

HOUSE BILL REPORT

ESSB 5688

As Passed House - Amended:

April 10, 2019

Title: An act relating to athletic trainers.

Brief Description: Concerning athletic trainers.

Sponsors: Senate Committee on Health & Long Term Care (originally sponsored by Senators Cleveland, Walsh and Becker).

Brief History:

Committee Activity:

Health Care & Wellness: 3/20/19, 4/2/19 [DPA].

Floor Activity:

Passed House - Amended: 4/10/19, 92-3.

**Brief Summary of Engrossed Substitute Bill
(As Amended by House)**

- Restricts the use of the term "athletic trainer" to licensed athletic trainers.
- Allows athletic trainers to purchase, store, and administer certain topical over-the-counter and prescription medications.
- Requires athletic trainers to complete a one-time training in suicide assessment, treatment, and management.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass as amended. Signed by 13 members: Representatives Cody, Chair; Macri, Vice Chair; Schmick, Ranking Minority Member; Caldier, Assistant Ranking Minority Member; Chambers, Davis, Harris, Jinkins, Riccelli, Robinson, Stonier, Thai and Tharinger.

Staff: Kim Weidenaar (786-7120).

Background:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Athletic Trainers.

Athletic trainers are licensed by the Department of Health (DOH) to provide:

- risk management and prevention of athletic injuries and recognition, evaluation, and assessment of athletic injuries;
- immediate care of athletic injuries, including through the application of first-aid and emergency procedures;
- treatment, rehabilitation, and reconditioning of athletic injuries in accordance with guidelines established with a licensed health care provider;
- treatment, rehabilitation, and reconditioning of work-related injuries, under the direct supervision of and in accordance with a plan of care for an individual worker established by a provider authorized to provide physical medicine and rehabilitation services; and
- referral of an athlete to an appropriately licensed health care provider if the athletic injury requires further definitive care or the injury or condition is outside an athletic trainer's scope of practice.

It is unlawful for any person to practice or offer to practice as an athletic trainer, or to represent themselves or other persons to be legally able to provide services as an athletic trainer, unless the person is licensed as an athletic trainer.

Epinephrine Autoinjectors.

An epinephrine autoinjector is a medical device used to deliver a single dose of epinephrine to avoid or treat the onset of anaphylactic shock resulting from an acute allergic reaction. Prescribing health care practitioners may prescribe epinephrine autoinjectors to entities or organizations where allergens capable of causing anaphylaxis may be present, such as restaurants, recreation camps, youth sports leagues, amusement parks, colleges, universities, and sports arenas. Employees of an entity or organization must complete a training program before they are able to administer an epinephrine autoinjector. The entity or organization and its employees are not liable for damages due to use of an epinephrine autoinjector so long as their acts do not constitute gross negligence or willful or wanton misconduct. Incidents of use of an epinephrine autoinjector must be reported to the DOH and the DOH must publish an annual report that summarizes use of epinephrine autoinjectors by entities or organizations.

Summary of Amended Bill:

No person may use the title "athletic trainer," the letters "ATC" or "LAT," the terms "sports trainer," "team trainer," or any other words, abbreviations, or insignia in connection with their name to indicate or imply, directly or indirectly, they are an athletic trainer without being licensed as an athletic trainer.

These restrictions do not restrict the actions of a personal or fitness trainer employed by an athletic club or fitness center if the personal or fitness trainer does not hold themselves out as an athletic trainer or perform the duties of an athletic trainer.

An athletic trainer may purchase, store, and administer over-the-counter topical medications such as hydrocortisone, fluocinonide, topical anesthetics, silver sulfadiazine, lidocaine, magnesium sulfate, zinc oxide, and other similar medications, as prescribed by an authorized

health care practitioner for the practice of athletic training. An athletic trainer may not administer any medications to a student in a public or private school, but may administer over-the-counter medications to a minor in other settings with written consent from the minor's parent or guardian. Athletic trainers are added to the definition of "practitioner" for purposes of the legend drugs chapter, allowing athletic trainers to purchase and possess legend drugs allowed in their scope of practice.

An athletic trainer who has completed an anaphylaxis training program may administer an epinephrine autoinjector.

Athletic trainers must complete a one-time training in suicide assessment, treatment, and management.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Amended Bill: The bill takes effect 90 days after adjournment of the session in which the bill is passed, except for section 5, relating to the one-time training on suicide assessment, which takes effect August 1, 2020.

Staff Summary of Public Testimony:

(In support) Athletic trainers are educated in treatment and rehabilitation, emergency management, and pharmacology. Athletic trainers are often the first entry point into the health care system for many and are uniquely in a position to recognize and intervene for those who need mental health services or who have had concussions.

It is important to strengthening title protection to ensure only licensed athletic trainers are providing these services. The unlicensed practice of athletic training can be dangerous to the public and young athletes.

This bill is vital to athletic training in Washington. Athletic trainers are involved with treatment care and planning, and work with other health care providers. There is no substitute for the broad, but also specific, care athletic trainers can provide. The requirement to complete the suicide assessment training is the most important part of the bill. Suicide is a national epidemic. One in 10 college students have considered suicide and young men have some of the highest suicide rates. These groups are heavily involved with athletic trainers. Athletic trainers need more training on suicide and mental health.

(Opposed) None.

Persons Testifying: Jennifer Carrol, Washington State Athletic Trainers' Association; and Andrew Hamstra, Washington State University.

Persons Signed In To Testify But Not Testifying: None.