# SENATE . . . . . . . . . . . . . . . No.

### The Commonwealth of Massachusetts

#### PRESENTED BY:

#### Michael O. Moore

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 adoption of the accompanying bill:

An Act relative to improving outcomes for sudden cardiac arrest.

#### PETITION OF:

NAME: Michael O. Moore DISTRICT/ADDRESS:

Second Worcester

## SENATE . . . . . . . . . . . . . . No.

#### [Pin Slip]

#### [SIMILAR MATTER FILED IN PREVIOUS SESSION SEE SENATE, NO. 1427 OF 2023-2024.]

#### The Commonwealth of Massachusetts

In the One Hundred and Ninety-Fourth General Court (2025-2026)

An Act relative to improving outcomes for sudden cardiac arrest.

*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. Subsection (b) of section 18B of chapter 6A, as appearing in the 2022

2 Official Edition, is hereby amended by striking out the figure "13" and inserting in place thereof

3 the following figure:- "15"; and,

4 Said subsection is hereby further amended by inserting after the words "Massachusetts

5 Ambulance Association, Inc.", in line 42, the following words:- ", 1 of whom shall be a

6 physician with a specialty in emergency medicine,"; and,

7 Said subsection is hereby further amended by striking out, in lines 42 through 44, the

8 words "and 1 of whom shall be a manager or supervisor of a PSAP and a nominated

9 representative of the Massachusetts Communication Supervisors Association, Inc." and inserting

10 in place thereof the following words:-

11	"1 of whom shall be a manager or supervisor of a PSAP serving a population of less than
12	50,000 people and a nominated representative of the Massachusetts Communication Supervisors
13	Association, Inc. and 1 of whom shall be a manager or supervisor of a PSAP serving a
14	population of more than 50,000 people and a nominated representative of the Massachusetts
15	Communication Supervisors Association, Inc"
16	SECTION 2. Subsection (g) of said section 18B of said chapter 6A, as so appearing, is
17	hereby amended by adding the following paragraphs:-
18	The State 911 Department is hereby directed, pursuant to the provisions of chapter 30A
19	of the General Laws, to adopt, amend, and enforce regulations to ensure ongoing Quality
20	assurance and Improvement (QA/QI) for all emergency calls in which a cardiac arrest is
21	confirmed by Emergency Medical Services (EMS) personnel and resuscitation is attempted. The
22	regulations shall include, but are not be limited to, the following requirements:
23	Audit of Dispatch Calls: Within 60 days following the date of receipt of all 911 or
24	emergency calls received at any PSAP in which resuscitation for cardiac arrest is indicated or
25	attempted or 60 days from the date on which an EMS agency notifies a PSAP of a qualifying
26	incident, whichever is shorter, the dispatch call shall undergo a review and assessment for
27	Quality Assurance and Improvement purposes. An analysis and explanation for reasons for the
28	non-recognition of cardiac arrest and any delays shall be documented as part of the assessment.
29	PSAPs shall submit all complete reviews to the State 911 Department within 10 days of
30	completing the Quality Assurance and Improvement review in a form and manner prescribed by
31	the State 911 Department. The State 911 Department shall develop an electronic portal system

to accept submissions of qualifying calls from PSAPs and provide status and feedback regardingthe Department's review.

34	Data Collection: The call taking and Quality Assurance and Improvement process must
35	collect key data, as defined by the department, including, but limited to, time intervals from call
36	receipt to "hands on chest", attempted 911 directed orassisted defibrillation, and EMS arrival.
37	Individual Review: Each cardiac arrest call shall undergo an individual Quality
38	Assurance and Improvement review by the PSAP Director or a designated Quality Assurance
39	and Improvement professional, and shall include appropriate feedback and recommendations .
40	Review by the State 911 Department: The State 911 Department shall conduct a review
41	of all reported cardiac arrest calls in accordance with AEMPDS certification standards.
42	The State 911 Department shall develop remediation and enforcement policies to address
43	PSAP non-compliance.
44	Annual Reporting: The State 911 Department shall compile, summarize and make
44 45	Annual Reporting: The State 911 Department shall compile, summarize and make publicly available on a Statewide and PSAP level, on their website Quality Assurance and
45	publicly available on a Statewide and PSAP level, on their website Quality Assurance and
45 46	publicly available on a Statewide and PSAP level, on their website Quality Assurance and Improvement reports annually. The reports shall highlight trends and areas for improvement.
45 46 47	publicly available on a Statewide and PSAP level, on their website Quality Assurance and Improvement reports annually. The reports shall highlight trends and areas for improvement. PSAPs shall be listed by name.
45 46 47 48	publicly available on a Statewide and PSAP level, on their website Quality Assurance and Improvement reports annually. The reports shall highlight trends and areas for improvement. PSAPs shall be listed by name. Training and Improvement: Quality Assurance and Improvement Reports shall be used to

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list of required trainings and implement appropriate mechanisms to ensure compliance withtraining requirements.

