

Fayetteville – Manlius Little League



2019 Safety Manual

Have Fun--Play Safe

WWW: fmlittleleague.com

2019 ASAP Safety Manual

ASAP- WHAT IS IT?

ASAP (A Safety Awareness Program) was introduced to Little League Baseball and Softball to create awareness, through education and information, of the opportunities to provide a safer environment for all participants in Little League Baseball and Softball. This manual is offered as a tool to place important information at the finger tips of the managers and coaches.

Each manager and coach will receive this Safety Manual and each team will be issued a first-aid kit. These items will also be maintained at the concession stands.

Fayetteville-Manlius Little League is dedicated to providing a safe environment for our players, managers and spectators.

EMERGENCY PHONE NUMBERS

All Local Police: Ambulance and Fire Departments **911**

NON-EMERGENCY PHONE NUMBERS

Town of Manlius Police 682-2212
Onondaga County Sheriff 425-2111

F-M LITTLE LEAGUE SAFETY OFFICER

Marc Albert 682-0204 (h)
 374-4933 (cell)
 Marcaalbert44@gmail.com

2019 Fayetteville-Manlius Little league

Board of Directors

Officers

Vinnie Kuss-President
Len LaFollette- VP Baseball
Mark Noble- VP Softball
Bill Welch- Treasurer
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Marc Albert, Joe Blitz, Joe Bulone, Brian Burnett, Bob Calnon, Peter Cantalupe, Mike Doolittle, Scott Dumas, Dan Fellmeth, Ira Friedman, Jeff Garback, Michele Demaio Grace, Mike Grainger, George Graves, Tim Hamilton, Laura Lantz, Jeremy Mapstone, Chris Mason, Clare Miller, Patricia Miller, Charlie Moore, Mark Noble, Charlie Polka, Matt Roe, Stephen Russell, Tracy Schwab, Gavin Snyder, Jackie Terribile, Vic Vaccaro, Brian Webb.

F-M Little League Safety Code

- A manager or coach from each team will have training in first-aid and coaching fundamentals. First aid kits shall be included with each equipment bag and must be brought to every practice and game. Additional kits or supplies can be obtained by contacting Marc Albert, League Safety Officer or Brian Burnett, Equipment Committee Chair. A first-aid kit shall also be located at each concession stand.
- Managers and coaches shall have at least one working cell phone at each practice and game and must have a copy of each players medical release form with home and physician telephone numbers.
- ABSOLUTELY-NO swinging of bats ANYWHERE other than by a player taking his turn at bat in the batter's box on the field or in a batting cage.
- League regulation helmets must be worn by all batters and base runners. Players coaching bases must also wear batting helmets (optional for adults). In AAA League and above, players requesting helmets with masks must be accommodated.
- Catchers must wear catcher's helmet, mask, throat guard, chest protector, shin guards and protective cup (males) for all games and practices where players are batting. Catchers must wear catcher's helmet and mask with a throat guard when warming up pitchers or infielders at anytime.
- Only players, managers and coaches (3) are allowed in dugouts and on the playing field during games. Anyone working with the players must have a current approved volunteer application, THIS INCLUDES ALL PRACTICES.
- All pre-game warm Ups shall be performed within the confines of the playing field and not in areas frequented by spectators.
- No jewelry of any kind (including rubber wristbands) is to be worn by any player at practice or in games.
- Equipment shall be cleaned and inspected regularly for wear and tear as well as for proper fit. If repairs or replacements are required, please contact Marc Albert, League Safety Officer or Brian Burnett, Equipment Committee Chair.
- Before all games and practices, managers or coaches shall inspect the playing area and fencing for holes, damage, stones, glass or other foreign objects. To the extent a problem cannot be immediately remedied, please contact Marc Albert, League Safety Officer.
- No games or practices shall be held when weather or field conditions are dangerous. Pay particular attention when dusk sets in. See Lightning section later in this manual.
- During games and practices, equipment and players not on the field must be kept behind the protective fencing in dugouts. All gates must be kept shut.
- Batting cages may be used only with adult supervision. Only trained adults may operate or move batting machines. Only one player in the batting cage at a time. Cage netting must be fully closed before using batting cages and everyone else must be clear of the batting cage.

