

# **2023 SAFETY PLAN**





# **BLAINE AREA LITTLE LEAGUE**

PO Box 490781, Blaine, MN 55449



www.ba-littleleague.org



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@BlaineAreaLL

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# **2023 SAFETY PLAN**

#### **MISSION STATEMENT**

Blaine Area Little League is committed to the children and families in our community, implanting firmly the ideals of good sportsmanship, honesty, loyalty, courage and respect for one another and authority, so that they may be well adjusted, stronger and happier children and will grow to become good, decent, healthy, and trustworthy citizens!

#### **WHO WE SERVE**

The families who live in the cities of Blaine and Spring Lake Park.





#### **B.A.L.L. BOARD OF DIRECTORS**

Position	Name	Email	Phone Number
President	Melissa Hull	melissah@ba-littleleague.org	763-528-3358
Vice President	Jessica Havelka	jessicah@ba-littleleague.org	651-341-9831
Vice President (Challenger Division)	Monica Fisher	monicaf@ba-littleleague.org	763-229-8220
Secretary	Amy Kocon	amyk@ba-littleleague.org	763-226-9351
Treasurer	Joe Knudtson	joek@ba-littleleague.org	612-384-2149
Tournament Director	Steven Miller	stevenm@ba-littleleague.org	816-642-0312
Player Agent	Mark Jara	markj@ba-littleleague.org	651-235-1231
Safety Coordinator	Tiffany LePage	tiffanyl@ba-littleleague.org	612-655-1865
Social Media/Marketing Director	Callah Wald	callahw@ba-littleleague.org	218-529-6678
Fundraising/Sponsorship Coordinator	Callah Wald	callahw@ba-littleleague.org	218-529-6678
Coach Development	Paul Perez	paulp@ba-littleleague.org	612-749-9444
Equipment Coordinator	Paul Perez	paulp@ba-littleleague.org	612-749-9444
Facilities/Scheduling Coordinator	Robin Larson	robinl@ba-littleleague.org	763-843-2622
Uniform Coordinator	Scott Lipa	scottl@ba-littleleague.org	612-220-0130
Umpire in Chief	Rob Hammer	robh@ba-littleleague.org	763-458-3629
Volunteer Coordinator	Kelly Parkos	kellyp@ba-littleleague.org	612-388-9985
Director of Registration	Kerri Heffele	kerrih@ba-littleleague.org	612-396-7906
Player Development Director	David Heffele	daveh@ba-littleleague.org	612-387-9080

#### **SAFETY OFFICIAL'S KEY DUTIES**

Blaine Area Little League (BALL)
 has an active Safety Officer, Tiffany
 LePage; she is on file with Little
 League Headquarters in
 Williamsport, Pennsylvania.



- BALL will distribute a PAPER COPY
   of this Safety Plan to Little League Headquarters, the District Administrator, all
   Coaches & Volunteers, and maintain a copy for the local league. An electronic version
   will also be posted on the BALL website.
- BALL will make every effort to insure all Rules and Regulations, as provided by Little League Baseball, are enforced and followed.
- The phone numbers of emergency services and BALL officials shall be posted on bulletin boards, in the concession stand and in dugout areas.

# **B.A.L.L. INFORMATION**

## **Blaine Baseball Complex (BBC)**

1150 Paul Parkway NE, Blaine, MN 55434

## **BALL Mailing Address**

#### **Blaine Area Little League**

P.O. Box 490781, Blaine, MN 55449



# **EMERGENCY CONTACT LIST**



#### **EMERGENCY**

IN AN EMERGENCY CALL 9-1-1						
POLICE						
FIRE						
EMT						



CENTERPOINT ENERGY (GAS).	(612)372-5050
CONNEXUS ENERGY (ELECTRIC).	(763)323-2660
BLAINE WATER DEPT.	(763)427-1212



UNITY HOSPITAL	(763)236-5000
550 Osborne Road	
Fridley, MN 55432	
(see following page for driving directions)	
MERCY HOSPITAL	(763)236-6000
4050 Coon Rapids Blvd.	
Coon Ranids MN 55433	



SAFETY COORDINATOR, TIFFANY LEPAGE	(612)655-1865		
PRESIDENT, MELISSA HULL	(763)528-3358		
VICE PRESIDENT, JESSICA HAVELKA	(651)341-9831		



AAPCC POISON CONTROL CENTER	1-800-222-1222
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#### **VOLUNTEER INFORMATION AND PLAYER SAFETY**

The backbone of Little League® is the adult volunteer. One million strong, it is this corps of dedicated people who coach the teams, umpire the games, work in the concession stands, serve on the local Board of Directors, and serve at the District level. These people, who live in every U.S. state and more than 80 other countries, make Little League the world's largest and most respected youth sports organization.

We know that the greatest treasure we have is children. As adults, we must ensure that these young people are able to grow up happy, healthy and, above all, safe. Whether they are our children, or the children of others, each of us has a responsibility to protect them.

"No local league shall permit any person to participate in any manner, whose background check reveals a conviction, guilty plea, no contest plea, or admission to any crime involving or against a minor. All local leagues must take into consideration criminal records when making the determination whether the individual is unfit to participate in any manner in the league." (Reg. I [c] 9.)

Effective in 2017, the local league within the United States must conduct a nationwide background check utilizing First Advantage or another provider that is comparable to First Advantage in accessing background check records for sex offender registry data and other criminal records.



**SAMPLE** 

\*CLICK FOR LINK TO ACTUAL DOCUMENT

Blaine Area Little League is committed to providing a safe environment for all of our players across all age groups and levels. All local Little Leagues are required to conduct

background checks on managers, coaches, board of directors, members and any other persons, volunteers or hired workers, who provide regular services to the league and/or have repetitive access to, or contact with, players or teams. Individuals are also required to complete and submit a Little League Volunteer Application to their local league. Any background check that reveals a conviction or guilty plea for any crime involving or against a minor must result in immediate termination from the league. Additionally, volunteers who refuse to submit a fully completed Little League Volunteer Application, including their Social Security Number and a government issued photo ID, must be immediately terminated or eliminated from consideration for any position.



#### **INSURANCE**

All children who play Little League Baseball and Softball, as well as adults who serve as managers, coaches, umpires, official scorekeepers, Player Agents and Safety Officers must be covered adequately by accident insurance. Action to require all leagues to carry accident insurance was legislated by the Little League Congress in 1957. Leagues may purchase their insurance from any source, but coverage must be at least comparable to that provided by the affordable group plan offered to Little League programs through a member company of AIG Insurance.

An excess provision with a deductible is included in the AIG blanket accident policy that no longer obligates the payment of medical expenses covered by any other insurance compensation. This in no way affects the broad benefits of protection available to all leagues, but it does prevent unwarranted double payments to parents for accident coverage purchased by the local league.

The AIG group accident insurance covers eligible participants while traveling directly, without delay, to and from the field as well as during practice sessions and games. The benefits include provisions for accident, death or dismemberment and also for medical expenses. Coverage also extends to volunteers involved in authorized activities.

Our insurance underwriters agreed, after the 1992 Congress, to insure, under the Little League Group Accident policy, in addition to a maximum of one manager and two coaches at regular season games, all additional coaches at practice as long as they are appointed by a league official or a league designated representative (for emergencies when the President is not available).



#### 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.

## **B.A.L.L. SAFETY CODE**

- It is the responsibility of the coaching staff, umpires and league management to provide a safe field of play.
- Coaches, assistants, umpires and volunteers will enforce any and all Little League rules at all games & practices.
- Each team must have a first aid kit present during all games and practices.
- Coaches must have all player medical information sheets in their possession for all games and practices.
- No games or practices should be held when weather or field conditions are not good, particularly when daylight
  is inadequate. (Never play or practice when there are lightning strikes in the general vicinity)
- The play areas need to be inspected daily to identify hazardous conditions. Any deficiencies or hazards need to be reported to the League Safety Officer immediately and to the City of Blaine or the City of Spring Lake Park.
- All team equipment must be stored out of the field of play as directed by the umpire staff.
- Only coaches, players and authorized personnel are allowed on the playing field.
- Players and coaches need to constantly maintain awareness while on and off the playing field.
- All pregame warm-ups should be performed in the outfield. Do not use the infield for pregame warm-ups.
- All equipment should be inspected daily for potential hazards.
- All players must wear approved headgear while batting, base running, catching and base-coaching during practices and games.
- Any and all injuries identified, no matter how insignificant, should be reported to the child's parent or guardian immediately.
- At no time shall horseplay be allowed on the field of play.
- Players must not wear watches, rings, pins or any other metallic objects, nor jewelry of any kind, while on the field of play. (except Medic-Alert)
- All players age 5 to 17 must wear a protective supporter and cup for practices and games.
- Bases at the BBC, Airport Fields and Happy Acres Fields disengage from their anchors. Do not attach bases to the ground at any other field.
- If ever a question of a child's well-being arises, the coaching staff will seek medical assistance immediately.
- Players with glasses must be informed about the dangers of not having sport glasses with protective lenses.
- All accidents, injuries or 'near-misses' must be reported immediately to the level commissioner and then forwarded to the League Safety Officer.
- Catcher must wear helmet, mask w/throat protector, long model chest protector, and shin guards when behind the plate in game situations. Catchers must wear helmet and mask w/throat protector when warming up pitchers between innings and in the bull-pen.
- Except when the runner is returning to a base, head-first slides are prohibited.

