

Bayshore Little League Safety Plan

Tampa, Florida
League I.D. # 309-06-03



Prepared by Brandon Kuhn, Safety Officer
January 22, 2020

Bayshore Little League Mission Statement

(Adopted February, 2006)

The purpose and objective of the Bayshore Little League shall be to impart "life lessons" in the children of the community the ideals and qualities of: good sportsmanship through:

- Teamwork, and discipline

- Honesty and loyalty

- Courage and respect for authority

so that they may be well adjusted, stronger, and happier children. To achieve this objective, the Bayshore Little League volunteers will provide a supervised program of competitive baseball and softball in which every athlete regardless of skill level:

- Is well coached

- Has fun playing the game

- Feels like an important part of the team regardless of performance

- Learns "life lessons" that have value beyond the playing field

- Learns the skills, tactics and strategies of the game and improves as a player

Table of Contents:

1. Safety Officer and Organization:	4
2. Safety Manual:	4
3. Emergency Phone Numbers and Contact Information:	4
4. Volunteer Application Form and Background Check:	5
5. Fundamental Training:	5
6. First-Aid Training:	5
7. Pre-Game Field Inspection:	6
8. Annual League Facility Survey:	6
9. Concession Stand Safety Procedures:	6
10. Equipment Inspection:	6
11. Accident Reporting:	6
12. First-Aid Kit:	6
13. Little League Rules:	7
14. Future Safety Goals:	7
APPENDIX:	8
Volunteer Application Form Application (4):	9
First Aid Training (6)	10
Dehydration and Heat Stroke (6)	13
Facility Survey	16
Concession Stand Safety Procedures (9):	18
Bayshore Little League Accident Reporting Form	21
Lightning Safety:	22

1. Safety Officer and Organization:

BSLL will have an active safety officer on file with Little League International at all times. The safety officer is a member of the Board of Directors.

Safety Officer for 2018-19: Brandon Kuhn - (813) 454-1510

- 👤 A portion (to be decided by the Board) of the BSLL annual budget will be directed towards improving safety within the league.

2. Safety Manual:

BSLL will publish the safety manual on our website at www.bsll.org and also distribute a hardcopy a safety manual to the following workers and volunteers:

- 👤 Each team will receive a copy of the safety plan for the coaches and managers.
- 👤 Concession workers.
- 👤 Facilities crew.
- 👤 A copy will be kept in a central location at the field house.
- 👤 A copy will be sent to Little League Headquarters and the DA.
 - ASAP Award Program
 - Little League International
 - PO Box 3485
 - Williamsport, PA 17701

3. Emergency Phone Numbers and Contact Information:

Life Threatening Emergency:	911
Tampa Police:	276-3200
Fire Department:	272-6600
Tampa General Hospital:	844-7000

Board of Directors – Board (also listed at www.bsll.org)

Feel free to contact any of our board members here.

A complete listing of board members is on the website. Key contacts are as follows:

President	Daniel Greco II	president@bsll.org
Treasurer	Mike Martino	treasurer@bsll.org
Registrar	Bill Bland	registrar@bsll.org
Safety Officer	Brandon Kuhn	safetyofficer@bsll.org
League Information Officer	John Ruth	leagueinformationofficer@bsll.org
Field Manager	Rod Patterson	fieldmanager@bsll.org
Sponsorship Chair	Christina Quintero	sponsorships@bsll.org
Concessions Chair	Harry Quintero	concessions@bsll.org
Picture Chair	RJ Haughey	pictures@bsll.org
Scheduling	Mike Martino	scheduling@bsll.org
Secretary	Wendy Martin	secretary@bsll.org




4. Volunteer Application Form and Background Check:

All managers, coaches, board members and any other persons, volunteers or hired workers, who provide regular services to BSLL and/or have repetitive access to or contact with players or teams, must fill out the official Little League Volunteer Application form as well as provide a government issued identification card for ID verification. A statewide sex offender search or a nationwide background check must be performed for all such persons. Currently use First Advantage through LLI (see appendix for form)









How Do I Become A Volunteer?

