SENATE JUDICIARY COMMITTEE Senator Thomas Umberg, Chair 2025-2026 Regular Session

AB 365 (Schiavo)

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Fiscal: Yes Urgency: No

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SUBJECT

The Justin Kropp Safety Act: electrical utilities: AED availability at worksites

DIGEST

This bill requires specified utilities to have an automated external defibrillator (AED) available for emergency use at each worksite, as provided, and provides qualified immunity for acquiring and using such AEDs in emergency situations.

EXECUTIVE SUMMARY

An AED is a medical device which is used to administer an electric shock through the chest wall to the heart after someone suffers cardiac arrest. Built-in computers assess the patient's heart rhythm, determine whether the person is in cardiac arrest, and signal whether to administer the shock. Audible cues guide the user through the process.

According to the American Red Cross:

AEDs are a user-friendly, lifesaving technology used to treat the effects of sudden cardiac arrest, which is triggered by an electrical malfunction in the heart. With the heart unable to pump blood to the brain, lungs, and other vital organs, death can happen in minutes. In 2016 there were over 350,000 out-of-hospital cardiac arrests in the United States, and of this figure an estimated 10,200 out-of-hospital cardiac arrests happen to children. Sadly, only 12% of victims who suffer cardiac arrest outside of a hospital setting survive, largely in part because many victims do not receive timely CPR or AED application.

Existing law requires AEDs to be made available in various contexts and provides qualified immunity for those providing and using AEDs in emergency situations, as specified. This bill requires AEDs to be made available at the worksites of electrical utility workers and provides similar qualified immunity as that provided in other contexts.

AB 365 (Schiavo) Page 2 of 8

This bill is author-sponsored. It is supported by several groups, including the Coalition of California Utility Employees. No timely opposition has been received by the Committee. This bill passed out of the Senate Energy, Utilities and Communications Committee on a vote of 14 to 0.

PROPOSED CHANGES TO THE LAW

Existing law:

- 1) Provides that every person is responsible, not only for the result of their willful acts, but also for an injury occasioned to another by the person's want of ordinary care or skill in the management of their property or person, except so far as the latter has, willfully or by want of ordinary care, brought the injury upon themselves. (Civ. Code § 1714(a).)
- 2) Provides that no person who, in good faith, and not for compensation, renders emergency medical or nonmedical care at the scene of an emergency shall be liable for any civil damages resulting from any act or omission. The scene of an emergency shall not include emergency departments and other places where medical care is usually offered. This applies only to medical, law enforcement, and emergency personnel, as specified. (Health & Saf. Code § 1799.102(a).)
- 3) Extends to all other persons not covered by the above who are rendering medical or nonmedical care or other assistance in such situations immunity from civil damages resulting from any act or omission other than acts or omissions constituting gross negligence or willful or wanton misconduct. (Health & Saf. Code § 1799.102(b).)
- 4) Provides that any person who, in good faith and not for compensation, renders emergency care or treatment by the use of an AED at the scene of an emergency is not liable for any civil damages resulting from any acts or omissions in rendering the emergency care. (Civ. Code § 1714.21(b).)
- 5) Provides that a person or entity who provides CPR and AED training to a person who renders emergency care is not liable for any civil damages resulting from any acts or omissions of the person rendering the emergency care. (Civ. Code § 1714.21(c).)
- 6) Provides that a person or entity that acquires an AED for emergency use pursuant to this section is not liable for any civil damages resulting from any acts or omissions in the rendering of the emergency care by use of an AED if that person or entity has complied with subdivision (b) of Section 1797.196 of the Health and Safety Code, which requires compliance with specified regulations and specific maintenance and training protocols. (Civ. Code § 1714.21(d).)

7) Provides that the above immunities related to AEDs do not apply in the case of personal injury or wrongful death that results from the gross negligence or willful or wanton misconduct of the person who renders emergency care or treatment by the use of an AED. (Civ. Code § 1714.21(e).)

This bill:

- 1) Establishes the Justin Kropp Safety Act.
- 2) Requires each utility, and independent contractor or subcontractor of a utility, to do all of the following:
 - a) Have an AED available for emergency use at each worksite where two or more electrical utility workers are performing work on electrical transmission or distribution lines of 601 volts or more.
 - b) Adopt, consistent with its duty to furnish and use safety devices and safeguards as required by Section 6401 of the Labor Code and as part of its injury prevention program that conforms to the requirements of Section 6401.7 of the Labor Code, a written program of policies and procedures to ensure both of the following:
 - i. Any person who renders emergency care or treatment to a person in cardiac arrest by using an AED shall activate the emergency medical services system as soon as possible and report the use of the AED to the local EMS agency.
 - ii. All employees, contractors, and subcontractors shall be trained on the use of an AED and the procedures to be followed in the event of an emergency, including the above requirement.
 - c) Comply with the requirements of Section 1797.196 of the Health and Safety Code.
- 3) Provides that any person who, in good faith and not for compensation, renders emergency care or treatment by the use of an AED is not liable for civil damages resulting from any acts or omissions of the person rendering the emergency care as provided in subdivision (b) of Section 1714.21 of the Civil Code.
- 4) Provides that a utility or an independent contractor or subcontractor of a utility that acquires an AED for emergency use and makes reasonable efforts to comply with the above requirements is not liable for any civil damages resulting from the emergency use of the AED as provided in subdivision (d) of Section 1714.21 of the Civil Code.
- 5) Clarifies that a person who renders emergency treatment by means of an AED and is not compensated for doing so, but receives compensation for other actions as a result of their unrelated employment, does not render emergency medical care "for compensation."

