

# LACOMO CENTRAL Little League

## HIGGINSVILLE, MO

Proud members of MO District One



MISSION STATEMENT: LACOMO Central's mission is to bring high quality youth baseball and softball opportunities to our area's children. We are committed to providing a safe and fun environment with an emphasis on development, and teaching the game we all love.

# 2023 Safety Plan

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## Policy Statement

LACOMO CENTRAL Little League is committed to providing safe baseball and softball environment for all players, LACOMO CENTRAL families and the general public. It is the goal of LACOMO CENTRAL to ensure an ongoing emphasis on safety of all members of our community that come in contact with the league.

The following is LACOMO CENTRAL LLs Safety Plan. This plan is designed to address all aspects of creating a safe baseball/softball atmosphere as required by the Little League International “A Safety Awareness Program” (ASAP). The plan is submitted to Little League International for approval and also distributed to each board member, manager, coach, and the District Administrator. The safety plan is also available on our website [www.higginsvilleparksandrec.com](http://www.higginsvilleparksandrec.com).

Contact Information...

### **Emergency Phone Number**

Dial **911** for ambulance, police, and fire emergencies. Non Emergency Dispatch is 660.584.2104

### **Board Members**

CHRIS JOHNSON...816-812-4572	President
TANIA PESSETTO...816.813.7673	Treasurer
BETH GASH...660.238.1058	Secretary
JR. WEBB...660.233.3736	Member
KYLE WILKENS...660-864-4282	Member
JIM STONER...816-263-2082	Member
AARON KNIPMEYER...314-775-8718	Member
KENTE BOLDRIDGE...816-419-6299	Member
SANDIE NEAL...816-786-3591	Member
DAN RUMSEY...816.565.5003	Safety Officer/Player Agent – Park Liaison to the board

## **Safety Requirements**

### **Safety Officer**

Each year, Locomo Central will appoint a board member responsible for league safety. The Safety Officer will prepare the safety plan and ensure that it is distributed appropriately. The Safety Officer is on file with Little League International. Dan Rumsey has been appointed for 2023.

### **Volunteer Form**

Locomo Central will use the official Little League Volunteer form to screen all of our volunteers. Criminal Background Checks (CBC) may be conducted through Little League International using LexisNexis. Locomo Central will also conduct a search of the Nationwide Sex Offender Registry.

Locomo Central will not allow any person to perform in a volunteer role without a successful completion of the Volunteer Application and subsequent CBC.

A copy of the 2023 Volunteer Application can be found in Appendix A.

The League President will retain these confidential forms for the year of service.

### **Fundamentals Training**

Locomo Central will provide fundamentals training for all managers/coaches prior to the season. At least one manager/coach is required to attend. Every manager/coach will attend this training at least once every 3 years.

### **First-Aid Training**

Locomo Central will provide first-aid training for all managers/coaches prior to the season. At least one manager/coach is required to attend. Every manager/coach will attend this training at least once every 3 years.

The 2023 First-Aid Training will be facilitated by Dan Rumsey by April 1, 2023.

### **Safety Evaluations**

Lacomo Central encourages all managers/coaches to walk/inspect the fields prior to practices and games for hazards such as glass, rocks, holes, etc. Umpires will be required to walk the fields for hazards before each game. Hazardous conditions that can not be immediately eliminated should be reported to the League President or Safety Officer immediately.

Lacomo Central will complete the annual Little League Facility Survey online.

Lacomo Central will submit all rosters electronically and submit a Safety Plan Registration form.

Lacomo Central will have concession stand safety procedures posted in each stand. Guidelines and procedures will be provided by the Lafayette County Health Department.

Lacomo Central Equipment Manager will inspect all equipment prior to the season. Managers/coaches will be encouraged to inspect equipment prior to each practice and game. Any deficiencies should be reported to the League Equipment Manager or Safety Officer. Umpires will be required to inspect equipment prior to each game.

### **Accident Reporting**

In the event of an injury, managers must contact the League Safety Officer or the Player Agent in person or by phone within 24-48 hours. Managers must also submit an Incident/Injury Tracking Report to the League Safety Officer.

A copy of the 2023 Accident Notification Form can be found in Appendix B.

### **First-Aid Kits**

Lacomo Central provides all managers with first-aid kits. In addition, there will be a first-aid kit in each building. Managers are encouraged to have a first aid kit at each game and practice.

### **Rules**

Lacomo Central expects all managers/coaches to follow and enforce Little League Rules as most rules have a basis in safety.

