

IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF WEST VIRGINIA

B.P.J. by her next friend and mother, HEATHER JACKSON,

Plaintiff,

v.

WEST VIRGINIA STATE BOARD OF EDUCATION, HARRISON COUNTY BOARD OF EDUCATION, WEST VIRGINIA SECONDARY SCHOOL ACTIVITIES COMMISSION, W. CLAYTON BURCH in his official capacity as State Superintendent, DORA STUTLER in her official capacity as Harrison County Superintendent, and THE STATE OF WEST VIRGINIA,

Defendants,

and

LAINY ARMISTEAD,

Defendant-Intervenor.

Civil Action No. 2:21-cv-00316

Hon. Joseph R. Goodwin

DECLARATION OF SRUTI SWAMINATHAN

I, Sruti Swaminathan, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am an attorney at Lambda Legal and counsel of record for Plaintiff B.P.J, with her next friend and mother, Heather Jackson. The following is true of my own personal knowledge, and, if called as a witness, I would and could testify competently thereto.

2. I submit this declaration in support of Plaintiff B.P.J.'s Opposition to WVSSAC's Motion *in Limine* to Exclude Regional Principals' Meeting PowerPoint and Recorded Presentation.

3. Attached to this declaration are true and correct copies of the documents listed in the table below.

Exhibit	Description
A	Regional Principals' Meeting PowerPoint

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on June 29, 2022

/s/ Sruti Swaminathan
Sruti Swaminathan

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CHARLESTON DIVISION

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CERTIFICATE OF SERVICE

I, Loree Stark, do hereby certify that on this 29th day of June, 2022, I electronically filed a true and exact copy of the foregoing document with the Clerk of Court and all parties using the CM/ECF System.

/s/ Loree Stark

Loree Stark

Exhibit A



REGIONAL PRINCIPALS' MEETING

2021-2022

WA/SSAC/000287

Our Staff

- Bernie Dolan, Executive Director
- Greg Reed, Assistant Executive Director
- Wayne Ryan, Assistant Executive Director
- Cindy Daniel, Assistant Executive Director
- Heather Enoch, Communications Coordinator

- Alice Goodwin, Secretary
- Katelyn Enoch, Secretary
- Stephani Cox, Secretary
- Laura Wallace, Bookkeeper



BERNIE DOLAN
WVSSAC EXECUTIVE DIRECTOR

WVSSAC 06/29/22

ARMY WEST VIRGINIA
NATIONAL GUARD
1-800-GO-GUARD NationalGuard.com

WVSSAC0902683



OUR VALUES

- Respect
- Integrity
- Loyalty
- Selfless Service
- Duty
- Honor
- Personal Courage

WVSSAC000291

WV NATIONAL GUARD

- Up to 100% PAID college tuition
- Montgomery GI Bill pays up to \$558 per month
- \$60,000 student loan repayment program
- Affordable health, dental, life insurance
- Job and skill training
- Drill check



WVSSAC000292



WVSSAC Board of Directors

- Greg Moore, President
Principal, South Harrison High School
- Mike Kelley, Vice President
Principal, Herbert Hoover High School
- Lee Loy, Member
Principal, Valley PreK-8
- David Cottrell, Member
Principal, Clay Battelle High School
- Jimmy Frashier, Member
Principal, Ripley High School
- Steve Campbell, Member
WVADA
- Dr. Eddie Campbell, Member
WVASA
- Jim Crawford, Member
WVSBA
- Dr. James Wilson, Member
WV State Board of Education
- Bob Dunlevy, Member
WV State Superintendent Designee

WVSSAC000293

COVID 19 Update



- Fall sports and band will begin with no modifications
- Schedules will not be altered, including post season
- Forfeit vs no contest
- Student athletes who have been vaccinated will NOT have to quarantine if exposed to someone with COVID 19
- Student athletes are encouraged to be vaccinated!
- *Subject to change should we receive new directives from state officials. *

Rules & Regulations Handbook

New Rule Adoptions
Effective 9/2021

WESAG/2021

New Rules & Regulations

- Practice Days Prior to Scrimmage – 7 to 5
- Practice Days Prior to First Contest – 14 to 12
- Football Progressions – Wayne will address
- Middle School Swim Season – Winter or Spring, 12 Weeks Max
- Middle School Volleyball Play Dates – 16 to 18
- Participation for Home School Students – see next slide
- Residence Transfer for Home School Students – see next slide
- AED and Training Requirement – Cindy will address



Home School Eligibility



- Home School Students May Participate in Extracurricular Activities in their attendance area provided that the student:
 - Is enrolled in at least one virtual class each semester
 - Has been homeschooled for a minimum of one year prior to enrolling
 - Maintains satisfactory academic progress (a stanine or 4 or higher on a national normed assessment)
 - Maintains a “C” average
 - Meets all other eligibility requirements
 - Residence transfer rules apply to homeschool students OR
 - Is enrolled in the equivalent of four or more virtual classes or combination of virtual/in person and meets other eligibility requirements

School Reimbursement



WVSSAC000298

Emergency Action Plans and Concussion Reporting (Senate Bill 605)

- Requires an Emergency Action Plan (EAP) to be completed and submitted online to the WVSSAC annually for each sport **before the first day of practice**
- Requires reporting of all athletes suffering or being suspected of suffering a concussion. **Report must be submitted within 7 days.**
- Adds licensed physical therapists (with proper training) to list of approved health care providers in the evaluation of concussions.
- Requires WVSSAC to discipline schools that do not complete/submit the Emergency Action Plans (fines up to \$250 per sport)

REQUIRED – Emergency Action Plan

- ALL schools must complete an Emergency Action Plan annually BEFORE THE FIRST DAY OF PRACTICE. Please work with your athletic director and school administrators to make sure it is completed.
- Fines up to \$250 if not completed by first day of practice.
- EAP is required by law to be posted.

Emergency Action Plan Worksheet – Student Response Team									
Coach/Advisor Name:				Activity:				Level:	
1 911 TEAM			2 CPR/AED TEAM			3 AED TEAM			
CALL 911			START CPR			GET THE AED			
CALL 911. Explain emergency. Provide location.			1. Position person on back. 2. Put one hand on top of the other on middle of person's chest. Keeping arms straight, push hard and fast, 100 presses/minutes. Let chest completely recoil after each compression. 3. Take turns with other responders as needed.			PRACTICE		EVENTS	
Closest Phone			Coach			Closest AED			
EMS Access Point			Student 1			Student 1			
Street Intersection			Student 2			Student 2			
Student 1			Student 3			GET THE ATHLETIC TRAINER			
Student 2			WHEN AED ARRIVES, TURN IT ON AND FOLLOW VOICE PROMPTS			Typical Location			
			1. Remove clothing from chest. 2. Attach electrode pads as directed by voice prompts. 3. Stand clear while AED analyzes heart rhythm. 4. Keep area clear if AED advises a shock. 5. Follow device prompts for further action. 6. AFTER EMS takes over, give AED to Athletic Administrator for data download.			Student 1			
						Student 2		CALL 911 for all medical emergencies. If unresponsive and not breathing normally, begin CPR and get AED.	
MEET AMBULANCE at EMS Access Point. Take to victim.			4 HEAT STROKE TEAM						
Practice Events			PRACTICE			PREPARE TUB DAILY			
Entry Door/Gate			Tub Location			Student 1		PRACTICE EVENTS	
Student 1			Water Source Location			Student 2			
Student 2			Ice Source Location			1. Remove equipment/excess clothing. Move to shade. 2. Immerse athlete into cold ice water tub, stir water. *If cold shower or misting cold, wet towels over the entire body. 3. Monitor vital signs. 4. Cool First, Transport Second. 5. Cool until rectal temperature reaches 102 F if ATC or N/A available. 6. If no medical staff, cool until EMS arrives.			
CALL CONTACTS: Provide location and victim's name.			Ice Towel Location						
NAME CELL			Student 1						
Athletic Trainer			Student 2						
Athletic AD									
Student 1									
Student 2									

