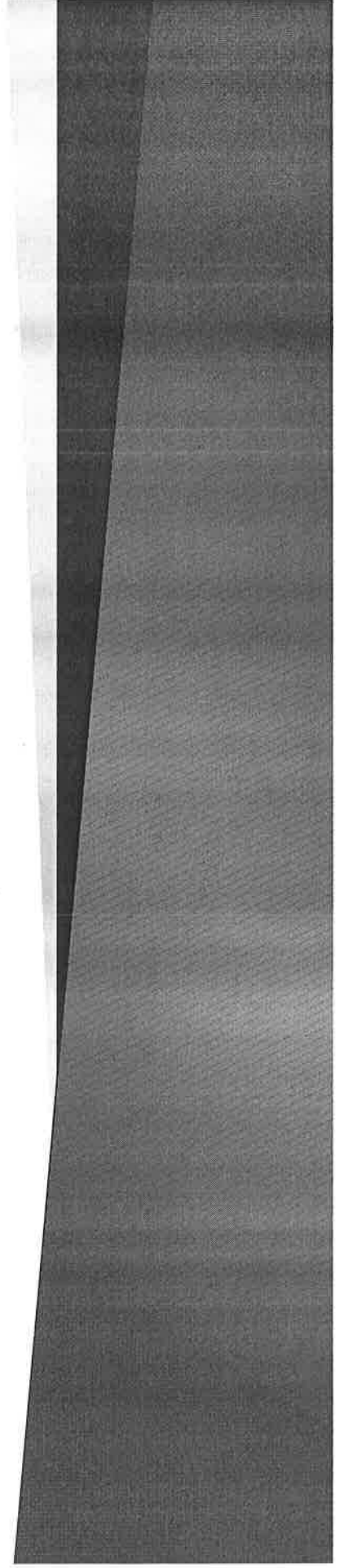


2017 Windsor Little League Safety Meeting



Meeting Agenda

- ▶ Dental First Aid – Dr. Gange
- ▶ CPR Refresher
- ▶ Coaching Staff Requirements
- ▶ Review of Windsor Little League Rules / Requirements
- ▶ Player Safety/Equipment
- ▶ Review of Basic First Aid Protocols
- ▶ Questions



Coaching Staff Requirements

- ▶ Must attend safety meeting /first aid training once every two years
- ▶ Required to have health forms / emergency contact information, safety manual, first aid kit and cell phone at all practices and games
 - Additional ice packs are located in field sheds
 - Additional first aid supplies and ice packs are located shed
- ▶ One coach/manager must be in dugout supervising players at all times during games
- ▶ Inspect field, dugout, fences prior to game – report any issues to Safety Officer
- ▶ Dispose of all trash prior to leaving playing area/park
- ▶ Ensure all players have arrangements to be picked up before leaving park
- ▶ See 2017 Safety Manual

Park & WLL Rules & Requirements

- ▶ Alcohol not permitted anywhere in either park
- ▶ Vehicles in designated areas only
- ▶ Practices/Games should not be held when lighting or field conditions are poor
- ▶ Inspect fields for unsafe playing conditions
- ▶ Only managers/coaches/umpires/authorized volunteers are permitted on the field and in dugouts during games and practices
- ▶ No one under age 18 is allowed in the batting cages without adult supervision.

