



UTAH STATE FIRE CHIEFS ASSOCIATION



Bradley C. Wardle, Fire Chief, West Jordan F.D., President
Mike Mathieu, Fire Chief, Ogden City F.D., 1st VP
Jim Rampton, Fire Chief, South Davis Metro Fire Agency, 2nd VP
Kevin Ward, Fire Chief, Layton City F.D., Past President
Frank Heumann, Asst Chief, Park City Fire District, Secretary/Treasurer
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Meeting Minutes

Thursday, September 11, 2008, 10:00 a.m. / Sheraton City Centre, Salt Lake City

Last meeting's minutes were reviewed and approved.

Fire Chief Chris Evans presented a draft legislative bill (Utah Sudden Cardiac Arrest Survival Act) regarding AEDs that has the intent to consolidate current laws and address liability clauses. (See Attachment) He intended, and encouraged others, to attend the September 17th interim committee meeting to inform legislators on the issues of the bill. A **motion** was made by Fire Chief Rand Andrus to support this bill. Fire Chief Steve Higgs seconded the motion, which was passed by everyone.

Legislative consultant Dave Spatafore reported that tight budgets will be the overarching concern this session with state departments being asked to generate budget requests of 1-3% below last year's figures. He anticipates another ground ambulance transport bill of some sort next session. And retirement topics should be very quiet.

Coy Porter addressed a list of legislative topics that could be anticipated for 2009, including the following: Primary Seat Belt Law, Certified Private Building Inspector, Public Safety Death Benefit, Governmental Immunity, Construction Standards for Type II Assisted Living Facilities, Amendments to the Utah EMS Act, Health System Reform, Firefighter Special License Plates, Private Ambulance Bill, Utah Sudden Cardiac Arrest Survival Act, and Impact Fees for Public Safety Facility to include fire apparatus.

Jim Hansen from the Bureau of EMS presented on this year's EMS grant reductions and that a letter from the Bureau would be out soon explaining the updates, including the added flexibility to move around reimbursement requests for approved items. Hansen also pointed out the new approved drug list, which is posted on the Bureau's website. Fire Chief Kelly Gee asked Hansen if the current paramedic service delivery rules, specifically the requirement of two responding paramedics, was being considered for modification. Hansen reported that the topic is being discussed in a subcommittee.

Fire Chief John Evans reported on the Western Fire Chiefs Association and encouraged members to use the WFCFA bookstore as the Utah Fire Chiefs Association receives revenues on those sales.

Fire Chief Steve Foote reported on the State Interoperability Executive Committee's (SIEC) latest version of Radio Communications Interoperability Task Force Findings. (see website for copy: <http://siec.utah.gov>) The State proposes that ITS should take over UCAN, which is 75% funded and operated locally. Both Spatafore and Foote do not think that this is good for local agencies. In the October meeting of UCAN, the board is anticipated to take a position of

opposition to the State takeover concept. Deputy Chief Kevin Nalder did point out that some feel that State control might make things more fair by removing personal agendas and might possibly lower usage fees.

Assistant Chief/Fire Marshal Scott Adams reported on this year's Fire Prevention Week's theme, "Prevent Home Fires." Chief Adams also reported that at the July 2008 NFPA Standards Council meeting, the Council reviewed two requests for new projects and voted to publish these requests for public review and comment. One of these projects was submitted by Technical Committee on Fire Department Apparatus and proposes that a new project be developed and a new technical Committee be established to address ambulances. Anyone interested in commenting on this proposed project is invited to do so in writing. For more information, go to the NFPA website at <http://www.nfpa.org>.

Chief Adams also reported that the International Code Council Final Action Hearing (FAH) will take place on September 17-23, 2008, at the Minneapolis Convention Center in Minneapolis. For more information, go to the ICC website <http://www.iccsafe.org>. One of the more important items to be decided at this year's Final Action Hearing is the requirement for the installation of fire sprinklers in all one- and two-family dwellings and town homes.

Later in the meeting, Chief Adams also reported on ISO and their current public comment period for review of rating policies regarding topics of staffing, hydrants, equipment, etc. Chief Adams encouraged everyone to take advantage and submit comments to ISO for improvements of their grading system.