WVSSAC000300

International vs Foreign Exchange Students

- Difference in International and Foreign Exchange
- J1 vs F1 Visas



VVSSAC000301

Big Teams/Schedule Star Update



WVSSAC000302

Arbiter Update

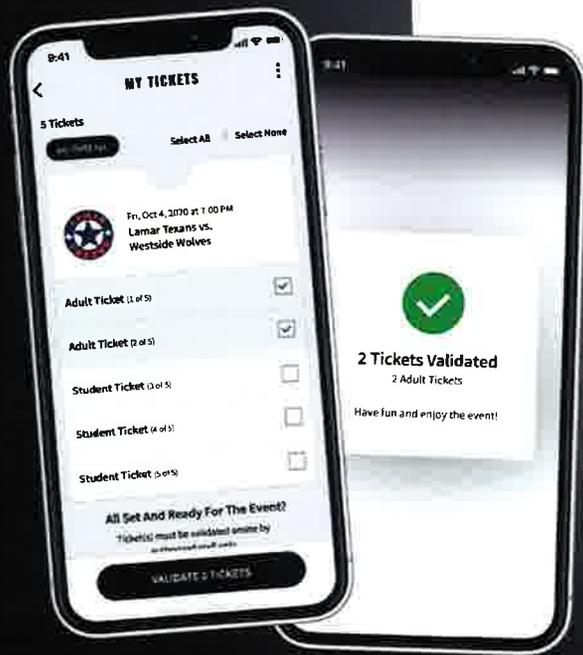
ArbiterSports

WVSSAC000303



DIGITAL TICKETING

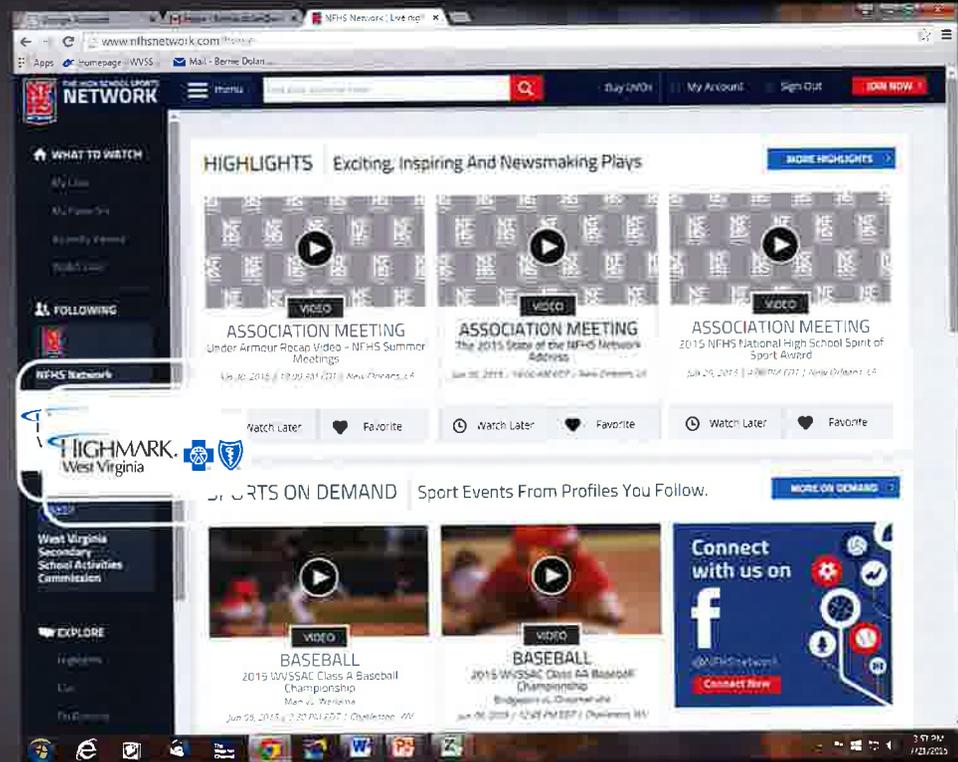
An easy way for fans to buy & share tickets. No hardware or hassle at your gate.



- Our goal is to move toward 100% digital ticketing

WVSSAC000304

NFHS Network



WVSSAC000305



Brighter futures and
better tomorrows
start by changing the
game today

 WEST VIRGINIA
GAMECHANGER

WVSSAC000306

Other Important Information



- Catastrophic Insurance – Member schools are covered as long as eligibility and sanctioning forms are completed and correct
- Ejection Appeals – form online
- NFHS Awards – Spirit of Sport, Heart of the Arts – will send info
- Administrator Workshop – September 16, 2021 – 9:00 am – great workshop for administrators responsible for athletics

Interscholastic and Coaches' Packets

- PLEASE make sure that your coaches read the Interscholastic, Coaches' Packet, and Sports Medicine Packet before they begin their seasons!
- Important information is contained in these documents
- Reading the information can alleviate many problems!



WVSSAC ADMINISTRATIVE STAFF

WAYNE RYAN, CAA
ASSISTANT EXECUTIVE DIRECTOR

WVSSAC STAFF

Physical Exams

- **No participation without completed/signed form.
Student (1), Parent (2), and the physician**
- **Must be dated/signed on or after **May 1, 2021****



11/25/2020 00:03:10

WEST VIRGINIA SECONDARY SCHOOL ACTIVITIES COMMISSION
 2875 Staunton Turnpike - Parkersburg, WV 26104

May 2020

ATHLETIC PARTICIPATION/PARENTAL CONSENT/PHYSICIAN'S CERTIFICATE FORM
 (Form required each school year on or after May 1st. File in School Administration Office)

ATHLETIC PARTICIPATION / PARENTAL CONSENT
PART I

Name _____ School Year: _____ Grade Entering: _____
 Home Address: _____ Home Address of Parents: _____
 City: _____ City: _____
 Phone: _____ Date of Birth: _____ Place of Birth: _____

Last semester I attended _____ (High School) or (Middle School). We have read the condensed eligibility rules of the WVSSAC athletics. If accepted as a team member, we agree to make every effort to keep up school work and abide by the rules and regulations of the school authorities and the WVSSAC.

INDIVIDUAL ELIGIBILITY RULES

- Attention Athlete! To be eligible to represent your school in any interscholastic contest, you ...
- _____ must be a regular bona fide student in good standing of the school. (See exception under Rule 127-2-3)
 - _____ must qualify under the Residence and Transfer Rule (127-2-7)
 - _____ must have earned at least 2 units of credit the previous semester. Summer School may be included. (127-2-9)
 - _____ must have attained an overall "C" (2.00) average the previous semester. Summer School may be included. (127-2-6)
 - _____ must not have reached your 15th (MS), 18th (HS) birthday before August 1 of the current school year. (127-2-4)
 - _____ must be residing with parent(s) as specified by Rule 127-2-7 and 8.
 - _____ unless parents have made a bona fide change of residence during school term.
 - _____ unless an AFS or other Foreign-Exchange student (one year of eligibility only).
 - _____ unless the residence requirement was met by the 365 calendar days attendance prior to participation.
 - _____ if living with legal guardian/custodian, may not participate at the varsity level. (127-2-8)
 - _____ must have submitted to your principal before becoming a member of any school athletic team Participation/Parent Consent/Physician Form, completely filled in and properly signed, attesting that you have been examined and found to be physically fit for athletic competition and that your parents consent to your participation. (127-3-3)
 - _____ must not have transferred from one school to another for athletic purposes. (127-2-7)
 - _____ must not have received, in recognition of your ability as a HS or MS athlete, any award not presented or approved by your school or the WVSSAC. (127-3-5)
 - _____ must not, while a member of a school team in any sport, become a member of any other organized team or as an individual participant in an unsanctioned meet or tournament in the same sport during the school sport season (See exception 127-2-10).
 - _____ must follow All Star Participation Rule. (127-3-4)
 - _____ must not have been enrolled in more than (6) semesters in grades 9 to 12. Must not have participated in more than three (3) seasons while in grades 6-7-8. (Rule 127-2-5).

Eligibility to participate in interscholastic athletics is a privilege you earn by meeting not only the above listed minimum standards but also all other standards set by your school and the WVSSAC. If you have any questions regarding your eligibility or are in doubt about the effect any activity or action might have on your eligibility, check with your principal or athletic director. They are aware of the interpretation and intent of each rule. Meeting the intent and spirit of WVSSAC standards will prevent athletes, teams, and schools from being penalized.

PART II - PARENTAL CONSENT

In accordance with the rules of the WVSSAC, I give my consent and approval to the participation of the student named above for the sport NOT MARKED OUT BELOW:

BASEBALL	CROSS COUNTRY	GOLF	SWIMMING	VOLLEYBALL
BASKETBALL	FOOTBALL	SOCCER	TENNIS	WRESTLING
CHEERLEADING		SOFTBALL	TRACK	

MEDICAL DISQUALIFICATION OF THE STUDENT-ATHLETE / WITHHOLDING A STUDENT-ATHLETE FROM ACTIVITY
 The member school's team physician has the final responsibility to determine when a student-athlete is removed or withheld from participation due to an injury, an illness or pregnancy. In addition, clearance for that individual to return to activity is solely the responsibility of the member school's team physician or that physician's designated representative.

