



# City of New York

## OFFICE OF THE COMPTROLLER

Scott M. Stringer  
COMPTROLLER



## AUDITS & SPECIAL REPORTS

**Marjorie Landa**

Deputy Comptroller for Audit

Audit Report on the New York City Department of Parks and Recreation's Compliance with Local Law 57 for the Baseball Games and Practices Played at Ballfields in City Parks

SZ17-132A

April 18, 2018

<http://comptroller.nyc.gov>



THE CITY OF NEW YORK  
OFFICE OF THE COMPTROLLER  
SCOTT M. STRINGER

April 18, 2018

To the Residents of the City of New York:

My office has audited the New York City Department of Parks and Recreation (Parks) to determine whether it is in compliance with Local Law 57 as it relates to its responsibilities for (1) the distribution of automated external defibrillator (AED) units to youth leagues playing at baseball fields in City Parks; and (2) the provision of City-funded AED training courses, free of charge, to the designated youth league representatives. Under Local Law 57, the free AED training courses provided by Parks "shall be limited to the appropriation of funds available for this program." To ensure that free training would be distributed equitably "until such funds are exhausted," Parks established guidelines that allow "up to two" representatives from each youth league team to receive that training underwritten by Parks.

While fatal sport-related injuries can result from head and spine injuries, most sudden deaths in athletes are cardiac-related. *Commotio cordis*, a potentially lethal disruption of heart rhythm, occurs as a result of a blow directly over the heart, is the second-highest cause of death in athletes younger than 14, according to the American Academy of Pediatrics. Baseball is the most common sport in which this condition occurs, and nearly all incidents are caused by direct baseball strikes to the left chest wall. Early treatment CPR and the increased availability and use of AEDs result in a decrease of fatalities.

The audit found that Parks generally complied with Local Law 57 in discharging its responsibilities for the distribution of AED units and the provisions of training courses to the youth leagues that play and practice baseball on the City ballfields under Parks' jurisdiction. However, we found that Parks did not obtain sufficient information from the participants in the AED training courses to determine whether the youth leagues followed Parks' instruction to designate up to two representatives from each team for that training.

The audit recommended that that Parks: (1) include a column on its roster for attendees of AED training to require identification of the specific team within the youth league of each league representative attending the free training; and (2) use the new roster information identifying team affiliations to ensure that the youth leagues allocate City-funded AED training slots to a sufficient number of teams to enable the leagues, where practicable, to have at least one AED-qualified adult present at each baseball game and practice held on a Parks-managed ballfield, as required by Local Law 57.

The results of the audit have been discussed with Parks officials, and their comments have been considered in preparing this report. Their complete written response is attached to this report. If you have any questions concerning this report, please e-mail my Audit Bureau at [audit@comptroller.nyc.gov](mailto:audit@comptroller.nyc.gov).

Sincerely,

A handwritten signature in blue ink that reads "Scott M. Stringer".

Scott M. Stringer

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# THE CITY OF NEW YORK OFFICE OF THE COMPTROLLER AUDITS & SPECIAL REPORTS

## Audit Report on the New York City Department of Parks and Recreation's Compliance with Local Law 57 for the Baseball Games and Practices Played at Ballfields in City Parks

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### EXECUTIVE SUMMARY

*Commotio cordis*, a potentially lethal disruption of heart rhythm that occurs as a result of a blow to the area directly over the heart, is the second-highest cause of death in athletes younger than 14, according to the American Academy of Pediatrics. It typically involves young, predominantly male, athletes who experience sudden blunt trauma to the chest and often results in cardiac arrest and/or sudden death. Baseball is the most common sport in which this condition occurs, and nearly all incidents are caused by direct baseball strikes to the left chest wall. The American Academy of Pediatrics indicates that children 5 to 14 years old are vulnerable to this type of blunt chest impact because their chest walls are relatively elastic and easily compressed. Early treatment CPR and the increased availability and use of automated external defibrillators (AEDs) result in a decrease of fatalities.

In 2016, the City enacted Local Law 57 in an effort to make AEDs and adults trained to operate them available at all youth league baseball games and practices on City-owned baseball fields, to the extent allowed by the appropriation of sufficient City funds.

