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# PRINCESS ANNE LITTLE LEAGUE

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## 2022 SAFETY MANUAL



45 YEARS OF SERVICE

LEAGUE ID# 346-08-02

## CONTENTS

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Table of Contents	2
Mission Statement	3
Welcome	3
2022 PALL Board of Directors Contact Information	4
Emergency Contact Information	4
Safety Code of Conduct	5
Safety Manual & First Aid Kits	6
Safety Manual, Safety Code of conduct & First Aid Kit Receipt	6
Princess Anne Little League Roles & Responsibilities	7
Player Safety Best practices	9
Equipment	13
Weather	14
Hydration	15
Storage Shed	15
Machinery	16
ACCIDENT REPORTING PROCEDURES	16
Insurance Policies	17
Health and Medical	19
Concession stand safety	19
Transportation	20
Common Sense	20
CONSIDERATIONS	22
Resources	22
General Safety Measures	23
Screening & Restrictions	24
Practice Plan	25
Game Plan	25
2022 PALL Covid-19 Minor indemnification form	27
2022 PALL Covid-19 indemnification form	28
Appendices	29

## MISSION STATEMENT

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Princess Anne Little League is dedicated to serving the community it resides in by occupying our youth with self-esteem building programs.

Driven solely by volunteers, Princess Anne Little League brings together our community by building strong relationships, solid work ethic, teamwork, and a championship mentality in our children. Our commitment is toward the future; instilling a family first mindset and developing young adults into leaders for tomorrow.

## WELCOME

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Managers and Coaches,

Welcome to another fun and exciting season of Princess Anne Little League Baseball and Softball!

Princess Anne Little League Board of Directors continues to make safety a top priority. In order to uphold our Safety Standards, the safety officer along with the Board of Directors requires that everyone follow the rules outlined in this manual. The Board of Directors also encourages managers and coaches to attend a First Aid Clinic prior to Skill Assessments (Try-Outs) or participating in Little League functions involving children.

Our Safety manual, accident reporting forms, and medical forms are now available online at [PALittleLeague.org](http://PALittleLeague.org) under the League Documents tab. Volunteer applications will be taken online via JDP or manually by filling out the provided hard copy of the form.

Safety rests with all of us as the volunteers of Princess Anne Little League. As a basic rule, always use common sense and report all accidents or safety infractions when they occur.

Thank you,

**Russell Burnsworth**

Safety Officer

Princess Anne Little League

## 2022 PALL BOARD OF DIRECTORS CONTACT INFORMATION

Position	Name	Email	Phone
President	Raul Rodriquez	<a href="mailto:president@palittleleague.org">president@palittleleague.org</a>	(757) 237-5083
Vice President	Brad Heater	<a href="mailto:vp@palittleleague.org">vp@palittleleague.org</a>	(757) 613-9168
Secretary	Kathy Helderman	<a href="mailto:secretary@palittleleague.org">secretary@palittleleague.org</a>	(757) 373-5995
Treasurer	Michelle Heater	<a href="mailto:treasurer@palittleleague.org">treasurer@palittleleague.org</a>	(757) 560-2441
VP of Baseball			
Tee Ball Player Agent	Christine Buswell	<a href="mailto:tball@palittleleague.org">tball@palittleleague.org</a>	(757) 621-5193
Challenger Player Agent	Steve Hackforth	<a href="mailto:challenger@palittleleague.org">challenger@palittleleague.org</a>	(757) 749-2564
Information Officer	Beth Foster	<a href="mailto:infoofficer@palittleleague.org">infoofficer@palittleleague.org</a>	(757) 630-9403
Safety Officer	Russell Burnsworth	<a href="mailto:safetyofficer@palittleleague.org">safetyofficer@palittleleague.org</a>	(757) 636-8914
Auxiliary Coordinator			
Field Maintenance			
Concession Coordinator			
VP of Softball			
Intermediate Player Agent			
Coach Pitch Player Agent			
Minor Player Agent			
Softball Player Agent			
Chief Umpire			

## EMERGENCY CONTACT INFORMATION

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### General

Virginia Beach Emergency	911
Virginia Beach Emergency Cell Phone Number	#77
Virginia Beach Non-Emergency	(757) 427-5000
Virginia Beach Sheriff's Office	(757) 427-4555
Virginia Beach State Police	(757) 427-6800
Poison Control Center	(800) 222-1222

### Rescue Squads

Court House Volunteer Rescue Squad	(757) 427-4688
Kempsville Volunteer Rescue Squad	(757) 490-8549
Plaza Volunteer Rescue Squad	(757) 431-3740
Virginia Beach Volunteer Rescue Squad	(757) 437-4830

### Fire Departments

Main number for all stations	(757) 385-4228
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### Hospitals

Sentara Princess Anne	(757) 507-0000
Sentara Bayside	(757) 363-6100
Sentara Virginia Beach General	(757) 395-8000
Chesapeake General	(757) 312-8121
Sentara Leigh	(757) 466-6000
Sentara Norfolk General	(757) 388-3000

## SAFETY CODE OF CONDUCT

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Attention: The PALL Board of Directors has mandated the following Safety Code of Conduct. All managers and coaches must adhere to the Code and the PALL Board of Directors will review all infractions. Depending on the seriousness or frequency of the infraction, the Board may assess additional disciplinary action including suspension, expulsion and/or possible legal action.

