

Orangecrest Little League Safety Manual 2019





Table of Contents

POLICY STATEMENT	3
SAFETY / HAZARD RECOGNITION	3 3 3 3
Safety Mission Statement	3
Safety Officer	3
Hazard Recognition	3
CODE OF CONDUCT	4
OCLL SAFETY CODE	6
OCLL BOARD MEMBER PHONE LIST	8
RESPONSIBILITY	9
The President	9
OCLL Safety Officer	9
Managers and Coaches	10
Umpires	13
Snack Bar Manager	14
Equipment Manager	14
HEALTH AND MEDICAL	15
What is First-Aid?	15
First-Aid Kits	15
Permission to Give Care	15
9-1-1 / (951) 787-7911 EMERGENCY NUMBER	15
When to call 9-1-1 / (951) 787-7911	15
Assessing the Victim	16
Muscle, Bone, or Joint Injuries	18
Concussion	18
Head and Spine Injuries	19
Caring for Shock	20
Caring for Heat Related Emergencies	20
Sudden illness	21
Choking	22
Breathing Problem/Emergency Breathing	22
Emergency Treatment of Dental Injuries	23
Burns	23
Penetrating Objects	23
Asthma and Allergies	24
SAFETY MANUAL	25
SEE SOMETHING SAY SOMETHING	26
ACCIDENT REPORTING PROCEDURE	26
INSURANCE POLICIES	28
GENERAL FACILITY	30
EQUIPMENT	31
FIELD MAINTAINANCE EQUIPMENT	32
SNACK BAR SAFETY	33



Notes / Comments

49





POLICY STATEMENT

Orangecrest Little League (OCLL) is a non-profit organization run by volunteers whose mission is to provide an opportunity for our community's children to learn the game of baseball in a safe and friendly environment.

SAFETY / HAZARD RECOGNITION

Safety Mission Statement

Orangecrest Little League is dedicated in its development, implementation, and continual improvement of its safety program. Safety of our participants is the most important aspect of providing a fun and educational Little League experience.

Safety Officer

The position of safety officer is an elected volunteer board member. For the 2019 season the Safety Officer is Allana Herrera (951) 500-5804

Hazard Recognition

One of the goals of this safety program is to teach all involved in Orangecrest Little League to recognize and prevent hazards in all aspects of the game. Eliminating all unsafe conditions and unsafe acts will provide a safer atmosphere for all our participants. Teaching hazard recognition will be a part of preseason managers meetings.





Our Mission statement:

"To implant firmly in the children of the community the ideals of good sportsmanship, honesty, loyalty, courage, and respect for authority, so that they may be well-adjusted, stronger and happier children and will grow to be good, decent, healthy, and trustworthy citizens."

Therefore, the board of directors of Orangecrest Little League has mandated the following Code of Conduct.

As a member, parent, volunteer or spectator of Orangecrest Little League, I agree to support the Mission Statement, will support a positive environment for all participants and will abide by the Little League Parent/Volunteer Pledge:

I will teach all children to play fair and do their best
I will positively support all Managers, Coaches and Players
I will respect the decisions of the Umpires
I will praise a good effort despite the outcome of the game

In addition, all participants, including: Board Members, Managers, Coaches, Players, Volunteers and Spectators are *prohibited* from:

- Any actual or threatened personal verbal or physical abuse upon any official for any real or imaginary belief of a wrong decision or judgment.
- Any actual or threatened verbal or physical attack upon any board member, manager, coach, player, volunteer or spectator.
- Use of any profane, obscene or vulgar language in any manner at any time.
- Use of derogatory or abusive language directly or indirectly toward, or about any play, decision or game participants.
- Speaking disrespectfully to any manager, coach, official or representative of the league.
- Demonstrating dissent at an official's decision by throwing of gloves, helmets, hats, bats, ball, or any other forceful unsportsmanlike action.
- Using unnecessarily rough tactics in the play of a game against the body of an opposing player.
- Mingling with or fraternizing with spectators during the course of the game.
- Gambling upon any play or outcome of any game at any time.
- Being or appearing to be intoxicated in the field of play, stands or anywhere on the OCLL complex, identified by the presence of odor of substance or behavior commonly attributed to intoxicated persons.
- Smoking anywhere in Orange Terrace Community Park (Riverside Municipal Code Section 9.08.140).
- Tampering or manipulation of any league rosters, schedules, draft positions or selections, official score books, rankings, financial record or procedures.

Per Little League rules, umpires shall have the authority and discretion during a game to penalize any offender according to the infraction up to and including removal from the game, which may include automatic suspension from the next game.

The Board of Directors will review all infractions of the OCLL Code of Conduct. In accordance with the Little League rules, the board will evaluate the nature and seriousness of the infractions(s) and may assess additional disciplinary action up to and including expulsion from the league.

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

Parent or Legal Guardian Signature:	
Parent Printed Name:	
Board Member Signature:	



Player Name:

ORANGECREST LITTLE LEAGUE



Parent / Guardian Release and Indemnity Agreement

I, the parent/guardian of the above named candidate for a position on a Little League team, hereby give my approval for my child to participate in any and all Little League activities, including, but not limited to, transportation to/from said activities. I
know that participation in baseball, and transportation to/from activities, may result in serious injuries. I understand that
protective equipment does not prevent all injuries to players. I do hereby agree to waive, release, absolve, indemnify, defend
and hold harmless Orangecrest Little League, Inc., its officers and directors, Little League Baseball, Inc., and all organizers,
sponsors, supervisors, coaches, and participants, including persons transporting my child to/from activities, from all claims
arising out of any bodily injury or any other injury to my child, whether such injuries are the result of negligence or any other
cause, except to the extent that such bodily injury or other injury results from the sole active negligence of Orangecrest Little
League, Inc., Little League Baseball, Inc., the organizers, sponsors, supervisors, coaches, or participants, including persons
transporting my child to/from activities. This release and indemnity agreement shall not apply to the extent that such bodily
or other injury is covered by accident or liability insurance maintained by Orangecrest Little League, Inc.

In case of emergency, I hereby authorize the medical treatment of registered child by an emergency healthcare provider.

League Notices - Please Read Carefully & Acknowledge

- 1) Uniforms remain property of the Orangecrest Little League until the conclusion of the season. Player will be given his/her team uniform at the end of the season so long as all financial obligations have been fulfilled.
- 2) Siblings might not be placed in the same division or the same team and may have different schedules. Players cannot move from one league to another at any time during the season.
- 3) Game schedules are subject to change; cancelled games may not be rescheduled; there is no minimum guaranteed number of games; play-offs are subject to time and field availability and may not be played; make-up games (if played) are subject to time and field availability.
- 4) League games may or may not be played at Orange Terrace Community Park. Games may be played at other locations to be determined at a later date. Week night games may start as early as 4:00 p.m. and as late as 8:00 p.m.
- 5) <u>Practices will be scheduled by the manager at a time, location, and frequency that they desire. Due to limited field availability, practices may or may not Orange Terrace Community Park</u>
- 6) Refunds will be given in accordance with our Refund Policy, which is available on our website, www.ocll.com
- 7) Major through Senior division "property players" can only be released at the request of the appointed team manager or during a player draft IF the player competed at Try-outs. All releases must be approved by the Board of Directors. Trades are discouraged and rarely approved.
- 8) All managers and coaches must be appointed by the League President and approved by the Board of Directors.
- 9) All Little League rules, Orangecrest League Ground Rules, and Draft Rules will be strictly enforced. Current year league ground rules, standing rules, draft rules, and Little League Rule book are available at ocll.com/or-for-purchase from Little League International, Inc.
- 10) I understand that this is a <u>volunteer run league</u> and in order to facilitate revenue generation at the league run snack bar, <u>each team is required to staff that snack bar as scheduled by the board</u>, and therefore, <u>I as a parent on that team</u>, <u>am required to be a help fulfill shifts when directed by the manager / team mom</u>.
- 11) I agree to participate in the Spring season fundraiser by selling raffle tickets or buy out at the appropriate cost.
- 12) I give permission for Orangecrest Little League, its agents, and contractors, to take and use photographs, post to our website or social media of my child pursuant to the rules set forth by Little League International.

Parent or Legal Guardian Signature:	
Printed Name:	
Board Member:	

OCLL SAFETY CODE

ORANGECREST LITTLE LEAGUE



The Board of Directors of Orangecrest Little League has mandated the following *Safety Code*. All managers and coaches will read this *Safety Code* and then read it to the players on their team. These rules and Little League Baseball rules apply to every participant of Orangecrest Little League.

