



League ID No. 405-55-04

IRVINE RANCH LITTLE LEAGUE 2021 SAFETY MANUAL

JOHN GRIJALVA
President
(949)435-9006

President@irvineranchll.org

LAURA MORGAN
Safety Officer
(949) 838-7877

SafetyOfficer@irvineranchll.org

RICK McGRATH
Vice President
(949) 413-1148

VP@irvineranchll.org

TABLE OF CONTENTS

EMERGENCY CONTACTS	1
LETTER FROM THE IRVINE RANCH LITTLE LEAGUE PRESIDENT AND SAFETY OFFICER	2
2020-2021 SAFETY PLAN	3
SECTION 1 – SAFETY OFFICER	3
SECTION 2 – SAFETY OFFICER DUTIES	3
SECTION 3 – SAFETY MANUAL DISTRIBUTION & AVAILABILITY	4
SECTION 4 – EMERGENCY PLAN	4
SECTION 5 – VOLUNTEER APPLICATION / NATIONWIDE BACKGROUND CHECK	4
SECTION 6 – FUNDAMENTALS TRAINING	4
SECTION 7 – FIRST AID SAFETY AND TREATMENT CLINIC	5
SECTION 8 – CONCUSSION TRAINING / CERTIFICATION / PROCEDURE	5
SECTION 9 – FIELD USE / INSPECTION	6
SECTION 10 – EQUIPMENT INSPECTION / REPLACEMENT	6
SECTION 11 – FIELD AND FACILITY SURVEY	7
SECTION 12 – CONCESSION STAND	7
SECTION 13 – INCIDENT / INJURY TRACKING & REPORTING	10
SECTION 14 – FIRST AID KITS	11
SECTION 15 – SAFETY CODE	11
SECTION 16 – PLAYER / MANAGER / COACH DATA	14
SECTION 17 – LITTLE LEAGUE SURVEY	14
SECTION 18 – ALCOHOL, TOBACCO, AND MARIJUANA USE PROHIBITED	14
SECTION 19 – ZERO TOLERANCE OF ABUSE	14
SECTION 20 – COVID-19 SAFETY PROTOCOLS	14

Attachments

- A. 2021 Little League Volunteer Applications
- B. Concussion Information Sheet & Acknowledgement
- C. Pre-Game Inspection Checklist
- D. Incident / Injury Tracking Report
- E. Accident Notification Form and Instructions
- F. Medical Release Form
- G. Manager's Acknowledgement
- H. COVID-19 Return to Play Protocol

EMERGENCY CONTACTS

EMERGENCY POLICE/FIRE/MEDICAL CARE 9-1-1

Non-Emergency Law Enforcement

Irvine Police Department, 1 Civic Center Plaza, Irvine, CA 92606; (949) 724-7000

Local Hospitals

Hoag Hospital Irvine
16200 Sand Canyon Avenue
Irvine, CA 92618
(949) 764-4624

Kaiser Permanente Hospital Irvine
6640 Alton Parkway
Irvine, CA 92618
(833) 574-2273

Local Urgent Care

Hoag Urgent Care Woodbridge
4900 Barranca Parkway #103
Irvine, CA 92604
(949) 791-3106

Hoag Urgent Care Sand Canyon
16205 Sand Canyon Avenue
Irvine, CA 92618
(949) 557-0000

Woodbridge Walk-In
4950 Barranca Parkway #104
Irvine, CA 92604
(949) 265-0442

Other Emergency Numbers

CA Office of Emergency Svcs.
(562) 795-2910

SoCal Gas
(800) 427-2200

Las Lomas Field Ambassadors
(949) 724-6844

Poison Control
(800) 222-1222

Southern California Edison
(800) 611-1911

City of Irvine MUDD Line
(949) 724-6833

Key Irvine Ranch Little League Contacts

Laura Morgan
Safety Officer
(949) 838-7877

John Grijalva
President
(949) 435-9006

Rick McGrath
Vice President
(949) 413-1148

SafetyOfficer@irvineranchll.org

President@irvineranchll.org

VP@irvineranchll.org

Key Little League District 55 Contacts

Tony Gray
District 55 Administrator
(949) 606-5852

Michael Calder
District 55 Safety Officer
(949) 697-8221

*****Please report all injuries and unsafe conditions to the IRL Safety Officer Immediately*****

LETTER FROM THE IRVINE RANCH LITTLE LEAGUE PRESIDENT AND SAFETY OFFICER

League Members:

Irvine Ranch Little League ("IRLL") is committed to providing its players, volunteers, and supporters with a safe environment in which to experience the game of baseball. The IRLL Board of Directors actively evaluates and updates the IRLL safety policies and procedures and elects one Director as Safety Officer to oversee the approved Safety Plan. Laura Morgan is currently serving as the IRLL Safety Officer.

The IRLL Safety Plan is implemented in a couple key areas:

First, all volunteers providing regular service to IRLL or having repetitive access to or contact with IRLL players are required to submit an application and submit to a nationwide background check. Volunteers include, without limitation, members of the Board of Directors, managers, coaches, umpires, team administrators, and any other persons providing service to the youth of IRLL.

Second, all IRLL volunteers must also complete concussion and basic first aid training, as well as training on the IRLL Safety Plan.

Third, the IRLL Safety Officer prepares each team with a basic first aid kit and addresses any injuries or unsafe conditions that occur during the season.

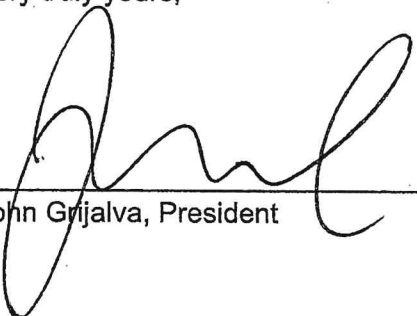
Finally, IRLL's commitment to safety extends to psychological and emotional safety. The Little League Code of Conduct enforced by IRLL prohibits the use of inappropriate or abusive language, whether directed toward players, managers, coaches, umpires, other volunteers, parents, and supporters.

The IRLL Safety Manual and all of the accident reporting forms, travel forms, medical forms, and volunteer applications are available and updated regularly online at <https://www.irvineranchll.org/>.


Please read this manual carefully, from cover to cover, and become familiar with the safety fundamentals. Then use the manual as a powerful reference guide throughout the season.

In closing, remember that safety rests with all of us, as the volunteers that allow Irvine Ranch Little League to operate. Always use common sense, never doubt what children tell you, and report all accidents or safety infractions when they occur. Now, play ball and play it safe!

Very truly yours,



John Grijalva, President



Laura Morgan, Safety Officer

2020-2021 SAFETY PLAN

The Irvine Ranch Little League (“IRLL”) Safety Plan has been established to provide guidelines and procedures for all volunteers so that a fun and safe environment exists while teaching, coaching, playing and watching Little League baseball in Irvine.

SECTION 1 – SAFETY OFFICER

The IRLL Safety Officer for 2020-2021 is:

Laura Morgan
(949) 838-7877 – Cell
SafetyOfficer@irvineranchll.org

Your other key IRLL contacts are President John Grijalva and Vice President Rick McGrath whose contact information is listed with the Emergency Contacts on page 1 of this Safety Manual.

SECTION 2 – SAFETY OFFICER DUTIES

The Safety Officer is responsible for the annual development and implementation of the Safety Plan and Safety Manual as approved by the Board of Directors. Additionally, the Safety Officer's responsibilities include, without limitation:

- (A) Coordinating with all members of IRLL to provide a safe environment for all participants
- (B) Assisting with the filing of insurance claims and acting as a liaison between the insurance company and all players, parents, volunteers, and other injured adults
- (C) Ensuring that all IRLL Volunteers:
 - (1) Complete an approved Volunteer Application
 - (2) Pass a nationwide background check
 - (3) Complete all mandatory trainings including:
 - i. Concussion
 - ii. Sudden Cardiac Arrest
 - iii. Basic first aid
 - (4) Are approved as a volunteer by the Executive Committee
- (D) Providing all Incident Tracking Forms to the District 55 Safety Officer within 48 hours
- (E) Distributing First Aid kits to all team managers and fulfilling all replacement requests
- (F) Ensuring there are First Aid kits at each of IRLL's regularly used playing fields if there is a secured location capable of storing a First Aid kit at such field
- (G) Coordinating resolution of any unsafe or hazardous conditions
- (H) Ensuring that the IRLL Code of Conduct is clear to all participants
- (I) Confirming that all emergency phone numbers and contact information for the Board of Directors is available at the snack bar, if one is maintained
- (J) Ensuring adherence to all Little League and IRLL safety rules
- (K) Ensuring that the Safety Officer's information is on file with Little League International
- (L) Submitting the IRLL Safety Plan to Little League International
- (M) Completing and submitting the facility and lighting surveys

SECTION 3 – SAFETY MANUAL DISTRIBUTION & AVAILABILITY

The Safety Manual shall be made available to all IRLI Volunteers (“Volunteers”) and IRLI shall provide one printed copy of the Safety Manual to each team. The term Volunteers includes, without limitation, all members of the IRLI Board of Directors, Managers, Coaches, Umpires, Team Administrators, and any other persons who provide regular service to IRLI and/or who will have repetitive access to or contact with IRLI players. The Safety Manual may be distributed electronically and shall be posted to, and publicly available from, the IRLI website.

