

benchmarks

Spring 2015 Vol. 6 No. 3 mhsaa

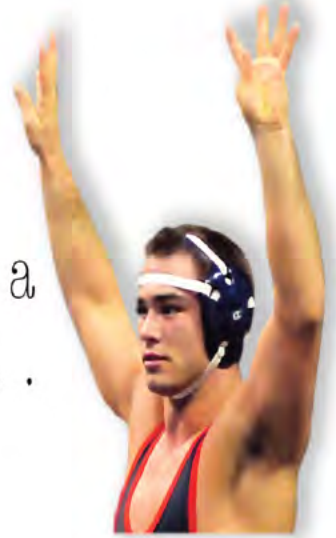
NEXT PLAY

designing ours so the student-athletes will always have theirs





I have a
story...



I have a
story...



I have a
story...

I have a
story...



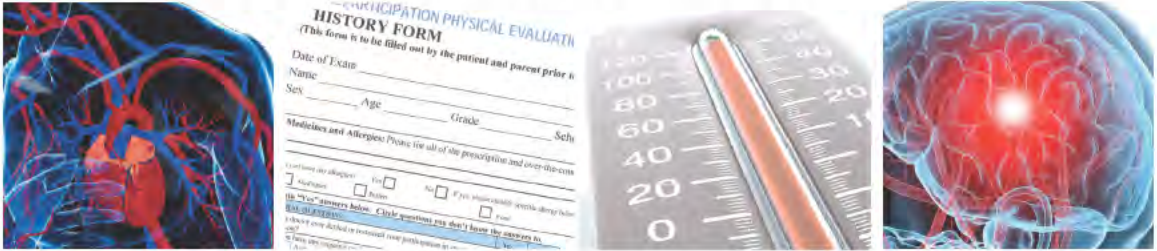
We tell their stories



by MHSAA



Our Next Play Sets Up Their Next Plays



4 As the MHSAA's "4H" plan for health and safety of school sports participants heads to the fourth quarter, matters of the heart lie ahead, but the playbook continues to be tweaked to improve upon established protocols and procedures.

MHSAA Staff

Tony Bihn, Director of Information Systems
Jordan Cobb, Assistant Director, Information Systems
Andy Frushour, Director of Brand Management
Nate Hampton, Assistant Director
Scott Helmic, Building & Grounds
Cody Inglis, Assistant Director
John R. Johnson, Communications Director
Rob Kaminski, Website & Publications Coordinator
Geoff Kimmerly, Media & Content Coordinator
Camala Kinder, Administrative Assistant
Cole Malatinsky, Administrative Assistant
Gina Mazzolini, Assistant Director
Peggy Montpas, Accounting Manager
Andrea Osters, Social Media & Brand Coordinator
Thomas M. Rashid, Associate Director
John E. Roberts, Executive Director
Laura Roberts, Receptionist/Officials Registrar
Adam Ryder, Assistant Director, Information Systems
Mark Uyl, Assistant Director
Jamie VanDerMoere, Administrative Assistant
Faye Verellen, Administrative Assistant
Tricia Wieferrich, Administrative Assistant
Kathy Vrugink Westdorp, Assistant Director
Paige Winne, Administrative Assistant
Karen Yonkers, Executive Assistant

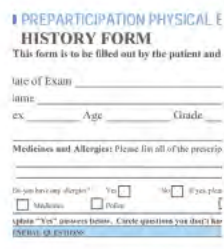
benchmarks is published three times per year by the Michigan High School Athletic Association, Inc., 1661 Ramblewood Drive, East Lansing, MI 48823 (Phone 517-332-5046). Edited by Rob Kaminski. **benchmarks** welcomes contributions of articles, information or photos which focus on coaching and officiating in Michigan. Send them to benchmarks@mhsaa.com.

© 2015 Michigan High School Athletic Association

The Vault – 24

Physical Change

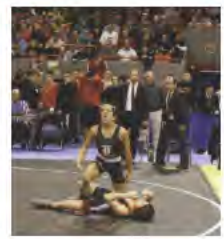
During the 2009-10 school year, the MHSAA Preparticipation Physical form began to take on a new look with emphasis on health history.



MHSAA News – 26

Team Mat Finals to CMU

The MHSAA Team Wrestling Finals will move to Central Michigan University in 2016, just the second venue in the history of the event.



Regulations Review – 42

Let's Cooperate

Cooperative programs offer students of neighboring school districts the opportunity to play a sport which otherwise might not exist. The Regulations are . . .



Departments

Wide Angle	2
Shots on Goal	3
Outside Shots	16
Getting I.T.	22
Health & Safety	32
Student Spotlight	33
Officially Speaking	38
MHSAA Business	44
Extra Points	47
The Buzzer	47
Overtime	48

Piling On



My wife and I have just now completed the spring cleanup of our very small yard. The problem is, this small yard of ours is situated beneath gigantic oak trees that keep raining leaves upon us until well after the first snows have fallen in the autumn; and there are still more leaves drifting to the ground each spring. For us, leaf raking never seems to end.

I get a similar feeling when I deal with the advice raining down on us to improve student-athlete safety. It seems there is a never-ending cascade of new issues to address, and a flood of information flows toward us on both new topics and old.

My colleague in another state says his constituents are weary of the health and safety “issue du jour” and of the never-ending proposals of mostly well-intentioned people to have school sports fix everything, yesterday.

How does a state high school association decide that hazing is not a greater imperative to address with limited resources than head trauma? Can we be certain that using our influence to increase awareness of distracted or drunk driving is less compelling than using our influence to address deaths from heat illness or sudden cardiac arrest?

Every child is valued; every serious injury or death that occurs to them is tragic; and every cause makes a compelling case for our limited resources.

Six years ago, we made the decision to take on four health and safety topics in sports; to spend two years on each; and to move on to the next without forgetting the ones before: **Health Histories, Heads, Heat and Hearts**. This issue of *benchmarks* takes a look at our progress, and at some plans to press for more progress in the near future.

A handwritten signature in black ink that reads "John E. Roberts". The signature is written in a cursive, flowing style.

John E. “Jack” Roberts
MHSAA Executive Director



Much like the autumn leaves which fall late in the season and require spring pickup, there is no break in the cycle of health and safety issues befallen school sports leaders who are finding it increasingly difficult to make a dent in the pile.

Healthy Dose of Safety Blogs

The following recent "From the Director" Blogs on MHSAA.com outline some important health initiatives to watch for with 2015-16 on the horizon.

The Safe Play Game Plan April 21, 2015

On Feb. 10, bills were introduced into both the United States Senate and United States House of Representatives, together called the "Safe Play Act," which addresses three of the four health and safety "H's" described in a previous posting: Heat, Hearts and Heads.

For each of these topics, the federal legislation would mandate that the director of the Centers for Disease Control develop educational material and that each state disseminate that material.

For the heat and humidity management topic, the legislation states that schools will be required to adopt policies very much like the "MHSAA Model Policy to Manage Heat and Humidity" which the MHSAA adopted in March of 2013.

For the heart and heat topics, schools will be required to have and to practice emergency action plans like we have been promoting in the past and will be distributing to schools this summer.

For the head section, the legislation would amend Title IX of the 1972 Education Amendments and would eliminate federal funding to states and to schools which fail to educate their constituents or fail to support students who are recovering from concussions. This support would require multi-disciplinary concussion management teams that would include medical personnel, parents and others to provide academic accommodations for students recovering from concussions that are similar to the accommodations that are already required of schools for students with disabilities or handicaps.

This legislation would require return-to-play protocols similar to Michigan's, and the legislation would also require reporting and record-keeping that is beyond what occurs in most places.

This proposed federal legislation demonstrates two things. First, that we have been on target in Michigan with our four Hs – it's like they read our playbook of priorities before drafting this federal legislation.

This proposed federal legislation also demonstrates that we still have some work to do.

It's a Blizzard March 17, 2015

Like the good people in Boston and other eastern cities and towns who couldn't find anywhere to put all the snow they were getting this past winter, those in charge of school sports can't find anywhere to put all the advice and expertise pouring down on us. We are well beyond the tipping point between too little and too much information regarding concussions.

In one stack before me are different descriptions of concussion signs and symptoms. I could go with a list as short as five symptoms or as long as 15.

In a second stack before me are different sideline detection solutions – tests that take 20 seconds to more than 20 minutes, some that require annual preliminary testing and others that don't.

In a third stack are a variety of return-to-play or return-to-learn protocols, ranging from a half-dozen steps to more than twice that number.

When I read that the National Football League, with all of its resources, was "overwhelmed by all of the expert opinion right now," I was not comforted.

We have to cut through the clutter and provide our constituents clear and concise recommendations for the efficient education of coaches, student-athletes, parents and others; for electronic sideline detection solutions that are not only quick and effective in assessing injuries but also provide immediate reports and permanent records of concussions; and for protocols that place return to play well behind return to practice and further behind return to learn.

Going on Offense March 03, 2015

I was a defensive back on my college football team, but I refuse to be put on the defensive about the game of football.

The game is good for students, their schools and our communities. High school football is character-building for students, spirit-building for schools and community-building for cities and towns. Local school football programs ought to be part of the development plans and place-making strategies of all communities of Michigan.

The school-sponsored game has never been safer to play. The equipment has never been more protective, coaches have never had more safety training, the rules have never been more safety-oriented, and game officials have never had more encouragement to enforce those rules. The result is fewer injuries of all kinds – from nicks and bruises to ankles, knees and necks.

When the game of football has faults, we find and fix them. To continue doing so requires that we be honest with ourselves about where the game has weaknesses and be constantly alert to effective ways to improve the game.

Defensiveness gets in the way of discovering ways to go on offense. It blocks innovation and saps aspirations before they can be launched.

I want our public to know that school-sponsored football is a great game. I also want the public to know that we aspire to keep improving the game and to exceed legal mandates. We will continue to do more than what is required and, in fact, we intend to do what's unexpected to assure football remains a positive influence on students, schools and communities.

Shots on Goal offers readers a forum for feedback. Submit your opinions, share your experiences or offer suggestions to benchmarks@mhsaa.com.



Next Play

The next step in the MHSAA’s 8-year plan gets to the heart of the matter, while previous pages in the playbook continue to be tweaked to ensure that current and future students will always be ready for another play.

From the retirement of NFL players in their mid-20s fearing long-term disability, to NASCAR drivers suffering injuries against concrete walls when alternative substances are available, to MLB outfielders running into barriers which place aesthetics and tradition over safety, the focus of highlight shows, apps and old-fashioned sports pages is shifting from action inside the lines to the sidelines.

As the reality of human vulnerability continues to invade our favorite escape from reality – athletics – protecting those in the spotlight needs to be Job 1.

While the quest for risk management protocols and health and safety provisions is a never-ending loop, the MHSAA bolted from the starting blocks with a 4H plan (Health Histories, Heads, Heat and Hearts) in the fall of 2009, a mission that enters the fourth turn for the 2015-16 school year.

And, as pulse quickens for the “Heart” stage in the fall, the MHSAA will continue to step up initiatives involving the other three initiatives during the next lap. Think of it as a continuous relay, where the baton is never dropped and fresh runners continue the race.

While organizations at other levels might be asking, “What to do,” the MHSAA is focusing on “What’s next?”

In this playbook the next plays are critical in allowing student-athletes to continue providing their communities with inexpensive and entertaining breaks from reality.

HEART OF THE MATTER

The 2015-16 school year brings with it an ambitious but paramount stage in the MHSAA's mission to protect and promote the well being of student-athletes across the state.

Beginning in the fall, all high school varsity coaches will need to have Cardiopulmonary Resuscitation (CPR) certification by established deadlines which correspond to rules meetings.

The requirement is new, and the volume of personnel affected is vast. Yet, plans have been in place during the past few years, and schools in many communities are ahead of the curve.

"We've fielded some questions regarding the requirement, but I think that many of our schools already have similar protocols in place," said MHSAA Assistant Director Kathy Vrugink Westdorp. "Increasingly, schools have become more prudent with regards to health and safety, and programs which emphasize these initiatives have been well received."

Pete Ryan, MHSAA Representative Council member and athletic director for Saginaw Township Community Schools concurs.

"The CPR requirement will not be a change for Heritage (HS), as we have required CPR for eight years," Ryan said. "We offer certification through our district nurse at no charge to the coaches and train about 20-30 coaches per year."

The training vehicle might vary from district to district, but so long as the end result is certification, the coaches are free to take course by any means possible, whether online or in person.

"I think we'll see a blend of online and classroom delivery," Westdorp said. "And, I don't think it will be just the coaches. At the MIAAA Conference (in March), school leaders were proactive in terms



of certification for athletic directors, too."

Mike Bakker, President of the Michigan Inter-scholastic Athletic Administrators Association and athletic director at Fenton High School, says CPR certification is a must in the risk management plans for all school settings.

"As an educator who has been a CPR and first aid instructor for the American Heart Association for a number of years, I am excited that the MHSAA will require CPR training for varsity coaches," Bakker said.

"I certainly hope that in the future we will see that all coaches are trained in CPR. There might be a bit of a challenge at first to get our coaches trained, as schools look for the most economical as well as timely way to accomplish this mandate. The biggest hurdle that I can foresee is trying to find qualified trainers in all areas of the state that have multiple training dates available to fit the needs of such diverse coaching staffs."

Ryan believes there is no substitute for the per-

– continued

CPR Requirement: Who Can Help?

The MHSAA does not dictate which organization or individual must provide CPR education and certification. However, the Michigan Department of Human Services lists the following organizations that are approved to provide CPR training:

Sparrow Health System	sparrow.org
American CPR Training	americancpr.com
American Heart Association	americanheart.org
American Red Cross	redcross.org
American Safety and Health Institute	hsi.com/ashi/about
American Trauma Event Management	atem.us
Cardio Pulmonary Resource Center	1-800-900-2772
Emergency Care and Safety Institute	ecs institute.org
Emergency First Response Corp.	emergencyfirstresponse.com
EMS Safety Services	emssafety.com
FreeCPR.Org	freecpr.org
Medic First Aid	medicfirstaid.com
National Safety Council	nsc.org
ProCPR, LLC	procpr.org



sonal touch.

“We are doing in-person training which I feel is better because the individuals have to perform the procedure on the practice dummy. It’s simply more hands-on training.”

School nurses and trainers will play a substantial role in the certification process, as will community health organizations in many locales.

“In many of our schools, the health educators are certified to conduct CPR courses,” Westdorp said. “We’ve also had numerous calls from non-school entities alerting us to their availability to provide training, such as fire departments and local medical centers.”

Fenton is one such school with the luxury of on-site personnel to train its staff.

“We are fortunate in Fenton that our athletic trainer and athletic director are certified trainers so we can accomplish our training in-house, but I know that not all schools are as fortunate,” Bakker said.

Which is exactly why it’s necessary for coaches to become certified, and ideally not just the head coaches.

“It should be encouraged that *all* coaching staff become CPR certified so that they are able to take action, especially for schools which do not have an athletic trainer on staff and if the head coach is unavailable or present, in the unfortunate event that a potential cardiac emergency and/or sudden-death incident occurs,” said certified athletic trainer Gretchen Mohny, the Clinical Coordinator and Instructor for Western Michigan University Undergraduate Athletic Training Program.

Mark Mattson, athletic director at Traverse City Central, indicates that while not previously a requirement, the district has been proactive in prepping the coaches.

“From the moment the requirement was an-



On Course

Many school districts already have CPR mandates in place for athletic coaches, so the requirements beginning with the 2015-16 school year will simply be a matter of staying on course.

nounced, we’ve been out in front of it,” Mattson said. “What’s great is, even though it hasn’t been a requirement for Traverse City Area Public Schools, many coaches are indeed already certified. The district also offers training sessions once a month

CPR Requirement FAQs

Q Which coaches are required to have CPR certification?

A Effective with the 2015-16 school year, all varsity head coaches must have a valid current Cardiopulmonary Resuscitation (CPR) Certification by the established deadline for completion of the rules meeting, for the first sport in which the coach is ahead coach during the school year.

Q How expensive is the certification?

A \$0 to \$95.

Q How long does certification take?

A Two to five hours.

Q How long does the certification last?

A Generally, two years.

Q Does the MHSAA specify the age level for the CPR training?

A No. Generally, the course for adults alerts candidates of the necessary modifications for children and infants, and vice versa.

Q Does an online course satisfy the requirement?

A Yes. While not as effective as face-to-face courses, an online course does satisfy the requirement that begins in 2015-16.

Q Is it necessary for varsity head coaches to also have training in AED?

A AED training is often a part of CPR certification. AED training is preferred, but not required.

and those dates are passed on to our coaches. Jason Carmien (AD at Traverse City West) and I have also had conversations about providing training at our preseason coaches meeting for those still in need prior to the start of the fall season.”

Coaches can also count on a familiar training source to come through for certification: the MHSAA Coaches Advancement Program. Westdorp, who heads up the expansive continuing education program for the state’s coaches, envisions coursework at select sites which will build CPR training into the session, giving attendees more added incentive and training opportunities.

CAP has also served as a siren to inform and remind the MHSAA’s constituents about the upcoming regulation.

“In all CAP courses this school year, we’ve been educating the coaches about the CPR requirement,” Westdorp said. “We also can format the courses to include a two-hour block for CPR certi-

“Increasingly, schools have become more prudent with regards to health and safety, and programs which emphasize these initiatives have been well received.” – MHSAA Assistant Director Kathy Westdorp

fication within the CAP training. We could even do it with a league and conference group where we set up rotations, and the CPR aspect would be one of the rotations.”

Westdorp added that many athletic directors currently schedule coaches meetings and additional coursework around CAP training. It’s a perfect fit to deliver pertinent messages while all parties are in one location.

Such gatherings could also provide the opportunity for athletic leaders to share emergency action plans.

Along with the CPR component of the MHSAA’s health mission for the coming school year, schools will be asked to have in place and rehearse emergency action plans involving cardiac and other health-related emergencies.

To assist, schools will receive this summer the “Anyone Can Save a Life” program developed by the Minnesota State High School League and endorsed and delivered nationally by the National Federation of State High School Associations (*more on the program appears on page 16*).

“The ‘Anyone Can Save A Life’ initiative promotes the need to have and to practice planning for different kinds of emergencies; it involves students as well as adults; and it invites schools to include their previously existing plans,” said MHSAA Executive Director Jack Roberts.

Become a MI HEARTSafe School

If someone in your school community suffers a sudden cardiac arrest, would you know what to do? Did you know that early recognition of a cardiac arrest, calling 9-1-1, bystander response with hands-only CPR, and use of an AED greatly increase the chance of survival?



Important questions for schools to consider are:

- Does your school have a cardiac emergency response plan?
- How many students and staff can recognize the symptoms of cardiac arrest and know how to get help “on the way, right away”?
- Who knows CPR in your school and is ready to use it when necessary?
- Where are the automated external defibrillators (AEDs) located in your school building, are they properly maintained and inspected, and who knows how to use them?

The MI HEARTSafe Schools Award Program was developed to help schools be prepared for a cardiac emergency. Schools meeting the minimum criteria will be awarded the MI HEARTSafe School designation, receive a letter of commendation, and be spotlighted on our website, all **at no cost to the school**.

Approximately 120 schools and/or districts in Michigan have HEARTSafe status (see the list on page 8). The program provides valuable resources and training, and the price is right: **free!** The MHSAA encourages schools to join the list.

To apply for MI HEARTSafe School designation at no cost, download and follow the instructions on the application form at <https://migrc.org/Library/HEARTSafe.html>, or scan the QR code below.

For more on the MI HEARTSafe program, scan this code from your mobile device.



MI HEARTSafe Schools Recognized

On May 13 in Flushing, the Michigan Department of Health and Human Services recognized schools across the state which had achieved HEARTSafe status. Congratulations to the following schools which took an important step in providing a safer environment for our students.



