

CONFERENCE COMMITTEE REPORT FORM

Austin, Texas

5/25/19

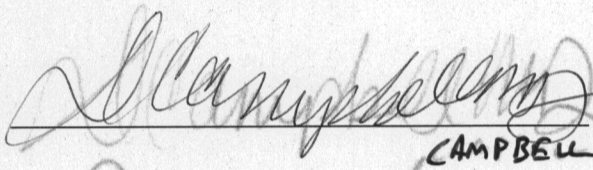
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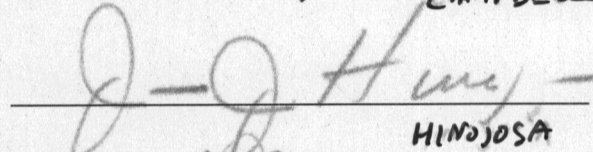
Honorable Dan Patrick
President of the Senate

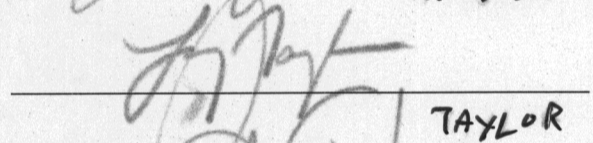
Honorable Dennis Bonnen
Speaker of the House of Representatives

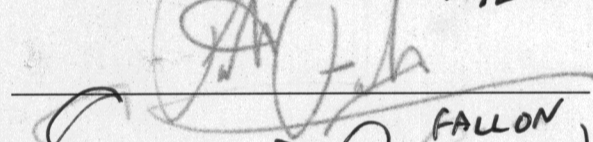
Sirs:

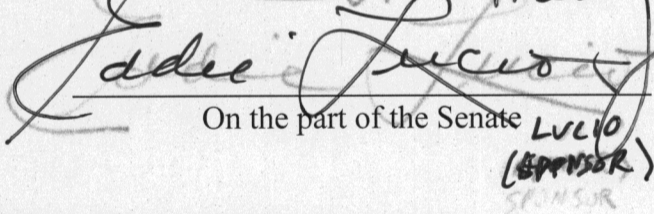
We, Your Conference Committee, appointed to adjust the differences between the Senate and the House of Representatives on HB 496 have had the same under consideration, and beg to report it back with the recommendation that it do pass in the form and text hereto attached.

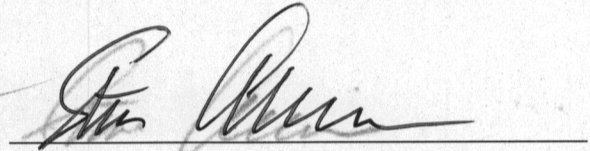

CAMPBELL

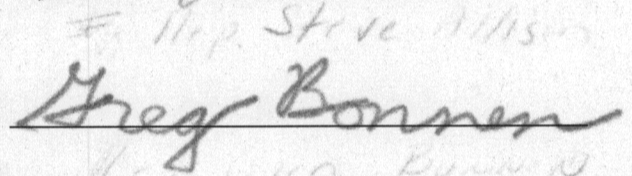

HINOJOSA

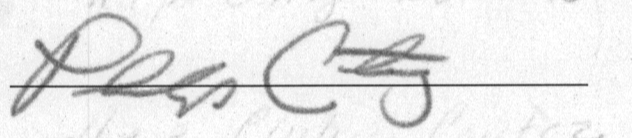

TAYLOR


FALLON

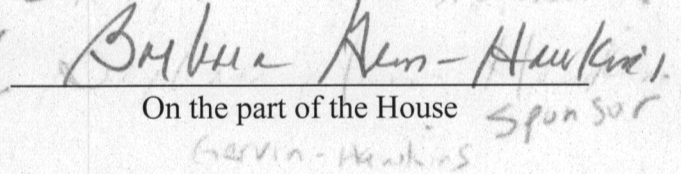

On the part of the Senate
LULIO
(SPONSOR)


Rep. Steve Hill


Greg Bonnen


Press


Gervin


On the part of the House
Gervin-Hawkins
SPONSOR

Note to Conference Committee Clerk:

Please type the names of the members of the Conference Committee under the lines provided for signature. Those members desiring to sign the report should sign each of the six copies. Attach a copy of the Conference Committee Report and a Section by Section side by side comparison to each of the six reporting forms. The original and two copies are filed in house of origin of the bill, and three copies in the other house.

