



February 27, 2009

Good morning. I would like to thank Senator Harris, Representative Ritter, and the members of the Public Health Committee for this opportunity to speak to you regarding SB 981. My name is Vicky Graham. I am a resident of Middletown, and I work at Wesleyan University. I am the President-Elect of the Connecticut Athletic Trainers' Association (CATA). The CATA represents over 550 Licensed Athletic Trainers in Connecticut, as well as Athletic Training students who attend one of the five Athletic Training Education Programs in the state. On behalf of the CATA, I would like to thank you for your attention to the issue of Automated External Defibrillators (AED's) in schools in Connecticut. The CATA is in full support of SB 981, "An Act Concerning the Availability of Automatic External defibrillators in Schools."

Because of the role of Athletic Trainers in providing medical care for athletes and other patients, the CATA is acutely aware of the incidence of sudden cardiac arrest in physically active, apparently healthy population. It is important to understand that sudden cardiac arrest can strike anyone, at any time. Sudden cardiac arrest is not the same thing as a heart attack. It results from an electrical disturbance in the heart that causes the heart to go into an abnormal rhythm (ventricular fibrillation) and cease to function. This can occur to infants, young children, teenagers, college students, and adults of all ages and physical conditions. The grim statistics include the fact that approximately only 5% of victims of sudden cardiac arrest survive. This is due in no small part to the fact that most people do not receive defibrillation within 3 to 5 minutes.

I would like to point out that from the time I began speaking, until the time the bell rings is 3 minutes. That's all the time you have from the time of collapse, until the time the first shock is administered. Time is critical!

Brain damage and death can occur within 4 to 6 minutes, and for every minute defibrillation is delayed, the survival rate drops by 7-10%. Without early defibrillation, the survival rate will not improve. It is unrealistic to expect that an ambulance or other emergency crew will be able to provide defibrillation in less than 5 minutes, so the necessity for automated external defibrillators (AED's) on the premises of schools is clear.

Legislation requiring schools to have AED's has been implemented in a dozen states, and others are presently considering similar bills. New York implemented legislation in 2002 that requires schools to have AED's, and dozens of lives have been saved. Ohio implemented legislation in 2005, and at least 16 children have been saved because they received early defibrillation. The CATA remains steadfast in its support of requiring AED's in elementary, middle and secondary schools in Connecticut. While sudden cardiac arrest is the leading cause of death in athletes, we are equally concerned about school staff and employees, and students who may be stricken while in class, at recess or in physical education class. Schools also function as community centers. We vote at them, outside groups meet at them, and friends, parents, and grandparents all attend functions at school.

I would like to point out that SB 981 is NOT a mandate, nor does it require state funding. The bill reflects the economic situation in our state and country at the present time. SB 981 would require schools to have AEDs only if federal, state, local, or private funding is available. By passing SB 981, the Legislature will send a strong signal that an AED is considered an essential safety device in schools in Connecticut.

While the bill does not pass a financial burden on to schools and municipalities, it should make clear that funding sources should be sought and identified. We also hope that schools will be required to accept donated AEDs or funds earmarked for AEDs, as they are in Colorado.

An AED costs approximately \$1000-\$1200. There is grant funding available from many sources. Discount programs exist. Civic organizations like Rotary clubs, Elks, and Jaycees are possible local sources of funding. Pooled purchasing helps reduce costs. Funds can be raised by booster clubs, by donations, and all other manner of fundraisers. The state of Florida encourages private/public partnerships for AED purchases. In addition, Representative Betty Sutton of Ohio will be introducing the Josh Miller H.E.A.R.T.S. Act in Congress in the near future. This bill would provide funds specifically for AEDs in schools across the country. There are many avenues that schools can explore to fund AED purchases. For those who still question the expenditure, it should be noted that it costs more than \$1000 to outfit one football player or one ice hockey player. It costs \$1000 for 30 basketballs, volleyballs, or soccer balls. It costs \$600-\$1000 for most band instruments. How much is one child's life worth?

I have a few brief comments regarding the bill language:

1. We suggest that language be included that requires the device to be "regularly inspected and properly maintained, according to manufacturer specifications."
2. Are schools required to accept donated AEDs and funds specified for AEDs? Schools have turned down donations in the past; does the bill compel them to accept?
3. There is an issue of schools acquiring AEDs, and then locking them in the nurse's office. Perhaps the language should be changed to reflect the intent that the devices be "immediately accessible" at all times.

If an AED is locked in the nurse's office, the emergency plan might work during the school day; however, it doesn't work after school hours, when students stay for tutoring, band practice, schools club activities, or sports practices. As an example, a colleague of mine helps coach his son's basketball team, which practices after school at their elementary school. The AED is locked in the nurse's office, and the emergency plan is to find the custodian to have him open the nurse's office. How long does it take to find the custodian?

I would like to thank the Public Health Committee for raising SB 981, "An Act Concerning the Availability of Automated External Defibrillators in Schools." I hope you will each fully support this bill. Thank you.