

Assembly Bill No. 2260

CHAPTER 586

An act to add Section 1714.29 to the Civil Code, and to add Chapter 4 (commencing with Section 19305) to Part 3 of Division 13 of the Health and Safety Code, relating to emergency response.

[Approved by Governor September 27, 2022. Filed with
Secretary of State September 27, 2022.]

LEGISLATIVE COUNSEL'S DIGEST

AB 2260, Rodriguez. Emergency response: trauma kits.

Under existing law, everyone is generally responsible, not only for the result of their willful acts, but also for an injury occasioned to another by their want of ordinary care or skill in the management of their property or person. Existing law exempts from civil liability any person who, in good faith and not for compensation, renders emergency medical or nonmedical care or assistance at the scene of an emergency other than an act or omission constituting gross negligence or willful or wanton misconduct. Existing law exempts public or private organizations that sponsor, authorize, support, finance, or supervise the training of people, or certifies those people in emergency medical services, from liability for civil damages alleged to result from those training programs.

This bill would define "trauma kit" to mean a first aid response kit that contains specified items, including, among other things, a tourniquet. The bill would allow medical materials and equipment and any additional items that are approved by the medical director of the local emergency medical services agency to be included as supplements in addition to the specified items that are required to be included in a trauma kit if they adequately treat a traumatic injury and can be stored in a readily available kit. The bill would require a person or entity that supplies a trauma kit to provide the person or entity that acquires the trauma kit with all information governing the use and maintenance of the trauma kit. The bill would apply the provisions governing civil liability described above to a lay rescuer or person who renders emergency care or treatment by the use of a trauma kit at the scene of an emergency.

Existing law requires certain occupied structures that are not owned or operated by any local government entity and are constructed on or after January 1, 2017, to have an automated external defibrillator on the premises.

This bill would require the person or entity responsible for managing the building, facility, and tenants of the above-referenced occupied structures, including those that are owned or operated by a local government entity, and that are constructed on or after January 1, 2023, to comply with certain requirements, including acquiring and placing at least 6 trauma kits on the

premises, as specified, periodically inspecting and replacing the contents of a trauma kit, restocking the trauma kit after each use if the property managing entity or person is aware, or reasonably should be aware, that a trauma kit has been used, and notifying tenants of the building or structure of the location of the trauma kits, as specified. The bill would exempt a person or entity from liability for civil damages resulting from any acts or omissions in the rendering of emergency care if those requirements have been met and would exempt a property managing entity from civil damages resulting from the failure, improper operation, or malfunction of equipment or materials within a properly stocked trauma kit.

The people of the State of California do enact as follows:

SECTION 1. This act shall be known and may be cited as the Tactical Response to Traumatic Injuries Act.

Tactical Response to Traumatic Injuries Act

SEC. 2. Section 1714.29 is added to the Civil Code, to read:

1714.29. (a) For purposes of this section, “trauma kit” means a first aid response kit that contains at least all of the following:

(1) One tourniquet endorsed by the Committee on Tactical Combat Casualty Care.

(2) One bleeding control bandage.

(3) One pair of nonlatex protective gloves and a marker.

(4) One pair of scissors.

(5) Instructional documents developed by the Stop the Bleed national awareness campaign of the United States Department of Homeland Security or the American College of Surgeons Committee on Trauma, the American Red Cross, the Committee for Tactical Emergency Casualty Care, or any other partner of the United States Department of Defense.

(b) Medical materials and equipment similar to those described in paragraphs (1) to (4), inclusive, of subdivision (a) and any additional items that are approved by the medical director of the local emergency medical services agency may be included as supplements in addition to the items described in paragraphs (1) to (4), inclusive, of subdivision (a) if they adequately treat a traumatic injury and can be stored in a readily available kit.

(c) Subdivision (b) of Section 1799.102 of the Health and Safety Code, the “Good Samaritan Law,” applies to any lay rescuer or person who, in good faith and not for compensation, renders emergency care or treatment by the use of a trauma kit at the scene of an emergency.

(d) A person who renders emergency care or treatment by the use of a trauma kit at the scene of an emergency and who receives compensation as a result of their employment by a property managing entity, a tenant of a building, or any other private or public employer, but is not compensated

to provide emergency medical care, is not providing emergency medical care “for compensation” for purposes of Section 1799.102 of the Health and Safety Code.

(e) Section 1799.100 of the Health and Safety Code applies to a person or entity that voluntarily, and without expectation and receipt of compensation, does either of the following:

(1) Provides training in the use of a trauma kit to provide emergency medical treatment to victims of trauma, including, but not limited to, training in the use of the trauma kit in emergency first care response to an active shooter.

