

SENATE COMMITTEE SUBSTITUTE
 FOR
 SENATE BILLS NOS. 1032 & 1081
 AN ACT

To amend chapter 160, RSMo, by adding thereto one new section relating to cardiac emergency response plans.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 160, RSMo, is amended by adding thereto one new section, to be known as section 160.482, to read as follows:

160.482. 1. As used in this section, the following terms mean:

(1) "Automated external defibrillator" or "AED", a lightweight, portable device that:

(a) Is used to administer an electric shock through the chest wall to the heart;

(b) Has built-in computers within the device to assess the patient's heart rhythm, determine whether defibrillation is needed, and administer the shock;

(c) Has audible or visual prompts, or both, to guide the user through the process;

(d) Has received approval from the U.S. Food and Drug Administration of its pre-market modification filed under 21 U.S.C. Section 360(k), as amended;

(e) Is capable of recognizing the presence or absence of ventricular fibrillation and rapid ventricular tachycardia and is capable of determining without intervention by an operator whether defibrillation should be performed; and

(f) Upon determining defibrillation should be performed, either automatically charges and delivers an electrical impulse to an individual's heart or charges and

delivers an electrical impulse at the command of the operator;

(2) "Cardiopulmonary resuscitation" or "CPR", a combination of rescue breathing, chest compressions, and external cardiac massage used to sustain an individual's life until advanced assistance arrives;

(3) "Defibrillation", administering an electrical impulse to an individual's heart in order to stop ventricular fibrillation or rapid ventricular tachycardia;

(4) "Emergency services provider", any public employer, or ground or air ambulance service as those terms are used in chapter 190, that employs persons to provide fire fighting, dispatching services, and emergency medical services;

(5) "Extracurricular event", any school-sponsored program or voluntary activity sponsored by the school, local education agency, or an organization sanctioned by the local education agency at which students compete for the purpose of:

(a) Receiving an award, rating, recognition, or criticism;

(b) Qualifying for additional competition; or

(c) Preparing for and involvement in public performances, contests, athletic competitions, demonstrations, displays, and club activities;

(6) "Protocol", currently approved and accepted procedures describing specific steps a provider is required to follow in assessing and treating a patient;

(7) "Public school", the same definition as in section 160.011;

(8) "School campus", any public school building or cluster of buildings, and grounds around such public school building or cluster of buildings, used for any public school

purpose including, but not limited to, an extracurricular activity, organized physical activity courses, early childhood education programs, or school district administration;

(9) "School personnel", a school district employee approved by the school board or a contract employee of the school district who is required to follow school policy and procedures;

(10) "School-sponsored event", any event or activity sponsored by the public school or school district including, but not limited to, athletic events, booster clubs, parent-teacher organizations, or any activity designed to enhance the school curriculum whether on the school campus or not;

(11) "Sudden cardiac arrest", a condition that occurs when the heart malfunctions and stops beating unexpectedly, is due to abnormal heart rhythms called arrhythmias, and is generally the result of some underlying form of heart disease;

(12) "Ventricular fibrillation", the most common arrhythmia that causes cardiac arrest and a condition in which the heart's electrical impulses suddenly become chaotic, often without warning, causing the heart's pumping action to stop abruptly.

2. For the 2025-26 school year and all subsequent school years:

(1) Each public school shall develop and implement a cardiac emergency response plan that addresses the appropriate use of school personnel to respond to incidents involving an individual experiencing sudden cardiac arrest or a similar life-threatening emergency while on a school campus; and

(2) Each public school with an athletic department or organized athletic program shall develop and implement a

cardiac emergency response plan that addresses the appropriate use of school personnel to respond to incidents involving an individual experiencing sudden cardiac arrest or a similar life-threatening emergency while attending or participating in an extracurricular event or school-sponsored event on the school campus.

3. Members of each public school's administration shall coordinate directly with local emergency services providers to integrate the public school's cardiac emergency response plan into the local emergency services providers' protocols. A cardiac emergency response plan shall integrate evidence-based core elements, such as those recommended by the American Heart Association guidelines, Project ADAM, or another set of nationally recognized, evidence-based standard or core elements.

4. The cardiac emergency response plan shall integrate, at a minimum, the following guidelines:

- (1) Establishment of a cardiac emergency response team;
- (2) Activation of the team in response to a sudden cardiac arrest;
- (3) Implementation of AED placement and routine maintenance throughout the school campus;
- (4) Dissemination of the plan throughout the school campus;
- (5) Maintenance of ongoing staff training in CPR or AED use, or both;
- (6) Practice of the cardiac emergency response plan using drills;
- (7) Integration of the plan into the local emergency services providers' protocols; and
- (8) Both annual and continuous reviews and evaluations of the plan.

5. Appropriate AED placement shall be dictated by the cardiac emergency response plan and in accordance with guidelines set by the American Heart Association, Project ADAM, or another set of nationally recognized, evidence-based standard or core elements.

6. Appropriate school personnel shall be trained in first aid, CPR, and AED use that follow evidence-based guidelines set forth by the American Heart Association, American Red Cross, Project ADAM, or another set of nationally recognized, evidence-based standard or core elements. The school personnel required to be trained shall be determined by the cardiac emergency response plan and shall include, but not be limited to, athletics coaches, school nurses, and athletic trainers.