

Date of Hearing: May 14, 2020

ASSEMBLY COMMITTEE ON ARTS, ENTERTAINMENT, SPORTS, TOURISM, AND
INTERNET MEDIA

Kansen Chu, Chair

AB 2300 (Cooper) – As Introduced February 14, 2020

THIS BILL IS BEING ANALYZED AS PROPOSED TO BE AMENDED

SUBJECT: California Youth Football Act.

SUMMARY: Clarifies that under the California Youth Football Act, specified medical personnel have the authority to provide emergency and rescue care as defined, and remove any youth tackle football participant from the game, as provided. Specifically, **this bill:**

- 1) Provides that a certified emergency medical technician, state licensed paramedic, or higher-level licensed medical professional (medical professional) shall have the authority to provide prehospital emergency medical care or rescue services consistent with their certification or license.
- 2) Further provides the medical professional shall have the authority to remove any youth tackle football participant from the game who exhibits an injury, including, but not necessarily limited to, symptoms of a concussion or other head injury.
- 3) Makes technical clarifying changes to professional titles used in the Section.

EXISTING LAW:

- 1) Contains the California Youth Football Act, which establishes a comprehensive safety scheme for youth tackle football and provides, among other requirements, that a youth sports organization that conducts a tackle football program shall comply with all of the following requirements:
 - a) A minimum of one state-licensed emergency medical technician, paramedic, or higher-level licensed medical professional shall be present during all preseason, regular season, and postseason games.
 - b) The emergency medical technician, paramedic, or higher-level licensed medical professional shall have the authority to evaluate and remove any youth tackle football participant from the game who exhibits an injury, including, but not necessarily limited to, symptoms of a concussion or other head injury.

FISCAL EFFECT: This measure has been keyed as nonfiscal by the Legislative Counsel.

COMMENTS:

- 1) *Author and supporters statement of need.* According to the author, “Late last year as AB 1 was making its way through the Legislative process, the author was approached by the California Professional Firefighters about language in the bill which appeared to require Emergency Medical Technicians (EMT) and Paramedics to perform medical evaluations of

football players when assessing a player for potential concussion symptoms. As medical diagnosis is beyond the scope of EMT and Paramedic training, this requirement created a potential liability issue for EMTs and paramedics working sideline at football games. The author agreed to address CPF's concerns the following legislative year. AB 2300 seeks to resolve that issue of EMTs practicing outside the scope of their profession by clarifying their authority to provide prehospital emergency medical care or rescue services consistent with their certification or license, and authorizing them, along with higher-level licensed medical professionals, to remove any player who exhibits injury, including symptoms of concussion or other head injury.”

The bill is supported by the California Professional Firefighters, who write in support to say, “Football is one of the nation's and California's most popular sports, and the health and safety of the players is and should continue to be youth football's top priority. AB 2300 provides an important clarification that protects both the athletes and the professionals treating them, and for these reasons, we urge your support for AB 2300.”

- 2) *Return to play protocol.* While the existing law allows a broad number of individuals to remove a player from competition when a concussion, heat illness or cardiac emergency is suspected, including coaches, non-rostered health oversight personnel and medical professionals, it is much stricter on who can authorize a player to return to play.

The Health and Safety Code provides that a youth sports organization that elects to offer an athletic program shall comply with all of the following:

An athlete who is suspected of sustaining a concussion or other head injury, or who has passed out or fainted, in an athletic activity shall be immediately removed from the athletic activity for the remainder of the day, and shall not be permitted to return to any athletic activity until the athlete is evaluated by a licensed healthcare provider. If the licensed healthcare provider determines that the athlete sustained a concussion or other head injury, the athlete shall also complete a graduated return-to-play protocol of no less than seven days in duration under the supervision of a licensed healthcare provider.

If the licensed healthcare provider suspects the athlete has a cardiac condition that puts the athlete at risk for sudden cardiac arrest or other heart-related issues, the athlete shall remain under the care of the licensed healthcare provider to pursue follow-up testing until the athlete is cleared to play.

If an athlete who is 17 years of age or younger has been removed from athletic activity due to a suspected concussion or due to fainting or another suspected cardiac condition, the youth sports organization shall notify a parent or guardian of that athlete of the time and date of the injury, the symptoms observed, and any treatment provided to that athlete for the injury.

The athlete shall not be permitted to return to athletic activity until the athlete receives written clearance to return to athletic activity from a licensed healthcare provider.

- 3) *Author's amendments to be taken in committee.* The author will be amending this bill to clarify that EMTs and paramedics may offer sideline care as consistent with the scope of their professions, and may also make decisions relating to removal of injured players from competition. Specifically, the changes are:

”A minimum of one ~~state-licensed~~ *certified* emergency medical technician, *state-licensed* paramedic, or higher-level licensed medical professional shall be present during all preseason, regular season, and postseason games. The emergency medical technician, paramedic, or higher-level licensed medical professional shall have the authority to *provide prehospital emergency medical care or rescue services consistent with their certification or license*, ~~evaluate~~ and remove any youth tackle football participant from the game who exhibits an injury, including, but not necessarily limited to, symptoms of a concussion or other head injury.”

4) *Prior related legislation.*

- a) AB 1 (Cooper), Chapter 158, Statutes of 2019, established a comprehensive safety scheme for youth tackle football, including the provision requiring a youth tackle football program to have a minimum of one state-licensed emergency medical technician, paramedic, or higher-level licensed medical professional present during all preseason, regular season, and postseason games, with the authority to evaluate and remove any youth tackle football participant from the game who exhibits an injury, including, but not necessarily limited to, symptoms of a concussion or other head injury.
- b) AB 379 (Mainschein), Chapter 174, Statutes of 2019, added similar protocols relating to sudden cardiac arrest prevention to the concussion protocols imposed on youth sports organizations under existing law, and deleted specific designation of 27 covered sports from the definition of youth sports organization for purposes of this provision, thus expanding the scope of covered youth sports organizations.
- c) AB 2007 (McCarty), Chapter 516, Statutes of 2016, requires amateur youth sports organizations to adopt concussion treatment and recognition protocols similar to those in existing law for student athletes in 27 designated sports, as specified. Would also require youth sports organizations to develop return-to-play protocols, and provide yearly concussion and head injury information sheets and education, as provided.
- d) AB 1639 (Mainschein), Chapter 792, Statutes of 2016, established the Eric Paredes Sudden Cardiac Arrest Prevention Act that requires the California Department of Education (CDE) to make available specified guidelines and materials on sudden cardiac arrest (SCA): pupils and parents to sign informational materials before athletic participation; training of coaches; and set requirements for action in the event a pupil experiences specified symptoms.
- e) AB 2127 (Cooley), Chapter 165, Statutes of 2014, among other things, limits full-contact practices for high school and middle school football teams for concussion and head injury prevention, and requires that a return-to-play protocol after concussion or head injury be no less than seven days in duration.

REGISTERED SUPPORT / OPPOSITION:

Support

California Professional Firefighters

Opposition

There is no opposition on file.

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