

FAIRFIELD PACIFIC

LITTLE LEAGUE

District 53 Western Region Little League International

2018 Safety Program

Play It Safe



Little League Baseball®





Fairfield Pacific Little League Board of Directors 2017-2018

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Fairfield Pacific Little League

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Fairfield Pacific Little League Safety Program



Police

Fairfield Police – Emergency
Fairfield Police – Non Emergency

707-428-7373
707-428-7300



Fire

Fairfield Fire Safety – Emergency
Fairfield Fire Safety – Non Emergency

707-428-7373
707-428-7300



Medical

Kaiser Permanente
North Bay Medical Center
Sutter Solano Medical Center

707-651-1000
707-429-3600
707-427-4900

Fairfield Pacific Little League Phone Numbers

LEAGUE PHONE (707) 816-0537

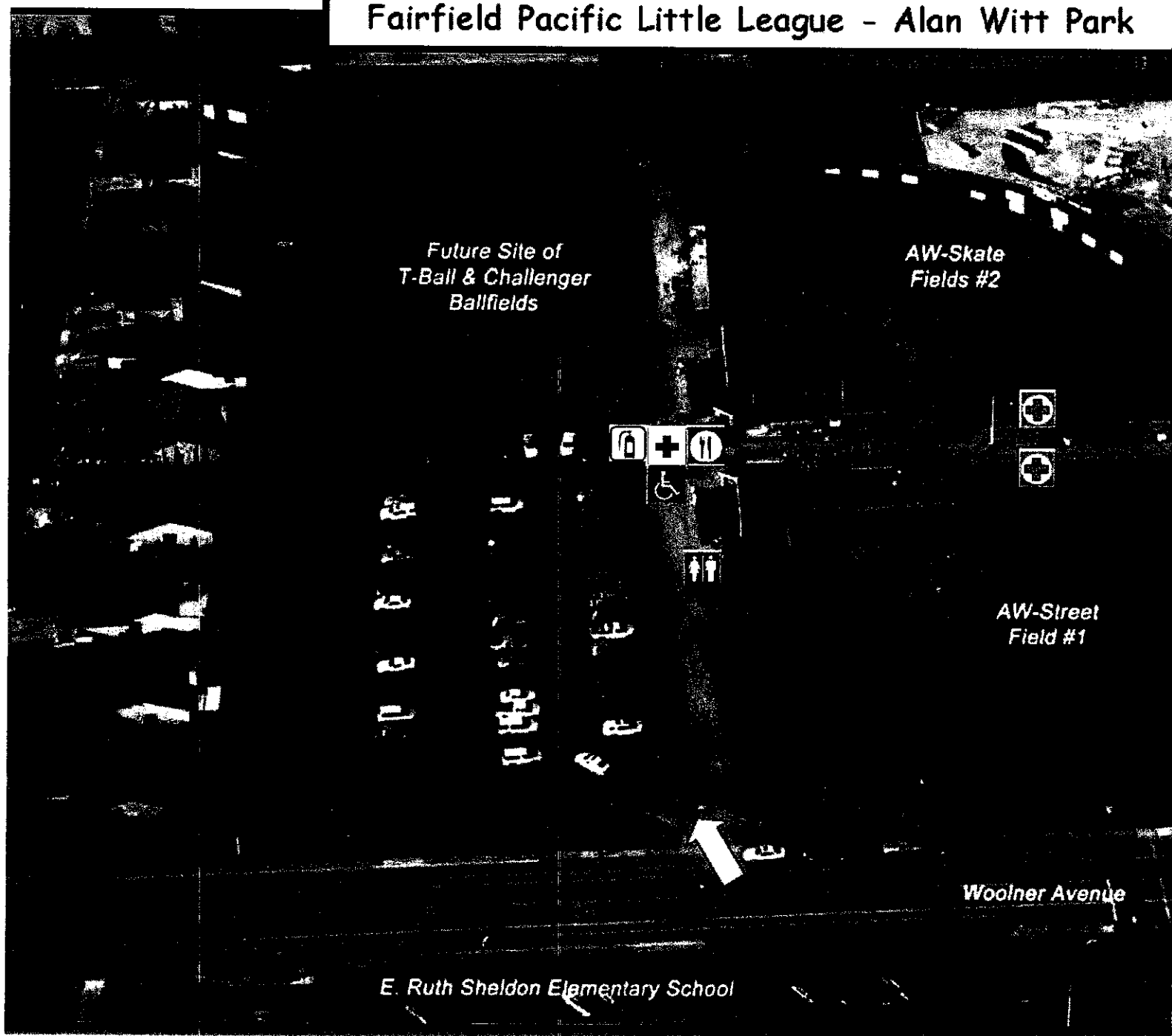
Safety Officer 2018 James Jacobson (707) 980-3416

2018 Fairfield Pacific Little League

District 53 Staff		
Position	District Staff	Email
District Administrator	James Spering	jimzspering@cs.com
ADA / Safety Officer	Tommy Ferguson	tommy9erfn@aol.com
Information Officer	Peggy Taylor	PLT21513@gmail.com
Player Agent	Terri Richie	TRICH707@gmail.com
Secretary	Lana Schultheiss	JOHN32849@comcast.net
Softball Coordinator		
Treasurer		
Umpire-in-Chief	Gale DeMartini	askblue@californiadistrict53.com



Fairfield Pacific Little League - Alan Witt Park



FIRST AID



FIRE
EXTINGUISHER



FIELD EMERGENCY
ACCESS



RESTROOMS



FOOD



HAI
ACC

Play it Safe – It's all of our Responsibility!

Fairfield Pacific Little League



A Safety Awareness Program

What is It?

In 1995, ASAP (A Safety Awareness Program) was introduced with the goal of reemphasizing the position of the Safety Officer “to create awareness, through education and information, of the opportunities to provide a safer environment for kids and all participants of Little League Baseball.” This manual is offered as a tool to place some important information at manager’s and coach’s finger tips.

REMEMEBER

- Safety is everyone's job.
- Prevention is the key to reducing accidents to a minimum.
- Report all hazardous conditions to the FPLL Safety Officer or a FPLL Board member immediately.
- Don't play on a field that is not safe or with unsafe equipment.
- Be sure your players are wearing protective gear, especially catchers and batters.

Safety is everyone's job! ***Report any hazards immediately.***

Check your team's equipment regularly.

LITTLE LEAGUE VOLUNTEER APPLICATION BACKGROUND CHECKS

Requirement: Little League International requires annual, nationwide background checks on any volunteer or hired worker who provides regular service to the league and/or has repetitive access to, or contact with, players or teams (Little League Rulebook Regulation I(c)9). To meet this requirement, Board of Directors, managers, coaches, designated team parent, and umpires are required to complete a Volunteer Application and authorize a background check (Social Security number required). A valid photo driver's license is required to be included with the application.

Data Source: Little League International has contracted with "First Advantage" to provide local leagues with a special internet site that allows members to search a criminal records database of more than 200 million criminal records -instantly. This site provides searches of available criminal records from various repository sources and state level Sex Offender Registries across the 50 states and the District of Columbia. These searches may uncover violent criminals who could pose potential danger to players and associates.

A letter, which includes a copy of the completed background screening report & Summary of Rights, will be sent to every volunteer where a criminal record from the public records database is reported to your local Little League. According to the Fair Credit Reporting Act (FCRA), you must obtain authorization from the applicant before performing a background check (Volunteer Application form authorization).

Sex offender registry data in a few states is obtained through a Name-Only-Search and uses no other identifiers such as date of birth and/or social security number. It is very important to notify all volunteers that if a criminal record is identified in any of these states that use Name-Only-Searches, that person will receive a report from First Advantage showing that his/her name was identified on a criminal record. Please note, this may or may not be the person for whom the league is conducting a background check. Further specific searches will be conducted to determine if the record is actually the potential volunteers.

Policy: It is the policy of the Fairfield Pacific Little League for the league Safety Officer to conduct the required background checks. The information received on the Volunteer Application, as well as any information received through a background check will be maintained with confidentiality. The Safety Officer will be the only league member to have this information unless an issue or potential issue is discovered in a background check. If this occurs, the Safety Officer will share the information with the league president for determination as to the potential volunteer's involvement in Fairfield Pacific Little League. The Volunteer Application and any associated documents will be destroyed at the end of the Little League season.

James Jacobson,
2018 Safety Officer
Fairfield Pacific Little
League

REGULATION I (C) 8 AND 9

(c) Each league shall:

1 Require that all of the following personnel have annually submitted a fully completed official “Little League Volunteer Application” to the local league president, prior to the applicant assuming his/her duties for the current season: Managers, Coaches, Board of Directors members and any other persons, volunteers or hired workers, who provide regular service to the league and/or have repetitive access to, or contact with, players or teams. The “Little League Volunteer Application” must be maintained by the president of the local league board of directors for all personnel named above, for a minimum of the duration of the applicant’s service to the league for that year. Failure to comply with this regulation may result in the suspension or revocation of tournament privileges and/or the local league’s charter by action of the Charter or Tournament Committee in Williamsport.

2 Conduct an annual background check on all personnel that are required to complete a “Little League Volunteer Application” prior to the applicant assuming his/her duties for the current season. No local league shall permit any person to participate in any manner, whose background check reveals a conviction or guilty plea for any crime involving or against a minor. A local league may prohibit any individual from participating as a volunteer or hired worker, if the league deems the individual unfit to work with minors. A local league must conduct a search of the applicable government operated statewide sex offender registry. If no sex offender registry exists in a State /Province, the local league must conduct a statewide/province-wide criminal background check through the appropriate governmental agency unless prohibited by law. Failure to comply with this regulation may result in the suspension or revocation of tournament privileges and/or the local league’s charter by action of the Charter or Tournament Committee in Williamsport. If a local league becomes aware of information, by any means whatsoever, that an individual, including, but not limited to, volunteers, players and hired workers, has been convicted of or pled guilty to any crime involving or against a minor, the local league must contact the applicable government agency to confirm the accuracy of the information. Upon confirmation of a conviction for, or guilty plea to, a crime against or involving a minor, the local league shall not permit the individual to participate in any manner.

Note: Information regarding background checks is available at www.littleleague.org.



Little League® Volunteer Application - 2018

Do not use forms from past years. Use extra paper to complete if additional space is required.

A COPY OF VALUED COMMITMENT IS BEING PROVIDED TO INTERESTED PARTIES. MUST BE ATTACHED TO COMPLETE THIS APPLICATION.

