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| Parks Committee Staff Kristoffer Sartori, *Legislative Counsel* Patrick Mulvihill, *Senior Policy Analyst* Chima Obichere, *Financial Division Unit Head*  Monika Bujak, *Finance Analyst* |  |



## THE COUNCIL

# **COMMITTEE REPORT OF THE INFRASTRUCTURE Division**

Jeffrey Baker*, Legislative Director*

**COMMITTEE ON PARKS AND RECREATION**

Hon. Peter Koo, *Chair*

#### June 26, 2019

**Proposed INT. NO. 1009-A:** By Council Members Matteo, Grodenchik, Ulrich, Levine, Yeger, Holden, Moya, Gjonaj, Koo and Brannan

**TITLE:** A Local Law to amend the administrative code of the city of New York, in relation to requiring automated external defibrillators and trained personnel at all city pool facilities

**ADMINISTRATIVE CODE:** Amends section 17-188

**Proposed INT. NO. 1042-A:** By Council Members Matteo, Levine, Grodenchik, Yeger, Holden, Moya, Gjonaj, Koo and Brannan

**TITLE:** A Local Law to amend the administrative code of the city of New York, in relation to distributing excess automated external defibrillators from youth baseball and softball to other sports

**ADMINISTRATIVE CODE:** Amends sections 4-209 and 17-150

**INT. NO. 1549:** By Council Members Moya and Koo

**TITLE:** A Local Law in relation to renaming one thoroughfare and public place in the Borough of Queens, Seaver Way, and to amend the official map of the city of New York accordingly

#### INTRODUCTION

 On June 26, 2019, the Committee on Parks and Recreation, chaired by Council Member Peter Koo, will meet to consider Proposed Int. No. 1009-A, in relation to requiring automated external defibrillators and trained personnel at all city pool facilities, Proposed Int. No. 1042-A, in relation to distributing excess automated external defibrillators from youth baseball and softball to other sports and Int. No. 1549, in relation to renaming one thoroughfare and public place in the Borough of Queens, Seaver Way, and to amend the official map of the city of New York accordingly.

**BACKGROUND**

#### AUTOMATED EXTERNAL DEFIBRILLATORS

Fatal sport-related injuries can result from head and spine injuries, but most sudden deaths in athletes are cardiac in origin.[[1]](#footnote-1) The frequency of sudden cardiac death is difficult to determine, because many studies have relied on the self-reporting of physicians and media accounts of deaths.[[2]](#footnote-2) The National Federation of State High School Associations estimates that 10 to 25 cases of sudden cardiac death occur per year in individuals younger than 30 years.[[3]](#footnote-3)

The leading cause of death in young athletes is a condition called hypertrophic cardiomyopathy, commonly known as an enlarged heart.[[4]](#footnote-4) This genetic disorder occurs in 1 out of every 500 people and causes the muscle in the heart to abnormally thicken.[[5]](#footnote-5) This thickening of the muscle can force the heart to work harder to pump blood and can lead to dangerous heart arrhythmias.[[6]](#footnote-6) Physical activity can trigger these dangerous arrhythmias and sudden cardiac arrest can occur during very vigorous physical activity.[[7]](#footnote-7)

Commotio cordis is the second highest cause of death in athletes younger than 14 years[[8]](#footnote-8) and typically involves young athletes who experience a sudden, blunt trauma to the anterior chest resulting in cardiac arrest and sudden death.[[9]](#footnote-9) While baseball is the most common sport in which this condition occurs, softball has the second highest incidence rate,[[10]](#footnote-10) and this condition has been described in nearly all sports.[[11]](#footnote-11) Nearly all commotio events are caused by a hard ball or object directly striking the left chest wall.[[12]](#footnote-12) “Pitchers, catchers, and batters have the highest incidence of commotio cordis; however, all players can be affected by this phenomenon.”[[13]](#footnote-13) Chest protectors, which are commonly used by catchers and batters, have not been shown to be reliable in either the human experience or in animal laboratory studies in preventing commotio cordis.[[14]](#footnote-14)

