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Indicates New Matter

COMMITTEE REPORT

March 18, 2015

**S. 320**

Introduced by Senators Malloy, Hutto, Hayes, L. Martin, Shealy and Turner

S. Printed 3/18/15--S.

Read the first time January 13, 2015.

**THE COMMITTEE ON EDUCATION**

To whom was referred a Bill (S. 320) to amend Chapter 32, Title 59 of the 1976 Code, relating to the Comprehensive Health Education Program, by amending Section 59‑32‑30 to require instruction, 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, deleting all after the enacting words and inserting:

/ SECTION 1. Article 1, Chapter 39, Title 59 of the 1976 Code is amended by adding:

“Section 59‑39‑210. (A) The governing board of a school district maintaining a secondary school that includes any grades nine through twelve, inclusive, shall establish cardiopulmonary resuscitation (CPR) instruction programs for students in high school grades, which must include, but not be limited to, hands‑only CPR and the use of an automated external defibrillator (AED).

(B) A CPR instruction program established pursuant subsection (A) must incorporate instruction of psychomotor skills necessary to perform CPR developed by the American Heart Association, the American Red Cross, or an instructional program that 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 local school district shall coordinate with entities that have the experience and necessary equipment for the instruction of CPR and the use of AEDs and shall adopt a policy providing a waiver for the absence of a student from a CPR instruction required under this section, 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, and 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.”

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

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**

**Fiscal Impact Summary**

The maximum expenditure impact to local school districts would be $182,500 to purchase one kit for every high school in South Carolina.

**Explanation of Fiscal Impact**

The bill amends Section 59-32-30 to provide that each student must receive instruction in cardiopulmonary resuscitation at least once during grades nine through twelve. School districts must comply no later than the 2017-2018 school year.

**Local Expenditure**

School districts can choose to purchase CPR in Schools training kits which include manikins, lesson plans, and accessories for $600 each. At most, if every high school purchased a kit at $600 each, the expenditure impact would be $182,400. However, school districts can also partner with local agencies, fire departments, or hospitals in order to lower their costs or districts can rotate manikins among schools. In addition, several school districts have received grant funding to purchase manikins for their districts.

Frank A. Rainwater, Executive Director

Revenue and Fiscal Affairs Office

**A** **BILL**

TO AMEND CHAPTER 32, TITLE 59 OF THE 1976 CODE, RELATING TO THE COMPREHENSIVE HEALTH EDUCATION PROGRAM, BY AMENDING SECTION 59‑32‑30 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. Section 59‑32‑30(A) of the 1976 Code is amended to read:

“Section 59‑32‑30. (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 2016‑17 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.”

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

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