



Coventry Youth Baseball Association Coventry, CT

CYBA – ASAP Plan - 2018



Qualified Safety Plan Requirements

- 1. League Safety Officer: Mark Jeamel on file with Little League Headquarters.
- 2. Coventry Youth Baseball will distribute a paper copy of this Safety Manual to all Managers/ coaches, league Volunteers and the District Administrator.
- 3. **Emergency Phone Number: 911**
 - Local Police Emergency 860-742-7331
 - Local Fire Emergency 860-742-4064
- 4. Important Contact Information: Postede in our concession area

Matt Godi	President/Little League Liaison	860-982-8311
John Prior	Juniors Division Coordinator	860-742-4488
Jeff Simes	Treasurer	860-742-6117
Christine Forte	Sponsorship Coordinator	860-617-6454
Matt Hunt	Vice President/equipment coordinator	860-550-5754
Kevin Covell	Intermediate Coordinator	860-597-2972
Mark Jeamel	Safety Coordinator	860-796-7516
Bill Hayes	Instructional Division Coordinator	860-742-8814
Everett Demers	Player Agent	860-771-1690
Amy Senna	Fundraising	860-916-0601
Keith Aloisa	Website	860-463-1564
• Gus Shearer	Snack Shack	860-794-3452
• Zach Vanais	Umpire Coordinator	860-455-8652
• Craig Jordon	Minor Coordinator	

Qualified Safety Plan Requirements

- 5. Coaches Training:
 - At least one manager/coach from each team must attend the training. March 18th 2018, CYBA has paid for all coaches to attend a Little League Coach Clinic with Big Al. This clinic will run in two sessions:

Killingly High school
226 Putnam Pike
Dayville,CT 06241

Morning session: For Age group 9-13 yr olds Registration begins at 8:15am and the clinic goes from 8:30 to 12:30 pm.
Afternoon session: for age group 4 to 8 yr olds Registration begins at 12:45pm and the clinic goes from 1pm to 4:30pm
- 6. First Aid Training:
 - Coventry Youth Baseball will require at least one manager/coach from each team to attend. Every manager/ coach must attend this training once every 3 years. First Aid training is scheduled for April 17th 2015 at 6:00pm in the Coventry High School gymnasium with the Coventry Fire Dept.
- 7. Coventry Youth Baseball will use the official Little League Volunteer Application form to screen all of our volunteers. (Page 8).
- *Highly recommended – research the concussion laws in your state and educate all coaches/managers & league members.

Qualified Safety Plan Requirements

- 8. Implement Prompt Accident Reporting.
 - The League will use the provided incident tracking form from the LL website and will provide completed accident forms to Safety Officer within 24-48 hours of the incident. Please see copy of accident reporting form. (Page 9)

- 9. First Aid
 - Each Team will be issued two ice packs and a first aid kit is located in the shed attached to the Snack Shack. Extra kits are available in the shed for travel games. Used items must be reported to the Safety Officer in order to maintain appropriate inventory. Safety Officer will conduct an inspection of the first aid inventory once per month.

- 10. Coventry Youth Baseball will require all teams to enforce all Little League Rules including proper equipment for catchers.
 - a. No On-deck batters
 - b. Coaches will not warm up pitchers
 - c. Bases will disengage on all fields
 - d. Each team will be provided with two batting helmets with face guards

Qualified Safety Plan Requirements

- 11. Coaches and umpires will be required to walk/ inspect the fields prior to practices and games. Any anomalies found will be recorded on the “Facility and Field Inspection Checklist” (Page 11) and communicated to the league Safety Officer as well as transposed to the “Master” checklist located in the snack shack shed. The “Master” checklist will be audited by the President and Safety Officer for accuracy and completion.
- 12. Coventry Youth Baseball has completed and updated our 2017 Facility Survey
- 13. Concession Stand Safety
 - Menu shall be posted & approved by the safety officer and the League President
 - See attached hand washing guidelines document. (Page 10).
 - Children under 7 must be accompanied by an adult.
- 14. Pre-Game Safety and Equipment Replacement
 - The League Safety Officer will inspect all equipment in the pre-season and replace any defective or malfunctioning equipment.
 - Managers/ Coaches will inspect equipment prior to each game. Any defective equipment will be labeled and removed so it cannot be used again.
 - Umpires will be required to inspect equipment prior to each game.
- 15. Inclement Weather and Lightning safety guidelines will be followed as per the NOAA flyer. (Pages 6 and 7)
- 16. Qualified Safety Plan Registration Form
- 17. League Player Registration Data or Player Roster Data, Coach and Manager Data