- At least one member of each coaching staff is required to a Little League First Aid certification card
- Speed limit is 5mph in the PALL parking lot. Watch for children running between cars.
- Alcohol is not permitted at any PALL activity where children are present
- Tobacco products are not allowed in the dugouts or on the playing fields
- Playing in the parking lot is not permitted
- Profanity is not permitted
- No bat swinging is allowed at any time within the walkways, common areas or in the dugouts
- Balls may not be thrown near bleachers or in the dugouts
- No climbing on fences or trees
- Pets of any kind are not allowed
- Skateboards, rollerblades and bikes are not permitted on the PALL complex
- No practice or games should be held when field or weather conditions are unsafe. IE: Lightening
- Play and practice areas will be inspected for unsafe conditions
- Equipment will be inspected regularly for condition and proper fit
- Warm-up exercises will be performed before each game or practice
- Only managers, coaches, players and umpires approved by the Board of Directors will be allowed on the playing fields during games or practice
- Batter may only wear Little League approved protective helmets and equipment
- Catchers must wear Little League approved catchers' helmet, mask, "dangle-type" throat guard, long model chest protector, shin guards and protective cup at all times
- On deck batters are NOT permitted in Majors and below divisions
- Everyone should be alert for foul balls
- Report any safety hazard or concerns regarding PALL safety to the Safety Officer or the Board member on duty immediately

## SAFETY MANUAL & FIRST AID KITS

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Each team will be issued a safety manual and first aid kit at the Coaches or Parents meeting. The meeting will be announced before the beginning of the season. When accepting possession, the manager or coach will sign the space provided below.

Two chemical ice packs will be included in each team first aid kits, these are to be used while at away games or practices. The PALL building will have a first aid kit and safety manual at all times. Ice packs located in the concession stand are to be used for injuries that occur on the PALL complex.

The safety manual includes maps to the nearest hospital, other emergency services, Board or Directors contact information, PALL Code of Conduct, and the Do's and Don'ts of treating injuries. First Aid kits will contain necessary items to treat an injury until professional help arrives.

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## SAFETY MANUAL, SAFETY CODE OF CONDUCT & FIRST AID KIT RECEIPT

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- I received my team's safety manual and first aid kit.
- Both the safety manual and first aid kit will be present at all games, practices and other events where players might be injured.
- I have read or have been read and understand the Safety Code of Conduct and promise to adhere to the rules and regulations.

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Print Name

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Division/Team Name

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Signature

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Date

**Return this portion to the Safety Officer**



## PRINCESS ANNE LITTLE LEAGUE ROLES & RESPONSIBILITIES

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### **Postseason & All- Stars**

All responsibilities remain the same during post-season and All-Stars within the league and during All-Stars. Insurance riders are necessary if any practices, games or events involving play that take place before or after the regularly scheduled seasons whether on or off any Princess Anne Little League complexes.

### **President**

The President is responsible for ensuring that the policies and regulations of the PALL Safety Officer are carried out by the entire membership to the best of his abilities.

### **Safety Officer**

The Safety Officer is the link between the PALL Board of Directors and its Managers, Coaches, Parents, Spectators and any other third parties on the complex grounds in regard to safety matters, rules, and regulations. This includes:

- Developing and implementing the league Safety Program
- Coordinating with teams in order to provide the safest environment possible for all
- Assisting parents and individuals with insurance claims
- Keep track of safety issues and accident reports
- Ensuring that each team receives its safety manual and its first aid kit at the beginning of the season
- Installing/restocking first aid kits
- Maintaining compliance with Little League's "Child Protection Program" by requiring all volunteers with access to players to pass background checks
- Ensure that the concession stand is inspected before the season
- Inspecting fields with Player Agents for areas needing attention and coordinating corrective action with the Field Maintenance Coordinator.
- Scheduling First Aid Clinics and fundamentals training for all Managers, Coaches, Umpires, and Player Agents prior to the season, and ensuring at least one member of every coaching staff attends. First Aid Clinic Date: TBD
- Acting immediately to resolve unsafe or hazardous conditions
- Making spot checks at practices and games to ensure that all Managers have their safety manuals and first aid kits and use safe practice techniques.
- Making sure that safety is a monthly Board Meeting topic and allowing experienced people to share ideas on improving safety.

