



MARICOPA LL 2026 SAFE SUMMARY

League Location: Maricopa, AZ

League ID: 159403

MARICOPA LL 2026 SAFE SUMMARY

Dear Volunteers, Parents/Guardians, and Players:

MARICOPA LL is committed to providing a safe, welcoming environment where every player, volunteer, and family feels supported. Safety is an important part of every season, and we believe it is a shared responsibility that helps everyone enjoy the game with confidence and peace of mind.

As part of Little League SAFE, our league has confirmed the steps we take to protect children, prepare volunteers, and maintain safe facilities and playing conditions. From equipment checks and emergency planning to strong child protection practices and volunteer training, our goal is to create a positive, fun, and secure experience for every participant.

Thank you for being part of a community that puts kids first and works together to help ensure a safe, memorable Little League season.

Sincerely,

MARICOPA LL Board of Directors

LEAGUE LEADERSHIP AND CONTACTS

Keeping contact information up to date helps volunteers know exactly who to reach when questions or safety concerns arise.

Primary Contacts

Jon Weiss

League President

president@maricopalittleleague.com

[480-720-5654](tel:480-720-5654)

Shantel Snyder

League Safety Officer

playeragent@maricopalittleleague.com

[951-795-0013](tel:951-795-0013)

MINDI DAWKINS

District Administrator

azlldistrict4@gmail.com

Carl Hussey

District Safety Officer

vicepresident@maricopalittleleague.com

Additional Contacts

Jazmin Gutierrez

Other League Officer

uniformcoordinator@maricopalittleleague.com

[714-786-0114](tel:714-786-0114)

Jynna Green

League Sponsorship/Fundraising Manager

sponsorfundraising@maricopalittleleague.com

[928-257-8833](tel:928-257-8833)

Eric Chavez

League Umpire-in-Chief

uic@maricopalittleleague.com

[520-840-1711](tel:520-840-1711)

Christopher Snyder

Other League Officer

equipmentmanager@maricopalittleleague.com

[951-514-0152](tel:951-514-0152)

Janean Jump

League Secretary

secretary@maricopalittleleague.com

[760-520-3676](tel:760-520-3676)

Best Practice: Share a simple "Who to Contact" list with managers, coaches, and volunteers so everyone knows where to go for help during the season.

CHILD PROTECTION

Little League requires every chartered league to follow a set of core child protection policies to help keep children safe. Protecting players is our highest priority, and these policies ensure volunteers understand their responsibilities both on and off the field.

Your league has confirmed that all of the following policies are in place:

1. Annual Background Checks

MARICOPA LL confirms that all volunteers with regular contact with players complete annual background checks through J.D. Palatine (JDP), as required by Little League Regulation I(c) 8 and 9. Anyone with a disqualifying offense is prohibited from participating in any Little League activity. Background check laws vary across the country, and any additional requirements that apply to your league can be found at <https://www.littleleague.org/player-safety/child-protection-program/state-laws-background-checks-leagues/>. Your league is responsible for understanding and complying with any applicable state laws regarding background checks.

2. Annual Abuse Awareness Training

MARICOPA LL requires all volunteers to complete the Little League Abuse Awareness Training each year before assuming any duties. This training helps volunteers recognize, prevent, and respond to misconduct and abuse. Little League Abuse Awareness Training can be found at <https://www.littleleague.org/university/articles/abuse-awareness-training-course/>

3. Mandatory Reporting of Child Abuse

MARICOPA LL acknowledges that all volunteers are mandatory reporters under federal law and must report suspected child abuse, including sexual abuse, to the proper authorities within 24 hours. Reports should also be shared with the League President and District Administrator. State reporting requirements vary, and any laws that apply to your league can be found at <https://www.littleleague.org/player-safety/child-protection-program/state-specific-information-child-abuse/>. Your league is responsible for understanding and complying with any applicable state laws.

4. Non-Retaliation Policy

MARICOPA LL has adopted a policy that prohibits retaliation against anyone who makes a good-faith report of suspected abuse or misconduct. This ensures volunteers feel safe coming forward with concerns.

5. One-on-One Interaction Policy

MARICOPA LL has adopted the Little League One-on-One Interaction Policy, which requires that all interactions between adults and minors be observable and interruptible by another adult. This reduces opportunities for misconduct while still supporting positive mentoring relationships.

Best Practice: Reinforce child protection expectations clearly and consistently so volunteers know what to do and who to contact.

- Review expectations with all volunteers at the start of each season.
- Make reporting steps clear and easy to follow.
- Keep child protection policies easily accessible.

Additional information provided by your league:

Background Checks & Abuse Awareness Training

Little League International has established criteria for each chartered league's performance of an investigation into the background of all individuals who volunteer in any capacity. Each volunteer will be required to complete a volunteer application form and provide a copy of their government issued photo identification. The minimum requirement for these background investigations is verification that volunteers are not registered sex offenders. To provide additional protection to the children we will submit a list of all volunteers to JDP. A background investigation that will list any convictions nationwide will be completed. Upon clearance of individual background investigations all volunteers will be notified by The Board of Directors.