What to do if someone is struck by lightning

- ▶ **Lightning victims do not carry an electrical charge, are safe to handle, and need immediate medical attention.**
- ▶ **Call for help.** Have someone call 9-1-1 or your local ambulance service. Medical attention is needed as quickly as possible.
- ▶ **Give first aid.** Cardiac arrest is the immediate cause of death in lightning fatalities. However, some deaths can be prevented if the victim receives the proper first aid immediately. Check the victim to see that they are breathing and have a pulse and continue to monitor the victim until help arrives. Begin CPR if necessary.
- ▶ **If possible, move the victim to a safer place.** An active thunderstorm is still dangerous. Don't let the rescuers become victims. Lightning CAN strike the same place twice.



NOAA

STAY INFORMED

Listen to NOAA Weather Radio for the latest forecast and for any severe thunderstorm WATCHES or WARNINGS. Severe thunderstorms produce winds of 58 mph or greater, or hail 3/4 of an inch or larger in diameter.

A severe thunderstorm WATCH is issued when conditions are favorable for severe weather to develop.

A severe thunderstorm WARNING is issued when severe weather is imminent. National Weather Service personnel use information from weather radar, satellite, lightning detection, spotters, and other sources to issue these warnings.



NOAA WEATHER RADIO IS THE BEST WAY TO RECEIVE FORECASTS AND WARNINGS FROM THE NATIONAL WEATHER SERVICE.

Remember that all thunderstorms produce lightning and all lightning can be deadly to those outside.

Lightning Safety Awareness Week is the last full week of June. For additional information on lightning or lightning safety, visit NOAA's lightning safety web site:

<http://www.lightningsafety.noaa.gov>

or contact us at:

**National Weather Service
P.O. Box 1208
Gray, Maine 04039**

GYX 0301 (August 2003) - Revised

Coach's and Sports Official's Guide to Lightning Safety...



NOAA

***LIGHTNING...
the underrated killer!***

A SAFETY GUIDE

**U.S. DEPARTMENT OF COMMERCE
NATIONAL OCEANIC AND
ATMOSPHERIC ADMINISTRATION**

**NATIONAL WEATHER
SERVICE**

Gray, Maine



This safety guide has been prepared to help coaches and sports officials recognize the dangers of lightning and take appropriate safety precautions.

LIGHTNING KILLS

Play It Safe !

Each year in the United States, more than four hundred people are struck by lightning. On average, about 70 people are killed and many others suffer permanent neurological disabilities. Most of these tragedies can be avoided if proper precautions are taken. When thunderstorms threaten, coaches and sports officials must not let the desire to start or complete an athletic activity hinder their judgment when the safety of participants and spectators is in jeopardy.

It is important for coaches and officials to know some basic facts about lightning and its dangers

- ▶ **All thunderstorms produce lightning and are dangerous.** In an average year, lightning kills more people in the U.S. than either tornadoes or hurricanes.
- ▶ **Lightning often strikes outside the area of heavy rain and may strike as far as 10 miles from any rainfall.** Many deaths from lightning occur ahead of storms because people wait too long before seeking shelter, or after storms because people return outside too soon.
- ▶ **If you hear thunder, you are in danger.** Anytime thunder is heard, the thunderstorm is close enough to pose an immediate lightning threat to your location.
- ▶ **Lightning leaves many victims with permanent disabilities.** While only a small percentage of lightning strike victims die, many survivors must learn to live with very serious, life-long disabilities.

To avoid exposing athletes and spectators to the risk of lightning take the following precautions

- ▶ **Postpone activities if thunderstorms are imminent.** Prior to an event, check the latest forecast and, when necessary, postpone activities early to avoid being caught in a dangerous situation. Stormy weather can endanger the lives of participants, staff, and spectators.
- ▶ **Plan ahead.** Have a lightning safety plan. Know where people will go for safety, and know how much time it will take for them to get there. Have specific guidelines for suspending the event or activity so that everyone has time to reach safety before the threat becomes significant. Follow the plan without exception.
- ▶ **Keep an eye on the sky.** Pay attention to weather clues that may warn of imminent danger. Look for darkening skies, flashes of lightning, or increasing wind, which may be signs of an approaching thunderstorm.
- ▶ **Listen for thunder.** If you hear thunder, immediately suspend your event and instruct everyone to get to a safe place. Substantial buildings provide the best protection. Once inside, stay off corded phones, and stay away from any wiring or plumbing. Avoid sheds, small or open shelters, dugouts, bleachers, or grandstands. If a sturdy building is not nearby, a hard-topped metal vehicle with the windows closed will offer good protection, but avoid touching any metal.