Adrian HS
 Adrian McKinley Education Center
 Bangor Career Academy
 Bangor Middle/HS
 Bangor South Walnut Elementary
 Bangor Wood School
 Belmont Elementary
 Bloomingdale Elementary
 Bloomingdale Middle/HS
 Burton Atherton Junior High/HS
 Burton Dillon Elementary
 Cassopolis Lewis Cass ISD Brookside Learning Center
 Cedar Springs Beach Elementary
 Cedar Springs Middle School
 Cedar Trails Elementary
 Cedar Springs Cedar View Elementary
 Cedar Springs New Beginnings HS
 Cedar Springs Red Hawk Elementary
 Charlevoix St. Mary School
 Coopersville HS
 Covert Public Schools
 Davison HS
 Davison Alternative Education
 Davison Central Elementary
 Davison Gates Elementary
 Davison Hahn Intermediate
 Davison Hill Elementary
 Davison Middle School
 Davison Siple Elementary
 Davison Thompson Elementary
 Decatur Davis Elementary School
 Decatur Middle/HS
 Dowagiac LCISD North Pointe Center
 Felch North Dickinson County School
 Flint Atlantis Alternative HS
 Flint Carman-Ainsworth HS
 Flint Carman-Ainsworth Middle School
 Flint Carman Park Baker Career Academy
 Flint Dye Elementary
 Flint Randels Elementary
 Flint Rankin Elementary
 Flint The Learning Community-Early

Childhood Center
 Flushing Central Elementary School
 Flushing Early Childhood Center
 Flushing Elms Elementary School
 Flushing HS
 Flushing Middle School
 Flushing Marion D. Crouse Instructional Center
 Flushing Seymour Elementary School
 Flushing Springview Elementary School
 Gobles Gobles Elementary School
 Gobles Middle/HS
 Grand Rapids Union HS
 Hartford HS
 Hartford Middle School
 Hartford Red Arrow Elementary
 Hartford Woodside Elementary
 Jackson Napoleon Ackerson Lake HS
 Lansing Delta Center Elementary
 Lawrence High/Middle School
 Lawrence Elementary School
 Lawrence Van Buren Conference Center
 Lawton Accelerated Academic Center
 Lawton Elementary
 Lawton HS
 Lawton Middle School
 Mattawan Early Elementary
 Mattawan HS
 Mattawan Later Elementary
 Mattawan Middle School
 Napoleon HS
 Napoleon Erza Eby Elementary
 Napoleon Middle School
 Paw Paw Cedar Street Community and Family Center
 Paw Paw Early Elementary
 Paw Paw HS
 Paw Paw Later Elementary
 Paw Paw Middle School
 Plainwell HS
 Pullman Elementary
 Richmond HS

Rockford Cannonsburg Elementary
 Rockford Crestwood Elementary
 Rockford East Rockford Middle School
 Rockford Lakes Elementary
 Rockford Meadow Ridge Elementary
 Rockford North Rockford Middle School
 Rockford Parkside Elementary
 Rockford River Valley Academy
 Rockford HS
 Rockford HS Freshman Center
 Rockford Roguewood Elementary and Rockford Spanish Immersion
 Rockford Valley View Elementary
 Saline HS
 Saline Middle School
 Saline Liberty School
 Saline Pleasant Ridge Elementary
 Saline Woodland Meadows Elementary
 Saline Heritage Elementary
 Saline Harvest Elementary
 Schoolcraft Early Elementary
 Schoolcraft Elementary School
 Schoolcraft HS
 Schoolcraft Middle School
 South Haven Baseline Middle School
 South Haven LC Mohr HS
 South Haven Lincoln Elementary
 South Haven Maple Grove Elementary
 South Haven North Shore Elementary
 St Johns Eureka Elementary
 St Johns Gateway North Elementary
 St Johns Riley Elementary
 St. Johns HS
 St. Johns Middle School
 Temperance Bedford HS
 Temperance Bedford Junior HS
 Temperance Jackman Road Elementary
 Utica Burr Elementary
 Warren Rockwell Middle School
 Wyoming East Lee Campus
 Wyoming Godfrey Elementary
 Wyoming The Early Childhood Center

“The result can be a fresh, comprehensive emphasis on preparing for emergencies well before they occur and then responding with more confidence when those emergencies inevitably happen. It is the perfect link between the last two years when we focused on heat illness and the next two years when we focus on sudden cardiac arrest,” Roberts added.

It will also be of primary concern to place automated external defibrillators (AEDs) in all schools and provide training for use of the devices.

The reasoning behind such a full-court press can be backed by simple facts.

- At any one time, an estimated 20 percent of the U.S. population congregates on school grounds, increasing the likelihood of school-based cardiac emergencies.
- Victims of SCA can be brought back to life by providing chest compressions and early defibrillation with an AED.
- Every second counts. When SCA occurs, chest compressions and the use of an AED need to start immediately.
- The AED can only help and will only deliver a shock if it is needed.
- The AED is very easy to use. Just turn it on and follow the voice prompts.

The best way to combat such situations is to create and atmosphere of preparedness; making sure all people in close proximity to potential victims can respond with quickness, confidence and precision to help reduce fatalities.

“In order for best practices to be achieved, it will require coordinated efforts to establish a quality



Athletic trainer duties extend outside playing fields. Trained personnel can offer the perfect solution to staff CPR training needs in-house.

“As an educator who has been a CPR and first aid instructor for the American Heart Association for a number of years, I am excited that the MHSAA will require CPR training for varsity coaches.” – Fenton HS Athletic Director Mike Bakker

emergency action plan among the entire athletic department staff, which should be practiced annually. This should be viewed as the first line of preparedness and defense in sports safety,” said James Lioy, an adjunct professor in athletic training at WMI who was named Michigan High School Athletic Trainer of the year in 2000-01.

That’s the goal of action plans such as those included in MHSAA CAP Levels and the Anyone Can Save A Life program.

“We’ve taken the ‘know-how’ out of it. You don’t have to know how to perform the medical procedures to be trained and prepared as part of an effective emergency response team,” said Jody Redman, associate director of the Minnesota State High School League and one of the authors of the Anyone Can Save a Life program.

A common refrain in athletics to assign perspective on sport in society is, “It’s just a game; it’s not life or death.”

However, in the most dire of circumstances, participants indeed can be faced with life or death. Knowing how to respond can make all the difference.

– Rob Kaminski
benchmarks Editor

NFHS Course on Sudden Cardiac Arrest Coming this Summer

The new NFHS online course on sudden cardiac arrest will be free and available by July 1. This is another option for assistant and sub-varsity coaches to complete their health and safety course requirement in 2015-16, and coincides with the start of the MHSAA’s two-year focus on “Hearts.”



This topic will also receive attention in the risk management portion of the required head coaches rules meetings for the next two years.

The NFHS is also updating by July 1 its concussion course which is linked from MHSAA.com to NFHSLearn.com.

For more free courses at NFHSLearn.com, scan the QR Code at left.



CPR, AEDs and Action Plans Save Lives

Without a doubt, questions will enter the minds of many as they attend AED or CPR training sessions, or MHSAA Coaches Advancement Program courses on health and safety: “Will I ever need any of this?” “Is this worth my time?” The answer to the first question is, “Hopefully not.” The answer to the second musing lies in the stories that follow, excerpted from a small sampling of countless situations occurring in school buildings on a regular basis. These had happy endings, thanks to trained, educated individuals who knew how to react. The MHSAA’s mandate for CPR certification in 2015-16 aims to put more school sports personnel into that position.

Roughly 30 months after the tragic death of Wes Leonard, a Fennville High School basketball player who collapsed moments after his shot capped a perfect regular-season in 2011, his mother, Jocelyn helped to save the life of another Fennville student.

Thanks in large part to her efforts to promote greater presence of Automatic External Defibrillators (AEDs) in high schools across Michigan, and to provide training for such circumstances as the one in which she lost her son, Jocelyn was prepared for such a moment in the school where she serves as a choir teacher.

In October 2013 a Fennville High student collapsed in the middle of a math class prompting an alert being sent to Leonard, who rushed down the hall to the classroom and began CPR. She activated the AED that had been retrieved from the school’s office and used it on the boy, who was resuscitated as emergency responders arrived on the scene.

The Leonard family continues to campaign for mandatory advanced CPR training and practice in schools across the state through the Wes Leonard Heart Foundation, and more can be found here: <http://www.wesleonardheartteam.org>



The memory of Wes Leonard (top) lives on, and has inspired initiatives to promote life-saving equipment and training in schools.

Chess can be a mentally exhausting game. Thinking of your opponent’s moves and the counter moves you can make, often anticipating many moves into the future, can be stressful and draining. Luckily, Andrew Wilson, a sophomore member of the Streamwood (Illinois) High School chess team, used that quick thinking to save a 7-year-old girl’s life in February.

Wilson had just finished a long four-game day at the Illinois High School Association (IHSA) state chess tournament in Peoria, Ill., and was eating dinner with a friend when they heard screams coming from the pool area at the hotel where the team was staying. Initially thinking nothing of it, Wilson and his friend continued eating before the reason for the screaming became known.

“We both agreed it was probably just a bunch of kids playing in the pool,” Wilson said. “After a while, a man came in and said that some girl had a seizure and asked if anyone in the lobby knew CPR. “I said I did, ran in, gave CPR and revived her.”

Wilson had become certified in CPR less than a year ago as part of the Elgin Explorers Group, which is conducted by the Elgin Police Department for teenagers interested in pursuing a career in law enforcement. There, Wilson learned about being a police officer, just like his father who is on the Elgin Police Force.

“I didn’t expect to have to use [the certification] at all,” Wilson said. “I remember during training, I said, ‘I don’t understand why I’m going to need this.’”

The rest of the weekend in Peoria was uneventful, even with three more chess matches the next day, Wilson said. The Streamwood chess team didn’t win the tournament, but they brought home a hero.

Wilson was recognized at a ceremony in March, where he received a proclamation from Illinois Senator Michael Noland and an award from the police department. Both he and his chess coach, Pat Hanley, won awards from the U46 School District at the ceremony as well.

“While you may not have won the chess tournament, you’re definitely a winner in our eyes,” Board Member Traci O’Neal Ellis said while presenting the certificates of achievement.

It’s not surprising that Wilson wants to be a police officer or lawyer someday, so the awards ceremony was especially meaningful.

— Juli Doshan for NFHS.org

STAYING AHEAD

Three stacks of concussion-related material offered precious little space on MHSAA Executive Director Jack Roberts' desk, and perhaps consumed even more room in his head as he tried to wrap his mind around the seemingly daily "latest and greatest" documents outlining signs, detection and return-to-play elements involving head trauma.

Without a doubt, the scene is quite similar on any given day in the offices of his cohorts across the country as school sports leaders are faced with the daunting, dizzying task of devising plans to address concerns aimed at the health of their games.

Lawmakers, rulesmakers, medical experts and the court of public opinion all want the same thing for student-athletes: a reduction in the chances of head-related injuries. And they all are perfectly willing to offer instant fixes to those in charge.

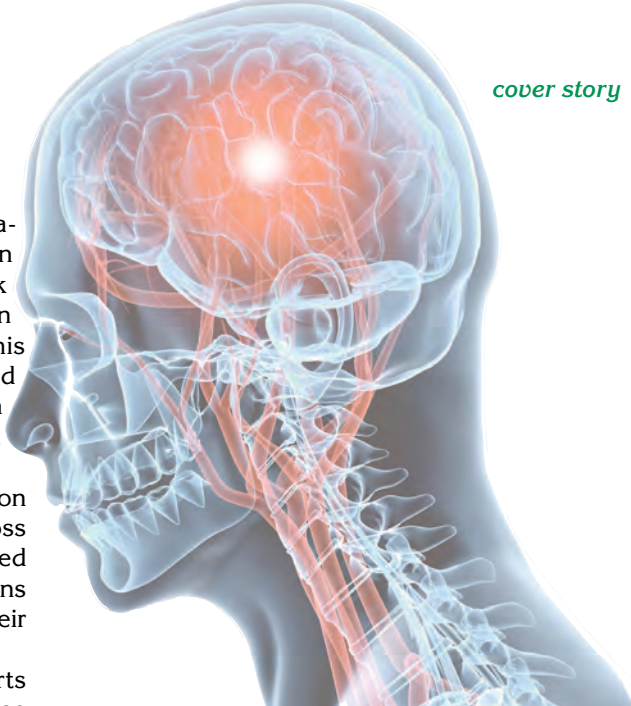
They often expect those in Roberts' position to analyze, digest and create action plans as soon as possible without considering the research and resources it will take to get there.

From a perspective standpoint, an interesting view was volleyed out to the group: could sideline detection actually speed up a student's return to play rather than slow it down?

"All parties involved want the same thing. We all want to provide the safest environment for educational athletics through protocols and practices that will offer the most minimal risk of injury," Roberts said. "But, this can't be accomplished through unfunded mandates which would stifle the already struggling athletic budgets in many schools.

"Changes have to occur through training and education, orchestrated through state offices and executed locally. And, it takes time to research the best and most effective means. There is so much information, and so many devices in the field today that those in athletic leadership roles almost have to have a medical background as well."

For instance, there are documents which list as few as five symptoms for concussions, and those listing as many as 15. There are sideline detection methods which purport to take 20 minutes and those which claim to determine



concussions in 20 seconds. There are as many return-to-play protocols as there are state associations.

Increasingly, state high school associations are seeking opinions and expertise from local medical personnel. In March, in one of many such meetings, Roberts and other MHSAA staff welcomed several from the Michigan Department of Health and Human Services to their office to discuss sideline detection methods and return-to-play issues.

"There are two areas that concerned us most," Roberts said. "One, sideline detection of head injuries is inconsistent across the state in terms of both results and resources. Two, we need methods which generate immediate reports and permanent records."

As the group which convened in March discussed the topic, potential hurdles and new perspectives on sideline management came to the forefront.

On the money and manpower front, who would be responsible for administering sideline tools? Most ideally they would need to be overseen by medical personnel rather than coaches or team managers.

From a perspective standpoint, an interesting view was volleyed out to the group: could sideline detection actually speed up a student's return to play rather than slow it down? Current protocol prescribes that if competition continues while an athlete is withheld for an apparent concussion, that athlete may not be returned to competition that day but is subject to the return-to-play protocol. And, clearance *may not* be on the same date on which the athlete was removed from play. Only an M.D., D.O., Physician's Assistant or Nurse Practitioner may clear the indi-

— continued

vidual to return to activity. With immediate sideline detection, are parties more vulnerable should a student pass immediate tests, only to have undetected effects of the incident increase over time?

“The group shed a different light on the various scenarios, which was a primary purpose for the meeting,” Roberts said. “As one can see, there are so many variables to consider when attempting to determine the next plausible and practical steps toward minimizing and detecting head injuries.

“Further, we have to take into consideration practice sessions as well as competitions, and all sports, not just select sports.”

Adding to the challenge is simply the nature of athletics. Competitors at any level are just that: competitive. Often, students – or their parents – will attempt to hide symptoms or be reluctant to come forward with injuries, particularly head injuries which can’t be seen.

In more cases, perhaps the symptoms simply are not recognized, which is why education is paramount.



First, association leaders have to tackle the due diligence of researching issues and potential solutions to situations currently threatening the well being of scholastic sports. Considering that some 1,620,000 results are offered when “sideline concussion detection tools” is typed into a search engine, this is a laborious and continual chore.

Such information then needs to be packaged and presented to leaders at the local levels – athletic directors – to pass on to coaches, the individuals who have as much or more influence on students that perhaps any other adults, including parents in some cases.

This is why MHSAA rules meetings, CAP sessions and other statewide forums continue to bang the drum on health and safety issues; to make sure the messages and procedures reach the student-athletes.

And, it’s why the MHSAA is asking coaches and ADs to be accountable in verifying that the plans in place are being carried out.

Fit for a King?

Editor’s Note: There are many sideline detection tools on the market, as a quick Google on the topic will reveal. The following, the King-Devick test is among the highly recommended tests, summarized here simply to provide an idea of the types of systems available and how they operate. The following is from King-Devick’s website.

The King-Devick Test is an objective remove-from-play sideline concussion screening test that can be administered by parents and coaches in minutes. The King-Devick Test is an accurate and reliable method for identifying athletes with head trauma and has particular relevance to: Football, Hockey, Soccer, Basketball, Lacrosse, Rugby, Baseball, Softball and Other Collision Activities.

King-Devick Test is an easy-to-administer test which is given on the sidelines of sporting events to aid in the detection of concussions in athletes. King-Devick Test (K-D Test) can help to objectively determine whether players should be removed from games. As a result, King-Devick Test can help prevent the serious consequences of repetitive concussions resulting from an athlete returning to play after a head injury.

How King-Devick Test Works

Concussions are a complex type of brain injury that is not visible on routine scans of the brain, yet are detectable when important aspects of brain function are measured. King-Devick Test (K-D Test) is a two-minute test that requires an athlete to read single digit numbers displayed on cards or on an iPad. After suspected head trauma, the athlete is given the test and if the time needed to complete the test is

Less Could Mean Less

There are times when it's good to say, "less means more," but in the case of contact sports, practices and competitions, the idea is for less to mean less. As in less time for collisions to occur yielding fewer injuries.

It's early yet, and one year does not constitute a large sample size, but the MHSAA Football Practice Policy instituted last August could be one step toward reducing head injuries.



Beginning this past football season, the number of practices with helmets, shoulder pads and full pads were limited to start the season, and preseason "collision" sessions were limited to one per day. During the season, such practices were limited to two per week, while the length of practices was also regulated.

Dr. Steven Broglio of the University of Michigan Neurosport department is conducting a three-year study of the Ann Arbor Gabriel Richard football program with the assistance of Richelle Williams to determine the "Effects of Concussion and Sub-Concussion." The study began in 2013, one year prior to the new MHSAA guidelines.

Research in 2013 showed approximately 650 "impacts" per player. In 2014, the number dropped to approximately 500 impacts per player. Impacts are defined as greater than 10gs of acceleration. Richelle states that a slap on the back is 4 g, coughing is 3.5 g. On average, a helmet hit is 25-45 g. Concussions usually happen (roughly) between 80-150g.

An encoder is embedded into each football athlete's helmet which monitors head impacts and exactly where the impact is located. Richelle sits at each practice and game and through a pager identifies the player's number and impact from a hit of 90g or more.

They are also looking at those who do not sustain an impact concussion, but rather sustain multiple head impacts and whether those multiple head impacts lead up to brain changes (measured through EEG).

The initial findings, as submitted by the study team, indicated two reasons why there were fewer overall impacts from 2013 to 2014.

1. Primary reason: There was the MHSAA adoption that became effective in August 2014 with new limitations that were placed on "collision practices" and conditions that full pads could not be worn until the fifth day of team practice.
2. Secondary reason: Less players evaluated in 2014 than 2013.

any longer than the athlete's baseline test time, the athlete should be removed from play and should be evaluated by a licensed professional.

Remove-From-Play vs. Return-To-Play

Both remove-from-play and return-to-play decisions are crucial in concussion recovery. It is critical to remove a concussed athlete from play in order to prevent further damage. It is also extremely important to keep the athlete from returning to play until they have made a full recovery. There are tools to assist in making both remove-from-play and return-to-play decisions.

- King-Devick Test for Remove-From-Play Decisions
- Quick, objective sideline testing
- Measures impairments of speech, language and other correlates of suboptimal brain function
- Instant screening feedback in minutes
- Administered by parents, coaches, athletic trainers and medical professionals in remove-from-play decisions
- Neurocognitive Testing for Return-To-Play Decisions
- Computerized concussion evaluation system (in the computer lab)
- Measures verbal and visual memory, processing speed and reaction
- Tracks recovery of cognitive processes following concussion
- Assists clinicians in making return-to-play decisions

TAKING THE HEAT

It certainly was not the MHSAA's intent to spur on the most historically frigid back-to-back winters that the state has seen. Nor, did the Association wish for one of the mildest summers in recent memory during 2014.

Seemingly it's just Mother Nature's way of reading into MHSAA efforts for the 2013-14 school year for managing heat and humidity and acclimating student-athletes for warm-weather activities.

Since the guidelines were put in place (recommended for regular-season sessions and requirements for postseason tournaments) there have been relatively few days during which psychrometers have had to be implemented.

"The key is, we've got plans in place for when the climate returns to normal trends for return-to-school practices and contests in August and September, as well as early June events," said MHSAA Executive Director Jack Roberts. "It is a bit ironic that there have been relatively few days since the guidelines were established that they've actually come into play."



In a nutshell, the guidelines provide instruction for four ranges of heat index: below 95 degrees; 95-99 degrees; 99-104 degrees, and heat indexes above 104 degrees, with increasing numbers of precautions in place as heat indexes rise. An index above 104 calls for all activity to cease.

Certified athletic trainers Gretchen Mohney and James Lioy agree that the recent requirements in heat and hydration guidelines are a step in the right direction and encourage that – when possible – an athletic trainer oversee the implementation. Simply taking a reading from just outside the AD's office or at home does not simulate the on-site conditions.

"This doesn't take into account the radiant heat at the site, which can drastically affect the conditions that athlete plays in. It is essential that all parties involved in making decisions to play collaborate with one another," said Mohney.

