

1 THOUSAND SCHOOL AGED YOUTH VISITED THE EMERGENCY DEPARTMENT OR WERE
2 HOSPITALIZED FOR CONCUSSIONS ANNUALLY WITH THE COST OF THEIR MEDICAL
3 CARE APPROACHING EIGHTY MILLION DOLLARS. THE THREE YEAR TOTAL COST OF
4 BOTH HOSPITALIZATION AND EMERGENCY DEPARTMENT VISITS IN THE SAME PERIOD
5 FOR ALL AGE GROUPS IN THE STATE FOR TREATMENT OF TBIS WAS OVER A BILLION
6 DOLLARS.

7 2. THE LEGISLATURE FURTHER FINDS THAT EARLY INTERVENTION, RESPONSE,
8 AND THE PROPER EVALUATION AND MANAGEMENT OF CONCUSSIONS WILL LESSEN THE
9 EFFECTS OF THIS POTENTIALLY LIFE THREATENING INJURY. IT IS ESSENTIAL TO
10 EDUCATE PARENTS AND GUARDIANS, STUDENTS, COACHES AND SCHOOL PERSONNEL ON
11 THE EARLY AND ACCURATE RECOGNITION OF THE SIGNS AND SYMPTOMS OF CONCUS-
12 SIONS AND THE POTENTIAL HARMFUL EFFECTS OF HEAD INJURIES NOT JUST ON A
13 CHILD'S PHYSICAL WELL-BEING BUT ON HIS OR HER ACADEMIC PERFORMANCE AS
14 WELL.

15 3. THE LEGISLATURE HEREBY DECLARES THAT AN ADVISORY BOARD COMPOSED OF
16 EXPERTS IN THE AREA OF CONCUSSION DIAGNOSIS, TREATMENT AND MANAGEMENT,
17 WHO WILL SERVE AS ADVISORS TO THE DEPARTMENT AND SCHOOL DISTRICTS, IS
18 CRITICAL TO THE SUCCESS OF THIS LEGISLATION AND TO IMPLEMENTATION OF A
19 STANDARDIZED STATEWIDE PROGRAM, CONSISTENT ACROSS ALL SCHOOL DISTRICTS
20 AND REGIONS OF THE STATE.

21 4. THE ADVISORY BOARD MEMBERS, ARMED WITH CURRENT KNOWLEDGE OF BEST
22 PRACTICES AND INFORMATION RESOURCES THAT MAY BE DEPLOYED, WILL ADVISE
23 THE DEPARTMENT ON THE CONTENTS FOR A WEB-BASED INFORMATION KIT, FORMS,
24 AND EDUCATIONAL MATERIALS, THAT SHALL BE MADE AVAILABLE TO SCHOOLS FREE
25 OF CHARGE THROUGHOUT THE STATE SUCH THAT THEY MAY EFFECTIVELY IMPLEMENT
26 PROGRAMS TO PROTECT PARTICIPANTS IN INTERSCHOLASTIC SPORTS, AND OTHER
27 ACTIVITIES WHERE HEAD INJURIES MAY OCCUR.

28 S 3052. CONCUSSION MANAGEMENT ADVISORY BOARD. 1. THERE IS HEREBY
29 ESTABLISHED IN THE DEPARTMENT A STATE CONCUSSION MANAGEMENT ADVISORY
30 BOARD TO ADVISE THE DEPARTMENT IN IMPLEMENTATION OF BEST PRACTICES AS
31 RELATED TO CONCUSSION MANAGEMENT.

32 2. MEMBERS OF THE CONCUSSION MANAGEMENT PROFESSIONAL ADVISORY BOARD,
33 HEREFTER REFERRED TO AS THE "BOARD", SHALL INCLUDE DESIGNATED REPRES-
34 TATIVES FROM THE FOLLOWING ORGANIZATIONS:

- 35 A. NEW YORK STATE PUBLIC HIGH SCHOOL ATHLETIC ASSOCIATION (NYSPHSAA);
- 36 B. STONY BROOK UNIVERSITY - ATHLETIC TRAINING PROGRAM;
- 37 C. MOUNT SINAI SCHOOL OF MEDICINE - RESEARCH AND TRAINING CENTER ON
- 38 COMMUNITY INTEGRATION OF INDIVIDUALS WITH TRAUMATIC BRAIN INJURY;
- 39 D. UNIVERSITY OF BUFFALO SCHOOL OF PUBLIC HEALTH - ATHLETIC TRAINING
- 40 PROGRAM;
- 41 E. NATIONAL ATHLETIC TRAINERS' ASSOCIATION'S CONCUSSION COUNCIL;
- 42 F. NEW YORK STATE ATHLETIC TRAINERS' ASSOCIATION;
- 43 G. NEW YORK STATE SCHOOL NURSES' ASSOCIATION;
- 44 H. SCHOOL DISTRICT REPRESENTATIVE;
- 45 I. NEW YORK STATE DEPARTMENT OF EDUCATION;
- 46 J. NEW YORK STATE DEPARTMENT OF HEALTH; AND
- 47 K. MEDICAL SOCIETY.

