



Senate

General Assembly

File No. 22

January Session, 2025

Substitute Senate Bill No. 1190

Senate, February 27, 2025

The Committee on Public Health reported through SEN. ANWAR of the 3rd Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT REQUIRING NURSING HOMES AND MANAGED RESIDENTIAL COMMUNITIES TO BE EQUIPPED WITH AN AUTOMATED EXTERNAL DEFIBRILLATOR.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. (NEW) (*Effective October 1, 2025*) (a) As used in this section:
- 2 (1) "Assisted living services agency" means an entity licensed by the
- 3 Department of Public Health pursuant to chapter 368v of the general
- 4 statutes that provides, among other things, nursing services and
- 5 assistance with activities of daily living in a managed residential
- 6 community to a population that is chronic and stable;
- 7 (2) "Automated external defibrillator" means a device that: (A) Is used
- 8 to administer an electric shock through the chest wall to the heart; (B)
- 9 contains internal decision-making electronics, microcomputers or
- 10 special software that allows it to interpret physiologic signals, make
- 11 medical diagnoses and, if necessary, apply therapy; (C) guides the user
- 12 through the process of using the device by audible or visual prompts;

13 and (D) does not require the user to employ any discretion or judgment
14 in its use;

15 (3) "Managed residential community" means a for-profit or not-for-
16 profit facility consisting of private residential units that provides a
17 managed group living environment consisting of housing and services
18 for persons who are primarily fifty-five years of age or older. "Managed
19 residential community" does not include any state-funded congregate
20 housing facilities; and

21 (4) "Nursing home" means (A) any chronic and convalescent nursing
22 home or any rest home with nursing supervision that provides nursing
23 supervision under a medical director twenty-four hours per day; or (B)
24 any chronic and convalescent nursing home that provides skilled
25 nursing care under medical supervision and direction to carry out
26 nonsurgical treatment and dietary procedures for chronic diseases,
27 convalescent stages, acute diseases or injuries.

28 (b) Not later than January 1, 2026, the administrator of each nursing
29 home and each managed residential community shall (1) provide and
30 maintain an automated external defibrillator in a central location on the
31 premises of the nursing home or managed residential community, (2)
32 make such central location known and accessible to staff members and
33 residents of the home or community and family members of such
34 residents who visit the home or community, and (3) maintain and test
35 the automatic external defibrillator in accordance with the
36 manufacturer's guidelines.

37 (c) Not later than January 1, 2026, the administrator of each nursing
38 home and each assisted living services agency shall ensure that at least
39 one staff member of the nursing home or managed residential
40 community, who is trained in cardiopulmonary resuscitation and the
41 use of an automatic external defibrillator in accordance with the
42 standards set forth by the American Red Cross or American Heart
43 Association, is on the premises of the home or community during all
44 hours of operation.

This act shall take effect as follows and shall amend the following sections:		
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Section 1	October 1, 2025	New section
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Statement of Legislative Commissioners:

In Subsec. (b)(1), "facility" was deleted, in Subsec. (b)(2), both references to "facility" were changed to "community", and in Subsec. (c), the first reference to "facility" was deleted and the second reference to "facility" was changed to "community" for clarity.

PH *Joint Favorable Subst.*

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The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note**State Impact:** None**Municipal Impact:** None**Explanation**

The bill, which establishes requirements for nursing homes related to automated external defibrillators (AEDs), has no fiscal impact as the changes are not anticipated to alter state payments to such facilities.

The Out Years**State Impact:** None**Municipal Impact:** None

OLR Bill Analysis**sSB 1190*****AN ACT REQUIRING NURSING HOMES AND MANAGED RESIDENTIAL COMMUNITIES TO BE EQUIPPED WITH AN AUTOMATED EXTERNAL DEFIBRILLATOR.*****SUMMARY**

This bill requires administrators of nursing homes and managed residential communities (MRCs), by January 1, 2026, to have and maintain an automated external defibrillator (AED) in a central location at the home or MRC. They must (1) make the AED's location known and accessible to staff members and residents and their visiting family members and (2) maintain and test the AED according to the manufacturer's guidelines.

The bill also requires administrators of nursing homes and assisted living services agencies (ALSAs), by this same date, to ensure that at least one staff member at the home or MRC who is trained in CPR and AED use, under the standards of the American Red Cross or American Heart Association, is on the premises during all hours of operation.

Under the bill, as under existing law, MRCs are facilities consisting of private residential units that provide a managed group living environment for people who are primarily age 55 or older. The term excludes state-funded congregate housing facilities. ALSAs are licensed entities that provide, among other things, nursing services and assistance with activities of daily living in MRCs to a population that is chronic and stable.

EFFECTIVE DATE: October 1, 2025

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 31 Nay 1 (02/19/2025)