

## Students

### Student Athlete Concussions and Head Injuries 1

The Superintendent or designee shall develop and implement a program to manage concussions and head injuries suffered by students. The program shall:

1. Fully implement the Youth Sports Concussion Safety Act, that provides, without limitation, each of the following: <sup>2</sup>
  - a. The Board must appoint or approve member(s) of a Concussion Oversight Team for the District. <sup>3</sup>
  - b. The Concussion Oversight Team shall establish each of the following based on peer-reviewed scientific evidence consistent with guidelines from the Centers for Disease Control and Prevention: <sup>4</sup>

The footnotes are not intended to be part of the adopted policy; they should be removed before the policy is adopted.

<sup>1</sup> Three Illinois statutes in the School Code have addressed student concussions:

- (1) The Youth Sports Concussion Safety Act, 105 ILCS 5/22-80, added by P.A. 99-245; trailer legislation (P.A. 99-486) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year. The Act contains concussion safety directives for school boards and certain identified staff members. A school district must implement Sec. 22-80 if it offers interscholastic athletic activities or interscholastic athletics under the direction of a coach (volunteer or school employee), athletic director, or band leader. A school district may need to implement its return-to-learn protocol for a student's return to the classroom after he or she is believed to have experienced a concussion, "whether or not the concussion took place while the student was participating in an interscholastic activity." 105 ILCS 5/22-80(d). For a comprehensive discussion of this Act, see the IASB publication [Checklist for Youth Sports Concussion Safety Act](#); at: [iasb.com/law/](http://iasb.com/law/). Helpful guidance for implementing this law is available from the Lurie Children's Hospital's *A Guide for Teachers and School Professionals*.
- (2) 105 ILCS 25/1.15 ~~added by P.A. 98-1011~~, requires: (a) all high school coaching personnel to complete online concussion awareness training, and (b) all student athletes to view the IHSA video about concussions.
- (3) 105 ILCS 25/1.20, added by P.A. 99-831, requires the IHSA to require all member districts that have certified athletic trainers to have those trainers complete and submit a monthly report on student-athletes who have sustained a concussion during: 1) a school-sponsored activity overseen by the athletic trainer; or 2) a school-sponsored event of which the athletic director is made aware.

The Center for Disease Control and Prevention explains that a concussion is a type of traumatic brain injury caused by a bump, blow, or jolt to the head, or by a hit to the body that causes the head and brain to move rapidly back and forth. See [www.cdc.gov/headsup/index.html](http://www.cdc.gov/headsup/index.html). The CDC website contains excellent resources for the recognition, response, and prevention of concussions, including the opportunity to order or download free educational materials on concussions that can be distributed to parents, students, and coaches.

<sup>2</sup> 105 ILCS 5/22-80, added by P.A. 99-245; ~~trailer legislation (amended by P.A. 99-486 and 100-309) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~

<sup>3</sup> 105 ILCS 5/22-80(d), added by P.A. 99-245; ~~trailer legislation (amended by P.A. 99-486 and 100-309) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~ A physician, to the extent possible, must be on the Team. If the school employs an athletic trainer and/or nurse, they must be on the Team to the extent practicable. The Team must include, at a minimum, one person who is responsible for implementing and complying with the return-to-play and return-to-learn protocols adopted by the Team. Other licensed health care professionals may be appointed to serve on the Team. ~~The statute provides that the Team may be composed of only one person who need not be a licensed healthcare professional, however, that person may not be a coach. Id.~~

As this is administrative/staff work rather than governance work, the best practice is to have the Concussion Oversight Team be an *administrative* committee, but consult the board attorney for guidance. If it is a board committee, it must comply with the Open Meetings Act, 5 ILCS 120/1.02. For a discussion of the Open Meetings Act's treatment of committees, see the footnotes in 2:150, *Committees*.

