Sports League or School Safe Stars Application

Thank you for your interest in Safe Stars. Please complete the application below. You must meet the minimum Bronze Star standard to qualify for a Safe Star.

You may always save and return to your application at a later date. If you do so please write down the application code given. If you do not meet the minimum Bronze Star standard you may always apply again at a later date.

League or School Demographics		
Name of Sports League or School seeking recognition:		
Name of principal contact for league or school:		
Position of principal contact for league or school:		
Address of main office:		
City, State:		
Zip Code:		
Phone Number	(Please include the area code)	
E-mail Address		
Address(es) of practice and game locations: (please list all if app	licable)	
City, State:		
Zip Code:		
Best form of contact with follow-up questions?	○ Phone○ Text○ E-mail	

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Sports offered by league/organization: (Check all that apply)
Basketball Baseball/T-Ball Cheerleading Crew Fencing Figure Skating Flag Football Football Ice Hockey Inline Hockey Kickball Lacrosse Pickleball Rugby Soccer Softball Swimming/Diving Table Tennis Tennis Tensk & Field/Cross Country Volleyball Ultimate Frisbee Other
Sports Information
Please indicate the age range associated with each sport that is offered by the league/organization:



Criteria/Standards for Bronze Recognition	
Emergency Action Plan (EAP) Requirements	
Does your sports league/organization have an Emergency Action Plan (EAP)?	
Does the plan vary by sport or location?	
Please explain how the plan differs:	
Please upload your Emergency Action Plan(s):	
Do you practice your Emergency Action Plan(s) annually?	
How often do you practice your EAP and who participates?	
Does your Emergency Action Plan(s) contain team emergency contacts?	
Are team emergency contacts disseminated to parents and players before the start of the first practice or game?	Yes No
Anaphylaxis and Allergy Emergency Action	
Do you require athletes with a known history of allergies who have a prescription for epinephrine auto injector to have an Anaphylaxis and allergy emergency plan?	
Please upload your Anaphylaxis and Allergy Emergency Actio	n Plan.
Background Checks Requirements	
Does the sports league/organization require all coaches to complete a background check?	
Please provide details as to the process of background checks:	
Please include the company that completes them, if applicable:	
CPR/AED Requirements	
Are all coaches required to be trained in CPR/AED?	○ Yes ○ No

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Please provide the name and describe the nature of the training for all coaches (in person, online, required to take a class, etc) and the topics covered regarding CPR/AED Training. (Note: training does not equal CPR certification)

Sudden Cardiac Arrest and Concussion Recognition Requirements	
Are all coaches required to be trained in Sudden Cardiac Arrest recognition annually?	YesNo
Please provide the name and describe the nature of the SCA training (in person, online, required to take a class, etc) and the topics covered regarding sudden cardiac arrest recognition.	
Do Students' parent/guardian sign the Sudden Cardiac Arrest Symptoms and Warning Signs information sheet?	○ Yes ○ No
https://www.tn.gov/content/dam/tn/health/healthprofboards/Sudden-Cardiac-Arrest-Symptoms-and-Warning-Signs.pdf	
If applicable, please upload a certificate earned for Sudden Cardiac Arrest training	
Are all coaches required to be trained in concussion recognition and response annually?	○ Yes ○ No
Please provide the name and describe the nature of the training (in person, online, required to take a class, etc) and the topics covered regarding concussion recognition.	
If applicable, please upload a slide deck used or certificate earn	ned for Concussion Training.
Does the sports league/organization have a severe weather policy?	○ Yes ○ No
Weather Policy Requirements	
Does it include a heat policy?	○ Yes ○ No
Does it include a lightning policy?	YesNo
Please upload a copy of this policy	
Are all coaches trained annually in heat illness prevention?	○ Yes ○ No

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Have your coaches completed the Safe Stars Coaches Code of Conduct?	○ Yes ○ No
https://www.tn.gov/content/dam/tn/health/healthprofboards/Safe-Stars-Coaches-Code-of-Condut.pdf	
Please upload any extra supporting documents here:	
If potential concerns for athlete safety, health, or well-being arise are there formal systems in place for reporting, evaluating, and addressing these concerns? (Safe guarding from abuse, harm, or neglect.)	
Are parents/guardians made aware of this?	○ Yes ○ No
In what capacity do they receive this information?	
Please upload a copy of the information and the system in p	place.
Does your organization hold an Informational meeting or vic coaches and school officials on sudden cardiac arrest, heat	
○ Yes ○ No	
Thank you for your application. At this time, your sports lead Safe Stars. Please submit this application (at the end of this may always apply again at a later date. Please refer to the Thank you! Please contact safestars.health@tn.gov for any	application) so we can be sure to keep in contact. You Resource section on our website before reapplying.

CONGRATULATIONS! It appears you may have qualified for a BRONZE STAR. Please submit this application so we can review it and get back to you within 2 weeks. Thank you! Please contact safestars.health@tn.gov for any questions.