Heat-related deaths in athletics rank only behind cardiac disorders and head and neck injuries, but such fatalities might lead the way in frustration



for the families and communities of the victims. The reason? Heat-related illness is totally preventable.

Another source of mild frustration is the lack of recording within the state for those practice and game situations which warrant heat protocols.

When the Representative Council was formulating the Heat and Humidity Policy, it was also mindful of ways in which the MHSAA could assist schools in putting the plan into practice. Coaches, athletic directors and trainers needed a method to record information for athletic directors to view, and for the MHSAA to track. So, the MHSAA developed interactive web pages on MHSAA.com which allow

"It is essential that all parties involved in making decisions to play collaborate with one another." – Certified Athletic Trainer Gretchen Mohney

registered personnel to record weather conditions as practices and contests are taking place, using psychrometers.

Additionally, discounted Heat and Humidity Monitors and Precision Heat Index Instruments are offered to schools through a partnership between the MHSAA and School Health.

Yet, since the availability of such tools came to fruition two years back, fewer than 1,000 entries have been recorded, and many are multiple entries from the same schools.

Of the 772 entries, only 15 took place when the heat index was in excess of 104, while just 21 indicated an index of greater than 100. So, cooler temperatures could be playing a factor in the overall number of participation, particularly in the northern areas of the state.

Nearly all of the responses came during fall practices, with a few isolated cases coming during the spring.

As Mohney pointed out, all resources must be properly used in concert with one another to achieve desired results.

Reminders of the tools available to schools are disseminated throughout the state each summer.

HISTORY LESSONS

Tom Minter, recently retired from the MHSAA as assistant director, wore many hats while serving the Association, and a donned official's gear in numerous sports outside of business hours.

But, one of his finest refereeing efforts might have come during the 2009-10 and 2010-11 school years when he guided approximately 60 individuals representing 25 medical and professional organizations through an arduous process to upgrade the antiquated Physical Form to what is the standard today: the Preparticipation Physical Examination/Health History Form (see more in "the mhsaa vault," pages 24-25).

The form highlighted Stage 1 of the MHSAA's 4 Hs – Health Histories – and the current form is much more comprehensive, answering questions previously not asked during the quicker, more brief, evaluations.

Sudden cardiac death claims the lives of more than 300 Michigan children and young adults between the ages of 1-39 years annually. Yet, many of these deaths could be prevented through screening, detection, and treatment. One such way to detect high risk conditions that predispose to SCDY is through pre-participation sports screening of student-athletes, and the current physical form provides a mechanism.

While much more detailed, schools report that parents are more than willing to take the extra time and effort to complete the lengthier version.

"When the expanded form came out, people kiddingly made comments about its length, yet in today's day and age everyone understands we need all the information we can cultivate regarding health histories of our student athletes," said Mark Mattson, athletic director at Traverse City Central.

Down the state, feelings have been similar. "We don't have a problem at all here," said Anna Devitt, athletic secretary at Hartland High School. "Our parents take care of it, and haven't balked at the length at all."

Both agree, and are joined by many others across the state, that the next logical step is for the form to be converted to a fillable, online document so that records could be accessed by those in need via mobile, laptop or desktop.

Thus, in the "No H left behind" mantra that the MHSAA has assumed, an electronic option of the Health History form is in the early planning stages.

"As an increasing number of our schools strive to be 'paper-free,' or at least as much as possible, it is time to re-invent the delivery method for perhaps our most downloaded or distributed

PREPARTICIPATION PHYSICAL EVALUATION HISTORY FORM
(This form is to be filled out by the patient and parent prior to seeing the provider. The provider should keep this form in the chart.)

Date of Exam _____
Name _____
Sex _____ Age _____ Grade _____ School _____ Date of Birth _____
Sports _____

Medical History (Please list all the prescription and non-prescription medicines and supplements (herbal and nutritional) (with dosage) currently taking)

Medical Condition	Yes	No
1. Do you have any of the following conditions?		
2. Do you have any of the following conditions?		
3. Do you have any of the following conditions?		
4. Do you have any of the following conditions?		
5. Do you have any of the following conditions?		
6. Do you have any of the following conditions?		
7. Do you have any of the following conditions?		
8. Do you have any of the following conditions?		
9. Do you have any of the following conditions?		
10. Do you have any of the following conditions?		
11. Do you have any of the following conditions?		
12. Do you have any of the following conditions?		
13. Do you have any of the following conditions?		
14. Do you have any of the following conditions?		
15. Do you have any of the following conditions?		
16. Do you have any of the following conditions?		
17. Do you have any of the following conditions?		
18. Do you have any of the following conditions?		
19. Do you have any of the following conditions?		
20. Do you have any of the following conditions?		
21. Do you have any of the following conditions?		
22. Do you have any of the following conditions?		
23. Do you have any of the following conditions?		
24. Do you have any of the following conditions?		
25. Do you have any of the following conditions?		
26. Do you have any of the following conditions?		
27. Do you have any of the following conditions?		
28. Do you have any of the following conditions?		
29. Do you have any of the following conditions?		
30. Do you have any of the following conditions?		

document," MHSAA Executive Director Jack Roberts said. "Once again, as we move forward with our 'Heart' initiative for the coming school year, we are also intent on bringing other projects up to speed."

The masses are certainly enthused.

"That would be heavenly. An online version that would prevent people from submitting the forms until all the required information was in place would be fantastic," said Mattson, who has had to turn back, or hold out students while awaiting completed forms, whether it be at Marquette, Maple City Glen Lake, or his current post in Traverse City. "It's always been the same; people move too quickly and overlook required fields. It would prevent two things: one, having to hold kids out while waiting for a signature, and two, prevent parents from having to drive in to the athletic office to sign or fill in that last field. We'd know we were getting a completed form."

At Hartland, where athletic director Jason Reck created an online emergency contact form, a system is in place which allows coaches, administrators and trainers to share necessary data for all student-athletes in addition to the MHSAA forms.

"Our parents *love* the online emergency contact form, and we require them to fill it out every season, not just once a year," Devitt said. "Sometimes an athlete gets injured during one season and the next season's coach wants to know about it."

The information on the form is populated into an Excel spreadsheet, which Reck, Devitt, the school trainer and all coaches have access to. They can tailor the data by sport and pull it to their mobile devices.

"We're trying to go completely paperless and the MHSAA physical form would be another step," Devitt said. "Our parents and doctor's offices would love it."



Spring Registration
4365 HOURS 0 HRS 00 MIN 00 SEC

Student Name: _____
Email: _____
Password: _____

Hartland HS developed an online system for required emergency contact information in addition to the MHSAA forms.

Anyone Can Save a Life Focuses on Preparedness

It was 2008 when Jody Redman and staff at the Minnesota State High School League developed an emergency action plan to provide guidance and procedure in the event of sudden cardiac arrest during scholastic athletic competition.

The desired response from schools upon receipt of the plan was, well, less than enthusiastic.

"Only about 40 percent of our schools used the information and implemented the program," said Redman, associate director for the MSHSL. "Our focus was completely on sudden cardiac arrest, that being the worst-case scenario regarding athletic-related health issues."

The MSHSL asked the University of Minnesota to survey its member schools, and results showed that the majority of schools not on board simply felt a sudden cardiac arrest "would never happen at their school." Naive or not on the schools' part, that was the reality, so Redman went back to revise the playbook.

"We expanded the plan to deal with all emergencies, rather than specific incidents," Redman said. "Now it's evolved so that we are prepared to deal with a variety of situations which put participants at risk. We shifted gears and got more schools to participate."

plan, and as they answer questions, the information will automatically generate a PDF of the Emergency Action Plan (EAP) which they can edit at a later date as information changes."

Schools will find five major components of the program to be received this summer: the first is an implementation checklist for the AD, explaining their role. Next are sections for in-person training, online training and event staff training. The last item contains a variety of resources that will ensure the successful implementation of a comprehensive emergency response to all emergencies.

Generally speaking, the program prompts schools to assemble preparedness teams, broken into four categories: a 911 team, a CPR AED team, an AED team and a HEAT STROKE team. The groups are made up of coaches and their students who will be in close proximity to all after-school activities.

"The reality about school sports is, at 3:30 every day the office closes and any type of medical support ceases to exist," Redman said. "We then send thousands of students out to gyms, courts, fields and rinks to participate without systemic support for emergencies. This program puts into place that systemic support."



Jody Redman

"The reality about school sports is, at 3:30 every day the office closes and any type of medical support ceases to exist. We then send thousands of students out to gyms, courts, fields and rinks to participate without systemic support for emergencies. This program puts into place that systemic support." – MSHSL Associate Director Jody Redman

Did they ever. And not just in Minnesota.

This summer, the "Anyone Can Save A Life" program, authored by the MSHSL and the Medtronic Foundation, will be disseminated to high schools nationwide with the financial support of the NFHS Foundation. In its final tuneup stages, the program will reach schools in time for the 2015-16 school year. State associations will inform the NFHS as to how many programs are needed, and then send to schools within their states.

Once received, schools will find that there are two options for implementation, via in-person training, or online.

"The in-person method is facilitated by the athletic administrator with the assistance of a training DVD" Redman said. "The important element is the follow through, ensuring coaches return their completed Emergency Action Plan (EAP). With the e-learning module on anyonecansavealife.org, individuals will complete an e-learning module that will walk them through the details of their specific

Another stark reality is that the majority of schools in any state do not have full-time athletic trainers. Even those for those fortunate enough to employ such personnel, it's most likely the training "staff" consists of one person. That one body can only be in one place at one time, and on wide-spread school campuses the time it takes to get from one venue to another could be the difference between life and death.

"Athletic trainers can champion the program, but someone needs to oversee that every coach has a completed EAP in place," Redman said. "For every minute that goes by when a cardiac arrest occurs, chance for survival decreases by 10 percent."

Thus, it's imperative to train and grant responsibility to as many people as possible, including student-athletes. In fact, students are a vital component to having a successful EAP. Students will be put in position to call 911, to meet the ambulance at a pre-determined access point, to locate the nearest AED, to make sure emersion tubs are filled for hot-weather practices, and for those who are

trained to assist with CPR. Coaches will identify students at the beginning of the season and prior to an emergency taking place. They will be provide them with the details of the job they are assigned to so they will be ready to assist in the event of an emergency.

“We have game plans for every sport, and for every opponent on our schedule,” Redman said. “But we don’t have a plan to save the life of a member of our team or someone attending a game at our school.

“This is about developing a quick and coordinated response to every emergency so we give someone in trouble a chance at survival, and then practicing it once or twice a season. We have ‘drop the dummy’ drills where we drop a dummy and evaluate how it went, and how everyone performed. In one scenario, it’s the coach that goes down, and then you have a group of 15- or 16-year-olds standing there. That’s why students have to take ownership of this, too.”

The key to an effective emergency action plan is to utilize and empower students in every sport and at every level to be a part of the response team. Following are brief descriptions of the teams.

The 911 Team

- Two students will call 911 from a pre-determined phone and provide the dispatcher with the location and details of the emergency.
- Two students will meet the ambulance at a pre-determined access point and will take them to the victim.
- Two students will call the athletic trainer, if one is available, and the athletic administrator and alert them to the emergency.

The CPR Team

- The coach is the lead responder on this team and is responsible for attending to the victim and administering CPR, if necessary, until trained medical personnel arrive.
- One person is capable of providing effective CPR for approximately two minutes before the quality begins to diminish. Having several students trained and ready to administer CPR will save lives.

The AED Team

- Two students will retrieve the AED and take it to the victim.
- Two students will physically locate the athletic trainer, if one is available, and take him or her to the victim.

The Heat Stroke Team

- Two students identify locations of emersion tub, water source, ice source and ice towels.
- Two students prepare tub daily for practices and events.

For more information, visit anyonecansavealife.org or contact the MSHSL.

ANYONE CAN SAVE A LIFE

Plan. Learn. Save.

A Life Saving Lesson

Anyone can save a life, and the volleyball team at Two Harbors (Minnesota) High School knows this as well as anyone.

At practice, one of the volleyball players suddenly collapsed. But there was no panic because the team knew what to do. Just one day earlier, Coach Chaffee had implemented “Anyone Can Save A Life” – an Emergency Action Plan Program developed by the Minnesota State High School League (MSHSL) and the Medtronic Foundation. She talked to her players about what to do in the event of an emergency. She assigned students to each of the three Student Response Teams and explained their responsibilities. “Just the day before, we had written down who was going to do what,” Chaffee said. “Last year our basketball team did a mock run-through, and we were planning to do that the following day, but we never got the chance.” Instead, they got the real thing.

“In the middle of practice she fell down,” Chaffee said. “We realized she was having a seizure and I ran over to her and said, ‘Somebody call 911’ and that’s really all it took. Each of the girls knew what to do. One of the girls went to her phone and called 911, another ran to get the AED (automated external defibrillator), others went to the front door to meet the ambulance, and to get the building principal. Everyone just did their job.”

The player was taken to a local hospital and everything turned out fine. The MSHSL’s “Anyone Can Save A Life” program continues to play a vital role in helping schools prepare for such emergencies.



The Value of the Secondary School Athletic Trainer

Worth, Return on Investment, Metrics, Safety, Value – what do all these words have in common? They all have been used as part of the conversation regarding the importance and need of the secondary school athletic trainer.

A major concern within interscholastic athletics centers on safety, especially in light of the public's focus on concussions, sudden cardiac death and heat-related deaths, and this heightens the value of athletic trainers in the secondary school setting.

The majority of school administrators probably understand the need for an athletic trainer to coordinate the athletic health care for their student-athletes. Also, many would like to have the services of an athletic trainer if they do not already employ one – either as a school employee or a clinical outreach situation in cooperation with a local hospital or physician's clinic.

In a recent study conducted by the Korey Stringer Institute and supported by the National Athletic Trainers' Association, 70 percent of the secondary schools in this country employ the services of an athletic trainer. According to the recent NFHS Recommendations and Guidelines for Minimizing Head Impact Exposure and Concussion Risk in Football, "an athletic trainer is a key component in any strategy to minimize injury risk and optimize safety for all participants."

Due to the current educational economy, it becomes increasingly important for school administrators to show taxpayers that they are getting a substantial return on their investment. Metrics are used to gauge the success of classroom instruction. Standardized testing is gaining public attention as a means to place a value on the adequacy of today's educational process. In the quest to justify the expense of having a certified athletic trainer on staff,

administrators are seeking to understand the value and worth of these health-care professionals.

The concept of value and worth is difficult to grasp if the enterprise is not generating revenue. Whereas "worth" can be considered the monetary value of a service, value is a bit more abstract. Value is viewed by many as the "the extent to which a service's worth is perceived."

The value of an athletic trainer within the secondary school setting may differ in the eyes of the principal, school board member, athletic director,

Athletic trainers are increasingly becoming the coordinators of "Return-to-Learn" protocols for student-athletes who have suffered concussions.

teacher, coach, parent and student-athlete. For example, the value of the athletic trainer as perceived by the athletic director may be as simple as keeping safety-related issues off of his or her desk; the value to the school board member may be the reduction in liability risks.

In the eyes of the principal, an athletic trainer provides positive public relations and the peace of mind that everything reasonable and prudent is being done to minimize the risk for those involved in educational athletics. The coach may see the athletic trainer as invaluable when it comes to making unbiased return-to-play decisions, eliminating daily health-care concerns so that he or she may concentrate on the educational aspects of interscholastic athletics.

In addition to providing peace of mind to the parent, an athletic trainer is also an invaluable resource for accessing the medical community, navigating the health insurance environment and serving as another set of eyes to monitor their child.

Risk Minimization

The ability of the athletic trainer to help minimize the risk involved with interscholastic athletics is critical even though serious or catastrophic injuries are significantly rare. Also, an immediate response is crucial to preventing sudden death in many cases.

Athletic trainers work together with coaches, administrators, local emergency management personnel and other district staff to ensure that plans are established to minimize the risk associated with interscholastic athletics. The secondary school athletic trainer is in a unique position to monitor health safety procedures, students, facilities, practices and games on a daily basis.

One example of the expertise that the athletic trainer brings to the concept of risk minimization is the development and implementation of venue-specific action plans. The athletic trainer is most





qualified school employee to identify unique circumstances that may impact the health and safety of student-athletes. Likewise, the athletic trainer is well-positioned to help facilitate injury prevention strategies while working with coaches, which should enhance student-athlete performance and competition outcomes.

Medical Services

The athletic trainer is well-positioned to consider the many factors involved in the medical referral process, including parental preferences, health insurance limitations and medical specialization, which is immensely helpful to parents. An athletic trainer can facilitate open communication between the student, parents, physicians and coaches, which can be invaluable to parents.

In many schools, the athletic trainer and the school nurse work closely to provide health-care services for the entire student population. In addition, the daily presence of the athletic trainer provides an opportunity for on-site injury rehabilitation and reconditioning, which is paramount to the successful and safe return to play of the student-athlete after an injury.

Cost Containment

Since the cost of rehabilitation and reconditioning services can be extensive, having those services provided by the athletic trainer within the school environment can be a tremendous savings. Parents frequently report to athletic trainers about the cost savings that the athletic trainer was able to provide within the school setting. In larger high schools, athletic trainers commonly provide hundreds of thousands and, in some cases, millions of dollars' worth of injury-care services per year.

The availability of this "in-house" care means that the parent does not have to leave his or her place of employment to transport the student, losing valuable work time. This also aids employers by keeping their employees on the job. When sup-

plied with a cost analysis of the health-care services provided by their athletic trainers, many school administrators are astounded by the savings afforded to parents and the community.

The ability of the athletic trainer to contain costs as it relates to a school district's liability insurance premiums provides additional value. Athletic trainers create standard prevention protocols, including regular inspections of playing fields and facilities, and monitoring the standard protective equipment worn by athletes in various sports.

Academic Success

Athletic trainers are positioned to influence student success as well. Absenteeism can be minimized by allowing student-athletes to remain in school rather than seeking outside injury-care services. Athletic trainers are increasingly becoming the coordinators of "Return-to-Learn" protocols for student-athletes who have suffered concussions. Athletic trainers who are available during the school day can treat athletes during lunch periods, study halls and unscheduled time rather than interrupting the educational process when the student must leave school in order to obtain similar care.

It is common for the athletic trainer to be asked to provide life skills education when approached by a particular student-athlete. The athletic trainer's advice is frequently sought regarding career choices pertaining to the medical field. Parents and students appreciate this unexpected value that the athletic trainer brings to the educational process through his or her experience and expertise.

Organization and Administration

Athletic trainers can also be valuable to the school environment through their organizational and administrative duties. Athletic trainers deal with the management of medical records, including pre-participation examination, concussion management programs, the monitoring of wrestling hydration testing, HIPPA/FERPA compliance, substance abuse education programs, as well as health and liability insurance – to name a few. This component of their value has positive and direct effects on the school's administrative staff.

The value of the athletic trainer is multidimensional, including risk minimization, cost containment, medical services, academic success as well as administration and organization. School administrators, school board members and athletic directors as well as parents, students and community members all benefit from the unique value that is provided by an athletic trainer.

— Brian Robinson

Brian Robinson recently retired after 37 years as the head athletic trainer at Glenbrook South High School in Glenview, Illinois. He is presently a member of the Athletic Training Education Program faculty at Northern Illinois University, and a member of the NFHS High School Today Publications Committee. Email: brobinsonatc@gmail.com.

The Health and Safety Journey . . .

We are just completing year six of eight years in which we have been addressing the four important health and safety issues that, for ease of conversation, we call the “Four Hs.”

During the 2009-10 and 2010-11 school years, our focus was on Health Histories. During this time we made enhancements in the preparticipation physical examination form, stressing the student’s health history, which we believe was and is the essential first step to participant health and safety.

During the 2011-12 and 2012-13 school years, our focus was on Heads. We were an early adopter of removal-from-play and return-to-play protocols, and our preseason rules/risk management meetings for coaches included information on concussion prevention, recognition and aftercare.

Without leaving that behind, during the 2013-14 and 2014-15 school years, our focus was on Heat – acclimatization. We adopted a policy to



manage heat and humidity – it is recommended for regular season and it’s a requirement for MHSAA tournaments. The rules/risk management meetings for coaches during these years focused on heat and humidity management.

At the mid-point of this two-year period, the MHSAA adopted policies to enhance acclimatization at early season practices and to reduce head contact at practices all season long.

