

Students

Administrative Procedure - Program for Managing Student Athlete Concussions and Head Injuries

State Law

1. The Youth Sports Concussion Safety Act contains concussion safety directives for school Boards and certain identified staff members. 105 ILCS 5/22-80, added by P.A. 99-245, amended by P.A.s 99-486 and P.A. 100-309. 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. An *interscholastic athletic activity* “means 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. All interscholastic athletics are deemed to be interscholastic activities.” 105 ILCS 5/22-80(b).

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/concussions.cfm. Helpful guidance for implementing this law plus training modules are available from the Lurie Children’s Hospital’s *A Guide for Teachers and School Professionals*, also available using the above link.

2. 105 ILCS 25/1.15 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. **Concussion** - A complex pathophysiological process affecting the brain caused by a traumatic physical force or impact to the head or body, which may include temporary or prolonged altered brain function resulting in physical, cognitive, or emotional symptoms or altered sleep patterns and which may or may not involve a loss of consciousness. 105 ILCS 5/22-80. See also: *Returning to School After a Concussion: A Fact Sheet for School Professionals*, [www.cdc.gov/headsup/pdfs/schools/tbi_returning_to\)school-a.pdf](http://www.cdc.gov/headsup/pdfs/schools/tbi_returning_to)school-a.pdf)

Actor	Action
School Board	Adopt a Board policy on concussions. See policy 7:305, <i>Student Athlete Concussions and Head Injuries</i> . Approve members of the Concussion Oversight Team. 105 ILCS 5/22-80(d). Approve school-specific emergency action plan(s) for interscholastic athletic activities to address serious injuries and acute medical conditions that may cause a student’s condition to deteriorate rapidly. 105 ILCS 5/22-80(i).

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	<p>Monitor the effectiveness of Board policy 7:305, <i>Student Athlete Concussions and Head Injuries</i>, by discussing with the Superintendent or designee the type of data the Board needs to monitor the policy, establishing a monitoring calendar, and reviewing the data provided by the Superintendent or designee.</p>
<p>Superintendent or designee</p>	<p>Identify individuals to serve on the Concussion Oversight Team; request Board approval. 105 ILCS 5/22-80(d).</p> <p>A physician, to the extent possible, must be on the Team. If the school employs an athletic trainer and/or nurse, he or she 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 Team may be composed of only one person who need not be a licensed healthcare professional, but may not be a coach.</p> <p>Note: As this is administrative/staff work rather than governance work, the best practice is to have the Concussion Oversight Team be an <i>administrative</i> 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 Board policy 2:150, <i>Committees</i>.</p> <p>Require that all high school coaching personnel, including the head and assistant coaches, and athletic directors obtain an online concussion certification in accordance with 105 ILCS 25/1.15.</p> <p>Coaching personnel and athletic directors hired on or after 8-19-14 must be certified before their position’s starting date.</p> <p>Require that the following individuals complete concussion training as specified in the Youth Sports Concussion Safety Act: coaches or assistant coaches (whether volunteer or a District employee) of interscholastic athletic activities; nurses, physicians, other licensed health professionals and non-licensed health care professionals who serve on the Concussion Oversight Team; athletic trainers; and game officials of interscholastic athletic activities. 105 ILCS 5/22-80(h).</p> <p>Individuals covered by this training mandate must initially complete the training prior to serving on the Concussion Oversight Team and at least once every two years (or if not on the Team, at least once every two years). See the footnotes in policies 5:100, <i>Staff Development Program</i>, and 7:305, <i>Student Athlete Concussions and Head Injuries</i>.</p> <p>Identify the staff members who are responsible for student athletes, including Building Principals, and require that they comply with IHSA concussion protocols, policies, and by-laws, including its <i>Protocol for Implementation of NFHS Concussion Playing Rules</i> and its <i>Return to Play Policy</i>, at: www.ihsa.org/documents/sportsmedicine/ihsa_protocols_for_nfhs_concussion_playing_rule.pdf</p> <p>Along with the Building Principal(s), develop and maintain school-specific emergency action plan(s) for interscholastic athletic activities to address serious injuries and acute medical conditions that may</p>

