**South Carolina General Assembly**

125th Session, 2023-2024

**H. 4867**

**STATUS INFORMATION**

General Bill

Sponsors: Reps. Lawson, Hayes, G.M. Smith, Moss, Hiott, Blackwell, B.L. Cox, Caskey, M.M. Smith, Hart, Sandifer, J.E. Johnson, Brittain and Bauer

Companion/Similar bill(s): 976

Document Path: LC-0473CM24.docx

Introduced in the House on January 17, 2024

Introduced in the Senate on April 2, 2024

Last Amended on March 28, 2024

Currently residing in the House

Summary: Telecommunicator CPR Training Law

**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](h:\hj\20240117.docx))

1/17/2024 House Referred to Committee on **Medical, Military, Public and Municipal Affairs** ([House Journal‑page 14](h:\hj\20240117.docx))

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

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: Hart

2/13/2024 House Member(s) request name added as sponsor:
Sandifer, J.E. Johnson, Brittain

2/14/2024 House Member(s) request name added as sponsor: Bauer

3/27/2024 House Committee report: Favorable with amendment **Medical, Military, Public and Municipal Affairs** ([House Journal‑page 26](h:\hj\20240327.docx))

3/28/2024 House Amended ([House Journal‑page 63](h:\hj\20240328.docx))

3/28/2024 House Read second time ([House Journal‑page 63](h:\hj\20240328.docx))

3/28/2024 House Roll call Yeas-107 Nays-0 ([House Journal‑page 65](h:\hj\20240328.docx))

3/28/2024 House Unanimous consent for third reading on next legislative day ([House Journal‑page 66](h:\hj\20240328.docx))

3/29/2024 House Read third time and sent to Senate ([House Journal‑page 5](h:\hj\20240329.docx))

4/2/2024 Senate Introduced and read first time ([Senate Journal‑page 15](h:\sj\20240402.docx))

4/2/2024 Senate Referred to Committee on **Judiciary** ([Senate Journal‑page 15](h:\sj\20240402.docx))

4/2/2024 Scrivener's error corrected

4/19/2024 Scrivener's error corrected

4/23/2024 Senate Referred to Subcommittee: Hutto (ch), Adams,
Garrett, Gustafson, Tedder

5/1/2024 Senate Committee report: Favorable with amendment **Judiciary** ([Senate Journal‑page 15](h:\sj\20240501.docx))

View the latest  [legislative information](https://www.scstatehouse.gov/billsearch.php?billnumbers=4867&session=125&summary=B)  at the website

**VERSIONS OF THIS BILL**

[01/17/2024](https://www.scstatehouse.gov/sess125_2023-2024/prever/4867_20240117.docx)

[03/27/2024](https://www.scstatehouse.gov/sess125_2023-2024/prever/4867_20240327.docx)

[03/28/2024](https://www.scstatehouse.gov/sess125_2023-2024/prever/4867_20240328.docx)

[04/02/2024](https://www.scstatehouse.gov/sess125_2023-2024/prever/4867_20240402.docx)

[04/19/2024](https://www.scstatehouse.gov/sess125_2023-2024/prever/4867_20240419.docx)

[05/01/2024](https://www.scstatehouse.gov/sess125_2023-2024/prever/4867_20240501.docx)

Indicates Matter Stricken

Indicates New Matter

Committee Report

May 01, 2024

H. 4867

Introduced by Reps. Lawson, Hayes, G. M. Smith, Moss, Hiott, Blackwell, B. L. Cox, Caskey, M. M. Smith, Hart, Sandifer, J. E. Johnson, Brittain and Bauer

S. Printed 05/01/24--S.

Read the first time April 02, 2024

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The committee on Senate Judiciary

To whom was referred a Bill (H. 4867) to amend the South Carolina Code of Laws by adding Section 23-23-45 so as to require all 911 telecommunicators who provide dispatch for emergency medical conditions, etc., respectfully

Report:

That they have duly and carefully considered the same, and recommend that the same do pass with amendment:

Amend the bill, as and if amended, SECTION 1, by striking Section 23-23-45(D) and inserting:

(D) Neither telecommunicators that provide dispatch for emergency medical conditions who have completed the training specified in subsection (A) nor the State or the agency, political subdivision, or governmental entity employing such telecommunicators shall be liable for any civil damages for any personal injury arising from the provision of CPR instructions to 911 callers except acts or omissions amounting to gross negligence, recklessness, or willful, wanton, or intentional misconduct. Any civil cause of action for damages arising from the provision of T-CPR instructions and brought against the State, an agency, a political subdivision, or a governmental entity and its employee acting within the scope of his official duty must be brought pursuant to the South Carolina Tort Claims Act, Chapter 78, Title 15.