This audit was conducted to determine whether the Department of Parks and Recreation (Parks), is in compliance with Local Law 57 related to its responsibilities for the distribution of AED units to youth leagues playing at the baseball fields in City Parks and City-funded AED training courses, free of charge, to the designated youth league representatives. Under Local Law 57, the free AED training courses provided by Parks “shall be limited to the appropriation of funds available for this program.” To ensure that free training would be distributed equitably “until such funds are exhausted,” Parks established guidelines that allow “up to two” representatives from each youth league team to receive that training underwritten by Parks.

The audit found that Parks generally complied with Local Law 57 in discharging its responsibilities for the distribution of AED units and the provision of training courses to the youth leagues that play and practice baseball on the City ballfields under Parks’ jurisdiction. However, we found that Parks did not obtain sufficient information from the participants in the AED training courses to determine whether the youth leagues followed Parks’ instruction to designate up to two representatives from each team for that training.

The audit recommended that Parks: (1) include a column on its roster for attendees at AED training courses to require identification of the specific team affiliation of each youth league representative attending the free training; and (2) use the new team-affiliation information to ensure that the youth leagues allocate City-funded AED training slots to a sufficient number of teams to enable the leagues, where practicable, to have at least one AED-qualified adult present at each baseball game and practice held on a Parks-managed ballfield, as required by Local Law 57.

# AUDIT REPORT

## Background

Each year, according to the American Heart Association's Sudden Cardiac Arrest Foundation, approximately 326,200 people in the United States experience out-of-hospital, non-traumatic sudden cardiac arrest (SCA), and 9 out of 10 victims die. However, SCA victims have a greater likelihood of survival if they receive immediate cardiopulmonary resuscitation (CPR) and are treated with an AED. While fatal sport-related injuries can result from head and spine injuries, most sudden deaths in athletes are cardiac-related. *Commotio cordis*, a potentially lethal disruption of heart rhythm that occurs as a result of a blow to the area directly over the heart, is the second-highest cause of death in athletes younger than 14. It typically involves young, predominantly male, athletes who experience sudden blunt trauma to the chest and often results in cardiac arrest and/or sudden death. Baseball is the most common sport in which this condition occurs, and nearly all incidents are caused by direct baseball strikes to the left chest wall. The American Academy of Pediatrics indicates that children 5 to 14 years old are vulnerable to this type of blunt chest impact because their chest walls are more elastic and easily compressed. Early treatment CPR and the increased availability and use of AEDs result in a decrease of fatalities.

An AED is a portable medical device approved by the U.S. Food and Drug Administration that can be used to check the victim's heart rhythm and send an electric shock to the heart to try to restore a normal rhythm. Under New York State Public Health Law §3000-b, no person may operate an AED unless the person has successfully completed a training course in its operation. In addition, the devices must be registered with the appropriate regional council, which in New York City is the Regional Emergency Medical Services Council of New York City, Inc. (REMSCO), before they may be used by non-health care professionals. REMSCO is a not-for-profit, tax-exempt corporation whose function is to improve emergency medical services for New York City.

### **Local Laws 57 and 104**

In 2016, the City enacted Local Laws 57 and 104, codified at § 18-146 and § 4-209 of the Administrative Code of the City of New York (Administrative Code), to make AEDs and adults trained to operate them available at all youth league baseball games and practices on City-owned baseball fields, to the extent allowed by the appropriation of sufficient City funds. Specifically, Administrative Code § 18-146 applies to City ballfields under Parks' jurisdiction, and Administrative Code § 4-209 applies to City ballfields that the Department of Citywide Administrative Services (DCAS) leases to the youth leagues. Both sections became effective as of January 1, 2017.<sup>1</sup>

Administrative Code § 18-146 requires the youth leagues that use Parks' ballfields to have available at every baseball game and practice in which any of their teams participate: (1) an AED; and (2) where practicable, at least one coach, umpire or other qualified adult who has successfully completed an approved AED-training course within 24 months. Under the statute, Parks "shall

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<sup>1</sup> There are currently four sections of the Administrative Code designated as § 18-146. The section codifying Local Law 57 will be renumbered as § 18-150 in accordance with Local Law 133 of 2017

provide to youth leagues . . . a sufficient number of [AED's] and training courses at no cost to such leagues."<sup>2</sup>

