

Date of Hearing: April 26, 2023

ASSEMBLY COMMITTEE ON EDUCATION  
Al Muratsuchi, Chair  
AB 1473 (Maienschein) – As Amended March 23, 2023

**SUBJECT:** Student instruction: compression-only cardiopulmonary resuscitation: automated external defibrillators

**SUMMARY:** Requires school districts and charter schools to include instruction in compression-only cardiopulmonary resuscitation (CPR) and the use of an automated external defibrillator (AED) in health and physical education courses required for graduation from high school. Specifically, **this bill:**

- 1) Requires the governing board of a school district or the governing body of a charter school, as part of a physical education that is required for graduation to include, commencing with the 2024–25 school year, instruction in performing compression-only cardiopulmonary resuscitation CPR and the use of an AED.
- 2) Requires a course in health education which is required for graduation to include instruction in the use of an AED, in addition to currently required instruction in performing CPR.
- 3) Permits instruction to be based on an instructional program developed by a nationally accredited entity similar to the American Heart Association or the American Red Cross.
- 4) Requires that this instruction include the psychomotor skills necessary to use an AED, defined to mean skills that students are required to perform as hands-on practice to support cognitive learning using CPR and AED training tools.
- 5) Requires that if the governing board of the school district or the governing body of the charter school exempts a student who participates in a regular school-sponsored interscholastic athletic program from physical education courses, and a health education course is not required for graduation, the instruction in performing compression-only CPR and the use of an AED be provided during one team practice each season.
- 6) Requires the California Department of Education (CDE), before the commencement of the 2024–25 school year, to provide new guidance on how to implement these requirements, including, but not limited to, who may provide this instruction.
- 7) Encourages the governing board of a school district or the governing body of a charter school providing instruction in performing compression-only CPR and the use of an AED to use the most cost-effective means possible to implement that requirement.

**EXISTING LAW:**

- 1) Requires that, if the governing board of a school district or the governing body of a charter school requires a course in health education for graduation from high school, it include, commencing with the 2018–19 school year, instruction in performing compression-only CPR, and requires that this instruction include both:

- a) An instructional program based on national evidence-based emergency cardiovascular care guidelines for the performance of compression-only CPR, such as those developed by the American Heart Association or the American Red Cross; and
  - b) Instruction to students relative to the psychomotor skills necessary to perform compression-only CPR, defined to mean skills that students are required to perform as hands-on practice to support cognitive learning.
- 2) Requires that, before the commencement of the 2017–18 school year, the CDE to provide guidance on how to implement this requirement, including who may provide instruction.
  - 3) Encourages the governing board of a school district or the governing body of a charter school to provide to students general information on the use and importance of an AED.
  - 4) States that the physical presence of an AED in the classroom is not required.
  - 5) Authorizes the governing board of a school district or the governing body of a charter school to adopt policies to implement this requirement.
  - 6) Encourages the governing board of a school district or the governing body of a charter school providing instruction in performing compression-only CPR or information on the use of an AED to use the most cost-effective means possible to implement that requirement.
  - 7) States that this requirement shall not be construed to require the governing board of a school district or the governing body of a charter school to make any purchases, including, but not limited to, purchasing an AED.
  - 8) States that a local agency, entity of state or local government, or other public or private organization that sponsors, authorizes, supports, finances, or supervises the instruction of students in compression-only CPR or the use of an AED pursuant to this requirement shall not be liable for any civil damages alleged to result from the acts or omissions of an individual who received such instruction.
  - 9) States that a public employee who provides or facilitates the instruction of students in compression-only CPR or the use of an AED pursuant to this section shall not be liable for any civil damages alleged to result from the acts or omissions of an individual who received such instruction. States that this provision shall not be construed to grant immunity from civil damages to any person who provides or facilitates the instruction of students in compression-only CPR or the use of an AED in a manner that constitutes gross negligence or willful or wanton misconduct. (Education Code (EC) 51225.6)
  - 10) Requires a coach of an athletic activity to complete the coach's sudden cardiac arrest training course and to retake the training course every two years thereafter. States that a coach of an athletic activity shall not be eligible to coach an athletic activity until the coach completes the training course required. (Education Code (EC) 33479.6)
  - 11) Commencing July 1, 2019, for a school district or charter school that elects to offer any interscholastic athletic program:

- a) Requires the school district or charter school to acquire at least one automated external defibrillator (AED) for each school within the school district or the charter school;
- b) Requires the school district or charter school to ensure that the AED or AEDs are available to athletic trainers and coaches and authorized persons at these activities or events;
- c) Requires the school district or charter school to ensure that its AED or AEDs are maintained and regularly tested according to the operation and maintenance guidelines set forth by the manufacturer, the American Heart Association, or the American Red Cross, and according to any applicable rules and regulations set forth by the governmental authority under the federal Food and Drug Administration and any other applicable state and federal authority; and
- d) Encourages the school district or the charter school to ensure that the AED or AEDs are available for the purpose of rendering emergency care or treatment within a recommended three to five minutes of sudden cardiac arrest to pupils, spectators, and any other individuals in attendance at the athletic program's on-campus activities or events. (EC 35179.6)

**FISCAL EFFECT:** This bill has been keyed a state-mandated local program by the Office of Legislative Counsel.

**COMMENTS:**

***Need for the bill.*** The author states, "Sudden cardiac arrest is the number one killer of student athletes and leading cause on school campuses. Alarming, 70% of Americans feel helpless to act during a cardiac emergency because they do not know how to perform CPR. AB 1473 would require hands-only CPR and AED training in either health or physical education as part of the high school graduation requirements."

***Curriculum, standards, frameworks, and model curricula.*** California's public school curriculum is based on content standards in various subjects, including English-Language Arts, Mathematics, Science, History-Social Science, Physical Education, English Language Development, Career Technical Education, Health Education, World Languages, and Visual and Performing Arts. These standards are developed by the Instructional Quality Commission (IQC) through a public process, and are adopted by the State Board of Education (SBE).

These standards form the basis of California's curriculum frameworks - documents which guide the implementation of these standards. The frameworks establish criteria used to evaluate instructional materials. These criteria are used to select, through the state adoption process, instructional materials for kindergarten through grade eight. Frameworks also guide district selection of instructional materials for grades nine through twelve.

***State graduation requirements.*** Current law establishes state minimum high school graduation requirements for students attending LEAs and charter schools, including:

- Three courses in English;
- Two courses in mathematics, including one year of Algebra I;

- Two courses in science, including biological and physical sciences;
- Three courses in social studies, including United States history and geography; world history, culture, and geography; a one-semester course in American government and civics, a one-semester course in economics, and beginning in 2029-30, a one-semester course in ethnic studies;
- One course in visual or performing arts, world language, or career technical education; and
- Two courses in physical education.

Current law also permits school districts to establish local graduation requirements which exceed those of the state. Some school districts, like the Los Angeles Unified School District, require a course in health for graduation. No statewide data is collected on the number of school districts which require a health course.

***What is “hands-only” or “compression-only” CPR training?*** Hands-only CPR, also known as compression-only CPR, is conventional CPR without mouth-to-mouth resuscitation. According to the American Heart Association, hands-only CPR has been shown to be as effective as conventional CPR for sudden cardiac arrest at home, at work, or in public. Research indicates that this is due to a better willingness to start CPR by bystanders, a low quality of mouth-to-mouth ventilation, and a detrimental effect of too-long interruptions of chest compressions during ventilation.

Hands-only CPR involves two steps when a teen or adult collapses: 1) calling 9-1-1, and 2) pushing hard on the center of the person’s chest at the rate of 100 compressions per minute – roughly the same as the beat in the Bee Gees 1977 song “*Stayin’ Alive*.” For infants, children, victims of drowning or drug overdose, and people who collapse due to breathing problems, the American Heart Association still recommends CPR with compression *and* breaths.