Without leaving any of the three previous health and safety “H’s” behind, during the 2015-16 and 2016-17 school years, our focus will be on Hearts – sudden cardiac arrest and sudden cardiac death. Coinciding with this emphasis is the requirement that all high school level, varsity level head coaches be CPR certified starting this fall. Our emphasis will be on AEDs and emergency action plans – having them and rehearsing them; and this summer we are expecting to deliver to every high school free of charge the “Anyone Can Save a Life” program de-

veloped in Minnesota and being distributed nationwide with the assistance of the National Federation of State High School Associations.

On Feb. 10, bills were introduced into both the United States Senate and United States House of Representatives, together called the “Safe Play Act (see inset, next page),” which addressed three of the four health and safety “H’s” just described: Heat, Hearts and Heads.

For each of these topics, the federal legislation would mandate that the director of the Centers for Disease Control develop educational material and that each state disseminate that material.

For the heat and humidity management topic, the legislation states that schools will be required to adopt policies very much like the “MHSAA Model Policy to Manage Heat and Humidity” which the MHSAA adopted in March of 2013.

For both the heart and heat topics, schools will be required to have and to practice emergency action plans like we have been promoting in the past and will be distributing to schools this summer.

For the head section, the legislation would

“We have been on target in Michigan with our four Hs – it’s like they read our playbook of priorities before drafting this federal legislation.”

amend Title IX of the 1972 Education Amendments and would eliminate federal funding to states and to schools which fail to educate their constituents or fail to support students who are recovering from concussions. This support would require multi-disciplinary concussion management teams that would include medical personnel, parents and others to provide academic accommodations for students recovering from concussions that are similar to the accommodations that are already required of schools for students with disabilities or handicaps.

This legislation would require return-to-play protocols similar to what we have in Michigan, and the legislation would also require reporting and recordkeeping that is beyond what occurs in most places.

This proposed federal legislation demonstrates two things. First, that we have been on target in Michigan with our four Hs – it’s like they read our playbook of priorities before drafting this federal legislation.

This proposed federal legislation also demonstrates that we still have some work to do.

And what will the following two years – 2017-18 and 2018-19 – bring? Here are some aspirations

... a Look Back and a Gallop Ahead



Gotta Have Heart . . .

...and the rest of the Hs. While the upcoming school year focuses on CPR, cardiac readiness and action plans, the MHSAA will continue to tweak its playbook regarding health history, head injuries and heat acclimatization.

– some predictions, but not quite promises – of where we will be.

First, we will have circled back to the first “H” – Health Histories – and will be well on our way to universal use of paperless preparticipation physical examination forms and records.

Second, we will have made the immediate reporting and permanent recordkeeping of all head injury events routine business in Michigan school sports, for both practices and contests, in all sports and at all levels..

Third, we will have added objectivity and backbone to removal from play decisions for suspected concussions at both practices and events where medical personnel are not present; and we could be

a part of pioneering “telemedicine” technology to make trained medical personnel available at every venue for every sport where it is missing today.

Fourth, we will have provided a safety net for families who are unable to afford no-deductible, no exclusion concussion care insurance that insists upon and pays for complete recovery from head injury symptoms before return to activity is permitted.

We should be able to do this, and more, without judicial threat or legislative mandate. We won’t wait for others to set the standards or appropriate the funds, but be there to welcome the requirements and resources when they finally arrive.

Safe Play Act — H.R.829 — 114th Congress (2015-2016) Introduced in House (02/10/2015)

Supporting Athletes, Families and Educators to Protect the Lives of Athletic Youth Act or the SAFE PLAY Act

Amends the Public Health Service Act to require the Centers for Disease Control and Prevention (CDC) to develop public education and awareness materials and resources concerning cardiac health, including:

- information to increase education and awareness of high risk cardiac conditions and genetic heart rhythm abnormalities that may cause sudden cardiac arrest in children, adolescents, and young adults;
- sudden cardiac arrest and cardiomyopathy risk assessment worksheets to increase awareness of warning signs of, and increase the likelihood of early detection and treatment of, life-threatening cardiac conditions;
- training materials for emergency interventions and use of life-saving emergency equipment; and
- recommendations for how schools, childcare centers, and local youth athletic organizations can develop and implement cardiac emergency response plans.

Requires the CDC to: (1) provide for dissemination of such information to school personnel, coaches, and families; and (2) develop data collection methods to determine the degree to which such persons have an understanding of cardiac issues.

Directs the Department of Health and Human Services to award grants to enable eligible local educational agencies (LEAs) and schools served by such LEAs to purchase AEDs and implement nationally recognized CPR and AED training courses.

Amends the Elementary and Secondary Education Act of 1965 to require a state, as a condition of receiving funds under such Act, to certify that it requires: (1) LEAs to implement a standard plan for concussion safety and management for public schools; (2) public schools to post information on the symptoms of, the risks posed by, and the actions a student should take in response to, a concussion; (3) public school personnel who suspect a student has sustained a concussion in a school-sponsored activity to notify the parents and prohibit the student from participating in such activity until they receive a written release from a health care professional; and (4) a public school’s concussion management team to ensure that a student who has sustained a concussion is receiving appropriate academic supports.

Directs the National Oceanic and Atmospheric Administration to develop public education and awareness materials and resources to be disseminated to schools regarding risks from exposure to excessive heat and humidity and recommendations for how to avoid heat-related illness. Requires public schools to develop excessive heat action plans for school-sponsored athletic activities.

Requires the CDC to develop guidelines for the development of emergency action plans for youth athletics.

Authorizes the Food and Drug Administration to develop information about the ingredients used in energy drinks and their potential side effects, and recommend guidelines for the safe use of such drinks by youth, for dissemination to public schools.

Requires the CDC to: (1) expand, intensify, and coordinate its activities regarding cardiac conditions, concussions, and heat-related illnesses among youth athletes; and (2) report on fatalities and catastrophic injuries among youths participating in athletic activities.

Telemedicine on the Horizon for Schools?

The biggest barrier to providing health care professionals at each venue on school campuses is obvious: numbers. Most schools are lucky to have one athletic trainer on staff, much less doctors or nurses at their disposal.

But, what if medical personnel were available 24/7 to diagnose and answer questions whenever the situation called for such expertise? The scenario is not as far-fetched as one might think.

The practice of telemedicine is growing, and like any technology-based industry, it's only going to expand. Such procedures could be used in the near future in cooperation with school systems to provide analysis and care via mobile devices and cameras.

A brief description of telemedicine follows.

What is Telemedicine?

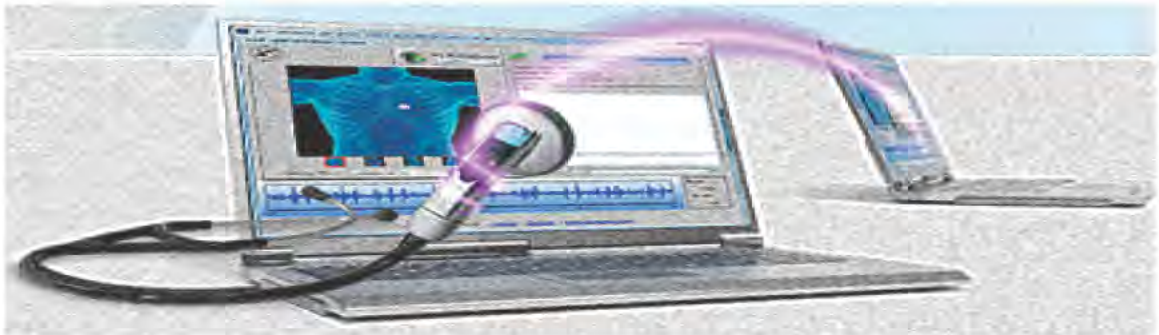
Formally defined, telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve a patient's clinical health status. Telemedicine includes a growing variety of applications and services using two-way video, email, smart phones, wireless tools and other forms of telecommunication technology.

health to be interchangeable terms, encompassing a wide definition of remote healthcare. Patient consultations via video conferencing, transmission of still images, e-health including patient portals, remote monitoring of vital signs, continuing medical education, consumer-focused wireless applications and nursing call centers, among other applications, are all considered part of telemedicine and telehealth.

While the term telehealth is sometimes used to refer to a broader definition of remote healthcare that does not always involve clinical services, ATA uses the terms in the same way one would refer to medicine or health in the common vernacular. Telemedicine is closely allied with the term health information technology (HIT). However, HIT more commonly refers to electronic medical records and related information systems while telemedicine refers to the actual delivery of remote clinical services using technology.

What Services Can Be Provided By Telemedicine?

Sometimes telemedicine is best understood in terms of the services provided and the mechanisms used to provide those services. Some examples:



Starting out over 40 years ago with demonstrations of hospitals extending care to patients in remote areas, the use of telemedicine has spread rapidly and is now becoming integrated into the ongoing operations of hospitals, specialty departments, home health agencies, private physician offices as well as consumer's homes and workplaces.

Telemedicine is not a separate medical specialty. Products and services related to telemedicine are often part of a larger investment by health care institutions in either information technology or the delivery of clinical care. Even in the reimbursement fee structure, there is usually no distinction made between services provided on site and those provided through telemedicine and often no separate coding required for billing of remote services. ATA has historically considered telemedicine and tele-

Primary care and specialist referral services may involve a primary care or allied health professional providing a consultation with a patient or a specialist assisting the primary care physician in rendering a diagnosis. This may involve the use of live interactive video or the use of store and forward transmission of diagnostic images, vital signs and/or video clips along with patient data for later review.

Remote patient monitoring, including home telehealth, uses devices to remotely collect and send data to a home health agency or a remote diagnostic testing facility (RDTF) for interpretation. Such applications might include a specific vital sign, such as blood glucose or heart ECG or a variety of indicators for homebound patients. Such services can be used to supplement the use of visiting nurses.



Consumer medical and health information includes the use of the Internet and wireless devices for consumers to obtain specialized health information and on-line discussion groups to provide peer-to-peer support.

Medical education provides continuing medical education credits for health professionals and special medical education seminars for targeted groups in remote locations.

What Delivery Mechanisms Can Be Used?

Networked programs link tertiary care hospitals and clinics with outlying clinics and community health centers in rural or suburban areas. The links may use dedicated high-speed lines or the Internet for telecommunication links between sites. ATA estimates the number of existing telemechanic networks in the United States at roughly 200 providing connectivity to over 3,000 sites.

Point-to-point connections using private high speed networks are used by hospitals and clinics that deliver services directly or outsource specialty services to independent medical service providers. Such services include radiology, stroke assessment, mental health and intensive care services.

Monitoring center links are used for cardiac, pulmonary or fetal monitoring, home care and related services that provide care to patients in the home. Land-line or wireless connections are often used to communicate between the patient and the center although some systems use the Internet.

Web-based e-health patient service sites provide direct consumer outreach and services over the Internet. Under telemedicine, these include those sites that provide direct patient care.

What Are the Benefits of Telemedicine?

Telemedicine has been growing rapidly because it offers four fundamental benefits:

Improved Access – For over 40 years, telemedicine has been used to bring healthcare services to patients in distant locations. Not only does telemedicine improve access to patients but it also allows physicians and health facilities to expand

their reach, beyond their own offices. Given the provider shortages throughout the world--in both rural and urban areas--telemedicine has a unique capacity to increase service to millions of new patients.

Cost Efficiencies – Reducing or containing the cost of healthcare is one of the most important reasons for funding and adopting telehealth technologies. Telemedicine has been shown to reduce the cost of healthcare and increase efficiency through better management of chronic diseases, shared health professional staffing, reduced travel times, and fewer or shorter hospital stays.

Improved Quality – Studies have consistently shown that the quality of healthcare services delivered via telemedicine are as good those given in traditional in-person consultations. In some specialties, particularly in mental health and ICU care, telemedicine delivers a superior product, with greater outcomes and patient satisfaction.

Patient Demand – Consumers want telemedicine. The greatest impact of telemedicine is on the patient, their family and their community. Using telemedicine technologies reduces travel time and related stresses for the patient. Over the past 15 years study after study has documented patient satisfaction and support for telemedical services. Such services offer patients the access to providers that might not be available otherwise, as well as medical services without the need to travel long distances.

Just as telemedicine technology has already proven to bring improvements in the pace and professionalism of care for strokes in Georgia and seizures in Michigan, it will also very soon bring specialized medical expertise to the sidelines of high school sporting events in parts of our state and for sports and levels of teams where it is lacking today.

MHSAA Executive Director Jack Roberts has been exploring such possibilities through the NFHS Network for which he serves as board chair. Key Network investors are engaged in discussions, and the School Broadcast Program might be involved

This issue's trip to the "vault" only goes back a few years, to the Fall 2011 benchmarks when the MHSAA's 4H plan for health and safety took flight. The following re-print examines the remaking of the Physical Form into the more comprehensive Preparticipation Health History Form.

Physical Form Undergoes Healthy Reform

Perhaps the most downloaded form since the MHSAA took its first steps into cyberspace in 1998 is the sports physical form.

In fact, some iteration of the pre-participation physical clearance form is likely the most oft-used form in MHSAA history. Records show that as early as 1929, schools were required to have in the superintendent's or principal's office

invited to sit in," said Tom Minter, (then) MHSAA Assistant to the Executive Director. "They knew we were in the process of improving our physical card, and this medical community desired that their consensus for best practices could be incorporated in the changes that would be made.

"Some of the medical history questions on our card were not relevant to current medical practice, and not extensive enough."

■ PREPARTICIPATION PHYSICAL EVALUATION HISTORY FORM

(This form is to be filled out by the patient and parent prior to seeing the provider. The provider should keep this form in the chart.)

Date of Exam _____
 Name _____ Date of birth _____
 Sex _____ Age _____ Grade _____ School _____ Sport(s) _____

Medicines and Allergies: Please list all of the prescription and over-the-counter medicines and supplements (herbal and nutritional) that you are currently taking.

Do you have any allergies? Yes No If yes, please identify specific allergy below.
 Medicines Pollen Food Stinging Insects

Explain "Yes" answers below. Circle questions you don't know the answers to.

GENERAL QUESTIONS	Yes	No
1. Has a doctor ever denied or restricted your participation in sports for any reason?		
2. Do you have any ongoing medical conditions? If so, please identify: <input type="checkbox"/> Asthma <input type="checkbox"/> Anemia <input type="checkbox"/> Diabetes <input type="checkbox"/> Infections Other: _____		
3. Have you ever spent the night in the hospital?		
4. Have you ever had surgery?		
HEALTHY HEALTH QUESTIONS ABOUT YOU	Yes	No
5. Have you ever passed out or nearly passed out DURING or AFTER exercise?		
6. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?		
7. Does your heart ever race or skip beats (irregular beats) during exercise?		
8. Has a doctor ever told you that you have any heart problems? If so, check all that apply: <input type="checkbox"/> High blood pressure <input type="checkbox"/> A heart murmur <input type="checkbox"/> High cholesterol <input type="checkbox"/> Irregular heartbeat <input type="checkbox"/> Kawasaki disease		

MEDICAL QUESTIONS	Yes	No
26. Do you cough, wheeze, or have difficulty breathing during or after exercise?		
27. Have you ever used an inhaler or taken asthma medicine?		
28. Is there anyone in your family who has asthma?		
29. Were you born without or are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?		
30. Do you have groin pain or a painful bulge or hernia in the groin area?		
31. Have you had infectious mononucleosis (mono) within the last month?		
32. Do you have any rashes, pressure sores, or other skin problems?		
33. Have you had a herpes or MRSA skin?		
34. Have you ever had a head injury or concussion?		
35. Have you ever had a hit or blow to the head that caused confusion, prolonged headache, or memory problems?		
36. Do you have a history of seizure disorder?		
37. Do you have headaches with exercise?		
38. Have you ever had numbness, tingling, or weakness in your arms or legs during or after exercise?		

The MHSAA Physical Exam/Medical History Form now includes a comprehensive questionnaire, the end-result of a productive and cooperative effort spearheaded by the MHSAA and the Michigan Department of Community Health.

"physical examination statements for all competitors."

During the 2010-11 school year the form underwent major content expansion and enhancements through a combined effort with the Michigan Department of Community Health.

The revised, comprehensive form – the MHSAA Physical Exam/Medical History Form – is now available at MHSAA.com at the top of the Forms & Resources page.

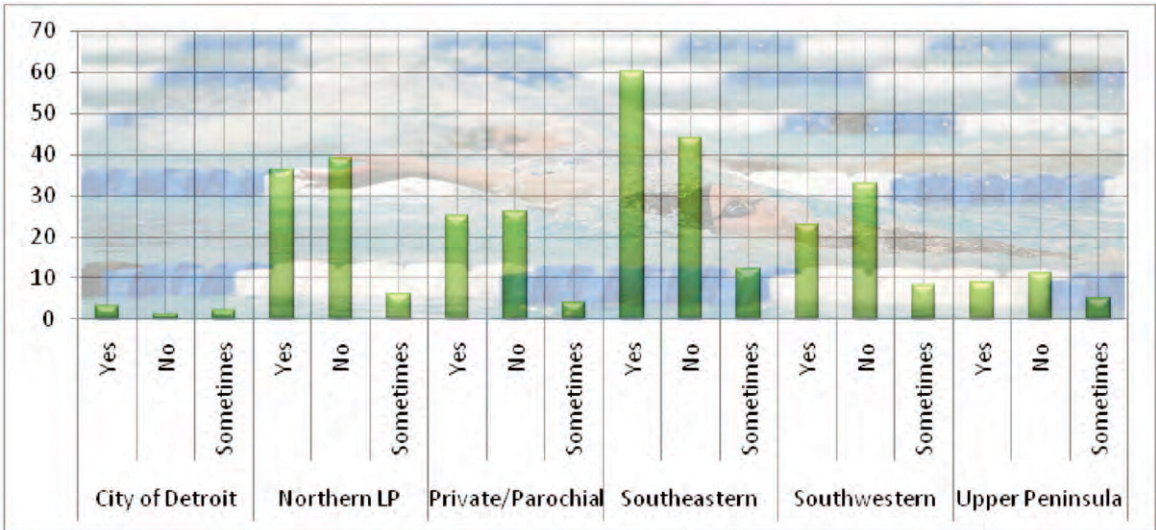
"A work group was convened by the Michigan Department of Community Health and I was

Approximately 60 individuals representing 25 organizations gathered several times during 2009-10 to develop the Physical Exam/Medical History Form currently on MHSAA.com.

The impetus for change can be traced to 2007-08 according to Deb Duquette, project manager for Sudden Cardiac Death of the Young (SCDY) with the Michigan Department of Community Health (MDCH).

"A collection of statewide data showed us that SCDY occurred quite a bit more than we thought," said Duquette. "This finding led to an

benchmarks



For most areas of the state it's nearly a 50-50 split as to whether schools offer a preferred list of medical practitioners for physicals.

extensive review of 25 Michigan cases of SCDY by a group of experts who then compiled a list of 21 action items to prevent future cases of SCDY. One item that recurred in many of the cases – and it's important to emphasize that this was just one item – was sports participation screening.”

The frequency with which the MHSAA document surfaced in the sea of paperwork comprising Duquette's study caused her to tag the physical forms as one of the “action items” for further research: what it was, who the author was, the intent of the card, and, ultimately, its content.

“We called the MHSAA and I was directed to Tom (Minter). He asked that the MDCH serve as the moderator for the group that would provide input for the revision of the form,” Duquette said. “I can't say enough about Tom's ability to keep such a diverse group with various agendas on task.”

It was an all-star lineup of medical associations to be sure, including personnel from the following: American Heart Association, American College of Cardiology - Michigan Chapter, Michigan State Medical Society, American Association of Pediatrics - Michigan Chapter, Michigan Association of Family Practice, Michigan Association of Osteopathic Physicians, Michigan Association of Physicians Assistants, Michigan Certified Nurse Practitioners, and the Gillary Foundation.

The last group, the Gillary Foundation, is a charitable foundation established in memory of Kimberly Anne Gillary, a Troy Athens HS student who suffered a cardiac arrest during a water polo game in 2000. The mission is to ensure that every Michigan high school has at least one AED and staff members who are certified in CPR and the use of an AED.

Randall J. Gillary, Kimberly's father and president of the foundation was a positive presence in the meetings to develop the enhanced MHSAA form. (See “Shots on Goal,” page 3).

“I think he was at every meeting,” Minter said. “It was a broad cross-section of experts and the group met until a consensus was reached on what should be added to the form.”

Key to adopting the revised form was the medical history portion of the document. It was this section which received the greatest attention and expansion.