(2) Certifies persons, other than physicians and surgeons, registered nurses, and licensed vocational nurses, who are trained in the use of a trauma kit to provide emergency medical treatment to victims of trauma.

(f) This section does not require a property manager or person employed by a property managing entity to respond to an emergency with the use of trauma kits.

SEC. 3. Chapter 4 (commencing with Section 19305) is added to Part 3 of Division 13 of the Health and Safety Code, to read:

CHAPTER 4. TRAUMA KITS

19305. (a) For purposes of this section, “trauma kit” means a first aid response kit that contains at least all of the following:

(1) One tourniquet endorsed by the Committee on Tactical Combat Casualty Care.

(2) One bleeding control bandage.

(3) One pair of nonlatex protective gloves and a marker.

(4) One pair of scissors.

(5) Instructional documents developed by the Stop the Bleed national awareness campaign of the United States Department of Homeland Security or the American College of Surgeons Committee on Trauma, the American Red Cross, the Committee for Tactical Emergency Casualty Care, or any other partner of the United States Department of Defense.

(b) Medical materials and equipment similar to those described in paragraphs (1) to (4), inclusive, of subdivision (a) and any additional items that are approved by the medical director of the local emergency medical services agency may be included as supplements in addition to the items described in paragraphs (1) to (4), inclusive, of subdivision (a) if they adequately treat a traumatic injury and can be stored in a readily available kit.

19307. In order to ensure public safety, a person or entity that supplies a trauma kit shall provide the person or entity that acquires the trauma kit with all information governing the use and maintenance of the trauma kit.

19310. (a) This chapter applies to all of the following structures, as defined in Chapter 3 of the California Building Code (Part 2 of Title 24 of

the California Code of Regulations), that are constructed on or after January 1, 2023:

- (1) Group A assembly buildings with an occupancy of greater than 300.
- (2) Group B business buildings with an occupancy of 200 or more.
- (3) Group E educational buildings with an occupancy of 200 or more.
- (4) Group F factory buildings with an occupancy of 200 or more.
- (5) Group I institutional buildings with an occupancy of 200 or more.
- (6) Group M mercantile buildings with an occupancy of 200 or more.
- (7) Group R residential buildings with an occupancy of 200 or more, excluding single-family and multifamily dwelling units.

(b) (1) This chapter also applies to a structure listed in subdivision (a) that is owned or operated by a local governmental entity.

(2) This chapter does not apply to a health facility licensed under subdivision (a), (b), (c), or (f) of Section 1250.

(3) This chapter does not apply to a structure that is vacant or under construction or renovation.

(c) (1) A person or entity that complies with subdivision (d) is not liable for any civil damages resulting from any acts or omissions in the rendering of emergency care by use of a trauma kit.

(2) A property managing entity is not liable for any civil damages resulting from the failure, improper operation, or malfunction of equipment or materials within a properly stocked trauma kit.

(d) In order to ensure public safety, the person or entity responsible for managing the building, facility, and tenants of any structure described in subdivision (a) that is an occupied structure shall do all of the following:

(1) Acquire and place at least six trauma kits on the premises of the building or facility in an easily accessible and recognizable container located next to an automated external defibrillator (AED) as required by Section 19300.

(2) Inspect all trauma kits acquired and placed on the premises of a building or structure every three years from the date of installation to ensure that all materials, supplies, and equipment contained in the trauma kit are not expired, and replace any expired or missing materials, supplies, and equipment as necessary.

(3) If a property managing entity or person is aware, or reasonably should be aware, that a trauma kit has been used, they shall restock the trauma kit after each use and replace any materials, supplies, and equipment as necessary to ensure that all materials, supplies, and equipment required to be contained in the trauma kit are contained in the trauma kit.

(4) At least once per year, notify tenants of the building or structure of the location of the trauma kits and provide information to tenants regarding contact information for training in the use of the trauma kit. For purposes of complying with this notification requirement, property managers may direct tenants to the Stop the Bleed national awareness campaign of the United States Department of Homeland Security or the American College of Surgeons Committee on Trauma, the American Red Cross, the Committee for Tactical Emergency Casualty Care, or any other partner of the United

States Department of Defense or reputable providers. The property manager is only required to identify one potential source of training, but may choose to identify multiple sources of training.

(e) For the purposes of this section, a “local EMS agency” means an agency described in Section 1797.200.