All volunteers are now required to get FDLE with national search background checks. The following link to begin background screening. <http://opportunities.averity.com/BayshoreLL>



Questions are directed to contact safetyofficer@bsll.org.

-  The league president will immediately be notified of any significant positive findings resulting from the search and appropriate action taken.
-  Anyone refusing to fill out the Volunteer Application is ineligible to participate at BSLL in any capacity.
-  The league president or safety officer will retain these confidential forms for the year of service.

5. Fundamental Training:

-  Fundamental training for baseball and softball will be required at the beginning of each season. This will usually occur within 2 weeks of opening day ceremonies but varies by year.
-  BSLL will provide fundamentals training at the beginning of the playing season. Fundamentals will be taught by high school, college or experienced league coaches and will include at a minimum proper warm-ups, hitting, sliding, fielding, pitching, and running safe practices and games.
-  At least one coach or manager from each team must attend.
-  Training qualifies the volunteer for three years.
-  All coaches must attend at least one training session within a three year period.
-  BSLL will document the date, location, who is required to attend, and the actual attendance.
-  For the Spring 2020 season, training was held at the Major fields during the month of February. The training was led by Robbie Shields, former professional player and the league's coaching coordinator. A manager or coach from each team is required to be present. Additionally, BSLL received secondary training from major league instructors at Steinbrenner Field from the New York Yankees professional stay during a coach's clinic held on February 1st.
-  Additionally George Carrol, a former catcher with the Toronto Blue Jays and approved volunteer and John Lannan, a former pitcher with the Washington Nationals and current board member lead pitching and catching clinics that assisted in training players and managers and coaches.

6. First-Aid Training:

-  First-aid training will be required at the beginning of each season. Due to local conditions, this will also include heat safety and lightning safety. (see appendix)
-  BSLL will provide first aid training at the beginning of the playing season.

- 👤 At least one coach or manager from each team must attend.
- 👤 Training qualifies the volunteer for three years.
- 👤 All coaches must attend at least one training session within a three year period.
- 👤 BSLL will document the date, location, and the actual attendance.
- 👤 Due to their training and education, it is not necessary for licensed medical doctors, licensed registered nurses, licensed practical nurses and paramedics to attend first aid training in order to meet this requirement.
- 👤 CPR training is highly recommended and is part of the league sponsored safety training.
- 👤 First Aid training was conducted on two separate days during the month of February in 2020 at Bayshore Little Leagues's field house. February 5th and February 6th. Mike Brooks, flmedic267@aol.com an EMT and certified CPR and concussion instructor conducted the classes. The training included CPR and the use of an AED device, which has been installed in the Major field house and one other location near the other fields. A manager or coach of each team is required to be present for the training, which will also include discussion of BSLL safety procedures, location of First Aid kits, lightning and heat related safety issues, emergency contact procedures and related issues.

7. Pre-Game Field Inspection:

Both BSLL manager will physically walk and inspect the playing field and player areas before use. Particular attention should be focused on hazards including rocks, glass, holes, etc. This responsibility may be assigned to a each coach for practical reasons on a single game basis. Any recommended repairs should be communicated to the league president.

- 👤 **It is the responsibility of BOTH BSLL manager's to walk the field prior to use.**

8. Annual League Facility Survey:

BSLL has completed and update our 201 Facility Survey online.

9. Concession Stand Safety Procedures:

A written protocol for safe food handling, food preparation, and procedures will be obtained by BSLL. Since this service is outsourced at BSLL fields, it will be obtained directly from the concession vendor. (see appendix)

10. Equipment Inspection:

Equipment must be inspected before each use by coaches and umpires. Any equipment that is not safe to use must be destroyed and discarded to make it unusable for potential future use by others. Coaches should notify BSLL to obtain new equipment.

11. Accident Reporting:



BSLL will document injuries, accidents, and "near misses" to search for methods to improve safety within our league. Coaches and managers must fill out a tracking form within 24 hours of a significant injury, accident or "near miss" and give to the league safety officer. This information will be evaluated to avoid future injuries. (see appendix)

12. First-Aid Kit:

All teams must have a first aid kit in good working order immediately available for all practices and home and away games. All coaches are encouraged to obtain a kit of their own for emergency use. An additional kit will be kept at a central location in the field house.

