

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

[LR512]

The Committee on Education met at 9:00 a.m. on Monday, April 7, 2014, in Room 1525 of the State Capitol, Lincoln, Nebraska, for the purpose of conducting a public hearing on LR512. Senators present: Kate Sullivan, Chairperson; Jim Scheer, Vice Chairperson; Bill Avery; Al Davis; Ken Haar; Rick Kolowski; and Les Seiler. Senators absent: Tanya Cook.

SENATOR SULLIVAN: Good morning, everyone. I'd like to call this hearing together. We are today having a public hearing on an interim...LR512 that encourages Nebraska high schools to offer hands-only CPR training. I'd like to first of all before we begin though, to introduce the members of the committee that are here. Just walking in is Senator Bill Avery from the Lincoln area. To my left is Senator Les Seiler from Hastings. And to my right is Senator Rick Kolowski from Omaha. Senator Scheer, the Vice Chair of the committee will be making the introduction on the interim study. And to my left is one of the legal counsels, LaMont Rainey. And on the right is another legal counsel, Tammy Barry. And the committee clerk is Mandy Mizerski. We have helping us this morning Jacob Fricke from Milwaukee, Wisconsin, who is a page for the Legislature. And if you are planning to testify at this hearing, I would ask that you pick up a green sheet and fill that out. I think...were they available at the back of the room? [LR512]

MANDY MIZERSKI: Yes, they are. [LR512]

SENATOR SULLIVAN: Okay. So if you would please fill those out before you come up to testify because we want to have an accurate record of this hearing. And fill out the green sheet in its entirety, and give it to the committee clerk when you come up to testify. And if you don't wish to testify but would like your presence to be known, you can indicate that as well. And also, you can submit your comments in writing. I don't think there's any need for us to use the light system this morning. So after the introductions, then the testifiers can come up. And when you do, we'd ask that you spell...state your name and spell it for the record. And I think that will be probably it. Ask that you turn off any cell phones, pagers, or anything that makes noise. So with that, Senator Scheer, would you like to introduce? [LR512]

SENATOR SCHEER: Thank you, Madam Chairman. My name is Jim Scheer, S-c-h-e-e-r. I represent Legislative District 19. I'm here to introduce LR512, and I would like to give a little bit of a historical background. This is actually a reminder to the State Board of Education. Senator Avery last year had introduced a bill to require school districts to provide CPR in their disciplines. And he and I had a conversation, and he agreed that perhaps it would be the best to have the Department of Education put it in rule rather than have a statute. But as of yet, that has not happened. And so I felt that perhaps this was a timely reminder to the State Board of Education that we are still expecting that. So this does deal with CPR and teaching our youth and the educational

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

system, the ability to provide that in an emergency basis to help save lives. It's pretty tough to be against. But as of yet, we have not got that formally provided for in the school system. So hopefully that will happen this summer. If not, we will probably be back and unfortunately do the same thing that Senator Avery did two years ago and that would be introduce a bill that would compel the department to do so. So that is it, if there's any questions from the committee, otherwise, that's the extent of it. [LR512]

SENATOR SULLIVAN: All right, thank you, Senator Scheer. Any questions for him? All right, thank you very much. We will now hear testimony, first of all, in support of this legislative resolution. [LR512]

MELINDA KENTFIELD: Good morning. [LR512]

SENATOR SULLIVAN: Good morning. Welcome. [LR512]