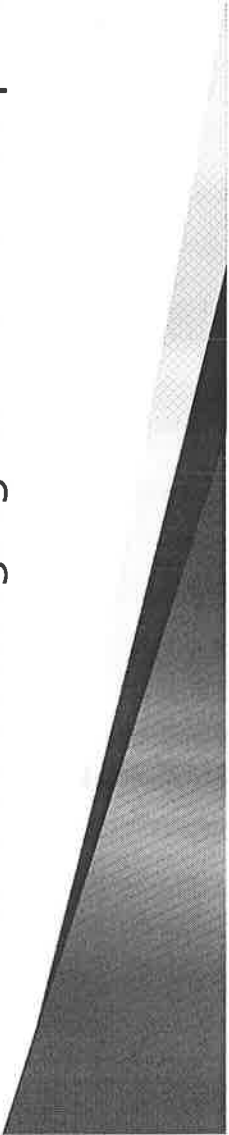


Park & WLL Rules & Requirements


- ▶ Only one batter allowed in the cage at a time. Must be wearing a league approved helmet
- ▶ Managers/coaches must make sure all field lighting has been turned off prior to leaving the park.
- ▶ Practices or games should not be held when weather is severe. Lightning/storm detection units are in each concession stand. Lightning detection overrules umpire's/coaches decision to continue play.
- ▶ If lightning is detected, players and coaches will evacuate field and proceed to vehicles. There must be a 20 minute time lapse between lightning detection and resumption of play.
- ▶ If lightning/thunder is heard, seen or felt play will stop immediately regardless of storm detector alarms or not.



Player Safety / Equipment

- ▶ Equipment should be inspected regularly by managers and coaches
 - ▶ All equipment not used should be kept in the dugout
 - ▶ Helmets must be worn when batting and running the bases. Helmets may not be modified in any way.
 - ▶ Catchers must wear full gear at all times (helmet, mask, throat guard, long model chest protector & shin guards)
 - ▶ Head first sliding not permitted, except when a runner is returning to a base.
 - ▶ All male players should wear protective cups for practices and games. Catchers must wear a protective cup.
 - ▶ For players wearing glasses, safety glass is recommended.
 - ▶ On Deck swinging of bats is not permitted.
- 

Player Safety / Equipment

- ▶ Encourage use of mouth guards
 - ▶ All pregame warm ups should be performed on the field.
 - ▶ No swinging of bats other than when at an official at bat or under adult supervision during practice.
 - ▶ No practice swings are to be taken at anytime in the caged area adjacent to the dugout
 - ▶ No watches/jewelry is permitted. Earrings should be removed whenever possible. Dangling earrings and hoops are prohibited
 - ▶ No gum or food is allowed for players in the dugout or on playing field
 - ▶ All players must have a parent or guardian present at all practices and/or games. In the event of a single parent it is the parent's responsibility to discuss arrangements with team manager.
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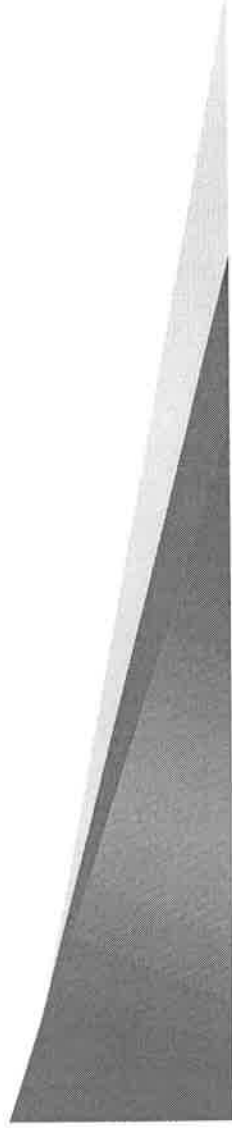
Review of Basic First Aid Protocols

- ▶ Dental first Aid tips with Dr. Gange
- ▶ CPR Refresher course
- ▶ District 8 CT Little League First Aid Protocols
- ▶ Automatic External Defibrillator at Welch –
Must be CPR and AED certified to use this
- ▶ 911
- ▶ Use Common Sense



Reporting an Injury

- ▶ It is extremely important than ANY injury should be reported to the safety director atherian714@gmail.com
- ▶ ANY injury requiring medical treatment must be reported ASAP
- ▶ All coaches must have every team members medical release form at all times of play. (I will be randomly checking at games / practices)



Volunteer Forms

*Volunteer forms are needed prior to first game/practice if not done so as of yet.

*Coaches, please provide me a list of all assistance/helpers/dugout coaches etc.