The American Academy of Pediatrics finds that children 5 to 14 years of age may be uniquely vulnerable to this blunt chest impact because their chest walls are more elastic and more easily compressed.[[15]](#footnote-15) Data from the United States Commotio Cordis Registry (“the Registry”) show that 26 percent of those who experience commotio cordis are younger than 10 years and 75 percent are younger than 18 years.[[16]](#footnote-16) Approximately 10 to 20 commotio cordis events are added to the Registry every year, but the actual incidence is likely much greater due to underreporting and a lack of recognition.[[17]](#footnote-17) The survival rate during the initial years of the Registry (1970-1993) was only 10 percent but has increased to 58 percent in recent years (2006-2012).[[18]](#footnote-18) This progressive decline in commotio cordis fatalities can be attributed to earlier recognition of a commotio cordis event, earlier commencement of cardiopulmonary resuscitation (CPR), and the increasing availability and use of automated external defibrillators (AED).[[19]](#footnote-19)

An AED is the only effective treatment for restoring a regular heart rhythm during sudden cardiac arrest and is an easy to operate tool for someone with no medical background.[[20]](#footnote-20) It is a medical device that analyzes the heart’s rhythm and can deliver an electrical shock, known as defibrillation, which helps the heart re-establish an effective rhythm.[[21]](#footnote-21) The average response time for first responders once 911 is called is 8 to 12 minutes.[[22]](#footnote-22) For each minute defibrillation is delayed, the chance of survival is reduced approximately 10 percent.[[23]](#footnote-23) More than 95 percent of patients who receive defibrillation shock in the first minute of cardiac arrest survive.[[24]](#footnote-24)

In New York State, the presence of an AED is required in the following locations:

* public schools and at locations off-site that are then hosting a public school-sponsored athletic contest or practice; [[25]](#footnote-25)
* places of public assembly with a capacity of at least one thousand people, including stadiums, ballparks, gymnasiums, field houses, arenas, civic centers, concert halls, recital halls, theatres, and indoor and outdoor amphitheatres (with exceptions for halls owned by churches, religious organizations, granges, public associations, and free libraries); and[[26]](#footnote-26)
* health clubs with 500 or more members.[[27]](#footnote-27)

In New York City, the presence of AEDs is additionally required in the publicly accessible areas of the following places:

* public buildings maintained by the division of facilities management and construction of the Department of Citywide Administrative Services (DCAS);
* at least six parks in each borough under the jurisdiction of DPR;
* ferry terminals owned and operated by the City of New York served by ferry boats with a passenger capacity of one thousand or more persons;
* nursing homes;
* senior centers;
* golf courses, stadia and arenas; and
* health clubs that have a membership of at least 250 people.[[28]](#footnote-28)

Local Law 57 of 2016 required youth baseball leagues that play on land under the jurisdiction of DPR to make available at least one AED at every game and practice.[[29]](#footnote-29) This same requirement also applies under the law to youth baseball leagues playing on baseball fields leased by the DCAS. Local Law 119 of 2018 extended the requirements of Local Law 57 to youth softball leagues. The requirements of DPR and DCAS, to provide a sufficient number of AEDs to leagues covered by the law that play on their fields would, however, be limited to that which is possible based on the appropriation of funds to the program.