MELINDA KENTFIELD: (Exhibit 1) My name is Melinda Kentfield; and Kentfield is spelled K-e-n-t-f-i-e-l-d. And I passed out a copy of what I'll be going through this morning with you guys. Right next to me over here is my son Riley in the red shirt. We live on an acreage near Cortland. Riley is a junior at Norris. I'm a registered nurse at the hospital in Friend. I'm here to tell a story about my son Taylor and hope that it will make an impact on your discussions about requiring CPR education for Nebraska high school students. Taylor Kentfield was born October 12, 1991, here in Lincoln. When he was born, they identified immediately that he had a heart defect. They diagnosed him with Noonan Syndrome at six months of age. With Noonan Syndrome came the diagnosis of hypertrophic cardiomyopathy. Hypertrophic cardiomyopathy is an enlarged heart. We watched him develop, grow, and manage his heart disease. He was followed closely by a cardiologist, and we all felt like he was doing very well. He was living, working, and attending college in Brookings, South Dakota. On September 10, 2013, while jogging with his friends in Brookings, his heart produced an arrhythmia that caused him to collapse. One of his friends Rob stayed with him and his other friend Mike ran to call 911. With his enlarged heart, we knew that there was a very, very small risk that he could have a lethal arrhythmia and that could ultimately result in a sudden cardiac death. The paramedics, police officer, physician, and hospital staff all attempted to save him, but he did die that night. He was 21 years old. I will come back to that night in a bit for a very important message of how you can make a difference. But first, I want to tell you a little more about my son and his life with heart disease. I walked the path of life and health with him. I watched him struggle with being different, not being able to play sports, being concerned about how he felt and if what he was feeling was something serious. When he was younger, Taylor would sometimes pull out and use the...we'd call it the heart card. He would say something like, I can't do that. I got a bad heart, as he smiled when he wanted to make an excuse for something. But sometimes I think that he wanted to make it known that he did live with a concern about his health and well-being. We all couldn't see it, but he knew it and felt it every day. I figured out through reflecting

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

on his life after his death that at some point in his young adult life, he decided to love who he was, live without fear while living with heart disease, and take each day and make a stamp on it by doing something to make a difference. He tried to make a difference in so many others' lives that sometimes I think he forgot to put himself first. He was trying to live healthy. He exercised. He set high goals. He worked hard. He studied hard. And he was very independent. But overall, he was trying to make others recognize their potential and live beyond that potential. He used to do it to me all the time. Every time I'd talk to him he was trying to encourage me to do more. The stories we heard about how he made so many people laugh and how he was such a caring person, it was amazing. I always thought it because I was his mom, but to hear it from so many other people is very special. My message to you today is, we have all learned from Taylor that life is special. Value it, and make a difference in others' lives as often as you can. I'm so proud of him. I know his friends and family more than ever now are so proud of him. He touched so many people's hearts so very quickly. It's like he was trying to touch as many as he could as fast as he could. Now, I'm going to take you back to the events of September 10. That was just seven months ago for us. When Taylor collapsed, it all happened so very quickly as you can imagine. It has caused his friend Rob, who was with Taylor that night, to wish that he could have been able to do more. He did not know CPR. Although Taylor's condition...it was really important that he got a defibrillator on him, that was very essential. But it was also essential for him to receive CPR. So as you evaluate the American Heart Association's initiatives to have all Nebraska high school students to receive education on CPR as a requirement to graduate from high school, I want you to know it will make a difference. You never know when you will have the opportunity to save a life and to utilize the skills you have learned through a CPR class. And to have it to be something that every high school kid has learned I just think would be such a huge impact. Shortly after Taylor's death, Rob took a CPR class. He e-mailed me after taking the class and talked about how very difficult that was for him to complete after losing Taylor. I'm heartbroken for my son, my family's loss, and also for Rob and his struggles with that experience. I hope that sharing Taylor's story will prevent another family and another young man's friend for having experienced such a tragedy and loss. I also hope that through sharing Taylor's story with you here today, that I have personally made a difference. Thank you. [LR512]

SENATOR SULLIVAN: Thank you, Mrs. Kentfield. I can't imagine how difficult this was for you and really, really, really do appreciate you coming here today. As...if we can step away from your personal situation, but your profession as a nurse, do you think that the general public knows very...do you see that their knowledge of CPR is high or low? [LR512]

MELINDA KENTFIELD: I do think that there's huge opportunity to increase the...just a general awareness as to what that skill is. And the more people that learn it I think will make an impact. In the medical community, to us it's interesting that there's so many places that have AEDs located in them. But there's so few people that know how to do