Name		First	Middle	Last	Date
Address					
City	State	Zip			
<p>Send me only information with No Advertising on request.</p>					
Cell Phone	Business Phone				
Home Phone	E-mail Address				
Date of Birth					
Occupation					
Employer					
Address					
Special professional training, skills, hobbies.					
<p>Community affiliations (clubs, service organizations, etc.)</p>					
<p>Previous volunteer experience (the following is optional but useful and free)</p>					
<p>1. Do you have children in the program? If yes, list full name and what level?</p>					
<p>2. Special Certification (CPR, Medical, etc.)? No</p>					
<p>3. Do you have a valid driver's license? Driver's License # State</p>					
<p>4. Have you ever been convicted of or pled guilty to any crime(s) involving or against a minor? If yes, describe each in full.</p>					
<p>5. Have you ever been convicted of or pled guilty to any crime(s)? If yes, describe each in full. (Answering "yes" to question 5, does not automatically disqualify you as a volunteer.)</p>					
<p>6. Do you have any criminal charges pending against you regarding any crime(s)? If yes, describe each in full. (Answering "yes" to question 6, does not automatically disqualify you as a volunteer.)</p>					
<p>7. Have you ever been refused participation in any other youth program? If yes, explain:</p>					
<p>In which of the following would you like to participate? (check one or more)</p>					
<p><input type="checkbox"/> League Official <input type="checkbox"/> Umpire <input type="checkbox"/> Manager <input type="checkbox"/> Concession Stand</p>					
<p><input type="checkbox"/> Coach <input type="checkbox"/> Field Maintenance <input type="checkbox"/> Scorekeeper <input type="checkbox"/> Other</p>					

Effect size like these references, at least one of which has knowledge of your participation as a volunteer in a youth program.

[illegible]

AJ-07E: The focus of the Longwood Hill Wetlands at Boston, MA is provided within the following a general dry portion on the basis of some covered water national forest, and wetland areas, provide a natural environment or stand by.

LOCAL LEAGUE USE ONLY

Background check completed by Inquire officer _____ on _____

System(s) used for background check (minimum of one must be checked):
Regulation (1999) Interdata Print Advantage or another provider that is comparable

* First Advantage ☐ See Offender Registry On to along with National Criminal Records check of at least 281 million records

Notes to be added that if you receive advantage and there is a hit on it to the then after which only items in which matches can be performed you had better not assume that they've been used and not only items in which matches with them as their meaning, just comparing, if you allow, regarding all the (1) that records are added with the name, which may not necessarily be the legal volume.

Only subject to the search on copies of background check, records that reveal volume of a report not on.

Providing Safer

ENVIRONMENTS

Earn Parents' Trust

Providing a safe atmosphere for kids to enjoy themselves is the top priority for any youth organization. Having parents know they can trust the people who are involved in training their children is central to any group's success.

So how can leagues assure parents their children are being supervised by a responsible and trustworthy volunteer? You have to earn their trust.

That's why Little League makes the Child Protection Program available and mandates background checks. Little League's website (www.littleleague.org) contains state-specific information which can help any league fulfill the mandates of the initiative. (See Q&A, page 2.)

The regulation requires every league to annually, at a minimum, check the state's Sex Offender Registry against "all managers, coaches, Board of Directors members and any other persons, volunteers or hired workers, who provide regular service to the league and/or have repetitive access to, or contact with players or teams." (See Regulation I (b) in center column of this page.) Having individuals fill out the Little League Volunteer Application and conduct a background check will allow you to screen any people who have committed offenses in your state and allow you to bar them from contact with children.

Regulation I (b)

"As a condition of service to the league, all managers, coaches, Board of Directors members and any other persons, volunteers or hired workers, who provide regular service to the league and/or have repetitive access to, or contact with players or teams, must complete and submit an official 'Little League Volunteer Application' to the local league president."

Take Checks Further, Protect Better

But many leagues who have done national searches are finding that just checking the state's Sex Offender Registry doesn't turn up all the people whom the league should have concerns around children. So Little League has contracted with Rapsheets.com to allow chartered Little Leagues to run low-cost background checks on a national level, including both criminal records and sex offender registries from 35 jurisdictions.

Currently the Rapsheets checks do not include the states California, Hawaii,

Massachusetts, New Hampshire, South Dakota and Vermont. Leagues in these six states may still use Rapsheets to check for offenses outside of their state, but must still conduct, at a minimum, a check of the Sex Offender Registry for their state for all applicable volunteers.

For just \$1.50 per search, this Internet database search will provide important information to help protect your league. Here are some specifics:

- Instant access to over 160 million criminal records and sex offender registries from 35 jurisdictions;
- Convenient 24-hour web access;
- No membership fees or monthly dues;
- No need to purchase special software;
- All searches are password protected to the league official conducting them, and are maintained for future, no-cost reference by Rapsheets indefinitely.

And where you could spend hours checking all the Sex Offender Registries by county or state, Rapsheets.com provides all that information and more in a fraction of the time. Also, individual state Sex Offender Registries may not include people who have moved into your state, or even people who's crimes don't fit the exact nature of the registry. As example, 35,000 people are on the official Texas Sex Offender Registry, but Rapsheets' Texas state data lists 130,000 people with sex-related charges.

Little League® Child

What do we, as a league, have to do to comply so that we can be chartered for the next season?

The local league is required to have all board members, managers, coaches, and other volunteers or hired workers who provide regular service to the league or/and who have repetitive access to or contact with players or teams fill out the new volunteer application. Additionally, the league will be required to conduct a background check on each of these individuals. Little League Baseball will require each league to sign an agreement on the Charter application that they will comply with Regulations I(b) and I(c) 8 & 9. The leagues will also be required to sign a statement on the tournament enrollment form verifying that the process under the regulations has been completed and implemented. Failure to sign the agreement on the charter application will result in the league not being chartered and failure to fulfill the requirements of the regulations will result in the league's status being referred to the Charter/Tournament committee for action to revoke the league's charter and all privileges.

What type of background check is required by the new regulations?

The new Little League Baseball regulations require each local league to check the Sexual Offender Registry (SOR) in the state where the applicant resides. Where the Sexual Offender Registry is not available, then these leagues must do a criminal background check. However, local leagues may elect to conduct a criminal background check, which exceeds the minimum requirement by the new regulations. For example, a background screening through the Federal Bureau of Investigation or Rapsheets.

What type of offenses are we screening for when we conduct a background check?

Local leagues are conducting a search of the government state-wide Sexual

Offender Registry for anyone who has committed sexual offenses involving minors. An individual who has been convicted or plead guilty to charges involving or against a minor, no matter when the offense occurred, must not be permitted to work with children.

Who in the local league should be responsible to process the background check information?

Little League Baseball recommends the board of directors appoint the local league president and two other individuals to handle the background checks. These individuals may be from the board or individuals outside the board. For instance, the board of directors may appoint individuals who have significant professional background in this area, such as law enforcement officers or individuals with a legal background.

What if an individual has previously had a background check?

Each league must conduct their own background check on the appropriate individuals annually.

If our volunteer base comes from multiple states, in what state do we do the background checks?

Many leagues are located close to the boundaries of other states; these leagues must conduct the background check where the individual resides. The league must attach a copy of a government-issued photo identification to the volunteer application. The residence on the government document will determine where the check must be conducted. The league may elect to utilize Rapsheets for \$1.50 per search.

What will result in termination of a volunteer under the new regulations?

Any background check that reveals a conviction of any crime involving or against a minor must result in immediate termination from the league. Additionally, volunteers who refuse to submit a fully completed Little League Volunteer Application must be

immediately terminated or eliminated from consideration for any position. This includes individuals with many years of service to your league.

What if offenses involving or against minors are pending prior to or after appointment to a position in the local league?

We suggest the individual not be appointed or should be suspended from his/her current position pending the outcome of the charges.

What if there are convictions or other offenses NOT involving or against minors?

A local league may prohibit any individual from participating as a volunteer or hired worker, if the local league board of directors deems the individual unfit to work with minors.

Who is to be made aware of the information found on the background check?

The local league president shall only share personal information contained in the volunteer application, background check or other information obtained through the screening process with other members of the board of directors in order to make personnel decisions. If the information obtained through the background check is public record and causes an individual to not be appointed or to be terminated, Little League Baseball recommends this information be shared with the parents/guardians of the children who have had contact with the individual previously.

Where should these records be maintained and for how long?

The local league president shall retain each volunteer application, background check information, and any other documents obtained on file for the current year of service of that individual. After the local league has completed operation for the current season, the league president shall dispose of the records unless the league has taken action or made a decision based upon

Protection Program

the information contained in the records.
(Check local law to ascertain the length of time you must keep your records.)

What is the timetable for completing the screening of each individual?

The local league must complete the annual screening process prior to the individual assuming his/her duties for the current season. This would include the individual submitting a completed volunteer application and the league completing an appropriate background check.

What resources are available through Little League Baseball to assist in this process?

Leagues can obtain the new volunteer application and background check information for each state through the Little League website at www.littleleague.org. The information on the Little League website contains links directly to state government resources on conducting background checks. Little Leagues are also encouraged to use whatever local resources are available in their communities.

What will it cost my league to implement this new initiative?

Thirty-five states provide a free background online check for sex offenders who have committed violent sex crimes or sex crimes involving children. Eight additional states provide free background checks through an offline process administered by the state. The remaining seven states have a fee requirement that ranges from \$5 to \$18. For more detailed information on costs, visit the Little League website at www.littleleague.org. The league may elect to utilize Rapsheets for \$1.50 per search, except for these states; CA, HI, MA, NH, SD, VT where records are not available.

Where can I find funding assistance to pay for the background checks if necessary?

In the seven states where a fee is

required, Little League suggests that the individual pay for their background check as a condition of service. The league may elect to seek other funding sources from local businesses, sponsors, civic organizations and service clubs.

When should local leagues begin the implementation process of this new initiative?

Immediately, so volunteer applications and background checks are completed prior to individuals assuming their duties for the current season.

Does this new initiative also apply to those individuals that assist the manager and coaches at practices or games?

Yes. Any individual who provides regular service to the league or/and who has repetitive access to or contact with players or teams must fill out the Volunteer Application and go through the background check process.

Who is going to coach the team if a screened manager or coach is no longer able to fulfill his/her duties?

Any permanent replacement can not assume their duties until the volunteer application and background check has been completed. The league may temporarily assign a board member or another screened individual to fill the vacancy until the proper process and appointment has been made.

Should our league wait until the entire screening process has been completed to submit our Charter Application and Insurance Enrollment Form?

No. The appropriate league officers must sign the statement on the form agreeing to adhere to the new regulations requiring the use of the new volunteer application and background screening process as outlined in Regulations I(b) and I(c) 8 & 9. Once this section is completed the balance of the charter application can be completed and submitted to Little League Baseball.

As the league president or an official of the local league, how do I explain the need for this new initiative?

These new requirements are being implemented by Little League and your local league to: protect our children and maintain Little League as a hostile environment for those who would seek to do them harm; protect individuals and leagues from possible loss of personal or league assets because of litigation; take advantage of current technology and laws that have made background check information accessible to your local league.

What is the earliest age for conducting a background check and are background checks required for players?

