

SENATE AMENDMENTS

2nd Printing

By: Gervin-Hawkins, Bernal, Allison

H.B. No. 496

A BILL TO BE ENTITLED

1 AN ACT
2 relating to the placement of bleeding control stations in public
3 schools and to required training of public school personnel and
4 students.

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

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

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

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

22 (1) ensures that bleeding control stations, as
23 described by Subsection (e), are stored in easily accessible areas
24 of the campus that are selected by the district's school safety and

1 security committee or the charter school's governing body;

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

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

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

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

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

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

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

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

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

1 defibrillators are stored.

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

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

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

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

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

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

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

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

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

1 five injured persons; or

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

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

10 (1) tourniquets that include a locking mechanism:

11 (A) eight, if option one is selected;

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

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

15 (2) chest seals:

16 (A) eight, if option one is selected;

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

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

20 (3) patient care cards:

21 (A) eight, if option one is selected;

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

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

25 (4) pairs of latex-free gloves:

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

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

3 (5) space emergency blankets:

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

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

8 (6) hemostatic-impregnated gauze dressings:

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

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

13 (7) permanent markers:

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

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

18 (8) pairs of trauma shears:

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

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

23 (9) compression bandages;

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

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

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

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

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

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

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

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

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

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

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

27 (1) the American College of Surgeons or a similar

1 organization; or

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

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

23 (k) A school district or open-enrollment charter school and
24 the employees of the district or school are immune from civil
25 liability from damages or injuries resulting from the good faith
26 use of a bleeding control station by an employee of the district or
27 school to control the bleeding of an injured person, provided that

1 the employee did not act with gross negligence in the use of the
2 bleeding control station.

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

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

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

ADOPTED

MAY 21 2019

Letty Spaul
Secretary of the Senate

José Lucio, Jr.

By: _____

H.B. No. 496

Substitute the following for H.B. No. 496 :

By: *José Lucio, Jr.*

C.S.H.B. No. 496

A BILL TO BE ENTITLED

AN ACT

1
2 relating to traumatic injury response protocol and the use of
3 bleeding control kits in public schools.

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

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

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

11 (b) The protocol required under this section must provide
12 for a school district or open-enrollment charter school to maintain
13 and make available to school employees and volunteers a bleeding
14 control kit for use in the event of a traumatic injury involving
15 blood loss.

16 (c) A bleeding control kit required under this section must
17 be a first aid response kit that includes:

18 (1) a tourniquet approved for use in battlefield
19 trauma care by the armed forces of the United States;

20 (2) compression bandages;

21 (3) bleeding control bandages;

22 (4) protective gloves;

23 (5) markers;

24 (6) scissors; and

1 (7) instructional documents developed by the American
2 College of Surgeons or the United States Department of Homeland
3 Security detailing methods to prevent blood loss following a
4 traumatic event.

5 (d) In addition to the items listed under Subsection (c), a
6 school district or open-enrollment charter school may also include
7 in a bleeding control kit any medical material or equipment that:

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

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

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

13 (e) The good faith use of a bleeding control kit by a school
14 district or open-enrollment charter school employee to control the
15 bleeding of an injured person is incident to or within the scope of
16 the duties of the employee's position of employment and involves
17 the exercise of judgment or discretion on the part of the employee
18 for purposes of Section 22.0511, and a school district or
19 open-enrollment charter school and the employees of the district or
20 school are immune from civil liability, as provided by that
21 section, from damages or injuries resulting from that good faith
22 use of a bleeding control kit. A school district or open-enrollment
23 charter school volunteer is immune from civil liability from
24 damages or injuries resulting from the good faith use of a bleeding
25 control kit to the same extent as a professional employee of the
26 district or school, as provided by Section 22.053.

27 (f) Nothing in this section limits the immunity from

1 liability of a school district, open-enrollment charter school, or
2 district or school employee or volunteer under:

3 (1) Sections 22.0511 and 22.053;

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

5 or

6 (3) any other applicable law.

7 (g) This section does not create a cause of action against a
8 school district or open-enrollment charter school or the employees
9 or volunteers of the district or school.

10 SECTION 2. As soon as practicable after the effective date
11 of this Act, and not later than January 1, 2020, each school
12 district and open-enrollment charter school shall develop and
13 implement the traumatic injury response protocol required by
14 Section 38.030, Education Code, as added by this Act.

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

ADOPTED

Ferna Lucio, Jr.

MAY 21 2019

BY:

as amended
Larry Paul
Secretary of the Senate

FLOOR AMENDMENT NO. 1

Amend C.S.H.B. No. 496 (senate committee report) as follows:

(1) In SECTION 1 of the bill, in added Section 38.030, Education Code (page 2, between lines 22 and 23), insert the following:

(h) A school district or open-enrollment charter school shall, subject to Subsection (i), require each student enrolled at a campus of the district or school to complete, at least once before the student's graduation and not earlier than during the student's seventh grade year, an agency-approved course of instruction on the use of a bleeding control kit. The course of instruction required under this subsection may be included as a part of the instruction in another course.

(i) A student is not required to complete the course of instruction under Subsection (h) 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.

(j) For purposes of Subsection (h), the agency must approve a course of instruction that:

(1) has been developed or endorsed by the American College of Surgeons or a similar organization; or

(2) uses nationally recognized, evidence-based guidelines for bleeding control and incorporates instruction on the psychomotor skills necessary to use a bleeding control kit in the event of an injury to another person.

(k) A course of instruction approved by the agency under Subsection (j) may be provided by emergency medical technicians, paramedics, law enforcement officers, firefighters,

1 representatives of the organization or institution that developed
2 or endorsed the training, educators, other public school employees
3 or other similarly qualified individuals. A course of instruction
4 approved by the agency under Subsection (j) is not required to
5 provide for certification in bleeding control. If the course of
6 instruction does provide for certification in bleeding control,
7 the instructor must be authorized to provide the instruction for
8 the purpose of certification by the organization or institution
9 that developed or endorsed the course of instruction.