<sup>4</sup> 105 ILCS 5/22-80(d), ~~added by P.A. 99-245; trailer legislation (amended by P.A. 99-486) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~

- i. A return-to-play protocol governing a student’s return to interscholastic athletics practice or competition following a force of impact believed to have caused a concussion. The Superintendent or designee shall supervise an athletic trainer or other person responsible for compliance with the return-to-play protocol. <sup>5</sup>
- ii. A return-to-learn protocol governing a student’s return to the classroom following a force of impact believed to have caused a concussion. The Superintendent or designee shall supervise the person responsible for compliance with the return-to-learn protocol. <sup>6</sup>
- c. Each student and the student’s parent/guardian shall be required to sign a concussion information receipt form each school year before participating in an interscholastic athletic activity. <sup>7</sup>
- d. A student shall be removed from an interscholastic athletic practice or competition immediately if any of the following individuals believes that the student sustained a concussion during the practice and/or competition: a coach, a physician, a game official,

**Commented [DJ1]:** F/ns 5 and 6 are updated to reflect the provision that the supervisor of the person responsible for compliance with the return-to-play and return to learn protocols may not be a coach. This requirement is not new, but was added to provide further information.

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<sup>5</sup> The Youth Sports Concussion Safety Act contains requirements for a student to return to play following a concussion ~~(Id.)~~. ~~The supervisor of the person responsible for compliance with the return-to-play protocol may not be a coach.~~ The student’s treating physician, physician assistant, advanced practice registered nurse, or an athletic trainer working under a physician’s supervision must evaluate and find that it is safe for the student to return to play. The student’s parent/guardian must sign a consent form that complies with statutory prerequisites. In addition, the student must also complete the requirements in the district’s return-to-play and return-to-learn protocols. Thus, the district through its protocols may add requirements for the student’s return, but may not delete any statutory requirements.

It is an open question whether the return-to-play protocol is limited to when the concussion occurred during an interscholastic athletic activity because the statute does not state “whether or not the concussion took place while the student was participating in an interscholastic athletic activity.” It makes sense, however, to apply the return-to-play protocol whenever a student suffers a concussion before allowing him or her to participate in an interscholastic athletic activity. See IHSA’s website contains a form for this, Post-concussion Consent Form (RTP/RTL); at: [ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx](https://ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx)

<sup>6</sup> 105 ILCS 5/22-80(g), added by P.A. 99-245; ~~trailer legislation amended by (P.A.s 99-486 and 100-309) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~ ~~The supervisor of the person responsible for compliance with the return-to-learn protocol may not be a coach.~~ The return-to-learn protocol governs a student’s return to the classroom after a concussion, whether or not the concussion took place while the student was participating in an interscholastic athletic activity. Guidance from Lurie Children’s Hospital explains that recovery from a concussion must be an individualized process because no two concussions are the same. See *Return to Learn after a Concussion: A Guide for Teachers and School Professionals*, Lurie Children’s Hospital. This *Guide* explains that a student’s full recovery depends on both cognitive rest and physical rest. It suggests using a multidisciplinary team to facilitate a student’s return to the classroom and provides examples of accommodations and interventions. It also stresses the importance of identifying a school staff member who will function as a case manager or concussion management leader, such as a school nurse, athletic trainer, or school counselor. See IHSA’s website contains a form for this, Post-concussion Consent Form (RTP/RTL); at: [ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx](https://ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx).

<sup>7</sup> 105 ILCS 5/22-80(e), added by P.A. 99-245; ~~trailer legislation (amended by P.A. 99-486) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~ *Interscholastic athletic activity* is defined in Section 22-80(a) as “any organized school-sponsored or school-sanctioned activity for students, generally outside of school instructional hours, under the direction of a coach, athletic director, or band leader, including, but not limited to, baseball, basketball, cheerleading, cross country track, fencing, field hockey, football, golf, gymnastics, ice hockey, lacrosse, marching band, rugby, soccer, skating, softball, swimming and diving, tennis, track (indoor and outdoor), ultimate Frisbee, volleyball, water polo, and wrestling. The form must be approved by the Illinois High School Association (IHSA). See [ihsa.org/Resources/SportsMedicine/ConcussionManagement/5ConcussionResources.aspx](https://ihsa.org/Resources/SportsMedicine/ConcussionManagement/5ConcussionResources.aspx), ~~generally—and—specifically for IHSA Concussion Protocols~~ and *IHSA Sports Medicine Acknowledgement & Consent Form* (Concussion, PES, Asthma Medication).

