

Beaverhead Little League
ASAP Plan
2023

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2023 Board of Directors

| | | | |
|--|------------------|----------------|----------------------------|
| President/Information Officer | Alyssa Creighton | (406) 660-0512 | creighton.alyssa@gmail.com |
| Vice President BB/ Player Agent | Andy Bartlome | (406) 925-1910 | andybartlome@gmail.com |
| Secretary | Jill Nagle | (406) 925-9250 | jillagannon@hotmail.com |
| Treasurer | Zach Oswald | (541) 699-8595 | zoswald@gmail.com |
| Safety Officer | Jeff Feenstra | (406) 570-6368 | jeff.feenstra@gmail.com |
| BB Coaching Coordinator | Evan Peacock | (406) 660-0644 | evan@shepherds garage.com |
| SB Coaching Coordinator/Sponsors hip Fundraising | Cory Creighton | (406) 660-0518 | creighton.cory@gmail.com |
| SB VP/Player Agent | Shantel Pilon | (406) 577-6735 | shasaye@gmail.com |
| Field Prep/Maint | Matt Vinson | (406) 925-3522 | matt@vinsonplumbing.com |
| Twin Bridges Rep | Patty Nelson | (406) 459-2452 | silverstarcrew@hotmail.com |
| | | | |

Background Check Procedures

As a condition of charter, local Little League organizations, including Beaverhead Little League, must submit all volunteers to a national background check.

The background check is one method through which Little League demonstrates a commitment to safety of all participants.

Volunteers will register through www.beaverheadlittleleague.org from which their information will be uploaded to the preferred provider of background checks as determined by Little League International.

Individuals for whom potentially problematic reports are issued, will be asked to meet with the Board of Directors of Beaverhead Little League. Based on information obtained from the background check and volunteer, the Board of Directors, in consultation with Legal Counsel, will determine the status of the volunteer application.

Sport Parent Code of Conduct

We, the _____ Little League, have implemented the following Sport Parent Code of Conduct for the important message it holds about the proper role of parents in supporting their child in sports. Parents should read, understand and sign this form prior to their children participating in our league.

Any parent guilty of improper conduct at any game or practice will be asked to leave the sports facility and be suspended from the following game. Repeat violations may cause a multiple game suspension, or the season forfeiture of the privilege of attending all games.

Preamble

The essential elements of character-building and ethics in sports are embodied in the concept of sportsmanship and six core principles:

- Trustworthiness,
- Respect,
- Responsibility,
- Fairness,
- Caring, and
- Good Citizenship.

The highest potential of sports is achieved when competition reflects these "six pillars of character."

I therefore agree:

1. I will not force my child to participate in sports.
2. I will remember that children participate to have fun and that the game is for youth, not adults.
3. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
4. I will learn the rules of the game and the policies of the league.
5. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or other sporting event.
6. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.
7. I will not encourage any behaviors or practices that would endanger the health and well being of the athletes.
8. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
9. I will demand that my child treat other players, coaches, officials and spectators with respect regardless of race, creed, color, sex or ability.
10. I will teach my child that doing one's best is more important than winning, so that my child will never feel defeated by the outcome of a game or his/her performance.
11. I will praise my child for competing fairly and trying hard, and make my child feel like a winner every time.
12. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
13. I will emphasize skill development and practices and how they benefit my child over winning. I will also de-emphasize games and competition in the lower age groups.
14. I will promote the emotional and physical well-being of the athletes ahead of any personal desire I may have for my child to win.
15. I will respect the officials and their authority during games and will never question, discuss, or confront coaches at the game field, and will take time to speak with coaches at an agreed upon time and place.
16. I will demand a sports environment for my child that is free from drugs, tobacco, and alcohol and I will refrain from their use at all sports events.
17. I will refrain from coaching my child or other players during games and practices, unless I am one of the official coaches of the team.

Parent/Guardian Signature

Little League Pledge

I TRUST IN GOD

I LOVE MY COUNTRY AND WILL RESPECT ITS LAWS

I WILL PLAY FAIR AND STRIVE TO WIN BUT WIN OR LOSE

I WILL ALWAYS DO MY BEST



The Little League Parent Volunteer Pledge

I will teach all children to play fair and do their best

I will positively support all managers, coaches and players

I will respect the decisions of the umpires

I will praise a good effort despite the outcome of the game

Safety Guidelines

- Managers, coaches and umpires should have training in first-aid. First-aid kits are issued to each team manager.
- COVID-19 mitigation strategies shall be implemented as directed by Beaverhead County Public Health and/or Madison County Public Health.
- No games or practices should be held when weather or field conditions are bad, particularly with lightning.
- Play area should be inspected frequently for holes, damage, stones, glass and other foreign objects.
- All team equipment should be stored within the team dugout, or behind screens, and not within the area defined by the umpires as “in play.”
- Only players, managers, coaches, and umpires are permitted on the playing field or in the dugout during games and practice sessions.
- Responsibility for keeping bats and loose equipment off the field of play should be that of a player assigned for this purpose or the team’s manager and coaches.
- During practice and games, all players should be alert and watching the batter on each pitch.
- During warm-up drills players should be spaced so that no one is endangered by wild throws or missed catches.
- All pre-game warm-ups should be performed within the confines of the playing field and not within areas that are frequented by, and thus endanger spectators (i.e., playing catch, pepper, swinging bats, etc.).
- Equipment should be inspected regularly for the condition of the equipment as well as for proper fit.
- Batters must wear Little League approved protective helmets during batting practice and games.
- Catcher must wear catcher’s helmet, mask, throat guard, long model chest protector, shin guards and protective cup with athletic supporter at all times (males) for all practices and games. NO EXCEPTIONS.
- Parents and managers should encourage all male players to wear protective cups and supporters as well as mouth guards for practices and games.
- Except when runner is returning to a base, headfirst slides are not permitted.
- During sliding practice, bases should not be strapped down or anchored.

- At no time should “horse play” be permitted on the playing field.
- Parents of players who wear glasses should be encouraged to provide “safety glasses.”
- Player must not wear watches, rings, pins or metallic items during games and practices.
- Managers and Coaches may NOT warm up pitchers before or during a game.
- On-deck batters are not permitted (except in Junior/Senior/Big League Divisions).
- No dogs or other animals are allowed at practices or games.

For additional information on Little League safety initiatives, please sign up for Little League E-News at www.littleleague.org or visit www.beaverheadlittleleague.org

Shelter-in-Place Procedures

In the event of inclement weather or other safety threats to participants or spectators, Beaverhead Little League volunteers or community law enforcement/safety officers may advise a shelter-in-place procedure.

Due to the open nature of all baseball fields associated with Beaverhead Little League, fully enclosed vehicles, represent the best option for seeking shelter.

Weather conditions, especially lightning, will be monitored by Beaverhead Little League volunteers who will communicate information with players/parents as safety allows.

For non-weather related threats to safety, please refer to our local radio stations – KDBM 1490 AM and KBEV 98.3 FM in Dillon or 93.3 FM in Twin Bridges and Sheridan.

Beaverhead Little League
2023 Season COVID-19 Mitigation Plan

GENERAL GUIDELINES FOR LEAGUE PARTICIPANTS AND FAMILIES

CONTINUE TO PRACTICE GOOD HYGIENE

- Wash your hands with soap and water or use hand sanitizer, especially after touching frequently used items or surfaces.
- Avoid touching your face.
- Sneeze or cough into a tissue, or the inside of your elbow.
- Disinfect frequently used items and surfaces as much as possible.
- Consider using non-medical face coverings while in public, especially in circumstances that do not readily allow for appropriate physical distancing

PEOPLE WHO FEEL SICK SHOULD STAY HOME

- Do not go to practice or games.
- Contact and follow the advice of your medical provider.
- Follow local health department guidance on isolation and quarantine.

