



Thursday, April 20, 2023 – 9:30 a.m.
SPORTS MEDICINE ADVISORY COMMITTEE
Video (ZOOM) Conferencing

Members Present:

Candace Cox, Quincy
Dr. Monica Goble, Lansing
Dr. Dallas Lintner, Owosso
Kristi Nowka, East Jordan
Sandra Noto, Grand Rapids
Meaghan Rourke, Allen Park
Meg Seng, Ann Arbor
Mitch Smelis, Fenton
Pat Watson, Bloomfield Hills
J.D. Wheeler, Hartland

Members Absent:

Nicole Carter, Novi
Dr. Camy Chapin, East Lansing
Dr. John Evans, Ann Arbor
Dr. Edwin Kornoelje, Grand Rapids

MHSAA Staff:

Cole Malatinsky (Recorder)
Kathy Vruggink Westdorp (Recorder)

WELCOME, GENERAL REVIEW AND PURPOSE OF THE COMMITTEE

The MHSAA Sports Medicine Advisory Committee (SMAC) exists to serve the MHSAA membership while emphasizing the health and safety of students in interscholastic sports. The goals of this committee include:

1. To advise and work cooperatively with the Representative Council, Executive Committee, staff and sport committees on medical and safety issues as they relate to interscholastic sport's rules writing, regulations and guidelines.
2. Monitor, evaluate and disseminate current sports medicine information to the MHSAA and its member schools.
3. Evaluate existing resources while developing new educational measures provided through the MHSAA for member schools.
4. Work cooperatively with MHSAA sport committees to address sports medicine issues and the impact on the health and risk management of its participating students.
5. Assist the MHSAA in identifying, prioritizing and researching sport medicine issues.

The Sports Medicine Advisory Committee continues to be cognizant and reviews the full picture of what the MHSAA does and is aware of the culture of what the MHSAA does in connection with schools and students in grades 6 – 12. The process in which the Representative Council considers proposals and how the proposals relate to the educational mission of member schools continues to be a priority.

INFORMATION RECEIVED FROM THE MEDICAL/EDUCATIONAL COMMUNITY

Members of the medical community provided an awareness regarding what types of illnesses are currently being seen in clinics and hospitals. Dr. Monica Goble provided insight into the increased attention on sudden cardiac events among athletes following several high-profile incidents. The committee discussed a Sudden Cardiac Awareness Bill put forth in the Michigan State Legislature modeled closely after the concussion awareness protocols, which would require athletic organizing entities, including the MHSAA, to have parents and youth athletes attest to receiving information on the signs and symptoms of sudden cardiac arrest and provide education and information to coaches and volunteers which would require them to remove any youth athlete from the competition if the signs and symptoms are exhibited by these athletes. While this specific legislation may not be the soundest approach, the committee does see this increased attention and potentially available funding as an opportunity to continue efforts in terms of awareness and education, CPR and AED training, access to AEDs, and Emergency Action Planning for MHSAA member schools. Dr. Goble further spoke to the MI HeartSafe Program created by the Michigan Alliance for Prevention of Sudden Cardiac Death of the Young (MAP-SCDY), which assists Michigan schools with a written cardiac emergency response plan. This plan was adopted pursuant to HB 4713, which was passed by the Michigan legislature in February 2014.

Meg Seng and Pat Watson indicated that both of their schools have local school policies which go beyond the MHSAA requirement for coaches and require all school staff members to be trained in CPR. Many of the committee members indicate that some schools have gone as far as having a staff member certified in CPR training to meet expectations that are not just for coaches, but all school staff while maintaining current CPR certification. In the case of Allen Park, Meaghan Rourke provides CPR training for all staff.

