



House of Representatives

General Assembly

File No. 144

February Session, 2014

Substitute House Bill No. 5113

House of Representatives, March 27, 2014

The Committee on Children reported through REP. URBAN of the 43rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING YOUTH ATHLETICS AND CONCUSSIONS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 10-149b of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective July 1, 2014*):

3 (a) (1) For the school year commencing July 1, 2010, and each school
4 year thereafter, any person who holds or is issued a coaching permit
5 by the State Board of Education and is a coach of intramural or
6 interscholastic athletics shall complete an initial training course
7 regarding concussions, [and head injuries] which are a type of brain
8 injury, developed or approved pursuant to subdivision (1) of
9 subsection (b) of this section, prior to commencing the coaching
10 assignment for the season of such school athletics.

11 (2) For the school year commencing July 1, [2011] 2014, and each
12 school year thereafter, [and after completion of] any coach who has
13 completed the initial training course described in subdivision (1) of
14 this subsection [, such coach] shall annually review current and

15 relevant information regarding concussions, [and head injuries,]
16 prepared or approved pursuant to subdivision (2) of subsection (b) of
17 this section, prior to commencing the coaching assignment for the
18 season of such school athletics. Such annual review shall not be
19 required in any year when such coach is required to complete the
20 refresher course, pursuant to subdivision (3) of this subsection, for
21 reissuance of his or her coaching permit.

22 (3) For the school year commencing July 1, 2015, and each school
23 year thereafter, a coach shall complete a refresher course, developed or
24 approved pursuant to subdivision (3) of subsection (b) of this section,
25 not later than five years after completion of the initial training course,
26 as a condition of the reissuance of a coaching permit to such coach.
27 Such coach shall thereafter retake such refresher course at least once
28 every five years as a condition of the reissuance of a coaching permit to
29 such coach.

30 (b) (1) [On or before July 1, 2010, the] The State Board of Education,
31 in consultation with (A) the Commissioner of Public Health, (B) the
32 governing authority for intramural and interscholastic athletics, [(B)]
33 (C) an appropriate organization representing licensed athletic trainers,
34 and [(C)] (D) an organization representing county medical
35 associations, shall develop or approve a training course regarding
36 concussions, [and head injuries.] Such training course shall include,
37 but not be limited to, (i) the recognition of the symptoms of a
38 concussion, [or head injury,] (ii) the means of obtaining proper medical
39 treatment for a person suspected of having a concussion, [or head
40 injury,] and (iii) the nature and risk of concussions, [and head injuries,]
41 including the danger of continuing to [play] engage in athletic activity
42 after sustaining a concussion [or head injury] and the proper method
43 of allowing a student athlete who has sustained a concussion [or head
44 injury] to return to athletic activity.

45 (2) On or before July 1, [2011] 2014, and annually thereafter, the
46 State Board of Education, in consultation with the Commissioner of
47 Public Health and the organizations described in subparagraphs (B) to

48 (D), inclusive, of subdivision (1) of this subsection, shall [prepare]
49 develop or approve annual review materials regarding current and
50 relevant information about concussions. [and head injuries.]

51 (3) [On or before January 1, 2014, the] The State Board of Education,
52 in consultation with the Commissioner of Public Health and the
53 organizations described in subparagraphs (B) to (D), inclusive, of
54 subdivision (1) of this subsection, shall develop or approve a refresher
55 course regarding concussions. [and head injuries.] Such refresher
56 course shall include, but not be limited to, (A) an overview of key
57 recognition and safety practices, (B) an update on medical
58 developments and current best practices in the field of concussion
59 research, [and] prevention and treatment, [and] (C) an update on the
60 implementation of athletic coaching and instructional techniques,
61 including, but not limited to, current best practices regarding
62 frequency of games and full contact practices and scrimmages as
63 identified by the governing authority for intramural and
64 interscholastic athletics, and (D) an update on new relevant federal,
65 state and local laws and regulations.

66 (c) On or before January 1, 2015, the State Board of Education, in
67 consultation with the Commissioner of Public Health and the
68 organizations described in subparagraphs (B) to (D), inclusive, of
69 subdivision (1) of subsection (b) of this section, shall develop or
70 approve a concussion education plan. Such plan may utilize written
71 materials, online training or videos or in person training and shall
72 include educational content addressing, at a minimum: (1) The
73 recognition of signs or symptoms of concussion, (2) the means of
74 obtaining proper medical treatment for a person suspected of
75 sustaining a concussion, (3) the nature and risks of concussions,
76 including the danger of continuing to engage in athletic activity after
77 sustaining a concussion, (4) the proper procedures for allowing a
78 student athlete who has sustained a concussion to return to athletic
79 activity, and (5) current best practices in the prevention and treatment
80 of a concussion.

