

118TH CONGRESS
1ST SESSION

S. _____

To authorize the Secretary of Health and Human Services to award grants to eligible entities to develop and implement a comprehensive program to promote student access to defibrillation in public elementary schools and secondary schools.

IN THE SENATE OF THE UNITED STATES

Mr. BOOKER introduced the following bill; which was read twice and referred to the Committee on _____

A BILL

To authorize the Secretary of Health and Human Services to award grants to eligible entities to develop and implement a comprehensive program to promote student access to defibrillation in public elementary schools and secondary schools.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Access to AEDs Act”.

5 **SEC. 2. FINDINGS.**

6 Congress finds as follows:

1 (1) Heart disease is the leading cause of death
2 in the United States.

3 (2) Sudden cardiac arrest (referred to in this
4 section as “SCA”) is a life-threatening emergency
5 that is caused by a malfunction in the heart’s elec-
6 trical system or structure, which is caused by an ab-
7 normality from birth or one that develops over time.

8 (3) Studies show that 1 in 300 youth has an
9 undetected heart condition that puts them at risk.

10 (4) SCA is the leading cause of death for stu-
11 dent athletes.

12 (5) Sports-related SCA account for 39 percent
13 of SCAs among children 18 years old or younger.

14 (6) In 2018, there were nearly 394,000 sudden
15 cardiac arrests that occurred in the United States,
16 with 9 out of 10 being fatal. Only 1 in 10 victims
17 survive a sudden cardiac arrest.

18 (7) An estimated 7,000 to 23,000 young people
19 are stricken by SCA annually.

20 (8) The American Heart Association estimates
21 that 5 in 10 victims of SCA could survive if bystand-
22 ers gave CPR and used an AED immediately.

23 (9) The chain of survival includes prompt noti-
24 fication of emergency services and early CPR,
25 defibrillation, and advanced cardiac life support.

1 (10) Health education should include basic
2 emergency lifesaving skills. Incorporating these life-
3 saving training programs into the health curriculum
4 of public elementary and secondary schools will give
5 children and youth these skills.

6 **SEC. 3. PROMOTING STUDENT ACCESS TO**
7 **DEFIBRILLATION.**

8 (a) IN GENERAL.—The Secretary shall award grants
9 to eligible entities to develop and implement a comprehen-
10 sive program to promote student access to defibrillation
11 in public elementary schools and secondary schools.

12 (b) USE OF FUNDS.—An eligible entity receiving a
13 grant under subsection (a) may use funds received
14 through such grant to carry out any of the following activi-
15 ties:

16 (1) Developing and providing comprehensive
17 materials to establish AED and CPR programs in
18 public elementary schools and secondary schools.

19 (2) Providing support for CPR and AED train-
20 ing programs in such schools for students, staff, and
21 related sports volunteers.

22 (3) Providing support for developing a cardiac
23 emergency response plan within such schools.

24 (4) Purchasing AEDs that have been approved
25 under section 515 of the Federal Food, Drug, and

1 Cosmetic Act (21 U.S.C. 360e), cleared under sec-
2 tion 510(k) of such Act (21 U.S.C. 360(k)), or au-
3 thorized under section 513(f)(2) of such Act (21
4 U.S.C. 360c(f)(2)).

5 (5) Purchasing necessary AED batteries and
6 performing necessary AED maintenance (such as by
7 replacing AED pads) in accordance with the labeling
8 of the AED involved.

9 (6) Replacing old and outdated AED and CPR
10 equipment, machinery, and educational materials.

11 (7) Fostering new and existing community part-
12 nerships with and among local educational agencies,
13 nonprofit organizations, public health organizations,
14 emergency medical service providers, fire and police
15 departments, and parent-teacher associations to pro-
16 mote the importance of defibrillation in such schools.

17 (8) Aiding school athletic departments to screen
18 student athletes for risk of sudden cardiac arrest,
19 consistent with guidelines of the American Heart As-
20 sociation and the American College of Cardiology.

21 (9) Further developing strategies to improve ac-
22 cess to AEDs in such schools.

23 (c) ELIGIBILITY; APPLICATION.—To be eligible for a
24 grant under subsection (a), an entity shall—

1 (1) be a local educational agency (including a
2 public charter school operating as a local educational
3 agency under State law), in consultation with a
4 qualified health care entity; and

5 (2) submit to the Secretary an application at
6 such time, in such manner, and containing such in-
7 formation as the Secretary may reasonably require.

8 (d) CLEARINGHOUSE.—Not later than 1 year after
9 the date of enactment of this Act, the Secretary shall es-
10 tablish a clearinghouse database—

11 (1) to collect and make available information,
12 including through voluntary reporting by local edu-
13 cational agencies, State educational agencies, and
14 manufacturers, relating to student access to
15 defibrillation in public elementary schools and sec-
16 ondary schools, including with respect to the costs of
17 providing AEDs and CPR training; and

18 (2) to gather information in a central location
19 to facilitate research regarding sudden cardiac arrest
20 in the pediatric population.

21 (e) REPORTS.—

22 (1) BY GRANTEE.—Not later than 4 years after
23 receipt of a grant under this section, the recipient of
24 the grant shall submit to the Secretary a report that

1 describes the activities carried out with funds re-
2 ceived through the grant.

3 (2) BY SECRETARY.—Not later than one year
4 after receiving the reports required by paragraph
5 (1), the Secretary shall submit to the Committee on
6 Health, Education, Labor, and Pensions of the Sen-
7 ate and the Committee on Energy and Commerce
8 and the Committee on Education and the Workforce
9 of the House of Representatives a consolidated eval-
10 uation of the activities carried out pursuant to
11 grants under this section.

12 (f) DEFINITIONS.—In this section—

13 (1) the term “AED” means an automated ex-
14 ternal defibrillator;

15 (2) the term “CPR” means cardiopulmonary
16 resuscitation;

17 (3) the terms “elementary school”, “local edu-
18 cational agency”, and “secondary school” have the
19 meanings given to such terms in section 8101 of the
20 Elementary and Secondary Education Act of 1965
21 (20 U.S.C. 7801);

22 (4) the term “qualified health care entity”
23 means a health care entity that—

24 (A) is—

25 (i) a public entity; or

1 (ii) an organization that is described
2 in section 501(c) of the Internal Revenue
3 Code of 1986 and exempt from taxation
4 under section 501(a) of such Code;

5 (B) demonstrates an ability to develop,
6 train, and implement a comprehensive program
7 to promote student access to defibrillation in el-
8 ementary and secondary schools; and

9 (C) is qualified in providing technical as-
10 sistance in AED and CPR training; and

11 (5) the term “Secretary” means the Secretary
12 of Health and Human Services.

13 (g) AUTHORIZATION OF APPROPRIATIONS.—To carry
14 out this section, there is authorized to be appropriated
15 \$25,000,000 for the period of fiscal years 2024 through
16 2028.