Safe Sports Act

- "Protecting Young Victims from Sexual Abuse and SafeSport Authorization Act of 2017" became federal law in 2018
- The goal of SafeSport is to protect children from abusive situations by engaging more people in the reporting and education processes
- A volunteer now can be held legally responsible if they have firsthand knowledge and fail to report any type of Child Abuse to the correct parties
- SafeSport covers all types of Child Abuse both physical and psychological
- Little League International and all local little league programs must adhere to the following requirements from the SafeSport Act:
 - Reporting of Abuse involving a minor to the proper authorities
 - All volunteers of a local league are now mandated reporters and could face criminal charges if the league chooses to ignore, or not report to the proper authorities, any witnessed act of child abuse, including sexual abuse, within 24 hours.
 - Local leagues must be aware of the proper procedures to report any type of abuse in their state. Please reference www.LittleLeague.org/ChildAbuse
 - Leagues must adopt a policy that prohibits retaliation for "good faith" reports of child abuse.
 - Leagues must adopt a policy that limits one-on-one contact with minors.

<https://www.littleleague.org/player-safety/child-protection-program/safesport-resources-parents/>

Code of Conduct

All volunteers, parents and participants shall conduct themselves in an orderly and responsible manner while participating in or attending any league functions. Personal behavior reflects upon the quality of the league.

"Remember, there is always someone watching"

All participants, parents, spectators, and volunteers shall refrain from:

- The use of foul, obscene, or abusive language in and around any game, practice, or league/team function.
- Showing disrespect to another volunteer, official, player, or other participant.
- The use or possession of alcoholic beverages at any league or team function.
- Smoking in and around any game, practice, or league/team function
- Gambling or wagering in any manner on the outcome of any game.
- The use, possession or concealment of any weapons in and around the field and park area.
- Harassment or intimidation by words, gestures, body language or any other menacing behavior.
- Removal, defacing or willful damages to public or private property.
- Using League equipment for personal use without the express permission of the league and its Board.
- Physically or verbally threatening any umpire, spectator, player, or other participant.
- Striking, pushing, or otherwise intending to inflict harm upon any umpire, spectator, player, parent, or another volunteer or participant.
- Intending or encouraging strategies inconsistent with Little League values. For example, telling a pitcher to hit a batter, purposefully having a player run or slide into an opposing player.
- Express one's disagreement with an umpire, coach, parent or other participant in a manner consistent with poor sportsmanship, including physically throwing or slamming equipment or in any way displaying objectionable behavior.
- Purposefully enter incorrect or change correct information regarding rosters or player information to gain an advantage over another team or league, including rosters, scorebooks, draft documents, affidavits, or schedules

Managers & Coaches Safety Responsibilities

- Accountable for the player's safety while on the field or in the dugouts.
- Inspect fields before every game.
- Conduct themselves according to the Coaches Code of Conduct.
- Abide by Little League rules as defined in official Little League Book and local rule forms.
- Accountable for the behavior of the players and parents during all practices, games, or other team functions.
- Attend at least 2 of the 4 coach/player clinics or the Coaches' Fundamental Training.
- Attend CPR & First Aid Training as needed always keeping your certification current while engaged in Little League events. Ensure a properly stocked First Aid kit is with you at all practices and games.
- Notify Safety Officer if you are in need of additional supplies.
- Ensure that at least two adults are present at each practice or Little League event.

- Report any and all safety issues to the Safety Officer, President, or other board member.
- Manager should continually check equipment. Notify Equipment Coordinator when replacement is needed.

Coach's Code of Conduct

As a volunteer coach with Maricopa Little League (MLL), I understand that I play a vital role in shaping the youth in our community, and that I am entrusted with teaching not only the game of baseball or softball, but also the values of teamwork, sportsmanship, and respect. I agree to uphold the values and mission of Little League International and MLL by modeling integrity, respect, and sportsmanship at all times.

By accepting this Code of Conduct, I agree to the following:

1. Player Development & Experience

- I will place the emotional and physical well-being of players above personal desire to win.
- I will promote a positive, inclusive, and fun environment for all players.
- I will give each player an opportunity to develop skills and enjoy the game, regardless of skill level.
- I will ensure that playing time follows league rules and policies.
- I will be a positive role model for players, parents, and spectators.
- I will demonstrate good sportsmanship, respect, and self-control—before, during, and after every game or practice.
- I will remember that I am a youth coach and that the game is for the kids, not the adults.

2. Sportsmanship & Respect

- I will treat all players, coaches, officials, volunteers, and families with courtesy and respect.
- I will not engage in verbal or physical confrontations, hostile behavior, or inappropriate language.
- I will lead by example, demonstrating good sportsmanship in victory and defeat.
- I will teach my players the importance of teamwork, respect, and fair play.
- I will treat every player with fairness, encouragement, and respect—regardless of ability, background, or experience.
- I will prioritize player development, safety, and enjoyment over winning games.
- I will never ridicule, yell at, or use inappropriate language toward any player.

3. Rules & Authority

- I will know, follow, and enforce all MLL, District, and Little League International rules.
- I understand that rule disputes must be handled calmly through proper procedures.

- I agree that board members, umpires, and league officials must be treated respectfully, and that their rulings must be honored on the field.
- If I disagree with a rule or decision, I may request review or discussion through proper channels—never during play or in a confrontational manner.
- I will respect the authority of umpires, board members, and league officials.
- I will accept umpire decisions as final and will not argue, ridicule, or publicly criticize them.