To ensure compliance, Administrative Code § 18-146 prohibits Parks from issuing permits to a youth league for the use of a City ballfield under Parks' jurisdiction unless the league certifies that it will comply with its above-described obligations. On its *Field and Court Permit Requests* form, available on Parks' website, Parks informs youth baseball leagues that

the City of New York requires that all youth baseball leagues playing in ballfields in City parks must have an AED device and a trained responder made available at every league game and practice. Youth baseball leagues found to be in violation of this practice will be subject to warnings, fines, and denials of future permits.

In 2017, Parks issued 853 youth baseball permits to 122 youth leagues. Youth leagues can have multiple teams; the estimated average is between 15 and 20 teams per league.

The statute further stipulates that Parks' provision of AEDs and training to the youth leagues will be limited to the appropriation of funds for those purposes, and

[t]o the extent that [Parks] anticipates that the number of [AEDs] and training courses requested by youth leagues will exceed the funds available, [Parks] shall provide such defibrillators and training courses . . . on an equitable basis until such funds are exhausted.<sup>3</sup>

## Objective

The objective of this audit was to determine whether Parks is in compliance with Local Law 57 related to its responsibilities for the distribution of AED units to youth leagues playing at the baseball fields in City Parks and AED training courses to the designated youth league representatives.

## Scope and Methodology Statement

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective. This audit was conducted in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

The scope period for this audit was for January 1, 2017, the effective date of Local Law 57, to July 20, 2017, the last date of our fieldwork.

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<sup>2</sup> The statute defines youth league as "youth recreation sports leagues other than the public school leagues, including [private] school leagues, little leagues, community based organization leagues, and unaffiliated leagues." Youth leagues may have multiple sports teams.

<sup>3</sup> Administrative Code § 18-146(k).

## Discussion of Audit Results

The matters covered in this report were discussed with Parks officials during and at the conclusion of this audit. Parks was also notified of our findings in writing during the course of the audit and agreed that there was no need to have an exit conference. On March 19, 2018, we submitted a draft report to Parks with a request for comments. We received a written response from Parks on April 2, 2018. In its written response, Parks generally agreed with the recommendations. However, although Parks “is supportive of [the] recommendation,” to include a column on its roster to identify the team affiliation of each attendee, Parks stated “the roster is created by the American Heart Association.” Parks further stated that it “will work with the American Heart Association and [Parks’] vendor to see if this recommendation can be implemented.” Parks also stated that its implementation of our second recommendation would be “[p]ending the successful implementation of the prior recommendation.”

The full text of Parks’ comments is included as an addendum to this report.

## FINDINGS AND RECOMMENDATIONS

We found that Parks generally complied with Local Law 57 in discharging its responsibilities for the distribution of AED units and the provision of training courses to the youth leagues that play and practice baseball on the City ballfields under its jurisdiction. However, we found that Parks did not obtain sufficient information from the participants in the AED training courses to determine whether the youth leagues followed Parks’ instruction to designate up to two representatives from each team. Parks should capture the information it needs to ensure compliance.

### Parks Generally Complied with Local Law 57

Since Local Law 57 went into effect in 2017, Parks purchased and distributed over a thousand AED units and provided training in the use of the AEDs at no cost to the youth leagues. Parks developed *Guidelines for Agency Compliance with Administrative Code, Section 18-146 (Local Law 57, 2016) for Youth Baseball Games and Practices at Parks Ballfields*, detailing the process for the agency to comply with the Law, and maintained records identifying the AED recipients and the individuals who received the free training courses. Parks also registered the AED units it purchased with REMSCO as required by New York State Public Health Law §3000-b, through its medical-oversight contract with Philips Healthcare.

### Distribution of AED Units

Local Law 57 requires Parks to provide a sufficient number of AEDs to the youth leagues at no cost to them. Our audit found that Parks was generally in compliance with that requirement. Parks had taken steps to ensure that the youth leagues were informed of the law’s requirements. Parks also required each youth league applying for a permit to complete a survey to determine the number of AEDs the league would need.