13. Little League Rules:

BSLL will follow the rules of Little League International. At a minimum, each team will receive an official book of little league rules. Ideally, every coach and manger within the league will receive an official rule book.

-  The safety code is found on the last page of every Little League rulebook.
-  All Little League managers, coaches, volunteers, and parents will be encouraged to subscribe to ASAP News through the Little League website.

14. Future Safety Goals:

1. Recommend the use of protective cups, faceguards for softball, C-Flap face guards for batters.
2. Ensure compliance with bat restrictions in compliance with Little League approved bats.
3. Submit qualified safety plan registration form with ASAP plan.
4. Encourage adults to sign up for Little League E-News.

15. League Player Registration Data or Player Roster Data and Coach and Manager Data.

- League Player Registration Data or Player Roster Data and Coach and Manager Data has been submitted via the Little League Data Center at www.LittleLeague.org.

APPENDIX:

Volunteer Application Form Application (4):

Parents and adults are encouraged to Volunteer. Applications must be submitted online at www.bsll.org.

Background checks are mandatory for covered volunteers: <http://opportunities.avery.com/BayshoreLL>

The screenshot shows the Bayshore Little League website. The header features the 'BAYSHORE LITTLE LEAGUE' logo. The navigation menu includes 'HOME', 'ABOUT US', 'REGISTRATION INFO', and 'PARENT INFO'. The 'VOLUNTEER OPPORTUNITIES' section is highlighted. The main content area is titled 'BSLL NEEDS VOLUNTEERS' and contains the following text:

Why Should I Become a Volunteer?
Little League Baseball and Softball is an organization designed to build good citizens. It is a program of leadership, preparing today's youth to be tomorrow's leaders. Bayshore Little League relies on volunteers to help ensure that the organization remains structured and runs smoothly. Bayshore Little League is always looking for responsible and enthusiastic individuals to support and coordinate Little League events and activities. As a volunteer, you should have a keen interest in the safety, well-being, and overall development of children. By reading further, you will discover that the benefits of volunteering are endless. You will also gain a better understanding of why you should become involved, who volunteers are, what you can do, and how you can sign up.

Who Can Volunteer?
Anyone can apply to become a volunteer. Whatever talents or skills you have, we can use them! Any community member who wishes to become a volunteer may apply.

All parents of children involved in Bayshore Little League are strongly encouraged to volunteer. As a parent volunteer, you have the opportunity to spend quality time with your child in a safe, fun-filled environment. Volunteering allows your life and your child's life to intersect on common ground, with shared interests and goals.

How Do I Become A Volunteer?
Parents, take a minute to fill out the volunteer form while registering your child. All volunteers are now required to get FDLE with national search background checks. We have a new vendor and the process is much easier for everyone as it is self-service and all online. Please click the following link to begin: <http://opportunities.avery.com/BayshoreLL>.

If you have any questions please contact us at safety@bsll.org. Thank you for volunteering.

What Can I Volunteer To Do?
No experience is required to become a volunteer. Most of the volunteer opportunities require little or no training. Bayshore Little League will provide you with any necessary training (as well as support and encouragement), as they deem necessary. What you see during Little League games is a mere fraction of what you can do as a volunteer. You can volunteer to help in virtually any aspect of Little League Baseball or Softball!

We appreciate all of the efforts from the parents and the volunteers in making this a better Little League.

Sincerely,
Chris Capozzola - President, Bayshore Little League

The screenshot shows the 'My Volunteer Roles' page. The header includes a 'Logout' button and a 'Register Now!' button. The main content area displays the following text:

My Volunteer Roles

You haven't signed up to volunteer! Click the button to the right to get started.