- ▶ **Avoid open areas.** Stay away from trees, towers, and utility poles. Lightning tends to strike the taller objects.
- ▶ **Stay away from metal bleachers, backstops and fences.** Lightning can travel long distances through metal.
- ▶ **Do not resume activities until 30 minutes after the last thunder was heard.**
- ▶ **As a further safety measure, officials at outdoor events may want to have a tone-alert NOAA Weather Radio.** The radio will allow you to monitor any short-term forecasts for changing weather conditions, and the tone-alert feature can automatically alert you in case a severe thunderstorm watch or warning is issued. To find your nearest NOAA weather radio transmitter, go to <http://www.nws.noaa.gov/nwr/> and click on "Station Listing and Coverage."

If you feel your hair stand on end (indicating lightning is about to strike)

- ▶ **Crouch down on the balls of your feet, put your hands over your ears, and bend your head down.** Make yourself as small a target as possible and minimize your contact with the ground.
- ▶ **Do not lie flat on the ground.**



NOAA



Little League Volunteer Application -2013

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

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

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Social Security # (mandatory with LexisNexis or upon request) _____

Cell Phone _____ Business Phone _____

E-mail Address: _____

Date of Birth _____

Occupation _____

Employer _____

Address _____

Special professional training, skills, hobbies: _____

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

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

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

Special Certification (CPR, Medical, etc.): _____

Do you have a valid driver's license: Yes No

Driver's License#: _____ State _____

Have you ever been convicted of or plead guilty to any crime(s): Yes No

If yes, describe each in full: _____

Are there any criminal charges pending against you regarding any crime(s) involving or against a minor? Yes No If yes, describe each in full: _____

Have you ever been refused participation in any other youth programs? Yes No

If yes, explain: _____

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

League Official Coach Umpire Field Maintenance

Manager Scorekeeper Concession Stand Other

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

Name/Phone _____

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, 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):

Sex Offender Registry Criminal History Records *LexisNexis

**Please be advised that if you use LexisNexis and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter directly from LexisNexis 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.

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 (4-7) Minor (7-11) Major (9-12) Intermediate (50/70) (11-13)
 Junior (12-14) Senior (13-16) Big League (15-18)
C.) Tryout Practice Game Tournament Special Event
 Travel to _____ Travel from _____ Other (Describe): _____

Position/Role of person(s) involved in incident:

- D.) Batter Baserunner Pitcher Catcher First Base Second
 Third Short Stop Left Field Center Field Right Field Dugout
 Umpire Coach/Manager Spectator Volunteer Other: _____

Type of injury: _____

Was first aid required? Yes No If yes, what: _____

Was professional medical treatment required? Yes No If yes, what: _____
(If yes, the player must present a non-restrictive medical release prior to being allowed in a game or practice.)

Type of incident and location:

- A.) On Primary Playing Field **B.)** Adjacent to Playing Field **D.)** Off Ball Field
 Base Path: Running or Sliding Seating Area Travel:
 Hit by Ball: Pitched or Thrown or Batted Parking Area Car or Bike or
 Collision with: Player or Structure **C.)** Concession Area Walking
 Grounds Defect Volunteer Worker League Activity
 Other: _____ Customer/Bystander Other: _____

Please give a short description of incident: _____

Could this accident have been avoided? How: _____

This form is for Little League purposes only, to report 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 claims or injuries which could become claims, please fill out and turn in the official Little League Baseball Accident Notification Form available from your league president and send to Little League Headquarters in Williamsport (Attention: Dan Kirby, Risk Management Department). Also, provide your District Safety Officer with a copy for District files. All personal injuries should be reported to Williamsport as soon as possible.

Prepared By/Position: _____

Phone Number: () _____

Signature: _____

Date: _____

Volunteers Must Wash Hands

HOW



Wet

warm water



Wash

20 seconds

Use soap



Rinse



Dry

Use single-service
paper towels



Gloves

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.



UMASS
EXTENSION

Facility and Field Inspection Checklist

Facility Name _____

Inspector _____

Date _____

Time _____

- Holes, damage, rough or uneven spots
- Slippery Areas, long grass
- Glass, rocks and other debris & foreign objects
- Damage to screens, fences edges or sharp fencing
- Unsafe conditions around backstop, pitchers mound
- Warning Track condition
- Dugouts condition before and after games
- Make sure telephones are available
- Area's around Bleachers free of debris
- General Garbage clean-up
- Who's in charge of emptying garbage cans
- Conditions of restrooms and restroom supplies
- Concession Stand inspection

NOTES/ HAZARDS

Signature _____