81 (d) For the school year commencing July 1, 2015, and each school
82 year thereafter, the governing authority for intramural and
83 interscholastic athletics shall prohibit a student athlete from
84 participating in any intramural or interscholastic athletic activity
85 unless the student athlete, and a parent or guardian of such student
86 athlete, completes the concussion education plan developed or
87 approved pursuant to subsection (c) of this section.

88 (e) (1) On or before July 1, 2015, the State Board of Education, in
89 consultation with the Commissioner of Public Health and the
90 organizations described in subparagraphs (B) to (D), inclusive, of
91 subdivision (1) of subsection (b) of this section, shall develop or
92 approve an informed consent form to distribute to the parents and
93 legal guardians of student athletes involved in intramural or
94 interscholastic athletic activities regarding concussions. Such informed
95 consent form shall include, at a minimum, (A) a summary of the
96 concussion education plan developed or approved pursuant to
97 subsection (c) of this section, and (B) a summary of the applicable local
98 or regional board of education's policies regarding concussions.

99 (2) For the school year commencing July 1, 2015, and each school
100 year thereafter, each school shall provide each participating student
101 athlete's parent or legal guardian with a copy of the informed consent
102 form developed or approved pursuant to subdivision (1) of this
103 subsection and obtain such parent's or legal guardian's signature,
104 attesting to the fact that such parent or legal guardian has received a
105 copy of such form and authorizes the student athlete to participate in
106 the athletic activity.

107 [(c)] (f) The State Board of Education may revoke the coaching
108 permit, in accordance with the provisions of subsection (i) of section
109 10-145b, of any coach found to be in violation of this section.

110 Sec. 2. Section 10-149c of the general statutes is repealed and the
111 following is substituted in lieu thereof (*Effective July 1, 2014*):

112 (a) (1) The coach of any intramural or interscholastic athletics shall

113 immediately remove a student athlete from participating in any
114 intramural or interscholastic athletic activity who (A) is observed to
115 exhibit signs, symptoms or behaviors consistent with a concussion
116 following an observed or suspected blow to the head or body, or (B) is
117 diagnosed with a concussion, regardless of when such concussion [or
118 head injury] may have occurred. Upon such removal the coach, or
119 other qualified school employee, as defined in subsection (e) of section
120 10-212a, shall notify the student athlete's parent or legal guardian that
121 the student athlete has exhibited such signs, symptoms or behaviors
122 consistent with a concussion or has been diagnosed with a concussion.
123 Such coach or other qualified school employee shall provide such
124 notification not later than twenty-four hours after such removal and
125 shall make a reasonable effort to provide such notification immediately
126 after such removal.

127 (2) The coach shall not permit such student athlete to participate in
128 any supervised [team] athletic activities involving physical exertion,
129 including, but not limited to, practices, games or competitions, until
130 (A) at least twenty-four hours have elapsed since such student athlete
131 has exhibited signs, symptoms or behaviors consistent with a
132 concussion or has been diagnosed with a concussion, and (B) such
133 student athlete receives written clearance to participate in such
134 supervised [team] athletic activities involving physical exertion from a
135 licensed health care professional trained in the evaluation and
136 management of concussions.

137 (3) Following clearance pursuant to subdivision (2) of this
138 subsection, the coach shall not permit such student athlete to
139 participate in any full, unrestricted supervised [team] athletic activities
140 without limitations on contact or physical exertion, including, but not
141 limited to, practices, games or competitions, until such student athlete
142 (A) no longer exhibits signs, symptoms or behaviors consistent with a
143 concussion at rest or with exertion, and (B) receives written clearance
144 to participate in such full, unrestricted supervised [team] athletic
145 activities from a licensed health care professional trained in the
146 evaluation and management of concussions.

147 (b) The State Board of Education may revoke the coaching permit, in
148 accordance with the provisions of subsection (i) of section 10-145b, of
149 any coach found to be in violation of this section.