Little League has determined that age 16 is the minimum age required for background checks for volunteers or hired workers who provide regular service to the league and/or have repetitive access to or contact with players or teams. Little League has come to this determination based on the following: 39 states and the District of Columbia consider age 16 to be the age of consent. States generally view the age of consent as the age in which a minor can be held responsible for their actions in relation to sexual relations. Some states also hold minors at age 16 accountable for certain sexual crimes such as statutory rape. Minors 16 year of age and older can be treated as adults in criminal proceedings. Minors 16 years of age and older when charged with serious crimes are often tried as adults. Minors 16 years of age or older would be most likely to be given more responsibility and be in a position of greater influence over younger participants in the Little League program. No players are required to have a background check unless they are acting in a capacity for the league outside their role of player. (For example, a 17 year old umpiring in a younger division with adult umpires as part of the umpire crew for that game.)

asap@musco.com 3

QUESTIONS AND ANSWERS PROTECTION



ABOUT THE CHILD PROGRAM

1. What do we, as a league, have to chartered for the next

league has been required to have coaches, and other volunteers or hired workers who provide regular service to the league or/and who have repetitive access to or contact with players or teams fill out the official Little League Volunteer Application. Additionally the league has been and is required to conduct a background check on each of these individuals. Since 2007, the local league has been required to conduct a nationwide search that contains the applicable government sex offender registry data as opposed to conducting statewide sex offense registry search. Little League Baseball and Softball will require each league to sign an agreement on the charter application that they will comply with Regulation I (b) and I(c) 8 & 9. The leagues are also required to sign a statement on the tournament enrollment form verifying that the process under the regulation has been completed and implemented. Failure to sign the agreement on the charter application will result in the league not being chartered and failure to fulfill the requirement of the regulations will result in the league's status being referred to the Charter/Tournament committee for action to revoke the league's charter and all privileges.

do to comply so that we can be season? Since 2003, the local

all board members, managers,

2. What type of background check is required by the new regulations? Effective in 2007, the local league must annually conduct a nationwide search that contains the applicable government sex offender registry data. Information on running a more thorough background check through LexisNexis that contains not only crimes that appear on a sex offender registry, but other crimes of a sexual and nonsexual nature can be obtained at <http://www.LittleLeague.org/learn/childprotection.htm>. The first 125 checks through LexisNexis are paid for by Little League International and are free to each chartered Little League. If additional checks are necessary, they will cost the league only \$1.00 per background check conducted.

3. What type of offenses are we screening for when we conduct a background check? Local leagues are conducting a search of the nationwide sex offender registry for anyone who has committed sexual offenses involving minors. An individual who has been convicted or plead guilty to charges involving or against a minor, no matter when the offense occurred, must not be permitted to work or volunteer.

4. Who in the local league should be responsible to process the background check information? Little League Baseball and Softball recommends the board of directors appoint the local league president and two other individuals to handle the background checks. These individuals may be from the board or individuals outside the board. For instance, the board of directors may appoint individuals who have significant professional background in this area, such as law enforcement officers or individuals with a legal background.

5. What if an individual has previously had a background check?
Each league must conduct its own background check on the appropriate individuals annually.

6. What will result in termination of a volunteer under these regulations? Any background check that reveals a conviction of any crime involving or against a minor must result in immediate termination from the league. Additionally, volunteers who refuse to submit a fully completed Little League Volunteer Application, along with a government issued photo ID, must be immediately terminated or eliminated from consideration for any position. This includes individuals with many years of service to your league.

7. What if offenses involving or against minors are pending prior to or after appointment to a position in the local league?

We suggest the individual not be appointed or should be suspended from his/her current position pending the outcome of the charges.

8. What if there are convictions or other offenses NOT involving or against minors? Even though convictions or other offenses may not be against a minor, the local league board of directors still may deem these individuals as inappropriate and/or unfit and may prohibit him/her from working as a hired worker or volunteer within the league.

9. Who is to be made aware of the information found on the background check? The local league president shall only share personal information contained in the volunteer application, background check or other information obtained through the screening process with other members of the board of directors in order to make personnel decisions. If the information obtained through the background check is public record and causes an individual to not be appointed or to be terminated, Little League Baseball and Softball recommends this information be shared with the parents/guardians of the children who have had contact with the individual previously.

10. Where should these records be maintained and for how long? The local league president shall retain each volunteer application, background check information, and any other documents obtained on file for the current year of service of that individual. After the local league has completed operation for the current season, the league president shall dispose of the records unless the league has taken action or made a decision based upon the information contained in the records subject to local and state laws.

11. What is the timetable for completing the screening of each individual? The league must complete the annual screening process prior to the individual assuming his/her duties for the current season. This would include the individual submitting a completed volunteer application and the league completing an appropriate background check. The applicant must also submit a government issued photo ID, usually a driver's license, in order for the league to verify that the information on his/her volunteer application is correct, i.e., spelling of name, address, date of birth, etc.

12. What resources are available through Little League Baseball and Softball to assist this process? The current Little League official Volunteer application is available at <http://www.LittleLeague.org>. Information on running a more thorough background check through LexisNexis that contains not only crimes that appear on a sex offender registry, but other crimes of a sexual and nonsexual nature can be found on the Little League website at <http://www.LittleLeague.org/learn/childprotection.htm>. The first 125 checks conducted through LexisNexis are paid for by Little League International and are free to each chartered little league. If additional checks are needed, they will cost the league only \$1.00 per background check conducted.

13. What will it cost my league to implement this initiative ? There is no fee required for the Department of Justice Sex Offender Public Registry website, which checks sex offender registries in all fifty states. However, a more thorough background check which contains not only crimes that appear on a sex offender registry, but other crimes of a sexual and nonsexual nature is available through LexisNexis at <http://www.LittleLeague.org/learn/childprotection.htm>. The first 125 checks conducted through LexisNexis are paid for by Little League International and are free to each chartered Little League. If additional checks are needed, they will cost the league only \$1.00 per background check conducted.

14. When should local leagues begin to conduct background checks on volunteers and hired workers? In accordance with Little League Regulation I(c) (8&9), local leagues must conduct background checks on all volunteers and hired workers prior to the applicant assuming his or her duties for the season. Background checks must be completed on all individuals who are required to complete the official "Little League Volunteer Application" and who provide a regular service to the league and/or have repetitive access to, or contact with, players and teams. This includes, but is not limited to, managers, coaches, Board of Director members and other persons or hired workers.

15. Does this initiative also apply to those individuals that assist the manager and coaches at practices or games?

Yes. Any individual who provides regular service to the league or/and who has repetitive access to or contact with players or teams must fill out the Volunteer Application, provide a copy of a government issued photo ID, and go through the background check process.

16. Who is going to coach the team if a screened manager or coach is no longer able to fulfill his/her duties?

Any permanent replacement cannot assume their duties until the volunteer application and background check has been completed. The league may temporarily assign a board member or another screened individual to fill the vacancy until the proper process and appointment has been made.

17. Should our league wait until the entire screening process has been completed to submit our Charter Application and Insurance Enrollment Form?

No. The appropriate league officers must sign the statement on the form agreeing to adhere to the new regulations requiring the use of the new volunteer application and background screening process as outlined in Regulations I(b) and I(c) 8 & 9. Once this section is completed the balance of the charter application can be completed and submitted to Little League Baseball and Softball.

18. As the league president or an official of the local league, how do I explain the need for this initiative?

These requirements were implemented in 2002 by Little League and your local league to: 1) protect our children and maintain Little League as a hostile environment for those who would seek to do them harm. 2) protect individuals and leagues from possible loss of personal or league assets because of litigation. 3) take advantage of current technology and laws that have made background check information accessible to your local league.

The revised Little League Volunteer Application is included on page 4.



This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.

WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

[INSERT YOUR LOGO]

HOW CAN I SPOT A POSSIBLE CONCUSSION?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just “don’t feel right” after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (even briefly).
- Shows mood, behavior, or personality changes.
- Can’t recall events prior to or after a hit or fall.
- Headache or “pressure” in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not “feeling right,” or “feeling down.”

WHAT ARE SOME MORE SERIOUS DANGER SIGNS TO LOOK OUT FOR?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

WHAT SHOULD I DO IF MY CHILD OR TEEN HAS A POSSIBLE CONCUSSION?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a health care provider and only return to play with permission from a health care provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's health care provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.

HOW CAN I HELP KEEP MY CHILDREN OR TEENS SAFE?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
 - » Work with their coach to teach ways to lower the chances of getting a concussion.
 - » Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
 - » Ensure that they follow their coach's rules for safety and the rules of the sport.
 - » Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.



[INSERT YOUR LOGO]



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➔ www.facebook.com/CDCHEADSUP

Content Source: CDC's HEADS UP campaign. Customizable HEADS UP fact sheets were made possible through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE).

A Fact Sheet for COACHES

HEADS UP CONCUSSION

One of the main jobs of a youth sports coach is keeping athletes safe. This sheet has information to help you protect athletes from concussion or other serious brain injury, learn how to spot a concussion, and know what to do if a concussion occurs.

WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

HOW CAN I HELP KEEP ATHLETES SAFE?

Sports are a great way for children and teens to stay healthy and can help them do well in school. As a youth sports coach, your actions create the culture for safety and can help lower an athlete's chance of getting a concussion or other serious injury. Aggressive and/or unsportsmanlike behavior among athletes can increase their chances of getting a concussion or other serious injury. Here are some ways you can help keep your athletes safe:

Talk with athletes about the importance of reporting a concussion:

- Talk with athletes about any concerns they might have about reporting their concussion symptoms. Make sure to tell them that safety comes first and you expect them to tell you and their parent(s) if they think they have a concussion.

Create a culture of safety at games and practices:

- Teach athletes ways to lower the chances of getting a concussion.
- Enforce the rules of the sport for fair play, safety, and sportsmanship.
- Ensure athletes avoid unsafe actions such as:
 - Striking another athlete in the head;
 - Using their head or helmet to contact another athlete;
 - Making illegal contacts or checking, tackling, or colliding with an unprotected opponent; and/or
 - Trying to injure or put another athlete at risk for injury.

[INSERT YOUR LOGO]



- Tell athletes that you expect good sportsmanship at all times, both on and off the playing field.

Keep up-to-date on concussion information:

- Review your state, league, and/or organization's concussion guidelines and protocols.
- Take a training course on concussion. CDC offers concussion training at no cost at www.cdc.gov/HEADSUP.
- Download CDC's HEADS UP app or a list of concussion signs and symptoms that you can keep on hand.

Check out the equipment and sports facilities:

- Make sure all athletes wear a helmet that fits well and is in good condition when appropriate for the sport or activity. There is no "concussion-proof" helmet, so it is important to enforce safety rules that protect athletes from hits to the head and when a helmet falls off during a play.
- Work with the game or event administrator to remove tripping hazards and ensure that equipment, such as goalposts, have padding that is in good condition.

Keep emergency contact information handy:

- Bring emergency contact information for parents and health care providers to each game and practice in case an athlete needs to be taken to an emergency department right away for a concussion or other serious injury.
- If first responders are called to care for an injured athlete, provide them with details about how the injury happened and how the athlete was acting after the injury.

HOW CAN I SPOT A POSSIBLE CONCUSSION?

Athletes who show or report one or more of the signs and symptoms listed below—or simply say they just “don’t feel right” after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

SIGNS OBSERVED BY COACHES OR PARENTS:

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (even briefly).
- Shows mood, behavior, or personality changes.
- Can’t recall events prior to or after a hit or fall.

SYMPTOMS REPORTED BY ATHLETES:

- Headache or “pressure” in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not “feeling right”, or “feeling down”.

NOTE: Concussion signs and symptoms often show up soon after the injury, but it can be hard to tell how serious the concussion is at first. Some symptoms may not be noticed or may not show up for hours or days.

WHAT ARE SOME MORE SERIOUS DANGER SIGNS TO LOOK FOR?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or ensure an athlete is taken to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

CONCUSSIONS AFFECT EACH ATHLETE DIFFERENTLY.

While most athletes with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with an athlete’s parents if you notice their concussion symptoms come back after they return to play.

