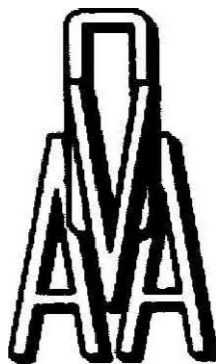


2019  
Oak Valley Little League  
Safety Plan  
League ID. 02301520



- This Safety Plan will be distributed to all managers/coaches, and made available to all volunteers and parents. Extra copies will be kept in the concession stand and clubhouse.

## **KEY LEAGUE OFFICIALS**

President	Derek Smyser	856-625-7814
VP Baseball	James Noce	856-503-1447
Secretary	Liz Noce	609-352-9445
Treasurer	Ruth Logue	609-238-5072
Player Agent	Jack Acker	856-203-4779
Baseball Commissioner	LJ Acker	856-203-4764
Softball Commissioner	Mickey Walsh	609-707-1106
Safety Officer	Tom Morgan	856-236-9051
EMERGENCY		911

- All Volunteers MUST fill out the 2019 Little League Volunteer Application Form. Background checks will be done using First Advantage and United States Department of Justice National Sex Offender Registry on all volunteers.
- First Aid/Safety class sessions will be held on March 11 & March 27, 2019. Every Team must have at least one coach FA/Safety Certified.
- All volunteers must be "Rutgers S.A.F.E.T.Y." trained. This is a Deptford Township mandate. Training class is March 28, 2019, at 6:00 PM, at Deptford Township Municipal Building.
- It is highly recommend all volunteers to take the Heads Up online training course on concussions provided by the CDC by using the following link below.

[http://www.cdc.gov/concussion/headsup/online\\_training.html](http://www.cdc.gov/concussion/headsup/online_training.html)

CDC Fact Sheet for Coaches is the following 4 pages:

## HEADS UP

## A Fact Sheet for COACHES

# C)

## CONCUSSION

W YOUTH SPORTS

To download the coaches fact sheet in Spanish, please visit [www.cdc.gov/Concussion1nYouthSports](http://www.cdc.gov/Concussion1nYouthSports)  
Para descargar la hoja informativa para los entrenadores en español, por favor visite:  
[www.cdc.gov/ConcussionrnYouthSports](http://www.cdc.gov/ConcussionrnYouthSports)

### THE FACTS

A concussion is a brain injury.

- All concussions are serious.
- Concussions can occur without loss of consciousness.

Concussions can occur in any sport.

Recognition and proper management of concussions when they first occur can help prevent further injury or even death.

### WHAT IS A CONCUSSION?

A concussion is an injury that changes how the cells in the brain normally work. A concussion is caused by a blow to the head or body that causes the brain to move rapidly inside the skull. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious. Concussions can also result from a fall or from players colliding with each other or with obstacles, such as a goalpost.

The potential for concussions is greatest in athletic environments where collisions are common. Concussions can occur, however,

in any organized or unorganized sport or recreational activity,

### RECOGNIZING A POSSIBLE CONCUSSION

To help recognize a concussion, you should watch for the following two things among your athletes.

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

-and-

2. Any change in the athlete's behavior, thinking, or physical functioning. (See the signs and symptoms of concussion listed on the next page.

It's better to miss one game than the whole season.

## SIGNS AND SYMPTOMS

### SIGNS OBSERVED BY COACHING STAFF

Appears dazed or stunned Is confused about assignment or position Forgets sports plays

Is unsure of game, score, or opponent

- Moves clumsily  
Answers questions slowly  
Loses consciousness (even briefly) Shows behavior or personality changes
- Can't recall events prior to hit or fall Can't recall events after hit or fall

Athletes who experience any of these signs or symptoms after a bump or blow to the head should be kept from play until given permission to return to play by a health care professional with experience in evaluating for concussion. Signs and symptoms of concussion can last from several minutes to days, weeks, months, or even longer in some cases.

days after the injury. If you have any suspicion that your athlete has a

concussion, you should keep them out of the game or practice. Remember, you can't see a concussion and some athletes may not experience and/or report symptoms until hours or days after the injury. If you have any suspicion that your athlete has a concussion, you should keep the athlete out of the game or practice.

