

TULSA LITTLE LEAGUE



ASAP PLAN 2024

**Tulsa National LL
84-3611222**

SAFETY MANUAL

**Distribution:
Oklahoma DA, June 14, 2024
Little League International June 14, 2024
Managers and Coaches March 15 – April 8, 2024
Also found on
www.tulsanats.com**

**Stephen Skocik
President**

**Cali McMickle
Safety Officer**

Dear Managers, Coaches, Volunteers and Parents:

It's that time of year again; the crack of the bat, the roar of the crowd and the boys and girls of summer are playing again. The Tulsa National LL board of directors would like to thank everyone for helping make this league successful. Our organization continues to work hard to improve the league, keep costs at a minimum, promote safety and make this a positive baseball experience for your child.

For all rule changes, needed forms, schedules and standings, please check out our [WEBSITE](#).

Safety is always "Job One" with Tulsa National LL. Tulsa National LL has completed a facility survey that has been submitted to Little League International. Please read this entire Safety Manual carefully. There is a great deal of important information contained in this manual and with your help, we can make our league Safe and Fun experience for everyone involved.

As you play with Little League Baseball, please keep in mind that all rules are to be followed and we expect you to enforce the rules. Rules are in place to protect your players and to give them a fuller baseball experience. Let your players do as much as possible, including warming up pitchers. Review our local rules often during the season – Little League specific rules and safety procedures are highlighted in the local rules.

IMPORTANT DATES TO REMEMBER

Mandatory Coaches Meeting – March 15 to April 8th, see our direct emails for scheduling by division.

Mandatory Coaches Training (including First Aid Training) March 15 to April 8th.

Umpire Safety Training

Umpires will be trained on Little League and local laws and guidelines regarding safety. Tulsa National local rules cover the umpires' responsibility for safety of the players and game. Each baseball season (2 times a year) a safety training session is held prior to the start of the first game. Umpire training is on April 8th.

Team Managers or designated representative must attend all league applicable meetings.

REMEMBER, safety begins and ends with everyone in the league. Walk your field before every game and should you spot a safety hazard, report it immediately to a Board Member, your player agent, or your coach. See our hazard checklist in the appendix. Always use common sense and listen to the children. Report all accidents immediately to the Safety Officer, no matter how minor it may seem. Before every game, it is your responsibility as coaches and parents to check your players' equipment and replace as necessary. Only with your help can we continue to provide the wonderful baseball experience for all the kids. We also encourage all players to wear protective gear – male players should all wear a protective cup, all players should use mouth guards and face guards.

IMPORTANT PHONE NUMBERS

FIELD PHONE LOCATION

Major League SNO Concession Stand

A phone is always available in the concession stand if for some reason you don't have one. The concession is open for all games and Umpires all have phones.

EMERGENCY NUMBER

911

Tulsa Police Non-Emergency

918-596-9222

Tulsa County Sheriff's Office

918-596-5601

TULSA LITTLE LEAGUE BASEBALL

Executive Board of Directors

President

Skocik, Stephen

918.264.8359

League Secretary

Brown, Adam

League Treasurer

Phillippi, Cheyanne

Safety Officer

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League Player Agents

Jennifer Schreiner

Andrew Stephens

INTRODUCTION

ASAP - What is It? In 1995, ASAP (A Safety Awareness Program) was introduced with the goal of re-emphasizing the position of Safety Officer “to create awareness, through education and information, of the opportunities to provide a safer environment for kids and all participants of Little League Baseball”. This manual is offered as a tool to place some important information at manager’s and coach’s fingertips. Each volunteer will receive a copy of this manual.

SAFETY CODE

Dedicated to Injury Prevention

- Arrangement should be made in advance of all games and practices for emergency medical services
- First-aid kits are available from the concession stand. Ice is also provided. Please be cognizant of the contents of this kit and supplement and replenish it as needed. A larger and more comprehensive first aid kit is located in the concession stand.
- No games or practices should be held when weather or field conditions are not good, particularly when lighting is inadequate. Play area should be inspected frequently for damage, glass and foreign objects. Tulsa National LL communicates using SportsConnect at www.tulsanats.com, facility / fields status at www.okdiamonds.org, facebook and our website for news, alerts and warnings regarding games and adverse weather conditions. Lightening detectors are installed by the County at Memorial High School adjacent to our fields. These detectors are followed by Tulsa National LL. Games will cease immediately upon the detection of lightening and must clear for 30 minutes prior to the resumption of playing. Tulsa National LL members and umpires also locally set weather apps that have lightening strike distances.
- Only players, managers, coaches and umpires are permitted on the playing field or in the dugout during games and practices.
- It is the responsibility of the team Manager, Coaches and Umpire to walk the field and ensure it is safe for player. Primary responsibility is to the umpire and team Managers. This must be done prior to each practice and game. It is the responsibility of these members to resolve the issue or report this to the **Safety Officer or other Board Member immediately**.
- Responsibility for keeping bats and loose equipment off the field of play should be that of a player assigned for this purpose or the team’s manager and coaches.
- During practice and games, all players should be alert and watching the batter on each pitch.
- During a warm-up, players should be spaced so that no one is endangered by wild throws or missed catches.
- All pre-game warm-ups should be performed within the confines of the field and not within areas that are frequented by and thus endanger spectators.
- Batters must wear Little League approved protective helmets during batting practices and games.
- Catcher must wear helmet style catcher’s helmet, mask with dangling throat protector, shin guards, long model chest protector and protective cup with athletic supporter at all times for all practices and games. All male players will wear a protective cup and athletic supporter/sliding shorts during all practices and games. **NO EXCEPTIONS**.
- Except when a runner is returning to a base, head first slides are not permitted.
- Parents of players who wear glasses should be encouraged to provide “safety glasses”.
- Players must not wear watches, rings, pins or metallic items during games or practices. Emergency medical ID may be worn. All coaches must be aware of the content of any emergency medical ID worn by any player.
- Catchers must wear catcher’s helmet and mask with dangling throat protector when warming up pitchers. This applies between innings and in the bullpen during practices and games.

