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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2025

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A N A C T

RELATING TO EDUCATION -- SCHOOL AND YOUTH PROGRAMS CONCUSSION ACT

Introduced By: Representatives Baginski, and Fellela

Date Introduced: February 13, 2025

Referred To: House Education

It is enacted by the General Assembly as follows:

1 SECTION 1. Title 16 of the General Laws entitled "EDUCATION" is hereby amended by
2 adding thereto the following chapter:

3 CHAPTER 91.2

4 SCHOOL AND YOUTH PROGRAMS CONCUSSION ACT

5 **16-91.2-1. Definitions.**

6 For the purposes of this section, the following terms shall have the following meanings:

7 (1) "Athletic trainer" means an athletic trainer licensed under chapter 60 of title 5, who is
8 working under the supervision of a physician.

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

12 (3) "Concussion" means a complex pathophysiological process affecting the brain caused
13 by a traumatic physical force or impact to the head or body, which may include temporary or
14 prolonged altered brain function resulting in physical, cognitive, or emotional symptoms or altered
15 sleep patterns and which may or may not involve a loss of consciousness.

16 (4) "Interscholastic athletic activity" means any organized school-sponsored or school-
17 sanctioned activity for students, generally outside of school instructional hours, under the direction
18 of a coach, athletic director, or band leader, including, but not limited to, baseball, basketball,
19 cheerleading, cross country track, fencing, field hockey, football, golf, gymnastics, ice hockey,

1 lacrosse, marching band, rugby, soccer, skating, softball, swimming and diving, tennis, track
2 (indoor and outdoor), ultimate Frisbee, volleyball, water polo, and wrestling. All interscholastic
3 athletics are deemed to be interscholastic activities.

4 (5) "Nurse" means a person who is employed by or volunteers at a school and is licensed
5 under chapter 34 of title 5, as a registered nurse, practical nurse, or advanced practice registered
6 nurse.

7 (6) "Physician" means a physician licensed to practice medicine in all of its branches by
8 the board of medical licensure and discipline.

9 (7) "Physician assistant" means a physician assistant licensed under chapter 54 of title 5.

10 (8) "Student" means an adolescent or child enrolled in a school.

11 **16-91.2-2. School district guidelines to be developed and implemented.**

12 (a) The governing body of each public or charter school and the appropriate administrative
13 officer of a private school with students enrolled who participate in an interscholastic athletic
14 activity shall appoint or approve a concussion oversight team. Each concussion oversight team shall
15 establish a return-to-play protocol, based on peer-reviewed scientific evidence consistent with the
16 Centers for Disease Control and Prevention guidelines, for a student's return to interscholastic
17 athletics practice or competition following a force or impact believed to have caused a concussion.

18 (b) Each concussion oversight team shall also establish a return-to-learn protocol, based on
19 peer-reviewed scientific evidence consistent with the Centers for Disease Control and Prevention
20 guidelines, for a student's return to the classroom after that student is believed to have experienced
21 a concussion, whether or not the concussion took place while the student was participating in an
22 interscholastic athletic activity.

23 (c) Each concussion oversight team shall include, to the extent practicable, at least one
24 physician. If a school employs an athletic trainer, the athletic trainer shall be a member of the school
25 concussion oversight team to the extent practicable. If a school employs a nurse, the nurse shall be
26 a member of the school concussion oversight team to the extent practicable. At a minimum, a school
27 shall appoint a person who is responsible for implementing and complying with the return-to-play
28 and return-to-learn protocols adopted by the concussion oversight team. At a minimum, a
29 concussion oversight team may be composed of only one person and this person need not be a
30 licensed healthcare professional; provided, however, the person shall not be a coach. A school may
31 appoint other licensed healthcare professionals to serve on the concussion oversight team.

32 **16-91.2-3. Student participation in interscholastic activity -- Concussion brochure.**

33 A student shall not participate in an interscholastic athletic activity for a school year until
34 the student and the student's parent or guardian or another person with legal authority to make

1 medical decisions for the student have signed a form for that school year that acknowledges
2 receiving and reading written information that explains concussion prevention, symptoms,
3 treatment, and oversight and that includes guidelines for safely resuming participation in an athletic
4 activity following a concussion. The form shall be approved by the commissioner of elementary
5 and secondary education.

