



100TH GENERAL ASSEMBLY

State of Illinois

2017 and 2018

HB5213

by Rep. Tom Demmer

SYNOPSIS AS INTRODUCED:

5 ILCS 80/4.36

105 ILCS 5/22-80

105 ILCS 25/1.20

225 ILCS 5/Act rep.

730 ILCS 5/5-5-5

from Ch. 38, par. 1005-5-5

Repeals the Illinois Athletic Trainers Practice Act. Makes conforming changes in the Regulatory Sunset Act, the School Code, the Interscholastic Athletic Organization Act, and the Unified Code of Corrections. Effective immediately.

LRB100 16021 SMS 31140 b

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Regulatory Sunset Act is amended by changing
5 Section 4.36 as follows:

6 (5 ILCS 80/4.36)

7 Sec. 4.36. Acts repealed on January 1, 2026. The following
8 Acts are repealed on January 1, 2026:

9 The Barber, Cosmetology, Esthetics, Hair Braiding, and
10 Nail Technology Act of 1985.

11 The Collection Agency Act.

12 The Hearing Instrument Consumer Protection Act.

13 ~~The Illinois Athletic Trainers Practice Act.~~

14 The Illinois Dental Practice Act.

15 The Illinois Roofing Industry Licensing Act.

16 The Illinois Physical Therapy Act.

17 The Professional Geologist Licensing Act.

18 The Respiratory Care Practice Act.

19 (Source: P.A. 99-26, eff. 7-10-15; 99-204, eff. 7-30-15;
20 99-227, eff. 8-3-15; 99-229, eff. 8-3-15; 99-230, eff. 8-3-15;
21 99-427, eff. 8-21-15; 99-469, eff. 8-26-15; 99-492, eff.
22 12-31-15; 99-642, eff. 7-28-16.)

1 Section 10. The School Code is amended by changing Section
2 22-80 as follows:

3 (105 ILCS 5/22-80)

4 Sec. 22-80. Student athletes; concussions and head
5 injuries.

6 (a) The General Assembly recognizes all of the following:

7 (1) Concussions are one of the most commonly reported
8 injuries in children and adolescents who participate in
9 sports and recreational activities. The Centers for
10 Disease Control and Prevention estimates that as many as
11 3,900,000 sports-related and recreation-related
12 concussions occur in the United States each year. A
13 concussion is caused by a blow or motion to the head or
14 body that causes the brain to move rapidly inside the
15 skull. The risk of catastrophic injuries or death are
16 significant when a concussion or head injury is not
17 properly evaluated and managed.

18 (2) Concussions are a type of brain injury that can
19 range from mild to severe and can disrupt the way the brain
20 normally works. Concussions can occur in any organized or
21 unorganized sport or recreational activity and can result
22 from a fall or from players colliding with each other, the
23 ground, or with obstacles. Concussions occur with or
24 without loss of consciousness, but the vast majority of
25 concussions occur without loss of consciousness.

1 (3) Continuing to play with a concussion or symptoms of
2 a head injury leaves a young athlete especially vulnerable
3 to greater injury and even death. The General Assembly
4 recognizes that, despite having generally recognized
5 return-to-play standards for concussions and head
6 injuries, some affected youth athletes are prematurely
7 returned to play, resulting in actual or potential physical
8 injury or death to youth athletes in this State.

9 (4) Student athletes who have sustained a concussion
10 may need informal or formal accommodations, modifications
11 of curriculum, and monitoring by medical or academic staff
12 until the student is fully recovered. To that end, all
13 schools are encouraged to establish a return-to-learn
14 protocol that is based on peer-reviewed scientific
15 evidence consistent with Centers for Disease Control and
16 Prevention guidelines and conduct baseline testing for
17 student athletes.

18 (b) In this Section:

19 "Athletic trainer" means a person who, upon the direction
20 of his or her team physician or consulting physician, carries
21 out the practice of prevention/emergency care or physical
22 reconditioning of injuries incurred by athletes participating
23 in an athletic program conducted by an educational institution,
24 professional athletic organization, or sanctioned amateur
25 athletic organization employing the athletic trainer; or a
26 person who, under the direction of a physician, carries out

1 comparable functions for a health organization-based
2 extramural program of athletic training services for athletes
3 ~~an athletic trainer licensed under the Illinois Athletic~~
4 ~~Trainers Practice Act who is working under the supervision of a~~
5 ~~physician.~~

6 "Coach" means any volunteer or employee of a school who is
7 responsible for organizing and supervising students to teach
8 them or train them in the fundamental skills of an
9 interscholastic athletic activity. "Coach" refers to both head
10 coaches and assistant coaches.