- Responsibility for safety procedures belongs to every adult member of the Orangecrest Little League.
- Each player, manager, designated coach, umpire, team safety officer/manager shall use proper reasoning and care to prevent injury to him/herself and to others.
- Only league approved managers and/or coaches are allowed to practice teams.
- Only league approved managers and/or coaches will supervise batting cages.
- Arrangements should be made in advance of all games and practices for emergency medical services.
- Managers, designated coaches and umpires will have mandatory training in First-Aid.
- First-Aid kits are issued to each team manager during the pre-season and additional supplies will be located at the Snack Bar.
- No games or practices will be held when weather or field conditions are poor, particularly when lighting is inadequate.
- Play area will be inspected before games and practices for holes, damage, stones, glass and other foreign objects.
- 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 designated coaches.
- Foul balls batted out of playing area will be returned to the Scorekeeper or On-duty Board Member and not thrown over the fence during a game.
- During practice and games, all players should be alert and watching the batter on each pitch.
- During warm-up drills, players should be spaced so that no one is endangered by wild throws or missed catches.
- All pre-game warm-ups should be performed within the confines of the playing field and not within areas that are frequented by, and thus endangering spectators, (i.e., playing catch, pepper, swinging bats etc.)
- Equipment should be inspected regularly for the condition of the equipment as well as for proper fit.
- Batters must wear Little League approved protective helmets that bear the NOCSAE seal during batting practice and games.

ORANGECREST LITTLE LEAGUE



- 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 "horse play" be permitted on the playing field.
- Parent of players who wear glasses should be encouraged to provide "safety glasses" for their children.
- No On-deck batters are not permitted for all Divisions except for Intermediate and Seniors.
- For official games, Managers will only use the official Little League balls supplied by OCLL.
- Female catchers may wear long or short model chest protectors.
- All catchers must wear chest protectors with neck collar, throat guard, shin guards and catcher's helmet, all of which must meet Little League specifications and standards.
- Catchers may not catch, whether warming up a pitcher, in practices, or games without wearing full catcher's gear and an athletic cup as described above.
- Catchers must wear a catcher's mitt (not a first baseman's mitt or fielder's glove) of any shape, size or weight consistent with protecting the hand.
- Shoes with metal spikes or cleats are not permitted. Shoes with molded cleats are permissible. Majors and below.
- Players will not wear watches, rings, pins, jewelry or other metallic items during practices
 or games. (Exception: jewelry that alerts medical personnel to a specific conditions is
 permissible and this must be taped in place)
- No food or drink, at any time, in the dugouts. (Exception: bottled water, Gatorade and water from drinking fountains.)
- Managers will never leave an unattended child at a practice or game.
- No children under the age of 14 are permitted in the Snack Bars unless approved by Snack Bar Manager.
- Never hesitate to report any present or potential safety hazard to the OCLL Safety Officer immediately.
- Make arrangements to have a cellular phone available when a game or practice is at a facility that does not have public phones.
- Speed Limit is 5 miles per hour in parking lots.
- No alcohol or drugs allowed on the premises at any time.
- No medication will be taken at the facility unless administered directly by the child's parent. This includes aspirin and Tylenol.
- No playing in the parking lots at any time.
- No playing on or around maintenance equipment at any time.





- No swinging bats or throwing baseballs at any time within the walkways and common areas
 of the complex.
- No throwing rocks.
- · No climbing fences.
- No swinging on the dugout roofs.
- Observe all posted signs.
- Players and spectators should be alert at all times for foul balls and errant throws.
- All gates to the fields must remain closed at all times. After players have entered or left the playing field, gates should be closed and secured.
- Bicycle helmets must be worn at all times when riding bicycles on the premises as well as to and from the premises.
- Use crosswalks when crossing roadways. Always be alert for traffic.
- No one is allowed on the complex with open wounds at any time. Wounds should be treated and properly bandaged.
- There is no running allowed in the bleachers.

OCLL BOARD MEMBER PHONE LIST

All board member phone numbers are available to managers and team moms, and OCLL members only. If this applies to you please go to the web site and click on the tab that says Board or Contact Us. This will let you e-mail your request to the Public Information Officer (info@ocll.com). Key contact information:

Brett Varner	President	president@ocll.com	(951)637-0784
Stephen Ashby	Vice-president	sashby@ocll.com	(951)836-7717
Allana Herrera	Safety Officer	safetyofficer@ocll.com	
Melissa Baldwin	Treasurer	treasurer@ocll.com	
Stephen Ashby	Information Officer	sashby@ocll.com	(951)836-7717
Krista Roe	Player Agent	playeragent@ocll.com	
Riverside Police Dept.			(951)826-5700
Riverside Fire Dept.			(951)826-5321





RESPONSIBILITY

The President:

The President of OCLL is responsible for ensuring that the policies and regulations of the OCLL Safety Officer are carried out by the entire membership to the best of his abilities.

OCLL Safety Officer:

The main responsibility of the OCLL Safety Officer is to develop and implement the League's safety program. This includes filling out a Facility Survey each year to help find and correct facility concerns. The OCLL Safety Officer is the link between the Board of Directors of Orangecrest Little League and its managers, coaches, umpires, Team Safety Officer/Managers, player, spectators, and any other third parties on the complex in regard to safety matters, rules and regulations.

Safety Officer will be available to all participants of Orangecrest Little League at all times and also be on file with Little League Headquarters.

The OCLL Safety Officer's responsibilities include:

- Coordinating the individual Team safety officer/Managers in order to provide the safest environment possible for all.
- Assisting parents and individuals with insurance claims and will act as the liaison between the insurance company and the parents and individuals.
- Explaining insurance benefits to claimants and assisting them with filing the correct paperwork.
- Keeping the First-Aid Log. This log will list where accidents and injuries are occurring, to whom, in which divisions (senior, major, minor, farm, tee ball), at what times, under what supervision.
- Correlating and summarizing the data in the First-Aid Log to determine proper accident prevention in the future.
- Insuring that each team receives it Safety Manual and its First-Aid Kit at the beginning of the season.
- Installing First-Aid Kits in all Snack Bars and the clubhouse and re-stocking the kits as needed.
- Make Little League's "no tolerance with child abuse" clear to all.
- Inspecting Snack Bars and checking fire extinguishers.
- Checking fields with the Field Managers and listing areas needing attention.
- Scheduling a First-Aid clinic for all managers, designated coaches, umpires, player agents and Team Safety Officer/Managers during the pre-season.
- Acting immediately in resolving unsafe or hazardous conditions once a situation has been brought to his/her attention.

ORANGECREST LITTLE LEAGUE



- Making spot checks at practices and games to make sure all managers have their First-Aid kits.
- Tracking all injuries and near misses in order to identify injury trends.
- Visiting other leagues to allow a fresh perspective on safety.
- Making sure that safety is a monthly Board Meeting topic, and allowing experienced people to share ideas on improving safety.

Managers and Coaches:

The Manager is a person appointed by the Board of Directors of OCLL to be responsible for the team's actions on the field, and to represent the team in communications with the umpire and the opposing team.

- The Manager shall always be responsible for the team's conduct, observance of the official rules and deference to the umpires.
- The Manager is also responsible for the safety of his players. He/She is also ultimately
 responsible for the actions of designated coaches and the Team safety officer/Manager
 (TSO).
- If a Manager leaves the field, that Manager shall designate a Coach, as a substitute and such Substitute Manager shall have the duties, rights and responsibilities of the Manager.

Pre-Season:

Managers will:

- Attend a mandatory training sessions First-Aid given by OCLL with his/her designated coaches and TSO. Date and time for the mandatory training session shall be set by the OCLL Board. <u>The 2019 Frist-Aid, Rules, and Fundamental Clinics is tentatively scheduled for February 25, 2019 at 6:30pm at the Orange Terrace Community Park.</u>
- Cover the basics of safe play with his/her team before starting the first practice.
- Return the signed OCLL Mission Statement Acknowledgment Form to an OCLL Board Member before the first game.
- Teach players the fundamentals of the game while advocating safety.
- Teach players how to slide before the season starts. A board representative will be available to teach these fundamentals if the Manager or designated coaches do not know them.
- Notify parents that if a child is injured or ill, he or she cannot return to practice unless they
 have a note from their doctor. This medical release protects you if that child should become
 further injured or ill. There are no exceptions to this rule.
- Encourage players to bring water bottles to practices and games.
- Encourage your players to wear mouth protection.

ORANGECREST LITTLE LEAGUE



Season Play:

Managers. Will:

- Work closely with Team Safety Officer/Manager to make sure equipment is in first-rate working order.
- Make sure that *telephone access* is available at all activities including practices. It is suggested that a *cellular phone* always be on hand.
- Not expect more from their players than what the players are capable of.
- Teach the fundamentals of the game to players.
 - Catching fly balls
 - Sliding correctly
 - Proper fielding of ground balls
 - Simple pitching motion for balance
- Be open to ideas, suggestions or help.
- Enforce that prevention is the key to reducing accidents to a minimum.
- Have players wear sliding pads if they have cuts or scrapes on their legs.
- Always have First-Aid Kit and Medical Releases on hand.
- Use common sense.

Pre-Game and Practice:

- Make sure players are wearing the proper uniform and catchers are wearing a cup.
- Make sure that the equipment is in good working order and is safe.
- Agree with the opposing manager and umpire on the fitness of the playing field. In the
 event that the two managers cannot agree, the President or a duly delegated
 representative shall make the determination.
- Then have players do a light jog around the field before starting throwing warm-ups that should follow this order.
 - Light tosses short distance.
 - Light tosses medium distance.
 - Light tosses large distance.
 - Medium tosses medium distance.
 - Regular tosses medium distance.
 - Field ground balls.
 - Field pop flies.

