**South Carolina General Assembly**

125th Session, 2023-2024

**H. 4866**

**STATUS INFORMATION**

General Bill

Sponsors: Reps. Lawson, Hayes, G.M. Smith, Moss, Hiott, Blackwell, B.L. Cox, Sessions, Caskey, M.M. Smith, Mitchell, Hart, Leber, Taylor, Robbins and Schuessler

Companion/Similar bill(s): 977

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Introduced in the House on January 17, 2024

Currently residing in the House

Summary: Smart Heart Act

**HISTORY OF LEGISLATIVE ACTIONS**

 Date Body Action Description with journal page number

 1/17/2024 House Introduced and read first time (House Journal‑page 14)

 1/17/2024 House Referred to Committee on **Education and Public Works** (House Journal‑page 14)

 1/18/2024 House Member(s) request name added as sponsor: Hiott,
 Blackwell

 1/24/2024 House Member(s) request name added as sponsor: B.L.
 Cox, Sessions

 1/30/2024 House Member(s) request name added as sponsor: Caskey,
 M.M. Smith

 1/31/2024 House Member(s) request name added as sponsor:
 Mitchell, Hart

 2/6/2024 House Member(s) request name added as sponsor: Leber

 2/15/2024 House Member(s) request name added as sponsor: Taylor

 2/27/2024 House Member(s) request name added as sponsor: Robbins

 2/29/2024 House Member(s) request name added as sponsor: Schuessler

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**VERSIONS OF THIS BILL**

[01/17/2024](https://www.scstatehouse.gov/sess125_2023-2024/prever/4866_20240117.docx)

A bill

TO AMEND THE SOUTH CAROLINA CODE OF LAWS by ENACTing THE “SMART HEART ACT” BY ADDING SECTION 59‑17‑165 SO AS TO PROVIDE DEFINITIONS, TO PROVIDE FOR THE DEVELOPMENT AND IMPLEMENTATION OF A CARDIAC EMERGENCY RESPONSE PLAN IN EACH PUBLIC SCHOOL; BY ADDING SECTION 59‑17‑170 SO AS TO PROVIDE FOR THE DEVELOPMENT AND IMPLEMENTATION OF AN ATHLETICS EMERGENCY ACTION PLAN IN EACH PUBLIC AND PRIVATE SCHOOL; AND BY AMENDING SECTION 59‑17‑155, RELATING TO THE AUTOMATED EXTERNAL DEFIBRILLATOR PROGRAM IN HIGH SCHOOLS, SO AS TO PROVIDE EACH PUBLIC SCHOOL SHALL ENSURE THE PRESENCE OF AN AUTOMATED EXTERNAL DEFIBRILLATOR ONSITE AND WITHIN CERTAIN PROXIMITY OF SCHOOL ATHLETIC VENUES, TO PROVIDE RELATED TESTING, MAINTENANCE, AND PERSONNEL TRAINING REQUIREMENTS.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. This act may be cited as the “Smart Heart Act”.

SECTION 2. Chapter 17, Title 59 of the S.C. Code is amended by adding:

 Section 59‑17‑165. (A) As used in this section:

 (1) “Cardiac Emergency Response Plan” or “CERP” means a written document that establishes the specific steps to reduce death from cardiac arrest in a school, community organization, workplace, sports facility, or any other setting.

 (2) “Automated External Defibrillator” or “AED” has the same meaning as found in Section 44‑76‑20.

 (3) “Sudden Cardiac Arrest” means the occurrence of when the heart malfunctions and stops beating unexpectedly. If not treated within minutes, it quickly leads to death.

 (4) “High‑needs school” means a school in which at least fifty percent of students are eligible for free and reduced priced meals or the school participates in the Community Eligibility Provision of the Healthy, Hunger‑Free Kids Act of 2010, Public Law 111‑296 for universal free meals.

 (B) Each public school shall develop a cardiac emergency response plan that addresses the appropriate use of school personnel to respond to incidents involving an individual experiencing sudden cardiac arrest or a similar life‑threatening emergency while on school grounds.

 (C) Each public school with an athletic department or organized athletic program shall develop a cardiac emergency response plan that addresses the appropriate use of school personnel to respond to incidents involving an individual experiencing sudden cardiac arrest or a similar life‑threatening emergency while attending or participating in an athletic practice or event while on school grounds.

 (D) School officials shall work directly with local emergency service providers to integrate the cardiac emergency response plan into the community’s emergency management system (EMS) protocols. A plan must integrate evidence‑based core elements, such as those recommended by the American Heart Association guidelines or other nationally recognized, evidence‑based standard or core elements.

 (E) The cardiac emergency response plan must integrate, at a minimum, the following guidelines:

 (1) establishment of a cardiac emergency response team;

 (2) activation of the team in response to a sudden cardiac arrest;

 (3) implementation of AED placement and routine maintenance within the school campus;

 (4) maintaining ongoing staff training in cardiopulmonary resuscitation and AED use;

 (5) periodic practice of emergency plan functions using drills;

 (6) integration of local EMS personnel and resources into the plan; and

 (7) ongoing and annual review and evaluation of the plan.

 (F) Appropriate AED placement must comply with the CERP.

