

SESSION OF 2024

**SUPPLEMENTAL NOTE ON SUBSTITUTE FOR HOUSE  
BILL NO. 2494**

As Amended by House Committee of the Whole

**Brief\***

Sub. for HB 2494, as amended, would require school districts to adopt cardiac emergency response plans based on the statewide standards developed by the Secretary of Health and Environment (Secretary), require automated external defibrillators (AEDs) to be accessible in each school district building, and require cardiopulmonary resuscitation (CPR) and AED training for each coach, sponsor, assistant, or aide of any school activity, and any other school district personnel designated under the bill.

The bill would also establish the School Cardiac Emergency Response Grant Program (Program) and create the School Cardiac Emergency Response Grant Fund (Fund).

The bill would take effect on and after January 1, 2025.

***Cardiac Emergency Response Plans (Sections 1, 2, and 3)***

***Statewide Standards***

The bill would require the Secretary to develop statewide standards for cardiac emergency response plans in accordance with nationally recognized guidelines.

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\*Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at <http://www.kslegislature.org>

### *School District Cardiac Emergency Response Plans*

The bill would require the board of education of each school district to adopt a comprehensive cardiac emergency response plan based on the statewide standards developed by the Secretary. Each board of education would be permitted to use any materials, documentation, video recordings, training modules, and certifications published by organizations focused on emergency cardiovascular care.

The cardiac emergency response plan would be required to include at least the following:

- Establishing a cardiac emergency response team;
- Identifying and implementing the placement of AEDs;
- Identifying roles and responsibilities of school district and emergency personnel in implementing the emergency response plan;
- Establishing procedures, such as the roles and responsibilities of school district personnel when responding to emergency cardiovascular incidents at school or at the site of any school-sponsored activity, that would include, but not be limited to:
  - Responding to individuals experiencing a suspected sudden cardiac arrest;
  - Summoning emergency medical services (EMS);
  - Assisting EMS providers; and
  - Documenting actions taken during such incident;
- Conducting routine maintenance and placement of AEDs in accordance with statewide standards;

- Rehearsing cardiac emergency response plans either prior to the beginning of each athletic season or prior to the beginning of each school year;
- Establishing communication systems with local EMS operating within the school district; and
- Developing a cardiac emergency response plan for school-sponsored events held at a location that is not on school district property.

In accordance with the cardiac emergency response plan, each school district would be required to maintain an AED in a public and readily accessible location in each school district building used for student attendance purposes. The location of each AED would be required to be marked by conspicuous signage.

#### *Reviewing Cardiac Emergency Response Plans*

Each board of education would be required to annually review the cardiac emergency response plan and adopt any changes to such plan as necessary.

The bill would also require a school building administrator review the cardiac emergency response plan with all school personnel at each school operated by the school district prior to the first instructional day of each school year. The time and date of such review would be documented as part of the plan. After the last instructional day of each school year, the cardiac emergency response plan would be reviewed by all school building administrators, school nurses, and appropriate local law enforcement officers and EMS personnel.

#### *Submitting Cardiac Emergency Response Plans*

Each school district would be required to submit a copy of the adopted cardiac emergency response plan and, if

changes are made to such plan, a copy of the amended plan to the Secretary. Additionally, each school district would be required to provide a copy of its cardiac emergency response plan to the appropriate local law enforcement agencies, EMS, and all school district personnel.

### *Implementing Cardiac Emergency Response Plans*

The bill would require each board of education to implement the adopted cardiac emergency response plan as the school district has sufficient unencumbered funds available to implement such plan. Should sufficient unencumbered funds not be available, the bill would permit a cardiac emergency response plan to be partially implemented as funds are available and deemed necessary by the district's board of education.

### ***CPR and AED Training (Section 2)***

The bill would require the following personnel to receive training in CPR and AED administration in accordance with the school district's cardiac emergency response plan:

- Coaches, including any head coach, assistant coach, or aide;
- Sponsors, including the head sponsor, assistant, or aide of any school activity; and
- School district personnel designated in the cardiac emergency response plan.

CPR and AED training would be reviewed and modified as necessary in accordance with the school district's cardiac emergency response plan.

Further, the bill would require at least one individual with CPR and AED training to be physically present in the school district building when any school-sponsored athletic practice

or competition or other school-sponsored activity occurs in such school district building and have access to an AED and first-aid supplies. The bill would require notice of such individual's presence in the building to be provided to the coach, sponsor, or other coordinator of such practice, competition, or other activity as required by the cardiac emergency response plan.

### ***Good Samaritan Protection (Section 2)***

The bill provides that any person who in good faith renders emergency care or treatment or who provides training as required by the provisions of the bill would not be held liable for any damages.

### ***The School Cardiac Emergency Response Grant Program (Section 4)***

The bill would establish the Program to be administered by the Kansas Department of Health and Environment (KDHE). Each school district would be able to submit an application to the Secretary in such form and manner prescribed by the Secretary for an amount of grant moneys needed to implement such school district's cardiac emergency response plan. Each grant application would be required to include the following:

- A copy of the current school district cardiac emergency response plan;
- All policies and procedures adopted for the implementation of such cardiac emergency response plan; and
- A description of the school improvements necessary for such implementation.

The Secretary would review all submitted applications and approve or deny such applications based on whether the

applicant school district demonstrated the necessity of the school improvements described in the application. If approved, the Secretary would also determine the amount of moneys to be disbursed to the applicant school district from the Fund. If denied, the Secretary would send written notice of such denial to the superintendent of the school district within 15 days of the denial.