Dr. Lintner stated that the school day appears to be as normal as it can be since the start of the COVID pandemic. Student health and safety are still at the forefront and increased hand hygiene, students opting for wearing masks and more people staying home when sick continues to increase. Many administrators on the committee commented on greater absenteeism and indicated that while the hope is that people are staying home when sick, there are many concerns that these increased absences may be related to mental health and burnout following the pandemic. Nicole Carter indicated that these concerns extended beyond students and to administrators, teachers and coaches alike. Pat Watson indicated that he has seen more mental health awareness within his school community with more people advocating for their mental health and seeking out resources when facing challenges.

Certified athletic trainers Mitch Smelis, Meaghan Rourke and Kristi Nowka agreed that they are seeing more normal sports injuries (e.g., shin splits, etc.) compared to the increase in high-velocity injuries and issues related to deconditioning observed throughout the Pandemic.

Also discussed were the challenges related to having school athletic trainer coverage. The committee discussed three primary factors: affordability, access, and supply. As in several other areas of educational athletics – teachers, coaches, bus driver, officials, etc. – there is also a shortage of qualified individuals able to fill athletic trainer positions. Athletic trainers are advanced degree-trained professionals; with this required training and the limited number of qualified athletic trainers interested in working in schools, the cost of a school hiring a full-time athletic trainer has potentially increased as much as 30-40% over the past few years. The committee discussed several ways to address these economic issues and potential budgetary solutions for schools.

Current MHSAA coaching requirements were also discussed, especially related to CPR certification and health/safety education training – inclusive of the new requirement for all high school head coaches (varsity and sub-varsity) to have valid, current CPR certification. Candy Cox indicated that local health departments were seeing an increase in schools requesting CPR training for coaches, which is related to MHSAA policy. Additional conversation was an initiative already discussed with the MHSAA Representative Council regarding the extension of CPR requirements to include all middle school/junior high head coaches. Given the challenges schools face with employing an athletic trainer and having coverage of high school sports events, let alone middle school or junior high school level events, CPR certification for middle school/junior high school coaches may be even more important. SMAC unanimously favored extending the CPR requirement to include all middle school/junior high head coaches.

YOUTH MENTAL HEALTH REPORTS AND RESOURCES

There were several documents shared with the Committee as mental health resources. These included:

- “Student Mental Health and Suicide Prevention” Online Course from NFHS Learn
<https://nfhslearn.com/courses/student-mental-health-and-suicide-prevention>
- CDC Youth Risk Behavior Survey: Data Summary & Trends Report (2011-2021)
https://www.nfhs.org/media/6892976/yrbs_data-summary-trends_report2023_508.pdf
- Protecting Youth Mental Health – the U.S. Surgeon General’s Advisory (2021)
<https://www.nfhs.org/media/6892975/surgeon-general-youth-mental-health-advisory.pdf>
- National Institute of Mental Health
<https://www.nimh.nih.gov/health>

MHSAA CONCUSSION UPDATE

Staff provided an update regarding the five-year results of head injury reporting as well as the preliminary information for 2022-23. In general, some of the head injury reporting numbers are again returning to some of the pre-COVID reports. Staff requested input from the committee regarding additional questions

that could be utilized, especially when there are proposals that might call for offense, defense or special team information. The committee unanimously endorsed the option of providing additional questions to capture some more detail to the injury report.

Also included in the reporting were two NFHS online courses that could be utilized by students and coaches/administrators:

- “Concussion for Students” Online Course from NFHS Learn
<https://nfhslearn.com/courses/concussion-for-students>
- “Concussion in Sports” Online Course from NFHS Learn
<https://nfhslearn.com/courses/concussion-in-sports-2>

CPR/AED/EMERGENCY ACTION PLANS

Also received by the committee were the below links as well as a general information sheet regarding the current CPR requirements (which was expanded on and utilized for the first time this year). This means that all head coaches at all levels of each high school team had a valid, current CPR certification.

Also discussed was the use of AEDs during sudden cardiac arrest events. These devices analyze the heart rhythm and, if necessary, prompt the individual rendering care to deliver a shock that can help the heart restore an effective rhythm. Every minute an AED is not available lessens the survival rate by 10%.

