

League President: Lynn Compton
League Safety Officer: Joe Anderton



2023 League Safety Plan

Morgan County Little League

Berkeley Springs, WV

The Morgan County Little League ID # 3480602, a local league within West Virginia's District 6, is committed to an "on-going" safety awareness program for improving safety for league players, league officials, league volunteers, and others within our league structure. We will provide the necessary training for league participants; improve our facilities to eliminate unsafe conditions; document, process and track incidents and injuries; and evaluate these incidents and injuries to prevent recurrences. Our plan will be consistent with Little League Baseball, Inc. and the "A Safety Awareness Program" (ASAP) initiatives. We will collectively seek ways that provide opportunities for improving our safety program and reducing injuries within our league and will implement improvements on a continual basis.

Requirement 2 - Safety Manual Distribution

- The safety manual will be available to all volunteers a copy will be placed in the upstairs press box to ensure access to all board members, coaches, managers, concession workers, facilities crew, etc.

Requirement 3 - Emergency Plan

- **Emergency Contact Procedures**

- 1) First dial 9-1-1.
- 2) Give the dispatcher the necessary information. Answer any questions that he or she might ask. Please be prepared to answer the following from the dispatcher:
 - The exact location or address of the emergency? Include the name of the city or town as well as the field name. Our address is: **5548 Valley Rd, Berkeley Springs, WV 25411**
 - The caller's name?
 - What happened — i.e., a baseball-related accident, fire, fall, etc.?
 - How many people are involved?
 - The condition of the injured person — i.e., unconscious, chest pains, or severe bleeding?
 - What help is being given (first aid, CPR, etc.)?
- 3) Do not hang up until the dispatcher hangs up.
 - The dispatcher may be able to tell you how to best care for the victim.
- 4) Continue to care for the victim until professional help arrives.
- 5) Appoint someone to go to the street and look for the ambulance or fire engine and flag them down if necessary. This saves valuable time. Remember, every minute counts.