48 3. THE BOARD SHALL MEET AT LEAST THREE TIMES A YEAR AND SHALL FACILI-
49 TATE AS PRACTICABLE AS POSSIBLE WITHOUT ADDITIONAL COSTS TO SCHOOL
50 DISTRICTS THE IMPLEMENTATION OF THE PROVISIONS OF THIS ARTICLE.

51 THE COMMISSIONERS MAY DETAIL FROM TIME TO TIME, FOR THE ASSISTANCE OF
52 THE ADVISORY BOARD, SUCH EMPLOYEES OF THE DEPARTMENTS AS THEY DEEM
53 NECESSARY.

54 THE ADVISORY BOARD SHALL REVIEW EXISTING AND PROPOSED STATE HEAD INJU-
55 RY AWARENESS AND PREVENTION LAWS AND REGULATIONS. THE ADVISORY BOARD
56 SHALL REVIEW EXISTING AND PROPOSED STATE HEAD INJURY AWARENESS AND

1 PREVENTION LAWS AND REGULATIONS. THE ADVISORY BOARD SHALL MAKE RECOMMEN-
2 DATIONS TO THE COMMISSIONER OF HEALTH AND THE COMMISSIONER OF EDUCATION
3 AS TO ANY REGULATORY CHANGES THAT MAY BE NECESSARY FOR THE IMPLEMENTA-
4 TION OF THIS ARTICLE.

5 THE ADVISORY BOARD FURTHER, SHALL REVIEW EXISTING AND PROPOSED STATE
6 HEAD INJURY AWARENESS AND PREVENTION LAWS AND SHALL MAKE RECOMMENDATIONS
7 TO THE GOVERNOR, THE LEADERS OF THE SENATE AND ASSEMBLY, AS WELL AS THE
8 ASSEMBLY AND SENATE CHAIRS OF THE STANDING COMMITTEES ON HEALTH AND
9 EDUCATION, ANY NECESSARY CHANGES OR ADDITIONS TO LAWS AND PROGRAMS TO
10 IMPROVE HEAD INJURY AWARENESS AND PREVENTION.

11 THE ADVISORY BOARD SHALL REPORT THE EFFECTIVENESS OF THE DEPARTMENTS'
12 ACTIVITIES.

13 4. ADDITIONAL RESPONSIBILITIES OF THE ADVISORY BOARD SHALL INCLUDE,
14 BUT NOT BE LIMITED TO, ADVICE AND COUNSEL TO THE DEPARTMENT AS WELL AS
15 ASSISTANCE TO THE DEPARTMENT IN THE DEVELOPMENT AND RECOMMENDATIONS FOR
16 BEST PRACTICES REGARDING THE FOLLOWING:

- 17 A. CONTENTS OF TRAINING AND INFORMATIONAL MATERIALS;
- 18 B. RELEASE FORMS;
- 19 C. CONTENTS OF WEBSITES;
- 20 D. REQUIREMENTS FOR GAME DAY COVERAGE FOR INTERSCHOLASTIC PLAY;
- 21 E. REQUIRED TRAINING FOR COACHES AND SCHOOL OFFICIALS;
- 22 F. PROTOCOLS FOR RETURN TO PRACTICE OR PLAY OR RETURN TO SCHOOL AND/OR
23 SCHOOL ACTIVITIES;
- 24 G. POST INJURY INFORMATION SHEETS AND GUIDELINES; AND
- 25 H. OVERSEE ANNUAL COACH TRAINING REQUIREMENTS AND SUGGEST ADDITIONAL
26 COACH TRAINING REQUIREMENTS AS NEEDED.

27 5. A. MEMBERS OF THE BOARD SHALL RECEIVE NO COMPENSATION FOR THEIR
28 SERVICES. THEY SHALL BE ENTITLED TO REASONABLE AND NECESSARY EXPENSES
29 ACCRUED DURING THE PERFORMANCE OF THEIR DUTIES.