***Health disparities in CPR training and bystander use.*** A 2013 study published in the Journal of the American Medical Association found wide disparities in CPR training, and that residents of the communities most in need of training are the least likely to be trained. The study, which examined national training rates, found that counties with the lowest rates of CPR training were more likely to have a higher proportion of African American and Latino residents, more likely to have a lower median household income, and were more likely to be rural (where it may take longer for emergency personnel to arrive).

Other research has demonstrated that low income individuals and African Americans are significantly less likely to receive bystander CPR when they experience sudden cardiac arrest, and that people who experience such an event in predominantly African American, low income neighborhoods are the least likely of all groups to receive bystander CPR treatment. This study attributed this disparity in CPR use to low rates of training in those communities.

***CPR high school graduation requirements in other states.*** According to the American Heart Association, twenty six other states have adopted CPR training as a high school graduation requirement. Among the larger states are Texas, New York, Virginia, North Carolina, Georgia, and New Jersey.

***CPR training in state health standards and curriculum framework.*** CPR instruction is part of the state’s health education content standards and corresponding curriculum framework. The

2008 standards include: “Describing procedures for emergency care and lifesaving, including CPR, first aid, and control of bleeding.”

The current Health Education Framework, adopted by the SBE in 2019, contains numerous references to CPR, and notes in the 7<sup>th</sup>-8<sup>th</sup> grade section:

Prompt initiation of CPR by trained bystanders can double survival rates. Research confirms that schools are able to offer CPR to students despite time and budget constraints (Hoyme and Atkins 2017). California Education Code Section 51225.6 supports students learning hands-only (chest compressions-only) CPR at the high school level, but CPR training can be provided to students in grade levels seven and eight. Schools and districts should consider providing funding for this potentially life-saving instruction. Local chapters of such organizations as the American Red Cross, the American Heart Association, local emergency medical service providers, or credentialed school nurses may be able to provide hands-only CPR training at little to no cost. Students should be encouraged to obtain their First Aid/CPR or babysitting safety certification that includes CPR certification.

In the 9<sup>th</sup> to 12<sup>th</sup> grade section, the Framework notes:

In districts that require students to complete a health education course to graduate from high school, student must receive CPR instruction prior to high school graduation. Districts are encouraged to provide training to all students even if the district is not required to by statute. Contact local chapters of such organizations as the American Red Cross or the American Heart Association and your local emergency medical service providers who may be able to provide CPR training at low or no cost. A credentialed school nurse or other school staff member may also be able to provide CPR training if they are certified to teach CPR.

There are far fewer mentions of the use of AEDs in the Framework. In the elementary grades the Framework encourages schools to teach students where the nearest AED is located and how to retrieve it. There is no mention of AEDs or education in their use in the secondary grades.

***Is it time for a health education graduation requirement?*** Numerous bills in recent years have proposed requiring instruction in health education content, including on mental health, CPR and AED use, bleeding control, fentanyl and other illegal drug abuse, teen dating violence prevention, and body shaming. Current law also requires that students receive instruction in comprehensive sexual health education and HIV prevention. As noted above, LEAs and charter schools may require a course in health as a local graduation requirement, and an unknown number do so. ***The Committee may wish to consider*** that there is considerable public interest in ensuring that students receive instruction in a wide range of topics in health education, but there is no required course in health education.

***Recommended Committee amendments.*** To conform with this Committee’s policy on curriculum measures, which discourages the introduction of measures which mandate instruction, ***staff recommends that this bill be amended to:*** 1) require that the IQC, when it next revises the Health Education curriculum framework, consider including content on the use of compression-only CPR and the use of AEDs, and 2) that it consider, when it next revises the Physical Education curriculum framework, including the same content as it relates to student safety in physical education and athletics.