MAINTAIN PHYSICAL DISTANCING WHEN ATTENDING EVENTS

- All individuals (non-household), **WHEN IN PUBLIC** (e.g., parks, outdoor recreation areas, shopping areas), should maximize physical distance from others.
- Avoid **GATHERING** in groups in circumstances that do not readily allow for appropriate physical distancing.

If you feel participation in league activities presents a risk to you or members of your household, or that you cannot comply with these guidelines, please notify the board of directors to cancel your registration and obtain a refund of payments made.

Guidelines for player participants

- Use provided hand sanitizer before, during, and after all practices and games
- Consider wearing a cloth mask during all activities
- Do your best to maintain physical distancing requirements (3 feet) during activities. We understand that sometimes in the games of baseball/softball you must be closer than that (for example, the catcher and batter or a baserunner and infielder) but we will work to minimize these exposures
- Use and touch your own equipment only whenever possible, after touching shared equipment, use hand sanitizer
- Do not give high fives to teammates or opponents
- Do not come to practices or games if you feel sick, have your parent/guardian call your health care provider for guidance
- If you do cough, sneeze, or touch your face during activity, use provided hand sanitizer or wash hands with soap and water
- Find a place for your gear along the baseline fence that allows you to be 3 feet away from your teammates

Guidelines for families and other spectators

- Follow and encourage good hygiene practices and consider wearing a cloth mask at all activities
- Do not attend activities if you are sick and do not allow your player to attend activities if sick
- Remind your players about the importance of physical distancing during activity
- When dropping off or picking up your player, maintain physical distancing from other families and participants
- When attending games, bring your own seating and ensure physical distancing between your family and others, designated areas will be indicated for spectators, be alert to game related safety matters when in these locations (i.e. – foul balls)

Guidelines for managers, coaches, and other volunteers

- Use provided hand sanitizer before, during, and after all league activities
- Consider wearing a cloth mask during all activities
- Remind participants about physical distancing requirements (3 feet) before beginning activity and supervise participants to ensure compliance
- Design practice activities to allow for maintenance of physical distancing
- There are some situations in baseball/softball during which physical distancing is difficult to maintain- work to minimize the time of these exposures
- Use designated spaces for players to safely wait to bat while allowing physical distancing, enlist the help of additional volunteers to supervise area
- Do not give/allow high fives or other contact with or between participants, including post competition handshakes, instead, line up on baseline in front of dugout and tip caps to opponents
- Do not allow anyone feeling sick or displaying signs of illness to participate in any league activities

Beaverhead Little League

CONCUSSION FACT SHEET FOR PARENTS



WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

You can't see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

SYMPTOMS REPORTED BY ATHLETE:

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not "feeling right" or is "feeling down"

SIGNS OBSERVED BY PARENTS/ GUARDIANS:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes



CONCUSSION DANGER SIGNS

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)

WHAT SHOULD YOU DO IF YOU THINK YOUR ATHLETE HAS A CONCUSSION?

1. If you suspect that an athlete has a concussion, remove the athlete from play and seek medical attention. Do not try to judge the severity of the injury yourself. Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says s/he is symptom-free and it's OK to return to play.
2. Rest is key to helping an athlete recover from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, and playing video games, may cause concussion symptoms to reappear or get worse. After a concussion, returning to sports and school is a gradual process that should be carefully managed and monitored by a health care professional.
3. Remember: Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

WHY SHOULD AN ATHLETE REPORT THEIR SYMPTOMS?

If an athlete has a concussion, his/her brain needs time to heal. While an athlete's brain is still healing, s/he is much more likely to have another concussion. Repeat concussions can increase the time it takes to recover. In rare cases, repeat concussions in young athletes can result in brain swelling or permanent damage to their brain. They can even be fatal.

STUDENT-ATHLETE NAME PRINTED

STUDENT-ATHLETE NAME SIGNED

DATE

PARENT OR GUARDIAN NAME PRINTED

PARENT OR GUARDIAN NAME SIGNED

DATE

Heat Illness

Heat Cramps- Muscle pain or spasms usually in the abdomen, arms, or legs.

Athletes with heat cramps should:

- Stop all activity, and sit in a cool place.
- Drink clear juice or a sports beverage.
- Not return to strenuous activity for a few hours after the cramps subside because further exertion may lead to heat exhaustion or heat stroke.
- Seek medical attention if any of the following apply:
The athlete has heart problems.
The athlete is on a low-sodium diet.

The cramps do not subside within one hour.

Heat syncope is a fainting (syncope) episode or dizziness that usually occurs with prolonged standing or sudden rising from a sitting or lying position. Factors that may contribute to heat syncope include dehydration and lack of acclimatization.

Symptoms of heat syncope include:

- Light-headedness
- Dizziness
- Fainting

Athletes with heat syncope should:

- Sit or lie down in a cool place when they begin to feel symptoms.
- Slowly drink water, clear juice, or a sports beverage.

Heat exhaustion is the body's response to an excessive loss of the water and salt, usually through excessive sweating. With heat exhaustion, body temperature rises as high as 104 F and nausea, vomiting, headache, fainting, weakness, and cold, clammy skin may be experienced. If left untreated, this can lead to heatstroke.

Symptoms of heat exhaustion include:

- Heavy sweating
- Extreme weakness or fatigue
- Dizziness, confusion
- Nausea
- Clammy, moist skin
- Pale or flushed complexion
- Muscle cramps
- Slightly elevated body temperature
- Fast and shallow breathing

Emergency Treatment

Treat an athlete suffering from heat exhaustion with the following:

- Rest in a cool, shaded or air-conditioned area.
- Drink plenty of water or other cool, nonalcoholic beverages.
- Take a cool shower, bath, or sponge bath.

Heat stroke is the most serious heat-related disorder. It occurs when the body becomes unable to control its temperature: the body's temperature rises rapidly, the sweating mechanism fails, and the body is unable to cool down. When heat stroke occurs, the body temperature can rise to 106 degrees Fahrenheit or higher within 10 to 15 minutes. Heat stroke can cause death or permanent disability if emergency treatment is not given.

Symptoms of heat stroke include:

- Hot, dry skin or profuse sweating
- Hallucinations
- Chills
- Throbbing headache
- High body temperature
- Confusion/dizziness
- Slurred speech

Emergency Treatment

- Call 911 immediately
- Move the sick athlete to a cool shaded area.
- Cool the athlete as soon as possible by spraying, sponging, showering, or submersing in cool water.
- Continue cooling methods until EMS arrives, unless necessary to stop to perform CPR.

WHAT PARENTS SHOULD KNOW ABOUT LITTLE LEAGUE® INSURANCE

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

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

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

1. The Little League Baseball and Softball accident notification form must be completed by parents (if the claimant is under 19 years of age) and a league official and forwarded directly to Little League Headquarters within 20 days after the accident. A photocopy of the form should be made and kept by the parent/claimant. Initial medical/dental treatment must be rendered within 30 days of the Little League accident.
2. Itemized bills, including description of service, date of service, procedure and diagnosis codes for medical services/ supplies and/or other documentation related to a claim for benefits are to be provided within 90 days after the accident. In no event shall such proof be furnished later than 12 months from the date the initial medical expense was incurred.
3. When other insurance is present, parents or claimant must forward copies of the Explanation of Benefits or Notice/ Letter of Denial for each charge directly to Little League International, even if the charges do not exceed the deductible of the primary insurance program.
4. Policy provides benefits for eligible medical expenses incurred within 52 weeks of the accident, subject to Excess Coverage and Exclusion provisions of the plan.
5. Limited deferred medical/dental benefits may be available for necessary treatment after the 52-week time limit when:
 - (a) Deferred medical benefits apply when necessary treatment requiring the removal of a pin /plate, applied to transfix a bone in the year of injury, or scar tissue removal, after the 52-week time limit is required. The Company will pay the Reasonable Expense incurred, subject to the Policy's maximum limit of \$100,000 for any one injury to any one Insured. However, in no event will any benefit be paid under this provision for any expenses incurred more than 24 months from the date the injury was sustained.
 - (b) If the Insured incurs Injury, to sound, natural teeth and Necessary Treatment requires treatment for that Injury be postponed to a date more than 52 weeks after the injury due to, but not limited to, the physiological changes of a growing child, the Company will pay the lesser of: 1. A maximum of \$1,500 or 2. Reasonable Expenses incurred for the deferred dental treatment.