30 B. MEMBERS OF THE ADVISORY BOARD SHALL NOT BE HELD INDIVIDUALLY OR AS
31 A GROUP LEGALLY RESPONSIBLE FOR ANY ACTIONS TAKEN BY THEM OR THE BOARD
32 ABSENT A FINDING OF GROSS NEGLIGENCE.

33 6. PRELIMINARY RECOMMENDATIONS OF THE ADVISORY BOARD FOR IMPLEMENTA-
34 TION OF POLICIES SHALL BE SUBMITTED TO THE GOVERNOR, STATE EDUCATION AND
35 HEALTH DEPARTMENTS AND TO THE HEALTH AND EDUCATION COMMITTEES OF BOTH
36 HOUSES OF THE LEGISLATURE BY A DATE NO LATER THAN ONE HUNDRED EIGHTY
37 DAYS FOLLOWING THE EFFECTIVE DATE OF THIS ARTICLE.

38 S 3053. NEW YORK STATE HEAD INJURY AWARENESS PROGRAM. 1. THE DEPART-
39 MENT, IN CONSULTATION WITH OTHER STATE AGENCIES, SHALL BE RESPONSIBLE
40 FOR IMPLEMENTING REGULATORY RECOMMENDATIONS OF THE ADVISORY BOARD AS
41 WELL AS THE STATUTORY PROVISIONS OF THIS ARTICLE WITH RESPECT TO GUIDE-
42 LINES AND STANDARDS FOR:

- 43 A. STUDENT ATHLETES PARTICIPATING IN INTERSCHOLASTIC COMPETITIONS; AND
- 44 B. ALL SCHOOL DISTRICTS, BOARDS OF COOPERATIVE EDUCATIONAL SERVICES
45 AND NONPUBLIC SCHOOLS RELATING TO THE TRAINING OF SCHOOL PERSONNEL AND
46 PROVIDING INFORMATION TO PARENTS REGARDING THE TREATMENT AND MONITORING
47 OF STUDENTS WHO SUFFER OR ARE SUSPECTED OF SUFFERING CONCUSSIONS AND
48 HEAD INJURIES.

49 2. THE DEPARTMENT IN CONSULTATION WITH THE ADVISORY BOARD SHALL
50 PROMULGATE RULES AND REGULATIONS, INCLUDING PROVISION OF UNIFORM GUIDE-
51 LINES, PROTOCOLS AND FORMS THAT SHALL BE USED BY ALL SCHOOL DISTRICTS
52 THROUGHOUT THE STATE.

53 3. THE DEPARTMENT SHALL ESTABLISH AND MAINTAIN A DEDICATED CONCUSSION
54 MANAGEMENT WEBSITE THAT SHALL INCLUDE LINKS TO RELEVANT MATERIALS,
55 EDUCATIONAL PROGRAMS AND READILY DOWNLOADABLE FORMS OF ALL MATERIALS

REQUIRED TO COMPLY WITH THE RULES, REGULATIONS AND GUIDELINES SET FORTH HEREIN.

4. THE DEPARTMENT, ON AT LEAST AN ANNUAL BASIS PRIOR TO THE START OF THE NEW SCHOOL YEAR, SHALL UPDATE MATERIALS AS NEEDED TO REFLECT BEST PRACTICES AND MOST CURRENT INFORMATION.