ORANGECREST LITTLE LEAGUE



During the Game:

Managers will:

- Make sure that players carry all gloves and other equipment off the field and to the dugout when their team is up at bat. No equipment shall be left lying on the field, either in fair or foul territory.
- Maintain discipline at all times.
- Be organized.
- Keep players and substitutes sitting on the team's bench or in the dugout unless participating in the game or preparing to enter the game.
- Make sure catchers are wearing the proper equipment.
- Encourage everyone to think Safety First.
- Observe the "no on-deck" rule for the divisions of Majors and below.
- Keep players behind the screens at all times.
- No player should handle a bat in the dugout at any time.
- · Keep players off fences.
- Not play children that are ill or injured.
- Attend to children that become injured in a game.
- Not lose focus by engaging in conversation with parents and passerby's.

Post-Game:

Managers will:

- Those who throw regularly (pitchers and catchers) should ice their shoulders and elbows.
- Not leave the field until every team member has been picked up by a known family member or designated driver.
- Notify parents if their child has been injured no matter how small or insignificant the injury
 is. There are no exceptions to this rule. This protects you, Little League Baseball,
 Incorporated and OCLL.
- Discuss any safety problems with the Team safety officer/Manager that occurred before, during or after the game.
- If there was an injury, make sure an accident report was filled out and given to the OCLL Safety Officer.
- Return the field to its pre-game conditions, per OCLL policy.

If a manager knowingly disregards safety, he or she will come before the OCLL Board of Directors to explain their conduct.

ORANGECREST LITTLE LEAGUE



Umpires:

Pre-Game

Before a game starts, the umpire shall:

- Check equipment in dugouts of both teams, equipment that does not meet specifications must be removed from the game.
- Make sure catchers are wearing helmets when warming up pitchers.
- Run hands along bats to make sure there are no slivers.
- Make sure that bats have grips.
- Make sure there is foam inserts in helmets and those helmets meet Little League NOCSAE
 specifications and bear Little League's seal of approval.
- Inspect helmets for cracks.
- Walk the field for hazards and obstructions (e.g. rocks and glass)
- Check players to see if they are wearing jewelry.
- Checks players to see if they are wearing appropriate footwear.
- Make sure that all playing lines are marked with non-caustic lime, chalk or other white material easily distinguishable from the ground or grass.
- Secure official Little League balls for play from snack bar.

During the Game:

During the game the umpire shall:

- Govern the game as mandated by Little League rules and regulations.
- Check baseballs for discoloration and nicks and declare a ball unfit for use if it exhibits these traits.
- Act as the sole judge as to whether and when play shall be suspended or terminated during
 a game because of unsuitable weather conditions or the unfit condition of the playing field;
 as to whether and when play shall be resumed after such suspension; and as to whether
 and when a game shall be terminated after such suspension.
- Act as the sole judge as to whether and when play shall be suspended or terminated during a game because of low visibility due to atmospheric conditions or darkness.
- Enforce the rule that no spectators shall be allowed on the field during the game.
- Make sure catchers are wearing the proper equipment.
- Continue to monitor the field for safety and playability.
- Make the calls loud and clear, signaling each call properly.





Post-Game

After a game, the umpire shall:

- Check with the managers of both teams regarding safety violations.
- Report any unsafe situations to the OCLL Safety Officer by telephone and in writing.

Snack Bar Manager:

The OCLL Snack Bar Manager is responsible to ensure the Snack Bar Volunteers are oriented in the safety procedures as set forth in this manual.

Equipment Manager:

The OCLL Equipment Manager is responsible to get damaged equipment repaired or replaced as reported. This replacement will happen in a timely manner. The Equipment Manager will also exchange equipment if it doesn't fit properly.

Player Agent:

The OCLL Player Agent will be responsible to ensure the timely uploads of player coach, and manager information into the Little League Data Center.

ORANGECREST LITTLE LEAGUE



HEALTH AND MEDICAL

The following First-Aid information is to help give guidance to Orangecrest Little League volunteers in providing basic victim care. The intent is to give basic information to help stabilize someone in a medical emergency until professional medical assistance can be rendered.

What is First-Aid?

First-Aid means exactly what the term implies – it is the *first care* given to a victim. It is usually performed by the *first person* on the scene and continued until professional medical help arrives, (9-1-1 / (951) 787-7911 paramedics). At no time should anyone administering First-Aid go beyond his or her capabilities. *Know your limits!*

First-Aid Kits:

Each team will be issued a First-Aid Kit at the beginning of the season. One chemical ice pack of physical therapy quality will be issued to each team at the beginning of the season. Others are available at all times in the Snack Bar. First-Aid Kits are required to be present at all activities. The Snack Bar will have a First-Aid Kit and a Safety Manual readily available. The First-Aid Kit will include the necessary items to treat an injured player until professional help arrives, if need be.

Permission to Give Care

If the victim is conscious, you must have his/her permission before giving first-aid. To get permission you *must* tell the victim who you are, how much training you have, and how you plan to help. Only then can a conscious victim give you permission to give care. Do not give care to a conscious victim who refuses your offer to give care. If the conscious victim is an infant or child, permission to give care should be obtained from a supervising adult when one is available. If the condition is serious, permission is implied if a supervising adult is not present. Permission is also implied if a victim is unconscious or unable to respond. This means that you can assume that, if the person could respond, he or she would agree to care.

9-1-1 / (951) 787-7911 EMERGENCY NUMBERS

The most important help that you can provide to a victim who is seriously injured is to call for professional medical help. Make the call quickly, preferably from a cell phone near the injured person. If this is not possible, send someone else to make the call from a nearby telephone. Be sure that you or another caller follows these steps:

A. First Dial 9-1-1 / (951) 787-7911

- B. Give the emergency dispatcher the necessary information. Answer any questions they might ask. Most emergency dispatchers will ask:
 - a. The exact location or address of the emergency. Include the name of the City or Town, nearby intersections or landmarks.

Orange Terrace Community Park 20010 Orange Terrace Pkwy Riverside, CA 92508 Cross Street is Barton Road.

- b. The Telephone number from which the call is being made.
- c. The caller's name.
- d. What happened. (Baseball or Softball injury, fire, fall, etc.)





- e. How many people are involved.
- f. The condition of the injured person
- g. What help is being given (First-Aid)
- h. Do not hang up until the dispatcher hangs up. The EMS dispatcher may be able to tell you how to best care for the victim.
- C. Continue to care for the victim until professional help arrives.
- D. Appoint somebody to go to the street and look for the Fire Engine and Ambulance and flag them down if necessary. This could save valuable time.

When to call 9-1-1 / (951) 787-7911

If the injured person is unconscious, call 9-1-1 / (951) 787-7911 immediately. Sometimes a conscious victim will tell you not to call an ambulance, and you may not be sure what to do. Call 9-1-1 / (951) 787-7911 anyway and request paramedics if the victim:

- Is or becomes unconscious
- Has trouble breathing or is breathing in a strange way
- Has chest pain or pressure
- Is bleeding severely
- Has pressure or pain in the abdomen that does not go away
- Is vomiting or passing blood
- Has seizures, a severe headache or slurred speech
- Has injures to the head, neck or back
- Has possible broken bones

If you have any doubt at all, call 9-1-1 / (951) 787-7911 and request paramedics

Also call 9-1-1 / (951) 787-7911 for any of these situations

- Fire or Explosion
- Downed electrical wires
- Presence of poisonous gas
- Vehicle collisions
- Vehicle/Bicycle collisions

ORANGECREST LITTLE LEAGUE



Emergency Contact Numbers and Addresses are listed in the front of this binder.

Assessing the Victim

Conscious Victim

If the victim is conscious, ask what happened. Look for other life-threatening conditions and conditions that need care or might become life threatening. The victim may be able to tell you what happened and how he or she feels. This information helps determine what care may be needed, passing along to emergency dispatchers. A primary survey should be conducted to check for responsiveness:

- 1) Talk to the victim and to any people standing by who saw the accident take place.
- 2) Check the victim from head to toe, so you don not overlook any problems.
- 3) Do not ask the victim to move, and do not move the victim yourself.
- 4) Examine the scalp, face, ears, nose, and mouth.
- 5) Look for cuts, bruises, bumps, or depressions.
 - 6) Watch for changes in consciousness.
 - 7) Notice if the victim is drowsy, not alert, or confused.
 - 8) Look for changes in the victim's breathing. A healthy person breathes regularly, quietly, and easily. Breathing that is not normal includes noisy breathing such as gasping for air; making rasping, gurgling, or whistling sounds; breathing unusually fast or slow; and breathing that is painful.
- 9) Notice how the skin looks and feels. Note if the skin is reddish, bluish, pale or gray.
 - 10) Feel with the back of your hand on the forehead to see if the skin feels unusually damp, dry, cool, or hot.
- 11) Ask the victim again about the areas that hurt.
- 12) Ask the victim to move each part of the body that doesn't hurt.
- 13) Check the shoulders by asking the victim to shrug them.
- 14) Check the chest and abdomen by asking the victim to take a deep breath.
- 15) Ask the victim if he or she can move the fingers, hands, and arms.
- 16) Check the hips and legs in the same way.
 - 17) Watch the victim's face for signs of pain and listen for sounds of pain such as gasps, moans or cries.
- 18) Look for odd bumps or depressions.
 - 19) Think of how the body usually looks. If you are not sure if something is out of shape, check it against the other side of the body.

