

# Western Region AZ District 1



West Flagstaff  
Little League  
League ID# :4030108

2024 ASAP Plan

## **Safety Mission Statement**

West Flagstaff Little League is a non-profit organization run by volunteers whose mission is to provide an opportunity for our community's children to learn the game of baseball in a safe and friendly environment.

## **2024 Board of Directors**

President ~ Chris DeRosa

VP ~ Nye McCarty

Secretary/Registrar ~ Shanon Gantt

Treasurer ~ Ally Thomas

Diamond Backs Coordinator ~ April Carrillo

Social Media Coordinator ~ Kelsey Denham

Co-Field Manager/City Liaison ~ Nate Ragan & Bruce Brown

Safety Officer ~ Chad Denham

Coaching Coordinator ~ Ashley Ragan

Juniors Commissioner ~ Ben Gantt

Player Agent Minors ~ Shane Burcar

Player Agent Majors ~ Gary Kirkman

Tournament Director ~ Kevin Manny

Swag Coordinator ~ Kristen Westling

Member ~ Shanna Manny

Member ~ Jason Cureton

Member ~ Melissa Parrillo

Member ~ J Jay Barber

## Safety Officer

Chad Denham  
928-699-5153

[chad.denham0088@gmail.com](mailto:chad.denham0088@gmail.com)

## Safety Manual Distribution

- A copy of the ASAP Plan will be posted to our website at [westflagstafflittleleague.org](http://westflagstafflittleleague.org)

## Emergency Phone Numbers

Police Emergencies	~ 911
Police Non-Threat Emergency	~ 311
Police Non-Emergency	~ 928-774-1414
Fire	~ 911
Ambulance Dispatch	~ 911
Coconino County Health District	~ 928-679-7272
Animal Control	~ 928-679-4123
City of Flagstaff Parks & Rec	~ 928-774-2868

**Hospital** ~ 1200 N Beaver Street, Flagstaff, AZ 86001  
Flagstaff Medical Center ~ 928-779-3366

## Volunteer Application

- Managers, coaches, board members, and any other persons, volunteers or hired workers, who provide regular service to the league and/or have repetitive access to or contact with players or teams must fill out a volunteer application form through our website which requires a government-issued photo identification card for ID verification.
- Anyone refusing to fill out a Volunteer Application is ineligible to be a league member.
- WFL utilizes JDP through our online registration for background check records for sex offender registry data and other criminal records.

## **Abuse Awareness Training**

Beginning with the 2024 Little League® regular season, Abuse Awareness Training will be a mandatory part of the annual Little League® Volunteer Application and background check.

- All volunteers will be required to complete the training annually.
- WFLC will use the training provided by USA Baseball @ <https://usabdevelops.com/>
- Volunteers must provide a copy of the Certificate of Completion to the league in order to be considered an approved volunteer.

### **Safe Sports Act**

- “Protecting Young Victims from Sexual Abuse and SafeSport Authorization Act of 2017” became federal law in 2018
- The goal of SafeSport is to protect children from abusive situations by engaging more people in the reporting and education processes
- A volunteer now can be held legally responsible if they have firsthand knowledge and fail to report any type of Child Abuse to the correct parties
- SafeSport covers all types of Child Abuse both physical and psychological
- SafeSport prompted USA Baseball to create Pure Baseball



### **USA Baseball Pure Baseball Initiative**

- Little League® International and all local little league programs must adhere to the following requirements from the SafeSport Act:
- Reporting of Abuse involving a minor to the proper authorities
- All volunteers of a local league are now mandated reporters and could face criminal charges if the league chooses to ignore, or not report to the proper authorities, any witnessed act of child abuse, including sexual abuse, within 24 hours.
- Local leagues must be aware of the proper procedures to report any type of abuse in their state. Please reference [www.LittleLeague.org/ChildAbuse](http://www.LittleLeague.org/ChildAbuse)
- Leagues must adopt a policy that prohibits retaliation for “good faith” reports of child abuse.
- Leagues must adopt a policy that limits one-one-one contact with minors.

<https://www.littleleague.org/player-safety/child-protection-program/safesport-resources-parents/>  
<https://www.usabdevelops.com/ItemDetail?iProductCode=OCAAA&Category=ONLINE&WebsiteKey=f50aacb2-a59e-4e43-8f67-29f48a308a9e>

# **Fundamental Training**

March 8, 2024 ~ West Flagstaff Majors Field ~ 5:30 pm

## **First-Aid Training**

March 8, 2024 ~ West Flagstaff Majors Field ~ 5:30 pm

## **Field Inspections and Storage Procedures**

### **BEFORE THE SEASON STARTS**

- Familiarize yourself with the safety materials provided in the coach binder.
- Appoint a Safety Liaison for your team. They need to be at all the games and have a cell phone. It can be the Manager, Coach, or parent as long as they have completed a volunteer application through the website.