- Coaches are required to have at least one working phone available during all practices and games. If not, a parent/volunteer with a working phone must be identified to stay during the entire practice or game.
- On-Deck batters are NOT allowed in Little League baseball, ages T-Ball through Majors. Only the leadoff batter may be outside the dugout or off the bench between half-innings.
- Coaches are NOT allowed to warmup pitchers (Rule 3.09). This includes standing at backstop during practice as informal catcher during batting practice

It is the policy of BALL to provide an environment in which the risk of injury is reduced by the application of our published safety guidelines. Behavior in violation of the safety code will be treated as misconduct and may result in corrective action up to and including dismissal.

# A.E.D PROGRAM



Beginning in 2018 Blaine Area Little League will have an AED Program. AED stands for Automatic External Defibrillator. We have partnered with the City of Blaine, Coon Rapids Police Department, and Advanced First Aid to implement a quality and compliant AED program. All coaches will be invited to attend an AED training program hosted by Officer Bryan Platz (Director of Coon Rapids HeartSafe Program)

Hazard Identification Statistics from the American Heart Association show that approximately 350,000 adult Americans die each year from sudden cardiac arrest. Many of these deaths are the result of out-of-hospital sudden cardiac arrest brought on by ventricular fibrillation (VF). VF is a dangerous arrhythmia in which the heart quivers chaotically instead of beating in a normal rhythm resulting in death. The only effective

treatment for ventricular fibrillation is the delivery of an electric shock by a defibrillator. An AED is a simple, easy to use device that analyzes the heart's rhythm and tells the user to deliver a lifesaving shock if necessary.

Early defibrillation (within 3-5 minutes of the cardiac arrest) is critical to survival. Every minute defibrillation is delayed, survival rates plunge 10 percent. When a medical emergency occurs, the immediate reaction is to dial 911, but in the case of a cardiac arrest, EMS may not be enough to save a victim's life. On average, EMS teams in the U.S. take 6-12 minutes to respond to medical emergencies. The solution is the deployment of AEDs in key locations where people congregate: health clubs, stadiums, airports, businesses, churches and schools. The American Heart Association's Chain of Survival links the level of care required for treatment of sudden cardiac arrest: early access to EMS or 911, early CPR, early defibrillation, and early advanced emergency treatment. AEDs make early defibrillation a viable option. In addition, AEDs are easy to use, even for lay people with minimal training. The national average is less than 5%.



# **AED DEVICE LOCATION**

LOCATION	TYPE OF DEVICE	BATTERY EXPIRATION	PAD EXPIRATION	CONTACT PERSON	EMAIL
BBC Concession Stand	HeartSine® Samaritan® PAD 350P/360P	12/21/2025	12/21/2025	Tiffany LePage	Tiffanyl@ba-littleleague.org
Other Locations Coming Soon					



# **AED INFORMATION** (Click for PDF)

# HeartSine® samaritan® PAD 350P/360P AEDs

#### Semi-Automatic/Fully Automatic Public Access Defibrillators

#### Compact, Easy-to-Use, Lifesaving Technology for Public Access

Sudden cardiac arrest strikes 7 million people a year worldwide with no warning and no pattern. There's little time to react and even less time to think. This means an Automated External Defibrillator (AED) must be close at hand, easy to use and ready to shock.

The semi-automatic HeartSine samaritan PAD 350P (SAM 350P) and fully automatic HeartSine samaritan PAD 360P (SAM 360P) offer industry-leading value and environmental protection, all in an easy-to-operate system in the smallest and lightest package available.

The fully automatic SAM 360P detects motion or other significant interference to reduce the likelihood that the user is touching the patient prior to shock delivery.



#### Ready to Shock

Portable and lightweight. The HeartSine samaritan PAD is much lighter (2.4 lbs) and smaller than other defibrillators.

Highest level of protection against dust and water. With its IP56 rating, the HeartSine samaritan PAD defibrillator offers unmatched ruggedness.

Clinically Validated Technology. The Heart Sine samaritan PAD utilizes proprietary electrode technology and SCOPE\* biphasic technology, an escalating. low-energy waveform that automatically adjusts for differences in patient Impedance.





#### Easy-to-Follow Visual and Verbal Guides

User-friendly. Easy-to-understand visual and voice prompts guide the rescuer through the entire resuscitation process, including CPR—a key link in the chain

One- and two-button operation. With Just an ON/OFF button (and the SHOCK button on the SAM 350P), the samaritan PAD offers a simple, straightforward operation.

Automatic Shock Delivery. After analyzing heart rhythm, the SAM 360P3 will automatically deliver a shock (if needed), eliminating the need for the rescuer to push

Always ready. A System Status Ready Indicator flashes to show that the complete system is operational and ready for use. The device automatically runs a self-check





"Stand dear of





#### Simple to Own

Two parts, one expiration date. The innovative Pad-Pak," an integrated battery and electrode single-use cartridge with one expiration date, offers one simple maintenance change every

Low cost of ownership. With a shelf life of four years from date of manufacture, the Pad-Pak offers significant savings over other defibrillators that require separate battery and electrode



Pad-Pak and Pediatric-Pak\* with pre-attached electrodes

intelligence and unique Pediatric-Pak ensure the appropriate energy level (50 J) is delivered for children, between 1 and 8 years of age or up to 55 lbs (25 kg).



#### **LEGAL AND ETHICAL CONSIDERATION**

#### **DUTY TO ACT**

No one is required to render first aid under normal circumstances. Even a physician could ignore a stranger suffering a heart attack if he chose to do so.

Exceptions include situations where a person's employment designates the rendering of first aid as a part of described job duties. Examples include lifeguards, law enforcement officers, park rangers and safety officers in industry.

A duty to provide first aid also exists where an individual has presumed responsibility for another person's safety, as in the case of a parent-child or driver-passenger relationship.

While in most cases there is no legal responsibility to provide first aid care to another person, there is a very clear responsibility to continue care once you start. You cannot start first aid and then stop unless the victim no longer needs your attention, other first aiders take over the responsibility from you or you are physically unable to continue care.

#### **NEED FOR CONSENT**

In every instance where first aid is to be provided, the victim's consent is required. It should be obtained from every conscious, mentally-competent adult. The consent may be either oral or written.

Permission to render first aid to an unconscious victim is implied and a first aider should not hesitate to treat an unconscious victim.

Consent of a parent or guardian is required to treat a child, however emergency first aid necessary to maintain life may be provided without such consent.

#### **LEGAL CONCERNS**

Some well-meaning people hesitate to provide first aid because they are concerned about being sued.

This need not be a concern!

Legislators in almost every state in the country have passed GOOD SAMARITAN LAWS which are intended to protect good people who offer first aid help to others.

Most of the Good Samaritan Acts are very similar in their content and usually provide two basic requirements which must be met in order for the first aider to be protected by their provisions:

- The first aider must not deliberately cause harm to the victim.
- The first aider must provide the level & type of care expected of a reasonable person with the same amount of training & in similar circumstances.

#### MINNESOTA GOOD SAMARITAN LAW

604A.01 Good Samaritan law.

Subdivision 1. Duty to assist. A person at the scene of an emergency who knows that another person is exposed to or has suffered grave physical harm shall, to the extent that the person can do so without danger or peril to self or others, give reasonable assistance to the exposed person. Reasonable assistance may include obtaining or attempting to obtain aid from law enforcement or medical personnel. A person who violates this subdivision is guilty of a petty misdemeanor.

