



## **Legislative Background:**

New York City Local Law No. 91 of 2023, also known as the Harihareswara Expand Access to Rapid Treatment (HEART) Act directs the New York City Department of Health and Mental Hygiene (NYC Health Department) to produce a biannual report detailing locations and quantities of automated external defibrillators (AEDs) in public locations throughout the five boroughs. The intent of this law is to enhance public safety by ensuring availability of and access to AEDs during cardiac emergencies.

Per LL 91 of 2023, the NYC Health Department must identify: (1) location data for each such device; (2) location names; (3) location addresses; and (4) where practicable, placement of each device at a location, such as the floor, room, or stairwell. Additionally, the law directs the NYC Health Department to specify “whether each such automated external defibrillator is equipped with pediatric-attenuated pads or otherwise equipped with child-appropriate functionality.”

LL 91 of 2023 builds upon New York City Local Law No. 20 (2005) which requires placement of AEDs in specified public places, including nursing homes, senior centers, selected city-operated parks, city-owned and operated ferry terminals over a certain capacity, publicly accessible portions of buildings maintained by the Department of Citywide Administrative Service’s Division of Facilities Management and Construction, and golf courses, stadiums, and arenas.

New York State Public Health Law § 3000-b further specifies large health clubs as a required reporting entity and more broadly requires training for and registration of publicly available AED devices with a designated regional council. In New York City, this council is the Regional Emergency Medical Services Council of New York City, Inc (REMSCO-NYC).

## **Process and Findings:**

The NYC Health Department worked with REMSCO-NYC to publish AED location data on NYC Open Data, a free public data resource maintained by the New York City Office of Technology and Innovation. Those data are publicly available in [raw](#) and [mapped form](#).

The data shows comprehensive AED coverage across the five boroughs. However, the NYC Health Department could not report on the child-appropriate functionality of each device because the information is neither reported to nor collected by REMSCO-NYC. When flagged by the NYC Health Department, representatives from REMSCO-NYC emphasized that the latest AED models have become more sensitive/customizable based on the individual needing assistance and that the American Heart Association is expected to issue new guidance on recommended device models in 2025.

One significant implementation challenge is the frequency with which REMSCO-NYC receives updates from covered entities. Under NYS PHL § 3000-b, such entities are required to enter into a collaborative agreement with the regional emergency council and resubmit registration every two years. While entities should theoretically report any changes to their building registry as they occur, no enforcement mechanism exists to ensure that these updates are submitted between any two-year period. Thus, it is possible that some entries are outdated because an entity has closed, moved locations, or adjusted their building registry in some way during this time. The NYC Health Department is concerned that this may undermine the accuracy of LL 91’s six-month reporting requirements.