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

the two part to it: the AED and the CPR. It takes both pieces to save a life. And it's just an interesting thing to us as we see that as we all know how to do it. And I've administered CPR, and I've saved lives, and I've watched it right then and there that you do all the things right, and it saves. It works. It's essential that it's done very quickly. And to have even myself, that I take it every two years. And I also get advanced cardiac life support. When you're in that moment, I mean, you just pull from everything you know, and you do the best you can. Even if it's not the exact way it was taught that year because it changes every now and then, it's the essential pieces of recognizing and acting quickly. And I do...I personally and professionally think that there's such huge opportunity to spread that public knowledge of how to do that. And to be in situation, I mean, I'm not sure if it would have saved my son's life. I would hope that it would have, but his friend and the struggles that he has gone through with not being able to feel like could do anything is extremely sad also to me, is a huge sad thing that he went through that. And his mom wrote me a long letter afterwards about his struggles with that. So I hope that...you know, and I did speak to a group of kids where my son actually graduated from Glenwood, Iowa, where they did teach CPR as a mandated course. And I spoke--they had a red out in October--to them about taking the class very seriously because you have this opportunity to learn. And so, you know, as this does proceed, I hope I can continue to help people understand what they can do in saving lives. [LR512]

SENATOR SULLIVAN: And you mentioned CPR but then also the... [LR512]

MELINDA KENTFIELD: AED. [LR512]

SENATOR SULLIVAN: What's that? [LR512]

MELINDA KENTFIELD: The automatic external defibrillator. [LR512]

SENATOR SULLIVAN: Is that...? [LR512]

MELINDA KENTFIELD: So that's the...like you'll see the signs in public buildings with the little (inaudible) through it. And it'll say AED, and it'll be red. So those are...they're very simple to run, extremely easy to look at the directions and intuitive. But it takes both those things when somebody collapses to administer the breaths, chest compressions, and the defibrillation. [LR512]

SENATOR SULLIVAN: So in CPR training today, as you said, it's always changing. Is that part of the training is to learn about the...? [LR512]

MELINDA KENTFIELD: You know, I haven't seen what the American Heart Association has put together for the schools as kind of that toolkit. I would be...I would have to think for sure that they would combine those two pieces in recognizing that it's...that's what's really going to save lives is bringing those two together. And so, like I said I see the

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

AEDs out there everywhere. But it just...it's like it needs a public awareness of what goes with that. And the education on how to...I mean, I've had to use one personally. And I remember opening it and then standing there for a moment and looking at it. And it's extremely easy to run and intuitive. And so if we can just do some easy teaching to kids to go, you know, this is what it's about. Recognize the signs. My son's friend, when he talked to me about it, it's like he didn't even recognize that that was what was happening to him. He wasn't sure. And it was just the extremes of the moment I think. He just stayed with him, and he talked to me exactly about what he was doing. And I mean, I know because I've seen it. He had a lethal arrhythmia. And a lethal arrhythmia is it's one that starts likely from the base of the heart. And that's your main pumping chamber. So it directly shut down his circulatory system. So any other questions?
[LR512]

SENATOR SULLIVAN: Okay. Any other...Senator Kolowski. [LR512]

SENATOR KOLOWSKI: Thank you, Madam Chair. Thank you, ma'am, for your powerful story this morning and for sharing that with us. I know there are some school districts that require staff to all have the CPR training and defibrillator training as well. And I think one of the things you mentioned though is really important, that's the refresher classes, to take those on a... [LR512]

MELINDA KENTFIELD: Ongoing basis. [LR512]

SENATOR KOLOWSKI: ...on a cycle of every two years or kind of re-up yourself because you're not doing it or using every day, and just to make sure anything new that's been learned can be applied. And those are really good refreshers in the same way. So thank you for mentioned that. [LR512]