Subdivision 2. General immunity from liability.

- (a) A person who, without compensation or the expectation of compensation, renders emergency care, advice, or assistance at the scene of an emergency or during transit to a location where professional medical care can be rendered, is not liable for any civil damages as a result of acts or omissions by that person in rendering the emergency care, advice, or assistance, unless the person acts in a willful and wanton or reckless manner in providing the care, advice, or assistance. This subdivision does not apply to a person rendering emergency care, advice, or assistance during the course of regular employment, and receiving compensation or expecting to receive compensation for rendering the care, advice, or assistance.
- (b) For the purposes of this section, the scene of an emergency is an area outside the confines of a hospital or other institution that has hospital facilities, or an office of a person licensed to practice one or more of the healing arts under chapter 147, 147A, 148, 150A, or 153. The scene of an emergency includes areas threatened by or exposed to spillage, seepage, fire, explosion, or other release of hazardous materials, and includes ski areas and trails.
- (c) For the purposes of this section, "person" includes a public or private nonprofit volunteer firefighter, volunteer police officer, volunteer ambulance attendant, volunteer first provider of emergency medical services, volunteer ski patroller, and any partnership, corporation, association, or other entity.
- (d) For the purposes of this section, "compensation" does not include payments, reimbursement for expenses, or pension benefits paid to members of volunteer organizations.
- (e) For purposes of this section, "emergency care" includes providing emergency medical care by using or providing an automatic external defibrillator, unless the person on whom the device is to be used objects. "Automatic external defibrillator" means a medical device heart monitor and defibrillator that: (1) has received approval of its premarket notification, filed pursuant to United States Code, title 21, section 360(k), from the United States Food and Drug Administration; (2) is capable of recognizing the presence or absence of ventricular fibrillation or rapid ventricular tachycardia, and is capable of determining, without intervention by an operator, whether defibrillation should be performed; and (3) upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.

Presented to the governor March 20, 1998 Signed by the governor March 23, 1998, 10:58 a.m. HIST: 1994 c 623 art 2 s 1; 1995 c 205 art 2 s 8

#### **COVID-19 PROTOCOLS**

#### **B.A.L.L. SAFE AT PLAY GUIDELINES - 2023 SEASON**

Blaine Area Little League is doing our best to help mitigate risks and make our baseball experience as safe as possible. These guidelines are fluid and we will update with new information when available. Here is what we are doing to help:

#### **PREVENTION**

- Adhering to recommended CDC and MN Health Dept. guidelines
- Self-monitor for symptoms: Fever above 100.4°F, Persistent Cough, Shortness of breath. Do NOT show up if any symptoms are present.
- Social Distancing when possible at the concession stand, as a spectator and as much as possible. Social distance reminders will be placed on the ground.
- · Informational signage educating about best practices of handwashing and social distancing

#### **IDENTIFICATION**

- Self-Report if you or anyone you have come into contact has been diagnosed or likely contracted Covid-19 (following all applicable Privacy laws, HIPAA etc) League has system in place to notify potential exposure.
- Self-Isolate until symptoms are clear for 72hrs or cleared by medical professional

#### **ACTIONS**

- Frequent hand washing/sanitizing after any interaction
- Self-Isolate until symptoms are clear for 72hrs or cleared by medical professional
- Concession Stand staff taking extra precautions with single serve items, extra cleaning, and awareness
- No handshakes after the game- instead offering a tip of the cap after each game
- Try to limit sharing of equipment such as catchers gear, hats, etc. BALL will be providing multiple Catcher Masks to teams and they are to be sanitized between uses
- Have Team Balls when possible

#### **COMMUNICATION**

- B.A.L.L. will continue to follow directions from state and federal governments and Little League International
- Promote best practices and evolve as new information becomes available
- Always put personal safety as a top priority over any game, practice or event
- Communication of any positive test will need to be reported to your coach and they will report to the Player Agent, League Commissioner and VP. Coach will communicate with the team of any positive tests/exposure

#### **ACTIVE SAFETY INITIATIVES**

**SITE LEADER:** Blaine Area Little League has committed to having a Board Member or background checked adult on site for every game night and special event. This Site Leader ensures that in the unlikely event that there is an emergency or safety situation we have someone that is background checked and has some CPR/AED training as well. This is a very important aspect of our day to day safety activities.

This person is responsible for walking the site to identify any potential safety issues. Also, they are keeping aware to ensure fields are in playable shape, Umpires are supported and spectators are following the rules and B.A.L.L. Code of Conduct.





In addition this Site Leader is wearing a bright red B.A.L.L. lanyard for anyone to quickly identify who is the first point of contact for any type of situation that may arise. It also gives visibility to our players, parents and families that there is a Safety Presence on the field for everyone's benefit.



# **USA BASEBALL/SAFESPORT**



#### ABUSE AWARENESS TRAINING OFFERED THROUGH USA BASEBALL SAFESPORT

USA Baseball is passionate about raising awareness of the SafeSport initiative and providing our athletes unparalleled development and competitive opportunity in a safe environment.

The U.S. Center for SafeSport is a 501(c)(3) non-profit focused on preventing physical, emotional and sexual abuse in sport. The Center, initially chartered by the U.S. Olympic Committee, is an independent organization with a nine-member board of directors, including subject-matter experts in abuse prevention, child abuse and sexual assault investigation, ethics compliance and sport administration.

For more information, visit <a>SafeSport</a>. (https://www.uscenterforsafesport.org/)

B.A.L.L. is aware and exploring this training to offer to our organization. Currently we have no one trained but will have some soon.

#### **ADDITIONAL SAFETY TRAINING**



THE SERVICES

To verify certificate, scan code or visit redcross.org/digitalcertificate and enter



004MIVS

#### **RED CROSS TRAINED**

In addition to Trusted Coaches training highlighted on pg. 35 we are also committed to having trained people in our organization and on site as much as possible. Our Safety Coordinator and most board members have completed the AED/Safety/Training organized with our community partners and completed training through the American Red Cross

#### **SHIRT PATCHES**

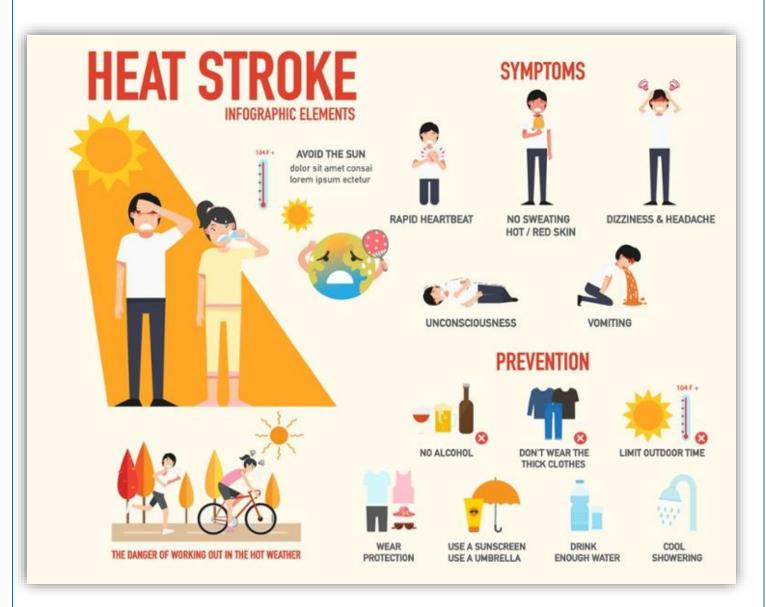
Also, for every Coach or Umpire that attends and is trained in AED, First Aid, and CPR they will receive a shirt patch. This makes it easily identifiable who is trained and who to go to during a safety situation.





## **HEAT GUIDELINES**

One of the things that make baseball great is you get to be outside. With that comes the heat of summer and being aware and prepared for weather conditions. Player safety is our #1 concern and have a plan and guidelines in place to address this. What are Heat Related Illnesses?