### **PRIOR TO EACH GAME**

- Complete a field safety checklist – a copy has been provided in the coach binder. Report any problems to the Field Manager.
- Check the team equipment for any problems. Report any equipment problems to the Equipment Manager.
- Check the contents in your team's first aid kit. Contact the League Safety Officer for any items that need to be replaced.

### **STORAGE SHED**

The following applies to the entire storage shed used by the League and applies to anyone who has been issued a key/combo to use those sheds.

- All individuals are aware of their responsibility for the orderly and safe storage of rakes, shovels, and bases.
- Before you use any equipment located in the shed (lights, scoreboards, etc.) please read the written operating procedures for that equipment.
- All chemicals or organic materials stored in the sheds shall be properly marked and labeled as to its contents.
- Any witnessed "loose" chemicals or organic materials within these sheds should be cleaned up and disposed of as soon as possible to prevent accidental poisoning and reported to League Safety Officer.

# Facility Survey

The Annual Little League® Facility Survey will be submitted in the Data Center.

## Concession Stand Safety

### **Wash your hands regularly:**

- Use soap and warm water.
- Rub your hands vigorously as you wash them.
- Wash all surfaces including the backs of hands wrists, between fingers and under fingernails.
- Rinse hands well.
- Dry hands well.
- Dry hands with paper towels.
- Turn off water using paper towel, instead of your bare hands.

### **Wash your hands in this fashion before you begin work and especially after performing any of these activities:**

- After touching bare human body parts other than clean hands and clean exposed portions of arms.
- After using restrooms.
- After caring for or handling animals.
- After coughing, sneezing, using a handkerchief or disposable tissue.
- After touching soiled surfaces.
- After drinking, using tobacco, or eating.
- During food preparation.
- When switching from raw to ready to eat foods.
- After engaging in activities that contaminate hands.

### **Basic Rules:**

1. Menu... smaller is better. No salads cut up fruit or vegetables, no food prepared at home.
2. Cook food thoroughly. Use a food thermometer. Keep hotdogs and burgers at 41 degrees when cold and cook to 155 degrees or above when hot.
3. Rapidly reheat foods to 165 degrees. Slow cooking devices may activate bacteria and never reach killing temperatures.
4. All foods that require refrigeration must be cooled to 41 degrees as quickly as possible and held there until ready to use. To cool foods quickly, use the ice water bath (60% ice and 40% water), stirring the product frequently, or place their food in shallow pans no more than 4 inches in depth and refrigerate. Pans should not be stored one a

top of the other and lids should be off or afar until the food is completely cooled. Check the temperature periodically to see if the food is cooling properly. **DO NOT LEAVE FOOD OUT AT ALL!!**

5. **FREQUENT AND THOROUGH HANDWASHING IS REQUIRED.**

6. Only healthy people should prepare and serve food. Anyone with any symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, cough etc.) or who has open sores or infected cuts on the hands should not be allowed in the food concession area. Workers' clothes should be clean, and they should not smoke in the concession area. Hair restraints are recommended.

7. Food handling: Avoid hand contact with raw food, ready-to-eat foods and food contact surfaces. Use a utensil and/or glove.

8. Use disposable utensils for food service. Keep your hands away from food contact surfaces and never reuse disposable dishware. Ideally utensils should be washed in a four-step method: (1) Hot soapy water, (2) Rinsing in clean water, (3) Chemical or heat sanitizing, (4) Air drying.

9. Ice that is used to cool cans/bottles should not be used in cup beverages. And should be stored separately. Use scoop to dispense ice, never use hands.

10. Wiping cloths should be rinsed and stored in a bucket sanitizer. (1-gallon water and ½ tsp. chlorine bleach. Change the solution every 2 hours.

11. Insect control and waste. Keep foods covered to protect from insects. Store pesticides away from food. Place garbage and paper waste in a refuse container with a lid that fits tightly. Dispose of all water in the restrooms, do not pour outside. All water that is used should be potable from an approved source.

12. Keep food stored off the floor at least 6 inches. After your event is finished, clean the concession area and discard any unusable food. Do not save food for reheating.

## **THE TOP SIX CAUSES FOR ILLNESS**

1. Inadequate cooling and cold holding.
2. Preparing food too far in advance of service.
3. Poor personal hygiene and infected personnel.
4. Inadequate reheating.
5. Inadequate hot holding.
6. Contaminated raw foods and ingredients.

## **Inspection of Equipment**

- WFLA requires regular inspection of playing equipment.
- Equipment bags are inspected and remade prior to a new season starting.
- Unsafe equipment should not be given in team equipment bags.
- Managers, Coaches and Umpires are required to inspect equipment prior to each use.
- Bad equipment will be removed and destroyed.