“The group produced a history questionnaire which was adopted and included verbatim,” Minter said. “It was felt that the previous cards did not sufficiently address the medical history of the student-athlete's family.”

School administrators and other interested parties have a choice of downloading a two- or four-page form from MHSAA.com. The same content is included on both forms. The four-page form offers a manageable document for school personnel concerned with student privacy issues. The first two pages cover consent and clearance, meeting minimum MHSAA requirements for participation. Pages three and four include the medical history and examination information which can be retained by the medical examiner.

So thorough is the new document that the MDCH also links to the form from its website, michigan.gov/mdch.

“It needs to be emphasized that this is a working document,” Minter said. “It's always subject to revision and review with the MDCH and medical communities.”

— Reprinted from the 2011 Fall benchmarks

Team Wrestling Finals on the Move to Mt. Pleasant

The selection of a new venue for its Team Wrestling Finals highlighted actions taken by the Representative Council of the Michigan High School Athletic Association during its annual Winter Meeting on March 27 in East Lansing.

The Team Wrestling Finals will be hosted by McGuirk Arena at Central Michigan University in Mount Pleasant for two years beginning with the 2016 tournament. The Team Wrestling Finals previously had been hosted by Kellogg Arena in Battle Creek since the event's inception in 1988.

McGuirk, formerly Rose Arena, is part of the CMU Events Center and reopened in 2010 after the facility underwent \$22.5 million in renovations. McGuirk seats 4,867 fans for wrestling competitions, and the building also features adjacent practice areas that will be utilized by teams competing at the MHSAA Finals.

Rose Arena formerly served as host of the MHSAA Girls Basketball Finals from 1997-2003.

"We are grateful to the athletic directors, staff and volunteers whose time and energy factored heavily into creating and growing the Team Wrestling Finals at Kellogg Arena," MHSAA Executive Director Jack Roberts said. "The decision to move from Battle Creek was not an easy one. However, we believe Central Michigan University offers us a fantastic opportunity to continue growing one of our most popular championship events."

The Representative Council also continued discussions on three issues which may require action at meetings later this calendar year.

Continuing its examination of athletics at the junior high/middle school level, the Council discussed recommendations submitted by the MHSAA's Junior High/Middle School Committee, including one which may come up for vote at the Council's May meeting. It is a request for a membership vote to amend the MHSAA Constitution to allow for school membership beginning at the 6th grade. If the Council approves, the amendment vote likely would occur in late October after another round of membership meetings.

The Council also continued its discussion of potential changes to out-of-season coaching rules and considered results of surveys taken during the MHSAA's Update Meetings in the fall and by athletic directors and leaders of leagues and conferences during the late fall and winter. The major changes in rules that were proposed for discussion last summer have not gained traction with the MHSAA membership, but three modifications intended to give school coaches longer and more flexible contact with their student-athletes out of season during the school year will receive Council action in May.

Continuing its work regarding the eligibility of international students, the Council also approved that MHSAA staff continue reviewing school-operated international student programs for the purpose of granting students athletic eligibility at MHSAA schools. A proposal first approved at the March 2014 meeting granted the MHSAA authority to grant athletic eligibility to students placed through an Approved International Student Program that had not been accepted for listing by the Council on Standards for International Educational Travel (CSIET), so long as that Approved International Student Program is not eligible for CSIET consideration and listing. CSIET will only review existing programs, but the MHSAA's supplemental process will allow programs too new for the CSIET process to gain approval for 2015-16.

Those international students placed through an Approved International Student Program are eligible for a maximum of the first two consecutive semesters or three consecutive trimesters at any secondary school in the United States, after which the student is ineligible for interscholastic athletic competition at any MHSAA member school for the next academic year. International students who do not meet one of the residency exceptions recognized by the MHSAA or are not enrolled through an Approved International Student Program or CSIET-listed program may become eligible after one semester to participate at the subvarsity level only.

The Representative Council is the legislative body of the MHSAA. All but five members are elected by member schools. Four members are appointed by the Council to facilitate representation of females and minorities, and the 19th position is occupied by the Superintendent of Public Instruction or designee.



Following a run of nearly more than two decades at Battle Creek's Kellogg Arena, the MHSAA Team Wrestling Finals will move to Central Michigan University in 2016.

Matson Named 2015 Forsythe Winner



Hugh Matson

Hugh Matson began his career in educational athletics as a coach, left a lasting impact as a longtime athletic director, and more than a half century after he started in high school sports continues as an official. In recognition of his longtime service to high school athletes and pioneering efforts in the Saginaw area, Matson was named the 2015 recipient of the Michigan High School Athletic Association's Charles E. Forsythe Award.

The annual award is in its 38th year and is named after former MHSAA Executive Director Charles E. Forsythe, the Association's first full-time and longest-serving chief executive. Forsythe Award recipients are selected each year by the MHSAA Representative Council, based on an individual's outstanding contribution to the interscholastic athletics community. Matson received his honor during the Boys Basketball Finals on March 28 at the Breslin Center in East Lansing.

Matson, 79, has deep roots in education. He grew up in Newaygo, where his mother Velma was a longtime educator and with his father Francis established a scholarship for graduating seniors still awarded today. Hugh Matson took his first teaching job in 1957, at Mattawan, then followed older brothers Bill and Max to Saginaw Township Community Schools, teaching and coaching at Saginaw MacArthur High school from 1962-71 and then Saginaw Eisenhower from 1971-88.

Matson served as head varsity football and track and field coach at Mattawan and as head track and field coach at both MacArthur and Eisenhower, in addition to serving as an assistant football coach at both schools. He also became the first and only athletic director in Eisenhower's history – holding that position from the school's first day until the end of the 1987-88 school year, when he became co-athletic director of the new Saginaw Heritage High School, which was created from a merger of MacArthur and Eisenhower. Matson served as the sole full-time athletic director of Heritage for 1996-97 before retiring.

"Hugh has been dedicated to improving athletics in Michigan for more than 50 years, and his contributions stretch over every aspect of our games and beyond the Saginaw area," MHSAA Executive Director Jack Roberts said. "He showed leadership not only in his community for many years but at the statewide level. We're glad to honor Hugh Matson with the Forsythe Award."

Matson has been a member of the Michigan Interscholastic Athletic Administrators Association (MIAAA) since 1970 and served as its president during the 1989-90 school year. He also was a member of the National Interscholastic Athletic Administrators Association (NIAAA) for three decades and has been a member of the Association of Track Officials of Michigan (ATOM) since 1993. Matson received distinguished service awards from both the MIAAA and ATOM and served as a representative and speaker for the MIAAA at regional confer-

ences in Iowa and Wisconsin and to the NIAAA Leadership Forum in 1987.

During his time as athletic director, Matson hosted MHSAA Districts or Regionals for seven sports. He's been an MHSAA registered official since 1970 and has officiated 25 MHSAA Regionals in either cross country or track and field and 12 MHSAA Finals. He also has officiated cross country and track and field at the Division I, II and III and NAIA collegiate levels.

"I still think I have the energy for it, and I enjoy it a lot," Matson said. "Every day before I go to a track meet, my (wife Jackie) says, 'Have fun.' And she says when I come home, 'Did you have fun?' And yeah, I have fun. Working with younger people also, it keeps me youthful."

As an athlete at Newaygo High School, Matson was part of the 1951 basketball team that advanced to the MHSAA Semifinals. Prior to that game, his team was welcomed by Forsythe, adding personal significance to receiving this award.

Matson received his bachelor's degree in physical education with minors in English and history in 1957 from Western Michigan University. He taught English and history at Mattawan, and then English and physical education during his three tenures as part of Saginaw Township Community Schools.

Past recipients of the Charles E. Forsythe Award

- 1978 - Brick Fowler, Port Huron; Paul Smarks, Warren
- 1979 - Earl Messner, Reed City; Howard Beatty, Saginaw
- 1980 - Max Carey, Freesoil
- 1981 - Steven Sluka, Grand Haven; Samuel Madden, Detroit
- 1982 - Ernest Buckholz, Mt. Clemens; T. Arthur Treloar, Petoskey
- 1983 - Leroy Dues, Detroit; Richard Maher, Sturgis
- 1984 - William Hart, Marquette; Donald Stamats, Caro
- 1985 - John Cotton, Farmington; Robert James, Warren
- 1986 - William Robinson, Detroit; Irving Soderland, Norway
- 1987 - Jack Streidl, Plainwell; Wayne Hellenga, Decatur
- 1988 - Jack Johnson, Dearborn; Alan Williams, North Adams
- 1989 - Walter Bazylewicz, Berkley; Dennis Kiley, Jackson
- 1990 - Webster Morrison, Pickford; Herbert Quade, Benton Harbor
- 1991 - Clifford Buckmaster, Petoskey; Donald Domke, Northville
- 1992 - William Maskill, Kalamazoo; Thomas G. McShannock, Muskegon
- 1993 - Roy A. Allen Jr., Detroit; John Duncan, Cedarville
- 1994 - Kermit Ambrose, Royal Oak
- 1995 - Bob Perry, Lowell
- 1996 - Charles H. Jones, Royal Oak
- 1997 - Michael A. Foster, Richland; Robert G. Grimes, Battle Creek
- 1998 - Lofton C. Greene, River Rouge; Joseph J. Todey, Essexville
- 1999 - Bernie Larson, Battle Creek
- 2000 - Blake Hagman, Kalamazoo; Jerry Cvengros, Escanaba
- 2001 - Norm Johnson, Bangor; George Lovich, Canton
- 2002 - John Fundukian, Novi
- 2003 - Ken Semelsberger, Port Huron
- 2004 - Marco Marcet, Frankenmuth
- 2005 - Jim Feldkamp, Troy
- 2006 - Dan McShannock, Midland; Dail Prucka, Monroe
- 2007 - Keith Eldred, Williamston; Tom Hickman, Spring Lake
- 2008 - Jamie Gent, Haslett; William Newkirk, Sanford-Meridian
- 2009 - Paul Ellinger, Cheboygan
- 2010 - Rudy Godefroidt, Hemlock; Mike Boyd, Waterford
- 2011 - Eric C. Federico, Trenton
- 2012 - Bill Mick, Midland
- 2013 - Jim Gilmore, Tecumseh; Dave Hutton, Grandville
- 2014 - Dan Flynn, Escanaba

2015 WISL Award Goes to LaClair

Bronson's Jean LaClair is best known for leading high-achieving teams for more than two decades as one of the winningest varsity volleyball coaches in Michigan High School Athletic Association history. But her impact on all athletes at her school as athletic director and influence as a statewide leader also was celebrated when she received the MHSAA's 28th Women in Sports Leadership Award on March 21 at Michigan State University's Breslin Center.



Jean LaClair

Each year, the Representative Council considers the achievements of women coaches, officials and athletic administrators affiliated with the MHSAA who show exemplary leadership capabilities and positive contributions to athletics.

LaClair has built a record of 958-327-85 over 21 seasons as a varsity volleyball coach at Midland Dow, Pinconning, and for the last 15 seasons at Bronson High School. She ranks 10th on the MHSAA career list for volleyball coaching wins and led her 2009 Bronson team to the Class C championship.

She also has served as Bronson's athletic director since the fall of 2000 and hosted a variety of MHSAA tournament events in addition to sitting on a number of MHSAA and Michigan Interscholastic Athletic Administrators Association committees. LaClair was a speaker at MHSAA Women in Sports Leadership conferences in 2006 and 2008 and also has been a registered MHSAA official for 14 years.

"Jean LaClair is a role model for her athletes, and also for administrators who look to her for expertise and mentorship," said Jack Roberts, executive director of the MHSAA. "She is a respected voice who offers valuable knowledge and guidance to those at every level of educational athletics. We're delighted to honor her with the Women In Sports Leadership Award.

LaClair is a 1984 graduate of Midland Dow High School and 1989 graduate of Saginaw Valley State University, and she also earned a Master's degree in sports administration from Central Michigan University. She began her varsity coaching career at Dow during the 1987-88 season and coached through 1990. She led Pinconning's varsity from 1996-97 through 1999, then came to Bronson as the athletic director that fall. She resumed her coaching career in fall of 2000.

In addition to the 2009 MHSAA title, her teams have won five Regional championships. Her 1997-98 Pinconning team finished Lower Peninsula Class B runner-up.

LaClair is a member of both the MIAAA and National Interscholastic Athletic Administrators Association, and served as Michigan Interscholastic Volleyball Coaches Association president for six years, vice president for three and as a board member for 13 years. She also served a term as president of the St. Joseph Valley League and has been an instructor for the MHSAA's Coaches Advancement Program.

"I love coaching. It's the time I get to deal with some good kids. We have a great summer, and it feeds into the fall," LaClair said. "I feel when kids leave my program, they could be coaches. I do try to get them involved in officiating as well."

LaClair was inducted into the MIVCA Hall of Fame in 2006 and named that body's Coach of the Year in 2009. She was named Michigan High School Coaches Association volleyball Coach of the Year in 2010 and was a National High School Athletic Coaches Association volleyball Coach of the Year finalist in 2011. She also was named a Regional Athletic Director of the Year by the MIAAA in 2009.

She previously taught mathematics and physical education before becoming a full-time athletic director, and also became an assistant principal at Bronson High School during the 2010-11 school year.

Past recipients of the WISL Award

- 1990 – Carol Seavoy, L'Anse
- 1991 – Diane Laffey, Harper Woods
- 1992 – Patricia Ashby, Scotts
- 1993 – Jo Lake, Grosse Pointe
- 1994 – Brenda Gatlin, Detroit
- 1995 – Jane Bennett, Ann Arbor
- 1996 – Cheryl Amos-Helmicki, Huntington Woods
- 1997 – Delores L. Elswick, Detroit
- 1998 – Karen S. Leinaar, Delton
- 1999 – Kathy McGee, Flint
- 2000 – Pat Richardson, Grass Lake
- 2001 – Suzanne Martin, East Lansing
- 2002 – Susan Barthold, Kentwood
- 2003 – Nancy Clark, Flint
- 2004 – Kathy Vrugink Westdorp, Grand Rapids
- 2005 – Barbara Redding, Capac
- 2006 – Melanie Miller, Lansing
- 2007 – Jan Sander, Warren Woods
- 2008 – Jane Bos, Grand Rapids
- 2009 – Gail Ganakas, Flint; Deb VanKuiken, Holly
- 2010 – Gina Mazzolini, Lansing
- 2011 – Ellen Pugh, West Branch; Patti Tibaldi, Traverse City
- 2012 – Janet Gillette, Comstock Park
- 2013 – Barbara Beckett, Traverse City
- 2014 – Teri Reyburn, DeWitt

Davis Tabled for 2015 Norris Award

Lansing's Sam Davis, one of the most accomplished wrestling officials in Michigan high school history and president of the Lansing Wrestling Officials Association for more than two decades, is the Michigan High School Athletic Association's Vern L. Norris Award winner for 2015.



Sam Davis

The Norris Award is presented annually to a veteran official who has been active in a local officials association, has mentored officials, and has been involved in officials' education. It is named for Vern L. Norris, who served as executive director of the MHSAA from 1978-86 and was well-respected by officials on the state and national levels.

Davis was honored at the Officials' Awards & Alumni Banquet on May 2 at the Kellogg Center in East Lansing. He is in his 35th year as an MHSAA-registered official, working wrestling during the entirety of his career and baseball seven of the last eight seasons.

Davis has officiated 26 MHSAA Team Wrestling Finals – or all but two in the event's 28-season history. Including the individual tournament, Davis has worked 33 Finals in wrestling after receiving his first MHSAA championship-level assignment in 1983.

He also worked 32 years in Lansing Public Schools as a teacher, coach and later assistant principal, principal and district athletic director.

"To be recognized for being able to help a sport you love, and are still actively involved in, it can't really get much better than that," Davis said. "I love being out on the mat, talking with kids, talking with coaches.

"Every year I train my officials to be State Finals officials. That doesn't mean that's where they'll be. But I expect them to treat every dual meet, every tournament, like the State Finals, because it means that much to every kid."

Davis, 64, was an MHSAA Wrestling Finals individual champion at 165 pounds as a senior at Lansing Eastern High School in 1969 and also a significant contributor when the Quakers won the Class A team championship in 1968. Davis then joined Michigan State University's wrestling program but suffered an eye injury as a freshman that forced him to give up competing in the sport. However, he instead took up judo, winning state championships in 1980 and 1981 and competing at the U.S. Olympic trials.

Davis previously had officiated wrestling during the 1971-72 season and returned to the high school mat for good in 1981, beginning that winter his current 34-season run as an MHSAA registered official in the sport. He also officiated National Junior College Athletic Association Finals in 1981 and 1982.

After graduating from MSU with bachelor and master's degrees in 1974, Davis began his teaching

career at Lansing Everett High School that fall. He taught history, psychology and U.S. government and coached wrestling and football and later served as an assistant principal at the school. Davis also served as principal at Dwight Rich Middle School and then district athletic director before finishing with Lansing Public Schools in 2007.

Davis is a lead teaching official at MHSAA wrestling clinics and also has served as Official in Charge, managing those working matches, at a number of MHSAA Wrestling Finals. He has served as president of the Lansing Wrestling Officials Association since 1992.

"Sam Davis' passion for education shines through both on the mat and in how he stands as a leader in Michigan's wrestling community, making impacts both visible but frequently behind the scenes as well," MHSAA Executive Director Jack Roberts said. "He continues to share his talents and expertise for the betterment of his local officials and also as a mentor statewide. We are pleased to recognize Sam Davis with the Vern L. Norris Award."

Davis followed his career in education with another in law enforcement. At age 58, he attended the Mid-Michigan Police Academy at Lansing Community College and currently serves as a major with the Ingham County Sheriff's Office, serving as jail administrator. He's been elected to multiple terms as chairperson of the Michigan Sheriff's Association Jail Administrators Committee.

Davis also has participated in efforts for the Boys & Girls Club of Lansing and served on community boards for Lansing and Jackson-based Camp Highfields and the Capital Regional Community Foundation.

Past recipients of the Vern L. Norris Award

- 1992 – Ted Wilson, East Detroit
- 1993 – Fred Briggs, Burton
- 1994 – Joe Brodie, Flat Rock
- 1995 – Jim Massar, Flint
- 1996 – Jim Lamoreaux, St. Ignace
- 1997 – Ken Myllyla, Escanaba
- 1998 – Blake Hagman, Kalamazoo
- 1999 – Richard Kalahar, Jackson
- 2000 – Barb Beckett, Traverse City; Karl Newingham, Bay City
- 2001 – Herb Lipschultz, Kalamazoo
- 2002 – Robert Scholie, Hancock
- 2003 – Ron Nagy, Hazel Park
- 2004 – Carl Van Heck, Grand Rapids
- 2005 – Bruce Moss, Alma
- 2006 – Jeanne Skinner, Grand Rapids
- 2007 – Terry Wakeley, Grayling
- 2008 – Will Lynch, Honor
- 2009 – James Danhoff, Richland
- 2010 – John Juday Sr., Petoskey
- 2011 – Robert Williams, Redford
- 2012 – Lyle Berry, Rockford
- 2013 – Tom Minter, Okemos
- 2014 – Hugh R. Jewell, Detroit



Classifications Announced for 2015-16

Classifications for Michigan High School Athletic Association elections and post-season tournaments in traditionally classified sports (A, B, C, D) for the 2015-16 school year have been announced, with enrollment breaks for postseason tournaments set up by divisions posted to each sport's page at MHSAA.com.

Classifications for the upcoming school year are based on a second semester count date, which for MHSAA purposes was Feb. 11. The enrollment figure submitted for athletic classification purposes may be different from the count submitted for school aid purposes, as it does not include students ineligible for athletic competition because they reached their 19th birthday prior to September 1 of the current school year and will not include alternative education students if none are allowed athletic eligibility by the local school district.

After all the counts are submitted, tournament-qualified member schools are ranked according to enrollment, and then split as closely into quarters as possible. For 2015-16, there are 750 tournament-qualified member schools with 187 schools in both Class A and Class B, and 188 schools in both Class C and Class D.

Effective with the 2014-15 school year, schools with 875 or more students are in Class A in MHSAA postseason tournament competition. The enrollment limits for Class B are 420-874; Class C is 213-419; and schools with enrollments of 212 and fewer are Class D. The break between Classes A and B decreased seven students from 2014-15, the break between Classes B and C decreased four students, and the break between Classes C and D is two students fewer than the current school year.

The new classification breaks will see 13 schools move up in class for 2015-16, while 17 schools will move down.

