

2017 QALL ASAP PLAN



Quabbin Area Little league

P.O. Box 844
Barre, Massachusetts 01005
League ID Number 022-03-03

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QALL Leadership for 2017

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QALL Town Representatives for 2017

<p><u>Barre – Primary</u> Glen Chouinard 17 Hubbardston Rd Barre, MA 01005 678-887-7820 glenscontact@gmail.com</p> <p><u>Barre - Alternate</u></p>	<p><u>Hardwick - Primary</u> Ann Marie St Germain 2824 Greenwich Road Hardwick, MA 01037</p> <p><u>Hardwick - Alternate</u> Jed Geary 251 Old Petersham Rd PO Box 201 Hardwick, MA 01037</p>
<p><u>Oakham New Braintree - Primary</u> Joe Pease 46 Farm Pond Rd Oakham, MA 01068 774-280-1425 jpease@massmutual.com</p> <p><u>Oakham New Braintree - Alternate</u> Steven Labarre 450 Scott Road Oakham MA 01068</p>	<p><u>Petersham - Primary</u> Chris Barnes 47 Old Barre Road Petersham, MA 01366 978-724-3538 chrisb@net1plus.com</p> <p><u>Petersham - Alternate</u> Lynn Peredina 131 West Road Petersham, MA 01366 978-724-0462 lperedina@verizon.net</p>

A Safety Awareness Program History

The Safety Awareness Program re-invented itself from its original roots in the 1960's with a new pilot program in 1994 and was formally adopted by Little League Congress in 1995 with the intent "to increase awareness, through education and information, of the opportunities to provide a safer environment for kids and all participants of Little League Baseball."

Quabbin Area Little League (QALL) Region

The Quabbin Area Little League is the chartered organization of Little League Baseball, League #022-03-03 on behalf of 6 towns. The five communities are Barre, Hardwick, New Braintree, Oakham, Hubbardston, and Petersham which are located in Central Massachusetts and a member of Little League District 3.

Through the QALL bylaws, all the communities and independent baseball/softball organizations have approved and agree to follow this Safety Manual and all Little League Rules and Regulations as part of the QALL charter.

QALL Objective

It is the objective of the Quabbin Area Little League (QALL) to provide the safest possible environment for our players, volunteers, spectators as can be possibly achieved. This custom ASAP program will be utilized to educate everyone involved in our programs in an effort to reduce the volume of, or potential for, injuries which thereby creates a safer playing environment. The goal is to be proactive and initiate programs and procedures to prevent future injuries or chance of injury before they happen. Leadership, Coaches and Volunteers will be held accountable for maintaining all aspects of the Safety Manual Rules and Recommendations as it relates to the various daily practice and game day procedures and activities. It is a goal of QALL to allocate, in its annual budget process, funds earmarked specifically for enhancing and marketing the Safety Awareness Programs and to upgrade facilities as needed.

QALL Member Town Responsibilities

Each of the QALL Towns representatives are responsible for designating individual Safety Representatives throughout that Towns teams to maximize oversight of and access to safety policies and procedures at all times. All Coaches are strongly encouraged to provide written documentation as to all incidents and accidents as well as make any safety recommendations concerning game or practice routines as well as field or concession stand issues to the Safety Officer immediately in order to initiate programs or procedures to eliminate potential for injuries whenever possible. Coaches are also responsible for establishing safety routines concerning player drop off, pick up, walking or bicycling home after practice and games to the best of their abilities.

Each Town within QALL will also designate an annual representative to oversee and implement all safety concerns, recommendations, field conditions, safety signage or budgetary request to assure future compliance of any short comings or conditions that this Manual or the Safety Officer notes during the Annual Field Safety Survey process.

QALL ASAP Safety Manual

This manual shall be submitted and reviewed by District 3 representatives annually to acquire their feedback on how to implement a safer program. As they physically tour the entire district and oversee all facilities and programs in use, they may be able to provide invaluable insight or recommendations for the benefit of all the children and spectators of QALL.

Qualified Safety Plan Requirements

This ASAP Safety Manual covers the 13 safety requirements. Each of requirements listed will be addressed with QALL's responsibilities and responses. When QALL is actively responsible for a requirement a detailed set of procedures is outlined QALL will follow. The following 13 areas will be addresses in the next section of this manual.

1. Have an Active Safety Officer
2. Publish & Distribute An Annual Safety Manual
3. Post & Distribute Emergency Numbers
4. Check Volunteers for Criminal Behavior
5. Provide Fundamentals Training
6. Provide First Aid Training
7. Complete Annual Facility Survey
8. Require Field Inspections Prior to Each Use
9. Use Concession Stand Procedures
10. Regularly Inspect and Replace Equipment
11. Have Prompt Accident Reporting
12. Require First Aid Kits At All Events
13. Enforce All Little League Rules

League Safety Officer

The QALL Board of Directors shall appoint on a yearly basis an active League Safety Officer. The notification of the league Safety Officer to Little League Headquarters shall be made through the Little League Data Center and with the submission of this ASAP Safety Plan.

2017 Safety Officer Joe Pease 46 Farm Pond Rd Oakham, MA 01068 774-280-1425 jpease@massmutual.com	2017 Emergency Backup Shawn LaRoche (QALL President) 230 Hubbardston Rd PO Box 886 Barre, MA 01005 (978) 355-6182
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Publish and Distribute Annual Safety Manual

This Safety Manual is approved by and on file with the local communities of QALL, the QALL Board of Directors, the District 3 Representative and Little League Baseball.

This Manual will be available to all Directors and Officers throughout the QALL region, to all concession personnel, equipment managers, coaches and anyone deemed appropriate by QALL leadership. This Manual will be located in all concession stands throughout the QALL region as a point of reference. A copy of this Safety Manual may be obtained by calling any Town Representative, The Safety Officer or the QALL Leadership. This Manual is on file with Little League Baseball.

The last known approved Manual remains in effect until its predecessor is approved annually by Little League Baseball.

Post and Distribute Emergency Numbers

Emergency Phone Number: 911

All QALL area communities are coordinated under the 911 Emergency Program and most of the region fields have acceptable cell phone signal coverage. In case of emergency do not delay in utilizing the 911 service. There are no QALL fields with direct land line phone services. Should a land line become available the local Ambulance, Police and Fire phone numbers must be posted in addition to 911 to speed response times.

League President: Shawn LaRoche (978) 355-6182

Safety Officer: Joe Pease (774) 280-1425

Check Volunteers for Criminal Behavior

In 2003 Little League implemented new Regulations involving the Little League Child Protection Program and included them in the official rule books and operating manuals for all Leagues to follow as Mandatory requirements. In addition, effective September 2008, the Commonwealth of Massachusetts requires CORI (Criminal Offender Records Information) certification through the CHSB (Criminal History Systems Board) by certifying CORI officers.

All Volunteer forms and attached Identification copies will be safely stored and protected for confidentiality according to State or Federal requirements and privacy policies. At the end of the volunteers' service or annual renewal, all records shall be properly destroyed. Only the annually CHSB certified QALL

CORI officer or CHSB certified QALL President has the authority to handle, review and store all personal information and or CORI reports.

All volunteers and parents of players whether volunteering or not are encouraged to submit the personal information to receive the ASAP newsletter, Little League E-News and other worthwhile resources of Little League Baseball.

2017 CORI officer

QALL shall nominate and approve a CORI officer annually with the sole charge of becoming properly trained according to State and/or Little League policies for performing and storing data concerning background checks.

2017 QALL CORI officer

Ann Marie St Germain
2824 Greenwich Road
Hardwick, MA 01037

CORI/ Background Check Requirements

All adult Volunteers or Participants with any involvement or contact with the youth in the QALL programs MUST fill out the annual Little League Baseball Volunteer form and be subject to a national criminal and/or sexual offender background check involving acts against minors or other potential violent acts that may be a risk factor to our players or volunteers. If requested, the applicant will be provided with a copy of these CORI policies.

Along with the completed Volunteer form, a government-issued photo identification card or ID must be attached and remain on file with the QALL CORI Officer or President for the duration of Volunteers' involvement or a new calendar year arrives whichever is later.

Beginning in the 2017 season, Little League National Background Checks will be performed through First Advantage - <https://ca.fadv.com/CA/welcome.do?LLinternational>

State Background Checks are performed through Massachusetts Department of Criminal Justice Information Services – <https://icori.chs.state.ma.us>

Persons refusing to complete the current volunteer form or provide proper Identification shall not be allowed to be involved with the children or programs. No Exceptions.

CORI Disqualification

Unless provided by law, a criminal record will not automatically disqualify an applicant. Rather, determinations of suitability based on CORI checks will be made consistent with this policy and any applicable law or regulations.

If a criminal record is received from the national and/or state background checks, the authorized individual will closely compare the record provided by CHSB with the information on the CORI request form and any other identifying information provided by the applicant, to ensure the record relates to the actual applicant.

If QALL reasonably believes the records belong to the applicant and is accurate, based on the information provided, the determination of suitability for the position may be made. Unless otherwise provided by law, factors considered in determining suitability may include, but not limited to the following:

1. Relevance of the crime to the position sought.
2. The nature of the position.
3. Time since conviction.
4. Age of the incident at the time of the offense.
5. Seriousness and Specific circumstances of the offense.
6. The number of offenses.
7. Whether the applicant has pending charges.
8. Any relevant evidence of rehabilitation or lack thereof.
9. Any other relevant information provided by applicant or 3rd party.

If QALL is inclined to make an adverse decision based on the results of the CORI check, the applicant will be notified in a timely manner. The applicant may be provided a copy of the criminal record and the QALL CORI policy, advised of the parts of the record that make the individual unsuitable for the position. The individual shall be given an opportunity to dispute the accuracy and relevance of the CORI record.

CORI Challenge

Applicants challenging the accuracy of the CORI results shall be provided with instructions on how to find processes to correct a criminal record. If there is a data error and the CORI record does not match the actual applicant, QALL will make a determination on an additional review of the CORI records and applicants' information and application for accuracy. QALL may contact the national and state vendors to request a detailed search.

Provide And Require Fundamentals Training

During the annual Pre-Season time frame, generally in March, QALL shall initiate a Coaches Meeting at a local facility for all active or interested Coaches, Managers and Umpires for the coming season for the purpose of fundamentals training. Proper attitude, training and skills are mandatory for Coaches who are shaping the minds and athletic abilities of our youth through our programs. Every effort will be made to assure they are being taught the age appropriate fundamentals.

2017 Coaches Fundamentals Meeting

March 25, 2017 9am
New Braintree Elementary School
15 Memorial Dr
MA 01531-1742

The purpose of this meeting is to provide fundamentals training to the coaches for the purpose of proper batting, pitching, fielding and sliding. During this meeting handouts, brochures, video or other forms of media that may be utilized as tools to educate and promote safe routines to be used for the

coming season. If financially feasible, it is recommended that guest speakers be brought in as instructional speakers or advisors such as High School or College Coaches, local Clinic Instructors or other local Celebrity with knowledge and background of the game.

At this meeting any new Rule changes or safety requirements will be announced and discussed so all coaches and teams are on the same page.

It is mandatory that each team have at least One Coach be present for this instructional meeting. It is recommended that all coaches of each team make every effort to attend. Under no circumstances, should any coach go longer than three years without fundamentals training. Annual attendance is taken and placed on file for future reference.

Coaches Role in Safety

It is Mandatory that the coaching staff account for all children at the end of each game and practice. Simply releasing the children and not knowing where they went or with whom is irresponsible. Each Coaching staff should initiate a pick up procedure. An example would be to keep the players in the dugout until a parent or guardian claims them. Another is to designate the buddy system to help assure proper delivery to the waiting parent/guardian.

Coaches are the primary point of control concerning everyone's safety. Their role and diligence is vital to stopping injury before it happens. Your proper and safe practice and game routines are critical keys to creating our safe environment we all want to achieve.

Fundamentals to adhere

- All Medical Release forms and player emergency contact numbers should be with you at all games and practices.
- Managers and Coaches must know of any medical issues a player may be prone too I.e. Asthma, bee stings, seizures and so on.
- Managers and Coaches should mandate the players or parents have with them all necessary medicines to be onsite at all practices and games so the

child may self medicate or the parent can assist as needed. Parents should be encouraged to not simply drop off children with any conditions. They should remain available in case of emergency.

- Managers or Coaches should arrange to have a cell phone available should professional help become needed.
- Keep an eye out for suspicious looking observers who may seem a little too pre-occupied with the children or a particular player.
- Always maintain that smoking, alcohol, inappropriate language, inappropriate physical contact and verbal abuse is not tolerated.
- Coach every player to their ability, not your desires.
- Respect the players and require respect back from them.
- Report any Disturbances or illegal activities to proper authorities.
- Maintain your first aid kits. Call for supplies immediately.
- All Team Gear should be inspected regularly. Every Game at minimum.
- All fields, whether home or away, should be inspected for possible liabilities or issues. See Requirement Eight.
- All foul balls should be retrieved and forwarded to either team bench and not thrown back in play or at the umpire.
- All players properly stretch prior to every practice and game.
- All players generously spaced out during warm ups.
- Pay attention that warm up overthrows do not affect spectator areas, coaches, dugouts or other players.
- All players have the proper glove size for the proper level of play and individual talent level.
- All offensive players in the field of play must wear proper fitting and inspected helmets. QALL encourages face guards on helmets.
- All (male) defensive players in the infield or have the potential to be placed in the infield are encouraged to wear protective cups, athletic supporters as well as mouth guards.
- All catchers wear properly fitted and inspected gear which includes a dangling throat guard properly affixed to the mask.
- Bats should be retrieved by the next batter in the rotation, with helmet on.
- Coaches must act strongly, early in the pre-season to any bat throwing, whether intentional or by accident.
- During games, proper safe zones must be designated for pitchers to safely warm up without chance of injury to spectators or other players.

- All pitch counts, days of rest and mandatory games off will be strictly enforced. All Coaches are required to inspect and sign off on the opponents Pitcher Affidavit.
- All players are to be dressed appropriately at practice and games.
- No head first sliding as per Little League Rules will be enforced.
- Players who wear glasses should be encouraged to wear safety glasses, protective goggles or contacts as appropriate.
- Players will not wear jewelry, watches, chains, earrings or other such items during practice or games.
- Practices or games must be stopped, postponed or rescheduled in the event the field conditions or weather conditions warrant concern.
- The Little League Lightning rule must be enforced. At no time in a potential storm should players be roaming the fields or facilities. If you hear it FEAR IT. If you see it FLEE IT.
- All QALL fields are recommended having weather alert systems, television access, weather radios, NOAA band walkie talkies or other means of notifications of incoming severe weather to allow maximum time to seek shelter and protection from the storm.
- No horse play anywhere on the grounds.
- All players should be watching the game. Give each player in the dugout different roles, ie. Pitch counts, ball, strikes, track where hits go and by which player, result of play and so on.

Provide and require First Aid Training

During the annual Pre-Season time frame, generally in March, QALL shall initiate a QALL Meeting at a local facility for all active volunteer participants for the coming season for the purpose of First Aid Training. CPR training is encouraged when volunteer time and budgets permit. There are many alternative sources to obtain CPR certification.

2017 First Aid Training Meeting

March 25, 2017 9am

New Braintree Elementary School

15 Memorial Dr

MA 01531-1742

The Purpose of this meeting is to provide fundamental First Aid training to all volunteers and staff in the event of an injury or emergency. Always utilize the 911 system in emergencies.

It is Mandatory for at least one coach from each team be present **annually** for this meeting and training. It is recommended that all coaches from every team make every effort to attend this annual training.