2023 Safety plan

#### **HEAT STROKE:**

The Center for Disease Control describes heat stroke as 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**

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



#### **Emergency Treatment**

- Take the following steps to treat an athlete with heat stroke:
- Call 911 and notify their supervisor.
- Move the sick athlete to a cool shaded area.
- Cool the athlete using methods such as:
  - o Soaking their clothes with water.
  - o Spraying, sponging, or showering them with water.
  - Fanning their body

#### **HEAT EXHAUSTION**

Heat exhaustion is the body's response to an excessive loss of the water and salt, usually through excessive sweating. With heat exhaustion, your body temperature rises as high as 104 F (40 C) and you may experience nausea, vomiting, headache, fainting, weakness, and cold, clammy skin. If left untreated, this can lead to heatstroke.

#### **Symptoms**

- 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:
- Have them rest in a cool, shaded or air-conditioned area.
- Have them drink plenty of water or other cool, nonalcoholic beverages.
- Have them take a cool shower, bath, or sponge bath.

#### **HEAT SYNCOPE**

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**

- Symptoms of heat syncope include:
- Light-headedness
- Dizziness
- Fainting
- Treatment
- 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 cramps usually affect athletes who sweat a lot during strenuous activity. This sweating depletes the body's salt and moisture levels. Low salt levels in muscles causes painful cramps. Heat cramps may also be a symptom of heat exhaustion.

#### **Symptoms**



- Muscle pain or spasms usually in the abdomen, arms, or legs.
- Treatment
- Athletes with heat cramps should:
- Stop all activity, and sit in a cool place.
- Drink clear juice or a sports beverage.
- Do 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 RASH**

Heat rash is a skin irritation caused by excessive sweating during hot, humid weather.

#### **Symptoms**

- Heat rash looks like a red cluster of pimples or small blisters.
- It is more likely to occur on the neck and upper chest, in the groin, under the breasts, and in elbow creases.
- Treatment
- Athletes experiencing heat rash should:
- Try to practice in a cooler, less humid environment when possible.
- Keep the affected area dry.
- Dusting powder may be used to increase comfort.

#### **GUIDELINES FOR PLAYING IN THE HEAT: (SEE ATTACHED HEAT INDEX CHART)**

#### **Heat Index under 95°:**

- Provide ample amounts of water. This means water should always be available and athletes should take in as much water as they desire.
- Optional water breaks every 30 minutes for 10 minutes duration.
- Ice-down towels for cooling
- Watch/monitor athletes carefully for necessary action

#### Heat Index 95° to 99°:

- Provide ample amounts of water. This means water should always be available and athletes should take in as much water as they desire.
- Mandatory water breaks every 30 minutes for 10 minutes duration.
- Ice-down towels for cooling
- Watch/monitor athletes carefully for necessary action

#### Heat index 100° to 104°:

- Provide ample amounts of water. This means water should always be available and athletes should take in as much water as they desire
- Mandatory water breaks every 30 minutes for 10 minutes duration
- Ice-down towels for cooling
- Watch/monitor athletes carefully for necessary action
- Alter uniform by removing items if possible
- Reduce time of outside activity as well as indoor activity if air conditioning unavailable
- Postpone practice to later in day if possible
- Helmets and other possible equipment removed if not involved in contact or necessary for safety. If necessary for safety, suspend activity
- Re-check temperature and humidity every 30 minutes to monitor for increased Heat Index

#### **Heat index above 104°**

• Stop all outside activity in practice and/or play, and stop all inside activity if air conditioning is unavailable.



# Relative Humidity (%)

# **NOAA's National Weather Service**

# **Heat Index**

Temperature (°F)

	80	82	84	86	88	90	92	94	96	98	100	102	104	106	108	110
40	80	81	83	85	88	91	94	97	101	105	109	114	119	124	130	136
45	80	82	84	87	89	93	96	100	104	109	114	119	124	130	137	
50	81	83	85	88	91	95	99	103	108	113	118	124	131	137		
55	81	84	86	89	93	97	101	106	112	117	124	130	137			
60	82	84	88	91	95	100	105	110	116	123	129	137				
65	82	85	89	93	98	103	108	114	121	128	136					
70	83	86	90	95	100	105	112	119	126	134						
75	84	88	92	97	103	109	116	124	132		*					
80	84	89	94	100	106	113	121	129								
85	85	90	96	102	110	117	126	135								
90	86	91	98	105	113	122	131									
95	86	93	100	108	117	127										
100	87	95	103	112	121	132										

## Likelihood of Heat Disorders with Prolonged Exposure or Strenuous Activity

Caution Extreme Cautio	n 🔲 Danger	Extreme Danger
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#### WEATHER POLICIES

The following policy is to be enforced for all Blaine Area Little League (BALL) activities. Included are: games, practices, scrimmages, and any other associated outdoor activity.

**ALWAYS ASSUME THE GAME IS TO BE PLAYED** - If you have not been contacted by the League, or viewed a weather update on our website (baseball.bslpaa.org), the status of the game will be decided at the field by the Umpires or League Executives.

#### PRIOR TO GAME TIME

City Park status updates will be available at 763-785-6164 or Blaine Park & Rec.'s 24-hour hotline at 763-717-2709 for information on activity cancellations. BALL game cancellations will also be posted on our website (https://www.ba-littleleague.org/) after approximately 4:00 pm on weekdays and 8:00 am on weekends when there is inclement weather or wet fields. If there is no daily update, assume your game will be played as scheduled. Game-time cancellations may be made if there are late changes in the weather, and we will make every effort to contact team coaches as soon as a decision is made. We understand it is an inconvenience to travel to the park only to have your game cancelled, but our goal is to play whenever weather conditions allow. Practices, scrimmages and other activities will be decided by coaches and organizers.

If you do not find a cancellation notice on our website, or no cancellation is reported via the Park Board's direct number or hotline, ASSUME THE GAME WILL BE PLAYED, and the following pre-game weather rules will be in effect:

#### **Tornado Watch**

If a watch is in effect at game time, report to the ballpark and an onsite determination will be made by a conference of league officials, coaches and umpires. In this situation, you as a parent or guardian have the right to decide on whether or not to go to the park, but if game is playable, a forfeit may result from not having enough players to compete. ASSUME THE GAME WILL BE PLAYED.

#### **Tornado Warning**

If a warning is in effect at 4:00 pm on weekdays, or 8:00 am on weekends...ALL ACTIVITIES FOR THAT DAY WILL BE CANCELLED.

#### Severe Thunderstorm Watch / Warning

If a watch/warning is in effect at game time, report to the ballpark and an onsite determination will be made by a conference of league officials, coaches and umpires. In this situation, you as a parent or guardian have the right to decide on whether or not to go to the park, but if game is playable, a forfeit may result from not having enough players to compete. ASSUME THE GAME WILL BE PLAYED.



#### Lightning

If lightning strikes are visible at game time, report to the ballpark and an onsite determination will be made by a conference of league officials, coaches and umpires. In this situation, you as a parent or guardian have the right to decide on whether or not to go to the park, but if game is playable, a forfeit may result from not having enough players to compete. ASSUME THE GAME WILL BE PLAYED.

#### Rain

If it is raining at game time, report to the ballpark and an onsite determination will be made by a conference of league officials, coaches and umpires. In this situation, you as a parent or guardian have the right to decide on whether or not to go to the park, but if game is playable, a forfeit may result from not having enough players to compete. ASSUME THE GAME WILL BE PLAYED.

#### **Exception**

If a game field normally hosts back-to-back contests, and the first of the two games is cancelled prior start because of weather or poor field conditions, THE SECOND GAME ON THE CALENDAR WILL ALSO BE CANCELLED AND RESCHEDULED.



#### **DURING THE GAME**

Once the team lineups have been submitted to the Chief Umpire (or in younger divisions after the pregame conference has concluded), any decisions regarding game suspension or cancellation are at the sole discretion of the Chief Umpire.

If a game is suspended by rain, have the players stay in their dugouts, find local onsite shelter, or with the umpire's permission go to their cars and wait at least 30 minutes to see if the game can be resumed. If persistent downpours or poor field conditions prevent continuation, the game will

be postponed and rescheduled.

If lightning strikes in the 'visible' vicinity, suspend the game and require all players to seek shelter away from trees and metal objects. Allow everyone to go to their cars if they choose. Monitor the sky for more lightning, and if there are no visible strikes for a minimum of 20 minutes, resume the game. If after you have waited for 1 hour, and no 20 minute period without lightning occurs, the game will be postponed and rescheduled.