4. Communication

- I will communicate in a respectful, timely manner with players, families, umpires, and league officials.
- I will communicate clearly and respectfully with parents regarding team expectations, schedules, and player development.
- I will notify the league immediately of any significant injury, misconduct, or safety issue.
- I will report any persistent spectator misconduct to a board member or league official.

5. Compliance with League Rules

- I will know, understand, and follow Maricopa Little League's House Rules, Code of Conduct, and all applicable Little League International rules.
- I will never knowingly violate eligibility, safety, or gameplay rules.
- I will follow all board decisions and directives.

6. Player Safety

- I will prioritize safety at all times and follow all guidelines regarding equipment, playing conditions, and required clearances.
- I will never knowingly place players in dangerous situations and will remove any player showing signs of injury, including suspected head injury.
- I will never leave a player unattended before or after practices or games.
- I will not use alcohol, tobacco, drugs, or vape products during practices, games, or league events near players, parents, or spectators.
- I will ensure that players use proper equipment and follow safety procedures at all times.
- I will not engage in or tolerate any form of abuse, harassment, or discrimination.
- I will promptly report any injuries or incidents to the League Safety Officer.
- I will ensure my assistant coaches and volunteers follow the same standards.

7. Training & Compliance

- I will complete all required background checks, certifications, and trainings (including annual abuse prevention training).
- I will maintain SafeSport/Child Protection standards and understand that athlete safety is my top priority.
- I will follow all league facility, equipment, and field-use procedures.

8. Team & Game Management

- I will support officials and volunteers by following game procedures and keeping games on schedule by not causing unnecessary delays.
- I will ensure that only eligible, rostered players participate.
- I will never knowingly use ineligible players, falsify documents, or encourage cheating.
- I will ensure that dugout and sideline environments remain respectful and controlled.

9. Zero-Tolerance Conduct

- I understand that the following behaviors are strictly prohibited and may result in immediate removal and/or disciplinary action:
 - Verbal or physical abuse
 - Harassment, bullying, or discrimination
 - Use of profanity
 - Confronting umpires, board members, other coaches, or spectators in an aggressive or disrespectful manner
 - Encouraging unsportsmanlike conduct
 - Possession/use of alcohol, drugs, or weapons at youth events

10. Disciplinary Action

- I understand that violations of this Code of Conduct may result in disciplinary action up to and including:
 - Verbal or written warning
 - Ejection
 - Suspension
 - Removal from coaching role
 - Prohibition from future involvement with Maricopa Little League
- I understand that all decisions regarding discipline are made at the discretion of the MLL Board in accordance with league policies.

By accepting this Coach's Code of Conduct, I acknowledge that:

- I have read and understand all expectations.
- I agree to abide by all rules, standards, and procedures.
- I understand failure to follow this Code may result in disciplinary action.
- I agree to uphold the mission and values of Maricopa Little League and Little League International.
- I agree to follow the Maricopa Little League Coach's Code of Conduct.

Child Protection Resources:

- Little League Abuse Awareness Training (<https://www.littleleague.org/university/articles/abuse-awareness-training-course/>)
- Full Little League Child Protection Program (<https://www.littleleague.org/player-safety/child-protection-program/>)
- State-Specific Background Check Laws (<https://www.littleleague.org/player-safety/child-protection-program/state-laws-background-checks-leagues/>)
- State - Specific Mandatory Reporting Laws (<https://www.littleleague.org/player-safety/child-protection-program/state-specific-information-child-abuse/>)
- J.D.Palatine(JDP) Background Checks (<https://www.littleleague.org/player-safety/child-protection-program/local-league-background-check-information/>)
- USA Baseball – Abuse Awareness Resources (<https://usabdevelops.com/page/4834/base>)
- U.S.Center for SafeSport – Reporting and Education (<https://www.littleleague.org/player-safety/child-protection-program/safesport-resources-parents/>)
- ChildHelp National Child Abuse Hotline (1-800-4-A-CHILD)

EMERGENCY PREPAREDNESS

Being prepared for unexpected situations helps keep players, volunteers, and families safe. The information below highlights the emergency procedures and contacts in place during all league activities.

Emergency Contacts

- In any emergency situation, volunteers should immediately **call 911**
- Poison Control is also available nationwide at **1-800-222-1222**

Local Emergency Contacts

- **Police Department:** 520-568-3673
- **Fire Department:** 520-568-3333
- **Urgent Care:** (520) 233-2468
- **Local Hospital:** (520) 534-0700

Emergency Action Plan

Emergencies can happen when you least expect them. A clear and accessible EAP helps volunteers respond quickly, communicate effectively, and take the right steps to keep players and families safe.

MARICOPA LL has an Emergency Action Plan in place. Regularly reviewing this plan with volunteers and players helps ensure everyone knows how to respond quickly and confidently during an emergency.

Additional information provided by your league:

Emergency Planning Measures

Maricopa Little League maintains established emergency planning procedures to support the safety of players, volunteers, and spectators.