WHAT SHOULD I DO IF I THINK AN ATHLETE HAS A POSSIBLE CONCUSSION?

As a coach, if you think an athlete may have a concussion, you should:

REMOVE THE ATHLETE FROM PLAY.

When in doubt, sit them out!

KEEP AN ATHLETE WITH A POSSIBLE CONCUSSION OUT OF PLAY ON THE SAME DAY OF THE INJURY AND UNTIL CLEARED BY A HEALTH CARE PROVIDER.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess an athlete for a possible concussion. After you remove an athlete with a possible concussion from practice or play, the decision about return to practice or play is a medical decision that should be made by a health care provider. As a coach, recording the following information can help a health care provider in assessing the athlete after the injury:

- Cause of the injury and force of the hit or blow to the head or body.
- Any loss of consciousness (passed out/knocked out) and if so, for how long.
- Any memory loss right after the injury.
- Any seizures right after the injury.
- Number of previous concussions (if any).

INFORM THE ATHLETE’S PARENT(S) ABOUT THE POSSIBLE CONCUSSION.

Let them know about the possible concussion and give them the HEADS UP fact sheet for parents. This fact sheet can help parents watch the athlete for concussion signs or symptoms that may show up or get worse once the athlete is at home or returns to school.

ASK FOR WRITTEN INSTRUCTIONS FROM THE ATHLETE’S HEALTH CARE PROVIDER ON RETURN TO PLAY.

These instructions should include information about when they can return to play and what steps you should take to help them safely return to play.

WHY SHOULD I REMOVE AN ATHLETE WITH A POSSIBLE CONCUSSION FROM PLAY?

The brain needs time to heal after a concussion. An athlete who continues to play with concussion has a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious and can affect an athlete for a lifetime. It can even be fatal.

SOME ATHLETES MAY NOT REPORT A CONCUSSION BECAUSE THEY DON'T THINK A CONCUSSION IS SERIOUS.

They may also worry about:

- Losing their position on the team or during the game.
- Jeopardizing their future sports career.
- Looking weak.
- Letting their teammates or the team down.
- What their coach or teammates might think of them.

WHAT STEPS CAN I TAKE TO HELP AN ATHLETE RETURN TO PLAY?

An athlete's return to school and sports should be a gradual process that is approved and carefully managed and monitored by a health care provider. When available, be sure to also work closely with your team's certified athletic trainer.

Below are five gradual steps that you, along with a health care provider, should follow to help safely return an athlete to play. Remember, this is a gradual process. These steps should not be completed in one day, but instead over days, weeks, or months.

BASELINE:

Athlete is back to their regular school activities, is no longer experiencing symptoms from the injury when doing normal activities, and has a green light from their health care provider to begin the return to play process.

An athlete should only move to the next step if they do not have any new symptoms at the current step.

STEP 1:

Begin with light aerobic exercise only to increase an athlete's heart rate. This means about 5 to 10 minutes on an exercise bike, walking, or light jogging. No weightlifting at this point.

STEP 2:

Continue with activities to increase an athlete's heart rate with body or head movement. This includes moderate jogging, brief running, moderate-intensity stationary biking, moderate-intensity weightlifting (less time and/or less weight than a typical routine).

STEP 3:

Add heavy non-contact physical activity, such as sprinting/running, high-intensity stationary biking, regular weightlifting routine, non-contact sport-specific drills (in 3 planes of movement).

STEP 4:

An athlete may return to practice and full contact (if appropriate for the sport) in controlled practice.

STEP 5:

An athlete may return to competition.

REMEMBER:

It is important for you and the athlete's parent(s) to watch for concussion symptoms after each day's return to play progression activity. If an athlete's concussion symptoms come back, or he or she gets new symptoms when becoming more active at any step, this is a sign that the athlete is pushing him- or herself too hard. The athlete should stop these activities, and the athlete's health care provider should be contacted. After the okay from the athlete's health care provider, the athlete can begin at the previous step.



[INSERT YOUR LOGO]

Content Source: CDC's HEADS UP campaign. Customizable HEADS UP fact sheets were made possible through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE).

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TO LEARN MORE GO TO >> cdc.gov/HEADSUP

Equipment Checklist

Keep Your Players Safer

Do you know what equipment is required for player safety on the field? Do you know which optional items can help keep players safer? Check out the following list for ideas and reminders.

REQUIRED PLAYER EQUIPMENT

Defense

- ☐ Athletic supporter – all male players
- ☐ Metal, fiber, or plastic type cup – all male catchers
- ☐ Catcher's helmet and mask, with "dangling" throat guard; NO skull caps – all catchers; must be worn during pitcher warm-up, infield practice, while batter is in box
- ☐ Catcher's mitt – all baseball catchers
- ☐ Chest protector and leg protectors – all catchers; must be worn while batter is in box; long model chest protector required for Little League (Majors) and younger catchers

Offense

- ☐ Helmet meeting NOCSAE standards – all batters, base runners, and players in coaches boxes
- ☐ Helmet chinstrap – all helmets made to have chinstrap (with snap buttons, etc.)
- ☐ Regulation-sized ball for the game and division being played; marked RS for regular season or RS-T for regular season and tournament in baseball
- ☐ Regulation-sized bat – all batters; Little League (Majors) and younger baseball divisions must have bat marked with BPF 1.15 beginning in 2009
- ☐ Non-wood bats must have a grip of cork, tape, or composite material, and must extend a minimum of 10 inches from the small end. Slippery tape is prohibited.

REQUIRED FIELD EQUIPMENT

- ☐ 1st, 2nd and 3rd bases that disengage from their anchors
- ☐ Pitcher's plate and home plate
- ☐ Players' benches behind protective fences
- ☐ Protective backstop and sideline fences

OPTIONAL PLAYER EQUIPMENT

Defense

- ☐ Metal, fiber, or plastic type cup – any player, esp. infielders
- ☐ Pelvic protector – any female, esp. catchers
- ☐ Heart Guard/XO Heart Shield/Female Rib Guard – any defensive player, esp. pitchers, infielders
- ☐ Game-Face Safety Mask – any player, esp. infielders
- ☐ Goggles/shatterproof glasses – any player, esp. infielders or those with vision limitations

Offense

- ☐ Helmet – adults in coaches boxes
- ☐ Helmet with Face Guards or C-Flap meeting NOCSAE standards – all batters, esp. in younger divisions
- ☐ Mouth guard – batters, defensive players
- ☐ Goggles/Shatterproof glasses – any player, esp. those with vision limitations
- ☐ Batters vest/Heart Guard/Heart Shield/Female Rib Guard – any batter
- ☐ Regulation-sized reduced impact ball

OPTIONAL FIELD EQUIPMENT

- ☐ Double 1st base that disengages from its anchor
- ☐ Baseball mound for pitcher's plate
- ☐ Portable pitchers baseball mound with pitcher's plate
- ☐ Protective/padded cover for fence tops
- ☐ Foul ball return in backstop fencing

IMPORTANT:

BPF RULE GOES INTO EFFECT FOR BASEBALL DIVISIONS

Buying bats for your league's baseball divisions? If it is composite metal, make sure it has the BPF 1.15 label. Bats in use in Little League Baseball (Majors Division and younger) must have the new bat performance factor listed on the bat.

Unless this marking is present, the bat will be removed from games.

Little League officials are aware some bats do not have the required markings but are Little League approved. And some of the bats on the approved bat list may not carry the required BPF 1.15 marking, depending on when they were manufactured and licensed.

Little League is building a list of bats that are approved but do not have the BPF marking due to special circumstances. For these bats, the eligibility for play will be extended until December 31, 2009. As Little League is made aware of bats that meet the BPF rule for this extension, the bats will be added to the list.

ONLY bats with a BPF 1.15 marking or that are listed below will be allowed for use in the Little League (Majors) Baseball and younger divisions in 2009.

Non-BPF-marked bats approved until Dec. 31, 2009:

Adidas – Vanquish (blue design) A newer model of this bat, also named Vanquish with copper and black markings, has the proper labeling, so is therefore not subject to the one-year rule.

DeMarini – Black Coyote, Rogue, Distance, Rumble, Tengu, Mach 10, Patriot

Easton – LZ-810, LZ-800, Stealth Optiflex LST 1,

Louisville Slugger – YB31

NIKE – Areo

Spring 2009 5

Umpire Guidelines

North Issaquah, Washington, Little League

8 January-February 2004

Before the Game — Meet at home plate

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

During the Game — Umpires and Coaches

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

Copy and provide to umpires for reference.

Fairfield Pacific Little League

SAFETY CODE

- Responsibility for procedures should be that of an adult member of the local league.
- Arrangements should be made in advance of all games and practices for emergency medical services.
- Managers, coaches and umpires should have some training in first aid. First Aid Kit should be available at the field.
- No games or practices should be when weather or field conditions are not good, particularly when lighting is inadequate.
- 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 during play and practice sessions.
- Responsibility for keeping bats and loose equipment for the field of play should be that of a player assigned for this purpose.
- Procedure should be established for retrieving foul balls batted out of the playing area.
- During practice and games, all players should be alert and watching the batter on each pitch.
- 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.).
- During warm-up drills players should be spaced so that no one is endangered by wild throws or missed catches.
- Equipment should be inspected regularly. Make sure it fits properly.
- Managers should encourage all male players to wear protective cups and supporters for practices and games.
- Batters must wear approved protective helmets during batting practice, as well as during games.
- Catcher must wear a catchers helmet, mask, throat protector, long model chest protector, shin guards, and male catchers must wear a protective supporter at all times.
- Catchers must wear catchers helmet and mask with a throat protector in warming up pitchers. This applies between innings and in the bull-pen.
- Except when runner is returning to a base, head first slides are not permitted. NO EXCEPTIONS.
- During slide practice bases should not be strapped down or anchored.
- At no time should "horse play" be permitted on the playing field.
- Parents of players who wear glasses should be encouraged to provide "safety glasses".
- Players should not wear watches, rings, pins or other metallic items during games or practices.
- Managers and Coaches may not warm up pitchers before or during a game. On-deck batters are not permitted.

Fairfield Pacific Little League

CODE OF CONDUCT

- **Speed Limit 5 mph** in roadways and parking lots while attending any Fairfield Pacific Little League function. Watch for small children around parked cars.
- **No alcohol allowed** in any parking lot, field, or common areas within a Fairfield Pacific Little League complex.
- **No Playing in parking lots** at any time.
- **No Playing on and around lawn equipment.**
- **Use Cross walks** when crossing road ways. Always be alert for traffic.
- **No Profanity** please.
- **No Swinging Bats or throwing baseballs** at any time within the walkways and common areas of a Fairfield Pacific Little League complex.
- **No throwing balls** against dugouts or against backstop. Catchers must be used for all batting practice sessions.
- **No throwing rocks.**
- **No horse play** in walkways at any time.
- **No climbing fences.**
- **No pets** are permitted at Fairfield Pacific Little League games or practices.
- **Only a player on the field** and at bat, may swing a bat (Age 4 -12). Be alert of area around you when swinging bat while in the on deck position.
- **Observe all posted signs.** Players and spectators should be Alert at all times for Foul Balls and Errant Throws.
- **During game,** players must remain in the dugout area in an orderly fashion at all times.
- **After each game,** each team must clean up trash in dugout and around stands.
- **All gates to the field** must remain closed at all times. After players have entered or left the playing field, gates should be closed and secured.
- **No children under the age of 16** are to be permitted in the Snack Bars.