- **Emergency Phone List**

EMERGENCY Police/Fire/EMT 911
Poison Control Center: (800) 222-1222

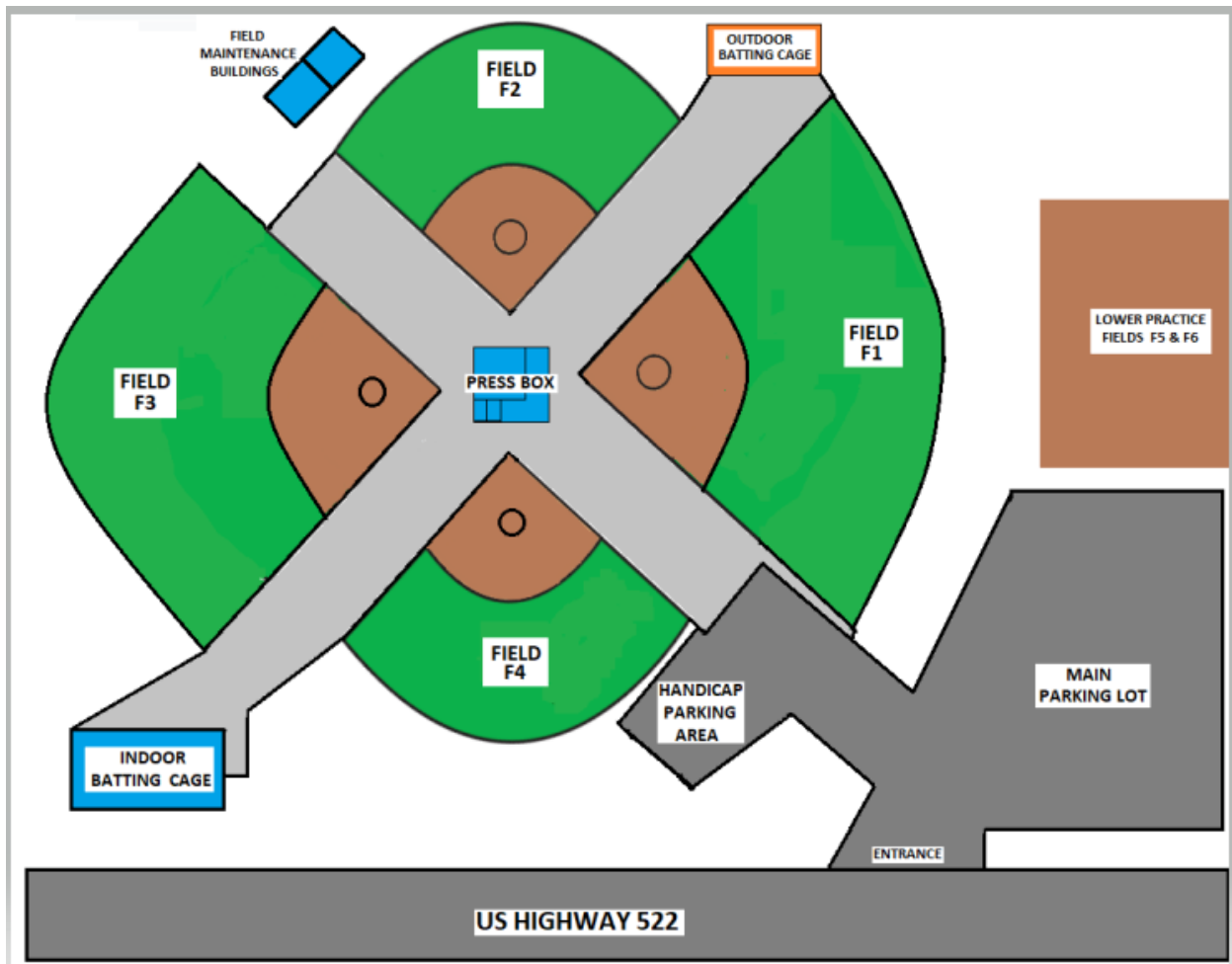
- **Non-Emergency Contact Numbers**

War Memorial Hospital	Sheriff	(304) 258-1067
(304) 258-1234	Ambulance	(304) 258-1348
Fire Dept.	State Police	(304) 258-0000
(304) 258-3191		

- **Morgan County Little League Board Contact info**

1. League President- Lynn Compton- (304)676-9717
2. Vice President/ Umpire Chief- Keith McClintock-(304)820-2192
3. LeagueSafety Coordinator-Joe Anderton (240)676-7530


- **Site Map**



- **Severe weather emergency shelter.** (Tornados, severe lightning, thunderstorms etc.)
 - The Coaches locker room, located on the Northwest side of the press box building will serve as the emergency shelter.

Requirement 4 - Volunteer Application

- All volunteers must complete and submit the Official Little League Volunteer Application



Little League® Volunteer Application – 2023

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

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

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

All RED fields are required.

Name _____ Date _____
First Middle Name or Initial Last

Address _____

City _____ State _____ Zip _____

Social Security # (mandatory) _____

Cell Phone _____ Business Phone _____
E-mail Address: _____

Home Phone: _____

Date of Birth _____

Occupation _____

Employer _____

Address _____

Special professional training, skills, hobbies: _____

Community affiliations (Clubs, Service Organizations, etc.): _____

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

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

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

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

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

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

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

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

(If volunteer answered yes to Question 7, the local league must contact Little League International.)

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

League Official Umpire Manager Concession Stand

Coach Field Maintenance Scorekeeper Other _____

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

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

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

Applicant Signature _____ Date _____
 If Minor/Parent Signature _____ Date _____
 Applicant Name (please print or type) _____

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

LOCAL LEAGUE USE ONLY:

Background check completed by league officer _____ on _____

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

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

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

National Sex Offender Registry

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

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

Last Updated: 1/4/23

Requirement 5 - Fundamentals Training

- **Fundamentals and first aid training for coaches will be held after tryouts and the draft are completed. (tentatively Feb18th 2023). It will be required that at least one coach or manager from each team attend. This training will be conducted at the indoor Batting cage at Morgan County Little League field. The training will be conducted by the Vice President or the Safety Coordinator or their designee and shall include basic skills in:**

1. Pitching
2. Catching
3. Fielding
4. Pop ups
5. Hitting
6. Base running

- **Morgan County Little League will require at least one Manager/Coach from each team to attend First Aid Training each year.**

Requirement 6 - First-Aid Training

- **One coach or manager from each team will attend first aid training based on the first aid clinic outline.**
 - This training shall be performed by any board member or any person approved by a board member. Training will be performed prior to the team practicing or playing games
 - First Aid Training Date: Feb 18th 2023 be held at Morgan county Little League indoor batting cage.

First Aid Clinics

Requirement 6

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

Thank You,
Paul McKeen
Stoughton, MA
District 8

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

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

Basic issues with baseball/softball would be:

- Contusions
- Muscle pulls and strains

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

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

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

to authorized coach.

