

CONCURRENCE IN SENATE AMENDMENTS

CSA1 Bill Id:AB 310 Author:(Alanis)

As Amended Ver:July 7, 2025

Majority vote

SUMMARY

This bill delays the implementation of a requirement, from January 1, 2027 to January 1, 2028, that youth sports organizations ensure their athletes have access to an automated external defibrillator (AED) during any official practice or match. The bill also requires youth sports organizations to ensure that their coaches are certified to perform Cardiopulmonary Resuscitation (CPR) and operate an AED, and have a written cardiac emergency response plan, beginning January 1, 2027.

Senate Amendments

- 1) Move up the requirement, from January 1, 2028 to instead be January 1, 2027, that coaches of a youth sports organization are certified to perform CPR and operate an AED, and that there is a written cardiac emergency plan. (The January 1, 2028 deadline to ensure access to an AED remains unchanged.)
- 2) Deletes “bystanders” from the list of individuals that have responsibilities and training requirements as part of the cardiac emergency plan.
- 3) Require the annual electronic communication to parents about the location of any AEDs to also include the cardiac emergency response plan.
- 4) Delete the requirement that there be an announcement over a public address system, or if there is no public address system, then a centralized posting of a written notice, of the location of any AEDs.

COMMENTS

Background. According to the American College of Cardiology (ACC), when playing sports, an athlete’s heart is working faster and pumping harder. Adrenaline is pumped throughout the body, and the heart needs more oxygen than normal. Dehydration, fever, or changes in electrolytes can also play a part. In people whose hearts are not normal to begin with, these extra stresses can sometimes trigger the electrical system of the heart and cause sudden cardiac arrest (SCA). While rare, SCA is the leading medical cause of death in young athletes. ACC states that warning signs during exercise include passing out, dizziness, chest pain, shortness of breath, and seizures. The Centers for Disease Control and Prevention estimates that every year in the U.S., approximately 2,000 patients younger than 25 years will die of SCA. The likelihood of child and young adult SCA for those with underlying cardiovascular disease is increased by athletic participation. According to a study published in December 2017, a loss of consciousness in athletes during sports activity is usually not immediately recognized as SCA and time is wasted by checking breathing and body movement. Immediate CPR and defibrillation with an AED should be initiated if an athlete is experiencing SCA. Without defibrillation, the probability of surviving declines by 10% per minute.

Background on AEDs. According to the American Heart Association (AHA), an AED is a lightweight, portable device that delivers an electric shock through the chest to the heart. The

shock can stop an irregular rhythm and allow a normal rhythm to resume in a heart in sudden cardiac arrest. The AED has a built-in computer, which assesses the patient's heart rhythm, determines whether the person is in cardiac arrest, and signals whether to administer the shock. Inside the AED box are pads and a diagram that shows where to place them on the bare skin. Once the device is turned on, a voice tells the person using it exactly what to do. The AHA states that more than 15% of out-of-hospital cardiac arrests occur in a public location, and therefore public access AEDs and community training have a large role to play in early defibrillation. However, the number of patients who have an AED applied by a bystander remains low, occurring after only 10.2% of public cardiac arrests. According to the AHA, nine in ten cardiac arrest victims who receive a shock from an AED in the first minute live. The AHA states that children over age eight can be treated with a standard AED, and for children ages one through eight, the AHA recommends the pediatric attenuated pads that are purchased separately.

CPR and AED certification training. There are many organizations that offer certification classes in CPR and AED use, and most classes combine CPR and AED training into one class. The American Red Cross offers combination CPR/AED online-only classes for \$37, though the Red Cross notes that this class is not Occupational Safety and Health Administration (OSHA) workplace compliant, which requires an additional instructor-led skill session within 90 days of completing the online course. The Red Cross also offers Adult and Pediatric CPR/AED courses that combine both online and classroom instruction, or classroom only, and that meet OSHA workplace requirements. Costs vary, with local prices in Sacramento ranging from \$59 to more than \$100. Other organizations offer much less expensive options, though they are generally online only: the National CPR Foundation offers online certification classes for \$14.95, while NFHS offers an online CPR and AED training program for \$10 that it developed in partnership with the Vanderbilt Youth Sports Health Center to specifically help school programs.