- Catchers must wear required equipment at all times (even if warming up pitcher).
- No on-deck batters.
- Bases will disengage.
- Coaches will not warm up pitchers.

**Travel Safety**

Any manager/coach transporting any player to/from any Little League event is required to have auto insurance, ensure the player is using a safety restraint, and should adhere to all laws governing the route of transportation.

# Little League "Basic" Volunteer Application - 2019

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

This volunteer application can be used as a reference for leagues utilizing the JBP Quick App or for leagues that are using an outside background check provider that meets the standards of Little League Regulation 11C9.

All fields are required.

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
 Internet Username: \_\_\_\_\_

1. Have you ever been convicted of or placed on probation or parole for any crime involving or relating to child abuse?  
 If yes, describe in detail: \_\_\_\_\_ Yes ☐ No ☐  
 If yes, describe in detail: \_\_\_\_\_

2. Have you ever been convicted of or placed on probation or parole for any crime involving or relating to child abuse?  
 If yes, describe in detail: \_\_\_\_\_ Yes ☐ No ☐  
 If yes, describe in detail: \_\_\_\_\_

3. Have you ever been convicted of or placed on probation or parole for any crime involving or relating to child abuse?  
 If yes, describe in detail: \_\_\_\_\_ Yes ☐ No ☐  
 If yes, describe in detail: \_\_\_\_\_

4. Have you ever been convicted of or placed on probation or parole for any crime involving or relating to child abuse?  
 If yes, describe in detail: \_\_\_\_\_ Yes ☐ No ☐  
 If yes, describe in detail: \_\_\_\_\_

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

- ☐ League Official ☐ Head Warden/Manager ☐ Coaches Staff
- ☐ Umpire ☐ Manager ☐ Other \_\_\_\_\_
- ☐ Umpire ☐ Scorekeeper \_\_\_\_\_

## LOCAL LEAGUE USE ONLY

By submitting this application, you are certifying that you are not currently under investigation for any criminal offense involving child abuse, and you are not currently under investigation for any criminal offense involving child abuse. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation.

Please provide updated information below if there are any changes from previous years or requesting a new position.

Occupation: \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_

Special professional training or licenses: \_\_\_\_\_

Special Certifications (CPR, Medical, etc.): \_\_\_\_\_

Special Affiliations (CLC, Services Organizations, etc.): \_\_\_\_\_

Previous volunteer experience (including baseball/softball and years): \_\_\_\_\_

NOTE: This application is for use by individuals who are not currently under investigation for any criminal offense involving child abuse. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation.

By submitting this application, you are certifying that you are not currently under investigation for any criminal offense involving child abuse, and you are not currently under investigation for any criminal offense involving child abuse. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

If Volunteer/Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

NOTE: This application is for use by individuals who are not currently under investigation for any criminal offense involving child abuse. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation. If you are currently under investigation for any criminal offense involving child abuse, you must provide a written statement from the investigating agency explaining the nature of the investigation and the status of the investigation.