Schools recently were notified of their classification. MHSAA Executive Director Jack Roberts said schools may not subsequently lower their enrollment figure. However, if revised enrollment figures should be higher and indicate that a school should be playing in a higher class, that school would be moved up.

Schools have the option to play at any higher classification for a minimum of two years, but must exercise the option by April 15 for fall sports, Aug. 15 for winter sports and Oct. 15 for spring sports.

MHSAA tournament sports that will be conducted in traditional classifications for 2015-16 are Basketball and Girls Volleyball. Football will use traditional classifications to determine playoff points.

Sports which will compete in nearly equal divisions are: Baseball, Bowling, Girls Competitive Cheer, Lower Peninsula Cross Country, Lower Peninsula Golf, Ice Hockey, Lacrosse, Lower Peninsula Soccer, Skiing, Softball, Lower Peninsula Swimming and Diving, Lower Peninsula Tennis, Lower Peninsula Track and Field and Wrestling.

Visit the respective sport pages on the MHSAA Website to review the divisional alignments.

The divisions and qualifiers for the MHSAA Football Playoffs will be announced on Selection Sunday, Oct. 25, 2015.

A complete list of school enrollments used to determine classifications for the 2015-16 school year can be found on the Enrollment & Classification page of the MHSAA Website.

Here is a complete list of schools changing classification for 2015-16. (Note: This list does not include schools opting up in class/division for tournaments, which can be found on the Administrators page of the MHSAA Website, under Enrollment and Classification):

Moving Up From Class B to Class A

Haslett
Jackson Northwest
Parma Western
South Lyon East
Sturgis

Moving Down From Class A to Class B

Detroit Mumford
Fruitport
Hazel Park
Sault Area
Stevensville Lakeshore

Moving Up From Class C to Class B

Fennville
Grand Rapids West Michigan Aviation Academy
Hillsdale
Jackson Lumen Christi
Jonesville
Warren Michigan Collegiate

Moving Down From Class B to Class C

Delton Kellogg
Detroit Community
Detroit Pershing
Detroit Southeastern
Detroit West Side Academy
Hemlock
Lakeview

Moving Up From Class D to Class C

Burton Madison Academy
St. Ignace LaSalle

Moving Down From Class C to Class D

Highland Park Renaissance Academy
Marcellus
Pottsville
Rogers City
Vestaburg

New Postseason Eligible Tournament Schools in 2015-16

Brighton Charyl Stockwell Preparatory
Canton Preparatory
Detroit Cornerstone Health & Technology
Detroit Public Safety Academy
Detroit Westside Christian Academy
Grand Rapids Hope Academy of West Michigan

Make Plans to Attend the 2015 AD In-Service/Update Meeting Series

Athletic directors should plan now to attend an AD In-Service and Update Meeting in the fall. While attendance is strong, some ADs have not attended as their duties have increased. We suggest the opposite approach and urge those who have not attended recently to make it a point of emphasis. Attending these efficient “2-in-1” programs improves leadership and service skills and can make your work less of a burden.

The Update meetings begin at noon and present current issues, rules, regulations, future plans, and pertinent Representative Council matters. SUPERINTENDENTS, PRINCIPALS, ATHLETIC DIRECTORS and SCHOOL BOARD MEMBERS should attend Update Meetings each year. Lunch is served at Update Meetings only. The Athletic Director In-Services runs from 8:30-11:45 a.m. and will focus on new actions, describing and defining regulations, MHSAA procedures, group discussions and more.



Scan to download registration form to mobile device

2015 AD In-Service/Update Meeting Schedule

Wednesday, Sept. 23	Kalamazoo, Pine West
Monday, Sept. 28	Warren, DeCarlos Banquet/Convention
Thursday, Oct. 1	Lansing, Best Western Plus
Monday, Oct. 5	Comstock Park, English Hills Country Club
Wednesday, Oct. 7	Frankenmuth, Zehnder's (Annual Business Meeting)
Monday, Oct. 12	Gaylord, Otsego Club & Resort
Friday, Oct. 30	Marquette, Superior Dome (no fee, no meal)

Got the MHSAA.com to register for a session near you!

Inform Students, Coaches and Parents of Summer Dead Period

Each school sets its own Summer Dead Period – a seven-consecutive day “zero player and coach contact period” for all sports and all coaches – no functions, fundraisers, parades, etc.

Non-school baseball and softball teams may continue their schedule during the dead period.

Set the period between a school's last day of participation in any MHSAA tournament and Aug. 1. It is recommended that the dead period include the 4th of July.

There is no requirement to report, but there is a requirement to designate and observe a dead period.

Please include ALL sports, especially tennis and swimming in the discussions. Be sure to publicize your Summer Dead Period to all parties and the community at large.



Efficiency is Effective...

The MHSAA is always willing to assist with issues concerning Association regulations. Please remember, however, the most efficient method of communication with the MHSAA on eligibility questions is through the athletic director or principal. Athletic directors should gather all information necessary on a question and then call or write the MHSAA. Coaches or parents calling the MHSAA on eligibility matters can create confusion and delay. ADs or principals are encouraged to contact the MHSAA office directly. Please follow this efficient path of communication.

Sparrow Health System Partners with MHSAA

Providing information and best practices to players, parents, coaches and administrators on how best to minimize health risks is a key component of keeping student-athletes safe. The Michigan High School Athletic Association has teamed with Sparrow Health System of Lansing to better inform its member schools on such health and safety matters.

Sparrow, a member of the prestigious Mayo Clinic Care Network, is mid-Michigan's premier healthcare organization with more than 10,000 caregivers. Sparrow's Sports Medicine division offers programs for athletes at all levels and includes primary care physicians, orthopedic surgeons, physical therapists and athletic and performance trainers.

Sparrow will lend its expertise through the MHSAA Website and on-site at various MHSAA tournament events. Resources from Sparrow staff, including information on current health and safety topics and trends, will be accessible online through the Health & Safety page of the MHSAA Website. Sparrow's contributions also will be promoted through the MHSAA's multiple social media platforms.

"This partnership is one of the biggest steps we've ever taken to build the MHSAA's capacity to address the almost daily questions we receive about student-athlete health and wellness, and to sort out and solve the biggest issues of school sports safety," said Jack Roberts, executive director of the MHSAA.

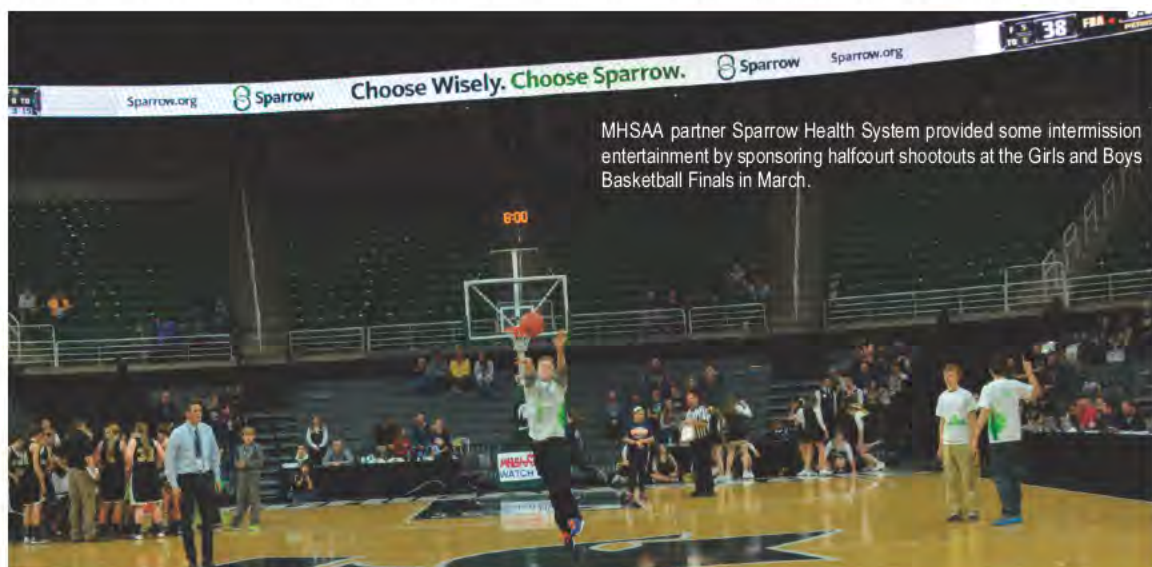


A key component to Sparrow's addition to the MHSAA Website is an "Ask the Experts" feature that connects users directly to Sparrow's Sports Medicine staff.

Sparrow also will set up booths at various MHSAA tournaments where staff will be available to answer similar questions and discuss sports medicine-related issues.

"Sparrow is thrilled to partner with the MHSAA," said Stella Cash, Sparrow vice president for development and strategic partnerships. "We have the region's pre-eminent primary care physicians trained in sports medicine who specialize in the prevention and treatment of sports-related injuries. Parents and coaches can turn to us for all health-related issues and trust we are focused on transforming care to keep their high school athletes fit, healthy and in the game."

Sparrow Health System includes hospitals in Lansing, St. Johns, Ionia and Carson City as well as Physicians Health Plan, Sparrow Physicians Health Network, the Sparrow Medical Group and the Michigan Athletic Club. Sparrow also is affiliated with Michigan State University's three human health colleges.



MHSAA partner Sparrow Health System provided some intermission entertainment by sponsoring halfcourt shootouts at the Girls and Boys Basketball Finals in March.

Dowagiac Wins Battle of Fans IV



The Dowagiac High School student cheering section – the “Attack” – has been selected as this year’s Michigan High School Athletic Association “Battle of the Fans IV” winner as the top student cheering section among member schools.

Sydney Brooks always has taken pride in her town, even as classmates talked about how there was nothing to do in Dowagiac and how they couldn’t wait to leave when high school was done.

Turns out there’s a lot of fun to be had in her school’s corner of the southwestern Lower Peninsula, and it’s come full circle for the “Attack” – Dowagiac’s student section.

Student sections from Beaverton, Buchanan, Dowagiac, St. Johns and Yale were selected as finalists from a pool of applicants. MHSAA staff and SAC members visited all five for home basketball games during the last five weeks and produced videos of each section for the MHSAA’s YouTube channel.

Dowagiac’s success was accomplished in steps – starting with the formation of the “Chieftain Heart” spirit club three years ago, then the establishment of a “Front Row Crew” last year to get the Attack in Battle of the Fans shape.

This winter, that heart beat stronger than ever, not just in the stands at high school basketball games, but throughout the entire community.

“Before, everybody thought we were just a normal small town. But when everybody comes together – from this whole experience, we’ve learned teamwork,” Brooks said. “The whole town learned to work together, become united. We learned how much it pays off to work together, how much hard work can pay off.

“We worked so hard, and the community worked so hard. We’ve accomplished so much. I’m so proud of Dowagiac.”

The Attack accepted its MHSAA championship banner during the Class B Boys Basketball Semifinal on March 27 at Michigan State University’s Breslin Center. The other four finalists also were invited and received rewards for this season’s achievement.

Dowagiac was chosen based on a vote by the MHSAA’s 16-member Student Advisory Council influenced by public vote on the MHSAA’s Facebook, Twitter and Instagram sites. A total of 22,673 social media votes were received, with those results then equated against a school’s enrollment.

The Council based its vote on the following criteria: positive sportsmanship, student body participation, school spirit, originality of cheers, organization of the group, section leadership and overall fun.

Dowagiac and then Buchanan received the majority of public social media support, finishing among the top three in all four ways votes were accepted (Facebook likes and shares, Twitter retweets and Instagram likes). Some of the more interesting comments made on Second Half stories this week came from alumni of those schools, the oldest a graduate from 50 years ago.

Other numbers to consider from this season’s contest: The application videos were watched nearly 28,000 times, and the MHSAA-produced videos from our tour stops have more than 8,600 views. The stories on the five finalists received 19,078 views.

In one coldest winters on record, the Battle of the Fans finalists gave warm welcomes to visitors throughout the season.

The MHSAA continues to cheer on these students sections as it learns how much their work has helped other schools transform not just their bleachers, but life in the hallways as well. During each of the first three Battles of the Fans, we’ve heard of how new sections learned from those that have competed before them, either at Sportsmanship Summits or by watching the videos from the first years of the contest. Buchanan and Beaverton can both enjoy assists on Dowagiac’s championship this winter – the Attack certainly gained input from their regional neighbor’s example, and leaders showed last year’s Beaverton video to the entire student body when getting this season’s section of the ground.

This Battle of the Fans championship is one reward – but only a highlight from what an entire community can take pride in every game night.

Scholar-Athlete Class of 2015 Honored

The Michigan High School Athletic Association/Farm Bureau Insurance Scholar-Athlete Award has been recognizing the top student-athletes for 26 years. Applicants for the Scholar-Athlete Award must meet the following criteria: A minimum cumulative grade-point average of 3.5 on a 4.0 scale; and must have previously won a varsity letter. Applicants also show involvement in other school and community activities; submit two letters of recommendation and a 500-word essay on the importance of sportsmanship in educational athletics.

Recipients of the 2014-15 Scholar-Athlete Award receive a \$1,000 college scholarship to be used at the college, university, or trade school of their choice during the 2015-16 school year. This year, 1,584 applicants from 406 schools were received for the 32 scholarships. Class A students were guaranteed 12 winners, Class B eight winners, Class C six winners and Class D four winners. Two at-large winners were also selected.

All scholarship recipients were honored in ceremonies at halftime of the Class C Boys Basketball Final at the Breslin Student Events Center in East Lansing on March 28.



32 student-athletes from around the state are honored during the MHSAA Boys Basketball Finals each year for academic excellence.

2015 Scholar-Athlete Award Winners

Kirstin Anderson, Charlotte, Class B
 Kyler Beal, Holland, Class A
 Maggie Belcher, Springport, Class C
 Andrew Bennett, Linden, Class A
 Margo Brown, St Ignace, Class D
 Matthew Carter, Ypsilanti Lincoln, Class A
 Sara Condra, Hartland, Class A
 Kelsey Cushway, Big Rapids, Class B
 Collin DeShaw, Holland West Ottawa, Class A
 Emily Diehl, Saline, Class A
 Andrew James Fox, GRForest Hills Central, Class A
 Kalabrya LaBrae Gondrezick, Benton Harbor, Class B
 Kevin Greenman, Battle Creek St Philip, Class D
 Ryan Karapas, Clinton, Class C
 Michael Kenney, Detroit U-D Jesuit, Class A
 Ashley Ko, Traverse City Central, Class A

Jonathan Krug, New Boston Huron, Class B
 Stephen Luckoff, BH Cranbrook Kingswood, Class B
 Travis McCormick, Mason County Eastern, Class D
 Dane Miller, Dearborn Divine Child, Class B
 Francis Misra, BH Cranbrook Kingswood, Class B
 Mallory Munderloh, St Louis, Class C
 Matthew J Orringer, Ann Arbor Skyline, Class A
 Amanda Paull, Cheboygan, Class B
 Diane Reed, Bloomfield Hills, Class A
 Alex Sorgi, Utica Ford, Class A
 Emily Elizabeth Steffke, Beal City, Class C
 Connor Thomas, Marlette, Class C
 Rachelle Trafford, Lansing Christian, Class D
 Caycee Turczyn, Lapeer, Class A
 Allison Utting, Grandville, Class A
 Pierce Vreeland, Gobles, Class C



Anderson



Beal



Belcher



Bennett



Brown



Carter



Condra



Cushway



DeShaw



Diehl



Fox



Gondrezick



Greenman



Karapas



Kenney



Ko



Krug



Luckoff



McCormick



Miller



Misra



Munderloh



Orringer



Paull



Reed



Sorgi



Steffke



Thomas



Trafford



Turczyn



Utting



Vreeland

Visit the Students page of MHSAA.com
for a Scholar-Athlete History, and
for 2015-16 Application Information

Montrose Repeats As SBP Program of the Year

Capturing first place in three of five individual categories, Montrose High School repeated as the “Program of the Year” in the second annual MHSAA School Broadcast Program Excellence Awards for 2014-15.

The SBP Excellence Awards are underwritten by Herff Jones, which will award certificates and plaques to the schools which took individual honors, with the presentation dates and times to be announced.

Montrose took first place in Best Play-By-Play, Best Single Camera Production with PlayOn! Sports graphics, and the top two spots for Best Use of PlayOn! Sports Graphics. The program also took a second place for Best Produced Commercial/Feature and a third for Best Multicamera Production. Montrose also demonstrated during the year a good blend of productions in a variety of sports covered and an overall command of the PlayOn! Sports software used for graphics and inserting commercials/features during the course of productions.

Other category winners were: Cedar Springs High School for Best Multicamera Production; and Rogers City High School for Best Produced Commercial/Features.

Here is the complete list by categories of the schools and students being honored in this year's SBP Excellence Awards:

Best Multicamera Production:

- *First Place* – Cedar Springs – Sam Owen, Sydney Dryer, Bryan Taylor, Alec Lachniet, Kaci Clark – Football game v. Grand Rapids Northview.
- *Second Place* – Cedar Springs – Rider Swanson, Sam Owens, Darrick Liggett, Kaci Clark, Cody Hoogerheide, Krystyn Messersmith – Football game v. Grand Rapids Forest Hills Eastern.
- *Third Place* – Montrose – Trey Schmitz, Andrew Morley, Amanda Ramsey, Nathan Brown, Eric Vandefifer, Brandon Smith – Genesee Area Conference Girls Competitive Cheer Finals.

Best Play-By-Play:

- *First Place* – Montrose – Eric Vandefifer, Trey Schmitz – Boys Basketball game v. Lake Fenton.
- *Second Place* – Rogers City – Casey Szatkowski – Girls Basketball game v. Whitemore-Prescott.

Best Produced Commercial/Feature:

- *First Place* – Rogers City – Megan Brege, Heather Hentkowski, Ally Streich – Huron Halloween of Horror Feature.
- *Second Place* – Montrose – Alyssa Bernard, Amanda Ramsey, Alicia Town, Allia Town – Sexual Assault PSA.
- *Third Place* – Rogers City – Megan Brege, Heather Hentkowski, Ally Streich – Rogers City Girls Basketball Season Preview.

Best Single Camera Production with PlayOn! Graphics:

- *First Place* – Montrose – Trey Schmitz, Andrew Morley, Eric Vandefifer – Girls Soccer match v. Hemlock.
- *Second Place* – Rogers City – Brendan Koss, Sarah Meredith – Football game v. Rudyard.
- *Third Place* – Rogers City – Chandler Beland, Josh Foster – Girls Volleyball match v. Posen.

Best Use of PlayOn! Graphics/Software:

- *First Place* – Montrose – Eric Vandefifer, Trey Schmitz, Andrew Morley, Griffin Powell, Bradley Payne – Boys Basketball game v. Goodrich.
- *Second Place* – Montrose – Eric Vandefifer, Trey Schmitz, Andrew Morley – Girls Basketball game v. Lake Fenton.
- *Third Place* – Rogers City – Victoria Bullock, Zachary Myers – Football game v. Hillman.

The School Broadcast Program, powered by PlayOn! Sports, is a platform which schools can utilize to reach members of their community about activities taking place in their buildings, providing recognition for students while at the same time giving them hands-on opportunities to gain broadcasting experience and providing schools an opportunity to realize additional revenues for their programs. Schools interested in becoming a part of the SBP should contact John Johnson at the MHSAA Office.



Student Advisory Council in Place for 2015-16

Eight student-athletes who will be juniors at their schools during the 2015-16 academic year have been selected to serve a two-year term on the Michigan High School Athletic Association's Student Advisory Council.

The Student Advisory Council is a 16-member group which provides feedback on issues impacting educational athletics from a student's perspective, and also is involved in the operation of Association championship events and other programming. Members of the Student Advisory Council serve for two years, beginning as juniors. Eight new members are selected annually to serve on the SAC, with nominations made by MHSAA member schools. The incoming juniors will join the group of eight seniors-to-be appointed a year ago.

Selected to begin serving on the Student Advisory Council in 2015-16 are: **Alex Janosi**, Dexter; **Lindsay Duca**, East Grand Rapids; **Meghan Boyd**, Kent City; **Marrissa Immel**, Munising; **Jordan Walker**, Muskegon Mona Shores; **Jack Donnelly**, Ottawa Lake Whiteford; **Van Nguyen**, Plymouth; and **Cade Smeznik**, Yale.

The first Student Advisory Council was formed for the 2006-07 school year. With the addition of this class beginning this summer, members will have represented 79 schools from 42 leagues plus independent schools that do not play in a league. Combined, the new appointees have participated in 11 MHSAA sports, and all eight will be the first SAC members from their respective schools.