It is not mandatory for any licensed or certified professionals attend this training such as medical doctors, registered nurses, paramedics or other healthcare professional with adequate training and background. It is strongly recommended that the above professionals be used as instructors and training advisors for this training meeting as well as asking for their involvement in the day to day operations at the local fields of play during game days. General first aid classes or CPR certification does not exempt individuals from this annual training class.

Attendance will be taken and recorded with QALL as documentation of who attend this training.

Basic First Aid Do's and Don'ts

DO

- Reassure and aid anyone who may be injured.
- Provide assistance to anyone needing attention.
- Know your limitations and seek professional help.
- Maintain fully stocked First Aid kits all season.
- Look first for Blood, Black & Blue, Deformity and Breathing.
- Make sure the injured remains calm and doesn't move.
- Listen, if conscious, to the injured describe the injury
- Feel for swelling, broken bones or grating.
- Carry all player Medical Release forms at all times.
- Create and carry Coaches and staff contact information.
- Always have a cell phone available at fields where no land line is available.
- Report facility repairs or liabilities immediately.
- Report Safety rules or procedures not being followed.
- Report suspicious activity or people immediately.

Don't

- Don't Administer any medications.
- Don't Provide food or beverage (Only Water)
- Don't Hesitate to call for help as needed.
- Don't Be afraid to ask for help if unsure.
- Don't Transport the injured party at any time.
- Don't Attempt to move an injured party.
- Don't Leave any child alone on the grounds.
- Don't Leave any child or animal in your vehicle at any time.
- Don't Forget to report injuries to the proper authorities.
- Don't Forget to file injury reports as required.

Field Inspections Prior To Each Use

All Coaches are required to designate an adult to inspect all facilities and grounds prior to each game and practice to maintain the optimum level of safety protection. The fencing condition, infield, mandatory breakaway bases, dugouts, gates, obstructions, bees nest, holes in outfield, broken glass and general grounds maintenance is what should be inspected. Should fields offer lighting facilities, they must meet Little League Baseball regulations.

QALL leadership encourages all Towns in the QALL system to utilize warning tracks, reduced impact balls at the younger levels, padded fence tops, spectator safe zones with added fencing or netting, safety rails and back supports for all seating bleachers, post speed limits at all facility parking areas, post emergency phone numbers and signage and use double sized first base for added safety to avoid collisions.

Any shortcomings or problems shall be reported to the opposing coach/team, the plate umpire on site and forwarded to the QALL President or Safety Officer, as posted earlier in this Manual at the earliest convenience. No Exceptions. Without proper notice and inspections, some child or spectator may be severely injured.

If any coach, player or spectator observes conditions or has a reasonable suggestion for facility operations or team playing or practicing routines, it is recommended that a suggestion box be placed on each facility site to receive such suggestions. All reasonable suggestions should be seriously considered for future implementation.

Complete the Annual Little League Facility Survey

During the Pre-Season and as part of this Safety Plan, all facilities in use by QALL communities for play or practice are subject to a complete Annual Field and Concession Stand survey and evaluation.

All facilities shall be inspected for safety and liability concerns according to the Little League Facility Survey. Any short comings or liability issues shall be documented by the Safety Officer and placed into a written report. The report shall state all short comings and provide a reasonable time frame to complete the needed repairs. Should the liability or short coming be considered to be severe, that facility could be shut down from use until repairs are satisfactory made. All reports shall be directed to QALL leadership and subsequently the individual communities for upgrade or repair of their facility.

A completed copy of the Facility Survey is made part of this Safety Manual and a copy forwarded to Little League Baseball. Field Surveys and recommendations may be found at the end of this Manual.

It is strongly recommended that each community facility have posted a safety suggestion box to continue to be proactive and solicit ideas from users or spectators of shortcomings concerning all safety issues or improvements that can be made at that field of play whether on field or off.

Written Safety Procedures for Concession Stands

General Rules and Restrictions

NO Smoking

There shall be posted a NO SMOKING sign at all fields in use by QALL. The Public Address Announcers must announce the NO SMOKING regulations prior to all games as a reminder to all spectators.

NO Alcohol

No Alcohol shall be allowed on any grounds in use by QALL and any offenders shall be reported to the local law enforcement agency.

NO Glass

No glass products shall be allowed on premises by spectators.

Each community that operates a concession stand MUST Train and regulate all personnel and Staff as to all safety Procedures, Rules and Regulations according to what their facility specifically offers.

Concession Stand Rules and Restrictions

- All Concession Stands MUST have a copy of this Safety Manual kept on site.
- All Concession Stands must have emergency contact information posted.
- No concession stand shall serve or sell products in any form of glass containers.

- All Concession Stands Must have First Aid Kits and Supplies. All staff must know where the First Aid supplies are located. A weekly reporting system for restocking purposes needs to be created and implemented.
- All Concession Stands Must have a copy of the current year Little League Baseball Rules and Regulations kept on site and made readily available.
- Concession Stands that sell pre-packaged foods or drink must have adequate trash removal receptacles and programs in place to maintain a clean and sanitary environment. It is recommended that recycling programs be put in place as part of the process.
- When Concession Stands have a water supply, it is recommended that all staff consistently wash hands and the selling counter area to maintain the maximum sanitary levels possible.
- As a courtesy, advise the visiting team of the water supply in the event of injury or general need.
- Should Concession Stands in the QALL district heat or cook food supplies, they must have a Fire Extinguisher, in proper working condition and specific for the types of cooking facility provided. Proper signage to assist in locating and use of the apparatus must be prominently displayed.
- If Concession Stands do offer heated or cooked food products then a means of washing hands & sanitizing cooking utensils must be maintained. Use rubber gloves when handling food, have sanitizing soap available and maintain the greatest level of sanitary control as possible.
- If Concession Stands utilize Barbeque Grills as a cooking source, a routine cleaning of the grill grates must be performed. A pre-heat “burn off” prior to cooking should also be performed. Always check Gas grills for leaks and proper working conditions prior to lighting. The ashes from Charcoal grills, when no longer in use, should be disposed of properly and not on open ground, trash barrels or left in the Stand until all chance of reigniting is completely eliminated.

- Outdoor Grills must be kept a safe distance from all spectators, players and structures so to avoid any accidents. It is recommended that a safety zone be erected specifically to isolate the grill from public contact. The grill safety zone should not allow anyone but the chef to be near or walk by the grill so to avoid accidentally getting burned or splattered.
- Refrigeration or cold storage equipment must be reliable and sufficient to maintain minimum acceptable standards for the task at hand. Keep products frozen or refrigerated until ready for immediate use. Do not leave uncooked items at room temperature or in the sun for any length of time to avoid bacteria concerns.
- Do not reheat foods or allow the sale of any foods that have been left at room or outdoor temperatures.
- When food stock is stored, a vigilant routine and inspection for insects must be maintained. Treatment procedures should be professionally performed or initiated under the maximum care to not allow chemicals or poisons to come in contact with any food stock, counters, cooking appliances or utensils.

Regularly Inspect and Replace Team Equipment As Needed

It is Mandatory for Each Teams Coaching Staff to do periodic checks of all team equipment in use by their players for condition and safety. A check should be performed prior to each game at a minimum. The QALL Safety Checklist should be used before each game. A copy of the checklist is available in the appendix of this document.

Every Community in QALL should designate an Equipment Manager who shall store and inspect all league equipment during the off season. During that down time, all team bags should be gone through and checked for condition and liability concerns. Of greatest concern should be the catchers' equipment and helmets. All bats must meet Little League regulations.

Each Coaching staff should monitor if a player brings his own equipment. This equipment must meet Little League Baseball regulations and deemed safe for play just as much as the assigned team bags and equipment.

Any equipment not suitable for play must be repaired, upgraded or taken out of service and destroyed as needed. Please consult your community leadership as well as the Safety Officer of QALL when such equipment is noted.

Male and Female catchers must follow the Little League Regulation for equipment by utilizing cups (if applicable), throat guards, extended chest protectors and so on.

It is strongly recommended that each community in QALL have a pre-determined time frame for equipment service rotation. An example would be that within a 5 year rotation all the gear in the team bags will be replaced. Some equipment may normally have a greater life span than other gear in the bag.

Have Prompt Accident Reporting

Reporting accidents, incidents or injuries

It is required that all accidents, incidents or injuries that cause any adult or child to receive on site first aid or outside medical attention be reported whether verbally or in writing, to the QALL President or Safety Officer within 24 hours of the incident. No exceptions.

The QALL needs to be informed should there be a need for additional exams or follow up service at your family doctor, dentist, ophthalmologist, emergency rooms or clinics, X-rays, MRI's or a specialist in specific fields of medicine due to the injury incurred.

The Current President and Safety Officer are:

League President: Shawn LaRoche (978) 355-6182

Safety Officer: Joe Pease (774) 280-1425

Bleeding or Bodily Fluid Procedures

Communicable Disease Procedures must be followed by all parties assisting with injuries or incidents that have open bleeding or wounds involved. Medical gloves are provided in the safety kits in Team bags and at the Concession Stands.

No player, coach, umpire, volunteer or staff may expose other adults or children to any blood or bodily fluids. Should uniforms or other clothing become soiled, it must be removed or changed prior to resuming play or interacting with others.

Immediately wash hands and infected areas and other skin surfaces if contaminated with blood or bodily fluids. Clean any equipment or First aid supplies that may have been exposed properly and immediately.

No player may resume play while still bleeding or having an open wound.

Safety Officer Responsibilities Following a report:

The Safety Officer shall within 24 hours of receiving a report of injury requiring treatment shall contact the injured party(s) and;

1. Verify current condition of the injured.
2. Solicit and verify all necessary information for the report.
3. Obtain and document any new information.
4. Inquire and record if additional treatment is/was needed.
5. Advise parent or guardian of QALL's insurance and offer further assistance.

Should the injury require some duration of care and considered a major injury, periodic calls and status updates are required by the Safety Officer.

1. Status of injured.
2. Are any further insurance issues unresolved?
3. Are any claims or forms needed from the QALL.
4. Continue updates until file is considered closed by all parties.

Minor Incidents

Minor scrapes or bumps received as normal occurrences of playing the game or position may be tracked for in house use but not formally reported as an injury, accident or incident. These must be reported on the form within 5 business days of incident to the Safety Officer.

A tracking form, located within this Manual can be used for all injury reporting. Near misses should be tracked as well as major injuries in order to stay vigilant in our quest for maintaining a safe playing environment.

Require First Aid Kits At All Events

Every team bag at every level of play shall have a fully stocked First Aid Kit before the season begins which will include ice packs. These are in case the Concession Stand or Announcer Booth is not open or accessible during practices or other events.

As items are used, please restock needed items by contacting the Equipment Manager for your community first. If not successful, please contact the QALL President or the Safety Officer for assistance in accessing more supplies.

If you see, feel or hear inclement weather approaching, stop play immediately and seek shelter. If you see any flashes of lightning you **MUST** take shelter immediately. See the attached Lighting brochure produce by NOAA in this Manual.

Lightning shelters should be prominently marked and utilized. Coaches must take an active and aggressive stand to get players and spectators to safety. If no shelters are available, players should be released to the parents to seek shelter in vehicles at a minimum.

Enforce All Little League Rules

Most Little League Rules have some basis for safety. It is in everyone's interest to use them.

Coaches are the first line of safety. They are most in contact with the players in practices and games. The Coaching staff should be diligent in their efforts to teach and command safe routines and controls at all times and follow all the Little League rules and objectives.

Require all players to use and practice with proper equipment at all times. Short cuts and avoiding catchers gear during warm ups is trouble waiting to happen.

No on deck circle will be fully enforced. No player, except the player at the plate should have a bat in his hand or be practicing their swing. This includes practice.

Pitchers warming up should be in designated safe zones to avoid accidents with wild pitches or missed balls concerning nearby participants or spectators. Catchers should have full proper catchers gear on.

No Manager, Coach or Parent may catch for a pitcher which includes standing at the backstop during practices or informal catching during batting practice. Rule 3.09.

League Player Registration Data or Player Roster Data, Coach and Manager Data

This data must be submitted via the [Little League Data Center](#)

APPENDIX

The following pages provide further information and documents that enhance the information provided in this ASAP manual. It is the responsibility of managers, coaches, town representatives or any other leader to print and display the information as needed.

If you have a document or information that would be useful to the QALL please contact the Safety Officer for inclusion.

2017 QALL Pre-Game Safety Checklist

All umpires, managers & coaches are responsible for checking field safety conditions before each game

Field

Walk field prior to each game looking for glass, holes or other dangers.

- | | |
|---|---|
| <input type="checkbox"/> Backstop | <input type="checkbox"/> Outfield fence |
| <input type="checkbox"/> Bases | <input type="checkbox"/> Batters box level |
| <input type="checkbox"/> Home plate | <input type="checkbox"/> Foul lines marked |
| <input type="checkbox"/> Warning track | <input type="checkbox"/> Coach's box marked |
| <input type="checkbox"/> Coach's track | <input type="checkbox"/> Batters box marked |
| <input type="checkbox"/> Pitchers mound | <input type="checkbox"/> Dirt Needed |
| <input type="checkbox"/> Infield fence | <input type="checkbox"/> Grass Level |

Equipment

Inspect all equipment before each game. Any equipment not suitable for play must be repaired, upgraded or taken out of service and destroyed as needed.

Game Equipment

- ☐ Batting helmets
- ☐ Bats
- ☐ Throat protector
- ☐ Chest protector
- ☐ Catcher's mitt
- ☐ Catcher's Helmet
- ☐ Facemasks

First Aid / Safety

- ☐ First-aid Kit
- ☐ Cold Pack for injuries
- ☐ Medical Release forms
- ☐ Injury report forms
- ☐ Safety Manual

Dugouts & Spectator Area

Inspect dugouts and spectator areas prior to each game. Any conditions that pose a danger should be addressed immediately.

Dugout

- ☐ Fencing
- ☐ Bench
- ☐ Roof
- ☐ Bat racks
- ☐ Helmet racks

Spectator Area

- ☐ Clean-up needed
- ☐ Bleachers
- ☐ Handrails
- ☐ Protective screens
- ☐ Bleachers
- ☐ Trash cans

If any conditions are found that need to be addressed contact either the Equipment Manager or the Town representative.

Manager_____ Date_____



A Parent's Guide to the Little League Child Protection Program

Introduction

The backbone of Little League® is the adult volunteer. One million strong, it is this corps of dedicated people who coach the teams, umpire the games, work in the concession stands, serve on the local board of directors, and serve at the District level. These people, who live in every U.S. state and more than 100 other countries, make Little League the world's largest and most respected youth sports organization.

We know that the greatest treasure we have is children. As adults, we must ensure that these young people are able to grow up happy, healthy and, above all, safe. Whether they are our children, or the children of others, each of us has a responsibility to protect them.

The Little League Child Protection Program seeks to educate children and volunteers in ways to prevent child abusers from becoming involved in the local league. Part of that education has been to assist local Little League volunteers in finding effective and inexpensive ways to conduct background checks. Little League regulations now say: "No local league shall permit any person to participate in any manner, whose background check reveals a conviction for any crime involving or against a minor." (Reg. I [c] 9.)

Background checks were optional until the 2003 season. Effective in 2007, the local league must conduct a nationwide search that contains the applicable government sex offender registry data. Advances in computer technology – allowing greater access to public records – make it possible for background checks (at a minimum, to see if an individual is a registered sex offender in any given state) to be conducted in every U.S. state. Local Little League programs are now *required* to annually conduct a background check of Managers, Coaches, Board of Directors members and any other persons, volunteers or hired workers, who provide regular service to the league and/or have repetitive access to, or contact with, players or teams. (Reg. I [b], Reg. I [c] 9.)