Fire Marshal Dean Hunt passed out a reference document and reported on the Utah Fire and Life Safety Education Association. (See Attachment)

Fire Chief Dave Austin passed out a reference document and reported on the Wildland Fire Task Force. (See Attachment)

A forum discussion on "What the City Official Wants from the Fire Chief" was moderated by Fire Chief Brad Wardle with a distinguished panel of: Randy Fitts, City Manager, Holladay City; Alex Jenson, City Manager, Layton City; Wayne Pyle, City Manager, West Valley City; and Dan Snarr, Mayor, Murray City.

Anne O'Brien, Director of Continuing Education at the University of Utah, presented on the Fire Service Leadership Academy course work on October 28-30. She encouraged members to promote attendance throughout their organizations for this first phase of "Foundations for Leadership." The program is also in partnership with the Salt Lake Valley Fire Alliance.

Deputy Chief Kevin Nalder reported on the Local Assistance State Teams (LAST) Program for Line of Duty Deaths. He solicited volunteers in creating a support group and plans to update the current guide document on the USFCA's website.

Fire Chief Kevin Ward reported on Intrastate Mutual Aid System (IMAS) updates. Drafts will be sent out soon for review, followed by a comment period before submission to the Commissioner of Public Safety. Mike Warren is providing technical support. Homeland Security is providing funding to complete this project.

An endorsement recommendation was made for Al Gillespie, North Las Vegas Fire Chief, for 2nd VP of IAFC. The motion was made by Fire Chief Gil Rodriguez, seconded by Deputy State Fire Marshal Brent Halladay, and passed by everyone.

The annual election of Utah State Fire Chiefs Association officers resulted in the following nominations and appointments:

2nd VP Nominations: Rand Andrus (by John Evans)
 Jim Rampton (by Jon Richie) – **Appointed**

WFCA VP Nominations: John Evans (by Steve Foote)
 Kevin Nalder (by Marc McElreath) – **Appointed**

The following positions were voted by acclamation to be filled by preceding office holders:

President: **Brad Wardle**

1st VP: **Mike Mathieu**

Past President: **Kevin Ward**

Secretary/Treasurer: **Frank Heumann**

Kevin Ward was thanked for his tremendous leadership of the past year as President.

The next meeting is scheduled for January 15th at 9:00 a.m. in St. George in conjunction with the UFRA Winter Fire School and following the Safety & Survival Symposium on January 14, 2009.

ATTACHMENTS

UTAH SUDDEN CARDIAC ARREST SURVIVAL**ACT**

2009 GENERAL SESSION

STATE OF UTAH

LONG TITLE**General Description:**

This bill enacts the Utah Sudden Cardiac Arrest Survival Act and amends civil liability immunity provisions relating to the act.

Highlighted Provisions:

This bill:

- ▶ defines terms;
- ▶ provides for expiration of the automatic external defibrillator (AED) statewide database on September 1, 2009, and replaces it with local systems operated by public safety answering points;
- ▶ permits a person to administer CPR or use an AED on a person reasonably believed to be in sudden cardiac arrest:
 - without a license or certificate; and
 - regardless of whether the person is trained to administer CPR or to use an AED;
- ▶ provides immunity from civil liability for certain acts or omissions relating to administering CPR, operating, designing, or managing a CPR or AED program, or providing instructions or training, or taking other specified action, in relation to CPR or AEDs, unless the actions constitute gross negligence or willful misconduct;
- ▶ provides that this bill does not relieve a manufacturer, designer, developer, marketer, or commercial distributor from liability relating to an AED or an AED accessory;
- ▶ requires a person who owns or leases an AED to report certain information, including the location of, or removal of, the AED, to the public safety answering point that provides emergency dispatch services for that area;
- ▶ describes the duties of a public safety answering point to disclose information relating to the location of an AED;

- 32 ▶ describes the duties of the Bureau of Emergency Medical Services in relation to
- 33 providing education and training on the administration of CPR and the use of an
- 34 AED; and
- 35 ▶ makes technical changes.

