

# High School Sport Safety Policies for Montana

The scoring of the rubric is based out of 100 points. Each category is worth 20 points and most are broken down into subcategories (see summary table below). Points are only awarded to policies that are in alignment with current best practices for that specific topic. A decision to award points to policies that are more conservative than current best practices may also be considered if the associated policy further enhances athlete health.

Summary of State Policies

Category*	Subcategory	Points Earned	Points Possible
<b>Exertional Heat Stroke</b>	<i>Heat Acclimatization</i>	1	7
	<i>WBGT Monitoring (Environmental/Regional Modifications)</i>	0	5
	<i>Other Heat Policies</i>	2	8
<b>Traumatic Head Injuries</b>	-	6	20
<b>Sudden Cardiac Arrest</b>	<i>PPE Questions</i>	4	4
	<i>AED Availability</i>	6	16
<b>Appropriate Health Care Coverage</b>	<i>Regulation of Athletic Trainers</i>	10	10
	<i>Appropriate Healthcare Providers for Athletics</i>	0	10
<b>Emergency Preparedness</b>	<i>Emergency Action Plans</i>	0	8
	<i>Coaching Education</i>	4	8
	<i>Sickle Cell Trait PPE</i>	2	2
	<i>Strength and Conditioning Sessions</i>	0	2
<b>Total Score</b>		35.0	<b>out of 100</b>

\*Category totals are each 20 points. For example, the subcategories for exertional heat stroke add up to 20 points.

## 1. Exertional Heat Stroke – 20 points of 100 overall

Table 1a. Heat Acclimatization – 7 points of 20 category points

Policy	Yes/No	Points Earned	Points Possible
1. Days 1–5 are the first formal practices. No more than 1 practice occurs per day	N	0	1
2. In days 1-5, total practice time should not exceed 3 hours in any 1 day	N	0	1
3. On days 1-5, 1-hour maximum walk-through is permitted, however there must be a 3-hour minimum between practice and walk-through (or vice versa)	N	0	1
4. During days 1–2 of first formal practices, a helmet should be the only protective equipment permitted (if applicable). During days 3–5, only helmets and shoulder pads should be worn. Beginning on day 6, all protective equipment may be worn and full contact may begin. Football only: on days 3–5, contact with blocking sleds and tackling dummies may be initiated Full-contact sports: 100% life contact drills should begin no earlier than day 6	N	0	1
5. Day 6–14, double-practice days must be followed by a single-practice day. On single-practice days, 1 walk-through is permitted, separated from the practice by at least 3 hours of continuous rest. When a double-practice day is followed by a rest day, another double practice day is permitted after the rest day.	N	0	1
6. On a double-practice day, neither practice day should exceed 3 hours in duration, and no more than 5 total hours of practice in the day. Warm-up, stretching, cool-down, walk-through, conditioning and weight-room activities are included as part of the practice time.	Y	1	1
7. On a double-practice day, the 2 practices should be separated by at least 3 continuous hours in a cool environment.	N	0	1
<b>Total Points for Heat Acclimatization</b>		<b>1 out of 7</b>	

Table 1b. WBGT Monitoring (Device/Regional Modifications) – 5 points of 20 category points

Policy	Yes/No	Points Earned	Points Possible
1. State requires all schools to have a heat modification policy	N	0	0.625
2.* The heat policy is based off of WBGT (optimal measurement)	N	0	1.25*
3.* The recommended heat policy is based off of Heat Index (adequate alternative if WBGT is unavailable)	N	0	0.625*
4. The environmental conditions guidelines are based off of epidemiological data specific to that state/region (for bigger states a more comprehensive analysis may be needed)	N	0	0.625
5. The heat policy has at minimum 4 levels of modification, including the modification of practice time	N	0	0.625
6. Policy includes modification of equipment (if applicable to the sport)	N	0	0.625
7. Policy includes modification of work:rest ratios, including unrestricted access to fluids	N	0	0.625
8. Policy mentions the use of a shaded area for rest breaks	N	0	0.625
<b>Total for WBGT Monitoring</b>		<b>0 out of 5</b>	

\*Points are earned for highest category of temperature monitoring.

Table 1c. Other Policies for Heat – 8 points of 20 category points

Policy	Yes/No	Points Earned	Points Possible
1. Cold water immersion tubs for onsite cooling for all warm weather practices	N	0	3
2. If exertional heat stroke is suspected, onsite cooling using cold water immersion before transport to the hospital	N	0	3
<b>Screening questions on PPE (i.e., previous history, other predisposing factors)</b>			-
3. Require 4th Edition PPE forms from American Academy of Pediatrics or equivalent	Y	2	2
<b>Total Points for Other Heat Policies</b>		<b>2 out of 8</b>	

## 2. Traumatic Head Injuries – 20 points of 100 overall

Table 2. Traumatic Head Injuries – 20 points

Policy	Yes/No	Points Earned	Points Possible
<b><i>Comprehensive training and education for coaches (i.e., Heads Up Football or equivalent)</i></b>			Total: 10
1. Football Coaches	N	0	8
2. All Coaches	N	0	2
3. Athletes not permitted to return to activity on the same day if a concussion is suspected	Y	2	2
4. Athletes not permitted to return to activity until cleared by an appropriate healthcare professional (MD, ATC, PA, APRN)	Y	2	2
5. Athletes are not permitted to start return-to-play until they fully return to school	N	0	2
<b><i>A minimum of a 5-step graduated return to play protocol required before full return to activity</i></b>			Total: 2
6. No more than 2 phases in any one day	N	0	1
7. If symptoms return during any one step, athlete must regress to previous step	N	0	1
<b><i>Concussion related PPE questions</i></b>			
8. Require 4th Edition PPE forms from American Academy of Pediatrics or equivalent	Y	2	2
<b>Total for Traumatic Head Injuries</b>	<b>6 out of 20</b>		