5. FORMS AND INFORMATIONAL MATERIALS SHALL INCLUDE, BUT NOT BE LIMITED TO:

A. PARENTAL AND STUDENT HEAD INJURY INFORMATION PACKETS;

B. RELEASE FORMS FOR PARENTS AND STUDENTS;

C. ANNUAL TRAINING CERTIFICATION FORMS FOR ALL SCHOOL DISTRICT STAFF AND VOLUNTEER CERTIFIED HEALTH CARE PROVIDERS;

D. ACCIDENT REPORTING AND OBSERVATION FORMS WHICH INCLUDE A CONCUSSION SIGNS AND SYMPTOMS CHECKLIST;

E. TEAM MEDICAL STAFFING RECORDKEEPING FORMS;

F. RETURN TO ACTIVITY PROTOCOL FORMS TO BE USED BY HEALTH CARE PROVIDERS;

G. INFORMATION REGARDING HEALTH CARE PROVIDERS TRAINED IN THE RECOGNITION OF HEAD INJURIES AND CARE;

H. POST INJURY FACT SHEETS FOR PARENTS/GUARDIANS AND STUDENTS; AND

I. SCHOOL "CONCUSSION MANAGEMENT POINT PERSON" INFORMATION AND TRAINING KITS.

6. EACH SCHOOL DISTRICT SHALL DESIGNATE A CONCUSSION MANAGEMENT POINT PERSON, WHO IS A FULL-TIME EMPLOYEE OF THE SCHOOL DISTRICT, WHO SHALL HAVE QUALIFICATIONS ESTABLISHED BY THE DEPARTMENT UPON THE ADVICE AND COUNSEL OF THE ADVISORY BOARD AND WHO WILL MANAGE INFORMATION AND RECORDS AS REQUIRED RELATING TO THE NEW YORK STATE HEAD INJURY AWARENESS PROGRAM FOR EACH SCHOOL WITHIN THE SCHOOL DISTRICT. INFORMATION AND TRAINING KITS SHALL BE PROVIDED TO SUPPORT THIS POSITION THROUGH THE DEPARTMENT'S CONCUSSION MANAGEMENT WEBSITE.

S 3054. DEFINITIONS. FOR PURPOSES OF THIS ARTICLE, THE FOLLOWING TERMS SHALL HAVE THE FOLLOWING MEANINGS:

1. "LICENSED HEALTH CARE PROVIDER" SHALL MEAN A PHYSICIAN LICENSED PURSUANT TO ARTICLE ONE HUNDRED THIRTY-ONE OF THIS CHAPTER, A PHYSICIAN ASSISTANT LICENSED PURSUANT TO ARTICLE ONE HUNDRED THIRTY-ONE-B OF THIS CHAPTER, A CERTIFIED NURSE PRACTITIONER CERTIFIED PURSUANT TO SECTION SIXTY-NINE HUNDRED TEN OF THIS CHAPTER. IN ALL CASES THE HEALTH CARE PROVIDER SHOULD PRACTICE IN A SPECIALTY RELEVANT TO THE CARE AND TREATMENT OF HEAD INJURIES AS DETERMINED BY THE BOARD.

2. "SCHOOL ATHLETIC ACTIVITY" SHALL MEAN A SANCTIONED COMPETITION.

3. "SCHOOL PERSONNEL" SHALL MEAN TEACHER, COACH, CLUB, INTRAMURAL SPORT OR ACTIVITY SUPERVISOR, SCHOOL ADMINISTRATOR, SCHOOL GUIDANCE COUNSELOR, SCHOOL PSYCHOLOGIST, SCHOOL DRUG COUNSELOR, SCHOOL NURSE, CLASSROOM AIDES.

4. "QUALIFIED CONCUSSION MANAGEMENT TRAINING" SHALL MEAN TRAINING EQUIVALENT TO THAT WHICH IS OFFERED THROUGH THE DEPARTMENT AS PART OF ITS FIRST AID TRAINING COURSE.

5. "RETURN TO ACTIVITY PROTOCOL" SHALL MEAN A STEP BY STEP PROGRESSION FROM INJURY TO FULL PARTICIPATION, BASED ON MONITORING THE RESOLUTION OF CONCUSSION SIGNS AND SYMPTOMS.

S 3055. INTERSCHOLASTIC SPORTS HEAD INJURY AWARENESS PROGRAM. 1. COACH TRAINING. REQUIRED CERTIFICATION FOR ALL COACHES MUST INCLUDE A FIRST AID TRAINING COURSE AND COMPLETION OF A QUALIFIED CONCUSSION MANAGEMENT TRAINING SECTION OR PROGRAM. ADDITIONAL ANNUAL CONCUSSION MANAGEMENT TRAINING REQUIREMENTS FOR COACHES OF SCHOOL SANCTIONED COMPETITIVE SPORTS SHALL BE DETERMINED BY THE DEPARTMENT UPON THE ADVICE AND COUNSEL OF THE ADVISORY BOARD.

2. PRIOR TO PARTICIPATION IN EACH SCHOOL SANCTIONED COMPETITIVE SPORT THE ATHLETE AND HIS OR HER PARENT OR GUARDIAN MUST SIGN AND RETURN TO THE SCHOOL DISTRICT AN ACKNOWLEDGEMENT AND A CONCUSSION AND HEAD INJURY FACT AND INFORMATION FORM.

3. A. ANY ATHLETE DETERMINED TO SHOW SIGNS, SYMPTOMS OR BEHAVIORS OF A CONCUSSION OR HEAD INJURY DURING PRACTICE OR PLAY SHALL IMMEDIATELY BE REMOVED FROM PARTICIPATION.

B. THE ACTION REMOVING THE ATHLETE FROM PLAY SHALL BE DOCUMENTED USING A CONCUSSION SIGNS AND SYMPTOMS CHECKLIST BY THE COACH, ATHLETIC TRAINER OR LICENSED HEALTH CARE PROVIDER.