11 "Concussion" means a complex pathophysiological process
12 affecting the brain caused by a traumatic physical force or
13 impact to the head or body, which may include temporary or
14 prolonged altered brain function resulting in physical,
15 cognitive, or emotional symptoms or altered sleep patterns and
16 which may or may not involve a loss of consciousness.

17 "Department" means the Department of Financial and
18 Professional Regulation.

19 "Game official" means a person who officiates at an
20 interscholastic athletic activity, such as a referee or umpire,
21 including, but not limited to, persons enrolled as game
22 officials by the Illinois High School Association or Illinois
23 Elementary School Association.

24 "Interscholastic athletic activity" means any organized
25 school-sponsored or school-sanctioned activity for students,
26 generally outside of school instructional hours, under the

1 direction of a coach, athletic director, or band leader,
2 including, but not limited to, baseball, basketball,
3 cheerleading, cross country track, fencing, field hockey,
4 football, golf, gymnastics, ice hockey, lacrosse, marching
5 band, rugby, soccer, skating, softball, swimming and diving,
6 tennis, track (indoor and outdoor), ultimate Frisbee,
7 volleyball, water polo, and wrestling. All interscholastic
8 athletics are deemed to be interscholastic activities.

9 "Licensed healthcare professional" means a person who has
10 experience with concussion management and who is a nurse, a
11 psychologist who holds a license under the Clinical
12 Psychologist Licensing Act and specializes in the practice of
13 neuropsychology, a physical therapist licensed under the
14 Illinois Physical Therapy Act, an occupational therapist
15 licensed under the Illinois Occupational Therapy Practice Act,
16 a physician assistant, or an athletic trainer.

17 "Nurse" means a person who is employed by or volunteers at
18 a school and is licensed under the Nurse Practice Act as a
19 registered nurse, practical nurse, or advanced practice
20 registered nurse.

21 "Physician" means a physician licensed to practice
22 medicine in all of its branches under the Medical Practice Act
23 of 1987.

24 "Physician assistant" means a physician assistant licensed
25 under the Physician Assistant Practice Act of 1987.

26 "School" means any public or private elementary or

1 secondary school, including a charter school.

2 "Student" means an adolescent or child enrolled in a
3 school.

4 (c) This Section applies to any interscholastic athletic
5 activity, including practice and competition, sponsored or
6 sanctioned by a school, the Illinois Elementary School
7 Association, or the Illinois High School Association. This
8 Section applies beginning with the 2016-2017 school year.

9 (d) The governing body of each public or charter school and
10 the appropriate administrative officer of a private school with
11 students enrolled who participate in an interscholastic
12 athletic activity shall appoint or approve a concussion
13 oversight team. Each concussion oversight team shall establish
14 a return-to-play protocol, based on peer-reviewed scientific
15 evidence consistent with Centers for Disease Control and
16 Prevention guidelines, for a student's return to
17 interscholastic athletics practice or competition following a
18 force or impact believed to have caused a concussion. Each
19 concussion oversight team shall also establish a
20 return-to-learn protocol, based on peer-reviewed scientific
21 evidence consistent with Centers for Disease Control and
22 Prevention guidelines, for a student's return to the classroom
23 after that student is believed to have experienced a
24 concussion, whether or not the concussion took place while the
25 student was participating in an interscholastic athletic
26 activity.

1 Each concussion oversight team must include to the extent
2 practicable at least one physician. If a school employs an
3 athletic trainer, the athletic trainer must be a member of the
4 school concussion oversight team to the extent practicable. If
5 a school employs a nurse, the nurse must be a member of the
6 school concussion oversight team to the extent practicable. At
7 a minimum, a school shall appoint a person who is responsible
8 for implementing and complying with the return-to-play and
9 return-to-learn protocols adopted by the concussion oversight
10 team. At a minimum, a concussion oversight team may be composed
11 of only one person and this person need not be a licensed
12 healthcare professional, but it may not be a coach. A school
13 may appoint other licensed healthcare professionals to serve on
14 the concussion oversight team.