 (G) Appropriate school staff must be trained in first aid, CPR, and AED. The training must follow evidence‑based guidelines recommended by the American Heart Association or guidelines or other nationally recognized, evidence‑based guidelines for such training. Designation of staff to be trained pursuant to this subsection must be determined by the CERP which must include, but may not be limited to, licensed athletics coaches, school nurses, and athletic trainers.

SECTION 3. Chapter 17, Title 59 of the S.C. Code is amended by adding:

 Section 59‑17‑170. (A) Notwithstanding another provision of law, rule, or regulation to the contrary, every public and private school from grades nine through twelve shall establish, review, and annually rehearse an athletics emergency action plan for responding to life‑threatening or other serious injuries for students participating in sports or other athletic activities. A plan must:

 (1) integrate nationally recognized, evidence‑based core elements or standards;

 (2) be developed in consultation with local emergency medical services personnel;

 (3) be memorialized as a written document specific to the activity site; and

 (4) be distributed to all athletics staff members, any other identified personnel, and healthcare professionals who provide medical services during games, practices, or other events.

 (B) The athletics emergency action plan must include, but need not be limited to, the following:

 (1) identification of the activity address or venue;

 (2) identification of personnel and their responsibilities in each school who will be responsible for carrying out the athletics emergency action plan, and the designated chain of command and related protocols;

 (3) identification of healthcare professionals who will provide medical care during games, practices, or other events;

 (4) identification of the equipment and supplies that may be needed to respond to an athletics emergency, including the location of each item;

 (5) a description of the proper procedures to be followed after a serious injury occurs including, but not limited to, responding to the injured individual, summoning emergency medical care, assisting emergency responders, and documenting the actions taken during the emergency; and

 (6) appropriate contact information for emergency medical services and directions to access the location or venue.

SECTION 4. Section 59‑17‑155 of the S.C. Code is amended to read:

 Section 59‑17‑155. (A) Subject to appropriations by the General Assembly, each school district shall develop and implement an automated external defibrillator program meeting the requirements of Chapter 76 of, Title 44 of the 1976 CodeSC Code for each high school in the district. The program must include provisions that:

 (1) require an operational automaticautomated external defibrillator on the grounds of the high school;

 (2) require all persons who are reasonably expected to use the device to obtain appropriate training, including completion of a course in cardiopulmonary resuscitation or a basic first aid course that includes cardiopulmonary resuscitation training and demonstrated proficiency in the use of an automated external defibrillator. The school district superintendent, or the superintendent's designee, shall determine who is reasonably expected to use the device;

 (3) establish guidelines for periodic inspections and maintenance of the defibrillators; and

 (4) define the purpose of the program and the manner in which the program will operate.

 (B) Subject to appropriations by the General Assembly and notwithstanding the provisions of any law, rule, or regulation to the contrary, each public school shall ensure that:

 (1) an automated external defibrillator, as defined in Section 44‑76‑20, is located onsite and made available in an unlocked location on school property and within an expected three‑minute walk of each school athletic venue. The automated external defibrillator must be accessible during the school day and any other time in which a school-sponsored athletic event or team practice in which students are participating; and

 (2) each defibrillator is tested and maintained according to the manufacturer's operational guidelines and notification is provided to the appropriate first aid, ambulance, rescue squad, or other appropriate emergency medical services provider regarding the type of defibrillator available and its location; and

 (3) all athletics coaches obtain and maintain training in cardiopulmonary resuscitation, first aid, and the use of the automated external defibrillator. Certification in cardiopulmonary resuscitation and automated external defibrillator use must be consistent with evidence‑based, emergency cardiovascular care guidelines.

 (B)(C)(1) Any person or entity acting in good faith and gratuitously shall be immune from civil liability for the use of an automated external defibrillator unless the person was grossly negligent in the use.

 (2) Any designated automated external defibrillator user meeting the requirements of Section 44‑76‑30(1) and acting according to the required training shall be immune from civil liability for the application of an automated external defibrillator unless the application was grossly negligent.

 (3) A person or entity acquiring an automated external defibrillator and meeting the requirements of Section 44‑76‑30 or an automated external defibrillator liaison meeting the requirements of Section 44‑76‑30 shall be immune from civil liability for the use of an automated external defibrillator by any person or entity described in items (1) or (2) of this subsection.

 (4) A prescribing physician shall be immune from civil liability for authorizing the purchase of an automated external defibrillator, unless the authorization was grossly negligent.

 (C)(D) Any person or entity, acting in good faith and gratuitously, that teaches or provides a training program for cardiopulmonary resuscitation that includes training in the use of automated external defibrillator is immune from civil liability for providing this training for use if the:

 (1) person or entity has provided the training in accordance with the guidelines and policies of a national training organization, as defined in Section 44‑76‑30(1);

 (2) person providing the training is authorized to deliver that course or curriculum; and

 (3) training delivery was not grossly negligent.

 (D)(E) The Department of Administration may establish a state contract for the purchase of automated external defibrillators.

SECTION 5. The State Department of Education shall adopt rules and promulgate regulations as necessary to implement the provisions of this act.

SECTION 6. The provisions of this act take effect July 1, 2024, and are applicable beginning with the 2025‑2026 School Year.

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