C. THE ATHLETE SHALL NOT RETURN TO PLAY OR PRACTICE UNTIL HE OR SHE:

(I) HAS BEEN EVALUATED BY A LICENSED HEALTH CARE PROVIDER;

(II) HAS RECEIVED WRITTEN CLEARANCE TO RETURN TO PARTICIPATION FROM THAT LICENSED HEALTH CARE PROVIDER; AND

(III) HAS SUCCESSFULLY COMPLETED A RETURN TO ACTIVITY PROTOCOL.

S 3056. ALL ACTIVITY HEAD INJURY AWARENESS AND OUTREACH PROGRAM. 1. SCHOOL PERSONNEL TRAINING REQUIREMENTS SHALL BE DETERMINED BY THE BOARD.

2. AT THE BEGINNING OF EACH SCHOOL YEAR PARENTS AND/OR GUARDIANS OF A STUDENT IN GRADES KINDERGARTEN THROUGH SIX MUST SIGN AND RETURN TO THE SCHOOL DISTRICT A CONCUSSION AND HEAD INJURY FACT AND INFORMATION FORM. FOR GRADES SEVEN THROUGH TWELVE BOTH THE STUDENT AND HIS OR HER PARENT OR GUARDIAN MUST SIGN AND RETURN TO THE SCHOOL DISTRICT A CONCUSSION AND HEAD INJURY FACT AND INFORMATION FORM.

3. WHEN A HEAD INJURY IS SUSPECTED OR OBSERVED:

(A) ANY STUDENT DETERMINED TO SHOW SIGNS OR SYMPTOMS OR BEHAVIORS OF A CONCUSSION OR HEAD INJURY DURING AN ACTIVITY SHALL BE IMMEDIATELY REMOVED FROM PARTICIPATION.

(B) THE ACTION REMOVING THE STUDENT FROM AN ACTIVITY SHALL BE DOCUMENTED USING A CONCUSSION SIGNS AND SYMPTOMS CHECKLIST BY THE SCHOOL PERSONNEL OR LICENSED HEALTH CARE PROVIDER.

(C) THE STUDENT SHALL NOT RETURN TO SCHOOL OR ACTIVITIES UNTIL (I) THEY HAVE BEEN EVALUATED BY A LICENSED HEALTH CARE PROVIDER; (II) THEY HAVE RECEIVED WRITTEN CLEARANCE TO RETURN TO PARTICIPATION FROM THAT LICENSED HEALTH CARE PROVIDER; AND (III) THEY HAVE SUCCESSFULLY COMPLETED A RETURN TO ACTIVITY PROTOCOL AS DETERMINED BY A LICENSED HEALTH CARE PROVIDER.

S 3057. TRAINING COURSE DEVELOPMENT AND IMPLEMENTATION. 1. TRAINING MATERIALS SHALL BE MADE AVAILABLE TO SCHOOLS AND SCHOOL DISTRICTS FREE OF CHARGE ON THE CONCUSSION MANAGEMENT WEBSITE. WHERE POSSIBLE EXISTING TRAINING PROGRAM MATERIALS WILL BE EVALUATED AND INCORPORATED INTO THE APPROVED TRAINING PROGRAMS. TRAINING MATERIALS SHALL INCLUDE A POST-TEST AND CERTIFICATE TO VERIFY AN EDUCATION, UNDERSTAND, COMPLETION CYCLE.

2. FUNDING FOR DEVELOPMENT AND DELIVERY OF TRAINING PROGRAMS SHALL BE SOUGHT FROM FOUNDATIONS, PRIVATE DONORS AND DONATIONS AND IN-KIND CONTRIBUTIONS FROM COLLEGES AND UNIVERSITIES AND OTHER NOT-FOR-PROFIT ENTITIES IN THE STATE WITH RELEVANT SPECIALTIES.

3. THE STATE UNIVERSITY OF NEW YORK SHALL BE RESPONSIBLE FOR IMPLEMENTING RECOMMENDATIONS OF THE BOARD WITH RESPECT TO ADVANCED TRAINING PROGRAMS. COURSES FOR ADVANCED CERTIFICATION OF COACHES AND CERTIFICATION OF HEALTH CARE AND MEDICAL PROFESSIONALS SHALL BE MADE AVAILABLE TO STATE RESIDENTS THROUGH THE STATE UNIVERSITY OF NEW YORK LEARNING NETWORK FOR A NOMINAL CHARGE TO COVER COSTS OF PROGRAM DELIVERY AND SUPPORT.

S 2. This act shall take effect immediately.