Emergency Response Protocol

In any life-threatening emergency, 911 shall be contacted immediately. For non-emergency public safety matters, the appropriate local authority (Police Non-Emergency, Fire Department, or Parks and Recreation Department) shall be contacted directly. League personnel shall not delay contacting emergency services while attempting to notify league officials.

Calling 911 Procedures

- Answer any questions that the dispatcher might ask including:
 - o The exact location or address of the emergency – see Safety plan addresses.
 - o What happened — i.e., a baseball-related accident, heart attack, etc.
 - o How many people are involved?
 - o The condition of the injured person - i.e., unconscious or severe controlled or un-controlled bleeding
 - o What help is being given (first aid, CPR, etc.)?
- Do not hang up until the dispatcher hangs up.
- Continue to care for the victim until professional help arrives.
- Appoint someone to go to the street to watch for and direct emergency personnel.
- All Safety related incidents must be reported asap to the League's Safety Officer.

Following contact with emergency services, the incident must be reported to the League Safety Officer and/or League President as soon as practicable.

Weather & Field Safety Procedures

The league monitors weather conditions including lightning, extreme heat, and unsafe field conditions. Play shall be suspended immediately upon the sight of lightning or sound of thunder and shall not resume until conditions meet Little League safety guidelines. Field conditions are assessed in coordination with park authorities when necessary.

Evacuation Procedures

In the event of an emergency requiring evacuation, managers are responsible for accounting for all players and directing them to a safe assembly area clear of fields, parking areas, and emergency access routes.

Incident Documentation

All injuries requiring medical attention beyond basic first aid, as well as safety-related incidents, must be documented using the league's official Incident Report Form. Reports shall be submitted to the Safety Officer within 24 hours.

Coordination with Local Authorities

Maricopa Little League operates on city-managed facilities and coordinates with the City of Maricopa Parks and Recreation Department as needed. Emergency access points are maintained for first responders.

These procedures are reviewed annually and communicated to league volunteers to ensure preparedness and compliance with Little League safety standards.

Important Contacts

Maricopa Police Emergency 911

Maricopa Fire Emergency 911

Police Non-Emergency 520-568-3673

Fire Non-Emergency 520-568-3333

Pinal County Public Health 866-960-0633

Pinal County Animal Control 520-509-3555

Exceptional Community Hospital – Maricopa

19060 N John Wayne Pkwy, Maricopa, AZ 85139

(520) 534-0700

Hours: Open 24 hours

Dignity Health Urgent Care

20750 N John Wayne Pkwy, Maricopa, AZ 85139

(520) 233-2468

Hours: 8am–7pm

Chandler Regional Medical Center

1955 W Frye Rd, Chandler, AZ 85224

(480) 728-3000

Hours: Open 24 hours

Banner Casa Grande Medical Center

1800 E Florence Blvd, Casa Grande, AZ 85122

(520) 381-6300

Hours: Open 24 hours

Emergency Preparedness Resources:

- Little League Lightning & Severe Weather Safety Guidelines
(<https://www.littleleague.org/university/articles/staying-safe-from-lightning-at-the-field/>)

FIRST AID & INJURY PREVENTION

A prepared volunteer is better equipped to respond when injuries or medical situations occur. Below is an overview of the first aid training, equipment, and safety practices in place for the season.

First Aid Training

First aid training helps volunteers respond effectively when injuries or emergencies happen. These trainings reinforce skills such as:

- Treating minor injuries
- Managing bleeding and nosebleeds
- Recognizing potential fractures or serious injuries
- Identifying head-injury symptoms
- Responding to heat-related illness
- Treating allergic reactions
- Knowing when to call 911

First aid training requirements for MARICOPA LL:

- Little League First Aid Awareness Training: **Not Offered**
- Formal First Aid Certification: **Recommended**
- CPR Certification and AED Use Training: **Recommended**

First Aid Kits

Accessible first aid supplies help volunteers respond quickly when an injury occurs. Keeping first aid kits stocked and easy to reach helps volunteers respond quickly during games and practices. Every team in MARICOPA LL has a first aid kit available at games and practices.

Recommended First Aid Kit Contents:

- Adhesive bandages (various sizes)
- Sterile gauze pads and rolled gauze
- Antiseptic wipes
- Instant cold packs
- Elastic wraps
- Tweezers and disposable gloves
- Nosebleed supplies (gauze, tissues)
- Small splint or finger splint
- CPR mask or face shield
- Allergy/sting relief wipes
- Cold Packs
- Tape and scissors

Best Practice: Each team should receive its first aid kit at the start of the season. First aid kits should travel with the team and be kept in an easy-to-reach spot during both games and practices.

Concussion Awareness

MARICOPA LL has confirmed that it follows required concussion training and has a protocol in place for recognizing and responding to potential head injuries during practices and games. Little League encourages all volunteers to follow the "When in doubt, sit them out" approach so players are removed from play immediately if a concussion is suspected.

Common signs and symptoms of a possible concussion include:

- Headache or pressure in the head
- Dizziness or balance problems
- Confusion, memory issues, or appearing "out of it"
- Nausea or vomiting
- Blurred vision or sensitivity to light or noise
- Behavior that seems unusual for the player

State concussion laws vary across the country. Some apply only to school athletics, while others apply to all youth sports organizations. State-specific information can be found at: <https://www.littleleague.org/player-safety/concussions-youth-athletes/>. Your league is responsible for understanding and complying with any applicable state laws.