Each IRLI Manager shall ensure that a printed copy of the Safety Manual is present at each team function, including team functions that are not specifically baseball-related. To the extent possible, a printed copy or copies of the Safety Manual should be left in a secured location at each of IRLI’s regularly used playing fields.

All Volunteers shall be trained on the IRLI Safety Plan and Manual and shall sign an acknowledgement (**Attachment G**) of such training and of receipt of the IRLI Safety Manual.

SECTION 4 – EMERGENCY PLAN

A list of key emergency contacts is included at page 1 of this Safety Manual. Also included at page 1 of this Safety Manual are contacts for local hospitals, urgent care centers, and other emergency offices, as well as contact information for key staff at Little League District 55.

SECTION 5 – VOLUNTEER APPLICATION / NATIONWIDE BACKGROUND CHECK

Every person seeking to be an IRLI Volunteer must: a) Complete a Volunteer Application; b) Submit to a background check through JDP (www.jdp.com); c) Provide the Safety Officer with a legible copy of their government-issued photo identification for verification; and, d) Be approved as a Volunteer by the IRLI Executive Committee. The Safety Officer, President, and Vice-President are responsible for ensuring compliance with these requirements. Any person who fails to complete all of these requirements cannot serve as a Volunteer.

A potential Volunteer may complete the Volunteer Application and background check by providing the Safety Officer with a valid email address and the Safety Officer shall cause an email to be sent to the Volunteer with a link to complete the Volunteer Application and background check online. Alternatively, a Volunteer may submit a completed and signed "Little League Volunteer Application - 2021" (**Attachment A**) to the Safety Officer who shall process the Volunteer Application and background check manually.

Legible copies (electronic copies, e.g., scans, are acceptable) of government-issued photo identifications for all Volunteers must be submitted to the Safety Officer and shall be maintained on file with IRLI until the close of the calendar year in which it is submitted.

SECTION 6 – FUNDAMENTALS TRAINING

The IRLI Fundamentals Training Session (“IRLI Rules/Coaches Clinic”) will be undertaken and completed no later than February 20, 2021.

All Volunteers who wish to Manage, Coach or Umpire MUST attend the IRLR Rules/Coaches Clinic. The intent is to provide training to ALL Managers, Coaches and Umpires on baseball fundamentals, including but not limited to throwing, catching, pitching, fielding, hitting, and sliding. Proper techniques help minimize injuries to players that arise from improper form.

Every Manager and Coach is required to attend formal training not less than once every three years and at least one Manager or Coach from each team is required to attend such training for the current season.

All Managers are expected to cover the basics of safe play with his/her team before starting the first practice and to teach the fundamentals of the game to every player. The IRLR Safety Officer will require each Division Commissioner to provide evidence that his/her division meets these standards.

SECTION 7 – FIRST AID SAFETY AND TREATMENT CLINIC

The IRLR First Aid Safety and Treatment Clinic (“First Aid Clinic”) will be undertaken and completed no later than February 20, 2021. Volunteers are only required to attend one of these clinics.

All Volunteers who wish to manage, coach or umpire MUST attend a First Aid Clinic. The First Aid Clinic is designed to provide at least one Manager or Coach from each team with a general understanding of first aid evaluation and treatment. The course is designed to provide a sense of calm during an incident or other emergency that promotes a quick response to the incident. The Safety Officer will conduct periodic inspections throughout the league during the season to ensure that safety policies and rules are performed and enforced.

SECTION 8 – CONCUSSION TRAINING / CERTIFICATION / PROCEDURE

All Volunteers who wish to manage, coach, or umpire MUST, at least once, complete the “HEADS UP to Youth Sports: Online Training” offered by the Centers for Disease Control and Prevention (accessible online at: www.cdc.gov/headsup/youthsports) and provide the Safety Officer with a copy of the official “Certificate of Completion” issued by the Centers for Disease Control and Prevention after successful completion of such training. IRLR shall maintain copies of all such certificates.

In compliance with California Health & Safety Code § 124235:

- (A) A player who is **suspected** of sustaining a concussion or other head injury in an athletic activity shall be **immediately** removed from athletic activity for the remainder of the day and shall not be permitted to return to any athletic activity until a licensed health care provider¹ has evaluated the player and both a licensed health care provider and the Safety Officer provide written clearance (Safety Officer written clearance may be by email) for the player to return to athletic activity. If the licensed health care provider determines that the player sustained a concussion or other head injury, the player shall also complete a graduated return-to-play protocol of no less than seven days in duration under the supervision of a licensed health care provider and in consultation with the Safety Officer.

¹ A “licensed health care provider” means a licensed health care provider who is **trained in the evaluation and management of concussions and is acting within the scope of his or her practice.**

- (B) If a player is removed from athletic activity due to a suspected concussion or other head injury, the team Manager shall notify a parent or guardian of the athlete and the Safety Officer of: (1) The time and date of the injury; (2) The symptoms observed; and, (3) Any treatment provided.
- (C) On an annual basis, IRLI shall provide the concussion and head injury information sheet (**Attachment B**) to each player which shall be signed and returned by the player and the player's parent or guardian before the player initiates any athletic activity.
- (D) Any Manager, Coach, Umpire, or Team Administrator who fails to ensure that the IRLI Concussion Procedure is properly followed is subject to discipline including, without limitation, suspension, removal, and forfeiture of games.

Additional concussion reference materials are available at the Center for Disease Control's website:
<https://www.cdc.gov/headsup/index.html>.

SECTION 9 – FIELD USE / INSPECTION

Prior to use, the home and visiting Managers and Umpire shall inspect the field for any hazards. This is a common-sense activity and should include a visual search of the fences and playing surfaces for hazardous items such as rocks, glass, holes/ruts, etc., or anything that would present a danger to the players, Managers, Coaches, or Umpires. Please complete the "Pre-Game Field Inspection Checklist" (**Attachment C**) and submit the completed copy to the Safety Officer and your Division Commissioner.

Should any hazardous condition be discovered that cannot be immediately remedied, the Umpire Crew Chief is responsible for determining whether the game shall be delayed, suspended, or postponed. All hazardous conditions, even those that can be immediately remedied, must be reported to the Safety Officer within 24 hours. The Manager of the home team shall have the responsibility of reporting all hazardous conditions but the Manager of the visiting team shall also ensure such report is timely made.

SECTION 10 – EQUIPMENT INSPECTION / REPLACEMENT

Each year the IRLI Equipment Manager shall perform a complete inspection of all IRLI equipment. IRLI will immediately destroy, discard, or recycle all equipment deemed damaged and unusable and report such action to the IRLI Board of Directors for replacement and inventory purposes.

Requests for additional or replacement batting helmets or catcher's gear shall be made to the Equipment Manager who shall obtain funding from the President.

MANAGERS/COACHES: Prior to each game or practice, Managers/Coaches should inspect all baseball equipment to ensure that it is in proper working condition and presents no safety risks to the players. Managers will:

- Make sure that players are wearing the proper uniform or other baseball appropriate clothing
- Make sure that players playing the position of catcher are wearing a cup [Rule 1.17]
- Strongly recommend that all male players wear a cup
- Make sure all equipment is properly stored in the dugout when not in use

UMPIRES: Prior to each game, the Umpire(s) should inspect all cleats, batting helmets and bats to ensure they are in compliance with Little League standards. Shoes with metal spikes or cleats are permitted in the intermediate division and above. All cleats below the Intermediate division should be rubber. No toe cleats are allowed. Batting helmets should not be cracked and proper padding should be in place inside the helmet. Bats must be checked for compliance with Little League standards for weight, composition, and certification. Umpires will:

- Walk the field for hazards, obstructions, or other unsafe conditions immediately prior to play and determine whether any such conditions must be remedied before the game starts
- Ensure the Manager of the home team, or the Manager of the visiting team, report any hazardous or unsafe conditions to the Safety Officer within 24 hours
- Check equipment in the dugouts of both teams
- Remove and return equipment that is unsafe, damaged, or does not conform to the official rules of Baseball
- Make sure that catchers are wearing helmets with dangling throat guards [Rule 1.17] and catcher's mitt when warming up pitchers
- Make sure that adults do not warmup pitchers, whether on the field, in the dugout, or elsewhere [Rule 3.09]
- Check players for jewelry. The only jewelry allowed is a Medic Alert bracelet [Rule 1.11(j)]
- Make sure all players (Little League Division and below) are wearing non-metal cleats

SECTION 11 – FIELD AND FACILITY SURVEY

Prior to the start of each season, the Safety Officer, Field Manager, and Equipment Manager, shall conduct a field and facility survey of all league fields and shall report to the Board of Directors the results of such inspection(s) for both immediate needs and long-term planning.

The Safety Officer shall complete and submit (online) the "Little League Baseball & Softball National Facility Survey" to the Little League Data Center for each league field.

The field and facility survey should be updated as necessary and shall be kept on file with IRLR records until updated.