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	<p>cause a student’s condition to deteriorate rapidly; present it/them to the Board for approval. 105 ILCS 22-80(i).</p> <p>Hold the staff members responsible for implementing this procedure.</p>
<p>Concussion Oversight Team</p>	<p>Establish each of the following based on peer-reviewed scientific evidence consistent with guidelines from the Centers for Disease Control and Prevention. 105 ILCS 5/22-80(d). See www.cdc.gov/headsup/index.html.</p> <ol style="list-style-type: none"> <li data-bbox="609 541 1437 982"> <p>1. A <i>return-to-play protocol</i> governing a student’s return to interscholastic athletic practice or competition following a force of impact believed to have caused a concussion. The Superintendent or designee (not a coach) must supervise an athletic trainer or other person responsible for compliance with the return-to-play protocol. 105 ILCS 5/22-80(g).</p> <p>The student’s treating physician 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. IHSA’s website contains a form for this, <i>Post-concussion Consent Form (RTP/RTL)</i>, at: ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx.</p> <p>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.</p> <li data-bbox="609 1241 1437 1864"> <p>2. A <i>return-to-learn protocol</i> governing a student’s return to the classroom following a force of impact believed to have caused a concussion. The Superintendent or designee (not a coach) must supervise the person responsible for compliance with the return-to-learn protocol. 105 ILCS 5/22-80(g).</p> <p>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 <i>Return to Learn after a Concussion: A Guide for Teachers and School Professionals</i>, Lurie Children’s Hospital. This Guide explains that a student’s full recovery depends on both cognitive 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, e.g., a school nurse, athletic trainer, or school counselor.</p>
<p>Building Principals or designees</p>	<p>Along with the Superintendent, develop and maintain school-specific <i>emergency action plan(s)</i> for interscholastic athletic activities to</p>

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	<p>address serious injuries and acute medical conditions that may cause a student’s condition to deteriorate rapidly; present the plan(s) to the Superintendent who will present it/them to the Board for approval. 105 ILCS 22-80(i).</p> <p>A template is available on the IHSA website under Emergency Action Plan (EAP) Resources, at: www.ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx.</p> <p>Require coaches and assistant coaches, trainers, and other staff members who are responsible for student athletes to:</p> <ol style="list-style-type: none"> 1. Review and abide by the IHSA protocols, polices, and by-laws regarding concussions and head injuries, at: www.ihsa.org/Resources/SportsMedicine/ConcussionManagement/StakeholderResponsibilities.aspx. 2. Provide information to student athletes and their parents/guardians each school year about concussions and otherwise perform all duties identified by law or described in this procedure. <p>School districts must include information about concussions in the student athlete agreement, contract, code, or written instrument that a student athlete and his or her parent/guardian are required to sign before participating in a practice or interscholastic competition. IHSA drafted a sample <i>Concussion Information Sheet</i>, which is included within the IHSA Sports Medicine Acknowledgement & Consent Form at: ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx. It has been incorporated into 7:300-E1, <i>Agreement to Participate</i>.</p> <p>Maintain appropriate school student records for student athletes.</p> <p>Although a <i>concussion policy acknowledgment</i> is no longer required, an ISBE rule defines <i>health-related information</i> to include a <i>concussion policy acknowledgment</i>. 23 Ill.Admin.Code §375.10. The acknowledgment must be kept with the student’s school student records as a temporary record. 23 Ill.Admin.Code §375.40.</p> <p>All written information concerning an injury to a student athlete, including without limitation, a return-to-play clearance, must be kept with the student’s school student records as a temporary record. 23 Ill.Admin.Code §§375.10 and 375.40. An ISBE rule defines <i>health-related information</i> to include “other health-related information that is relevant to school participation (e.g., nursing services plan, failed screenings, yearly sports physical exams, interim health histories for sports).” 23 Ill.Admin.Code §375.10.</p>
<p>Each student participant in an interscholastic athletic activity and his or her parent/guardian</p>	<p>Each school year, sign a concussion information receipt form before participating in an interscholastic athletic activity. 105 ILCS 5/22-80(e).</p> <p><i>Interscholastic athletic activity</i> is defined on the first page of this procedure. 105 ILCS 5/22-80(b).</p> <p>The form must be approved by IHSA. See ihsa.org/Resources/SportsMedicine/ConcussionManagement/ConcussionResources.aspx, for <i>IHSA Concussion Protocols</i> and</p>