Best Practice: If a concussion is suspected, volunteers should follow these steps:

- Remove the player from play immediately
- Ensure the player is monitored by an adult
- Refer the player to a licensed health care professional for evaluation
- Do not allow return to play on the same day
- Require written medical clearance before the player resumes practices or games

Access to Automated External Defibrillators (AED)

AEDs can play a lifesaving role during sudden cardiac emergencies, and clear access helps volunteers respond quickly when every second matters.

MARICOPA LL has reported that it does not currently have any AEDs available.

Best Practice: AEDs are most effective when:

- Volunteers know the exact location of each device
- Devices are accessible during practices and games
- Batteries and pads are checked and replaced as needed
- Multiple volunteers are trained in basic AED use

State laws addressing AED access and sudden cardiac arrest (SCA) training can vary across the country. Some requirements apply only to school facilities or interscholastic athletics, while others extend to youth sports organizations or municipal fields. State-specific requirements for AEDs can be found at: <https://www.littleleague.org/player-safety/state-laws-on-automated-external-defibrillators/>

State specific requirements for SCA training can be found at: <https://www.littleleague.org/player-safety/state-laws-on-sudden-cardiac-arrest-training/>.

Your league is responsible for understanding and complying with any applicable state laws.

Additional information provided by your league:

CPR/First-Aid Training

- A minimum of one coach on each team MUST be CPR/First-aid certified and hold a valid certification card on their person at all Little League events including practices and games. Preferably two coaches should be certified in case one cannot be present.
- CPR & First Aid training will be held on an annual basis coordinated through Safety Officer.
- A copy of all CPR & First Aid cards will be kept with the Safety Officer & Volunteer Coordinator for league review.
- Umpires will verify an active CPR & First Aid card is present prior to the beginning of any game.

Good Samaritan Laws

Good Samaritan laws are laws aimed at protecting those who choose to aid others who are injured or ill from blame in the United States. Laws in other countries may be different. Though the details of Good Samaritan laws in various jurisdictions vary, some commonalities are nearly universal:

- Unless a prior caretaker relationship (such as a parent-child or doctor-patient relationship) exists prior to the illness or injury, or the "Good Samaritan" is responsible for the existence of the illness or injury, no person is required to give aid of any sort to a victim.
- Any first aid provided may not be in exchange for any reward or financial compensation.
- If aid begins, the responder must not leave the scene until:
 - o It is necessary in order to call for medical assistance,
 - o Somebody of equal or higher training arrives to take over,
 - o Continuing to give aid is unsafe (this can be as simple as a lack of adequate protection against potential diseases, such as latex gloves to protect against HIV) -- the responder can never be forced to put him or herself in danger to aid another person.
- The responder is not legally liable for the death, disfigurement or disability of the victim as long as the responder acted as a calm and rational person of the same level of training would have under the same circumstances.
- The responder must not commit assault by giving aid to a patient without consent. Consent may be implied if:
 - o The patient is unconscious, delusional or intoxicated -- or if the responder has a reasonable belief that this was so.
 - o The victim is not an adult (generally, at least 18 years old). Consent must come from the legal parent or guardian. If the legal parent or guardian is not immediately reachable, consent is implied (no matter what the patient claims).
 - o The legal parent or guardian is unconscious, delusional or intoxicated (with the same caveat as above).
- If child abuse is suspected, no parental consent is needed.

First Aid Kits

Each team is provided with a league issued first aid kit. Each kit may include, but is not limited to, the following:

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

Communicable Disease Procedures

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

Concussions

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

- Some states may affect only school-based activities, but many also address any group using school facilities or grounds for athletic purposes.
- Little League has developed a concussion overview page for each state that will be like the Child Abuse page.

- The CDC (Centers for Disease Control and Prevention) website is a great tool for leagues to encourage their managers/coaches, parents, and players to review concussion information. (www.cdc.gov/concussion/HeadsUp/youth.html Concussions)
- DA's and local league volunteers must also be aware of their state's respective laws, especially during any Special Games events or International Tournament games being hosted by the district.
- Failure to adhere to these laws could expose the district and/or host to unwanted liability and penalties. Some states require that the participant and a parent/guardian must sign and acknowledge that they understand the risks of concussions before they can participate.
- The majority of states also require immediate removal from competition if a person has sustained a concussion and that they cannot return until being released in writing by a medical professional.

Maricopa Little League Concussion Prevention, Treatment and Management Policy

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

A concussion is a brain injury that results from a bump, blow or jolt to the head or body which causes the brain to move rapidly in the skull and which disrupts normal brain function. The Centers for Disease Control and Prevention of the United States Department of Health and Human Services estimates that as many as 3.8 million concussions occur each year in the United States which are related to participation in sports and other recreational activities. Athletes who continue to participate in an athletic activity while suffering from a concussion or suffering from the symptoms of an injury to the head are at greater risk for catastrophic injury to the brain or even death. Ensuring that a Little League player who sustains or is suspected of sustaining a concussion or other injury to the head receives appropriate medical care before returning to baseball activity will significantly reduce the child's risk of sustaining greater injury in the future.