# **Accident Reporting Procedure**

**What to Report:** An incident that causes a Player, Manager, Coach or Umpire to receive medical treatment or first aid must be reported to The Safety Officer.

**When to Report:** All such incidents described above must be reported to The Safety Officer within 24 to 48 hours of the incident.

## **The Safety Officer is:**

Chad Denham ~ 928-699-5153 ~ chad.denham0088@gmail.com

**How to Make a Report:** Reporting incidents can come in a variety of forms. Most typically, they are telephone conversations. At a minimum, the following information is needed.

1. The name and address of the injured person.
2. The date, time, and location of the incident.
3. As detailed of a description of the incident as possible.
4. The preliminary estimation of the extent of the injury.
5. The name and phone number of the person making the report.
6. Names and phone number of any witnesses.

In your safety packet you will find the injury report forms. If your Safety Liaison is there, he/she can assist you in getting the front of the form filled out. Then a call is to be made to The Safety Officer reporting the incident within 48 hours. Little League insurance is a supplemental insurance to the insured's own insurance. There is a small deductible.

**How to Replace the Injury Report Forms:** The forms can be replaced by The Safety Officer or downloaded from [www.leagueleague.org](http://www.leagueleague.org) found under forms and publications.

## **First Aid Kits**

Each team will be provided with a league issued first aid kit. Each kit should include the following.

- |   |                        |
|---|------------------------|
| (10) Adhesive sterile bandage               | (3) Sting relief wipes |
| (2) Extra-large adhesive sterile bandage    | (1) Tweezers           |
| (2) Non-adherent pads 2 x 3                 |                        |
| (2) Gauze pad 12-ply 3 x 3 sterile          |                        |
| (1) Adhesive tape                           |                        |
| (2) Instant cold compress 4 x 4             |                        |
| (3) Triple antibiotic ointment              |                        |
| (3) Antiseptic towelette 1/8 oz. Burn Cream |                        |

## Communicable Disease Procedures

- Bleeding must be stopped, the open wound covered, and the uniform changed if there is blood on it before the athlete may continue.
- Routinely use gloves to prevent mucous membrane exposure when contact with blood or other body fluids is anticipated (Provided in the first aid kit).
- Immediately wash hands and other skin surfaces if contaminated with blood.
- Clean all blood contaminated surfaces and equipment.
- Managers, Coaches, and Volunteers with open wounds should refrain from all direct contact until the condition is resolved.
- Follow accepted guidelines in the immediate control of bleeding and disposal when handling bloody dressings, mouth guards and other articles containing body fluids.

## Lightning Facts

### **Consider the following facts:**

- The average lightning stroke is 6-8 miles long.
- The average thunderstorm is 6-10 miles wide and travels about 25 miles an hour.
- On the average, thunder can only be heard over 3-4 miles, depending on humidity, terrain, and other factors. This means that by the time you hear the thunder, you are already in the risk area for lightning strikes.

**Rule of Thumb:** The ultimate truth about lightning is that it is unpredictable and cannot be prevented. Therefore, a manager or coach who feels threatened should contact the head umpire and recommend stopping play and clearing the field. In our league the umpire makes the decision as to whether play is stopped. Once play is stopped, take the kids to safety until play resumes or game is called.

**Where to Go?** No place is safe from lightning threat, but some places are safer than others. Constructed buildings are usually the safest. Most people will find shelter in a fully enclosed metal vehicle with the windows rolled up. If you are stranded in an open area, put your feet together, crouch down and put your hands over your ears to prevent eardrum damage.

**Where not to go?** Avoid high places and open fields, isolated trees, unprotected gazebos, rain or picnic shelters, dugouts, flagpoles, light poles, bleachers, metal fences and water.

### **First Aid for a Lightning Victim:**

- Call 911 immediately.
- Typically, the lightning victim has similar symptoms as that of someone having a heart attack. Consider: will moving cause anymore injury. If the victim is in a

high-risk area, determine if movement is necessary. Lightning does strike twice in the same place. If you are not at risk, and moving is a viable option, you should move the victim.

- If the victim is not breathing, start mouth to mouth resuscitation. If it is decided to move the victim, give a few quick breaths prior to moving the victim.
- Determine if the victim has a pulse. If no pulse is detected, start cardiac compressions as well.

NOTE: CPR should only be administered by a person knowledgeable and trained in the technique.