If the severe weather siren sounds at the complex, play is to be suspended immediately and it will not resume. Everyone should be directed to head for shelter. Managers and Coaches - make sure every player on your team is accounted for and has someone to go with for safety. The game will be rescheduled.

#### Exceptions

If a game field normally hosts back-to-back contests, and the first of the two games is suspended because of weather
and resumed, the first game's time allotment will not be extended. If the required innings to be considered a
complete game are not met, the game will be postponed at the end of its time allotment and rescheduled for
completion. The second game on the calendar will begin on time, as scheduled, as long as weather still permits.

2023 Safety plan

2. If a game field normally hosts back-to-back contests, and the first of the two games is suspended and then postponed (rescheduled to continue from the point of suspension) due to weather, THE SECOND GAME ON THE CALENDAR WILL BE CANCELLED AND RESCHEDULED.

#### **RESCHEDULED GAMES**

If a game needs to be rescheduled because of the above situations, whether due to cancellation or postponement, the arrangements will be made by the Division Commissioners and the Field Coordinator. The dates and times of the makeup games will be communicated to the coaches and Umpire-In-Chief, and will also be posted on our website (https://www.ba-littleleague.org/). We will attempt to reschedule these games for the earliest available field openings. COACHES ARE NOT TO SCHEDULE MAKEUP GAMES ON THEIR OWN.



### **FACILITY AND EQUIPMENT INSPECTION**

# Coach's / Umpire Pre-Game FIELD SAFETY INSPECTION HOME TEAM IS RESPONSIBLE FOR THIS!

#### Dugout / Bench

- Make sure all trash from previous events is removed.
- Make sure seating area is secure, fence has no holes, gate closes.
- Set up designated bat storage area.

#### Plate Area

- Make sure plate is fully exposed and not raised above or below ground level.
- Make sure batter's box area has no holes, ridges or debris.
- Make sure catcher's box has no holes, ridges or debris.
- Make sure backstop area is free of trash, debris or non-sanctioned signage.

#### 1<sup>st</sup> Base Line / 3<sup>rd</sup> Base Line

- Walk the line looking for holes, obstructions and debris in both fair and foul territory. Continue to outfield fence and check foul pole for placement.
- Return to 1<sup>st</sup> or 3<sup>rd</sup> Base and check it for proper mounting and stability

#### **Base Paths**

• Walk the path from 3<sup>rd</sup> Base to 2<sup>nd</sup> Base, and then 2<sup>nd</sup> Base to 1<sup>st</sup> Base looking for holes, obstructions and debris. Scan from the infield grass to the outfield grass.

#### Pitcher's Mound

- Make sure pitching rubber is fully exposed and no deep holes exist around it. (if mound has a secondary rubber, make sure rubber not in use is removed or covered with mound-dirt material.)
- Make sure mound is smooth and feathered into the grass
- Make sure "plant" area at front of mound has no holes

#### Infield Grass / Outfield Grass

Walk the grass area looking for holes, sprinkler heads and debris.

There is no particular order for you to perform this inspection, but it is important that all coaches complete it to make sure the players are playing in SAFE CONDITIONS.



#### **Pre-Practice Inspection**

#### Coach's SAFETY CONCERNS

- This inspection is basically the same as the PRE-GAME. You are looking for anything that may directly injure the players (holes, sprinkler heads, etc.), or cause the ball to indirectly injure the players (hole deflection, bounce off branch, etc.) when their concentration is focused elsewhere. You also want to make sure that your practice bases are not anchored to the ground, so they don't injure a sliding base runner.
- Where the game day environment is controlled, and there are other league officials present to monitor safety and other activities...you are the SOLE official at a practice. Make sure 'OUTSIDERS' are not in close proximity to your players or equipment, and make sure you are not infringing on someone else's space. You may have reserved the field for a specific practice time, but our fields are in public facilities and the public tends to wander where they will. With the exception of parents, try to keep your practice as "closed to the public" as physically possible.
- When there is no "win or loss" at stake, youth players tend to have short attention spans, and with that comes "HORSEPLAY". Since a practice is usually several things happening at the same time, certain situations will arise where players find themselves unsupervised and decide to fool around. Horseplay is not allowed on the playing field...this goes for practices, games and post-game activities. Make sure all coaches, assistants and parents are aware of this rule, and ask them to "SPEAK UP" to the offenders and ask them to stop.
- The last practice safety item a coach needs to worry about is WEATHER and DARKNESS. The same rules that apply for game days ALSO APPLY TO PRACTICES. (see the BALL Weather Policy posted on BBC Bulletin Board and in this manual) The coach makes the final decision to terminate a practice, but it can be a good team-building exercise to consult the parents and listen to their input before deciding.

#### First-Aid Kits

Accidents and injuries are a daily occurrence while participating in organized youth sports, and BALL believes that being prepared to deal with these situations is the best policy for everyone. Therefore, we have taken the initiative to supply a fully stocked First Aid Kit for every team in our organization. Each coach's team bag contains a basic kit, with all of the provisions needed to treat minor injuries, or seeded to treat minor injuries.



basic kit, with all of the provisions needed to treat minor injuries, or stabilize the more serious ones. IT IS REQUIRED TO HAVE ONE AT ALL GAMES AND PRACTICES!

# **EQUIPMENT INSPECTION**

Coach's EQUIPMENT CONCERNS

#### **Bats**

- Must have USA Baseball Logo on bat (NEW 2018)
- Make sure metal bats are not creased or bent (dings that do not effect roundness are okay). Make sure wood bats don't have any "chunks of bark" out of them.
- Remove from team supply, or ask player to leave at home, any bat that does not pass muster. You will be asked by the umpires if you have properly checked your team bats, so it's a good idea to have a handle on this, beforehand.
- "Personal Player Bats" that do not pass inspection cannot be used in practice or games...no matter how much a parent spent on them!
- Approved bat use is the COACH'S RESPONSIBILITY.





- "Game" balls should not be removed from the plastic wrapping until handed to the umpire at the start of a game.
- Practice balls can be any used game ball, low-impact ball, plastic or plastic-covered ball. The only disqualifications of any ball from practice are: if the seam is broken or unraveling, the covering has a hole or tear, or it has been "humanly" altered from its original manufacturer's condition.

#### **Batting Helmets**

- Take a look at your helmets before every practice or game.
- Make sure the helmet has no cracks or pieces missing.
- Make sure the helmet has: not been "humanly" altered for color or pattern, not had any stickers or signage affixed, not been modified from its original mfg.'s condition. These things will void warranty and may affect protection ability.
- Make sure all interior padding is in place and securely fastened.



#### **Gloves**

- Have your players check their gloves at each practice and pre-game warm up.
   Make sure all finger padding and webbing is properly positioned, and all connecting ties are secure and properly knotted. Trim excess connecting ties.
- Make sure glove has not been modified in any way, other than "form break-in".



#### Catcher's Gear



- Pay special attention to the catcher's mitt. Make sure the padding has not become too relaxed, and that all panels are secure and tight.
- Look at the helmet and mask. Make sure wire mesh has no broken welds or bars. Make sure helmet portion has no cracks or missing pieces. Make sure straps are attached and in working order. Make sure helmet has not been altered from its original manufacturer's condition, or humanly modified for any reason.
- •Look at the chest protector. Make sure padding is not damaged or missing, collar and outer seam are intact, and straps are attached and in working order. Also make sure the extended padding on the long model has not been bent up or deformed so as not to perform its purpose.
- Look at the shin guards, checking the plastic parts for cracks or breaks,

the connecting material for tears, and the straps for placement and working order.

#### **Batting Cage / Pitch Machine**

Read owner's manual for directions for use and care and maintenance instructions.

#### **Training Accessories**

- All players are required to wear a protective cup.
- Traditional batting donuts are NOT allowed. Please don't permit their use in practice or games.
- Inspect all of your practice aids for normal wear and tear and replace or repair if you find anything hazardous.

Any equipment, whether league supplied, team supplied or player supplied is subject to inspection at any time, and will be removed from service for rules violations or hazardous condition.

#### **LEAGUE TRAINING**

#### **Fundamentals Training**

Little League International and Blaine Area Little League (BALL) require its coaches to complete annual training in baseball fundamentals (hitting, sliding, fielding, pitching, etc.). At least one (1) coach or manager from each team is mandated to attend and the training qualifies a coach for three (3) years. One team coach or manager per team must still attend each year, even if they are within their 3 year qualification period.