Navigation links: « Back, FIND VOLUNTEER ROLES

The screenshot shows the registration form. The header includes a 'Logout' button and a 'Register Now!' button. The main content area displays the following form fields:

Registration Form Fields:

- Gender* (Select Gender)
- First Name*
- Last Name*
- Select the relationship to your participants: (Select the relationship to y...)
- Email Address* (Email is required)
- Username* (Username is required)
- Street*

First Aid Training (6)

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.

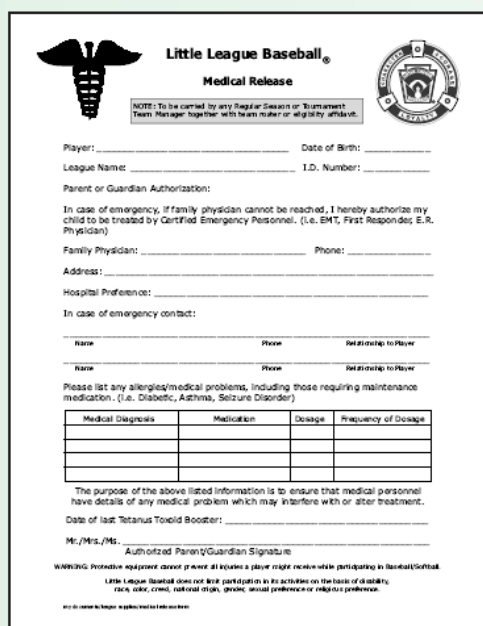
And finally, help the coaches/managers to understand specific techniques to determine whether an injured player is ready to practice and play again; in some cases this may require a doctor's release. The evaluation process involves determining whether injuries are mild, moderate or severe, and should 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

Medical Release Form



Little League Baseball®
Medical Release

NOTE: To be carried by any Regular Season or Tournament Team Manager together with team roster or eligibility affidavit.

Player: _____ Date of Birth: _____
 League Name: _____ T.D. 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. EMS, First Responder, E.R. Physician)
 Family Physician: _____ Phone: _____
 Address: _____
 Hospital Preference: _____
 In case of emergency contact:

Name	Phone	Relationship to Player
_____	_____	_____
_____	_____	_____

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

Medical Diagnosis	Medication	Dosage	Frequency of Dosage
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.
 Date of last Tetanus Toxoid Booster: _____
 Mr./Mrs./Ms. _____
 Authorized Parent/Guardian Signature

WARNING: Protective equipment cannot prevent all injuries a player might receive while participating in Baseball/Softball.
 Little League Baseball does not limit participation in its activities on the basis of disability.
 Race, color, creed, national origin, gender, sexual preference or religious preference.

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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.

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

Dehydration and Heat Stroke (6)

The danger of dehydration and heat stroke:

Dehydration and heat stroke are two very common heat-related diseases that can be life-threatening if left untreated.

What is dehydration?

Dehydration can be a serious heat-related disease, as well as being a dangerous side-effect of diarrhea, vomiting and fever. Children and persons over the age of 60 are particularly susceptible to dehydration.

What causes dehydration?

Under normal conditions, we all lose body water daily through sweat, tears, urine and stool. In a healthy person, this water is replaced by drinking fluids and eating foods that contain water. When a person becomes so sick with fever, diarrhea, or vomiting or if an individual is overexposed to the sun, dehydration occurs. This is caused when the body loses water content and essential body salts such as sodium, potassium, calcium bicarbonate and phosphate.

Occasionally, dehydration can be caused by drugs, such as diuretics, which deplete body fluids and electrolytes. Whatever the cause, dehydration should be treated as soon as possible.

What are the symptoms of dehydration?

The following are the most common symptoms of dehydration, although each individual may experience symptoms differently. Symptoms may include:

- thirst
- less-frequent urination
- dry skin
- fatigue
- light-headedness
- dizziness
- confusion
- dry mouth and mucous membranes
- increased heart rate and breathing

In children, additional symptoms may include:

- dry mouth and tongue
- no tears when crying
- no wet diapers for more than 3 hours
- sunken abdomen, eyes or cheeks
- high fever
- listlessness
- irritability
- skin that does not flatten when pinched and released

Treatment for dehydration:

If caught early, dehydration can often be treated at home under a physician's guidance. In children, directions for giving food and fluids will differ according to the cause of the dehydration, so it is important to consult your pediatrician.