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

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

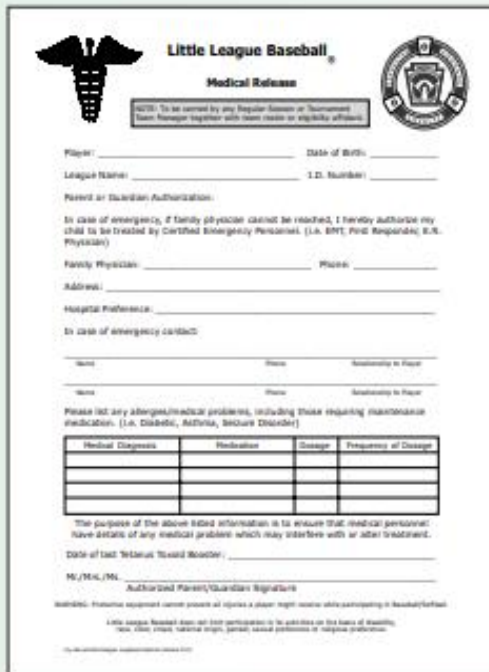
And finally, help the coaches/managers to understand specific techniques to determine whether an injured player is ready to practice and play again; in some cases this may require a doctor's release. The evaluation process involves determining whether injuries are mild, moderate or severe, and should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

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

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

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

Medical Release Form



Little League Baseball®
Medical Release

(LHR) To be carried by any Regular Season or Tournament Team Manager together with team roster or eligibility affidavit.

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

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

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

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 medications (i.e. Diabetes, Asthma, Insulin Doses):

Medical Diagnosis	Medication	Dosage	Frequency of Dosage

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

Date of last tetanus boost: _____
 M, / M, / M, _____
 Authorized Parent/Guardian Signature _____

WARNING: Pediatric aspirin/acetaminophen use requires a player sign waiver when accompanying a team/coach.
 Little League Baseball does not bear responsibility for injuries on the basis of health.
 This form covers national league, regional, seasonal problems or injuries problems.

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

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

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

First Aid Clinics Outline continued from page 2

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

Use the PRICES guide for treating injuries:

P – Protection

R – Rest

I – Ice

C – Compression

E – Elevation

S – Support

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

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

organization of warm-ups, practices and games;

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

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

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

Requirement 7 - Check Field Conditions

- **Coaches and umpires to shall check fields for hazards before practices and game**
 - Player safety is paramount. Look for holes, divots, rocks, glass or slippery surfaces. Even if you don't find anything or know that the field conditions are usually fine at the facilities where you umpire and coach, the very fact that you check lets managers, players, and their parents know that you are diligent about player safety
- **Check the Weather**
 - If weather is at all questionable, know in advance that you'll want to remind both managers to keep their players hustling in and out every half inning and be efficient with their warm-up pitches. Keep in mind the implications for pitch counts so that you can help managers and pitchers make the right decisions based on the possibility of weather delaying or suspending play.

(Any field conditions that need attending shall be reported to any board member which will relay the information to the correct person to rectify the issue.)



HAVE YOU:

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

Umpire Guidelines

North Issaquah, Washington, Little League

Before the Game — Meet at home plate	During the Game — Umpires and Coaches
<ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• 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.

Requirement 8 - Facility Survey

- Complete or update the 2023 Annual Facility Survey in the LL Data Center

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



League Name: Morgan county Little League
 District #: WV District 6
 ID #: 03480602
 (if needed) ID #: _____
 (if needed) ID #: _____
 City: Berkeley Springs State: WV

President: Lynn Compton Safety Officer: Joe Anderton
 Address: 116 Fernplace Lane Address: 1332 Pious Ridge Rd
 Address: _____ Address: _____
 City: Berkeley Springs City: Berkeley Springs
 State: WV ZIP: 25411 State: WV ZIP: 25411
 Phone (work): (304) 676-9717 Phone (work): (240)676-7530
 Phone (home): _____ Phone (home): _____
 Phone (cell): Same as work # Phone (cell): Same as work #
 Email: chc709@aol.com Email: Janderton@cnb.bank

PLANNING TOOL FOR FUTURE LEAGUE NEEDS

What are league's plans for improvements?	Indicate number of fields in boxes below.		
	Next 12 mons.	1-2 yrs.	2+ yrs.
a. New fields			1
b. Basepath/infield		2	
c. Bases	2		
d. Scoreboards			
e. Pressbox			
f. Concession stand			
g. Restrooms			
h. Field lighting			
i. Warning track			
j. Bleachers			
k. Fencing			
l. Bull pens			
m. Dugouts			
n. Other (specify):			