Whenever possible, make sure someone at your practice or game has a cellular phone (especially on those fields where no public phone is available) just in case of emergency

IMPORTANT DO’S AND DON’T’S

DO...

- Reassure and aid children who are injured, frightened or lost.
- Provide or assist in obtaining medical attention for those who require it.
- Know your limitations.
- Ask for help if you’re not sure of the proper procedures (i.e., CPR, etc.).
- Carry the league provided first-aid kit to games and practices.
- LOOK for signs of injury (blood, bruising, deformity of the joint, etc.).
- LISTEN to the injured to describe what happened and what hurts if conscious. Before questioning you may have to calm and soothe an exited child.
- FEEL gently and carefully the injured areas for signs of swelling or grating of bone.

DON'T...

- Administer any medications.
- Provide any food or beverages (other than water).
- Hesitate to give aid when needed.
- Transport injured individuals except in extreme emergencies.
- Leave an unattended child at a practice or game.
- Hesitate to report and present a potential safety hazard to the Safety Officer immediately.

Safety is everyone's job. Prevention is the key to reducing accidents. Report all hazardous conditions to the Safety Officer or other Board Member immediately. Do not play with unsafe playing equipment. Be sure your players are fully equipped at all times, especially catchers and batters. Check your team's equipment often. Contact the Equipment Manager for any repairs or replacements.

Failure to follow safety procedures and the rules of Tulsa National LL, could result in expulsion from the Park and revocation of your privilege to volunteer or participate in Tulsa National LL activities.

ACCIDENT REPORTING PROCEDURES

What to report - An accident that causes any player, manager, coach, umpire, volunteer or spectator to receive medical treatment and/or first-aid must be reported to the Safety Officer via tulsanatsbb@gmail.com. This includes even passive treatments such as the evaluation and diagnosis of the extent of the injury or period of rest.

When to report - All such incidents described above must be reported to the Safety Officer within 48 hours of the incident.

UMPIRE REPORT - All such incidents must be reported by the umpire in assignr.com with 24 hours of the incident. Our umpire system tracks injury reports on each game result report that is mandatory.

How to make a report - Reporting incidents can come in a variety of forms. Most typically they are telephone conversations. At minimum, the following information must be provided:

- The name and number of the individual involved.
- The date, time and location of the incident.
- As detailed a description of the incident as possible.
- The preliminary estimation of the extent of the injuries.
- The name and phone number of the person reporting the incident.

Safety Officer's Responsibilities - Within 48 hours after receiving the incident report, the Safety Officer will contact the injured party or the party's parents and:

1. Verify the information received,
2. Obtain any other information deemed necessary,
3. Check on the status of the injured party; and
4. In the event that the injured party required other medical treatment (i.e., emergency room visit, doctor's visit, etc.) will advise the parent or guardian of the Tulsa National LL insurance coverages and the provisions for submitting claims.

If the injuries are more than minor in nature, the Safety Officer shall periodically call the injured party in order to:

1. Check on the status of the injuries; and
2. To check if any other assistance is necessary in areas such as submission of insurance forms, etc. until such time as the incident is considered "closed" (no further claims are expected and/or the individual is participating in the league again).

All forms to file any claims are found on the [Little League International website](#)

9-1-1 EMERGENCY NUMBER

The most important help that you can provide to a victim who is seriously injured is to call for professional medical help. Make the call quickly, preferably from a cell phone near the injured person. If this is not possible, send someone else to make the call from a nearby telephone. Make sure that if you send someone to call for help that they follow these steps:

1. First dial 9-1-1
2. Give the dispatcher the necessary information. Answer any questions that he/she might ask. Most dispatchers will ask:
 - The exact location or address of the emergency. Include the name of the town, nearby intersections, landmarks, etc. The address for Tulsa Little League Baseball fields are:
LaFortune Baseball Park
5989 South Yale
Tulsa, OK 74135
 - The telephone number from which the call is being made.
 - The caller's name.
 - What happened – for example, a baseball related injury, bicycle accident, car/pedestrian accident, fire, fall, etc.
 - How many people are involved.
 - The condition of the injured person – for example, unconsciousness, chest pains or severe bleeding.
 - What help (first aid) is being given.
 - Do not hang up until the dispatcher hangs up. The EMS dispatcher may be able to tell you how best to care for the victim.
3. Continue to care for the victim until professional help arrives.
4. Appoint someone to go to the street and look for the ambulance and/or fire engine so that they can flag them down if necessary. This will save valuable time. Remember, every minute counts.