### **Information Officer**

The Information Officer is responsible for maintaining palittleleague.org, social media and ensuring that Safety information is available for all.

### **Field Maintenance Manager**

The Field Maintenance Manager ensures the fields and structures meet safety requirements set in this manual.

### **Equipment Manager**

The Equipment Manager ensures that damaged equipment is repaired/replaced and also exchanges gear that does not fit properly.

### **Concession Coordinator**

The Concession Coordinator ensures that concession volunteers are trained in the proper equipment safety procedures.

### **Managers & Coaches**

Appointed by the President, Managers are responsible for the following:

- Taking possession of the provided Safety Manual and First Aid Kit.
- Returning the Safety Manual & First Aid Receipt and Safety Code of Conduct to the Safety Officer before the first practice.
- Attend mandatory First Aid training sessions.
- Always having the Safety Manual and first aid kit on hand for games/practices.
- Meet with parents during any Parent Meetings.
- Team conduct, observance of the rules and deference to Umpires.
- Safety of the team's players.
- Actions of the assigned coaches.
- All equipment is in working order.
- Go over the basics of safe play with players before beginning the first practice.
- Fills out and returns Accident Report forms to the Safety Officer for injuries that occur during games/practices.
- Notify parents if a child is injured or becomes ill.
- Ensures that a child has a doctor note before resuming participation in games/practices if the child is injured or became ill.
- Urges players to bring water and stay hydrated during games/practices.
- Designate a coach to take on the Manager duties, rights and responsibilities of the Manager if they are absent from a game/practice.
- Ensures that telephone access is available at games/practices.
- Catchers are ALWAYS wearing the provided catcher's gear during games/practices.
- All male players are ALWAYS wearing a protective cup during games/practices.
- Observe pitch count rules for that pitcher's Division.
- Observe "no on-deck" rule for the Major Divisions and below.
- Encourage the use of mouth guards and sunscreen.
- Teach the fundamentals of the game including properly catching fly balls, sliding, fielding ground balls and simple pitching.
- Agree with the opposing team manager on the fitness of the field to play. If either manager believes the field unfit to play, a member of the Board of Directors will make the final determination. Preferably, the determining Board member will not be associated with either team but may make the decision if another Board member is not present.

- Ensuring the playing field is clear of any hazard's pre-game, during game and post-game, notifying a Board Member of any hazards.
- Enforcing safety policies throughout the season.

## **Umpires**

Umpire Responsibilities include:

- Check equipment of both teams. Equipment that does not meet Little League or Safety regulations must be removed from the game. Including bats with dents, splinters or not Little League approved. Helmets with cracks, stickers or paint.
- Ensures that catchers are in full gear and that gear fits properly when warming up pitchers and during game play.
- Ensures players are not wearing jewelry.
- Ensures Major players and below are not wearing metal cleats.
- Walks the field and ensures that there are no hazards or obstructions.
- Ensures lines are properly marked.
- Secures Official Little League balls from both teams.
- Governs game as mandated by Little League rules and regulations.
- Ensures balls are fit for play with no rips or nicks.
- Enforces pitch count rules for the pitcher's Division.
- Enforce that no spectators are allowed on the field during games.
- Ensures players and spectators keep fingers out of fencing.
- Make loud and clear calls with clear call hand signals.
- Acts as the sole judge as to whether and when a game shall be terminated or suspended due to weather conditions, low visibility or other conditions that make a game unfit and shall judge whether a game can resume after being suspended.
- Talk with Coaches and Managers after game regarding safety violations
- Report safety violations and unsafe situations to Board members present at the complex.

### **Conditioning & Stretching**

Conditioning is an intricate part of accident prevention. Studies on the effect of conditioning known as “warm-ups,” have demonstrated that stretching and contracting of muscles before an athletic activity improves general control of movements, coordination and alertness. Also, such drills help develop the strength and stamina needed by athletes to compete with minimum accident exposure. The purpose of stretching is to increase flexibility within the various muscle groups and to prevent tearing from overexertion. Stretching should in a gradual manner to encourage looseness and flexibility.

#### **Stretching Guide**

- Stretch neck, back, arms, thighs and calves
- Don't ask for the child to stretch more than they are capable
- Hold stretches for at least 10 seconds
- Have one of the players lead the stretching exercises

#### **Calisthenics Guide**

- Repetitions of at least 10
- Have kids synchronize their movements
- Vary upper body with lower body
- Keep a steady pace for a good cardiovascular workout

### **Pitching**

Pitch count DOES matter. The annual First-Aid clinic lectures focus on warning Managers and Coaches on pitching injuries and how to prevent them. Little League Managers and Coaches are usually quick to teach their pitchers how to get “movement” on the ball. Unfortunately, this technique is inappropriate for children under the age of 14. The snapping of the arm used to develop this technique is likely to lead to serious injuries to the child in the future.