### 3. Sudden Cardiac Arrest – 20 points of 100 overall

Table 3. Sudden Cardiac Arrest – 20 points

Policy	Yes/No	Points Earned	Points Possible
<b>Screening (PPE questions and Physician clearance)</b>			Total: 4
1. Require 4th Edition PPE forms from American Academy of Pediatrics or equivalent	Y	4	4
<b>AED onsite at each venue or accessible within 1-3 minutes</b>			Total: 16
2. AEDs are to be used under the advice and consent of a physician by individuals with proper training and certification	N	0	2
3. AED should be stored in a safe place	N	0	2
4. All athletic trainers, coaches, administrators, school nurses, and physical education teachers should have access to an AED on school property	N	0	2
5. Institutions sponsoring athletic events/activities should have an AED on site or access to one at each athletic venue for practices, games, or other athletic events	N	0	2
6. Individuals [all personnel involved with sponsored athletic events/activities] should be provided annual training and certification in cardiopulmonary resuscitation (CPR) and AED use	Y	2	2
7. Location of AED should be well marked, publicized, accessible and known among trained staff	N	0	2
8. The AED should be used only after enacting the EMS system.	Y	2	2
9. AEDs should be inspected frequently to ensure proper working order. This includes making sure the batteries are charged, and wires and electrodes are in good condition	Y	2	2
<b>Total Points for Sudden Cardiac Arrest</b>		<b>10 out of 20</b>	

#### 4. Appropriate Health Care Coverage – 20 points of 100 overall

Table 4. Appropriate Health Care Coverage – 20 points

<b>General Appropriate Health Care Coverage – 20%</b>	<b>Yes/No</b>	<b>Points Earned</b>	<b>Points Possible</b>
<b>1. Regulation*</b>			Total: 10
<i>Licensure – 10 Points</i>	Y	10	
<i>Some Form (i.e., Registered) – 5 Points</i>	N	0	
<i>No Regulation – 0 Points</i>	N	0	
<b>2. Appropriate healthcare professional (i.e., Athletic Trainer) be onsite at collision/contact practices†</b>			Total: 10
<i>Required at all collision/contact practices and competitions – 10 Points</i>	N	0	
<i>Recommended at all collision/contact practices and competitions – 5 Points</i>	N	0	
<b>Total Points for Appropriate Health Care Coverage</b>	<b>10 out of 20</b>		

\* Points can only be earned in highest category of regulation.

† Points can only be earned in higher category of appropriate health care coverage.

## 5. Emergency Preparedness – 20 points of 100 overall

Table 5a. Emergency Action Plans – 8 points of 20 category points

Policy	Yes/No	Points Earned	Points Possible
1. Every school or organization that sponsors athletics should develop an EAP specifically for managing serious and/or potentially life-threatening sport-related injuries (athletics emergency action plan AEAP)	N	0	0.8
2. The AEAP should be developed and coordinated with local EMS, school public safety officials, on site medical personnel or school medical staff, and school administrators	N	0	0.8
3. Every school should distribute the AEAP to all athletics staff members	N	0	0.8
4. The AEAP should be specific to each venue (including maps, directions, etc.)	N	0	0.8
5. On-site emergency equipment that may be needed in an emergency situation should be listed	N	0	0.8
6. The AEAP should identify personnel and their responsibilities to carry out the plan of action with a designated chain of command	N	0	0.8
7. Appropriate contact information for EMS	N	0	0.8
8. Plan should specify documentation actions that need to be taken post emergency	N	0	0.8
9. AEAP should be reviewed and rehearsed annually by all parties involved	N	0	0.8
10. Healthcare professionals who will provide medical coverage during games, practices, or other events should be included	N	0	0.8
<b>Total Points for EAPs</b>		<b>0 out of 8</b>	

Table 5b. Coaching Education & CPR/First Aid – 8 points of 20 category points

Policy	Yes/No	Points Earned	Points Possible
1. Coaching education required as part of coaching certification on topics related to preventing sudden death in sport	Y	4	4
2. CPR/AED and First aid training are required for all coaches‡			4
All Coaches – 4 points	N	0	4
Only Head Coaches – 2 points	N	0	2
<b>Total Points for Coaching Education</b>		<b>4 out of 8</b>	

‡ Points are earned by highest category of CPR/AED & First Aid Training for coaches.

Table 5c. Sickle Cell Trait Screening – 2 points of 20 category points

Policy	Yes/No	Points Earned	Points Possible
<i>Require 4th Edition PPE forms from American Academy of Pediatrics or equivalent</i>	Y	2	2
<b>Total Points for Sickle Cell Trait Status</b>		<b>2 out of 2</b>	

Table 5d. Strength and Conditioning Sessions – 2 points of 20 category points

Policy	Yes/No	Points Earned	Points Possible
<i>1. Conditioning periods should be phased in gradually and progressively to minimize risk of injury during transitional periods. Also, Introduce new conditioning activities gradually, especially during the early stages of a conditioning program</i>	0	0	0.667
<i>2. Exercise and conditioning activities are not permitted to be used as punishment</i>	0	0	0.667
<i>3. Requires appropriate supervision (i.e., coach certified in CPR/First Aid with education on the prevention of sudden death in sport or an Athletic Trainer onsite)</i>	0	0	0.667
<b>Total Points for Strength and Conditioning Sessions</b>		<b>0 out of 2</b>	