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

1. Prior to a team's first practice each season, every manager, coach, and adult assistant shall:
 - a. Familiarize themselves with the CDC publication "Heads Up – Concussion in Youth Sports – A Fact Sheet for Coaches". This publication will be provided to all such individuals by the League Safety Officer or other Board members; and,
 - b. Complete the CDC on-line training course at: <https://www.train.org/cdctrain/course/1089818/>
2. A copy of the Certificate of Completion for each of the above individuals shall be submitted to the League Safety Officer.
3. If a Little League player sustains, or is suspected of sustaining, an injury to the head while participating in any Little League game or even the player must:
 - a. Be immediately removed from the game or event; and

b. May only return to Little League activity if the parent or legal guardian of the player provides a signed statement from a provider of health care indicating that the youth is medically cleared for Little League participation and the date on which the player may return to participation.

All Maricopa Little League Managers and Coaches must:

- Be aware of a player's actions and observe how they act when coming off the field after suffering a potential concussion.
- Be aware that a concussion may occur anytime during play. A concussion is not always caused by big hits.
- Players who appear injured should be removed from play and assessed in the dugout.
- Parents know their player BEST. If a parent feels their child is exhibiting signs of an injury, the parent should immediately notify the coaches so players can be assessed in the dugout.
- If a player showing any visual, neurological, or complaining of any signs or symptoms of a concussion, managers and coaches should immediately seek medical attention for the player. If no immediate medical professional is available, the parent should be summoned (if on site). If parent(s) are not on site, 9-1-1 will be called by a League representative or designee.
- A player who, after communicating or showing signs of visual or neurological impairment, will sit out a minimum of 15 minutes for rest and assessment. The player should be re-assessed after 15 minutes. If NO visual or neurological impairments are noted the player may return to play at the discretion of the Manager. If any visual or neurological impairments remain after the rest period, the player may NOT return to play until seen by a qualified physician.
- 9-1-1 will be called for a player in the following instances (if no EMT or qualified medical provider is available on-site):
 - o Unconscious player or any player with total or momentary loss of consciousness or memory during or after play.
 - o Complaint of neck or back pain, or loss of mobility or feeling in any arm or leg.
 - o Complaint of headache and/or dizziness.
 - o Any player who vomits during or after play.
- If parent(s) are on site it is their discretion if they wish to have their child transported. Let the parents communicate with the ambulance crew regarding transport and care.

Hydration

Managers are required to bring water to each practice and game.

Players are encouraged to bring bottled water or sports drinks.

Maricopa Little League takes the safety of its players, volunteers and public very serious. Understanding we live in traditional warm climate during the summer months this can present a potential risk to everyone. Maricopa Little League will institute a "Hydration" plan that will include education, training and commitment of all members to follow to provide a Safe Environment. This plan outline will include a 5-min supervised "Hydration" period for every

30 min of activity by all member of Maricopa Little League. Along with the warm climate in Arizona we are faced during certain months of the year with weather on a semi-regular basis. Weather will be monitored on a regular basis with oversight by the Safety Officer.

Dehydration is easier to prevent than treat. Your body, under normal conditions, has a certain balance of fluids and electrolytes. When this balance is disturbed, other systems are affected, and illnesses occur. Dehydration is a drop in fluid levels and can usually be treated easily with no lasting effects. Prevent dehydration by keeping your body hydrated. If you are doing something active outside such as hiking or a sport, you'll sweat and breathe a lot harder, losing more fluid than normal. Some medications also cause fluid loss. In situations like these, it's important to drink water or sports drinks (which replace electrolytes as well) whether you feel thirsty or not. If you feel thirsty, you're already showing signs of dehydration. It's good to know the symptoms of dehydration in case you are ever in a situation where you may be at risk.

Prevention:

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

Dehydration

Mild symptoms:

- Extreme thirst
- Flushed face
- Dry, warm skin
- Weakness
- Headache
- Dry mouth with thick saliva

- Decreased coordination
- Fatigue
- Smaller appetite
- Impaired judgment
- Dizziness that worsens as you stand and move
- Small amounts of dark yellow urine
- Arm and leg cramps
- Very few tears (when crying)

Moderate – Severe symptoms:

- Fainting
- Convulsions
- Low blood pressure
- Less sweating (internal cooling mechanism becomes ineffective)
- Severe arm, leg, stomach, and back cramps
- Bloated stomach
- Sunken 'dry' eyes
- Lack of skin elasticity (a bit of lifted skin takes longer to 'spring' back into place)

Treatment

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

- Move the person to a shady area.
- Cover the person with a wet sheet and keep the sheet wet for cooling from evaporation.
- Fan the person with paper or an electric fan (preferably not cold air).
- Sponge down the body, especially the head, with cool water.
- Continue giving first aid until the body feels cool to the touch.
- If the person is conscious, let them sip water, fruit juice, or a soft drink.

Heat Exhaustion

Heat exhaustion is similar to, and often follows, dehydration. It's what happens when you lose more fluid and electrolytes than your body can handle. And although both fluids and electrolytes are being lost, exhaustion is a greater loss of electrolytes whereas dehydration is a greater loss in fluids. Heat exhaustion is a form of volume shock, in other words, the lack of fluid causes the blood vessels, especially in your arms and legs, to constrict. Luckily, this is a non-life threatening illness.