MELINDA KENTFIELD: Exactly, exactly. I think, yeah, it starts with some initial education and interest and recognizing, oh, I have that under my belt. The opportunities, that's whether in a community effort or whatever then you're...I want to, you know, continue my learning of that and just awareness. It just will make a huge difference. So it just begins that process and I'm sure my son's friend who is young, in his early twenties, never dreamed he would be in that situation in his life. So... [LR512]

SENATOR KOLOWSKI: Thank you. [LR512]

SENATOR SULLIVAN: Any other questions? Senator Seiler. [LR512]

SENATOR SEILER: I had the experience of taking the class from the Red Cross. Two weeks later I performed CPR on Tom Osborne's dad... [LR512]

MELINDA KENTFIELD: Oh my goodness. Wow. [LR512]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

SENATOR SEILER: ...and brought him back four times when he shut down. And it was an interesting concept. When you said it takes more than one, it was amazing. And at that time I was in pretty good shape. And I was amazed at how fast you tire out... [LR512]

MELINDA KENTFIELD: Exactly, yeah. [LR512]

SENATOR SEILER: ...doing the CPR. Yeah. Thank you for coming. [LR512]

MELINDA KENTFIELD: Definitely. Takes a team to do it. [LR512]

SENATOR SULLIVAN: Senator Avery. [LR512]

SENATOR AVERY: Thank you, Madam Chair. Is this the disease that young athletes have that drop dead on the basketball court in their twenties? [LR512]

MELINDA KENTFIELD: It's...his exact one is probably a little...there's a combination of ones that those individuals that collapse. But it's a common one of athletes that they do have hypertrophic cardiomyopathy and they do not know that. There's also so other arrhythmia disorders that lead to that. So it's not 100 percent, all those cases. But it is, it's...and/or other young people that you hear, they're out jogging and down they go. That's what happened to him. And his cardiologist has had a lot of struggles with him passing away also because he didn't fit the criteria to get an internal cardiac defibrillator. He wasn't that critical. He wasn't that bad. But now he knows. Yeah, that's...he did probably need one of those. But... [LR512]

SENATOR AVERY: Well, they usually don't diagnose this condition at six months. It's usually after they die or much, much later. [LR512]

MELINDA KENTFIELD: Right, exactly. Absolutely, and I had a mom reach out to me from South Dakota that her son...that's exactly what happened to him. They didn't know he had it, and he passed away. So she was real curious about understanding my history with my son. And yeah, we were fortunate that he was followed since he was that young. That was...his pediatrician here in Lincoln that helped to get him going the right direction with getting diagnosed and... [LR512]

SENATOR AVERY: Yeah. Thank you. [LR512]

SENATOR SEILER: Thank you. [LR512]

MELINDA KENTFIELD: Yep. [LR512]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

SENATOR SULLIVAN: Any other questions? Thank you so much for your testimony. [LR512]

MELINDA KENTFIELD: Thanks for your time. [LR512]

SENATOR SULLIVAN: You bet. Welcome. [LR512]