As part of the process, Parks required the representatives of each youth league to sign a user-agreement for the receipt of each AED. Parks also maintained a list of AEDs distributed to the youth leagues. The information on the list includes the date of distribution, the person receiving



the AED, the name of the youth league, and the serial number of the AED unit. Parks purchased 1,500 AED units as of February 2017 and, by July 13, 2017, it reported that it had distributed a total of 1,319 AED units to the youth leagues.

## **AED Training Courses**

Local Law 57 requires Parks to provide training courses to the youth league representatives in the use of AEDs at no cost to the leagues. Our audit found that Parks was generally in compliance with that provision of the law. Moreover, Parks' guidelines informed the youth leagues that up to two representatives from each youth league team would receive free training.

Parks provided necessary information on its official website to inform the youth leagues of the training courses available to them at no cost. Parks contracted with LifeSavers, Inc. to provide the training courses that were approved in accordance with Local Law 57, and Parks maintained rosters for all the classes that were offered to the youth leagues.<sup>4</sup> The rosters included the names of the participants and their associated leagues. Parks also retained copies of the AED certifications that were issued to the individuals who had successfully completed the training courses.

### **Training Course Attendees Not Identified by Team Affiliation**

According to Local Law 57, the free AED training courses provided by Parks "shall be limited to the appropriation of funds available for this program." To ensure that free training would be distributed equitably "until such funds are exhausted," Parks established guidelines that allow "up to two" representatives from each youth league team to receive that training underwritten by Parks. The team representatives must be 18 years of age or older and have a relationship with the team (e.g., coach, umpire, a parent or a guardian, or a league volunteer).

We examined the training rosters for the training that was offered by Parks between December 18, 2016 and April 21, 2017, and determined that a total of 749 attendees had participated in the 79 free training courses offered by Parks. However, although the participants identified their affiliated youth leagues, they did not identify their specific teams within each youth league. For example, on January 14, 2017, a group of 16 representatives from the Youth Service League attended a training session in Brooklyn. However, the class roster identified only the attendees' youth league and not the names of their respective affiliated teams. As a result, we were unable to determine whether representatives of all youth league teams are being trained or whether the number of attendees per team had exceeded the two-per-team limit set by Parks.

An estimated 175 youth baseball leagues in New York City play on fields managed or leased by, or otherwise under the jurisdiction of, Parks and DCAS.<sup>5</sup> Each league averages 15 to 20 teams, resulting in approximately 3,000 teams across the five boroughs that would require an AED and an adult trained in its use at each game and practice. Without recording team affiliations of the trainees, Parks cannot be assured that up to two representatives from each team within each league are being trained, as its guidelines prescribe. Although having a greater number of people trained per team could be beneficial, it would be counterproductive if as a result the funds available for training were depleted before some teams had an opportunity to participate. Although the youth leagues have primary responsibility to ensure that where practicable an AED-qualified adult is present at each baseball game and practice, Parks is

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<sup>4</sup> LifeSavers, Inc. provides training in CPR and the use of AEDs.

<sup>5</sup> As noted in the Background section of this report, in 2017, Parks issued 853 youth baseball permits to 122 youth leagues.

responsible to ensure that the free training courses are made available on an equitable basis and therefore should collect the information it needs to do so.

## Recommendations

1. Parks should include a column on its roster for attendees of AED training to require identification of the specific team within the youth league of each league representative attending the free training.

**Parks Response:** “The roster is created by the American Heart Association. Parks is supportive of this recommendation and will work with the American Heart Association and our vendor to see if this recommendation can be implemented.”

**Auditor Comment:** We are pleased that Parks supports the recommendation—a simple change to an attendance form to elicit information Parks needs to ensure compliance with its own guidelines and Local Law 57—and accordingly, we urge Parks to require its vendor, LifeSavers, Inc., and the American Heart Association to implement this simple change.

2. Parks should use the new roster information identifying team affiliations to ensure that the youth leagues allocate City-funded AED training slots to a sufficient number of teams to enable the leagues, where practicable, to have at least one AED-qualified adult present at each baseball game and practice held on a Parks-managed ballfield, as required by Local Law 57.

