

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Budget Committee

BILL: CS/SB 1176

INTRODUCER: Judiciary Committee and Senator Ring

SUBJECT: Athletic Trainers

DATE: April 15, 2011 REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Brown</u>	<u>Matthews</u>	<u>ED</u>	Favorable
2.	<u>Boland</u>	<u>Maclure</u>	<u>JU</u>	Fav/CS
3.	<u>Hamon</u>	<u>Meyer, C.</u>	<u>BC</u>	Favorable
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

Please see Section VIII. for Additional Information:

A. COMMITTEE SUBSTITUTE..... Statement of Substantial Changes

B. AMENDMENTS..... Technical amendments were recommended

Amendments were recommended

Significant amendments were recommended

I. Summary:

The bill revises provisions governing the regulation of athletic trainers, as well as governing the availability of trainers as part of a program to address the prevention and treatment of injuries in school athletic activities.

With regard to the regulation of athletic trainers generally, the bill requires that athletic trainers must be certified by the Board of Certification, which is defined to mean the only nationally accredited certifying body for athletic trainers. This entity appears to be the Board of Certification of the National Athletic Trainers' Association. The bill also specifies that, in order to obtain licensure as an athletic trainer, an applicant must have current certification in cardiovascular pulmonary resuscitation with an automated external defibrillator. The bill makes conforming changes to the requirements for renewal of licenses, as well.

With regard to high school athletics, the bill encourages school districts to make available for schools that participate in sports licensed athletic trainers who are certified by the Board of Certification of the National Athletic Trainers' Association. In civil actions against a school district for negligence by an athletic trainer leading to injury or death, the bill creates a rebuttable presumption that a school district was not negligent in wrongful hiring if the school district made

a good faith effort to comply with the law on athletic trainers. This bill encourages the use of an entity that can coordinate placement of licensed, certified athletic trainers to provide a standard of care to prevent and rehabilitate high school sports-related injuries.

This bill substantially amends the following sections of the Florida Statutes: 468.701, 468.703, 468.707, 468.711, and 1012.46.

II. Present Situation:

Regulation of Athletic Trainers

Part XIII of ch. 468, F.S., governs regulation of athletic trainers. Among other things, this part prescribes requirements related to licensure by examination (s. 468.707, F.S.); fees (s. 468.709, F.S.); license renewal and continuing education (s. 468.711, F.S.); violations and penalties (s. 468.717, F.S.); and disciplinary actions (s. 468.719, F.S.). The term “athletic training” is defined as the recognition, prevention, and treatment of sports-related injuries.¹ Athletic trainers are required to be licensed and are eligible for licensure contingent upon:

- Completing the application and payment of fees;
- Having reached at least 21 years of age;
- Having passed an exam administered or approved by the Board of Athletic Training of the Department of Health;
- Holding a baccalaureate degree from an accredited college or university and current CPR certification; and
- Completing an approved athletic training curriculum and a continuing education course on HIV/AIDS.²

Practicing athletic training without a license constitutes a first-degree misdemeanor, punishable by up to one year in jail and up to a \$1,000 fine.³

State law requires an athletic trainer to operate under a written protocol developed between the athletic trainer and a supervising physician, including a mandate that the athletic trainer timely notify the physician of new patient injuries.⁴

The Board of Athletic Training, Department of Health, is composed of nine members who are appointed by the Governor and confirmed by the Senate. Five of the members are required to be licensed athletic trainers; one must be a medical or osteopathic physician; one must be a chiropractic physician; and two are consumer-residents who are not affiliated with the industry or licensed health-care practice.⁵ The board is authorized to adopt rules to implement the duties conferred upon it by provisions of part XIII, ch. 468, F.S. Those rules:

¹ Section 468.701(5), F.S.

² Section 468.707, F.S.

³ Section 468.717, F.S.

⁴ Section 468.713, F.S.