Renumber sections to conform.

Amend title to conform.

LUKE RANKIN for Committee.

statement of estimated fiscal impact

Explanation of Fiscal Impact

State Expenditure

This bill requires all 911 telecommunicators providing dispatch for emergency medical conditions to be trained in high-quality T-CPR annually beginning January 1, 2025. The training must include recognition protocols for out-of-hospital cardiac arrest, compression-only CPR instruction for callers, and continuous education on an annual basis. All agencies employing 911 telecommunicators will be responsible for providing this training. The bill further requires the SCCJA to establish a procedure for monitoring adherence by telecommunicators and their employing agencies and penalizing agencies for noncompliance. The bill specifies that neither the 911 telecommunicators who have completed the training, nor the State, state agency, political subdivision, or governmental entity employing the telecommunicators will be liable for any civil damages for any personal injury arising from the provision of CPR instructions to 911 callers unless the act or omission amounts to gross negligence or willful or wanton misconduct. Any civil action for damages brought relative the T-CPR instructions must be brought pursuant to the SC Tort Claims Act.

The SCCJA indicates that the agency may need to hire 1.0 FTE, an administrative position, to monitor adherence of telecommunicators and their employing agencies for the training requirements imposed by the bill. If needed, the FTE will increase General Fund expenses of the agency by approximately $57,700 for salary and fringe beginning in FY 2024-25.

At this time, SFAA anticipates that this bill may have an Other Funds expenditure impact for the Insurance Reserve Fund (IRF) due to the exception from the liability exemption for willful and wanton misconduct and the potential for a change in the number of actions brought against the State or one of its entities under the Tort Claims Act. If this bill results in an increase of expenses for the IRF, we anticipate the IRF will increase premiums to offset any potential increase in expenses due to this bill, resulting in an increase in General Fund or Other Funds expenses for state agencies to cover the potential increase in premiums. However, the impact will depend on the number of claims that arise but may be limited in frequency.

State Revenue

The bill specifies that neither the 911 telecommunicators who have completed the training, nor the State, state agency, political subdivision, or governmental entity employing the telecommunicators will be liable for any civil damages for any personal injury arising from the provision of CPR instructions to 911 callers unless the act or omission amounts to gross negligence or willful or wanton misconduct. Any civil action for damages brought relative the T-CPR instructions must be brought pursuant to the SC Tort Claims Act.

Based on the initial response from SFAA, this bill may result in an impact to the IRF. We anticipate the IRF will increase premiums to offset any potential increase in expenses due to this bill, resulting in an Other Funds revenue increase for the IRF that will depend upon the timing of any premium increase.

Additionally, Section 23-23-100 allows SCCJA to penalize agencies for noncompliance of the training requirements. The civil penalty may not exceed $1,000 per violation per day that an agency is not in compliance. While SCCJA indicates that it has never had to enforce this civil penalty, any revenue derived from such civil penalties would be allocated to Other Funds of SCCJA. Any future violations for noncompliance of the provisions of this bill are unknown. Therefore, the impact on Other Funds revenue of SCCJA will depend upon the number of violations.

Local Expenditure

This bill requires all 911 telecommunicators providing dispatch for emergency medical conditions to be trained in high-quality T-CPR annually beginning January 1, 2025. All agencies employing 911 telecommunicators will be responsible for providing this training. The bill specifies that neither the 911 telecommunicators who have completed the training, nor the State, state agency, political subdivision, or governmental entity employing the telecommunicators will be liable for any civil damages for any personal injury arising from the provision of CPR instructions to 911 callers unless the act or omission amounts to gross negligence or willful or wanton misconduct.

The overall expenditure impact of this bill on local governments may vary depending upon the training currently required for 911 telecommunicators in each locality. Seven responding counties all indicate that this bill will have no expenditure impact since they already provide the required training. However, it is unclear if the training is completed annually. Further, of the remaining thirty-nine counties, there may be some that currently do not provide this training or that would need to increase to annual training. Additionally, the MASC indicates that this bill may have an impact on the cities of Goose Creek, Hanahan, Sumpter, and Hilton Head Island. These are the only four municipalities whose PSAPs dispatch for emergency medical conditions. The other seventeen municipalities with PSAPs transfer medical calls to the county PSAPs. Currently, all four municipalities listed above provide training and certification methods required for 911 telecommunicators; all but one provide training annually. The remaining municipality will need to increase the frequency of training from bi-annually to annually. Additionally, the impact will depend upon whether SCCJA approves the current training programs.