54 The Department of Public Health shall promulgate regulations to require that all EMS 55 agencies report all instances of cardiac arrest, including those where resuscitation is attempted, to 56 the State 911 Department. This reporting shall include relevant data as determined necessary for 57 Quality Assurance and Improvement and statistical analysis, including but not limited, to patient 58 condition upon first contact with EMS, number of defibrillation attempts, whether or not 59 bystander CPR was in progress, patient status upon arrival at the definitive care facility/ER if 60 transported or indication of pronouncement on scene, if applicable. All reports of incidents 61 reported by EMS agencies shall be forwarded to the PSAP of jurisdiction and, when available, be 62 published in the required portal system.

63 The State 911 Department, in collaboration with the Department of Public Health, shall
 64 ensure that data collection and reporting protocols respect the privacy and dignity of individuals
 65 and comply with applicable laws and regulations.

66 The State 911 Department shall develop an annual award for up to 3 individuals
67 employed by a PSAP for superior performance of duties that substantially contributed to the
68 survival of victims of out-of-hospital cardiac arrests in the Commonwealth. The State 911
69 Department shall further develop an annual award to be awarded to the PSAP on the basis of
70 high performance and contribution to the survival of victims of out-of-hospital cardiac arrests in
71 the Commonwealth.

SECTION 3. Section 12V <sup>1</sup>/<sub>2</sub> of chapter 112, as so appearing, is hereby amended by
adding the following in subsections:-

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74	(d) Notwithstanding any general or special law to the contrary, an AED registry shall be
75	established for the purpose of allowing local 911 telecommunicator to locate accessible AEDs.
76	Any AED used in a public access defibrillation program shall register the device through the
77	PSAP medical control director (MCD).
78	(e) Notwithstanding any general or special law to the contrary, signage located
79	throughout buildings shall clearly indicate AED locations.
80	SECTION 4. Notwithstanding any general or special law to the contrary, the department
81	of public health shall help communities determine standardized outcome measures for out-of-
82	hospital cardiac arrest allowing for quality improvement efforts and benchmarking capability to
83	improve care and increase survival by participating in the Centers for Disease Control and
84	Prevention (CDC) Cardiac Arrest Registry to Enhance Survival (CARES). This registry will
85	(a) Monitor performance in terms of both success and failure, identify problems, and
85 86	(a) Monitor performance in terms of both success and failure, identify problems, and track progress.
86	track progress.
86 87	track progress. (b) Enhance performance of EMS systems with emphasis on dispatcher-assisted CPR and
86 87 88	track progress. (b) Enhance performance of EMS systems with emphasis on dispatcher-assisted CPR and high-performance CPR.
86 87 88 89	track progress. (b) Enhance performance of EMS systems with emphasis on dispatcher-assisted CPR and high-performance CPR. (c) Develop strategies to improve systems of care within hospital settings and special
86 87 88 89 90	track progress. (b) Enhance performance of EMS systems with emphasis on dispatcher-assisted CPR and high-performance CPR. (c) Develop strategies to improve systems of care within hospital settings and special resuscitation circumstances.
<ul> <li>86</li> <li>87</li> <li>88</li> <li>89</li> <li>90</li> <li>91</li> </ul>	<ul> <li>track progress.</li> <li>(b) Enhance performance of EMS systems with emphasis on dispatcher-assisted CPR and high-performance CPR.</li> <li>(c) Develop strategies to improve systems of care within hospital settings and special resuscitation circumstances.</li> <li>(d) Expand basic, clinical, translational, and health services research in cardiac arrest</li> </ul>

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- 95 SECTION 5. The State 911 Department and the Department of Public Health shall report
- 96 to the Joint Committee on Public Health and Public Safety regarding the implementation of
- 97 regulations under this section and their impact on emergency response to cardiac arrest cases not
- 98 later than one year after the promulgation of said regulations.
- 99 SECTION 6: This act shall take effect 180 days after its passage.