Other: Pitcher Mounds, softball field, LED upgrades

FIELD DIMENSION DATA

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

Field No.	Height of outfield fence	Distance from home plate to:				Foul territory distance from:					
		Outfield fence			Back stop	Left field line to fence at:			Right field line to fence at:		
		Left	Center	Right		Home	3rd	Outfield foul pole	Home	1st	Outfield foul pole
1	8'	300'	300'	300'	30'	30'	18'	12'	30'	18'	12'
2	8'	200'	200'	200'	25'	30'	18'	12'	30'	18'	12'
3	8'	300'	300'	300'	30'	40'	12'	12'	40'	12'	12'
4	8'	200'	200'	200'	25'	30'	18'	12'	30'	18'	12'
5	4'	150'	150'	150'	25'	25'	16'	8'	25'	16'	8'
6	8'	200'	200'	200'	25'	30'	18'	12'	30'	18'	12'
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											

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

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

- **Concession Stand Inspection Checklist**

1. Cooking Appliances and Equipment

- Are the cooking appliances in the concessions stand in good working order.

2. Electrical Outlets and Sinks

- Go to every electrical outlet in the concession stand and test them to make sure they're working properly.
- Check sinks and faucets to ensure that you'll have the clean water you'll need.

3. Countertops, Tables, and Floors

- Clean all Food and debris left over from the previous game.
- Check for any evidence of insects and rodents.
- Ensure all pest control pesticides are stored away from any food.

4. Instructions for the volunteers

- Are there clear directions posted on:
 - Prices
 - Sanitary cleaning procedures
 - Proper food preparation procedures.
 - Clear guidelines on operating equipment and creating a safe working environment.

Requirement 9 - Concession Stand Safety

Concession Stand Tips

SAFETY FIRST

Requirement 9

12 Steps to Safe and Sanitary

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

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

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

1. Menu.

Keep your menu simple, and keep potentially hazardous foods (meats, eggs, dairy products, protein salads, cut 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 stereo 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 unusable 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 postmarked no later than May 1st.

Volunteers Must Wash Hands

HOW



WHEN

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

Wash after you:

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

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

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

Wear gloves.

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

If you wear gloves:

- ▶ wash your hands before you put on new gloves

Change them:

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

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



Requirement 10 - Equipment Check

- Prior to the start of any Little League® game, the team manager is to inspect the condition of the playing equipment to be used by the players on their team.
- All baseball bats to be used must be deemed to be in accordance with Little League Rules as outlined in the current edition of the Little League Rules, Regulations, and Policies.
- All bats that may be used in the ensuing game must be void of any physical damage, or any altered state.
- To do this thoroughly and effectively, the home plate umpire and his partner(s) are to examine each of the bats that may be used in the game.
- The team manager is to examine each of the batting helmets that may be worn, and the equipment to be worn by the catcher, including the helmet, chest protector and shin guards.
- The batting helmets must be free of cracks or other visible damage, and all the internal padding must not be missing,

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

Good Procedures to Implement

Checklist for Managers, Coaches, and Umpires

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

A. Safe Playing Areas

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

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

B. Safe Equipment

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

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

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

C. Safe Procedures

Managers and coaches must:

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

D. Weather Conditions

Before the Storm

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

Approaching Thunderstorm

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

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

If caught outdoors & no shelter exists

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

What to do if someone is struck by lightning

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

Requirement 11 - Accident Reporting

- **During all Little League functions, where a team of players is participating as a group, it is the responsibility of the manager and coaches to be advocates for safe behavior for each of the players on their team.**
- All injuries are to be taken seriously, and volunteers serving as managers and coaches are responsible for making the health and safety of the players the top priority.
- Accident Forms shall be turned into Safety Officer within 24-48 hours
- “Near-misses” will be analyzed as a proactive tool to evaluate practices and avoid future injuries
- Information on accidents and “near-misses” will be shared with district staff

How to Handle an Injured Player, Returning to Play After Injury

- If a player misses seven (7) or more continuous days of participation, a physician or other accredited medical provider must give written permission for a full return to baseball/softball activity.
- If a Little Leaguer® is injured during a game, practice, or other league-approved activity that may or may not require medical attention, league officials (manager/coach, Safety Officer, Player Agent, etc.) should follow these steps:
 - Administer any initial first aid treatment and or contact emergency services. (if necessary)
 - Contact the player’s parent or legal guardian if they are not onsite at the time of the incident
 - Document the incident with as much detail as possible using any league-created form or utilize the ASAP Incident/Injury Tracking Report.
 - If medical attention is needed, be sure provide to the family the Accident Notification Claim Forms and explain the league’s Accident Insurance.

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.



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	Age
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) | |

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
------	---------------------------

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: _____

Requirement 12 - First-Aid Kits

- Each team is required to supply and carried by Manager, a first aid kit

First Aid Kits: What goes in them?