The purpose of these background checks is, first and foremost, to protect children. Second, they maintain Little League as a hostile environment for those who would seek to harm children. Third, they will help to protect individuals and leagues from possible loss of personal or league assets because of litigation.

The United States Department of Justice National Sex Offender Public Registry is free and available at www.nsopr.gov.

What Can Parents Do?

Most children have been warned about the dangers of talking to strangers. But for many children, sexual molestation is committed by someone they know. In fact, 80 to 85 percent of all sexual abuse cases in the U.S. are committed by an individual familiar to the victim, according to statistics compiled by Big Brothers & Big Sisters of America.

The truth is, child sex offenders can come from every background, every occupation, every race, and every level of education. They may be married, and they may have children of their own. It is dangerous to believe that the only threat is the stranger in a long raincoat, lurking behind a tree.

In fact, the promotion of this myth may contribute to the problem. Sometimes, a child who is molested by a known and "trusted" person will feel so guilty about not reacting the "right" way that he or she never reports the problem.

Sadly, we have all seen too many reports in which teachers, police officers, clergy, youth sports volunteers, etc., trusted by all, have violated that trust and molested children in their care. Of course, this must never be tolerated in Little League or anywhere else.

In many of these situations, the young victims are actually seduced, sometimes over a period of months or even years. The child's family is lulled into believing the unusual attention being lavished is a bond of friendship between the adult and the child. In fact, the adult abuser often uses gifts, trips, attention and affection as part of a courtship process. Sometimes, the courtship process extends to the child's parent(s), but the real target is the child.

Often, but not always, the victim of this type of child sex offender is the child of a single parent. In these cases, the single parent sees the child's adult friend as a surrogate parent – a Godsend. The very opposite is true.

Two good rules of thumb for all local Little Leagues and parents

- Generally, a person involved in a local Little League program should not put himself or herself in a one-on-one situation involving a child who is not their own. Of course, some isolated situations may arise where one-on-one situations could take place. However, a one-on-one situation should not be actively *sought out* by the adult, and should not be an ongoing occurrence.

- Generally, a person involved in a local Little League program should not provide unwarranted gifts, trips, attention and affection to individual children who are not their own. The key word is *unwarranted*.

Warning Signs of a Seducer

While it remains important to teach young children about the dangers of accepting items from strangers, or talking to them, we should all beware of the danger posed by the “seducer-type” child sex offender.

Each of the individual signs below means very little. Taken as a group, however, the signs **MAY** point to this type of child sex offender, and should be applied to anyone who has repetitive access to, or contact with, children.

- Provides unwarranted gifts, trips, affection and attention to a specific child or small group of children
- Seeks access to children
- Gets along with children better than adults
- “Hangs around” children more than adults
- Has items at home or in vehicle specifically appealing to children of the ages they intend to molest, such as posters, music, videos, toys, and even alcohol or drugs
- Displays excessive interest in children (may include inviting children on camping trips or sleepovers)
- Single, over 25 years old (but could be married, sometimes as a “cover,” and could be any age)
- Photographs or videotapes children specifically
- Lives alone, or with parents
- Refers to children as objects (“angel,” “pure,” “innocent,” etc.)
- Manipulates children easily

Again, each of these items, by themselves, is relatively meaningless. Taken together, however, they may indicate a problem.

What to Watch For in Your Child

We’ve seen the signs that could point to a child sex offender, but what about the signs a child might display when he or she has been sexually abused or exploited? Some of these symptoms may be present in a child who has been or is being sexually abused, when such symptoms are not otherwise explainable: sudden mood swings, excessive crying, withdrawal, nightmares, bed-wetting, rebellious behavior, fear of particular people or places, infantile behavior, aggressive behavior, and physical signs such as pain, itch, bleeding, fluid or rawness in private areas.

Getting More Information

These items are meant solely as a general guide, and should not be used as the only means for rooting out child sex offenders. Parents can access more information on child abuse through the National Center for Missing and Exploited Children (a non-profit organization founded by John Walsh, <http://www.missingkids.com/>) and the National Clearinghouse on Child Abuse and Neglect

Information (part of a service of the Children’s Bureau, within the Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, <http://www.calib.com/nccanch/>).

How to Report Suspected Child Maltreatment

The National Clearinghouse on Child Abuse and Neglect Information advises this: If you suspect a child is being maltreated, or if you are a child who is being maltreated, call the Childhelp USA National Child Abuse Hotline at 1-800-4-A-CHILD (1-800-422-4453; TDD [text telephone] 1-800-2-A-CHILD). This hotline is available 24 hours a day, seven days a week. The Hotline can tell you where to file your report and can help you make the report.

Or, for a list of states’ toll-free telephone numbers for reporting suspected child abuse, visit the “Resource Listings” section at this site: <http://www.calib.com/nccanch/pubs/prevenres/organizations/tollfree.cfm>, or call the Clearinghouse at 1-800-FYI-3366.

Talk to Your Kids; Listen to Your Kids

It is important that you as a parent talk frankly to your children. If a child reports sexual abuse, statistics show he or she is probably telling the truth.

Unfortunately, the sexually molested child often sees himself or herself as the one “at fault” for allowing abuse to happen. Your children **MUST** know that they can come to you with this information, and that you will support them, love them, and *believe* them.

If there is an allegation of sexual abuse of a minor, the crime should be reported immediately. These criminals who steal childhood **MUST BE STOPPED**.

This brochure was produced by Little League Baseball, Incorporated; P.O. Box 3485; Williamsport, PA 17701

Little League Baseball and Softball does not limit participation in its activities on the basis of disability, race, creed, color, national origin, gender, sexual preference or religious preference.

Sport Parent Code of Conduct

We, the _____ Little League, have implemented the following Sport Parent Code of Conduct for the important message it holds about the proper role of parents in supporting their child in sports. Parents should read, understand and sign this form prior to their children participating in our league.

Any parent guilty of improper conduct at any game or practice will be asked to leave the sports facility and be suspended from the following game. Repeat violations may cause a multiple game suspension, or the season forfeiture of the privilege of attending all games.

Preamble

The essential elements of character-building and ethics in sports are embodied in the concept of sportsmanship and six core principles:

- Trustworthiness,
- Respect,
- Responsibility,
- Fairness,
- Caring, and
- Good Citizenship.

The highest potential of sports is achieved when competition reflects these "six pillars of character."

I therefore agree:

1. I will not force my child to participate in sports.
2. I will remember that children participate to have fun and that the game is for youth, not adults.
3. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
4. I will learn the rules of the game and the policies of the league.
5. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or other sporting event.
6. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.
7. I will not encourage any behaviors or practices that would endanger the health and well being of the athletes.
8. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
9. I will demand that my child treat other players, coaches, officials and spectators with respect regardless of race, creed, color, sex or ability.
10. I will teach my child that doing one's best is more important than winning, so that my child will never feel defeated by the outcome of a game or his/her performance.
11. I will praise my child for competing fairly and trying hard, and make my child feel like a winner every time.
12. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
13. I will emphasize skill development and practices and how they benefit my child over winning. I will also de-emphasize games and competition in the lower age groups.
14. I will promote the emotional and physical well-being of the athletes ahead of any personal desire I may have for my child to win.
15. I will respect the officials and their authority during games and will never question, discuss, or confront coaches at the game field, and will take time to speak with coaches at an agreed upon time and place.
16. I will demand a sports environment for my child that is free from drugs, tobacco, and alcohol and I will refrain from their use at all sports events.
17. I will refrain from coaching my child or other players during games and practices, unless I am one of the official coaches of the team.

Parent/Guardian Signature

Volunteer Code of Conduct



Must Understand and Comply with Code

(The following is an example of a Volunteer Code of Conduct Contract which Little Leagues may emulate.)

The _____ Little League Board of Directors has mandated the following Code of Conduct. All coaches and managers will read this Code of Conduct and sign in the space provided below, acknowledging that he or she understands and agrees to comply with the Code of Conduct. Tear the signature sheet on the dotted line and mail to _____, Safety Officer.

_____ Little League Code of Conduct:

No board member, manager, coach, player or spectator shall, at any time:

- ◆ Lay a hand upon, push, shove, strike, or threaten to strike an official.
- ◆ Be guilty of heaping personal verbal or physical abuse upon any official for any real or imaginary belief of a wrong decision or judgment.
- ◆ Be guilty of an objectionable demonstration of dissent at an official's decision by throwing of gloves, helmets, hats, bats, balls, or any other forceful unsportsman-like action.
- ◆ Be guilty of using unnecessarily rough tactics in the play of a game against the body of an opposing player.
- ◆ Be guilty of a physical attack upon any board member, official manager, coach, player or spectator.
- ◆ Be guilty of the use of profane, obscene or vulgar language in any manner at any time.
- ◆ Appear on the field of play, stands, or anywhere on the Little League complex while in an intoxicated state. Intoxicated will be defined as an odor or behavior issue.
- ◆ Be guilty of gambling upon any play or outcome of any game with anyone at any time.
- ◆ Smoke while in the stands or on the playing field or in any dugout. Smoking will only be permitted in designated areas which will be 20 feet from any spectator stands or dugouts.
- ◆ Be guilty of publicly discussing with spectators in a derogatory or abusive manner any play, decision or a personal opinion on any players during the game.
- ◆ As a manager or coach, be guilty of mingling with or fraternizing with spectators during the course of the game.
- ◆ Speak disrespectfully to any manager, coach, official or representative of the league.
- ◆ Be guilty of tampering or manipulating any league rosters, schedules, draft positions or selections, official score books, rankings, financial records or procedures.
- ◆ Challenge an umpire's authority. The umpires shall have the authority and discretion during a game to penalize the offender according to the infraction up to and including expulsion from the game.

The Board of Directors will review all infractions of the Code of Conduct. Depending on the seriousness or frequency, the board may assess additional disciplinary action up to and including expulsion from the league.

I have read the _____ Little League Code of Conduct and promise to adhere to its rules and regulations.

Print name of Manager

Team name and division

Signature of Manager

Date

Coach #1

Coach #2

Keeping Them Safe

SAFETY CODE – Dedicated to Injury Prevention

Responsibility for Safety procedures should be that of an adult member of the _____ Little League.

Arrangements should be made in advance of all games and practices for emergency medical services.

Managers, coaches and umpires should have training in first-aid. First-aid kits are issued to each team manager.

No games or practices should be held when weather or field conditions are bad, particularly with lightning.

Play area should be inspected frequently for holes, damage, stones, glass and other foreign objects.

All team equipment should be stored within the team dugout, or behind screens, and not within the area defined by the umpires as "in play".

Only players, managers, coaches, and umpires are permitted on the playing field or in the dugout during games and practice sessions.

Responsibility for keeping bats and loose equipment off the field of play should be that of a player assigned for this purpose or the team's manager and coaches.

During practice and games, all players should be alert and watching the batter on each pitch.

During warm-up drills players should be spaced so that no one is endangered by wild throws or missed catches.

All pre-game warm-ups should be performed within the confines of the playing field and not within areas that are frequented by, and thus endanger spectators (i.e., playing catch, pepper, swinging bats, etc.)

Equipment should be inspected regularly for the condition of the equipment as well as for proper fit.

Batters must wear Little League approved protective helmets during batting practice and games.

Catcher must wear catcher's helmet, mask, throat guard, long model chest protector, shin guards and protective cup with athletic supporter at all times (males) for all practices and games. NO EXCEPTIONS. Managers should encourage all male players to wear protective cups and supporters for practices and games.

Except when runner is returning to a base, head-first slides are **not** permitted.

During sliding practice, bases should not be strapped down or anchored.

At no time should "horse play" be permitted on the playing field.

Parents of players who wear glasses should be encouraged to provide "safety glasses."

Player must not wear watches, rings, pins or metallic items during games and practices.

The Catcher must wear catcher's helmet and mask with a throat guard in warming up pitchers. This applies between innings and in the bullpen during a game and also during practices.

Managers and Coaches may NOT warm up pitchers before or during a game.

On-deck batters are not permitted (except in Junior/Senior/Big League Divisions).

All managers are required to attend _____ Little League-sponsored managers clinic and all coaches are invited as well.

Our _____ Little League runs background checks on all of the managers, coaches and other applicable volunteer applicants.

Coaches Code of Conduct

CODE OF CONDUCT – Coaches are Role Models

"Our Little League is in the process of putting together a newsletter for the coaches stating Coaches Code of Conduct. I thought in the past in one of the ASAP newsletters I saw one but I cannot find it. Our local league is putting a newsletter together on this and it would help if Little League already had some information on this and additional ideas for a list to be handed out and signed by the Managers and Coaches as to their conduct during games and practices to help guide them."

George Colby

Easton, Conn., Little League, District 2

Editor's Note: Here is a Code of Conduct that is used in many safety plans. On the next page (pg 8) is a Volunteer Code of Conduct that serves as a reminder of the important role coaches and managers have in the development of youth people. It stresses that sports should be about fun, physical exercise and character development, and not winning.

Speed Limit 5 mph in roadways and parking lots while attending any _____
Little League function. Watch for small children around parked cars.

No Alcohol allowed in any parking lot, field, or common areas within the _____
Little League complex.

No SMOKING or Tobacco products of any kind (including spit tobacco) allowed in any common areas within the _____
Little League complex.

No Playing in parking lots at any time.

No Playing on and around lawn/maintenance equipment.

No Profanity allowed in any parking lot, field, or common areas within the _____
Little League complex.

No Swinging Bats or throwing baseballs at any time within the walkways and common areas of the Little League complex.

No throwing balls against dugouts or against backstop.

No throwing rocks and no climbing fences.

Only a player on the field and at bat, may swing a bat (Ages 5 - 12).

Observe all posted signs. Players and spectators should be alert at all times for Foul Balls and Errant Throws.

During game, players must remain in the dugout area in an orderly fashion at all times.

After each game, each team must clean up trash in dugout and around stands.

All gates to the field must remain closed at all times. After players have entered or left the playing field, gates should be closed and secured.

No children under age of 16 are to be permitted in the Snack Bars.

Failure to comply with the above may result in expulsion from the _____
Little League field or complex.



Don't Swing It

...Until You're Up to the Plate!



(Photos from North Scott, Iowa, Little League)



Don't let this happen to you, or to a teammate.

REMEMBER:

Don't pick up your bat until you leave the dugout, to approach the plate.

RULE 1.08, Notes

"1. The on-deck position is not permitted in Tee Ball, Minor League or Little League (Majors) Division. 2. Only the first batter of each half-inning will be allowed outside the dugout between the half-innings in Tee Ball, Minor League or Little League (Majors) Division."

Coach, Please Let Players Catch!



REMEMBER:

Coaches and managers must not warm up pitchers. Let Players Catch.

RULE 3.09

"...Managers or coaches must not warm up a pitcher at home plate or in the bull pen or elsewhere at any time. They may, however, stand to observe a pitcher during warm-up in the bull pen."

What to do if someone is struck by lightning

- ▶ **Lightning victims do not carry an electrical charge, are safe to handle, and need immediate medical attention.**
- ▶ **Call for help.** Have someone call 9-1-1 or your local ambulance service. Medical attention is needed as quickly as possible.
- ▶ **Give first aid.** Cardiac arrest is the immediate cause of death in lightning fatalities. However, some deaths can be prevented if the victim receives the proper first aid immediately. Check the victim to see that they are breathing and have a pulse and continue to monitor the victim until help arrives. Begin CPR if necessary.
- ▶ **If possible, move the victim to a safer place.** An active thunderstorm is still dangerous. Don't let the rescuers become victims. Lightning CAN strike the same place twice.



asap@musco.com 7

STAY INFORMED

Listen to NOAA Weather Radio for the latest forecast and for any severe thunderstorm WATCHES or WARNINGS. Severe thunderstorms produce winds of 58 mph or greater, or hail 3/4 of an inch or larger in diameter.