SECTION 12 – CONCESSION STAND

To ensure the safety and wellbeing of our concession stand customers and workers, the following safety requirements must be followed:

- (A) No person under the age of fifteen (15) is allowed to be behind the counter in the concession stand without a responsible adult
- (B) The Concessions Manager shall provide training to all concession stand workers prior to the start of the season which shall include safe use of all concession stand equipment
- (C) Safe food preparation instructions will be available in all concession stands
- (D) Concession stand trash receptacles shall be emptied at the end of each day
- (E) Turn off lights and lock door when closing concession stand

- (F) Cooking equipment shall be inspected periodically and repaired or replaced, if need be, upon recommendation by the Concessions Manager. If any equipment presents a safety hazard, it shall be taken out of service immediately
- (G) Only food purchased by IRLI for sale in its concession stands shall be cooked, prepared, or sold in the IRLI concession stands
- (H) Cleaning chemicals must be stored in a locked container separated from any food or drink
- (I) A certified fire extinguisher suitable for grease fires must be placed in plain sight at all times
- (J) All concession stand workers must be instructed on the use of fire extinguishers
- (K) A fully stocked First Aid kit shall be maintained in the concession stand
- (L) The concession stand door must remain unlocked and clear while people are inside
- (M) All items on the "Concession Stand Weekly Checklist" shall be verified and kept on file

12 Steps to Safe and Sanitary Food Service Events

1. Menu. Keep your menu simple, and keep potentially hazardous foods (meats, eggs, dairy products, protein salads, cut fruits and vegetables, etc.) to a minimum. Avoid using precooked foods or leftovers. Use only foods from approved sources, avoiding foods that have been prepared at home. Complete control over your food, from source to service, is the key to safe, sanitary food service.
2. Cooking. Use a food thermometer to check on cooking and holding temperatures of potentially hazardous foods. All potentially hazardous foods should be kept at 41° F or below (if cold) or 140° F or above (if hot). Ground beef and ground pork products should be cooked to an internal temperature of 155° F; poultry parts should be cooked to 165° F. Most foodborne illnesses from temporary events can be traced back to lapses in temperature control.
3. Reheating. Rapidly reheat potentially hazardous foods to 165° F. Do not attempt to heat foods in crock pots, steam tables, over sterno units or other holding devices. Slow-cooking mechanisms may activate bacteria and never reach killing temperatures.
4. Cooling and Cold Storage. Foods that require refrigeration must be cooled 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 bath (60% ice to 40% water), stirring the product frequently, or place the food in shallow pans no more than 4 inches in depth and refrigerate. Pans should not be stored one atop the other and lids should be off or ajar until the food is completely cooled. Check the temperature periodically to see if the food is cooling properly. Allowing hazardous foods to remain un-refrigerated for too long has been the number ONE cause of food borne illness.
5. Hand Washing. Frequent and thorough hand washing remains the first line of defense in preventing food borne disease. The use of disposable gloves can provide an additional barrier to contamination, but they are no substitute for hand washing!
6. Health and Hygiene. Only healthy workers should prepare and serve food. Anyone who shows symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, jaundice, etc.) or who has open sores or infected cuts on the hands should not be allowed in the food concession area. Workers should wear clean outer garments and should not smoke in the concession area. The use of hair restraints is recommended to prevent hair ending up in food products.
7. Food Handling. Avoid hand contact with raw, ready-to-eat foods & food contact surfaces. Use an acceptable dispensing utensil to serve food. Touching food with bare hands can transfer germs to food.

8. Dishwashing. Use disposable utensils for food service. Keep your hands away from food contact surfaces, and never reuse disposable dishware. Ideally, dishes and utensils should be washed in a four-step process:
 - a. Washing in hot soapy water;
 - b. Rinsing in clean water;
 - c. Chemical or heat sanitizing; and
 - d. Air-drying.
9. Ice. Ice used to cool cans/bottles should not be used in cup beverages and should be stored separately. Use a scoop to dispense ice; never use the hands. Ice can become contaminated with bacteria and viruses and cause food-borne illness.
10. Wiping Cloths. Rinse and store your wiping cloths in a bucket of sanitizer (example: 1 gallon of water and 1/2 teaspoon of chlorine bleach). Change the solution every two hours. Well-sanitized work surfaces prevent cross-contamination and discourage flies.
11. Insect Control and Waste. Keep foods covered to protect them from insects. Store pesticides away from foods. Place garbage and paper wastes in a refuse container with a tight-fitting lid. Dispose of wastewater in an approved method (do not dump it outside). 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 unusable food. Additional - BBQ. The BBQ is to be used by League Approved Private vendors/sponsors and adult Irvine Ranch Little League members ONLY.

Clean Hands for Clean Foods

- 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 with a paper towel
- Turn off the water using a paper towel, not bare hands

WASH YOUR HANDS IN THIS FASHION BEFORE YOU BEGIN WORK AND FREQUENTLY DURING THE DAY, ESPECIALLY AFTER PERFORMING ANY OF THESE ACTIVITIES:

- After touching bare body parts other than clean hands
- After using the restroom
- After caring for or handling animals
- After coughing or sneezing
- After handling soiled surfaces, equipment, or utensils
- After eating, drinking, or using tobacco
- During food preparation, as often as necessary to remove soil and contamination and to prevent cross-contamination when changing tasks
- When switching between working with raw food and ready-to-eat food
- Directly before touching ready-to-eat food or food-contact surfaces
- After engaging in activities that contaminate hands

Top Causes of Food Borne Illnesses

The US Centers for Disease Control and Prevention (CDC) list these circumstances as the most likely to lead to illness.

- Inadequate cooling and cold holding
- Preparing food too far in advance for service
- Poor personal hygiene and infected personnel
- Inadequate re-heating and hot holding
- Contaminated raw foods and ingredients

The Heimlich Maneuver

THE HEIMLICH MANEUVER IS AN EMERGENCY METHOD OF REMOVING FOOD OR FOREIGN OBJECTS FROM THE AIRWAY TO PREVENT SUFFOCATION.

When approaching a choking person, one who is still conscious, ask: **“Can you cough? Can you speak?”** If the person can speak or cough, do not perform the Heimlich maneuver or pat them on the back. Encourage them to cough.

Performing the Heimlich Maneuver (Adult)

1. Grasp the choking person from behind
2. Place a fist, thumb side in, just below the person’s breastbone (sternum), but above the naval
3. Wrap second hand firmly over this fist and pull the fist firmly and abruptly into the top of the stomach keeping the fist below the chest bones and above the naval
4. Repeat until the airway is free from obstruction or until the person loses consciousness
5. These should be violent thrusts and should be repeated until the airway is free of obstruction or the person loses consciousness

Performing the Heimlich Maneuver (Child)

1. Place your hands at the top of the pelvis
2. Put the thumb of your hand at the pelvis line
3. Put the other hand on top of your first hand
4. Pull forcefully back
5. Repeat until the airway is free from obstruction or until the child loses consciousness

Most individuals are fine after the obstruction is removed from the airway. However, occasionally, the object will go into one of the lungs. If there is any possibility that the obstruction was not completely expelled, medical care should be sought immediately.

Call 9-1-1 immediately if the obstruction is not removed completely by the Heimlich maneuver.

SECTION 13 – INCIDENT / INJURY TRACKING & REPORTING

WHAT TO REPORT: Any incident that causes any Player, Manager, Coach, Umpire, or Volunteer to receive first aid treatment must be reported to the Safety Officer. This includes even passive treatments such as the evaluation and diagnosis of the extent of the injury. Please also report any “near misses” to the Safety Officer as they provide valuable opportunities to proactively address safety issues.

WHEN TO REPORT: Within 48 hours of the incident.

HOW TO MAKE A REPORT: Managers/Coaches are required to have an Incident/Injury Tracking Report (**Attachment D**) form with them at all times. All the appropriate questions are outlined in this form. If an incident occurs, fill out the report and contact the Safety Officer for further instructions. At a minimum, the following information must be provided:

- 1) The name and phone number of the individual involved
- 2) The date, time, and location of the incident
- 3) A description of the incident with as much detail as possible
- 4) A preliminary estimation of the extent of any injuries
- 5) The name and phone number of the person reporting the incident

MANAGER/COACH RESPONSIBILITY: The Manager/Coach will fill out the Incident/Injury Tracking Report and submit it to the Safety Officer within 48 hours of the incident.

Accidents occurring outside the team (i.e., spectator injuries, concession stand injuries and third-party injuries) shall be handled directly by the league Safety Officer.

SAFETY OFFICER’S RESPONSIBILITY: Within 48 hours of receiving the Safety/Injury Report, the Safety Officer will contact the injured party or the party’s parents:

- 1) Verify the information received
- 2) Obtain any other information deemed necessary
- 3) Check on the status of the injured party
- 4) If the injured party required outside medical treatment (e.g., Emergency Room or Doctor’s Office visit, etc.), the Safety Officer shall:
 - a) advise the parent or guardian of the IRLI insurance coverage
 - b) advise the parent or guardian of the procedure for submitting any claims
 - c) provide the parent or guardian with the Incident/Injury Tracking Report (**Attachment D**) and Accident Notification Form & Instructions (**Attachment E**).
- 5) The Safety Officer may assist with the preparation and filing of any insurance claims
- 6) If the extent of the injury is more than minor in nature, the Safety Officer shall periodically contact the injured party to check on the status of the injury until the injury is resolved

SECTION 14 – FIRST AID KITS

The Safety Officer and/or Equipment Manager shall provide one (1) First Aid Kit and two (2) disposable ice packs to each team Manager at the start of the season. Upon request, the Safety Officer shall

replace or replenish any supplies within the IRLI-provided First Aid Kit or additional disposable ice packs.