In cases of mild dehydration, simple rehydration is recommended by drinking fluids. Many sports drinks on the market effectively restore body fluids, electrolytes, and salt balance.

For moderate dehydration, intravenous fluids may be required, although if caught early enough, simple rehydration may be effective. Cases of serious dehydration should be treated as a medical emergency, and hospitalization, along with intravenous fluids, is necessary. Immediate action should be taken.

How can dehydration be prevented?

Take precautionary measures to avoid the harmful effects of dehydration, including:

- Drink plenty of fluids, especially when working or playing in the sun.
- Make sure you are taking in more fluid than you are losing.
- Try to schedule physical outdoor activities for the cooler parts of the day.
- Drink appropriate sports drinks to help maintain electrolyte balance.
- For infants and young children, solutions like Pedialyte will help maintain electrolyte balance during illness or heat exposure. Do not try to make fluid and salt solutions at home for children.

What is heat stroke?

Heat stroke is the most severe form of heat illness and is a life-threatening emergency. It is the result of long, extreme exposure to the sun, in which a person does not sweat enough to lower body temperature. The elderly, infants, persons who work outdoors and those on certain types of medications are most susceptible to heat stroke. It is a condition that develops rapidly and requires immediate medical treatment.

What causes heat stroke?

Our bodies produce a tremendous amount of internal heat and we normally cool ourselves by sweating and radiating heat through the skin. However, in certain circumstances, such as extreme heat, high humidity or vigorous activity in the hot sun, this cooling system may begin to fail, allowing heat to build up to dangerous levels.

If a person becomes dehydrated and can not sweat enough to cool their body, their internal temperature may rise to dangerously high levels, causing heat stroke.

What are the symptoms of heat stroke?

The following are the most common symptoms of heat stroke, although each individual may experience symptoms differently. Symptoms may include:

- headache
- dizziness

- disorientation, agitation or confusion
- sluggishness or fatigue
- seizure
- hot, dry skin that is flushed but not sweaty
- a high body temperature
- loss of consciousness
- rapid heart beat
- hallucinations

How is heat stroke treated?

It is important for the person to be treated immediately as heat stroke can cause permanent damage or death. There are some immediate first aid measures you can take while waiting for help to arrive.

- Get the person indoors.
- Remove clothing and gently apply cool water to the skin followed by fanning to stimulate sweating.
- Apply ice packs to the groin and armpits.
- Have the person lie down in a cool area with their feet slightly elevated

Intravenous fluids are often necessary to compensate for fluid or electrolyte loss. Bed rest is generally advised and body temperature may fluctuate abnormally for weeks after heat stroke.

How can heat stroke be prevented?

There are precautions that can help protect you against the adverse effects of heat stroke. These include:

- Drink plenty of fluids during outdoor activities, especially on hot days. Water and sports drinks are the drinks of choice; avoid tea, coffee, soda and alcohol as these can lead to dehydration.
- Wear lightweight, tightly woven, loose-fitting clothing in light colors.
- Schedule vigorous activity and sports for cooler times of the day.
- Protect yourself from the sun by wearing a hat, sunglasses and using an umbrella.
- Increase time spent outdoors gradually to get your body used to the heat.
- During outdoor activities, take frequent drink breaks and mist yourself with a spray bottle to avoid becoming overheated.
- Try to spend as much time indoors as possible on very hot and humid days.

**Facility Survey (8) (see online app
complete for updated survey):**

LITTLE LEAGUE BASEBALL® & SOFTBALL **NATIONAL FACILITY SURVEY** **2015**

* Facility surveys may also be ordered online at <http://lilleague.org/natsurvey>



(if needed)
 ID #1: _____
 (if needed)
 ID #2: _____

City: _____ State: _____

League Name: _____ Where Little League

District #: _____

ID #1: 309-06-03

ID #2: _____

President: _____ Chris Potoczniak
 Address: _____ 6528 Bayshore Blvd.

