



Ohio Legislative Service Commission

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Fiscal Note & Local Impact Statement

Bill: [H.B. 113 of the 131st G.A.](#)
(LSC 131 0904-2)

Date: November 19, 2015

Status: In House Education

Sponsor: Reps. Grossman and Manning

Local Impact Statement Procedure Required: No

Contents: Requires instruction in CPR and the use of a defibrillator for students and requires training for school district employees in the use of a defibrillator

State Fiscal Highlights

- No direct fiscal effect on the state.

Local Fiscal Highlights

- The bill requires hands-on instruction in cardiopulmonary resuscitation (CPR) and the use of an automated external defibrillator (AED) for high school students. Current law requires instruction in CPR but not in the use of a defibrillator. In addition, the bill requires school districts to provide training in the use of an AED for each employee of the district.
- Schools that do not already provide both types of instruction or AED training for employees may experience an increase in costs to comply with the bill's provisions; however, these costs are not expected to exceed minimal. The American Heart Association offers a training kit for \$625 that fulfills the requirements of the bill.

Detailed Fiscal Analysis

Beginning in the 2016-2017 school year, the bill requires public schools other than community schools offering grades 9-12 to provide hands-on instruction in cardiopulmonary resuscitation (CPR) and the use of an automated external defibrillator (AED). Specifically, the bill requires the use of an instructional program developed by the American Heart Association or the American Red Cross, or another nationally recognized, evidence-based program. Current law requires instruction in CPR but not in the use of a defibrillator. Furthermore, CPR instruction is not required to be hands-on, as is required by the bill.

The bill also requires school districts to provide training in the use of an AED for each employee of the district and requires each employee to receive the training not later than July 1, 2017, and once every five years thereafter, using one of the instructional programs described above. Current law requires districts opting to place an AED in each school to provide training in the use of an AED to a sufficient number of staff persons in the school.

Schools that do not already provide this instruction or training may experience an increase in costs to comply with the bill's provisions; however, these costs are not expected to exceed minimal. The American Heart Association offers a CPR in Schools Training Kit¹ for \$625 that fulfills the requirements outlined in the bill. This kit may be reused and shared amongst schools.

Synopsis of Fiscal Effect Changes

- The As Introduced (previous) version of the bill required schools to provide hands-on instruction in CPR and the use of an AED as a high school graduation requirement. The substitute bill removes the requirement that successful completion of the instruction is required for high school graduation. As a result, the substitute bill also removes the requirement for the Ohio Department of Education (ODE) to establish a procedure for monitoring compliance by school districts and schools, eliminating the bill's administrative burden on ODE.
- The As Introduced version of the bill required that all public and chartered nonpublic schools provide hands-on instruction in CPR and the use of an AED. The substitute bill eliminates the bill's costs for community schools and chartered nonpublic schools by removing the requirement for those schools to provide the instruction.

¹ http://www.heart.org/HEARTORG/CPRAndECC/CommunityCPRandFirstAid/CPRinSchools/CPR-in-Schools_UCM_453682_SubHomePage.jsp.

- The substitute bill adds the requirement that school districts provide training in the use of an AED for each employee of the district and requires each employee to receive the training not later than July 1, 2017, and once every five years thereafter. Schools that do not already provide this type of training may experience an increase in costs to comply with the bill's provisions; however, these costs are not expected to exceed minimal.

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