

Derry (NH) Little League Safety Plan - 2011

Derry American Little League (229-01-05)

Proudly celebrating over 55 years of volunteer service to the children of Derry!



Emergency numbers (**911** is primary):

Derry Fire/EMT: **432-6111**

Derry Police: **432-6121**

Key League Contacts:

President: Steve Tritto	425-1957 (League phone)	
Equipment: Rob Hall	425-1957 (League phone)	Call to replace defective/missing equipment. Email: rhall@derryll.org
Umpire in Chief: Don Kirkland	432-5555 (H)	
Safety Officer: Steve Heffelfinger	603-434-3738 (H) 603-548-3183 (cell)	Call to submit accident reports and questions about safety issues. Email: sheffelfinger@derryll.org

The Safety Officer shall be a board member position and on file with Little League International. This safety plan will be distributed to all volunteers during Team meeting scheduled by the Board.

1. **Volunteer Screening.** It is **MANDATORY** that all League personnel who have repetitive or frequent access to players fill out the Official Little League Volunteer Application form annually and also pass a criminal background check. Anyone refusing to complete either of these screenings **is ineligible to be a League member.**
2. **Identification Badges.** All approved League volunteers will be issued a numbered photo id badge. This badge must be visible when volunteers are working with players during either games or practices.
3. **Field and Equipment Inspections.** Prior to any practice or game, Managers are required to walk the fields looking for hazards (rocks, glass, holes, etc).
 - a. All garbage should be collected and placed into the team's trash bag for removal.
 - b. Any serious deficiencies that cannot be resolved must be reported to the Safety Officer (Steve Heffelfinger).
4. **Equipment inspection.** Managers and coaches are responsible for inspecting all equipment prior to use.
 - a. Damaged equipment (cracked helmets, helmets missing padding, dented bats, etc) should be removed from play **IMMEDIATELY.**
 - b. Contact the Equipment Manager (Rob Hall) to obtain replacements.
 - c. Managers should ensure that player-provided helmets are NOCSAE approved.
5. **First Aid Training.** Two First Aid classes will be held during the pre-season on 2 and 9 Apr 2011 at the Gerrish Community Center.
 - a. Each team must have at least 1 representative at the meeting. This class is being taught by a retired Derry firefighter, Ed Gannon.
 - b. The League's **AED** will be located in the concession stand at O'Hara Field.
6. **First Aid Kits.** The League-issued first aid kits shall be taken to all practices and games.
 - a. Replacement supplies (cold packs, band-aids, etc) can be obtained from the Equipment Manager.
 - b. Supplies are packed in individual clear 'Zip lock' bags to help protect them from dirt and moisture contamination.
 - c. Note: cold packs are only to be used for impact injuries and are **not** intended for "icing down" pitchers' arms.
7. **Catchers.** Catchers **must** wear a catcher's helmet (with face mask and dangling throat guard), chest protector and shin guards.
 - a. Male catchers must wear the long-model chest protector (Jr/Sr divisions may wear the short chest protector), protective supporter and cup at **all** times.
 - b. Adults are **NOT** to warm up pitchers at any time (see LL rule 3.09)
8. **Mouth guards.** Although not required, it is strongly recommended that all players wear mouth guards for both practices and games.
9. **Protective Cups.** While these are only required for catchers, it is strongly recommended that all players (male and female) wear protective cups.
10. **Safety Glasses.** Due to the risk of eye injury from shattered glasses, parents should be encouraged to provide "Safety Glasses".

11. **Accident Reports.** Verbal accident reports for incidents that require first aid, should be made within 24 hrs to the Safety Officer.
 - a. Follow-up written reports are due within 3 days. A blank form is attached to this plan
 - b. PDF copies can be downloaded from the Little League website at:
http://www.littleleague.org/Assets/forms_pubs/asap/Injury_Tracking_Form.pdf
 - c. Wherever possible, be sure to obtain the names of witnesses to the incident.

12. **Concession Stand.** These operating procedures for the concession stand at O'Hara Field are also posted on the wall next to the cash register:
 - a. Workers must wear disposable gloves when serving food that is not wrapped : hot dogs, hamburgers, and any other grilled or fried items.
 - b. At least 1 adult shall be in the concession stand at all times when open.
 - c. Children shall not be allowed to congregate in the Concession stand.
 - d. The fire extinguisher beside the cash register must be checked weekly.
 - e. Extreme care should be used when operating the fryer (adults only)
 - f. A first aid kit is provided for both concession and player use.
 - g. All workers must be aware of the location of both the electrical breaker box and grill hood fire suppression switch.
 - h. Any injuries must be reported within 24 hrs to the Safety Officer.

13. **Coaching Fundamentals Training.** As in previous years, a baseball fundamentals clinic for coaches will be provided.
 - a. The class will be held in April before Opening Day in Alexander Carr Park.
 - b. The class will be taught by Dean Borelli and members of his staff from Play Ball!
 - c. It is required that at least one representative from each team attends each year; coaches/managers must attend training at least once every three years.
 - d. The clinic will include proper warm-ups, running safe practices and games.

14. **Jewelry.** Players must not wear watches, rings, earrings (studs included), pins, necklaces or other metallic objects (including other body piercings). The only acceptable jewelry item is a necklace or bracelet containing medical emergency information.

15. **Sliding - General.** Although there is no absolute 'must slide' rule, players have the option of either sliding or attempting to avoid a defensive player with the ball waiting to make the tag.
 - a. 'Crashing' the catcher (or any other player waiting to make the tag) will not be tolerated and will result in immediate ejection.
 - b. Ejected players must also sit out the following game in uniform on the bench.

16. **Head First Slides.** As noted in the Rule Book, this is prohibited unless returning to a base.
 - a. Any player sliding headfirst while advancing to a base will be called **OUT** by the umpire.
 - b. Note: this prohibition does **NOT** apply to players in the Jr league and older divisions.

17. **On Deck Batters.** In Divisions below Jr League, **THERE IS NO ON DECK BATTER.** **The only person to have a bat in their hands is the current batter.** Horseplay around the bench with bats is not to be tolerated. Coaches shall also enforce this policy during practices.

18. **Supervision.** To ensure adequate supervision, two adults (at a minimum) should be in attendance at each practice or game.
 - a. Parents/guardians should be cautioned to not drop off children until at least one coach is present. Likewise, coaches must not leave the field after the practice/game until all players have been picked up.
 - b. Players who are ejected, ill, or injured shall remain under supervision until released to the parent/guardian.
 - c. During warm-up drills, players should be spaced so that no one is endangered by errant balls
 - d. Only players, managers, coaches and umpires are allowed on the playing field during practices or games.

19. **Rules.** Know your rules-- many are based on sound safety practices.
 - a. It is recommended that Managers and Coaches periodically review the rulebook to ensure understanding.
 - b. Questions about specific rules/ interpretations should be directed to the Umpire in Chief (Don Kirkland).
 - c. The League is always looking for knowledgeable members who would like to help out as umpires. Professional training will be provided at no cost to the volunteer. Some of our current umpires have attended the school at either the Eastern Region (Bristol, CT) or the International LL Headquarters (Williamsport, PA). Interested personnel should either contact Mr Kirkland, or leave a message on the League phone: 425-1957.

20. **Thrown equipment.** Thrown equipment poses a danger to spectators, umpires, and other players. It will not be tolerated.
 - a. Any player adjudged by an umpire to have thrown equipment in anger will be ejected from the game.
 - b. As with all other ejections, the player will also sit out the next game and must be in uniform on the bench.

21. **Inclement Weather.** The electronic lightning detector is operational in the concession stand.
 - a. At the first sign of lightning at any field, players and coaches are to be removed from the field to a safe area (cars, building).
 - b. Player and volunteer safety is paramount-- we can always re-schedule a weather-canceled game.

22. **Darkness.** Evening games may be shortened (especially early in the season) by darkness.
 - a. The plate umpire has the responsibility and authority to call the game whenever poor visibility threatens player safety.
 - b. As with other judgment calls, this decision is final and not subject to appeal or argument. AA Managers have this responsibility for games in their Division.

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 (5-8) Minor (7-12) Major (9-12) Junior (13-14)
 Senior (14-16) Big League (16-18)
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 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 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: _____



Little League Volunteer Application -2011

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 _____

Cell Phone _____ Business Phone _____

E-mail Address: _____

Date of Birth _____

Occupation _____

Social Security # (mandatory) _____

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 a background check on me, 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 _____

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.

140-11-VOLUNTEER APPLICATION 2010-11