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

Fairfield Pacific Little League

SAFETY REPORTING PROCEDURES

Communicable Disease Procedures

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

Lightning Evacuation Procedures

- Stop Game/Practice.
- Stay away from metal fencing (including dugouts)!!
- Do not hold a metal bat.
- Walk, don't run to car and wait for a decision on whether or not to continue the game or practice.

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 Director of Safety. 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 Director of Safety within 48 hours of the incident.

Who to report to - Report all such incidents to the 2018 Director of Safety, James Jacobson at (707)980-3416 and Tim Boothe at (707)365-7388

How to make the report -Reporting incidents can come in a variety of forms. Most typically, they are telephone conversations. At a minimum, the following information must be provided:

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

Fairfield Pacific Little League

Safety Officer's Responsibilities

Within 48 hours of receiving the incident report, the Safety Officer will contact the injured party or the party's parents and (1) verify the information received; (2) obtain any other information deemed necessary; (3) check on the status of the injured party; and (4) in the event that the injured party required other medical treatment (i.e., Emergency Room visit, doctor's visit, etc.) will advise the parent or guardian of the Fairfield Pacific 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) Check if any other assistance is necessary in areas such as submission of insurance forms, etc. until such time as the incident is considered "close" (i.e., no further claims are expected and/or the individual is participating in the league again).

2018 Fairfield Pacific Little League Safety Officer

James Jacobson

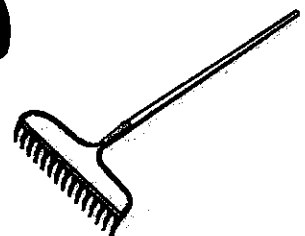
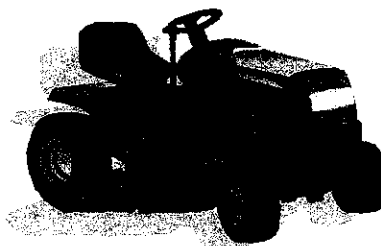
(707) 980-3416

Fairfield Pacific Little League

MAINTENANCE & STORAGE SHED PROCEDURES

The following applies to all of the storage sheds used by Fairfield Pacific Little League and apply to anyone who has been issued a key and access to all our facilities.

- All individuals with keys or lock combinations to the Fairfield Pacific Little League equipment sheds (i.e., Managers, Umpires, etc.) are aware of their responsibilities for the orderly and safe storage of rakes, shovels, bases, etc.
- Before you use any machinery located in the shed (i.e., lawn mowers, weed whackers, lights, scoreboards, public address systems, etc.) Please locate and read the written operating procedures for that equipment.
- All chemicals or organic materials stored in Fairfield Pacific Little League sheds shall be properly marked and labeled as to its contents.
- All chemicals or organic materials (i.e., lime, fertilizer, etc.) Stored within these equipment sheds will be separated from the areas used to store machinery and gardening equipment (i.e., rakes, shovels, etc.) To minimize the risk of puncturing storage containers.
- 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.



Fairfield Pacific Little League

ADDITIONAL INFORMATION

- If you missed the league sponsored pre-season coaches training on first aid, proper mechanics and Little League philosophy please contact the league safety officer to receive this valuable information. It is critical that all coaches and managers receive this training. Also see Dee Jay Perkins for Big Al Coaching website access.
- All managers are issued first aid kits. All fields have first aid kits in the storage sheds. It is critical that as you use components of the kits that you notify league officials so that we can replenish the safety supplies.
- Please check with parents and coaches before each practice and game that a cellular phone is available for use. A cell phone is available at the concession stand at the Alan Witt fields for emergency use. If you are finding that no phone is available please notify the Safety Officer, we are in the process of having phones donated for those teams that do not have parents and coaches with phones.
- It is the responsibility of Coaches, Managers and League officials to enforce all league rules including equipment regulations.
- Any issues regarding the concession stand should be addressed with Tim Boothe or Erika Victor.
- Coaches and umpires must walk the fields for hazards before each game. Look for rocks, glass, holes etc.
- Inspect all equipment before each game.

Safety is Everyone's Responsibility!

Fairfield Pacific Little League

FIRST AID TRAINING FOR MANAGERS & COACHES

Who: All Managers & Coaches

When: TBD

Where: Allan Witt Park



Presented by the Vallejo Fire Department

At least one representative from each team is required to attend. All Managers and at least one coach should to attend. The training is intended to teach basic first aid skills that may be necessary in those critical moments before professional medical attention arrive.

BASEBALL FIRST AID

Good Samaritan Law - help protect emergency aid givers from being held civilly liable when providing good faith emergency care or assistance ("reasonable" care with your level of training and does not constitute gross negligence).

Heat Related Illness

- Prevent by - staying hydrated; encourage the player to drink fluid before they are thirsty. Give adequate water breaks during practice.
- Children - get dehydrated quicker:
 - smaller body weight and a higher turnover of water and electrolytes (sodium, potassium, etc.).
 - greater surface area-to-body mass ratio than adults which causes a greater heat gain from the environment.
 - Children produce more metabolic heat units than adults during physical activity (therefore get hotter).
- Signs & Symptoms - dizzy, weakness, muscle cramps, headaches, sick to stomach (heat cramps, heat exhaustion, heat stroke).
- Treatment - fluid, shade, rest (early stages); 911 if appropriate.

Fractures/Dislocations/Sprains

- Keep still, stabilize in position of comfort.
- Do not set dislocations
- 911, if appropriate
- ICE - can help to reduce swelling and aid in healing

Lacerations/Cuts - direct pressure & elevation

Contusions (Bruises) - bleeding under skin

- ICE - slow bleeding and aid in healing

Player Collisions or Struck with Bat or Ball (potential head & spinal injuries)

- Loss of consciousness - monitor airway for breathing, 911
- Possible Spinal (neck/back pain) - don't move, stabilize, 911

Allergies - review your player medical forms

- Asthma - do they have; inhaler
- Bees/ yellow jackets
- Peanuts - in game treats?

Diabetes - insulin dependent

- Talk with parents (treatment type, what to look for, etc.)

*** First Aid Kits** - in each black equip bag (ice packs included in bags - replacement ice packs can be obtained from the concession container).

Play It Safe

FIRST AID

First aid is an important part of any safety program. Like insurance coverage, it is a form of protection that must be available in case of an emergency involving any injury.

Definition

First aid is the immediate, necessary, temporary, emergency care given for injuries.

Selection and Qualifications of First Aiders

It is recognized as impractical to have a completely trained and experienced first aider on duty at all times. However, every effort should be made to have several alternate first aiders, preferably adults whose duties keep them at the field, trained in the basic requirements of first aid treatment.

Ideally, this training should be from an accredited agency such as the American Red Cross. The alternative is to have them trained briefly and specifically for this purpose by a medical doctor or a registered nurse who is familiar with Little League operations. Minimum first aid training should include the handling of extreme emergencies such as the usage of mouth-to-mouth resuscitation and external cardiac massage.



Since this chapter of "Play It Safe" is not intended as a First Aid Manual, we have omitted information on treatment. Both this and the proper equipping of the first aid kit should be left to the advice of local medical authorities. It is sug-

gested, however, that in addition to the stock of bandages and medication, the following be available:

1. A supply of clean water, soap and towels
2. A blanket
3. Arm and leg splints
4. Easily accessible phone with emergency phone numbers, such as doctor, hospital and ambulance service. If a public phone is to be used, small coins should also be readily available.

Notification of Family

It is extremely important that, as soon as provision has been made for the care of injured or ill people who require outside treatment their family be notified in as tactful a manner as possible.

Follow-Up on First Aid Cases

Care of an ill or injured individual must always be the first consideration. In concern for their welfare, however, do not neglect the following:

1. A thorough investigation should be made to find the cause(s) of an accident and action started to prevent recurrence.
2. An insurance claim should be filed when outside medical attention is required. Do not wait for medical bills to arrive. They can be submitted as they become available. They must be identified by including the person's name, league name and number, date of injury, and city and state of residence. Bills should be itemized to show dates and type of treatments.
3. Any player under the care of a doctor should be required to bring a note from the doctor to the manager releasing the player to play ball before being allowed to return to the lineup.

First Aid Equipment

Since this chapter of "Play It Safe" is not intended as a First Aid Manual, we have omitted information on treatment. Both this and the proper equipping of the first aid kit should be left to the advice of local medical authorities. It is sug-

PUBLIC LIABILITY

The responsibility of all organizations and their individual members for the safety of the general public has become an increasingly important factor in present-day society.

Little League's Obligation

As a non-profit organization supported by public funds and operated by volunteers we should have a deep interest in the safety of the general public as well as the protection of our Little League volunteers from lawsuits.

Even though we cannot fully protect the public from all situations arising out of the operation of a league, we can safeguard them from our own unintentional negligence.

Consequences of Being Sued

No matter how unjustified a liability suit may be, we should be concerned about the effects of such legal action on Little League and particularly on the men and women who make the league possible.

1. The worst result of such a suit, if there is no liability insurance coverage, is the possibility of wrecking the financial position of the individual against whom the suit is directed. In cases where a large judgment is obtained against an individual, the Court may take over all of a person's assets and even attach future earnings for years to come.

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-Alien County, Ind., Department of Health.

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 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 (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 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. Dishwashing

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 1/2 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 uneatable food.

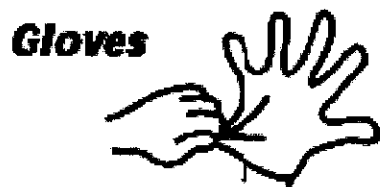
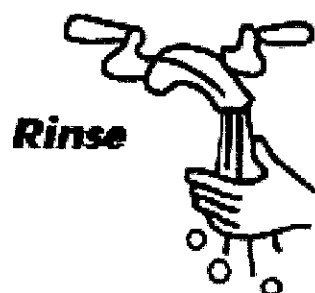
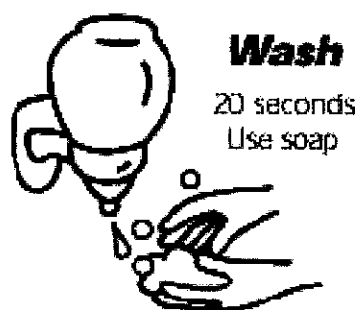
13. Set a Minimum Worker Age

Leagues 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 posted and no later than May 1st.

Volunteers Must Wash Hands

HOW



WHEN

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

U.S. Food & Drug Administration, Department of Health and Human Services, Center for Food Safety and Inspection Service

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.

U.S. Food & Drug Administration, Department of Health and Human Services, Center for Food Safety and Inspection Service

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

Wear gloves.