6) Provides that the above immunities do not apply in cases described in subdivision (e) of Section 1714.21 of the Civil Code.

COMMENTS

1. Civil liability and immunity

As a general rule, California law provides that persons are responsible, not only for the result of their willful acts, but also for an injury occasioned to another by their want of ordinary care or skill in the management of their property or person, except so far as the latter has, willfully or by want of ordinary care, brought the injury upon themselves. (Civ. Code § 1714(a).) Liability has the primary effect of ensuring that some measure of recourse exists for those persons injured by the negligent or willful acts of others; the risk of that liability has the primary effect of ensuring parties act reasonably to avoid harm to those to whom they owe a duty.

Conversely, immunity from liability disincentivizes careful planning and acting on the part of individuals and entities. When one enjoys immunity from civil liability, they are relieved of the responsibility to act with due regard and an appropriate level of care in the conduct of their activities. Immunity provisions are also disfavored because they, by their nature, preclude parties from recovering when they are injured, and force injured parties to absorb losses for which they are not responsible. Liability acts not only to allow a victim to be made whole, but to encourage appropriate compliance with legal requirements.

Although immunity provisions are rarely preferable, the Legislature has, in limited scenarios, approved measured immunity from liability (as opposed to blanket immunities) to promote other policy goals that could benefit the public. Immunities are generally afforded when needed to ensure the willingness of individuals to continue taking on certain roles that may involve some risk and to incentivize certain conduct, such as the provision of life-saving or other critical services. Examples include protections for use of CPR (Civ. Code § 1714.2); providing emergency care at the scene of an emergency (Health & Saf. Code §§ 1799.102, 1799.106); and performing emergency rescue services (Health & Saf. Code § 1799.107). However, as indicated above, rarely is immunity absolute, and these immunities generally do not cover grossly negligent conduct or intentional misconduct.

2. Extending existing liability protections to those acquiring or using AEDs at utility worksites

In 1999, the Legislature passed and the Governor signed SB 911 (Figueroa, Ch. 163, Stats. 1999) which created a qualified immunity from civil liability for trained persons who use AEDs in good faith and without compensation when rendering emergency care or treatment at the scene of an emergency. The bill also provided qualified

immunity from liability for building owners who installed AEDs as long as they ensured that expected AED users completed a training course. AB 2041 (Vargas, Ch. 718, Stats. 2002) expanded this immunity by repealing the training requirements for good faith users and also relaxing the requirement that building owners must ensure that expected users complete training as a condition of immunity. AB 2041 was enacted with a five-year sunset which was extended another five years to January 1, 2013, by AB 2083 (Vargas, Ch. 85, Stats. 2006). SB 1436 (Lowenthal, Ch. 71, Stats. 2012) was enacted to delete the sunset, thereby extending the operation of those provisions indefinitely. SB 658 (Hill, Ch. 264, Stats. 2015) amended the various requirements relating to persons and entities acquiring AEDs, including reducing the requirements for inspections and certain requirements regarding training. It also amended the provisions applying to schools.

AB 2009 (Maienschein, Ch. 646, Stats. 2018) and AB 1766 (Maienschein, Ch. 270, Stats. 2018) required AEDs to be made available at schools offering certain athletic programs and at public swimming pools, respectively.

The law provides protection from civil liability for persons or entities acquiring AEDs in the above situations for emergency use resulting from acts or omissions through such uses. (Civ. Code § 1714.21(d).) The goal of such immunity provisions is to incentivize the acquisition and use of AEDs to save a person's life when in cardiac arrest. At the same time, however, to reduce the chance of harm arising to individuals and to ensure the AEDs' effectiveness in saving lives, the statutory immunity provided in Section 1714.21 is conditioned upon compliance with certain safeguards laid out in Section 1797.196 of the Health and Safety Code.

Section 1797.196 provides that, in order to ensure public safety, a person or entity that acquires an AED shall do all of the following:

- comply with all regulations governing the placement of an AED;
- notify an agent of the local EMS agency of the existence, location, and type of AED acquired;
- ensure that the AED is maintained and tested according to the operation and maintenance guidelines set forth by the manufacturer;
- ensure that the AED is tested at least biannually and after each use;
- ensure that an inspection is made of all AEDs on the premises at least every 90 days for potential issues related to operability of the device, including a blinking light or other obvious defect that may suggest tampering or that another problem has arisen with the functionality of the AED; and
- ensure that records of the maintenance and testing required pursuant to this paragraph are maintained. (Health & Saf. Code § 1797.196(b)(1).)