Arm stress during the acceleration phase of throwing affects both inside (medial) and outside of a growing elbow. On the inside, the structures are subjected to distraction forces causing them to pull apart. On the outside, the forces are compressive with different and potentially more serious consequences.

The key structure on the inside of the elbow includes the tendons of the muscles that allow the wrist to flex and the growth plate of the medial epicondyle (knobby bone on the inside of the elbow). The forces generated during throwing can cause the growth plate to pull away (avulsed) from the main bone. If the distance between the growth plate and main bone is great enough, surgery is the only option to fix it.

**The growth plate does not fully adhere to the main bone until age 15!**

Similarly, on the outside (or lateral) aspect of the elbow, the two bony surfaces can be damaged by compressive forces during throwing. This scenario can lead to a condition called avascular Necrosis, or Bone Cell Death, as a result of compromise of the local blood flow in that area. This disorder is permanent and often leads to fragments of the bone breaking away (loose bodies) that float in the joint and can cause early arthritis. This loss of elbow motion and function often precludes further participation.

Studies have demonstrated that curveballs cause most problems at the inside of the elbow due to the sudden contractive forces of the wrist musculature. Fastballs, on the other hand, place more force at the outside of the elbow. Sidearm delivery, in one study, led to elbow injuries in 74% of pitchers compared with 27% of pitchers with a vertical delivery Style.

**Data to use as guide:**

- A significantly higher risk of elbow injury occurred after pitchers reached 50 pitches per outing.
- A significantly higher risk of shoulder injury occurred after pitchers reached 75 pitches per outing.
- In one season, a total of 450 pitchers or more led to cumulative injury to the elbow and shoulder.
- The mechanics, whether good or bad, did not lead to an increased incidence of arm injuries.
- The preliminary data suggest that throwing a curveball increases risk of injury to the shoulder more so than the elbow; however, subset analysis is being undertaken to investigate whether or not the older children were the pitchers throwing curve.
- **Pitchers who limited their pitching to repertoire to the fastball and change-up had the lowest rate of injury to their throwing arm.**
- A slider increased the risk of both elbow and shoulder problems.

Lastly, ice is a universal first-aid treatment for minor sports injuries. Ice controls pain and swelling. Pitchers should be taught how to ice their arms at the end of a game.

**Little League Pitch Count Rule**

There is no limit to the number of pitchers a team may use in a game, but a player may not pitch in more than one game per day.

The manager must remove the pitcher when said pitcher reaches the following limit, based on league age:

- League age 17-18: Maximum 105 pitches per day.
- League age 13-16: Maximum 95 pitches per day
- League age 11-12: Maximum 85 pitches per day.
- League age 9-10: Maximum 75 pitches per day.
- League age 7-8: Maximum 50 Pitches per day.

*Exception: If a pitcher reaches the limit while facing a batter, the pitcher may continue to pitch until: (a) the batter reaches base; or (b) the batter is put out; or (c) the half inning is completed.*

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

Also, pitcher league age 16 and under must adhere to the following rest requirements:

- > 60 pitches in a day: 3 calendar days and 1 game rest.
- 41-60 pitches in a day: 2 calendar days and 1 game rest.
- 21-40 pitches in a day: 1 calendar day of rest.
- < 21 pitches in a day: No rest required.

*Note: The rest requirements for the Big-League division and All-Star Tournaments are slightly different.*

A player may not pitch in consecutive games.

*Exception: League age 16 and under – A player may pitch in consecutive games if 40 or less pitches were delivered in the previous game. This exception is slightly different for the Big-League division and All-Star Tournaments.*

Violation of the pitch count rule can result in a protest of the game in which it occurs. Protest shall be made in accordance with Playing Rule 4.19. Furthermore, Princess Anne Little League recommends against the teaching or throwing of curveballs under the age of 13.

For a detailed explanation, see Appendix B, "Pitch Count".

## EQUIPMENT

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The Equipment Manager is a Board Member and is responsible for purchasing and distributing equipment to the individual teams. This equipment is checked and tested when it is issued but it is the Manager's responsibility to maintain it. Managers should inspect equipment before each game and practice. The PALL Equipment Manager will promptly replace damaged and ill-fitting equipment.

Furthermore, kids may bring their own gear. This equipment can only be used if it meets the requirements as outlined in this Safety Manual and the Official Little League Rule Book.

At the end of the season, all equipment must be returned to the Equipment Manager. First-Aid kits and Safety Manuals must be turned in with the equipment.