Safety Officer: _____ R.J. Naughton
 Address: _____ 134 Brookhouse Ave.

City: _____ Tampa, FL ZIP: _____ 33606

City: _____ Tampa

State: _____ FL ZIP: _____ 33606

State: _____ FL ZIP: _____ 33606

Phone (work): _____ 813 314-6684

Phone (work): _____ 813 259-0252

Phone (home): _____ 813 259-0910

Phone (home): _____ 813 259-0252

Phone (cell): _____ 646 344-0756

Phone (cell): _____ 813 705-5609

Email: _____ president@lil.org

Email: _____ safetyofficer@lil.org

PLANNING TOOL FOR FUTURE LEAGUE NEEDS

What are league's plans for improvements?

Indicate number of fields in boxes below.

	Next 12 months	1-2 yrs.	2+ yrs.
a. New fields	4		
b. Baseball/field			
c. Bases			
d. Scoreboards			
e. Pressbox			
f. Concession stand			
g. Restrooms			
h. Field lighting			
i. Warning track			
j. Bleachers			
k. Fencing			
l. Bull pens			
m. Dispatch			
n. Other (specify):			

2015 11 Season

SPECIFIC BALLFIELD QUESTIONS

* Please list all fields by name.

* Field Identification List your ballfields 1-20. Use additional forms if more than 20 fields.

Field #		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
Name																						
Address																						
City																						
State																						
ZIP																						
Phone (work)																						
Phone (home)																						
Phone (cell)																						
Email																						
Please answer the following questions for each field:																						
GENERAL INVENTORY		(For the following questions, if the answer is "Yes" please leave the space blank.)																				
1. How many cars can park in designated parking areas?	None 1-50 51-100 101 or more																					
2. How many people can your bleachers seat?	None/NA 1-100 101-300 301-500 501 or more																					
3. What material is used for bleachers?	Wood Metal Other																					
4. Metal bleachers: Ground wire attached to ground rod?	Yes																					
5. Wood bleachers: Are inspected annually for safety?	Yes																					
6. Is a safety railing at the top/back of bleachers?	Yes																					
7. Is a handrail at the sides of bleachers?	Yes																					
8. Is telephone service available?	Permanent Cellular																					
9. Is a public address system available?	Permanent Portable																					
10. Is there a pressbox?	Yes																					
11. Is there a scoreboard?	Yes																					
12. Adequate bathroom facilities available?	Yes																					
13. Permanent concession stands?	Yes																					
14. Mobile concession stands?	Yes																					

2015 11 Season

	Field #	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
FIELD																					
15. Is field completely fenced?	Yes	x	x	x	x																
16. What type of fencing material is used?	Chainlink	x	x	x	x																
	Wood																				
	Wire																				
17. What base path material is used?	Sand, clay, soil mix	x	x	x	x																
	Ground burnt brick																				
	Other:																				
18. What is used to mark baseline?	Non-caustic lime	x	x	x	x																
	Spray paint																				
	Commercial marking																				
19. Is your the infield surface grass?	Yes	x	x	x																	
20. Does field have conventional dirt pitching mound?	Yes	x	x	x	x																
21. Does field have a temporary pitching mound?	Yes		x																		
22. Are there foul poles?	Yes		x																		
23. Backstop behind home plate?	Yes	x	x	x	x																
PERFORMANCE AND PLAYER SAFETY																					
24. Is there an outfield warning track?	Yes	x	x	x																	
24.a. If yes, what width is warning track? Please specify:	(Width in feet)	6	6	6																	
25. Batter's eye (screen/covering) at center field?	Yes	x	x	x	x																
26. Pitcher's eye (screen/covering) behind home plate?	Yes																				
27. Are there protective fences in front of the dugouts?	Yes	x	x	x	x																
28. Is there a protected, on-deck batter's area? (On-deck areas have been eliminated for ages 12 and below.)	Yes																				
29. Do you have fenced, limited access bull pens?	Yes			x																	
30. Is a first aid kit provided per field?	Yes	x	x	x																	
31. Do bleachers have spectator foul ball protection?	Overhead screens	x	x	x																	
	Fencing behind																				
32. Do your bases disengage from their anchors? (Mandatory since 2008)	Yes																				
33. Is the field lighted?	Yes	x	x	x	x																
34. Are light levels at/above Little League standards? (50 footcandles infield/30 footcandles outfield)	Yes	x	x	x	x																
	Don't know																				
35. What type of poles are used? (Wood poles have not been allowed by Little League for new construction of lighting since 1994)	Wood*				x																
	Steel	x	x	x																	
	Concrete																				
36. Is electrical wiring to each pole underground?	Yes	x	x	x	x																
37. Ground wires connected to ground rods on each pole?	Yes																				
38. Which fields were tested/inspected in the last two years? Please indicate month/year testing was done (example: 3/10)	Electrical System																				
	Light Levels																				
39. Fields tested/inspected by qualified technician?	Electrical System																				
	Light Levels																				