When to call –

If the injured person is unconscious, call 9-1-1 immediately. Sometimes a conscious victim will tell you not to call an ambulance and you may not be sure what to do. Call 9-1-1 anyway and request paramedics if the victim:

- Is or becomes unconscious.
- Has trouble breathing or is breathing in a strange way.
- Has chest pain or pressure.
- Is bleeding severely.
- Has pressure or pain in the abdomen that does not go away.
- Is vomiting or passing blood.
- Has seizures, a severe headache or slurred speech.
- Appears to have been poisoned.
- Has injuries to the head, neck or back.
- Has possible broken bones.

If you have any doubt at all, call 9-1-1 and request paramedics.

When treating an injury, always remember:

Protection
Rest
Ice
Compression
Elevation
Support

**TULSA LITTLE LEAGUE BASEBALL
EMERGENCY SAFETY PROCEDURE**

Be sure to have your original medical release forms with the team at all times. [Medical Release Form](#) is available at Little League International web site.

In case of a medical emergency:

1. Administer first-aid and have someone call 911 immediately if an ambulance is necessary (i.e., severe neck or head injury – error on the side of caution). A first-aid kit is kept in the equipment shed next to the fields and also in the concession stand. The league office also has a first aid kit on field 7.
2. Notify the parents immediately if they are not at the scene.
3. Notify the Tulsa National LL Officer within 24 hours (918-264-8359).
4. Fill out a Tulsa Little League Incident Report Form and hand deliver within 24 hours. Copies of this form are included with this manual.

5. Talk to your team about the situation if it involves them. Often players are upset and worried when another player is injured. They need to feel safe and understand what happened.
6. Talk to anyone in Tulsa National LL who you feel will be helpful (i.e., League Safety Office, President, Vice president of your league, etc.).
7. Tulsa Little League Baseball accident insurance is supplemental to your player's own insurance. Claims must be filed with the League Safety Officer. This should be done as soon as possible.

SAFETY THROUGH KNOWLEDGE

WHAT TO... HOW TO... WHEN TO...

HYDRATION

Good nutrition is important for children. Sometimes, the most important nutrient children need is water – especially when they're physically active. 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 are 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 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 must be encouraged to drink fluids even when they don't feel thirsty.

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

During any activity, water is an excellent fluid to keep the body well hydrated. It's economical too! Offering flavored fluids like sports drinks or fruit juice can help encourage children to drink. Sports 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, the sports drink should be diluted with water. Fruit juice should also be diluted (1 cup of juice to 1 cup of 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, colas) 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.

SEASONAL EMERGENCIES

HEAT EXHAUSTION

Symptoms may include: fatigue; irritability; headache; faintness; weak and rapid pulse; shallow breathing; cold and clammy skin and profuse sweating.

TREATMENT:

- Instruct the victim to lie down in a cool, shaded area or an air-conditioned room and elevate their feet.
- Massage legs toward the heart.
- If the victim is conscious, give cool water or electrolyte solution every 15 minutes.
- Use caution when letting the victim first sit up, even after they feel like they have recovered.

SUNSTROKE (HEAT STROKE)

Symptoms may include: extremely high body temperature (106 degrees or higher); hot, red, dry skin; absence of sweating; rapid pulse; convulsions; or unconsciousness.

TREATMENT:

1. Call 911 immediately.
2. Lower body temperature quickly by placing victim in partially filled tub of cool, not cold, water (avoid over-cooling). Briskly sponge victim's body until their body temperature is reduced then towel dry. If a tub is not available, wrap the victim in cool, moist wet sheets or towels in a well ventilated area or use fans and air-conditioners until their body temperature is reduced.
3. DO NOT give stimulating beverages such as coffee, tea or soda.

SUNBURN

If the victim has been sunburned:

- Treat as you would any major burn by covering with cool, damp cloths and keeping the area clean.
- Treat for shock if necessary.
- Cool the victim as rapidly as possible by applying cool, damp cloths or immersing in cool, not cold water.
- Give the victim lots of fluids to drink (no caffeinated beverages).
- Get professional medical help immediately for severe cases.

ASTHMA AND ALLERGIES

Many children suffer from asthma and/or allergies. Allergy symptoms can manifest themselves to look like the child has a cold or the flu while children with asthma usually have a difficult time breathing when they become active. Allergies are usually treated with prescription medication. If a child is allergic to insect stings/bites or certain types of foods, you must know about it because allergic reactions can become life threatening. Encourage all parents to fill out the medical history forms (included in the appendix of this safety manual). Study their comments and know which children on your team need to be watched. Likewise, a child with asthma needs to be watched. If a child starts to have an asthma attack, have him stop playing immediately and calm him down until he/she is able to breath normally. If the asthma attack persists and is not better after using their prescribed inhaler, call 911 and request emergency service.

INSECT STINGS & BITES

Symptoms of an allergic reaction to an insect sting or bite may include the following: nausea; severe swelling; breathing difficulties; bluish face, lips and fingernails; shock and/or unconsciousness. In highly sensitive persons, do not wait for allergic symptoms to appear. Get professional medical help immediately. If breathing difficulties occur, start rescue breathing techniques; if the pulse is absent, begin CPR.

TREATMENT:

- For mild or moderate symptom, wash with soap and cold water.
- Remove stinger or venom sac by gently scraping with fingernail or business card. Do not remove the stinger with tweezers as more toxins could be released into the victim's body.
- For multiple stings, soak affected area in cool water. If possible, add one tablespoon of baking soda per quart of water if possible.
- If the victim has gone into shock, treat accordingly (see section "Care for Shock").