Reasonable Expenses incurred for deferred dental treatment are only covered if they are incurred on or before the Insured's 23rd birthday. Reasonable Expenses incurred for deferred root canal therapy are only covered if they are incurred within 104 weeks after the date the Injury occurs.

No payment will be made for deferred treatment unless the Physician submits written certification, within 52 weeks after the accident, that the treatment must be postponed for the above stated reasons.

Benefits are payable subject to the Excess Coverage and the Exclusions provisions of the Policy.

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

PRECAUCIÓN: El equipo de protección no puede prevenir todas las lesiones que un jugador podría recibir al practicar Béisbol /Softbol.

LO QUE LOS PADRES DEBEN SABER ACERCA DEL SEGURO DE LAS PEQUEÑAS LIGAS

El Programa de Seguro de las Pequeñas Ligas está diseñado a producir protección a todos los participantes al costo más económico a la liga local. La Política de Accidentes del Jugador de las Pequeñas Ligas es un plan de cobertura extra solo para accidentes, para usar como suplemento para otros seguros llevados bajo las políticas de una familia o seguro proporcionado por el empleador del padre. Si no existe cobertura primaria, el seguro de las Pequeñas Ligas le proporcionará beneficios por cambios elegibles, hasta permisos Usuales y Acostumbrados para su área, después de un deducible de \$50.00 por reclamo, hasta el máximo de beneficios indicado.

Este plan hace posible ofrecer protección excepcional y alcanzable asegurando a los padres quienes su cobertura adecuada están en función para todos los eventos y programas aprobados por las Pequeñas Ligas asegurados.

Si su hijo tiene una lesión cubierta mientras forma parte de un juego o práctica programada de las Pequeñas Ligas de Béisbol o Softbol, así es como funciona el seguro:

1. Se debe completar el formulario de notificación de accidente de las Pequeñas Ligas de Béisbol por los padres (si el demandante es menor de 19 años) y un oficial de la liga y dirigido directamente a la Sede de las Pequeñas Ligas dentro de 20 días después del accidente. Se debe sacar una copia del formulario y lo debe mantener el padre/demandante. Se debe iniciar el tratamiento médico/dental dentro de 30 días del accidente de la Pequeña Liga.
2. Facturas detalladas, incluyendo la descripción del servicio, fecha del servicio, procedimiento y códigos de diagnósticos para servicios/provisiones médicas y/u otra documentación relacionada a un reclamo por beneficios deben proporcionarse dentro de 90 días después del accidente. De ninguna manera tal prueba debe proporcionarse después de 12 meses a partir de la fecha inicial en que incurrió el gasto médico.
3. Cuando está presente otro seguro, los padres o el demandante debe dirigir copias de la Explicación de Beneficios o Notificación/Carta de Negación de cada cargo directamente a la Sede de las Pequeñas Ligas, aún si los cargos no exceden el deducible del programa de seguro principal.
4. La política proporciona beneficios para gastos médicos elegibles incurridos dentro de 52 semanas del accidente, sujetos a provisiones de Cobertura Excesiva y Exclusión del plan.
5. Beneficios médicos/dentales limitados diferidos pueden estar disponibles para tratamiento necesario después del límite de 52 semanas cuando:
 - (a) Los beneficios médicos diferidos aplican cuando es necesario un tratamiento requerido para quitar un clavo/placa, aplicada para reconstruir un hueso al año de lesión, o para quitar una cicatriz, se requiere después del límite de 52 semanas. La Compañía pagará el Gasto Razonable incurrido, sujeto al límite máximo de \$100,000 de la Política para cualquier lesión a cualquier asegurado. Sin

2023 Beaverhead Little League

Coaches/Volunteer Packet

Thank you for volunteering to assist Beaverhead Little League in providing quality instruction and competition opportunities to children in Beaverhead and Madison Counties.

This packet will provide you with safety and security information designed to ensure a safe and beneficial participation opportunity to all athletes and volunteers.

Please review all information contained in this packet and submit the appropriate background check form to the Board at your earliest convenience. The final page of this document contains important dates to help you plan for the upcoming educational/training sessions and Little League Season.

Please contact members of the Board of Directors with questions on this material.

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|--|------------------|----------------|----------------------------|
| President/Information Officer | Alyssa Creighton | (406) 660-0512 | creighton.alyssa@gmail.com |
| Vice President BB/ Player Agent | Andy Bartlome | (406) 925-1910 | andybartlome@gmail.com |
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| Treasurer | Zach Oswald | (541) 699-8595 | zoswald@gmail.com |
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| Twin Bridges Rep | Patty Nelson | (406) 459-2452 | silverstarcrew@hotmail.com |

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The background check is one method through which Little League demonstrates a commitment to safety of all participants.

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Little League Pledge

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I LOVE MY COUNTRY AND WILL RESPECT ITS LAWS
I WILL PLAY FAIR AND STRIVE TO WIN BUT WIN OR LOSE
I WILL ALWAYS DO MY BEST



The Little League Parent Volunteer Pledge

I will teach all children to play fair and do their best
I will positively support all managers, coaches and players
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I will praise a good effort despite the outcome of the game

Emotional Security and Attitudes In Children

By Dr. Luke LaPorta

An understanding of children is the most important component of the Little League® program. Adults working with youth should be constantly aware of emotional security and attitudes of children under their direction. Dr. LaPorta, of Liverpool, New York, is widely recognized as an authority in this field and was a recipient of the Athletic Director of the Year Award sponsored by the National Council of Secondary School Athletic Directors. He has been active in Little League for more than 40 years and served as the Chairman of the Little League International Board of Directors.

From the sum of the total experience, along with the physical and mental reactions to such experiences, the player begins to develop certain attitudes. These attitudes then manifest themselves in patterns of behavior, behavior that could prove to be acceptable or unacceptable.

When working with children it is important to remember that at this particular age they are sensitive to the subtle pressures of acceptance and rejection.

In choosing activities in which they will take part, children make their choices for a variety of reasons. Some will choose an activity where they can be with someone they like, others will choose an activity that they enjoy, but, for the most part, children will choose the game or activity in which they have the greatest success. Children like to do the things that they can do best. The real fast runner wants to run races, the good basketball player wants to shoot baskets, and the heavy hitter wants to play baseball. For the most part, children enjoy most games they play, but they enjoy them that much more when they have a certain degree of success in that game.

Success feelings are necessary for the emotional growth and emotional security in children. These feelings help immeasurably in establishing and developing confidence, independence, poise and positive attitudes in youngsters. Frequently when faced with something new, youngsters will balk somewhat. However, in facing the challenge they suddenly find that they achieve some degree of success. At this point, the balkiness changes to aggressiveness and the newness is met with vigor and confidence.

Furthermore, children seem to respond readily to solicitous encouragement and to recognition of small successes they achieve. Success experiences for children are important to emotional security and to eventual emotional maturity.

Love, acceptance and success are strong emotional needs. They are necessary for establishing emotional security in the child and, in turn, emotional security, if necessary, in the attainment of emotional maturity. Children will satisfy these emotional needs in one way or another. Their first choice, of course, is to do so in a socially acceptable manner. However, if they have no

opportunity to do so, they will use other methods, usually in a socially unacceptable manner and from this derive satisfaction from the notoriety of unacceptable behavior.