2015 LL Season

	Field #	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
FACILITY MANAGEMENT																					
40. Which fields have the following limitations:																					
a. Amount of time for practice?	Yes	x	x	x	x																
b. Number of teams or games?	Yes	x	x	x	x																
c. Scheduling and/or timing?	Yes	x	x	x	x																
41. Who owns the field?	Municipal																				
	School																				
	League																				
42. Who is responsible for operational energy costs?	Municipal	x	x	x	x																
	School																				
	League																				
43. Who is responsible for operational maintenance?	Municipal	x	x	x	x																
	School																				
	League	x	x	x	x																
44. Who is responsible for purchasing improvements for the field - ie bleachers, fences, lights?	Municipal	x	x	x	x																
	School																				
	League	x	x	x	x																
	Other																				
45. What divisions of baseball play on each field?	T-Ball & Minor	x	x	x	x																
	Major			x																	
	Jr., Sr. & Big																				
	Challenger																				
	50 - 70																				
46. What divisions of softball play on each field?	T-Ball & Minor		x		x																
	Major		x	x																	
	Jr., Sr. & Big																				
	Challenger																				
47. Do you plan to host tournaments on this field?	Yes																				

2015 LL Season

FIELD DIMENSION DATA

Please complete for each field. Use additional space if necessary.

Field No.	Height of outfield fence	Distance from home plate to:				Foul territory distance from:					
		Outfield fence			Back stop	Left field line to fence at:			Right field line to fence at:		
		Left	Center	Right		Home	3rd	Outfield foul pole	Home	1st	Outfield foul pole
1	6	160	160	160	20						
2	6	165	165	165	14						
3	6	187	200	186	20						
4	6	110	110	110	10						
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											

Return completed survey with safety program registration and supporting materials by April 1, 2015 to:

Mailing address:
 Little League International
 PO Box 3485
 Williamsport, PA 17701

Shipping address:
 Little League International
 539 US Route 15 Hwy.
 South Williamsport, PA 17702

Leagues completing their facility survey online at <http://facilitiesurvey.musco.com> should include it with safety plan submission.

2015 LL Season

Concession Stand Safety Procedures (9):

Concession Solutions Incorporated

Food Handling and Service Requirements

January 2020

Notice: All managers and cooks handling food are required to follow these requirements:

A) Personal Hygiene:

- 1) Employees must report to work well groomed, with clean clothes and must wash their hands before starting work.
- 2) Jewelry must not be worn on the hands and any work exposed burns, cuts or sores must be covered.
- 3) If you are or become sick with fever, vomiting, diarrhea, sore throat or cough you should stay at home or leave the concession stand immediately.
- 4) You must not wipe hands on aprons. Aprons must not be reused from one day to the other & must be removed before using restroom.
- 5) Wash hands as often as possible especially after breaks, smoking, eating, drinking or using the restroom. Hands must be washed with soap, scrubbing for at least 20 seconds in warm water.
- 6) While handling food, you must not engage in other activities that may contaminate your hands. (Ex. Handling money, shaking someone's hand, serving drinks, etc.)
- 7) Cooks must not have direct hand contact with ready-to-eat foods. If you are required to do so, you must wear gloves.