36 **Monies Appropriated in this Bill:**

37 None

38 **Other Special Clauses:**

39 None

40 **Utah Code Sections Affected:**

41 AMENDS:

- 42 **26-8a-209**, as enacted by Laws of Utah 2003, Chapter 53
- 43 **26-8a-301**, as enacted by Laws of Utah 1999, Chapter 141
- 44 **26-8a-308**, as last amended by Laws of Utah 2000, Chapter 62
- 45 **26-8a-502**, as last amended by Laws of Utah 2000, Chapter 1
- 46 **26-8a-601**, as last amended by Laws of Utah 2002, Fifth Special Session, Chapter 8

47 ENACTS:

- 48 **26-8b-101**, Utah Code Annotated 1953
- 49 **26-8b-102**, Utah Code Annotated 1953
- 50 **26-8b-201**, Utah Code Annotated 1953
- 51 **26-8b-202**, Utah Code Annotated 1953
- 52 **26-8b-301**, Utah Code Annotated 1953
- 53 **26-8b-302**, Utah Code Annotated 1953
- 54 **26-8b-303**, Utah Code Annotated 1953
- 55 **26-8b-401**, Utah Code Annotated 1953

56

57 *Be it enacted by the Legislature of the state of Utah:*

58 Section 1. Section **26-8a-209** is amended to read:

59 **26-8a-209. Fully automated external defibrillator statewide database.**

60 ~~[(1) The department shall work in cooperation with state, federal, and local agencies to~~
61 ~~encourage individuals to complete a course that includes instruction on cardiopulmonary~~
62 ~~resuscitation and the operation and use of a fully automated external defibrillator that is~~

63 ~~conducted in accordance with guidelines of the American Heart Association, American Red~~
64 ~~Cross, or other nationally recognized program by a person qualified by training or experience.]~~

65 ~~[(2) The]~~ (1) Except as provided in Subsection (4), the department shall establish and
66 maintain a statewide database containing the following information:

67 (a) the name of the owner of a fully automated external defibrillator; and

68 (b) the precise location of the fully automated external defibrillator, including the
69 address and the place in which the defibrillator is stored.

70 ~~[(3)]~~ (2) Except as provided in Subsection (4):

71 (a) ~~[The]~~ the department shall give the information from the database to emergency
72 medical service dispatch centers in the state~~[-]; and~~

73 (b) ~~[Emergency]~~ emergency medical dispatch centers in the state may disclose the
74 nearest location of a fully automated external defibrillator to a person calling the dispatch
75 center in the event of a medical emergency and to first responders in an emergency.

76 ~~[(4)(a) Manufacturers selling fully automated external defibrillators in the state shall:]~~

77 ~~[(i) inform commercial purchasers in writing of the requirement to register the~~
78 ~~ownership and location of the fully automated external defibrillator with the department;]~~

79 ~~[(ii) provide to the purchaser of a fully automated external defibrillator all information~~
80 ~~governing the use, installation, operation, training, and maintenance of the fully automated~~
81 ~~external defibrillator; and]~~

82 ~~[(iii) on a quarterly basis, notify the department of the name and address of a~~
83 ~~commercial purchaser of a fully automated external defibrillator and the type of device~~
84 ~~purchased.]]~~

85 ~~[(b)]~~ (3) Except as provided in Subsection (4):

86 ~~[(i) A]~~ (a) a commercial owner of a fully automated external defibrillator shall register
87 the ownership and precise location of the defibrillator with the department within 30 days of
88 acquisition of the defibrillator~~[-];~~

89 ~~[(ii) An]~~ (b) an owner of a fully automated external defibrillator purchased for use in a
90 private residence may register the ownership and precise location of the defibrillator with the
91 department~~[-]; and~~

92 (c) ~~[The]~~ the department may not impose penalties on a manufacturer or an owner of a
93 fully automated external defibrillator for failing to comply with the requirements of this

94 section.

95 (4) Beginning on September 1, 2009:

96 (a) the provisions of this section are no longer in effect; and

97 (b) the provisions of Title 26, Chapter 8b, Utah Sudden Cardiac Arrest Survival Act,
98 supersede the provisions of this section.

99 (5) On or before August 1, 2009, the department shall provide to each public safety
100 answering point, as defined in Section 63C-7-103, all information contained in the statewide
101 database that pertains to the area for which the public safety answering point provides
102 emergency dispatch services.

103 (6) Beginning on the date that the department provides the information required under
104 Subsection (5), and continuing on a weekly basis until September 1, 2009, the department shall
105 provide any additional information that it receives for the statewide database to the public
106 safety answering points described in Subsection (5).