### **Equipment/Safety Notes:**

- Each team shall have (7) protective helmets that must meet NOCSAE specifications and standards. These helmets will be provided by PALL at the beginning of the season. If the players decide to use their own helmets, they must meet NOCSAE specifications and standards.
- Each helmet shall have an exterior warning label. This label cannot be embossed in the helmet but must be placed on the exterior portion of the helmet and be visible and easy to read.
- Helmets with post-manufacture paint or stickers are forbidden.
- The use of a helmet by the batter, player base coach, and all base runners is mandatory.
- All male players must wear athletic supporters.
- Male catchers must wear a protective cup and long model chest protector.
- Female catchers must wear long or short model chest protectors.
- All catchers must wear chest protectors with neck collar, "dangling" type throat guard, shin guards, and catcher's helmet, all of which must meet little league specifications and standards.
- All catchers must wear a mask with helmet with "dangling" type throat guard during practice, pitcher warm-up, and games.
- Only official Little League balls will be used during games.
- Bats that are dented or fractured in any way may not be used.
- If the gripping tape on a bat becomes unraveled, the bat must not be used until it is repaired.
- Pitchers cannot wear multi-colored gloves.
- Ensure that players respect the equipment that is issued.

### Rain

If it begins to rain:

- Evaluate the strength of the rain. Is it a light drizzle or pouring?
- Determine the direction the storm is moving.
- Evaluate the playing field as it becomes more saturated.
- Stop practice if conditions become unsafe – Use common sense. If playing a game, the umpire will make the decision.

### Lightning

- The average lightning strike is 5-6 miles long with up to 30 million volts at 100,000 amps flow in less than a tenth of a second. PALL added a lightning Detection System in 2010.
- The average thunderstorm is 6-10 miles wide and moves at a rate of 25 miles per hour.
- Once the leading edge of a thunderstorm approaches within 10 miles, you are at immediate risk due to the possibility of lightning strikes coming from the storm's overhanging anvil cloud. This fact is the reason that many lightning deaths and injuries occur with clear skies overhead.
- On average, the thunder from a lightning strike can only be heard over a distance of 3-4 miles, depending on terrain, humidity, and background noise around you. By the time you can hear the thunder, the storm has already approached to within 3-4 miles!
- The sudden, cold wind that many people use to gauge the approach of a thunderstorm is the result of downdrafts, and usually extends less than 3 miles from the storm's leading edge. By the time you feel the wind, the storm is less than 3 miles away!
- IF you can HEAR, SEE, or FEEL a THUNDERSTORM:
  - Suspend all games and practices immediately.
  - Stay away from metal including fencing and bleachers.
  - Do not hold metal bats.
  - **Proceed to parent's or designated driver's cars and WAIT for a decision on whether or not to continue the game or practice.**

### Ultra-Violet Rays

- This kind of exposure increases an athlete's risk of developing a specific type of skin cancer known as melanoma.
- The American Academy of Dermatology estimates that children receive 80% of their lifetime sun exposure by the time they are 18 years old.
- Therefore, PALL will recommend the use of sunscreen with an SPF (sun protective factor) of at least 15 as a means of protection from damaging ultraviolet light.



## Heat

Precautions must be taken in order to make sure the players on your team do not dehydrate or hyperventilate.

- Suggest players take drinks of water when going on and coming off the field between innings.
- If a player looks distressed while standing in the hot sun, substitute that player and get him/her into the shade of the dugout immediately.
- If a player should collapse as a result of heat exhaustion, call 911 immediately. Get the player to drink water and use ice packs from the concession stand (use instant ice bags supplied in your first aid kit if not at the PALL complex) to cool him/her down until the emergency medical team arrives. (See the next section on Hydration.)

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## HYDRATION

When children are physically active, their muscles generate heat, thereby increasing their body temperature. As their body temperature rises, their cooling mechanism – sweat – kicks in. When sweat evaporates, the body is cooled. Unfortunately, children get hotter than adults during physical activity and their body's cooling mechanism is not as efficient as adults. If fluids aren't replaced, children can become overheated.

We usually think about dehydration in the summer months when hot temperatures shorten the time it takes for children to become overheated. But keeping children well hydrated is just as important in the winter months. Additional clothing worn in the colder weather makes it difficult for sweat to evaporate, so the body does not cool as quickly.

It does not matter if it's January or July, thirst is not an indicator of fluid needs. Therefore, children should be encouraged to drink fluids even when they don't feel thirsty.

Managers and coaches should schedule drink breaks every 15-30 minutes during practices on hot days, and should encourage players to drink between every inning.

Sport drinks should contain between 6 and 8 percent carbohydrates (15 to 18 grams of carbohydrates per cup) or less. If the carbohydrate levels are higher, sports drinks should be diluted with water. Fruit juice should also be diluted (1 cup juice to 1 cup water). Beverages high in carbohydrates like undiluted fruit juice may cause stomach cramps, nausea and diarrhea when the child becomes active. Caffeinated beverages (tea, coffee, sodas) should be avoided because they are diuretics and can dehydrate the body further. Avoid carbonated drinks, which can cause gastrointestinal distress and may decrease fluid volume.

## STORAGE SHED

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The following applies to all of the storage sheds used by PALL and further applies to the anyone who has been granted access by to use the sheds:

- President will control access to the equipment sheds.
- All individuals with access to the equipment sheds are aware of their responsibility for the orderly and safe storage of heavy machinery, hazardous materials, fertilizers, poisons, tools etc.
- All chemicals or organic materials stored in storage sheds shall be properly marked and labeled and stored in its original container if available.
- Any witnessed "loose" chemical or organic materials within these sheds should be cleaned up and disposed of immediately to prevent accidental poisoning.
- Keep products in their original container with labels in place.
- Use poison symbols to identify dangerous substances.
- Dispose of outdated products as recommended.
- Sue chemicals only in sell-ventilated areas.
- Wear proper protective clothing, such as gloves or mask when handling toxic substances.

## MACHINERY

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The following applies to tractors, mowers, and any other heavy machinery:

- Before use of any machinery (i.e., lawn mowers, weed whackers, lights, scoreboards, public address systems, etc.) please locate and read the written operating instructions for that equipment.
- Machinery must be operated by appointed staff and selected volunteers only.
- Never operate under the influence of alcohol or drugs including medications).
- No operators under the age of 16.
- Never operated in a reckless, dangerous or precarious manner (i.e., riding on the fenders of a tractor.)
- Store appropriately when not in use with the brakes in the on position, the blade retracted, the ignition locked, and keys removed.
- Never leave outside the appointed storage location when not in use.

## ACCIDENT REPORTING PROCEDURES

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### **What and When to Report**

An incident that causes any player, manager, coach, umpire or volunteer to receive medical treatment such and/or first aid must be reported to the Safety Officer within 24 hours of the event. This includes even passive treatments such as the evaluation/diagnosis of the extent of the injury.

Russell Burnsworth

Phone: (757) 636-8914

Email: [safety@palittleleague.org](mailto:safety@palittleleague.org)

### **How to Report**

Reporting incidents will be done by completing the following three steps:

1. Fill out an Incident/Injury Tracking Report Form, which is available in the Safety Officers box upstairs at the field house or at the PALL website ([www.palittleleague.org](http://www.palittleleague.org)).
2. Email the completed form and description of the event to the Safety Officer.
  - Name and phone number of each individual involved.
  - Date, Time and Location of the incident.
  - As detailed a description of the incident as possible.
  - A preliminary estimation of the extent of injuries.
  - Name and phone number of the person reporting the incident.

### **After the Report**

After receiving the incident/Injury Tracking Report Form, the Safety Officer will contact the injured party or their parents to:

1. Verify the information.
2. Obtain any additional information needed.
3. Check the status and the injured party.
4. In the event the injured party required medical attention (i.e., Emergency Room or Doctor's Visit, etc.) advise parents of the PALL insurance coverage and how to submit forms.

## INSURANCE POLICIES

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Little league accident insurance covers only those activities approved or sanctioned by Little League Baseball, Incorporated.

Princess Anne Little League Majors, Minor League (including Machine Pitch), and T-Ball participants shall not participate as a Little League Majors, Minor League, and T-Ball team in games with other teams of other programs or in tournaments except those authorized by Little League Baseball, Incorporated.

Princess Anne Little League Majors, Minor League (including Machine Pitch), and T-Ball participants may participate in other programs during the Little League Majors, Minor League, and T-Ball regular season provided such participation does not disrupt the Little League Majors, Minor League, and T-Ball season or tournament team.

Unless expressly authorized by the Board of Directors of PALL, games played for any purpose other than to establish a league champion or as part of the International Tournament are prohibited (Rule IX).

### **Explanation of Coverage**

The Little League's insurance policy is designed to afford protection to all participants at the most economical cost. The Little League Player Accident Policy is an excess coverage, accident only plan, to be used to supplement other insurance carriers under family policy or insurance provided by a parent or guardian's employer. If there is no coverage, Little League insurance - which is purchased by PALL, not the family - takes over and provides benefits, after a \$50 deductible per claim, for all covered treatment costs up to the maximum stated benefits. Princess Anne Little League's insurance policy is designed to supplement a family's existing medical insurance policy.

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

### **How the Insurance Works**

If your child sustains a covered injury while taking part in a scheduled Little League Baseball or Softball game or practice:

1. The accident notification form must be completed by parents, manager/coach or League Official (if the claimant is under 19 years of age) and forwarded directly to the Little League Headquarters within 20 days of the accident. A photocopy of the form should be made and kept by the parent/claimant. Initial medical/dental treatment must be rendered within 20 days of the Little League accident.
2. Itemized bills, including date and description 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 an accident. In no event shall proof be furnished later than 12 months from the date the initial medical expense was incurred.
3. When other insurance is present, parents/claimants must forward copies of the Explanation of Benefits or Notice/Letter of Denial before each charge directly to

Little League headquarters, even if the charges do not exceed the primary insurance deductible.

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 requires 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 of \$100,000 for any one injury to any one Insured. 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 the 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 incurred on or before the Insured's 23<sup>rd</sup> birthday. Reasonable Expenses incurred for deferred root canal thereby 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 Exclusions provisions of the Policy.

## HEALTH AND MEDICAL

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### **First Aid**

First Aid means exactly what the term implies – it is the first care given to the victim. It is usually performed by the first person on the scene and continued until professional medical help arrives (911 paramedics). At no time should anyone administering First Aid go beyond their capabilities.

The average response time on **911** is 5-7 minutes. En-route paramedics are in constant communications with the local hospital at all time, preparing them for whatever emergency action might need to be taken. You cannot do this. Therefore, do not attempt to transport a victim to a hospital. Perform whatever First Aid you can and wait for the paramedics to arrive.

### **First Aid Kits**

First aid kits will be furnished to each team at the beginning of the season.

- The first aid kit will become part of the team's equipment package and will be taken to all practices, batting cage practices, games (regular season or post-season), and any other PALL event where children are present.
- To replenish materials in the team first aid kit, the manager, designated coaches, or the appointed team's safety officer must contact the Safety Officer (See contact information in the Board of Directors section of this Safety Manual).
- First aid kits and this manual must be turned in at the end of the season along with your equipment bag.
- If you are missing any of the above items, contact the Safety Officer immediately.

## CONCESSION STAND SAFETY

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Concession Stand Rules:

- No person under the age of thirteen will be allowed behind the counter in the concession stands.
- People working in the concession stand will be trained in safe food preparation. Training will cover safe use of the equipment. The Concession Stand Manager will provide the training.
- Cooking equipment will be inspected periodically and repaired or replaced if need be.
- A certified fire extinguisher must be in plain sight at all times.
- All concession stand workers are to be instructed on the use of fire extinguishers.
- A fully stocked First Aid Kit will be placed in the concession stand.
- The concession stand main entrance door will not be locked or blocked while people are inside.

## TRANSPORTATION

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Before any manager or designated coach can transport any PALL child, other than his/her own, anywhere, he/she must:

- Have a valid Driver's License.
- Not carry more children in their vehicle than they have seat belts for.
- Do not carry anyone in the bed of a truck.
- Make sure that the vehicle is in good running order.
- Not drive in a careless or reckless manner.
- Not drive under the influence of alcohol, drugs, or medication.
- Obey all traffic laws and speed limits at all times.
- Never transport a child without returning him/her to the point of origin.

## COMMON SENSE

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Playing safe boils down to using common sense. For instance, if you witnessed a strange person walking around the PALL complex who like he/she didn't belong there you would report the incident to a Board Member (There will always be a Board Member on duty). The PALL Board Member, after hearing your concerns, would investigate the matter and have the person in question removed if that person did not belong there.

Another example of common sense – you witness kids throwing rocks or batting rocks on the complex. They are having fun but are unknowingly endangering others. Don't just walk on by figuring that someone else will deal with the situation. Stop and explain to the kids that what they are doing is wrong and ask them to stop.

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# PRINCESS ANNE LITTLE LEAGUE

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## 2022 COVID-19 SAFETY PLAN



45 YEARS OF SERVICE

LEAGUE ID# 346-08-02



## CONSIDERATIONS

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- Governor's office has publicly endorsed resumption of organized baseball and softball
- Medical experts suggest "Play ball! The risk is likely to be lower now than in the Fall."
- Goal of resuming play: provide opportunities for as many community children possible
- Families should decide what's best for them according to own comfort levels community safety AND the entire league's ability to play baseball
  - Participation in league play is willful consent to abide by the outlined safety measures
  - Refusal to abide by outlined safety measures (gross negligence) jeopardizes
- Well communicated return to play strategies/measures to minimize risk
  - Resources for informed decision making
  - General Safety Measures
  - Organized Practice and Game Procedures

## RESOURCES

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- [CDC COVID19 Considerations for Youth Sports](#)
  - [Little League Season Resumption Guide](#)
  - [Little League Best Practices: Organizing, Playing, Watching Games](#) (Jun 2020)
  - [Virginia Guidelines for Recreational Sports](#)
  - [South County LL Safety Video](#)
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## GENERAL SAFETY MEASURES

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Our goal is to keep all Players, Coaches, Volunteers, Umpires, and any others Safe and Healthy while allowing the children to return to normality of their Baseball /Softball season. The following are the changes to procedures that PALL and other surrounding Little Leagues have made in effort to promote safety at the ball fields. Participation in this season, is contingent on adherence to the following safety practices:

- All players, coaches, volunteers, independent contractors, and spectators should practice social distancing from individuals not residing within their household - 6' with mask, 10' without mask - wherever possible.
- Players and families should vacate the field/facility as soon as reasonably possible, ideally in 20 mins or less.
- Sanitizing solutions, wipes, or disinfectant sprays will be provided for each team with equipment and shall stay with such equipment and readily available at each practice and game.
- **Coaches, team parents and umpires are required to wear masks while participating in games or practices.**

### **NO UNNECESSARY CONTACT**

- Examples include handshakes, first bumps, contact celebrations, etc.