150 (c) For purposes of this section, "licensed health care professional"
151 means a physician licensed pursuant to chapter 370, a physician
152 assistant licensed pursuant to chapter 370, an advanced practice
153 registered nurse licensed pursuant to chapter 378 or an athletic trainer
154 licensed pursuant to chapter 375a.

155 Sec. 3. (NEW) (*Effective July 1, 2014*) (a) For purposes of this section:

156 (1) "Youth athletic activity" means an organized athletic activity
157 involving participants of not less than seven years of age and not more
158 than nineteen years of age, who (A) engage in an organized athletic
159 game or competition against another team, club or entity or in practice
160 or preparation for an organized game or competition against another
161 team, club or entity, and (B) pay a fee to participate in such organized
162 athletic game or competition or whose cost to participate in such
163 athletic game or competition is sponsored by a municipality, business
164 or nonprofit organization. "Youth athletic activity" does not include
165 any college or university athletic activity, an athletic activity entered
166 into for instructional purposes only or an athletic activity that is
167 incidental to a nonathletic program or a lesson; and

168 (2) "Operator" means any municipality, business or nonprofit
169 organization that conducts, coordinates, organizes or otherwise
170 oversees any youth athletic activity.

171 (b) Not later than January 1, 2015, and annually thereafter, each
172 operator of a youth athletic activity shall provide a written statement
173 regarding concussions to each youth athlete and a parent or legal
174 guardian of such youth athlete participating in the youth athletic
175 activity. Such written statement shall be provided upon registration of
176 each youth athlete and shall include educational content addressing, at
177 a minimum: (A) The recognition of signs or symptoms of a concussion,
178 (B) the means of obtaining proper medical treatment for a person

179 suspected of sustaining a concussion, (C) the nature and risks of
180 concussions, including the danger of continuing to engage in youth
181 athletic activity after sustaining a concussion, and (D) the proper
182 procedures for allowing an athlete who has sustained a concussion to
183 return to athletic activity.

184 Sec. 4. (NEW) (*Effective July 1, 2014*) (a) For the school year
185 commencing July 1, 2014, and annually thereafter, the State Board of
186 Education shall require all local and regional school districts to collect
187 and report all occurrences of concussions to the board. Each report
188 shall contain, if known: (1) The nature and extent of the concussion,
189 and (2) the circumstances in which the student sustained the
190 concussion.

191 (b) For the school year commencing July 1, 2015, and each school
192 year thereafter, the State Board of Education shall send a concussion
193 report to the Department of Public Health containing all of the
194 information received pursuant to subsection (a) of this section.

195 (c) Not later than October 1, 2015, and annually thereafter, the
196 Commissioner of Public Health shall report, in accordance with section
197 11-4a of the general statutes, to the joint standing committees of the
198 General Assembly having cognizance of matters relating to children
199 and public health on the findings of the concussion report provided to
200 the department pursuant to subsection (b) of this section.

201 Sec. 5. (*Effective from passage*) (a) There is established a task force to
202 study occurrences of concussions in youth athletics and to make
203 recommendations for possible legislative initiatives to address such
204 concussions. Such study shall include, but not be limited to, an
205 examination of (1) current best practices in the recognition and
206 prevention of concussions in youth athletics, (2) current policies and
207 procedures for addressing concussions utilized by operators of youth
208 athletic leagues in the state, (3) training of employees and volunteers
209 participating in such youth athletic leagues, and (4) relevant federal,
210 state and local laws and regulations involving concussions.

211 (b) The task force shall consist of the following members:

212 (1) Two appointed by the speaker of the House of Representatives,
213 one of whom shall represent the governing authority for intramural
214 and interscholastic athletics, and one of whom shall represent the
215 Connecticut State Medical Society;

216 (2) Two appointed by the president pro tempore of the Senate, one
217 of whom shall represent county medical associations, and one of
218 whom shall represent the American Association of Neurology;

219 (3) Two appointed by the majority leader of the House of
220 Representatives, one of whom shall represent licensed athletic trainers,
221 and one of whom shall be a coach of youth athletics;

222 (4) Two appointed by the majority leader of the Senate, one of
223 whom shall be a physician trained in sports medicine, and one of
224 whom shall represent the Association of School Nurses of Connecticut;

225 (5) Two appointed by the minority leader of the House of
226 Representatives, one of whom shall be an academic who has studied
227 the effects of concussions on children, and one of whom shall represent
228 the Connecticut Association of School Psychologists;