A severe thunderstorm WATCH is issued when conditions are favorable for severe weather to develop.

A severe thunderstorm WARNING is issued when severe weather is imminent. National Weather Service personnel use information from weather radar, satellite, lightning detection, spotters, and other sources to issue these warnings.

**NOAA WEATHER RADIO IS
THE BEST WAY TO RECEIVE
FORECASTS AND WARNINGS
FROM THE NATIONAL
WEATHER SERVICE.**



Remember that all thunderstorms produce lightning and all lightning can be deadly to those outside.

Lightning Safety Awareness Week is the last full week of June. For additional information on lightning or lightning safety, visit NOAA's lightning safety web site:

<http://www.lightningsafety.noaa.gov>

or contact us at

**National Weather Service
P.O. Box 1208
Gray, Maine 04039**

GYX 0301 (August 2003) - Revised

Coach's and Sports Official's Guide to Lightning Safety...



LIGHTNING... the underrated killer!

A SAFETY GUIDE

**U.S. DEPARTMENT OF COMMERCE
NATIONAL OCEANIC AND
ATMOSPHERIC ADMINISTRATION**

**NATIONAL WEATHER
SERVICE
Gray, Maine**



This safety guide has been prepared to help coaches and sports officials recognize the dangers of lightning and take appropriate safety precautions.

LIGHTNING KILLS Play It Safe !

Each year in the United States, more than four hundred people are struck by lightning. On average, about 70 people are killed and many others suffer permanent neurological disabilities. Most of these tragedies can be avoided if proper precautions are taken. When thunderstorms threaten, coaches and sports officials must not let the desire to start or complete an athletic activity hinder their judgment when the safety of participants and spectators is in jeopardy.

It is important for coaches and officials to know some basic facts about lightning and its dangers

- ▶ **All thunderstorms produce lightning and are dangerous.** In an average year, lightning kills more people in the U.S. than either tornadoes or hurricanes
- ▶ **Lightning often strikes outside the area of heavy rain and may strike as far as 10 miles from any rainfall.** Many deaths from lightning occur ahead of storms because people wait too long before seeking shelter, or after storms because people return outside too soon.
- ▶ **If you hear thunder, you are in danger.** Anytime thunder is heard, the thunderstorm is close enough to pose an immediate lightning threat to your location.
- ▶ **Lightning leaves many victims with permanent disabilities.** While only a small percentage of lightning strike victims die, many survivors must learn to live with very serious, life-long disabilities.

To avoid exposing athletes and spectators to the risk of lightning take the following precautions

- ▶ **Postpone activities if thunderstorms are imminent.** Prior to an event, check the latest forecast and, when necessary, postpone activities early to avoid being caught in a dangerous situation. Stormy weather can endanger the lives of participants, staff, and spectators.
- ▶ **Plan ahead.** Have a lightning safety plan. Know where people will go for safety, and know how much time it will take for them to get there. Have specific guidelines for suspending the event or activity so that everyone has time to reach safety before the threat becomes significant. Follow the plan without exception.
- ▶ **Keep an eye on the sky.** Pay attention to weather clues that may warn of imminent danger. Look for darkening skies, flashes of lightning, or increasing wind, which may be signs of an approaching thunderstorm.
- ▶ **Listen for thunder.** If you hear thunder, immediately suspend your event and instruct everyone to get to a safe place. Substantial buildings provide the best protection. Once inside, stay off corded phones, and stay away from any wiring or plumbing. Avoid sheds, small or open shelters, dugouts, bleachers, or grandstands. If a sturdy building is not nearby, a hard-topped metal vehicle with the windows closed will offer good protection, but avoid touching any metal.

- ▶ **Avoid open areas.** Stay away from trees, towers, and utility poles. Lightning tends to strike the taller objects.
 - ▶ **Stay away from metal bleachers, backstops and fences.** Lightning can travel long distances through metal.
 - ▶ **Do not resume activities until 30 minutes after the last thunder was heard.**
 - ▶ **As a further safety measure, officials at outdoor events may want to have a tone-alert NOAA Weather Radio.** The radio will allow you to monitor any short-term forecasts for changing weather conditions, and the tone-alert feature can automatically alert you in case a severe thunderstorm watch or warning is issued. To find your nearest NOAA weather radio transmitter, go to <http://www.nws.noaa.gov/nwrl> and click on "Station Listing and Coverage."
- If you feel your hair stand on end (indicating lightning is about to strike)*

- ▶ **Crouch down on the balls of your feet, put your hands over your ears, and bend your head down.** Make yourself as small a target as possible and minimize your contact with the ground.
- ▶ **Do not lie flat on the ground.**



NOAA



**WHEN IT'S HOT,
DRINK BEFORE
YOU'RE THIRSTY.**

© 1996 Little League Baseball® and Musco Lighting, Inc.

Drinking Guidelines For Hot Day Activities

Before: Drink 8 oz. immediately before exercise

During: Drink at least 4 oz. every 20 minutes

After: Drink 16 oz. for every pound of weight lost

Dehydration signs: Fatigue, flushed skin, light-headed

What to do: Stop exercising, get out of sun, drink

Severe signs: Muscle spasms, clumsiness, delirium

Asthma Emergency Signs

Seek Emergency Care If A Child Experiences Any Of The Following:

- + Child's wheezing or coughing does not improve after taking medicine (15-20 minutes for most asthma medications)
- + Child's chest or neck is pulling in while struggling to breathe
- + Child has trouble walking or talking
- + Child stops playing and cannot start again
- + Child's fingernails and/or lips turn blue or gray
- + Skin between child's ribs sucks in when breathing

Asthma is different for every person.

The "Asthma Emergency Signs" above represent general emergency situations as per the National Asthma Education and Prevention Program 1997 Expert Panel Report.

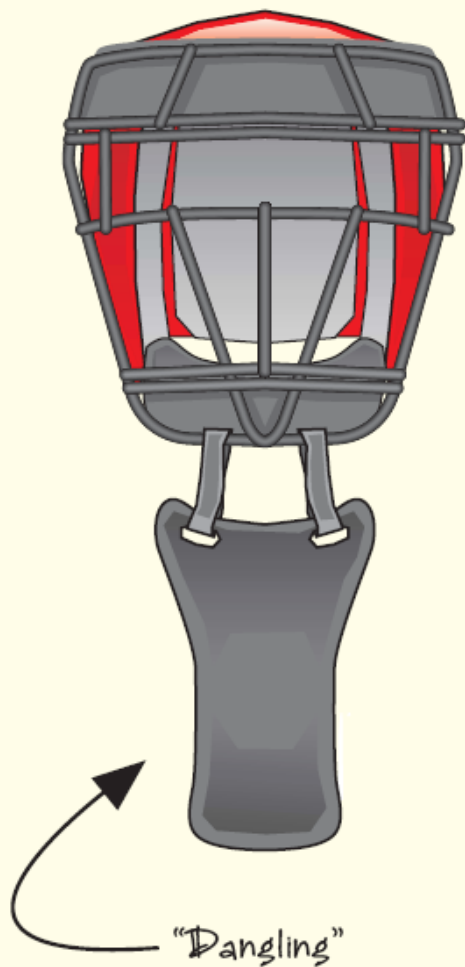
If you are at all uncertain of what to do in case of a breathing emergency...

Call 9-1-1 and the child's parent/guardian!

Michigan Asthma Steering Committee of the Michigan Department of Community Health

DANGER

**FOUL BALL
AREA**



Make Sure They Are Safe!

REMEMBER:

Catchers must wear helmets during warm-ups and infield/outfield practice.

RULE 1.17

"...All catchers must wear a mask, 'dangling' type throat protector and catcher's helmet during infield/outfield practice, pitcher warm-up and games."

First Aid Clinics

Requirement 6

"Thanks for getting back to me in a timely fashion. The outline would be great!!! I think I will have had the clinic by the time the next newsletter comes out. As far as format and instructors, I am all set. One of the local firefighters is also an EMT. He did the clinic last year. It was a HUGE success. Stoughton Little League has been around for nearly 50 years and we have never had a safety plan. It is amazing how we survived without it! Kudos to Williamsport and Musco Lighting for ASAP's success. I should be able to formulate a clinic with whatever outline you send."

Thank You,
Paul McKeen
Stoughton, MA
District 8

First, you should know Little League is phasing out the Emergency Management Training Program. However, even without the Emergency Management Training Program, you can put together a quality first aid training class to meet the requirements of first aid training for your coaches and managers. You don't have to follow the specifics of any set program, just get the PRICES – Protection, Rest, Ice, Compression, Elevation, and Support (or RICE or PRICE, whatever you use) – idea into participants' heads and talk about the specifics of first aid and injury prevention for specific baseball/softball injuries.

Start with basic terminology (contusion, laceration, etc.), and give the most up-to-date techniques for preventing sports injuries. Help attendees understand and differentiate between mild, moderate and severe injuries and the appropriate actions to take in each category. Teach appropriate first aid techniques for the injuries they will encounter.

Basic issues with baseball/softball would be:

- Contusions
- Muscle pulls and strains

- Over-use injuries
- Sprains
- Fractures
- Injuries to small joints
- Facial injuries
- Injuries to teeth
- Eye injuries
- Insect bites and stings
- Heat illness
- Triage and Emergency Management

Help design an emergency plan for your league when severe injuries occur, and tell the managers/coaches what their role is in that plan:

- Make sure managers/coaches stop all play to protect the player from further injury, as well as those not being closely monitored due to the focus on the injured player.
- Check player's breathing, pulse and alertness to immediately judge the seriousness of the injury:
 - If necessary, send someone to call 9-1-1 or get an ambulance or EMS.
 - Call the player's parents
 - Send someone to nearest intersection to direct emergency services to your location
 - Review the Medical Release form for any important information/warnings about medical conditions the player may have
- Evaluate the injury:
 - Can player be moved off field?
 - If not, clear area around player and begin examination;
 - If so, move player to sideline for closer examination;
 - Determine if player can return to play or needs first aid.
- Give the appropriate first aid for the injury.
- Turn over care to professionals when they arrive and help as directed.
- If parents are not available, go with player to treatment center with ambulance; turn over team

to authorized coach.

- If emergency medical treatment isn't required, urge player and parents to see a doctor for a proper diagnosis and treatment plan.
- Record the injury on an injury report.
- Follow up with the player until injury is healed and player can return to play.
- Get medical release prior to allowing player to return, if formal treatment was required.

You should have medical professionals available either on-site or at most a phone call away — as well as a method to reach them, by cell phone or phone at the field — for severe or life-threatening injuries.

And finally, help the coaches/managers to understand specific techniques to determine whether an injured player is ready to practice and play again; in some cases this may require a doctor's release. The evaluation process involves determining whether injuries are mild, moderate or severe, and should address what to do in each case. The evaluation includes classifying injuries using symptoms and signs, with appropriate looking, listening and careful feeling and, if appropriate, moving of the injured part.

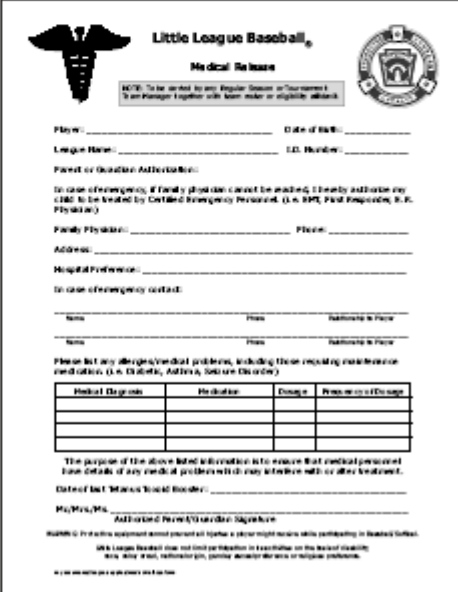
In evaluating fresh injuries, remember the three types of motion:

- Active motion – Player is able to move the part themselves,
- Active assistive motion – Player is able to move with a little help from you; watch for warning signs like the player telling you it hurts to move), and
- Passive motion – the player's injured part is moved by someone else; be especially cautious with passive motion that you do not make the injury worse.

Look for disability (the player can't use injured part); this is the most serious injury. If a player sprains his ankle, but can still limp around, it may be mild or moderate; if he can't get up, it is probably severe. Look for swelling, the

continued on page 3

Medical Release Form



Little League Baseball, Inc.
Medical Release

NOTE: To be signed by any Regular Season or Tournament Player Manager together with parent/guardian or eligible athlete.

Player: _____ Date of Birth: _____
League Name: _____ U.S. Number: _____

Parent or Guardian Authorization:

In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e. EMT, Paramedics, N.E. Physicians).

Family Physician: _____ Phone: _____
Address: _____
Hospital/Preference: _____

In case of emergency contact:

Name _____ Phone _____ Address/In Home _____
Name _____ Phone _____ Address/In Home _____

Please list any allergies/medical problems, including those requiring maintenance medications (i.e. Diabetes, Asthma, Seizure Disorder):

Medical Diagnosis	Medication	Dosage	Frequency of Usage

The purpose of the above listed information is to ensure that medical personnel have details of any medical problems which may interfere with or alter treatment.

Detected Insect Infestation (Vector Control): _____

Player's Signature _____
Authorized Parent/Guardian Signature _____

WARNING: If medical equipment cannot be placed on together in order to get medical while participating in baseball softball, Little League Baseball does not limit participation in baseball softball on the medical equipment. While using medical equipment, please do not use equipment in baseball softball.

It is not recommended to use medical equipment in baseball softball.

Whether regular season or tournament games or practices, your managers need to carry all their players' Medical Releases. While just as critical for teams in tournament play, the forms are just as important during the regular season.

Most hospitals will not treat a player who does not have a life-threatening injury without one. Imagine if your manager has to accompany a player with a broken leg to the hospital because the parents weren't at the game or practice. Without a Medical Release it's likely to be a long wait with a suffering player as the manager tries frantically to reach them to approve medical treatment.

Make sure your league has all players' Medical Releases, and the manager carries the team's forms with him or her everywhere. Then if a parent isn't at the field when an accident happens, the only call that will really matter is to 9-1-1.

First Aid Clinics Outline continued from page 2

more immediate and large the swelling, the more serious the injury, because swelling on outside means bleeding on inside. Also, a noticeable deformity means a serious injury. If the body part doesn't look the way it did before the accident, something's wrong. Consider unconsciousness or any eye injury as a serious situation, in the category of severe injuries, until you are assured otherwise by a medical professional.

Use the PRICES guide for treating injuries:

P – Protection

R – Rest

I – Ice

C – Compression

E – Elevation

S – Support

In conclusion, ask for managers/coaches to consider how to prevent injuries:

- Pre-participation health screenings (at least through a health questionnaire/medical release form asking for health concerns and medications);
- Proper maintenance of playing site (game and practice facilities);
- Pay close attention to playing conditions (heat and humidity as well as severe weather);
- Make sure players know basics of good nutrition (especially water replacement on hot days);
- Proper athletic conditioning (stretching, strengthening and endurance, as well as agility and coordination drills);
- Avoid over use (pay special attention to activities outside of Little League, to allow rest to avoid over-use injuries);
- Consistent and proper use of all protective equipment;
- Close coach supervision and

organization of warm-ups, practices and games;

- Careful compliance with all Little League rules, especially those having to do with safety.