107 Section 2. Section **26-8a-301** is amended to read:

108 **26-8a-301. General requirement.**

109 (1) Except as provided in Section 26-8a-308 or 26-8b-201:

110 (a) an individual may not provide emergency medical services without a certificate
111 issued under Section 26-8a-302;

112 (b) a facility or provider may not hold itself out as a designated emergency medical
113 service provider without a designation issued under Section 26-8a-303;

114 (c) a vehicle may not operate as an ambulance or emergency response vehicle without a
115 permit issued under Section 26-8a-304; and

116 (d) an entity may not respond as an ambulance or paramedic provider without the
117 appropriate license issued under Part 4, Ambulance and Paramedic Providers.

118 (2) Section 26-8a-502 applies to violations of this section.

119 Section 3. Section **26-8a-308** is amended to read:

120 **26-8a-308. Exemptions.**

121 (1) The following persons may provide emergency medical services to a patient
122 without being certified or licensed under this chapter:

123 (a) out-of-state emergency medical service personnel and providers in time of disaster;

124 (b) an individual who gratuitously acts as a Good Samaritan;

- 125 (c) a family member;
- 126 (d) a private business if emergency medical services are provided only to employees at
127 the place of business and during transport;
- 128 (e) an agency of the United States government if compliance with this chapter would
129 be inconsistent with federal law; and
- 130 (f) police, fire, and other public service personnel if:
- 131 (i) emergency medical services are rendered in the normal course of the person's duties;
132 and
- 133 (ii) medical control, after being apprised of the circumstances, directs immediate
134 transport.

135 (2) An ambulance or emergency response vehicle may operate without a permit issued
136 under Section 26-8a-304 in time of disaster.

137 (3) Nothing in this chapter or Title 58, Occupations and Professions, may be construed
138 as requiring a license or certificate for an individual to ~~[perform]~~ administer cardiopulmonary
139 resuscitation ~~[and] or to~~ use a fully automated external defibrillator ~~[if that individual has~~
140 ~~successfully completed a course that includes instruction on cardiopulmonary resuscitation and~~
141 ~~the operation and use of a fully automated external defibrillator that is conducted in accordance~~
142 ~~with guidelines of the American Heart Association, American Red Cross, or other nationally~~
143 ~~recognized program by a person qualified by training or experience]~~ under Section 26-8b-201.

144 (4) Nothing in this chapter may be construed as requiring a license, permit,
145 designation, or certificate for an acute care hospital, medical clinic, physician's office, or other
146 fixed medical facility that:

147 (a) is staffed by a physician, physician's assistant, nurse practitioner, or registered
148 nurse; and

149 (b) treats an individual who has presented himself or was transported to the hospital,
150 clinic, office, or facility.

151 Section 4. Section **26-8a-502** is amended to read:

152 **26-8a-502. Illegal activity.**

153 (1) Except as provided in Section 26-8a-308 or 26-8b-201, a person may not:

154 (a) practice or engage in the practice, represent himself to be practicing or engaging in
155 the practice, or attempt to practice or engage in the practice of any activity that requires a

156 license, certification, or designation under this chapter unless that person is so licensed,
 157 certified, or designated; or

158 (b) offer an emergency medical service that requires a license, certificate, or
 159 designation unless the person is so licensed, certified, or designated.

160 (2) A person may not advertise or hold himself out as one holding a license,
 161 certification, or designation required under this chapter, unless that person holds the license,
 162 certification, or designation.

163 (3) A person may not employ or permit any employee to perform any service for which
 164 a license or certificate is required by this chapter, unless the person performing the service
 165 possesses the required license or certificate.

166 (4) A person may not wear, display, sell, reproduce, or otherwise use any Utah
 167 Emergency Medical Services insignia without authorization from the department.

168 (5) A person may not reproduce or otherwise use materials developed by the
 169 department for certification or recertification testing or examination without authorization from
 170 the department.

171 (6) A person may not willfully summon an ambulance or emergency response vehicle
 172 or report that one is needed when such person knows that the ambulance or emergency
 173 response vehicle is not needed.

174 (7) A person who violates this section is subject to Section 26-23-6.