I understand that participation may include, when necessary, early dismissal from classes and travel to participate in interscholastic athletic contests. I will not hold the school authorities or West Virginia Secondary School Activities Commission responsible in case of accident or injury as a result of this participation. I also understand that participation in any of those sports listed above may cause permanent disability or death. Please check appropriate space: He/She has student accident insurance available through the school (); had football insurance coverage available through the school (); is insured to our satisfaction ().

I also give my consent and approval for the above named student to receive a physical examination, as required in Part IV, Physician's Certificate, of this form, by an approved health care provider as recommended by the named student's school administration.

I consent to WVSSAC's use of the herein named student's name, likeness, and athletically related information in reports of Inter-School Practices or Scrimmages and Contests, promotional literature of the Association, and other materials and releases related to interscholastic athletics.

I have read/reviewed the concussion and Sudden Cardiac Arrest information as available through the school and at WVSSAC.org. (Click Sports Medicine)

Date: _____ Student Signature _____ Parent Signature _____



WVSSAC000311

PART III – STUDENT'S MEDICAL HISTORY
(To be completed by parent or guardian prior to examination)

May 2020

Name _____ Birthdate ____/____/____ Grade ____ Age ____

- Has the student ever had:
- | | |
|--|--|
| Yes No 1. Chronic or recurrent illness? (Diabetes, Asthma, Seizures, etc.) | Yes No 12. Have any problems with heart/blood pressure? |
| Yes No 2. Any hospitalizations? | Yes No 13. Has anyone in your family ever fainted during exercise? |
| Yes No 3. Any surgery (except tonsils)? | Yes No 14. Take any medicine? List |
| Yes No 4. Any injuries that prohibited your participation in sports? | Yes No 15. Wear glasses _____, contact lenses _____, dental appliances _____? |
| Yes No 5. Dizziness or frequent headaches? | Yes No 16. Have any organs missing (eye, kidney, testicle, etc.)? |
| Yes No 6. Knee, ankle or neck injuries? | Yes No 17. Has it been longer than 10 years since your last tetanus shot? |
| Yes No 7. Broken bone or dislocation? | Yes No 18. Have you ever been told not to participate in any sport? |
| Yes No 8. Heat exhaustion/sun stroke? | Yes No 19. Do you know of any reason this student should not participate in sports? |
| Yes No 9. Fainting or passing out? | Yes No 20. Have a sudden death history in your family? |
| Yes No 10. Have any allergies? | Yes No 21. Have a family history of heart attack before age 50? |
| Yes No 11. Concussion? If Yes _____ | Yes No 22. Develop coughing, wheezing, or unusual shortness of breath when you exercise? |
| | Yes No 23. (Females Only) Do you have any problems with your menstrual periods? |

PLEASE EXPLAIN ANY "YES" ANSWERS OR ANY OTHER ADDITIONAL CONCERNS.

I also give my consent for the physician in attendance and the appropriate medical staff to give treatment at any athletic event for any injury.

SIGNATURE OF PARENT OR GUARDIAN _____ DATE ____/____/____

PART IV – VITAL SIGNS

Height _____ Weight _____ Pulse _____ Blood Pressure _____
Visual acuity: Uncorrected ____/____; Corrected ____/____; Pupils equal diameter: Y N

PART V – SCREENING PHYSICAL EXAM

This exam is not meant to replace a full physical examination done by your private physician.

- | | | | | | |
|---------------------------|-----|---------------------------|-----|------------------------------------|-----|
| Mouth: | | Respiratory: | | Abdomen: | |
| Appliances | Y N | Symmetrical breath sounds | Y N | Masses | Y N |
| Missing/loose teeth | Y N | Wheezes | Y N | Organomegaly | Y N |
| Caries needing treatment | Y N | Cardiovascular: | | Genitourinary (males only): | |
| Enlarged lymph nodes | Y N | Murmur | Y N | Inguinal hernia | Y N |
| Skin - Infectious lesions | Y N | Irregularities | Y N | Bilaterally descended testicles | Y N |
| Peripheral pulses equal | Y N | Murmur with Valsalva | Y N | | |

Any "YES" under Cardiovascular requires a referral to family doctor or other appropriate healthcare provider.

Musculoskeletal: (note any abnormalities)

- | | | | | | | | |
|-----------|-----|--------|-----|-----------|-----|-------------|-----|
| Neck: | Y N | Elbow: | Y N | Knee/Hip: | Y N | Hamstrings: | Y N |
| Shoulder: | Y N | Wrist: | Y N | Ankle: | Y N | Scoliosis: | Y N |

RECOMMENDATIONS BASED ON ABOVE EVALUATION:

After my evaluation, I give my:

- _____ Full Approval;
 _____ Full approval; but needs further evaluation by Family Dentist ____; Eye Doctor ____; Family Physician ____; Other ____;
 _____ Limited approval with the following restrictions: _____
 _____ Denial of approval for the following reasons: _____

MD/DO/DC/Advanced Registered Nurse Practitioner/Physicians Assistant

Date

WVSSAC000317

HEADS*UP

CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **PARENTS**

What is a concussion?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

You can't see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

What are the signs and symptoms of a concussion?

If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

SYMPTOMS REPORTED BY ATHLETE	SIGNS OBSERVED BY PARENTS/GUARDIANS
<ul style="list-style-type: none"> • Headache or "pressure" in head • Nausea or vomiting • Balance problems or dizziness • Double or blurry vision • Sensitivity to light • Sensitivity to noise • Feeling sluggish, hazy, foggy, or greggy • Concentration or memory problems • Confusion • Just "not feeling right" or "feeling down" 	<ul style="list-style-type: none"> • Appears dazed or stunned • Is confused about assignment or position • Forgets an instruction • Is unsure of game, score, or opponent • Moves clumsily • Answers questions slowly • Loses consciousness (even briefly) • Shows mood, behavior, or personality changes

How can you help your child prevent a concussion or other serious brain injury?

- Ensure that they follow their coach's rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained.
- Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture.
 - However, helmets are not designed to prevent concussions. There is no "concussion-proof" helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

What should you do if you think your child has a concussion?

SEEK MEDICAL ATTENTION RIGHT AWAY. A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.

KEEP YOUR CHILD OUT OF PLAY. Concussions take time to heal. Don't let your child return to play the day of the injury and until a health care professional says it's OK. Children who return to play too soon—while the brain is still healing—risk a greater chance of having a repeat concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

TELL YOUR CHILD'S COACH ABOUT ANY PREVIOUS CONCUSSION. Coaches should know if your child had a previous concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

If you think your teen has a concussion:
Don't assess it yourself. Take him/her out of play. Seek the advice of a health care professional.

It's better to miss one game than the whole season.

For more information, visit www.cdc.gov/Concussion.



April 2013

WVSS 1009293



WVSSAC

SUDDEN CARDIAC ARREST AWARENESS



What is Sudden Cardiac Arrest?

- Occurs suddenly and often without warning.
- An electrical malfunction (short-circuit) causes the bottom chambers of the heart (ventricles) to beat dangerously fast (ventricular tachycardia or fibrillation) and disrupts the pumping ability of the heart.
- The heart cannot pump blood to the brain, lungs and other organs of the body.
- The person loses consciousness (passes out) and has no pulse.
- Death occurs within minutes if not treated immediately.

What are the symptoms/warning signs of Sudden Cardiac Arrest?

- SCA should be suspected in any athlete who has collapsed and is unresponsive
- Fainting, a seizure, or convulsions during physical activity
- Dizziness or lightheadedness during physical activity
- Unusual fatigue/weakness
- Chest pain
- Shortness of breath
- Nausea/vomiting
- Palpitations (heart is beating unusually fast or skipping beats)
- Family history of sudden cardiac arrest at age <50

ANY of these symptoms/warning signs may necessitate further evaluation from your physician before returning to practice or a game.

What causes Sudden Cardiac Arrest?

- Conditions present at birth (inherited and non-inherited heart abnormalities)
- A blow to the chest (Commotio Cordis)
- An infection/inflammation of the heart, usually caused by a virus. (Myocarditis)
- Recreational/Performance-Enhancing drug use.
- Other cardiac & medical conditions / Unknown causes. (Obesity/Idiopathic)

What are ways to screen for Sudden Cardiac Arrest?

