



ARIZONA STATE SENATE
Fifty-Fifth Legislature, First Regular Session

AMENDED
FACT SHEET FOR S.B. 1373

health facilities; duty of care

Purpose

Establishes an affirmative duty of care for specified health care institutions and their employees, agents and assigns.

Background

A *health care institution* is any place, institution, building or agency that provides facilities with medical services, nursing services, behavioral health services, health screening services, other health-related services, supervisory care services, personal care services or directed care services and includes home health agencies, outdoor behavioral health care programs and hospice service agencies. *Health care institution* does not include a community residential setting. A *residential care institution* is a health care institution other than a hospital or a nursing care institution that provides resident beds or residential units, supervisory care services, personal care services, behavioral health services, directed care services or health-related services for individuals who do not need continuous nursing services ([A.R.S. § 36-401](#)).

A health care directive is a document, such as a living will or mental health care power of attorney, that is drafted to deal with a person's future healthcare decisions. Statute allows an individual to execute a prehospital medical care directive that, in the event of cardiac or respiratory arrest, directs emergency medical system personnel, hospital emergency department personnel and direct care staff to withhold cardiopulmonary resuscitation (CPR). CPR includes: 1) cardiac compression; 2) endotracheal intubation; 3) artificial ventilation; 4) defibrillation; 5) administration of advanced cardiac life support drugs; and 6) any other advanced airway management ([A.R.S. §§ 36-3201](#) and [36-3251](#)).

There is no anticipated fiscal impact to the state General Fund associated with this legislation.

Provisions

1. Establishes that each licensed health care institution that provides residential care, and the institution's employees, agents and assigns, have an affirmative duty of care for their residents.
2. Requires health care institutions to provide both of the following before the arrival of emergency medical services and in accordance with residents' advance directives and do-not-resuscitate orders:
 - a) immediate CPR to residents who experience symptoms of cardiac arrest or cessation of respiration; and
 - b) first aid to residents who experience emergency illness, injury or who have fallen and cannot recover independently.

3. Requires each licensed health care institution that provides residential care to have staff that is certified in first aid and CPR available at all times.
4. Precludes a health care institution that provides residential care from having, establishing or implementing policies that prevent employees from providing immediate CPR, first aid or other emergency care to residents.
5. Grants immunity to specified health care institutions and associated staff who render CPR or first aid from civil liability for any acts or omissions resulting from rendering CPR or first aid as prescribed.
6. Specifies that the liability exclusion does not apply to a person who acts with gross negligence.
7. Becomes effective on the general effective date.

Amendments Adopted by Committee

- Removes references to congregant care.

Amendments Adopted by Committee of the Whole

1. Eliminates references to basic life support.
2. Grants health care institutions and associated staff liability from civil immunity if CPR is rendered in good-faith and as prescribed.
3. Specifies that the liability exclusion is not applicable to a person who acts with gross negligence.
4. Makes conforming changes.

Senate Action

HHS 2/10/21 DPA 7-1-0

Prepared by Senate Research

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