### **NO EQUIPMENT SHARING**

- Examples include gloves, bats, batting gloves, helmets, elbow guards, etc.  
Please label equipment w/ player's name to readily identify and avoid confusion

### **NO FOOD/BEVERAGE SHARING**

- Please label items w/ player's name to readily identify and avoid confusion.
- No spitting/chewing gum or sunflower seeds

### **USE SANITIZER OFTEN**

- Strongly advised that all players have their own sanitizers to use at the field. In the case this is not available, there will be hand sanitizer and spray disinfectant at the field.
- The balls used will be sanitized daily at the completion of practice, and when deemed necessary.

## SCREENING & RESTRICTIONS

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- Players, coaches, staff, and umpires will administer daily self-screening before games and practices using the CDC guidelines below:
    - A fever of 100.4°F or higher
    - A new cough that cannot be attributed to another health condition
    - Shortness of breath that cannot be attributed to another health condition
    - Chills that cannot be attributed to another health condition
    - A new sore throat that cannot be attributed to another health condition
    - A change in senses of smell and/or taste
    - A headache that cannot be attributed to another health condition
  - Immediate reporting to PALL by players/parents, coaches, staff or umpires if they:
    - Have ANY positive signs of the above specified symptoms
    - Feel unwell and/or have been in contact with anyone known to be infected with COVID-19.
  - NO player, coach, volunteer, staff member, umpire or fan is allowed to attend any league practices or games if they have a fever, feel unwell or display the symptoms associated with COVID-19 until symptom-free for 72 hours or cleared by a medical doctor.
  - If any player, coach, volunteer, staff member and/or umpire tests positive for COVID-19 infection or are otherwise diagnosed as infected with COVID-19, the individual will self-quarantine for at least 14 days, and will not attempt to return to any league activity until they have been fever-free (unmediated by any fever-reducing medication) for 72 hours or have been cleared by a medical doctor.
  - Players, coaches, staff and umpires will be required to submit a PALL COVID-19 agreement and indemnification waiver. This includes an agreement whereby they become infected with COVID19 or become exposed to someone with COVID-19, PALL may inform other league members or individuals who have been around them that they may be at risk. Can be found at the bottom of this document.
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## PRACTICE PLAN

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- Player equipment must also be spread out: Player A's bag must be 10 feet from Player B's bag. This should prevent being too close when it is time to get equipment or pack up. In general, the chain-link metal fence poles surrounding the fields are roughly 10 feet apart.
- Keep things basic, then progress:
  - Throwing as outlined
  - Ground balls to each other
  - Field at assigned position - 1 per position
- No batter/catcher – batting practice can occur, just no catcher. Pitchers can throw
- “bullpen” sessions, just no live batter.
- Teams can work on everything baseball that maintains the 10-foot rule
- Parents/guardians attending practices should refrain from getting any foul balls; please allow the coaches and players to retrieve foul balls to limit contact.

## GAME PLAN

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- Players, coaches, and volunteers will sanitize their hands between innings.
- Every effort will be made to maintain 10 feet boundaries between players during all aspects of the game.
- (Minors and above) Dugouts and bullpens will be used at the managers' discretion, whether used for a pitcher/catcher duo OR the next 3 batters due up, capacity WILL NOT exceed 4 people.
- (T-ball and Coach Pitch) Players shall sit with family instead of sitting in a dugout. Families that live together shall sit together but maintain 6-10ft from the next family group. Parents will be responsible for children on the bench during batting.
- Each manager will provide game balls for their team while fielding.

- Bat racks will NOT be used. As such, bats may only be retrieved by coaches or the player owning it.
- Foul balls will be retrieved by coaches or players.
- Families/guests should model distancing behavior expected of players. In addition to serving as an example, this also allows PALL baseball to continue without fear of being closed for infractions.

## APPENDICES

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Appendix A.	Pitch Count
Appendix B.	Accident/Injury Reporting Form
Appendix C.	Medical Release Form
Appendix D.	AIG Accident Notification Form
Appendix E.	AIG Claim form Instruction
Appendix F.	Volunteer Application
Appendix G.	Facility Survey