### SYMPTOMS REPORTED BY ATHLETE

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

## PREVENTION AND PREPARATION

As a coach, you can play a key role in preventing concussions and responding to them properly when they occur. Here are some steps you can take to ensure the best outcome for your athletes and the team.

- Educate athletes and parents about concussion. Talk with athletes and their parents about the dangers and potential long-term consequences of concussion. For more information on long-term effects of concussion, take the free online training for coaches and parents: [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).

Concussion policy statements can be developed to include the league's commitment to safety, a brief description of concussion, and information on when athletes can safely return to play following a concussion (i.e., an athlete with known or suspected concussion should be kept from play until evaluated and given permission to return by a health care professional). Parents and athletes should sign the concussion policy statement at the beginning of the sports Season.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



Explain your concerns about concussion and your expectations of safe play to athletes, parents, and assistant coaches. Pass out the concussion fact sheets for athletes and for parents at the beginning of the season and again if a concussion occurs.

- Insist that safety comes first.
  - > Teach athletes safe playing techniques and encourage them to follow the rules of play. Encourage athletes to practice good sportsmanship at all times.
  - > Make sure athletes wear the right protective equipment for their activity (such as helmets, padding, shin guards, and eye and mouth guards). Protective equipment should fit properly, be well maintained, and be worn consistently and correctly.
  - > Review the athlete fact sheet with your team to help them recognize the signs and symptoms of a concussion.

Check with your youth sports league or administrator about concussion policies.

Teach athletes and parents that it's not smart to play with a concussion. Sometimes players and parents

wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don't let athletes persuade you that they're "just fine" after they have sustained any bump or blow to the head. Ask if players have ever had a concussion.

Prevent long-term problems. A repeat concussion that occurs before the brain recovers from the first—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in brain swelling, permanent brain damage, and even death. Keep athletes with known or suspected concussion from

play until they have been evaluated and given permission to return to play by a health care professional with experience in evaluating for concussion. Remind your athletes: "It's better to miss one game than the whole season."

## WHAT SHOULD A COACH DO WHEN A CONCUSSION IS SUSPECTED?

1. Remove the athlete from play. Look for the signs and symptoms of a concussion if your athlete has experienced a bump or blow to the head. Athletes who experience signs or symptoms of concussion should not be allowed to return to play. When in doubt, keep the athlete out of play.
2. Ensure that the athlete is evaluated right away by an appropriate health care professional. Do not try to judge the severity of the injury yourself. Health care professionals have a number of methods that they can use to assess the severity of concussions. As a coach, recording the following information can help health care professionals in assessing the athlete after the injury:
  - Cause of the injury and force of the hit or blow to the head
  - Any loss of consciousness (passed out/ knocked out) and if so, for how long
  - Any memory loss immediately following the injury
  - Any seizures immediately following the injury
  - Number of previous concussions (if any)

3. Inform the athlete's parents or guardians about the possible concussion and give them the fact sheet on concussion. Make sure they know that the athlete should be seen by a health care professional experienced in evaluating for concussion,
4. Allow the athlete to return to play only with permission from a health care professional with experience in evaluating for concussion. A repeat concussion that occurs before the brain recovers from the first can slow recovery or increase the likelihood of having long-term problems. Prevent long-term problems by delaying the athlete's return to the activity until the player receives appropriate medical evaluation and approval for return to play.

## REFERENCES

1. Powell JW. Cerebral concussion; causes, effects, and risks in sports. *Journal of Athletic Training* 2001;
2. Lovell MR, Collins MW, Iverson GL, Johnston KM, Bradley OP. Grade I or "ding" concussions in high school athletes. *The American Journal of Sports Medicine* 2004;
3. Institute of Medicine (US). Is soccer bad for children's heads? Summary of the IOM Workshop on Neuropsychological Consequences Of Head Impact in Youth Soccer. Washington (DC). National Academy Press; 2002.
4. Centers for Disease Control and Prevention (CDC). Sports-related recurrent brain injuries-United States, Morbidity and Mortality weekly Report 1997: Available at: [www.cdc.gov/mmwr/1/00046702.htm](http://www.cdc.gov/mmwr/1/00046702.htm).