The intent of this policy is to provide training to ALL coaches and managers; minimum of one participant per team, per year. Training is also intended to be modified annually to meet the local needs of players and their facilities.



You must attend the following clinic to fulfill the requirement:

BALL Coach's Training Dates

DATE TBD

9:00 am to 10:30 pm (5-8 yr olds) \*Tentative

11:00 am to 12:30 pm (9+ yr olds) \*Tentative

1pm - 2:30pm: Umpire Training \*Tentative

#### TRUSTED COACHES

When parents are asked what the most important aspect is in deciding whether or not to allow their child to play a specific sport, the answer is almost always CHILD SAFETY. Most youth coaches have limited knowledge of basic first-aid and usually the only thing they do get prior to the season is a first-aid kit in their equipment bag. The Trusted Coaches team knows coaches needed to be better equipped, so we teamed up with industry leaders to create a training

program that prepares coaches to handle injury situations. Knowledge of basic first aid encourages a safe playing environment by keeping the safety of the athlete as the top priority.

Blaine Area Little League has partnered with Trusted Coaches to provide free First-Aid and Concussion training for all coaches (minimum of 1 per team) in our system. *It is required* and part of the requirements to be a coach with our organization. Training qualifies a volunteer for 3 years but 1 team representative is required to attend each year. BALL will document and track compliance.

The Trusted Coaches First -Aid Course was designed to train youth coaches on the basics of first aid, how to respond to common medical issues, when to return athletes to play, and when to call 911. Collaborating on the project were several medical experts from Fairview Sports and Orthopedic Care. The video will conclude with a quiz.



Approximate video length: 32 Minutes

Quiz: 15 Questions

Printable Certificate available in Trusted Coaches' Account and designated Organization Administrators Account.

B.A.L.L. will also be conducting CPR/AED/Safety Training:

TBD based on COVID-19 restrictions for local safety





#### **CONCESSION STAND SAFETY AND PROCEDURES**

#### **Concession Stand Volunteer General Instructions**

NOTE: Health Department will make unannounced inspections

No person under the age of 14, or any person who has not been pre-approved and screened by Blaine Area Little League, is permitted in the concession stand.

- Wash Hands Often
- No eating at service window
- Use plastic gloves when handling unpackaged food
- Keep food warmer at 170 degrees
- Keep cash box and your valuables under your control
- Check restrooms for supplies and restock as necessary
- One volunteer must always be at service window while stand is open

No cash disbursal is to be made from cashbox without approval and log signature from Concessions Supervisor Keep clubhouse doors locked, when possible. A/C is running and struggles to fight cooking heat and service window heat from the outside. Do not allow unauthorized people to loiter, gather or store items in clubhouse.

#### **BALL SAFETY PLEDGE**

- ✓ We will not allow any person under the age of 14, or any person who has not been pre-approved and screened by Blaine Area Little League, to be permitted in the concession stand.
- ✓ All of our volunteers working in the concession stand will be trained in safe food preparation. Training will also cover safe use of the equipment, open/close procedures, safe food handling, fire prevention-extinguisher use and cleaning protocols.
- √ We will make sure cooking equipment is inspected periodically and repaired or replaced if needed.
- ✓ We promise that only food and drink purchased by BALL for sale in the concession stand will be allowed in the concession stand.
- ✓ All cleaning chemicals will be stored in closed, labeled containers away from food.
- ✓ We guarantee that a certified Fire Extinguisher suitable for grease fires will be placed in the concession stand, and kept in plain sight at all times.
- ✓ We will make sure a fully stocked First Aid Kit is available in the concession stand.



#### **OUR VOLUNTEER WORKERS PROMISE TO:**

- Wash my hands often!
- Perform proper food prep and service in accordance with Health Dept. regulations and guidelines.
  - Correctly operate all food service equipment.
  - o Perform proper food handling procedures.
- Act honestly and ethically when handling cash from customers.
  - o Perform and provide an accurate count of startup and ending monies.
  - o Give accurate change to customers while counting it back to them.
  - o Abide by the posted prices of concession items, and record accurate sales transactions.
- Communicate with other volunteers and customers in a courteous and professional manner.
- Keep an eye on inventory and supplies, and treat the concession stand with respect.
  - o Report inventory shortages, outages and supply orders to concession supervisor as soon as possible.
  - Restock merchandise and supplies before I leave for the day.
- Treat the clubhouse and concession stand with the same respect as I show my own home.
  - o Clean the concession stand, equipment and clubhouse facilities on a daily basis, as assigned.
  - Remove trash from the concession stand as needed.
- Not partake in any activity considered unsafe, unethical, unlawful or offensive.
- Represent the Blaine Area Little League to the best of my abilities.



#### **VOLUNTEER SAFE FOOD HANDLING**

#### **CLEAN – Wash Hands and Surfaces Often**

- WASH HANDS WITH HOT SOAPY WATER BEFORE HANDLING FOOD
- WASH CUTTING BOARDS, DISHES, UTENSILS AND COUNTERS WITH HOT SOAPY WATER AFTER PREPARING EACH
   FOOD ITEM
- O ALL WIPING CLOTHS MUST BE STORED IN A SANITIZING SOLUTION MADE UP OF BLEACH AND WATER (APPX. ONE CAPFUL BLEACH PER GALLON WATER)
- A SUPPLY OF DISPOSABLE HAND TOWELS AND HAND SOAP MUST BE AVAILABLE

#### SEPARATE - Don't Contaminate

- USE A CLEAN PLATE FOR COOKED FOOD. NEVER PLACE COOKED FOOD ON A PLATE PREVIOUSLY HOLDING RAW FOOD
- ALL FOOD ITEMS SHOULD BE COVERED WHENEVER POSSIBLE
- STORE FOOD AT LEAST SIX (6) INCHES OFF THE FLOOR TO MINIMIZE THE CONTAMINATION WHILE ALLOWING FOR FLOOR CLEANING
- WASH HANDS FREQUENTLY

#### **COOK – Foods to Proper Temperature before Serving**

- WHEN COOKING IN A MICROWAVE OVEN, COVER FOOD-ROTATE-STIR FOR EVEN COOKING. WHEN REHEATING, MAKE SURE FOOD REACHES PROPER TEMP.
- KEEP HOT FOODS HOT, AND COLD FOODS COLD. HOT FOODS MUST BE KEPT AT 170 DEGREES OR ABOVE, COLD FOODS KEPT AT 41 DEGREES OR BELOW
- USE A CLEAN METAL STEMMED THERMOMETER TO MEASURE THE INTERNAL TEMPERATURE OF COOKED FOOD TO MAKE SURE IT IS THOROUGHLY DONE

#### **CHILL – Refrigerate Promptly**

- REFRIGERATE FOODS QUICKLY. COLD TEMPERATURES KEEP BACTERIA FROM GROWING AND MULTIPLYING
- REFRIGERTATOR TEMPERATURE MUST BE SET AT 40 DEGREES OR LOWER, AND FREEZER AT 20 DEGREES OR LOWER. CHECK THESE OFTEN
- THAW FROZEN FOOD IN THE REFRIGERATOR
- DIVIDE LARGE AMOUNTS OF FOOD INTO SMALL, SHALLOW CONTAINERS FOR RAPID COOLING
- DON'T OVERPACK THE REFRIGERATOR
- KEEP THE REFRIGERATOR AND FREEZER CLOSED WHEN NOT IN USE.

#### **VOLUNTEER OPENING INSTRUCTIONS**

#### NOTE: Health Department will make unannounced inspections

No person under the age of 14, or any person who has not been pre-approved and screened by Blaine Area Little League, is permitted in the concession stand.

#### Report to work early enough to "Open" on time

#### **OUTSIDE**

- Bring Grill to Front Patio Area Start grill immediately, then cook Hot Dogs and Burgers ASAP weekdays and after
   10:30am on Saturdays
- Check restrooms for supplies and restock as necessary
- o Lift and secure window ledge outside
- o Place condiments and napkin dispenser on ledge
- Organize picnic tables, wipe down tops and benches

#### **INSIDE**

- Wash down all prep, cooking and service surfaces
- Start Coffee and Hot Water
- o Turn food warmer on and set to 170 degrees. (Anoka County Health Dept. Regulation)
- o Open inside service windows
- Unlock Cooler/Pop dispenser
- o Stock cups (12 oz for team treats, 16 oz for Sale, Styrofoam for coffee and hot chocolate)
- Stock Napkins
- Put hotdogs and burgers on buns (wearing plastic gloves), wrap bun and meat in foil sheet and keep in warmer until sold.

