

SENATE BILL REPORT

SB 6118

As Reported by Senate Committee On:
Early Learning & K-12 Education, February 3, 2026

Title: An act relating to cardiac emergency response plans in schools.

Brief Description: Requiring cardiac emergency response plans in schools. [**Revised for 1st Substitute:** Concerning cardiac emergency response plans in schools.]

Sponsors: Senators Nobles, Harris, Slatter, Cortes, Hunt, Kauffman, Lovick, Riccelli, Trudeau, Valdez and Wilson, J..

Brief History:

Committee Activity: Early Learning & K-12 Education: 1/28/26, 2/03/26 [DPS, w/oRec].

Brief Summary of First Substitute Bill

- Requires each school district to develop a cardiac emergency response plan for each school within the district and for each athletic facility on the school campus, to the extent state funding is appropriated for the purpose.
- Requires cardiac emergency response plans to contain certain core elements, including designating a cardiac emergency response team and designating locations for the installation of automated external defibrillators throughout campus.

SENATE COMMITTEE ON EARLY LEARNING & K-12 EDUCATION

Majority Report: That Substitute Senate Bill No. 6118 be substituted therefor, and the substitute bill do pass.

Signed by Senators Wellman, Chair; Nobles, Vice Chair; Wilson, C., Vice Chair; Harris, Ranking Member; Cortes, Dozier, Hansen and Krishnadasan.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Minority Report: That it be referred without recommendation.

Signed by Senator McCune.

Staff: Alex Fairfortune (786-7416)

Background: Sudden Cardiac Arrest. Sudden cardiac arrest (SCA) is the sudden onset of an abnormal and lethal heart rhythm, causing the heart to stop beating and the individual to collapse. SCA is the leading cause of death in the United States, afflicting over 300,000 individuals per year, and is the leading cause of sudden death in young athletes during sports. SCA can be effectively treated by immediate recognition, prompt cardiopulmonary resuscitation (CPR), and the use of an automated external defibrillator (AED) that provides an electric shock to restore a normal heart rhythm.

Cardiac Programming and Instruction. In 2013, the Legislature directed the Office of the Superintendent of Public Instruction (OSPI) to develop guidance and assist districts in carrying out a medical emergency response and AED program for high schools, including providing guidelines and advice for seeking AED grants or donations.

Each school district that operates a high school must offer CPR instruction to students, and instruction in CPR must be included in at least one health class necessary for graduation. The instruction must include the appropriate use of an AED and incorporate hands-on practice.

Youth Athletes and Coaches. The Washington Interscholastic Activities Association (WIAA) must provide an online pamphlet, to be posted on the OSPI website, that informs youth athletes, their parents or guardians, and coaches with information about SCA. Each year, prior to participating in an interscholastic athletic activity, youth athletes and their parents must sign a form stating that they reviewed the online pamphlet and return the form to the student's school.

The WIAA must also make available an online sudden cardiac arrest prevention program for coaches. Every three years, prior to coaching an interscholastic athletic activity, coaches must complete the program and provide a certificate of completion to their school.

Summary of Bill (First Substitute): Beginning in the 2026-27 school year each school district must develop a cardiac emergency response plan (plan) for every school within the district and every athletic facility on a school campus, to the extent state funding is appropriated for the purpose.

Each plan must be updated annually and include the following core elements.

Cardiac Emergency Response Team. The plan must designate a cardiac emergency response team (response team) comprised of school staff, including coaches, school nurses, athletic trainers, teachers, counselors, and administrators. The plan must establish procedures for

activating the response team if a person experiences a cardiac arrest on school property, and establish a regular schedule for response team training in cardiopulmonary resuscitation, first aid, and AED use. The plan must also establish dates, at least annually, where the plan will be rehearsed in each school.

Automated External Defibrillator Locations and Maintenance. The plan must designate locations for the installation of AEDs throughout campus, including at each campus athletic facility, with the goal of being able to place an AED on a person within three minutes of becoming aware of a cardiac arrest. AED locations must be identified with clear signage and stored in an unlocked location on school property that is easily accessible during the school day and during school-sponsored athletic events or team practices in which students of the school are participating. The plan must include the regular maintenance schedule for AEDs, aligned with the manufacturer's operational guidelines. School officials must notify local emergency service providers of AED locations and types.

Emergency Response and Procedures. The school district must work to integrate the plan into the community emergency response protocols, and the plan must describe how this coordination and integration will be achieved. The plan must also establish procedures for responding to incidents of cardiac arrest that occur off-campus during school-sponsored events.

Each plan's core elements, the school staff training, and the locations for AEDs must all follow guidelines set by the American Heart Association or another evidence-based organization focused on emergency cardiovascular care.

EFFECT OF CHANGES MADE BY EARLY LEARNING & K-12 EDUCATION COMMITTEE (First Substitute):

- Provides that school districts must develop cardiac emergency response plans and fulfill all other related bill provisions only to the extent state funding is appropriated for that purpose.

Appropriation: The bill contains a section or sections to limit implementation to the availability of amounts appropriated for that specific purpose.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: *The committee recommended a different version of the bill than what was heard.* PRO: It is important for our schools to be prepared and responsive because every second matters when we talk about the health of our

students. Forty percent of cardiac emergencies occur during exercise and to athletes, and schools need to be able to respond. Only 10 percent of people survive sudden cardiac arrest, but that can grow to over 70 percent with intervention. In one case, a young 16-year-old collapsed while running track in PE and, while teachers performed CPR, they did not use the on-campus AEDs so the student didn't receive an electric shock until paramedics delivered it 7 minutes later when it was too late. Sudden cardiac arrest is more common than any earthquake or lockdown drill that schools use to prepare for emergencies. By implementing these plans we create schools and communities where students are protected. The sponsor wants districts to do what they can with the resources they have so there is a substitute being prepared to remove the financial mandates.

Persons Testifying: PRO: Senator T'wina Nobles, Prime Sponsor; Angel Joshi; Isabelle Hepler; Andrea Won; Adam Lang, DP Foundation; Melinda Truax; Asher Crossley; Paul Fillmore-Sardinas, WA Build Back Black Alliance.

Persons Signed In To Testify But Not Testifying: No one.