B) Safe Methods in Food Dispensing:

- 1) Always keep disposable food serving containers stacked upside down (cups, plates, fry boats, to go containers).
- 2) Always hold plates and serving containers by the bottom or at the edge, never touch the food contact zone.
- 3) Never put your fingers on the rim of drinking cups.
- 4) Always store plastic ware upside down in a closed storage container to insure being picked up by the handles.
- 5) When handling food, use long handled utensils such as tongs, spatulas, scoops and use each utensil for one food only!
- 6) Your hand should never come in contact with the food.
- 7) Ice must be dispensed with a scoop.

C) Safe Methods in Food Handling and Cooking:

- 1) Frozen food must be thawed in the refrigerator and kept at 40°F or lower.
- 2) Hot foods must be maintained at 135°F or higher.
- 3) Food must not stay in the temperature danger zone (41°F to 135°F) for longer than 4 hours. If it does, you must discard it.
- 4) When storing food in the refrigerator, cooked food must be on top shelves and raw food on bottom shelves. All foods must be properly covered and labeled at all times.

5) FIFO (First in First out) must be observed at all times to keep foods fresh.

6) Following are the minimum temperatures and times required to properly cook these foods:

Chicken Tenders:	8-10 minutes @ 300 F
Pop Corn Chicken:	3-4 minutes @ 300 F
Hamburgers:	2 minutes each side @ 350 F
Sirloin Steak:	2 minutes each side @ 350 F
Pork:	1 ½ minutes in microwave on high
French Fries:	4-5 minutes @ 350 F
Hot dogs:	heat 20 seconds in microwave or fryer

7) Food that is cooked and left over at the end of the night must be sold at half price or thrown away!

8) If you ever have any doubt regarding the wholesome state of any food whether cooked or uncooked – THROW IT AWAY!

D) Cleaning & Sanitizing:

1) Utensils, containers and fry baskets must be washed in a solution of dishwashing soap and 1 teaspoon of bleach every night to sanitize and disinfect.

2) Fryers must be wiped with paper towels all around the non-cooking surface and covered with foil each night. Oil must be strained once per week and changed out every two weeks.

3) The griddle must also be cleaned every night with ice on the hot surface to release the food and grease. You must scrape with scraper or pumice brick to clean the surface of any debris. The griddle must also be covered with foil every night.

4) All counters and surfaces where food is prepared or handled must be cleaned and sanitized every night (see #3 above).

5) All floors must be swept and mopped every night. The solution for the mop bucket must be made up of water, 2 or 3 ounces of bleach and 1 ounce of Pinesol.

Bayshore Little League Accident Reporting Form

Injured Player's Name _____

Date _____ Time _____

Incident occurred while participating in:

- ☐ Baseball Level: (circle) PeeWee Minor A B C Majors
- ☐ Softball Level: (circle) PeeWee Minor A B Majors

(circle) Tryout Practice Game

Position/Role of person(s) involved in accident: (circle)

Batter	Base runner	Pitcher	Catcher	1 st Base
2 nd Base	3 rd Base	Short Stop	Left Field	Right Field
Center Fld	Dugout	Umpire	Coach	Spectator

Type of Injury: _____

Was first aid required? Y N Type _____

Was professional medical treatment required? Y N
If Yes, Type _____

Type of incident and location:

A: On primary playing field: (circle)

- ☐ Base path: running / sliding
- ☐ Hit by ball: pitched / thrown / batted
- ☐ Collision with: player / structure
- ☐ Grounds defect:
- ☐ Other:

B: Adjacent to Playing Field:

- ☐ Seating area
- ☐ Parking area
- ☐ Off ball field

C: Concession Area:

- ☐ Volunteer worker
- ☐ Bystander

Please give a short description of incident: _____

Could this accident have been avoided? How? _____

Prepared by _____ Date _____

This form is for Little League purposes only to report safety hazards and injuries in order to improve league safety. Please complete within 24 hours or an injury or near miss and give to BSLL safety officer or a board member.

Lightning Safety:

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.



NOAA

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...



NOAA

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/nwr/> 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