F-M LITTLE LEAGUE FACILITIES CODE OF CONDUCT

Speed Limit is 5 mph in roadways and parking lots while attending any F-M Little League function. Watch for small children around parked cars.

No alcohol allowed in any parking lot, field or common areas within any F-M Little League complex.

No playing in parking lots or throwing rocks.

No profanity, please.

No climbing fences or playing on bleachers.

No throwing balls or bats at fencing or dugouts.

No pets allowed at F-M Little League games or practices.

Observe all posted signs. Players and spectators should be alert at all times for foul balls and errant throws.

After each game and practice each team must clean up trash in dugouts and around the stands.

No child under the age of 14 is permitted in any concession stand without adult supervision.

Only adults should retrieve foul balls batted out of the playing area.

Failure to comply with the above may result in expulsion from the F-M Little League field complex.

F-M LITTLE LEAGUE VOLUNTEERS

Volunteers are the greatest resource F-M Little League has in aiding children's development into our leaders of tomorrow. However, some potential volunteers may be attracted to our League to be near children for abusive reasons.

Like all safety issues, ***prevention*** is the key. F-M Little League supports and utilizes Little League International's requirements for selecting safe volunteers.

Effective in 2017, the local league must conduct a nationwide background check that accesses background checks records for sex offender registry data and other criminal records. The JDP National Criminal File Database contains more than 450 million records which include criminal records and sex offender registry records across 50 states and the District of Columbia. The JDP National Criminal File also contains government databases such as Office of Foreign Asset Control and other Federal databases. The website is JDP.com

The league coordinators of F-M Little League are responsible for verifying that all required Volunteer forms are completed before anyone is allowed on the fields with players. This includes coaches, umpires, assistant coaches, snack shack workers, and anyone wishing to help at practices.

Anyone refusing to complete the Volunteer Application Background Check is ineligible to be

a volunteer in F-M Little League

REQUIRED TRAINING

First Aid -At least one participant (manager or coach) from each F-M Little League team is required to receive first- aid training each year.

ALL MANAGERS AND COACHES ARE REQUIRED TO RECEIVE FIRST-AID TRAINING AT LEAST ONCE EVERY THREE YEARS.

Fundamentals: At least one participant (manager or coach) from each F-M Little League team is required to attend coaching fundamentals training each year. Fundamentals include proper warm-up drills, hitting, sliding, fielding and pitching.

ALL MANAGERS AND COACHES ARE REQUIRED TO ATTEND AT LEAST ONE FUNDAMENTALS TRAINING COURSE EVERY THREE YEARS.

F-M Little League will sponsor annual first-aid training and fundamentals courses and will notify managers and coaches of the dates and times of the courses.

The first training will be April 6th, 2019, 10am at Fayetteville Village Hall

SAFETY FIRST!

BE ALERT :

CHECK FIELDS FOR HAZARDS – FM Little League contracts with a local fence provider to inspect and repair our fences on a yearly basis. Please call the Safety coordinator with any concerns or items that need to be repaired

PROVIDE PROPER EQUIPMENT IN GOOD SHAPE

MAINTAIN CONTROL AND DISCIPLINE

BE ORGANIZED

KNOW PLAYERS' LIMITS & DON'T EXCEED THEM

MAKE IT FUN!

CONCESSION STAND SAFETY

F-M Little League's concession stands are a service to make everyone's time at the ball field more enjoyable. Safety and injury prevention are also key priorities in operating our concession stands.

- No person under the age of 14 will be allowed in a concession stand without adult supervision.
- Concession workers and volunteers will be trained in safe food preparation and safe use of all equipment.
- Cooking equipment, warmers and coolers will be inspected periodically and repaired or replaced if required.
- Concession stand workers will wash hands before they begin work. In addition, gloves will be worn when handling unpackaged food.
- Food not purchased by F-M Little League to sell in its concession stands will not be cooked, prepared or sold from the concession stands.
- F-M Little League Concession stands are annually reviewed and permitted by the Onondaga Health Department Food Service division. A copy of the food license is available in each stand.

