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Economic Matters Committee

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THE MARYLAND HOUSE OF DELEGATES
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**HB1097 - Public High Schools - Sports Injury Recordkeeping and Reporting
– Requirements
Education, Energy, and the Environment Committee
April 7, 2026**

Mr. Chair Feldman, Vice Chair Kagan, members of the Education, Energy, and the Environment Committee, thank you for the opportunity to testify on House Bill 1097, Public High Schools – Sports Injury Recordkeeping and Reporting – Requirements. For the record, I am Delegate Roberts, and this bill comes from a basic, common sense place: if our kids are getting hurt playing school sports, we should know when it happens, how it happens, and what we’re doing about it.

HB1097 sets up a simple, statewide framework so every public high school keeps a standardized log of sports injuries. Whenever a student is hurt in a school sponsored practice, game, or conditioning session, the school records the date and time, the sport, a general description of the injury and body part, whether it happened in practice or competition, whether the student was taken out and for how long, whether medical care was given or recommended, who documented it, and, if known, when the student was cleared to return. That information has to be entered within 24 hours by a coach, athletic trainer, nurse, or other designated staff, the logs are kept for at least five years, and local systems and MSDE can review them for safety and compliance.

Once a year, starting July 1, 2027, each local school system will send MSDE an aggregated report of high school athletic injuries from the previous school year—no names, no student identifying details, and fully compliant with FERPA and other privacy laws. MSDE, working with the Department of Health and MPSSAA, can set up the exact forms and a simple way to submit the data, using tools schools already understand—a secure web portal, a standard spreadsheet upload, or a basic online form. This is no heavier lift than the centralized systems we already use for immunizations and student information; we are not asking schools to build a hospital grade medical record system.

We’ve address concerns from MPSSAA and MATA about non medical staff entering “medical” data, and I want to be clear: this bill doesn’t ask coaches to play doctor. A tiered approach fits neatly under HB1097—Tier 1 is the coach or staff member logging simple, objective facts (an injury happened, in this sport, on this date, and the student was or wasn’t removed from play), and Tier 2 is the athletic trainer or nurse, where available, adding diagnosis, treatment, and clearance. That keeps coaches in their lane,

reduces liability, protects privacy, and still gives us consistent, statewide information so that a kid at a small, under resourced school is not invisible just because there's no trainer on the sideline.

Right now, some schools do an excellent job tracking injuries, and some do almost nothing. That means some kids—and let's be honest, often the ones in less resourced communities—fall through the cracks. We also know from research that girls and young women, and many Black and Brown student athletes, face higher risks in certain sports and can experience delayed care or underreporting, but Maryland doesn't have good, comparable data to see where that is happening in our own high schools. HB1097 doesn't micromanage coaches or doctors; it simply gives us the basic facts we need to target trainers, education, equipment, and policy changes where they will actually prevent harm.

At the end of the day, this bill is about stewardship. Our kids pour their hearts out for those school colors; the least we can do is pay attention when they get hurt and learn from it so the next kid is safer. HB1097 is modest, practical, and fair, and it treats every student athlete in Maryland like they matter enough to count. I respectfully ask for a favorable report on House Bill 1097.