SECTION 15 – SAFETY CODE

In addition to all rules published by Little League International and all local rules published by IRLI, all Managers, Coaches, Umpires, and Team Administrators shall adhere to the following Safety Code:

- (A) Responsibility for safety procedures belongs to every adult member of IRLI
- (B) Every player, Manager, Coach, and Umpire, shall use proper reasoning and care to prevent injury to him/her and to others
- (C) Managers must have medical release forms available (**Attachment F**)
- (D) Managers and Coaches will have mandatory training in First Aid and concussion
- (E) First-Aid kits are issued to each team Manager during the pre-season and the Manager will keep supplies current. Additional supplies can be obtained from the Safety Officer and at the concession stand
- (F) No games or practices will be held when weather or field conditions are poor, particularly when lighting is inadequate. The City of Irvine Mudd line number is 949-724-6833.
- (G) Play area will be inspected before games and practices for hazardous or unsafe conditions
- (H) Team equipment should be stored within the team dugout or behind screens, and not within the area defined by the umpires as in play
- (I) Only players, Managers, Coaches and Umpires are permitted on the playing field or in the dugout during games and practice sessions
- (J) 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
- (K) During warmup drills, players should be spaced so that no one is endangered by wild throws or missed catches
- (L) All pre-game warmups should be performed within the confines of the playing field and not within areas that are frequented by, and thus endangering spectators, (i.e., playing catch, pepper, swinging bats etc.)
- (M) Equipment should be inspected regularly for the condition of the equipment as well as for proper fit. Notify equipment manager if equipment is missing, broken or worn out
- (N) Batters must wear helmets that meet National Operating Committee on Standards for Athletic Equipment (NOCSAE) specifications and bear the NOCSAE stamp
- (O) No stickers, labels, tape or cracks in or on the helmet allowed at anytime. **NO EXCEPTIONS**
- (P) For the Little League (Majors) Division and below, head first slides are not permitted except when a runner is returning to a base [Rule 7.08]
- (Q) During sliding practice, bases should not be strapped down or anchored
- (R) At no time should "horse play" be permitted on the playing field
- (S) Parents of players who wear glasses should be encouraged to provide "safety glasses"
- (T) On deck batters are not permitted in the Little League (Majors) Division and below [Rule 1.08, Note 1]
- (U) Use of a traditional "donut" batting weight is prohibited [Rule 1.10, Note 1]
- (V) Once a ball has become discolored, it will be discarded
- (W) All male players must wear athletic supporters [Rule 1.17]
- (X) Managers are to encourage all male players to also wear cups during games and practices

- (Y) All male players playing the position of catcher must wear a metal, fiber, or plastic style cup [Rule 1.17]
- (Z) All catchers must wear an approved long-model or short-model chest protector with neck collar, throat guard, shin guards, and a catcher's helmet and mask with a "dangling" style throat protector, all of which must meet Little League specifications and standards except that a catcher may wear only a catcher's helmet and mask with a "dangling" style throat protector during infield/outfield practice and pitcher warm-up [Rule 1.17]
- (AA) The catcher's helmet must meet NOCSAE specifications and standards and bear the NOCSAE stamp. "Skullcaps" are not permitted. [Rule 1.17]
- (BB) Shoes with metal spikes or cleats are not permitted in the Little League Division or below. Shoes with molded cleats are permissible
- (CC) Players will not wear watches, rings, pins, jewelry or other metallic items during practices or games except that jewelry that alerts medical personnel to a specific condition is permissible but must be taped in place [Rule 1.11(j)]
- (DD) No food or drink, at any time, in the dugouts except for bottled water, water from drinking fountains, or other hydrating beverages (e.g., Gatorade, etc.)
- (EE) Catchers must wear a catcher's mitt (not a first baseman's mitt or fielder's glove) of any shape, size or weight consistent with protecting the hand
- (FF) Catchers may not catch, whether warming up a pitcher, in practices, or games without wearing full catcher's gear and an athletic cup as described above
- (GG) Managers will never leave an unattended child at a practice or game
- (HH) No children under the age of 15 are permitted in the Snack Bar without adult supervision
- (II) Never hesitate to report any present or potential safety hazard to the IRLLE Safety Officer.
- (JJ) Make arrangements to have a cellular phone available when a game or practice is at a facility that does not have public phones
- (KK) Speed Limit is 5 miles per hour in roadways and parking lots
- (LL) No alcohol or drugs allowed on the premises at any time
- (MM) No medication will be taken at the facility unless administered directly by the child's parent. This includes aspirin and Tylenol
- (NN) No playing in the parking lots at any time
- (OO) No use of tobacco (smoking, vaping or chewing) at any IRLLE facility including fields, stands, common areas, and parking lots
- (PP) No swinging bats or throwing baseballs at any time within the walkways and common areas
- (QQ) No throwing rocks
- (RR) No climbing fences
- (SS) No swinging, running or playing on dugout roofs
- (TT) Observe all posted signs
- (UU) Players and spectators should be alert at all times for foul balls and errant throws
- (VV) 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
- (WW) Bicycle helmets must be worn at all times when riding bicycles on the premises as well as to and from the premises
- (XX) Use crosswalks when crossing roadways. Always be alert for traffic
- (YY) No one is allowed on the complex with open wounds at any time. Wounds should be treated and properly bandaged
- (ZZ) There is no running allowed in the bleachers

- (AAA) Procedure should be established for retrieving foul balls batted out of the playing area
- (BBB) One Manager, Coach or other team Volunteer must be in the dugout at all times
- (CCC) Volunteers must fill out Little League Volunteer Application Form
- (DDD) Managers and Coaches are not allowed to catch pitchers including standing at the backstop during practices acting as an informal catcher for batting practice [Rule 3.09]

Managers and Coaches must sign the Manager's Acknowledgement form (**Attachment G**), acknowledging they understand and agree to comply with the Safety Plan and have undertaken the necessary training.

SECTION 16 – PLAYER / MANAGER / COACH DATA

Player, Manager, and Coach data must be supplied to Little League International annually. Little League player registration data or player roster data, which also includes Manager and Coach data, must be submitted separately through the Little League Baseball Data Center within two weeks of the last draft and shall be updated as needed. The Player Agent shall be responsible for this task.

SECTION 17 – LITTLE LEAGUE SURVEY

The Safety Officer shall, on an annual basis, report to Little League International the number of background checks performed by IRLI as well as the means used to conduct the background checks. The Safety Officer shall be responsible for this task.

SECTION 18 – ALCOHOL, TOBACCO, AND MARIJUANA USE PROHIBITED

Although legal under California law, use of alcohol, tobacco, and marijuana is prohibited at all games and practices. This includes use by anyone whether on the field, in the dugout, in the stands, in the parking lots, or in the vicinity of any IRLI game or practice.

SECTION 19 – ZERO TOLERANCE OF ABUSE

The safety of our league is our most important function. IRLI will not tolerate any type of abuse, whether physical, verbal, emotional/psychological, or otherwise, or intentional violation of the Safety Code, whether directed at any player, Volunteer, parent, family member, or other supporter, spectator, or participant.

SECTION 20 – COVID-19 SAFETY PROTOCOLS

Every individual participating in league activities (volunteers, players, and spectators) will be expected to adhere to the safety measures set forth in our attached Return to Play Protocol (**Attachment H**). Any player/manager/coach/spectator who refuses to adhere to the protocols after one warning will be asked to leave the field site immediately.

ATTACHMENT A



Little League® Volunteer Application - 2021

Do not use forms from past years. Use extra paper to complete if additional space is required.



This volunteer application should only be used if a league is manually entering information into JDP or an outside background check provider that meets the standards of Little League Regulations 1(c)9. THIS FORM SHOULD NOT BE COMPLETED IF A LEAGUE IS UTILIZING THE JDP QUICKAPP. Visit LittleLeague.org/localBGcheck for more information.

A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION.

All RED fields are required.

Name _____ Date _____
First Middle Name or Initial Last

Address _____

City _____ State _____ Zip _____

Social Security # (mandatory) _____

Cell Phone _____ Business Phone _____

Home Phone: _____ E-mail Address: _____

Date of Birth _____

Occupation _____

Employer _____

Address _____

Special professional training, skills, hobbies: _____

Community affiliations (Clubs, Service Organizations, etc.): _____

Previous volunteer experience (including baseball/softball and year): _____

1. Do you have children in the program? _____ Yes No
If yes, list full name and what level? _____

2. Special Certification (CPR, Medical, etc.)? If yes, list: _____ Yes No

3. Do you have a valid driver's license? _____ Yes No
Driver's license#: _____ State _____

4. Have you ever been charged with, convicted of, plead no contest, or guilty to any crime(s) involving or against a minor, or of a sexual nature? _____ Yes No
If yes, describe each in full: _____
(If volunteer answered yes to Question 4, the local league must contact the Little League Security Manager.)

5. Have you ever been convicted of or plead no contest or guilty to any crime(s)? _____ Yes No
If yes, describe each in full: _____
(Answering yes to Question 5, does not automatically disqualify you as a volunteer.)

6. Do you have any criminal charges pending against you regarding any crime(s)? _____ Yes No
If yes, describe each in full: _____
(Answering yes to Question 6, does not automatically disqualify you as a volunteer.)

7. Have you ever been refused participation in any other youth programs and/or listed on the SafeSport Centralized Disciplinary Database or USA Baseball Ineligible List? Yes No

If yes, explain: _____
(If volunteer answered yes to Question 7, the local league must contact the Little League Security Manager.)

In which of the following would you like to participate? (Check one or more.)

