



Fremont Centerville Little League (FCLL)  
2023 Safety Plan



League ID # 4051401

Approved by the FCLL Board:

01/30/2022

# MISSION STATEMENT

Fremont Centerville Little League is devoted to providing a safe and pleasant environment for players, volunteer staff (managers, coaches, and umpires), parents, and spectators. Fremont Centerville Little League commits the Fremont Unified School District and the City of Fremont to take pride in our surroundings and our ability to improve and enhance our facilities. Fremont Centerville Little League is dedicated to implementing and maintaining a quality safety program based on current National, Western Region, and District 14 Little League Guidelines. Fremont Centerville Little League will enforce all Little League Rules, including the use of Proper equipment.

## Distribution of A Safety Awareness Plan (ASAP)

The 2023 ASAP Plan will be provided to all FCLL Managers/Coaches and all league volunteers.

Additional Copies of the ASAP Plan are made available at the Snack Shack or by contacting the League Safety Officer: Erick Aldama ([safety@fcllbaseball.com](mailto:safety@fcllbaseball.com)). For further information, see our website [www.fcllbaseball.com](http://www.fcllbaseball.com)

# FREMONT CENTERVILLE LITTLE LEAGUE

## SAFETY PLAN

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# FREMONT CENTERVILLE LITTLE LEAGUE

## 2023 BOARD OF DIRECTORS DISTRICT 14

Board Member	Board Position	FCLL Emails
Nanette Hamilton	President	<a href="mailto:president@fcllbaseball.com">president@fcllbaseball.com</a>
Thomas Bolden	Vice President—Baseball Operations	<a href="mailto:vpoperations@fcllbaseball.com">vpoperations@fcllbaseball.com</a>
Lisa Caldera	Vice President—Softball Operations	<a href="mailto:vpsoftball@fcllbaseball.com">vpsoftball@fcllbaseball.com</a>
Cynthia Reis	Vice President—Conduct	<a href="mailto:VPConduct@fcllbaseball.com">VPConduct@fcllbaseball.com</a>
Gina Gonzales	Secretary	<a href="mailto:secretary@fcllbaseball.com">secretary@fcllbaseball.com</a>
Mary Henning	Treasurer	<a href="mailto:leaguetreasurer@fcllbaseball.com">leaguetreasurer@fcllbaseball.com</a>
Erick Aldama	Safety Officer	<a href="mailto:safety@fcllbaseball.com">safety@fcllbaseball.com</a>
Coleen Silva	Head Player Agent	<a href="mailto:playerAgent@fcllbaseball.com">playerAgent@fcllbaseball.com</a>
Suzanne Lider	Player Agent	<a href="mailto:playeragent_lower@fcllbaseball.com">playeragent_lower@fcllbaseball.com</a>
Russ Thacker	Coaching Coordinator	<a href="mailto:coaching@fcllbaseball.com">coaching@fcllbaseball.com</a>
Greg Lopez	Information Officer	<a href="mailto:info@fcllbaseball.net">info@fcllbaseball.net</a>
Patrick Lider	Umpire-In-Chief	<a href="mailto:umpire@fcllbaseball.com">umpire@fcllbaseball.com</a>
Wade Hamilton	Equipment Manager	<a href="mailto:equipment@fcllbaseball.com">equipment@fcllbaseball.com</a>
Wayne Barrs	Head Field Maintenance	<a href="mailto:fields@fcllbaseball.com">fields@fcllbaseball.com</a>
Luis Morado	Assistant Field Maintenance	<a href="mailto:fields2@fcllbaseball.com">fields2@fcllbaseball.com</a>
Kevin Lopez	Interleague Coordinator	<a href="mailto:interleague_Upper@fcllbaseball.com">interleague_Upper@fcllbaseball.com</a>
Kim Pedrotti	Auxiliary President - Events	<a href="mailto:events@fcllbaseball.com">events@fcllbaseball.com</a>
Gina Gonzalez	Team Parent Coordinator	<a href="mailto:teamParents@fcllbaseball.com">teamParents@fcllbaseball.com</a>
Desiree Pricer	Fundraising Coordinator	<a href="mailto:fundraising@fcllbaseball.com">fundraising@fcllbaseball.com</a>
Leilani Bliss	Snack Bar Manager	<a href="mailto:snackbar@fcllbaseball.com">snackbar@fcllbaseball.com</a>
VACANT	Marketing/Public Relations	<a href="mailto:marketing@fcllbaseball.com">marketing@fcllbaseball.com</a>

## EMERGENCY NUMBERS

Police/Fire/EMS Emergency	911
Police Non-Emergency or Business Line	(510) 790-6800
Fire/EMS Non-Emergency or Business Line	(510) 793-4200
Animal Control Emergency	(510) 790-6635
Child Protective Services	(510) 259-1800

## NEIGHBORING HOSPITALS

<b>Washington Hospital Emergency</b> 2000 Mowry Avenue Fremont, CA 94538	(510) 791-3430
<b>Kaiser Hospital</b> 39400 Paseo Padre Parkway Fremont, CA 94538	(510) 248-7240
<b>Fremont Urgent Care</b> 3161 Walnut Avenue Fremont, CA 94538	(510) 796-1000

# VOLUNTEER BACKGROUND CHECKS

Fremont Centerville Little League is a volunteer-led Little League Program that is engaging, exciting, and fun for the youth of our community. Volunteers are a significant part of keeping our league running; each volunteer must complete a yearly application, which is electronically submitted to a national background check to be eligible to join as a league volunteer. In addition, every parent/guardian is encouraged to volunteer. Any volunteer who refuses to complete the application process will not be allowed to volunteer in any league-sanctioned event.