229 (6) Two appointed by the minority leader of the Senate, one of
230 whom shall represent the Connecticut Concussion Task Force, and one
231 of whom shall represent the Connecticut Children's Medical Center;

232 (7) Two appointed by the House chairperson of the joint standing
233 committee of the General Assembly having cognizance of matters
234 relating to children, one of whom shall represent a parent advocacy
235 group that advocates for concussion awareness, and one of whom shall
236 be a chiropractor licensed pursuant to chapter 372 of the general
237 statutes;

238 (8) Two appointed by the Senate chairperson of the joint standing
239 committee of the General Assembly having cognizance of matters
240 relating to children, one of whom shall represent the Connecticut

241 Recreation and Parks Association, and one of whom shall be an
242 attorney with experience representing brain injury survivors;

243 (9) The Commissioner of Public Health, or the commissioner's
244 designee;

245 (10) The Commissioner of Children and Families, or the
246 commissioner's designee;

247 (11) The Commissioner of Education, or the commissioner's
248 designee; and

249 (12) A representative of the Hezekiah Beardsley Connecticut
250 Chapter of the American Academy of Pediatrics, who shall be
251 appointed by the Governor.

252 (c) All appointments to the task force shall be made not later than
253 thirty days after the effective date of this section. Any vacancy shall be
254 filled by the appointing authority.

255 (d) The speaker of the House of Representatives and the president
256 pro tempore of the Senate shall select the chairpersons of the task force
257 from among the members of the task force. Such chairpersons shall
258 schedule the first meeting of the task force, which shall be held not
259 later than sixty days after the effective date of this section.

260 (e) The administrative staff of the Commission on Children shall
261 serve as administrative staff of the task force.

262 (f) Not later than January 1, 2015, the task force shall submit a report
263 on its findings and recommendations to the joint standing committees
264 of the General Assembly having cognizance of matters relating to
265 children and public health, in accordance with the provisions of
266 section 11-4a of the general statutes. The task force shall terminate on
267 the date that it submits such report or January 1, 2015, whichever is
268 later.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2014</i>	10-149b
Sec. 2	<i>July 1, 2014</i>	10-149c
Sec. 3	<i>July 1, 2014</i>	New section
Sec. 4	<i>July 1, 2014</i>	New section
Sec. 5	<i>from passage</i>	New section

Statement of Legislative Commissioners:

In subsections (b)(2), (b)(3), (c) and (e)(1) of section 1, "the Commissioner of Public Health and" was added prior to "the organizations" for clarity and proper form; in subsections (e)(1) and (e)(2) of section 1, "described in" was changed to "developed or approved pursuant to" for internal consistency; in section 3(b), the first sentence was rephrased for clarity; and minor technical and conforming changes were made throughout.

KID *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 15 \$	FY 16 \$
Various State Agencies	GF - Potential Cost	less than 1,000	none

Municipal Impact:

Municipalities	Effect	FY 15 \$	FY 16 \$
Local and Regional School Districts; All Municipalities	STATE MANDATE - Cost	less than 1,000 per district/municipality	less than 1,000 per district/municipality

Explanation

The bill requires youth athletic activity operators to annually provide a written statement regarding concussions to each youth athlete and his or her parent or legal guardian when the athlete registers. It is anticipated that this will result in a cost to municipalities (including local and regional school districts) of less than \$1,000 per year, associated with the printing and distribution of the written statement.

The bill also establishes a task force to study concussion occurrences in youth athletics and make recommendations for possible legislative initiatives to address such concussions. There may be a cost of less than \$1,000 in FY 15 to agencies participating in the task force to reimburse legislators and agency staff for mileage expenses.

The bill makes various other changes that are not anticipated to result in a fiscal impact because they either (1) narrow the scope of existing law or (2) are a requirement in which the State Department of

Education or other identified state agencies has the staff with the expertise to complete the tasks.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation, except for costs related to the taskforce, which are in FY 15 only.

OLR Bill Analysis

sHB 5113

AN ACT CONCERNING YOUTH ATHLETICS AND CONCUSSIONS.

SUMMARY:

This bill makes several changes and additions to the laws regarding concussion prevention.

It narrows the scope, from concussions and head injuries to just concussions, of the (1) initial training course and subsequent information review that intramural and interscholastic athletics coaches must complete, and (2) training and refresher courses the State Board of Education (SBE) must develop in consultation with several entities. It also specifies that a concussion is a type of head injury.

