

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: PCS for CS/HB 831 High School Athletic Trainers

SPONSOR(S): Education Committee

TIED BILLS: **IDEN./SIM. BILLS:**

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
Orig. Comm.: Education Committee		Valenstein	Klebacha

SUMMARY ANALYSIS

The bill requires the Florida High School Athletic Association (FHSAA) to conduct a study to evaluate the need for athletic trainers in each high school in the state that participates in athletics. The FHSAA must consult with school districts, medical professionals, and the Department of Health to consider the need, the cost, and the availability of hiring an athletic trainer for each high school that participates in athletics. The study must include, at a minimum, data related to the number of schools that currently employ an athletic trainer, the sports supervised by an athletic trainer, and the injury rates for those sports supervised by an athletic trainer compared to the injury rates for the same sports not supervised by an athletic trainer. For purposes of the study, "high school" includes grades 6 through 12. The FHSAA shall submit its findings to the Legislature and the Governor, by December 1, 2011.

The Florida High School Athletic Association (FHSAA) is designated as the governing nonprofit organization of athletics in Florida public schools. The FHSAA is required to adopt bylaws to establish eligibility requirements for all students, prohibit recruiting students for athletic purposes, and require students participating in athletics to satisfactorily pass an annual medical evaluation. The bylaws established by the FHSAA are the rules that govern the high school athletic programs in the FHSAA member schools, and the students who participate in them. For the purposes of athletics in public schools, high school is defined to include grades 6 through 12.

School districts are authorized to establish and implement an athletic injuries prevention and treatment program. If established, the program should focus on the employment and availability of persons trained in the prevention and treatment of physical injuries that may occur during athletic activities. The program should reflect minimum standards and opportunities for progressive advancement and compensation in employment as a licensed athletic trainer. Individuals considered for progressive advancement and compensation may also hold a certificate as a substitute teacher, certified educator, or adjunct teacher.

Athletic trainers are licensed by the Department of Health to recognize, prevent, and treat an injury sustained during an athletic activity which affects the athlete's ability to participate or perform. An athletic activity includes the participation in an event that is conducted by an educational institution, a professional athletic organization, or an amateur athletic organization, involving exercises, sports, games, or recreation requiring any of the physical attributes of strength, agility, flexibility, range of motion, speed, and stamina. As of June 30, 2010, there were 1,347 active in-state licensed athletic trainers.

The bill does not appear to have a fiscal impact on the state or local governments.

The bill takes effect July 1, 2011.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

Florida High School Athletic Association

The Florida High School Athletic Association (FHSAA) is designated as the governing nonprofit organization of athletics in Florida public schools. The FHSAA is required to adopt bylaws to establish eligibility requirements for all students, prohibit recruiting students for athletic purposes, and require students participating in athletics to satisfactorily pass an annual medical evaluation.¹ The bylaws established by the FHSAA are the rules that govern the high school athletic programs in the FHSAA member schools, and the students who participate in them. For the purposes of athletics in public schools, high school is defined to include grades 6 through 12.²

School Districts and Athletic Trainers

School districts are authorized to establish and implement an athletic injuries prevention and treatment program. If established, the program should focus on the employment and availability of persons trained in the prevention and treatment of physical injuries that may occur during athletic activities. The program should reflect minimum standards and opportunities for progressive advancement and compensation in employment as a licensed athletic trainer. Individuals considered for progressive advancement and compensation may also hold a certificate as a substitute teacher, certified educator, or adjunct teacher. Additionally, it is the goal of the Legislature to have school districts employ and have available a full-time athletic trainer in each high school in the state.

Athletic Trainers

Athletic Trainers are regulated by the Florida Department of Health, Division of Medical Quality Assurance, and the Board of Athletic Training.³ Athletic training is the recognition, prevention, and treatment of an injury sustained during an athletic activity which affects the athlete's ability to participate or perform.⁴ An athletic activity includes the participation in an event that is conducted by an educational institution, a professional athletic organization, or an amateur athletic organization, involving exercises, sports, games, or recreation requiring any of the physical attributes of strength, agility, flexibility, range of motion, speed, and stamina.⁵

In 1994, the Legislature began fully regulating and licensing the practice of athletic training to protect the public and ensure that athletes are assisted by individuals adequately trained to recognize, prevent, and treat physical injuries sustained during athletic activities.⁶

As of June 30, 2010, there were 1,347 active in-state licensed athletic trainers.⁷ Between July 1, 2009, and June 30, 2010, the department received 185 applications from individuals seeking initial licensure as an athletic trainer.⁸

¹ Section 1006.20(1) and (2), F.S.

² Section 1006.20(1), F.S.

³ The Board of Athletic Training is composed of nine members who are Governor appointed and confirmed by the Senate. Five of the members must be licensed athletic trainers, one must be a physician, and two are consumer-residents who are not affiliated with the industry or licensed health-care practice. Section 468.703, F.S.; Part XIII, ch. 468, F.S.

⁴ Section 468.701(3) and (5), F.S.

⁵ Section 468.701(2), F.S.

⁶ Ch. 94-119, L.O.F. and s. 468.70, F.S.

⁷ Florida Department of Health, Division of Medical Quality Assurance: *Annual Report July 1, 2009 to June 30, 2010*, 19, available at: <http://www.doh.state.fl.us/mqa/Publications/08-09mqa-ar.pdf> (last visited April 18, 2011).

⁸ *Id.* at 24.

