CONCURRENCE IN SENATE AMENDMENTS
AB 387 (Alanis)
As Amended August 21, 2026
Majority vote

SUMMARY

AB 387 revises the requirement that a youth sports organization ensure its athletes have access to an Automated External Defibrillator (AED) during any official practice or match, starting January 1, 2028, by allowing a public or private local facility with a permanent sports infrastructure to procure and maintain an AED, in which case the public or private local facility would be responsible for ensuring access to the AED.

Senate Amendments
Senate Amendments deleted the original contents of the Assembly's version of this bill, and instead:

1) Revises the requirement that a youth sports organization ensure its athletes have access to an AED during any official practice or match, by assigning responsibility for ensuring access to an AED as follows:

    a) Permits a public or private local facility with a permanent sports infrastructure, as defined by this bill, to procure and maintain an AED for use during an official practice or match permitted by the facility, and in these cases, requires the facility to ensure that the youth sports organization as access to the AED; or,

    b) If an AED is not available at a public or private local facility, requires the youth sports organization to ensure there is access to an AED.

2) Defines "permanent sports infrastructure," as a fixed, non-temporary facility or structure designed and maintained for the purpose of hosting organized sports activities that is regularly permitted, rented, leased, or otherwise granted permission of use for youth sports programs.

3) Clarifies that a public or private local facility with a permanent sports infrastructure, in addition to a youth sports organization, is required to ensure that its AED is maintained and tested.

4) Requires a public or private local facility to work in collaboration with the youth sports organization to ensure that any AED that is installed at the public or private local facility is accessible to youth sports organizations at the time of official practices or matches permitted by the facility.

5) Requires a public or private local facility that has installed an AED at the facility to work with the youth sports organization to identify means to share the financial costs associated with ensuring that the AED is maintained and accessible at the facility.

6) Prohibits this bill from being construed to require a public or private local facility or its employees from being required to procure or install an AED or to operate or administer an AED in the event of a cardiac emergency.

7) Prohibits this bill from being construed to impose a mandatory duty pursuant to a provision of law that specifies that where a public entity is under a mandatory duty designed to protect against the risk of a particular kind of injury, the public entity is liable for an injury of that kind proximately caused by its failure to discharge the duty.

8) Prohibits this bill from being construed to affect the availability of any immunity otherwise applicable to the public or private local facility or its employees.

COMMENTS

Background. According to the National Heart, Blood, and Lung Institute, sudden cardiac arrest (SCA) is a condition in which the heart suddenly and unexpectedly stops beating, and usually causes death if not treated within minutes. SCA is not the same as a heart attack. A heart attack is when blood flow to the heart is blocked (a ″circulation″ problem), and SCA is when the heart malfunctions and suddenly stops beating unexpectedly (an ″electrical″ problem). However, SCA can happen after or during recovery from a heart attack. Ventricular fibrillation (v-fib), a type of arrhythmia, causes most SCAs. During v-fib, the heart′s lower chambers do not beat normally, and instead quiver very rapidly and irregularly and little or no blood is pumped to the body. Other problems with the heart′s electrical system can also cause SCA. For example, SCA can occur if the rate of the heart′s electrical signals becomes very slow and stops. SCA also can occur if the heart muscle does not respond to the heart′s electrical signals. Coronary heart disease; severe physical stress; certain inherited disorders; and structural changes in the heart can also cause SCA.

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 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.

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 SCA. 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 to 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.

According to the Author
"This bill would require public or private local facilities with a permanent sports infrastructure, that have installed an AED, ensure youth sports organizations have access to those AEDs. SCA is the number one killer of student athletes. Having an AED present during official practices or matches can be the difference between life and death for youth athletes. Timely intervention of SCA remains critical for the safety of youth athletes. This bill would continue to require youth sports organizations to be responsible for ensuring athletes have access to AEDs during official practices or matches if the facility has not installed an AED."

Arguments in Support
This bill is supported by American Youth Soccer Organization (AYSO), which states that this bill represents a thoughtful, practical approach to improving athlete safety without placing undue burdens on the volunteer-driven programs that form the backbone of youth sports. This bill allows organizations to continue delivering safe, inclusive, and accessible opportunities for children to play, grow, and thrive. AYSO states that passing this bill is vital to ensuring youth sports remain a positive and sustainable part of California's communities.

The Eric Paredes Save a Life Foundation supports this bill, stating that this bill builds upon California's existing youth sports safety standards by closing a loophole requiring public and private local facilities with permanent sports infrastructure to procure, maintain, and provide access to AEDs during youth sports activities. According to the Eric Paredes Save a Life Foundation, SCA is the leading cause of death on school campuses and number one killer of student athletes, and that an estimated 23,000 youth are stricken annually by cardiac conditions across the country. Fragmented youth leagues often travel across various fields and lack the financial capability or permanent authority to manage physical hardware at the facilities they rent. This bill ensures life-saving equipment remains reliably on-site, fully functional, and accessible precisely when a cardiac emergency happens.

Arguments in Opposition
None on file. All prior opposition was to a previous version of this bill.

FISCAL COMMENTS

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

VOTES:

ASM JUDICIARY: 11-1-0
YES: Kalra, Dixon, Bauer-Kahan, Bryan, Connolly, Harabedian, Pacheco, Papan, Sanchez, Stefani, Zbur
NO: Essayli

ASSEMBLY FLOOR: 67-0-13
YES: Addis, Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Ávila Farías, Bains, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Castillo, Chen, Connolly, Davies,

DeMaio, Dixon, Elhawary, Ellis, Flora, Fong, Gallagher, Gipson, Jeff Gonzalez, Mark González, Haney, Harabedian, Hoover, Jackson, Kalra, Krell, Lackey, Lowenthal, Macedo, McKinnor, Muratsuchi, Nguyen, Pacheco, Papan, Patel, Patterson, Pellerin, Quirk-Silva, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca Rubio, Sanchez, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Tangipa, Wallis, Wicks, Wilson, Zbur, Rivas
ABS, ABST OR NV: Bauer-Kahan, Essayli, Gabriel, Garcia, Hadwick, Hart, Irwin, Lee, Ortega, Petrie-Norris, Ramos, Valencia, Ward

SENATE FLOOR: 40-0-0
YES: Allen, Alvarado-Gil, Archuleta, Arreguín, Ashby, Becker, Blakespear, Cabaldon, 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

UPDATED

VERSION: August 21, 2026

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