Fremont Centerville Little League supports and is in full compliance with the background check initiative from Little League Internation.



This volunteer application should only be used if a league is manually entering information into JDP or an outside background check provider that meets the standards of Little League Regulations 1(c)9. **THIS FORM SHOULD NOT BE COMPLETED IF A LEAGUE IS UTILIZING THE JDP QUICKAPP.** Visit [LittleLeague.org/localBGcheck](http://LittleLeague.org/localBGcheck) for more information.

**A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION.**

**All RED fields are required.**

Name \_\_\_\_\_ Date \_\_\_\_\_  
First Middle Name or Initial Last

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Social Security # (mandatory)** \_\_\_\_\_

Cell Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Special professional training, skills, hobbies: \_\_\_\_\_

Community affiliations (Clubs, Service Organizations, etc.): \_\_\_\_\_

Previous volunteer experience (including baseball/softball and year): \_\_\_\_\_

1. Do you have children in the program?  Yes  No  
 If yes, list full name and what level? \_\_\_\_\_

2. Special Certification (CPR, Medical, etc.)? If yes, list: \_\_\_\_\_  Yes  No

3. Do you have a valid driver's license?  Yes  No  
 Driver's License#: \_\_\_\_\_ State \_\_\_\_\_

4. Have you ever been charged with, convicted of, plead no contest, or guilty to any crime(s) involving or against a minor, or of a sexual nature?  Yes  No  
 If yes, describe each in full: \_\_\_\_\_  
 (If volunteer answered yes to Question 4, the local league must contact the Little League Security Manager.)

5. Have you ever been convicted of or plead no contest or guilty to any crime(s)?  Yes  No  
 If yes, describe each in full: \_\_\_\_\_  
 (Answering yes to Question 5, does not automatically disqualify you as a volunteer.)

6. Do you have any criminal charges pending against you regarding any crime(s)?  Yes  No  
 If yes, describe each in full: \_\_\_\_\_  
 (Answering yes to Question 6, does not automatically disqualify you as a volunteer.)

7. Have you ever been refused participation in any other youth programs and/or listed on any youth organization ineligible list?  Yes  No

If yes, explain: \_\_\_\_\_  
 (If volunteer answered yes to Question 7, the local league must contact the Little League Security Manager.)

In which of the following would you like to participate? (Check one or more.)

- League Official  Umpire  Manager  Concession Stand  
 Coach  Field Maintenance  Scorekeeper  Other \_\_\_\_\_

Please list three references, at least one of which has knowledge of your participation as a volunteer in a youth program:

**Name/Phone**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROUND CHECK BY LAW, PLEASE ATTACH A COPY OF THAT STATE'S BACKGROUND CHECK. FOR MORE INFORMATION ON STATE LAWS, VISIT OUR WEBSITE: [LittleLeague.org/BgStateLaws](http://LittleLeague.org/BgStateLaws)**

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(s) on me now and as long as I continue to be active with the organization, which may include a review of sex offender registries (some of which contain name only searches which may result in a report being generated that may or may not be me), child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, Little League is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for violation of Little League policies or principles.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

If Minor/Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant Name (please print or type) \_\_\_\_\_

NOTE: The local Little League and Little League Baseball, Incorporated will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

**LOCAL LEAGUE USE ONLY:**

Background check completed by league officer \_\_\_\_\_ on \_\_\_\_\_

System(s) used for background check (minimum of one must be checked):  
**Review the Little League Regulation 1(c)9 for all background check requirements**

JDP (Includes review of the U.S. Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible List)\* **OR** \_\_\_\_\_

National Criminal Database check  U.S. Center of SafeSport's Centralized Disciplinary Database and Little League International Ineligible List

National Sex Offender Registry

\* Please be advised that if you use JDP and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter or email directly from JDP in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.

**Only attach to this application copies of background check reports that reveal convictions of this application.**

Last Updated: 10/11/2021

# FCLL Field Inspections and Storage Procedures

## **Before the Season Starts:**

- Familiarize yourself with the safety materials.
- It is highly recommended to appoint a Safety Parent for your team. They need to be at all the games and have a cellular phone. It can be an assistant coach.

## **Before Each Game:**

- Coaches must walk/inspect the fields before practices and games. Umpires must also walk the fields for hazards before each game.
- Complete a field safety checklist. Then, report any problems to your Field Maintenance Officer (Wayne Barrs, [fields@fcllbaseball.com](mailto:fields@fcllbaseball.com) or Luis Morado, [fields2@fcllbaseball.com](mailto:fields2@fcllbaseball.com)) or the Safety Officer (Erick Aldama, [safety@fcllbaseball.com](mailto:safety@fcllbaseball.com)).
- Check the Team Equipment for any problems. Report any equipment problems to the Equipment Manager (Wade Hamilton [equipment@fcllbaseball.com](mailto:equipment@fcllbaseball.com)).
- Check the contents of your team's first aid kit. Contact the Safety Officer (Erick Aldama [safety@fcllbaseball.com](mailto:safety@fcllbaseball.com)) for any items that need to be replaced.

## **Storage Shed**

The following applies to the entire storage shed used by the league and to anyone who has been issued a key to use those sheds.

- All individuals are aware of their responsibility for the orderly and safe storage of rakes, shovels, and bases.
- Before you use any equipment located in the shed (lawnmowers, weed whackers, lights, scoreboards, public address systems, etc.), please read the written operating procedures for that equipment.
- All chemicals or organic materials stored in the shed shall be properly marked and labeled as to its contents.
- Any witnessed "loose" chemicals or organic materials within these sheds should be cleaned up and disposed of as soon as possible to prevent accidental poisoning.