This summarizes 62 pages into just a few hundred words, so you're going to want to elaborate on all the proper techniques in dealing with the different injury types and how to treat them effectively, as well as what NOT to do in any given circumstances. And remember, if anyone is ever in doubt to the nature or seriousness of an injury, they should NOT attempt treatment; a health care professional should be consulted immediately.

Finally, remind all managers and coaches to carefully evaluate all injuries and ensure the child does not require professional care. It's not worth risking a child's health just to continue the game.

asap@musco.com 3

First Aid Kits: What goes in them?

Requirement 12

"Hello, I need a list of what to put in a team first aid kit as well as the big first aid kits kept at the fields. I have a sponsor willing to fill this need. I just need to give them a list of what we need and how many."

Thanks,
Marc Paladino
(via email)

A team's first aid kit should contain ice in bags; these will be used almost anytime you have an injury to help reduce the pain and potential swelling. If using chemical cold packs, be cautious using around the face in case of leaks. Also, bandages, both large and small, gauze, some kind of dressing material like an Ace wrap or elastic wrap to hold gauze in place, or athletic tape. You should also provide water or a cleanser (antiseptic wipes, etc.) to clean abrasions or cuts. Check local expectations for first aid kits, as some states do not allow these cleansers other than at home or by health care professionals.

Also, don't forget latex or rubber gloves and some kind of small bag to properly dispose of blood and blood-soiled items like wipes or towelettes; blood-borne pathogens should be an important part of your safety training, so people do not put their health and future safety at risk dealing with unknown risks.

Finally, each team should have some kind of emergency telephone (mobile or land-line) to call an ambulance as well as a map or written directions to the area medical facilities anyone evacuated by medical professionals would be taken to. In an emergency, people need all the help they can get. Check the November/December 2003 ASAP News for some examples of that kind of information.

NOTE: Individual leagues decide what they need in a first aid kit. These give a good idea of fully-stocked kits. Items any kit should contain: A good supply of ice, drinking water, and personal items

or medications; emergency phone numbers; coins for pay phones; and directions and/or a map to/from emergency medical facilities.

ALSO: Keep a list of original supplies in your first aid kit, so it can be stocked and replenished! If managers or coaches use any first aid supplies, replace them before the next time the team meets.

Here are three good examples of a well-stocked first aid kit:

LLB's Emergency Management and Training Program

Little League's EMTP manual recommends your first aid kit include:

- Ice bags
 - Plastic bags of crushed ice
- Elastic bandages
 - 3, 4 and 6 inch widths
- Sterile dressings
 - 3 by 3 inch individual gauze
 - 2 to 3, 5 by 9 inch pads
 - Telfa or non-stick dressings
 - Eye patches
- Adhesive bandages
 - 3/4, 1 and 2 inch widths
- Bandages
 - Triangular shape and in rolls
- Adhesive tape
 - 1/2, 1 and 1 1/2 inch widths
- Eye shields
- Small flashlight
- Scissors
- Antiseptic soap
- Splints
 - Inflatable, cardboard or wooden, for arm and leg (large enough for your largest player)
- Petroleum jelly
- Safety pins
- First aid manual
- Towels
- Blanket
- Small pocket notebooks and pencils
- Water for drinking and plenty of paper cups. (Water and paper cups can also do double duty in some first aid applications.)

Fyrst USA Sport Medical Kits

A new first aid kit, available both in a team size and a league size, is offered by Fyrst USA. It was developed specifically for sports injuries. A unique feature: resupplies can be ordered by phone and to you in 5-7 days. Call 800/782-1355 or go to www.fyrstusa.com to order.

- 1 Reusable ice bag: 9 inches
 - 4 Instant cold packs: 6 by 10 inches
 - 1 Blister Kit
 - 20 Bandages: 1- by 3-inches
 - 6 Large bandages: 2 by 4 1/2 inches
 - 1 Elastic wrap
 - 1 Scissors
 - 20 Antimicrobial skin wipes
 - 10 Blood-off cloth towelettes
 - 20 Latex gloves
 - 1 Antiseptic hand cleaner: 4 ounces
 - 2 Rolls of athletic tape
 - 1 Roll of pre-wrap
 - 3 Sport wound care kits
- FYRST USA now carries the SAVE-A-TOOTH Preservation System (with ADA Seal of Acceptance)

Little League First Aid Kit

- The first aid kit produced by Johnson & Johnson, is available through the equipment and supplies catalog.
- Bandages — sheer and flexible
 - Non-stick pads — assorted sizes
 - Soft-Gauze bandages
 - Oval eye pads
 - Triangular bandage
 - Hypo-allergenic first aid tape in dispenser
 - 2-inch elastic bandage
 - Antiseptic wipes
 - First aid cream
 - Instant cold pack
 - Tylenol® extra-strength caplets
 - Scissors
 - Tweezers
 - First aid guide
 - Contents card
 - Disposable gloves

Suggestions for Warm-up Drills



Heel Cord Stretches

Lean against a wall. Reach one leg behind you. Keep the knee straight, heel on the ground, and toes pointed forward. Slightly bend the leg that's closer to the wall. Lean forward. You should feel the stretch along the back of your calf. Repeat with other leg.



Head and Neck Circles

Make a circle with your head, going around first in one direction five times. Then reverse and make five circles in the opposite direction.



Low Back Stretches

Lie on your back, bring one knee up, and pull the knee slowly toward your chest. Hold and repeat three times. Switch legs and repeat.



Shoulder Stretches #1

Stand or sit, holding your throwing arm at the wrist with your other hand. Put your arm over your head and pull gently, feeling your upper arm against your head. You should feel the stretch inside your shoulder.



Shoulder Stretches #2

Stand or sit, holding onto the elbow of your throwing arm with your other hand. Gently pull your throwing arm across your chest. You should feel the stretch inside your shoulder, especially at the back.



Shoulder Stretches #3

Stand or sit with your pitching arm out to the side and your elbow bent. Move your arm back until you feel the stretch in the front of your shoulder.



Thigh Stretches #1

Sit on the ground. Stretch both legs out in front of you. Reach forward, touching your toes. Eventually, you want to lean forward far enough to put your head on your knees. You should feel the stretch along the backs of your legs.

Thigh Stretches #2

Sit on the ground with one leg stretched out in front of you. Bend the other knee and put your foot behind you. Lean backwards. You should feel the stretch along the front of your thigh.



Michele Smith — Oly

This summer's Olympics are putting the spotlight on the world's best athletes in Athens. But these top-flight athletes all know that performance is determined by preparation before ever stepping on the field.



Michele Smith, two-time Gold Medal winner with the USA Softball team, follows some of the best training regimens and shares that knowledge.

"It is just as important to take care of your body off the field as on it," Michele said. "If you're in good condition, you have better reactions to hit the ball faster and further."

Being in shape is just good sense for playing your best. But did you know recent studies also show that athletes that are in good physical condition experience fewer injuries than those who aren't?

Keys to conditioning:

- Fitness conditioning
- Weight conditioning
- Pliometrics
- Agilities drills
- Core strength training

But Michele notes you should not get too serious too early with conditioning for the younger players. Most kids 5-8 years old are getting all the exercise they need to build their muscles to play by playing, and don't need conditioning workouts.

Graduate the amount and intensity of workouts for the age of the participants. Again, just developing good, moderate training habits with the players will help them as they grow.

Fitness conditioning

For fitness training, Michele stresses fundamental exercises that everyone can do like jogging, biking, aerobics and anything that gets the cardio-vascular system pumping blood. Sustaining elevated heart and lung functions helps the body prepare for hard

exercise, like games, and increases the body's ability to function at this increased activity level for longer periods. Fitness training also is beneficial for weight management, for more sedentary players.

Weight conditioning

Weight training should be undertaken only for those 12 years of age or older, as younger bodies are still growing and developing. Placing too much stress on growth plates and other fragile areas through weight training can cause developmental injuries.

For the older athlete, weight training offers increased lean body mass for higher metabolism and healthier, stronger muscles. All major muscle groups should be worked: chest, arms, shoulders, back and legs.

Examples:

- Chest — bench press, flies
- Arms — biceps curls, triceps extensions
- Shoulders — military press, dips, shrugs
- Back — rows, pull-downs
- Legs — squats, leg curls, leg extensions

Pliometrics

This is explosive training to increase the player's bounding abilities, and overall speed and energy. While many weight programs train the muscles for slow, strong movement, plyometrics trains the muscles to have faster, explosive force, especially important in the pitching motion.

Examples:

- Single leg bounds — hopping up and down on one leg
- Standing broad jumps — jump forward
- Lateral jumps — jump to the sides
- Vertical jumps — jump straight up
- Jump-tucks — jump up and pull knees to chest

Agilities training

These are important to strengthening connective muscles, those around ankles and knees especially. Agility drills help develop "fast twitch" muscles, which allow changes in direction, quick hands, and also "builds body awareness in spatial

mpic Training Ideas

relationship," Michele explained, meaning the player understands better where they are on the field and where to move to reach the ball or tag a base.

Examples are foot drills like running a dual line of tires, doing the karaoke step (cross-over step running sideways), as well as hand drills for catching and tossing the ball quickly.

Core strength training

"The core (abdominals and back) is important for body strength in playing ball since players push off the ground in throwing, fielding, running and especially hitting and pitching," said Michele. "The player is transferring their strength and movement from the upper body to the lower body and vice versa in all these movements."

Good basic exercises for the core are: sit-ups, crunches and leg elevations, and "super-mans" or hyper-extensions for the back (reverse sit-ups).

"If you're in good condition, you're going to be better able to play late in the game," Michele stressed. "Or when you hit that deep triple, you won't gas going around second and get thrown out."

The seasons of conditioning:

- Off-season: Have them hit the training and/or weight room 3 days a week, combined with cardio-vascular workouts more extensively to build strength and endurance. Do the core training workout every day, and combine the plyometrics workout with weight training for older athletes.
- Pre-season: Getting ready — workout off field two times a week. Michele points out that if you are practicing with your team three days a week, you will want to have the players do some aerobic activity two additional days, to build endurance.
- In season: The team is playing more, so you want them to stay consistent and maintain their fitness level, so exercising one to two times a week is sufficient.

"It is just as important to take care of your body off the field as on it," – Michele Smith.

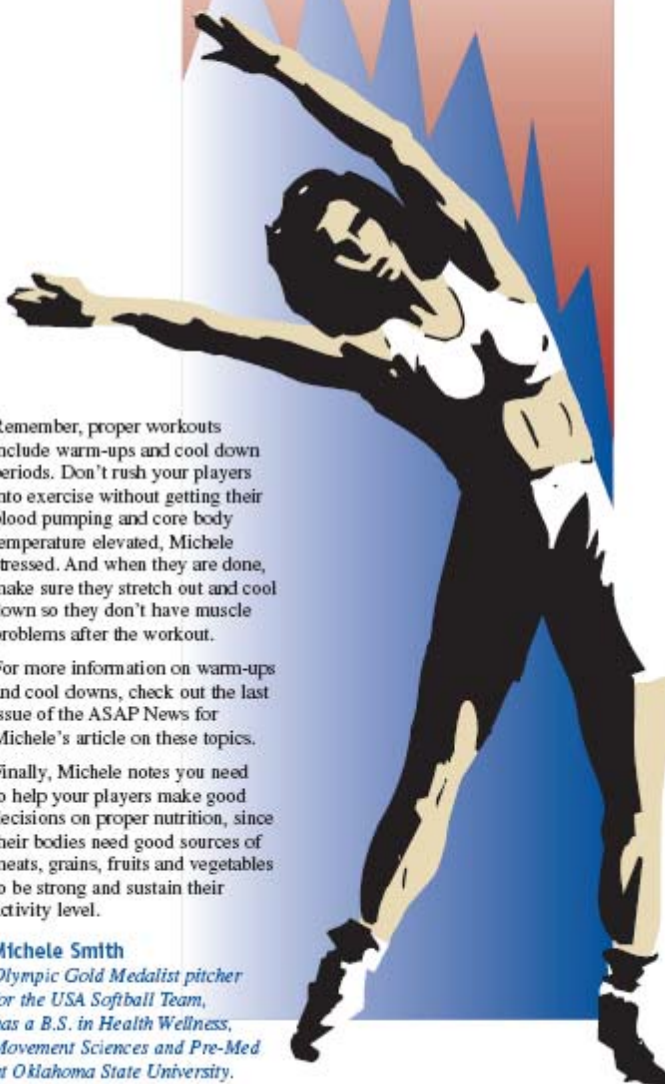
Remember, proper workouts include warm-ups and cool down periods. Don't rush your players into exercise without getting their blood pumping and core body temperature elevated, Michele stressed. And when they are done, make sure they stretch out and cool down so they don't have muscle problems after the workout.

For more information on warm-ups and cool downs, check out the last issue of the ASAP News for Michele's article on these topics.

Finally, Michele notes you need to help your players make good decisions on proper nutrition, since their bodies need good sources of meats, grains, fruits and vegetables to be strong and sustain their activity level.

Michele Smith

Olympic Gold Medalist pitcher for the USA Softball Team, has a B.S. in Health Wellness, Movement Sciences and Pre-Med at Oklahoma State University.



asap@musco.com 5

Stretching with Michele Smith

Two-time USA Softball Olympic Gold-Medalist

Children are naturally flexible, with young muscles still growing and developing, so your coaches may not think stretching is very important. But take it from two-time USA Softball Olympic Gold-Medalist Michele Smith, a proper pre- and post-workout routine can help care for the muscles that allow the players to take the field.

Dynamic Warm-Up

"I encourage coaches to begin any practice or game with a dynamic warm-up," Michele stated. For younger players, 10 minutes total of blood-pumping, body-moving activity can help raise the body's core temperature and loosen up muscles for the practice or game. Older players may need 15 minutes of warm-up. These are not static stretching exercises, but active dynamic warm-ups.

Start by having players run from foul pole to foul pole, then do some agility exercises:

- High knees (short jog, lift knees high),
- Butt kicks (short jog, try to kick feet backwards up toward bottom),
- Karaoke run (crossover steps laterally),

- Jumping jacks (standard),
- Arm windmills (forward and reverse),
- Neck circles (left & right, full rotation).

"The goal is to work on all the body parts: trunk, arms, legs and neck," Michele said. "Muscles stretch more easily if the body is warmed up properly before you stretch."



If muscles are still tight after the dynamic warm-up, then do some specific stretching for the area. Pitchers especially, but all players need to really work on their shoulder muscles, to make sure they are loose before throwing. And coaches should be reminded to have their players do stretching and warm-up exercises any time they have been idle for a period.

Michele pointed out that planning can help reduce the amount of stretching needed. Some coaches have players warm up their arms, do a few defensive drills, stand around waiting to hit and then start back throwing. Instead, start players hitting, then go to throwing drills, making sure they stretch out their arms before throwing. It saves

time stretching and saves injuries to arms. But warm up and stretch the trunk before hitting, too, or players risk injuries like groin pulls. Ask Mike Piazza of the New York Mets how easy it is to overcome a pulled groin.

Then Cool Down

After a practice or game, don't just send your kids home. Michele noted that muscles need to be worked a little to get new oxygen in, to remove the waste by-products of exercising. "Have players run a lap around the field, then sit in a circle and stretch muscles to get fresh blood in them, and help strengthen them."

She suggests arm windmills, neck circles and hurdler's stretches for the quads and glutes (thighs and bottom). Twisting exercises that stretch the side muscles and back are also good. Here's one: Sit on the ground, placing the foot of a bent leg on the opposite side of an outstretched leg's knee, and twist your torso across the upright knee. Then switch legs and twist the other way.

