



## IN BRIEF

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SB 1397 will require high occupancy buildings that undergo renovations to be equipped with an automated external defibrillator (AED).

## THE PROBLEM

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Sudden cardiac arrest kills nearly 1,000 people per day in the United States and ends the lives of 350,000 people annually. It can happen to anyone, anytime, anywhere and at any age. During a sudden cardiac arrest heart function ceases abruptly and without warning. When this occurs, the heart is no longer able to pump blood to the rest of the body.

The average response time for a 911 call is 8 to 12 minutes. Each minute defibrillation is delayed a person's chance of survival is reduced about 10 percent.

The single most effective intervention during sudden cardiac arrest is the use of an AED which can safely restore the heart's normal rhythm.

Existing law requires most newly-constructed large-occupancy buildings to have an AED on the premise (*Health and Safety Code Section 19300*). However, AEDs are not required in large-occupancy buildings that undergo modifications, renovations, or tenant improvements. Installing more AEDs in buildings throughout the state means that more lives will likely be saved from those suffering sudden cardiac arrest.

## BACKGROUND

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AEDs are lightweight portable devices that run on an internal battery. A built-in computer in the AED checks a sudden cardiac arrest victim's heart rhythm and independently determines if a shock is needed. If necessary, the AED delivers a shock through electrodes in a pad placed on the victim's chest which can stop an irregular rhythm and allow a normal rhythm to resume. The AED literally "talks you through" a series of simple steps using audible voice prompts, making AEDs easy to use for nearly anyone.

Legislation enacted in 1999 encouraged the installation and use of AEDs in commercial buildings by providing qualified immunity to

commercial property owners who installed AEDs in their buildings. That legislation (SB 911, Figueroa) put in place a number of requirements for property owners who installed AEDs and Good Samaritans who use them in order to obtain qualified immunity from civil liability.

Two bills were recently enacted to modernize AED installation and immunity laws. SB 287 (Hueso, Chapter 449, Statutes of 2015) requires most new buildings with capacities of 200 persons or greater to have an AED on the premises. SB 658 (Hill, Chapter 264, Statutes of 2015) streamlined state requirements that commercial building owners and public facilities need to follow to be immune from liability if they have AEDs on their property. Before SB 658, facilities like schools, office buildings, stadiums and shopping malls that had AEDs were only immune from liability if they met onerous conditions, including costly training and medical oversight requirements. SB 658 modernizes liability requirements with more basic safeguards such as battery checks, maintenance, posting of instructions next to the device, and an annual demonstration for building tenants.

## THE SOLUTION

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SB 1397 extends AED installation requirements applicable to new development to large-occupancy buildings that undergo \$100,000 of tenant improvements or building renovations in one calendar year.

The bill exempts buildings that already have an AED and structures owned or operated by a local government.

The requirements of the bill will go into effect January 1, 2020.

## SUPPORT

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Racing Hearts (sponsor)  
American Heart Association  
American Red Cross  
California Business Properties Association  
California Medical Association  
Santa Clara County  
Silicon Valley Leadership Group

## **FOR MORE INFORMATION**

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