ORANGECREST LITTLE LEAGUE



- 20) Look for a medical alert tag on the victim's wrist or neck. A tag will give you medical information about the victims care to give for that problem, and who to call for help.
- 21) When you have finished checking, if the victim can move his or her body without any pain and there are no other signs of injury, have the victim rest sitting up.
- 22) When the victim feels ready, help him or her stand up.

Unconscious Victims

If the victim does not respond to you in any way, assume the victim is unconscious. Call 9-1-1 / (951) 787-7911 and report the emergency immediately.

Checking an Unconscious Victim:

- 1) Tap and shout (Checking for responsiveness) to see if the person responds. If no responsecall 9-1-1.
- 2) Look, listen and feel for breathing for about 5 seconds.
- 3) If there is no response, position victim on back, while supporting head and neck.
- 4) Tilt head back, lift chin and pinch nose shut. (See breathing section to follow)
- 5) Look, listen, and feel for breathing for about 5 seconds.
- 6) If the victim is not breathing, give 2 slow breaths into the victim's mouth.
- 7) Check pulse for 5 to 10 seconds.
- 8) Check for severe bleeding.

Muscle, Bone, or Joint Injuries

Symptoms of Serious Muscle, Bone, or Joint Injuries:

Always suspect a serious injury when the following symptoms are present:

- Significant deformity
- Bruising and swelling
- Inability to use the affected part normally
- Bone fragments sticking out of a wound
- Victim feels bones grating: victim felt a snap or pop at the time of injury
- The injured area is cold and numb
- Cause of the injury suggests that the injury may be severe.

If any of these conditions exists, call 9-1-1 / (951) 787-7911 immediately and administer care to the victim until the paramedics arrive.

Treatment for muscle or joint injuries:

Bone and joint injuries have similar signs and symptoms where a victim may have:

- Loss of function
- Swelling and discoloration
- Tenderness and pain

Emergency treatment is the same. One should expose the injury, control any bleeding and immobilize the injury.

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Treatment for broken bones:

If you have established that the victim has a broken bone, and you have called 9-1-1 / (951) 787-7911, all you can do is comfort the victim, keep him/her warm and still and treat for shock if necessary (see "Caring for Shock: section)

Moving an Injured Person

If injury involves neck or back, **DO NOT** move victim unless absolutely necessary. Wait for Paramedics.

Concussions:

To comply with California Assembly Bill #2007, all Board Members, Managers and Coaches will be required to complete the online course offered by the Centers for Disease Control and Prevention. Assembly Bill #2007 requires parents to be notified when their child is removed from sporting activities due to suspected concussions. Additionally, training shall be offered on a yearly basis for coaches and administrators. Concussions are defined as <u>any</u> blow to the head. Special precautions should be taken to ensure the person receives immediate medical attention.

Upon any hit to the head:

- If a player, remove player from the game.
- See that victim gets adequate rest.
- Note any symptoms and see if they change within a short period of time.
- If the victim is a child, tell parents about the injury and have them monitor the child after the game.
- Urge parents to take the child to a doctor for further examination.
- If the victim is unconscious after the blow to the head, diagnose head and neck injury. DO NOT MOVE the victim. Call 9-1-1 / (951) 787-7911 immediately (see below on how to treat head and neck injuries)

Head and Spine Injuries

- When to suspect head and spine injuries:
 - o A fall from a height greater than the victim's height.
 - Any bicycle, skateboarding, roller blade mishap.
 - A person found unconscious for unknown reasons.
 - Any injury involving severe blunt force to the head or trunk, such as from a bat or line drive baseball.
 - Any injury that penetrates the head or trunk, such as impalement.
 - o A motor vehicle crash involving a driver or passengers not wearing safety belts.
 - Any person thrown from a motor vehicle.
 - Any injury in which a victim's helmet is broken, including a motorcycle, batting helmet, industrial helmet.

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- Symptoms of Head and Spine Injuries
 - Changes in consciousness
 - Severe pain or pressure in the head, neck or back
 - Tingling or loss of sensation in the hands, fingers, feet, and toes
 - o Partial or complete loss of movement of any body part
 - Unusual bumps or depressions on the head or over the spine
 - Blood or other fluids in the ears or nose
 - Heavy external bleeding of the head, neck, or back
 - Seizures
 - Impaired breathing or vision as a result of injury
 - Nausea or vomiting
 - Persistent headache
 - Loss of balance
 - o Bruising of the head, especially around the eyes and behind the ears

General Care for Head and Spine Injuries

- 1) Call 9-1-1 / (951) 787-7911 immediately.
- 2) Minimize movement of the head and spine.
- 3) Maintain an open airway.
- 4) Check consciousness and breathing.
- 5) Control any external bleeding.

Caring for Shock

Shock is likely to develop in any serious injury or illness. Signals of shock include:

- Restlessness or irritability
- Altered consciousness
- Pale, cool, moist skin
- Rapid breathing
- Rapid pulse

Caring for shock involves the following simple steps:

- Have victim lie down. Helping the victim rest comfortably is important because pain can intensify the body's stress and accelerate the progression of shock.
- · Control any external bleeding.
- Help the victim maintain normal body temperature. If the victim is cool, try to cover him or her to avoid chilling

ORANGECREST LITTLE LEAGUE



- Try to reassure the victim (talk to them).
- Elevate the legs about 12 inches unless you suspect head, neck or back injury or possible broken bones involving the hips or legs. If you are unsure of the victim's condition, leave him or her lying flat
- Do not give the victim anything to eat or drink, even though he or she is likely to be thirsty
- Call 9-1-1 / (951) 787-7911 immediately. Shock cannot be managed effectively by First-Aid alone.

Heat Related Emergencies

Signs of Heat Exhaustion may include:

- Fatigue
- Irritability
- Headache
- Faintness
- Weak, rapid pulse
- Shallow breathing
- Cold clammy skin
- Profuse perspiration

Caring for Heat Exhaustion includes:

- Remove the victim from the heat source
- Get victim out of the sun
- Provide the victim ample rest
- Provide fluids in small amounts

Signs of Heat Stroke may include:

- Extremely high body temperature (106 degrees F or higher)
- Hot, red, dry skin
- Absence of sweating
- Rapid pulse
- Convulsions
- Sometimes unconscious

Caring for Heat Stroke:

- Call 9-1-1 / (951) 787-7911 immediately
- Cool the body immediately
- Loosen and remove clothing
- · Apply wet towels to assist with cooling off the victim
- Monitor the victim's Airway, Breathing and Circulation (ABC's)
- Do not attempt to give fluids to persons who are semiconscious or unconscious

Other Injuries

Contusion to Sternum:

Contusions to the Sternum are usually the result of a line drive that hits a player in the chest. These injuries can be very dangerous because if the blow is hard enough, the heart can become bruised and start filling

ORANGECREST LITTLE LEAGUE



up with fluid. Eventually the heart is compressed and the victim dies. Do not downplay the seriousness of this injury.

- 1) If a player is hit in the chest and appears to be all right, urge the parents to take their child to the hospital for further examination.
- 2) If a player complains of pain in his chest after being struck, immediately call 9-1-1 / (951) 787-7911 and treat the player until professional medical help arrives.

Sudden illness

When a victim becomes suddenly ill, he or she often looks and feels sick.

Symptoms of sudden illness include:

- Feeling light-headed, dizzy, confused, or weak
- Changes in skin color (pale or flushed skin), sweating
- Nausea or vomiting
- Diarrhea
- Changes in consciousness
- Seizures
- Paralysis or inability to move
- Slurred speech
- Impaired vision
- Severe headache
- Breathing difficulty
- Persistent pressure or pain

Care for Sudden Illness

- 1) Call 9-1-1 / (951) 787-7911
- 2) Help the victim rest comfortable
- 3) Keep the victim from getting chilled overheated
- 4) Reassure the victim
- 5) Watch for changes in consciousness and breathing
- 6) Do not give anything to eat or drink unless the victim is fully conscious

Choking

Partial Obstruction with Good Air Exchange:

Symptoms may include forceful cough with wheezing sounds between coughs.

Treatments: Encourage victim to cough as long as good air exchange continues. DO NOT interfere with attempts to expel object.

Partial or Complete Airway Obstruction in Conscious Victim

Symptoms may include: Weak cough; high-pitched crowing noises during inhalation; inability to breathe; cough or speak; gesture of clutching neck between thumb and index finger; exaggerated breathing efforts; dusky or bluish skin color.

Treatment - The Heimlich Maneuver:

Stand behind the victim

ORANGECREST LITTLE LEAGUE



- Reach around victim with both arms under the victim's arms
- Place thumb side of fist against middle of abdomen just above the navel
- Grasp fist with other hand
- Give quick, upward thrusts
- Repeat until object is coughed up

Breathing Problem/Emergency Breathing

If Victim is not Breathing:

- 1) Position victim on back while supporting head and neck.
- 2) With victim's head tilted back and chin lifted, pinch the nose shut
- 3) Give two (2) slow breaths into victim's mouth. Breath in until chest gently rises.
- 4) Check for a pulse at the carotid artery (use fingers instead of thumb).
 - 5) If pulse is present but person is still not breathing give 1 slow breath about every 5 seconds. Do this for about 1 minute (12 breaths).
- 6) Continue rescue breathing as long as a pulse is present but person is not breathing.