Applicants seeking licensure as an athletic trainer must: complete the application form and remit the required fees;⁹ be at least 21 years of age; possess a baccalaureate degree from a college or university accredited by the United States Department of Education or the Commission on Recognition of Postsecondary Accreditation, or a program approved by the board; complete an approved athletic training curriculum from a college or university accredited by an accrediting agency recognized and approved by the United States Department of Education or the Commission on Recognition of Postsecondary Accreditation, or approved by the board; be certified in cardiovascular pulmonary resuscitation from the American Red Cross, the American Heart Association, or an equivalent certification entity as determined by the board; submit proof of taking a two-hour course on the prevention of medical errors; and submit a certified copy of the National Athletic Trainers Association Board of Certification certificate or a notarized copy of examination results.¹⁰

Each applicant for licensure is required to complete a continuing education course on HIV/AIDS as part of initial licensure and one hour for biannual licensure renewal.¹¹ Additionally, licensed athletic trainers are required to complete 24 hours of continuing education courses biannually. The courses must focus on the prevention of athletic injuries; the recognition, evaluation, and immediate care of athletic injuries; rehabilitation and reconditioning of athletic injuries; health care administration; or professional development and responsibility of athletic trainers.¹²

An athletic trainer is required to practice within a written protocol¹³ established with a supervising physician.¹⁴ The protocol must be reviewed by September 30 of each even year and the protocol must be available for inspection upon request.¹⁵

The Department of Health considers the following principles, methods, and procedures within the scope of a licensed athletic trainer's practice: injury prevention; injury recognition and evaluation; first aid; emergency care; injury management/treatment and disposition; rehabilitation through the use of safe and appropriate physical rehabilitation practices, including those techniques and procedures following injury and recovery that restore and maintain normal function status; conditioning; performance of tests and measurements to prevent, evaluate, and monitor acute and chronic injuries; selection of preventive and supportive devices, temporary splinting and bracing, protective equipment, strapping, and other immobilization devices and techniques to protect an injured structure, facilitate ambulation and restore normal functioning; organization and administration of facilities within the scope of the profession; and education and counseling to the public regarding the care and prevention of athletic injuries.¹⁶

In the course of treatment and rehabilitation of muscle skeletal injuries, a licensed athletic trainer may administer: therapeutic exercise; massage; mechanical devices; cryotherapy (e.g., ice, cold packs, cold water immersion, spray coolants); thermotherapy (e.g., topical analgesics, moist/dry hot packs, heating pads, paraffin bath); and other therapeutic agents with the properties of water (e.g., whirlpool),

⁹ The application fee is \$100 and the initial licensure fee for even years is \$125 and in odd years is \$75. Rule 64B33-3.001, F.A.C. The license for the profession of athletic training is renewed September 30 of each even year. Rule 64B-9.001, F.A.C.

¹⁰ Section 468.707, F.S.; Florida Department of Health, Division of Medical Quality Assurance, Athletic Training: Application & Licensure Requirements, *available at*: http://www.doh.state.fl.us/mqa/athtrain/at_lic_req.html (last visited April 18, 2011).

¹¹ Section 456.034(4), F.S. and rule 64B7-25.0012, F.A.C.

¹² Rule 64B33-2.003, F.A.C.

¹³ The written protocol must include: the athletic trainer's name, license number, and curriculum vitae; the supervising physician's name, license number, and curriculum vitae; method of contacting the supervising physician, specifically delineating the method to report new injuries as soon as practicable; the patient population to be treated (e.g., specific scholastic athletic programs, patients of a specific clinic, patients with specific physician referral); the method of assessment of a patient's status and treatment; delineation of the items considered within the scope of practice for the athletic trainer to include the use of modalities/equipment that may be initiated by the athletic trainer or require a physician's order; and identification of resources for emergency patient care (e.g., nearest hospital with emergency services, ambulance service). Rule 64B33-4.001(1), F.A.C.

¹⁴ The physician must be licensed under chapter 458 (allopathic physician), 459 (osteopathic physician), or 460 (chiropractic physician), F.S.; rule 64B33-4001(1), F.A.C.

¹⁵ Rule 64B33-4.001(2), F.A.C.

¹⁶ Rule 64B33-4.001(3), F.A.C.

electricity (e.g., electrical stimulation, diathermy¹⁷), light (e.g., infrared, ultraviolet), or sound (e.g., ultrasound); and topical prescription medications (e.g., steroid preparation for phonophoresis¹⁸) only at the direction of a physician.¹⁹

Effects of the Bill

The bill requires the Florida High School Athletic Association (FHSAA) to conduct a study to evaluate the need for athletic trainers in each high school in the state that participates in athletics. The FHSAA must consult with school districts, medical professionals, and the Department of Health to consider the need, the cost, and the availability of hiring an athletic trainer for each high school that participates in athletics. The study must include, at a minimum, data related to the number of schools that currently employ an athletic trainer, the sports supervised by an athletic trainer, and the injury rates for those sports supervised by an athletic trainer compared to the injury rates for the same sports not supervised by an athletic trainer. For purposes of the study, "high school" includes grades 6 through 12. The FHSAA shall submit its findings to the Legislature and the Governor, by December 1, 2011.

B. SECTION DIRECTORY:

Section 1. Requires the Florida High School Athletic Association, in collaboration with school districts, to conduct a study relating to athletic trainers.

Section 2. Provides an effective date of July 1, 2011.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

The bill requires the Florida High School Athletic Association to expend staff time to conduct a study related to athletic trainers. The economic impact of the study is indeterminate, but insignificant. The study will be performed using existing resources.

D. FISCAL COMMENTS:

None.

¹⁷ Diathermy is a method of physical therapy that involves using high-frequency electric current, ultrasound, or microwaves to deliver heat to muscles and ligaments.

¹⁸ Phonophoresis has been used in an effort to enhance the absorption of topically applied analgesics and anti-inflammatory agents through the therapeutic application of ultrasound.

¹⁹ Rule 64B33-4.001(4), F.A.C.

II. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable. This bill does not affect county or municipal governments.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

Not applicable.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

Not applicable.