

SENATE No. 02132

The Commonwealth of Massachusetts

SENATE, February 08, 2012

Senate, February 9, 2012 – New draft of Senate, No. 2110 reported from the committee on Health Care Financing.

For the committee,

RICHARD T. MOORE.

SENATE No. 2132

The Commonwealth of Massachusetts

In the Year Two Thousand Twelve

An Act relative to medical emergency response plans for schools.

Whereas, the deferred operation of this act would tend to defeat its purpose, which is to provide for emergency medical response plans in schools throughout the commonwealth, therefore, it is hereby declared to be an emergency law, necessary for the immediate preservation of the public safety.

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Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. This law shall be known, and may be cited as “Michael’s Law,” in memory
2 of Michael T. Ellsessar, age 16, who died suddenly of cardiac arrest suffered during a high
3 school football game, and was not immediately treated with an automated external defibrillator.”

4 SECTION 2. Chapter 69 of the general laws, as appearing in the 2010 Official Edition, is
5 hereby amended by inserting after section 8 the following section:-

6 Section 8A. (a) Each school committee and commonwealth charter school board of
7 trustees shall ensure that every school under its jurisdiction has a written medical emergency
8 response plan to reduce the incidence of life-threatening emergencies and promote efficient
9 responses to such emergencies. The plan shall be in addition to the multihazard evacuation plan
10 required by section 363 of chapter 159 of the acts of 2000.

11 Each plan shall include:

12 (1) a method for establishing a rapid communication system linking all parts of the school
13 campus, including outdoor facilities and practice fields, to the emergency medical services
14 system and protocols to clarify when the emergency medical services system and other
15 emergency contact people shall be called;

16 (2) a determination of emergency medical service response time to any location on
17 campus;

18 (3) a list of relevant contacts and telephone numbers with a protocol indicating when each
19 person shall be called, including names of experts to help with post-event support;

20 (4) a method to efficiently direct emergency medical services personnel to any location
21 on campus, including to the location of available rescue equipment;

22 (5) safety precautions to prevent injuries in classrooms and on the facilities;

23 (6) a method of providing access to training in cardiopulmonary resuscitation and first aid
24 for teachers, athletic coaches and trainers and other school staff, which may include training high
25 school students in cardiopulmonary resuscitation; and

26 (7) in the event the school possesses an automated external defibrillator, the location of
27 said device, whether or not its location is either fixed or portable, and those personnel who are
28 trained in its use.

29 Plans shall be developed in consultation with the school nurse, school athletic team
30 physicians, coaches and trainers, and the local emergency medical services agency, as
31 appropriate. Schools shall practice the response sequence at the beginning of each school year
32 and periodically throughout the year and evaluate and modify the plan as needed. Plans shall be

33 submitted once every three years to the department of elementary and secondary education on or
34 before September 1, beginning in the school year immediately following the effective date of this
35 act. Plans must also be updated in the case of new construction or physical changes to the school
36 campus.

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

44 (b) The department of elementary and secondary education, in consultation with the
45 department of public health, shall develop a model medical emergency response plan in order to
46 promote best practices. In developing the model plan, the department shall refer to research
47 prepared by the American Heart Association, the American Academy of Pediatrics and other
48 relevant organizations that indentifies the essential components of a medical emergency response
49 plan. The department shall biennially update the model plan and post the plan on its website.

50 SECTION 3. The department of elementary and secondary education shall submit a
51 report to the clerks of the senate and the house of representatives who shall forward the same to
52 the chairs of the joint committee on education and the chairs of the senate and house committees
53 on ways and means on the implementation of this initiative, the number of students and
54 personnel certified each year in first-aid and cardio-pulmonary resuscitation, and the number of

55 schools that opt out of instruction in cardiopulmonary resuscitation as required by section 1 of
56 chapter 71, on or before July 1, 2013.