an athletic trainer, the student's parent/guardian, the student, or any other person deemed appropriate under the return-to-play protocol. <sup>8</sup>

- e. A student who was removed from interscholastic athletic practice or competition shall be allowed to return only after all statutory prerequisites are completed, including without limitation, the return-to-play and return-to-learn protocols developed by the Concussion Oversight Team. An athletic team coach or assistant coach may not authorize a student's return-to-play or return-to-learn. <sup>9</sup>
  - f. The following individuals must complete concussion training as specified in the Youth Sports Concussion Safety Act: all coaches or assistant coaches (whether volunteer or a district employee) of interscholastic athletic activities; nurses, licensed healthcare professionals or non-licensed healthcare professionals who serve on the Concussion Oversight Team (whether or not they serve on a volunteer basis); athletic trainers; game officials of interscholastic athletic activities; and physicians who serve on the Concussion Oversight Team. <sup>10</sup>
  - g. The Board shall approve school-specific emergency action plans for interscholastic athletic activities to address the serious injuries and acute medical conditions in which a student's condition may deteriorate rapidly. <sup>11</sup>
2. Comply with the concussion protocols, policies, and by-laws of the Illinois High School Association, including its *Protocol for Implementation of NFHS Sports Playing Rules for Concussion*, which includes its *Return to Play (RTP) Policy*.<sup>12</sup> These specifically require that:

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<sup>8</sup> 105 ILCS 5/22-80(f), added by P.A. 99-245; ~~trailer legislation amended by (P.A. 99-486) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~

<sup>9</sup> 105 ILCS 5/22-80(g), added by P.A. 99-245; ~~amended by trailer legislation (P.A.s 99-486 and 100-309) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~ Most students with a concussion will not need a formal 504 plan or individualized education program; contact the board attorney whenever one is requested or the student's symptoms are prolonged.

<sup>10</sup> 105 ILCS 5/22-80(h), added by P.A. 99-245; ~~trailer legislation amended by (P.A.s 99-486 and 100-309) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~ Individuals covered by this training mandate must ~~initially complete the~~ take a training course from an authorized training provider prior to serving on a Concussion Oversight Team (Team) and at least once every two years (or if not serving on the Team, at least once every two years), by 9-1-2016. See the footnotes in policy 5:100, Staff Development Program. Physicians on Teams are required, to the greatest extent practicable, to periodically take an appropriate medical course on concussions. 105 ILCS 5/22-80(h)(3).

Note: Licensed healthcare professionals includes nurses and licensed clinical psychologists, physical therapists, occupational therapists, physicians' assistants, and athletic trainers working under the supervision of a physician. 105 ILCS 5/22-80(b). Non-licensed healthcare professionals is not specifically defined. Therefore, it is not entirely clear if a Team may include an individual, i.e., a building principal that is not mandated to take the training. As a matter of best practice and to reduce liability, all Team members should receive the training; however, consult with the board attorney for further guidance.

<sup>11</sup> 105 ILCS 5/22-80(i), added by P.A. 99-245; ~~trailer legislation (amended by P.A. 99-486) amended the Act to delay the compliance deadline until the beginning of the 2016-2017 school year.~~ A template is available on the IHSA website under *Emergency Action Plan (EAP) Resources* at: [ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx](http://ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx).

<sup>12</sup> The *Protocol for Implementation of NFHS Sports Playing Rules for Concussion* (<http://ihsa.org/documents/sportsMedicine/Concussion%20Protocols.pdf>) contains concussion information, provides instructions when a student athlete sustains an apparent concussion, and includes a *Return to Play (RTP) Policy*. The *Return to Play (RTP) Policy* addresses the requirements for returning a student athlete to play after he or she exhibits signs, symptoms, or behaviors of a concussion.