The bill broadens the:

1. information required in the concussion refresher course,
2. types of activities from which a student athlete is barred following a concussion or suspected concussion, and
3. list of entities SBE must consult when developing the training and refresher courses and information review to include the Department of Public Health (DPH) commissioner.

It requires:

1. SBE to develop a concussion education plan and annually collect information from all school districts on concussion occurrences,
2. coaches or other qualified school employees to notify a student athlete's parent or guardian when the student is removed from

play for a concussion or suspected concussion, and

3. youth athletic activity operators to provide written concussion information to each youth athlete and his or her parent or guardian.

Finally, the bill establishes a 20-member task force to study concussion occurrences in youth athletics and recommend possible legislative initiatives to address such concussions. The task force must report its findings and recommendations to the Public Health and Children's committees by January 1, 2015.

EFFECTIVE DATE: July 1, 2014, except for the task force provision, which is effective on passage.

§ 1 — TRAINING AND REVIEW MATERIAL REQUIREMENTS

Current law requires intramural and interscholastic athletics coaches who hold or are issued a coaching permit by SBE to complete an initial training course on concussion and head injuries before beginning a coaching assignment for the school athletics season. They must subsequently complete a refresher course and annually review materials on concussions and head injuries. The bill narrows the scope of the training and review materials to only concussions, eliminating other head injuries. It also requires the initial training course to include information on the danger of continuing to engage in any athletic activity, instead of just returning to play in the same activity, after sustaining a concussion.

The bill expands the information required in the refresher course to include an update on (1) medical developments and current best practices in concussion research, prevention, and treatment and (2) implementing athletic coaching and instructional techniques, including current best practices identified by the intramural and interscholastic governing authority regarding game, full-contact practice, and scrimmage frequency.

The bill also requires SBE to consult with the DPH commissioner to

develop or approve the concussion training courses and prepare or approve the annual review materials. SBE must already consult on these matters with (1) the intramural and interscholastic athletics governing authority, (2) an appropriate organization representing licensed athletic trainers, and (3) an organization representing county medical associations.

§ 1 — CONCUSSION EDUCATION PLAN

The bill requires SBE, in consultation with the above entities, to develop or approve a concussion education plan. The plan may use written materials, online training or videos, or in-person training and must include the same information required in the concussion training course above as well as current best practices in the prevention and treatment of a concussion. (The bill does not specify for whom the plan is intended.)

§ 2 — CONCUSSION NOTIFICATION AND ATHLETIC ACTIVITY PARTICIPATION

Concussion Notification

The bill requires a school coach or other qualified school employee, when a student athlete is removed from an athletic activity for a concussion or suspected concussion, to notify the student's parent or legal guardian that the student has shown concussion signs, symptoms, or behaviors or has been diagnosed with a concussion. The coach or employee must (1) provide the notice within 24 hours after removing the student and (2) make a reasonable effort to provide the notice immediately after the student is removed.

A "qualified school employee" means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach, or school paraprofessional.

Athletic Activity Participation

Under current law, a coach may not permit a student athlete removed from an athletic activity for a concussion or suspected concussion to participate in any supervised team activities involving

physical exertion until a licensed health care professional trained in concussion evaluation and management gives the student written clearance to do so. The prohibition includes practices, games, and competitions. The bill:

1. broadens the activities in which the student may not participate, from supervised team activities involving physical exertion to all supervised athletic activities involving such exertion and
2. in addition to the written clearance, requires the student to wait at least 24 hours after exhibiting concussion signs, symptoms, or behaviors or being diagnosed with a concussion before returning to such activities.

Under current law, a coach may not allow a student athlete, after the student receives the initial written clearance, to participate in any full, unrestricted supervised team activities, including practices, games, or competitions, without limiting contact or physical exertion. The prohibition lasts until the student (1) no longer exhibits concussion signs, symptoms, or behaviors at rest or with exertion and (2) receives a second written clearance to participate in such team activities from a licensed health care professional trained in concussion evaluation and management. The bill expands the activities covered by these restrictions to include all full, unrestricted supervised athletic activities.

By law, SBE may revoke a coach's permit for violating this section.