Requirement 12

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

Thanks,
Marc Paladino
(via email)

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

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

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

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

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

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

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

LLB's Emergency Management and Training Program

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

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

Fyrest USA Sport First Aid Kits

New this year! 4 First Aid Kit options geared to sport injuries. The Sport First Aid Kit (contents below), Mini Sport First Aid Kit, Personal Sport First Aid Kit and the Grab & Go Wound Care Pack. A Unique feature: In 5-7 Days in stock kits, refill packs and cold packs can be ordered. by phone 1-760 720 2842 or online - www.fyrestusa.com.

- 26 Antimicrobial Skin wipes (Kill MRSA)
- 2 Athletic Tape 1.5" x 15yd. rolls
- 20 Bandages 1" x 3"
- 6 Bandages, Large 2" x 4.5"
- 1 Blister Pad Kit
- 1 Blur Blood-Off-Cloth 4.oz bottle w/blot cloth
- 1 Cold Pack Holder w/ hook and loop 6" x 30"
- 4 Cold Packs-Instant 6" x 8.75"
- 1 Elastic Wrap 3" x 5yd. roll
- 1 Eye/ Wound Wash 4.oz bottle
- 10 Gloves- Latex free
- 1 Ice Bag Re-usable 9"
- 1 Pre-Wrap 2.75" x 30yd roll
- 1 Scissors - Lister Bandage/Blunt tip 4.5"
- 3 Grab & Go Wound Care Packs

Little League First Aid Kit

Recommended First Aid kit supplies are as follows:

- Bandages — sheer and flexible
- Non-stick pads — assorted sizes
- Soft-Gauze bandages
- Oval eye pads
- Triangular bandage
- Hypo-allergenic first aid tape in dispenser
- 2-inch elastic bandage
- Antiseptic wipes
- First aid cream
- Instant cold pack
- Tylenol - extra-strength caplets
- Scissors
- Tweezers
- First aid guide
- Contents card
- Disposable gloves

Requirement 13 - Enforce Little League Rules

- We strongly encourage managers to review the Little League® Rules, most of the Little League rules have a basis in safety.
 - Ensure players always have required equipment including catchers warming up on the field
 - Use the Preseason to Review Little League® Rules
 - Ensure players always have required equipment including catchers warming up on the field
 - Coaches and managers shall enforce rules at practices as well as games
 - Make sure all fields have bases that dis-engage their anchor as required by Little League rules
 - Enforce rule that coaches and managers are not allowed to catch/warm-up pitchers (Rule 3.09); this includes standing at the backstop during practice as an informal catcher for batting practice

Sample Code of Conduct

Coaches Code of Conduct


CODE OF CONDUCT – Coaches are Role Models

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

George Colby
Easton, Conn., Little League, District 2

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

<p>Speed Limit 5 mph in roadways and parking lots while attending any _____ Little League function. Watch for small children around parked cars.</p> <p>No Alcohol allowed in any parking lot, field, or common areas within the _____ Little League complex.</p> <p>No SMOKING or Tobacco products of any kind (including spit tobacco) allowed in any common areas within the _____ Little League complex.</p> <p>No Playing in parking lots at any time.</p> <p>No Playing on and around lawn/maintenance equipment.</p> <p>No Profanity allowed in any parking lot, field, or common areas within the _____ Little League complex.</p> <p>No Swinging Bats or throwing baseballs at any time within the walkways and common areas of the Little League complex.</p>	<p>No throwing balls against dugouts or against backstop.</p> <p>No throwing rocks and no climbing fences.</p> <p>Only a player on the field and at bat, may swing a bat (Ages 5 - 12).</p> <p>Observe all posted signs. Players and spectators should be alert at all times for Foul Balls and Errant Throws.</p> <p>During game, players must remain in the dugout area in an orderly fashion at all times.</p> <p>After each game, each team must clean up trash in dugout and around stands.</p> <p>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.</p> <p>No children under age of 16 are to be permitted in the Snack Bars.</p> <p>Failure to comply with the above may result in expulsion from the _____ Little League field or complex.</p>
---	--



asap@mlsco.com 7

Requirement 14 - Player / Coach Data

- Submit league player registration data or player roster data and coach and manager data

Requirement 15 - Answer New Survey Questions for 2023

- Morgan County Little League will follow all state and local guidelines concerning COVID 19 mitigation.
- Morgan County Little League is aware of the Abuse Awareness Training provided by USA Baseball and Safe sport
- Currently we have sent it out to the coaches to the board to make them aware of the opportunity and to encourage them to do the training.