Once a victim requires emergency breathing you become the life support for the person – without you the victim would be clinically dead. You must continue to administer emergency breathing and/or CPR until the paramedics get there.

Emergency Treatment of Dental Injuries

Avulsion (Entire Tooth Knocked Out)

If a tooth is knocked out, place a sterile dressing directly in the space left by the tooth. Tell the victim to bite down.

- 1) Dentists can successfully replant a knocked-out tooth if they can do so quickly and if the tooth has been cared for properly.
- 2) Avoid additional trauma to tooth while handling. **Do Not** handle tooth by the root. **Do Not** brush or scrub tooth. **Do Not** sterilize tooth.
- 3) Keep the tooth moist (placing it in a cup of water).

Time is very important. Re-implantation within 30 minutes has the highest degree of success rate. **TRANSPORT IMMEDIATELY TO DENTIST.**

Burns

Thermal burns are characterized as First, Second and Third degrees. Thermal burns can result from a variety of causes which included sunburns, fire and other sources of extreme heat.

Treatment for thermal burns includes the following:

- Remove the victim from the heat source
- Cool the burn with water
- Loosely cover the burned area with clean dressing (Moist dressing for first and second degree burns, dry dressings involving open blisters).

Chemical burns typically occur in industrial settings. First-Aid treatment include:

- Removing excess chemical from clothing
- Flood affected area for 15-30 minutes
- Cover affected area with a dry dressing





Penetrating Objects:

If an object, such as a knife or a piece of glass or metal, is impaled in a wound:

- 1) Do not remove it.
- 2) Place several dressing around abject to keep it from moving (stabilizing it).
- 3) Bandage the dressings in place around the object.
 - 4) If object penetrates chest and victim complains of discomfort or pressure, quickly loosen bandage on one side and reseal. Watch carefully for recurrence. Repeat procedure if necessary.
- 5) Treat for shock if needed (see "Care for Shock") section).
- 6) Call 9-1-1 / (951) 787-7911 for professional medical care.

Asthma and Allergies:

Many children suffer from asthma and/or allergies (allergies especially in the springtime.) Allergy symptoms can manifest themselves to look like the child has a cold or flu while children with asthma usually have difficult time breathing when they become active. Allergies are usually treated with prescription medications. If a child is allergic to insect stings/bites or certain types of food, you must know about it because these allergic reactions can become life threatening. Encourage parents to fill out the medical history forms (included in the appendix of this safety manual). Study their comment and know which children on your team need to be watched.

Likewise, a child with asthma needs to be watched. If a child starts to have an asthma attack, have him stop playing immediately and calm him down till he/she is able to breathe normally. If the asthma attack persists, dial 9-1-1 / (951) 787-7911 and request emergency service.





SAFETY MANUAL:

- Each team manager will be provided an electronic copy of the safety manual in the beginning of the season. The safety manual will also be posted on the Orangecrest Little League web site.
- Managers will be responsible for reading and applying Orangecrest Little Leagues safety policies in all league related events.
- The head umpire will be issued a copy of the OCLL safety manual.
- The Snack Bar will maintain a copy of the safety manual.
- The safety manual will include phone numbers for emergency services, and board members. It will also include OCLL Code of Conduct and information for treating injured players.





SEE SOMETHING, SAY SOMETHING:

Orangecrest Little League is dedicated in providing a safe environment for players, volunteers and spectators. Please report any unsafe conditions or practices to any OCLL Board Member. OCLL Board Members are present at the Orange Terrace Park during all official games. Additional contact information is provided on page 9 of this manual.

ACCIDENT REPORTING PROCEDURE

What to report

An incident that causes any player, manager, coach, and umpire or volunteer to receive medical treatment and/or First-Aid must be reported to the OCLL Safety Officer. This includes even passive treatments such as the evaluation and diagnosis of the extent of the injury.

When to report

All such incidents described above must be reported to the OCLL Safety Officer within 24 hours of the incident. The OCLL Safety Officer information can be located on the OCLL.com website and/or on the Board of Directors List located in the front of this manual.

Team Safety Officer/Manager's Responsibility

The Team Safety Officer will fill out the OCLL *Accident Investigation Form* and submit it to the OCLL Safety Officer *within 24 hours of the incident.* If the team does not have a Safety Officer then the Team Manager will be responsible for filling out the form and turning it in to the OCLL Safety Officer. (OCLL Accident Investigation Forms can be found on at OCLL.com or in the Incident Recording Book located in the Snack Bar at the Orange Terrace Park.

Accidents involving spectators or volunteers participating in a sanctioned OCLL event, (i.e. spectator injuries, Snack Bar injuries and third-party injuries) shall be handled directly the OCLL Safety Officer.

OCLL Safety Officer's Responsibilities

Within 24 hours of receiving the OCLL Accident Investigation Form, the OCLL Safety Officer will contact the injured party or the party's parents and;

- Verify the information received;
- Obtain any other information deemed necessary;
- · Check on the status of the injured party; and
- In the event an injured party requires professional medical treatment, (i.e. Emergency Room visit, doctor's visit, etc.) advise the provisions of the Orangecrest Little League's insurance coverage and the process for submitting any claims.





If the extents of the injuries are more than minor in nature, the OCLL Safety Officers shall periodically call the injured party to:

- · Check on the status of any injuries, and
- 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).





INSURANCE POLICIES

Little League accident insurance covers only those activities approved or sanctioned by Little League Baseball, Incorporated.

WARNING: Protective equipment cannot prevent all injuries a player might receive while participating in Baseball / Softball.

WHAT PARENTS SHOULD KNOW ABOUT LITTLE LEAGUE® INSURANCE

The Little League Insurance Program is designed to afford protection to all participants at the most economical cost to the local league. The Little League Player Accident Policy is an excess coverage, accident only plan, to be used as a supplement to other insurance carried under a family policy or insurance provided by an employer. If there is no primary coverage, Little League insurance will provide benefits for eligible charges, up to Usual and Customary allowances for your area. A \$50 deductible applies for all claims, up to the maximum stated benefits.

This plan makes it possible to offer exceptional, affordable protection with assurance to parents that adequate coverage is in force for all chartered and insured Little League approved programs and events.

If your child sustains a covered injury while taking part in a scheduled Little League Baseball or Softball game or practice, here is how the insurance works:

- 1. The Little League Baseball and Softball accident notification form must be completed by parents (if the claimant is under 19 years of age) and a league official and forwarded directly to Little League Headquarters within 20 days after the accident. A photocopy of the form should be made and kept by the parent/claimant. 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 a claim for benefits are to be provided within 90 days after the accident. In no event shall such proof be furnished later than 12 months from the date the initial 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 International, 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 after the 52-week time limit when: (a) Deferred medical benefits apply when necessary treatment requiring the removal of a pin /plate, applied to transfix a bone in the year of injury, or scar tissue removal, after the 52-week time limit is required. The Company will pay the Reasonable Expense incurred, subject to the Policy's maximum limit of \$100,000 for any one injury to any one Insured. However, in no event will any benefit be paid under this provision for any expenses incurred more than 24 months from the date the injury was sustained. (b) If the Insured incurs Injury, to sound, natural teeth and Necessary Treatment requires treatment for that Injury be postponed to a date more than 52 weeks after the injury due to, but not limited to, the physiological changes of a growing child, the Company will pay the lesser of: 1. A maximum of \$1,500 or 2. Reasonable Expenses incurred for the deferred dental treatment. Reasonable Expenses incurred for deferred dental treatment are only covered if they are incurred on or before the Insured's 23rd birthday. Reasonable Expenses incurred for deferred root canal therapy are only covered if they are incurred within 104 weeks after the date the Injury occurs.

No payment will be made for deferred treatment unless the Physician submits written certification, within 52 weeks after the accident, that the treatment must be postponed for the above stated reasons. Benefits are payable subject to the Excess Coverage and the Exclusions provisions of the Policy. We hope this





brief summary has been helpful in providing a better understanding of the operation of the Little League insurance program.

Claims must be filed with the OCLL Safety Officer and will be forwarded to Little League Baseball, Incorporated.

PO BOX 3485, WILLIAMSPORT, PA, 17701. Claim officers can be contacted at (717) 327-1674 and fax (717) 326-1074.

Contact OCLL Safety Officer for more information.





GENERAL FACILITY

- All dugouts will have protective awnings to stop fly balls.
- All dugouts will have bat racks.
- The backstops will be padded and painted green for the safety of the catcher.
- The dugouts will be clean and free of debris at all time.
- Home plate, batter's box, bases and the area around the pitcher's mound will be checked periodically for tripping and stumbling hazards.
- Materials used to mark the field will consist of a non-irritating white pigment (no lime).
- Chain-link fences will be checked regularly for holes, sharp edges, and loose edges and will be reported to the city of Riverside for repairs.
- The yellow safety caps on the outfield chain-link fences will be checked regularly for cracks and will be reported to the city of Riverside for repair.
- All volunteers and spectators are encouraged to assist in keeping the Orange Terrace Park free from liter.
- Orangecrest Little League leases the Snack Bar and ballfields from the city of Riverside.
 Areas needing repairs can be reported to an on-duty OCLL Board Member or to the city of Riverside.