6 **16-91.2-4. Removal of student from practice or competition upon suspicion of**
7 **sustaining a concussion.**

8 (a) A student shall be removed from an interscholastic athletic practice or competition
9 immediately if one of the following persons believes the student might have sustained a concussion
10 during the practice or competition:

11 (1) A coach;

12 (2) A physician;

13 (3) A game official;

14 (4) An athletic trainer;

15 (5) The student's parent or guardian or another person with legal authority to make medical
16 decisions for the student;

17 (6) The student; or

18 (7) Any other person deemed appropriate under the school's return-to-play protocol.

19 (b) This section shall also apply to youth sports programs.

20 **16-91.2-5. Requirements for return to practice or competition.**

21 (a) A student removed from an interscholastic athletic practice or competition under § 16-
22 91.2-4 shall not be permitted to practice or compete again following the force or impact believed
23 to have caused the concussion until:

24 (1) The student has been evaluated, using established medical protocols based on peer-
25 reviewed scientific evidence consistent with Centers for Disease Control and Prevention guidelines,
26 by a treating physician chosen by the student or the student's parent or guardian or another person
27 with legal authority to make medical decisions for the student, an athletic trainer, an advanced
28 practice registered nurse, or a physician assistant;

29 (2) The student has successfully completed each requirement of the return-to-play protocol
30 established under this section necessary for the student to return to play or practice;

31 (3) The student has successfully completed each requirement of the return-to-learn protocol
32 established under this section necessary for the student to return to learn;

33 (4) The treating physician, the athletic trainer, or the physician assistant has provided a
34 written statement indicating that, in that person's professional judgment, it is safe for the student to

1 return to play or practice and return to learn; and

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

4 (i) Have acknowledged that the student has completed the requirements of the return-to
5 play and return-to-learn protocols necessary for the student to return to play or practice;

6 (ii) Have provided the treating physician's, athletic trainer's, advanced practice registered
7 nurse's, or physician assistant's written statement under subsection (a)(4) of this section to the
8 person responsible for compliance with the return-to-play and return-to-learn protocols under § 16-
9 91.2-2(c) and the person who has supervisory responsibilities under subsection (b) of this section;

10 and

11 (iii) Have signed a consent form indicating that the person signing:

12 (A) Has been informed concerning and consent to the student participating in returning to
13 play or practice in accordance with the return-to-play and return-to-learn protocols;

14 (B) Understands the risks associated with the student returning to play or practice and
15 returning to learn and will comply with any ongoing requirements in the return-to-play and return
16 to-learn protocols; and

17 (C) Consents to the disclosure to appropriate persons, consistent with the federal Health
18 Insurance Portability and Accountability Act of 1996 (Pub. L. 104-191), of the treating physician's,
19 athletic trainer's, physician assistant's, or advanced practice registered nurse's written statement
20 under subsection (a)(4) of this section and, if any, the return-to-play and return-to-learn
21 recommendations of the treating physician, the athletic trainer, the physician assistant, or the
22 advanced practice registered nurse, as the case may be.

23 (b) A coach of an interscholastic athletics team may not authorize a student's return to play
24 or practice or return to learn. The district superintendent, or designee, in the case of a public
25 elementary or secondary school, the chief school administrator, or designee, in the case of a charter
26 school, or the appropriate administrative officer, or designee, in the case of a private school shall
27 supervise an athletic trainer or other person responsible for compliance with the return-to-play
28 protocol and shall supervise the person responsible for compliance with the return-to-learn
29 protocol. The person who has supervisory responsibilities under this subsection may not be a coach
30 of an interscholastic athletics team.

31 SECTION 2. Chapter 16-91 of the General Laws entitled "School and Youth Programs
32 Concussion Act" is hereby repealed in its entirety.

33 ~~CHAPTER 16-91~~

34 ~~School and Youth Programs Concussion Act~~

1 **16-91-1. Findings of fact.**

2 ~~The general assembly hereby finds and declares: (1) Concussions are one of the most~~
3 ~~commonly reported injuries in children and adolescents who participate in sports and recreational~~
4 ~~activities. A concussion is caused by a blow or motion to the head or body that causes the brain to~~
5 ~~move rapidly inside the skull. The risk of catastrophic injuries or death is significant when a~~
6 ~~concussion or head injury is not properly evaluated and managed.~~

7 ~~(2) Concussions are a type of brain injury that can range from mild to severe and can disrupt~~
8 ~~the way the brain normally works. Concussions can occur in any organized or unorganized sport~~
9 ~~or recreational activity and can result from a fall or from players colliding with each other, the~~
10 ~~ground, or with obstacles. Concussions occur with or without loss of consciousness, but the vast~~
11 ~~majority occurs without loss of consciousness.~~