Pitch Count Limits

Age	Maximum # of pitches
11-12	85
9-10	75
7-8	50

- If a pitcher reaches his limit in the middle of pitching to a batter he/she may finish pitching to that batter before being removed.
- A pitcher that delivers 41 or more pitches in a game cannot play the position of catcher for the remainder of that game.
- If a player pitches 66 or more pitches in a day, four (4) calendar days of rest must be observed.
- If a player pitches 51-65 pitches in a day, three (3) calendar days of rest must be observed.
- If a player pitches 36-50 pitches in a day, two (2) calendar days of rest must be observed.
- If a player pitches 21-35 pitches in a day, one (1) calendar day of rest must be observed.
- If a player pitches 1-20 pitches in a day, zero (0) calendar days of rest must be observed.
- A player who has reached the league age of 12 is not allowed to pitch in the minors.
- Any player who has played the position of catcher in four (4) or more innings in a game is not eligible to pitch on that calendar day.

CONCUSSION EDUCATION FOR YOUTH COACHES AND PARENTS

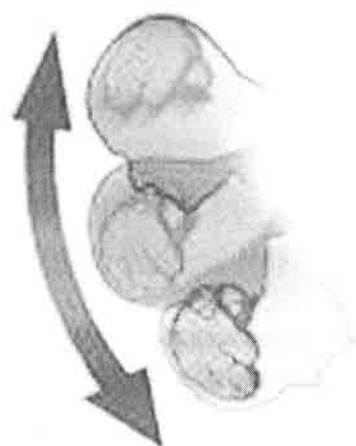
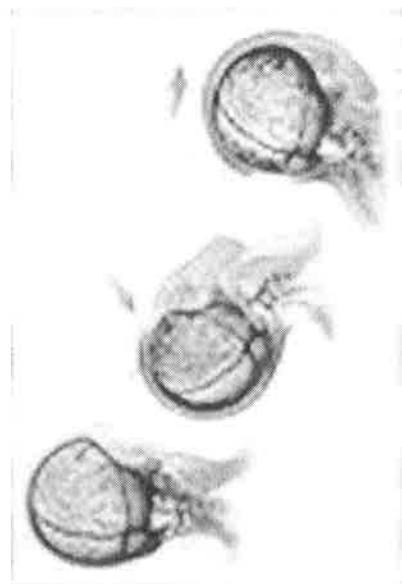


Concussion facts per the CDC

- More than 55% of concussions in ages 0 to 14, and 45yrs and older are from falls.
- The activities associated with the greatest estimated number of TBI-related ED visits were bicycling, football, playground activities, basketball, and soccer.

PHYSICAL THERAPY
& SPORTS MEDICINE
CENTERS





Mechanisms of concussion injury

- Direct blow or contact to the head
- An impact to the body that translates a force to the head and neck.

What is a concussion?

- A temporary alteration of mental status that results from the jarring of the brain.
- It is considered a mild traumatic brain injury.

What are the signs and symptoms of Concussion?

Observable signs

- Loss of consciousness, even briefly, vomiting
- Dazed or confused, unable to follow instructions
- Balance is altered, moves clumsily
- Has problems with memory recall when asked questions

Symptoms reported by the athlete

- Complains of headache, dizziness, nausea
- Complains of double vision or light/noise sensitivity
- Feels sluggish, foggy or confused

What do you do if you suspect a concussion?

- If there are severe symptoms present refer the athlete to the Emergency Department immediately.
- Ask the athlete some simple questions.
- Remove them from the activity for the day.
- If no life threatening symptoms appear, but the athlete/parent is unsure have them contact their Healthcare Provider.

“WHEN IN DOUBT, SIT THEM OUT”



How do you rest a concussion?

- You should go home and rest your body and your brain.
- No use of electronics, such as a laptop, headphones, texting, or gaming devices.
- You should not try to do homework, such as studying or reading for prolonged periods of time.
- It is safe to sleep?
- Do not take medications with aspirin in them, such as Advil[®], Motrin[®], Aleve[®], or Ibuprofen.

THANK YOU!

Presented by
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For more information:
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