Symptoms:

- Sweating
- Increased pulse and respiration
- Pale and clammy skin
- Fatigue
- Nausea and vomiting
- Slightly lowered or elevated temperature
- Exhaustion
- Lightheadedness and dizziness
- Possible heat cramps
- Feeling thirsty

Treatment:

With enough fluids and rest this illness is self-correcting.

- A Sports drink or oral re-hydration solution (ORS) should be given to replenish decreased electrolytes. Drink fluid slowly, as the body will absorb it better.
- Take a good long rest before continuing with your activities; if symptoms seem severe, you may want to see a medical professional.
- If the person is suffering from heat cramps a slightly salty drink (sports drink or ORS) and stretching the muscle should ease them. If they return, you should probably discontinue the activity you are doing for the rest of the day.
- If heat exhaustion is not properly treated, it may become Heat Stroke, which is deadly. If the person's temperature goes above 103° then treat them for heat stroke!

Heat Stroke

Heat stroke is a life-threatening emergency, and victims can die in just 30 minutes so help must be given quickly. Heat stroke is caused by an increase in the body temperature to about 104° (41°C). Temperatures over 105° can lead to death. This increase in temperature causes the brain to overheat. There are two types of heat stroke; fluid depleted (slow onset) and fluid intact (fast onset):

- Fluid depleted (slow)- The person has heat exhaustion but continues to function in a situation. Eventually the lack of fluid will minimize the body's active heat loss capabilities to such an extent that the internal temperature will begin to rise.
- Fluid intact (fast)- The person is under extreme heat in a challenging situation, this overwhelms the body's active heat mechanisms even though fluid levels are sufficient.

Symptoms:

- Hot and red skin
- Pulse and respiratory rates increase
- Decreased urine output
- Argumentative
- Disoriented
- Increased temperature
- Combative
- Hallucinations
- Dilated and unresponsive pupils
- Seizures, which may lead to the person becoming comatose

Treatment:

Treatment MUST begin immediately! The most important thing to do is begin to lower the body temperature.

- Gently move the person to a shady or cooler spot and remove all non-cotton or un-breathable clothing.
- If possible, try moving the person to somewhere where medical assistance will be available. Drive to the hospital, or a spot where an emergency team will be able to locate you and take over.
- Pour cool (NOT cold) water over the person's extremities. If water is limited, cool off the head and neck area first. Also, try fanning the person to increase air circulation and speed up sweat evaporation.
- If available place ice packs at the neck, armpits, and groin In That Order!
- While cooling the person off you should massage the extremities, which helps propel the cooled blood back into the person's core which will in turn lower their temperature.
- After their temperature has dropped to 102° then stop trying to cool them down, as hypothermia may begin and cause the person to shiver, which would generate more heat.
- Monitor them closely to make sure their temperature does not begin to rise again.

- If the person is able, begin to replace the fluids they have lost by giving them small sips of water or ORS. Sometimes, because they are temporarily mentally impaired it is impossible to get them to ingest fluids. In cases like that, continue the cooling process and try to get them to an emergency room.
- In more severe cases, CPR or EAR will need to be performed.
- Get the person to an emergency room as soon possible!! Your quick actions can save their life.

Seizures

A seizure is a miscommunication between the nerve cells and the brain. When a seizure occurs, normal brain functions are impaired and sometimes brain damage can occur. There are two kinds of seizures, General (tonic-clonic or 'grand-mal') and Partial (temporal lobe). General seizures affect small areas of the brain while Partial seizures affect the whole brain. Seizures usually last only a few minutes (in between 1 and 10) and must run their course before they end.

Symptoms:

- The person may yell or cry out
- Stiffen
- Difficulty breathing (look for pale or bluish skin)
- Jerking motions
- Falling
- May last 1-4 minutes

Treatment:

- Remain calm
- Move all sharp-edged objects out of the persons way to help keep them from injuring themselves
- Monitor their breathing
- Do NOT try to restrain the person, you cannot stop the seizure
- Do not force anything into the persons mouth or give them anything to eat or drink
- Help the person lay down and place something soft under their head
- Turn them to one side so they don't risk choking on their saliva
- Remove tight or restricting clothing and jewelry
- The person will probably feel confused and disoriented.
- They will also be very tired, let them sleep but stay with them until they have awoken and are fully awake and alert/aware.

- Do not give them anything to eat or drink until they have fully recovered

Call 911 if:

- If this is the first time
- If the seizure lasts more than 5 minutes
- If the person has one seizure after another
- If the person is pregnant, injured, diabetic, or has requested an ambulance
- If the person is not breathing correctly within one minute after the seizure. If needed, begin CPR.
- If the player's parents are not present, call 9-1-1 first, then contact the parents.