12 ~~(3) Continuing to play with a concussion or symptoms of a head injury leaves the young~~
13 ~~athlete especially vulnerable to greater injury and even death. The general assembly also recognizes~~
14 ~~that, despite having generally recognized return to play standards for concussion and head injury,~~
15 ~~some affected youth athletes are prematurely returned to play resulting in actual or potential~~
16 ~~physical injury or death to youth athletes in the state of Rhode Island.~~

17 ~~(4) Concussions can occur in any sport or recreational activity, furthermore, symptoms of~~
18 ~~concussions may manifest themselves after the injury during school hours and in the classroom~~
19 ~~setting. All school nurses, coaches, parents, and athletes shall be advised of the signs and symptoms~~
20 ~~of concussions as well as the protocol for treatment.~~

21 **16-91-2. Definitions.**

22 ~~For the purpose of this section, the term “youth sports programs” means any program~~
23 ~~organized for recreational and/or athletic competition purposes by any school district or by any~~
24 ~~school participating in Rhode Island Interscholastic League Competition, and whose participants~~
25 ~~are nineteen (19) years of age or younger.~~

26 **16-91-3. School district’s guidelines to be developed and implemented.**

27 ~~(a) The department of education and the department of health shall work in concert with~~
28 ~~the Rhode Island Interscholastic League to develop and promulgate guidelines to inform and~~
29 ~~educate coaches, teachers, school nurses, youth athletes, and their parents and/or guardians of the~~
30 ~~nature and risk of concussion and head injury, including continuing to play after concussion or head~~
31 ~~injury. A concussion and head injury information sheet shall be signed and returned by the youth~~
32 ~~athlete and the athlete’s parent and/or guardian prior to the youth athlete’s return to practice or~~
33 ~~competition.~~

34 ~~(b) School districts are required to use training materials made available by the United~~

1 ~~States Center for Disease Control and Prevention entitled “Heads Up: Concussion in the High~~
2 ~~School Sports/Concussion in Youth Sports” and any updates or amendments thereto, or training~~
3 ~~materials substantively and substantially similar thereto. The department of education shall post~~
4 ~~training materials made available by the Center for Disease Control and Prevention and the Rhode~~
5 ~~Island Interscholastic League on its website. All coaches and volunteers involved in a youth sport~~
6 ~~or activity covered by this chapter must complete a training course and a refresher course annually~~
7 ~~thereafter in concussions and traumatic brain injuries. All school nurses must complete a training~~
8 ~~course and an annual refresher course in concussions and traumatic brain injuries. Teachers and~~
9 ~~teachers’ aides are strongly encouraged to complete the training course in concussions and~~
10 ~~traumatic brain injuries. Training may consist of videos, classes, and any other generally accepted~~
11 ~~mode and medium of providing information.~~

12 ~~(c) School districts are encouraged to have all student athletes perform baseline~~
13 ~~neuropsychological testing, computerized or otherwise. Parents and/or guardians shall be provided~~
14 ~~with information as to the risk of concussion and/or traumatic brain injuries prior to the start of~~
15 ~~every sport season and they shall sign an acknowledgement as to their receipt of such information.~~

16 ~~(d) A youth athlete, who is suspected of sustaining a concussion or head injury in a practice~~
17 ~~or game, shall be removed from competition at that time.~~

18 ~~(e) A youth athlete, who has been removed from play, may not return to play until the~~
19 ~~athlete is evaluated by a licensed physician who may consult with an athletic trainer, all of whom~~
20 ~~shall be trained in the evaluation and management of concussions. The athlete must receive written~~
21 ~~clearance to return to play from that licensed physician.~~

22 ~~(f) All school districts are encouraged to have an athletic trainer, or similarly trained~~
23 ~~person, at all recreational and athletic events addressed by this statute.~~

24 **16-91-4. All other youth sports program.**

25 ~~All other youth sports programs not specifically addressed by this statute are encouraged~~
26 ~~to follow the guidance set forth in this statute for all program participants who are age nineteen~~
27 ~~(19) and younger.~~

28 SECTION 3. This act shall take effect on July 1, 2025.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO EDUCATION -- SCHOOL AND YOUTH PROGRAMS CONCUSSION ACT

1 This act would replace the existing chapter on this subject by requiring school districts to
2 organize concussion oversight teams, develop removal-from-play, return-to-play, and return-to-
3 learn protocols, and develop a concussion brochure. This act would repeal chapter 16-91, the
4 "school and youth programs concussion act."

5 This act would take effect on July 1, 2025.

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