If you think your athlete has sustained a concussion...  
take him/her out of play, and seek the advice of a health care  
Professional experienced in evaluating for concussion.



- Field inspections must be done before every game and practice. This includes checking for rocks, cans bottles, animal waste, holes, broken glass on the field and any damage to equipment.
- 2019 Little League Facility Survey
- Safety Plan for Concession Stand:
  1. All workers must wash hands before work is started.
  2. Check all supplies and equipment for spoilage and faults.
  3. ABSOLUTELY- No worker under 16 is permitted.
  4. All cleaning supplies must be kept on floor under sink.
  5. All counters washed before and after shift.
  6. No smoking at any time in or around stand.
  7. Closing procedure: unplug and clean cooled equipment; put all food away in its proper place, clean all surfaces.
  8. Any supplies running low please leave a note for stand supervisor. This includes items in the First-Aid Kit.
  9. Emergency: 911 ( Police/FireÆMT)
- All equipment must be inspected before every game and practice, including bats, balls, all catcher's equipment, batting helmets, gloves and umpire equipment.
- All equipment must be returned to (John Koskinen or Tom Morgan) The Equipment managers at the end of the Season.
- All injuries must be reported to the Safety Officer within 24 hours.

- Call Tom Morgan, 856-236-9051, with the following information; what league, team name, manager's name injured player's name, injury sustained and the outcome.

10. Little League accident form and National Union fire Insurance Company Notification of injury form must be completed for the Safety Officer. Forms are available in the Concession stand. After completed, place in Safety Officer's mailbox located in the clubhouse. Please keep a copy for your records.

- First Aid Kits will be distributed with equipment. Please refill any items used. Supplies can be obtained at the concession stand or contact the safety officer.
- Little League rules state a catcher entering the field to catch, must wear his or her full gear including helmet. No coach is permitted to catch for a pitcher. Throat protectors must be worn on all catcher's helmets.
- "Qualified Safety Plan Requirement Survey" is available in the clubhouse for anyone to review.
- As mandated by Little League all bases are break-away
- Submitted league player registration data or player Roster data and coach and manager data via the Little League Data Center at [www.Littleleague.org](http://www.Littleleague.org)
- Use double-first base to avoid collisions of fielders, runners at first base.
- ASAP Newsletters are available in the clubhouse.

- CDC Heads up concussion in youth sports brochures for coaches and parents available in Concession Stand and Clubhouse.
  - Automated external defibrillator (AED) is located in the clubhouse hallway on the wall towards your left.
  - Protective gear is encouraged for all players (cups, mouth guards and face guards on batting helmets) and all infielders should wear a protective cup.
  - Oak Valley Little League is a Non Smoking Facility.
  - Oak Valley Little League will require all volunteers to wear Photo Identification Badges; that will be distributed by the League. Badges must be worn at all times while in dugout or on playing field.
  - All Players requiring eyeglasses need to wear approved protective sport glasses.
- Safety suggestion box will be located at the concession stand for anyone who would like to suggest any safety tips.
- 
- Submit league player registration data
  - Submit Qualified safety plan registration form

2019  
OAK VALLEY LITTLE LEAGUE  
CONCESSION STAND  
SAFETY PLAN  
LEAGUE ID. 02301520

- All workers must wash hands before work is started
- Check all supplies and equipment for spoilage and faults
- **ABSOLUTELY - NO WORKER UNDER 16 IS PERMITTED IN CONCESSION STAND.**
- All cleaning supplies must be kept on floor under the sink.
- All counters washed before and after shift.
- Floors must be swept and keep cleaned.
- **NO SMOKING AT ANY TIME IN AND AROUND STAND.**
- Closing procedure: unplug and clean cooled equipment, put food away in its proper place and clean all surfaces.
- Any supplies running low please leave a note or call the stand supervisor: this includes items in the First-Aid kit.
- **EMERGENCY: 911 ( Police/Fire/EMT )**