*Remember: Safety is everyone's job. Prevention is the key to reducing accidents to a minimum. Report all hazardous conditions to the Safety Officer or another Board Member immediately. Do not play on an unsafe field or with unsafe equipment. Check the teams' equipment prior to each use.*

## Hydration

*Managers are required to bring water to each practice and game.  
Players are encouraged to bring bottled water or sports drinks.*

### **Tips to Prevent Heat Illness:**

- Know that once you are thirsty you are already dehydrated.
- Drink before you become thirsty.
- Drink plenty of liquids like water, or sports drinks every 15 minutes.
- Water seems to be the preferred beverage. Water has many critical functions in the body that are important for performance they include, carrying oxygen and nutrients to exercising muscles.
- Do not drink beverages with caffeine before practice or games. Caffeine can increase the rate of dehydration.
- Do not exercise vigorously during the hottest time of the day.
- Practice in the morning and during the latter part of the evening.
- Wear light color loose cloths.
- Use sunscreen to prevent sunburn.
- If you begin to feel faint or dizzy stop your activity and cool off by sitting in the shade, air-conditioned car or use a wet rag to cool you off.

### **How is it treated?**

Emergency medical treatment is necessary. If you think someone has heatstroke, call 911 or a doctor immediately. In the meantime, give first aid as follows:

- Move the person to a shady area.
- Cover the person with a wet sheet and keep the sheet wet for cooling from evaporation.
- Fan the person with paper or an electric fan (preferably not cold air).

- Sponge down the body, especially the head, with cool water.
- Continue giving first aid until the body feels cool to the touch.
- If the person is conscious, let them sip water, fruit juice, or a soft drink.

## **Concussions**

All 50 states have laws specific to the management of concussions and head injuries. Some states require not just Leagues but DA's, ADA's and umpires to undergo annual training.

- Some states may affect only school-based activities, but many also address any group using school facilities or grounds for athletic purposes.
  - Little League® has developed a concussion overview page for each state that will be similar to the Child Abuse page.
  - The CDC (Centers for Disease Control and Prevention) website is a great tool for leagues to encourage their managers/coaches, parents, and players to review concussion information • [www.cdc.gov/concussion/HeadsUp/youth.html](http://www.cdc.gov/concussion/HeadsUp/youth.html)
- Concussions
- DA's must also be aware of their state's respective laws, especially during any Special Games events or International Tournament games being hosted by the District.
  - Failure to adhere to these laws could expose the District and/or host to unwanted liability and penalties • Some states require that the participant and a parent/guardian must sign and acknowledge that they understand the risks of concussions before they can participate
  - Most states also require immediate removal from competition if a person has sustained a concussion and that they cannot return until being released in writing by a medical professional.

### **West Flagstaff Little League Concussion Prevention, Treatment and Management Policy**

The Legislature enacted a law which requires youth sports organizations to adopt a policy concerning the prevention and treatment of injuries to the head which may occur during a youth's participation in competitive sports, including, without limitation, a concussion of the brain.

A concussion is a brain injury that results from a bump, blow or jolt to the head or body which causes the brain to move rapidly in the skull and which disrupts normal brain function. The Centers for Disease Control and Prevention of the United States Department of Health and Human Services estimates that as many as 3.8 million concussions occur each year in the United States which are related to participation in sports and other recreational activities.

Athletes who continue to participate in an athletic activity while suffering from a concussion or suffering from the symptoms of an injury to the head are at greater risk for catastrophic injury to the brain or even death. Ensuring that a Little League player who sustains or is suspected of sustaining a concussion or other injury to the head receives appropriate medical care before returning to baseball activity will significantly reduce the child's risk of sustaining greater injury in the future.

THEREFORE, **West Flagstaff Little League** hereby adopts the following policy for purposes of prevention, treatment, and management of injuries to the head that may occur during a player's participation in the Little League® program, including, without limitation, a concussion of the brain:

1. Prior to a team's first practice each season, every manager, coach, and adult assistant shall:
  - a) Familiarize themselves with the CDC publication "Heads Up – Concussion in Youth Sports – A Fact Sheet for Coaches". This publication will be provided to all such individuals by the League Safety Officer or other Board members; and,
  - b) Complete the CDC on-line training course at:  
<https://www.train.org/cdctrain/course/1089818/>  
A copy of the Certificate of Completion for each of the above individuals **MUST** be submitted to the League Safety Officer.
  
2. If a Little League® player sustains, or is suspected of sustaining, an injury to the head while participating in any Little League® game or event, the player must:
  - a) Be immediately removed from the game or event; and
  - b) May only return to Little League® activity if the parent or legal guardian of the player provides a signed statement from a provider of health care indicating that the youth is medically cleared for Little League® participation and the date on which the player may return to participation.
  
3. The Little League® player and his or her parent or legal guardian must accept online during the registration process, the statement acknowledging that they have read and understand the terms and conditions of the policy and agree to be bound by the policy.

## **Enforcement of Little League® Rules**

- WFLC operates following all rules & regulations as outlined within the Little League® Baseball Rulebook.
- WFLC has adopted its own Local Rules referred to as Bylaws.

## **Player / Coach Data**

- Player, Manager, Coach and Volunteer information is automatically uploaded through our Sports Connect registration website directly to Little League® International.

## **Answer New Survey Questions**

- The survey will be answered through the Little League Data Center.