"A good cool down will help cool the muscles and slow the heart rate," Michele said. "It's important not to over-stretch in the cool down phase," she noted, since the muscles are being relaxed. If any sore spots are found during stretching, apply ice.

Michele said warm ups are a good time for players to visualize what they will be doing: hitting, pitching, throwing out base runners, etc. Cool downs are a time to reflect on the practice on what went well, and what may need improvement. But above all, these tips can keep players playing, and not sidelined with muscle injuries.

"If you're injured, you can't play the sport you love," Michele pointed out. "We need to warm up and cool down to prevent injuries. Young kids are so flexible, they don't realize they can pull muscles. So for younger players, this is as much about instilling good routines for the players for later life."



HAVE YOU:

- ✓ **Walked field for debris/foreign objects**
- ✓ **Inspected helmets, bats, catchers' gear**
- ✓ **Made sure a First Aid kit is available**
- ✓ **Checked conditions of fences, backstops, bases and warning track**
- ✓ **Made sure a working telephone is available**
- ✓ **Held a warm-up drill**

Umpire Guidelines

North Issaquah, Washington, Little League

Before the Game — Meet at home plate

- Introduce plate and base umpires, managers/coaches
- Receive official lineup cards from each team
- Discuss any local playing rules (time limit, playing boundaries, etc.)
- Discuss the strike zone
- Discuss unsportsmanlike conduct by the players
- Discuss the innings pitched by a pitcher rule
- Clarify calling the game due to weather or darkness
- Inspect playing field for unsafe conditions
- Discuss legal pitching motions or balks, if needed
- Discuss no head-first slides, no on-deck circle rules
- Get two game balls from home team
- Be sure players are not wearing any jewelry
- Be sure players are in uniform (shirts in, hats on)
- Inspect equipment for damage and to meet regulations
- Ensure that games start promptly

During the Game — Umpires and Coaches

- Encourage coaches to help speed play by having catchers and players on the bench prepared and ready to take the field with two outs
- Make sure catchers are wearing the proper safety equipment
- Continually monitor the field for safety and playability
- Pitchers warming up in foul territory must have a spotter and catcher with full equipment
- Keep game moving — one minute or eight pitches to warm up the pitcher between innings or in case of mid-inning replacement
- Make calls loud and clear, signalling each properly
- Umpires should be in position to make the call
- No protesting of any judgment calls by the umpire
- Managers are responsible for keeping their fans and players on their best behavior
- Encourage everyone to think “Safety First!”

Volunteers Must Wash Hands

HOW



WHEN

Wash your hands before you prepare food or as often as needed.

Wash after you:

- ▶ use the toilet
- ▶ touch uncooked meat, poultry, fish or eggs or other potentially hazardous foods
- ▶ interrupt working with food (such as answering the phone, opening a door or drawer)
- ▶ eat, smoke or chew gum
- ▶ touch soiled plates, utensils or equipment
- ▶ take out trash
- ▶ touch your nose, mouth, or any part of your body
- ▶ sneeze or cough

Do not touch ready-to-eat foods with your bare hands.

Use gloves, tongs, deli tissue or other serving utensils.
Remove all jewelry, nail polish or false nails unless you wear gloves.

Wear gloves.

when you have a cut or sore on your hand
when you can't remove your jewelry

If you wear gloves:

- ▶ wash your hands before you put on new gloves

Change them:

- ▶ as often as you wash your hands
- ▶ when they are torn or soiled

Developed by UMass Extension Nutrition Education Program with support from U.S. Food & Drug Administration in cooperation with the IMA Partnership for Food Safety Education, United States Department of Agriculture Cooperating. UMass Extension provides equal opportunity in programs and employment.



Make league's barbecues safe

Keep food safe from bacteria, check grill for problems

Barbecue Safety

Safely transporting food, precooking and preventing cross-contamination are the major ingredients of barbecue safety.

Chill Foods to Stop Bacteria

When transporting food, either from the grocery store or to a picnic area, keep it cool to minimize bacterial growth. Pack meat, poultry, salads and other perishables in an insulated cooler with ice.

Marinade is a savory acidic sauce in which a food is soaked to tenderize and add flavor. Always marinate meats in the refrigerator, not on the counter. Reserve a portion of the marinade that hasn't touched raw meat for a dip or basting sauce. Don't reuse marinade used on raw meat or poultry unless it has been boiled first to destroy any bacteria.

Take Care With Meat Items

Meats and poultry may be precooked on the stove, microwave or oven to reduce grilling times. If foods are partially precooked, place immediately on the grill to finish cooking. Never partially cook meats and poultry and wait to finish cooking later. If meats and poultry are completely cooked ahead of time and chilled, they may be reheated on the grill to provide a barbecued flavor.

If take-out foods such as fried chicken or barbecued beef will be reheated on the grill, and they won't be reheated/eaten within two hours of purchase, buy them ahead of time and chill thoroughly.

Keep Foods Separate, Clean Up Often

Don't use the same platter and utensils for raw and cooked meats and poultry. Be sure there are plenty of clean utensils and platters to allow separate handling of raw foods and cooked foods. Pack clean, soapy sponges, clothes and wet towelettes for cleaning surfaces and hands. There is an antibacterial soap on the market now that does not need water and would be ideal to carry on a picnic for cleaning platters and utensils.

Cook Foods Thoroughly

Cook everything thoroughly. Rare or medium meat or poultry can harbor harmful bacteria. Fish should always be

"Can you give us some advice on barbecue safety? Every Saturday we have a barbecue during the ball games. Are there guidelines for sanitizing utensils between each use, maintaining food (such as hamburger beef and tomatoes) to ensure we keep PHFs out of the temperature danger zones, using and storing propane tanks, and any other barbecue safety info?"

Douglas Polgar, safety officer
Sierra Little League,
Sunnyvale, Calif.

fully cooked. For greatest safety, ground meat should reach 160° F on a meat thermometer, and poultry should reach 180° F for doneness. Since grilled food often browns very fast on the outside, make a "sample cut" to visually check for doneness. The juices should run clear and meat should not be pink, although meat color is not accurate (check Page 3).

Based on current research findings, eating moderate amounts of grilled meats, fish, and poultry, cooked thoroughly without charring, does not pose a health problem.

Resources:

- USDA Consumer Information Publication. 1996. "Barbecue Food Safety".
- Food Safety and Inspection Service, USDA Food Safety Publications. 1996.
<http://www.fsis.usda.gov/OA/pubs/barbecue.pdf>
- USDA Meat and Poultry Hotline: 1-800-535-4555
Material written by Mary Abgrall and Scottie Misner, May 1998. Part of Food Safety Tips, College of Agriculture, University of Arizona. Document located at <http://ag.arizona.edu/pubs/health/foodsafety/az1069.html>

Grilling Safety

According to the Insurance Information Institute, backyard barbecues result in more than 2,000 fires and even three deaths each year. Most problems happen when you fire up a grill that hasn't been used for several months.

Gas grill: check it over thoroughly before using it. Check for leaks, cracking or brittleness, and clean out the tubes that lead into the burner — look for blockages from spiders or food waste.

Make sure the grill is at least 10 feet from any buildings or trees. And never leave the grill unattended.

Charcoal grill: use starter fluid sparingly and never put it on an open flame. And it's always best to have a fire extinguisher nearby... it can stop a fire before it spreads.

Also, be careful if you pick up gas canisters... never leave them in a hot car. The heat could cause some of the gas to leak out.

(Also, see the April, 2000 ASAP News for more food tips.)

USDA encourages use of thermometers

WASHINGTON, D.C. — The United States Department of Agriculture launched a new food safety education campaign in Spring 2000 to promote the use of food thermometers. The campaign theme is: "It's Safe to Bite When the Temperature is Right!"

"This national food safety education campaign is designed to encourage consumers to use a food thermometer when cooking meat, poultry, and egg products. Using a food thermometer is the only way to tell when food has reached a high enough temperature to destroy harmful pathogens that may be in the raw food," said Under Secretary for Food Safety Catherine Woteki.

"Color is misleading and should not be relied on to indicate a safely cooked product. Meat or poultry color can fool even the most experienced cook. USDA research shows that one out of every four hamburgers turns brown in the middle before it is safely cooked," Woteki said.

USDA introduced its new messenger, "Thermy™," to promote the use of food thermometers in the home.



Food Safety and Inspection Service, USDA

"Consumers will soon see 'Thermy' at many retail stores and in broadcast messages as a reminder to purchase and use a food thermometer when cooking,"

Woteki said.

Tom Billy, USDA's Food Safety and Inspection Service administrator, said, "I am concerned that... only a small percent of consumers use (food thermometers) often when cooking small foods like hamburgers, pork chops, or chicken breasts."

Food thermometers help ensure food is cooked to a safe temperature, prevent overcooking, and take the guesswork out of preparing a safe meal. "Food thermometers should be used every time you prepare hamburgers, poultry, roasts, chops, egg casseroles, meat loaves, and combination dishes," says Billy.

Billy said that there are a wide variety of reliable food thermometers available in grocery and kitchen stores, and that many are inexpensive. "They are high-tech and easy to use. Their cost is minimal when considering your family's safety. This is especially true for people who are at high risk, including young children, pregnant women, people over 65, and those with chronic illnesses."



Prepare for dangerous storms



In baseball, three strikes and you're out. With lightning, one strike is all it takes.

When considering lightning, safety officers should think in terms of preparation, rather than prevention. Lightning and dangerous storms cannot be stopped. At any given time, more than 2000 thunderstorms are in progress around the world. Strikes to earth are random, and total protection from lightning impossible. However, leagues can reduce the risk of catastrophe by educating personnel and developing an evacuation plan.

The National Lightning Safety Institute lists six steps to safety for outdoor athletic events:

1. A responsible person should be designated to monitor weather conditions. Local weather forecasts should be monitored 24 hours prior to events. A portable weather radio is recommended.
2. Suspension and resumption of activities should be planned in advance. Safe evacuation sites include metal vehicles with windows up, enclosed buildings, or if necessary, low ground.

3. Unsafe shelter areas include all outdoor metallic objects like flag poles, fences, light poles, and metal bleachers. Avoid trees, water, open fields, and using the telephone.
4. Lightning's distance from you can be referenced by noting the time from its flash to the bang of associated thunder. For each five second count, lightning is one mile away, i.e. 10 seconds = 2 miles. Since the distance from one strike to the next can be up to 1.5 miles, the NLSI suggests you activate your lightning evacuation plan *no later* than a count of 15.
5. If you feel your hair standing on end or hear "crackling noises," you are in lightning's electric field. Immediately remove metal objects and objects with metal pieces like baseball caps, place your feet together, duck your head, and crouch like a catcher with hands on knees.
6. People struck by lightning do not carry an electrical charge and are safe to handle. Apply CPR immediately if qualified, and get emergency help.



Food Safety and Inspection Service, USDA

CONCESSION STAND FOOD SAFETY

Clean - Wash Hands and Surfaces Often!

- WASH HANDS WITH HOT SOAPY WATER BEFORE HANDLING FOOD.
- WASH CUTTING BOARDS, DISHES, UTENSILS AND COUNTERS WITH HOT SOAPY WATER AFTER PREPARING EACH FOOD ITEM.
- ALL WIPING CLOTHS MUST BE STORED IN A SANITIZING SOLUTION MADE UP OF BLEACH AND WATER AT APPROXIMATELY 1 CAPFUL OF BLEACH PER 1 GALLON OF WATER.
- A SUPPLY OF DISPOSABLE TOWELS AND HAND SOAP MUST BE AVAILABLE.

Separate - Don't Contaminate

- USE A CLEAN PLATE FOR COOKED FOODS. NEVER PLACE COOKED FOOD ON A PLATE THAT PREVIOUSLY HELD RAW FOOD.
- ALL FOOD ITEMS SHOULD BE COVERED WHENEVER POSSIBLE.
- STORE FOOD AT LEAST SIX INCHES OFF THE FLOOR TO MINIMIZE THE CONTAMINATION OF FOOD AND ALLOW PROPER FLOOR CLEANING.
- WASH HANDS FREQUENTLY!

Cook



Cook Food To Proper Temperatures

- WHEN COOKING IN A MICROWAVE OVEN, COVER FOOD, STIR AND ROTATE FOR EVEN COOKING.
- KEEP HOT FOODS HOT, AND COLD FOODS COLD! HOT FOODS MUST BE KEPT AT 140°F OR ABOVE, AND COLD FOODS MUST BE KEPT AT 41°F OR BELOW.
- USE A CLEAN METAL STEMMED THERMOMETER TO MEASURE THE INTERNAL TEMPERATURE OF COOKED FOOD TO MAKE SURE IT IS THOROUGHLY DONE.

Chill - Refrigerate Promptly

- REFRIGERATE FOODS QUICKLY. COLD TEMPERATURES KEEP HARMFUL BACTERIA FROM GROWING AND MULTIPLYING.
- REFRIGERATOR TEMPERATURE MUST BE SET AT 40°F OR LOWER, AND FREEZER AND 0°F OR LOWER. CHECK THESE TEMPERATURES OFTEN.
- THAW FOOD IN THE REFRIGERATOR.
- DIVIDE LARGE AMOUNTS OF FOOD INTO SMALL, SHALLOW CONTAINERS FOR QUICK COOLING.
- DON'T OVER-PACK THE REFRIGERATOR.
- KEEP THE FREEZER AND REFRIGERATOR CLOSED WHEN NOT IN USE. THIS KEEPS THE COLD AIR INSIDE.



Think PASS!

- 1. Pull Ring**
- 2. Aim at Base of Fire**
- 3. Squeeze Lever**
- 4. Sweep Side to Side**

Good Procedures to Implement

Checklist for Managers, Coaches, and Umpires

Here are some good procedures for your league to implement and follow on several required areas of the safety plan. Requirements 7, 10, 12 and 13 are all included in the checklists below. These come from several leagues whose volunteers are providing safety leadership through their efforts to increase awareness and help volunteers do the right thing at the right time.

A. Safe Playing Areas

Regular safety inspections of all fields, (practice and game), structures, and dugouts, is the best way to eliminate conditions that cause accidents. Managers, coaches, and umpires should routinely check playing area for:

1. Holes, damage, rough or uneven spots, slippery areas, and long grass
2. Glass, rocks, foreign objects
3. Damage to screens or fences, including holes, sharp edges, or loose edges
4. Unsafe conditions around backstop, pitcher's mound, or warning track
5. Proper attire by the catcher at all times, including in the bull pens and in between innings

B. Safe Equipment

All equipment shall be inspected before each use. Regular safety inspection of equipment is essential. Managers, coaches, and umpires should:

1. Be sure all equipment is LL approved
2. Inspect all bats, helmets, and other equipment on a regular basis. Dispose of unsafe equipment properly.

3. Keep loose equipment stored properly
4. Have all players remove all personal jewelry
5. Parents should be encouraged to provide safety glasses for players who wear glasses
6. Repair or replace defective equipment

C. Safe Procedures

Managers and coaches must:

1. Have all players' medical release forms with you at every practice and game
2. Have a first aid kit with you all practices and games
3. Have access to a telephone in case of emergencies
4. Know where the closest emergency shelter is in case of severe weather
5. Ensure warm-up procedures have been completed by all players
6. Stress the importance of paying attention, no "horse playing allowed"
7. Instruct the players on proper fundamentals of the game to ensure safe participation
8. Each practice should have at least 2 coaches in case of an emergency

D. Weather Conditions

Before the Storm

1. Check the weather forecast before leaving for a game or practice
2. Watch for signs of an approaching storm
3. Postpone outdoor activities if storms are imminent

Approaching Thunderstorm

1. Take caution when you hear thunder. If you hear thunder, you are close enough to get struck by lightning. During a game, the umpire will clear the field in the event of an approaching storm.