Section 1797.196 also details additional requirements specifically for AEDs placed in public or private K-12 schools.

AB 365 (Schiavo) Page 6 of 8

Essentially, a person or entity that acquires an AED and fails to comply with the statutory requirements of Section 1797.196 is not eligible for the protections from liability afforded by Section 1714.21.

Similarly, Section 1714.21(b) provides qualified immunity to those using AEDs in emergencies: "Any person who, in good faith and not for compensation, renders emergency care or treatment by the use of an AED at the scene of an emergency is not liable for any civil damages resulting from any acts or omissions in rendering the emergency care." This immunity does not apply "in the case of personal injury or wrongful death that results from the gross negligence or willful or wanton misconduct of the person who renders emergency care or treatment by the use of an AED." (Civ. Code § 1714.21(e).)

This bill requires each electrical corporation or local publicly owned electric utility, and its independent contractors and subcontractors, to make available AEDs at worksites where electrical workers are performing work on electrical transmission or distribution lines of any voltage. The bill extends the immunities discussed above to the provision and use of AEDs in these locations. However, recent amendments only require utilities or independent contractors to "make reasonable efforts to comply" with the requirements of the bill. As discussed, current law provides qualified immunity for a person or entity that acquires an AED for emergency use if that person or entity has complied with subdivision (b) of Section 1797.196 of the Health and Safety Code and the law requires, "in order to ensure public safety," that a person or entity that acquires an AED to carry out certain actions pursuant to Section 1797.196. To ensure no conflicts with existing law, the author has agreed to an amendment that requires compliance with that section, and ties the qualified immunity provided by the bill to such compliance.

The Coalition of California Utility Employees and the California State Association of Electrical Workers write jointly in support:

Electrical lineworkers and utility employees perform inherently dangerous tasks, often in remote or high-risk environments. Sudden cardiac arrest can be a tragic consequence of electrical exposure, strenuous activity, or unforeseen medical emergencies. The presence of an AED at these worksites can mean the difference between life and death. By ensuring that public utilities and their contractors comply with established safety standards and protocols for AED accessibility, this bill will provide essential protections for workers and the public alike.

Additionally, the bill includes reasonable liability protections, ensuring that utilities, contractors, subcontractors, and individuals rendering emergency aid with an AED are shielded from civil liability, except in cases of gross negligence or willful misconduct. This provision encourages

AB 365 (Schiavo) Page 7 of 8

the use of AEDs in good faith without fear of legal repercussions, further reinforcing a culture of workplace safety.

This bill is inspired by the tragic death of Justin Kropp, a lineman who died on the job while working on power lines in California. According to the author:

Working around high voltage electrical lines, Journeymen have one of the most dangerous jobs in California. AEDs are lifesaving devices required by law at large venues like stadiums, but they are not currently required at high voltage worksites. Tragically, had an AED been present on Justin Kropp's worksite, he may still be with us today. It is our duty to protect our frontline workers and Assembly Bill 365 will do just that by requiring AEDs on high voltage worksites.

SUPPORT

California Chapter American College of Cardiology California State Association of Electrical Workers Coalition of California Utility Employees

OPPOSITION

None received

RELATED LEGISLATION

Pending Legislation:

SB 466 (Caballero, 2025) provides total immunity from liability to a public water system in a civil case brought by non-governmental entities or individuals harmed by the water system's acts or failure to act related to hexavalent chromium in drinking water during specified time periods. SB 466 is currently in the Assembly Environmental Safety and Toxic Materials Committee.

AB 369 (Michelle Rodriguez, 2025) provides qualified immunity to those administering, in good faith, anti-seizure rescue medication at the scene of an emergency, as provided. AB 369 is currently on the Senate Floor.

AB 463 (Michelle Rodriguez, 2025) authorizes specified ambulance operators to transport a police canine or a search and rescue dog injured in the line of duty to specified facility, as provided. The bill authorizes emergency responders to provide basic first aid to such dogs during transit and provides them qualified immunity. AB 463 is currently in this Committee and is being heard the same day as this bill.

AB 365 (Schiavo) Page 8 of 8

AB 1172 (Nguyen, 2025) authorizes individuals with developmental disabilities to receive emergency seizure medication by creating a training pathway for employees of licensed facilities that choose to volunteer to administer the medication. It provides qualified immunity to volunteers who so administer the medication. AB 1172 is currently in the Senate Human Services Committee.

Prior Legislation:

AB 1766 (Maienschein, Ch. 270, Stats. 2018) See Comment 2.

AB 2009 (Maienschein, Ch. 646, Stats. 2018) See Comment 2.

SB 658 (Hill, Ch. 264, Stats. 2015) See Comment 2.

SB 1436 (Lowenthal, Ch. 71, Stats. 2012) See Comment 2.

AB 2083 (Vargas, Ch. 85, Stats. 2006) See Comment 2.

AB 2041 (Vargas, Ch. 718, Stats. 2002) See Comment 2.

SB 911 (Figueroa, Ch. 163 Stats. 1999) See Comment 2.

PRIOR VOTES: