

SB2557

Measure Title: RELATING TO CONCUSSIONS.

Report Title: Concussions; Youth; Athletics; Appropriation (\$)

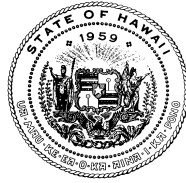
Description: Expands the concussion educational program established under Act 197, SLH 2012, to include youth athletic activities for participants aged 4 to 18 and incorporate additional program requirements. Appropriates funds to develop and implement the educational program and to administer concussion testing to high school student athletes.

Companion:

Package: None

Current Referral: EDU/CPH, WAM

Introducer(s): TOKUDA, BAKER, DELA CRUZ, INOUE, SHIMABUKURO, Gabbard



STATE OF HAWAII
DEPARTMENT OF HEALTH
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Honolulu, HI 96801-3378
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**Testimony in OPPOSITION to SB2557
Relating to CONCUSSIONS**

SENATOR MICHELLE N. KIDANI, CHAIR
SENATE COMMITTEE ON EDUCATION
SENATOR ROSALYN H. BAKER, CHAIR
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Hearing Date: FEBRUARY 12, 2016 Room Number: 229

1 **Fiscal Implications:** Appropriating \$450,000 of the Neurotrauma Special Fund to support
2 SB2557 would severely affect the Department's ability to carry out its responsibilities under
3 Chapter 321H, HRS. The proposed appropriation would deplete the fund to the detriment of
4 others who may be served, such as adults with traumatic brain injury, stroke victims (youth and
5 adult), and those who have sustained a spinal cord injury (youth and adult).

6 **Department Testimony:** The Hawaii State Department of Health opposes SB2557.

7 The purpose of this bill is to expand the scope of the concussion education program established
8 under Act 197, Session Laws of Hawaii 2012 ("Act 197"), by: including youth athletic activities
9 for ages 4 to 18; incorporating additional program requirements; and appropriating \$450,000
10 from the Neurotrauma Special Fund to develop and implement the concussion educational
11 program for school athletics and youth athletic activities and to administer concussion testing to
12 high school student athletes. The Department opposes this measure for four reasons. First,
13 section 321H-4(b), HRS, expressly limits the use of the Neurotrauma Special Fund to the
14 following purposes: education on neurotrauma; assistance to individuals and families to identify
15 and obtain access to services; creation of a registry of neurotrauma injuries; and necessary
16 administrative expenses. The proposed funding of ongoing concussion testing contravenes the
17 purpose of the Neurotrauma Special Fund, because section 321H-4, HRS, does not allow the
18 Neurotrauma Special Fund to pay for direct services. Second, the bill on page 7, lines 7-9,
19 proposes "cognitive testing of participants prior to the start of each season of school athletics or

1 youth athletic activity.” The term “youth athletic activity” is broadly defined to include
2 organized athletic activity in team, club, or other entities involving participants from age 4 to 19.
3 The Department believes that it may not be feasible to conduct cognitive testing for this
4 extremely broad range of participants in youth athletic activity. Third, the Department has a
5 current contract funded by the Neurotrauma Special Fund for the University of Hawaii,
6 Kinesiology and Rehabilitation Science Department, Hawaii Concussion Management Program
7 (HCAMP) to implement baseline and post-concussion testing for high school athletes as research
8 to develop best practices in concussion management protocol. The HCAMP research has
9 highlighted the importance of implementing a concussion management protocol in public and
10 private high school athletics. While the Department understands the importance in implementing
11 a concussion management protocol for children and youth involved across the range of
12 community sports, the Department cannot support an appropriation for implementing an on-
13 going program to pay for direct services where the extent of population to be tested has not been
14 quantified and feasibility has not been assessed.

15 Fourth, the Department is charged with setting direction for the development of a
16 comprehensive system to support survivors of neurotrauma injuries. The appropriation would
17 deplete the Neurotrauma Special Fund and the Department would not be able to continue
18 implementing or funding any of its ongoing neurotrauma and stroke-related activities nor allow
19 the Department to meet its statutory duty. Due to the aforementioned reasons, the department
20 opposes SB2557. Thank you for the opportunity to testify.

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UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Written Testimony Presented Before the
Senate Committee on Education
Senate Committee on Commerce, Consumer Protection and Health
Friday, February 12, 2016 at 12:30 p.m.
by
Robert Bley-Vroman, Chancellor
and
Donald B. Young
Dean and Professor
College of Education
University of Hawai'i at Mānoa

SB 2557 – RELATING TO CONCUSSIONS

Chairs Kidani and Baker, Vice Chair Harimoto, and members of the committees, thank you for this opportunity to provide testimony in support of SB 2557.

The College of Education at the University of Hawaii supports of the intent of SB 2557, however we are unable to support two main inclusions in the bill: Cognitive testing (page 7, #5) and that the funds would be appropriated from the Department of Health Neurotrauma Special Fund (page 8, section 3).

Cognitive testing. Since 2010, Hawai'i high school student athletes at 9th and 11th grades have been provided with cognitive baseline concussion testing prior to their sport. The system employed to implement cognitive baseline testing is the Immediate Post-Concussion Assessment and Cognitive Testing (ImpACT), which is a computerized neurocognitive assessment tool. Over the years, the Hawai'i Concussion Awareness and Management Program (HCAMP) has been supporting all Hawai'i high schools by paying for ImpACT annual license fee along with contracting a neuropsychologist to assist with reading and interpreting post-concussion cognitive test results. Once concussed, all student athletes in Hawai'i go through a concussion protocol established in part with HCAMP assistance. While neurocognitive baseline testing continues to be a critical piece to the continued health and safety of Hawai'i high school student athletes, HCAMP fully supports the continued implementation of cognitive baseline and post testing at all Hawai'i high schools.

SB 2557 calls for “*cognitive testing of participants prior to the start of each season of school athletics or a youth athletic activity*” (p. 7). The specific issue here is extending testing to youth athletic activities. Cognitive testing, while important for high school student athletes, is not necessarily feasible to provide to youth athletic activity groups. First is the fact, that there are no athletic trainers at this level to assist with baseline implementation and monitoring; second the cost associated with providing cognitive testing to youth activity groups is not feasible or realistic; and third, most cognitive

baseline tests do not reach an age lower than 12. Given these reasons, HCAMP cannot support this part of the bill.

Neurotrauma Special Fund. The Department of Health (DOH) Neurotrauma Special Fund has supported HCAMP since 2010. The Neurotrauma Special Fund is overseen by a board that advises the DOH in providing “start-up funds” to programs and agencies in order to fulfill the Neurotrauma Special Fund statute and requirements. HCAMP has been a beneficiary of this funding and was able to work directly with both private and public schools to address concussion safety in schools that included baseline testing mentioned above. This special fund was never intended to provide continued support and funding in perpetuity for HCAMP.

Specific to SB 2557, Section 3 (page 8) states “there is appropriated out of the neurotrauma special fund the sum of \$450,000 or so much thereafter as may be necessary for fiscal year 2016-2017.” This fund was specifically designed to assist with various Neurotrauma challenges faced statewide, and has other areas that also are priorities. The appropriation of this fund for the specific purpose of continuing HCAMP will essentially “wipe out” this special fund and no other program can be supported. To this end, HCAMP has been working on a sustainability plan for two years with one option to seek funds from the legislature (as we are doing). Having Neurotrauma Special Funds specifically earmarked for HCAMP via the Kinesiology and Rehabilitation Science department should not be supported.

Thank you for this opportunity to provide testimony on SB 2257.



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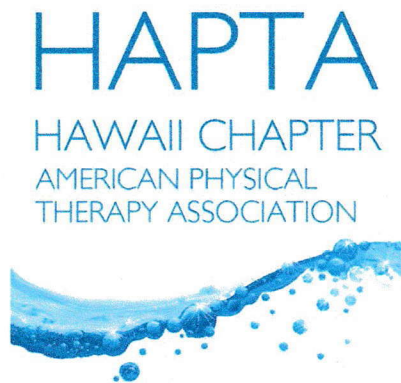
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Thank you for this opportunity to provide testimony on SB 2257.



Chair Kidani

Education Committee

Chair Baker

Commerce, Consumer Protection, and Health Committee

SB2557 Relating to Concussions

Friday, 2/12/2016

12:30pm, Room 229

Position: SUPPORT WITH AMENDMENTS

Chair Kidani and members of the Education Committee,
Chair Baker and members of the Commerce, Consumer Protection, and Health Committee

The Hawaii Chapter of the American Physical Therapy Association (HAPTA) is a non-profit professional organization serving more than 300 Physical Therapists and Physical Therapist Assistants. Concussions have a significant impact on the health of individuals and society. The American Physical Therapy Association recognizes that physical therapists are part of the multidisciplinary team of licensed health care providers that perform concussion management. The chapter **supports** SB 2557 which would expand the concussion educational program and strongly recommend **amendment** to Section 2, page 2, line 18-20 to include “physical therapist” under the definition of “Licensed health care provider”.

In the United States, the emergency department (ED) treats approximately 248,418 student athletes annually for traumatic brain injuries, including concussion as reported by the Centers for Disease Control and Prevention (CDC). The number of individuals who sustain concussions is larger than this, as some individuals do not receive treatment or are not assessed at the ED. It is very important to raise awareness of signs and symptoms as well as risk factors of concussions. It is also important to monitor those involved in school athletics and youth athletics consistently. HAPTA supports SB 2557.

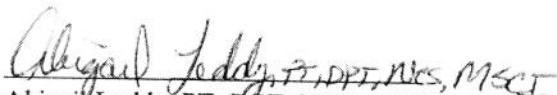
Physical therapists are licensed health care professionals who are trained in diagnosis and management of traumatic brain injury. Physical therapists provide a unique contribution to the multidisciplinary team due to training in balance and vestibular evaluation and rehabilitation.

- Physical Therapists perform comprehensive examination of the whole body and balance systems to determine impairments and/or symptoms from concussion.
- Physical therapists:
 - Determine impairments and system abnormalities based on sensory, vestibular, or visual system examination
 - Implement and prescribe patient specific exercises to improve postural stability and dynamic balance reactions, as well as educate to reduce risk of falling
 - Implement and prescribes specific exercises to assist in diminishing symptoms of dizziness associated with concussion due to vestibular and visual deficits

- Treat the following causes of post-concussive dizziness which include but are not limited to: Benign paroxysmal positional vertigo (BPPV), Post-traumatic migraines, Labyrinthine Concussion, Perilymphatic Fistula, Brainstem Concussion
- Perform detailed screenings and interpretation of information to identify presence of concussion, reintroduce physical activity, and return to play as indicated while working with multidisciplinary team involved with the person's care (Physician, Neurologist, Neuropsychologist, ATC).
- Assess for differential diagnoses for more emergent conditions such as subdural hematoma, intracerebral hemorrhage, or vertebral artery dissection/cervical spine trauma
- At the federal level, it is a strong position of the American Physical Therapy Association (APTA) that physical therapists have an active role in concussion management, education, prevention, examination, evaluation, treatment, and making return to participation decisions. The current Safe Play Act (HR 829/S 436) for concussion management includes physical therapists as integral part of the multidisciplinary team with firm support of the larger American Physical Therapy Association.

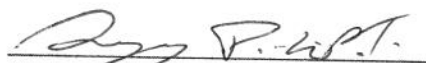
In closing,

- 1) Physical therapists are an integral part of the multidisciplinary team to address concussion awareness and administer concussion evaluation and treatment in individuals 4-18 years old.
- 2) It is the position of HAPTA that this bill should be strongly supported with the amendment to include physical therapists under the definition of "Licensed health care provider".


 Abigail Leddy, PT, DPT, NCS, MSCI

Legislative Committee

Hawaii Chapter of the American Physical Therapy Association


 Gregg Pacillio, PT

President

Hawaii Chapter of the American Physical Therapy Association



Hawaii High School Athletic Association

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February 10, 2016

S.B. No. 2557, Relating to Concussions

I, Christopher Chun, Executive Director of the Hawaii High School Athletic Association (“HHSAA”), on behalf of HHSAA support S.B. No. 2557 relating to concussions. The HHSAA governs high school varsity coaches and student-athletes. This Bill provides needed expansion and continued funding of its predecessor, Act 197, Session Laws of Hawaii 2012. Act 197 has successfully impacted the lives of over one hundred thousand student-athletes in Hawaii by ensuring all high school coaches are concussion certified, and our student-athletes are protected by baseline testing.

S.B. No. 2557 will ensure that Hawaii student-athletes are continually protected and monitored by one of the most far reaching concussion programs in the country. Without it, several state agencies would likely have been exposed to potential liability and lawsuits that have arisen in other states across the country such as those in Illinois, California, and Pennsylvania to name a few. Lawsuits have claimed that concussion baseline testing should be mandatory and a precursor to high school athletic activities. Finally, S.B. No. 2557 is important because it extends Act 197 to youth sport organizations. It is extremely important that youth activities are included since many of them do not have access to athletic trainers and physicians as they do once they reach high school. Coaches education plays a key role in protecting against concussions until an athlete reaches the proper age to begin baseline testing.

About the HHSAA

Founded in 1956, the Hawaii High School Athletic Association is a non-profit, 501(c)(3) educational athletic organization exclusively dedicated to serving 96 public and independent member high schools statewide, as they work cooperatively to support and promote athletics as part of the high school education program. As the umbrella organization of high school athletics, the HHSAA operates 44 state championships in 18 different sports, establishing consistent standards and rules for competition, in addition to providing professional development opportunities for coaches and athletic administrators.

For more information on the Hawaii High School Athletic Association, go to www.sportshigh.com.

Testimony for SB 2557 the Committees on Education and Consumer Commerce Protection

February 12, 2016 Conference Room 229

The Hawaii Athletic Trainers' Association (HATA) supports SB 2557, Relating to Concussions, with amendments. This bill expands concussion education and awareness to the youth sports level and creates a funding mechanism to sustain the program that was implemented with ACT 197. The University of Hawaii-Manoa Kinesiology and Rehabilitation Sciences Department (KRS) and the Hawaii Concussion Awareness and Management Program (HCAMP) partnered with the State Department of Health through a grant to create a program that exceeded all the requirements of ACT 197 for both public and private high schools. This program has become the standard for concussion management in our state and is now well understood and accepted by coaches, parents, and student athletes. There has been an increase in the reporting of concussions as a result of the increased awareness. An important component of the program is the utilization of a baseline and neurocognitive testing program which assists with determining when it is safe for students to return to play. These tests are reviewed by a Neuropsychologist who consults with the schools as a part of HCAMP. The funding requested in this bill would be primarily to sustain the neurocognitive testing at the secondary school and to expand educational efforts at the youth level.

HATA suggests three amendments to the bill. The first in Section 4. (5) to change the word "cognitive" and replace with "baseline" testing. Baseline testing currently also includes vestibular or balance testing in addition to cognitive testing. Research is rapidly and constantly evolving and in the near future there may be other types of testing created for this same purpose. The word "baseline" would allow a more broad requirement. We would also suggest eliminating the "cognitive" testing requirements for youth activities. While tests are being developed for younger participants there currently is not a statistically reliable version for youth participants in the primary grades. The third amendment would be to eliminate in Section 4 (8) the clause that states that these requirements would not apply to "out of state Athletic Trainers who have served their respective teams for less than one month". We don't know what the rationale for this is and why the length of a time an athletic trainer has worked with an out of state team is relevant.

Thank you for the opportunity to testify on this measure.

Cindy Clivio

On Behalf of the Hawaii Athletic Trainers' Association



Positive Coaching Alliance-Hawaii

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Email: jeaney@positivecoach.org

February 10, 2016

S.B. No. 2557, Relating to Concussions

I, Jeaney Garcia, Executive Director of Positive Coaching Alliance-Hawaii, on behalf of HHSAA strongly support S.B. No. 2557 relating to concussions. The HHSAA governs high school varsity coaches and student-athletes. This Bill provides needed expansion and continued funding of its predecessor, Act 197, Session Laws of Hawaii 2012. Act 197 has successfully impacted the lives of over one hundred thousand student-athletes in Hawaii by ensuring all high school coaches are concussion certified, and our student-athletes are protected by baseline testing.

S.B. No. 2557 will ensure that Hawaii student-athletes are continually protected and monitored by one of the most far reaching concussion programs in the country. Without it, several state agencies would likely have been exposed to potential liability and lawsuits that have arisen in other states across the country such as those in Illinois, California, and Pennsylvania to name a few. Lawsuits have claimed that concussion baseline testing should be mandatory and a precursor to high school athletic activities.

Finally, S.B. No. 2557 is important because it extends Act 197 to youth sport organizations. It is extremely important that youth activities are included since many of them do not have access to athletic trainers and physicians as they do once they reach high school. Coach education plays a key role in protecting against concussions until an athlete reaches the proper age to begin baseline testing.

Regarding general safety, the Youth Sports Safety Alliance cites:

- Approximately 8,000 children are treated in emergency rooms each day for sports-related injuries, and sports injury visits to ERs were highest in remote rural settings.
- High school athletes suffer 2 million injuries, 500,000 doctor visits and 30,000 hospitalizations each year.
- There are three times as many catastrophic football injuries among high school athletes as college athletes.
- History of injury is often a risk factor for future injury, making prevention critical.
- 62% of organized sports-related injuries occur during practices.
- Only 42% of high schools have access to athletic training services.

On concussions, the Youth Sports Safety Alliance says:

- **50%** of "second impact syndrome" incidents - brain injury caused from a premature return to activity after suffering initial injury (concussion) - result in death.
- 400,000 brain injuries (concussions) occurred in high school athletics during the 2008-09 school year.
- 15.8% of football players who sustain a concussion severe enough to cause loss of consciousness return to play the same day.
- Emergency department visits for concussions sustained during organized team sports doubled among 8-13 year olds between 1997 and 2007 and nearly tripled among older youth.