## FCLL Field and Shed Locations

### **Marshall Park**

40432 Torenia Circle  
Fremont, CA 94538

### **Patterson Elementary School**

35521 Cabrillo Drive  
Fremont, CA 94536

### **Mattos Elementary School**

37944 Farwell Drive  
Fremont, CA 94536

### **Glenmoor Elementary School**

4620 Mattos Drive  
Fremont, CA 94536

## PRE-GAME FIELD INSPECTION CHECKLIST

**MANAGERS NAME:**

**FIELD:**

**DATE:**

**Time:**

<b>Field Condition</b>	<b>Yes</b>	<b>No</b>	<b>Catchers Equipment</b>	<b>Yes</b>	<b>No</b>
Backstop Intact			Hockey Catchers Helmet		
Home Plate Intact			Dangling Throat Guard		
Bases Secure			Helmets		
Pitcher's Mound Safe			Catcher's Mitt		
Batter Box Lined/Level			Chest Protector		
Infield Fence Repair			Shin guards		
Outfield Fence Repair			<b>Dugouts</b>	<b>Yes</b>	<b>No</b>
Foul Lines Marked			Fencing Needs Repair		
Infield Need Repairs			Bench Needs Repair		
Outfield Need Repairs			Trash Cans		
Warning Track			Clean Up Is Needed		
Coaches' boxes Lined					
Free Of Foreign Objects			<b>Spectator Area</b>	<b>Yes</b>	<b>No</b>
Grass Surface Even			Bleachers Need Repair		
			Protective Screens Ok		
<b>Player Equipment</b>	<b>Yes</b>	<b>No</b>	Bleachers Clean		
Batting Helmets			Parking Area Safe		
Jewelry Removed			<b>Safety Equipment</b>	<b>Yes</b>	<b>No</b>
Shoes/Bats Inspected			First-aid Kit Each Team		
Face Mask (Minor/Mjrs)			Medical Release Forms		
Proper Cleats			Ice Pack/Ice		
Athletic Cups (boys)			Safety Manual		
Full Uniform			Injury Report Forms		
Bats Meet Standards			Drinking Water		
Additional Comments:					

**REPORT ANY PROBLEMS TO YOUR FCLL FIELD MAINTENANCE OFFICERS OR SAFETY OFFICER.**

Turn this form into the concessions stand or email it to your Field Maintenance Officers (Wayne Barrs [fields@fcllbaseball.com](mailto:fields@fcllbaseball.com)/Luis Morado [fields2@fcllbaseball.com](mailto:fields2@fcllbaseball.com)) or the Safety Officer (Erick Aldama [safety@fcllbaseball.com](mailto:safety@fcllbaseball.com)).



# League Training Dates and Times

	<b>Date</b>	<b>Location</b>	<b>Time</b>
<b>Coaching Fundamental Training:</b>	<b>February 11, 2023,</b>	<b>Marshall Park</b>	<b>1200-1400</b>

*\*\*\*At least one manager/coach from each team must attend the training. Every manager/coach will attend this training at least once every three years. \*\*\**

	<b>Date</b>	<b>Location</b>	<b>Time</b>
<b>Safety Manual &amp; First Aid Training:</b>	<b>February 11, 2023,</b>	<b>Marshall Park</b>	<b>1200-1400</b>

*\*\*\*Each team will receive a paper copy of this safety manual. Managers and Safety Parent should have a copy of the safety manual at all league functions. FCLL requires at least one manager/coach from each team to attend. Every manager/coach must attend this training once every three years. \*\*\**

Remember, safety is everyone's job. Prevention is the key to reducing accidents to a minimum. Immediately report all hazardous conditions to the Safety Director, Team Safety Officer or another Board Member. Don't play on a field that is not safe or with unsafe playing equipment. Be sure your players are fully equipped, especially catchers and batters. Check your team's equipment often.

# SAFETY CODE

## *Dedicated to Injury Prevention*

- Responsibility for Safety procedures should be that of an adult Fremont Centerville Little League member.
- Arrangements should be made before 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 and are located at each concession stand.
- No games or practices should be held when weather or field conditions are not good, mainly when lighting is inadequate.
- The 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.
- A procedure should be established for retrieving foul balls batted out of the playing area.
- During practice and games, all players should be alert and watch 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 condition of the equipment as well as for proper fit.
- Batters must wear Little League-approved protective helmets during batting practice and games.
- The catcher must wear a catcher's helmet, mask, throat guard, extended model chest protector, shin guards, and protective cup with an 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 a runner is returning to a base, headfirst slides are not permitted.
- During sliding practice, bases should not be strapped down or anchored.
- At no time should "horseplay" be permitted on the playing field.
- Parents of players who wear glasses should be encouraged to provide "safety glasses".
- A player must not wear watches, rings, pins, or metallic items during games and practices.
- The catcher must wear a 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.

## SOME IMPORTANT DO'S AND DONT'S

### DO...

- o Reassure and aid children who are injured, frightened, or lost.
- o Provide or assist in obtaining medical attention for those who require it.
- o Know your limitations.
- o Carry your first-aid kit to all games and practices. Keep your "Prevention and Emergency Management of Little League Baseball and Softball Injuries" booklet with your first-aid kit.
- o Assist those who require medical attention - and when administering aid, remember to...

**LOOK** for signs of injury (*Blood, Black-and-blue skin, deformity of joint etc.*).

**LISTEN** to the injured and describe what happened and what hurts if conscious. Before questioning, you may have to calm and soothe an excited child.