A first-aid kit and copy of this Safety Manual will be kept at each concession stand

All Onondaga County Health Codes shall be strictly adhered to in the operation of the concession stands.

WHAT IS FIRST-AID?

First-aid means exactly what the term implies - it is the **first care** given to a victim. It is usually performed by the **first person** on the scene and continued until professional medical help arrives. At no time should anyone administering first-aid go beyond their capabilities.

Know your limits! Ask for help!

The HEIMLICH Maneuver

The Heimlich Maneuver is an emergency method of removing food or foreign objects from the airway to prevent suffocation.

When approaching a choking person who is still conscious, ask: "*Can you cough? Can you speak?*"

If the person can speak or cough, do not perform the Heimlich Maneuver or put them on their back. Encourage them to cough. If they cannot speak or cough, perform the Heimlich Maneuver:

On an Adult:

- Grasp the choking person from behind;
- Place a fist, thumb side in, just below the person's breastbone (sternum), but above the naval;
- Wrap your second hand firmly over your fist;
- Pull the fist firmly and abruptly into the top of the stomach.

It is important to keep the fist below the chest bones and above the naval. The procedure should be repeated until the airway is free from obstruction or until the choking person loses consciousness. These should be violent thrusts, as many times as it takes.

On a Child:

- Place your hands at the top of the pelvis;
- Place one thumb at the pelvis line;
- Put the other hand on top of the first hand;
- Pull forcefully back as many times as needed to get the object out.

Most individuals are fine after the object is removed from the airway. Nevertheless, prompt medical care should be sought by calling 911 or going to the local emergency room.

Concussion Injuries

Injuries sustained by a knock to the head from a collision or fall, hit by bat or ball could result in a concussion.

The following signs or symptoms could be observed: athlete appears dazed or stunned, headaches, nausea or vomiting, forgets instruction, balance problems, blurry vision, loses consciousness, foggy or groggy, unable to recall events that just happened.

Players should be immediately removed from the game and seek appropriate medical care.

Concussions are a serious brain injury that requires proper medical attention as soon as possible.

Players must have a doctor's note to return to play when a concussion is thought to have taken place.

GOOD SAMARITAN LAWS

Good Samaritan laws encourage prompt furnishing of emergency medical assistance and help protect volunteers from being sued when they are giving emergency help to a victim, provided the person uses reasonable, prudent guidelines for care using resources they have available at the time of an incident.

Under New York State law, any person not in the medical field:

"who voluntarily and without expectation of monetary compensation renders first aid or emergency treatment at the scene of an accident or other emergency. ..to a person who is unconscious, ill, or injured, shall not be liable for damages for injuries alleged to have been sustained by such person or for damages for the death of such person alleged to have occurred by reason of an act or omission in the rendering of such emergency treatment unless it is established that such injuries were or such death was caused by gross negligence on the part of such person."

Generally, to trigger the protection of the Good Samaritan laws the assistance must be a volunteer act, the person receiving the help must not object to being helped, and the actions of the helper must be a good faith effort to help.

While Good Samaritan laws provide legal protection and encourage emergency response and people are rarely sued for helping in an emergency, the existence of Good Samaritan laws does not mean that someone cannot sue. Reasonable and prudent action is required in every emergency medical situation.

CHILDREN & DEHYDRATION

While the most important part of any athlete's diet are fluids, the type, amount, timing, and even temperature of fluids consumed by a pre-adolescent child play an especially critical role in maintaining the health and optimal performance of the child. Young children react differently than adults to exercise and heat.

Children are at an increased risk of dehydration and heat-related illness because they:

- Sweat at a lower rate.
- Tolerate temperature extremes less efficiently.
- Get hotter during exercise;
- Have hearts that pump less blood
- Adjust more slowly to exercising.

As a result, parents, managers and coaches need to educate players about the importance of hydration.

10 Health Tips Every Youth Coach Should Know

Issued by Temple University Hospital

"The number one tip coaches should remember is that children are not miniature adults and should not be treated as such," says Jim Rogers, a certified athletic trainer in Temple University Hospital's Sports Medicine Center.

"This may seem obvious, but many adults don't realize children's bodies can't take the same amount of physical stress adult bodies can take. That's because children are still growing and therefore are more susceptible to injury."

Rogers offers coaches these other tips to prevent injury to young players:

- Stretching the muscles related to the activity is very important. For example, if a child is pitching, he should concentrate on stretching his arm and back muscles. If a child is catching, the focus should be on the legs and back.
- A good warm-up is just as important as stretching. A warm-up can involve light calisthenics or a short jog. This helps raise the core body temperature and prepares all the body's muscles for physical activity.
- **Children should not be encouraged to "play through pain."** Pain is a warning

sign of injury. Ignoring it can lead to greater injury.

- Swelling with pain and limitation of motion are two signs that are especially significant in children - don't ignore them. They may mean the child has a more serious injury than suspected.
- Rest is by far the most powerful therapy in youth sports injuries. Nothing helps an injury heal faster than rest.
- Children who play on more than one team are especially at risk for overuse injuries. Overuse is caused by repetitive stress put on the same part of the body over and over again.
- Injuries that look like sprains in adults can be fractures in children. Children are more susceptible to fractures, because their bones are still growing,
- Children's growth spurts can make for increased risk of injury. A particularly sensitive area in a child's body during a growth spurt is the growth plate -the area of growth in the bone. Growth plates are weak spots in a child's body and can be the source of injury if the child is pushed beyond his or her athletic limit.
- Ice is a universal first-aid treatment for minor sports injuries. Ice packs should be available at all games and practices. Ice controls the pain and swelling caused by common injuries such as sprains, strains and contusions.

Lightning Facts and Safety Procedures

Consider the following facts:

- The average thunderstorm is 6-8 miles long, 6-10 miles wide and travels at a rate of 25 miles per hour.
- Once the leading edge of a thunderstorm approaches to within 10 miles, you are at immediate risk due to the possibility of lightning strikes coming from the storm's overhang anvil cloud.
- On average, thunder can only be heard over a distance of 3-4 miles, depending on humidity, terrain and other factors. This means that by the time you hear the thunder, you are already at risk for lightning strikes.

"Flash-Bang" Method

One way of determining how close a lightning strike is to you is called the "flash-bang" method. A person counts the number of seconds between the sight of a lightning strike and the sound of thunder that follows it. A halt to play and evacuation should be called when the count between lightning flash and the sound of thunder is 15 seconds or less.

Lightning strikes = Game Delay Lightning is unpredictable. Therefore, when a manager or umpire witnesses a flash of lightning games must stop immediately and cannot be resumed for 30 minutes. If a 2nd or 3rd flash appears the 30 minute delay must be reset. When in doubt, the following rule should be applied:

**WHEN YOU HEAR IT
CLEAR IT
WHEN YOU SEE IT
FLEE IT**

Where to Go?

No place is absolutely safe from a lightning threat, but some places are safer than others. Large enclosed shelters or substantially constructed buildings are the safest (i.e., concession stand buildings).

For the majority of participants, the best area for them to seek shelter is a fully enclosed vehicle with windows rolled up. If you are stranded in an open area and cannot get to shelter in a closed vehicle, put your feet together, crouch down, and put your hands over your ears (to try and prevent eardrum damage).

Where NOT to Go

Avoid high places and open fields, isolated trees, unprotected gazebos, rain or picnic shelters, dugouts, flagpoles, light poles, bleachers (metal or wood), metal fences and water.

First-Aid to a Lightning Victim

Typically, the lightning victim exhibits similar symptoms as someone suffering from a heart attack. ***IMMEDIATELY CALL 911.***

The first tenet of emergency care is "make no more casualties." After calling 911, if the victim is not breathing, start mouth-to-mouth resuscitation. If it is decided to move the victim, give a few quick breaths prior to moving them.

Determine if the victim has a pulse. If no pulse is detected, start cardiac compressions as well.

Only a knowledgeable and trained person should administer CPR.

STORAGE SHEDS AND PRESS BOXES

- Managers and coaches will be provided the combinations for the locks securing the field storage sheds for the purpose of preparing fields for play and closing fields after games and practices. The President and Safety Officer reserve the right to deny access to the storage sheds.
- Managers and coaches are responsible for maintaining storage sheds and tools in an orderly and safe manner and locking all storage sheds after use. Field paints and diamond dry are to be stored in an orderly and safe manner.
- Managers and coaches are not to provide lock combinations to any other persons.
- Only authorized persons are permitted to operate lawn mowers or any other power equipment on any F-M Little League field.
- Only trained adults, are permitted to handle or remove pitching machines from storage sheds. These machines are heavy and may require two or more adults to move. **ABSOLUTELY NO CHILDREN** are to move or operate a pitching machine at anytime, no enter a batting cage without adult supervision.
- No unsupervised children or unauthorized persons are permitted in any press box at any F-M Little League field.

Remember, safety is everyone's job.

Prevention is the key to reducing accidents.

REPORT ALL HAZARDOUS
CONDITIONS TO THE F-M
LITTLE LEAGUE SAFETY
OFFICER OR ANOTHER BOARD
MEMBER
IMMEDIATELY.

Don't play on a field that is not safe or
with unsafe playing equipment.
Be sure your
players are fully equipped at all times,
especially catchers and batters. And,
check
your team's equipment
often.

ACCIDENT REPORTING PROCEDURES

What to report - An incident that causes any player, manager, coach, umpire or volunteer to receive medical treatment and/or first aid must be reported to the Safety Officer. Even an incident requiring a player to be removed from a game or practice for a period of rest should be reported.

When to report - All incidents described above must be reported to the Safety Officer *within 48 hours* of the incident. The Safety Officer for F-M Little League is:

Marc Albert
4811 Hepplewhite Drive
Manlius, NY 13104
Home: 682-0204
Cell: 374-4933
E-mail: marcaalbert44@gmail.com

How to make the report - Incidents can be reported in a variety of ways. Most typically, they are telephone calls or emails to Marc Albert - FMLL Safety Officer. At a Minimum, the following information must be provided:

1. Name & phone number of parents & player involved
2. Date, time and location of the incident.
3. Description of the incident.
4. Preliminary estimate of the extent of any injuries.
5. List of witnesses & their phone numbers

Safety Officer's Responsibilities - Within 48 hours of receiving the incident report, the Safety Officer will contact the injured player's parents and (1) verify the information received; (2) Obtain any other information deemed necessary; (3) check on the status Of the injured player; and (4) in the event the injured player required additional medical treatment (i.e., emergency room visit, doctor's visit, etc.) will advise the parents of F-M Little League's insurance coverage and the provision for submitting any claims.

If the player's injury is serious, the Safety Officer shall periodically call the injured player's parents to check on the status of the injury, and check if any other assistance is necessary until such time as the injury is considered closed (i.e., no further claims are expected and/or the player is participating in the League again).

SOME IMPORTANT DO'S AND DON'TS

Do

- Reassure and aid players who are injured or frightened.
- Provide or assist in obtaining medical attention for injured players -and when administering aid, remember to:
 - LOOK *for signs of injury (Blood, Black-and-Blue, deformity of the joint, etc.)*
 - LISTEN *to the injured player describe what happened and what hurts, if the player is conscious. Before questioning, you may have to calm and soothe an excited child.*
 - FEEL *gently and carefully the injured areas for signs of swelling*
- **Have your players' completed registration forms with medical information with you at all games and practices.**
- **Have a working cell phone with you at all games and practices.**
- **Have this Safety Manual with you at all games and practices.**

Don't....

- Administer any medications.
- Provide any food or beverages (other than water).
- Hesitate in giving aid when needed nor asking for help when needed.
- Transport injured players except in extreme emergencies.
- Leave an unattended child at a game or practice.

Coach/Manager contact information {phone, email}

What type of first aid if any was administered on the field:

Names and phone numbers of 2 witnesses