INJURIES AND OTHER MEDICAL EMERGENCIES

CARING FOR SHOCK

Shock is likely to develop in any serious injury or illness. Signals of shock include: restlessness or irritability; altered consciousness; pale, cool, moist skin; rapid breathing and rapid pulse.

TREATMENT:

- Have the victim lie down. Helping the victim rest comfortably is important because pain can intensify the body's stress and accelerate the progression of shock.
- Control any external bleeding.
- Help the victim maintain normal body temperature. If the victim is cool, try to cover him/her to avoid chilling.
- Try to reassure the victim.
- Elevate the legs about 12 inches unless you suspect head, neck or back injuries or possible broken bones involving the hips or legs. If you are unsure of the victim's condition, leave them lying flat.
- Do not give the victim anything to eat or drink, even though they are likely to be thirsty.
- Call 9-1-1 immediately. Shock can't be managed effectively by first aid alone. A victim of shock requires advanced medical care as soon as possible.

MUSCLE, BONE OR JOINT INJURIES

Symptoms of serious muscle, bone or joint injuries include:
Always suspect a serious injury when the following signals are present:

- Significant deformity
- Bruising and swelling
- Inability to use the affected part normally
- Bone fragments sticking out of a wound
- Victim feels bones grating; victim felt or heard a snap or pop at the time of the injury
- The injured area is cold and numb

- Cause of the injury suggests that the injury may be severe.
- If any of these conditions exist, call 911 immediately and administer care to the victim until the paramedics arrive.

TREATMENT:

1. If ankle or knee is affected, do not allow the victim to walk. Loosen or remove shoe and elevate the leg.
2. Protect skin with a thin towel or cloth. Then apply cold, wet compresses or cold packs to the affected area. Never pack a joint in ice or immerse in icy water.
3. If a twisted ankle, do not remove the shoe – this will limit the swelling.
4. Consult medical assistance for further treatment if necessary.

CONCUSSION

Concussions are defined as any blow to the head. They can be fatal if the proper precautions are not take.

1. If it is a player, remove that player from the game immediately.
2. See that the victim gets adequate rest.
3. Note any symptoms and see if they change within a short period of time.
4. If the victim is a child, tell the parents about the injury and have them monitor the child after the game.
5. Urge parents to take the child to a doctor for examination.
6. If the victim is unconscious after the blow to the head, diagnose head and neck injury. DO NOT MOVE the victim. Call 9-1-1 immediately. (See section “Head and Spine Injuries)

HEAD AND SPINE INJURIES

When to suspect head and spine injuries:

- A fall from a height greater than the victim’s height.
- Any bicycle, skateboarding , etc. mishap.
- A person found unconscious for unknown reasons.
- Any injury involving severe blunt force to the head or trunk, such as from a bat of line drive baseball.
- Any injury that penetrates the head or trunk, such as an impalement.
- A motor vehicle crash involving a driver or passengers not wearing safety belts.
- Any person thrown from a motor vehicle.
- Any person struck by a motor vehicle.
- Any injury in which a victim’s helmet is broken, including motorcycle helmet, batting helmet, industrial helmet, etc.
- Any incident involving a lightning strike.

Signals of Head and Spine Injuries:

- Changes in consciousness.
- Severe pain or pressure in the head, neck or back.
- Tingling or loss of sensation in the hands, fingers, feet and toes.
- Partial or complete loss of movement of any body part.
- Unusual bumps or depressions on the head or over the spine.
- Blood or other fluids in the ears or nose.
- Heavy external bleeding of the head, neck or back.
- Seizures.
- Impaired breathing or vision as a result of the injury.
- Nausea or vomiting.
- Persistent headache.
- Loss of balance.
- Bruising of the head, especially around the eyes and also behind the ears.

General Care for Head and Spine Injuries:

- Call 9-1-1 immediately.
- Minimize movement of the head and spine.
- Maintain an open airway for the victim.
- Check consciousness and breathing. If the victim is not breathing, begin rescue breathing. If the victim has no pulse, begin CPR.

- Control any external bleeding.
- Keep the victim from getting chilled or overheated until paramedics arrive.

NOSE BLEED

To control a nose bleed, have the victim lean forward and pinch the nostrils together until the bleeding stops. If the bleeding does not stop after a short time, seek professional medical help.

BLEEDING INSIDE OR OUTSIDE OF THE MOUTH

To control bleeding inside the cheek, place folded dressings inside the mouth against the wound. To control bleeding on the outside, use dressings to apply pressure directly to the wound and bandage so as not to restrict.

EMERGENCY TREATMENT OF DENTAL INJURIES

AVULSION (Entire Tooth Knocked Out)

If a tooth is knocked out, place a sterile dressing directly in the space left by the tooth. Tell the victim to "bite down".

Dentists can successfully replant a knocked out tooth if they can do so quickly and if the tooth has been cared for properly.