**FEEL** gently and carefully the injured area for signs of swelling or grating of a broken bone. Have your players' Medical Clearance Forms with you at all games and practices. Carry a First Aid kit at all times for your team. Make arrangements to have a cellular phone available when your game or practice is at a facility that does not have any public phones.

### DON'T...

- o Administer any medications.
- o Provide any food or beverages (other than water).
- o Hesitate in giving aid when needed.
- o Be afraid to ask for help if you're not sure of the proper procedures (i.e., CPR, etc.).
- o Transport injured individuals except in extreme emergencies.
- o Leave an unattended child at a practice or game.
- o Hesitate to report any present or potential safety hazard to the Safety Director immediately.

# 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 Safety Officer. 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 2023 is Erick Aldama and can be reached at the following **Email:** [safety@fcllbaseball.com](mailto:safety@fcllbaseball.com)

How to make the report? Reporting incidents can come in a variety of forms. Fill out the [Injury Tracking Report](#) and send an email to the Safety Officer. At a minimum, the following information must be provided:

1. The name and phone number of the individual involved.
2. The date, time, and location of the incident.
3. As detailed a description of the incident as possible.
4. The preliminary estimation of the extent of any injuries.
5. The name and phone number of the person reporting the incident.

Safety Officer Responsibilities? Within 48 hours of receiving the incident report, the Director of Safety 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 Fremont Centerville Little League's insurance coverage and the provisions for submitting any claims. If the extent of the injuries is 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).

## Communicable Disease Procedures

1. Bleeding must be stopped, the open wound covered, and the uniform changed if there is blood on it before the athlete may continue.
2. Routinely use gloves to prevent mucous membrane exposure when contact with blood or other body fluids are anticipated (provided in first-aid kit).
3. Immediately wash hands and other skin surface if contaminated with blood.
4. Clean all blood contaminated surfaces and equipment.
5. Managers, coaches, and volunteers with open wounds should refrain from all direct contact until the condition is resolved.
6. Follow accepted guidelines in the immediate control of bleeding and disposal when handling bloody dressings, mouth guards and other articles containing body fluids.

# INJURY TRACKING REPORT

**For Local League Use Only** Send Completed Report to [Safety@fcllbaseball.com](mailto:Safety@fcllbaseball.com)

## Activities/Reporting

## A Safety Awareness Program's Incident/Injury Tracking Report

League Name: Fremont Centerville Little League League ID: 405 - 14 - 01 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  TAD  
B.)  Challenger  T-Ball  Minor  Major  Intermediate (50/70)  
 Junior  Senior  Big League  
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 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 local Little League use only (should not be sent to Little League International). This document should be used to evaluate potential 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 Accident claims or injuries that could become claims to any eligible participant under the Accident Insurance policy, please complete the Accident Notification Claim form available at [http://www.littleleague.org/Assets/forms\\_pubs/asap/AccidentClaimForm.pdf](http://www.littleleague.org/Assets/forms_pubs/asap/AccidentClaimForm.pdf) and send to Little League International. For all other claims to non-eligible participants under the Accident policy or claims that may result in litigation, please fill out the General Liability Claim form available here: [http://www.littleleague.org/Assets/forms\\_pubs/asap/GLClaimForm.pdf](http://www.littleleague.org/Assets/forms_pubs/asap/GLClaimForm.pdf).

Prepared By/Position: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Send Completed Report to [Safety@fcllbaseball.com](mailto:Safety@fcllbaseball.com)

# LITTLE LEAGUE BASEBALL AND SOFTBALL ACCIDENT NOTIFICATION FORM INSTRUCTIONS



## 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 19 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
						<input type="checkbox"/> Female <input type="checkbox"/> Male
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"/> SPECIAL GAME(S)  |
| <input type="checkbox"/> CHALLENGER       | <input type="checkbox"/> MINOR (6-12)                 | <input type="checkbox"/> VOLUNTEER UMPIRE     | <input type="checkbox"/> SCHEDULED GAME   | <input type="checkbox"/> (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 TO        |   |
|   | <input type="checkbox"/> INTERMEDIATE (50/70) (11-13) | <input type="checkbox"/> OFFICIAL SCOREKEEPER | <input type="checkbox"/> TRAVEL FROM      |   |
|   | <input type="checkbox"/> JUNIOR (12-14)               | <input type="checkbox"/> SAFETY OFFICER       | <input type="checkbox"/> TOURNAMENT       |   |
|   | <input type="checkbox"/> SENIOR (13-16)               | <input type="checkbox"/> VOLUNTEER WORKER     | <input type="checkbox"/> OTHER (Describe) |   |

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 SUNSTROKE	<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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## **Ankle Sprains**

The most common type of ankle injury is a sprain. A sprain is stretching and tearing of ligaments (fibrous bands connecting adjacent bones in a joint.) There are many ligaments around the ankle, and these can become damaged when the ankle is forced into a position not normally encountered.

The most frequently seen sprain occurs when weight is applied to a foot that is on an uneven surface, and the foot "rolls in" (inversion). Because the sole of the foot is pointing inward as force is applied, the ligaments stabilizing the lateral - or outside - part of the ankle are stressed. Many patients report hearing a "snap" or "pop" at the time of the injury. This is usually followed by pain and swelling on the lateral aspect of the ankle.

THE MOST IMPORTANT INITIAL MANAGEMENT OF A SPRAIN IS,

- R - rest
- I - ice
- C - compression
- E - elevation

Many of the problems resulting from sprains are due to blood and edema in and around the ankle. Minimizing swelling helps the ankle heal faster. The RICE regimen facilitates this.