BRIAN KRANNAWITTER: (Exhibit 2) Thank you. Madam Chairperson, members of the Education Committee, good morning. My name is Brian Krannawitter; that is spelled K-r-a-n-n-a-w-i-t-t-e-r, and I am the government relations director for the American Heart Association. And I first want to thank Senator Scheer for introducing this resolution. Every year in the United States, EMS treats 383,000 out-of-hospital sudden cardiac arrests. That's more than 1,000 per day. A sudden cardiac arrest is not the same as a heart attack. A sudden cardiac arrest occurs when electrical impulses in the heart become rapid or chaotic which causes the heart to suddenly stop beating. A heart attack occurs when the blood supply to part of the muscle is blocked. However, a heart attack may cause a sudden cardiac arrest. Currently, less than 12 percent of victims survive sudden cardiac arrest. Effective bystander CPR provided immediately after sudden cardiac arrest can double or triple a victim's chance of survival. You may recall the testimony from last year from Kelsey Neal and her father. Kelsey was a teenager and she was saved by her father who learned CPR when he was in high school. A sudden cardiac arrest can happen to anyone at any time. Many victims appear healthy with no known heart disease or other risk factors. In terms of a global view, as of today it's my understanding that 12 states now require their students to learn CPR before graduating from high school. Last year around the time of the hearing on LB365 that Senator Avery introduced, there were six states that had this requirement. So you could see the trajectory as we move forward to the coming years. So it'd be more states, not less, will be making this a requirement. Thank you again, Senator Scheer, for introducing this important resolution. And I also want to thank Senator Avery for introducing LB365 last year and really getting this ball started. My hope is that next year at this time, Nebraska will be among the states that require CPR training as a high school graduation requirement. Just a couple of things, Senator Sullivan. I was trained through the Heartsaver Course. The AED is part of that. And a lot of the courses I know, at a minimum make you somewhat aware of an AED. And there's actually, I know at least one on the second floor. There's an Automated External Defibrillator. And I think it was six years ago a former state senator and former lobbyist, Tom Vickers was saved through the combination of the speedy thinking of Senator Mike Flood getting the AED, and the doctor of the day performing CPR. His life was saved. And I believe that was in February of 2008. And of course you heard the story of Kelsey Neal last year. And I hear these stories all the time. Ginny Curly from Omaha saved because her husband learned CPR as a young man. And I could go on and on. What we hope to do is those who are unfortunate enough to undergo sudden cardiac arrest to be more like the stories of Kelsey and Ginny and others where there is a bystander present who has been trained

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

in CPR. And hopefully save their lives. And I think that's all I have at this time. And I'd be happy to answer any questions you may have. [LR512]

SENATOR SULLIVAN: Thank you, Brian. In the schools that do require it, who typically--whether it's in Nebraska or other states--who typically does the training? Do you know? [LR512]

BRIAN KRANNAWITTER: The way I'd answer that, it's a variety of different ways in my understanding. In Elkhorn, I believe...when I was talking to the superintendent a year or two ago about this, it was the freshman PE teacher I think who did the training. I believe in...well, I'll give you an example of Washington State. It was the local fire department came in and formed the training for the students. And in fact, story that just came out a couple weeks ago in Spokane, a 15-year-old girl was trained and just a few days later saved her grandfather using CPR. So I guess my short answer, it depends on the school district and how they want to do it in terms of how it's implemented. [LR512]

SENATOR SULLIVAN: Sure, okay. Very good. [LR512]

SENATOR DAVIS: A couple questions, have you visited with the State Department of Education about this? [LR512]

BRIAN KRANNAWITTER: I have just last week. And I'm hoping at the June board meeting we will be able to have a chance to present at that board meeting which is good timing because June is CPR awareness week. So I'm hopeful in June we will be able to. [LR512]

SENATOR DAVIS: Any idea what--and it's been so many years since I took my training I really need to be recertified--the time frame and the cost? [LR512]

BRIAN KRANNAWITTER: Good question. From the Heart Association perspective, we see value in simply having the students trained. They don't necessarily have to be certified. What our science shows is if they actually just receive training, what I mean by that is more than just a video but actually practicing psychomotor skills, actually doing the hand compressions. For example, we have a program where you can do it in 30 minutes or less. It's that simple. And the one program that I know of, you can train up to 1,000 students before the program needs replaced at about 60 cents per student. So at least in that case, it's not that expensive. But it kind of varies on, you know, the resources available to districts and how they choose to implement it in terms of the cost. [LR512]

SENATOR DAVIS: But it's not prohibitive. I was just trying to sort of extrapolate with, you know, 60,000 students what it would really cost. [LR512]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

BRIAN KRANNAWITTER: Right, right. You extrapolate that out, you know, at \$600 for every 1,000 students, you know, it wouldn't seem to me to be that expensive. I guess the other thing I would say is with the number of states that are requiring this, if it was breaking the bank, you know they wouldn't be doing it. Iowa has had this requirement I believe in place for about four or five years now. And I think they were the first state to do it. Minnesota a couple years ago included it as a requirement. And we would hear pretty quick if this was really such a burden. We wouldn't see I don't think, at least in my opinion, the increase in number of states that are continuing to require this for their students. [LR512]