15 (e) A student may not participate in an interscholastic
16 athletic activity for a school year until the student and the
17 student's parent or guardian or another person with legal
18 authority to make medical decisions for the student have signed
19 a form for that school year that acknowledges receiving and
20 reading written information that explains concussion
21 prevention, symptoms, treatment, and oversight and that
22 includes guidelines for safely resuming participation in an
23 athletic activity following a concussion. The form must be
24 approved by the Illinois High School Association.

25 (f) A student must be removed from an interscholastic
26 athletics practice or competition immediately if one of the

1 following persons believes the student might have sustained a
2 concussion during the practice or competition:

3 (1) a coach;

4 (2) a physician;

5 (3) a game official;

6 (4) an athletic trainer;

7 (5) the student's parent or guardian or another person
8 with legal authority to make medical decisions for the
9 student;

10 (6) the student; or

11 (7) any other person deemed appropriate under the
12 school's return-to-play protocol.

13 (g) A student removed from an interscholastic athletics
14 practice or competition under this Section may not be permitted
15 to practice or compete again following the force or impact
16 believed to have caused the concussion until:

17 (1) the student has been evaluated, using established
18 medical protocols based on peer-reviewed scientific
19 evidence consistent with Centers for Disease Control and
20 Prevention guidelines, by a treating physician (chosen by
21 the student or the student's parent or guardian or another
22 person with legal authority to make medical decisions for
23 the student), an athletic trainer, an advanced practice
24 registered nurse, or a physician assistant;

25 (2) the student has successfully completed each
26 requirement of the return-to-play protocol established

1 under this Section necessary for the student to return to
2 play;

3 (3) the student has successfully completed each
4 requirement of the return-to-learn protocol established
5 under this Section necessary for the student to return to
6 learn;

7 (4) the treating physician, the athletic trainer, or
8 the physician assistant has provided a written statement
9 indicating that, in the physician's professional judgment,
10 it is safe for the student to return to play and return to
11 learn or the treating advanced practice registered nurse
12 has provided a written statement indicating that it is safe
13 for the student to return to play and return to learn; and

14 (5) the student and the student's parent or guardian or
15 another person with legal authority to make medical
16 decisions for the student:

17 (A) have acknowledged that the student has
18 completed the requirements of the return-to-play and
19 return-to-learn protocols necessary for the student to
20 return to play;

21 (B) have provided the treating physician's,
22 athletic trainer's, advanced practice registered
23 nurse's, or physician assistant's written statement
24 under subdivision (4) of this subsection (g) to the
25 person responsible for compliance with the
26 return-to-play and return-to-learn protocols under

1 this subsection (g) and the person who has supervisory
2 responsibilities under this subsection (g); and

3 (C) have signed a consent form indicating that the
4 person signing:

5 (i) has been informed concerning and consents
6 to the student participating in returning to play
7 in accordance with the return-to-play and
8 return-to-learn protocols;

9 (ii) understands the risks associated with the
10 student returning to play and returning to learn
11 and will comply with any ongoing requirements in
12 the return-to-play and return-to-learn protocols;
13 and

14 (iii) consents to the disclosure to
15 appropriate persons, consistent with the federal
16 Health Insurance Portability and Accountability
17 Act of 1996 (Public Law 104-191), of the treating
18 physician's, athletic trainer's, physician
19 assistant's, or advanced practice registered
20 nurse's written statement under subdivision (4) of
21 this subsection (g) and, if any, the
22 return-to-play and return-to-learn recommendations
23 of the treating physician, the athletic trainer,
24 the physician assistant, or the advanced practice
25 registered nurse, as the case may be.

26 A coach of an interscholastic athletics team may not

1 authorize a student's return to play or return to learn.