U.S. Food & Drug Administration, Department of Health and Human Services, Center for Food Safety and Inspection Service

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

If you wear gloves:

- ▶ wash your hands before you put on new gloves

Change them:

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

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



**UMASS
EXTENSION**

Good Procedures to Implement

Checklist for Managers, Coaches, and Umpires

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

A. Safe Playing Areas

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

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

B. Safe Equipment

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

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

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

C. Safe Procedures

Managers and coaches must:

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

D. Weather Conditions

Before the Storm

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

Approaching Thunderstorm

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

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

If caught outdoors & no shelter exists

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

What to do if someone is struck by lightning

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

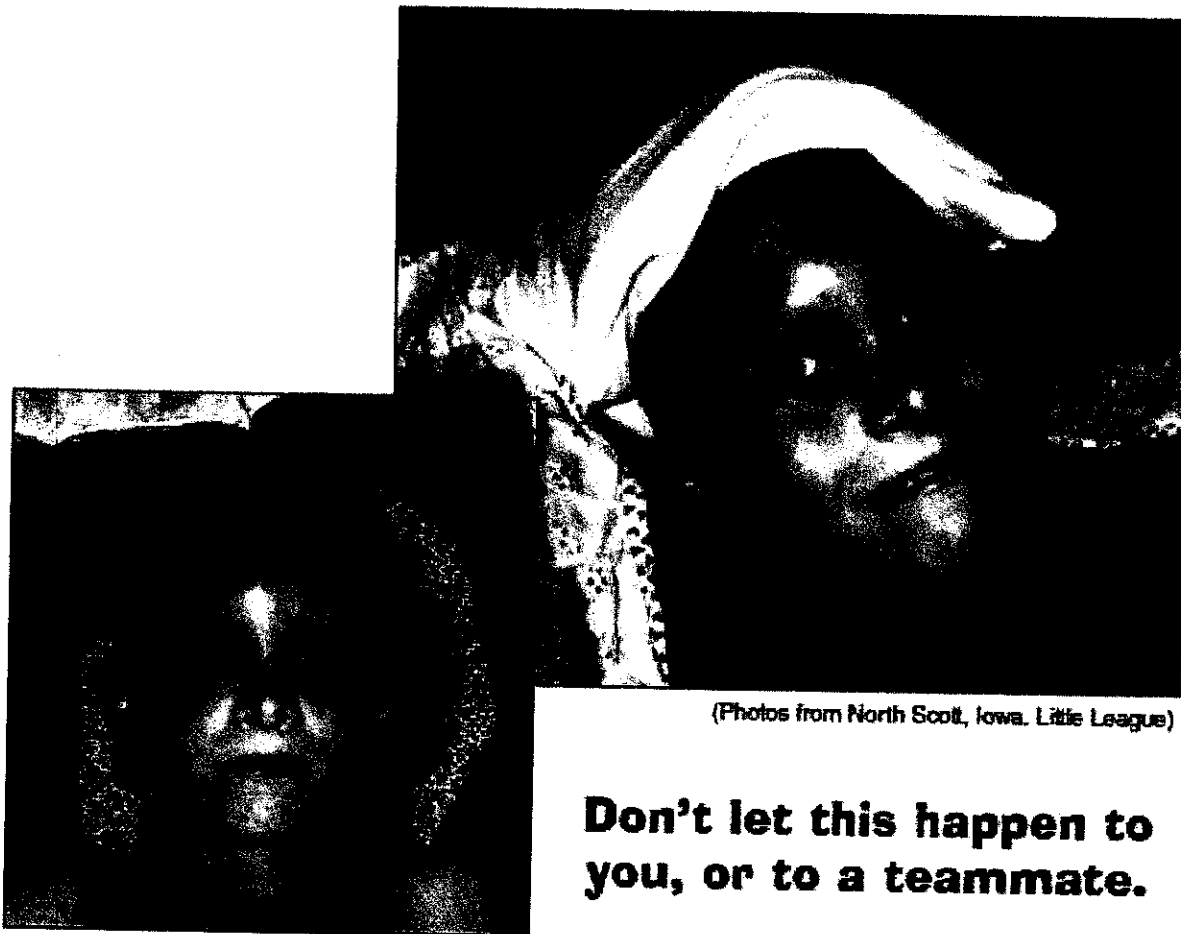


HAVE YOU:

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

Don't Swing It

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



(Photos from North Scott, Iowa, Little League)

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

REMEMBER:

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

RULE 1.08. Notes

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

Coach, Please Let Players Catch!



REMEMBER:

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

RULE 3.09

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

Asthma Emergency Signs

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

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

Asthma is different for every person.

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

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


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

Michigan Asthma Steering Committee of the Michigan Department of Community Health


Player Medical Release Forms

In the event of an injury to any player that will be released to the care of responding or treating emergency personnel you should:

- **Remove the player's medical release form from his team's binder (maintained by the team's manager) and**
- **Provide the form to the treating personnel so they are aware of any medications being taken and/or pre-existing health conditions the player.**



**Little League, Baseball and Softball
MEDICAL RELEASE**



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

Player: _____ Date of Birth: _____ Gender (M/F): _____

Parent (s)/Guardian Name: _____ Relationship: _____

Parent (s)/Guardian Name: _____ Relationship: _____

Player's Address: _____ City: _____ State/Country: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Mobile Phone: _____

PARENT OR GUARDIAN AUTHORIZATION:

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

Family Physician: _____ Phone: _____

Address: _____ City: _____ State/Country: _____

Hospital Preference: _____

Parent Insurance Co: _____ Policy No.: _____ Group ID#: _____

League Insurance Co: _____ Policy No.: _____ League/Group ID#: _____

If parent(s)/guardian cannot be reached in case of emergency, contact:

Name	Phone	Relationship to Player
_____	_____	_____
Name	Phone	Relationship to Player
_____	_____	_____

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

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

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 or alter treatment.

Mr./Mrs./Ms. _____
Authorized Parent/Guardian Signature _____ Date: _____

FOR LEAGUE USE ONLY:

League Name: _____ League 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.

Little League® Baseball & Softball CLAIM FORM INSTRUCTIONS



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

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

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

The Accident Claim Form must be fully completed, including a Social Security Number, for processing. To help explain insurance coverage to parents/guardians refer to *What Parents Should Know* on the internet that should be reproduced on your league's letterhead and distributed to parents/guardians of all participants at registration time.

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

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

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

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

TREATMENT OF DENTAL INJURIES

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

CHECKLIST FOR PREPARING CLAIM FORM

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

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

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

PART II - LEAGUE STATEMENT

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

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

For Local League Use Only**Activities/Reporting****A Safety Awareness Program's
Incident/Injury Tracking Report**

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

Field Name/Location: _____ Incident Time: _____

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

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

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

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

Parents' Address (If Different): _____ City _____

Incident occurred while participating in:

- A.) ☐ Baseball ☐ Softball ☐ Challenger ☐ 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 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: _____

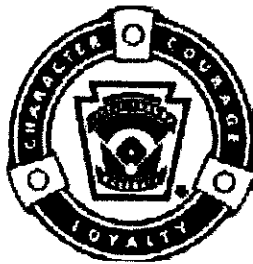
Please give a short description of incident: _____

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 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.

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

Little League, Baseball & Softball
CLAIM FORM INSTRUCTIONS



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

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

The NUFI Accident Master Policy acquired through Little League contains an "Excess Coverage Provision" whereby all personal and/or group insurance shall be used first.

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

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

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

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

The NUFI Accident Policy is acquired by leagues, not parents, and provides comprehensive coverage at an affordable cost. Accident coverage is underwritten by National Union Fire Insurance Company of Pittsburgh, Pa. This is a brief description of the coverage available under the policy. The policy will contain limitations, exclusions, and termination provisions.

With your league's cooperation, insurance rates have increased only three times since 1965. This rate stability would not have been possible without your help in stressing safety programs at the local level. The ASAP manual, **League Safety Officer Program Kit**, is recommended for use by your Safety Officer. In 2000 the State of Virginia was the first state to have its accident insurance rates reduced by high participation in ASAP and reduction in injuries. In 2002, seven more states have had their accident insurance rates reduced, as well. They are Alaska, California, Delaware, Idaho, Montana, Washington, Wisconsin.

TREATMENT OF DENTAL INJURIES

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



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	(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)	
	<input type="checkbox"/> BIG (14-18)			

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

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

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

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

For Residents of California:

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

For Residents of New York:

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

For Residents of Pennsylvania:

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

For Residents of All Other States:

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

PART 2 - LEAGUE STATEMENT (Other than Parent or Claimant)

Name of League	Name of Injured Person/Claimant	League I.D. Number
Name of League Official	Position in League	
Address of League Official	Telephone Numbers (Inc. Area Codes) Residence: () Business: () Fax: ()	

Were you a witness to the accident? ☐ Yes ☐ No

Provide names and addresses of any known witnesses to the reported accident.

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

POSITION WHEN INJURED	INJURY	PART OF BODY	CAUSE OF INJURY
<input type="checkbox"/> 01 1ST	<input type="checkbox"/> 01 ABRASION	<input type="checkbox"/> 01 ABDOMEN	<input type="checkbox"/> 01 BATTED BALL
<input type="checkbox"/> 02 2ND	<input type="checkbox"/> 02 BITES	<input type="checkbox"/> 02 ANKLE	<input type="checkbox"/> 02 BATTING
<input type="checkbox"/> 03 3RD	<input type="checkbox"/> 03 CONCUSSION	<input type="checkbox"/> 03 ARM	<input type="checkbox"/> 03 CATCHING
<input type="checkbox"/> 04 BATTER	<input type="checkbox"/> 04 CONTUSION	<input type="checkbox"/> 04 BACK	<input type="checkbox"/> 04 COLLIDING
<input type="checkbox"/> 05 BENCH	<input type="checkbox"/> 05 DENTAL	<input type="checkbox"/> 05 CHEST	<input type="checkbox"/> 05 COLLIDING WITH FENCE
<input type="checkbox"/> 06 BULLPEN	<input type="checkbox"/> 06 DISLOCATION	<input type="checkbox"/> 06 EAR	<input type="checkbox"/> 06 FALLING
<input type="checkbox"/> 07 CATCHER	<input type="checkbox"/> 07 DISMEMBERMENT	<input type="checkbox"/> 07 ELBOW	<input type="checkbox"/> 07 HIT BY BAT
<input type="checkbox"/> 08 COACH	<input type="checkbox"/> 08 EPIPHYSES	<input type="checkbox"/> 08 EYE	<input type="checkbox"/> 08 HORSEPLAY
<input type="checkbox"/> 09 COACHING BOX	<input type="checkbox"/> 09 FATALITY	<input type="checkbox"/> 09 FACE	<input type="checkbox"/> 09 PITCHED BALL
<input type="checkbox"/> 10 DUGOUT	<input type="checkbox"/> 10 FRACTURE	<input type="checkbox"/> 10 FATALITY	<input type="checkbox"/> 10 RUNNING
<input type="checkbox"/> 11 MANAGER	<input type="checkbox"/> 11 HEMATOMA	<input type="checkbox"/> 11 FOOT	<input type="checkbox"/> 11 SHARP OBJECT
<input type="checkbox"/> 12 ON DECK	<input type="checkbox"/> 12 HEMORRHAGE	<input type="checkbox"/> 12 HAND	<input type="checkbox"/> 12 SLIDING
<input type="checkbox"/> 13 OUTFIELD	<input type="checkbox"/> 13 LACERATION	<input type="checkbox"/> 13 HEAD	<input type="checkbox"/> 13 TAGGING
<input type="checkbox"/> 14 PITCHER	<input type="checkbox"/> 14 PUNCTURE	<input type="checkbox"/> 14 HIP	<input type="checkbox"/> 14 THROWING
<input type="checkbox"/> 15 RUNNER	<input type="checkbox"/> 15 RUPTURE	<input type="checkbox"/> 15 KNEE	<input type="checkbox"/> 15 THROWN BALL
<input type="checkbox"/> 16 SCOREKEEPER	<input type="checkbox"/> 16 SPRAIN	<input type="checkbox"/> 16 LEG	<input type="checkbox"/> 16 OTHER
<input type="checkbox"/> 17 SHORTSTOP	<input type="checkbox"/> 17 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 _____



Avoid Collisions on the Field

Whether between teammates or opposing players, baseball and softball are not contact sports. Make sure everyone understands who should make the play, and who should make way, to avoid collisions between players.