175 Section 5. Section **26-8a-601** is amended to read:

176 **26-8a-601. Persons and activities exempt from civil liability.**

177 (1) ~~[A]~~ (a) Except as provided in Subsection (1)(b), a licensed physician, physician's
 178 assistant, or licensed registered nurse who, gratuitously and in good faith, gives oral or written
 179 instructions to any of the following is not liable for any civil damages as a result of issuing the
 180 instructions:

181 (i) an individual certified under Section 26-8a-302 ~~[or]~~;

182 (ii) a person ~~[permitted to use]~~ who uses a fully automated external defibrillator
 183 ~~[because of Section 26-8a-308 is not liable for any civil damages as a result of issuing the~~
 184 ~~instructions, unless], as defined in Section 26-8b-102; or~~

185 (iii) a person who administers CPR, as defined in Section 26-8b-102.

186 (b) The liability protection described in Subsection (1)(a) does not apply if the

187 instructions given were the result of gross negligence or willful misconduct.

188 (2) An individual certified under Section 26-8a-302, during either training or after
189 certification, a licensed physician, physician's assistant, or a registered nurse who, gratuitously
190 and in good faith, provides emergency medical instructions or renders emergency medical care
191 authorized by this chapter is not liable for any civil damages as a result of any act or omission
192 in providing the emergency medical instructions or medical care, unless the act or omission is
193 the result of gross negligence or willful misconduct.

194 (3) An individual certified under Section 26-8a-302 is not subject to civil liability for
195 failure to obtain consent in rendering emergency medical services authorized by this chapter to
196 any individual who is unable to give his consent, regardless of the individual's age, where there
197 is no other person present legally authorized to consent to emergency medical care, provided
198 that the certified individual acted in good faith.

199 (4) A principal, agent, contractor, employee, or representative of an agency,
200 organization, institution, corporation, or entity of state or local government that sponsors,
201 authorizes, supports, finances, or supervises any functions of an individual certified under
202 Section 26-8a-302 is not liable for any civil damages for any act or omission in connection with
203 such sponsorship, authorization, support, finance, or supervision of the certified individual
204 where the act or omission occurs in connection with the certified individual's training or occurs
205 outside a hospital where the life of a patient is in immediate danger, unless the act or omission
206 is inconsistent with the training of the certified individual, and unless the act or omission is the
207 result of gross negligence or willful misconduct.

208 (5) A physician who gratuitously and in good faith arranges for, requests, recommends,
209 or initiates the transfer of a patient from a hospital to a critical care unit in another hospital is
210 not liable for any civil damages as a result of such transfer where:

211 (a) sound medical judgment indicates that the patient's medical condition is beyond the
212 care capability of the transferring hospital or the medical community in which that hospital is
213 located; and

214 (b) the physician has secured an agreement from the receiving facility to accept and
215 render necessary treatment to the patient.

216 (6) A person who is a registered member of the National Ski Patrol System (NSPS) or
217 a member of a ski patrol who has completed a course in winter emergency care offered by the

218 NSPS combined with CPR for medical technicians offered by the American Red Cross or
 219 American Heart Association, or an equivalent course of instruction, and who in good faith
 220 renders emergency care in the course of ski patrol duties is not liable for civil damages as a
 221 result of any act or omission in rendering the emergency care, unless the act or omission is the
 222 result of gross negligence or willful misconduct.

223 (7) An emergency medical service provider who, in good faith, transports an individual
 224 against his will but at the direction of a law enforcement officer pursuant to Section
 225 62A-15-629 is not liable for civil damages for transporting the individual.

226 ~~[(8) A person who is permitted to use a fully automated external defibrillator because
 227 of Section 26-8a-308 is not liable for civil damages as a result of any act or omission related to
 228 the use of the defibrillator in providing emergency medical care gratuitously and in good faith
 229 to a person who reasonably appears to be in cardiac arrest, unless the act or omission is the
 230 result of gross negligence or wilful misconduct.]~~

231 Section 6. Section **26-8b-101** is enacted to read:

232 **CHAPTER 8b. UTAH SUDDEN CARDIAC ARREST SURVIVAL ACT**

233 **Part 1. General Provisions**

234 **26-8b-101. Title.**

235 This Chapter is known as the "Utah Sudden Cardiac Arrest Survival Act."

236 Section 7. Section **26-8b-102** is enacted to read:

237 **26-8b-102. Definitions.**

238 As used in this Chapter:

239 (1) "Automatic external defibrillator" or "AED" means an automated or automatic
 240 computerized medical device that:

241 (a) has received pre-market notification approval from the United States Food and
 242 Drug Administration, pursuant to Section 360(k), Title 21 of the United States Code;

243 (b) is capable of recognizing the presence or absence of ventricular fibrillation or rapid
 244 ventricular tachycardia;

245 (c) is capable of determining, without intervention by an operator, whether
 246 defibrillation should be performed; and

247 (d) upon determining that defibrillation should be performed, automatically charges,
 248 enabling delivery of an electrical impulse through the chest wall and to a person's heart.

249 (2) "Bureau" means the Bureau of Emergency Medical Services, within the department.

250 (3) "Cardiopulmonary resuscitation" or "CPR" means artificial ventilation or external
251 chest compression applied to a person who is in respiratory or cardiac arrest.

252 (4) "Public safety answering point" is as defined in Section 63C-7-103.

253 (5) "Sudden cardiac arrest" means a life-threatening condition that results when a
254 person's heart stops or fails to produce a pulse.

255 Section 8. Section **26-8b-201** is enacted to read:

256 **Part 2. Cardiopulmonary Resuscitation and Automatic External Defibrillators**

257 **26-8b-201. Authority to administer CPR or use an AED.**

258 (1) A person may administer CPR on another person without a license, certificate, or
259 other governmental authorization if the person reasonably believes that the other person is in
260 sudden cardiac arrest.

261 (2) A person may use an AED on another person without a license, certificate, or other
262 governmental authorization if the person reasonably believes that the other person is in sudden
263 cardiac arrest.

264 Section 9. Section **26-8b-202** is enacted to read:

265 **26-8b-202. Immunity.**

266 (1) Except as provided in Subsection (3), the following persons are not subject to civil
267 liability for any act or omission relating to preparing to care for, responding to care for, or
268 providing care to, another person who reasonably appears to be in sudden cardiac arrest:

269 (a) a person authorized, under Section 26-8b-201, to administer CPR, who

270 (i) gratuitously and in good faith attempts to administer or administers, CPR to another
271 person; or

272 (ii) fails to administer CPR to another person;

273 (b) a person authorized, under Section 26-8b-201, to use an AED who:

274 (i) gratuitously and in good faith attempts to use or uses an AED; or

275 (ii) fails to use an AED;

276 (c) a person that teaches or provides a training course in administering CPR or using an
277 AED;

278 (d) a person that acquires an AED;

279 (e) a person that owns, manages, or is otherwise responsible for the premises or

280 conveyance where an AED is located;

281 (f) a person who retrieves an AED in response to a perceived or potential sudden
282 cardiac arrest;

283 (g) a person that authorizes, directs, or supervises the installation or provision of an
284 AED;

285 (h) A person involved with, or responsible for, the design, management, or operation of
286 a CPR or AED program; or

287 (i) a person involved with, or responsible for, reporting, receiving, recording, updating,
288 giving, or distributing information relating to the ownership or location of an AED under Part
289 3, AED Databases.

290 (2) This section does not relieve a manufacturer, designer, developer, marketer, or
291 commercial distributor of an AED, or an accessory for an AED, of any liability.

292 (3) The liability protection described in Subsection (1) does not apply to an act or
293 omission that constitutes gross negligence or willful misconduct.

294 Section 10. Section **26-8b-301** is enacted to read:

295 **Part 3. AED Databases**

296 **26-8b-301. Reporting location of automatic external defibrillators.**

297 (1) Beginning on September 1, 2009, in accordance with Subsection (2) and except as
298 provided in Subsection (3):

299 (a) a person who owns or leases an AED shall report the person's name, address, and
300 telephone number, and the exact location of the AED, in writing, to the public safety answering
301 point that provides emergency dispatch services for the location where the AED is installed, if
302 the person:

303 (i) installs the AED;

304 (ii) causes the AED to be installed; or

305 (iii) allows the AED to be installed.

