 Michigan citizens per year, and then send those individuals out into their communities to assist in case of emergency. In effect, providing this training as part of the health curriculum would allow Michigan to provide 100,000 first responders to its community each year, at minimal cost.

Against:

There was some concern expressed by House committee members over a similar House bill that CPR and AED training would present merely another requirement placed on schools already burdened with providing required courses and subject matter. Schools also objected to completion of the training as a graduation requirement, as this would increase their tracking and reporting responsibilities, to ensure that each student completed the training before receiving a diploma.

Response:

This substitute to the bill, however, requires the training as a component of the health course required for graduation (rather than as an independent requirement for graduation, as in the original bill). This would mean that, with the possible exceptions of students who transfer schools and miss the CPR and AED training at each school, each student will complete the training by fulfilling the health requirement, and the school will not incur any additional tracking requirement.

POSITIONS:

Representatives of the following organizations testified in support of a similar bill, House Bill 5160, during committee deliberations in the House:

American Heart Association (4-28-16)

¹ <http://news.heart.org/kentucky-becomes-29th-state-to-require-cpr-training-for-students/>

Spectrum Health (4-28-16)
Michigan Chapter of the American College of Cardiology (4-28-16)
Emergent Health Partners (4-28-16)
American Heart Association's Mobile Medical Response group (4-28-16)
The Wes Leonard Heart Team (4-28-16)
The Kimberly Anne Gillary Foundation (4-28-16)
The KAYLA Foundation (4-28-16)

The following organizations supported House Bill 5160

Michigan Association of Ambulance Services (4-28-16)
Michigan College of Emergency Physicians (4-28-16)
Michigan Chapter of the American College of Cardiology (4-28-16)

The Michigan Association of Secondary School Principals indicated neutrality on House Bill 5160. (5-12-16)

Legislative Analyst: Jennifer McInerney
Fiscal Analysts: Bethany Wicksall
Samuel Christensen

■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.