
SENATE COMMITTEE ON EDUCATION

Senator Carol Liu, Chair
2015 - 2016 Regular

Bill No: AB 1719
Author: Rodriguez
Version: April 21, 2016
Urgency: No
Consultant: Lenin DelCastillo
Hearing Date: June 15, 2016
Fiscal: Yes

Subject: Pupil instruction: cardiopulmonary resuscitation

NOTE: This bill has been referred to the Committees on Education and Judiciary. A “do pass” motion should include referral to the Committee on Judiciary.

SUMMARY

This bill requires school districts and charter schools serving students in grades 9-12 to offer instruction in compression-only cardiopulmonary resuscitation (CPR) as part of a required course, commencing in the 2018-19 school year.

BACKGROUND

Existing law:

- 1) Establishes high school graduation requirements, including three years in English, two years in math, and two years of physical education, and permits school districts to establish graduation requirements which exceed those required by the state. (Education Code § 51225.3)
- 2) Requires, through the adopted course of study, that schools provide instruction at the appropriate grade levels on personal and public safety and accident prevention, including emergency first aid instruction, instruction in hemorrhage control, treatment for poisoning, resuscitation techniques, and CPR when appropriate equipment is available. (Education Code § 51202)
- 3) Provides that no person certified to teach CPR by the American Red Cross or the American Heart Association, and no local agency, entity of state or local government, or other public or private organization which sponsors, authorizes, supports, finances, or supervises the training of citizens in cardiopulmonary resuscitation can be held liable for any civil damages alleged to result from such training programs. (Civil Code § 1714.2)
- 4) Provides that a person or entity who provides CPR training to a person who renders emergency care is not liable for any civil damages resulting from any acts or omissions of the person rendering the emergency care. (Civil Code § 1714.21)

ANALYSIS

This bill:

- 1) Requires, starting with the 2018-19 school year, school districts and charter schools to provide instruction in compression-only cardiopulmonary resuscitation (CPR) as part of an existing course for grades 9-12. Specifically, this bill:
- 2) Requires the instruction to include both of the following:
 - 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.
 - b) Instruction to pupils relative to the psychomotor skills necessary to perform compression-only CPR. Defines “psychomotor skills” as skills that pupils are required to perform as hands-on practice to support cognitive learning.
- 3) Requires the California Department of Education (CDE), prior to the beginning of the 2017-18 school year, to provide guidance on how to implement the instructional requirements of this bill, including, but not limited to, who may provide instruction.
- 4) Encourages school districts and charter schools to provide pupils general information on the use and importance of an automated external defibrillator (AED). Specifies that the physical presence of an AED in the classroom is not required.
- 5) Provides that a school district or charter school may adopt policies to implement the requirements of the bill.
- 6) Encourages a school district or charter school to use the most cost-effective means possible to implement these requirements.
- 7) Provides 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 pupils, or an employee who provides or facilitates instruction in compression-only CPR or the use of an AED, shall not be held liable for any civil damages alleged to result from the acts or omissions of an individual who received such instruction.
- 8) Specifies that this liability does not grant immunity from civil damages to any person who provides or facilitates the instruction of pupils in compression-only CPR or the use of an AED in a manner that constitutes gross negligence or willful or wanton misconduct.

STAFF COMMENTS

- 1) ***Need for the bill.*** The author's office indicates that "sudden cardiac arrest is one of the most lethal public health threats in the United States, and sadly only 10% of people who suffer cardiac arrest outside the hospital survive. If no cardiopulmonary resuscitation (CPR) is provided or no defibrillation occurs within three to five minutes of collapse, the chances of survival drop. Effective bystander only CPR provided immediately after sudden cardiac arrest can double or triple a victim's chance of survival. Alarming, 70% of Americans may feel helpless to act during a cardiac emergency because they do not know how to perform only cardiopulmonary resuscitation (CPR) and only 32% of cardiac arrest victims get CPR from a bystander. CPR training is sensible and affordable and can easily fit into existing classes. In fact, instruction in CPR and automated external defibrillators (AED) is part of the existing curriculum framework found in the Health Education Content Standards for public schools. AB 1719 seeks to expand upon this current policy and ensure that every high school student in California receives this important, life-saving training."
- 2) ***Compression-only CPR training?*** Compression-only CPR is conventional CPR without mouth-to-mouth resuscitation. According to the American Heart Association, compression-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 lengthy interruptions of chest compressions during ventilation. Compression-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. 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.
- 3) ***CPR training in state health standards and curriculum framework.*** CPR instruction is part of the state's health 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." However, existing law does not require a health course for graduation so not all students receive instruction in CPR.
- 4) ***Impact on core academic courses?*** Notwithstanding the benefits that may result, by requiring school districts and charter schools to offer the instruction as part of a required course, this bill could have the effect of taking away valuable instructional time from a core academic course and/or high school graduation requirement. Additionally, the bill does not specify whether the instruction would be offered annually for all students or only on a one-time basis. However, the sponsors of this measure, the American Red Cross and the American Heart Association/American Stroke Association indicate that the required instruction would only take approximately 30 minutes of class time. To help mitigate the potential negative impact on the state required courses for graduation and provide additional flexibility, **staff recommends** an amendment that specifies

that the instruction could also be provided as part of a locally required and that a student only needs to receive the instruction once during his or her tenure in high school.

- 5) ***Fiscal impact.*** According to the Assembly Appropriations Committee, this bill would result in Proposition 98/GF state mandated costs, potentially in the low millions, starting in 2017-18, for school districts to provide instruction in compression-only cardiopulmonary resuscitation (CPR) to students in grades 9-12. Actual costs will vary depending on how a district chooses to implement the provisions of the bill. Charter schools will also incur costs to implement the requirements of the bill; however, charter schools are not eligible for mandate reimbursement.

School districts may have access to instruction through in-kind donations from community partners, such as hospitals or fire departments. Other districts may need to provide instruction using existing district staff who will need time to review online training videos and prepare lesson plans. San Francisco Unified School District (SFUSD), for example, was able to provide training through an in-kind donation from the local fire department, however; according to SFUSD, the district dedicated approximately \$68,000 towards their hands-on CPR program. There are 420 school districts that serve students in grades 9-12. If one-fourth of these districts needed to make an investment similar to SFUSD, statewide costs would be approximately \$7.1 million.

There would also be General Fund administrative costs to California Department of Education (CDE) of approximately \$32,000 to provide guidance documents and provide technical assistance to districts and charter schools.

- 6) ***Related legislation.***

AB 1639 (Maienschein, 2016) establishes the Sudden Cardiac Arrest Prevention Act and requires the CDE to make available specified guidelines and materials on sudden cardiac arrest. This bill is scheduled to be heard by this Committee on June 29, 2016.

AB 319 (Rodriguez, 2015) required school districts and charter schools to provide instruction on performing CPR and the use of an automated External Defibrillator (AED) to students in grades 9-12 as part of a course required for graduation. This measure failed passage in the Assembly Appropriations Committee.

AB 2217 (Melendez, Chapter 812, Statutes of 2014) authorizes a 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.

SUPPORT

American Heart Association/American Stroke Association
American Red Cross
Association of California Healthcare Districts
California Association for Health, Physical Education, Recreation and Dance
City of Los Angeles
Service Employees International Union

OPPOSITION

None received.

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