By:  Gervin-Hawkins, Bernal, Allison H.B. No. 496

A BILL TO BE ENTITLED

AN ACT

relating to the placement of bleeding control stations in public schools and to required training of public school personnel and students.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1.  Subchapter A, Chapter 38, Education Code, is amended by adding Section 38.029 to read as follows:

Sec. 38.029.  BLEEDING CONTROL STATION PROGRAM. (a) In this section, "emergency alerting device" means a device designed to send, once a case containing the device is opened, an emergency alert that provides continuous information about the location of the device to preprogrammed recipients, including a 9-1-1 call center, school resource officers, and emergency services personnel, using multiple forms of communication technology to ensure connectivity, including cellular telephone technology, Bluetooth technology, global positioning technology, general packet radio service technology, and wireless computer networking technology.

(b)  Each school district and open-enrollment charter school shall develop and implement at each campus of the district or school a bleeding control station program that:

(1)  ensures that bleeding control stations, as described by Subsection (e), are stored in easily accessible areas of the campus that are selected by the district's school safety and security committee or the charter school's governing body;

(2)  includes the use of bleeding control stations in:

(A)  any security planning measure or protocol adopted by a district, including a district's multihazard emergency operations plan under Section 37.108(a); or

(B)  any security planning measure or protocol adopted by a charter school's governing body;

(3)  requires that agency-approved training on the use of a bleeding control station in the event of an injury to another person be provided to:

(A)  each school district peace officer commissioned under Section 37.081 or school security personnel employed under that section who provides security services at the campus;

(B)  each school resource officer who provides law enforcement at the campus; and

(C)  all other district or school personnel who may be reasonably expected to use a bleeding control station; and

(4)  subject to Subsection (c), requires each student enrolled in grade seven or higher at the campus to annually receive instruction on the use of a bleeding control station from a school resource officer or other appropriate district or school personnel who has received the training under Subdivision (3).

(b-1)  A district's school safety and security committee or the charter school's governing body may select, as easily accessible areas of the campus at which bleeding control stations may be stored, areas of the campus where automated external defibrillators are stored.

(c)  A student is not required to receive the instruction under Subsection (b)(4) if:

(1)  the student has a disability that makes participating in the instruction impractical; or

(2)  the student's parent or guardian does not consent to the student receiving the instruction.

(d)  The commissioner shall adopt guidelines to ensure that:

(1)  school districts and open-enrollment charter schools provide notice to a parent of each child enrolled at a district or school campus regarding the instruction required under Subsection (b)(4); and

(2)  parents are provided the opportunity to remove the parent's child from the instruction.

(d-1)  A bleeding control station required under this section must contain a first aid bleeding control kit that includes each of the items required under Subsection (e), in appropriate quantities as provided by that subsection, based on one of three options selected by the district or school. A district or school may select:

(1)  as option one, that each bleeding control station located at the district or school include a first aid bleeding control kit containing the appropriate quantity of required supplies to treat eight injured persons;

(2)  as option two, that each bleeding control station of the district or school include a first aid bleeding control kit containing the appropriate quantity of required supplies to treat five injured persons; or

(3)  as option three, that each bleeding control station of the district or school include a first aid bleeding control kit containing all required supplies in quantities determined appropriate by the superintendent of the district or the director of the school.

(e)  A first aid bleeding control kit must include the following supplies, in quantities applicable to the option selected under Subsection (d-1), as follows:

(1)  tourniquets that include a locking mechanism:

(A)  eight, if option one is selected;

(B)  five, if option two is selected; or

(C)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(2)  chest seals:

(A)  eight, if option one is selected;

(B)  five, if option two is selected; or

(C)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(3)  patient care cards:

(A)  eight, if option one is selected;

(B)  five, if option two is selected; or

(C)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(4)  pairs of latex-free gloves:

(A)  five, if option one or option two is selected; or

(B)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(5)  space emergency blankets:

(A)  five, if option one or option two is selected; or

(B)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(6)  hemostatic-impregnated gauze dressings:

(A)  two, if option one or option two is selected; or

(B)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(7)  permanent markers:

(A)  two, if option one or option two is selected; or

(B)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(8)  pairs of trauma shears:

(A)  two, if option one or option two is selected; or

(B)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(9)  compression bandages;

(A)  two, if option one or option two is selected; or

(B)  the quantity determined appropriate by the superintendent or director, if option three is selected;

(10)  one hard-shell case, regardless of the option selected; and

(11)  one emergency alerting device, regardless of the option selected.

(f)  In addition to the items listed under Subsection (e), a school district or open-enrollment charter school may also include in a bleeding control station any medical material or equipment that:

(1)  may be readily stored in a bleeding control station;

(2)  may be used to adequately treat an injury involving traumatic blood loss; and

(3)  is approved by local law enforcement or emergency medical services personnel.

(g)  A school district or open-enrollment charter school shall conduct an annual inspection of the medical material and equipment in each bleeding control station stored on a campus of the district or school and replace any expired material or equipment as necessary.

(h)  A school district or open-enrollment charter school must restock a bleeding control station as soon as practicable after a use of the station to ensure the station contains all required material and equipment.

(i)  To satisfy the training requirement of Subsection (b)(3), the agency may approve a course of instruction that has been developed or endorsed by:

(1)  the American College of Surgeons or a similar organization; or

(2)  the emergency medicine department of a health-related institution of higher education or a hospital.

(j)  The course of instruction for training described under Subsection (i) may not be provided as an online course. The course of instruction must use nationally recognized, evidence-based guidelines for bleeding control and must incorporate instruction on the psychomotor skills necessary to use a bleeding control station in the event of an injury to another person, including instruction on proper chest seal placement. The course of instruction may be provided by an instructor who is properly qualified to provide the instruction described under Subsection (i), which may include emergency medical technicians, paramedics, law enforcement officers, firefighters, representatives of the organization or institution that developed or endorsed the training, educators, or other public school employees. A course of instruction described by Subsection (i) is not required to provide for certification in bleeding control. If the course of instruction does provide for certification in bleeding control, the instructor must be authorized to provide the instruction for the purpose of certification by the organization or institution that developed or endorsed the course of instruction.

(k)  A school district or open-enrollment charter school and the employees of the district or school are immune from civil liability from damages or injuries resulting from the good faith use of a bleeding control station by an employee of the district or school to control the bleeding of an injured person, provided that the employee did not act with gross negligence in the use of the bleeding control station.

SECTION 2.  (a) Not later than October 1, 2019, the Texas Education Agency shall approve training in the use of a bleeding control station that is appropriate to satisfy the training required by Section 38.029, Education Code, as added by this Act.

(b)  As soon as practicable after the effective date of this Act, and not later than January 1, 2020, each school district and open-enrollment charter school shall develop and implement the bleeding control station program required by Section 38.029, Education Code, as added by this Act.

SECTION 3.  This Act takes effect immediately if it receives a vote of two-thirds of all the members elected to each house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for immediate effect, this Act takes effect September 1, 2019.