Little League Baseball seems to be a well-established, acceptable way to provide degrees of satisfaction for the emotional needs of the child. Little League is an entirely new experience and, with its unique appeal to youngsters, plays a vital role in helping to fulfill these emotional needs. This is especially true if these needs are not met at home, or if there is a loss of a father or mother or if other complications deprive the child of an opportunity to satisfy these needs. In addition, Little League offers adult companionship, which, for a variety of reasons, may be lacking at this age.

In an organization such as Little League Baseball, volunteer leaders will run into many problems with youngsters. They will be working with youngsters deprived of love and affection; they will work with highly over-protected children and come in contact with the out and out rejected child. Leaders must do their utmost to help these children, and, if they are unable to help them, the least that can be done is to attempt to understand them.

Attitudes

In Little League Baseball there are many new and varied experiences facing the youngsters participating in the program. The children, probably for the first time, find themselves in situations that they alone must cope with. They alone must meet the challenge of each new experience.

Emotional Security

In order to grow, children must have food, fresh air, light and exercise. This food, fresh air, light and exercise provide children with nourishment and activity required to satisfy the needs of physical growth and development. Along with this physical development, children must also develop emotionally. As children reach maturity, they will also reach certain levels of emotional maturity. It is hoped that the emotional maturity attained will be at a desirable level so that the individuals may function normally within their own sphere of relationships, whether it be with their peers, their immediate family or other adults.

The nutrients or ingredients necessary for emotional growth are not the same as they are for physical growth. However, they are every bit as important as food and drink are to physical growth and development. These nutrients satisfy the needs for emotional security just as food and drink satisfy a physical hunger pain. If children are to attain a level of emotional maturity, they must first have certain securities.

For example, children need to know that they are loved. It is possible that children who are deprived of love will suffer in a number of ways. One of these ways would be the inability of children to relate to other children and adults. Usually, children who feel they are not loved will be withdrawn, will find it difficult to make friends and, many times, will react to social situations

in a manner that is unacceptable as normal behavior. Very often unloved children will react in a way that is harmful to themselves and also to the community in which they live. Some quarters contend that juvenile delinquency, in part, is a result of the deprivation of love.

In addition to being loved, there are other ways that children are able to satisfy the need for emotional security. Children have to feel that they are accepted, whether it is acceptance as part of a family, a school group, church group, gang or club. The need for acceptance is not limited to children, of course. Young teenagers want to be accepted in sororities, fraternities, social cliques or athletic teams. Even adults sometimes feel the need for acceptance in local associations, clubs, school groups and neighborhood circles.

In its healthiest form, acceptance is based on what the child actually is and not what the child has done or what family history reflects. Many times, however, acceptance is not based on the human qualities of the child and is, in effect, denied for a variety of reasons. Some of these being: color, physical handicaps, speech handicaps, or even a mischievous childhood prank that just can't seem to be forgiven.

Children must be made to feel that they are liked and accepted for what they are. This kind of acceptance fosters an independence and confidence, which the child needs in order to grow emotionally. This does not mean that children have Carte Blanche to do anything that they desire without disapproval of their acts. Much to the contrary, unacceptable behavior should be dealt with firmly and with decisive action. For example, a manager in Little League could encounter a problem with a youngster, which, if not handled firmly, might cause further trouble, i.e., talking back to an umpire or rough play. The player could be told that this is not the behavior expected of a Little Leaguer and disapproval could be voiced quite strongly. However, it could be followed with, "remember I like you, but I sure didn't like what you did out on that field."

Thus, it is extremely important that the experiences arising out of Little League activity be healthy and stimulating. Furthermore, it is equally important that volunteer personnel recognize this fact and strive to help the youngster meet the challenges. It is within the province of responsibility of the volunteer to help the player to develop desirable attitudes.

I. Is an attempt made to point out the desirability of:

- a. Fair play.
- b. Playing without finding fault or making excuses about mistakes.
- c. Listening to directions.
- d. Winning without bragging.
- e. Recognizing certain standards of achievement.
- f. Subscribing to the spirit of give and take.

II. Have you observed any progress on the part of the youngsters in your league concerning the following:

- a. They participate in practice and drills as you have planned them.
- b. They accept the fact that there are some youngsters who have more or less skills than they do.
- c. They have respect for other people's property.
- d. They take care of equipment properly.

III. In working with the players, do you sense that:

- a. They are beginning to develop self-confidence.
- b. They are showing signs of courage.
- c. They are beginning to develop leadership qualities.
- d. They are beginning to set standards for themselves.

IV. In your observations, can you say that you have noticed improvement in the following areas:

- a. Learning to accept reversals without undue emotional upset.
- b. Accepting and playing by the rules of the game.
- c. Learning to develop self-control over personal feelings.
- d. Widening their circle of friends.

V. Do you feel that the youngsters under your supervision recognize that:

- a. Working to improve skills leads to self-satisfaction and achievement.
- b. Being a good follower in certain situations is as important as being a good leader.
- c. Self-sacrifice for the good of the team is necessary.
- d. There are occasions when one must accept certain responsibilities for others.

Baseball/Softball Fundamentals Training

Each spring Beaverhead Little League will conduct a baseball fundamentals training session designed for coaches/managers. At least one member of each coaching staff is required to attend the session, and all are encouraged to participate.

The fundamentals training for the season will be held March 29, 2023 at the Search and Rescue Building.

First Aid Training Requirements

Proper emergency management is essential to ensure positive outcomes for victims of any sudden illness or injury.

Beaverhead Little League requires that at least one member of the coaching staff for each team, in every division, be certified in First Aid through an accredited national training organization.

Coaches needing to complete certification will be provided the opportunity through a training class organized, and sponsored, by Beaverhead Little League. The course dates will be announced during registration each year. Board members and other members of Beaverhead Little League may participate in the scheduled First Aid training each year.

Communicable Disease Procedures

These procedures should be understood and followed by all managers, coaches, and umpires.

While risk of one athlete infecting another with HIV/AIDS during competition is close to non-existent, there is a remote risk that other blood borne infectious diseases can be transmitted. For example, Hepatitis B can be present in blood as well as in other body fluids. Procedures for reducing the potential for transmission of these infectious agents should include, but not be limited to, the following:

1. Bleeding must be stopped; the open wound covered and if there is an excessive amount of blood on the uniform it must be changed before the athlete may participate.
2. Routine use of gloves or other precautions to prevent skin and mucous membrane exposure when contact with blood or other body fluids is anticipated.
3. Immediately wash hands and other skin surfaces if contaminated (in contact) with blood or other body fluids. Wash hands immediately after removing gloves.
4. Clean all blood contaminated surfaces and equipment with appropriate disinfectant before competition resumes.
5. Practice proper disposal procedures to prevent injuries caused by needles, scalpels and other sharp instruments or devices.
6. Although saliva has not been implicated in HIV transmission, to minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, or other ventilation devices should be available for use.
7. Coaches with bleeding or oozing skin conditions should refrain from providing care of others until condition resolves.
8. Contaminated towels should be properly disposed of/disinfected.
9. Follow acceptable guidelines in the immediate control of bleeding and when handling blood dressings, mouth guards and other articles containing blood fluids.

2023
Season COVID-19 Mitigation Plan

GENERAL GUIDELINES FOR LEAGUE PARTICIPANTS AND FAMILIES

CONTINUE TO PRACTICE GOOD HYGIENE

- Wash your hands with soap and water or use hand sanitizer, especially after touching frequently used items or surfaces.
- Avoid touching your face.
- Sneeze or cough into a tissue, or the inside of your elbow.
- Disinfect frequently used items and surfaces as much as possible.
- Consider using non-medical face coverings while in public, especially in circumstances that do not readily allow for appropriate physical distancing

PEOPLE WHO FEEL SICK SHOULD STAY HOME

- Do not go to practice or games.
- Contact and follow the advice of your medical provider.
- Follow local health department guidance on isolation and quarantine.

