

# Phoenix Talent Little League ASAP Plan 2020

# Safety Plan and Requirements

- League Safety Officer: Cody Rombach on file with the Little League Headquarters
- PTLL will distribute a paper copy of this Safety Manual to all Managers/ coaches, league Volunteers and the District Administrator

3.	<b>Emergency Phone Numbers</b> :	<u>.</u>	911
	Local Police Emergency		541-535-1253
	Local Fire Emergency		541-535-4222
•	League President	Erin Parent	541-944-1575
•	League Vice President	Jeanetta Woodside	541-601-3845
•	League Secretary	Janel Phillips	541-944-5578
	League Treasurer	Jeanetta Woodside	541-601-3845
	League Safety Officer	Cody Rombach	541-840-1846

This list will be posted in the concession and dugout areas

- PTLL will use the official Little League Volunteer Application form to screen all of our volunteers
- 5. Mandatory Fundamentals meeting February 5<sup>th</sup>, 2019. This meeting is mandatory for any and all volunteers.
- 6. First Aid: Each team will be issued an updated First Aid Kit and is required to have it at every practice/game. A representative from each team who has completed the First Aid training must be present at every practice/game. Proof of First Aid completion is due to the Safety Officer on or before April 1st, 2020.

### www.firstaidforfree.com

- Any person volunteering for PTLL MUST complete Concussion Training. Proof
  of Concussion Training is due to the Safety Officer on or before April 1<sup>st</sup>, 2020
  <a href="http://www.cdc.gov/HeadsUp/youthsports/training/index.html">http://www.cdc.gov/HeadsUp/youthsports/training/index.html</a>
- 8. Coaches will be required to walk/inspect the fields prior to practices and games. Umpires will also be required to walk the fields for hazards before each game
- 9. PTLL has completed and updated our 2020 Facility Survey online
- 10. Concession Stand Procedures
  - The menu shall be posted and approved by the Safety Officer and the League President
  - Enclosed is a copy of the PTLL Concession Stand Safety Procedures which will be posted in the concession stand

- 11. The League Safety Officer will inspect all equipment in the pre-season Managers/Coaches will inspect equipment prior to each game Umpires will be required to inspect equipment prior to each game
- 12. Accident Reporting: PTLL will use the provided incident tracking form from the LL website and will provide completed Accident forms to Safety Officer within 48 hours of the incident. Accident Reporting form is attached
- 13. PTLL will require all teams to enforce all Little League Rules. Including:
  - Proper equipment for catchers
  - No on-deck batters circle
  - Coaches will not warm up pitchers
  - Bases will disengage on all fields
- 14. League Player registration Data or Player Roster Data and Coach/Manager Data will be submitted via the Little League Data Center at www.LittleLeague.org

## Incident/Injury Tracking Form

Activities/Reporting				A Safety Awareness Progra Incident/Injury Tracking Rep		
League Name:	4		League ID		Inci-	dent Date:
Field Name/Location	r.				Incid	dent Time:
Injured Person's Nar	ne:		121 27		Date of Birth:	ACCOUNT OF THE PARTY OF T
Address:			M /A /		Age:	Sex: Male Female
City:		State	ZIP		Home Phone:	7 7
Parent's Name (If Pl	ayer):	- 100 0000	Savini		Work Phone:	( )
Parents' Address (If	Different):	11 157 2			City	
Incident occurred v	THE RESERVE OF THE PARTY OF THE	ing in:			(3500)	
A.) III Baseball	Softball	Challeng	er ma	IAD		
B.)   Challenger	T-Ball	Minor		Major	[] Interm	ediate (50/70)
Diumor	El Senior	Bulleren			El marca an	20012 (100 101
C.)   Tryout	□ Practice	Game		Tournam	ent Speci	al Event
Travel to	Travel from					
Position/Role of pe	rsonis) Involve	d in incident:				
D.) 🗆 Batter	□ Baserunne	[15] [15] [15] [15] [15] [15] [15] [15]				Base Second
☐ Third	Short Stop	□ Left Field	E = 0	Center F	ield Right	Field Dagout
☐ Umpire	☐ CoachMan	ager Spectato	r == 1	Voluntee	r Other	
Type of injury:						
Was first ald requir		and the same of	Yes 🗆 No	fyes, w	vhat:	
(fyes, the player me	ust present a no	n-restrictive medi-	cal release	prior to	to being allowed	I in a game or practice.
Type of incident an	d location:					
A.) On Primary Plays	ing Field		B.)	Adjacer	nt to Playing Fiel	d D.) Off Ball Field
Base Path	Ruming or	Sliding		Seet	ing Area	☐ Travel:
Hit by Ball:	Pitched or	Thrown or DB			ing Area	Car or Bike o
Collision with		Structure	C.)	- 10 SEAT	ision Area	□ Walking
☐ Grounds Defect				□ Volunteer Worker		☐ League Activity
□ Other:			Customer/B		er Other:	
Please give a short	description of	incident:				
Could this accident	thave been av	olded? How:				
						should be used to evaluate
obtain as much informat cident Insurance policy, p as ap/AccidentClaimForm policy or claims that may	on as possible. For dease complete the pdf and send to Li result in litigation.	all Accident claims or Accident Notification tile League internation	Claimform a val. For all oth	could be a wail able a rar claims	ome claims to any el t http://www.littleid to non-eligible parti	ty When an accident occurs, up the participant under the ague .org/Ausets/forms_pub cipants under the Accident p//www.littleleague.org/As
esti/forms_pubi/esap/G				-	and the same of	
Prepared By/Position					one Number: (_	-2