§ 3 — YOUTH ATHLETIC ACTIVITY CONCUSSION INFORMATION

The bill requires each youth athletic activity operator, starting by January 1, 2015, to annually provide a written statement regarding concussions to each youth athlete and his or her parent or legal guardian when the athlete registers. The statement must include educational content about:

1. recognizing the signs or symptoms of a concussion;

2. how to obtain proper medical treatment for a person suspected of sustaining a concussion;
3. the nature and risks of concussions, including the danger of continuing to engage in youth athletic activity after sustaining a concussion; and
4. the proper procedures to allow an athlete who has sustained a concussion to return to athletic activity.

A “youth athletic activity” means an organized athletic activity involving participants between age seven and 19 who (1) engage in an organized athletic game or competition against another team, club, or entity, and (2) either pay a fee to participate or have their fees sponsored by a municipality, business, or nonprofit organization. (It appears that this definition may also encompass a school sport or activity for which a student pays to participate.) The requirements do not apply to (1) college or university athletic activity, (2) activity entered into for instructional purposes only, or (3) athletic activity incidental to a nonathletic program or lesson.

An “operator” is any municipality, business, or nonprofit organization that conducts, coordinates, organizes, or otherwise oversees any youth athletic activity.

§ 4 — SCHOOL DISTRICT AND AGENCY REPORTING REQUIREMENTS

The bill requires SBE, starting with the 2014-2015 school year, to annually require school districts to collect and report to it all concussion occurrences. The report must include the (1) nature and extent of the concussion and (2) circumstances in which the student sustained it.

SBE, starting with the 2015-2016 school year, must annually send a concussion report to DPH containing all the school districts’ concussion reporting information. DPH, starting by October 1, 2015, must annually report the SBE concussion report’s findings to the

Children’s and Public Health committees. (The bill does not include a specific deadline by which SBE must send the 2015-2016 school year concussion report to DPH. In addition, in order for DPH to have a full year’s data on which to base its report, its reporting deadline would have to be pushed back by one year, to October 1, 2016.)

§ 5 — CONCUSSION TASK FORCE

The bill establishes a task force to study concussion occurrences in youth athletics and make recommendations for possible legislative initiatives to address such concussions. The study must examine (1) current best practices for concussion recognition and prevention in youth athletics; (2) current concussion policies and procedures used by youth athletic league operators in the state; (3) youth athletic league employee and volunteer training; and (4) relevant federal, state, and local concussion laws and regulations.

The task force members must include the public health, children and families, and education commissioners, or their designees, and the appointees shown in Table 1.

Table 1: Concussion Task Force Appointees

<i>Number of Appointees</i>	<i>Qualifications</i>	<i>Appointing Authority</i>
Two	<ul style="list-style-type: none"> • intramural and interscholastic athletics governing authority representative • Connecticut State Medical Society representative 	House speaker
Two	<ul style="list-style-type: none"> • county medical association representative • American Association of Neurology representative 	Senate president pro tempore
Two	<ul style="list-style-type: none"> • licensed athletic trainer representative • youth athletic coach 	House majority leader
Two	<ul style="list-style-type: none"> • sports medicine physician • Association of School Nurse of Connecticut representative 	Senate majority leader
Two	<ul style="list-style-type: none"> • academic who has studied the effects of concussions on children • Connecticut Association of 	House minority leader

	Psychologists representative	
Two	<ul style="list-style-type: none"> Connecticut Concussion Task Force representative Connecticut Children's Medical Center representative 	Senate minority leader
Two	<ul style="list-style-type: none"> parent concussion awareness advocacy group representative state-licensed chiropractor 	Children's Committee House chairperson
Two	<ul style="list-style-type: none"> Connecticut Recreation and Parks Association representative attorney with experience in representing brain injury survivors 	Children's Committee Senate chairperson
One	<ul style="list-style-type: none"> Hezekiah Beardsley Connecticut Chapter of the American Academy of Pediatrics representative 	Governor

All task force appointments must be made within 30 days after the bill's passage. The appointing authority must fill any vacancy. The House speaker and the Senate president pro tempore must select the task force chairpersons from its members and the chairpersons must schedule the first meeting within 60 days after the bill's passage. The Children's Committee administrative staff serves as the task force's administrative staff.

The bill requires the task force to report its findings and recommendations to the Public Health and Children's committees by January 1, 2015. It terminates on the date it submits the report or January 1, 2015, whichever is later.

COMMITTEE ACTION

Committee on Children

Joint Favorable Substitute

Yea 11 Nay 1 (03/11/2014)