⁵ Section 468.703, F.S.

shall include, but not be limited to, the allowable scope of practice regarding the use of equipment, procedures, and medication, requirements for a written protocol between the athletic trainer and a supervising physician, licensure requirements, licensure examination, continuing education requirements, fees, records, and reports to be filed by licensees, protocols, and any other requirements necessary to regulate the practice of athletic training.⁶

School District Athletic Injury Prevention-and-Treatment Program

School districts are authorized to implement an athletic injuries prevention-and-treatment program, with a focus on employing and providing access to professionals trained in injury prevention and treatment.⁷ It is the stated goal of the Legislature that school districts employ and have available a full time athletic trainer in each high school in the state.⁸ To be qualified as an athletic trainer for purposes of the program, a person must be licensed as required by part XIII of ch. 468, F.S.⁹

National Athletic Trainers' Association

The National Athletic Trainers' Association (NATA) is a professional membership association for certified athletic trainers.¹⁰ Originating in 1950, today the NATA reports that it has more than 30,000 members internationally. The national Board of Certification (Board), established in 1989, provides a certification program for entry-level athletic trainers. The Board began as a committee of NATA and then separately incorporated in 1989.¹¹ Certification includes application, payment of a fee, and a passing grade on the exam. Under the Florida Department of Health application and licensure requirements for athletic trainers, applicants are required to submit a certified copy of a National Athletic Trainers' Association Board of Certification certificate in order to obtain licensure in Florida.¹²

Sports-Related Injuries

According to the Centers for Disease Control and Prevention (CDC),¹³ high school sports participation has increased from about 4 million student-athletes during the 1971-72 school year to approximately 7.2 million in 2005-06. An increased number of injuries have accompanied the growth in participation as follows:

High school athletes account for an estimated 2 million injuries, 500,000 doctor visits, and 30,000 hospitalizations annually....During the 2005-06

⁶ Section 468.705, F.S.

⁷ Section 1012.46(1), F.S.

⁸ *Id.*

⁹ Section 1012.46(2), F.S.

¹⁰ National Athletic Trainers Association, *About the NATA*, <http://www.nata.org/aboutNATA> (last visited April 7, 2011).

¹¹ Board of Certification for the Athletic Trainer, *What is NATA*, http://www.bocatc.org/index.php?option=com_content&view=article&id=28&Itemid=30 (last visited April 7, 2011).

¹² Florida Dep't of Health, *Athletic Training and Licensure Requirements*, available at http://www.doh.state.fl.us/mqa/athtrain/at_lic_req.html, (last visited April 15, 2011).

¹³ Center for Disease Control, *Sports-Related Injuries Among High School Athletes – United States 2005-06 School Year*, available at <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5538a1.htm> (last visited April 7, 2011).

school year, researchers at a children's hospital in Ohio used an Internet-based data-collection tool to pilot an injury surveillance system...from a representative national sample of U.S. high schools...which indicated that participation in high school sports resulted in an estimated 1.4 million injuries at a rate of 2.4 injuries per 1,000 athlete exposures (i.e., practices or competitions).¹⁴

The CDC reports the highest occurrence of injuries by sport, from most injuries to least injuries, as follows: football, wrestling, boys' soccer, girls' soccer, and girls' basketball.¹⁵

III. Effect of Proposed Changes:

This bill revises provisions governing the regulation of athletic trainers, as well as governing the availability of trainers as part of a program to address the prevention and treatment of injuries in school athletic activities.

Regulation of Athletic Trainers

The bill revises the qualifications of members of the Board of Athletic Training to specify that the five members who currently must be licensed athletic trainers also must be certified by the Board of Certification of its successor agency. The bill defines the Board of Certification to mean the only nationally accredited certifying board for athletic trainers. This appears to mean the Board of Certification of the National Athletic Trainers' Association.

The bill also revises the licensure requirements for athletic trainers to integrate provisions related to the Board of Certification. These changes appear to be designed, in part, to codify the Department of Health's current practice of requiring a national certification from the Board of Certification in order to obtain licensure as an athletic trainer in Florida.¹⁶ Under the bill's revisions (italicized below), the department shall license each applicant who, among other things, has:

- Obtained a degree 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, approved by the Florida Board of Athletic Training, *or recognized by the Board of Certification or its successor agency*;
- *If graduated after 2004*, completed an athletic training curriculum from a college or university accredited by *a program recognized by the Board of Certification or its successor agency*;
- Current certification in cardiovascular pulmonary resuscitation *with an automated external defibrillator (AED)* from the American Red Cross or the American Heart Association, or an equivalent certification as determined by the board; and

¹⁴ *Id.*

¹⁵ *Id.*

¹⁶ See note 11.