Call the Ball

Defensive players should be trained early to "call the ball" when going for a catch. Don't have two players collide because neither knew the other was trying to make the play. Fielders should be taught which player has priority for fly balls on the various areas of the field, unless called off by another player (i.e., on the third base side of the diamond, the shortstop has priority for fly balls, while on the first base side, the second baseman has priority, and outfielders generally should give ground to the center fielder).

Don't Obstruct Base Paths for Runners or Interfere with Fielders

Base runners and fielders: Only a player with the ball, or making a play on a batted ball should be in the base paths. Avoid injuries on the base paths by making it clear to offensive players that runners must slide or avoid a fielder **with the ball** and avoid a fielder making a play on a batted ball. For defensive players, tell them that fielders **without the ball** must vacate the base paths for runners.

Rule 7.08: "Any runner is out when - (a)(3) the runner does not slide or attempt to get around a fielder who has the ball and is waiting to make the tag; . . . (b) intentionally interferes with a thrown ball; or hinders a fielder attempting to make a play on a batted ball (**NOTE:** A runner who is adjudged to have hindered a fielder who is attempting to make a play on a ball is out whether it was intentional or not)."

Rule 7.09: "It is interference by a batter or runner when - (f) the runner fails to avoid a fielder who is attempting to field a batted ball, or intentionally interferes with a thrown ball . . ."

2.00 - Definition of Terms OBSTRUCTION is the act of a fielder who, while not in possession of the ball, impedes the progress of any runner. A fake tag is considered obstruction.

(**NOTE:** Obstruction shall be called on a defensive player who blocks off a base, base line or home plate from a base runner while not in possession of the ball.)

A fielder without the ball should make way for the advancing base runner; a runner seeing a fielder with the ball must slide or avoid. Don't allow collisions on the base paths from overly-aggressive play.

Curveballs, Catchers and Fatigue

Research needs to continue on links between overuse injuries and two hottest topics.

New research suggests that curveballs aren't as dangerous as some in the medical field have suggested, with stresses similar between the curveball and fastball. But let's not be so quick to accept curveballs for youngsters, warns Dr. James Andrews, orthopaedic surgeon and baseball injuries researcher. Add to that

concern that catchers are joining the growing trend of patients seeing orthopaedic surgeons needing to repair their injured arms.

Dr. Andrews stated that while the most recent studies "can't show in the lab that the curveball causes more damage" than the fastball or other pitches, he does not advocate teaching or throwing curveballs until a player's arm is close to fully developed, at age 13 to 15.

Fatigue Still the Key Risk

"We still believe the two major pitches to throw... are the fastball and the change-up," Dr. Andrews said. "My personal opinion is fatigue is ... the highest risk factor in youth baseball related to injuries. If you can prevent fatigue, then you will have done 95% of what you can do to keep these kids healthy."

"So how does the curveball interact with fatigue? If you are playing competitively... they want to win, and the curveball is a major factor" in winning games, Dr. Andrews said. "Fatigue comes from the inability of a young player to throw the curveball properly with good mechanics. That's the whole key."

Dr. Andrews stated he does not call curveballs "safe" for younger players. "However, if you throw the curveball with good mechanics, there are no greater forces on the shoulder or elbow than throwing the fastball, apparently, from what we can measure in the lab."

He also explained that throwing a curveball requires a great deal of control, and "is not an easy pitch to throw, and certainly not everyone can throw it properly."

Teach Proper Curveball Mechanics

And teaching good curveball mechanics is important, no matter what age, he said. "Do we have knowledgeable coaches teaching these kids the curveball?" Dr. Andrews asked. "We've got to be really careful. When you put a kid in a competitive situation, a championship series, and call for 70% curveballs, what's that going to do to the fatigue factor? Remember, it's a highly neurologically controlled pitch: if the mechanics get off because you're fatigued, and throwing 70% curves, then we're in trouble. So be careful throwing curveballs."

Dr. Andrews repeated the caution

from the position statement, that "throwing curveballs too early may be counterproductive, leading to arm fatigue as well as limiting the youth's ability to master fastball mechanics," he said. "In theory, don't throw curves till you can shave."

Catchers at Increasing Risk

When the most talented and athletic players are catchers, a coach's natural desire is to make that player a pitcher, too. But Dr. Andrews warned that catchers, good catchers who are mirroring every throw from the pitcher as well as being asked to throw long, fast, accurate throws to first, second and third bases are at increased risk of arm fatigue and subsequent injury.

"We're seeing a lot of injuries with catchers. I had a catcher come in from Atlanta, and I did surgery on him. I asked him how he got hurt. He's 15 years of age, and he's not supposed to have an injury [at that age]; but believe me, they're out there all over the place in that age group," Dr. Andrews stated.

He said the player was at a showcase and was asked to throw 100 throws in 200 seconds. Throwing a ball from home to second in 2 seconds is a good throw; and the organizers were timing the catchers on the total they could throw down in 200 seconds. "So he would throw as hard as he could throw, and then reach and they'd put a ball in his hand and do it again, to see how he fell off, what kind of stamina he had," Dr. Andrews related. "And about the 50th throw, he tore his ligament."

"Now that particular situation was almost criminal, and unfortunately what might happen down the road is it might become a criminal offense," he added. "So the timing is right to get this under control, before the federal courts and the state courts and the lawyers get it under control."



Learn, Teach the D

*Improve dialog
between
coaches,
players and
parents to
catch arm
injuries earlier.*

You can't be part of baseball and not worry about players' throwing arms. Stories of high school pitchers undergoing surgery to repair damage from overuse injuries are now common, and the micro-traumas responsible likely started before they even took the mound in high school.

Dr. James Andrews brought his message of pitcher protection to the Little League Baseball World Series this year, as part of the unveiling of a new national concern for baseball pitchers' arms.

Recognize Signs Early

If coaches are to avoid overuse injuries, they need to know how to recognize the signs of a developing problem. According to the USA Baseball Medical and Safety Advisory Committee report, "Preventing Overuse Injuries in Youth Baseball," overuse injuries are caused by repetitive stresses on the muscles and supporting structures of youngsters that are not given sufficient time to heal after pitching.

In the study "Elbow Injuries in Young Baseball Players," published in *The Physician and Sportsmedicine*, the damage starts innocuously:

- **Arm Fatigue** – first sign of impending injury;
- **Local Soreness** – if an injury is developing this will follow fatigue; and
- **More Severe Pain** – persisting into the next day (or longer) after initial pain.

A more erect delivery, poor arm positioning/low elbow height, poor or no follow-through, and improper foot positioning are some signs a coach can use to recognize fatigue in the pitcher. Coaches cannot count on the player to tell them when the player's arm is fatigued.

Additional studies have shown that when youth pitch with arm fatigue, they have a much higher risk of surgery later in their careers.

Wear, Tear Progresses Over Time

Many times, a pitcher coming to him requiring surgery will have years of accumulated damage, as the micro-

tears from individual, distinct traumas that never healed properly, Dr. Andrews cautioned. "The coaches say, 'I've never seen a youth injured under my watch,'" Dr. Andrews explained of these early, un-rehabilitated injuries. "You didn't see [an injury], but it saw you."

Authors of "Elbow Injuries in Young Baseball Players," James Whiteside MD, Dr. Andrews and Glenn S. Fleisig Ph.D., wrote that a player may initially indicate an arm injury by saying his arm is "stiff," or he has difficulty "getting loose" or the player may not say anything, and the injury may demonstrate as inaccurate throws producing more pain or other symptoms.

The authors warn that according to their research, players usually only seek medical attention when arm pain impairs the player's throwing or hitting ability. Players recounted that local soreness in the arm began after repeated hard throwing but went away after rest, only to flare up again during throwing.

Ask Player if Pitching is 'Off'

"Coaches and parents can help prevent more serious injuries by investigating when players exhibit abnormal mannerisms while fielding, throwing or batting," the report states. And if the player waits for the injury to be determined a clinical diagnosis, meaning a separation is developing between key parts of the elbow, the amount of time needed for the arm to heal is often season ending, if not worse. Catching the injury early is imperative.

The new position statement on pitching suggests pitchers throw no more than 1000 pitches per season and stay within the limits imposed by their league per game. It also recommends against pitching on more than one team with overlapping seasons.

If a pitcher's arm doesn't get time off from competitive throwing, the stresses put on the pitcher's arm – the micro-tears – could combine to the point that a single throw can cause damage requiring surgery to repair.

Dr. Andrews explained that often pitchers talk about a pop or snap sound in their arm as the injury occurs. But that throw was just "the straw that broke the camel's back," and not a single event that caused injury. "I've said for years that we take better care of our professionals than we do our youth players," Dr. Andrews said in issuing the pitching guidelines. "Those injuries [of older pitchers] don't begin at 26 years of age."

Communicate Outside Pitching

"The number one thing that is becoming more apparent and more of a problem is travel ball, where we have no control over what they pitch. They play Little League on Friday night, and then go... play in a travel league on

Dangers of Overuse Injuries

Friday, Saturday, Sunday, and pack as many games in as they possibly can. And we don't know what they do in these travel leagues. So they come back and pitch, following our rules, after four days rest, but they've already been in a travel ball league where you have no control over what they do," he stated. This leads to arm fatigue and injury, even though the player has met Little League's pitch count requirements, he cautioned. So the coach needs to communicate with the players who are in multiple leagues about when they pitch. The player should alert their travel ball team coach on pitching they've done in Little League, prior to an outside tournament as well.

Treatment and Rehabilitation

The study suggests coaches can follow some simple advice to help reduce the inflammation that hastens the onset of the development of the damage to throwers' elbows: ice. Apply ice for 15 minutes per hour for three or four hours after hard throwing to protect the muscles of the arm, either shoulder or elbow or both. If soreness

develops, take it to the next step: RICE – Rest, Ice, Compression, Elevation. (See page 8 for more.) That can mean stopping play for the player to rest the muscles, either for a few days or longer. Go see a sports physician at the first signs of arm injury to determine the correct course of action, whether simple rest and anti-inflammatory actions (ice, medication) or more extensive treatment.

"Some people criticize the pitch counts," Dr. Andrews stated. "Baseball is a developmental sport, and the players need to start early to learn it. Encourage throwing, but not *competitive* throwing. Year-round competitive throwing is the problem."

Dr. Andrews, medical director at the American Sports Medicine Institute in Birmingham, Ala., is the first surgeon to perform ulnar collateral ligament reconstruction, or, as it is better known, Tommy John surgery. In 2008, he was elected as the 23rd member of the Little League International Board of Directors.