- Avoid additional trauma to the tooth while handling. **Do not** handle the tooth by the root. **Do not** brush or scrub the tooth. **Do not** sterilize the tooth.
- If debris is on the tooth, gently rinse with water.
- If possible, re-implant and stabilize by biting down gently on a towel or handkerchief. Do this only if the player is alert and conscious.
- If unable to re-implant:
 - Best - Place tooth in Hank's Balance Saline Solution, i.e., "Save-A-Tooth".
 - 2nd Best - Place tooth in milk. Cold whole milk is best, followed by cold 2% milk.
 - 3rd Best - Wrap tooth in saline soaked gauze.
 - 4th Best - Place tooth under victim's tongue. Do only if the player is alert and conscious.
 - 5th Best - Place tooth in a cup of water.
- Time is very important. Re-implantation within 30 minutes has the highest degree of success rate. **TRANSPORT IMMEDIATELY TO THE DENTIST.**

LUXATION (Tooth in socket, but in wrong position) – THREE POSITIONS

EXTRUDED TOOTH - Upper tooth hangs down and/or lower teeth raised up.

1. Reposition tooth in socket using firm finger pressure.
2. Stabilize tooth by gently biting on towel or handkerchief.
3. **TRANSPORT IMMEDIATELY TO DENTIST.**

LATERAL DISPLACEMENT - Tooth pushed back or pulled forward.

1. Try to reposition the tooth using finger pressure.
2. Victim may require local anesthetic to reposition tooth; if so, stabilize tooth by gently biting on towel or handkerchief.
3. **TRANSPORT IMMEDIATELY TO DENTIST.**

INTRUDED TOOTH - Tooth pushed into gums - looks short.

1. Do nothing - avoid any repositioning of the tooth.
2. **TRANSPORT IMMEDIATELY TO DENTIST.**

FRACTURE (Broken Tooth)

1. If the tooth is totally broken in half, save the broken portion and bring it to the dental office as described under Avulsion, Item 4. Stabilize the portion of the tooth left in the mouth by gently biting on a towel or handkerchief to control bleeding.
2. Should extreme pain occur, limit contact with other teeth, air or tongue. Pulp nerve may be exposed, which is extremely painful to the player.
3. Save all fragments of the fractured tooth as described under Avulsion, Item 4.
4. **TRANSPORT IMMEDIATELY TO DENTIST.**

PENETRATING OBJECTS

If an object, such a piece of glass, metal or wood is impaled in a wound:

1. Do not remove it. This could potentially cause more harm than good. Penetrating object often hit other organs and by removing the object you risk the wound bleeding out.
2. Place several dressings surrounding the object to keep it from moving around and causing more damage.

3. If the object is penetrating one eye, cover the good eye with a cloth; both eyes move together and if the good eye is looking around, so will the injured eye which may cause further damage.
4. If the object penetrates the chest and the victim complains of discomfort or pressure, quickly loosen the bandage on one side and reseal the wound. Watch carefully for recurrence. Repeat this procedure if necessary. Should you hear a "sucking" sound, try to cover the wound with a piece of plastic wrap to seal the wound being careful not to move the object while sealing the wound with the plastic wrap.
5. Treat for shock as necessary (see "Care for Shock" section).
6. Call 9-1-1 immediately.

TRANSPORTING INJURED PERSON

If injury involves the neck or back, DO NOT move the victim unless absolutely necessary. Wait for the paramedics. If the victim must be pulled to safety, move the body lengthwise, not sideways. If possible, slide a coat or blanket under the victim:

- a) Carefully turn victim toward you and slip a half-rolled blanket under victim's back.
- b) Turn the victim on their side over the blanket, unroll the blanket and return the victim onto his back.
- c) Drag victim head first, keeping the back and neck as straight as possible.

If the patient must be lifted, support each part of the body. Position a person at the victim's head to provide additional stability. Use a board, shutter, tabletop or other firm surface to keep the body as level as possible.

COMMUNICABLE DISEASE PROCEDURES

While risk of one player infecting another with HIV/AIDS or the hepatitis B or C virus during competition is close to non-existent, there is a remote risk other blood borne infectious diseases can be transmitted. Procedures for guarding against transmission of infectious agents should include, but not limited to the following:

- A bleeding player should be removed from the game or practice as soon as possible.
- Bleeding must be stopped, the open wound covered and the uniform changed if there is blood on it before the player may return to the game or practice.
- Routinely use latex gloves to prevent mucous membrane exposure when contact with blood or other body fluids is anticipated.
- Immediately wash hands and other skin surface if contaminated with blood with antibacterial soap such as Lever 2000 or Dial.
- Clean all blood contaminated surfaces and equipment with a 1:1 solution of bleach. A 1:1 solution can be made by using a cap full of bleach with 8 ounces of water.
- CPR masks are recommended, but if not available, tear a hole in a plastic bag and place over victim's mouth and perform rescue breathing through hole into victim's mouth.
- Managers, coaches and volunteers with open wounds should refrain from all direct contact with others 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.

EMERGENCY BREATHING

If victim is not breathing:

1. Position victim on back while supporting head and neck.
2. With the victim's head tilted back and chin lifted, pinch nose shut.
3. Give two (2) slow breaths into victim's mouth. Breathe until chest gently rises.

Once a victim requires emergency breathing, you become the life support for that person – without you, the victim would be clinically dead. You must continue to administer emergency breathing and/or CPR until the paramedics arrive. It is your obligation and you are protected under the "Good Samaritan" laws.