NOTE: Two people can "split" these duties and be ready to serve in appx. 30 minutes

#### **VOLUNTEER CLOSING INSTRUCTIONS**

#### NOTE: Health Department will make unannounced inspections

No person under the age of 14, or any person who has not been pre-approved and screened by Blaine Area Little League, is permitted in the concession stand.

#### NOTE: Two people must be present for closing

- o Bring condiments and napkin dispenser inside
- Lower window ledge
- Close and latch window doors
- Close and latch inside windows
- Lock doors, and don't allow anyone inside without their own key
- Unplug Coffee and Hot Chocolate pots Discard old coffee
- o Put leftover (wrapped) food in refrigerator, turn off warmer
- Wash Pots and Utensils in the 3-bin sink, use proper soap and hot water
- Wipe down all counter tops
- o Restock, then lock cooler/pop dispenser
- o Replace trash can liner if more than ½ full.
- o Secure cash box, document daily sales, sign log and deposit as directed by concessions supervisor
- Store cooled grill in designated area
- Sweep floor
- o Mop floor
- Vacuum clubhouse rug (if necessary)
- o Check that doors are locked, turn off all lights, exit building and go to parking area together

## Volunteers Must Wash Hands

#### HOW











#### WHEN

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

#### Wash after you:

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

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

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

### Wear gloves.

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

### If you wear gloves:

wash your hands before you put on new gloves

### Change them:

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

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



# Concession Stand Tips SAFETY FIRST

### Requirement 9

12 Steps to Safe and Sanitary
Food Service Events: The
following information is
intended to help you run a
healthful concession stand.
Following these simple
guidelines will help minimize
the risk of foodborne illness.
This information was provided
by District Administrator
George Glick, and is excerpted
from "Food Safety Hints" by
the Fort Wayne-Allen County,
Ind., Department of Health.

#### 1. Menu.

Keep your menu simple, and keep potentially hazardous foods (meats, eggs, dairy products, protein salads, cut fruits and vegetables, etc.) to a minimum. Avoid using precooked foods or leftovers. Use only foods from approved sources, avoiding foods that have been prepared at home. Complete control over your food, from source to service, is the key to safe, sanitary food service.

#### 2. Cooking.

Use a food thermometer to check on cooking and holding temperatures of potentially hazardous foods. All potentially hazardous foods should be kept at 41° F or below (if cold) or 140° F or above (if hot). Ground beef and ground pork products should be cooked to an internal temperature of 155° F, poultry parts should be cooked to 165° F. Most foodbome illnesses from temporary events can be traced back to lapses in temperature control.

#### 3. Reheating.

Rapidly reheat potentially hazardous foods to 165° F. Do not attempt to heat foods in crock pots, steam tables, over sterno units or other holding devices.

Slow-cooking mechanisms may activate bacteria and never reach killing temperatures.

#### 4. Cooling and Cold Storage.

Foods that require refrigeration must be cooled to 41° F as quickly as possible and held at that temperature until ready to serve. To cool foods down quickly, use an ice water bath (60% ice to 40% water), stirring the product frequently, or place the food in shallow pans no more than 4 inches in depth and refrigerate. Pans should not be stored one atop the other and lids should be off or ajar until the food is completely cooled. Check temperature periodically to see if the food is cooling properly. Allowing hazardous foods to remain unrefrigerated for too long has been the number ONE cause of foodborne illness.

#### Hand Washing.

Frequent and thorough hand washing remains the first line of defense in preventing foodborne disease. The use of disposable gloves can provide an additional barrier to contamination, but they are no substitute for hand washing!

#### 6. Health and Hygiene.

Only healthy workers should prepare and serve food. Anyone who shows symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, jaundice, etc.) or who has open sores or infected cuts on the hands should not be allowed in the food concession area. Workers should wear clean outer garments and should not smoke in the concession area. The use of hair restraints is recommended to prevent hair ending up in food products.

#### 7. Food Handling.

Avoid hand contact with raw, readyto-eat foods and food contact surfaces. Use an acceptable dispensing utensil to serve food. Touching food with bare hands can transfer germs to food

#### 8. Dishwashing.

Use disposable utensils for food service. Keep your hands away from food contact surfaces, and never reuse disposable dishware. Wash in a four-step process:

- 1. Washing in hot soapy water,
- 2. Rinsing in clean water;
- 3. Chemical or heat sanitizing, and
- 4. Air drying.

#### 9. Ice.

Ice used to cool cans/bottles should not be used in cup beverages and should be stored separately. Use a scoop to dispense ice; never use the hands. Ice can become contaminated with bacteria and viruses and cause foodborne illness.

#### 10. Wiping Cloths.

Rinse and store your wiping cloths in a bucket of sanitizer (example: 1 gallon of water and 1/2 teaspoon of chlorine bleach). Change the solution every two hours. Well sanitized work surfaces prevent cross-contamination and discourage flies.

#### 11. Insect Control and Waste.

Keep foods covered to protect them from insects. Store pesticides away from foods. Place garbage and paper wastes in a refuse container with a tight-fitting lid. Dispose of wastewater in an approved method (do not dump it outside). All water used should be potable water from an approved source.

#### 12. Food Storage and Cleanliness.

Keep foods stored off the floor at least six inches. After your event is finished, clean the concession area and discard unusable food.

#### 13. Set a Minimum Worker Age.

Leagues should set a minimum age for workers or to be in the stand; in many states this is 16 or 18, due to potential hazards with various equipment.

Safety plans must be postmarked no later than May 1st.



Food Safety and Inspection Service, USDA

#### **ACCIDENTS AND INCIDENT REPORTING**

Blaine Area Little League (BALL) does everything within its power to insure that all of its facilities, events, volunteers, coaches, managers, players, parents and guests experience baseball in the safest environment possible. However, as with life in general, situations arise which are either beyond one's control or outside of human anticipation. We're talking about accidents.

#### **INJURY REPORTING**

Tracking is a way for Blaine Area Little League to monitor all of the injury and near-miss occurrences within its baseball activities, to better prevent them and better respond to them. BALL it dedicated to continue this practice in 2023, and will continue to correlate data in order to inform the community of our progress.

Beginning in 2005, Blaine Area Little League required the reporting of data. Managers and coaches are held responsible for completing either a "First Report of Injury Form" or the "Injury Tracking Form" when an incident takes place. These completed forms are then submitted to the league's Safety Officer and a thorough investigation follows. The investigation includes follow-up with the: victim (or parents if a child), responder, reporter (coach or manager) and any witnesses mentioned in the report.

Information from the research is then used in three important and specific ways:

- 1. The BALL safety procedures are examined and modified to assist in the prevention of future occurrences.
- 2. New BALL safety procedures are added in order to prevent and possibly eliminate future occurrences.
- 3. Collected data is reported to the Board of Directors, Executives and the community, with the purpose of initiating a "blanket" approach for preventing, avoiding and eliminating future injuries and near-misses.

#### WHAT SHOULD BE REPORTED?

An incident that causes any player, manager, coach, umpire, volunteer or guest to receive medical treatment and/or first aid must be reported. This includes even passive treatments such as evaluation and diagnosis as to the extent of an injury, application of an ice pack, or the need for extra periods of rest.

Near-misses should also be reported. These are incidents where you say to yourself, "Oh my God, he was almost hit by that car?" or "That foul ball almost hit that lady in the head!" or basically, "They could have been seriously injured if...!" Although this type of reporting is somewhat tedious and inconvenient (and probably receives the least cooperation), it is an important tool for BALL to improve its safety protocols.

#### WHEN SHOULD THIS BE REPORTED?

All such incidents described above must be reported to the Safety Officer within 24 hours of the incident. (Email the completed tracking form to tiffanyl@ba-littleleague.org or snail mail to BALL, Attn: Safety Officer, PO Box 490781, Blaine, MN 55449)

#### **HOW IS THIS INFORMATION REPORTED?**

Copies of the "Injury Tracking Form" will be provided to all head coaches (may be reproduced as needed), in a folder marked INJURIES within the Blaine Baseball Complex (BBC) concession stand, online in savable PDF format on the BALL website, and in this manual. At a minimum, the following information must be provided:

- The name and phone number of the victim(s) involved.
- The date, time, and location of the incident.
- As detailed a description of the incident as possible.
- A preliminary estimate of the extent of the injury.
- A description of any treatment given.
- The name and phone number of the person providing treatment.
- The name and phone number of the person reporting the incident.