- The American Heart Association recommends a pre-participation history and physical which is mandatory annually in West Virginia.
- Always answer the heart history questions on the student Health History section of the WVSSAC Physical Form completely and honestly.
- Additional screening may be necessary at the recommendation of a physician.

What is the treatment for Sudden Cardiac Arrest?

- Act immediately. Time is critical to increase survival rate.
- Activate emergency action plan
- Call 911
- Begin CPR
- Use Automated External Defibrillator (AED)

Where can one find additional information?

- Contact your primary health care provider
- American Heart Association (www.heart.org)

WVSSAC000314

DON'T LET AN INJURY LEAD TO AN OPIOID ADDICTION

2 MILLION ATHLETES ARE EXPECTED TO SUFFER A SPORTS INJURY THIS YEAR

MANY OF THESE ATHLETES WILL BE PRESCRIBED OPIOID PAINKILLERS

75% OF HIGH SCHOOL HEROIN USERS STARTED WITH PRESCRIPTION OPIOIDS

HIGH SCHOOL ATHLETES ARE AT RISK OF BECOMING ADDICTED TO PRESCRIPTION DRUGS

- 28.4% used medical opioids at least once over a three year period.
- 11% of high school athletes have used an opioid medication for nonmedical reasons.
- Nearly 25% of students who chronically use prescription opioids also use heroin.

WHAT ARE OPIOIDS?

Opioids are a powerful and addictive type of prescription painkiller that have similar chemical properties and addiction risks as heroin. While opioids may provide temporary relief, they do nothing to address the underlying injury and can have serious side effects.

These drugs may lead to dependence, tolerance, accidental overdose, coma and death.

The most common prescribed opioid painkillers in West Virginia are:

- Oxycodone (OxyContin)
- Hydrocodone (Lorab and Vicodin)

HOW TO PROTECT YOUR CHILD

- Talk to your healthcare provider about alternative pain management treatment options (see below).
First-time prescription opioid users have a 64% higher risk of early death than patients who use alternative pain medication.
- If your child is prescribed an opioid painkiller, talk about the dangers of misusing medication, including overdose and medication sharing.
- Monitor your child's intake of prescription medication to ensure he/she is following dosage instructions.
- Safely dispose of any unused medication through a prescription drug drop box or a DEA Take-Back program.

NON-NARCOTIC PAIN MANAGEMENT ALTERNATIVES

- Physical Therapy
- Chiropractic
- Massage Therapy
- Acupuncture
- Over-the-Counter Medication





FOOTBALL PRACTICE GUIDELINES

1. Check coaches packet
2. Contact definitions – Follow Progressions
3. No consecutive two-a-day practices.
4. Practice session (physical activity) 3 hour limit.
(on field practice, weight room, conditioning)
5. Live Action Contact/maximum 30 minutes a day – 90 minutes a week.

New Rule – Football Progressions

- Days 1-2 Helmets Only, No Contact
- Days 3-4 Helmets and Shoulder Pads, Soft Equipment Contact Only
- Day 5 Full Pads, Soft Equipment Contact Only
- Day 6 Full Pads, Full Contact



WVSSAC000317

ATHLETIC TRAINER

Do Not Practice Without a Trainer Present

- **Professional Service Certificate**
 - Certified Athletic Trainer
- **Athletic Trainer Certificate**
 - WVDE approved
 - LAT, ATC
- **Limited Football Trainer Authorization**
 - WVDE approved
 - May include the following:
 - Nurse, EMT
 - Physical Therapist, Etc.



Senate Bill 60
Still allows for
Limited Football Trainer
Authorization from WVDE

**R e q u i r e d
R e p o r t s / I n f o r m a t i o n**

- **Failure to submit required information by deadline**
 - **Posting of football scores - \$50.00 fine per week**
 - **BY NOON ON MONDAY FOLLOWING GAME DATE**

HERPES REPORTING FORM

Fillable form: [Go to Forms on the WVSSAC Website](#)





GOLF CLINIC



High School Administrators

Please make sure your golf coach receives the email containing the links to the 2021 Golf Clinic emailed to all principals and athletic directors

The golf coach needs to respond by email to Wayne.Ryan@wvssac.org verifying that they viewed the clinic with their golf Team.

Verification is due August 20, 2021

W V S S A C S a n c t i o n i n g

INTRASTATE (in WV)

- Any event where awards are given
 - Be sure to define/describe all awards
- Any event with more than four schools.
- Rule allows awards with a value up to \$100.00.

INTERSTATE

- Any event where awards are given
- Any event with four or more schools from bordering states.
- Any event involving schools from three or more State Associations.
- **NFHS Sanctioning online**
- Any travel of more than 600 miles round trip that involves missing any class time must be approved by the County Board of Education and the WVSSAC.

**WVSSAC
APPLICATION TO STATE ASSOCIATION FOR SANCTION OF INTERSTATE ATHLETIC EVENT
(Suggested for use when NFHS sanction is NOT required)**

SECTION 1 (To be completed by host school) Application Date: 2019-12-03

• Sport Girls Basketball Girls Boys Date of Event 2019-12-13 Time of Event 7:30
 • Grades 6 7 8 9 10 11 12 Site of Event Summers County High School
 • Sponsored By SUMMERS COUNTY HIGH SCHOOL
Member high school/other sponsoring organization Street City State Zip
 • Name of Event (if applicable) Rogers Oil Classic
 • Schools Invited from the following states: WV

• Number of participating schools Four (List all schools/addresses on reverse)
 • Entry Fee Yes Amount \$ 5 No • Admission Fee Charged Yes No Amount \$ \$5.00
 • Host School or Organization: Summers County High School State association approved school or other sponsor City State Zip
 • Name of Manager/Title Chad Meador - Coach Phone: 304.690.3861 Email: ChadLE.Meador@wv.gov

Description of Awards and Other Compensations and Maximum Retail Value (ribbons/trophies/t-shirts/practice uniform/waiver of entry fee/travel expenses, etc.) to:

Individual Student Athlete Participants	Teams	Couch
<u>5 All-Tournament 1 MVP</u>	<u>First, Second, Third, Fourth Place</u>	

Execution constitutes an agreement by the principal to assume oversight responsibility for the event.

Executed by: Kathy Diercks, AD Phone: David Hudgins Email: 304-455-2040
Principal of host school. Signatures/Print Name

After completing Section 1, send form to state association of host/sponsor member school identified.

SECTION 2 ACTION BY STATE ASSOCIATION OF HOST SCHOOL

School Membership State Association Member School School Approved by State Association Non-Member School
 Action Sanction Event Do Not Sanction Event No Jurisdiction

If "No Jurisdiction," explain why:

Limitations/Other Comments:

Signature of State Executive: Wayne Ryan, Asst. Executive Director Date Dec. 3, 2019 State WV

If event sanctioned, send copies to each state association named in application. If application if not sanctioned, return to applicant.

SECTION 3 ACTION BY STATE ASSOCIATION OF INVITED SCHOOL

School Membership State Association Member School School Approved by State Association Non-Member School

(If more than one school invited, please indicate member status of each school next to the listing on the reverse)

Action: Sanction Event Do Not Sanction Event No Jurisdiction

If "No Jurisdiction," explain why:

Limitations/Other Comments:

Signature of State Executive: _____ Date _____ State _____

WVSSAC000324

PLEASE LIST ALL INVITED SCHOOLS, INCLUDING ADDRESSES, CONTACT PERSONS AND TELEPHONE NUMBERS:

Note: If school is not a full member of its NFHS member association, please indicate accordingly.
 (Attach additional sheets if necessary)

NAME OF SCHOOL/ADDRESS	CONTACT PERSON	TELEPHONE NUMBER
Mountain View 620 School Street Union, WV 24963	Sarah Martin	304 661 4572
Peterstown Middle School 56 College Drive Peterstown, WV 24963	Chris Booth	304 646 1083
Western Greenbrier Middle School 315 Timberwolf Dr. Crawley, WV 24931	Joey Fltzwater	304 667 2857
Summers Middle School 400 Temple Street Hinton, WV 25951	Susie Hudson	304 466 6030

Officials for the competition are assigned from an agency that regularly assigns high school officials:
 Yes No

The officials are registered to officiate high school events:
 Yes No

IN ALL INTERSTATE CONTESTS, each participating school shall follow the contest rules of the state association of which it is a member or rules which have been approved by that state association for interstate competition. The rules referred to are contest rules only and not rules applying to age, number of semesters of attendance, residency or academic accomplishments. No school may violate its own state association rules.

