

To: Public Health Committee
From: Michael Giannelli, Concerned Citizen
Re: House Bill 5812, An Act Concerning the Availability of Automatic External Defibrillators for Public Use
Date: March 10, 2008

Good morning, Senator Handley, Representative Sayers and members of the Public Health Committee. On behalf my family and all the families of our extended communities of Norwich CT, I would like to thank you for addressing the issue of Automated External Defibrillators. While we all appreciate the Committee for raising the bill, I would be remise not to raise our concerns with regard to access to AEDs in youth sports.

As friends of Larry and Evelyn Pontbriant and parents of four, I ^{feel} felt the need to review the reason why I am here today. A straight A student, 3 sport athlete, with a varsity letter in lacrosse his freshman year, young Larry could be with us today if an Automatic External Defibrillator (AED) had been available. He was my oldest son's best friend, a friend of the entire family and a role model for all four of my children. As a result of our friendship with Larry and his parents, I now have 3 children playing lacrosse and am currently the vice-president of the Norwich Youth Lacrosse Association, which Mr. Pontbriant was a founding board member. I cannot even begin to imagine the pain Larry's parents feel and I hope I never have to. AEDs are proven technology that have saved many lives and need to be more prevalent throughout all communities in our state and country. This bill is one step in the right direction to getting more access to these life saving devices.

As a testament to the reliability of this technology, in 2002 the state of New York passed "Louis' Law" after a young athlete, Louis Acompora, ^{who} passed away from sudden cardiac arrest while playing lacrosse and the result of this state law was to place AEDs in New York schools. As a direct result of the passage of this law, 40 lives have already been saved by AEDs throughout New York as of February 28th of this year.

Changes to the current statute requiring the availability of one or more AEDs at mass gatherings is a wise decision and a step in the right direction. The mass gathering statute currently defines a gathering of 3,000 or more people. Having automated external defibrillators at mass gatherings such as road races, carnivals and sporting events will ensure that in the event of sudden cardiac arrest that an individual will receive prompt, possibly lifesaving medical treatment. However, there are many "gatherings" that have less than 3,000 people occurring on a daily basis.

Our concerns with HB 5812 rest with sections 2 and 3. Section 2 would require any person or entity to maintain in a public and on private property one or more AEDs,

displaying AED signage, adhere to maintenance guidelines in accordance with the manufacture's recommendations and to notify EMS after each application or use of the AED. A goal of organizations such as the American Heart Association and our Norwich Youth Lacrosse Association and other youth sports organizations is public access to AEDs but public access can not happen until those who own and operate the device are covered under the Connecticut Samaritan statute. The Pontbriants, my family and others along with the Connecticut office of the American Heart Association has advocated for Good Samaritan protections for those who own and operate an AED. We have been unsuccessful to date though inroads have been made by passing legislation creating two separate AED Task Forces and requiring AEDs on public golf courses. It is of our opinion that removing liability barriers for public access to defibrillation for both the user and entity is a crucial component to expanding and mandating placement of AEDs. Currently state statute only covers the user. We would ask the committee to consider first amending the current Good Samaritan statute to include Good Samaritan Immunity protection for the entity housing the device.

I conclude my testimony by commenting on section 3. Section 3 appropriates \$250,000 to the Department of Public Health to assist municipalities with the purchase of AEDs. As written, HB 5812 only allows towns and cities designated as Heartsafe Communities to apply for grant funds. I would urge members of the committee to consider expanding the grant program to all Connecticut towns and cities. Though the nineteen (19) designated Heartsafe Communities in our state have demonstrated a solid commitment to public access to defibrillation, opening up the grant program to all municipalities allows all towns and cities the opportunity to purchase AEDs. Municipalities that may otherwise be unable to purchase the device due to lack of funding not interest could also benefit from the grant program.

House Bill 5812 encompasses many goals of us concerned citizens but still leaves a fundamental issue unresolved. First and foremost, Connecticut businesses, and organizations and individuals who are involved in the placement and usage of an AED must be provided with Good Samaritan immunity protection in order to properly expand public access to AEDS. We urge you to amend this legislation and provide the necessary protection.

I thank the Committee for allowing me the opportunity to speak on behalf of House Bill 5812. Thank you.