EQUIPMENT:

The Equipment Manager is an elected OCLL Board Member and is responsible for purchasing and distributing shared equipment to the individual teams. The shared equipment is checked before being distributed and is the Manager's responsibility to maintain it. Managers should inspect equipment before each game and each practice.

The OCLL Equipment Manager will promptly replace damaged and ill-fitting equipment provided by OCLL.

At the end of the season, all equipment provided by OCLL, must be returned to the OCLL Equipment Manager. .

- OCLL will supply a limited number of helmets to be used by the team. All helmets provided by OCLL, or privately purchased by individual team members, will meet NOCSAE standards.
- Use of a helmet by the batter and all base runner is mandatory.
- Use of a helmet by a player/base coach is mandatory.
- Use of a helmet by an adult base coach is optional.
- All male players must wear athletic supporters.
- Male catchers must wear the metal, fiber or plastic type cup and a long-model chest protector.
- Female catchers must wear long or short model chest protectors.
- All catchers must wear chest protectors with neck collar, throat guard, shin guards and catcher's helmet, all of which must meet Little League specifications and standards.
- All catchers must wear a mask, "dangling" type throat protector and catcher's helmet during practice, pitcher warm-up, and games. NOTE: Skullcaps are not permitted.
- If the gripping tape on a bat becomes unraveled, the bat must not be used until it is repaired.
- Bats with dents, or that are fractured in any way, must be discarded.
- Ensure the equipment issued to you is appropriate for the age and size of the kids on your team. If it is not, get replacements from the Equipment Manager.
- Make sure helmets fit and are used properly.
- Replace questionable equipment immediately by notifying the OCLL Equipment Manager.





FIELD MAINTAINANCE EQUIPMENT:

The following applies to all storage sheds /bins used by Orangecrest Little League and those who have been issued, or are in possession of, keys by OCLL for its use.

- Keys to the equipment sheds will only be issued by the OCLL President.
- A record shall be kept of all individuals possessing keys.
- Keys will be returned to the OCLL President immediately once one ceases to have responsibilities relating to these areas.
- All storage sheds/bins will be kept locked at all times.
- All individuals with keys to the equipment sheds/bins are aware of their responsibility for the orderly and safe storage of the equipment and supplies inside.
- Before using, one shall orientate themselves to the proper use of equipment or machinery.
- Keep products in their original containers with the labels in place.
- Disposal of outdated products as recommended.
- It is the responsibility of all league personnel to make sure that field equipment is returned in a safe position and field storage bins are secured.
- Please read written instructions to the operation of equipment before its use.

Remember Safety is Everyone's Job!!

Motorized Carts

Motorized carts will:

- Be operated by appointed personnel only.
- Never be operated under the influence of alcohol or drugs.
- Not be operated by any person under the age of 16.
- Never be operated in a reckless or careless manner.
- Be stored appropriately when not in use with the brakes in the on position, with the ignition
 off.
- Never be operated or ridden in a precarious or dangerous way.





SNACK BAR SAFETY

- Snack Bar Manager will be trained in safe food handling/preparation and procedures. People
 working in the Snack Bars will be oriented in safe food preparation. Orientation will cover safe
 use of the equipment. Orientation will be provided by the Snack Bar Manager or other volunteer
 knowledgeable with the equipment.
- No person under the age of sixteen will be allowed behind the counter in the Snack Bar without approval from the Snack Bar Manager.
- Cooking equipment will be inspected periodically and repaired or replaced when needed.
- Propane tanks on the grill will be turned off at the end of the day.
- Food not purchased by OCLL to sell in its Snack Bar will not be cooked, prepared, or sold in the Snack Bars.
- Cooking grease will be stored safely in containers away from open flames.
- Carbon Dioxide tanks will be secured with chains so they stand upright preventing them from falling over. Report damaged tanks or valves to the supplier and discontinue use. Snack Bar
- Cleaning chemicals must be clearly labeled and stored away from food in a location designated by the Snack Bar Manager.
- A certified Fire Extinguisher suitable for grease fires must be placed in plain sight at all times.
- All Snack Bar workers are to be instructed on the use of the fire extinguishers.
- A fully stocked First-Aid Kit will be placed in each Snack Bar.
- The door to the Snack Bar shall not be locked or blocked while people are inside.

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WEATHER

Most of our days in Southern California are warm and sunny but there are those days when the weather turns bad and creates *unsafe weather conditions*.

Rain:

- If it begins to rain:
- Evaluate the strength of the rain. Is it a light drizzle or is it pouring?
- Determine the direction the storm is moving.
- Evaluate the playing field as it becomes more and more saturated.
- Stop practice if the playing conditions become unsafe. During games, consult with the other manager, the umpire and the on-duty Board Member to formulate a decision.

Lightning:

If a player should collapse as a result of heat exhaustion, call **9-1-1** / **(951) 787-7911** immediately. If conscious, have the player to drink water and use the instant ice bags supplied in your First-Aid The average lightning stoke is 5-6 miles long with up to 30 million volts at 100,000 amps flow in less than a tenth of a second.

The average thunderstorm is 6-10 mile wide and moves at a rate of 25 miles per hour.

Once the leading edge of a thunderstorm approaches to within 10 miles, you are at immediate risk due to the possibility of lightning strokes coming from the storm's overhanging anvil cloud. This fact is the reason that many lightning deaths and injuries occur with clear skies overhead.

On average, the thunder from a lightning stroke can only be heard over a distance of 3-4 miles, depending on terrain, humidity and background noise around you. By the time you can hear the thunder, the storm has already approached to within 3-4 miles!

If you can **HEAR**, **SEE**, **OR FEEL a THUNDERSTORM**:

- Suspend all games and practices immediately.
- Stay away from metal including fencing and bleachers.
- Do not hold metal bats.
- Get players to walk, not run to their parent's or designated driver's cars and wait for y our decision on whether or not to continue the game or practice.

Hot Weather:

Precautions must be taken in order to make sure the players on your team do not *dehydrate*.

- Encourage players to take drinks of water when coming on and going off the field between innings.
- If a player looks distressed while standing in the hot sun, substitute that player and get him/her into the shade of the dugout.





Kit to cook him/her down until the emergency medical team arrives. (See section on Hydration)

HYDRATION

Good nutrition is important for children. Sometimes, the most important nutrient children need is *water* – especially when they're physically active. When children are physically active, their muscles generate *heat* thereby increasing their *body temperature*. As their body temperature rises, their cooling mechanism – sweat - kicks in. When sweat evaporates, the body is cooled. Unfortunately, children get hotter than adults during physical activity and their body's cooling mechanism is not as efficient as adults. If fluids aren't replaced, children can become *overheated*.

We usually think about dehydration in the summer months when hot temperatures shorten the time it takes for children to become overheated. But keeping children well hydrated is just as important in the winter months. Additional clothing worn in the colder weather makes it difficult for sweat to evaporate, so the body does not cool as quickly.

It does not matter if it's January or July, thirst is not an indicator of fluid needs. Therefore, *children must* be encouraged to drink fluids even when they don't feel thirsty.

Managers and coaches should schedule drink breaks every 15 to 30 minutes during practices on hot days, and should encourage players to drink between every inning.

During any activity, water is an excellent fluid to keep the body well hydrated. *Caffeinated beverages (tea, coffee, and colas) should be avoided as they can further dehydrate the body.*

EVACUATION PLAN

Severe storms, lightning, earthquakes and fire are all possible in Southern California. For this reason, OCLL must have an *evacuation plan*.

- If an emergency is declared it will be announced over the P.A. System or relayed between fields by a member of the Board of Directors.
- At that time all players will return to the dugout and wait for their parents to come and get them.
- If a player's parent is not attending the game, the Manager will take responsibility for evacuating that child.
- Once parents have obtained their children, they will proceed to their cars in a calm and orderly manner.
- Drivers will then proceed slowly and cautiously out of the facility, observing the 5 MPH speed limit.
- Once outside the facility, drivers will observe the posted speed limits.





FACILITY SURVEY

A facility survey will be conducted at the beginning of each year to aid in finding and helping to correct any facility concerns. The facility survey will be filed with the safety program to be reviewed annually in aiding with the continual improvement of the program.

Lighting Standards and safety audit

Part of the facility survey will be the lighting standards and safety audit which will be conducted annually to insure proper lighting for Orangecrest Little League facilities that will have night games.