**Parks Response:** “Pending the successful implementation of the prior recommendation, Parks will implement this recommendation.”

**Auditor Comment:** We urge Parks to obtain the information it needs—without condition or qualification—to ensure that City-funded AED training slots are allocated in accordance with Parks’ own guidelines and the requirements of Local Law 57.

## DETAILED SCOPE AND METHODOLOGY

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective. This audit was conducted in accordance with the audit responsibilities of the City Comptroller as set forth in Chapter 5, §93, of the New York City Charter.

We reviewed Local Law 57, Local Law 104, and other pertinent documents and interviewed Parks officials and various league representatives (including coaches and umpires).

To achieve our objective, we performed the following:

- Reviewed Local Law 57 and Local Law 104;

- Reviewed New York State Public Health Law §3000-b;
- Reviewed Parks' *Guidelines for Agency Compliance with Administrative Code, Section 18-146 (Local Law 57, 2016) for Youth Baseball Games and Practices at Parks Ballfields*;
- Reviewed information on Parks' official website regarding the free AED training courses offered to the youth baseball leagues;
- Reviewed and analyzed Parks' list of AEDs distributed to leagues per Local Law 57 and reviewed the signed receipts from the youth leagues;
- Reviewed Parks' lists of AED-trained responders and copies of AED certification cards for the trained responders;
- Reviewed Parks' AED Roster Master list for individuals that attended the AED training courses given by LifeSavers;
- Reviewed the game schedules for youth leagues scheduled to play at City ballfields in the five boroughs for the months of May, June, and July, 2017; and
- Reviewed a copy of the Medical Oversight Agreement with Philips Healthcare.



NYC Parks

Mitchell J. Silver, FAICP  
Commissioner

T 212.360.1305  
F 212.360.1345

E [mitchell.silver@parks.nyc.gov](mailto:mitchell.silver@parks.nyc.gov)

City of New York  
Parks & Recreation

The Arsenal  
Central Park  
New York, NY 10065  
[www.nyc.gov/parks](http://www.nyc.gov/parks)

April 2, 2018

Marjorie Landa  
Deputy Comptroller for Audit  
City of New York Office of the Comptroller  
1 Centre Street, Room 1100  
New York, NY 10007

**Re: Audit Report on the New York City Department of Parks and Recreation's Compliance with Local Law 57 for the Baseball Games and Practices Played at Ballfields in City Parks; SZ17-132A**

Dear Deputy Comptroller Landa:

This letter addresses the findings and recommendations contained in the New York City Comptroller's Draft Audit Report ("Report"), dated March 19, 2018, on the above subject matter.

We are pleased that the Report found that Parks generally complies with Local Law 57 in discharging its responsibilities for the distribution of AED units and the provision of training courses to the youth leagues that play and practice baseball on the City's ballfields under its jurisdiction. It affirms that since Local Law 57 went into effect in 2017, Parks purchased and distributed more than one thousand AED units and provided training in their use at no cost to the youth leagues. It affirms that Parks also developed guidelines detailing the process for the agency to comply with the Law, and maintained records identifying the AED recipients and the individuals who received the free training courses. The Report also affirms that Parks registered the AED units it purchased with REMSCO as required by New York State Public Health Law §3000-b through its medical-oversight contract with Philips Healthcare.

In reference to the Report's Recommendations directed to Parks:

**Recommendation 1 – Parks should include a column on its roster for attendees of AED training to require identification of the specific team within the youth league of each league representative attending the free training.**

The roster is created by the American Heart Association. Parks is supportive of this recommendation and will work with the American Heart Association and our vendor to see if this recommendation can be implemented.

**Recommendation 2 – Parks should use the new roster information identifying team affiliations to ensure that the youth leagues allocate City-funded AED training slots to a sufficient number of teams to enable the leagues, where practicable, to have at least one AED-qualified adult present at each baseball game and practice held on a Parks-managed ballfield, as required by Local Law 57.**

Pending the successful implementation of the prior recommendation, Parks will implement this recommendation.

Finally, Parks wishes to thank you and your audit staff for the time and effort devoted to completing this report.

Sincerely,



Liam Kavanagh  
First Deputy Commissioner