10 (2) In SECTION 2 of the bill (page 2, line 23), between
11 "SECTION 2." and "As soon", insert the following:

12 (a) Not later than October 1, 2019, the Texas Education
13 Agency shall approve a course of instruction on the use of a
14 bleeding control kit that is appropriate to satisfy the requirement
15 under Section 38.030, Education Code, as added by this Act.

16 (b)

ADOPTED

V V
MAY 21 2019

Henry Spaul
Secretary of the Senate

BY:



FLOOR AMENDMENT NO. 2

1 Amend Floor Amendment No. 1 as follows:

2 (1) On page 1, line 6, strike "shall" and substitute "may".

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

May 22, 2019

TO: Honorable Dennis Bonnen, Speaker of the House, House of Representatives

FROM: John McGeady, Assistant Director Sarah Keyton, Assistant Director
Legislative Budget Board

IN RE: HB496 by Gervin-Hawkins (Relating to traumatic injury response protocol and the use of bleeding control kits in public schools.), **As Passed 2nd House**

<p>No significant fiscal implication to the State is anticipated.</p>
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It is assumed that the provisions of the bill relating to traumatic injury response protocol and the use of bleeding control kits in public schools could be absorbed using existing resources.

Local Government Impact

The bill would require school districts and charter schools to purchase bleeding control kits and to train students on the use of the stations. This analysis assumes each kit would cost \$60. Assuming two kits per campus, this analysis estimates a statewide cost to districts and charters of \$1.0 million in fiscal year 2020, in addition to any costs associated with implementing the required training.

Source Agencies: 701 Texas Education Agency

LBB Staff: WP, HL, AM, ASa, CPa

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

May 17, 2019

TO: Honorable Larry Taylor, Chair, Senate Committee on Education

FROM: John McGeady, Assistant Director Sarah Keyton, Assistant Director
Legislative Budget Board

IN RE: HB496 by Gervin-Hawkins (Relating to traumatic injury response protocol and the use of bleeding control kits in public schools.), **Committee Report 2nd House, Substituted**

No significant fiscal implication to the State is anticipated.

It is assumed that the provisions of the bill relating to the placement of bleeding control kits in public schools and to required training of school personnel could be absorbed using existing resources.

Local Government Impact

The bill would require school districts and charter schools to purchase bleeding control kits. This analysis assumes each kit would cost \$60. Assuming two kits per campus, this analysis estimates a statewide cost to districts and charters of \$1.0 million in fiscal year 2020.

Source Agencies: 701 Texas Education Agency

LBB Staff: WP, HL, AM, ASa, CPa

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

May 15, 2019

TO: Honorable Larry Taylor, Chair, Senate Committee on Education

FROM: John McGeady, Assistant Director Sarah Keyton, Assistant Director
Legislative Budget Board

IN RE: **HB496** by Gervin-Hawkins (Relating to the placement of bleeding control stations in public schools and to required training of public school personnel and students.), **As Engrossed**

No significant fiscal implication to the State is anticipated.

It is assumed that the provisions of the bill relating to the placement of bleeding control stations in public schools and to required training of public school personnel and students could be absorbed using existing resources.

Local Government Impact

The bill would require school districts and charter schools to purchase certain equipment for bleeding control stations and to train certain students and staff on the use of the stations. Costs would vary by district or school based on the number of items included in each bleeding control station as determined by the superintendent or school director and the number of bleeding control stations per campus.

Source Agencies: 701 Texas Education Agency, 758 Texas State University System

LBB Staff: WP, ASa, HL, AM, CPa

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

April 23, 2019

TO: Honorable Dan Huberty, Chair, House Committee on Public Education

FROM: John McGeady, Assistant Director Sarah Keyton, Assistant Director
Legislative Budget Board

IN RE: HB496 by Gervin-Hawkins (Relating to the placement of bleeding control stations in public schools and to required training of public school personnel and students.),
Committee Report 1st House, Substituted

No significant fiscal implication to the State is anticipated.

It is assumed that the provisions of the bill relating to the placement of bleeding control stations in public schools and to required training of public school personnel and students could be absorbed using existing resources.

Local Government Impact

The bill would require school districts and charter schools to purchase certain equipment for bleeding control stations and to train certain students and staff on the use of the stations. Based on information provided by Texas State University System, this analysis assumes each station would cost approximately \$500. Assuming a minimum of one station per campus results in an estimated statewide cost to districts and charters of \$4.3 million in fiscal year 2020, in addition to any costs associated with implementing the required training.

Source Agencies: 701 Texas Education Agency, 758 Texas State University System

LBB Staff: WP, HL, AM, ASa, CPa

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

April 15, 2019

TO: Honorable Dan Huberty, Chair, House Committee on Public Education

FROM: John McGeady, Assistant Director Sarah Keyton, Assistant Director
Legislative Budget Board

IN RE: HB496 by Gervin-Hawkins (Relating to the placement of bleeding control kits in public schools and to required training of school personnel.), **As Introduced**

No significant fiscal implication to the State is anticipated.

It is assumed that the provisions of the bill relating to the placement of bleeding control kits in public schools and to required training of school personnel could be absorbed using existing resources.

Local Government Impact

The bill would require school districts and charter schools to purchase bleeding control kits. TEA assumes each kit would cost of \$60. Assuming two kits per campus, TEA estimates a statewide cost to districts and charters of \$1.0 million in fiscal year 2020.

Source Agencies: 701 Texas Education Agency

LBB Staff: WP, CPa, AM, ASa