2. Move to a safe environment immediately. Do not go under a tree or stay in the dugout.
3. If lightening is occurring and there is not sturdy shelter near, get inside a hard top automobile and keep the window up.
4. Stay away from water, metal pipes, and telephone lines.
5. Unplug appliances not necessary for obtaining weather information. Avoid the telephone except for emergency use only.
6. Turn off air conditioners.

If caught outdoors & no shelter exists

1. Find a low spot away from trees, fences, light poles, and flagpoles. Make sure the site you pick is not prone to flooding.
2. If in the woods, take cover under shorter trees.
3. If you feel your skin begin to tingle or your hair feels like it's standing on end, squat low to the ground, balancing on the balls of your feet. Make yourself the smallest possible target, tuck your head between your legs, and minimize your contact with the ground.

What to do if someone is struck by lightning

1. The person who has been struck will carry no electrical charge; therefore, they are safe to touch.
2. Call 9-1-1 as soon as possible for help.
3. Check for burns to the body.
4. Give first aid as needed.
5. If breathing and/or heartbeat have stopped, perform CPR until EMS arrives.
6. Contact the league Safety Officer or President ASAP.

Accident Notification Form

"I called today and asked about what form I fill out for an injured kid. You are going to send me one in the mail and I was going to look on-line for what I need. Is this the Incident Tracking Form? When I called they said something about an Accident Notification Form and I can't seem to find it on the website. Can you help?"

John Voyles
Safety Officer
Oviedo, Fla., Little League

Here is an example of the Accident Notification Form you need to use in cases of players injured who do or may require medical attention. It should be filled out by a league official and signed by the league president and sent to Little League International Headquarters. Look for it on-line in the League Officials section under the "Insurance" header on the left-hand side (<http://www.littleleague.org/common/insurance/index.asp?cid=5>).

The Incident Tracking Form (on the next page) is for your league to use in all accidents – those requiring medical attention and those not. Doing this tracking will help your league determine if additional training is needed for specifics like sliding (if several players in a division are hurting their legs or ankles, but not enough to go to the hospital); or if players are getting hurt on a specific field from bad hops, the field may need dragging or other work, etc.

"Do you have examples of injury or accident processes that can be distributed to league parents? I'm looking for ideas for a document to be included in our parent handbook that explains the process in layman's terms."

Pat Gallagher
Safety Officer
Capitola Little League, Soquel, Calif.

That's a great question. Here's an example of what we have in the sample safety manual. Attached is a tracking form for your coaches to fill out as

well (on next page); but if an accident occurs, you should fill out and submit the Accident Notification Form.

Accident Reporting Procedures What to Report

An incident that causes any player, manager, coach, umpire, or volunteer to receive medical treatment and/or first aid must be reported to the league safety officer within 48 hours of incident. This includes even passive treatments such as the evaluation and diagnosis of the extent of the injury or periods of rest.

When to Report

All such incidents described above must be reported to the Safety Officer within 48 hours of the incident. The Safety Officer for 2004 is:

_____ who can
be reached (day) at _____
or (evening) at _____

How to Make the Report

Reporting incidents can come in a variety of forms. Most typically, they are telephone conversations. At a minimum, the following information must be given:

- Name and phone number of the person involved
- Date, time, and location of the incident
- As detailed a description of the incident as possible
- Preliminary estimation of the extent of any injuries
- Name and phone number of the person reporting the incident.

Safety Officer's Responsibilities
Within 48 hours of receiving the incident

report, the Safety Officer will contact the injured party or the party's parents and:

- (1) Verify the information received;
- (2) Obtain any other information deemed necessary;
- (3) Check on the status of the injured party; and
- (4) In the event that the injured party required other medical treatment (i.e., Emergency Room visit, doctor's visit, etc.) will advise the parent or guardian of the _____ Little League's insurance coverages and the provisions for submitting any claims.

If the extent of the injuries are more than minor in nature, the Safety Officer shall periodically call the injured party to (1) check on the status of any injuries, and (2) to check if any other assistance is necessary in areas such as submission of insurance forms, etc. until such time as the incident is considered "closed" (i.e., no further claims are expected and/or the individual is participating in the league again).

LITTLE LEAGUE, BASEBALL AND SOFTBALL ACCIDENT NOTIFICATION FORM INSTRUCTIONS For claims occurring after January 1, 2004		Form Completed Page 1 Little League, San Francisco 1000 California Street, Suite 1000 San Francisco, CA 94108 Phone: 415.397.1074 Fax: 415.397.1081	
1. This form must be completed by parents (or parent of minor) and a league official and forwarded to Little League International within 48 hours after the accident. A photocopy of this form should be made and kept by the claimant/parent. Initial medical treatment must be rendered at once (24 hours) after the accident.			
2. Submit with this form: a copy of the medical report, a copy of the police report, a copy of the insurance claim, and a copy of the insurance policy. If the accident occurred on a field, submit a copy of the field report.			
3. When other insurance is present, parents or claimant must forward a copy of the Explanation of Benefits or Indemnity Statement for each claim directly to Little League International, and if the parent has not received the full amount of the claim, submit a copy of the Explanation of Benefits or Indemnity Statement to Little League International.			
4. A policy provision benefits for eligible medical expenses incurred within 90 days of the accident, subject to certain conditions and limitations.			
5. A claimant must submit all medical bills and receipts for treatment received after 90 days. Refer to insurance benefits provided to the league president, or contact Little League International within the year of injury.			
League Name _____		League ID _____	
Name of injured Person/Parent _____		Date of Birth (MM/DD/YYYY) _____ Sex _____	
Name of parent/Coach, if different from above _____		Phone (Home) (Day) (Area Code) _____ (Cell) _____	
Address of Claimant _____		Address of Parent/Coach, if different _____	
The Little League Member Accident Policy provides benefits to members for other insurance programs, subject to a 90-day deductible per injury. Other insurance programs include: health, dental, vision, life, and accident insurance. Other insurance programs include: health, dental, vision, life, and accident insurance. Other insurance programs include: health, dental, vision, life, and accident insurance.			
Date of accident _____		Time of accident _____	
Location of accident _____		Type of injury _____	
Describe briefly how accident happened, including playing position at the time of accident.			
Check all applicable responses to each column.			
<input type="checkbox"/> BASEBALL <input type="checkbox"/> SOFTBALL <input type="checkbox"/> PLAYERS <input type="checkbox"/> MANAGER <input type="checkbox"/> COACH <input type="checkbox"/> UMPIRE <input type="checkbox"/> VOLUNTEER <input type="checkbox"/> OTHER	<input type="checkbox"/> HEAD/NECK <input type="checkbox"/> CHEST/ABDOMEN <input type="checkbox"/> ARM/LEG <input type="checkbox"/> EYE/EAR <input type="checkbox"/> SKIN <input type="checkbox"/> OTHER	<input type="checkbox"/> FRACTURE <input type="checkbox"/> DISLOCATION <input type="checkbox"/> LACERATION <input type="checkbox"/> BURN <input type="checkbox"/> CONCUSSION <input type="checkbox"/> OTHER	<input type="checkbox"/> MEDICAL REPORT <input type="checkbox"/> POLICE REPORT <input type="checkbox"/> INSURANCE CLAIM <input type="checkbox"/> INSURANCE POLICY <input type="checkbox"/> OTHER
I hereby certify that I have read the accident to all parties of this form and to the best of my knowledge and belief the information contained is complete and correct as stated above.			
I understand that it is a violation of the Little League rules to intentionally attempt to defraud or knowingly facilitate a fraud against an insurance company or to attempt to defraud or knowingly facilitate a fraud against an insurance company.			
I understand that any person who intentionally attempts to defraud or knowingly facilitate a fraud against an insurance company or to attempt to defraud or knowingly facilitate a fraud against an insurance company is subject to the Little League rules and may be suspended from the Little League.			
Signature of Parent/Coach (if different from above) _____			
Signature of League Official _____			

Activities/Reporting**A Safety Awareness Program's
Incident/Injury Tracking Report**

League Name: _____ League ID: ____ - ____ - ____ Incident Date: _____

Field Name/Location: _____ Incident Time: _____

Injured Person's Name: _____ Date of Birth: _____

Address: _____ Age: _____ Sex: ☐ Male ☐ Female

City: _____ State _____ ZIP: _____ Home Phone: () _____

Parent's Name (If Player): _____ Work Phone: () _____

Parents' Address (If Different): _____ City _____

Incident occurred while participating in:A.) ☐ Baseball ☐ Softball ☐ Challenger ☐ TADB.) ☐ Challenger ☐ T-Ball (5-8) ☐ Minor (7-12) ☐ Major (9-12) ☐ Junior (13-14)
☐ Senior (14-16) ☐ Big League (16-18)C.) ☐ Tryout ☐ Practice ☐ Game ☐ Tournament ☐ Special Event☐ Travel to ☐ Travel from ☐ Other (Describe): _____**Position/Role of person(s) involved in incident:**D.) ☐ Batter ☐ Baserunner ☐ Pitcher ☐ Catcher ☐ First Base ☐ Second☐ Third ☐ Short Stop ☐ Left Field ☐ Center Field ☐ Right Field ☐ Dugout☐ Umpire ☐ Coach/Manager ☐ Spectator ☐ Volunteer ☐ Other: _____

Type of injury: _____

Was first aid required? ☐ Yes ☐ No If yes, what: _____Was professional medical treatment required? ☐ Yes ☐ No If yes, what: _____

(If yes, the player must present a non-restrictive medical release prior to to being allowed in a game or practice.)

Type of incident and location:

A.) On Primary Playing Field

☐ Base Path: ☐ Running *or* ☐ Sliding☐ Hit by Ball: ☐ Pitched *or* ☐ Thrown *or* ☐ Batted☐ Collision with: ☐ Player *or* ☐ Structure☐ Grounds Defect☐ Other: _____

B.) Adjacent to Playing Field

☐ Seating Area☐ Parking Area

C.) Concession Area

☐ Volunteer Worker☐ Customer/Bystander

D.) Off Ball Field

☐ Travel:☐ Car *or* ☐ Bike *or*☐ Walking☐ League Activity☐ Other: _____

Please give a short description of incident: _____

Could this accident have been avoided? How: _____

This form is for Little League purposes only, to report safety hazards, unsafe practices and/or to contribute positive ideas in order to improve league safety. When an accident occurs, obtain as much information as possible. For all claims or injuries which could become claims, please fill out and turn in the official Little League Baseball Accident Notification Form available from your league president and send to Little League Headquarters in Williamsport (Attention: Dan Kirby, Risk Management Department). Also, provide your District Safety Officer with a copy for District files. All personal injuries should be reported to Williamsport as soon as possible.

Prepared By/Position: _____ Phone Number: () _____

Signature: _____ Date: _____

Use of Little League(r) Logos, Emblems and Marks

As stated in Regulation XVI of Little League's "Official Regulations and Playing Rules," use of the Official Emblem, "LL," "LLB" and/or words "Little League," "Little League Baseball," "Little Leaguer," "Senior League," "Big League," "Senior League Baseball," "Big League Baseball," "Challenger Division," etc., (registered under Federal Certificate in U.S. Patent Office), is granted to chartered leagues and cannot be extended by Local Leagues to any other organization for any purpose whatsoever. These marks are protected both by a special Act of Congress and registrations with the United States Patent and Trademark Office. All rights in and to any and all marks of Little League Baseball, Incorporated are reserved.

This means, that leagues may use these marks on stationery, league promotional items such as posters, banners, photographs and programs, as well as on trophies, certificates, awards and pins not meant for resale. For use of "Official Marks" on items meant for fundraisers, you must first contact the marketing and licensing department of Little League International by calling 570-326-1921.

Two versions of the logos are presented here. The .jpg files may be used for the World Wide Web and for Microsoft Office or similar applications. The .eps (or vector) files are meant for high-resolution printing such as banners and posters, and can be given directly to printers for production of these items on the league's behalf. Little League's official colors are Reflex Blue and Red 185.

Image files in both .eps and .jpg formats can be found in the "logos" directory on this CD. It may be necessary to use image software to adjust the size of these logos.

Click on the files below to open higher resolution .jpg versions. You may then "right-click" on the art to save it to your own computer. Alternately, you may access these files, as well as the .eps versions, through Windows Explorer. Open "Windows Explorer" or "My Computer," access your CD drive (for example, drive d:), click on the "logos" directory, and select the file you need for your project.

COMMUNICABLE DISEASE PROCEDURES

While risk of one athlete infecting another with HIV/AIDS during competition is close to non-existent, there is a remote risk that other blood born infectious diseases can be transmitted.

For example, Hepatitis B can be present in blood as well as in other body fluids.

Procedures for reducing the potential for transmission of these infectious agents should include, but not be limited to, the following:

1. The bleeding must be stopped, the open wound covered and if there is an excessive amount of blood on the uniform it must be changed before the athlete may participate.
2. Routine use of gloves or other precautions to prevent skin and mucous-membrane exposure when contact with blood or other body fluids is anticipated.
3. Immediately wash hands and other skin surfaces if contaminated (in contact) with blood or other body fluids. Wash hands immediately after removing gloves.
4. Clean all contaminated surfaces and equipment with an appropriate disinfectant before competition resumes.
5. Practice proper disposal procedures to prevent injuries caused by needles, scalpels and other sharp instruments or devices.
6. Although saliva has not been implicated in HIV transmission, to minimize the need

for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, or other ventilation devices should be available for use.

7. Athletic trainers/coaches with bleeding or oozing skin conditions should refrain from all direct athletic care until the condition resolves.

8. Contaminated towels should be properly disposed of/disinfected.

9. Follow acceptable guidelines in the immediate control of bleeding and when handling bloody dressings, mouthguards and other articles containing body fluids.

Additional information is available from your state high school association and from the National Federation TARGET program.

**EMOTIONAL SECURITY
AND
ATTITUDES IN CHILDREN**
www.littleleague.org
by
Dr. Luke LaPorta

An understanding of children is the most important component of the Little League® program. Adults working with youth should be constantly aware of emotional security and attitudes of children under their direction. Dr. LaPorta, of Liverpool, New York, is widely recognized as an authority in this field and was a recipient of the Athletic Director of the Year Award sponsored by the National Council of Secondary School Athletic Directors. He has been active in Little League for more than 40 years and served as the Chairman of the Little League International Board of Directors.

Little League Baseball does not limit participation in its activities on the basis of disability, race, creed, color, national origin, gender, sexual preference or religious preference. From the sum of the total experience, along with the physical and mental reactions to such experiences, the player begins to develop certain attitudes. These attitudes then manifest themselves in patterns of behavior, behavior that could prove to be acceptable or unacceptable. Thus, it is extremely important that the experiences arising out of Little League activity be healthy and stimulating. Furthermore, it is equally important that volunteer personnel recognize this fact and strive to help the youngster meet the challenges. It is within the province of responsibility of the volunteer to help the player to develop desirable attitudes.

1. Is an attempt made to point out the desirability of:
 - a. Fair play.
 - b. Playing without finding fault or making excuses about mistakes.
 - c. Listening to directions.