## Appendix B – Accident Notification

<b>Activities/Reporting</b>	<b>A Safety Awareness Program's Incident/Injury Tracking Report</b>
League Name: _____ League ID: ____ - ____ - ____ Incident Date: _____	
Field Name/Location: _____ Incident Time: _____	
Injured Person's Name: _____ Date of Birth: _____	
Address: _____ Age: _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
City: _____ State _____ ZIP: _____ Home Phone: (    ) _____	
Parent's Name (If Player): _____ Work Phone: (    ) _____	
Parents' Address (If Different): _____ City _____	
<b>Incident occurred while participating in:</b>	
A.) <input type="checkbox"/> Baseball <input type="checkbox"/> Softball <input type="checkbox"/> Challenger <input type="checkbox"/> TAD B.) <input type="checkbox"/> Challenger <input type="checkbox"/> T-Ball (5-8) <input type="checkbox"/> Minor (7-12) <input type="checkbox"/> Major (9-12) <input type="checkbox"/> Junior (13-14) <input type="checkbox"/> Senior (14-16) <input type="checkbox"/> Big League (16-18) C.) <input type="checkbox"/> Tryout <input type="checkbox"/> Practice <input type="checkbox"/> Game <input type="checkbox"/> Tournament <input type="checkbox"/> Special Event <input type="checkbox"/> Travel to <input type="checkbox"/> Travel from <input type="checkbox"/> Other (Describe): _____	
<b>Position/Role of person(s) involved in incident:</b>	
D.) <input type="checkbox"/> Batter <input type="checkbox"/> Baserunner <input type="checkbox"/> Pitcher <input type="checkbox"/> Catcher <input type="checkbox"/> First Base <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Short Stop <input type="checkbox"/> Left Field <input type="checkbox"/> Center Field <input type="checkbox"/> Right Field <input type="checkbox"/> Dugout <input type="checkbox"/> Umpire <input type="checkbox"/> Coach/Manager <input type="checkbox"/> Spectator <input type="checkbox"/> Volunteer <input type="checkbox"/> Other: _____	
Type of injury: _____	
Was first aid required? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what: _____	
Was professional medical treatment required? <input type="checkbox"/> Yes <input type="checkbox"/> 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.)	
<b>Type of incident and location:</b>	
A.) On Primary Playing Field      B.) Adjacent to Playing Field      D.) Off Ball Field <input type="checkbox"/> Base Path: <input type="checkbox"/> Running or <input type="checkbox"/> Sliding <input type="checkbox"/> Seating Area <input type="checkbox"/> Travel: <input type="checkbox"/> Hit by Ball: <input type="checkbox"/> Pitched or <input type="checkbox"/> Thrown or <input type="checkbox"/> Batted <input type="checkbox"/> Parking Area <input type="checkbox"/> Car or <input type="checkbox"/> Bike or <input type="checkbox"/> Collision with: <input type="checkbox"/> Player or <input type="checkbox"/> Structure      C.) Concession Area <input type="checkbox"/> Walking <input type="checkbox"/> Grounds Defect <input type="checkbox"/> Volunteer Worker <input type="checkbox"/> League Activity <input type="checkbox"/> Other: _____ <input type="checkbox"/> Customer/Bystander <input type="checkbox"/> Other: _____	
Please give a short description of incident: _____	
Could this accident have been avoided? How: _____	
<p>This form is for Little League purposes only, to report 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 claims or injuries which could become claims, please fill out and turn in the official Little League Baseball Accident Notification Form available from your league president and send to Little League Headquarters in Williamsport (Attention: Dan Kirby, Risk Management Department). Also, provide your District Safety Officer with a copy for District files. All personal injuries should be reported to Williamsport as soon as possible.</p>	
Prepared By/Position: _____ Phone Number: (____) _____	
Signature: _____ Date: _____	

**Form**



# Concession Stand Tips

## SAFETY FIRST

### Requirement 9

*12 Steps to Safe and Sanitary Food Service Events: The following information is intended to help you run a healthful concession stand.*

*Following these simple guidelines will help minimize the risk of foodborne illness. This information was provided by District Administrator George Glick, and is excerpted from "Food Safety Hints" by the Fort Wayne-Allen County, Ind., Department of Health.*

#### 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 temperature periodically to see if the food is cooling properly. Allowing hazardous foods to remain unrefrigerated for too long has been the number ONE cause of foodborne illness.

#### 5. Hand Washing.

Frequent and thorough hand washing remains the first line of defense in preventing foodborne 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 and 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. Wash in a four-step process:

1. Washing in hot soapy water;
2. Rinsing in clean water;
3. Chemical or heat sanitizing; and
4. 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 foodborne 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.

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

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

*Safety plans must be postmarked no later than May 1st.*

# Volunteers Must Wash Hands

## HOW



## WHEN

**Wash your hands before you prepare food or as often as needed.**

**Wash after you:**

- ▶ use the toilet
- ▶ touch uncooked meat, poultry, fish or eggs or other potentially hazardous foods
- ▶ interrupt working with food (such as answering the phone, opening a door or drawer)
- ▶ eat, smoke or chew gum
- ▶ touch soiled plates, utensils or equipment
- ▶ take out trash
- ▶ touch your nose, mouth, or any part of your body
- ▶ sneeze or cough

**Do not touch ready-to-eat foods with your bare hands.**

Use gloves, tongs, deli tissue or other serving utensils.  
Remove all jewelry, nail polish or false nails unless you wear gloves.

**Wear gloves.**

when you have a cut or sore on your hand  
when you can't remove your jewelry

**If you wear gloves:**

- ▶ wash your hands before you put on new gloves

**Change them:**

- ▶ as often as you wash your hands
- ▶ when they are torn or soiled

Developed by UMass Extension Nutrition Education Program with support from U.S. Food & Drug Administration in cooperation with the MA Partnership for Food Safety Education. United States Department of Agriculture Cooperating. UMass Extension provides equal opportunity in programs and employment.



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EXTENSION**