

City of New York

OFFICE OF THE COMPTROLLER

Scott M. Stringer COMPTROLLER



AUDITS & SPECIAL REPORTS

Marjorie Landa

Deputy Comptroller for Audit

Audit Report on the New York City
Department of Parks and Recreation's
Compliance with Local Law 20 and
Placement of Automated External
Defibrillators

SZ16-094A

June 24, 2016

http://comptroller.nyc.gov



THE CITY OF NEW YORK OFFICE OF THE COMPTROLLER 1 CENTRE STREET NEW YORK, NY 10007

SCOTT M. STRINGER COMPTROLLER

June 24, 2016

To the Residents of the City of New York:

My office has audited the New York City Department of Parks and Recreation (Parks) to determine whether it is in compliance with the Local Law 20 requirements for training and certifying City personnel on the use of automated external defibrillators (AEDs), the placement of AEDs in parks and recreation centers, and whether Parks' Site-Specific Response and Maintenance Plan includes the required elements. We audit City agencies such as Parks to ensure they are complying with applicable laws and regulations and providing critical public safety services.

The audit found that Parks generally complied with Local Law 20 and New York State Public Health Law §3000-b regarding training and certifying City personnel on the use of AEDs, the provision of operational AEDs and adequate supplies, and the placement of AEDs at Parks' facilities and recreation centers. Parks maintains inspection reports and device registrations and is in compliance with provisions of its collaborative emergency health care provider agreement (Collaborative Agreement) with the Regional Emergency Medical Services Council of New York City, Inc. (REMSCO). However, we found that since Parks has not refiled the Collaborative Agreement every two years as required, it does not have a current Collaborative Agreement. Furthermore, two locations were missing proper signage indicating the availability and location of the AEDs in Parks' buildings.

The audit recommended that Parks ensure that it has a current signed Collaborative Agreement on file with REMSCO and that it ensure that all its parks and recreation centers have the required signage at the main entrance indicating the location of AEDs and the contact information of the site's trained responders.

The results of the audit have been discussed with Parks officials, and their comments have been considered in preparing this report. Their complete written response is attached to this report.

If you have any questions concerning this report, please e-mail my Audit Bureau at audit@comptroller.nyc.gov.

Sincerely,

Scott M. Stringe

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THE CITY OF NEW YORK OFFICE OF THE COMPTROLLER AUDITS & SPECIAL REPORTS

Audit Report on the New York City Department of Parks and Recreation's Compliance with Local Law 20 and Placement of Automated External Defibrillators

SZ16-094A

AUDIT REPORT

Background

Local Law 20

Each year, approximately 326,200 people in the U.S. experience out-of-hospital, non-traumatic sudden cardiac arrest (SCA) and 9 out of 10 victims die. However, SCA victims have a greater likelihood of survival if they receive immediate cardiopulmonary resuscitation (CPR) and are treated with an automated external defibrillator (AED). An AED is a portable medical device approved by the U.S. Food and Drug Administration that can be used to check the victim's heart rhythm and send an electric shock to the heart to try to restore a normal rhythm.

In 2005, the New York City Council enacted Local Law 20 requiring the placement of AEDs in public locations. These devices are specifically to be placed in: nursing homes; senior centers; the publicly accessible portions of buildings maintained by the New York City Department of Citywide Administrative Services (DCAS), Division of Facilities Management and Construction; selected City-operated parks; and certain ferry terminals and ferries owned and operated by the City.

The New York City Department of Health and Mental Hygiene (DOHMH) issued rules to implement Local Law 20 in November 2005. Local Law 20 and the DOHMH rules require that AEDs be acquired and operated in accordance with New York State Public Health Law §3000-b, which states that personnel must be trained in their use, and that the devices must be registered with the Regional Emergency Medical Services Council of New York City, Inc. (REMSCO), before use by non-health care professionals. REMSCO is a not-for-profit, tax-exempt corporation whose function is to improve emergency medical services for New York City.

According to Local Law 20, any facility with an AED to be used by non-medical personnel must meet the requirements described below. Each facility must:

¹ Data from the American Heart Association.

- Have and maintain a collaborative agreement with an emergency health care provider. The collaborative agreement must be in writing and include practice protocols (including a Site-Specific Response and Maintenance Plan), and policies and procedures that shall assure compliance with New York State Public Health Law §3000-b. The facility shall register and file a copy of the collaborative agreement with REMSCO prior to operating the AED.
- Develop and maintain a Site-Specific Response and Maintenance Plan. This
 written plan, including written practice protocols, is required and must be made
 available to DOHMH upon request.
- Designate specific locations for the placement of the AED. AEDs are required to be located prominently and placed so that the equipment can be accessed quickly at all times by persons trained in their operation.
- Have appropriate AED signage. AED signage is required to appear on the wall
 informing the public as to the availability of an AED at that location and on the face of
 the storage container in which the AED is contained.
- Have appropriately trained staff. Every facility mandated to have an AED must identify and arrange to have employees trained in its operation and in CPR by a training facility that has been approved by New York State Department of Health. The number of trained responders in each public place shall be commensurate with the size and configuration of the facility to permit rapid response during regular business hours.
- Have procedures to be followed to notify the emergency medical services system through 911.

Local Law 20 also requires that the New York City Department of Parks and Recreation (Parks), the audit subject, identify at least six parks in each borough under its jurisdiction to be considered a public place and determine the quantity and location of AEDs. Further, at least one of the selected parks in each borough must exceed 170 acres.

Parks maintains a municipal park system of nearly 30,000 acres, which includes 1,900 parks. Parks facilities throughout the five boroughs range from community and recreation centers to golf courses and swimming pools.

Objective

The objective of the audit was to determine whether Parks is in compliance with the Local Law 20 requirements for training and certifying City personnel on the use of AEDs, the placement of AEDs in parks and recreational centers, and whether Parks' Site-Specific Response and Maintenance Plan includes all the required elements.

Scope and Methodology Statement

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our

audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. This audit was conducted in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

To achieve our audit objectives, we reviewed Local Law 20 and other pertinent documents and interviewed key Parks personnel. Additionally, between March 31, 2016, and April 21, 2016, we conducted 17 site visits and viewed 32 AEDs located in Parks' facilities and in City parks that provide public services (e.g., recreational centers). Please refer to the detailed scope and methodology at the end of this report for the specific procedures and tests that were conducted.

Discussion of Audit Results

The matters covered in this report were discussed with officials from Parks and the Mayor's Office of Operations during and at the conclusion of this audit. On May 27, 2016, we submitted a draft report to Parks with a request for comments. We received a written response from Parks on June 10, 2016. In their written response, Parks officials agreed with the report's findings and agreed that "a Collaborative Agreement is required to be filed every two years from the date of the initial Collaborative Agreement," and that they "will ensure that a newly signed Collaborated Agreement is in place." With regard to the required signage, Parks stated, "This matter has been addressed, and we have installed AED signage at the two locations."

The full text of Parks' comments is included as an addendum to this report.

FINDINGS AND RECOMMENDATIONS

We found that Parks generally complies with Local Law 20 and with New York State Public Health Law §3000-b regarding training and certifying City personnel on the use of AEDs, the provision of operational AEDs and adequate supplies, and the placement of AEDs at Parks' facilities and recreational centers. Parks maintains inspection reports and device registrations and is in compliance with provisions of its collaborative emergency health care provider agreement with REMSCO-NYC (Collaborative Agreement). However, we found that since Parks has not refiled the Collaborative Agreement every two years as required, it does not have a current Collaborative Agreement. Furthermore, two locations were missing proper signage indicating the availability and location of the AEDs in Parks buildings. (See Appendices I and II for additional details regarding the results of our audit procedures.)

Parks Generally Complied with Local Law 20 and New York State Public Health Law §3000-b

Parks generally complies with Local Law 20, New York State Public Health Law §3000-b, and the Collaborative Agreement. Parks developed and maintained a Site-Specific Response and Maintenance Plan, placed AEDs so that the equipment can be accessed quickly at all times by persons trained in its operation, and had employees trained in AED operation and CPR by a training facility that has been approved by the New York State Department of Health. In addition, Parks' sites had procedures to be followed to notify the emergency medical services system through 911.

Parks' Collaborative Agreement had all the required elements of Local Law 20. These include specific plans for training employees; compliance with REMSCO; compliance with New York State Public Health Law §3000-b; establishment of procedures to notify 911 when an AED is used; and maintenance and testing of AEDs, including the filing of the AED reports. However, we found that Parks did not have a current signed agreement on file, and signage was missing in two locations. Nevertheless, these exceptions did not change our overall opinion that Parks generally complied with Local Law 20.

Parks Did Not Have a Current Signed Collaborative Agreement on File

According to provision 9 of the Collaborative Agreement, Parks' designee and "The Emergency Health Care Provider [physician or hospital designee] agree(s) to file a Collaborative Agreement every 2 (two years) from the date of the initial Collaborative Agreement." This provision is designed to ensure that Parks and the Emergency Heath Care Provider have agreed to the terms and conditions as set forth by Section 3000-b.

We found that the only signed Collaborative Agreement on file was dated April 28, 2010. However, we did find that all of the other terms of the Collaborative Agreement had been followed. Specifically, since the Collaborative Agreement was signed in 2010, Parks' designee remained the same and the doctor for the Emergency Health Care Provider was the same and in good standing with REMSCO. The doctor for these purposes is the New York City Fire Department's Chief Medical Director of the Office of Medical Affairs. A current signed copy of the Collaborative

Agreement ensures that all parties are aware of what is required and are held responsible to ensure public safety.

Recommendation

1. Parks should ensure that it has a current signed Collaborative Agreement on file with REMSCO-NYC.

Parks Response: "We agree and understand that a Collaborative Agreement Is required to be filed every two years from the date of the initial Collaborative Agreement. As Parks works to implement new requirements related to AEDs, we will ensure that a newly signed Collaborative Agreement is in place."

Missing AED Signage or Contact Information

We found that there were two instances of missing AED signage at Parks' sites. New York State Public Health Law §3000-b requires that the public access defibrillation providers post a sign or notice at the main entrance to the facility indicating the location where any such AED is stored or maintained. In addition, contact information for the facility's trained responder(s) must be posted. We found that the Ocean Breeze Athletic Complex on Staten Island did not have signage at the main entrance of the complex indicating the availability and locations of the AEDs within the complex. We also found that the signage at the site described as the "Arsenal West" (Manhattan) was missing the contact information of the facility's trained responder(s). (See Appendices I and II for additional details regarding the results of our audit procedures.)

Recommendation

2. Parks should ensure that all its parks and recreation centers have the required signage at the main entrance indicating the location of AEDs and the contact information of the site's trained responders.

Parks Response: "This matter has been addressed, and we have installed AED signage at the two locations indicated in the Report where it was previously found to be missing."

DETAILED SCOPE AND METHODOLOGY

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. This audit was conducted in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

We reviewed Parks' Site-Specific Response Plan and other pertinent documents and interviewed key Parks personnel. Additionally, between March 31, 2016, and April 21, 2016, we conducted site visits at 17 Parks facilities throughout the five boroughs that provide public services and performed 32 AED inspections. Some of these facilities had AEDs located on multiple floors or in multiple building locations. (See Appendix I.)

To achieve our objectives, we performed the following:

- Received training in CPR/AED;
- Reviewed Local Law 20;
- Reviewed New York State Public Health Law §3000-b;
- Reviewed Parks' Standard Operating Procedures for the AED program;
- Reviewed all AED training course materials;
- Reviewed and analyzed Parks' list of AED locations in the five boroughs;
- Reviewed Parks' list of AED-trained employees and determined their certification numbers;
- Determined whether the individuals giving AED training had proper qualifications;
- Reviewed and ensured whether the Site-Specific Response Plan was in place;
- Reviewed and analyzed Monthly/Daily logs of AED inspections to ensure compliance with Local Law 20;
- Reviewed and observed all signage related to AED locations and emergency contacts;
- Inspected AEDs located at the 17 Parks' facilities to determine if they were operational and if necessary supplies were available;
- Reviewed the list of employees responsible for verifying that AEDs are operable at each location; and
- Reviewed a copy of device registration and the Collaborative Agreement with REMSCO.

TEST RESULTS OF LOCAL LAW 20 AED COMPLIANCE

Location	Number of AEDs for Each Location	AED SIGNAGE CORRECT (YES/NO)	AED SERVICE LIGHT OPERATIONAL (YES/NO)	AED PADS EXPIRED (YES/NO)	REQUIRED SUPPLIES ATTACHED (Pocket mask, gloves, razors and gauze)		
		MA	NHATTAN				
Hamilton Fish	1	YES	YES	NO	YES		
Highbridge	1	YES	YES	NO	YES		
Arsenal Central Park	2	YES	YES	NO	YES		
Arsenal West	4	NO (only 1 of 4)	YES	NO	YES		
Arsenal North	1	YES	YES	NO	YES		
	BROOKLYN						
Fort Hamilton Senior Center	1	YES	YES	NO	YES		
Metropolitan Pool	1	YES	YES	NO	YES		
Litchfield Villa (Prospect Park)	1	YES	YES	NO	YES		

APPENDIX I

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Location	Number of AEDs for Each Location	AED SIGNAGE CORRECT (YES/NO)	AED SERVICE LIGHT OPERATIONAL (YES/NO)	AED PADS EXPIRED (YES/NO)	REQUIRED SUPPLIES ATTACHED (Pocket mask, gloves, razors and gauze)			
	QUEENS							
Lost Battalion Hall	2	YES	YES	NO	YES			
Vic Hanson (Rochdale Park)	1	YES	YES	NO	YES			
Flushing Meadows Corona Park	7	YES	YES	NO	YES			
	BRONX							
Poe Park Visitor Center	1	YES	YES	NO	YES			
St. James	1	YES	YES	NO	YES			
Van Cortlandt	1	YES	YES	NO	YES			
	STATEN ISLAND							
Conference House	1	YES	YES	NO	YES			
Ocean Breeze Athletic Complex	4	NO	YES	NO	YES			
Green Belt Nature Center	2	YES	YES	NO	YES			

TEST RESULTS OF LOCAL LAW 20 AND NEW YORK STATE PUBLIC HEALTH LAW §3000-b COMPLIANCE

Did the Site-Specific Response Plan specify the following	In Compliance (Yes/No)	
information:		
Trained Responder Information:	VEC	
1. A list of trained responders	YES	
2. The specific training they received	YES	
3. How they can be contacted	YES	
4. The location of the trained responders at the site	YES	
The provider of the AED/CPR training received by each trained	, who	
responder, the date the training was received as well as the due	YES	
dates for training recertification of each trained responder		
The specific location(s) of the AED(s) at the public place. The	YES	
AED(s) shall be in a location(s) accessible to the trained		
responder(s).		
The party responsible for verifying that the AED(s) is in	YES	
operable condition and for ensuring that the equipment is		
maintained in conformity with the manufacturer's		
recommendations		
The placement and exact locations of the signs required, along	YES	
with the information on how to contact the site's trained		
responder(s)		
Medical Emergency Information:		
1. Instructions on how to identify an on-site medical emergency	YES	
2. A listing of procedures to be followed to notify trained		
responders of the existence of that emergency	YES	
Procedures to be followed to notify the emergency medical		
services system as to the existence of an on-site medical	YES	
emergency		
How the trained responder(s) will be dispatched to the location	YES	
of the medical emergency		
The procedures to be followed by the trained responder(s) at	YES	
the location upon their response to a medical emergency		
Procedures to be followed by trained responders upon their	YES	
transfer of care of an emergency to the emergency medical		
services system		
Instructions on how to document each use of an AED and	YES	
immediately report such usage in accordance with Public Health		
Law §3000-b		

Prospect Park





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City of New York Parks & Recreation

The Arsenal Central Park New York, NY 10065 www.nyc.gov/parks

June 10, 2016

Marjorie Landa
Deputy Comptroller for Audit
City of New York Office of the Comptroller
1 Centre Street, Room 1100
New York, NY 10007

Re: Audit Report on the Department of Parks and Recreation's Compliance with Local Law 20 and Placement of Automated External Defibrillators; SZ16-094A

Dear Deputy Comptroller Landa:

This letter addresses the findings and recommendations contained in the New York City Comptroller's Draft Audit Report ("Report"), dated May 27, 2016, on the above subject matter.

We are pleased that the Report found that Parks generally complies with Local Law 20 and with New York State Public Health Law §3000-b regarding the training and certifying of City personnel on the use of AEDs at Parks' facilities and recreational centers. It affirms that Parks maintains inspection reports and device registrations and is in compliance with provisions of our collaborative emergency health care provider agreement with REMSCO-NYC. The Report found that Parks developed and maintained a Site-Specific Response and Maintenance Plan, placed AEDs so that the equipment can be accessed quickly, at all times, by persons trained in its operation, and had employees trained in AED operation and CPR by a training facility that has been approved by the New York State Department of Health. It also found that Parks' sites had procedures to be followed to notify the emergency medical services system through 911.

In reference to the Report's Recommendations directed to Parks:

Recommendation 1 – Parks should ensure that it has a current signed Collaborative Agreement on file with REMSCO-NYC.

We agree and understand that a Collaborative Agreement is required to be filed every two years from the date of the initial Collaborative Agreement. As Parks works to implement new requirements related to AEDs, we will ensure that a newly signed Collaborative Agreement is in place.

Recommendation 2 – Parks should ensure that all its parks and recreation centers have the required signage at the main entrance indicating the location of AEDs and the contact information of the site's trained responders.

This matter has been addressed, and we have installed AED signage at the two locations indicated in the Report where it was previously found to be missing.

Finally, Parks wishes to thank you and your audit staff for the time and effort devoted to completing this report.

Sincerely,

David Cerron

Chief of Revenue, Concessions & Controls Oversight

Cc: George Davis (Mayor's Office of Operations), Ernestine Rivers Merritt (NYC Comptroller), Alyssa Cobb Konon (Parks), Phil Abramson (Parks)