FORMS

Form A Field Inspection Form (Also available in Incident Recording Book)

Form B Equipment Inspection Form (Also available in Incident Recording Book)

Form C Snack Bar Inspection Form

Form D Volunteer Application

<u>Little League Baseball National Facility Survey</u>

Orangecrest Community Park Field Map





Form A Field Inspection Form

Field Condition Checklist	O.K.	Needs Repair	Comments
Backstop			
Home Plate			
Bases secure			
Bases condition			
Pitcher's mound and rubber			
Batter's box condition			
Infield condition			
Infield fence condition			
Infield marked			
Outfield condition			
Outfield fence			
Foul lines marked			
Dugouts	O.K.	Needs Repair	Comments
Fencing			
Benches			
Roof			
Bat racks			
Helmet racks			
Clean			
Spectator Area	O.K.	Needs Repair	Comments
Bleachers			
Hand Rails			
Clean			
No smoking			
Parking area			





Form B Equipment Inspection Form

Catchers Equipment	O.K.	Needs Repair	Comments
Helmet			
Face Mask			
Throat Protector			
Chest protector			
Shin Guards			
Catcher's cup (boys)			
Catcher's glove			
	0.14		
Safety Equipment	O.K.	Needs Repair	Comments
First-Aid Kit			
Medical release forms			
Ice pack			
Injury Report Forms			
D	0.14		
Players Equipment	O.K.	Needs Repair	Comments
Batters helmet			
Bats			
Shoes checked			
Jewelry removed			
Uniforms checked			
Little League patch			





Form C Snack Bar Inspection Form

Snack Bar Weekly Safety Checklist Check off conditions that are in compliance, immediately correct unchecked items

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UTENSILS ☐ Multiservice utensils are being washed by one of the following means only: hand washing in a three compartment sink (wash-rinse-sanitize) ☐ Testing materials to adequately test sanitizing methods are readily available. ☐ All utensils are clean and well maintained. ☐ Damaged or unapproved utensils have been repaired or replaced. ☐ Utensils are properly protected during storage. FLOORS / WALLS / CEILINGS ☐ Floors are clean, well maintained and in good repair. ☐ Walls, ceilings and windows are clean, well maintained and in good repair. TOILET / DRESSING ROOM / HANDWASHING SINKS ☐ Toilet facilities are clean, well maintained and in good working order.

	Toilet tissue dispensers are full. Legible hand washing signs are properly posted. Ventilation is provided in each restroom and is in proper working order.
	HT AND VENTILATION Adequate lighting and ventilation is provided throughout the facility.
	Exhaust ventilation filters are clean and well maintained. Light fixtures have approved safety covers.
PES	ST CONTROL
	Facility is free from insect and rodent infestations.
	Live animals, birds, or fowl are not located in the facility.
	Outside doors and screen doors are self-closing and closures are in working order.

Self-closing doors in toilet and dressing rooms are working properly.

☐ Single service soap and towel dispensers above all hand wash sinks are operable and full.

REFLISE

ILLI	ODE
	Trash containers are lined with disposable plastic bags at all times.
	Plastic bags are tied before placing in refuse containers.
	Outside trash bin lids are closed.

Outside premises and refuse areas are clean and well maintained.

OPERATION

	Hazardous substances (e.g. chemicals, cleaning supplies) are properly labeled and stored away from food products.
	There are no living quarters within the facility.
	No smoking and First-Aid signs (choking) are properly posted.
	Cleaning equipment and soiled linens are properly stored.
	Returned, damaged, or unlabeled food products are properly stored.
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ш	racinty has a current Environmental freature entitle to operate.
THE	E FOLLOWING CONDITION(S) IS SERIOUS. THE FACILITY MUST CLOSE UNTIL THEY ARE CORRECTED.
	Overflowing sewage (inside or outside)
	No potable water
	No hot water
	No electricity
	Severe rodent or insect infestation
	Actual or potential threat to the public (foods out of temperature, inadequate sanitization, etc.)





Form D Volunteer Application

	teer Application - 2019 paper to complete if additional space is required.
A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE <u>ATTACHED</u> TO COMPLETE THIS APPLICATION.	Please list three references, at least one of which has knowledge of your participation as a volunteer in a youth program:
Name Date Date	Name/Phone
Address	
City State Zip	
Social Security # (mandatory)	IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROUND CHECK BY LAW, PLEASE ATTACH A COPY OF THAT STATE'S
Cell PhoneBusiness Phone	BACKGROUND CHECK, FOR MORE INFORMATION ON STATE LAWS, VISIT OUR WEBSITE: https://www.information.com/lines/accessed-laws .
Home Phone: E-mail Address:	AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(x) 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
Date of Birth	which contain name only searches which may result in a report being generated that may or may not be me), child abuse and
Occupation	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
Employer	Baseball, Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provide
Address	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
Special professional training, skills, hobbies:	President and removal by the Board of Directors for violation of Little League policies or principles.
	Applicant Signature Date
Community affiliations (Clubs, Service Organizations, etc.):	If Minor/Parent Signature Date
Previous volunteer experience (including baseball/softbell and year):	Applicant Name(please print or type)
Do you have children in the program? Yes No	NOTE: The local Little League and Little League Baseball, incorporated will not discriminate against any person on
If yes, list full name and what level?	the beats of race, creed, color, national origin, marital status, gender, sexual orientation or disability.
2. Special Certification (CPR, Medical, etc.)? (list) Yes No 🗆	
3. Do you have a valid driver's license? Oriver's License#: State	
Driver's License#: State	
4. Have you ever been convicted of or plead no contest or guilty to any crime(s) involving or	
against a minor? If yes, describe each in full: Yes No	LOCAL LEAGUE USE ONLY:
5. Have you ever been convicted of or plead no contest or guilty to any crime(s) Yes No	Background check completed by league officer
If yes, describe each in full:	on
(Answering yes to question 5, does not automatically disqualify you as a volunteer.)	System(s) used for background check (minimum of one must be checked):
6. Do you have any criminal charges pending against you regarding any crime(s)? Yes 🗆 No 🗅	Regulation I(c)(9) Mandates all checks include criminal records and sex offender registry records
If yes, describe each in full: (Answering yes to question 6, does not automatically disqualify you as a volunteer.)	* JDP Sex Offender Registry Data and National Criminal Records check, as mandated in the current season's
	official regulations
7. Have you ever been refused participation in any other youth programs? Yes ☐ No ☐ If yes, explain:	*Please be advised that if you use IDP 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 small directly from JDP in compliance with the Pair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the leager volunteer.
In which of the following would you like to participate? (Checkonsor more.)	associated with the name, which may not necessarily be the league volunteer.
League Official Umpire Manager Concession Stand	Only attach to this application copies of background check reports that reveal convictions of this application.
Coach Field Maintenance Scorekeeper Other	
	East Sprished: 10/Y/2011





Form E Medical Release



Little League: Baseball and Softball M E D I C A L R E L E A S E



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

Player:	Dat	e of Birth:	Gende	er (M/F):
Parent (s)/Guardian Name:		Re	lationship:	
Parent (s)/Guardian Name:		Re	lationship:	
Player's Address:		City:	State/	Country:Zip:
Home Phone:	Work Phone:		Mobile Ph	one:
PARENT OR LEGAL GUARDIAN AUT	HORIZATION:		Email:	
			rize my child to	be treated by Certified
Family Physician:		Ph	none:	
Address:		City:	State	c/Country:
Hospital Preference:				
Parent Insurance Co:	Policy I	No.:	Group	ID#:
League Insurance Co:	Policy	No.:	Leagu	ie/Group ID#:
If parent(s)/legal guardian cannot be	reached in case of er	nergency, conta	d:	
Date of last Tetanus Toxoid Booster: The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with ord Mr./Mrs./Ms		elationship to Player		
Name		Phone	Re	elationship to Player
Please list any allergies/medical problem	ns, including those requ	iring maintenance	medication. (i.e.	Diabetic, Asthma, Seizure Disorder)
Medical Diagnosis	Medica	tion	Dosage	Frequency of Dosage
Date of last Tetanus Toxoid Booster:				
The purpose of the above listed information is to	ensure that medical person	nel have details of an	y medical problem w	hich may interfere with or alter treatment.
	Guardian Signature			Date:
FOR LEAGUE USE ONLY:				
League Name:		Lea	ague ID:	
Division:	Team:			Date:

WARNING: PROTECTIVE EQUIPMENT CANNOT PREVENT ALL INJURIES A PLAYER MIGHT RECEIVE WHILE PARTICIPATING IN BASEBALL/SOFTBALL Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.