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Criteria/Standards for SILVER Recognition (plus any 2 additional criteria*)		
Is there an AED available at every practice?	YesNo	
Is there an AED available at every hosted event/game?	YesNo	
Please upload verification of the AED (registration document, receipt, picture, etc.)		
Have your athletes parents completed the Safe Stars Parents/Guardians Code of Conduct?	○ Yes ○ No	
https://www.tn.gov/content/dam/tn/health/healthprofboards/Safe-Stars-Parents-code-of-conduct.pdf		



Criteria/Standards for GOLD Recognition (plus any 4 additional criteria*)	
Is there an AED on site at every practice? (within 3-5 minutes of site)	○ Yes○ No
Is there an AED available on site at every hosted event/game? (within 3-5 minutes of site)	○ Yes ○ No

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ADDITIONAL CRITERIA to Meet SILVER and GOLD Standards/Recognition FOR SILVER (meet all BRONZE & SILVER standards, plus any 2 additional criteria below), FOR GOLD (meet all BRONZE, SILVER & GOLD standards, plus any 4 additional criteria* below) YOU MUST ANSWER YES OR NO TO ALL QUESTIONS BELOW TO BE SCORED FOR SILVER OR **GOLD** *Is a pre-participation physical examination required? Yes \bigcirc No *Are athletes' parents informed of the risks of sport Yes participation as well as safety precautions and safety \bigcirc No standards of the league/organization? In what capacity do parents receive this safety information? Please upload a copy of the information the parents receive. *Are all coaches required to receive additional Yes \bigcirc No training in health, safety, and injury prevention? In what topics do they receive training? Please describe the nature of this training (in person, online, etc.) Please upload a slide deck of this training *Does your league/organization facilitate nutritional Yes counseling materials or education? \bigcirc No Please upload any educational materials used for nutrition education: Yes *Is all athletic equipment checked to ensure it meets \bigcirc No proper conditioning, safety and effectiveness standards?



07/22/2022 8:29am

How often is the athletic equipment checked?

O Before each game/practice

Once a weekOnce a monthOnce a season

Please specify which medical professional attends all practices:	 ☐ Physician ☐ Athletic Trainer ☐ Physician's Assistant ☐ Nurse Practitioner ☐ Nurse ☐ EMS/Ambulance ☐ Other (Check all that apply)
*Does a medical professional (ATC, first responder, etc.) attend all practices?	YesNo
*Does a medical professional (ATC, first responder, etc.) attend all games?	YesNo
Please specify which medical professional attends all games:	☐ Physician ☐ Athletic Trainer ☐ Physician's Assistant ☐ Nurse Practitioner ☐ Nurse ☐ EMS/Ambulance ☐ Other (Check all that apply)
*Are at least two coaches CPR/AED certified?	○ Yes ○ No
*Are ALL coaches CPR/AED certified?	○ Yes ○ No
*Does your league/organization (or the group that provides you field/gym access) have a policy regarding the use of tobacco products on site?	YesNo
Please upload a copy of your Tobacco Policy:	
*Does your league/school provide opioid abuse and misuse awareness education to athletes?	○ Yes ○ No
Please list/describe your opioid awareness program:	
*Does your league/organization promote positive culture & standard of expectation regarding behavior? (i.e. anti-bullying stance, anti-violence programs, good sportsmanship programs)	○ Yes ○ No
Please list/describe your positive culture stance/program:	

Please upload any certifications or pledges your league/organization has for promoting positive culture.

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To whom does this apply?	☐ Parents ☐ Coaches ☐ Staff ☐ Players ☐ Referrees (Select all that apply.)
Does your policy address good sportsmanship?	○ Yes ○ No
Does your policy address social inclusion for those from different backgrounds, ethnicities, sexual orientation, skill levels, and physical capacities?	YesNo
Does your policy have anti-hazing and bullying stances?	○ Yes ○ No
Does your policy have initiatives to end violence against women and girls?	○ Yes ○ No
Please upload any extra documents here:	
Qualify for Bronze?	
Qualify for Silver?	
CONGRATULATIONS! It appears you may have qualified for a SILVER STAR. Please submit this application so we can review it and get back to you within 2 weeks. Thank you! Please contact safestars.health@tn.gov for any questions.	
Qualify for Gold?	
CONGRATULATIONS! It appears you may have qualified for a GOLD STAR. Please submit this application so we can review it and get back to you within 2 weeks. Thank you! Please contact safestars.health@tn.gov for any questions.	
Do not qualify for Gold or Silver	

Thanks for completing this portion of the Safe Stars program application. It appears you currently do not qualify for a SILVER or GOLD STAR at this time. Please submit this application so we can review it and get back to you within 2 weeks to assist you with improving your application. Thank you! Please contact safestars.health@tn.gov for any questions.

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