**TOM SEAVER**

Tom Seaver, also known as “The Franchise” and “Tom Terrific” is considered the best pitcher in New York Mets history. He pitched 12 years with the Mets and won 198 games and three National League Cy Young Awards.[[30]](#footnote-30) In 1969, he won 25 games leading the Mets to face the Baltimore Orioles in their first World Series in the franchise’s history.[[31]](#footnote-31) The Mets beat the Baltimore Orioles with four games to the Orioles’ one win, thus winning the World Series.[[32]](#footnote-32)

In 1977, he was traded to the Cincinnati Reds where he played for six seasons and then finished his career pitching for the Chicago White Sox and Boston Red Sox briefly before his retirement.[[33]](#footnote-33) He finished his career with 311 wins, 3,640 strikeouts, 12 All-Star selections and a 2.86 ERA.[[34]](#footnote-34) He was also the 1967 National League Rookie of the Year, finished in the top 10 of National League Cy Young Award voting 10 times and, had five top-10 finishes in National League MVP voting.[[35]](#footnote-35) He led the league in strikeouts five times, threw five one-hitters and was inducted into the National Baseball Hall of Fame in 1992 with the highest percentage of votes at that time.[[36]](#footnote-36)

Analysis of ProposedInt. No. 1009-A

Proposed Int. No. 1009-A would require DPR to provide an AED at every pool facility under its jurisdiction that has a capacity of over 100 people. It would also require that at least one employee trained to use an AED be present during all hours of pool operation. This bill would take effect 120 days after it becomes law, except that the DPR commissioner shall take such measures as are necessary for the implementation of this local law, including the promulgation of rules, before such date.

# Analysis of Proposed Int. No. 1042-A

 Proposed Int. No. 1042-A would permit DCAS and DPR to distribute any extra AEDs they have to other youth sports leagues permitted to play on property under their jurisdiction after such agencies have first fulfilled their obligation to provide AEDs to youth baseball and softball leagues. This bill would take effect on January 1, 2020.

Analysis of Int. No. 1549

Int. No. 1549 will rename 126th Street between Northern Boulevard and Roosevelt Avenue, Seaver Way, and amend the official City map accordingly. The bill would take effect immediately.

Proposed Int. No. 1009-A

By Council Members Matteo, Grodenchik, Ulrich, Levine, Yeger, Holden, Moya, Gjonaj, Koo

and Brannan

..Title

A LOCAL LAWALOCL LAaaaaasafg

To amend the administrative code of the city of New York, in relation to requiring automated external defibrillators and trained personnel at all city pool facilities

..Body

Be it enacted by the Council as follows:

Section 1. Paragraph 3 of subdivision a of section 17-188 of the administrative code of the city of New York, as added by local law number 20 for the year 2005, is amended to read as follows:

3. “Public place" means the publicly accessible areas of the following places to which the public is invited or permitted: (i) public buildings maintained by the division of facilities management and construction of the department of citywide administrative services or any successor; (ii) pool facilities under the jurisdiction of the department of parks and recreation that have a capacity of more than 100 people; (iii) parks under the jurisdiction of the department of parks and recreation identified pursuant to subdivision e of this section; [(iii)] (iv) ferry terminals owned and operated by the city of New York served by ferry boats with a passenger capacity of one thousand or more persons; [(iv)] (v) nursing homes, as defined in section 2801 of the New York state public health law; [(v)] (vi) senior centers, which include facilities operated by the city of New York or operated by an entity that has contracted with the city to provide services to senior citizens on a regular basis, such as meals and other on-site activities; [(vi)] (vii) golf courses, stadia and arenas; and [(vii)] (viii) health clubs that are commercial establishments offering instruction, training or assistance and/or facilities for the preservation, maintenance, encouragement or development of physical fitness or well-being that have a membership of at least two hundred and fifty people, and which shall include, but not be limited to, health spas, health studios, gymnasiums, weight control studios, martial arts and self-defense schools or any other commercial establishment offering a similar course of physical training.

§ 2. Subdivision e of section 17-188 of the administrative code of the city of New York, as added by local law number 20 for the year 2005 is amended to read as follows:

e. Parks. The commissioner of the department of parks and recreation shall[, no later than seven calendar days after the effective date of the local law that added this section,] promulgate rules identifying at least six parks in each borough under the jurisdiction of the department of parks and recreation to be considered a public place for the purposes of this section, which would not otherwise be considered such a place, and determining the quantity and location of automated external defibrillators to be placed in such parks; provided, however, that at least one of the parks identified in each borough must be over one hundred and seventy acres.