Any approval or sanction granted to the applicant does not constitute a representation by either the NFHS or any named state association that it has investigated the accuracy of the information provided by the applicant, or that the NFHS or any named state association will oversee the organization, performance or financial integrity of the event.

Any approval or sanction granted to the applicant may not be used in the marketing or promotion of the event without prior written approval of the NFHS and/or any named state association, as the case may be.

S a n c t i o n F o r m s

Two ways to submit Sanction Forms

Electronically

Website

Admin Login

Forms Management under WVSSAC Forms

New Forms

Sanction Form

Complete and Submit

Paper Form

Website

Forms

Print WVSSAC Sanction Form

Complete, Fax or mail

WVSSAC000326

A c a d e m i c A c h i e v e m e n t A w a r d s

- Information included in packets
 - Recognized at Super Six
 - Individual/Team and Community Service
 - **Deadline – October 8**
- WVSSAC Scholarships
 - Applications mailed in January
 - **Deadline – March 18**

WVSSAC Tournaments

Hosting of Tournaments

- Deadline is November 1

Hotel/Motel Policy

- Online – Forms / Download Forms

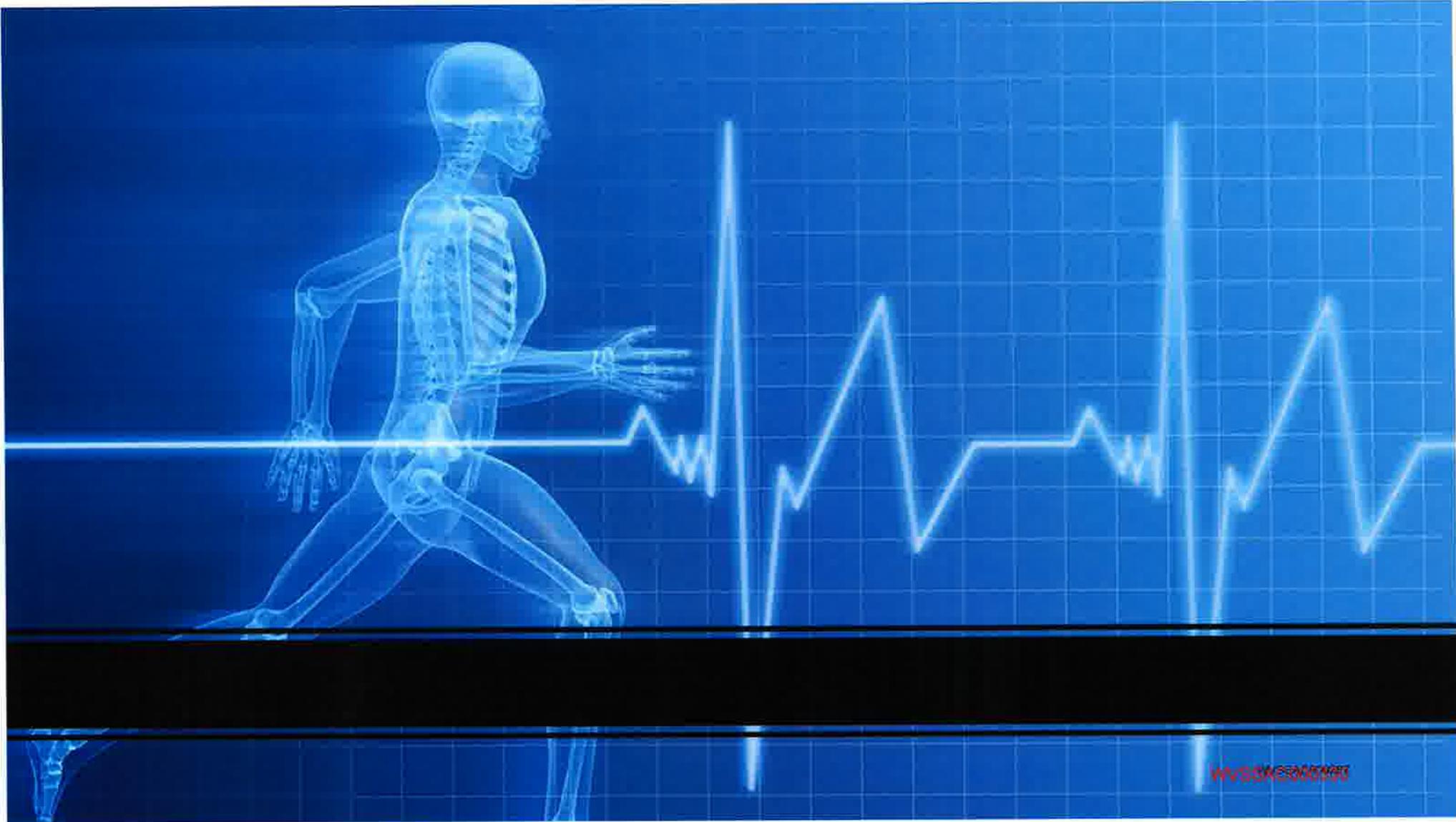
Reimbursement Schedule

- Online – Forms / Download Forms

WVSSAC ADMINISTRATIVE STAFF

Cindy Daniel, Ed.D., Assistant Executive Director

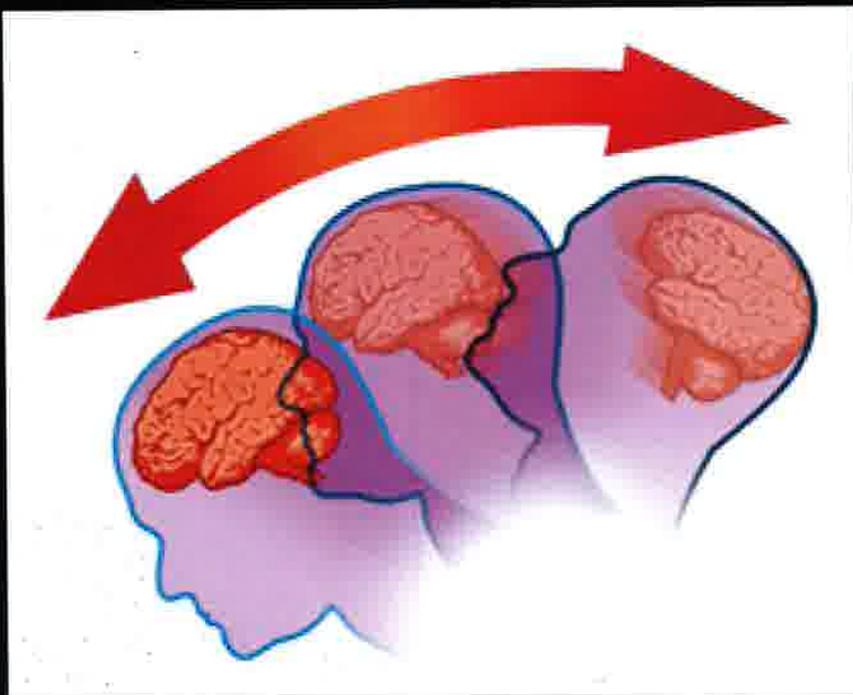




Sports Medicine Packet

- **Now separate from each specific sport packet**
- Link is on each sport specific page as well as the Sports Medicine tab
- Required reading for all coaches