WEATHER FACTS AND SAFETY PROCEDURES

Most of the summer days in Oklahoma are warm and sunny, but there are those days when weather turns bad and creates unsafe weather conditions. As the old saying goes, "If you don't like the weather in Oklahoma, wait a minute, it will change".

RAIN

If it begins to rain:

- Evaluate the strength of the rain. Is it just drizzling or pouring?
- Determine the direction the storm is moving.
- Evaluate the playing field as it becomes more and more saturated.
- Stop practice if the playing conditions become unsafe – use common sense. If playing a game, consult with the other manager and umpire to formulate a decision.

HOT WEATHER

One thing we do get a lot of in Oklahoma is hot weather. Precautions must be taken in order to make sure that the players on your team do not *dehydrate* or *hyperventilate*.

- Suggest players drink water and Gatorade type of drinks when coming on and going off the field between innings.
- If a player looks distressed while standing in the hot sun, substitute that player and get him/her into shade and cool them off A.S.A.P.
- If a player should collapse as a result of heat exhaustion, call 911 immediately. Get the player to drink water and use cool moist towels or instant ice bags to cool him/her down until the emergency medical team arrives. (See section on Hydration)

LIGHTNING FACTS AND SAFETY PROCEDURES

Consider the following facts:

- The average lightning strike is anywhere from 6 to 25 miles long.
- The average thunderstorm is 6 - 10 miles wide and travels at a rate of 25 mph or higher much higher in Tulsa.
- Once the leading edge of a thunderstorm approaches to within 25 miles, you are at immediate risk due to the possibility of lightning strikes coming from the storm's overhanging anvil cloud.
- On the average, thunder can only be heard over a distance of 3 to 4 miles, depending on humidity, terrain and other factors. This means that by the time you hear thunder, you are already in the risk area for lightning strikes.

"FLASH-BANG" METHOD

One way of determining how close a recent lightning strike is to you is called the "flash-bang" method. With the "flash-bang" method, a person counts the number of seconds between the sight of a lightning strike and the sound of the thunder that follows it. Halt play and evacuation should be called for when the count between the lightning flash and the sound of its thunder is 15 seconds or less.

RULE OF THUMB

The ultimate truth about lightning is that it is unpredictable and cannot be prevented. Therefore, a manager, coach or umpire who feels threatened by an approaching storm should stop play and get the kids to safety – regardless of whether or not the lightning is "close" or if the "flash-bang" proximity measure applies. When in doubt, the following Rule of Thumb should be applied:

When You Hear It – Clear It **When You See It – Flee It**

WHERE TO GO ?

No place is absolutely safe from lightning threat, but some places are safer than others. Large enclosed shelters (substantially constructed buildings) are the safest areas. For the majority of participants, the best area for them to seek shelter is in a fully enclosed metal vehicle with the windows rolled up. If you are stranded in an open area and cannot get to shelter in a car, put our 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, fences (metal or wood) and water.

FIRST AID FOR A LIGHTNING VICTIM

Typically, the lightning victim exhibits similar symptoms as someone suffering from a heart attack. In addition to calling 911, the rescuer should consider the following:

- The first rule of emergency care is “make no more casualties”. If the victim is in a high risk area (open field, etc.) the rescuer should determine if movement from that area is necessary – lightning can and does strike the same place twice. If the rescuer is at risk and movement of the victim is a viable option, it should be done.
- 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 them.
- 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.

REGISTRATION DATA

All players must be registered before any participation in any Tulsa National LL event, practice and/or game. All registrations are required at [website](#) . Registered players and volunteer data are all sent to Little League International using the Little League Data Center facility for Chartered Little League organizations.

TULSA LITTLE LEAGUE BASEBALL CODE OF CONDUCT

- Speed limit of 5 mph in roadways and parking lots while attending any Tulsa Little League function. Watch for small children around parked cars.
- No alcohol allowed in any parking lot, field or common areas within Tulsa Little League Baseball, Inc.
- No running, playing or practicing baseball in the parking lots at any time.
- No profanity please.
- No weapons
- No swinging bats or throwing balls within the walkways and common areas of the Tulsa Little League Baseball fields.
- No throwing balls against dugouts or against backstops. Catcher must be used for all batting practice sessions.
- No throwing of any foreign objects, (i.e., rocks, dirt, bottles, cans, etc.).
- No horseplay in the walkways at any time.
- No lawn chairs in the walkways or common areas at any time.
- No climbing on fences or backstops anywhere at any time.
- No pets are allowed at Tulsa Little League Baseball games or practices.
- Observe all posted signs. Players and spectators should be alert for foul balls and errant throws.
- During a game, players must remain in the dugout area and no horseplay is permitted.
- After each game, each team must clean up trash in dugouts and around stands.
- All gates to the fields must remain closed at all times. After players have entered or left the playing field, gates should be closed and secured.

Failure to comply with any of the above may result in expulsion or removal from LaFortune Park baseball complex.

IS YOUR CHILD'S BASEBALL FIELD SAFE?

Everyone is encouraged to become involved in keeping your child's baseball field safe. Any time you notice anything that could be a hazard, **SPEAK UP!!** Don't be afraid to point out where fencing is needed or any existing fencing that needs repair, such as the backstop or overthrow areas in front of the benches or dugouts that may be damaged. Dugouts should be free from broken glass, metal, rocks and other debris.

