

Traumatic Injury Response Frequently Asked Questions November 6, 2024

This document is intended to provide answers to the most commonly asked questions. Questions are organized into the following categories:

- Training for Staff
- Instruction for Students
- Injury Response Protocol
- Bleeding Control Stations

Training for Staff

1. Who is required to be trained?

The Texas Education Code (TEC), <u>§38.030(b)(3)</u>, states that agency-approved training on the use of a bleeding control station in the event of an injury to another person must be provided to school district peace officers, school security personnel, school resource officers, and all other school district or school personnel who may be reasonably expected to use a bleeding control station.

2. Who qualifies as "other school district or school personnel" for purposes of the required bleeding control station training?

This is a local education agency (LEA) determination, as circumstances will vary at each LEA campus. Examples of such personnel could include school nurses, athletic trainers and coaches, educators instructing students on the use of industrial equipment, and campus administrators.

3. What is the frequency of training for staff?

TEC, <u>§38.030(a)</u>, states that LEAs shall develop and annually make available a protocol for school employees and volunteers to follow in the event of a traumatic injury. TEC, §38.030(b)(3), states the protocol must include agency-approved training on the use of a bleeding control station in the event of an injury to another person; therefore, the training should be provided on an annual basis.

4. Are LEAs required to report to the Texas Education Agency (TEA) that school staff have received training?

No, there is not a requirement for LEAs to report information about the training to TEA.

5. Are LEAs required to track the training provided to staff?

TEC, <u>§38.030(b)(3)</u>, states that agency-approved training on the use of a bleeding control station in the event of an injury to another person must be provided to school district peace officers, school security personnel, school resource officers, and all other school district or school personnel who may be reasonably expected to use a bleeding control station. How an LEA documents that staff have completed the required training is a local decision.

6. Can the training for staff be provided online?

Yes, TEC, <u>§38.030(g)</u>, states that the required training may be provided as an online course.

7. Does the staff training staff require psychomotor skill (hands-on) instruction?

Yes, TEC, $\frac{$38.030(g)}{2}$, states that the training must incorporate instruction on the psychomotor skills necessary to use a bleeding control station in the event of an injury to another person.

8. Where can I find the list of agency-approved trainings?

The list of agency-approved trainings is available on the <u>Healthy and Safe School Environment</u> of the Coordinated School Health Model web page.

9. Can the approved training providers establish requirements (e.g., who may provide the training, length of the training, number of participants, etc.) that go beyond what is required by law?

Yes, an approved training provider may include specific requirements for its training or for those who offer the training that go beyond what is required by law.

10. What are the options for rural schools that may not have access to a specific group of individuals allowed to provide the training?

Rural schools may wish to partner with area paramedics, law enforcement officers, local or regional hospitals, etc., to provide the required training for staff.

Instruction for Students

11. How often are LEAs required to offer instruction to students in grades 7-12?

TEC, <u>§38.030(b)(4)</u>, requires an LEA to <u>annually offer</u> 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 to students enrolled at the campus in grade 7 or higher.

12. Can an LEA determine which grade level will be targeted for instruction?

No, instruction must be offered to all students in grade 7 and higher on an annual basis.

13. Are students required to receive instruction?

The law does not explicitly require each student to complete the required instruction; however, districts are required to annually conduct and make the instruction available to each student enrolled in grades 7 and higher.

14. Is the instruction students receive required to be hands on?

No, the law does not require instruction provided to students to be hands on.

15. How is the instruction to be offered to students? What is the method of delivery? What materials can be used?

The method of delivery and materials used for instruction offered to students is an LEA decision.

16. Are LEAs required to report to TEA that instruction has been offered to students?

No, LEAs are not required to report information about instruction offered to students to TEA.

Injury Response Protocol

17. Does the agency have a template to assist LEAs in developing a traumatic injury response protocol?

No, TEC, <u>§38.030</u>, discusses what is to be included in the traumatic injury response protocol. The protocol should be specific to each LEA's location but should also include the information outlined in law.

18. Is an LEA required to send its traumatic injury response protocol to TEA for review and approval?

No, the law does not require an LEA to send information regarding the protocol to TEA for review and approval.

Bleeding Control Stations

19. Will TEA be providing an approved list of vendors for purchasing bleeding control stations?

No, the selection of a vendor falls outside of TEA's authority.

20. Where should bleeding control stations be stored?

TEC, <u>§38.030(c)</u>, states that a school district's school safety and security committee or the charter school's governing body may select easily accessible areas of campus at which bleeding control stations may be stored. A possible storage option might be areas of a campus where automated external defibrillators (AEDs) are stored.

21. How many bleeding control stations must each campus have?

The law states "bleeding control stations," which means more than one station per campus.

22. What supplies are the bleeding control stations required to have?

TEC, <u>§38.030(d)</u>, states that a bleeding control station must contain all of the following required supplies:

- Tourniquets approved for use in battlefield trauma care by the armed forces of the United States
- Chest seals
- Compression bandages
- Bleeding control bandages
- Space emergency blankets
- Latex-free gloves
- Markers
- Scissors
- Instructional documents developed by the American College of Surgeons or the United States Department of Homeland Security detailing methods to prevent blood loss following a traumatic event.

The required supplies must be maintained in quantities determined appropriate by the superintendent of the district or the director of the school.

23. Are there additional supplies that can be added to the bleeding control stations?

TEC, <u>§38.030(e)</u>, states that an LEA may also include in a bleeding control station any medical material or equipment that:

- may be readily stored in a bleeding control station;
- may be used to adequately treat an injury involving traumatic blood loss; and
- is approved by local law enforcement or emergency medical services personnel.