Concussion Reporting Form

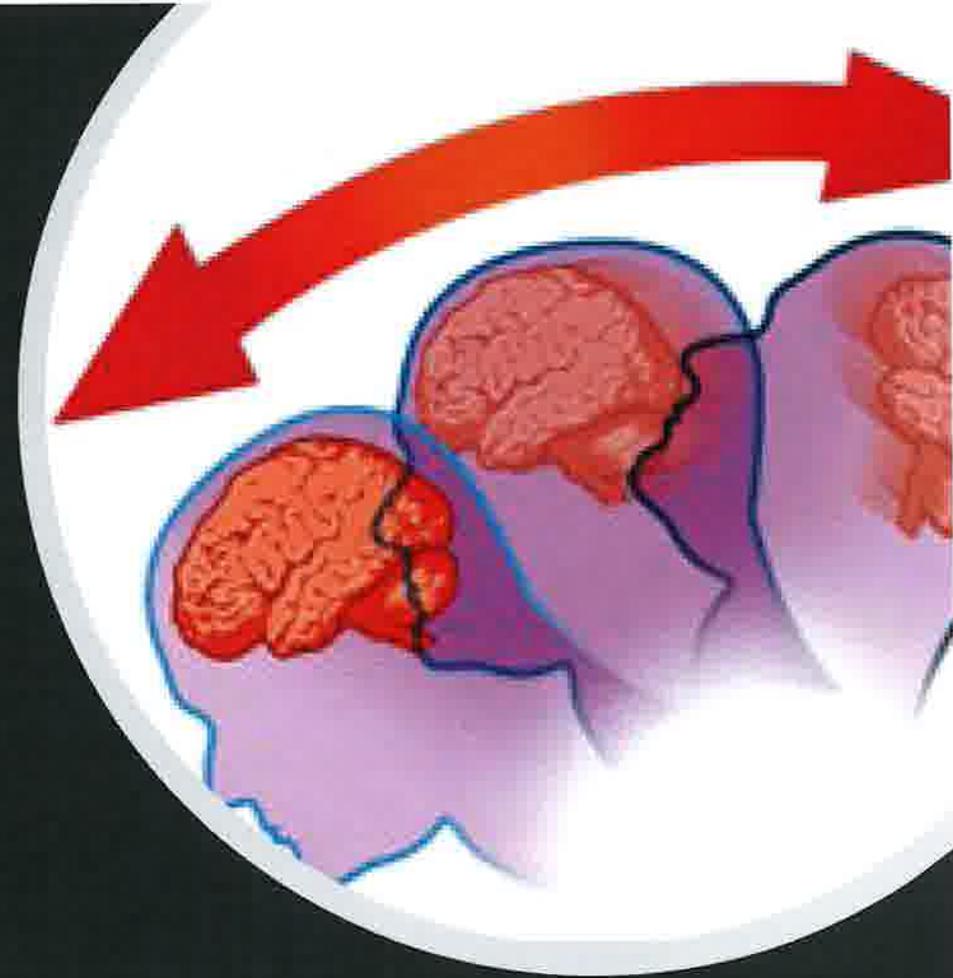
- Fillable Online Form – 2 Parts
- Must submit Part I within 7 days of incident
- Part I – Initial incident report
- Part II – Documentation of completion of protocol progressions
- Located under Forms as well as Sports Medicine tabs on website

CONCUSSION RTP PROTOCOL

RTP shall be delayed until the athlete is asymptomatic and has undergone a progression of tests to determine if they are able to RTP. Each step/test in the progression takes 24 hours and no more than one progression per day may be completed.

If any symptoms occur during the progression, the athlete should rest for 24 hours before attempting the same progression again.

- No activity with complete physical and cognitive rest.
- Light aerobic exercise (less than 70% of maximum heart rate).
- Sport specific exercise (drills specific to the athlete's sport).
- Non-contact training drills (more intense sport drills with no contact from other players).
- Full contact practice (following medical clearance).
- Return to play (normal game play).





- Medical Doctor (MD)
- Doctor of Osteopathy (DO)
- Doctor of Chiropractic (DC)
- Advanced Registered Nurse Practitioner (ARNP)
- Physician Assistant (PA-C)
- Licensed/Registered Certified Athletic Trainer (ATC/R, LAT, ATC)
- **Licensed Physical Therapist**

Approved Health Care Providers Who
Can Evaluate and Release to RTP

REQUIRED ONLINE COURSES



- Concussion In Sports (annually)
- Sudden Cardiac Arrest (annually)
- Heat Illness Prevention (one time for new coaches)
- All courses are free and can be accessed on the WVSSAC homepage (www.wvssac.org)

AED Requirement

- Legislation requires that an AED be available at ALL practices and contest
- Coaches must be trained in AED/CPR



WVSSAC000336

Senate Bill 640 – Sudden Cardiac Arrest Prevention Act (WVDE Guidance)

- Requires schools to hold an informational meeting at the start of the year for parents and students to provide information on the warning signs of sudden cardiac arrest for children.
- Requires all coaches to complete the online sudden cardiac arrest course annually.
- Information can be given by downloading the physical exam form.





AED Sale

- AEDs for \$925 through CPR Institute of Indiana
- Order form was sent to all principals and athletic directors
- Approximately 450 AEDs added to schools over last three years
- Contact Cindy if interested in purchasing



WVSSAC000339

Medical Time Out

- Short, pre-game meeting so that everyone knows what emergency personnel, supplies, and equipment are on site and available in case of an emergency.
- Athletic trainer responsible for the meeting. If no athletic trainer is present, head coach of home school is responsible.
- Refer to Sports Medicine Packet for more information.



Coming Next Year

- New Heat Illness Policy/Index
- Passed by SMAC Committee and BOD
- Will require schools to purchase a WGBT



WVSSAC000341



Legal Updates

WSSAC000141

ACCOMMODATIONS

- Accommodation must be reasonable
- Accommodation must be safe for able bodied athletes as well as the athlete with the disability
- Accommodation cannot create an advantage for the disabled athlete
- Disabled athlete must play at same skill level as other members of team to earn a spot





TITLE IX – “3 – PRONG TEST”

- Equal opportunities for both males and females school must show:
- % of male & female athletes are about the same as the % of male and female students enrolled at the school
- History and a continuing practice of expanding athletic opportunities for female students, since they usually have been the ones given fewer opportunities to play
- The school is fully meeting female athletes' interests and abilities

WVSSAC002344

TITLE IX – 50 Year Anniversary

- Equal quality and quantity of equipment and supplies
- Fairness in scheduling games and practices
- Equal financial support for travel and expenses
- Fairness in assigning and paying quality coaches; and
- Equal facilities (locker rooms, fields, and arenas, for example)
- Before 1972 – fewer than 300,000 high school female athletes. Now over 3.4 million



Transgender

- Current law being challenged in court.
- WVSSAC's current position is that gender is identified in WVEIS for athletic participation purposes.



WVSSAC000346

And Last But Not Least...Cheer Update

- Beginning with 2021-22 school year, mats are required for all cheer practices and competitions for stunting and tumbling
- A full floor consists of 9 strips of 6'x42' carpeted foam mats