Actor	Action
	<p>IHSA Sports Medicine Acknowledgement & Consent Form (Concussion, PES, Asthma Medication)</p> <p>Annually view IHSA's video about concussions (applicable to only high school student athletes). 105 ILCS 25/1.15(e).</p> <p>Become knowledgeable about the concussion symptoms and ask questions of any athletic staff member.</p> <p>Inform the coach or other supervisor about any trauma to the student's head and/or any symptoms of a concussion or confirmed concussion regardless of where and when it occurred.</p> <p>Follow the District's return-to-play and/or return-to-learn protocol(s), as applicable, whenever the student suffers a concussion.</p>
<p>Coaches or Assistant Coaches (whether volunteer or a District employee) of interscholastic athletic activities;</p> <p>Nurses and Physicians who serve on the Concussion Oversight Team;</p> <p>Athletic Trainers; and</p> <p>Game Officials of interscholastic athletic activities</p>	<p>Complete concussion training as specified in the Youth Sports Concussion Safety Act. 105 ILCS 5/22-80(h).</p> <p><i>Interscholastic athletic activity</i> is defined on the first page of this procedure. 105 ILCS 5/22-80(b).</p> <p>Individuals covered by this training mandate must initially have complete the training prior to serving on the Concussion Oversight Team and at least once every two years (or if not on the Team, at least once every two years). See the footnotes in policy 5:100, <i>Staff Development Program</i>.</p> <p>Complete IHSA's online concussion certification program (required only of high school coaching personnel including, without limitation, athletic directors). 105 ILCS 25/1.15.</p> <p>Learn concussion symptoms and danger signs. See www.ihsa.org/documents/sportsmedicine/ihsa_concussion_information_sheet.pdf.</p>
<p>Coaches and Assistant Coaches of interscholastic athletic activities</p> <p>Athletic Trainers</p> <p>Other staff members who are responsible for student athletes</p>	<p>Each school year, have student athletes and their parents/guardians, or another person with legal authority to make medical decisions for the student, sign a form "that acknowledges receiving and reading written information that explains concussion prevention, symptoms, treatment, and oversight and that includes guidelines for safely resuming participation in an athletic activity following a concussion." The form must be approved by IHSA. 105 ILCS 5/22-80(e).</p> <p>Each school year, inform student athletes and their parents/guardians about concussions and head injuries by:</p> <ol style="list-style-type: none"> 1. Giving them a copy of the IHSA's <i>Concussion Information Sheet</i> at the time they sign exhibit 7:300-E1, <i>Agreement to Participate</i>, or other agreement, contract, code, or written instrument that a student athlete and his or her parent/guardian are required to sign before the student is allowed to participate in a practice or interscholastic competition. The <i>Concussion Information Sheet</i>, is included within the <i>IHSA Sports Medicine Acknowledgement & Consent Form</i> at: www.ihsa.org/Resources/DownloadCenter.aspx. 2. Using educational material provided by IHSA to educate student athletes and parents/guardians about the nature and risk of concussions and head injuries, including the risks inherent in continuing to play after a concussion or head injury. See www.ihsa.org/Resources/SportsMedicine/ConcussionManagement

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	<p>.aspx. The Center for Disease Control and Prevention offers free printed educational materials on concussions that can be ordered or downloaded and distributed to parents, students, and coaches. See www.cdc.gov/headsup/index.html.</p> <p>Remove a student 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, an athletic trainer, the student's parent/guardian, the student, or any other person deemed appropriate under the return-to-play protocol. 105 ILCS 5/22-80(f).</p> <p>Comply with the IHSA concussion management guidelines, including its <i>Protocol for Implementation of NFHS Sports Playing Rules for Concussion</i>, which includes its <i>Return to Play (RTP) Policy</i>, at: www.ihsa.org/documents/sportsmedicine/ihsa_protocols_for_nfhs_concussion_playing_rule.pdf. These guidelines, in summary, require that:</p> <ol style="list-style-type: none"> 1. A student athlete who exhibits signs, symptoms, or behaviors consistent with a concussion (e.g., loss of consciousness, headache, dizziness, confusion, or balance problems) in a practice or game shall be removed from participation or competition at that time. 2. 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. 3. 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, and has completed the return-to-play protocol in compliance with the Youth Sports Concussion Safety Act, 105 ILCS 5/22-80(g). <p>Inform the student athlete's parent/guardian about a possible concussion and give the parent/guardian a fact sheet on concussion, at: www.ihsa.org/Resources/SportsMedicine/ConcussionManagement.aspx.</p> <p>Allow a student who was removed from interscholastic athletic practice or competition to return only after all statutory prerequisites are completed, including without limitation, completing 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. 105 ILCS 5/22-80(g).</p> <p>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</p>

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	prolonged.
Athletic trainers	Complete 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. Do not identify student names in the monthly report. 105 ILCS 25/1.20. Submit this monthly report to the interscholastic athletic organization to which the school belongs.

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