CONFERENCE COMMITTEE REPORT

3rd Printing

H.B. No. 496

A BILL TO BE ENTITLED

1 AN ACT

2 relating to traumatic injury response protocol and the use of
3 bleeding control stations 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) Each
8 school district and open-enrollment charter school shall develop
9 and 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:

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

17 (2) ensure that bleeding control stations are stored
18 in easily accessible areas of the campus that are selected by the
19 district's school safety and security committee or the charter
20 school's governing body;

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

24 (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

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- 1 Act does not receive the vote necessary for immediate effect, this
- 2 Act takes effect September 1, 2019.

House Bill 496
Conference Committee Report
Section-by-Section Analysis

HOUSE VERSION

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

SENATE VERSION (IE)

No equivalent provision. (But see SECTION 1 below.)

CONFERENCE

SECTION 1. Same as House version except 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;

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Conference Committee Report
Section-by-Section Analysis

HOUSE VERSION

SENATE VERSION (IE)

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(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:

(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 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) require the district or charter school to annually offer 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) to students enrolled at the campus in grade seven or higher.

(c) 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.

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(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

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

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

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(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;

(2) chest seals;

(3) compression bandages;

(4) bleeding control bandages;

(5) space emergency blankets;

(6) latex-free gloves;

(7) markers;

(8) scissors; and

(9) instructional documents developed by the American College of Surgeons or the United States Department of

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Conference Committee Report
Section-by-Section Analysis

HOUSE VERSION

(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

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Homeland Security detailing methods to prevent blood loss following a traumatic event.

(e) In addition to the items listed under Subsection (d), 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.

(f) 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

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(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.

SENATE VERSION (IE)

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

(g) The course of instruction for training described under Subsection (f) 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.

(h) The course of instruction *described under Subsection (f)* may be provided by

emergency medical technicians, paramedics, law enforcement officers, firefighters, representatives of the organization or institution that developed or endorsed the training, educators, other public school employees, *or other similarly qualified individuals.* A course of instruction described *under* Subsection (f) 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.

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HOUSE VERSION

No equivalent provision. (But see SECTION 1 above.)

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

SENATE VERSION (IE)

SECTION 1. Subchapter A, Chapter 38, Education Code, is amended. Among other provisions, Subsections (e), (f), and (g) are added to read as follows:

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

(f) - (g)

SECTION 2. Same as House version except as follows:

(a) Not later than October 1, 2019, the Texas Education Agency shall approve **a course of instruction on** the use of a bleeding control **kit** that is appropriate to satisfy the **requirement under Section 38.030**, 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

CONFERENCE

SECTION 1 (cont.). Same as Senate version except as follows:

(i) The good faith use of a bleeding control **station** by a school district or open-enrollment charter school employee to control the bleeding of an injured person is incident to or within the scope of the duties of the employee's position of employment and involves the exercise of judgment or discretion on the part of the employee for purposes of Section 22.0511, and a school district or open-enrollment charter school and the employees of the district or school are immune from civil liability, as provided by that section, from damages or injuries resulting from that good faith use of a bleeding control **station**. A school district or open-enrollment charter school volunteer is immune from civil liability from damages or injuries resulting from the good faith use of a bleeding control **station** to the same extent as a professional employee of the district or school, as provided by Section 22.053.

(j) - (k)

SECTION 2. Same as Senate version except as follows:

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

(b) Same as Senate version.

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the *bleeding control station program* required by *Section 38.029*, Education Code, as added by this Act.

SECTION 3. Effective date.

SENATE VERSION (IE)

the *traumatic injury response protocol* required by *Section 38.030*, Education Code, as added by this Act. [FA1(2)]

SECTION 3. Same as House version.

CONFERENCE

SECTION 3. Same as House version.

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

May 25, 2019

TO: Honorable Dan Patrick, Lieutenant Governor, Senate
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 stations in public schools.), **Conference Committee Report**

| |
|---|
| 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, CPa, ASa, THo, HL, AM

**Certification of Compliance with
Rule 13, Section 6(b), House Rules of Procedure**

Rule 13, Section 6(b), House Rules of Procedure, requires a copy of a conference committee report signed by a majority of each committee of the conference to be furnished to each member of the committee in person or, if unable to deliver in person, by placing a copy in the member's newspaper mailbox at least one hour before the report is furnished to each member of the house under House Rule 13, Section 10(a). The paper copies of the report submitted to the chief clerk under Rule 13, Section 10(b), must contain a certificate that the requirement of Rule 13, Section 6(b), has been satisfied, and that certificate must be attached to the copy of the report furnished to each member under Rule 13, Section 10(d). Failure to comply with this requirement is not subject to a point of order under Rule 13.

I certify that a copy of the conference committee report on HB 496 was furnished to each member of the conference committee in compliance with Rule 13, Section 6(b), House Rules of Procedure, before submission of the paper copies of the report to the chief clerk under Rule 13, Section 10(b), House Rules of Procedure.

Byron Kern-Hawkins
(name)

5-25-2019
(date)