

AN ACT

relating to traumatic injury response protocol and the use of  
bleeding control stations in public schools.

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

SECTION 1. Subchapter A, Chapter 38, Education Code, is  
amended by adding Section 38.030 to read as follows:

Sec. 38.030. TRAUMATIC INJURY RESPONSE PROTOCOL. (a) Each  
school district and open-enrollment charter school shall develop  
and annually make available a protocol for school employees and  
volunteers to follow in the event of a traumatic injury.

(b) The protocol required under this section must:

(1) provide for a school district or open-enrollment  
charter school to maintain and make available to school employees  
and volunteers bleeding control stations, as described by  
Subsection (d), for use in the event of a traumatic injury involving  
blood loss;

(2) ensure that bleeding control stations 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;

(3) require 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

1 commissioned under Section 37.081 or school security personnel  
2 employed under that section who provides security services at the  
3 campus;

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

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

8 (4) require the district or charter school to annually  
9 offer instruction on the use of a bleeding control station from a  
10 school resource officer or other appropriate district or school  
11 personnel who has received the training under Subdivision (3) to  
12 students enrolled at the campus in grade seven or higher.

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

18 (d) A bleeding control station required under this section  
19 must contain all of the following required supplies in quantities  
20 determined appropriate by the superintendent of the district or the  
21 director of the school:

22 (1) tourniquets approved for use in battlefield trauma  
23 care by the armed forces of the United States;

24 (2) chest seals;

25 (3) compression bandages;

26 (4) bleeding control bandages;

27 (5) space emergency blankets;

- 1           (6) latex-free gloves;  
2           (7) markers;  
3           (8) scissors; and  
4           (9) instructional documents developed by the American  
5 College of Surgeons or the United States Department of Homeland  
6 Security detailing methods to prevent blood loss following a  
7 traumatic event.

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

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

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

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

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

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

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

25           (g) The course of instruction for training described under  
26 Subsection (f) may not be provided as an online course. The course  
27 of instruction must use nationally recognized, evidence-based

1 guidelines for bleeding control and must incorporate instruction on  
2 the psychomotor skills necessary to use a bleeding control station  
3 in the event of an injury to another person, including instruction  
4 on proper chest seal placement.

5 (h) The course of instruction described under Subsection  
6 (f) may be provided by emergency medical technicians, paramedics,  
7 law enforcement officers, firefighters, representatives of the  
8 organization or institution that developed or endorsed the  
9 training, educators, other public school employees, or other  
10 similarly qualified individuals. A course of instruction described  
11 under Subsection (f) is not required to provide for certification  
12 in bleeding control. If the course of instruction does provide for  
13 certification in bleeding control, the instructor must be  
14 authorized to provide the instruction for the purpose of  
15 certification by the organization or institution that developed or  
16 endorsed the course of instruction.

17 (i) The good faith use of a bleeding control station by a  
18 school district or open-enrollment charter school employee to  
19 control the bleeding of an injured person is incident to or within  
20 the scope of the duties of the employee's position of employment and  
21 involves the exercise of judgment or discretion on the part of the  
22 employee for purposes of Section 22.0511, and a school district or  
23 open-enrollment charter school and the employees of the district or  
24 school are immune from civil liability, as provided by that  
25 section, from damages or injuries resulting from that good faith  
26 use of a bleeding control station. A school district or  
27 open-enrollment charter school volunteer is immune from civil

1 liability from damages or injuries resulting from the good faith  
2 use of a bleeding control station to the same extent as a  
3 professional employee of the district or school, as provided by  
4 Section 22.053.

5 (j) Nothing in this section limits the immunity from  
6 liability of a school district, open-enrollment charter school, or  
7 district or school employee or volunteer under:

8 (1) Sections 22.0511 and 22.053;

9 (2) Section 101.051, Civil Practice and Remedies Code;

10 or

11 (3) any other applicable law.

12 (k) This section does not create a cause of action against a  
13 school district or open-enrollment charter school or the employees  
14 or volunteers of the district or school.

15 SECTION 2. (a) Not later than October 1, 2019, the Texas  
16 Education Agency shall approve a course of instruction on the use of  
17 a bleeding control station that is appropriate to satisfy the  
18 requirement under Section 38.030, Education Code, as added by this  
19 Act.

20 (b) As soon as practicable after the effective date of this  
21 Act, and not later than January 1, 2020, each school district and  
22 open-enrollment charter school shall develop and implement the  
23 traumatic injury response protocol required by Section 38.030,  
24 Education Code, as added by this Act.

25 SECTION 3. This Act takes effect immediately if it receives  
26 a vote of two-thirds of all the members elected to each house, as  
27 provided by Section 39, Article III, Texas Constitution. If this

H.B. No. 496

1 Act does not receive the vote necessary for immediate effect, this

2 Act takes effect September 1, 2019.

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President of the Senate

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Speaker of the House

I certify that H.B. No. 496 was passed by the House on May 10, 2019, by the following vote: Yeas 91, Nays 34, 2 present, not voting; that the House refused to concur in Senate amendments to H.B. No. 496 on May 23, 2019, and requested the appointment of a conference committee to consider the differences between the two houses; and that the House adopted the conference committee report on H.B. No. 496 on May 26, 2019, by the following vote: Yeas 124, Nays 21, 1 present, not voting.

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Chief Clerk of the House

H.B. No. 496

I certify that H.B. No. 496 was passed by the Senate, with amendments, on May 21, 2019, by the following vote: Yeas 23, Nays 8; at the request of the House, the Senate appointed a conference committee to consider the differences between the two houses; and that the Senate adopted the conference committee report on H.B. No. 496 on May 26, 2019, by the following vote: Yeas 25, Nays 6.

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Secretary of the Senate

APPROVED: \_\_\_\_\_

Date

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Governor