**Arguments in support.** The Sudden Arrhythmia Death Syndromes Foundation writes, “It’s long been established that in a cardiac emergency immediate bystander intervention with hands-only cardiopulmonary resuscitation (CPR) and use of an automated external defibrillator (AED) prior to EMS arrival on average increases survival up to 72%. But studies continue to show that most Americans are unprepared to use either measure. California’s reporting to the Cardiac Arrest Registry to Enhance Survival shows that only ~40% of SCA victims receive bystander CPR and just ~7% a bystander-applied AED. What’s more, a witnessed sudden cardiac arrest adult or child victim who is Black or Hispanic or is in a Black or Hispanic neighborhood is less likely to receive bystander CPR. Current state law for CPR training in schools applies to school districts that mandate a health class as a graduation requirement. But the majority of California school districts do not offer a health class, which not only means scores of youth are deprived of these critical life-saving skills, but also presents health equity disparities across the state’s socio-economically diverse school communities. We can and should do better to equip all youth with this life-saving training so they have the power to not only save a life now, but to eliminate the tragedy of these preventable deaths in their lifetime.”

**Related legislation.** AB 1719 (Maienschein), Chapter 556, Statutes of 2016, requires, if the governing board of a school district or the governing body of a charter school requires a course in health education for graduation from high school, the governing board or body to include in that course, commencing with the 2018–19 school year, instruction in performing compression-only CPR.

AB 71 (Rodriguez) of the 2023-24 Session would require a school district or charter school which requires a course in health education for graduation from high school to include instruction in the methods of bleeding control, commencing in the 2025-26 school year.

AB 1362 (Davies) of the 2023-24 Session would authorize the physical education course of study for grades 7 to 12 to include content on the physical and mental dangers associated with the use of opioids, such as fentanyl, steroids, and other harmful addictive drugs.

SB 224 (Portantino), Chapter 675, Statutes of 2022, requires schools that offer one or more courses in health education to students in middle school or high school to include in those courses instruction in mental health, as specified.

AB 1639 (Maienschein), Chapter 792, Statutes of 2016, establishes the Eric Paredes Sudden Cardiac Arrest Prevention Act; requires the CDE to make available specified guidelines and materials on sudden cardiac arrest (SCA); requires students and parents to sign informational materials before athletic participation; requires training of coaches; and sets requirements for action in the event a student experiences specified symptoms.

AB 319 (Rodriguez) of the 2015-16 Session would have required school districts and charter schools to provide instruction on performing CPR and the use of an AED to students in grades 9-12 as part of a course required for graduation. This bill was held in the Assembly Appropriations Committee.

AB 2217 (Melendez), Chapter 812, Statutes of 2014, authorizes a public school to solicit and receive non-state funds to acquire and maintain an AED, and provides that school districts and their employees are not liable for civil damages resulting from certain uses of an AED.

AB 939 (Melendez) of the 2013-14 Session would have stated the intent of the Legislature to encourage all public schools to acquire and maintain at least one AED, and would have authorized a public school to solicit and receive non-state funds to acquire and maintain an AED. This bill was held in the Senate Appropriations Committee.

SB 1346 (Lowenthal), Chapter 71, Statutes of 2012, extended indefinitely the minimum training standards and immunity from civil damages in connection with the use of AEDs. This bill was held in the Assembly Education Committee.

SB 63 (Price) of the 2011-12 Session would have required all public high schools to acquire and maintain at least one AED. This bill was held in the Senate Appropriations Committee.

**REGISTERED SUPPORT / OPPOSITION:****Support**

Avive Solutions  
California Athletic Trainers Association  
County of San Diego  
Grossmont Healthcare District  
Habematolel Pomo of Upper Lake  
Heartfelt Cardiac Connections  
In a Heartbeat  
Just1mike  
Kyle J. Taylor Foundation  
Philips Electronics North America  
State Superintendent of Public Instruction Tony Thurmond  
Sudden Arrhythmia Death Syndromes Foundation  
Travis R. Roy Sudden Cardiac Arrest Fund  
Via Heart Project  
3 individuals

**Opposition**

None on file

**Analysis Prepared by:** Tanya Lieberman / ED. / (916) 319-2087