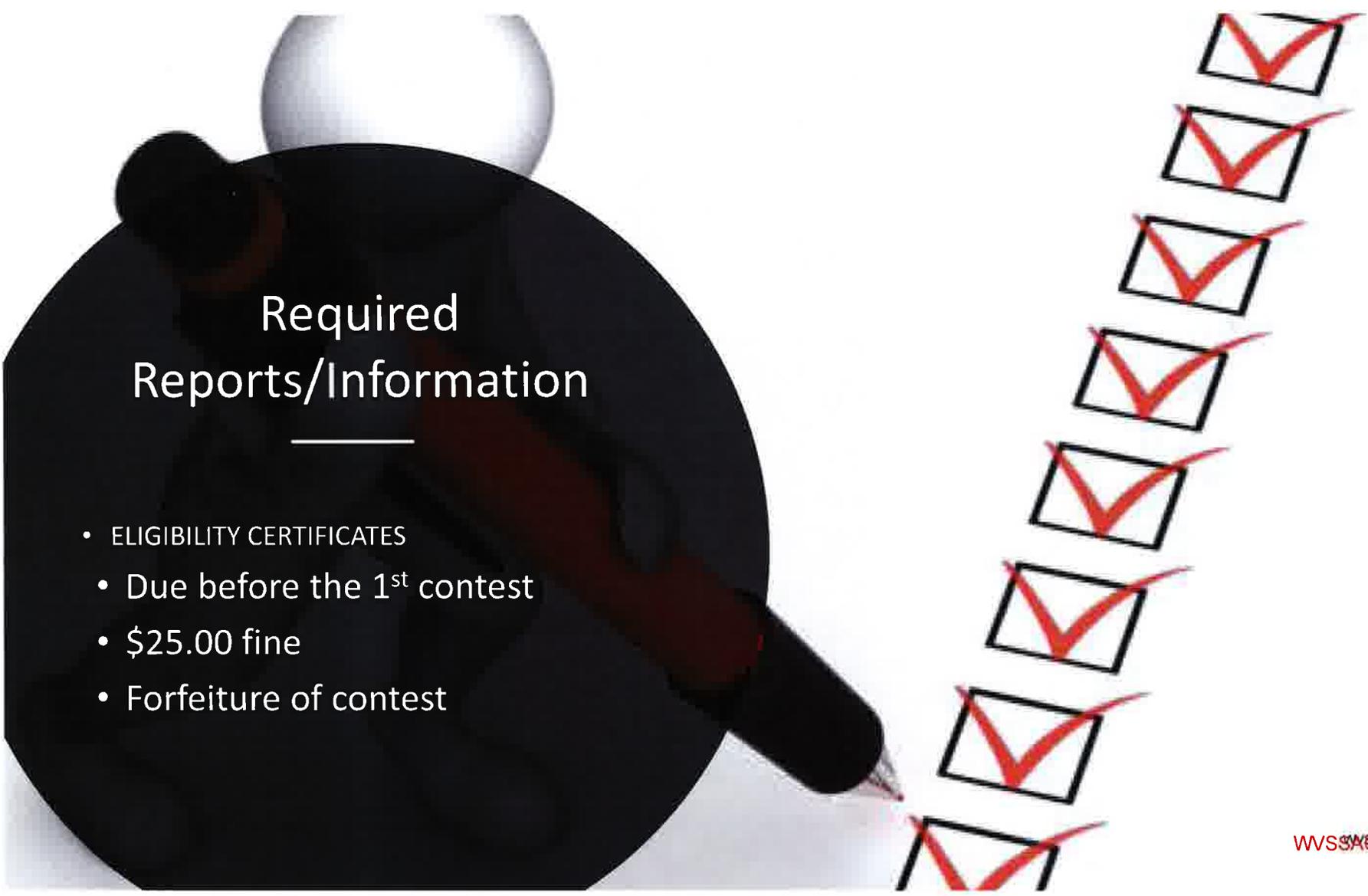
WVSSAC000347

WVSSAC ADMINISTRATIVE STAFF

GREG REED

ASSISTANT EXECUTIVE DIRECTOR

**Posting of basketball scores - \$50.00 fine
(Deadline – Monday by noon)**

A hand holding a black pen is shown writing on a checklist. The checklist consists of a vertical line of ten square boxes, each containing a red checkmark. The hand and pen are positioned at the bottom of the list, appearing to have just finished writing the last checkmark. The background is a light gray gradient.

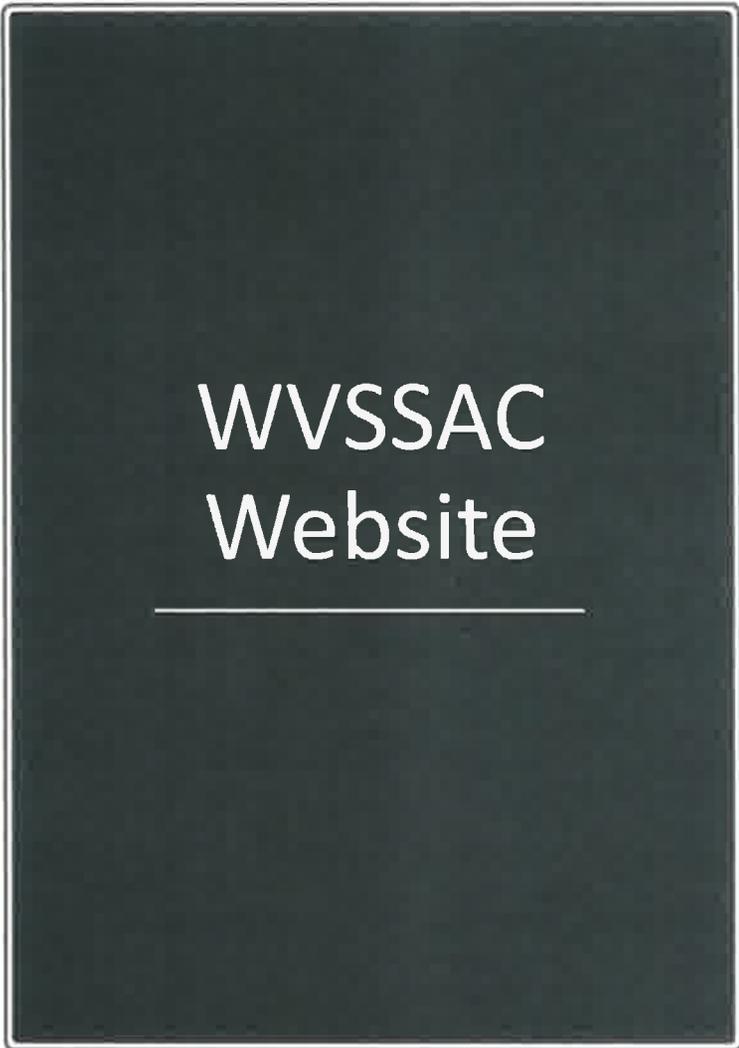
Required Reports/Information

- ELIGIBILITY CERTIFICATES
- Due before the 1st contest
- \$25.00 fine
- Forfeiture of contest

Residence Transfer Rule

- Number one rule that is questioned/challenged
- Athletic directors and administrators need to read the rule carefully
- If questions, contact our office before enrolling students
- Divorce or separation





ADMIN LOGIN

WVSSAC COACHES FORMS OFFICIALS SPORTS SCHOOL RESOURCES ROSTERS/SCHEDULES MEDIA OPEN DATES CLINICS

BOYS BASKETBALL

Current News & Information:

MAKE-UP RULES CLINICS AT THE WVSSAC OFFICE WILL BE HELD AS SCHEDULED ON MONDAY, FEBRUARY 15, 2016

- Softball – 5:00 pm
- Track – 6:00 pm
- Baseball – 7:00 pm

SCHOLARSHIP WINNERS

[2014-2015 Participation Report](#)

[Football Ratings](#)

PROCEDURE FOR OBTAINING ANSWERS TO ELIGIBILITY QUESTIONS

The WVSSAC office and staff members do not respond to e-mail messages. To avoid any misunderstanding, confusion or delay, all questions regarding the eligibility of a student/athlete by their parent/s or coach should be directed through the Athletic Director or Principal. The Athletic Director should then gather all information necessary and call or write the WVSSAC. By following this path of