- Rest - no weight bearing for the first 24 hours after the injury (Possibly longer, depending upon severity)
- Ice - apply ice packs using a towel over a plastic bag to the area that is painful. Be careful to avoid frostbite. Ice should be intermittently applied for the first 24 hours.
- Compression - an ACE bandage or other soft elastic material should be applied to the ankle to help prevent the accumulation of edema.
- Elevation - elevating the ankle helps in removing edema. By having the foot higher than the hip (or heart), gravity is used to pull edema out of the ankle.

In the initial 24 hours, it is very important to avoid things which might increase swelling. Avoid

1. Hot showers
2. Heat rubs (methylsalicylate counterirritants such as "Ben Gay"), etc.
3. Hot packs
4. Drinking alcohol
5. Aspirin - prolongs the clotting time of blood and may cause more bleeding into the ankle. (Tylenol or Ibuprofen may be taken to help with pain, but will not speed up the healing process)

### **Handling ankle sprains**

"Great news! It's not broken. Just stay off it a few days and you'll be fine." Not exactly words of consolation if you're sitting in the ER with a throbbing ankle. And not exactly the best advice for caring for an ankle sprain. In fact, if not properly treated, ankle sprains have a tendency to reoccur.

### **What is a sprain?**

A sprain is a twisting injury to the ankle joint.

This stretches or tears the ligaments that hold the anklebones together. If the ligaments don't heal properly, the ankle can become unstable.



## Speeding up your recovery

When a ligament tears, the injured tissue bleeds and swells. This can delay healing. To speed up the process you should immediately:

- Rest  
Stop all painful activities. Use crutches or a cane until you can walk without pain or limping.
- Ice  
Place an ice bag on the ankle for 15 to 20 minutes, three to five times per day. Leave it off at least two hours between applications. Ice especially during the first 72 hours after the injury, longer if swelling persists.
- Compression  
Apply an elastic wrap bandage from the toes up to midcalf, applying even pressure. Wear the wrap only during the day.
- Elevate  
Elevate the ankle above heart level (hip level is acceptable during class or at work.) Continue until the ankle stops swelling.

## How can you prevent re-injury?

A physical therapist or athletic trainer can teach you motion exercises to restore natural ankle function, as well as strength and balancing exercises to help provide backup support for the injured ligaments.

## What about high-top shoes or braces?

Research has shown that stirrup-style ankle braces and high-top athletic shoes can help prevent re-injury. However, it's important to remember that bracing and high-tops are not a substitute for ankle strength and coordination. It's vital to do ankle strengthening and balancing exercises to support the healing ligaments.

## Head Injuries

"What a hit...he really got his clock cleaned that time!" "I bet he's hearing bells now!" "Let's see if he can clear the cobwebs or if he's going down for the count..."

Although often dramatized by sportscasters, head injuries are no laughing matter.

Anytime someone suffers dizziness, confusion, unconsciousness or memory loss from a blow to the head, it's a medical emergency.

Also seek medical attention right away if:

- Clear or bloody fluid is draining from the nose, mouth or ears.
- The pupils (black center of the eye) appear dilated or unequal.

Even in seemingly mild head injuries that result only in a slight headache, it's important to watch the person for the next 24 hours for delayed signs of a life-threatening brain injury:

- Dizziness
- Nausea
- Vomiting
- Disorientation
- Inability to wake up (check every hour while they're sleeping).

Lastly, regardless of the severity of the injury, don't:

- Play sports or exercise until cleared by a doctor.
- Take any medicine without a doctor's permission.

## **Bruise Clues**

A bruise is a bruise is a bruise. No big deal, right?

Actually, a swift kick to the shin, an elbow, to the bicep, or a knee, to the thigh can sideline you for several weeks. These injuries crush the delicate muscle cells, leading to bleeding and swelling in the muscle.

A deep bruise usually causes signs and symptoms similar to a fracture:

- Swelling
- Pain
- Muscle tightness--as the cells heal, regular tissue is replaced with less flexible scar tissue.
- Limited motion of the joint(s) above and/or below the bruise.

## **What do you do for a deep bruise?**

- Apply ice immediately (within the first hour) and leave it on for 15-20 minutes.
- Do not apply heat at least within the first 72 hours. Heat will make the swelling worse, delay the healing time and limit the muscle's ability to contract and stretch.
- See your doctor to make sure you didn't break a bone.

If there is no fracture:

- Gently stretch the injured muscle for at least 5 minutes per day. Stretch only to the point of a gentle pull, and hold it without bouncing. Try 20 repetitions, holding each for 15 seconds.
- Continue icing the area three to four times a day for 15-20 minutes each. Take it off for at least two hours between applications. Ice especially after stretching.

Once the bruise has healed and you're able to use the muscle normally, be sure to protect it with extra padding when you return to sports.

If you're not sure how to stretch the muscle, or if you feel a thickening or hardening of the bruised area, ask your doctor for a referral to a physical therapist or athletic trainer. They'll show you how to stretch and help you get your muscle back to regular working order. They can also give you tips on how to protect it with padding.

## **Little League Elbow**

Throwing a baseball, especially pitching, can be very stressful to a child's elbow. In fact, it can affect normal growth of the elbow bones.

Young bones have growth plates on the ends which tend to be at greater risk for fracture. One specific growth plate, along the inside of the elbow, is where some of the throwing muscles attach. If these muscles forcefully and repeatedly pull at that attachment, like when pitching, they can actually pull off a

piece of the growth plate. This type of fracture, if not properly treated, can limit the growth of the affected bone.