§ 3. Subdivision k of section 17-188 of the administrative code of the city of New York, as added by local law number 20 for the year 2005, is amended to read as follows:

k. [Public awareness. Within ninety days of the effective date of the local law that added this section, the department shall conduct public awareness and education campaigns in English and Spanish regarding cardiopulmonary resuscitation training.] Training. At least one employee who is trained in the operation of an automated external defibrillator shall be present at the facilities of any pool under the jurisdiction of the department of parks and recreation during all hours of required supervision.

§ 4. This local law takes effect on January 1, 2020, except that the commissioner of the department of parks and recreation shall take such measures as are necessary for the implementation of this local law, including the promulgation of rules, before such date.

APB/KS

LS 6500, 6502, 7000

6/18/19, 12:00 PM

Proposed Int. No. 1042-A

By Council Members Matteo, Levine, Grodenchik, Yeger, Holden, Moya, Gjonaj, Koo and Brannan

..Title

 A LOCAL LAW

To amend the administrative code of the city of New York, in relation to distributing excess automated external defibrillators from youth baseball and softball to other sports

..Body

Be it enacted by the Council as follows:

Section 1. Subdivision a of section 4-209 of the administrative code of the city of New York, as amended by local law number 119 for the year 2018, is amended to read as follows:

a. Definitions. As used in this section, the following terms have the following meanings:

Automated external defibrillator. The term "automated external defibrillator" means a medical device, approved by the United States food and drug administration, that: (i) is capable of recognizing the presence or absence in a patient of ventricular fibrillation and rapid ventricular tachycardia; (ii) is capable of determining, without intervention by an individual, whether defibrillation should be performed on a patient; (iii) upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to a patient's heart; and (iv) upon action by an individual, delivers an appropriate electrical impulse to a patient's heart to perform defibrillation.

Department. The term "department" means the department of citywide administrative services or any successor of such department.

Training course. The term "training course" means a course approved by a nationally-recognized organization or the state emergency medical services council in the operation of automated external defibrillators.

Youth baseball league. The term "youth baseball league" means [baseball leagues with participants who are all 17 years old or younger, but includes grade school through high school athletic programs regardless of the age of the participants, other than the public school leagues, including school leagues, little leagues, community based organization leagues, and unaffiliated leagues] a youth league that plays baseball.

Youth league. The term "youth league" means youth recreation sports leagues other than the public school leagues, including school leagues, little leagues, community based organization leagues, and unaffiliated leagues.

Youth softball league. The term “youth softball league” means [softball leagues with participants who are all 17 years old or younger, but includes grade school through high school athletic programs regardless of the age of the participants, other than the public school leagues, including school leagues, little leagues, community based organization leagues, and unaffiliated leagues.] a youth league that plays softball.

Youth recreation. The term "youth recreation" means athletic activity with participants who are all 17 years old or younger, but includes grade school through high school athletic programs regardless of the age of the participants.

§ 2. Subdivision b of section 4-209 of the administrative code of the city of New York, as amended by local law number 119 for the year 2018, is amended to read as follows:

b. Subject to the provision of a sufficient number of automated external defibrillators and training courses by the department pursuant to subdivision c or subdivision k, a youth [baseball league or youth softball] league provided with an automated external defibrillator pursuant to this section using a field for which the department is the lessor shall:

1. make available an automated external defibrillator at every [baseball or softball] game and practice occurring at such field in which a team of such league participates; and

2. where practicable, ensure that there is at least one coach, umpire or other qualified adult who is present at each such game and practice who has successfully completed a training course within 24 months of each such game and practice.