EXECUTIVE DIRECTOR NEWSLETTER

NEHS NETWORK

TWITTER FACEBOOK

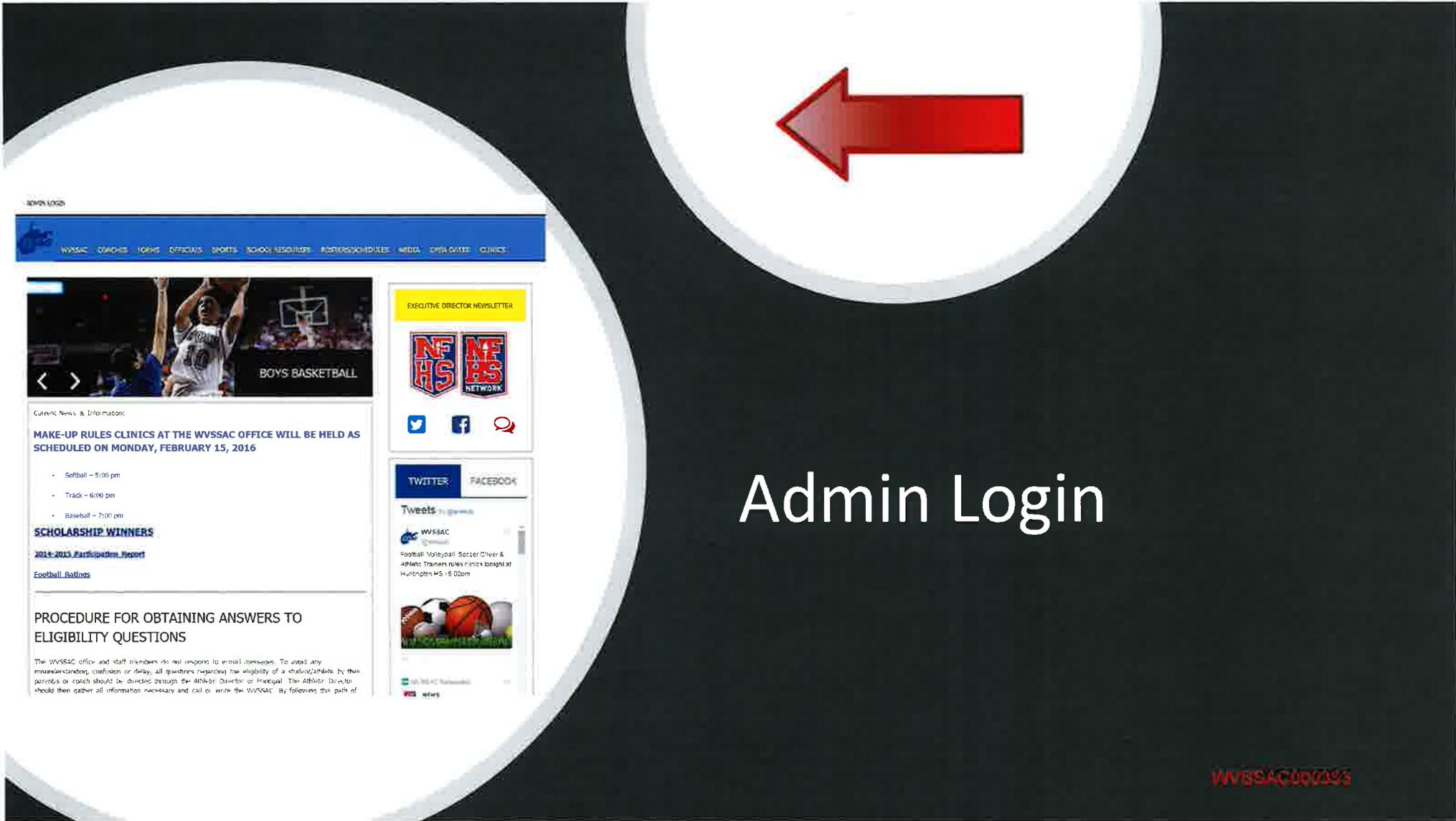
Tweets by @wvssac

WVSSAC @wvssac
Football, Volleyball, Soccer, Cheer & Athletic Trainers rules clinics tonight at Huntington HS - 6:00pm

WVSSAC Retweeted

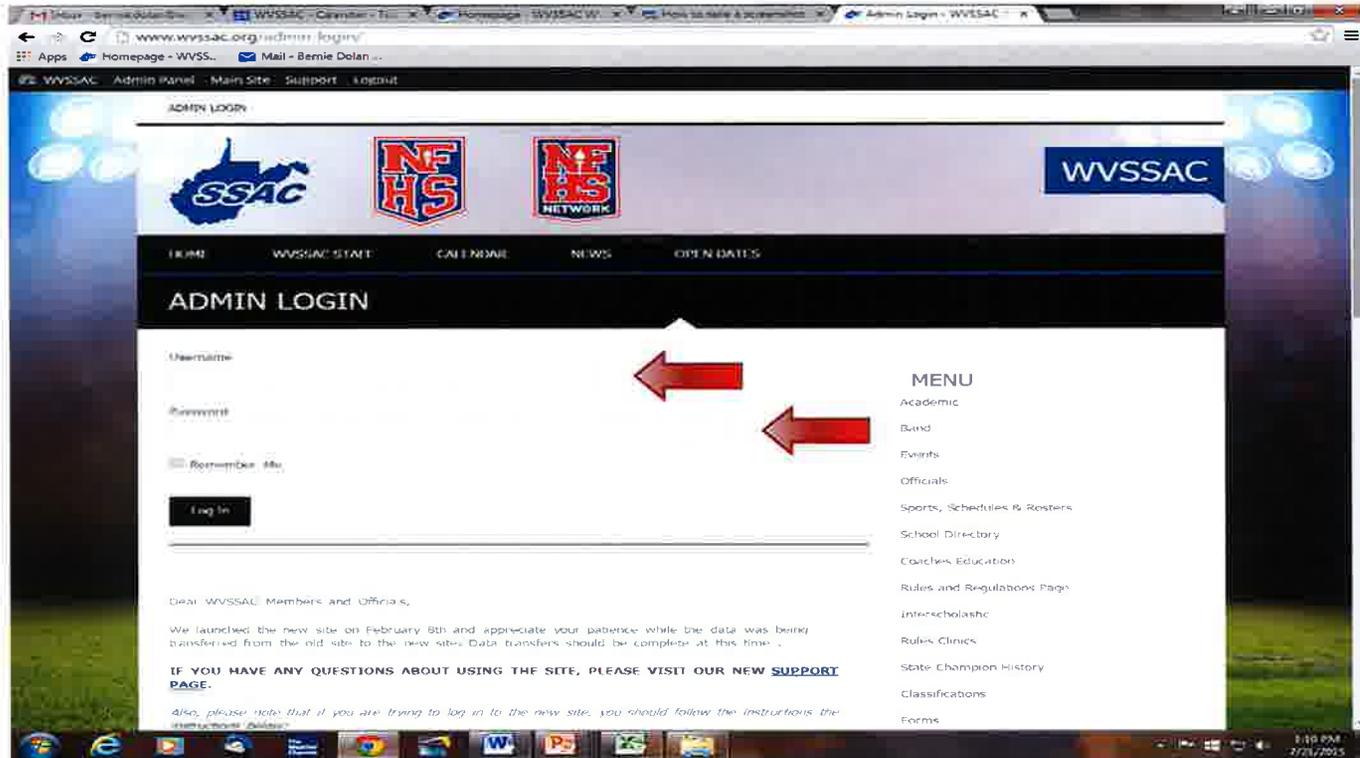
WVSSAC

WVSSAC 00316



Admin Login

Username and Password





School
MainPage

School

West Virginia Secondary School Activities Commission
2875 Staunton Turnpike : Parkersburg, WV 26104-7219 : PH (304)485-5494 FAX (304)428-5431

School Management Page

- [Submit Eligibility Form](#)
- [Submit Rosters](#)
- [Rosters on File](#)
- [Submit Schedules](#)
- [Schedules on File](#)
- [Eligibility Certificates on File](#)
- [Quick Post Scores](#)
- [Submit Band Participation](#)
- [Display Participation Report](#)
- [WVSSAC Forms Management](#)
- [School Personnel Directory](#)
- [Officials List](#)
- [School Email Contact List](#)
- [Coach's Game Reports](#)
- [C & I Verification System](#)
- [Submit Coach's Evaluation of Officials](#)
- [Edit School Information and Password](#)
- [Questions? Email Support!](#)
- [Submit Action Plans](#)

July 23, 2018

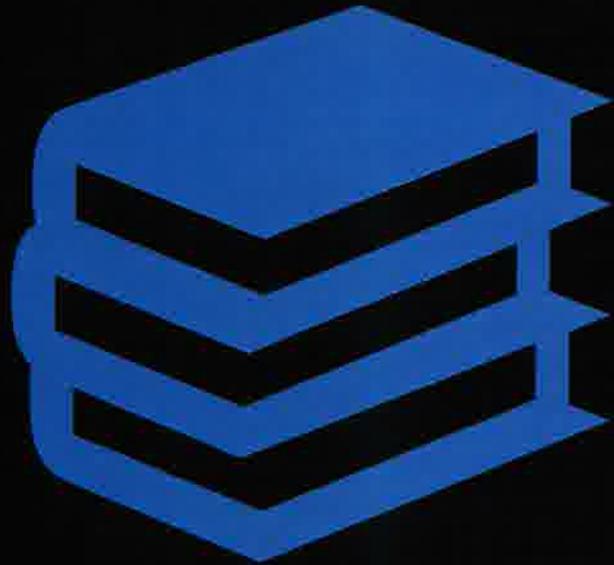
WEBSITE UPDATE

- Edit School Information
- Coaches Evaluations – Online
- Submit Rosters
- Submit Schedules
- **Correct Email Addresses!!**
- Eligibility
- Submit Scores

Middle School Co-ops



WSSAC000357



COACHES` EDUCATION PROGRAM

14 ½ hour course

Online registration

WHO CAN COACH IN WV?

- Individuals holding a valid WV teaching certificate
- Individual who completes 14 ½ hour course and receives letter of authorization from State Department of Education is eligible



WHAT IS REQUIRED TO COACH?

Must have high school diploma or GED

Background and fingerprint

Form 39 with State Department of
Education (must be done every year)

Non paid assistants must be certified



LEGAL DUTIES OF A COACH

- Properly plan the activity
- Provide proper instruction
- Warn of inherent risks
- Provide a safe physical environment
- Provide adequate and proper equipment
- Match athletes appropriately
- Evaluate athletes for injury or incapacity
- Supervise activity closely
- Provide appropriate emergency assistance
- Protect against physical and psychological harm from others



WVSSAC

Corporate Sponsors



WVSSAC 00983

