



General Assembly

**Substitute Bill No. 5113**

February Session, 2014



**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 Section 10-149b of the general statutes is repealed and the  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.*