This condition is called "Little League Elbow" and causes pain along the inside of the elbow. What should you do if your "little leaguer" complains of elbow pain?

- Don't wait to see if it will go away!
- Stop all activities that cause pain.
- See a doctor as quickly as possible.

To help prevent elbow and shoulder injuries, most youth leagues limit the number of pitches that a player can throw each week. They especially limit the number of curve balls, as this pitch specifically uses the muscles that attach to the inside of the elbow.

So, don't wait for an injury to happen: Be proactive! Ask your area youth baseball director about their safety policies. If they don't have similar rules, suggest that they contact one of the national youth baseball organizations for more information.

### **Time out for teeth**

Sports can be tough on teeth. All it takes is one quick jab of an elbow or unexpected bounce of a ball and you end up sitting in the dentist's chair.

Tooth injuries are not generally life threatening, but they can be quite painful and disfiguring. The best way to restore a dislodged tooth is to act quickly.

Your tooth has the best chance of being saved if it is placed back into the socket within 30 minutes. This means rushing to the dentist or oral surgeon, ASAP! Don't attempt to replace the tooth on your own.

While traveling to the dental specialist:

- Try to keep the tissue alive by immediately place the tooth in sterile saline solution or in your mouth (as long as you don't accidentally swallow it!). If these options are not possible, try storing the tooth in a container of cold milk.
- Avoid excessive handling of the tooth. Especially avoid touching the delicate roots as this could speed up tissue death.
- Bite down on a folded piece of sterile gauze to help minimize bleeding.
- Of course, the best way to save your game-winning smile is to wear a mouth guard during high-risk sports like basketball, baseball and softball.

Are you in shape for baseball and softball?

Think you're ready to hit the diamond? Maybe not. Before you run out on the field, consider this:

- Are you in shape?

Most shoulder injuries and thigh pulls in baseball and softball can be prevented by getting in shape before the season. Now is a good time to start. Begin with some gentle [stretches](#) every day for the shoulders, thigh, calves and trunk. You should try to stretch out each area for five minutes total -- you can break them up into 15- or 30-second repetitions. Begin a [strengthening program](#), especially for your ankles, knees and shoulders. To make your muscles stronger, do around 30 repetitions of each exercise, two to three days per week.

- Stay in shape once the season starts.

Playing does not maintain or improve your muscle strength or flexibility. In season, continue stretching every day, especially after practices and games. Also, do strengthening exercises two days per week, but not on game or practice days.

- Do you have and use proper protective gear?

Baseball and softball rank right up with hockey, football, basketball and racquet sports as a leading cause of sport-related eye injuries. These injuries tend to be severe, so be sure to wear a protective helmet during baseball and fast-pitch softball. You may even want to consider wearing protective eyewear.

- Use proper baseball and softball technique.

Sliding is a major cause of leg injury in both sports. Learn how to slide correctly into bases. In addition, try to avoid diving headfirst to a base. That's an easy way to suffer head, tooth, shoulder and finger injuries.

Use proper overhead throwing form. Throwing side arm -- allowing your elbow to drop below your shoulder -- greatly increases your risk for shoulder and elbow overuse injuries.

## Soothing Sore Muscles

Feeling a little stiff and sore after that hard work out or first game of the season? Take a couple of days off to let your muscles rest and repair them. You can also help ease the pain and stiffness by:

1. Gently stretching. [Stretch](#) sore muscles to the point of slight tightness (not pain) and hold for 10 to 15 seconds without bouncing.
2. Applying ice. After stretching, apply ice for 15 to 20 minutes to muscles that are particularly sore.
3. Gently massaging sore muscles to help loosen spasms. You can use body lotion or muscles lotions or rubs. Keep in mind that muscles lotions are only helpful for decreasing pain. Studies have not conclusively proven that these substances promote tissue healing. Simple muscle soreness should stop within a few days. If you continue to have pain or if you notice swelling or bruising around a sore muscle, consult your doctor. This may indicate a more serious tear to the muscle.

Be careful if it's "just a sprain"

"Good news, it's just a sprain ... stay off of it a few days and you should be fine."

In reality, however, a sprain can often be more serious than a fracture. When you sprain or twist your knee or ankle, you actually stretch or even tear the tissue (ligaments) that hold your knee or ankle and foot bones together. If these ligaments do not heal properly, your ankle or knee joint can become unstable. In fact, studies have found that individuals who have previously twisted (sprained) their ankles have a high rate of re-injury, from 25 percent to 75 percent. To prevent a re-injury, it's important to:

1. Take time off from jumping, twisting, and running activities.  
If a sprain causes swelling and loss of motion, the ligament(s) are probably partially torn. Torn ligaments can take six to 12 weeks to fully heal. Jumping, twisting and running activities can delay healing or cause further injury.

2. Strengthen the muscles around the injured joint.

If ligaments are severely stretched or torn (indicated by swelling and loss of motion), they may never regain their original ability to stabilize the joint. Strengthening the muscles around the joint helps provide backup support for the loose or torn ligaments. If your doctor diagnoses your injury as a sprain, ask for a referral to a certified athletic trainer or sports physical therapist. They will guide you through a rehabilitation program to get you safely back on the court or field.

## **An Eye on Prevention**

It's able to stop a sphere hurtling at 140 miles per hour or deflect an object impacting with over 1200 pounds of force. Is it Superman? A bulletproof vest? No, it's sport safety glasses and visors!

You may be thinking, "What's this got to do with me? I don't need safety glasses to play an occasional tennis match or pickup basketball game. We don't play that hard."