- d. Winning without bragging.
 - e. Recognizing certain standards of achievement.
 - f. Subscribing to the spirit of give and take.
2. Have you observed any progress on the part of the youngsters in your league concerning the following:
- a. They participate in practice and drills as you have planned them.
 - b. They accept the fact that there are some youngsters who have more or less skills than they do.
 - c. They have respect for other people's property.
 - d. They take care of equipment properly.
3. In working with the players, do you sense that:
- a. They are beginning to develop self-confidence.
 - b. They are showing signs of courage.
 - c. They are beginning to develop leadership qualities.
 - d. They are beginning to set standards for themselves.
4. In your observations, can you say that you have noticed improvement in the following areas:
- a. Learning to accept reversals without undue emotional upset.
 - b. Accepting and playing by the rules of the game.
 - c. Learning to develop self-control over personal feelings.
 - d. Widening their circle of friends.
5. Do you feel that the youngsters under your supervision recognize that:
- a. Working to improve skills leads to self-satisfaction and achievement.
 - b. Being a good follower in certain situations is as important as being a good leader.
 - c. Self-sacrifice for the good of the team is necessary.
 - d. There are occasions when one must accept certain responsibilities for others.



LITTLE LEAGUE® BASEBALL AND SOFTBALL ACCIDENT NOTIFICATION FORM INSTRUCTIONS

Send Completed Form To:
Little League® International
539 US Route 15 Hwy, PO Box 3485
Williamsport PA 17701-0485
Accident Claim Contact Numbers:
Phone: 570-327-1674

Accident & Health (U.S.)

1. This form must be completed by parents (if claimant is under 18 years of age) and a league official and forwarded to Little League Headquarters within 20 days after the accident. A photocopy of this form should be made and kept by the claimant/parent. Initial medical/dental treatment must be rendered within 30 days of the Little League accident.
2. Itemized bills including description of service, date of service, procedure and diagnosis codes for medical services/supplies and/or other documentation related to claim for benefits are to be provided within 90 days after the accident date. In no event shall such proof be furnished later than 12 months from the date the medical expense was incurred.
3. When other insurance is present, parents or claimant must forward copies of the Explanation of Benefits or Notice/Letter of Denial for each charge directly to Little League Headquarters, even if the charges do not exceed the deductible of the primary insurance program.
4. Policy provides benefits for eligible medical expenses incurred within 52 weeks of the accident, subject to Excess Coverage and Exclusion provisions of the plan.
5. Limited deferred medical/dental benefits may be available for necessary treatment incurred after 52 weeks. Refer to insurance brochure provided to the league president, or contact Little League Headquarters within the year of injury.
6. Accident Claim Form must be fully completed - including Social Security Number (SSN) - for processing.

League Name		League I.D.	
Name of Injured Person/Claimant		SSN	PART 1
Date of Birth (MM/DD/YY)		Age	Sex
Name of Parent/Guardian, if Claimant is a Minor		Home Phone (Inc. Area Code)	Bus. Phone (Inc. Area Code)
Address of Claimant		Address of Parent/Guardian, if different	

The Little League Master Accident Policy provides benefits in excess of benefits from other insurance programs subject to a \$50 deductible per injury. "Other insurance programs" include family's personal insurance, student insurance through a school or insurance through an employer for employees and family members. Please CHECK the appropriate boxes below. If YES, follow instruction 3 above.

Does the Insured Person/Parent/Guardian have any insurance through:

Employer Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	School Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No
Individual Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	Dental Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of Accident	Time of Accident	Type of Injury
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

Describe exactly how accident happened, including playing position at the time of accident:

Check all applicable responses in each column:

- | | | | | |
|---|--|---|---|---|
| <input type="checkbox"/> BASEBALL | <input type="checkbox"/> CHALLENGER (4-18) | <input type="checkbox"/> PLAYER | <input type="checkbox"/> TRYOUTS | <input type="checkbox"/> SPECIAL EVENT (NOT GAMES) |
| <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> T-BALL (4-7) | <input type="checkbox"/> MANAGER, COACH | <input type="checkbox"/> PRACTICE | <input type="checkbox"/> SCHEDULED GAME |
| <input type="checkbox"/> CHALLENGER | <input type="checkbox"/> MINOR (8-12) | <input type="checkbox"/> VOLUNTEER UMPIRE | <input type="checkbox"/> TRAVEL TO | <input type="checkbox"/> SPECIAL GAME(S) (Submit a copy of your approval from Little League Incorporated) |
| <input type="checkbox"/> TAD (2ND SEASON) | <input type="checkbox"/> LITTLE LEAGUE(9-12) | <input type="checkbox"/> PLAYER AGENT | <input type="checkbox"/> TRAVEL FROM | |
| | <input type="checkbox"/> INTERMEDIATE (89/10)(13-18) | <input type="checkbox"/> OFFICIAL SCOREKEEPER | <input type="checkbox"/> TOURNAMENT | |
| | <input type="checkbox"/> JUNIOR (12-14) | <input type="checkbox"/> SAFETY OFFICER | <input type="checkbox"/> OTHER (Describe) | |
| | <input type="checkbox"/> SENIOR (13-16) | <input type="checkbox"/> VOLUNTEER WORKER | | |
| | <input type="checkbox"/> BIG (14-18) | | | |

I hereby certify that I have read the answers to all parts of this form and to the best of my knowledge and belief the information contained is complete and correct as herein given.

I understand that it is a crime for any person to intentionally attempt to defraud or knowingly facilitate a fraud against an insurer by submitting an application or filing a claim containing a false or deceptive statement(s). See Remarks section on reverse side of form.

I hereby authorize any physician, hospital or other medically related facility, insurance company or other organization, institution or person that has any records or knowledge of me, and/or the above named claimant, or our health, to disclose, whenever requested to do so by Little League and/or National Union Fire Insurance Company of Pittsburgh, Pa. A photostatic copy of this authorization shall be considered as effective and valid as the original.

Date	Claimant/Parent/Guardian Signature (In a two parent household, both parents must sign this form.)
Date	Claimant/Parent/Guardian Signature

For Residents of California:

Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

For Residents of New York:

Any person who knowingly and with the intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

For Residents of Pennsylvania:

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

For Residents of All Other States:

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

PART 2 - LEAGUE STATEMENT (Other than Parent or Claimant)		
Name of League	Name of Injured Person/Claimant	League I.D. Number
Name of League Official		Position in League
Address of League Official		Telephone Numbers (Inc. Area Codes) Residence: () Business: () Fax: ()

Were you a witness to the accident? ☐ Yes ☐ No
Provide names and addresses of any known witnesses to the reported accident.

Check the boxes for all appropriate items below. At least one item in each column must be selected.

POSITION WHEN INJURED	INJURY	PART OF BODY	CAUSE OF INJURY
<input type="checkbox"/> 01 1ST	<input type="checkbox"/> 01 ABRASION	<input type="checkbox"/> 01 ABDOMEN	<input type="checkbox"/> 01 BATTED BALL
<input type="checkbox"/> 02 2ND	<input type="checkbox"/> 02 BITES	<input type="checkbox"/> 02 ANKLE	<input type="checkbox"/> 02 BATTING
<input type="checkbox"/> 03 3RD	<input type="checkbox"/> 03 CONCUSSION	<input type="checkbox"/> 03 ARM	<input type="checkbox"/> 03 CATCHING
<input type="checkbox"/> 04 BATTER	<input type="checkbox"/> 04 CONTUSION	<input type="checkbox"/> 04 BACK	<input type="checkbox"/> 04 COLLIDING
<input type="checkbox"/> 05 BENCH	<input type="checkbox"/> 05 DENTAL	<input type="checkbox"/> 05 CHEST	<input type="checkbox"/> 05 COLLIDING WITH FENCE
<input type="checkbox"/> 06 BULLPEN	<input type="checkbox"/> 06 DISLOCATION	<input type="checkbox"/> 06 EAR	<input type="checkbox"/> 06 FALLING
<input type="checkbox"/> 07 CATCHER	<input type="checkbox"/> 07 DISMEMBERMENT	<input type="checkbox"/> 07 ELBOW	<input type="checkbox"/> 07 HIT BY BAT
<input type="checkbox"/> 08 COACH	<input type="checkbox"/> 08 EPIPHYSES	<input type="checkbox"/> 08 EYE	<input type="checkbox"/> 08 HORSEPLAY
<input type="checkbox"/> 09 COACHING BOX	<input type="checkbox"/> 09 FATALITY	<input type="checkbox"/> 09 FACE	<input type="checkbox"/> 09 PITCHED BALL
<input type="checkbox"/> 10 DUGOUT	<input type="checkbox"/> 10 FRACTURE	<input type="checkbox"/> 10 FATALITY	<input type="checkbox"/> 10 RUNNING
<input type="checkbox"/> 11 MANAGER	<input type="checkbox"/> 11 HEMATOMA	<input type="checkbox"/> 11 FOOT	<input type="checkbox"/> 11 SHARP OBJECT
<input type="checkbox"/> 12 ON DECK	<input type="checkbox"/> 12 HEMORRHAGE	<input type="checkbox"/> 12 HAND	<input type="checkbox"/> 12 SLIDING
<input type="checkbox"/> 13 OUTFIELD	<input type="checkbox"/> 13 LACERATION	<input type="checkbox"/> 13 HEAD	<input type="checkbox"/> 13 TAGGING
<input type="checkbox"/> 14 PITCHER	<input type="checkbox"/> 14 PUNCTURE	<input type="checkbox"/> 14 HIP	<input type="checkbox"/> 14 THROWING
<input type="checkbox"/> 15 RUNNER	<input type="checkbox"/> 15 RUPTURE	<input type="checkbox"/> 15 KNEE	<input type="checkbox"/> 15 THROWN BALL
<input type="checkbox"/> 16 SCOREKEEPER	<input type="checkbox"/> 16 SPRAIN	<input type="checkbox"/> 16 LEG	<input type="checkbox"/> 16 OTHER
<input type="checkbox"/> 17 SHORTSTOP	<input type="checkbox"/> 17 STROKE	<input type="checkbox"/> 17 LIPS	<input type="checkbox"/> 17 UNKNOWN
<input type="checkbox"/> 18 TO/FROM GAME	<input type="checkbox"/> 18 OTHER	<input type="checkbox"/> 18 MOUTH	
<input type="checkbox"/> 19 UMPIRE	<input type="checkbox"/> 19 UNKNOWN	<input type="checkbox"/> 19 NECK	
<input type="checkbox"/> 20 OTHER	<input type="checkbox"/> 20 PARALYSIS/ PARAPLEGIC	<input type="checkbox"/> 20 NOSE	
<input type="checkbox"/> 21 UNKNOWN		<input type="checkbox"/> 21 SHOULDER	
<input type="checkbox"/> 22 WARMING UP		<input type="checkbox"/> 22 SIDE	
		<input type="checkbox"/> 23 TEETH	
		<input type="checkbox"/> 24 TESTICLE	
		<input type="checkbox"/> 25 WRIST	
		<input type="checkbox"/> 26 UNKNOWN	
		<input type="checkbox"/> 27 FINGER	

Does your league use batting helmets with attached face guards? ☐ YES ☐ NO
If YES, are they ☐ Mandatory or ☐ Optional At what levels are they used?

I hereby certify that the above named claimant was injured while covered by the Little League Baseball Accident Insurance Policy at the time of the reported accident. I also certify that the information contained in the Claimant's Notification is true and correct as stated, to the best of my knowledge.

Date	League Official Signature
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Little League® Baseball & Softball

CLAIM FORM INSTRUCTIONS

WARNING — It is important that parents/guardians and players note that: *Protective equipment cannot prevent all injuries a player might receive while participating in baseball/softball.*

To expedite league personnel's reporting of injuries, we have prepared guidelines to use as a checklist in completing reports. It will save time -- and speed your payment of claims.

The National Union Fire Insurance Company of Pittsburgh, Pa. (NUFIC) Accident Master Policy acquired through Little League® contains an "Excess Coverage Provision" whereby all personal and/or group insurance shall be used first.

The Accident Claim Form must be fully completed, including a Social Security Number, for processing.

To help explain insurance coverage to parents/guardians refer to *What Parents Should Know* on the internet that should be reproduced on your league's letterhead and distributed to parents/guardians of all participants at registration time.

If injuries occur, initially it is necessary to determine whether claimant's parents/guardians or the claimant has other insurance such as group, employer, Blue Cross and Blue Shield, etc., which pays benefits. (This information should be obtained at the time of registration prior to tryouts.) If such coverage is provided, the claim must be filed first with the primary company under which the parent/guardian or claimant is insured.

When filing a claim, all medical costs should be fully itemized and forwarded to Little League International. If no other insurance is in effect, a letter from the parent/guardian or claimant's employer explaining the lack of group or employer insurance should accompany the claim form.

The NUFIC Accident Policy is acquired by leagues, not parents, and provides comprehensive coverage at an affordable cost. Accident coverage is underwritten by National Union Fire Insurance Company of Pittsburgh, a Pennsylvania Insurance company, with its principal place of business at 175 Water Street, 18th Floor, New York, NY 10038. It is currently authorized to transact business in all states and the District of Columbia. NAIC Number 19445. This is a brief description of the coverage available under the policy. The policy will contain limitations, exclusions, and termination provisions. Full details of the coverage are contained in the Policy. If there are any conflicts between this document and the Policy, the Policy shall govern.

The current insurance rates would not be possible without your help in stressing safety programs at the local level. The ASAP manual, **League Safety Officer Program Kit**, is recommended for use by your Safety Officer.

TREATMENT OF DENTAL INJURIES

Deferred Dental Treatment for claims or injuries occurring in 2002 and beyond: If the insured incurs injury to sound, natural teeth and necessary treatment requires that dental treatment for that injury must be postponed to a date more than 52 weeks after the date of the injury due to, but not limited to, the physiological changes occurring to an insured who is a growing child, we will pay the lesser of the maximum benefit of \$1,500.00 or the reasonable expense incurred for the deferred dental treatment. Reasonable expenses incurred for deferred dental treatment are only covered if they are incurred on or before the insured's 23rd birthday. Reasonable Expenses incurred for deferred root canal therapy are only covered if they are incurred within 104 weeks after the date the Injury is sustained.

CHECKLIST FOR PREPARING CLAIM FORM

1. Print or type all information.
2. Complete all portions of the claim form before mailing to our office.
3. Be sure to include league name and league ID number.

PART I - CLAIMANT, OR PARENT(S)/GUARDIAN(S), IF CLAIMANT IS A MINOR

1. The adult claimant or parent(s)/guardians(s) must sign this section, **if the claimant is a minor**.
2. Give the name and address of the injured person, along with the name and address of the parent(s)/guardian(s), if claimant is a minor.
3. Fill out all sections, including check marks in the appropriate boxes for all categories. **Do not leave any section blank. This will cause a delay in processing your claim and a copy of the claim form will be returned to you for completion.**
4. It is mandatory to forward information on other insurance. Without that information there will be a delay in processing your claim. If no insurance, written verification from each parent/spouse employer must be submitted.
5. Be certain all necessary papers are attached to the claim form. (See instruction 3.) Only itemized bills are acceptable.
6. On dental claims, it is necessary to submit charges to the major medical and dental insurance company of the claimant, or parent(s)/guardian(s) if claimant is a minor. "Accident-related treatment to whole, sound, natural teeth as a direct and independent result of an accident" must be stated on the form and bills. Please forward a copy of the insurance company's response to Little League International. Include the claimant's name, league ID, and year of the injury on the form.

PART II - LEAGUE STATEMENT

1. This section must be filled out, signed and dated by the **league official**.
2. Fill out all sections, including check marks in the appropriate boxes for all categories. **Do not leave any section blank. This will cause a delay in processing your claim and a copy of the claim form will be returned to you for completion.**

IMPORTANT: Notification of a claim should be filed with Little League International within 20 days of the incident for the current season.