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COMMITTEE REPORT

May 13, 2013

**S. 160**

Introduced by Senators Malloy, Cleary, Jackson, Shealy, Verdin, Fair and Alexander

S. Printed 5/13/13--S.

Read the first time January 8, 2013.

**THE COMMITTEE ON EDUCATION**

To whom was referred a Bill (S. 160) to amend Chapter 32, Title 59 of the 1976 Code, relating to the Comprehensive Health Education Program, by adding Section 59‑32‑35 to require instruction in cardiopulmonary, etc., respectfully

**REPORT:**

That they have duly and carefully considered the same and recommend that the same do pass with amendment:

Amend the bill, as and if amended, pages 1-2, by striking SECTION 1 in its entirety and inserting:

/ SECTION 1. Section 59‑32‑30(A) of the 1976 Code is amended to read:

“(A) Pursuant to guidelines developed by the board, each local school board shall implement the following program of instruction:

(1) Beginning with the 1988‑89 school year, for grades kindergarten through five, instruction in comprehensive health education must include the following subjects: community health, consumer health, environmental health, growth and development, nutritional health, personal health, prevention and control of diseases and disorders, safety and accident prevention, substance use and abuse, dental health, and mental and emotional health. Sexually transmitted diseases as defined in the annual Department of Health and Environmental Control List of Reportable Diseases are to be excluded from instruction on the prevention and control of diseases and disorders. At the discretion of the local board, age‑appropriate instruction in reproductive health may be included.

(2) Beginning with the 1988‑89 school year, for grades six through eight, instruction in comprehensive health must include the following subjects: community health, consumer health, environmental health, growth and development, nutritional health, personal health, prevention and control of diseases and disorders, safety and accident prevention, substance use and abuse, dental health, mental and emotional health, and reproductive health education. Sexually transmitted diseases are to be included as a part of instruction. At the discretion of the local board, instruction in family life education or pregnancy prevention education or both may be included, but instruction in these subjects may not include an explanation of the methods of contraception before the sixth grade.

(3) Beginning with the 1989‑90 school year, at least one time during the four years of grades nine through twelve, each student shall receive instruction in comprehensive health education, including at least seven hundred fifty minutes of reproductive health education and pregnancy prevention education.

(4) The South Carolina Educational Television Commission shall work with the department in developing instructional programs and materials that may be available to the school districts. Films and other materials may be designed for the purpose of explaining bodily functions or the human reproductive process. These materials may not contain actual or simulated portrayals of sexual activities or sexual intercourse.

(5) The program of instruction provided for in this section may not include a discussion of alternate sexual lifestyles from heterosexual relationships including, but not limited to, homosexual relationships except in the context of instruction concerning sexually transmitted diseases.

(6) In grades nine through twelve, students must also be given appropriate instruction that adoption is a positive alternative.

(7) Beginning with the 2015‑16 school year, at least one time during the four years of grades nine through twelve, each student shall receive instruction in cardiopulmonary resuscitation (CPR), which must include, but is not limited to, hands‑only CPR and the use of an automated external defibrillator (AED). Each school district shall use a program that incorporates the instruction of the psychomotor skills necessary to perform CPR developed by the American Heart Association, American Red Cross, or an instructional program which is nationally recognized and based on the most current national evidence‑based Emergency Cardiovascular Care guidelines for CPR and the use of an AED. A school district must adopt a policy providing a waiver for this requirement for a student absent on the day the instruction occurred, a student with a disability whose individualized education program indicates such student is unable to complete all or a portion of the hands‑only CPR requirement, or a student whose parent or guardian completes, in writing, a form approved by the school district opting‑out of hands‑only CPR and AED instruction. The State Board of Education shall incorporate CPR and AED instruction into the South Carolina Health and Safety Education Curriculum Standards and promulgate regulations to implement this section.”

Renumber sections to conform.

Amend title to conform.

Majority favorable. Minority unfavorable.

JOHN E. COURSON LAWRENCE K. GROOMS

For Majority. For Minority.

**STATEMENT OF ESTIMATED FISCAL IMPACT**

ESTIMATED FISCAL IMPACT ON GENERAL FUND EXPENDITURES:

Minimal (Some additional costs expected but can be absorbed)

ESTIMATED FISCAL IMPACT ON FEDERAL & OTHER FUND EXPENDITURES:

See below

**EXPLANATION OF IMPACT:**

The South Carolina Department of Education (SCDE) indicates this bill would have a minimal impact on agency expenditures that could be absorbed with existing resources.

**LOCAL GOVERNMENT IMPACT:**

SCDE estimates a first year implementation cost to the districts of $16,350,670 (233,581 students x $70 cost) of which $4,340,000 would be recurring. Estimate assumes training will be given to students during their freshmen year. If grandfathering clause was included and sophomore, juniors, and seniors were exempt from training requirement to graduate, the nonrecurring cost of $12,010,670 would be eliminated leaving a recurring cost of $4,340,000.

*Approved By:*

Brenda Hart

Office of State Budget

**A** **BILL**

TO AMEND CHAPTER 32, TITLE 59 OF THE 1976 CODE, RELATING TO THE COMPREHENSIVE HEALTH EDUCATION PROGRAM, BY ADDING SECTION 59‑32‑35 TO REQUIRE INSTRUCTION IN CARDIOPULMONARY RESUSCITATION AND THE USE OF AN AUTOMATED EXTERNAL DEFIBRILLATOR TO ALL STUDENTS ENROLLED IN THE SCHOOL DISTRICT AS A REQUIREMENT FOR GRADUATION FROM HIGH SCHOOL.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Chapter 32, Title 59 of the 1976 Code is amended by adding:

“Section 59‑32‑35. (A) ‘Psychomotor skills’ means the use of hands‑on practice to support cognitive learning.

(B) Beginning in the 2014−2015 school year, each school board operating school grades nine through twelve shall provide instruction in cardiopulmonary resuscitation (CPR) and the use of an automated external defibrillator (AED) to all students enrolled in the school district as a requirement for graduation from high school. The school board shall use one of the following programs and shall incorporate into the instruction the psychomotor skills necessary to perform CPR:

(1) an instructional program developed by the American Heart Association;

(2) an instructional program developed by the American Red Cross; or

(3) an instructional program which is nationally recognized and based on the most current national evidence‑based Emergency Cardiovascular Care guidelines for CPR and the use of an AED.

(C) In accomplishing the objectives in subsection (B), public‑private partnerships are encouraged for school districts, local EMS and first responder agencies, and grant awarding foundations in order to alleviate cost.

(D) An instructor of a non‑certification course, who is a licensed teacher, shall not be required to be a certified CPR/AED instructor to facilitate, provide, or oversee such instruction.

(E) If a school district chooses to provide a course resulting in CPR certification, the course shall be taught by a certified CPR/AED instructor.

(F) The Department of Education shall establish a procedure for monitoring adherence by school boards to the requirements set forth in subsection (B) of this section.

(G) The CPR/AED certification shall be made a part of the comprehensive health education program required by this chapter.

(H) The local school board or other appropriate school official shall provide a waiver for this requirement for any student with a disability whose individualized education program indicates such student is unable to complete all or a portion of the Hands Only CPR requirement.”

SECTION 2. This act takes effect upon approval by the Governor.

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