Well, before you grab your mouse and click to another web site, think about this:

The number of sports eye injuries has been steadily rising. From 1993 to now these injuries have skyrocketed from 41,000 to 100,000 per year. Who are the people most likely to suffer these injuries? Not professional athletes, but young athletes and weekend warriors who have poor to moderate sport skills and slower reflexes -- in other words, most of us. Even though we like to play hard, we often don't take the time to protect ourselves.

The truth is we play sports that put our eyes at risk for a devastating injury. For instance, a racquetball typically travels at speeds ranging from 90 to 130 miles per hour. Tennis, basketball, ice hockey, softball, baseball, field hockey, squash and badminton are just as dangerous.

So, give your eyes a break -- wear protective glasses that are specifically designed for sports. Regular eyeglasses don't protect your eyes from hard impacts. In fact, they can shatter, throwing glass into your eyes.

## **Little League Child Protection Program**

The "Protecting Young Victims from Sexual Abuse and Safe Sport Act of 2017" mandates that all amateur sports organizations, which participate in an interstate or international amateur athletic competition and whose membership includes any adult who is in regular contact with an amateur athlete who is a minor must report suspected child abuse, including sexual abuse, within 24 hours to law enforcement.

All Board Members, Coaches, Team Managers are required to take a quick online course which explains the signs and steps to take to report suspected abuse. The course can be accessed by [clicking here](#) and following the prompts. You will receive a certificate upon completion. Please download or take a screen shot of your certificate and send to the Safety Officer at [safety@fcllbaseball.com](mailto:safety@fcllbaseball.com). This must be completed before engaging with children on your team.

**Additional information about what to look for and how to report as well as laws specific to California can be found on the little league website under Player Safety and Child Protection Program, or by [clicking here](#).**

# CONCESSION STAND PROCEDURES

## '12 Steps to Safe and Sanitary Food Service Events'

1. **Menu.** Keep your menu simple and keep potentially hazardous foods (meats, eggs, dairy products, protein salads, cut fruits and vegetables, etc.) to a minimum. Avoid using precooked foods or leftovers. Use only foods from approved sources, avoiding foods that have been prepared at home. *Complete control over your food, from source to service, is the key to safe, sanitary food service.*
2. **Cooking.** Use a food thermometer to check on cooking and holding temperatures of potentially hazardous foods. All potentially hazardous foods should be kept at 41° F or below (if cold) or 140° F or above (if hot). Ground beef and ground pork products should be cooked to an internal temperature of 155° F, poultry parts should be cooked to 165° F. *Most food borne illnesses from temporary events can be traced back to lapses in temperature control.*
3. **Reheating.** Rapidly reheat potentially hazardous foods to 165° F. Do not attempt to heat foods in crock pots, steam tables, units or other holding devices. *Slow-cooking mechanisms may activate bacteria and never reach killing temperatures.*
4. **Cooling and Cold Storage.** Foods that require refrigeration must be cooled to 41° F as quickly as possible and held at that temperature until ready to serve. To cool foods down quickly, use an ice water bath (60% ice to 40% water), stirring the product frequently, or place the food in shallow pans no more than 4 inches in depth and refrigerate. Pans should not be stored one atop the other and lids should be off or ajar until the food is completely cooled. Check the temperature periodically to see if the food is cooling properly. *Allowing hazardous foods to remain unrefrigerated for too long has been the number ONE cause of food borne illness.*
5. **Hand Washing.** *Frequent and thorough hand washing remains the first line of defense in preventing food borne disease.* The use of disposable gloves can provide an additional barrier to contamination, but they are no substitute for hand washing!
6. **Health and Hygiene.** Only healthy workers should prepare and serve food. Anyone who shows symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, jaundice, etc.) or who has open sores or infected cuts on the hands should not be allowed in the food concession area. Workers should wear clean outer garments and should not smoke in the concession area. The use of hair restraints is recommended to prevent hair ending up in food products.
7. **Food Handling.** Avoid hand contact with raw, ready-to-eat foods and food contact surfaces. Use an acceptable dispensing utensil to serve food. *Touching food with bare hands can transfer germs to food.*
8. **Dishwashing.** Use disposable utensils for food service. Keep your hands away from food contact surfaces, and never reuse disposable dishware. *Ideally*, dishes and utensils should be washed in a four-step process:
  1. Washing in hot soapy water
  2. Rinsing in clean water
  3. Chemical or heat sanitizing
  4. Air drying.

9. Ice. Ice used to cool cans/bottles should not be used in cup beverages and should be stored separately. Use a scoop to dispense ice; never use the hands. *Ice can become contaminated with bacteria and viruses and cause food-borne illness.*
10. Wiping Cloths. Rinse and store your wiping cloths in a bucket of sanitizer (example: 1 gallon of water and 1 ½ teaspoon of chlorine bleach). Change the solution every two hours. *Well-sanitized work surfaces prevent cross-contamination and discourage flies.*
11. Insect Control and Waste. Keep foods covered to protect them from insects. Store pesticides away from foods. Place garbage and paper wastes in a refuse container with a tight-fitting lid. Dispose of wastewater in an approved method (do not dump it outside). All water used should be potable water from an approved source.
12. Food Storage and Cleanliness. Keep foods stored off the floor at least six inches. After your event is finished clean the concession area and discard unusable food. *(Remember: Training your concession stand volunteers is one of the 12 requirements for a qualified safety plan.)*

## Concession Stand Tips

# SAFETY FIRST

### Requirement 9

#### 12 Steps to Safe and Sanitary

Food Service Events: The following information is intended to help you run a healthful concession stand.