§ 3. Subdivision h of section 4-209 of the administrative code of the city of New York, as amended by local law number 119 for the year 2018, is amended to read as follows:

h. Any youth [baseball league or youth softball] league that violates the provisions of subdivision b shall receive a warning for a first violation, and shall be liable for a civil penalty of $500 for each subsequent violation, recoverable in a proceeding before any tribunal established within the office of administrative trials and hearings or within any agency of the city of New York designated to conduct such proceedings. Any youth [baseball league or youth softball] league provided with a device pursuant to this section that violates the provisions of subdivision c or subdivision k shall be liable for a civil penalty of no more than $2,500 for each automated external defibrillator that is not returned in satisfactory condition, recoverable in a proceeding before any tribunal established within the office of administrative trials and hearings or within any agency of the city of New York designated to conduct such proceedings.

§ 4. Section 4-209 of the administrative code of the city of New York is amended by adding a new subdivision k to read as follows:

k. If the department has any undistributed automated external defibrillators remaining after complying with subdivision c of this section, the department may distribute such automated external defibrillators to any other youth league at no cost to such youth league. Any automated external defibrillator so distributed shall be returned in satisfactory condition upon request of the department.

§ 5. Subdivision b of section 18-150 of the administrative code of the city of New York, as amended by local law number 119 for the year 2018 is amended to read as follows:

b. Subject to the provision of a sufficient number of automated external defibrillators and training courses by the department pursuant to subdivision c or subdivision m, a youth league using a ballfield under the jurisdiction and management of the department to play or practice baseball or softball, or any other youth league provided with an automated external defibrillator pursuant to this section shall:

1. make available an automated external defibrillator at every [baseball or softball] game and practice occurring at such field in which a team of such league participates; and

2. where practicable, ensure that there is at least one coach, umpire or other qualified adult who is present at each such game and practice who has successfully completed a training course within 24 months of each such game and practice.

§ 6. Section 18-150 of the administrative code of the city of New York is amended by adding a new paragraph m to read as follows:

 m. If the department has any undistributed automated external defibrillators remaining after complying with subdivision c of this section, the department may distribute such automated external defibrillators to any other youth league at no cost to such youth league. Any automated external defibrillator so distributed shall be returned in satisfactory condition upon request of the department.

§ 7. This local law takes effect on January 1, 2020.

AM/KS

LS #7064

06/18/19, 12:15pm

Int. No. 1549

By Council Members Moya and Koo

A LOCAL LAW

..Title

In relation to renaming one thoroughfare and public place in the Borough of Queens, Seaver Way, and to amend the official map of the city of New York accordingly

..Body

Be it enacted by the Council as follows:

 Section 1. The following street name, in the Borough of Queens, is hereby renamed as hereafter indicated.

|  |  |  |
| --- | --- | --- |
| **New Name** | **Present Name** | **Limits** |
| Seaver Way | 126th Street | Between Northern Boulevard and Roosevelt Avenue |

 §2. The official map of the city of New York shall be amended in accordance with

the provisions of sections one and two of this local law.

 §3. This local law shall take effect immediately.

