



Sen. Kwame Raoul

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1 AMENDMENT TO SENATE BILL 1692

2 AMENDMENT NO. _____. Amend Senate Bill 1692 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The School Code is amended by changing Section
5 22-80 as follows:

6 (105 ILCS 5/22-80)

7 Sec. 22-80. Student athletes; concussions and head
8 injuries.

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

10 (1) Concussions are one of the most commonly reported
11 injuries in children and adolescents who participate in
12 sports and recreational activities. The Centers for
13 Disease Control and Prevention estimates that as many as
14 3,900,000 sports-related and recreation-related
15 concussions occur in the United States each year. A
16 concussion is caused by a blow or motion to the head or

1 body that causes the brain to move rapidly inside the
2 skull. The risk of catastrophic injuries or death are
3 significant when a concussion or head injury is not
4 properly evaluated and managed.

5 (2) Concussions are a type of brain injury that can
6 range from mild to severe and can disrupt the way the brain
7 normally works. Concussions can occur in any organized or
8 unorganized sport or recreational activity and can result
9 from a fall or from players colliding with each other, the
10 ground, or with obstacles. Concussions occur with or
11 without loss of consciousness, but the vast majority of
12 concussions occur without loss of consciousness.

13 (3) Continuing to play with a concussion or symptoms of
14 a head injury leaves a young athlete especially vulnerable
15 to greater injury and even death. The General Assembly
16 recognizes that, despite having generally recognized
17 return-to-play standards for concussions and head
18 injuries, some affected youth athletes are prematurely
19 returned to play, resulting in actual or potential physical
20 injury or death to youth athletes in this State.

21 (4) Student athletes who have sustained a concussion
22 may need informal or formal accommodations, modifications
23 of curriculum, and monitoring by medical or academic staff
24 until the student is fully recovered. To that end, all
25 schools are encouraged to establish a return-to-learn
26 protocol that is based on peer-reviewed scientific

1 evidence consistent with Centers for Disease Control and
2 Prevention guidelines and conduct baseline testing for
3 student athletes.

4 (b) In this Section:

5 "Athletic trainer" means an athletic trainer licensed
6 under the Illinois Athletic Trainers Practice Act who is
7 working under the supervision of a physician.

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

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

19 "Department" means the Department of Financial and
20 Professional Regulation.

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

26 "Interscholastic athletic activity" means any organized

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

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

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

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

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

1 "School" means any public or private elementary or
2 secondary school, including a charter school.

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

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

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

1 activity.

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

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

26 (f) A student must be removed from an interscholastic

1 athletics practice or competition immediately if one of the
2 following persons believes the student might have sustained a
3 concussion during the practice or competition:

4 (1) a coach;

5 (2) a physician;

6 (3) a game official;

7 (4) an athletic trainer;

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

11 (6) the student; or

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

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

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

1 (2) the student has successfully completed each
2 requirement of the return-to-play protocol established
3 under this Section necessary for the student to return to
4 play;

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

9 (4) the treating physician, the ~~or~~ athletic trainer, or
10 the physician assistant working under the supervision of a
11 physician has provided a written statement indicating
12 that, in the physician's professional judgment, it is safe
13 for the student to return to play and return to learn or
14 the treating advanced practice nurse has provided a written
15 statement indicating that it is safe for the student to
16 return to play and return to learn; and

17 (5) the student and the student's parent or guardian or
18 another person with legal authority to make medical
19 decisions for the student:

20 (A) have acknowledged that the student has
21 completed the requirements of the return-to-play and
22 return-to-learn protocols necessary for the student to
23 return to play;

24 (B) have provided the treating physician's, ~~or~~
25 athletic trainer's, advanced practice nurse's, or
26 physician assistant's written statement under

1 subdivision (4) of this subsection (g) to the person
2 responsible for compliance with the return-to-play and
3 return-to-learn protocols under this subsection (g)
4 and the person who has supervisory responsibilities
5 under this subsection (g); and

6 (C) have signed a consent form indicating that the
7 person signing:

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

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

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

1 assistant, or the advanced practice nurse, as the
2 case may be.