306 (b) a person who owns or leases an AED that is removed from a location where it is
307 installed shall report the person's name, address, and telephone number, and the exact location
308 from which the AED is removed, in writing, to the public safety answering point that provides
309 emergency dispatch services for the location from which the AED is removed, if the person:

310 (i) removes the AED;

311 (ii) causes the AED to be removed; or

312 (iii) allows the AED to be removed.

313 (2) A report required under Subsection (1) shall be made within 30 days after the day
314 on which the AED is installed or removed.

315 (3) Subsection (1) does not apply to an AED that is installed in, or removed from, a
316 private residence.

317 (4) Beginning on September 1, 2009, a person who owns or leases an AED that is
318 installed in, or removed from, a private residence may voluntarily report the location of, or
319 removal of, the AED to the public safety answering point that provides emergency dispatch
320 services for the location where the private residence is located.

321 (5) The department may not impose a penalty on a person for failing to comply with
322 the requirements of this section.

323 Section 11. Section **26-8b-302** is enacted to read:

324 **26-8b-302. Distributors to notify of reporting requirements.**

325 A person in the business of selling or leasing an AED shall, at the time the person
326 provides, sells, or leases an AED to another person, notify the other person, in writing, of the
327 reporting requirements described in Section 26-8b-301.

328 Section 12. Section **26-8b-303** is enacted to read:

329 **26-8b-303. Duties of public safety answering points.**

330 Beginning on September 1, 2009, a public safety answering point shall:

331 (1) implement a system to receive and manage the information reported to the public
332 safety answering point under Section 26-8a-209 or Section 26-8b-301;

333 (2) record in the system described in Subsection (1), all information received under
334 Section 26-8a-209 or Section 26-8b-301 as follows:

335 (a) if the information is received under Subsection 26-8a-209(5), within 30 days after
336 the day on which the information is received; or

337 (b) if the information is received under Subsection 26-8a-209(6) or Section 26-8b-301,
338 within three days after the day on which the information is received;

339 (3) inform a person who calls to report a potential incident of sudden cardiac arrest of
340 the location of any nearby AED; and

341 (4) provide the information contained in the system described in Subsection (1), upon

342 request, to:

343 (a) the department; or

344 (b) another public safety answering point.

345 Section 13. Section **26-8b-401** is enacted to read:

346 **Part 4. Education and Training**

347 **26-8b-401. Education and training.**

348 The bureau shall work in cooperation with federal, state, and local agencies, and

349 schools, to encourage individuals to complete courses on the administration of CPR and the use

350 of an AED.

Utah Fire and Life Safety Education Association

The first meeting of the association was held on August 15, 2008, during lunch on the first day of Fire School

There were 11 departments represented and were from the following departments:

Utah Office of the State Fire Marshal
Layton City Fire Department
Hildale Fire Department
West Jordan Fire Department
Eagle Mountain Fire Department
Murray Fire Department
Midvale Fire Department
Provo Fire Department
Sandy City Fire Department
Sunset Fire Department
West Valley Fire Department

A brief history of the establishment of the association was explained and the by-laws were distributed and discussed.

It was decided that we should become an incorporated organization and it was suggested that it become a registered charitable organization with the state and apply for a 501(c) 3 status with the IRS. There was discussion about acting under the State Fire Chief's umbrella for these but if we have the funding it would be better to establish these for ourselves. We will also obtain our own banking account.

Dues was discussed and it was decided that due to the time of the budget year that it was where budgets were already set and it would be a hardship for some department to come up with the dues at this time, we would not require dues be paid until the next fiscal year. Dues will follow somewhat the same amount at the State Chief's Association other than dues would be paid by department rather than individual. Dues would be \$100 for career agency, \$75 for combination agency, and \$50 for volunteer agency. It is hoped that the funding from the previous fire and life safety educator organization that the Fire Marshals Association now has would be given to this association and we wouldn't need to request dues this year. Some funding is needed to apply for the incorporation and for the charitable organization status.

It was decided that Association meetings will coincide with Winter Fire School, the Utah Firemen's Association convention and Summer Fire School.