The committee discussed Emergency Action Planning. Included within the agenda as well as through several links, were blueprints for using Emergency Action Plans – which is the first step in planning. It was important to note that none of these resources should be independent of the other, and it is essential that schools make certain any emergency action planning is specific to the venue, effectively communicated, as well as dispersed, practiced, and reviewed.

A motion was made to move forward with schools developing emergency action plans specific to various emergency scenarios (cardiac, cervical, injury, heat-related, weather, active shooter, etc.). The committee unanimously favored this motion with the creation of a basic template and other general resources to assist schools in starting their own emergency action planning process tailored to specific facilities and situations. The committee also emphasized that these emergency action plans needed to be written (available both as a physical pager and digitally), communicated to coaches/staff and students, and practiced regularly. Furthermore, the committee unanimously supported a requirement for schools to develop emergency action plans specific to various emergency scenarios.

These plans would include the components of the EAP, including personnel, by defining the responsibilities of each member of the team, coaching staff, and administration, as well as identifying the person delegate to provide emergency care. Also included are communication plans, equipment, emergency medical care, and important data.

EMERGENCY ACTION PLANNING

Included were several links regarding Emergency Action Planning programs.

- NFL Helps Launch Initiative to Prevent Fatal Cardiac Arrest Among High School Athletes
https://www.espn.com/mlb/story/_/id/35971931/nfl-helps-launch-initiative-prevent-fatal-cardiacarrest-high-school-athletes
- NFHS High School Today Article (December 2021) – Emergency Action Plans: “Practice Makes Perfect.”
<https://www.nfhs.org/articles/emergency-action-plans-practice-makes-perfect/>
- Anyone Can Save a Life – Emergency Action Planning Program.
<http://www.anyonecansavealife.org/>
- NFHS “The Collapsed Athlete” Online Course from NFHSLearn.
<https://nfhslearn.com/courses/the-collapsed-athlete>

- NATA Position Statement: “Emergency Planning in Athletics.”
<https://www.nata.org/sites/default/files/emergencyplanninginathletics.pdf>

- KSI: “Emergency Action Plans.”
<https://ksi.uconn.edu/prevention/emergency-action-plans/#>

- Emergency Planning, AEDs Saving Lives in Nation’s High Schools (March 1, 2023)
<https://nfhs.org/articles/emergency-planning-aeds-saving-lives-in-nation-s-high-schools/>

ADDITIONAL REVIEWS

Another agenda item was a softball committee recommendation to the Representative Council in which additional input was requested from SMAC. The recommendation was: Beginning with the 2023-24 softball season, require all regular season and post-season contests to use the double first base. NFHS Rule 1-2 Note stipulates that the base be a one-or two-piece unit, 15 inches by 30 inches and manufactured to be of equal height. The base in foul territory shall be a color other than white. Seeing no downside and the potential to reduce field and base runner collisions, the committee unanimously supported the recommendation from the Softball committee requiring all regular season and postseason contests to use the double first base.

THANK YOU

The committee was tremendously thanked for their four-year term on the MHSAA Sports Medicine Advisory Committee. This committee was formed in 2020-21 and was tasked with many concerns during the COVID years. They are appreciated for their service and their conscientious and thoughtful decision-making. Some of the existing members will also be carried over for the next two years. The April 2023 meeting adjourned at 11:20 a.m. on Thursday, April 20, 2023.

RECOMMENDATIONS TO THE REPRESENTATIVE COUNCIL

1. Starting with the 2024-25 school year, middle schools must attest by each season’s established deadline that their middle school head coaches have a valid, current Cardiopulmonary Resuscitation (CPR) certification. This will ensure that each team at the middle school level has at least one coach at each level present who is CPR certified. (8-0)
2. Starting with the 2024-25 school year, high schools must attest by each season’s established deadline that their high school sports coaches have emergency action plans specific to the locations of practices and home contests, and these emergency action plans are posted, dispersed, rehearsed, discussed and documented within practice plans. (8-0)