

**SENATE . . . . . No. 254**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

**Mark C. Montigny**

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*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act relative to medical emergency response plans for schools.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Mark C. Montigny	Second Bristol and Plymouth
Benjamin B. Downing	Berkshire, Hampshire and Franklin
James E. Timilty	Bristol and Norfolk
Steven A. Tolman	Second Suffolk and Middlesex
Bruce E. Tarr	First Essex and Middlesex
Robert F. Fennell	10th Essex
Michael J. Rodrigues	8th Bristol

# The Commonwealth of Massachusetts

In the Year Two Thousand and Nine

## AN ACT RELATIVE TO MEDICAL EMERGENCY RESPONSE PLANS FOR SCHOOLS.

*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. Notwithstanding any general or special law to the contrary, the department  
2 of elementary and secondary education shall, in consultation with the department of public  
3 health, develop a Medical Emergency Response Plan initiative in order to promote best practices  
4 and encourage schools to develop programs that reduce the incidence of life-threatening  
5 emergency and promote efficient responses to such emergencies. There is hereby established a  
6 need for medical emergency response plan initiative for all public schools in the Commonwealth.  
7 School nurses, athletic trainers, and teachers are often required to provide emergency care during  
8 the school day and for extracurricular activities, including sports. School medical emergencies  
9 can involve students or adults. All schools have adult faculty and staff, and most schools host  
10 large numbers of adults during extracurricular activities including but not limited to sports  
11 events, drama productions, and community meetings.

12           Each year, more than one third of schools may have an emergency that involves an adult  
13 and requires activation of the EMS system. In children and young adults, injuries cause more  
14 childhood deaths than all other diseases combined. Because injuries are the most common life-

15 threatening emergencies encountered in children and adolescents in or out of schools, teachers,  
16 school nurses and physicians, and athletic trainers should know the general principles of first aid  
17 including, but not limited to, how to ensure scene safety and assess responsiveness, how to use  
18 personal protective equipment when in contact with blood or other body fluids, when and how to  
19 phone the EMS system, and when it is acceptable to move a victim. In addition, first aid rescuers  
20 must be able to control bleeding, recognize and treat shock, immobilize the spine, warm  
21 hypothermia victims, cool heatstroke victims, detect and treat hypoglycemia, support the airway,  
22 and provide CPR and use an AED when needed. School nurses, teachers, athletic trainers,  
23 coaches, and staff are responsible for the physical well-being of a large portion of the nation's  
24 children for many hours each day.

25 Schools now employ fewer nurses, and school nurses often rotate between schools, so  
26 some schools are without professional medical coverage for hours or days every week. Much of  
27 the responsibility for the physical care of students during a typical school day now rests with  
28 teachers, athletic trainers, coaches, and staff.

29 SECTION 2: The goal of the Medical Emergency Response Plan for Schools initiative is  
30 to encourage every school to develop a program that reduces the incidence of life-threatening  
31 emergencies and maximizes the chances of intact survival from an emergency. Such a program  
32 will have the potential to save the greatest number of lives with the most efficient use of school  
33 equipment and personnel. The initiative shall include, but not be limited to, the following core  
34 elements:

35 1. *Effective and efficient communication throughout the school campus:* Establish a rapid  
36 communication system linking all parts of the school campus, including outdoor facilities and

37 practice fields, to the EMS system. Establish protocols to clarify when the EMS system and other  
38 emergency contact people should be called. Determine the time required for EMS response to  
39 any location on campus and establish a method to efficiently direct EMS personnel to any  
40 location on campus. Create a list of important contact people and phone numbers with a protocol  
41 to indicate when each person should be called. Include names of experts to help with post-event  
42 support.

43         2. *Coordinated and practiced response plan:* Develop a response plan for all medical  
44 emergencies in consultation with the school nurse, the school or school athletic team physicians,  
45 athletic trainers, and the local EMS agency, as appropriate. EMS and emergency dispatchers (9-  
46 1-1 centers) should be made aware of the type of rescue equipment available at the school and its  
47 location. Practice the response sequence at the beginning of each school year and periodically  
48 throughout the year, and evaluate and modify it as needed.

49         3. *Risk reduction:* Prevent injuries through safety precautions in classrooms and on the  
50 playground. Identify students, faculty, and staff with medical conditions that place them at risk  
51 for development of life-threatening conditions, and train and equip personnel to provide the  
52 appropriate response for those conditions.

53         4. *Training and equipment for first aid and CPR:* Ensure that many teachers are trained  
54 as CPR and first aid instructors. Train school staff and graduating high school students in CPR.  
55 Teachers and staff trained in first aid should, at a minimum, be equipped and able to give first aid  
56 for life-threatening emergencies until EMS rescuers arrive.

57         5. *Implementation of a lay rescuer AED program in schools with an established need:*  
58 Incentives for the purchase of automatic external defibrillators by school district and standards

59 for the implementation of a school-based automatic external defibrillator program that utilizes  
60 trained school staff and volunteers and that is coordinated, to the maximum extent possible, with  
61 existing public access defibrillation programs established pursuant to section 12V1/2 of chapter  
62 112 of the General Laws.

63 A medical emergency response plan must start with development of a good system of  
64 communication. It also requires development and coordination of a planned and practiced  
65 response, risk reduction, and training and equipment.

66 SECTION 3: Each school board shall ensure that every school that it supervises shall  
67 develop a written school crisis, emergency management, and medical emergency response plan,  
68 consistent with the definition provided in this section and submit the plans to the Department of  
69 Elementary and Secondary Education. The Department of Elementary and Secondary Education  
70 shall (i) provide technical assistance to the school divisions of the Commonwealth in the  
71 development of the school crisis, emergency management, and medical emergency response  
72 plans and (ii) refer to the scientific statements prepared by the American Heart Association, the  
73 American Academy of Pediatrics, and various other national emergency response organizations,  
74 that describe the components of a medical emergency response plan, the training of school  
75 personnel and students to respond to a life-threatening emergency, and the equipment required  
76 for this emergency response.

77 SECTION 4: On any given day, as much as 20% of the combined US adult and child  
78 population can be found in schools. Life-threatening emergencies in schools are relatively  
79 uncommon, but when they do occur, they require a planned, practiced, and efficient response  
80 with provision of first aid and possible CPR and use of an AED. To maximize survival from a  
81 life-threatening emergency, schools must develop a medical emergency response plan designed

82 to provide appropriate therapy within the first minutes of the emergency. The medical emergency  
83 response plan includes (1) creation of an effective and efficient campus-wide communication  
84 system; (2) coordination, practice, and evaluation of a response plan with the school nurse and  
85 physician, athletic trainer, and local EMS agency; (3) risk reduction; (4) training in and  
86 equipment for CPR and first aid for the school nurse, athletic trainers, and teachers and CPR  
87 training for students; and (5) in schools with a documented need, establishment of an AED  
88 program.

89           The Department of Elementary and Secondary Education shall report to the General  
90 Court on the success of this initiative in establishing Medical Emergency Response Plans in local  
91 school districts 180 days after the implementation of this act.