By unanimous vote, the following will lead the Association:

Chairperson: Randy Koger, Riverdale

1st Vice Chairperson: George Zboril, Murray & Midvale

2nd Vice Chairperson: Lynn Schofield, Provo

Secretary: Dan Veenendaal, Sandy

Liaison to the Utah State Fire Chief's Association: Dean Hunt, Layton

Executive Secretary: Monica Colby, State Fire Marshal's Office

WILDLAND FIRE TASK FORCE

DRAFT STATUTORY CHANGES – 9/11/08

Created under Senate Joint Resolution 11 Master Study Resolution and S.B. 251 Task Force Studying Funding for Forest Fires.

Problem: The wildland fire situation has evolved over the past 20 years and now significantly impacts not only traditional wildland areas but communities and incorporated cities. Current statutes, which have evolved over many years, do not adequately address this complex situation; in fact there are conflicts and ambiguities that exist. Wildland fires impact all citizens and visitors to Utah. Impacts include watershed, air quality, tourism, recreation, natural resources, transportation systems, and others. Current funding streams are actuarially unsound. Supplemental appropriations of up to 12 million dollars annually from the general fund have been required to cover suppression expenses for state and private lands. The current suppression fund has been insufficient to cover suppression costs and is not available for incorporated areas.

Drought, invasive species, forest health, and development of the urban interface have all contributed to the upward trend of suppression costs and fire damage throughout the west. Additionally, federal agencies are demanding state and local jurisdictions take greater financial responsibility for fire suppression costs in the urban interface.

The State of Utah needs a fire management program that works with all partners and stakeholders to provide adequate wildland fire protection to all jurisdictions. The program needs to be adequately funded to cover suppression, preparedness and presuppression/mitigation costs.

Key Points in Draft Statutory Changes:

- Mitigation of wildland fires has been added to cooperative agreements and grant funding. The amounts to be set aside for mitigations grants will be set by rules.
- Fire control responsibility for initial fire attack includes Counties, municipalities, fire districts, or contractors within their jurisdictions or as set forth through cooperative agreements.
- Counties, municipalities and fire districts may participate in the wildland fire protection system of the Division of Forestry, Fire and State Lands and become eligible for assistance from the state through a cooperative agreement with a participating county.
- The actual costs of suppression action taken by the division, and participating counties, municipalities, fire districts, and authorized contractors on privately owned, county owned, municipal owned forest, range, and watershed lands will be a charge against the Wildland Fire Suppression and Mitigation Fund.
- Counties may add additional municipal lands through their cooperative agreements with municipalities.
- Fire districts established for the purpose of providing wildland fire protection for counties and municipalities, must enter into cooperative agreements with the counties or municipalities served in order to comply with all requirements for wildland fire suppression actions and

mitigation and to establish procedures for reimbursement for such actions through the counties' receipt of funds from the Wildland Fire Suppression and Mitigation Fund.

- Municipalities must also adopt the state's wildland fire ordinance based upon minimum standards established by the division to be eligible.
- Municipal fire departments, fire districts or equivalent private providers will also have to meet minimum standards for wildland fire training, certification, and wildland fire suppression equipment specified by the division.
- Municipal fire departments, fire districts or equivalent private providers must file with the division, a county approved budget for fire suppression costs mutually acceptable to the county and is included with the county's approved budget.
- A county or municipality that chooses not to comply with any of the eligibility provisions established shall be wholly responsible for wildland fire costs and shall receive no assistance for the division or the Wildland Fire Suppression and Mitigation Fund.
- Wildland Fire Suppression and Mitigation Fund created and administered by the division with oversight by a Wildland Fire Suppression and Mitigation Oversight Committee to pay fire suppression, presuppression, and mitigations costs on eligible non-federal lands within the state.
 - Fund is authorized a maximum of 25 million obtained through tax revenues.
 - If at the end of each fire season, there remains more than 10 million in the fund, grants may be authorized by the division from the fund for mitigation projects; but, grants may not reduce the fund below 10 million by April 1.
 - Division may establish the maximum amounts any single entity may receive in any one year or grant through rules.
 - Once fund reaches maximum of 25 million, interest, grants, carry over and other sources may be added to the fund to increase the value of the fund above the cap as non-lapsing but only for the purpose of reducing the future tax year's assessment.
 - Statewide assessment collected by every county for the purpose of paying the costs of wildland fire suppression and mitigation. Initial statewide assessed levy of establishing the fund shall be a maximum of 20 million.
 - Oversight Committee to be established and composed of 7 members.