SPECIFIC BALLFIELD QUESTIONS

Field Identification (List your ballfields 1-20) Use additional forms if	more than 20 fields.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
ASAP - A Safety Awareness Program Limited Edition 10-year Pin Collection This survey can assist in finding areas of focus for your safety plan. During your		7	00	H																	
annual fault inspections, please complete this form and return along with your gualfied safety plan. In return, we'll send you the 2019 Dianey* character collector's pin shown at right featuring Backstop behind home plate. Or enter data on the ASAF celline site through the Uttle League Data Center.		Name: Field 2	Name: Field	Name: Field	Name:	Name:	Name:	Names	Name:	Name:	Name:	Name:	Name:	-	Name:						
Please answer the following questions for each field:	Field #	1	2	3	4	5	6	7	8	_	10	_	12	13	14	15	16	17	18	19	20
GENERAL INVENTORY	(For the following quest)	oris, n	the a	nswe	180	Mo. b	ease	Maye	me s	pace	Diane	.,									
 How many cars can park in designated parking areas? 	None	-	-	-	-				Н				-	-	_	-	-	-			
	1-50	-		-	-	-			Н	-			_					-	_	Н	
	51-100	X	×	X	_				Н								-	_			
	101 or more	1	1	^	-	-	-				-		_							Н	Н
How many people can your bleachers seat?	None/NA 1-100	X	v	X.			_			-	H		-		-					Н	Н
		1	1	1	-	-				-			-			-		_			
	101-300	-	-		_		-	_	H	-			-				Н				
	301-500	-	-	-			-			-			-			-	_		_		Н
	501 or more	-	-			-	-	_	Н	-	H		_		-	_	-		_		Н
 What material is used for bleachers? 	Wood	-	-				-	-		-	-		-		-	_		-	-	-	H
	Metal	u	-		-	-	-			_			_		-	-		_	-	-	
	Other Concrete	X	X	X.	-		-	-	-	-	H		_		-	-	-			_	-
Metal bleachers: Ground wire attached to ground rod?	Yes	-	-	-	_	_	-			_	H	-	_	-	-	-	Н	-	-	_	\vdash
5. Wood bleachers: Are inspected annually for safety?	Yes			-	-		-	_	H	-	H	-	_	-	-	-	-	_	_	_	H
6. Is a safety railing at the top/back of bleachers?	Yes	-	_	-	-		-		H	_	-		_	-	_	-	-	-	-	-	\vdash
7. Is a handrail up the sides of bleachers?	Yes	-	_		-	_	-	_	H	-	H	-	-	H	-	-	Н	_		_	-
8. Is telephone service available?	Permanent		_		_								_	_		-	H	_		_	-
	Cellular	X	X.	X	_	_	_	-	_	-	_	L	_	_	_	_	H	_	_	_	H
Is a public address system available?	Permanent							1							_		-	_			
	Portable	X	X	X	_		_			_	_	L	_	_	_	_	_	_	_	_	_
10. 1s there a pressbox?	Yes										L	L				_					-
11. Is there a scoreboard?	Yes	X									L	L	_	_		_	L	_	_	_	_
12. Adequate bathroom facilities available?	Yes	X	X	-																	-
13. Permanent concession stands?	Yes	X	X	X								_		_			_	_	_	_	_
14. Mobile concession stands?	Yes		1	187																	









	Field #	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19 20
FIELD															(VIII)					
15. Is field completely fenced?	Yes	X	X	¥.																_
16. What type of fencing material is used?	Chainlink	1	V	X															_	_
	Wood	-	-				_		_	L	_		_	_		_				-
	Wire	-	_		_		_	L	_	-			_	-	-	-	_	-	-	+
17. What base path material is used?	Sand, day, soil mix	X	X	X	-	_	_	-	-	-		_	_	-	-	-	_	-	_	+
	Ground burnt brick	+	_		Н	-	-	H	-	-			-			-	-		-	+
	Other:	-	7	0	Н		-	-	-	-	-	-				-	_			+
18. What is used to mark baseline?	Non-caustic lime Spray paint	1	F	X	Н			Н				-	_		-		_			_
	Commerc'l marking	+	-		Н															
19. Is your the infield surface grass?	Yes	+			-											Т				
20. Does field have conventional dirt pitching mound?	Yes	V	X	×		Т									П					. 15
21. Does field have a temporary pitching mound?	Yes	1		-									_			-				
22. Are there foul poles?	Yes	×	×	×.																
23. Backstop behind home plate?	Yes	14	7	X																\perp
PERFORMANCE AND PLAYER SAFETY		9)810	1							190			VIII.							
24. Is there an outfield warning track?	Yes																			_
24.a. If yes, what width is warning track? Please specify:	(Width in feet)																			
25. Batter's eye (screen/covering) at center field?	Yes	У.	X																	
26. Ptcher's eye (screen/covering) behind home plate?	Yes	-																- 1		
27. Are there protective fences in front of the dugouts?	Yes	X	X.	1		L														
26. Is there a protected, on-deck batter's area? (On-deck areas have been eliminated for axis 12 and below.)	Yes				-															
29. Do you have fenced, limited access bull pens?	Yes	X	X	X.																
30. Is a first aid kit provided per field?	Yes	X	X	X																
31. Do bleachers have spectator foul ball protection?	Overhead screens			1																
	Fencing behind	X	×	X																
32. Do your bases disengage from their anchors? (Mandatory since 2008)	Yes	X	X	×																
33. 1s the field lighted?	Yes																			
34. Are light levels at/above Little League standards?	Yes	1																		
(50 footcandles infield/30 footcandles outfield)	Don't know	×	y.	X																
35. What type of poles are used?	Wood*				Г	П	Г				Г		Г							
(Wood poles have not been allowed by Little League	Steel	×	X	X		Г														
for new construction of lighting since 1994)	Concrete	1		1		Г										1				
36. Is electrical wiring to each pole underground?	Yes	X	メ	x		Г	Г													
37. Ground wires connected to ground rads on each pole?	Yes		X	×		Г										1				
38. Which fields were tested/inspected in the fast two years?	Electrical System	1		-	Г	П	П				Г	Г	Г	Г		П	-			
Please indicate month/year testing was done (example: 3/10	PROFILE OF PARTICIPATION																			
39. Fields tested/inspected by qualified technician?	Electrical System																2			
**************************************	Light Levels						Г				Г	Г								





WEST THE PARTY OF	Field #	1	2	3	4	5	6	7	8	9	10	11	12	13	14 1	5	16 1	7 18	19 20
FACILITY MANAGEMENT																			
40. Which fields have the following limitations:													n i				1		1
a. Amount of time for practice?	Yes															_			
b. Number of beams or games?	Yes																		
c. Scheduling and/or timing?	Yes																		
41. Who owns the field?	Municipal	Х	X	×					2										
	School															1			ш
	League										3								
42. Who is responsible for operational energy costs?	Municipal															1	1		
	School																	L	
	League																		
43. Who is responsible for operational maintenance?	Municipal																		
	School															1			
	League	X	X	X												1	4		
44. Who is responsible for puchasing improvements	Municipal	173														1	1	L	
for the field - ie bleachers, fances, lights?	School															_		_	
	League	X	X	X	-											1			
	Other															1	_	_	\perp
45. What divisions of baseball play on each field?	T-Ball & Minor	X.	×	*						1						1	1		
	Major	1		X			L	Ш								1	_	_	
	Jr., Sr. & Big		X										_	4		4	1	1	
	Challenger															1	1		
	50 - 70		X		L											4		_	1
46. What divisions of softball play on each field?	T-Ball & Minor															1	1	1	
	Major			L	L	L	L							_		4	_	_	_
	Jr., Sr. & Big															1			
	Challenger																		
47. Do you plan to host tournaments on this field?	Yes																		





FIELD DIMENSION DATA

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

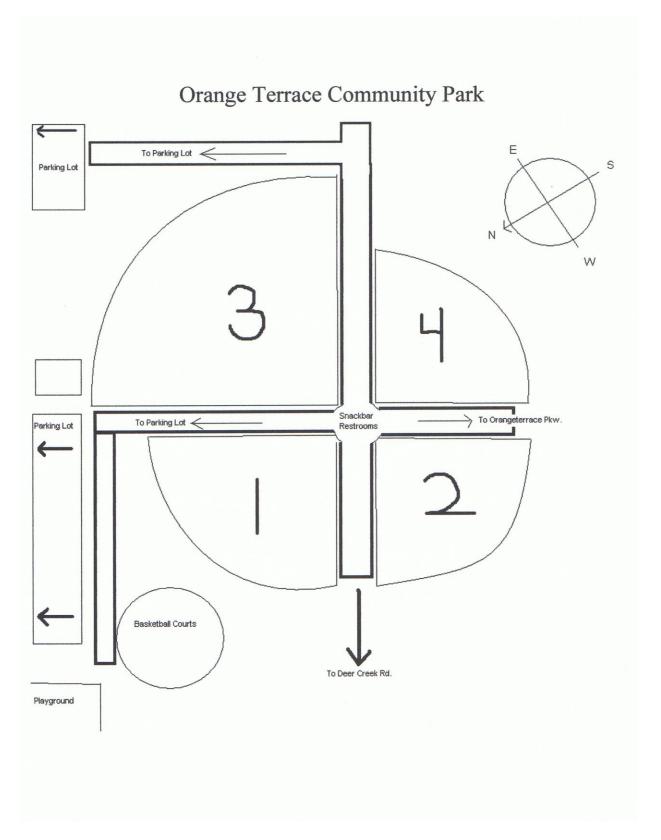
Field	Height of outfield fence	Distance from home plate to:				Foul territory distance from:					
		Cutfield fence				Left field line to fence at:			Right field line to fence at:		
		Left	Center	Right	Back stop	Home	3rd	Outfield foul pole	Home	1st	Outfield foul pole
1	5	200	200	200-	25	23.17	22.55	19.67	23,17	23.00	21.25
2	6	310	327	324	25	23.17	23.33	23.67	23.17	23.08	13.00
3	4-	200	200	200	∂5"	22.67	20.25	23,25	23.67	23.00	22.67
4										-	
5											
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15											
16											
17				0							
18											
19				1							
20											

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











NOTES / COMMENTS										
		 								
		 								