***The School Cardiac Emergency Response Grant Fund  
(Section 4)***

The bill would establish, in the State Treasury, the Fund to be administered by KDHE. All expenditures from the Fund would be required to be used for the disbursement of grant moneys for school improvements related to cardiac emergency response plans.

The Fund would be subject to appropriation.

**Background**

The bill was introduced in the House Committee on Education at the request of Representative Thomas.

***House Committee on Education***

In the House Committee hearing, **proponent** testimony was provided by Senator Warren, representatives of the American Heart Association and Children's Mercy, and four private citizens. Proponents emphasized the importance of having cardiac emergency response plans and AEDs available at schools and school-sponsored events.

Written-only proponent testimony was provided by the Kansas EMS Association.

Neutral testimony was provided by representatives of the Kansas Association of School Boards, Kansas National

Education Association, Kansas State Board of Education, and United School Administrators of Kansas. The conferees generally stated concerns about the provisions related to safe and secure schools and requiring the Kansas State Board of Education to develop statewide standards for cardiac emergency response plans.

Written-only neutral testimony was provided by a representative of the Kansas State High School Activities Association.

No other testimony was provided.

The House Committee amended the bill to:

- Remove provisions pertaining to school safety and security plans and the School Safety and Security Grant Fund;
- Require the Secretary to develop statewide standards for cardiac emergency response plans and review each school district's plan [*Note*: The bill as introduced would have required the State Board of Education to develop statewide standards.];
- Clarify requirements related to each school district's development and implementation of cardiac emergency response plans; and
- Exempt from liability for any damages any person who in good faith renders emergency care or treatment or provides training in accordance with the provisions of the bill.

The House Committee recommended a substitute bill to incorporate the amendments.

### ***House Committee of the Whole***

The House Committee of the Whole amended the bill to:

- Modify the requirements pertaining to the frequency at which CPR and AED training must be conducted, reviewed, and modified;
- Require at least one individual with CPR and AED training to be physically present in the school district building and have access to an AED and first-aid supplies when any school-sponsored athletic practice or competition or other school-sponsored activity occurs in such school district building; and
- Require notice to be provided to the coach, sponsor, or other coordinator of such practice, competition, or other activity as required by the cardiac emergency response plan that an individual with CPR and AED training is present in the building.

### **Fiscal Information**

According to the fiscal note prepared by the Division of the Budget on the bill, as introduced, the Kansas Department of Education (KSDE) indicates it has administered a similar program to the School Safety and Security Grant Program since FY 2019 with annual grants to school districts totaling \$5.0 million. For FY 2025, the Governor recommends the program continue with a \$5.0 million appropriation from the State General Fund (SGF). KSDE has 2.00 FTE positions for this existing grant program, with expenditures totaling approximately \$170,000 from the SGF, for salaries and wages, including benefits, of these positions. KSDE would utilize these same sources of funding for the School Safety and Security Grant Program outlined in the bill.

For the School Cardiac Emergency Response Program, KSDE indicates that it does not currently have any staff with expertise in cardiac emergency response. As a result, the agency estimates it would require an additional 2.00 FTE positions and \$170,000 from the State General Fund in FY 2025. A similar cost estimate was provided by the agency for FY 2026. These staff members would coordinate with various state and local agencies for the creation and maintenance of cardiac emergency response plans that are required to be adopted by school districts. Costs for FY 2026 would be similar to those identified by KSDE in FY 2025.

KDHE estimates that to administer its grant program and to provide quality technical assistance, FY 2025 administrative expenses totaling \$692,676 would be required, including 9.00 FTE positions. This estimate includes 1.00 FTE Program Manager (\$88,637, including fringe benefits), 1.00 FTE Grant Manager (\$69,493, including fringe benefits), and 7.00 FTE Regional Implementation Specialists (\$46,996 X 7.00 FTE = \$328,972, including fringe benefits). The new program would require one-time expenditures of \$19,500, including \$5,500 for AED training devices and \$14,000 for two medical manikins. The agency estimates that annual travel costs of \$164,500 would be required for the program staff. Finally, annual information technology expenditures totaling \$21,574 would be needed, including software, laptop leases, docking stations, and cell phones.

In addition, KDHE estimates that \$1,253,243 would be required annually for grants to school districts. The agency would propose a regional implementation over a multiyear period, with priority given to smaller districts in rural counties with limited access to emergency and hospital services. The cost per school would be dependent on school district size and any identified needs. The agency estimates that a minimum of \$10,000 per school with approximately 50 to 100 schools per year over a multiyear period would be the regional implementation approach used for the program.

In total, the cost for FY 2025 for KDHE would be \$1,945,919, including \$692,676 for administrative costs and \$1,253,243 for grant awards to school districts, all from the SGF. Of these total costs, \$19,500 would be for one-time costs, including AED training devices and manikins. The Division of the Budget estimates similar costs for FY 2026, minus the one-time FY 2025 expenditure of \$19,500 identified earlier.

A revised fiscal note on the substitute bill was not available at the time of House Committee action. Any fiscal effect associated with the bill is not reflected in *The FY 2025 Governor's Budget Report*.

Education; School Cardiac Emergency Response Grant Program; School Cardiac Emergency Response Grant Fund; Kansas Department of Health and Environment; Secretary of Health and Environment; school districts; board of education; AED; CPR