- Passed the *Board of Certification's or its successor agency's* examination and is certified by that entity. (Current law requires an examination administered or approved by the Florida Board of Athletic Training.)

The bill eliminates a requirement that new applicants have completed a continuing education course on HIV (human immunodeficiency virus) and AIDS (acquired immune deficiency syndrome). However, the bill retains the requirement in existing law that applicants for renewal of an athletic training license must complete a continuing education course on HIV and AIDS as part of biennial renewal of a license.

Further, with regard to renewal of athletic training licenses and continuing education of athletic trainers, the bill specifies that a licensee's certificate in cardiovascular pulmonary resuscitation means resuscitation with an automated external defibrillator. Further, the bill adds a provision requiring that a licensee be currently certified by the Board of Certification or its successor agency. These renewal and continuing education changes conform to the changes specified in the initial licensure requirements, above.

School District Athletic Injury Prevention-and-Treatment Program

Current law provides that school districts may establish and implement an athletic injuries prevention and treatment program.¹⁷ In connection with the program, this bill encourages school districts to make available at least one athletic trainer who is certified by the Board of Certification of the National Athletic Trainers' Association in each high school that participates in sports. The bill amends current language in s. 1012.46, F.S., that simply encourages school districts to employ and have available a person trained in prevention and treatment of injuries in athletic activities, to encourage instead the use of such a person who is certified by the Board of Certification. Whereas current statutory language says that it is the goal of the Legislature to have trainers employed in each high school in the state, the bill amends that language to specify that this is the goal of the Legislature only in regards to high schools that participate in sports.

The bill incentivizes the employment of a certified athletic trainer by offering a rebuttable presumption in favor of the school district, in actions for negligence causing injury or death, arising out of a trainer's actions. This rebuttable presumption is only available to the school district, however, if the school district made a good faith effort to comply with, among other things, the provisions requiring certification.

The bill sets forth a legislative intent to ensure a designated standard of care for the recognition, prevention, and rehabilitative treatment of high school athletic injuries in this state. To ensure compliance with this standard of care, the management and implementation of this program should be administered by an entity that has the ability to work with local facilities and school districts to coordinate the training, development, and placement of licensed athletic trainers who are certified by the Board of Certification.

The bill provides an effective date of July 1, 2011.

¹⁷ Section 1012.46(1), F.S.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

The bill revises statutory licensure and license-renewal requirements for athletic trainers. The changes may have a fiscal effect on athletic trainers.

Encouraging greater availability of athletic trainers in high schools may result in a reduction in student injuries and faster rehabilitation, therefore reducing medical costs over the long-term.

C. Government Sector Impact:

School districts may incur additional costs if they choose to employ athletic trainers; however, the bill does not make the employment of trainers mandatory.

VI. Technical Deficiencies:

The bill's title provides that it is an act relating to "high school athletic trainers." However, the bill's provisions also address the regulation of athletic trainers generally. Thus, the Legislature may wish to amend the title to provide that it is an act relating to "athletic trainers."

VII. Related Issues:

None.

VIII. Additional Information:A. Committee Substitute – Statement of Substantial Changes:
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Judiciary on April 12, 2011:

The committee substitute amends the original bill in the following ways:

- Defines “Board of Certification” for purposes of the statutes governing regulation of athletic trainers;
- Revises licensure and license-renewal requirements for athletic trainers;
- Specifies that athletic trainers must be certified by the Board of Certification;
- Adds a requirement to current licensure and renewal requirements that licensees be certified with an automated external defibrillator;
- Removes a requirement in existing law that new applicants for licensure as an athletic trainer complete a continuing education course on HIV and AIDS; and
- Provides that certain members of the Board of Athletic Training must be certified by the Board of Certification.

B. Amendments:

None.