MAINTAIN PHYSICAL DISTANCING WHEN ATTENDING EVENTS

- All individuals (non-household), **WHEN IN PUBLIC** (e.g., parks, outdoor recreation areas, shopping areas), should maximize physical distance from others.
- Avoid **GATHERING** in groups in circumstances that do not readily allow for appropriate physical distancing.

If you feel participation in league activities presents a risk to you or members of your household, or that you cannot comply with these guidelines, please notify the board of directors to cancel your registration and obtain a refund of payments made.

Guidelines for player participants

- Use provided hand sanitizer before, during, and after all practices and games
- Consider wearing a cloth mask during all activities
- Do your best to maintain physical distancing requirements (3 feet) during activities. We understand that sometimes in the games of baseball/softball you must be closer than that (for example, the catcher and batter or a baserunner and infielder) but we will work to minimize these exposures
- Use and touch your own equipment only whenever possible, after touching shared equipment, use hand sanitizer
- Do not give high fives to teammates or opponents
- Do not come to practices or games if you feel sick, have your parent/guardian call your health care provider for guidance
- If you do cough, sneeze, or touch your face during activity, use provided hand sanitizer or wash hands with soap and water
- Find a place for your gear along the baseline fence that allows you to be 3 feet away from your teammates

Guidelines for families and other spectators

- Follow and encourage good hygiene practices and consider wearing a cloth mask at all activities
- Do not attend activities if you are sick and do not allow your player to attend activities if sick
- Remind your players about the importance of physical distancing during activity
- When dropping off or picking up your player, maintain physical distancing from other families and participants
- When attending games, bring your own seating and ensure physical distancing between your family and others, designated areas will be indicated for spectators, be alert to game related safety matters when in these locations (i.e. – foul balls)

Guidelines for managers, coaches, and other volunteers

- Use provided hand sanitizer before, during, and after all league activities
- Consider wearing a cloth mask during all activities
- Remind participants about physical distancing requirements (3 feet) before beginning activity and supervise participants to ensure compliance
- Design practice activities to allow for maintenance of physical distancing
- There are some situations in baseball/softball during which physical distancing is difficult to maintain- work to minimize the time of these exposures
- Use designated spaces for players to safely wait to bat while allowing physical distancing, enlist the help of additional volunteers to supervise area
- Do not give/allow high fives or other contact with or between participants, including post competition handshakes, instead, line up on baseline in front of dugout and tip caps to opponents
- Do not allow anyone feeling sick or displaying signs of illness to participate in any league activities

Safety Guidelines

- Arrangements should be made in advance of all games and practices for emergency medical services.
- Managers, coaches and umpires should have training in first-aid. First-aid kits are issued to each team manager.
- COVID-19 mitigation strategies shall be implemented as directed by Beaverhead County Public Health and/or Madison County Public Health.
- No games or practices should be held when weather or field conditions are bad, particularly with lightning.
- Play area should be inspected frequently for holes, damage, stones, glass and other foreign objects.
- All team equipment should be stored within the team dugout, or behind screens, and not within the area defined by the umpires as “in play.”
- Only players, managers, coaches, and umpires are permitted on the playing field or in the dugout during games and practice sessions.
- Responsibility for keeping bats and loose equipment off the field of play should be that of a player assigned for this purpose or the team’s manager and coaches.
- During practice and games, all players should be alert and watching the batter on each pitch.
- During warm-up drills players should be spaced so that no one is endangered by wild throws or missed catches.
- All pre-game warm-ups should be performed within the confines of the playing field and not within areas that are frequented by, and thus endanger spectators (i.e., playing catch, pepper, swinging bats, etc.).
- Equipment should be inspected regularly for the condition of the equipment as well as for proper fit.
- Batters must wear Little League approved protective helmets during batting practice and games.
- Catcher must at all times, wear catcher’s helmet, mask, throat guard, long model chest protector, shin guards and for males a protective cup with athletic supporter in any practice or game situation. NO EXCEPTIONS.

- Managers should encourage all male players to wear protective cups and supporters as well as mouth guards for practices and games.
- Except when runner is returning to a base, headfirst slides are not permitted.
- During sliding practice, bases should not be strapped down or anchored, the use of disengage-able bases is required on all BLL fields.
- At no time should “horse play” be permitted on the playing field.
- Parents of players who wear glasses should be encouraged to provide “safety glasses.”
- Player must not wear watches, rings, pins or metallic items during games and practices.
- The Catcher must wear catcher’s helmet and mask with a throat guard in warming up pitchers. This applies between innings and in the bullpen during a game and also during practices.
- On-deck batters are not permitted (except in Junior/Senior/Big League Divisions).
- No dogs or other animals are allowed at practices or games.

For additional information regarding Little League safety initiatives, please register for Little League E-News at www.littleleague.org.

Shelter-in-Place Protocol

In the event of inclement weather or other safety threats to participants or spectators, Beaverhead Little League volunteers or community law enforcement/safety officers may advise a shelter-in-place procedure.

Due to the open nature of all baseball fields associated with Beaverhead Little League, fully enclosed vehicles, represent the best option for seeking shelter.

Weather conditions, especially lightning, will be monitored by Beaverhead Little League volunteers who will communicate information with players/parents as safety allows.

For non-weather related threats to safety, please refer to our local radio stations – KDBM 1490 AM and KBEV 98.3 FM in Dillon or 93.3 FM in Twin Bridges.

Facility and Field Checklist

Field Inspected: _____

Inspector: _____

Date: _____

Problems:

_____ Holes, damage, rough, or uneven spots. Locations:

_____ Slippery areas, long grass. Locations:

_____ Damage to screens or fences. Locations:

_____ Dugouts. Identify problems:

_____ Bleachers. Identify problems:

_____ Trash cans, garbage. Identify problems:

Equipment Concerns:

_____ Batting helmets. Identify problems:

_____ Heart guard. Identify problems:

_____ Catcher's helmet/throat guard. Identify problems:

_____ Catcher's shin guards. Identify problems:

_____ Catcher's chest protector

_____ Pitching machine. Identify problems:

Submit this form to the Safety Officer.

Pregame Safety Responsibilities



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**

Pitch Count Rules

The following pitch count rules were designed by Little League to limit overuse injuries in the throwing arm of players.

(a) The manager must remove the pitcher when said pitcher reaches the limit for his/her age group as noted below, but the pitcher may remain in the game at another position:

| | |
|-------------------|--------------------|
| League Age 13 -16 | 95 pitches per day |
| 11 -12 | 85 pitches per day |
| 9-10 | 75 pitches per day |
| 7-8 | 50 pitches per day |

Exception: If a pitcher reaches the limit imposed for his/her league age while facing a batter, the pitcher may continue to pitch until any one of the following conditions occurs: 1. That batter reaches base; 2. That batter is put out; 3. The third out is made to complete the half-inning.

Note: A pitcher who delivers 41 or more pitches in a game cannot play the position of catcher for the remainder of that day.

(b) Pitchers league age 14 and under must adhere to the following rest requirements:

- If a player pitches 66 or more pitches in a day, four (4) calendar days of rest must be observed.
- If a player pitches 51 - 65 pitches in a day, three (3) calendar days of rest must be observed.
- If a player pitches 36 - 50 pitches in a day, two (2) calendar days of rest must be observed.
- If a player pitches 21 - 35 pitches in a day, one (1) calendar days of rest must be observed.
- If a player pitches 1-20 pitches in a day, no (0) calendar day of rest is required.

(c) A pitcher once removed from the mound cannot return as a pitcher. **Junior, Senior, and Big League Divisions only:** A pitcher remaining in the game, but moving to a different position, can return as a pitcher anytime in the remainder of the game, but only once per game.

(d) Each league must designate the scorekeeper or another game official as the official pitch count recorder. The pitch count recorder must provide the current pitch count for any pitcher when requested by either manager or any umpire. However, the manager is responsible for knowing when his/her pitcher must be removed.

(g) The official pitch count recorder should inform the umpire-in-chief when a pitcher has delivered his/her maximum limit of pitches for the game. The umpire-in-chief will inform the pitcher's manager that the pitcher must be removed. However, the failure by the pitch count recorder to notify the umpire-in-chief, and/or the failure of the umpire-in-chief to notify the manager, does not relieve the manager of his/her responsibility to remove a pitcher when that pitcher is no longer eligible.

(h) Violation of any section of this regulation can result in protest of the game in which it occurs. Protest shall be made in accordance with Playing Rule 4.19.

(j) A player who has attained the league age of twelve (12) is not eligible to pitch in the Minor League. (See Regulation V – Selection of Players)

(k) A player may not pitch in more than one game in a day.

Little League Baseball® Game Pitch Log



Team _____ Opponent _____ Date _____

| PITCHER'S NAME | UNIFORM NUMBER | LEAGUE AGE | X CROSS OUT THE NUMBER AS THAT PITCH IS THROWN. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------|----------------|------------|--|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|-----|-----|-----|-----|-----|
| | | | O CIRCLE THE NUMBER FOR THE LAST PITCH THROWN IN EACH HALF-INNING. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 |
| | | | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 |
| | | | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 | 101 | 102 | 103 | 104 | 105 |

Pitching eligibility varies by the league age of a pitcher, which is determined by the approved League Age Chart indicated within the Little League Rulebook in Appendix G and in accordance with Regulation VI.

Incidents and Accidents - Policies & Procedures

What to report: Any incident or accident that causes any player, manager, coach, umpires, or volunteers to receive medical treatment and/or first aid including even passive treatments such as an extent of injury evaluation and diagnosis or periods of rest must be reported to the Safety Officer.

When to report: All incidents as described above must be reported to the Safety Officer within 48 hours.

To make a report:

- Use the Incident/Injury Tracking Report on the following page.
- Call and then return completed form to the Safety Officer 48 hours.

Safety Officer's responsibilities: Within 48 hours of receiving the incident report, the safety officer should:

- Contact the injured party or the parents.
- Verify the information received.
- Obtain any other info deemed necessary.
- Check on the status of the injured party.

In the event that the injured party required any medical attention (i.e. Emergency Room, Doctor Office), the Safety Officer will advise parents/guardians of Little League's insurance coverage and the provisions for submitting any claims.

If the extent of the injuries is more than minor in nature, the Safety Officer shall contact the parents/guardians to:

- Check on the status of any injury and treatment.
- Check if any other assistance is necessary in areas such as submission of any forms, etc. until such time has expired any claim and is considered CLOSED (i.e. no further claims are expected and/or the individual is participating in the league again.)

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:

- | | | |
|---|---|--|
| <p>A.) On Primary Playing Field</p> <p style="padding-left: 20px;"><input type="checkbox"/> Base Path: <input type="checkbox"/> Running or <input type="checkbox"/> Sliding</p> <p style="padding-left: 20px;"><input type="checkbox"/> Hit by Ball: <input type="checkbox"/> Pitched or <input type="checkbox"/> Thrown or <input type="checkbox"/> Batted</p> <p style="padding-left: 20px;"><input type="checkbox"/> Collision with: <input type="checkbox"/> Player or <input type="checkbox"/> Structure</p> <p style="padding-left: 20px;"><input type="checkbox"/> Grounds Defect</p> <p style="padding-left: 20px;"><input type="checkbox"/> Other: _____</p> | <p>B.) Adjacent to Playing Field</p> <p style="padding-left: 20px;"><input type="checkbox"/> Seating Area</p> <p style="padding-left: 20px;"><input type="checkbox"/> Parking Area</p> <p>C.) Concession Area</p> <p style="padding-left: 20px;"><input type="checkbox"/> Volunteer Worker</p> <p style="padding-left: 20px;"><input type="checkbox"/> Customer/Bystander</p> | <p>D.) Off Ball Field</p> <p style="padding-left: 20px;"><input type="checkbox"/> Travel:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Car or <input type="checkbox"/> Bike or</p> <p style="padding-left: 20px;"><input type="checkbox"/> Walking</p> <p style="padding-left: 20px;"><input type="checkbox"/> League Activity</p> <p style="padding-left: 20px;"><input type="checkbox"/> Other: _____</p> |
|---|---|--|

Please give a short description of incident: _____

Could this accident have been avoided? How: _____

This form is for local Little League use only (should not be sent to Little League International). This document should be used to evaluate potential safety hazards, unsafe practices and/or to contribute positive ideas in order to improve league safety. When an accident occurs, obtain as much information as possible. For all Accident claims or injuries that could become claims to any eligible participant under the Accident Insurance policy, please complete the Accident Notification Claim form available at http://www.littleleague.org/Assets/forms_pubs/asap/AccidentClaimForm.pdf and send to Little League International. For all other claims to non-eligible participants under the Accident policy or claims that may result in litigation, please fill out the General Liability Claim form available here: http://www.littleleague.org/Assets/forms_pubs/asap/GLClaimForm.pdf.

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

Signature: _____ Date: _____

Little League® Baseball & Softball
CLAIM FORM INSTRUCTIONS



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

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

The 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.



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 Fax: 570-326-9280

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 | Date of Birth (MM/DD/YY) | | Age |
| | | | | | |
| | | | | | <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 |
| | | |

Describe exactly how accident happened, including playing position at the time of accident:

Check all applicable responses in each column:

| | | | | |
|---|---|---|---|--|
| <input type="checkbox"/> BASEBALL | <input type="checkbox"/> CHALLENGER (4-18) | <input type="checkbox"/> PLAYER | <input type="checkbox"/> TRYOUTS | <input type="checkbox"/> SPECIAL EVENT (NOT GAMES) |
| <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> T-BALL (4-7) | <input type="checkbox"/> MANAGER, COACH | <input type="checkbox"/> PRACTICE | <input type="checkbox"/> SPECIAL GAME(S) |
| <input type="checkbox"/> CHALLENGER | <input type="checkbox"/> MINOR (6-12) | <input type="checkbox"/> VOLUNTEER UMPIRE | <input type="checkbox"/> SCHEDULED GAME | (Submit a copy of your approval from Little League Incorporated) |
| <input type="checkbox"/> TAD (2ND SEASON) | <input type="checkbox"/> LITTLE LEAGUE (9-12) | <input type="checkbox"/> PLAYER AGENT | <input type="checkbox"/> TRAVEL TO | |
| | <input type="checkbox"/> INTERMEDIATE (50/70) (11-13) | <input type="checkbox"/> OFFICIAL SCOREKEEPER | <input type="checkbox"/> TRAVEL FROM | |
| | <input type="checkbox"/> JUNIOR (12-14) | <input type="checkbox"/> SAFETY OFFICER | <input type="checkbox"/> TOURNAMENT | |
| | <input type="checkbox"/> SENIOR (13-16) | <input type="checkbox"/> VOLUNTEER WORKER | <input type="checkbox"/> OTHER (Describe) | |
| | <input type="checkbox"/> BIG (14-18) | | | |

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

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

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

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

For Residents of 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 _____

Beaverhead Little League

**CONCUSSION FACT SHEET
FOR COACHES****WHAT IS A CONCUSSION?**

Concussion, a type of traumatic brain injury, is caused by a bump, blow, or jolt to the head. Concussions can also occur from a blow to the body that causes the head and brain to move rapidly back and forth—literally causing the brain to bounce around or twist within the skull.

This sudden movement of the brain causes stretching and tearing of brain cells, damaging the cells and creating chemical changes in the brain.

HOW CAN I RECOGNIZE A POSSIBLE CONCUSSION?

Concussions can result from a fall or from athletes colliding with each other, the ground, or with an obstacle, such as a goalpost. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

As a coach you are on the front line in identifying an athlete with a suspected concussion. You know your athletes well and can recognize when something is off—even when the athlete doesn’t know it or doesn’t want to admit it.

So to help spot a concussion, you should watch for and ask others to report the following two things:

1. A forceful bump, blow, or jolt to the head or body that results in rapid movement of the head.

AND

2. Any concussion signs or symptoms, such as a change in the athlete’s behavior, thinking, or physical functioning.

Signs and symptoms of concussion generally show up soon after the injury. But the full effect of the injury may not be noticeable at first. For example, in the first few minutes the athlete might be slightly confused or appear a little bit dazed, but an hour later they can’t recall coming to the practice or game.

You should repeatedly check for signs of concussion and also tell parents what to watch out for at home. Any worsening of concussion signs or symptoms indicates a medical emergency.

SIGNS AND SYMPTOMS

Athletes who experience one or more of the signs and symptoms listed below, or who report that they just “don’t feel right,” after a bump, blow, or jolt to the head or body, may have a concussion.

SYMPTOMS REPORTED BY ATHLETE:

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not “feeling right” or is “feeling down”

SIGNS OBSERVED BY COACHING STAFF:

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

WHAT ARE CONCUSSION DANGER SIGNS?

In rare cases, a dangerous blood clot may form on the brain in an athlete with a concussion and crowd the brain against the skull. Call 9-1-1 or take the athlete to the emergency department right away if after a bump, blow, or jolt to the head or body the athlete exhibits one or more of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)

FACTS

Sometimes people wrongly believe that it shows strength and courage to play injured. Some athletes may also try to hide their symptoms.

Don't let your athlete convince you that he or she is "just fine" or that he or she can "tough it out." Discourage others from pressuring injured athletes to play. Emphasize to athletes and parents that playing with a concussion is dangerous.



WHAT SHOULD I DO IF A CONCUSSION IS SUSPECTED?

No matter whether the athlete is a key member of the team or the game is about to end, an athlete with a suspected concussion should be immediately removed from play. To help you know how to respond, follow the Heads Up four-step action plan:

1. REMOVE THE ATHLETE FROM PLAY.

Look for signs and symptoms of a concussion if your athlete has experienced a bump or blow to the head or body. When in doubt, sit them out!

2. ENSURE THAT THE ATHLETE IS EVALUATED BY AN APPROPRIATE HEALTH CARE PROFESSIONAL.

Do not try to judge the severity of the injury yourself. Health care professionals have a number of methods that they can use to assess the severity of concussions. As a coach, recording the following information can help health care professionals in assessing the athlete after the injury:

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

3. INFORM THE ATHLETE'S PARENTS OR GUARDIANS.

Let them know about the possible concussion and give them the Heads Up fact sheet for parents. This fact sheet can help parents monitor the athlete for sign or symptoms that appear or get worse once the athlete is at home or returns to school.

4. KEEP THE ATHLETE OUT OF PLAY.

An athlete should be removed from play the day of the injury and until an appropriate health care professional says they are symptom-free and it's OK to return to play. After you remove an athlete with a suspected concussion from practice or play, the decision about return to practice or play is a medical decision.

Lightning Safety Procedures

Lightning can strike up to 10 miles from a storm, as such, any indications of approaching storms should cause managers, coaches, and/or league officials to begin implementation of the lightning safety procedures.

1. Designate a person to track storm progress and monitor
2. Use flash-to-bang count or technological device such as weather apps to determine distance of lightning from field. Flash-to-bang: for every five seconds between flash of lightning and sound of thunder, the strike is approximately 1 mile away.
3. When the monitoring methods indicate that a storm is within 8 miles, begin evacuation of fields.
 - a. Players and spectators should be directed to seek shelter in enclosed vehicles with the windows rolled up.
 - b. Dugouts, picnic shelters, and ungrounded concession stands are not safe shelters.
4. Play may not resume until 30 minutes after the last sighting of lightning and clap of thunder within 10 miles of fields.
5. If lightning continues within the 10 mile radius for more than 30 minutes, the game shall be cancelled by the HOME team Manager.
6. If individual is struck by lightning, immediately call 911. Move individual to safe shelter if possible, begin CPR.

Heat Illness

Heat Cramps- Muscle pain or spasms usually in the abdomen, arms, or legs.

Athletes with heat cramps should:

- Stop all activity, and sit in a cool place.
- Drink clear juice or a sports beverage.
- Not return to strenuous activity for a few hours after the cramps subside because further exertion may lead to heat exhaustion or heat stroke.
- Seek medical attention if any of the following apply:
 - The athlete has heart problems.
 - The athlete is on a low-sodium diet.
 - The cramps do not subside within one hour.

Heat syncope is a fainting (syncope) episode or dizziness that usually occurs with prolonged standing or sudden rising from a sitting or lying position. Factors that may contribute to heat syncope include dehydration and lack of acclimatization.

Symptoms of heat syncope include:

- Light-headedness
- Dizziness
- Fainting

Athletes with heat syncope should:

- Sit or lie down in a cool place when they begin to feel symptoms.
- Slowly drink water, clear juice, or a sports beverage.

Heat exhaustion is the body's response to an excessive loss of the water and salt, usually through excessive sweating. With heat exhaustion, body temperature rises as high as 104 F and nausea, vomiting, headache, fainting, weakness, and cold, clammy skin may be experienced. If left untreated, this can lead to heatstroke.

Symptoms of heat exhaustion include:

- Heavy sweating
- Extreme weakness or fatigue
- Dizziness, confusion
- Nausea
- Clammy, moist skin
- Pale or flushed complexion
- Muscle cramps
- Slightly elevated body temperature
- Fast and shallow breathing

Emergency Treatment

Treat an athlete suffering from heat exhaustion with the following:

- Rest in a cool, shaded or air-conditioned area.
- Drink plenty of water or other cool, nonalcoholic beverages.
- Take a cool shower, bath, or sponge bath.

Heat stroke is the most serious heat-related disorder. It occurs when the body becomes unable to control its temperature: the body's temperature rises rapidly, the sweating mechanism fails, and the body is unable to cool down. When heat stroke occurs, the body temperature can rise to 106 degrees Fahrenheit or higher within 10 to 15 minutes. Heat stroke can cause death or permanent disability if emergency treatment is not given.

Symptoms of heat stroke include:

- Hot, dry skin or profuse sweating
- Hallucinations
- Chills
- Throbbing headache
- High body temperature
- Confusion/dizziness
- Slurred speech

Emergency Treatment

- Call 911 immediately
- Move the sick athlete to a cool shaded area.
- Cool the athlete as soon as possible by spraying, sponging, showering, or submersing in cool water.
- Continue cooling methods until EMS arrives, unless necessary to stop to perform CPR.

Emergency Action Plan

Ray Lynch Park Fields, along Highway 41 in Dillon**Emergency communications**

Cell phones of coaches and/or parents

Emergency equipment

Team assigned first aid kit

Emergency personnel

Coaches of both teams and other willing responders

Roles of Emergency Personnel

1. Immediate care of ill/injured
2. Retrieval of first aid kit
3. Call 911 to provide the following:
 - a. Name
 - b. Location Hwy 41, near National Guard Armory
 - c. Phone number
 - d. Number of people ill/injured
 - e. Condition of ill/injured
 - f. Ongoing treatment
4. Direct Emergency Responders
 - a. Ensure gate to field is open
 - b. Designate individual to flag down EMS
5. Provide Crowd Control
 - a. Move members of both teams to dugouts
 - b. Limit access to ill/injured to appropriate responders

Venue Directions

North on Atlantic Street, left turn (west) onto Helena Street, right turn (north) at light onto Montana/HWY 41, continue to Ray Lynch Park.