Further, this bill may have an impact on the liability insurance premiums for local governing entities due to the exception of willful or wanton misconduct relative to the specified liability exemption. However, any increase is dependent upon the potential increase in actions brought under the Tort Claims Act, and the MASC anticipates any increase in premiums will not occur immediately. Based on initial conversations regarding recent experience, the number of instances of these occurrences has been limited or have not occurred.

State Expenditure

This bill requires all 911 telecommunicators providing dispatch for emergency medical conditions to be trained in high-quality T-CPR beginning January 1, 2025. The training must include recognition protocols for out-of-hospital cardiac arrest, compression-only CPR instruction for callers, and continuous education. All agencies employing 911 telecommunicators will be responsible for providing this training. The bill further requires the SCCJA to establish a procedure for monitoring adherence by telecommunicators and their employing agencies and penalizing agencies for noncompliance. The bill specifies that 911 telecommunicators who have completed the training will not be liable for any civil damages for any personal injury arising from the provision of CPR instructions to 911 callers.

The SCCJA indicates that this bill will have no expenditure impact since bill requires the department to perform activities that will be conducted in the normal course of business.

Local Expenditure

This bill requires all 911 telecommunicators providing dispatch for emergency medical conditions to be trained in high-quality T-CPR beginning January 1, 2025. All agencies employing 911 telecommunicators will be responsible for providing this training. The bill specifies that 911 telecommunicators who have completed the training will not be liable for any civil damages for any personal injury arising from the provision of CPR instructions to 911 callers.

The overall expenditure impact of this bill on local governments is undetermined due to the number of responses received and may vary depending upon the training currently required for 911 telecommunicators in each locality. A small number of responding counties indicate that this bill will have no expenditure impact since they already provide the required training. The MASC indicates that the expenditure impact of this bill will vary depending upon the current training and certification methods required for 911 telecommunicators in each locality and whether the bill is implemented in a manner that requires a one-time training in T-CPR or ongoing renewal of the T-CPR training certification with continuing education requirements.

Frank A. Rainwater, Executive Director

Revenue and Fiscal Affairs Office

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A bill

to amend the south carolina code of laws by adding section 23-23-45 so as to require all 911 telecommunicators WHO provide dispatch for emergency medical conditions to be trained in high-quality telecommunicator cardiopulmonary resuscitation (t-cpr).

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

SECTION 1. Chapter 23, Title 23 of the S.C. Code is amended by adding:

Section 23-23-45. (A) Beginning January 1, 2025, all 911 telecommunicators that provide dispatch for emergency medical conditions shall be required to be trained, utilizing the most current nationally recognized cardiovascular care guidelines, in high-quality T-CPR. The instruction shall incorporate recognition protocols for out-of-hospital cardiac arrest (OHCA), compression-only CPR instruction for callers, and continuous education which must be completed on an annual basis.

(B) All agencies within this State employing 911 telecommunicators that provide dispatch for emergency medical conditions shall be responsible for providing the instruction specified in subsection (A).

(C) The South Carolina Criminal Justice Academy shall establish a procedure for monitoring adherence by telecommunicators and their employing agencies to the requirements set forth in subsection (A) and penalizing agencies for noncompliance, as described in Section 23-23-100.

(D) Neither telecommunicators that provide dispatch for emergency medical conditions who have completed the training specified in subsection (A) nor the State or the agency, political subdivision, or governmental entity employing such telecommunicators shall be liable for any civil damages for any personal injury arising from the provision of CPR instructions to 911 callers except acts or omissions amounting to gross negligence or willful or wanton misconduct. Any civil cause of action for damages arising from the provision of T-CPR instructions and brought against the State, an agency, a political subdivision, or a governmental entity and its employee acting within the scope of his official duty must be brought pursuant to the South Carolina Tort Claims Act, Chapter 78, Title 15.

SECTION 2. Section 23-23-10(E) of the S.C. Code is amended to read:

(E) As contained in this chapter:

(1) “Law enforcement officer” means an appointed officer or employee hired by and regularly on the payroll of the State or any of its political subdivisions, who is granted statutory authority to enforce all or some of the criminal, traffic, and penal laws of the State and who possesses, with respect to those laws, the power to effect arrests for offenses committed or alleged to have been committed.

(2) “Council” means the South Carolina Law Enforcement Training Council created by this chapter.

(3) “Academy” means the South Carolina Criminal Justice Academy created by this chapter.

(4) “Director” means the Director of the South Carolina Criminal Justice Academy.

(5) “T-CPR” means telecommunicator cardiopulmonary resuscitation, which is the dispatcher-assisted delivery of cardiopulmonary resuscitation (CPR) instruction by trained emergency call takers or public safety dispatchers to callers or bystanders for events requiring CPR, such as out-of-hospital cardiac arrest (OHCA).

SECTION 3. This act takes effect upon approval by the Governor.

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