According to the Author

“This bill strengthens the Nevaeh Youth Sports Safety Act from 2023 to further California’s commitment to providing safe and fun access to youth sports programs. Sudden cardiac arrest is the number one cause of death among student athletes. When sudden cardiac events take place, timely intervention is critical. This bill will require youth sports organizations to have a written emergency response plan in place that includes the location of an AED and outlines standard procedures for responding to a cardiac emergency. The bill would also require that youth sports organizations properly maintain and test their AED(s) and that coaches are trained to use an AED. This bill aims to provide more clarity on the Nevaeh Youth Sports Safety Act by enhancing protections and offering families a greater sense of safety and confidence in the programs that their children participate in.”

Arguments in Support

This bill is sponsored by the Eric Paredes Save a Life Foundation, which states that this bill corrects a conflict from the Nevaeh Youth Sports Safety Act where the language suggests that only certified individuals are allowed to administer an AED. The sponsor points out that existing law does not limit who can use an AED in a sudden cardiac arrest emergency. Additionally, this bill would require a youth sports organization to have a written emergency response plan that identifies the location of the AED, requires the plan to be reviewed annually, and requires coaches to be CPR/AED certified every two years. The sponsors state that research continues to show a critical lack of awareness about AEDs, which, when used within minutes of collapse, could flip the outcome for a sudden cardiac arrest victim to a near 90% survival rate. Numerous organizations support this bill. The California Coalition for Children’s Safety and Health states

in support that it recommends, just like the legislature has done to address sports related concussions, that coaches, assistant coaches, parents, and athletes should have knowledge about sports related cardiac arrest, CPR and AED knowledge, and this bill is a step in the right direction. The California Chapter of the American College of Cardiology states that by supporting the use of CPR and AEDs, cardiologists aim to improve survival rates and outcomes for sudden cardiac arrest victims.

Arguments in Opposition

A number of youth sports organizations, including California Youth Soccer Association – North (Cal North), Elk Grove Youth Baseball, and many others, submitted oppose unless amended letters to a prior version of this bill. These organizations pointed out that this bill is building on previous legislation, AB 1467 from 2023, which required all youth sports organizations to ensure AED access during practices and matches. It is unclear whether recent amendments, which in part delayed the implementation of the AED requirement in AB 1467 to 2028, have addressed these concerns. Opponents stated that while they appreciate the intent of these bills, fulfilling these obligations imposes significant financial challenges on youth sports organizations. Opponents argued that the combined costs of this bill and AB 1467 is substantial, and will likely require organizations to double or triple their per-player fees, potentially pricing many families out of youth sports. These organizations requested amendments to require cities, counties, and park districts to provide AEDs at public parks. These organizations stated that it is reasonable to require local governments to make AEDs available at their facilities, and that AEDs can be securely stored and accessed with a code provided during emergencies, significantly reducing costs for sports organizations.

FISCAL COMMENTS

None. This measure was keyed non-fiscal by the Legislative Counsel.

VOTES:

ASM ARTS, ENTERTAINMENT, SPORTS, AND TOURISM: 9-0-0

YES: Ward, Lackey, Elhawary, Jeff Gonzalez, McKinnor, Ortega, Quirk-Silva, Valencia, Zbur

ASSEMBLY FLOOR: 61-0-19

YES: Addis, Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Ávila Farías, Bains, Berman, Bonta, Bryan, Calderon, Caloza, Carrillo, Castillo, Connolly, Davies, Dixon, Elhawary, Ellis, Fong, Gallagher, Garcia, Gipson, Jeff Gonzalez, Mark González, Hadwick, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lackey, Lowenthal, Macedo, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Pellerin, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Blanca Rubio, Sanchez, Schultz, Solache, Soria, Stefani, Ta, Tangipa, Valencia, Wallis, Wicks, Wilson, Rivas

ABS, ABST OR NV: Bauer-Kahan, Bennett, Boerner, Chen, DeMaio, Essayli, Flora, Gabriel, Lee, Papan, Patel, Patterson, Petrie-Norris, Quirk-Silva, Rogers, Schiavo, Sharp-Collins, Ward, Zbur

SENATE FLOOR: 38-0-2

YES: Allen, Alvarado-Gil, Archuleta, Arreguín, Becker, Blakespear, Caballero, Cervantes, Choi, Cortese, Dahle, Durazo, Gonzalez, Grayson, Grove, Hurtado, Jones, Laird, Limón, McGuire, McNerney, Menjivar, Niello, Ochoa Bogh, Padilla, Pérez, Reyes, Richardson, Rubio,

Seyarto, Smallwood-Cuevas, Stern, Strickland, Umberg, Valladares, Wahab, Weber Pierson,
Wiener

ABS, ABST OR NV: Ashby, Cabaldon

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