The Student Advisory Council meets seven times each school year, and once more for a 24-hour leadership camp. In addition to assisting in the promotion of the educational value of interscholastic athletics, the council discusses issues dealing with the 4 S's of educational athletics: scholarship, sportsmanship, safety (including health and nutrition) and the sensible scope of athletic programs. There also is a fifth S discussed by the group – student leadership.

This school year, the Council judged the fourth "Battle of the Fans" after creating the contest during 2011-12 as a way to promote positive sportsmanship. The Council also began updating the "Captains 101" leadership guide that was published in 2009 and has been distributed throughout Michigan and also, by request, to other states and internationally.

The new additions to the SAC will join the Class of 2016 members who were selected a year ago: **Tucker Gross**, Beal City; **Katie Hartzler**, Bridgman; **Benjamin Kowalske**, Livonia Stevenson; **Jordan Michalak**, Birmingham Seaholm; **Bekah Myler**, Gaylord St. Mary; **Jared Pittman**, Muskegon; **Trevor Trierweiler**, Portland; and **Greta Wilker**, Belding.

Student Advisory Council Belief Statement

Adopted Nov. 2007

As the voice of Michigan's student-athletes, the Student Advisory Council's role is to convey the message of how high school sports are supposed to be played. We are responsible for helping the MHSAA maintain a positive and healthy atmosphere in which interscholastic athletes can thrive.

We believe **athletes** should be competitive, sportsmanlike and excel academically. We believe **students** in the stands should have fun, but not take the focus away from the game. We believe **coaches** should act as teachers, helping student-athletes develop while still keeping high school sports in perspective. We believe that **parents** should always be positive role models and be supportive of their child's decisions. We believe **officials** commit their own time to high school sports and respect should always be shown and given to them.

The most important goal for student-athletes is to enjoy high school sports while keeping a high level of respect between all those involved in the games.

– Written by the Student Advisory Council, adopted by MHSAA Representative Council in Nov. 2007

The Newest Form of Advocacy

As the NFL playoffs unfolded in January, the officiating industry found itself front and center. The first two Monday mornings of both the Wildcard and Divisional rounds focused on two big officiating decisions that included the flag pickup in the Detroit-Dallas game, and then the replay reversal on the Dez Bryant play in the Dallas-Green Bay match up. Both of these plays provided talk radio and the internet plenty of fuel for a week-long fire, with more conversation about officials and officiating than most league executives would care to see during their biggest games of the year. We were a big part of the story.

The officiating conversation was not just for the NFL. As we watched the college bowl season unfold, those networks had officiating experts at the ready in a couple of different ways. First, every network is trying to emulate the great success that Fox Sports has experienced in trying to find their “next” Mike Pieria (also a current NASO Board member) in the studio to provide insight and analysis when a tricky rule or play impacts the game. Some leagues even added an extra official to the bowl crew that sat in the broadcast booth to assist the game announcers with rule interpretations and replay situations. Officiating has never been a bigger part of the postseason football conversation than it was this past year.

Basketball, baseball and ice hockey have also become much more visible and transparent as of late with each sport taking fans behind the scenes into the various replay centers that now serve as the officiating hubs of those sports. Justin Klemm (MLB), Joe Borgia (NBA) and Steve Wolkom (NHL) are explaining the why behind officiating decisions, both live and instant replay, providing more information to fans and the media than ever before.

These levels have clearly embraced the new realities of officiating in 2015 and beyond: the officiating industry needs its leaders to drive the officiating conversation. The traditional approach of silence from officiating leaders does not work in this new media age where silence is often perceived as indecision, admission of a mistake and lack of transparency. Society today struggles with silence; when those in a position of leadership remain quiet, there are dozens of outsiders at the ready to fill that silence with little regard of the facts at hand.

The foundation of NASO’s very existence is to be an association that advocates for all officials, and these new times have shown that there are no

better advocates for officials than leaders within the officiating industry. The opportunities seized by these higher levels has allowed our industry to better educate fans about rules, mechanics and coverages, along with broadcast insights into such things as game preparation, game management and philosophy that every crew discusses before each game regardless of sport. It has helped all of us in officiating from the professional ranks all the way down to the youngest of youth leagues by telling the story of officials regarding what we do and how we do it.



Local officiating leaders have tremendously prepared up-and-coming officials at the prep level. Can that same knowledge be passed on to the public at large to create a better working environment?.

Those of us that lead at the amateur level should follow the trail currently blazed. Look for those opportunities at the local level to better inform the public about our industry – it can only help us grow the ranks and advocate for our members in each and every sport. Knowledge is power, and the more knowledge we can impart to sports fans in general can only provide all officials with a better working environment of support and maybe, just maybe, just a little more benefit of the doubt from those outside of our industry.

– Mark Uyl
MHSAA Assistant Director and
Chair of the NASO Board of Directors

NOTE: This story first appeared in the NASO section of the January issue of Referee magazine

Better Sportsmanship Would Eliminate Apologies

“I am sorry. I apologize,” the bearded, stocky man said as he cupped his hands around his lips.

“Why did he apologize?” my officiating partner asked.

“I have no idea,” I said. “I don’t even know who he is.”

This brief dialogue took place after a recent District basketball final game at Adrian High School. As the game concluded, I was the first of three officials to leave the floor following a thrilling finish to a frenzied game. The man apologized to me. And I had no idea why.

As the night dwindled, I began to wonder.

Maybe he was the same man with a flannel shirt who the athletic director had to sit with in the third quarter of a game I worked at midseason. The man had made boisterous comments to the officials during the game on what seemed like every call that went against his daughter’s team.

Maybe he was the dad who raced down the bleachers to cuss out a fellow official following his team’s disappointing loss to a rival school.

Perhaps he was the husband of the woman who once slapped my partner in the face following a game in which her son’s team did not win.

He could have been the coach who went on a rampage because he didn’t like the block call near the end of the District game. His belligerent conduct led to a disqualification. His last comment as he stood 10 feet on the floor at half court? “You are ruining the game!” Nice example for his players, I thought.

“I am sorry. I apologize.”

No problem. I get it. Parents, players and coaches can go on tirades while officials are expected to act professionally. It happens all of the time at all levels.

Thinking more about the man’s apology, I continued to wonder.

He should have apologized to my partner, who had to burn a sick day at work so that he could travel over an hour to a game. By the way, my partner did make \$11.81 an hour for that game, not including what he spent in gas.

He should have apologized to the hundreds of referees who dedicate their lives to interscholastic basketball. They miss their children’s sporting events. They miss their children’s choir concerts. They miss family dinners. They miss a lot of things.

He should apologize to my family, who for the past 35 years, has never seen me home in the winter on Tuesday and Friday nights.

I worked a girls Regional recently during which one school lost by 40. Never once did the losing coach have a tirade. He was cooperative and complimentary throughout the game. His girls, on all dead balls, walked to the closest referee to hand him the ball. They said “thank you” when the referees handed them the ball on inbounds plays. That conduct personified the true meaning of high

school basketball. It is a venue in which to teach sportsmanship.

Lack of sportsmanship is as rampant as it has ever been since I began refereeing. Unruly fans, quarrelsome and confrontational coaches and disrespectful players have made donning the striped shirt more difficult each season. That trend is one of the main reasons why not many young officials enter the fraternity. Why they want to subject themselves to the constant verbal jabs for 90 minutes?

Many schools begin their games with an announcement for the fans, the coaches and the players. This is read in the Huron League:

Good evening. We would like to welcome you to our school for today’s game. The Huron League has adopted this student-athlete sportsmanship belief statement.

1. Athletes should be competitive and sportsmanlike with teammates, competitors and officials.
2. Spectators should enjoy the game, while not taking the focus away from the game.
3. Coaches act as teachers, helping student-athletes to develop while keeping high school sports in perspective.
4. Officials commit their own time to high school sports and respect should always be shown to them. They are closer to the action than you are in your seats. We don’t have video review, so we are going with their calls. Accept them and respect them.
5. The most important goal for student-athletes is for them to enjoy high school sports. Don’t detract from the experience through negative conduct or comments, both during or after the contest.
6. The Huron League encourages positive cheering. Negative chants will not be tolerated.
7. Failure to comply with these beliefs will result in removal from the facility with no refund.

Following a play at one Huron League school, a dad became irate with a call on the floor. “You ARE horrible!” he screamed. The gym was silent. His outburst took center stage. The athletic director had to approach him during the game. At that time, the announcer for the game read the afore-mentioned belief statement – again.

Recently, I heard a fan scream, “Give me your shirt and whistle. I can do a better job than you.” I bet he could. To make under \$10 an hour, to miss another meal with his family, to attract a gym full of aggravation and to follow that with a 45-mile ride home, I bet he could.

“I am sorry. I apologize.”

No problem, buddy. It happens every game. I have become calloused to it.

– Dave Sontag

Dave Sontag has been a registered high school basketball official for 35 years. He has called four MHSAA Finals and trains officials for the Monroe County Basketball Officials’ Association. He has also worked college basketball for 19 years.

Rules of the Games

Sharpen your skills with the following rules questions. Answers appear at the bottom of the next page.

Baseball

- The count is 2-2 and B1 swings at an inside fastball. As he swings at the pitch, the ball hits his hands on the bat and the ball rolls toward the pitcher in fair territory. The correct call is....
 - Fair ball; the ball remains in play.
 - Foul ball; the batter remains at bat with a 2-2 count.
 - Hit by pitch; send the batter to first base.
 - Dead ball; the batter is charged with a strike, and since the count was 2-2, he is declared out.
- R1 on first, two outs. The batter hits a pop fly behind the catcher, which is caught for the third out. As the defense begins to run off the field, the offensive coach appeals to the umpire that the ball was caught with an illegal glove. The catcher was using a first baseman's mitt.
 
 - The illegal glove is removed from the game.
 - The illegal glove is removed from the game, however the out stands.
 - The glove is legal for first base only.
 - The glove is legal and the out stands.
- B1 hits a line drive back at the pitcher. Without touching anyone, the ball hits the pitcher's rubber and deflects directly into the 1st base dugout. The correct call is...
 - Foul ball.
 - Ground rule double; put B1 on 2nd base.
 - Ball is dead; award B1 first base.

Boys Lacrosse

- Check all that applies to restarting play after a violation while the ball is in the goal area:
 - A violation on the defense in the goal area results in the ball being awarded to the offense laterally outside the goal area,
 - Any violation on the offense will result in the ball being awarded to the defense laterally outside the goal area.
 - A violation on the offense that occurs while the ball is in the goal area results in the ball being awarded to the defensive team.
 - The defense restarts play with the ball in the goal area or in the crease once the official signals the restart.
- In which of the cases below when player A1 has the ball in the back of his crosse would the official rule that the ball is stuck in the head of the

crosse (it is not coming out of the head with a normal lacrosse move). Immediate whistle, with possession awarded to the opponent (withholding the ball from play). Check all that apply.

- A1 attempts to pass, shoot or flip the ball out of the crosse and the ball stays in the crosse head when it should come out.
 - The back of A1's crosse faces the ground, but the ball defies gravity and does not fall out.
 - A1 hits his own stick with his hand or arm in order to dislodge the ball.
 - A1 kicks his own stick in order to dislodge the ball.
 - A1 hits the ground with the stick in order to dislodge the ball.
- Which of the following is illegal procedure and the ball is awarded to the other team. Select all that apply
 - Failure to have a clearly marked center line that runs the entire width of the field.
 - Playing a game with balls that do not have the NOSCAE seal.
 - A player takes a dive or feigns a slash to the head or body in order to deceive the official and draw a penalty.
 - A player using an a crosse found illegal for not meeting any required specification other than a deep pocket , hanging string length or end cap)



Girls Lacrosse

- A Red defense player is in pursuit of the Blue attacker with the ball. The Red player runs out of bounds to avoid a legal pick and comes back onto the field in a position where she makes a check on the Blue attacker.
 
 - Legal. The Red player is allowed to run out of bounds and re-enter in an advantageous position.
 - Illegal. A player may not run out of bounds and re-enter to a more advantageous position. A minor fouls should be called.
- The Green attacker is on her way to the goal. As she shoots and scores, she charges into the Blue team defender who had established legal position.

- a. Legal. Goal is good.
 - b. Illegal. No goal. The charging foul was committed during the act of shooting.
3. The goalkeeper comes out of the goal circle and obstructs the free space to goal.
- a. Legal. The goalkeeper may do whatever they want.
 - b. Legal. The goalkeeper may obstruct as long as she remains on her side of the field.
 - c. Illegal. The goalkeeper assumes all responsibilities of a field player when she leaves her goal circle.

Soccer

1. A fan in the stands blows a whistle that sounds like the official's whistle. A4, thinking the official has called for a stoppage of play, picks up the ball with his or her hands in his or her own penalty area. How does the game continue?



- a. The official gives a penalty kick to the opposing team.
 - b. The official gives an indirect free kick to the opposing team.
 - c. The official continues with a dropped ball.
 - d. Since A4 had possession of the ball at the time of the stoppage, award team A an indirect free kick.
2. Which of these are legal uniform combinations?
- a. Home: Solid white jersey top, solid white shorts, solid white socks
 - b. Home: Solid white jersey top, solid blue shorts, solid white socks
 - c. Home: Solid white jersey top, solid white shorts, solid blue socks
 - d. Away: Solid blue jersey top, solid blue shorts, solid blue socks
 - e. Away: Solid blue jersey top, solid white shorts, solid blue socks
 - f. Away: Predominantly blue jersey top with white stripes, solid white shorts, predominantly blue socks with white stripes
3. On a penalty kick, kicker A1 begins his approach to the ball, stops, then continues his approach, striking the ball wide of the net. What is the correct next step?

- a. Goal kick for Team B.
- b. Indirect kick for Team B from the penalty mark.
- c. Team A should retake the kick

Softball

1. B1 hits a ground ball to F6 and beats the throw to first but steps completely over the base without touching it. F3 then catches the throw while contacting first base.
- a. The umpire will make no call.
 - b. The umpire will call, "She's not out."
 - c. The umpire will call and signal B1 safe.
 - d. The umpire will call, "She's not safe."
 - e. B1 may be called out on proper appeal before she returns to first base.
 - f. The umpire will immediately call B1 out.

2. With one out, no runners on base and two strikes on B1, F1's pitch bounces off the ground three feet in front of the plate and B1 tips the ball on her swing and the ball goes sharply and directly to F2's glove where it is securely held by the catcher. F2 then throws the ball to F5 as B1 bolts for first base and is safe.

- a. B1 is safe at first base since the pitched ball touched the ground before it reached F2.
- b. B1 is out because the nicked ball was caught by F2 for a foul tip.



3. How must pitcher's feet be positioned before the start of the pitch?
- a. The pivot foot must be on or partially on top of the rubber. The non-pivot foot may be in contact with or behind the rubber. Both feet must be within or partially within the 24-inch length of the rubber.
 - b. The pivot foot must be within the 24-inch length of the rubber with their pivot foot in contact with the rubber and the non-contact foot in contact with or behind the rubber.
 - c. The pivot foot must have a portion of the pivot foot on the top surface of the rubber and both feet must be on and within the 24-inch length of the rubber.
 - d. The pivot foot and the non-pivot foot must be in contact with and within the 24-inch length of the rubber.

Baseball Answers: 1-d (5-1-1 a; 7-2-1 b; 8-1-1 d); 2-d (1-3-6); 3-a (2-16-1)
 Boys Lacrosse Answers: 1-a, c, d (4-22-2, 3); 2-all (4.7.1 Situation A); 3-a, c (6-5-2, 1-5 and 5-4)
 Girls Lacrosse Answers: 1-b (5-1-4); 2-a, b, d, e, f (4-1-1 a); 3-c (5-19)
 Soccer Answers: 1-d (5-3-2g, 9-3); 2-d (13-4); 3-a, b, c (14-1-4)
 Softball Answers: 1-c, e (2-1-10); 2-b (2-25-2); 3-a (6-1-1)

Cooperative Programs Provide Opportunity

Cooperative Programs are not for everybody, but so many schools are involved that one might think otherwise. As of April 7, 2015 there were 245 high school programs covering 425 sports and 83 cooperative programs involving member middle schools serving 306 sports. Most agreements, 163 of 245 programs were between public schools; 82 programs involved at least one non-public school. First adopted in 1987, cooperative programs have been an exceptional vehicle to enhance participation.

Cooperative agreements typically are of assistance to smaller schools in most sports (less than 1,000 students when enrollments are combined) and smaller sports (those sponsored by fewer than 250 schools). Agreements in sports sponsored by fewer than 250 schools have a combined enrolment cap of 3,500 students and include the following for both boys and girls: swimming and diving, alpine skiing, lacrosse; boys ice hockey and girl gymnastics. There is yet a third type of agreement known as a “startup” provision which would allow schools who have not sponsored a sport the previous year to form together a new sport in excess of the 3,500 student cap. The startup allowance is for three

Perhaps one testimony to the success of MHSAA Cooperative Programs is that very few programs dissolve and discontinue for any reason other than low participation. Less than six per year on average dissolve, and generally three times that many new programs are created.

years after which the agreement must dissolve or reformulate to under 3,500 students. Many lacrosse programs began this way and the process has increased the number of standalone teams. MHSAA staff is often asked if the combined enrollment is for all sports, or just the sports in the agreement. A school's enrollment for MHSAA tournaments is only to the sport in which the cooperative agreement is entered into.

At present there is no regulation which limits the number of schools involved in an agreement. While most agreements involve two or three schools, some ice hockey agreements involve as many as nine schools. Hockey remains the most active sport when it comes to cooperative agreements with a total of 54 cooperative programs out of 159 teams as we entered the 2014-15 school year.

Because Cooperative Programs are an alteration of our most basic rule – that a student must be enrolled at the school they play for – there are requirements and deadlines that must be adhered to, especially for agreements between high schools. The MHSAA Executive Committee approves every cooperative agreement prior to schools initial participation. While some seek to add a cooperative program at the last minute when turnout is less than expected, that route may be a solution for the following year when all parties have had time to consider all the issues. All schools entering into a program must have the expressed approval of their Board of Education or the governing body of a non-public school. High School agreements must also submit the written approval of its league, or if there is no league, then support from a minimum of four future opponents. The firm deadlines for submitting an application to the MHSAA are adhered to in most all instances: April 15 for fall sports, Aug. 15 for winter sports and Oct. 15 for spring sports. In some cases, partial applications are submitted pending the approval of a league or board and that is acceptable. It is recommended middle school applications be submitted 90 days prior to the season, but because there is no MHSAA tournament, middle school applications are generally accepted from member schools at any time prior to the season.

While it sounds like a difficult process, the advance “leg work” is the most challenging. Finding another school that is the right fit and willing to enter into the agreement is the first step; submitting the paper work follows. Often, and especially for small middle schools, it is involvement in a cooperative program which causes that school to become an MHSAA member. One frequently asked question: If we become an MHSAA member school, do we have to follow all the rules in all the sports we sponsor or just those sports that are involved in the cooperative program? The answer is yes, a member school must follow all the rules in all sports in which the MHSAA sponsors a high school tournament.

Included in the application material are documents intended to assist schools in its decision-making. Available on MHSAA.com under ADs



The Only Official Interpretations are Those Received in Writing

Forms and Resources the actual application pages include “Advance Preparation Material and Guidelines for Schools to Consider,” a Board Resolution and a Cooperative Program Board of Control consisting of the athletic director and school administrator from each school. There are many questions to be resolved between schools before they enter into an agreement including who will be considered the primary school, uniforms, practice and contest location, transportation, insurance and funding for example. As is our tradition in school sports, the cooperative program application process attempts to ensure that all the rules are known before the game begins.



Boys ice hockey tops the list of the many sports that have benefitted from the MHSAA’s Cooperative Program Regulations, as 54 such teams hit the ice this past season.

Changing the primary school of a cooperative program is simply done by written notice to the MHSAA of the mutually agreed to change. Adding a school to a cooperative program happens frequently and involves a completely new application where all governing boards and the league agree to the addition of the new school.

Another safeguard to ensure that cooperative programs are serving their intended purpose is the once-every-other-year cooperative agreement renewal process. Agreements of three or more schools or those involving at least one Class A or B school must submit a Renewal Form by May 1 of the previous school year. This renewal process includes the approval of the league in which the schools participate, win loss record and number of students cut. The MHSAA staff reviews the forms and advances onto the Executive Committee any renewal which shows an irregularity.