PM

LS # 10070

3/22/19 3:00PM

1. Glenn C. Terry, James M. Kyle, James M. Ellis, Jr., et. al., “Sudden Cardiac Arrest in Athletic Medicine,” Journal of Athletic Training, Apr-Jun 2001; 36(2): 205–209, http://www.ncbi.nlm.nih.gov/pmc/articles/PMC155532/ [↑](#footnote-ref-1)
2. *Id.* [↑](#footnote-ref-2)
3. *Id.* [↑](#footnote-ref-3)
4. Martha Pyron, “Hypertrophic Cardiomyopathy: A Cause of Athlete Sudden Death,” American College of Sports Medicine, Jan 19, 2012, https://www.acsm.org/public-information/articles/2012/01/19/hypertrophic-cardiomyopathy-a-cause-of-athlete-sudden-death [↑](#footnote-ref-4)
5. American Heart Association, “Hypertrophic Cardiomyopathy,” Aug. 21, 2015, http://www.heart.org/HEARTORG/Conditions/More/Cardiomyopathy/Hypertrophic-Cardiomyopathy\_UCM\_444317\_Article.jsp [↑](#footnote-ref-5)
6. *Id.* [↑](#footnote-ref-6)
7. *Id.* [↑](#footnote-ref-7)
8. American Academy of Pediatrics, “Policy Statement: Baseball and Softball,” http://pediatrics.aappublications.org/content/early/2012/02/22/peds.2011-3593.full.pdf+html [↑](#footnote-ref-8)
9. Steven M Yabek, “Commotio Cordis,” Medscape, Jul 30, 2013, http://emedicine.medscape.com/article/902504-overview [↑](#footnote-ref-9)
10. Kane Guthrie, Life in the Fastlane, Commotio Cordis, <https://lifeinthefastlane.com/commotio-cordis/>. [↑](#footnote-ref-10)
11. Mark S. Link, “Commotio Cordis: Ventricular Fibrillation Triggered by Chest Impact–Induced Abnormalities in Repolarization,” Circulation: Arrhythmia and Electrophysiology, 2012; 5: 425-432, http://circep.ahajournals.org/content/5/2/425.full [↑](#footnote-ref-11)
12. Mark S. Link, “Commotio Cordis: Ventricular Fibrillation Triggered by Chest Impact–Induced Abnormalities in Repolarization,” Circulation: Arrhythmia and Electrophysiology, 2012; 5: 425-432, http://circep.ahajournals.org/content/5/2/425.full [↑](#footnote-ref-12)
13. *Id.* [↑](#footnote-ref-13)
14. *Supra*, Note 40 [↑](#footnote-ref-14)
15. *Supra*, Note 40 [↑](#footnote-ref-15)
16. Steven M Yabek, “Commotio Cordis,” Medscape, Jul 30, 2013, http://emedicine.medscape.com/article/902504-overview [↑](#footnote-ref-16)
17. *Id.* [↑](#footnote-ref-17)
18. *Id.* [↑](#footnote-ref-18)
19. *Id.* [↑](#footnote-ref-19)
20. American Red Cross, “Learn about Automated External Defibrillators,” http://www.redcross.org/prepare/location/workplace/easy-as-aed [↑](#footnote-ref-20)
21. *Id.* [↑](#footnote-ref-21)
22. *Id.* [↑](#footnote-ref-22)
23. *Id.* [↑](#footnote-ref-23)
24. Glenn C. Terry, James M. Kyle, James M. Ellis, Jr., et. al., “Sudden Cardiac Arrest in Athletic Medicine,” Journal of Athletic Training, Apr-Jun 2001; 36(2): 205–209, http://www.ncbi.nlm.nih.gov/pmc/articles/PMC155532/ [↑](#footnote-ref-24)
25. NY Education Law §917 [↑](#footnote-ref-25)
26. NY Public Health §225.5-b [↑](#footnote-ref-26)
27. NY General Business Law, Article 27, §627-a [↑](#footnote-ref-27)
28. N.Y.C. Ad. Code §17-188 [↑](#footnote-ref-28)
29. *See,* New York City Council Website at: https://legistar.council.nyc.gov/LegislationDetail.aspx?ID=2460446&GUID=BD95524A-A1A7-4B96-BD57-70142322453B&Options=Advanced&Search= [↑](#footnote-ref-29)
30. Mike Rosenstein, ”*Mets Hall of Fame Legend Tom Seaver Begins the Long Goodbye,”* NJ Advance Media for NJ.com, March 7, 2019 located at https://www.nj.com/sports/2019/03/mets-hall-of-fame-legend-tom-seaver-begins-the-long-goodbye.html [↑](#footnote-ref-30)
31. *Id.* [↑](#footnote-ref-31)
32. *Id.* [↑](#footnote-ref-32)
33. *Id.* [↑](#footnote-ref-33)
34. *Id.* [↑](#footnote-ref-34)
35. *Id.* [↑](#footnote-ref-35)
36. *Id.* [↑](#footnote-ref-36)