2 The district superintendent or the superintendent's
3 designee in the case of a public elementary or secondary
4 school, the chief school administrator or that person's
5 designee in the case of a charter school, or the appropriate
6 administrative officer or that person's designee in the case of
7 a private school shall supervise an athletic trainer or other
8 person responsible for compliance with the return-to-play
9 protocol and shall supervise the person responsible for
10 compliance with the return-to-learn protocol. The person who
11 has supervisory responsibilities under this paragraph may not
12 be a coach of an interscholastic athletics team.

13 (h) (1) The Illinois High School Association shall approve,
14 for coaches, game officials, and non-licensed healthcare
15 professionals, training courses that provide for not less than
16 2 hours of training in the subject matter of concussions,
17 including evaluation, prevention, symptoms, risks, and
18 long-term effects. The Association shall maintain an updated
19 list of individuals and organizations authorized by the
20 Association to provide the training.

21 (2) The following persons must take a training course in
22 accordance with paragraph (4) of this subsection (h) from an
23 authorized training provider at least once every 2 years:

24 (A) a coach of an interscholastic athletic activity;

25 (B) a nurse, licensed healthcare professional, or
26 non-licensed healthcare professional who serves as a

1 member of a concussion oversight team either on a volunteer
2 basis or in his or her capacity as an employee,
3 representative, or agent of a school; and

4 (C) a game official of an interscholastic athletic
5 activity.

6 (3) A physician who serves as a member of a concussion
7 oversight team shall, to the greatest extent practicable,
8 periodically take an appropriate continuing medical education
9 course in the subject matter of concussions.

10 (4) For purposes of paragraph (2) of this subsection (h):

11 (A) a coach, game official, or non-licensed healthcare
12 professional, as the case may be, must take a course
13 described in paragraph (1) of this subsection (h);

14 (B) an athletic trainer must take a concussion-related
15 continuing education course from an athletic trainer
16 continuing education sponsor approved by the Department;

17 (C) a nurse must take a concussion-related continuing
18 education course from a nurse continuing education sponsor
19 approved by the Department;

20 (D) a physical therapist must take a
21 concussion-related continuing education course from a
22 physical therapist continuing education sponsor approved
23 by the Department;

24 (E) a psychologist must take a concussion-related
25 continuing education course from a psychologist continuing
26 education sponsor approved by the Department;

1 (F) an occupational therapist must take a
2 concussion-related continuing education course from an
3 occupational therapist continuing education sponsor
4 approved by the Department; and

5 (G) a physician assistant must take a
6 concussion-related continuing education course from a
7 physician assistant continuing education sponsor approved
8 by the Department.

9 (5) Each person described in paragraph (2) of this
10 subsection (h) must submit proof of timely completion of an
11 approved course in compliance with paragraph (4) of this
12 subsection (h) to the district superintendent or the
13 superintendent's designee in the case of a public elementary or
14 secondary school, the chief school administrator or that
15 person's designee in the case of a charter school, or the
16 appropriate administrative officer or that person's designee
17 in the case of a private school.

18 (6) A physician, licensed healthcare professional, or
19 non-licensed healthcare professional who is not in compliance
20 with the training requirements under this subsection (h) may
21 not serve on a concussion oversight team in any capacity.

22 (7) A person required under this subsection (h) to take a
23 training course in the subject of concussions must complete the
24 training prior to serving on a concussion oversight team in any
25 capacity.

26 (i) The governing body of each public or charter school and

1 the appropriate administrative officer of a private school with
2 students enrolled who participate in an interscholastic
3 athletic activity shall develop a school-specific emergency
4 action plan for interscholastic athletic activities to address
5 the serious injuries and acute medical conditions in which the
6 condition of the student may deteriorate rapidly. The plan
7 shall include a delineation of roles, methods of communication,
8 available emergency equipment, and access to and a plan for
9 emergency transport. This emergency action plan must be:

10 (1) in writing;

11 (2) reviewed by the concussion oversight team;

12 (3) approved by the district superintendent or the
13 superintendent's designee in the case of a public
14 elementary or secondary school, the chief school
15 administrator or that person's designee in the case of a
16 charter school, or the appropriate administrative officer
17 or that person's designee in the case of a private school;

18 (4) distributed to all appropriate personnel;

19 (5) posted conspicuously at all venues utilized by the
20 school; and

21 (6) reviewed annually by all athletic trainers, first
22 responders, coaches, school nurses, athletic directors,
23 and volunteers for interscholastic athletic activities.