Cooperative agreements are intended to operate for a minimum of two years. Should a school withdraw from an agreement before two years, the offending school would not be allowed to enter into another agreement in that sport until the two year period is up. Perhaps one testimony to the success of MHSAA Cooperative Programs is that very few programs dissolve and discontinue for any reason other than low participation. Less than six per year on average dissolve, and generally three times that many new programs are created, some of which add or replace a team. After the initial two years, a cooperative program may be dissolved for any reason by a school without penalty and should be done before May 1 for fall sports and Aug 15 for other sports of the preceding year. Agreements which drop a team or dissolve after these dates may not see its tournament classification changed if the tournament has already been set.

An initiative of then-incoming MHSAA Executive Director Jack Roberts when he arrived in 1986, Cooperative Programs have helped to meet our top goal of increasing participation in school sports. We have progressed well and cautiously as Cooperative Programs serve some, but not all, while protecting the integrity of school sponsored athletic programs.

For more specific information on Cooperative Agreements see MHSAA.com (ADs > Forms and Resources), contact the MHSAA Staff or see the 2014-15 Handbook: Pages 27-29 Regulation I, Sections 1 E, F and Interpretations 12-14 and Page 76 Regulation III, Section 1 D.

Editor’s Note: Following the printing of this issue of *benchmarks*, the Representative Council reviewed the Cooperative Agreement application process. It also considered a proposal from the Classification Committee to allow for the formation of a cooperative agreement in excess of 3,500 students in sports sponsored by fewer than 250 schools when a school or cooperative agreement drops a sport due to demonstrated low participation. These “lifeline” agreements, like the sport start-up agreements, would have a three-year window in which to operate before dissolving or reforming to fewer than 3,500 students. Actions of the Council will be forthcoming on MHSAA.com.

MHSAA Representative Council

Dave Derocher**

Athletic Director
Reese High School
Class C-D — Northern Lower Peninsula

Scott Grimes**, President

Assistant Superintendent of Human Services
Grand Haven Public Schools
Statewide At-Large

Kyle Guerrant (ex-officio)

Director, Coordinated School Health & Safety
Programs Unit, Michigan Dept. of Education, Lansing
Designee

Kris Isom*

Athletic Director
Adrian Madison High School
Class C-D — Southeastern Michigan

Sean Jacques**

Assistant Principal/Athletic Director
Calumet High School
Class C-D — Upper Peninsula

Maureen Klocke*

Athletic Director
Yale Public Schools
Appointee

Karen Leinaar*

Athletic Director
Bear Lake High School
Statewide At-Large

Orlando Medina**

Athletic Director
L'Anse Creuse High School
Appointee

Cheri Meier*

Principal
Ionia Middle School
Appointee

Jason Mellema*

Superintendent
Pewamo-Westphalia Schools
Junior High/Middle Schools

Vic Michaels**, Secretary-Treasurer

Director of Physical Education & Athletics
Archdiocese of Detroit
Private and Parochial Schools

Chris Miller*

Athletic Director
Gobles High School
Class C-D — Southwestern Michigan

Steve Newkirk**

Principal
Clare Middle School
Junior High/Middle Schools

Peter C. Ryan**

Athletic Director
Saginaw Township Community Schools
Class A-B — Northern Lower Peninsula

Fred Smith**, Vice President

Athletic Director
Buchanan High School
Class A-B — Southwestern Michigan

John Thompson**

Athletic Director
Brighton High School
Class A-B — Southeastern Michigan

Al Unger*

Athletic Director
Kingsford High School
Class A-B — Upper Peninsula

Alvin Ward*

Administrator of Athletics
Detroit Public Schools
Detroit Public Schools Position

Pat Watson**

Principal
West Bloomfield High School
Appointee

*Term Expires December 2015

**Term Expires December 2016

ANALYSIS OF MHSAA MEMBERSHIP

April 13, 2015

753 Total High Schools

Total Public Schools	644	86%
Charter (Public School Academies)	56	7%
Traditional Schools	588	78%
Total Non Public Schools	109	14%
Religious	109	14%
Secular (Non-Public)	10	1%

703 Total Junior High/Middle Schools

Total Public Schools	632	90%
Charter (Public School Academies)	30	4%
Traditional Schools	602	86%
Total Nonpublic Schools	71	10%
Religious	72	10%
Secular (Non-Public)	6	0.9%

Happy New Year! Prep for 2015-16 School Year

MHSAA.com School Year Start Up: Beginning in mid-July, all athletic directors must log into MHSAA.com and update school contact information for administrators and coaches and double-check the sports the MHSAA shows your school as sponsoring. Adding or dropping a sport must be done in writing on school letterhead. ADs are urged to submit their mobile phone numbers which are kept private and used for necessary contact by MHSAA staff. Accurate coach information allows for rules meeting completion by head coaches.

Coach Requirements: The coming school year (2015-16) is the second year that assistant and subvarsity coaches must also complete a sport rules meeting or one of the designated online courses. Again in 2015-16 Athletic Directors must attest each season that all their coaches have met MHSAA coaching requirements – including for the first time in the fall of 2015-16 that all head varsity coaches have a valid CPR Certification. Coaches who have not met the two requirements (rules meeting or CPR Certification) are not allowed to be present at that school's MHSAA tournament in the sport they coach.

New AD Orientation: MHSAA Regulation II, Section 15 (I) requires that as a condition of participation in MHSAA Tournaments, a school designates a high school athletic director. In addition, that person must attend an Athletic Director's Orientation Program prior to Dec. 1 of that school year. Schools which fail to have their first-year Athletic Director attend shall be placed on probation and prohibited from hosting or receiving reimbursement for MHSAA tournaments.

While the requirement and penalty sound quite ominous, hundreds of administrators who have attended over the years will vouch for the meeting's value. These one-time, six-hour sessions are held in the MHSAA Office in East Lansing in August or September. Dozens of novice ADs come back for a voluntary second session held in November.

Athletic Directors hired this spring or summer, or late this past school year (after Dec. 1, 2014), are to attend a 2015-16 AD Orientation Program on either Thursday, July 30, Tuesday, Aug. 11 (Tuesday, Sept. 15 for later hires). All meetings are in the MHSAA Office from 8:30 a.m.-2:30 p.m. A registration form may be downloaded from MHSAA.com. Direct questions to Tom Rashid (tomr@mhsaa.com) or Camala Kinder (camala@mhsaa.com).

AD In-service and Update Meetings: Athletic directors should plan now to attend an AD In-Service and Update Meeting in the fall. While attendance is strong, some ADs have not attended as their duties have increased. We suggest the opposite approach and urge those who have not attended recently to make it a point of emphasis. Please see details on page 31 of this issue.

The MHSAA Office Summer Hours are 7 a.m.-5 p.m. Monday-Thursday from June 22-July 24. Normal Monday-Friday hours resume July 27 (8 a.m.-4:30 p.m.; close Fridays at 4 p.m.).

Spring Sport Officials Ratings Due June 1

Spring is notoriously the season during which MHSAA schools lapse in their duty to rate contest officials.

We understand the number of contests taking place, the chaotic nature of scheduling due to weather, and the anticipation of summer vacation, but ratings must be submitted for officials at all levels, and on time: June 1. Not only do ratings supply feedback for officials and tournament assignments – they are a requirement your school and coaches are to follow. Please accomplish this detail in baseball, softball, soccer and lacrosse.



Schedule Membership Resolution for Board of Education Meetings

When the Representative Council meets each May, the rules are finalized for the coming school year, and meeting minutes are mailed to each member school. Every member school Board of Education or governing body of a nonpublic school wishing to join the MHSAA for the coming school year must vote to do so and adopt the rules as its own.

The MHSAA Membership Resolution must be signed by the Board of Education and returned to the MHSAA. Please complete both sides of the form: on the reverse side, list schools in your district that will be MHSAA members and include the current enrollment number for 7th and 8th grades. When membership lapses, insurance coverage, among other matters, is jeopardized.

Administrators: Please be sure to schedule the MHSAA Membership Resolution for your upcoming Board of Education Meeting – Membership Resolution Forms are mailed to superintendents and athletic directors each May and are due back to the MHSAA by July 31.

Candidates Set for September 2015 Election

BALLOTS TO BE MAILED TO SCHOOLS IN SEPTEMBER 2015

Ballots for Representative Council elections will be mailed to principals of member schools from the MHSAA office Sept. 4, 2015. The ballots will be due back in the MHSAA office Sept. 25, 2015.

Six positions for membership on the Representative Council will be up for election this fall. Vacancies for two-year terms beginning December 2015 will occur as follows: Class C-D Southwestern Section L.P. and Southeastern Section L.P.; Class A-B Upper Peninsula; Statewide At-Large; Junior High/Middle School, elected on a statewide basis; and Detroit Public High Schools.

In addition to the above named Representative Council positions, there are three Upper Peninsula Athletic Committee positions to be voted on in September. A representative of the Class A-B, Class C and Class D schools will be elected by Upper Peninsula schools.

Look for the ballots and return them in time to be counted by the Board of Canvassers. Be sure you mark your ballot correctly and signatures are affixed in the proper places. Ballots must have two (2) signatures to be considered valid.

Details of the Representative Council composition may be found near the beginning of the *MHSAA Handbook*.

Following the due date of Sept. 25, 2015, the Board of Canvassers as provided in Article IV of the Constitution of the Michigan High School Athletic Association, will meet and declare the winners for the various vacancies.

In accordance with the approved nomination and election procedures, listed candidates have submitted their desire to run for a position by March 15, 2015. They have included an approval to serve from their respective superintendent or principal and have certified their qualifications to run for the office which they seek. No write-ins will be possible because each candidate must be approved by March 15 in order to run for a position on the Representative Council.

Following are the declared candidates and the vacancies which will occur in December 2015:

REPRESENTATIVE COUNCIL CANDIDATES FOR SEPTEMBER 2015 ELECTION

Southwestern Section, Lower Peninsula -- Class C and D Schools

- Chris Miller, Athletic Director/Dean of Students, Gobles High School

Southeastern Section, Lower Peninsula -- Class C and D Schools

- Kristen M. Isom, Athletic Director, Adrian-Madison High School

Upper Peninsula -- Class A and B Schools

- Al Unger, Athletic Director, Kingsford High School

Statewide At-Large

- Karen S. Leinaar, CAA, Athletic Director, Bear Lake Schools
- Don McKenzie, Assistant Principal/Athletic Director, Lincoln Park High School

Junior High/Middle Schools

- Don Gustafson, Superintendent, St. Ignace Area Schools
- Robert Masters, Assistant Principal/Athletic Director, Lincoln Park Middle School
- Steve Muenzer, Teacher/Football & Basketball Coach, Fenton-Lake Fenton Middle School
- Kevin O'Rourke, Athletic Director, Rockford-North and East Middle Schools

Detroit Public Schools

- Alvin Ward, Executive Director of Athletics, Detroit Public Schools

UPPER PENINSULA ATHLETIC COMMITTEE

Class D Schools

- Gary S. Brayak, Athletic Director, Rock-Mid Peninsula High School

Class C Schools

- Chris Hartman, Athletic Director, Iron Mountain Public Schools

Class A and B Schools

- Matthew C. Houle, Athletic Director, Gladstone High School

“One Summer” Worth of Reading

How often will the words “The Summer of ...” be spoken during the lazy, hazy days that await us in the coming months?

In this state, Tiger fans talk about the Summer of ‘68, ‘84 or ‘06 depending on their age. Classic movie buffs surely place “Summer of ‘42” among the top coming-of-age movies each beach season. Sitcom aficionados yearn for a “Summer of George” all for themselves, like the one Costanza conjured up in the well known *Seinfeld* episode.

Put Bill Bryson’s *One Summer: America, 1927*, (Knopf Doubleday Publishing Group, 2013) on your must-read, or listen-to, lists for getaway days at your favorite retreat. You might develop new “Summer of...” material without having been there.

Bryson delivers a rollicking reckoning of those months that made 1927 alternately sensational and sublime; turbulent and triumphant.

Other than...Babe Ruth’s 60 home runs leading perhaps the greatest team ever assembled to another World Series; not one, but two, sensationalized murder trials taking place in the daily tabloids; the first film to include sound hitting the big screens; a secret meeting of the world’s most influential bankers that would result in the stock market crash of ‘29; the most anticipated and controversial boxing bout of all time; a devastating flood of Biblical proportions; the rise of Al Capone’s reign, the end of Henry Ford’s Model-T and the start of Mount Rushmore...it was a boring summer.

Oh, and a quiet 25-year-old named Charles Lindbergh, flew a plane from New York to Paris and unwillingly became the most famous person on the planet who

often continued to fly simply to avoid crowds.

Without a doubt, history has provided you with cursory knowledge of these events. Bryson puts you there.

Ruth’s epic campaign came when many had him washed up, and came a year after a colossal base-running blunder cost the Yanks the previous year’s Series.

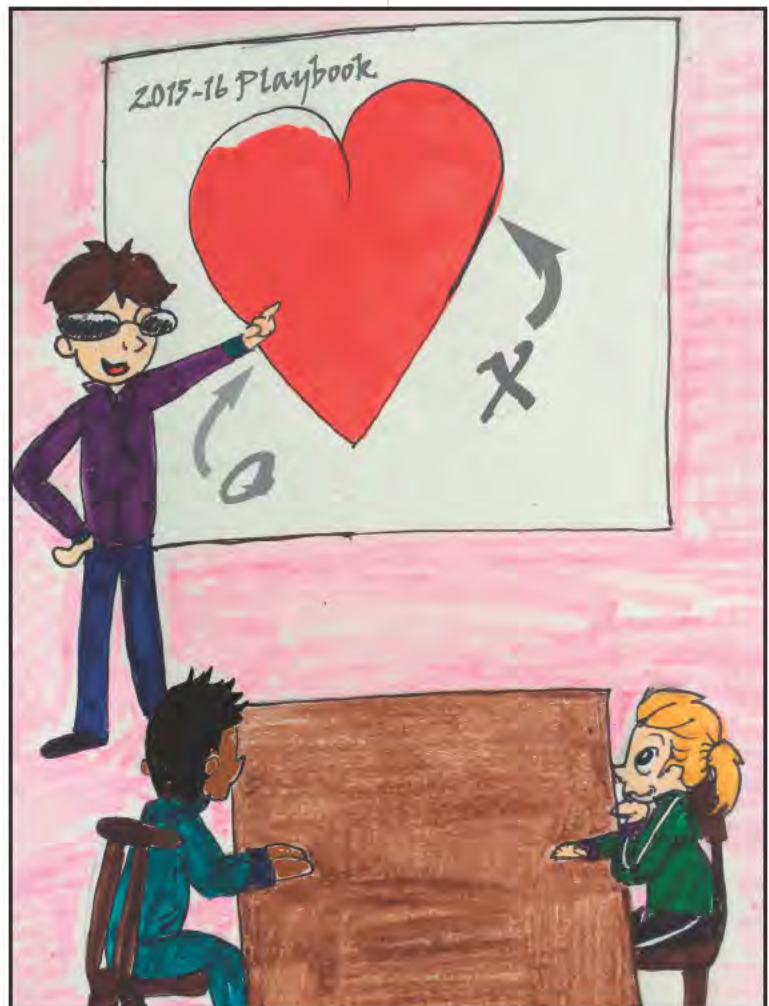


Lindbergh plotted his course in a notebook between his legs, often coming out of a cloud to realize he was only 10 feet above ground. But, he got there.

Come back next fall better than ever. Overcome obstacles and reach your destination.

And, when asked about your summer, you can say, “Well, it was no Summer of ‘27, but...”

the buzzer



Hailey Deyo, Fowlerville HS

Basketball Experience Aims to Reach Higher in 2015

Now in its seventh year, BCAM and the MHSAA have united to bring the perfect venue for under-class basketball players to “showcase” their talents and maybe reach a higher level after high school.



The Reaching Higher Experience is the “Advanced Placement Course” in high school basketball.

This NCAA-approved event will provide each student-athlete an understanding of what it takes to succeed academically, athletically and socially at the college level.

Player invitations for the 2015 events have now been sent to schools.

The Boys event is slated for July 15, 2015, and the Girls event takes place July 23, both at Highland-Milford High School.

Visit MHSAA.com and BCAM.org for updated information.

Introducing...the MHSAA Spring Sports Spectacular

The MHSAA invites you to the campus of Michigan State University in mid-June for its Spring Sports Spectacular, where three sports will crown champions during a three-day extravaganza.

The Girls Soccer Finals will take place Friday-Saturday, June 12-13, with championship matches in two Divisions taking place each day.

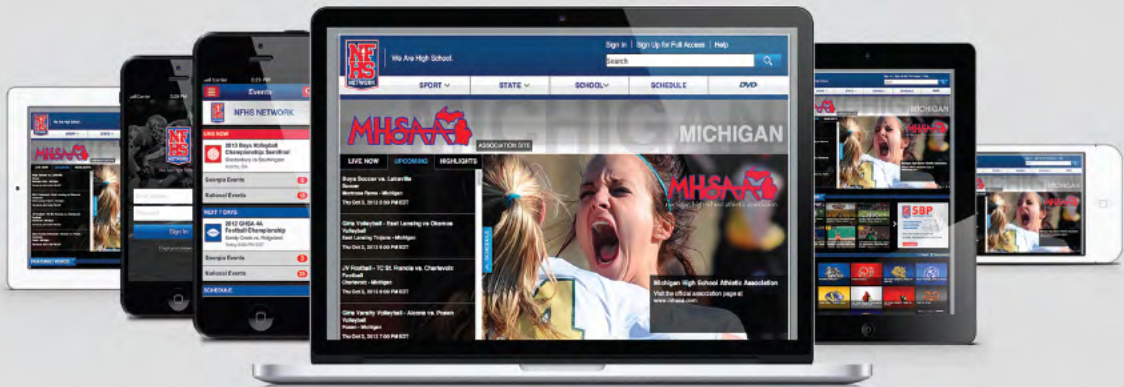
Meanwhile, the Baseball and Softball Semifinals will take place on adjacent fields beginning Thursday, June 11, with four title games in each sport scheduled for Saturday, June 13.

Important Fall 2015 Administrative Dates

June 1	Three/Four Player Rules ends; Summer Rules begin
June 1-July 31	Summer competition except during dead week (set by each school)
Aug 1 to Start of Fall Sports	Pre Season Down Time
Aug 10	Three/Four Player Rule resumes
June 29-July 3	MHSAA Office Closed
Mid-July	School Year Start-Up on MHSAA.com
July 30 & Aug 11	New AD Orientation at MHSAA
July 27/Aug 10	Fall Online Rules Meetings Begin
Aug. 1	MHSAA Membership Resolution due
Sept. 15	New AD Orientation at MHSAA (later hires)
Sept. 16	Administrative Assistant In-Service MHSAA
Sept. 17	ADs must attest CPR for Head varsity coaches and subvarsity & assistant coach completion of fall rules meetings or approved online course
Sept. 23	Kalamazoo Update & AD In-Service
Sept. 28	Warren Update & Detroit Public Charter School AD In-Service
Oct. 1	Lansing Update & AD In-Service
Oct. 5	Comstock Park Update & In-Service
Oct. 7	Frankenmuth Update & In-Service
Oct. 12	Gaylord Update & AD In-Service
Oct. 30	Marquette Update Meeting



Millions of Athletes.
Thousands of Games.
One Destination.

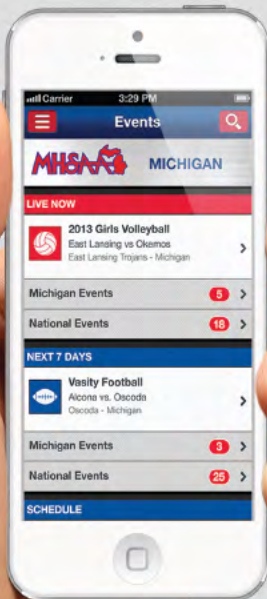


Introducing the MHSAA on The NFHS Network

Watch featured games live and see top highlights of high school sports coverage from across the country.

NFHS Network subscribers get exclusive mobile access to live games on the go. Watch your favorite high school sporting events when you want, where you want.

Visit MHSAA.tv or NFHSNetwork.com/MHSAA to subscribe today.



**MICHIGAN HIGH SCHOOL
ATHLETIC ASSOCIATION, INC.
1661 Ramblewood Dr.
EAST LANSING, MICHIGAN 48823-7392**

**NON-PROFIT ORG.
U.S. POSTAGE
PAID
Permit No. 887
Lansing, Michigan**