- a. A student athlete who exhibits signs, symptoms, or behaviors consistent with a concussion in a practice or game shall be removed from participation or competition at that time.
  - b. A student athlete who has been removed from an interscholastic contest for a possible concussion or head injury may not return to that contest unless cleared to do so by a physician licensed to practice medicine in all its branches in Illinois or a certified athletic trainer.
  - c. If not cleared to return to that contest, a student athlete may not return to play or practice until the student athlete has provided his or her school with written clearance from a physician licensed to practice medicine in all its branches in Illinois, advanced practice registered nurse, physician assistant or a certified athletic trainer working in conjunction with a physician licensed to practice medicine in all its branches in Illinois.<sup>13</sup>
3. Require that all high school coaching personnel, including the head and assistant coaches, and athletic directors obtain online concussion certification by completing online concussion awareness training in accordance with 105 ILCS 25/1.15. <sup>14</sup>
  4. Require all student athletes to view the Illinois High School Association's video about concussions. <sup>15</sup>
  5. Inform student athletes and their parents/guardians about this policy in the *Agreement to Participate* or other written instrument that a student athlete and his or her parent/guardian must sign before the student is allowed to participate in a practice or interscholastic competition. <sup>16</sup>
  6. Provide coaches and student athletes and their parents/guardians with educational materials from the Illinois High School Association regarding the nature and risk of concussions and head injuries, including the risks inherent in continuing to play after a concussion or head injury. <sup>17</sup>
  7. Include a requirement for staff members to notify the parent/guardian of a student who exhibits symptoms consistent with that of a concussion. <sup>18</sup>

[For high school districts that belong to the IHSA and have certified athletic trainers.]

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<sup>13</sup> 105 ILCS 5/22-80(g)(4), amended by P.A. 100-309 and 225 ILCS 65/20-10, amended by P.A. 100-513. P.A. 100-513 amended the Nurse Practice Act to add *registered* to the definition of *advanced practice registered nurse*; accordingly, this policy reflects that change in terminology, even though Section 22-80 was not similarly amended.

<sup>14</sup> 105 ILCS 25/1.15(b), ~~added by P.A. 98-1014~~, requires high school coaching personnel and athletic directors hired before 8-18-2014 to have been certified by 8-19-2015. Coaching personnel and athletic directors hired on or after 8-19-2014 must be certified before the starting date of their position.

<sup>15</sup> 105 ILCS 25/1.15(e), ~~added by P.A. 98-1014~~.

<sup>16</sup> Required by 23 Ill.Admin.Code §1.530(b). IHSA drafted a sample *Concussion Information Sheet*, which is included within the *IHSA Sports Medicine Acknowledgement & Consent Form* and has been incorporated into 7:300-E1, *Agreement to Participate*. ~~It can be used to inform student athletes and parents, and it is available at~~ [See: ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx](http://www.ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx).

An ISBE rule defines *health-related information* to include a concussion policy acknowledgment (23 Ill.Admin.Code §375.10). The acknowledgment, therefore, must be kept with the student's school student records as a temporary record. (23 Ill.Admin.Code §375.40).

<sup>17</sup> IHSA has produced educational materials on concussions for coaches, parents/guardians, student athletes, and the school and health care providers on concussions. ~~See that are available at:~~ [ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx](http://www.ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx).

<sup>18</sup> This provision is optional.

**Commented [KAS2]:** P.A. 100-513 amended the definition in the Nurse Practice Act, 225 ILCS 65/50-10, to advanced practice registered nurse.

**Commented [DJ3]:** It appears that the law was changed to align with those individuals listed in the IHSA protocol. Previously, the statute only permitted physicians and athletic trainers working the supervision of a physician to clear a student for return to learn and play.

8. Include a requirement for certified athletic trainers to complete and submit a monthly report to the Illinois High School Association on student-athletes who have sustained a concussion during: 1) a school-sponsored activity overseen by the athletic trainer; or 2) a school-sponsored event of which the athletic director is made aware.<sup>19</sup>

LEGAL REF.: 105 ILCS 5/22-80.  
105 ILCS 25/1.15.

CROSS REF.: 4:170 (Safety), [5:100 \(Staff Development Program\)](#), 7:300 (Extracurricular Athletics)

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<sup>19</sup> Required by 105 ILCS 25/1.20, added by P.A. 99-831, for high school districts that belong to the IHSA and have certified athletic trainers.

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