

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 593 Telecommunicator Cardiopulmonary Resuscitation

SPONSOR(S): Trabulsy

TIED BILLS: IDEN./SIM. BILLS: SB 890

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
1) Professions & Public Health Subcommittee	17 Y, 0 N	Guzzo	McElroy
2) Health & Human Services Committee	20 Y, 0 N	Guzzo	Calamas

SUMMARY ANALYSIS

A heart attack occurs when the flow of oxygen-rich blood to a section of heart muscle suddenly becomes blocked. If blood flow is not restored quickly, the section of heart muscle begins to die. Heart attack treatment is most effective if provided when symptoms first occur. Emergency assistance to a person having a heart attack is usually provided by emergency medical technicians (EMTs), paramedics, or a bystander who attempts to administer cardiopulmonary resuscitation (CPR).

The Department of Health (DOH) is responsible for certifying 911 public safety telecommunicators (911 PSTs). To become certified as a 911 PST an applicant is required to receive 232 hours of training, which must include successful completion of a CPR certification class. A 911 PST must renew their certification every two years and must receive 20 hours of continuing education prior to renewal. Current law does not require the 20-hours of continuing education to include CPR training. Current law also does not require 911 PSTs to complete biennial telecommunicator CPR training.

The bill requires a 911 PST to complete biennial telecommunicator CPR training in order to have their certification renewed.

The bill also authorizes certain public safety agencies to enter into a reciprocal agreement with another public safety agency to provide telephonic assistance in administering CPR, including a fire department, law enforcement department, or other emergency medical service that receives or dispatches calls for emergency medical conditions.

The bill has no fiscal impact on state or local government.

The bill provides an effective date of July 1, 2022.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

911 Public Safety Telecommunicators

The Department of Health (DOH) is responsible for certifying 911 public safety telecommunicators¹ (PSTs).² Certification as a 911 PST is required for any person employed as a 911 PST at a public safety answering point—the public safety agency that receives incoming 911 requests for assistance and dispatches appropriate public safety agencies to respond to the requests.³ A public safety agency⁴ may employ a 911 PST for up to 12 months if the trainee works under the direct supervision of a certified 911 public safety telecommunicator and is enrolled in a 911 PST training program.⁵

DOH is responsible for approving 911 PST training programs, which must be equivalent to the public safety telecommunication program curriculum framework developed by the Department of Education (DOE) and consist of at least 232 hours.⁶ A 911 PST must renew their certification every two years and must receive 20 hours of continuing education prior to renewal, which does not currently include CPR training.⁷

Heart Attacks and 911 Telecommunicators

A heart attack occurs when the flow of oxygen-rich blood to a section of heart muscle suddenly becomes blocked.⁸ If blood flow is not restored quickly, the section of heart muscle begins to die. Heart attacks most often occur as a result of ischemic heart disease – also known as coronary heart disease or coronary artery disease, which is caused by plaque build-up inside the coronary arteries. Eventually, an area of plaque can rupture inside of an artery causing a blood clot to form on the plaque's surface. If the blood clot becomes large enough, it can mostly or completely block blood flow through a coronary artery. If the blockage isn't treated quickly, the portion of heart muscle fed by the artery begins to die. Heart attack treatment is most effective if provided when symptoms first occur.⁹

Out-of-hospital cardiac arrest describes the sudden, unexpected loss of heart function, breathing, and consciousness.¹⁰ Every year an estimated 350,000 people have cardiac arrest in the United States in an out-of-hospital environment and only one out of 10 victims survive.¹¹

911 PSTs, along with the 911-caller, are often the first responders and it is the 911 PST's job to transform the caller into a lay rescuer by instructing them how to perform cardiopulmonary resuscitation

¹ A 911 PST is a public safety dispatcher or 911 operator whose duties and responsibilities include the answering, receiving, transferring, and dispatching functions related to 911 calls; dispatching law enforcement officers, fire rescue services, emergency medical services, and other public safety services to the scene of an emergency; providing real-time information from federal, state, and local crime databases; or supervising or serving as the command officer to a person or persons having such duties and responsibilities.

² Section 401.465(2), F.S.

³ Section 401.465(2)(a), F.S.

⁴ Public safety agency means a functional division of a public agency which provides firefighting, law enforcement, medical, or other emergency services.

⁵ Section 401.465(2)(b), F.S.

⁶ Section 401.465(1)(c), F.S.

⁷ Rule 64J-3.003, F.A.C.

⁸ U.S. Department of Health & Human Services, National Heart, Lung, and Blood Institute, *Heart Attack*, available at <https://www.nhlbi.nih.gov/health-topics/heart-attack> (last visited Jan 26, 2022).

⁹ Id.

¹⁰ Michael Christopher, *Telecommunicator Cardiopulmonary Resuscitation – A Policy Statement from the American Heart Association*, AHA Journals, Mar. 24, 2020, available at <https://www.ahajournals.org/doi/10.1161/CIR.0000000000000744> (last visited Jan. 26, 2022).

¹¹ Id.

(CPR).¹² This is known as telephone CPR.¹³ Studies have shown the efficacy of telephone CPR in increasing the survival rate of sudden cardiac arrest.¹⁴

Currently, the PST certification curriculum framework developed by DOE requires students to successfully complete a CPR certification class.¹⁵ However, the 20 hours of continuing education for biennial renewal does not currently include CPR training. Current law also does not require 911 PSTs to complete biennial telecommunicator CPR training.

Effect of the Bill

The bill requires a 911 PST to complete biennial telecommunicator CPR training in order to have their certification renewed.

The bill also authorizes certain public safety agencies to enter into a reciprocal agreement with another public safety agency to provide telephonic assistance in administering CPR, including a fire department, law enforcement department, or other emergency medical service that receives or dispatches calls for emergency medical conditions.

The bill provides an effective date of July 1, 2022.

B. SECTION DIRECTORY:

Section 1: Amends s. 401.465, F.S., relating to 911 public safety telecommunicator certification.

Section 2: Provides an effective date of July 1, 2022.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.

¹² Rea TD, Eisenberg MS, Culley LL, Becker L. *Dispatcher-assisted cardiopulmonary resuscitation and survival in cardiac arrest*. *Circulation*. 2001 Nov 20;104(21):2513-6. doi: 10.1161/hc4601.099468. PMID: 11714643.

¹³ Id.

¹⁴ Id., see also Eisenberg MS, Hallstrom AP, Carter WB, Cummins RO, Bergner L, Pierce J. *Emergency CPR instruction via telephone*. *Am J Public Health*. 1985 Jan;75(1):47-50. doi: 10.2105/ajph.75.1.47. PMID: 3966598; PMCID: PMC1646147.

¹⁵ Florida Department of Education Curriculum Framework, p. 13 (Jun. 8, 2010), incorporated by reference in rule 64J-3.002, F.A.C., available at <https://www.flrules.org/Gateway/reference.asp?No=Ref-01490> (last visited Jan. 26, 2022).

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable. This bill does not appear to require counties or municipalities to spend funds or take action requiring the expenditures of funds; reduce the authority that counties or municipalities have to raise revenues in the aggregate; or reduce the percentage of state tax shared with counties or municipalities.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

DOH has sufficient rule-making authority to implement the provisions of the bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES