



# State of South Carolina

## Office of the Governor

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June 4, 2008

The Honorable Robert W. Harrell, Jr.  
Speaker of the House of Representatives  
Post Office Box 11867  
Columbia, South Carolina 29211

Dear Mr. Speaker and Members of the House:

I am hereby vetoing and returning without my approval H. 3723, R-322.

This legislation mandates that each school district develop and implement an automated external defibrillator (AED) program for public high schools. The AED is a portable device designed to allow non-medical personnel to administer an electric shock to a person in cardiac arrest.

Research has shown 100 incidences of this type occur annually in high schools and colleges across the nation. Using this figure, roughly one tragic death will occur per year in South Carolina high schools. Any death, especially one that can be avoided, is one too many, and in attempting to do something about the horror of a young person dying well before his or her time, this bill is well-intended. While we applaud this bill's aim to have AEDs present during unforeseen incidents, we have reservations about the way in which this bill does so for two specific reasons.

First, it is important to note that this bill supplies the mandate that schools provide AED's without the funding to accompany the mandate. We do not believe in unfunded mandates however virtuous the cause. If Washington demands that states do something, then it should pay for that which it requires. In the same vein, if Columbia mandates something, it should provide funding to go with the mandate.

While we recognize the state's role in setting policy within the school system, we believe that more education decisions ought to be made at the school and school district level. Parents and local leadership love their children no less than leaders in Columbia, and we trust them to decide for themselves how best to handle this need. In this case, mandating that each public high school purchase this device – costing between \$1,200 and \$3,000 each – goes against the notion of trusting and allowing communities to make decisions that they believe are in the best interest of their students.

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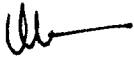
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Second, money to purchase these devices is available through private sources as well as the federal government. Almost half of our 256 public high schools already have AEDs. Some of the schools have acquired them through private sources such as hospital systems that donate the devices or through the South Carolina High School League. In fact, over the past five years, the League has provided \$1,000 each to 76 schools for these devices. On the federal level, in 2002, President George W. Bush signed the "Community Access to Emergency Devices Act." This Act authorizes \$30 million in federal grants to be made available to applicant states and localities for the purchase and placement of AEDs in public places where cardiac arrests are likely to occur.

Given these multiple sources of funding, I urge the high schools without an AED to look to their local community and pursue private donations or consider the available federal funds. For example, the high school booster club or parent-teacher association could contact the local hospital system or request an application from the South Carolina High School League. The point here is that this is a real need – a need that currently has money sources available both through public and private circles. Given these money sources would not be complemented at the state level, we think it is important to leave this decision at the local level.

For the above reasons, I am vetoing H. 3723, R-322, and respectfully ask for your support in upholding this veto.

Sincerely,



Mark Sanford