SENATOR DAVIS: And there are some districts in Nebraska that electively have decided to do this already. [LR512]

BRIAN KRANNAWITTER: I am working with a group. And that's what...we're trying to drill down on that in terms of how many school districts are actually training. And there's a survey we have out. We're trying to get a handle on who's actually doing them. And what I noticed so far is it just varies from school district to school district. We'll get a better idea when all the responses are back in in terms of how many actually, you know, require it as opposed to how many don't. I can say this though, just by word of mouth and talking to different folks, Meredith (sic--Melinda) mentioned AEDs in the public places. And a lot of our schools do have them. Just from a practical perspective is another reason why from my view to require the CPR training. If we're going to have AEDs in many of our public places and our schools, it just makes sense because when you combine the two, CPR and AED, your survival chances increase greatly. The majority of our people in our high schools are the students. And wouldn't that be a shame if an incident occurred where someone underwent a sudden cardiac arrest and none of the students, although there was AED in the school, but none of them knew how to do CPR. So it just makes practical sense that we have these out there. We should make the students aware of them but also have them learn CPR so they'll be...hopefully they'll be trained when the opportunity comes to save someone's life. [LR512]

SENATOR SULLIVAN: Senator Kolowski. [LR512]

SENATOR KOLOWSKI: Madam Chair, thank you. Sir, do you recommend the use of the dummies as well... [LR512]

BRIAN KRANNAWITTER: The hands... [LR512]

SENATOR KOLOWSKI: ...so additional purchases by school district compared to using someone in the class? [LR512]

BRIAN KRANNAWITTER: We've been recommending the hands-only CPR. And so

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

yeah, there will be practice on dummies. And you know, it depends on if the fire department, for example, did the training, if they brought their own dummies in or the school chose to purchase their own type of training program where they actually purchase the dummies. But yeah, the key is the psychomotor compressions, to do that. Watching a video, that's not enough. There does need to be some practice on it, and that's what we suggest...and not suggest, but that's what we promote. And to follow the nationally recognized guidelines and the use of psychomotor skills, the actual compressions. So yes, it's very, very important. [LR512]

SENATOR KOLOWSKI: In Millard, we've had service clubs do some purchasing for our pools and in the high schools where we teach water safety aid and lifesaving...lifeguard's fields, of course. We give certification in that route, but also human physiology uses them and some biology classes, wherever it might be taught. And athletic training classes also have that as part of their... [LR512]

BRIAN KRANNAWITTER: That's great. [LR512]

SENATOR KOLOWSKI: So it's in a variety ways, but it's again, something else placed in a curriculum. And preparing for that, having the materials on hand, dummies or whatever else... [LR512]

BRIAN KRANNAWITTER: Yeah. [LR512]

SENATOR KOLOWSKI: There's costs to some of these things. [LR512]

SENATOR SULLIVAN: Senator Seiler. [LR512]

SENATOR SEILER: First, I'd like to thank your organization for the certificate they sent me when I did it on Tom's dad. And the dummy is really important. I had the use of that dummy. And the instructor said, if you hear the ribs break, don't worry about it. Keep going. And the ribs broke on the first shot. So they said it's really important that you use that dummy and get the feel of that sensation. [LR512]

BRIAN KRANNAWITTER: Absolutely, yep. [LR512]

SENATOR SEILER: So thank you very much for the work you're doing. [LR512]

BRIAN KRANNAWITTER: You bet. Thank you. [LR512]

SENATOR SULLIVAN: Any other questions? Thank you, Brian, for your testimony. [LR512]

BRIAN KRANNAWITTER: Thank you. [LR512]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office

Education Committee
April 07, 2014

SENATOR SULLIVAN: Any further testimony? Senator Scheer, would you like to close?
Senator Scheer, waives closing and that concludes the hearing. Thank you very much
for your attendance. [LR512]