- League Official Umpire Manager Concession Stand
- Coach Field Maintenance Scorekeeper Other _____

Please list three references, at least one of which has knowledge of your participation as a volunteer in a youth program:

Name/Phone _____

IF YOU LIVE IN A STATE THAT REQUIRES A SEPARATE BACKGROUND CHECK BY LAW, PLEASE ATTACH A COPY OF THAT STATE'S BACKGROUND CHECK. FOR MORE INFORMATION ON STATE LAWS, VISIT OUR WEBSITE: LittleLeague.org/BgStateLaws

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(s) on me now and as long as I continue to be active with the organization, which may include a review of sex offender registries (some of which contain name only searches which may result in a report being generated that may or may not be me), child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, Little League is not obligated to appoint me to a volunteer position. I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for violation of Little League policies or principles.

Applicant Signature _____ Date _____

If Minor/Parent Signature _____ Date _____

Applicant Name (please print or type) _____

NOTE: The local Little League and Little League Baseball, Incorporated will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

LOCAL LEAGUE USE ONLY:

Background check completed by league officer _____ on _____

System(s) used for background check (minimum of one must be checked):

Review the Little League Regulation 1(c)9 for all background check requirements

JDP (Includes review of the SafeSport Centralized Disciplinary and USA Baseball Ineligible List) * OR _____

National Criminal Database check SafeSport Centralized Disciplinary Database and/or

National Sex Offender Registry USA Baseball Ineligible List Sex Offender

* Please be advised that if you use JDP and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter or email directly from JDP in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.

Only attach to this application copies of background check reports that reveal convictions of this application.

ATTACHMENT B

Concussion

INFORMATION SHEET



This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.


What Is a Concussion?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.

How Can I Help Keep My Children or Teens Safe?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
 - Work with their coach to teach ways to lower the chances of getting a concussion.
 - Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
 - Ensure that they follow their coach's rules for safety and the rules of the sport.
 - Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.

 **Plan ahead.** What do you want your child or teen to know about concussion?

How Can I Spot a Possible Concussion?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just "don't feel right" after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

Signs Observed by Parents or Coaches

- Appears dazed or stunned
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events *prior to* or *after* a hit or fall

Symptoms Reported by Children and Teens

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness, or double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Confusion, or concentration or memory problems
- Just not "feeling right," or "feeling down"

Talk with your children and teens about concussion. Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious, or worry that if they report a concussion they will lose their position on the team or look weak. Be sure to remind them that *it's better to miss one game than the whole season.*



CONCUSSIONS AFFECT EACH CHILD AND TEEN DIFFERENTLY.

While most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children's or teens' healthcare provider if their concussion symptoms do not go away, or if they get worse after they return to their regular activities.

What Are Some More Serious Danger Signs to Look Out For?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other
- Drowsiness or inability to wake up
- A headache that gets worse and does not go away
- Slurred speech, weakness, numbness, or decreased coordination
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching)
- Unusual behavior, increased confusion, restlessness, or agitation
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously

Children and teens who continue to play while having concussion symptoms, or who return to play too soon—while the brain is still healing—have a greater chance of getting another concussion. A repeat concussion that occurs while the brain is still healing from the first injury can be very serious, and can affect a child or teen for a lifetime. It can even be fatal.

What Should I Do If My Child or Teen Has a Possible Concussion?

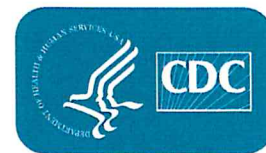
As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a healthcare provider and only return to play with permission from a healthcare provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's healthcare provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a healthcare provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a healthcare provider.

To learn more, go to [cdc.gov/HEADSUP](https://www.cdc.gov/HEADSUP)



Discuss the risks of concussion and other serious brain injuries with your child or teen, and have each person sign below.

Detach the section below, and keep this information sheet to use at your children's or teens' games and practices to help protect them from concussion or other serious brain injuries.

I learned about concussion and talked with my parent or coach about what to do if I have a concussion or other serious brain injury.

Athlete's Name Printed: _____ Date: _____

Athlete's Signature: _____

I have read this fact sheet for parents on concussion with my child or teen, and talked about what to do if they have a concussion or other serious brain injury.

Parent or Legal Guardian's Name Printed: _____ Date: _____

Parent or Legal Guardian's Signature: _____

ATTACHMENT C

PRE-GAME FIELD INSPECTION CHECK LIST

Date	Time	Field
Home Team Manager	Visiting Team Manager	Umpire Crew Chief

Field Condition	Ye s	No
Backstop Intact		
Home plate Intact		
Bases Secure		
Pitcher's Mound safe		
Batter box lined/level		
Infield fence repair		
Outfield fence repair		
Foul lines marked		
Infield need repairs		
Outfield need repairs		
Warning Track		
Coaches boxes lined		
Free of foreign objects		
Grass surface even		
Player Equipment	Ye s	No
Batting Helmets		
Jewelry Removed		
Shoes/Bats inspected		
Face Mask (Minor/Mjrs)		
Proper Cleats		
Athletic Cups (boys)		
Full Uniform		

Catchers Equipment	Ye s	No
Hockey Catchers Helmet		
Dangling throat guard		
Helmets		
Catcher's mitt		
Chest Protector		
Shin guards		
Dugouts	Ye s	No
Fencing needs repair		
Bench needs repair		
Trash Cans		
Clean up is needed		
Spectator Area	Ye s	No
Bleachers need repair		
Protective screens ok		
Bleachers Clean		
Parking area safe		
Safety Equipment	Ye s	No
First-aid Kit each team		
Medical Release forms		
Ice Pack/Ice		
Safety Manual		
Injury Report Forms		
Drinking Water		

**REPORT ANY PROBLEMS AND SUBMIT YOUR COMPLETED FORM
TO THE SAFETY OFFICER AND YOUR DIVISION COMMISSINER**

Report any problems to any one of the three City of Irvine Field Ambassadors hotlines at:
(949) 254-1444 (949) 337-5238 (949) 337-5827

ATTACHMENT D

For Local League Use Only

Activities/Reporting

**A Safety Awareness Program's
Incident/Injury Tracking Report**

League Name: _____ League ID: ____ - ____ - ____ Incident Date: _____

Field Name/Location: _____ Incident Time: _____

Injured Person's Name: _____ Date of Birth: _____

Address: _____ Age: _____ Sex: Male Female

City: _____ State _____ ZIP: _____ Home Phone: () _____

Parent's Name (If Player): _____ Work Phone: () _____

Parents' Address (If Different): _____ City _____

Incident occurred while participating in:

- A.) Baseball Softball Challenger TAD
- B.) Challenger T-Ball Minor Major Intermediate (50/70)
- Junior Senior Big League
- C.) Tryout Practice Game Tournament Special Event
- Travel to Travel from Other (Describe): _____

Position/Role of person(s) involved in incident:

- D.) Batter Baserunner Pitcher Catcher First Base Second
- Third Short Stop Left Field Center Field Right Field Dugout
- Umpire Coach/Manager Spectator Volunteer Other: _____

Type of injury: _____

Was first aid required? Yes No If yes, what: _____

Was professional medical treatment required? Yes No If yes, what: _____
(If yes, the player must present a non-restrictive medical release prior to to being allowed in a game or practice.)

Type of incident and location:

- A.) On Primary Playing Field B.) Adjacent to Playing Field D.) Off Ball Field
- Base Path: Running *or* Sliding Seating Area Travel:
- Hit by Ball: Pitched *or* Thrown *or* Batted Parking Area Car *or* Bike *or*
- Collision with: Player *or* Structure C.) Concession Area Walking
- Grounds Defect Volunteer Worker League Activity
- Other: _____ Customer/Bystander Other: _____

Please give a short description of incident: _____

Could this accident have been avoided? How: _____

This form is for local Little League use only (should not be sent to Little League International). This document should be used to evaluate potential safety hazards, unsafe practices and/or to contribute positive ideas in order to improve league safety. When an accident occurs, obtain as much information as possible. For all Accident claims or injuries that could become claims to any eligible participant under the Accident Insurance policy, please complete the Accident Notification Claim form available at http://www.littleleague.org/Assets/forms_pubs/asap/AccidentClaimForm.pdf and send to Little League International. For all other claims to non-eligible participants under the Accident policy or claims that may result in litigation, please fill out the General Liability Claim form available here: http://www.littleleague.org/Assets/forms_pubs/asap/GLClaimForm.pdf.

Prepared By/Position: _____ Phone Number: (____) _____
Signature: _____ Date: _____

ATTACHMENT E



LITTLE LEAGUE® BASEBALL AND SOFTBALL ACCIDENT NOTIFICATION FORM INSTRUCTIONS

Send Completed Form To:
 Little League® International
 539 US Route 15 Hwy, PO Box 3485
 Williamsport PA 17701-0485
Accident Claim Contact Numbers:
 Phone: 570-327-1674

Accident & Health (U.S.)

1. This form must be completed by parents (if claimant is under 19 years of age) and a league official and forwarded to Little League Headquarters within 20 days after the accident. A photocopy of this form should be made and kept by the claimant/parent. Initial medical/dental treatment must be rendered within 30 days of the Little League accident.
2. Itemized bills including description of service, date of service, procedure and diagnosis codes for medical services/supplies and/or other documentation related to claim for benefits are to be provided within 90 days after the accident date. In no event shall such proof be furnished later than 12 months from the date the medical expense was incurred.
3. When other insurance is present, parents or claimant must forward copies of the Explanation of Benefits or Notice/Letter of Denial for each charge directly to Little League Headquarters, even if the charges do not exceed the deductible of the primary insurance program.
4. Policy provides benefits for eligible medical expenses incurred within 52 weeks of the accident, subject to Excess Coverage and Exclusion provisions of the plan.
5. **Limited** deferred medical/dental benefits may be available for necessary treatment incurred after 52 weeks. Refer to insurance brochure provided to the league president, or contact Little League Headquarters within the year of injury.
6. Accident Claim Form must be fully completed - including Social Security Number (SSN) - for processing.