After ill/injured have been transported

Complete Incident/Injury Tracking Form
Submit Form to Safety Officer

Emergency Action Plan

T-Ball/Pony/Minors/Majors Fields at Vigilante Park**Emergency communications**

Cell phones of coaches or parents

Emergency equipment

First aid kit

Emergency personnel

Coaches of both teams and other willing responders

Roles of Emergency Personnel

1. Immediate care of ill/injured
2. Retrieval of first aid kit
3. Call 911 to provide the following:
 - a. Name
 - b. Location- Vigilante Park, designate specific field
 - c. Phone number
 - d. Number of people ill/injured
 - e. Condition of ill/injured
 - f. Ongoing treatment
4. Direct Emergency Responders
 - a. Ensure gate to field is open
 - b. Designate individual to flag down EMS
5. Provide Crowd Control
 - a. Move members of both teams to dugouts
 - b. Limit access to ill/injured to appropriate responders

Venue Directions

Traveling North on Atlantic, turn East (right) Thomson Street, right onto Spruce (one-way), then left onto Vigilante Dr. proceed to playing field gate located between second baseball field and football stadium.

After ill/injured have been transported

Complete Incident/Injury Tracking Form

Submit Form to Safety Officer

Emergency Action Plan

Senior and Softball Fields at Dillon Middle School/Parkview Elementary**Emergency communications**

Cell phones of coaches and/or parents

Emergency equipment

Team assigned first aid kit

Emergency personnel

Coaches of both teams and other willing responders

Roles of Emergency Personnel

6. Immediate care of ill/injured
7. Retrieval of first aid kit
8. Call 911 to provide the following:
 - a. Name
 - b. Location – softball or baseball field behind Dillon Middle School
 - c. Phone number
 - d. Number of people ill/injured
 - e. Condition of ill/injured
 - f. Ongoing treatment
9. Direct Emergency Responders
 - a. Ensure gate to field is open
 - b. Designate individual to flag down EMS
10. Provide Crowd Control
 - a. Move members of both teams to dugouts
 - b. Limit access to ill/injured to appropriate responders

Venue Directions

Traveling north on Atlantic Street, turn East onto E. Center Street, North (left) onto Nevada St., then turn East (right) onto Sacajawea Dr.

Turn left through gate to driveway between school and track, proceed to designated field.

After ill/injured have been transported

Complete Incident/Injury Tracking Form

Submit Form to Safety Officer

Emergency Action Plan

Cubs Field- Off Highway 41 in Dillon**Emergency communications**

Cell phones of managers, coaches and/or parents

Emergency equipment

Team assigned first aid kit

Emergency personnel

Coaches of both teams and other willing responders

Roles of Emergency Personnel

1. Immediate care of ill/injured
2. Retrieval of first aid kit
3. Call 911 to provide the following:
 - a. Name
 - b. Location Cubs Field- off Hwy 41, entrance between National Guard Armory and BCHS transportation building
 - c. Phone number
 - d. Number of people ill/injured
 - e. Condition of ill/injured
 - f. Ongoing treatment
4. Direct Emergency Responders
 - a. Ensure gate to field is open
 - b. Designate individual to flag down EMS
5. Provide Crowd Control
 - a. Move members of both teams to dugouts
 - b. Limit access to ill/injured to appropriate responders

Venue Directions

North on Atlantic Street, left turn (west) onto Helena Street, right turn (north) at light onto Montana/HWY 41, continue to Beaverhead Search and Rescue access point between National Guard Armory and BCHS Transportation building.

After ill/injured have been transported

Complete Incident/Injury Tracking Form
Submit Form to Safety Officer

Emergency Action Plan

Twin Bridges Fields at Riverside Park**Emergency communications**

Cell phones of managers, coaches and/or parents

Emergency equipment

Team assigned first aid kit

Emergency personnel

Coaches of both teams and other willing responders

Roles of Emergency Personnel

1. Immediate care of ill/injured
2. Retrieval of first aid kit
3. Call 911 to provide the following:
 - a. Name
 - b. Location Riverside Park, Fairgrounds Loop Road, Twin Bridges, MT
 - c. Phone number
 - d. Number of people ill/injured
 - e. Condition of ill/injured
 - f. Ongoing treatment
4. Direct Emergency Responders
 - a. Ensure route to field is open
 - b. Designate individual to flag down EMS
5. Provide Crowd Control
 - a. Move members of both teams to dugouts
 - b. Limit access to ill/injured to appropriate responders

Venue Directions

Turn onto Fairgrounds Loop Road from MT Hwy 41, follow road around to baseball fields

After ill/injured have been transported

Complete Incident/Injury Tracking Form

Submit Form to Safety Officer

Beaverhead Little League Concessions Policies

The BLL Concessions Manager is responsible for operation of concessions stands including supply procurement and scheduling of volunteer workers. Please address any questions regarding these policies to the Concessions Manager or Safety Officer.

1. Menu- the menu will be developed by the Concessions Manager and approved by the BLL Board of Directors.
2. Cooking- items requiring cooking will be evaluated with a food thermometer to ensure they reach the following temperatures:
 - a. Ground pork or beef – 155 degrees
 - b. Poultry – 165 degrees
 - c. After cooking all foods must be kept at 140 degrees or above until refrigerated
3. Food Handling- workers must wear gloves when serving unpackaged items or preparing products for cooking.
4. Dishes/Utensils- use disposable service tools and plates.
5. Hand Washing- workers are encouraged to frequently and thoroughly wash hands.
6. Health and Hygiene- anyone exhibiting signs or symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, jaundice, etc.) will not be allowed in the concessions area. Smoking is not allowed in the concessions area.
7. Insect and Waste Control- all foods shall be covered and stored a minimum of 6 inches above the floor. Waste shall be deposited in a covered disposal container outside of the concessions stand at the end of each session.
8. Worker Age- workers in the concessions stand under the age of 16 years must be directly supervised by an adult.
9. Injury/Incident Reporting- please submit record to Concessions Manager or Safety Officer of all injuries/illness related to work in or products of concessions stand.
10. Emergency contacts- a list of emergency phone numbers will be posted in the concessions stand.

League Safety Improvement Plan

Field Improvement Priorities

Spring 2023 Continue progress of Ray Lynch fields and prep for play.
Field Maintenance at Vigilante to ensure field is ready for league play.

Equipment Replacement Priorities

Spring 2023

- Ensure all helmets are suitable for play. Any that are no longer suitable will be discarded and replaced.
- Inspect all catchers gear to ensure all elements are suitable for play at the level the equipment is being used. Any gear that needs repair or replacement will occur before play.
- Inspect all bats to ensure they meet league/age level requirements.

Board of Directors Reporting Requirements

- The president is responsible for oversight of all reporting requirements of Beaverhead Little League and will ensure the participation of other officers in the reporting process. The president shall submit ASAP documents to District before they are submitted in March of each year.
- The player agent, who shall not serve as a coach in Beaverhead Little League, will be responsible for overseeing tryouts, player selection, and will assist the president with submission of player registration, roster, coach, and manager data to the Little League Data Center.
- The secretary will record the minutes of each regularly scheduled and special business meeting and will retain the records for future league use.
- The treasurer will keep an accurate accounting of league funds and will report on the status of all financial transactions and accounts at each business meeting.
- The safety officer will be responsible for the submission of the annual ASAP document to Little League prior to March 11 of each year. The safety officer will be responsible for documenting participation in the annual first aid training sessions and will retain the records for tracking and auditing purposes. The safety officer will receive all injury/illness incident reports and facilitate submission of claims forms as appropriate. The safety officer will also receive all facility inspection forms noting unsafe conditions.
- The coaching coordinator will record participation in yearly coaching fundamentals training sessions and retain for tracking and auditing purposes.