

1 AN ACT concerning education.

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

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  
17 body that causes the brain to move rapidly inside the  
18 skull. The risk of catastrophic injuries or death are  
19 significant when a concussion or head injury is not  
20 properly evaluated and managed.

21 (2) Concussions are a type of brain injury that can  
22 range from mild to severe and can disrupt the way the brain  
23 normally works. Concussions can occur in any organized or

1 unorganized sport or recreational activity and can result  
2 from a fall or from players colliding with each other, the  
3 ground, or with obstacles. Concussions occur with or  
4 without loss of consciousness, but the vast majority of  
5 concussions occur without loss of consciousness.

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

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

23 (b) In this Section:

24 "Athletic trainer" means an athletic trainer licensed  
25 under the Illinois Athletic Trainers Practice Act who is  
26 working under the supervision of a physician.

1 "Coach" means any volunteer or employee of a school who is  
2 responsible for organizing and supervising students to teach  
3 them or train them in the fundamental skills of an  
4 interscholastic athletic activity. "Coach" refers to both head  
5 coaches and assistant coaches.

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

12 "Department" means the Department of Financial and  
13 Professional Regulation.

14 "Game official" means a person who officiates at an  
15 interscholastic athletic activity, such as a referee or umpire,  
16 including, but not limited to, persons enrolled as game  
17 officials by the Illinois High School Association or Illinois  
18 Elementary School Association.

19 "Interscholastic athletic activity" means any organized  
20 school-sponsored or school-sanctioned activity for students,  
21 generally outside of school instructional hours, under the  
22 direction of a coach, athletic director, or band leader,  
23 including, but not limited to, baseball, basketball,  
24 cheerleading, cross country track, fencing, field hockey,  
25 football, golf, gymnastics, ice hockey, lacrosse, marching  
26 band, rugby, soccer, skating, softball, swimming and diving,

1 tennis, track (indoor and outdoor), ultimate Frisbee,  
2 volleyball, water polo, and wrestling. All interscholastic  
3 athletics are deemed to be interscholastic activities.

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

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

15 "Physician" means a physician licensed to practice  
16 medicine in all of its branches under the Medical Practice Act  
17 of 1987.

18 "Physician assistant" means a physician assistant licensed  
19 under the Physician Assistant Practice Act of 1987.

20 "School" means any public or private elementary or  
21 secondary school, including a charter school.

22 "Student" means an adolescent or child enrolled in a  
23 school.

24 (c) This Section applies to any interscholastic athletic  
25 activity, including practice and competition, sponsored or  
26 sanctioned by a school, the Illinois Elementary School

1 Association, or the Illinois High School Association. This  
2 Section applies beginning with the 2016-2017 school year.

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

21 Each concussion oversight team must include to the extent  
22 practicable at least one physician. If a school employs an  
23 athletic trainer, the athletic trainer must be a member of the  
24 school concussion oversight team to the extent practicable. If  
25 a school employs a nurse, the nurse must be a member of the  
26 school concussion oversight team to the extent practicable. At

1 a minimum, a school shall appoint a person who is responsible  
2 for implementing and complying with the return-to-play and  
3 return-to-learn protocols adopted by the concussion oversight  
4 team. At a minimum, a concussion oversight team may be composed  
5 of only one person and this person need not be a licensed  
6 healthcare professional, but it may not be a coach. A school  
7 may appoint other licensed healthcare professionals to serve on  
8 the concussion oversight team.

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

19 (f) A student must be removed from an interscholastic  
20 athletics practice or competition immediately if one of the  
21 following persons believes the student might have sustained a  
22 concussion during the practice or competition:

- 23 (1) a coach;  
24 (2) a physician;  
25 (3) a game official;  
26 (4) an athletic trainer;

1           (5) the student's parent or guardian or another person  
2           with legal authority to make medical decisions for the  
3           student;

4           (6) the student; or

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

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

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

20          (2) the student has successfully completed each  
21          requirement of the return-to-play protocol established  
22          under this Section necessary for the student to return to  
23          play;

24          (3) the student has successfully completed each  
25          requirement of the return-to-learn protocol established  
26          under this Section necessary for the student to return to

1 learn;

2 (4) the treating physician, the ~~or~~ athletic trainer, or  
3 the physician assistant working under the supervision of a  
4 physician has provided a written statement indicating  
5 that, in the physician's professional judgment, it is safe  
6 for the student to return to play and return to learn or  
7 the treating advanced practice nurse has provided a written  
8 statement indicating that it is safe for the student to  
9 return to play and return to learn; and

10 (5) the student and the student's parent or guardian or  
11 another person with legal authority to make medical  
12 decisions for the student:

13 (A) have acknowledged that the student has  
14 completed the requirements of the return-to-play and  
15 return-to-learn protocols necessary for the student to  
16 return to play;

17 (B) have provided the treating physician's, ~~or~~  
18 athletic trainer's, advanced practice nurse's, or  
19 physician assistant's written statement under  
20 subdivision (4) of this subsection (g) to the person  
21 responsible for compliance with the return-to-play and  
22 return-to-learn protocols under this subsection (g)  
23 and the person who has supervisory responsibilities  
24 under this subsection (g); and

25 (C) have signed a consent form indicating that the  
26 person signing:



1 (i) has been informed concerning and consents  
2 to the student participating in returning to play  
3 in accordance with the return-to-play and  
4 return-to-learn protocols;

5 (ii) understands the risks associated with the  
6 student returning to play and returning to learn  
7 and will comply with any ongoing requirements in  
8 the return-to-play and return-to-learn protocols;  
9 and

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

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

24 The district superintendent or the superintendent's  
25 designee in the case of a public elementary or secondary  
26 school, the chief school administrator or that person's

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

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

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

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

22 (B) a nurse, licensed healthcare professional, or  
23 non-licensed healthcare professional who serves as a  
24 member of a concussion oversight team either on a volunteer  
25 basis or in his or her capacity as ~~and is~~ an employee,  
26 representative, or agent of a school; and

1 (C) a game official of an interscholastic athletic  
2 activity. ~~and~~

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

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

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

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

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 ~~and~~

18 (C) a nurse must take a concussion-related continuing  
19 education course from a nurse ~~concerning the subject matter~~  
20 ~~of concussions that has been approved for~~ continuing  
21 education sponsor approved ~~credit~~ by the Department; ~~and~~

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

26 (E) a psychologist must take a concussion-related

1 continuing education course from a psychologist continuing  
2 education sponsor approved by the Department;

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

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

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

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

25 (7) A person required under this subsection (h) to take a  
26 training course in the subject of concussions must ~~initially~~

1 complete the training prior to serving on a concussion  
2 oversight team in any capacity ~~not later than September 1,~~  
3 ~~2016.~~

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

14 (1) in writing;

15 (2) reviewed by the concussion oversight team;

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

22 (4) distributed to all appropriate personnel;

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

25 (6) reviewed annually by all athletic trainers, first  
26 responders, coaches, school nurses, athletic directors,

1           and volunteers for interscholastic athletic activities.

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

4           (Source: P.A. 99-245, eff. 8-3-15; 99-486, eff. 11-20-15;  
5 99-642, eff. 7-28-16.)

6           Section 99. Effective date. This Act takes effect September  
7 1, 2017.