League Name				League I.D.	
Name of Injured Person/Claimant		SSN	PART 1	Date of Birth (MM/DD/YY)	Age
					Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
Name of Parent/Guardian, if Claimant is a Minor				Home Phone (Inc. Area Code)	Bus. Phone (Inc. Area Code)
				()	()
Address of Claimant			Address of Parent/Guardian, if different		

The Little League Master Accident Policy provides benefits in **excess** of benefits from other insurance programs subject to a \$50 deductible per injury. "Other insurance programs" include family's personal insurance, student insurance through a school or insurance through an employer for employees and family members. Please CHECK the appropriate boxes below. If YES, follow instruction 3 above.

Does the insured Person/Parent/Guardian have any insurance through:

Employer Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	School Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No
Individual Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	Dental Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of Accident	Time of Accident	Type of Injury
	<input type="checkbox"/> AM <input type="checkbox"/> PM	

Describe exactly how accident happened, including playing position at the time of accident:

Check all applicable responses in **each** column:

<input type="checkbox"/> BASEBALL	<input type="checkbox"/> CHALLENGER (4-18)	<input type="checkbox"/> PLAYER	<input type="checkbox"/> TRYOUTS	<input type="checkbox"/> SPECIAL EVENT (NOT GAMES)
<input type="checkbox"/> SOFTBALL	<input type="checkbox"/> T-BALL (4-7)	<input type="checkbox"/> MANAGER, COACH	<input type="checkbox"/> PRACTICE	<input type="checkbox"/> SCHEDULED GAME
<input type="checkbox"/> CHALLENGER	<input type="checkbox"/> MINOR (6-12)	<input type="checkbox"/> VOLUNTEER UMPIRE	<input type="checkbox"/> TRAVEL TO	<input type="checkbox"/> SPECIAL GAME(S) (Submit a copy of your approval from Little League Incorporated)
<input type="checkbox"/> TAD (2ND SEASON)	<input type="checkbox"/> LITTLE LEAGUE (9-12)	<input type="checkbox"/> PLAYER AGENT	<input type="checkbox"/> TRAVEL FROM	
	<input type="checkbox"/> INTERMEDIATE (50/70) (11-13)	<input type="checkbox"/> OFFICIAL SCOREKEEPER	<input type="checkbox"/> TOURNAMENT	
	<input type="checkbox"/> JUNIOR (12-14)	<input type="checkbox"/> SAFETY OFFICER	<input type="checkbox"/> OTHER (Describe)	
	<input type="checkbox"/> SENIOR (13-16)	<input type="checkbox"/> VOLUNTEER WORKER		

I hereby certify that I have read the answers to all parts of this form and to the best of my knowledge and belief the information contained is complete and correct as herein given.

I understand that it is a crime for any person to intentionally attempt to defraud or knowingly facilitate a fraud against an insurer by submitting an application or filing a claim containing a false or deceptive statement(s). See Remarks section on reverse side of form.

I hereby authorize any physician, hospital or other medically related facility, insurance company or other organization, institution or person that has any records or knowledge of me, and/or the above named claimant, or our health, to disclose, whenever requested to do so by Little League and/or National Union Fire Insurance Company of Pittsburgh, Pa. A photostatic copy of this authorization shall be considered as effective and valid as the original.

Date	Claimant/Parent/Guardian Signature (In a two parent household, both parents must sign this form.)
Date	Claimant/Parent/Guardian Signature

For Residents of California:

Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

For Residents of New York:

Any person who knowingly and with the intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

For Residents of Pennsylvania:

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

For Residents of All Other States:

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

PART 2 - LEAGUE STATEMENT (Other than Parent or Claimant)

Name of League	Name of Injured Person/Claimant	League I.D. Number
Name of League Official	Position in League	
Address of League Official	Telephone Numbers (Inc. Area Codes) Residence: () Business: () Fax: ()	

Were you a witness to the accident? Yes No
Provide names and addresses of any known witnesses to the reported accident.

Check the boxes for all appropriate items below. At least one item in each column must be selected.

POSITION WHEN INJURED	INJURY	PART OF BODY	CAUSE OF INJURY
<input type="checkbox"/> 01 1ST	<input type="checkbox"/> 01 ABRASION	<input type="checkbox"/> 01 ABDOMEN	<input type="checkbox"/> 01 BATTED BALL
<input type="checkbox"/> 02 2ND	<input type="checkbox"/> 02 BITES	<input type="checkbox"/> 02 ANKLE	<input type="checkbox"/> 02 BATTING
<input type="checkbox"/> 03 3RD	<input type="checkbox"/> 03 CONCUSSION	<input type="checkbox"/> 03 ARM	<input type="checkbox"/> 03 CATCHING
<input type="checkbox"/> 04 BATTER	<input type="checkbox"/> 04 CONTUSION	<input type="checkbox"/> 04 BACK	<input type="checkbox"/> 04 COLLIDING
<input type="checkbox"/> 05 BENCH	<input type="checkbox"/> 05 DENTAL	<input type="checkbox"/> 05 CHEST	<input type="checkbox"/> 05 COLLIDING WITH FENCE
<input type="checkbox"/> 06 BULLPEN	<input type="checkbox"/> 06 DISLOCATION	<input type="checkbox"/> 06 EAR	<input type="checkbox"/> 06 FALLING
<input type="checkbox"/> 07 CATCHER	<input type="checkbox"/> 07 DISMEMBERMENT	<input type="checkbox"/> 07 ELBOW	<input type="checkbox"/> 07 HIT BY BAT
<input type="checkbox"/> 08 COACH	<input type="checkbox"/> 08 EPIPHYSES	<input type="checkbox"/> 08 EYE	<input type="checkbox"/> 08 HORSEPLAY
<input type="checkbox"/> 09 COACHING BOX	<input type="checkbox"/> 09 FATALITY	<input type="checkbox"/> 09 FACE	<input type="checkbox"/> 09 PITCHED BALL
<input type="checkbox"/> 10 DUGOUT	<input type="checkbox"/> 10 FRACTURE	<input type="checkbox"/> 10 FATALITY	<input type="checkbox"/> 10 RUNNING
<input type="checkbox"/> 11 MANAGER	<input type="checkbox"/> 11 HEMATOMA	<input type="checkbox"/> 11 FOOT	<input type="checkbox"/> 11 SHARP OBJECT
<input type="checkbox"/> 12 ON DECK	<input type="checkbox"/> 12 HEMORRHAGE	<input type="checkbox"/> 12 HAND	<input type="checkbox"/> 12 SLIDING
<input type="checkbox"/> 13 OUTFIELD	<input type="checkbox"/> 13 LACERATION	<input type="checkbox"/> 13 HEAD	<input type="checkbox"/> 13 TAGGING
<input type="checkbox"/> 14 PITCHER	<input type="checkbox"/> 14 PUNCTURE	<input type="checkbox"/> 14 HIP	<input type="checkbox"/> 14 THROWING
<input type="checkbox"/> 15 RUNNER	<input type="checkbox"/> 15 RUPTURE	<input type="checkbox"/> 15 KNEE	<input type="checkbox"/> 15 THROWN BALL
<input type="checkbox"/> 16 SCOREKEEPER	<input type="checkbox"/> 16 SPRAIN	<input type="checkbox"/> 16 LEG	<input type="checkbox"/> 16 OTHER
<input type="checkbox"/> 17 SHORTSTOP	<input type="checkbox"/> 17 SUNSTROKE	<input type="checkbox"/> 17 LIPS	<input type="checkbox"/> 17 UNKNOWN
<input type="checkbox"/> 18 TO/FROM GAME	<input type="checkbox"/> 18 OTHER	<input type="checkbox"/> 18 MOUTH	
<input type="checkbox"/> 19 UMPIRE	<input type="checkbox"/> 19 UNKNOWN	<input type="checkbox"/> 19 NECK	
<input type="checkbox"/> 20 OTHER	<input type="checkbox"/> 20 PARALYSIS/ PARAPLEGIC	<input type="checkbox"/> 20 NOSE	
<input type="checkbox"/> 21 UNKNOWN		<input type="checkbox"/> 21 SHOULDER	
<input type="checkbox"/> 22 WARMING UP		<input type="checkbox"/> 22 SIDE	
		<input type="checkbox"/> 23 TEETH	
		<input type="checkbox"/> 24 TESTICLE	
		<input type="checkbox"/> 25 WRIST	
		<input type="checkbox"/> 26 UNKNOWN	
		<input type="checkbox"/> 27 FINGER	

Does your league use batting helmets with attached face guards? YES NO
If YES, are they Mandatory or Optional At what levels are they used?

I hereby certify that the above named claimant was injured while covered by the Little League Baseball Accident Insurance Policy at the time of the reported accident. I also certify that the information contained in the Claimant's Notification is true and correct as stated, to the best of my knowledge.

Date	League Official Signature
------	---------------------------

ATTACHMENT F



Little League Baseball and Softball MEDICAL RELEASE



NOTE: To be carried by any Regular Season or Tournament Team Manager together with team roster or International Tournament affidavit.

