GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2015

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HOUSE BILL 502

Short Title:	Create Chain of Survival Task Force.	(Public)
Sponsors:	Representatives Carney, Stam, Adcock, and Hager (Primary Sponsors).	
	For a complete list of Sponsors, refer to the North Carolina General Assembly We	eb Site.
Referred to:	Rules, Calendar, and Operations of the House.	

April 2, 2015

A BILL TO BE ENTITLED

AN ACT CREATING A CHAIN OF SURVIVAL PUBLIC-PRIVATE TASK FORCE.

3 The General Assembly of North Carolina enacts:

SECTION 1. The General Assembly finds the following:

- 5 According to the American Heart Association, an individual goes into (1)cardiac arrest in the United States every two minutes. In North Carolina, 6 7 twenty-three percent (23%) of all deaths are attributed to heart disease, 8 11,765 of which are as a result of cardiac arrest. Ventricular Fibrillation (VF) is a common rhythm for which cardiopulmonary resuscitation (CPR) 9 and defibrillation are the only effective treatments. For victims with VF, 10 survival rates are highest when immediate bystander CPR is provided and 11 defibrillation occurs within three to five minutes of collapse. With every 12 13 minute that passes, a victim's survival rate is reduced by seven percent (7%) to ten percent (10%) if no intervention measures are taken. An estimated 14 ninety-five percent (95%) of cardiac arrest victims die before reaching the 15 hospital. If intervention measures are taken, survival rates are much higher; 16 when CPR and defibrillation are immediately performed, survival rates can 17 18 double.
- 19(2)Eighty percent (80%) of all cardiac arrests occur in private or residential20settings, and almost sixty percent (60%) are witnessed. Communities that21have established and implemented public access defibrillation programs22have achieved average survival rates for out-of-hospital cardiac arrest as23high as forty-one percent (41%) to seventy-four percent (74%).
- 24(3)Wider use of defibrillators could save as many as 40,000 lives nationally25each year. Successful public access defibrillation programs ensure that26cardiac arrest victims will have an immediate recognition of cardiac arrest27and activation of 911 followed by early CPR with an emphasis on28compressions, rapid Automatic External Defibrillator (AED) use, effective29advanced care, and coordinated care afterward.

30 SECTION 2.(a) There is created a Chain of Survival Public-Private Task Force
 31 (Task Force) with members appointed as follows:

- (1) Two Senators appointed by the President Pro Tempore of the Senate.
- 33 (2) Two members of the House of Representatives appointed by the Speaker of
 34 the House of Representatives.



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1	(3)	One representative of the Office of Emergency Medical Services designated		
2		by the Secretary of Health and Human Services.		
3	(4)	One representative of a local Emergency Medical Service designated by the		
4		Secretary of Health and Human Services.		
5	(5)	One representative of the Heart Disease and Stroke Prevention Branch		
6		designated by the Secretary of Health and Human Services.		
7	(6)	The Secretary of Administration or the Secretary's designee, ex officio.		
8	(7)	A representative of the American Heart Association.		
9	(8)	A representative of the American Red Cross.		
10	(9)	A representative of the North Carolina Hospital Association.		
11	(10)	A representative of the American College of Cardiology.		
12	(11)	A representative of the College of Emergency Physicians.		
13	(12)	A cardiac arrest survivor designated by the Secretary of Health and Human		
14		Services.		
15	SECTION 2.(b) The Task Force shall identify, pursue, and achieve funding for the			
16	placement of AEDs and training of State employees to recognize and initiate life-saving actions			
17	to those experiencing an acute event (sudden cardiac arrest, heart attack, and stroke) in			
18	buildings and facilities that house State agencies, services, and institutions.			
19	SECTION 2.(c) Members of the Task Force serve at the pleasure of the appointing			
20	authority.			
21	SECT	FION 2.(d) The Task Force shall expire on June 30, 2017.		
22	SECT	FION 3. This act is effective when it becomes law.		