#### **NEAR MISS REPORTING**

These types of reports are most commonly submitted by parents or guests who have the entire event or game under their watchful eye. Although the primary responsibility for these reports remains with the team head coach, the coach may receive information from others and then send the documentation. Please ask all community members associated with your team to submit reports through you, and not directly to BALL.

When you encounter a near-miss, please fill out the Injury Tracking Form and identify at the top of the page, the words, "Near-miss". This will allow the Safety Officer to properly segregate the data and begin the proper investigation.

#### WHO SHOULD REPORT

Any member of Blaine Area Little League may submit a report to the Safety Officer!

#### **MEDICATIONS**

No medications may be dispensed by any person other than a child's parent or guardian. This goes for aspirin, acetaminophen, ibuprofen, etc., or any other over-the-counter treatment. Even though there are sections in this manual where it's recommended to treat swelling or fever with a med, we do not want any aid provider to think they can do this at will.

If you follow the guidelines for administering First Aid as posted in this manual, the dispensing of meds all boils down to a simple principle for the treatment of both children and adults:

If conscious, you must have a parent's permission to treat. If you have the parent's permission to treat, you can also get the parent to give the child a med if required. If the child is unconscious, you don't need permission to treat but you can't give an unconscious person anything by mouth, anyway! A conscious adult can consent to anything, an unconscious one cannot. COMMON SENSE, FOLKS! It will keep you out of trouble.

#### **CHECKLIST FOR PREPARING CLAIM FORM**

- 1. Print or type all information.
- 2. Complete all portions of the claim form before mailing to our office.
- 3. Be sure to include league name and league ID number.

#### PART I - CLAIMANT, OR PARENT(S)/GUARDIAN(S), IF CLAIMANT IS A MINOR

- 1. The adult claimant or parent(s)/guardians(s) must sign this section, if the claimant is a minor.
- 2. Give the name and address of the injured person, along with the name and address of the parent(s)/guardian(s), if claimant is a minor.
- 3. Fill out all sections, including check marks in the appropriate boxes for all categories. Do not leave any section blank. This will cause a delay in processing your claim and a copy of the claim form will be returned to you for completion.
- 4. It is mandatory to forward information on other insurance. Without that information there will be a delay in processing your claim. If no insurance, written verification from each parent/spouse employer must be submitted.
- 5. Be certain all necessary papers are attached to the claim form. (See instruction 3.) Only itemized bills are acceptable.
- 6. On dental claims, it is necessary to submit charges to the major medical and dental insurance company of the claimant, or parent(s)/guardian(s) if claimant is a minor. "Accident-related treatment to whole, sound, natural teeth as a direct and independent result of an accident" must be stated on the form and bills. Please forward a copy of the insurance company's response to Little League International. Include the claimant's name, league ID, and year of the injury on the form.

#### PART II - LEAGUE STATEMENT

- 1. This section must be filled out, signed and dated by the league official.
- 2. Fill out all sections, including check marks in the appropriate boxes for all categories. Do not leave any section blank. This will cause a delay in processing your claim and a copy of the claim form will be returned to you for completion.

IMPORTANT: Notification of a claim should be filed with Little League International within 20 days of the incident for the current season.



The 2023 Blaine Area Little League Safety plan is intended to provide background and information on our plan to keep our organization safe in 2023. This is an all-inclusive document that covers all safety issues related to players, coaches, umpires, spectators, facilities and operations.

Blaine Area Little League is committed to providing a safe experience to all the families in our organization.

This Safety Plan has been created to be a comprehensive guide for our league with Player Safety as our number one priority.

Thank you for your participation,

## **Tiffany LePage**

B.A.L.L. Safety Coordinator

#### **Accident Notification Form**

#### 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

- 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.
- 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.
   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.
n	ART 1
Name of Injured Person/Claimant SSN	Date of Birth (MM/DD/YY) Age Sex
· 1	☐ Female ☐ 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 exces	s of benefits from other insurance programs subject to a \$50 deductible
per injury. "Other insurance programs" include family's personal insu employer for employees and family members. Please CHECK the a	
	_
Does the insured Person/Parent/Guardian have any insurance throu	Igh: Employer Plan □Yes □No School Plan □Yes □No Individual Plan □Yes □No Dental Plan □Yes □No
Date of Accident Time of Accident Type of I	
	-37
DAM DPM	
Describe exactly how accident happened, including playing position	at the time of accident:
Check all applicable responses in each column:	5 TOVOLTO 5 OFFICE
□ BASEBALL □ CHALLENGER (4-18) □ PLAYEI □ SOFTBALL □ T-BALL (4-7) □ MANAG	R   TRYOUTS   SPECIAL EVENT  SER, COACH   PRACTICE (NOT GAMES)
(4-1)	TEER UMPIRE SCHEDULED GAME SPECIAL GAME(S)
(0 12)	RAGENT IT TRAVELTO (Submit a copy of
	AL SCOREKEEPER  TRAVEL FROM Little League
	Y OFFICER LITOURNAMENT Incorporated)
= SENION (13-16)	TEER WORKER   OTHER (Describe)
□ BIG (14-18)	
I hereby certify that I have read the answers to all parts of this form complete and correct as herein given.	and to the best of my knowledge and belief the information contained is
I understand that it is a crime for any person to intentionally attempt submitting an application or filing a claim containing a false or decer	
	facility, insurance company or other organization, institution or person
	daimant, or our health, to disclose, whenever requested to do so by
Little League and/or National Union Fire Insurance Company of Pitt as effective and valid as the original.	sburgh, Pa. A photostatic copy of this authorization shall be considered
	a two parent household, both parents must sign this form.)
Care Claimann are in Countrie (in a	rano parent notisentra, bott parents must sign uns torm.)
Date Claimant/Parent/Guardian Signature	

#### **General Liability Claim Form**

#### General Liability Claim Form

Send Completed form to: Little League Baseball and Softball 539 US Route 15 Hwy P.O. Box 3485 Williamsport, Pennsylvania 17701-0485 (570) 326-1921 Fax (570) 326-2951

(5/0) 320-1921 Fax (5/0) 320-2951				(LEXINGTON USE ONLY)											
Telephone immediate notice to Little League  International		CN						工							
Insured	Name of League			League I.D. N					, [						
	Name of League Official (please print)			(Used as location code)  Position in League											
	Address of League Official (Street, City, State, Zip)			Phone No. (Res.)											
				Phone No. (Bu	15.)										
Time and Place of	Date of Accident		AM PM	Accident occured at (Street, City, State, Zip)											
Accident	Arising out of Operations conducted at			1											
	Was Police Report made? If yes, where?  ☐ Yes ☐ No														
Description of Accident	State cause and describe facts surrour	iding accident (Use i	reverse sid	ie if needed)											
account.															
	Who owns Premises			Person in charge of Premises											
Coverage	Limits			Elevator:	$\Box$		Produc	ts:		Con					
Data	BI/PD: Med. Policy Number	ay: None		Yes Policy Dates:			Yes			Yes					
	Policy Number			Begin: End:											
	Is there any other insurance applicable to this risk?  Yes No														
Property Damage	Name of Owner			Description of Property											
	Address (Street, City, State, Zip)			Name of Insurance Co.											
				Nature and Extent of Damages and Estimate of Repair											
Insured	Name			Phone No. (Res)											
Person and	Address (Street, City, State, Zip)		Occupation		Ag	р.			Married						
Injuries										Single					
	Employers Name and Address			Phone No. (Bus)											
	Did you provide or authorize Attending Doctor's Name and Address medical attention? ☐ Yes ☐ No														
	Description of Injury									Probable length of Disability					
	Description of Injury  Where was the injured taken after acc	ident?		Probable lengt	h of Disa	bility									
Witnesses:		ident?		Probable lengt	h of Disa	bility									
Witnesses:	Where was the injured taken after account	ident?		Probable lengt	h of Disa	bility									
Witnesses:	Where was the injured taken after acconnected Name, Address, Phone Number	ident?		Probable lengt	h of Disa	bility									
Witnesses:  Date of Report:	Where was the injured taken after acc Name, Address, Phone Number Name, Address, Phone Number				h of Disa										