Following these simple guidelines will help minimize the risk of foodborne illness.

This information was provided by District Administrator George Glick, and is excerpted from "Food Safety Hints" by the Fort Wayne-Allen County, Ind., Department of Health.

#### 1. Menu.

Keep your menu simple, and keep potentially hazardous foods (meats, eggs, dairy products, protein salads, cut fruit and vegetables, etc.) to a minimum. Avoid using precooked foods or leftovers. Use only foods from approved sources, avoiding foods that have been prepared at home. Complete control over your food, from source to service, is the key to safe, sanitary food service.

#### 2. Cooking.

Use a food thermometer to check on cooking and holding temperatures of potentially hazardous foods. All potentially hazardous foods should be kept at 41° F or below (if cold) or 140° F or above (if hot). Ground beef and ground pork products should be cooked to an internal temperature of 157° F. Poultry parts should be cooked to 165° F. Most foodborne illnesses from temporary events can be traced back to lapses in temperature control.

#### 3. Reheating.

Rapidly reheat potentially hazardous foods to 165° F. Do not attempt to heat foods in crock pots, steam tables, over sterno units or other holding devices.

Slow-cooking mechanisms may activate bacteria and never reach killing temperatures.

#### 4. Cooling and Cold Storage.

Foods that require refrigeration must be cooled to 41° F as quickly as possible and held at that temperature until ready to serve. To cool foods down quickly, use an ice water bath (80% ice to 40% water), stirring the product frequently, or place the food in shallow pans no more than 4 inches in depth and refrigerate. Pans should not be stored one atop the other and lids should be off or ajar until the food is completely cooled. Check temperature periodically to see if the food is cooling properly. Allowing hazardous foods to remain unrefrigerated for too long has been the number ONE cause of foodborne illness.

#### 5. Hand Washing.

Frequent and thorough hand washing remains the first line of defense in preventing foodborne disease. The use of disposable gloves can provide an additional barrier to contamination, but they are no substitute for hand washing!

#### 6. Health and Hygiene.

Only healthy workers should prepare and serve food. Anyone who shows symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, jaundice, etc.) or who has open sores or infected cuts on the hands should not be allowed in the food concession area. Workers should wear clean outer garments and should not smoke in the concession area. The use of hair restraints is recommended to prevent hair ending up in food products.

#### 7. Food Handling.

Avoid hand contact with raw, ready-to-eat foods and food contact surfaces. Use an acceptable dispensing utensil

to serve food. Touching food with bare hands can transfer germs to food.

#### 8. Delineating.

Use disposable utensils for food service. Keep your hands away from food contact surfaces, and never reuse disposable dishware. Wash in a four-step process:

1. Washing in hot soapy water.
2. Rinsing in clean water.
3. Chemical or heat sanitizing, and
4. Air drying.

#### 9. Ice.

Ice used to cool cans/bottles should not be used in cup beverages and should be stored separately. Use a scoop to dispense ice, never use the hands. Ice can become contaminated with bacteria and viruses and cause foodborne illness.

#### 10. Wiping Cloths.

Rinse and store your wiping cloths in a bucket of sanitizer (example: 1 gallon of water and 1 ½ teaspoon of chlorine bleach). Change the solution every two hours. Well sanitized work surfaces prevent cross-contamination and discourage flies.

#### 11. Insect Control and Waste.

Keep foods covered to protect them from insects. Store pesticides away from foods. Place garbage and paper wastes in a refuse container with a tight-fitting lid. Dispose of wastewater in an approved method (do not dump it outside). All water used should be potable water from an approved source.

#### 12. Food Storage and Cleanliness.

Keep foods stored off the floor at least six inches. After your event is finished, clean the concession area and discard unusable food.

#### 13. Set a Minimum Worker Age.

Legales should set a minimum age for workers or to be in the stand, in many states this is 16 or 18, due to potential hazards with various equipment.

*Safety plans must be postmarked no later than May 1st.*

## 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 fake 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

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## CLEAN HANDS FOR CLEAN FOODS

Since the staff at concession stands may not be professional food workers, it is important that they be thoroughly instructed in the proper method of washing their hands. The following may serve as a guide:

- Use soap and warm water.
- Rub your hands vigorously as you wash them.
- Wash all surfaces including the backs of hands, wrists, between fingers and under fingernails.
- Rinse your hands well.
- Dry hands with a paper towel.
- Turn off the water using a paper towel, instead of your bare hands.

*Wash your hands in this fashion before you begin work and frequently during the day, especially after performing any of these activities:*

- After touching bare human body parts other than clean hands and clean, exposed portions of arms.
- After using the restroom.
- After caring for or handling animals.
- After coughing, sneezing, using a handkerchief or disposable tissue.
- After handling soiled surfaces, equipment or utensils.
- After drinking, using tobacco, or eating.
- During food preparation, as often as necessary to remove soil and contamination and to prevent cross-contamination when changing tasks.
- When switching between working with raw food and working with ready-to-eat food.
- Directly before touching ready-to-eat food or food-contact surfaces.
- After engaging in activities that contaminate hands.

### *Top Six Causes*

From past experience, the US Centers for Disease Control and Prevention (CDC) list these circumstances as the most likely to lead to illness. Check this list to make sure your concession stand has covered these common causes of food borne illness.

- Inadequate cooling and cold holding.
- Preparing food too far in advance for service.
- Poor personal hygiene and infected personnel.
- Inadequate reheating.
- Inadequate hot holding.
- Contaminated raw foods and ingredients.