## Facility and Field Inspection Checklist

### Facility and Field Inspection Checklist

Holes, damage, rough or unev Slippery Areas, long grass Glass, rocks and other debris	
Glass, rocks and other debris	
	& foreign objects
Damage to screens, fences edg	ges or sharp fencing
Unsafe conditions around bac	kstop, pitchers mound
Warning Track condition	
Dugouts condition before and	after games
Make sure telephones are ava	ilable
Area's around Bleachers free	of debris
General Garbage clean-up	
Who's in charge of emptying g	arbage cans
Conditions of restrooms and r	estroom supplies
Concession Stand inspection	
NOTES/ HAZARDS	

## Volunteer Application



### Little League® Volunteer Application - 2020

Do	not use forms from past		aper to complete if a		equired.	
This volunteer application should only be used			In which of the fol	lowing would you like to	participate? (Check or	e or more.)
or an outside background check provider that r THIS FORM SHOULD NOT BE COMPLETED IF LittleLeague.org/localBGcheck for more inform	A LEAGUE IS UTILIZING THE J		☐ League Official☐ Coach	☐ Umpire ☐ Field Maintenance	☐ Manager ☐ Scorekeeper	☐ Concession Stand ☐ Other
A COPY OF VALID GOVERNMENT ISSUED FOR COMPLETE THIS APPLICATION.		25		nces, at least one of which	ch has knowledge of	your participation as a
Name	or laikel (not	Date	volunteer in a youth pr	ogram:		
First Middle Name Address	or iritial		Name/Phone			
City	State Zip_		Ĭ			
Social Security # (mandatory)						
Cell Phone						EASE ATTACH A COPY OF THAT STATE!
Home Phone:	E-mail Address:					ITE: LittleLeague.org/BeStateLaws
Date of Birth						to conduct background check(s) on moview of sex offender registries (some of
Occupation			which contain name only sear	ches which may result in a repo	ort being generated that n	nay or may not be me), child abuse an
Employer						n the league receiving no inappropriat lity the local Little League, Little Leagu
Address			Baseball, Incorporated, the of	ficers, employees and voluntee	rs thereof, or any other p	erson or organization that may provide
Special professional training, skills, hobbies:			to a volunteer position. If app		to the expiration of my t	League is not obligated to appoint mo erm, I am subject to suspension by the or principles.
Community affiliations (Clubs, Service Organizations, etc.):	1 1 1 1 1 1	-	Applicant Signature		10000	Date
Previous volunteer experience (including baseball/softball a	nd year):		TO CHAIR TO COMPANY TO COMPANY CONTRACTOR OF			Date
Do you have children in the program?     If yes, list full name and what level?		Yes □ No □		print or type)		t discriminate against any person o
2. Special Certification (CPR, Medical, etc.)? Ye	es 🗆 No 🗆 If yes, list:		the basis of race, creed, co	lor, national origin, marital st	atus, gender, <mark>s</mark> exual ori	entation or disability.
Do you have a valid driver's license?     Driver's License#:				LOCAL LEA	GUE USE ONLY	<i>(</i> :
Have you ever been charged with, convicted involving or against a minor, or of a sexual name.	of, plead no contest, or guilty to	any crime(s)		completed by league of		
If yes, describe each in full:		Yes I No II ational Security Manager.)		background check (min andates all checks include		oe checked): ex offender registry records
Have you ever been convicted of or plead not if yes, describe each in full:  (Answering yes to question 5, does not automatically		Yes □ No □	* JDP 🗆			nd National Criminal  the current season's  official regulations
Do you have any criminal charges pending againfyes, describe each in full:      (Answering yes to question 6, does not automatically			*Please be advised tha searches can be perfor JDP in compliance with associated with the nar	t if you use JDP and there is a med you should notify volunte the Fair Credit Reporting Act on ne, which may not necessarily	name match in the few st ers that they will receive ontaining information reg be the league volunteer.	tates where only name match a setter or email directly from arding all the criminal records
7. Have you ever been refused participation in a		Yes □ No □	AND DESCRIPTION OF THE PARTY.	ication copies of background ch		and the second of the second o