Players should frequently be instructed to check around them before swinging the bat and to be alert when in areas where someone else might be swinging a bat. During batting practice, no player is permitted to hit without a helmet. Keep all non-essential equipment away from areas of play. Whether in the bullpen or on the field, catchers should be in full gear when catching a pitcher. All male players are recommended to wear athletic supporters and cups. Base coaches are encouraged to wear a cup and to stand no closer to the plate than the coach box. The base coach should always face the infield.

Always know the location of the nearest first-aid kit. A first-aid kit is available in the concession stand located next to field 6. Develop a plan that will enable you to prevent or treat heat-related ailments. Always have a cooler of water and ice available. Assign first-aid duties to the person most qualified. Protect pitchers and catchers from overheating. When a player says he's hurt, believe him. Players should not be allowed on the field without a helmet unless playing defense. A player should never have any reason to be on the field unless assigned to a position.

STORAGE SHED PROCEDURES

The following applies to all of the storage sheds used by Tulsa National LL and apply to anyone who has been issued the combination by the board of director to use those sheds.

- All individuals with the combination to the equipment shed are aware of their responsibilities for the orderly and safe storage of rakes, shovels, bases, umpire equipment, pitching machines, etc.
- Before you use any equipment located in the shed (i.e., scoreboards, public address systems, pitching machines, etc.), please read the procedures for that equipment.
- All chemicals or organic material stored in Tulsa National LL shed shall be properly marked and labeled as to its contents.
- All chemicals or organic materials (i.e., lime, fertilizer, etc.) stored within the equipment shed will be separated from the areas used to store machinery and gardening equipment to minimize the risk of puncturing storage containers.
- Any loose chemicals or organic material within the shed should be cleaned up and disposed of as soon as possible to prevent accidental poisoning.

COACHES CERTIFICATION

All managers, coaches, assistant coaches and field volunteers must attend one of the Tulsa National LL coaches meetings. You must carry your certification card on you any time you are on the playing field. Failure to provide certification card at request of Umpire-In-Chief or League Official will result in manager, coach, assistant coach or field volunteer being asked to leave playing field.

SPORT PARENT CODE OF CONDUCT

Preamble

The essential elements of character building and ethics in sports are embodied in the concept of sportsmanship and six core principles: Trustworthiness, Respect, Responsibility, Fairness, Caring and Good Citizenship. The highest potential of sports is achieved when competition reflects these "six pillars of character".

I therefore agree:

1. I will not force my child to participate in sports.
2. I will remember that children participate to have fun and that the game is for youth, not adults.
3. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
4. I will learn the rules of the game and the policies of the league.
5. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or other sporting event.
6. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player or parent, such as booing and taunting; refusing to shake hands; or use profane language or gestures.
7. I will not encourage any behaviors or practices that would endanger the health and well being of the athletes.
8. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
9. I will demand that my child treat other players, coaches, officials and spectators with respect regardless of race, creed, color, sex or ability.
10. I will teach my child that doing one's best is more important than winning, so that my child will never feel defeated by the outcome of a game or his/her performance.
11. I will praise my child for competing fairly and trying hard and make my child feel like a winner every time.
12. I will never ridicule or yell at my child or other participant for making a mistake or losing a competition.
13. I will emphasize skill development and practices and how they benefit my child over winning. I will also de-emphasize games and competition in the lower age groups.
14. I will promote the emotional and physical well being of the athletes ahead of any personal desire I may have for my child to win.
15. I will respect the officials and their authority during games and will never question, discuss or confront coaches at the game field and will take time to speak with coaches at an agreed upon time and place.
16. I will demand a sports environment for my child that is free from drugs, tobacco and alcohol and I will refrain from their use at all sporting events.
17. I will refrain from coaching my child or other players during games and practices unless I am one of the official coaches of the team.

Parent/Guardian Signature

SAFETY IS A RESPONSIBILITY

In order to understand the reasons for a Safety Program, we should look at why Little League has been so successful.

LITTLE LEAGUE POLICY

One of the reasons for Little Leagues' wide acceptance and phenomenal growth is that it fills an important need in our free society. As our program expands, it takes, more and more, a major part in the development of young people. It instills confidence and an understanding of fair play and the rights of other people.

Many of the younger children who develop slower than others are given an opportunity not only to develop their playing skill, but to learn what competition and sportsmanship are all about. All who take part in the program are encouraged to develop a high moral code along with their improvement in physical skills and coordination. These high aims of Little League are more for the benefit of the great majority of children rather than the few who would otherwise come to the top in any competitive athletic endeavor.

SAFETY RESPONSIBILITY

The very fact that it is a basic principle of Little League to provide an opportunity for every child to play and receive these benefits, multiplies the exposure to accidental injury. Having accepted this large group of partly developed fledglings, we must also accept the moral responsibility for their safety. This obligation rests with every adult member of the league organization as well as with the inactive parents who have entrusted their children to us.

Tee Ball League Safety

Tulsa National LL only uses Little League approved low impact balls for the Tee Ball league.

Other Safety Equipment

Tulsa Little League local rules outline required equipment and safety recommendations. Tulsa National LL strongly recommends players to wear athletic cups, mouth pieces and the new safety shirts that have a protective guard over the heart/solar plexis area and sliding pants. Tulsa National LL uses Little League approved safety break-away bases and the double safety base on 1st base for all minor league divisions. Warning tracks are provided on some fields.