Player: _____ Date of Birth: _____ Gender (M/F): _____

Parent (s)/Guardian Name: _____ Relationship: _____

Parent (s)/Guardian Name: _____ Relationship: _____

Player's Address: _____ City: _____ State/Country: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Mobile Phone: _____

PARENT OR LEGAL GUARDIAN AUTHORIZATION: _____ Email: _____

In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel. (i.e. EMT, First Responder, E.R. Physician)

Family Physician: _____ Phone: _____

Address: _____ City: _____ State/Country: _____

Hospital Preference: _____

Parent Insurance Co: _____ Policy No.: _____ Group ID#: _____

League Insurance Co: _____ Policy No.: _____ League/Group ID#: _____

If parent(s)/legal guardian cannot be reached in case of emergency, contact:

Name Phone Relationship to Player

Name Phone Relationship to Player

Please list any allergies/medical problems, including those requiring maintenance medication. (i.e. Diabetic, Asthma, Seizure Disorder)

Medical Diagnosis	Medication	Dosage	Frequency of Dosage

Date of last Tetanus Toxoid Booster: _____

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.

Mr./Mrs./Ms. _____
Authorized Parent/Guardian Signature Date:

FOR LEAGUE USE ONLY:

League Name: _____ League ID: _____

Division: _____ Team: _____ Date: _____

WARNING: PROTECTIVE EQUIPMENT CANNOT PREVENT ALL INJURIES A PLAYER MIGHT RECEIVE WHILE PARTICIPATING IN BASEBALL/SOFTBALL.
Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.

ATTACHMENT G

Manager's Acknowledgement

I, _____, acknowledge:

1. I will abide by and comply with the 2021 Rulebook published by Little League Baseball, Incorporated, and all Local Rules published by Irvine Ranch Little League ("IRLL") keeping in mind that many of such rules were drafted and implemented with the safety of the players, managers, coaches, umpires, other volunteers, and spectators as a primary concern.
2. I have received and been trained on the IRLL 2021 Safety Manual. I will read, understand, abide by, and comply with, the IRLL 2021 Safety Manual.
3. I submitted the appropriate Little League Volunteer Application with a legible copy of my government-issued photo identification to the IRLL Safety Officer and I submitted to a background check through JDP (www.jdp.com).
4. I completed the "HEADS UP to Youth Sports: Online Training" (www.cdc.gov/headsup/youthsports) and submitted my "Certificate of Completion" to the Safety Officer.
5. I will ensure that each player (and their parent or guardian) on my team receives, signs, and returns the "Concussion Information Sheet" and I will submit the signed copy to the Safety Officer.
6. I attended an IRLL Rules/Coaches Clinic within the last three (3) years and I, or at least one approved coach from my team, attended the IRLL Rules/Coaches Clinic for the current season.
7. I, or at least one approved coach from my team, attended an IRLL First Aid Safety and Treatment Clinic for the current season.
8. I will conduct a field inspection prior to each game and complete and submit a "Pre-Game Field Inspection Checklist" to the Safety Officer and my Division Commissioner within twenty four (24) hours of the completion of the game. I will also conduct a field inspection prior to each practice and report any safety issues to the Safety Officer and my Division Commissioner within twenty-four (24) hours.
9. I will regularly inspect all baseball equipment being used by my team and will remove any illegal or unsafe equipment from use immediately. I will report the removal of any such equipment issued by IRLL to the IRLL Equipment Manager and I will request a replacement of any such equipment.
10. I will report any incident that causes any player, manager, coach, umpire, or other league volunteer to receive first aid treatment to the Safety Officer within forty-eight (48) hours of occurrence using the "Incident/Injury Tracking Report."
11. I will ensure that the following are present at each team function, even those that are not specifically baseball-related: a) A printed copy of the 2021 Safety Manual; b) A printed, completed, and signed Medical Release for each player on my team; c) A printed copy of the Incident/Injury Tracking Form; d) All IRLL-issued baseball equipment; and, e) The IRLL-issued First-Aid Kit and Ice Packs.
12. Prior to allowing them any contact with the players on my team, I will ensure that all of my coaches, my Team Administrator(s), and any other persons who will have repetitive access to or contact with the players on my team: a) Submit the appropriate Little League Volunteer Application with a copy of their government-issued photo identification to the Safety Officer; b) Submit to a background check through JDP (www.jdp.com); c) Complete the "HEADS UP to Youth Sports: Online Training" for concussions (www.cdc.gov/headsup/youthsports) and submit their "Certificate of Completion" to the Safety Officer.

Date: _____

Manager's Signature: _____

ATTACHMENT H

SOUTHERN CALIFORNIA LITTLE LEAGUE

2020-2021 COVID-19 RETURN TO PLAY PROTOCOL

Little League Name: Irvine Ranch Little League

California District 55

The following plan has been established to resume Little League Baseball activities while protecting and supporting our players' health, practice social distancing, limit large gatherings, and minimize risks of COVID-19. This guidance has been created to be compliant with the COVID-19 INTERIM GUIDANCE: Youth Sports as set out by the state of California, as well as the Irvine Athletics Return to Play Protocols and Little League Best Practices. This document has been approved by Irvine Ranch's Board of Directors and will be submitted to the City of Irvine for final approval. No activities will begin until the State of California and the County of Orange have given their approval to begin youth sports activities, and only in accordance with state and local guidance. These activities will take place on City of Irvine Fields. An approved copy of this document can be found in Irvine Ranch's Safety Plan.

I. TEAM ROSTERS & ADULT PARTICIPATION FOR PRACTICES/BATTING CAGES/CAMPS

PLAYERS

Team rosters should not exceed 13 players per team on any given practice day or camp

Competitive Teams – Juniors, Intermediate, Majors, AAA, AA Divisions

9-13 players maximum per team are permitted on one playing field at one time.

Non-Competitive Teams - Tee Ball, Rookie, A Ball Divisions

8-12 players maximum per team on any given game or practice day are permitted for Tee Ball, Rookie and A Ball divisions.

All Players for Both Competitive and Non-Competitive Teams

During practices, dugouts should not be used.

Players shall put their equipment bag outside the dugout.

Players shall only use their own equipment—no sharing of equipment except for baseballs.

Players shall use face coverings before and after practice

MANAGERS/COACHES

All Teams

A combination of **3 league-approved adult volunteers** are permitted to be involved with each team. In order to maintain stable cohorts, these 3 volunteers, once designated, must remain the same for the duration.

1 Team Manager per team (required)

o Required to wear cloth face covering

1 or 2 Assistant Coaches per team

o Required to wear cloth face covering

A Parent Volunteer may be used to help the assistant coach monitor the players between drills

o Enforces social distancing of players during drills.

o Reminds players to wear face coverings before and after practices.

o Required to wear cloth face covering

Non-Competitive Teams

Due to the age, developmental level, and physical abilities of the players within the non-competitive divisions (Tee Ball, Rookie, A Ball), additional approved adult volunteers are permitted, but not required, during practice.

There will be a maximum of **4 approved volunteers** (1 Team Manager, 1 or 2 Assistant Coaches, 1 or 2 Parent Volunteers).

Board of Director approval will be required to include additional volunteers during games and practices

SOUTHERN CALIFORNIA LITTLE LEAGUE

2020-2021 COVID-19 RETURN TO PLAY PROTOCOL

(as needed to play).

All approved volunteers assisting with the non-competitive divisions must wear a face covering while they assist and interact with the players.

OTHER ADULT ROLES

Safety Officer

- o Each team must have a designated Safety Officer to serve as a point of contact for the league and team members for all questions related to Covid-19 and these protocols.
- o The Safety Officer is responsible for screening all players before each practice, using the Screening Questionnaire in Section VIII. If the Safety Officer is absent from practice, the Team Manager is responsible for screening the players.

II. EQUIPMENT PROTOCOL

PLAYER EQUIPMENT

Players are not to use bat racks or helmet racks.

Bats, helmets, and gloves are not to be shared between players.

- o If a player is using a “team” bat, that bat will be assigned to only that player for the duration of the practice. That bat must be sanitized before the next practice.
- o If a player is using a “team” helmet, that helmet will be assigned to only that player for the duration of the practice. That helmet must be sanitized before the next practice.

Catchers cannot share equipment during practice.

- o League-provided catcher’s gear for each team should be used by only one player per day.
- o League-provided catcher’s gear is to be wiped down with sanitizing wipes prior to reuse (24 hours must pass before reuse).
- o Players can use their own catching gear but cannot lend it to other players if already used that day. Players to keep their own equipment in their own bag.

III. BEFORE AND AFTER PRACTICE—PLAYERS & SPECTATORS

PLAYER ARRIVAL TO FIELD & WARM-UPS

Players should arrive to the field no earlier than 30 minutes before practice time for warm-ups.

Players are not to congregate within a group prior to taking the field to warm up.

Each team to follow social distancing guidelines during warm-ups

- o Stretching—separate in a space to allow 6 feet apart
- o Running—run as a team spaced 6 feet apart
- o Throwing—ensure throwing distance is at least 6 feet apart
- o Defense warm-up—when taking grounders, players awaiting their turn should be spaced from the other players at least 6 feet apart
- o Pitcher/catcher warm-ups in bullpen only; coach is to maintain a distance of 6 feet from players during instruction; coach to wear face covering at all times while in the bullpen

DURING PRACTICE

Players are encouraged to use hand sanitizer as frequently as possible during the game or practice.

- o Players should have a personal bottle of sanitizer kept in their equipment bag.

No group gatherings at home plate following a home run.

No high fives or handshakes following a play or game.