3 A coach of an interscholastic athletics team may not
4 authorize a student's return to play or return to learn.

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

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

25 (2) The following persons must take a training course in
26 accordance with paragraph (4) of this subsection (h) from an

1 authorized training provider at least once every 2 years:

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

3 (B) a nurse, licensed healthcare professional, or
4 non-licensed healthcare professional who serves as a
5 member of a concussion oversight team either on a volunteer
6 basis or in his or her capacity as ~~and is~~ an employee,
7 representative, or agent of a school; and

8 (C) a game official of an interscholastic athletic
9 activity. ~~and~~

10 ~~(D) a nurse who serves on a volunteer basis as a member~~
11 ~~of a concussion oversight team for a school.~~

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

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

17 (A) a coach, ~~or~~ game official, or non-licensed
18 healthcare professional officials, as the case may be, must
19 take a course described in paragraph (1) of this subsection
20 (h); ~~and~~

21 (B) an athletic trainer must take a concussion-related
22 continuing education course from an athletic trainer
23 continuing education sponsor approved by the Department;
24 ~~and~~

25 (C) a nurse must take a concussion-related continuing
26 education course from a nurse ~~concerning the subject matter~~

1 ~~of concussions that has been approved for~~ continuing
2 education sponsor approved credit by the Department; ~~;~~

3 (D) a physical therapist must take a
4 concussion-related continuing education course from a
5 physical therapist continuing education sponsor approved
6 by the Department;

7 (E) a psychologist must take a concussion-related
8 continuing education course from a psychologist continuing
9 education sponsor approved by the Department;

10 (F) an occupational therapist must take a
11 concussion-related continuing education course from an
12 occupational therapist continuing education sponsor
13 approved by the Department; and

14 (G) a physician assistant must take a
15 concussion-related continuing education course from a
16 physician assistant continuing education sponsor approved
17 by the Department.

18 (5) Each person described in paragraph (2) of this
19 subsection (h) must submit proof of timely completion of an
20 approved course in compliance with paragraph (4) of this
21 subsection (h) to the district superintendent or the
22 superintendent's designee in the case of a public elementary or
23 secondary school, the chief school administrator or that
24 person's designee in the case of a charter school, or the
25 appropriate administrative officer or that person's designee
26 in the case of a private school.

1 (6) A physician, licensed healthcare professional, or
2 non-licensed healthcare professional ~~athletic trainer, or~~
3 ~~nurse~~ who is not in compliance with the training requirements
4 under this subsection (h) may not serve on a concussion
5 oversight team in any capacity.

6 (7) A person required under this subsection (h) to take a
7 training course in the subject of concussions must ~~initially~~
8 complete the training prior to serving on a concussion
9 oversight team in any capacity ~~not later than September 1,~~
10 ~~2016.~~

11 (i) The governing body of each public or charter school and
12 the appropriate administrative officer of a private school with
13 students enrolled who participate in an interscholastic
14 athletic activity shall develop a school-specific emergency
15 action plan for interscholastic athletic activities to address
16 the serious injuries and acute medical conditions in which the
17 condition of the student may deteriorate rapidly. The plan
18 shall include a delineation of roles, methods of communication,
19 available emergency equipment, and access to and a plan for
20 emergency transport. This emergency action plan must be:

21 (1) in writing;

22 (2) reviewed by the concussion oversight team;

23 (3) approved by the district superintendent or the
24 superintendent's designee in the case of a public
25 elementary or secondary school, the chief school
26 administrator or that person's designee in the case of a

1 charter school, or the appropriate administrative officer
2 or that person's designee in the case of a private school;

3 (4) distributed to all appropriate personnel;

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

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

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

11 (Source: P.A. 99-245, eff. 8-3-15; 99-486, eff. 11-20-15;
12 99-642, eff. 7-28-16.)

13 Section 99. Effective date. This Act takes effect September
14 1, 2017."