Pitchers Need Rest in Season, Time Off Between Seasons

The American Sports Medicine Institute has issued a position statement to help educate coaches, players and parents about the risks of baseball pitching, and the ways to pitch more safely. Dr. James Andrews, medical director for ASMI, issued the following statement at the Little League Baseball World Series in Williamsport, Pa.

August 2009

With the rise in elbow and shoulder injuries in youth baseball pitchers, the adult community needs to take steps to prevent these injuries. Research points to overuse as the principle risk factor. Poor pitching mechanics also contribute to injury risk. Another suggested risk factor is poor physical fitness.



Throwing curveballs has been suggested as a risk factor, but the existing research does not support this concern. However, a youth pitcher may not have enough physical development, neuromuscular control and proper coaching instruction to throw a curveball with good mechanics. Throwing curveballs too early may be counterproductive, leading to arm fatigue as well as limiting the youth's ability to master fastball mechanics.

Recommendations for preventing injuries in youth pitchers:
Watch and respond to signs of fatigue. If a youth pitcher complains of arm fatigue, stop pitching and other throwing activities.

No overuse throwing of any kind. At least two to three months per year of four months of no competitive baseball pitching. At least four months per year.

Adhere strictly to pitch counts and rest.

Stop pitching on multiple days with overlapping seasons.

Stop throwing curveballs as soon as possible. The first step should be to throw in order: 1) fastballs, 2) fastballs, 3) fastballs, 4) change-up pitching.

Use proper pitching mechanics.

If a pitcher complains of pain in his elbow or shoulder, get an evaluation from a sports physician. Encourage youth pitchers to have fun playing baseball and other sports. Participating in other sports and activities will increase the youth's enthusiasm and interest in sports.



Players, Volunteers

Head injuries and injuries
underscore
safety of
closest
around

Are you adequately protecting your batters, catchers and umpires?

Head injuries are an area of critical importance for any league due to their severity of risk. One of the positions most at risk for head injuries is the batter, because of the proximity to both pitched, hit and foul balls. But the catcher and umpire are both similarly close and have the same risks and needs. The death of actress Natasha Richardson from a skiing fall has raised awareness around the world of head injuries.

Does your safety plan address head injuries from equipment to prevent injuries to education on what to do if an injury occurs?

Baseball Death Underscores Need

The death of high school batter Patrick Clegg, a Waynesville, Mo., High School baseball player, who was hit by a pitch while batting also serves as a cautionary tale. Clegg, 16, was batting in a game on April 21. The pitch was reportedly high and inside, causing Clegg to turn his back to it and duck his head. However, the pitch didn't hit his helmet, but his neck, just at the base of his skull under his helmet.

The story, reported in the *Springfield, Mo., News-Leader*, indicated he was struck in the brain stem and immediately collapsed on the field. Two days later, he was declared brain dead and taken off life support.

Batting Helmets Must Fit

Part of your plan should be efforts of prevention, making sure batters, catchers and umpires have proper protection. Since many players and volunteers use community equipment designed as one-size-

with Proper Equipment

fits-all, make sure it does fit everyone, or that different models are available.

Injuries happen when helmets fall off while the player is running the bases, too. Make sure chin straps are on all helmets that have the snaps or latches to hold the strap in place. Smaller players are at risk of poorly fitting helmets falling off, leaving their heads unprotected. Little League requires each team to have six NOCSAE-approved helmets available for each team's batters. Make sure a variety of sizes are available, to meet the need of varying sized players' heads.

Are your league's helmets inspected and maintained properly? Another concern for helmets is the need for replacement after a hard hit. Manufacturers state that once a baseball batting helmet has been hit hard once, it should be discarded. Don't wait for a crack to show that the shell is compromised, as a break could happen *before* an obvious crack appears.

Helmets cost between \$15 and \$40, depending on style and manufacturer. Don't put players at risk over whether a helmet has served its use.

Umpires Need Quality Masks, Helmets, Too

In separate instances within a week of each other, two MLB umpires were sidelined with head injuries after being hit by a broken bat and a foul ball while behind the plate.

On April 19, home plate umpire Ed Hickox was tagged in the center of his facemask with a foul tip. Hickox worked the rest of the game but spent the night in the hospital under observation. He was expected to be out of action for a week with the resulting concussion.

In a more severe injury, MLB umpire Kerwin Danley was removed from the field on a stretcher after the

top of a broken bat hit him in the helmet during a game April 24. Danley also suffered a concussion, but because he wore a full hockey-style mask and helmet, it was speculated that equipment saved him from a worse injury.

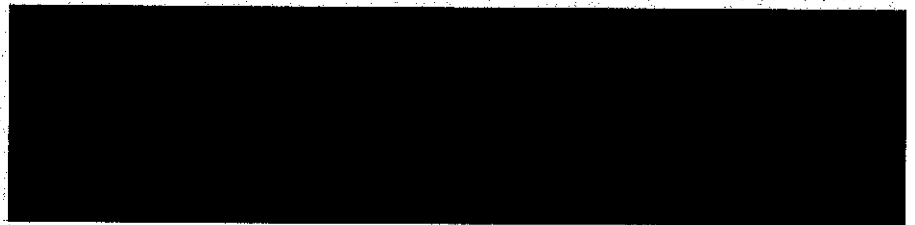
Does your league provide umpires with quality masks and helmets? Make sure these volunteers are well protected, too.

Don't Modify Helmets with Paint, Stickers

Finally, check all your helmets for unapproved paint or stickers. Helmet manufacturers have warned Little League for several years that any modification, either of stickers or paint, not approved by the helmet manufacturer will void the warranty.

That should tell your league the manufacturer, who knows its product best, is concerned that these helmets will fail with no warning if they've been modified, and the manufacturer won't be held responsible. Applying paint or stickers to the shell can cause a chemical reaction that destroys the helmet's hard, protective ability. Helmets may not be repainted or stickers applied unless approved in writing by the manufacturer. See rule 1.16 and 1.17 for specifics on this.

Don't allow league helmets, including personal player helmets, to be used if they have been painted or stickers have been put on them, for the players' safety.



One concern for any league should be that its players and volunteers follow proper procedures for wearing helmets.

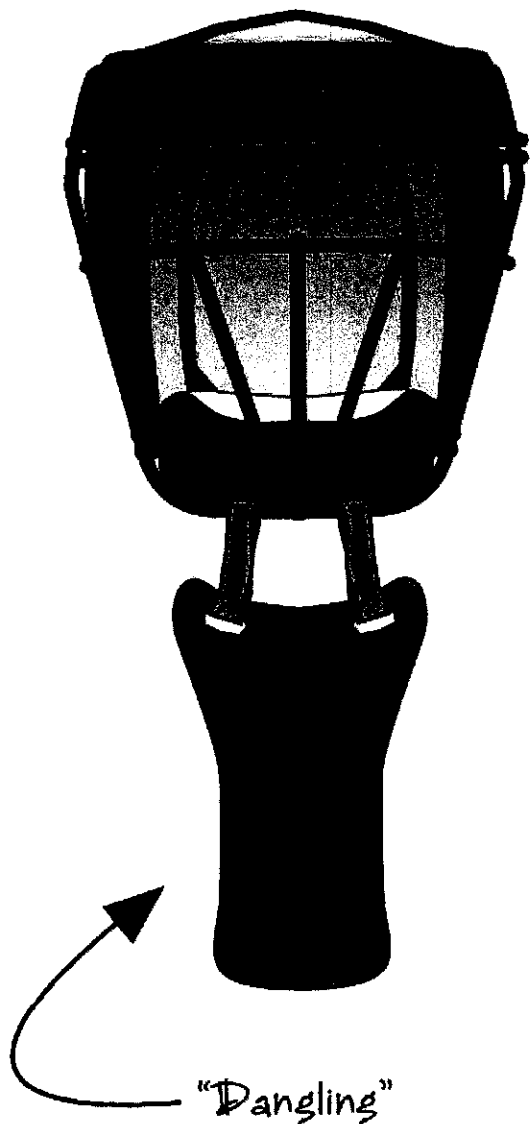
Here are some reminders on helmet use, for both practices and games:

Catcher's helmet and "dangling" throat guard

- Warming up a pitcher
- Catching during infield/outfield warm-ups
- Playing position of catcher during games or practices (with chest protector, shin guards, and cup for males)
- **NOTE:** Skull caps not permitted

Batting helmet (facemask optional)

- Batting practice (anywhere on field or in batting cage)
- Batting in games
- Running bases
- Pitching practice (standing in batter's box while pitchers throw to catcher)
- Players coaching first or third bases in coaches' boxes
- *Optional:* Adults coaching first or third bases in coaches' boxes



Make Sure They Are Safe!

REMEMBER:

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

RULE 1.17

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

If You See It, Flee It; If You Hear It, Clear It



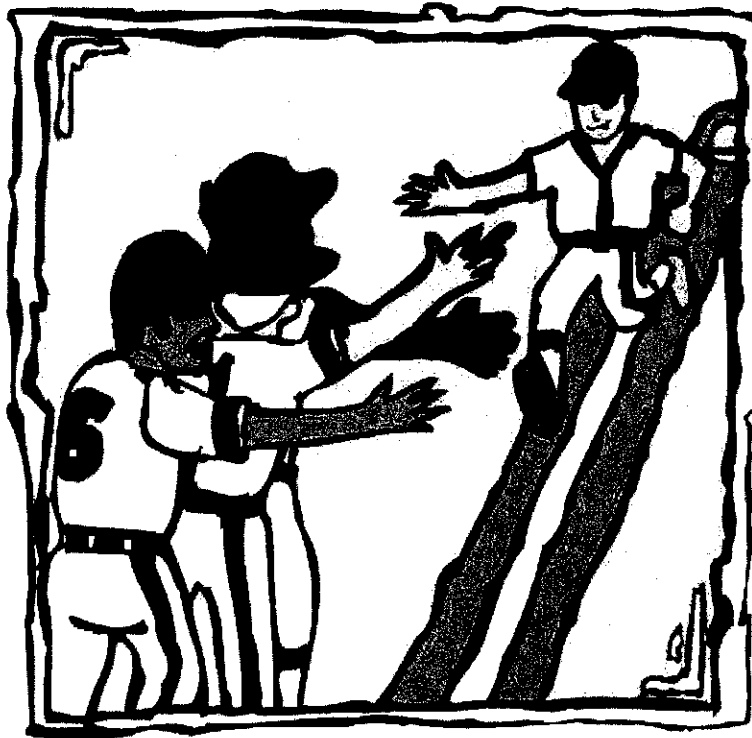
REMEMBER:

- **Track approaching storms the best way possible: Internet radar websites, dedicated storm warning system at field, or other storm warnings**
- **Evacuate fields when storms are about 10 miles away: Have players and spectators go to enclosed building or to cars with windows rolled up**
- **Clear fields immediately after thunder has been heard or lightning seen!**

PLEASE WAIT!

- **Wait 30 minutes before returning to play after last sign of lightning activity in your area**
- **Cars shouldn't leave until the game is called, so all players can be accounted for**

Keep It Clean!



REMEMBER:

**Use good sportsmanship on the field,
even to your language.**

Regulation XIV – Field Decorum

a) "The actions of players, managers, coaches, umpires and league officials must be above reproach ..."