Players are to bring their own water/Gatorade for use during the practice - no team water jugs or ice chests are permitted; players are not to share their drinks, bottles, or snacks with anyone.

Sunflower seeds are not allowed at any time.

SOUTHERN CALIFORNIA LITTLE LEAGUE

2020-2021 COVID-19 RETURN TO PLAY PROTOCOL

CONCLUSION OF PRACTICE

There will be no high-fives after practice.

The Team Manager or Assistant Coach can address the players while maintaining social distancing immediately after the conclusion of practice.

Congregation of teams/players is not allowed at the field—there is to be no after-practice team meeting involving parents at the field.

An assistant coach should wipe down players' bats after each game or practice.

Players and families will be asked to leave the practice site within 20 minutes of the practice concluding.

SPECTATORS AT THE FIELD (Spectators are defined as parents, caregivers, siblings, family, fans)

Spectators should try to limit their time at the field prior to practice or game time when possible, based on child's age and needs.

Spectators are not to congregate in a group outside of their stay-at-home family group.

Spectators will not be allowed to stand behind the home plate area within 6 feet of the backstop. Caution tape will be used to mark off the restricted area.

Bleachers will be closed to all spectators; bleachers will only be used as an extra area for players, managers, and coaches who are participating in a game.

All spectators will sit outside the field fence at least 6 feet away from the dugout/field entrance. Chairs, blankets, etc., may be set up by spectators.

There should be no more than 10 people sitting together in a "family group;" the "family group" is only to include their stay-at-home family.

There should be at least 10 feet between each "family group" along the fence line.

IV. SNACK BARS—FOOD & BEVERAGE

FOOD & BEVERAGES AT LEAGUE SNACK BARS

No food or concession sales will be allowed at facilities.

Families are encouraged to bring their own snacks and/or drinks.

V. FIELD SETUP AND MAINTENANCE

FIELD SETUP AT NON-CITY STAFFED FIELDS

Field setup and maintenance equipment at non-staffed fields (such as Dove Creek) will only be handled by a maximum of two league members per team who will be designated as the "field crew."

Field equipment includes, but is not be limited to, rakes, field drags, shovels, paint/chalk sprayers, and hoses.

Field crew are to be the only person(s) to use the field equipment.

Field crew to wear gloves during all field maintenance—including set up and tear down.

Field maintenance equipment to be wiped down after each use.

VI. FIELD FACILITIES & SURROUNDINGS

FIELD FACILITIES

All field restrooms are serviced by the City of Irvine and will be cleaned and stocked according to the city of Irvine's athletic facility procedures.

Where possible, restroom doors will be propped open, and entrance and exit doors designated.

SOUTHERN CALIFORNIA LITTLE LEAGUE

2020-2021 COVID-19 RETURN TO PLAY PROTOCOL

FIELD SURROUNDINGS

Informational signage will be posted throughout the field(s) regarding infection control, social distancing and the use of face coverings and gloves.

No unrelated visitors, sales representatives or outside distributors will be allowed at the field.

VII. TEAM PRACTICE PROTOCOL

TEAM PRACTICE

Team practice protocol shall align with all game day guidelines and protocol.

- No sharing of equipment.
- Proper social distance spacing during warm-up, practice drills and batting.
- Hand sanitizer to be used by players before and after use of any equipment and transition of offense and defense drills.
- Players should wear a face covering at all times

Enforcing social distancing, use of face coverings and sanitizing equipment shall be the sole responsibility of each team manager, team coach(es) and/or other approved adult league volunteer that is organizing a team practice.

Player's participation in team practice is at the sole discretion of the player's parent/caregiver; there will be no repercussion on game day for any player who does not attend a team practice.

BATTING CAGE PRACTICE

Batting cages are limited to a maximum of 2 people at any one time.

Players not actively hitting in a cage should be outside the cage, distanced 6 feet apart, and wear face coverings.

Bats shall not be shared.

Coaches are encouraged to pick up all balls to reduce sharing of equipment.

Players should sanitize their hands after each cage session.

VIII. ONGOING MONITORING PROTOCOLS

PERSONAL PREVENTION ACTIONS

All league members and visitors to the fields will be reminded of their responsibility to adhere to personal prevention actions including:

- Stay home when sick or having symptoms of becoming sick (i.e., symptoms of respiratory illness, fever, or cough)
- Wash hands frequently with soap and water for at least 20 seconds
- Cover coughs and sneezes with a tissue, dispose of the tissue and wash hands immediately after. If tissue is not available, cough or sneeze in elbow
- Do not touch eyes, mouth, or nose with unwashed hands
- Avoid contact with people who are sick or who are exhibiting symptoms of being sick
- Avoid sharing items
- Always maintain the recommended minimum of 6 feet separation from others
- Wear a face covering when unable to practice 6 feet of social distancing
- Sanitize frequently touched objects and surfaces

SCREENING

Before each practice, the team Safety Officer must screen all players and volunteers with ALL of the

SOUTHERN CALIFORNIA LITTLE LEAGUE

2020-2021 COVID-19 RETURN TO PLAY PROTOCOL

following:

- Visual wellness check
- Temperature check with no-touch thermometer
 - A temperature of 100.4 degrees or higher is considered a fever.
- Asking for verbal confirmation that the player/volunteer has not had close contact within the last 14 days with an individual infected with COVID-19, suspected of being infected with COVID-19, or exhibiting COVID-19 symptoms.
- Asking if the player/volunteer is experiencing any of the following symptoms:
 - Fever or chills?
 - Mild or moderate difficulty breathing?
 - New or worsening cough?
 - Sustained loss of smell, taste, or appetite?
 - Sore throat?
 - Vomiting or diarrhea?
 - Aching throughout the body?

If any of the above symptoms apply, then the player or volunteer should not join the practice or game and should see their health care provider immediately.

If any player or volunteer is showing symptoms of COVID-19, or has reason to believe they have been exposed to COVID-19, or has tested positive for COVID-19, the team Safety Officer must document the incident, and notify the League Safety Officer immediately while maintaining confidentiality.

In case of a positive COVID-19 case, the League Safety Officer will notify local health officials, the Irvine Ranch Board, and immediate team members and volunteers while maintaining confidentiality as required by state and federal laws.

Sick players or volunteers shall not return to practice until they have met CDC criteria to discontinue home isolation, including 3 days with no fever, symptoms have improved, and 10 days since symptoms first appeared.

PROTECTING THE FIELD ENVIRONMENT

All league members and visitors will be reminded of the importance of social distancing while at the fields as well as in all other environments.

A minimum of 6 feet of social distancing should be maintained at all times.

Face coverings should be worn.

Continued efforts to sanitize facilities, equipment, and areas and items of common touch points will be made.

ENSURING COOPERATION

Board Members and league officials will maintain ongoing communication with all members of the league to include all players/managers/coaches/spectators at the field to limit any violation of the safety protocols.

- All players/managers/coaches/spectators will be reminded that any violation of the social distancing and safety protocols will jeopardize the continued operation and opening of Little League games.
- Any player/manager/coach/spectator who refuses to adhere to the protocols after one warning will be asked to leave the field site immediately.

IX. TRAINING VOLUNTEERS AND FAMILIES

SAFETY ACTIONS

All league members and volunteers should be trained on the protocols and actions detailed in the previous sections, including but not limited to:

- Enhanced sanitation practices (see section II)
- Physical distancing guidelines and their importance (see section I)

SOUTHERN CALIFORNIA LITTLE LEAGUE 2020-2021 COVID-19 RETURN TO PLAY PROTOCOL

- Proper use, removal and washing of cloth face coverings
 - Screening practices (see section VII)
 - COVID-19 specific exclusion criteria
- Training will be conducted virtually

X. COMMUNICATION PLAN

RETURN TO PLAY GUIDELINES

An approved copy of this document will be published on the Irvine Ranch Little League website available for download.

An approved copy of this document will be included in the Irvine Ranch Little League Safety Manual.

ONGOING COMMUNICATION

Team Safety Officers are responsible for communicating any COVID-19 related concerns to the League Safety Officer.

The League Safety Officer is responsible for communicating COVID-19 related concerns to the appropriate City of Irvine representative, and for communicating to immediate team members, volunteers, and families in the case of a positive COVID-19 test.

**SOUTHERN CALIFORNIA LITTLE LEAGUE
2020-2021 COVID-19 RETURN TO PLAY PROTOCOL**

IX. LEAGUE GUIDELINES APPROVAL

These guidelines were established to allow our children the opportunity to participate in youth sports. These guidelines reflect the recommendations and views of the community and healthy care providers. Youth sports and local businesses are required to follow COVID-19 safety and preventative guidelines to remain open and active.

The following person may be contacted regarding the protocol:

Name	Position	Email	Signature	Date Approved
John Grijalva	League President	President@irvineranchll.org		
Laura Morgan	League Safety Officer	SafetyOfficer@irvineranchll.org		
Julie Walters	League Player Agent	PlayerAgent@irvineranchll.org		

X. PARENT/GUARDIAN ACKNOWLEDGEMENT

I understand and agree that these guidelines are necessary for my child(ren) to play Little league and that refusal to follow these guidelines may prevent Little League from remaining open for play and that I may be asked to leave the field if I do not abide by these guidelines.

Player Name: _____	Division: _____
Player Name: _____	Division: _____
Player Name: _____	Division: _____
Player Name: _____	Division: _____
Player Name: _____	Division: _____
Player Name: _____	Division: _____

Parent/Guardian Signature: _____ Date: _____