OTHER REASONS

In addition to our basic moral responsibility, other significant reasons for an organized effort to prevent accidents are to:

1. Stimulate public confidence in this high caliber youth program.
2. Hold insurance costs to a minimum.
3. Reassure parents as to the safety of their children.
4. Develop safety-mindedness for their protection in later life.

STRUCTURE OF A SOUND PROGRAM

It is recognized that the area personnel and facilities available for the operation of a Little League will dictate the structure of an effective safety program.. These safety guidelines are presented as a goal toward which the adults who administer a league can work. The effectiveness of their efforts to prevent accidents will be measured more by their sincerity of purpose than by the amount of money and preponderance of volunteer effort at their disposal. Effective accident prevention is a commodity available only to those organizations which have a real desire to make it a part of their activities.

It must be understood that although your safety program is designed to cover all personnel and all activities in the operation of your Little League, its scope does not supersede any existing lines of authority. We expect everyone to become "safety-minded" and be guided by safety considerations, but not attempt to change the structure of the Little League Organization.

Safety Mission Statement*

Although this Safety Manual is a rather comprehensive information source, it is the responsibility of everyone involved with Tulsa National LL to help to foster a safe environment for all participants. This manual will continue to grow and become the Safety Manual by which other leagues will measure themselves.

Please do not hesitate to contact the Safety Officer with any ideas that you may have to improve this Safety Manual.

Thank you for your support.

APPENDIX

<u>Title of Page</u>	<u>Appendix #</u>
• How to Contact Little League Baseball	18
• Transportation Requirements	19
• Volunteer Application	20
• Field Hazard Checklist	21
• Concession Stand Safety Procedures	22

HOW TO CONTACT LITTLE LEAGUE BASEBALL

Tulsa National LL

Internet: www.tulsalittleleague.org

Email: tulsanatsbb@gmail.com

Phone: 918-264-8359

Little League Baseball International Headquarters

Little League Baseball and Softball

539 US Route 15 Hwy, P.O. Box 3485, Williamsport, Pa., 17701-0485

Phone: (570) 326-1921 / Fax: (570) 326-1074

Southwest Region Headquarters

3700 S. University Parks Drive Waco, TX 76706.

Phone: (254) 756-1816.

States: TX, OK, AR, LA, NM, MS

TRANSPORTATION REQUIREMENTS

Before any manager, coach, assistant coach or other volunteer can transport any registered player, other than his/her own, anywhere, he/she must:

1. Have a valid Oklahoma Driver's License
2. Complete a Volunteer Application and submit to Tulsa National LL for background check.
3. Have a valid copy of proof of insurance with the vehicle (Must have Uninsured Motorist coverage)
4. Wear corrective lenses when operating a vehicle if the Driver's License stipulates that the operator must wear corrective lenses.
5. Have signed permission slips from parent(s)/guardian(s) before children are transported.
6. Have correct class of license for the vehicle he/she is driving.
7. Not carry more children in their vehicle than they have seat belts.
8. Make sure that the vehicle is in good running order.
9. Not drive in a careless or reckless manner.
10. Not drive under the influence of alcohol, drugs or medication.
11. Obey all traffic laws and speed limits at all times.
12. Never transport a child without returning him/her to the point of origin, unless parent(s)/guardian(s) of that child pick takes custody of them.

Tulsa National LL Volunteer Application

Tulsa National LL will complete background checks on all volunteers. Our background check submission will be emailed to you from JDP, our background check provider. The background check must be completed within 10 days and approved by Tulsa National LL safety officer.

All Tulsa Little League volunteers are required to complete the Official Volunteer Application every year. Background checks are completed every year using the JDP system.

Child Protection Program

Beginning in 2024, Abuse Awareness Training for adults will be a required part of the annual Little League Volunteer Application, along with the annual background check. The training must be completed before any individual can assume any duties for the current season, including District Administrators and Assistant District Administrators.

It is important that all volunteers complete the training on an annual basis. Even though it may be a training an individual has completed in the past, it is important to keep the information that is taught through Abuse Awareness Training fresh in everyone's mind. The more individuals involved in a league that have the information that Abuse Awareness Training provides, the better.

[Mandatory Safety Training](#)

Hazard Checklist:

All umpires, team managers and coaches are required to walk the field before each game and practice. As you walk the field before every game, look for the following safety issues:

- Holes, damage, rough or uneven spots
- Slippery areas, long grass
- Glass, rocks and other debris and foreign objects – place in waste containers
- Damage to screens, fence edges or sharp fencing
- Unsafe conditions around backstop, pitcher mound
- Dugout condition – make sure players clean up after the game
- Areas around bleachers free of debris

Any unsafe conditions noted should be reported to Tulsa National LL officials immediately.

Concession Stand Safety Procedures

Concession vendors provide drinks and various snacks and are required to have an Oklahoma Licensed Permit.

Tulsa Little League Safety Purchases:

1. Added new field fencing
2. Repairs to field fencing
3. Players and Coaches only Dugout signage
4. Signage for authorized facility usage only
5. Signage for local rules of conduct with respect to no weapons, no alcohol, no smoking, no tobacco products of any kind
6. Repairs to spectator seating boards and painting
7. Cut out grass high edges
8. Applied new top surface basepath dirt and field dry
9. New dugout benches
10. All field lighting updated / replaced.