24 (j) The State Board of Education may adopt rules as
25 necessary to administer this Section.

26 (Source: P.A. 99-245, eff. 8-3-15; 99-486, eff. 11-20-15;

1 99-642, eff. 7-28-16; 100-309, eff. 9-1-17; 100-513, eff.
2 1-1-18; revised 9-22-17.)

3 Section 15. The Interscholastic Athletic Organization Act
4 is amended by changing Section 1.20 as follows:

5 (105 ILCS 25/1.20)

6 Sec. 1.20. Concussion reporting.

7 (a) Beginning with the 2016-2017 school year, an
8 association or other entity that has, as one of its purposes,
9 promoting, sponsoring, regulating, or in any manner providing
10 for interscholastic athletics or any form of athletic
11 competition among high schools and high school students within
12 this State shall require all member schools that have ~~certified~~
13 athletic trainers to complete a monthly report on
14 student-athletes at the member school who have sustained a
15 concussion during a school-sponsored activity overseen by the
16 athletic trainer or when the athletic director is made aware of
17 a concussion sustained by a student during a school-sponsored
18 event. All reporting must be anonymous as it relates to student
19 names.

20 (b) Beginning with the 2017-2018 school year, the
21 association or entity to which this Section applies shall
22 compile the data reported under subsection (a) of this Section
23 during the previous school year into an annual report and
24 submit copies of this report to the General Assembly, as

1 provided in Section 3.1 of the General Assembly Organization
2 Act.

3 (c) With respect to reporting under this Section, an
4 association or entity to which this Section applies and any
5 member school shall have immunity from any liability, whether
6 civil or criminal or that otherwise might result by reason of
7 such action, except for willful or wanton misconduct. The
8 association or entity has the authority to take action against
9 a member school if the member school fails to complete the
10 required reporting.

11 (Source: P.A. 99-831, eff. 8-19-16.)

12 (225 ILCS 5/Act rep.)

13 Section 20. The Illinois Athletic Trainers Practice Act is
14 repealed.

15 Section 25. The Unified Code of Corrections is amended by
16 changing Section 5-5-5 as follows:

17 (730 ILCS 5/5-5-5) (from Ch. 38, par. 1005-5-5)

18 Sec. 5-5-5. Loss and Restoration of Rights.

19 (a) Conviction and disposition shall not entail the loss by
20 the defendant of any civil rights, except under this Section
21 and Sections 29-6 and 29-10 of The Election Code, as now or
22 hereafter amended.

23 (b) A person convicted of a felony shall be ineligible to

1 hold an office created by the Constitution of this State until
2 the completion of his sentence.

3 (c) A person sentenced to imprisonment shall lose his right
4 to vote until released from imprisonment.

5 (d) On completion of sentence of imprisonment or upon
6 discharge from probation, conditional discharge or periodic
7 imprisonment, or at any time thereafter, all license rights and
8 privileges granted under the authority of this State which have
9 been revoked or suspended because of conviction of an offense
10 shall be restored unless the authority having jurisdiction of
11 such license rights finds after investigation and hearing that
12 restoration is not in the public interest. This paragraph (d)
13 shall not apply to the suspension or revocation of a license to
14 operate a motor vehicle under the Illinois Vehicle Code.

15 (e) Upon a person's discharge from incarceration or parole,
16 or upon a person's discharge from probation or at any time
17 thereafter, the committing court may enter an order certifying
18 that the sentence has been satisfactorily completed when the
19 court believes it would assist in the rehabilitation of the
20 person and be consistent with the public welfare. Such order
21 may be entered upon the motion of the defendant or the State or
22 upon the court's own motion.

23 (f) Upon entry of the order, the court shall issue to the
24 person in whose favor the order has been entered a certificate
25 stating that his behavior after conviction has warranted the
26 issuance of the order.

1 (g) This Section shall not affect the right of a defendant
2 to collaterally attack his conviction or to rely on it in bar
3 of subsequent proceedings for the same offense.

4 (h) No application for any license specified in subsection
5 (i) of this Section granted under the authority of this State
6 shall be denied by reason of an eligible offender who has
7 obtained a certificate of relief from disabilities, as defined
8 in Article 5.5 of this Chapter, having been previously
9 convicted of one or more criminal offenses, or by reason of a
10 finding of lack of "good moral character" when the finding is
11 based upon the fact that the applicant has previously been
12 convicted of one or more criminal offenses, unless:

13 (1) there is a direct relationship between one or more
14 of the previous criminal offenses and the specific license
15 sought; or

16 (2) the issuance of the license would involve an
17 unreasonable risk to property or to the safety or welfare
18 of specific individuals or the general public.

19 In making such a determination, the licensing agency shall
20 consider the following factors:

21 (1) the public policy of this State, as expressed in
22 Article 5.5 of this Chapter, to encourage the licensure and
23 employment of persons previously convicted of one or more
24 criminal offenses;

25 (2) the specific duties and responsibilities
26 necessarily related to the license being sought;

1 (3) the bearing, if any, the criminal offenses or
2 offenses for which the person was previously convicted will
3 have on his or her fitness or ability to perform one or
4 more such duties and responsibilities;

5 (4) the time which has elapsed since the occurrence of
6 the criminal offense or offenses;

7 (5) the age of the person at the time of occurrence of
8 the criminal offense or offenses;

9 (6) the seriousness of the offense or offenses;

10 (7) any information produced by the person or produced
11 on his or her behalf in regard to his or her rehabilitation
12 and good conduct, including a certificate of relief from
13 disabilities issued to the applicant, which certificate
14 shall create a presumption of rehabilitation in regard to
15 the offense or offenses specified in the certificate; and

16 (8) the legitimate interest of the licensing agency in
17 protecting property, and the safety and welfare of specific
18 individuals or the general public.

19 (i) A certificate of relief from disabilities shall be
20 issued only for a license or certification issued under the
21 following Acts:

22 (1) the Animal Welfare Act; except that a certificate
23 of relief from disabilities may not be granted to provide
24 for the issuance or restoration of a license under the
25 Animal Welfare Act for any person convicted of violating
26 Section 3, 3.01, 3.02, 3.03, 3.03-1, or 4.01 of the Humane

1 Care for Animals Act or Section 26-5 or 48-1 of the
2 Criminal Code of 1961 or the Criminal Code of 2012;

3 (2) the (blank); ~~Illinois Athletic Trainers Practice~~
4 ~~Act;~~

5 (3) the Barber, Cosmetology, Esthetics, Hair Braiding,
6 and Nail Technology Act of 1985;

7 (4) the Boiler and Pressure Vessel Repairer Regulation
8 Act;

9 (5) the Boxing and Full-contact Martial Arts Act;

10 (6) the Illinois Certified Shorthand Reporters Act of
11 1984;

12 (7) the Illinois Farm Labor Contractor Certification
13 Act;

14 (8) the Interior Design Title Act;

15 (9) the Illinois Professional Land Surveyor Act of
16 1989;

17 (10) the Illinois Landscape Architecture Act of 1989;

18 (11) the Marriage and Family Therapy Licensing Act;

19 (12) the Private Employment Agency Act;

20 (13) the Professional Counselor and Clinical
21 Professional Counselor Licensing and Practice Act;

22 (14) the Real Estate License Act of 2000;

23 (15) the Illinois Roofing Industry Licensing Act;

24 (16) the Professional Engineering Practice Act of
25 1989;

26 (17) the Water Well and Pump Installation Contractor's

- 1 License Act;
- 2 (18) the Electrologist Licensing Act;
- 3 (19) the Auction License Act;
- 4 (20) the Illinois Architecture Practice Act of 1989;
- 5 (21) the Dietitian Nutritionist Practice Act;
- 6 (22) the Environmental Health Practitioner Licensing
- 7 Act;
- 8 (23) the Funeral Directors and Embalmers Licensing
- 9 Code;
- 10 (24) (blank);
- 11 (25) the Professional Geologist Licensing Act;
- 12 (26) the Illinois Public Accounting Act; and
- 13 (27) the Structural Engineering Practice Act of 1989.
- 14 (Source: P.A. 100-534, eff. 9-22-17.)

15 Section 99. Effective date. This Act takes effect upon

16 becoming law.