## **Concession Stand Tips and Safety**

### **Concession Stand Tips**

#### Requirement 9

12 Steps to Safe and Sanitary Food Sanice 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 Bistrict Administrator Georgo Glick, and is occurpted from "Food Safety Hints" by the Fort Wayne Allen County, Ind., Department of Health.

#### 1. Mean

Keep your mean simple, and heep potentially harmfoot froots (mosts, eggs, darry products, protein salads, cut finuls and vegocables, etc.) to a minimum. Acroid using proceeded foods or lethorers. Use only foods from approved sources, assisting foods that have been prepared at bone. Complete control over your food, from source to service, is the leav to safe, suntary food service.

#### 2. Cooking:

Use a fixed tharmomerer to chack on cooking and holding temperatures of potentially hazundous fixeds. All potentially hazundous fixeds should be kept at 41° F or below (if old) or 140° F or above (if hart) Gurand basef and ground pock products should be cooked to an internal temperature of 135° F, positry parts should be cooked to 165° F. Mort foodborne illnesses from temporary events can be traced back to Spices in temperature commol-

#### 3. Robestine

Repodly reheat potentially harsoclous foods to 165° F. Do not arrange to best foods in crock pots, steam tables, over stems units or other holding devices.

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

#### 4. Cooling and Cold Storage.

Foods that require refrigeration must be encled 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 both (60% ice to 40% water), sturing the product frequently. or place the food in shallow pans no more than 4 inches in depth and refrigerate. Funs should not be stored one aton the other and lids should be off or siar urtil the food is completely cooled. Check temperature periodically to see if the food is cooling properly Allowing hexardous 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 stoodborne disease. The use of disposable gloves can provide an additional barrier to communication, but they are no substitute for hand washing!

#### 6. Health and Hygiene

Only healthy workers should propore and serve food. Anyme who shows symptoms of disease (transpt, names, fever, working, darrhen, joundice, etc.) or who has open sense or infected cuts on the hands should not be allowed in the food concernion area. Workers should wear clean outer gaments and should not smoke in the concention area. The use of hair restraints is measuremented to prevent bair ending up in food products.

#### 7. Food Handing

Avoid hand connect with raw, readyto-ent foods and food connect surfaces. Use an acceptable dispensing ofensal to serve food. Touching food with bere hands can transfer serms to food

#### II. Didmocking

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

- 1. Washing in hot soapy water,
- 2. Rincing in clean water,
- Chemical or best startizing; and
   Air drying.

#### O Tre

lice used to cool cany/bottles should not be used in cup haverages and should be stored separately. Use a scoop to dispense ice, never use the hands lice can become consentinated with become and various and cruse foodborne illness.

#### 10. Wiping Cloths

Rime and store your wiping cloths in a backet of sommer (enample: I gatton of water and 1/2 sompoon of chlorine bloach). Change the solution every two bourn. Well saminged work surfaces prevent cross-continuation and discourance files.

#### 11. Insect Control and Waste.

Ecop foods covered to protect tham from mosets. Store perhades away from foods. Place garings and paper works in a rubus constance with a tightfitting hid. Dispose of wastewater in an approved method (tio not dump it ourside). 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 murable food.

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

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

> Safety plans must be postmarked no later than May Isa

### **Volunteers Must Wash Hands**