Sprains & Dislocations

A Sprain is an injury to the soft tissue, or ligaments, around a joint. This sometimes happens when someone moves the wrong way and "twists" something. A dislocation is when the bone becomes separated from the joint it meets, or it pops out of its socket. This sometimes happens when the bone and joint are overstressed. They can also be caused by contact sports, rheumatoid arthritis, inborn joint defects, and suddenly jerking that arm or hand of a small child. Dislocation is most common in the shoulders, but fingers, hips, ankles, elbows, jaws, and even the spine are also prone to dislocation. Both of these injuries are commonly confused with fractures (broken bones) because they all exhibit many of the same symptoms:

- Pain
- Swelling
- Inability to move and bear weight
- A misshapen appearance
- Any discoloration

Treatment:

- If you suspect a dislocation do not try to put the bone back into its socket, you may only make the injury worse.
- If you suspect a dislocation in the neck or spine, be very careful and do not try to move the person unless necessary, as damage may have been done to the spinal cord (which may paralyze parts of the body below the injury site.) If you suspect an injury this serious call 911 immediately.
- If the site of injury is bleeding then treat the wounds and cuts accordingly, but do not try to reset/reshape the bone or joint.
- Watch for signs of shock.
- If the pulse is weak below the affected area call 911 and loosen all restrictive clothing.
- If the person is in severe pain, or the injury is to the neck, spine, hips, or thigh bone, call 911.

- If the joint or bone needs to be repositioned, do not give the person anything to eat or drink as it will put off medical treatment.

- Remove any articles of clothing or jewelry covering the affected area or restricting blood flow to it.

- Use the PRICE technique:

- o Protect - If possible, make a splint to help immobilize the affected area. Rulers and cloth strips, rolled up magazines and a belt, branches and shoelaces; all types of things can be used to make a splint. This will help prevent further damage to the limb. Do not try to reposition the bone/joint while making the splint.

- o Rest - Avoid movement of the injured area and avoid participation in activities where you may be at risk to re-injure yourself until after the wound had had plenty of time to heal.

- o Ice - Use ice to minimize swelling. If no ice is available, a bag of frozen veggies is a good substitute.

- o Compression - An elastic or fabric bandage may help decrease swelling and ease the pain. Ask a doctor before using one and make sure the bandage is not wrapped too tightly, which would hinder circulation.

- o Elevation - If possible, raise the injured limb up above the heart. Support the elevated limb in a sling or under a pillow or folded blanket.

Eye Injuries

Particle of dust or speck of dirt in the eye:

- Do not rub your eye, as it may cause scratching and other injury to your cornea.

- Gently lift your upper eyelid down over your lower one, allowing your eye to flush the particle of dirt out. Hold your eyelid like this for a minute or so or until you feel the object has been removed. This may be repeated, as necessary.

- Blink your eye several times to help remove the object.

- You may also try to flush it out of your eye using a little bit of cool clean water. (this may be more effective for dust, smoke, and heat burn to the eyes as opposed to dirt particles.)

- Try not to remove it with your fingers as you may do damage to your eye.

- If object remains in the eye, keep it closed and go see your doctor.

If something has become embedded in the eye:

- Cover both eyes with a clean sterile pad and go to the doctors.

- DO NOT try to remove the object or touch the eye.

A hit or blow to the eye:

- Quickly apply a cold compress to the area around the eye, not the eye itself, for about 15 minutes. This will reduce pain and swelling.

- A black eye or blurred vision may indicate eye damage and should be looked at by a doctor.

Cuts to the eye or eyelid:

- Bandage the eye area gently with gauze and medical tape and get the person to the doctor as soon as possible.
- Do not attempt to remove any objects on the eye or touch the eye.
- Do not apply pressure to the injured area, and do not rub the affected area.

Chemical burns to the eye:

- Immediately flush the area with water, using your fingers to hold open your eyelids. Make certain that your fingers are clean and have no chemicals on them to avoid further damage and possible reactions. Continue to flush eye for at least 15 minutes. You may want to move your eye around while doing this to help assure the removal of all chemicals.
- Make sure the head is tilted so the chemicals and water do not flow into the unaffected eye.
- These burns should be looked at by a doctor as soon as possible to make sure no damage was done to the eye.

Prevention:

- Remember, eye injuries are usually preventable if the proper gear is worn. In labs always wear protective gear and goggles, and when playing sports make sure that you wear a mask or eye guard.
- When playing outside, watch for branches and other things which might bring about an eye injury.

Nosebleeds

Nosebleeds are a common injury amongst people both young and old. The nose is a part of the face rich in blood vessels and any trauma to the face can start a nosebleed. Nosebleeds are also common in dry climates and during the winter months when people are going from the cold to the dry heat of their homes. During these months the nose membranes become cracked and dry. This drying out of the membranes is what causes nosebleeds. People who are taking medications that prevent normal blood clotting are at a higher risk of getting a nosebleed. For these people only a light trauma could spark nosebleed. Other factors that promote nosebleeds are alcohol abuse, infection, use of blood thinning medications, hypertension, allergic and non-allergic rhinitis, and less commonly, from inherited bleeding problems and tumors.

Treatment:

In most cases the common nosebleed is fairly easy to stop, and no medical help is needed.

1. Using a clean cloth, tissue or sterile gauze, pinch the nose together at the nostrils and firmly apply pressure towards the face. Hold like this for at least 8 minutes, or until the nose stops bleeding.
2. Have the person lean forward slightly or sit up straight. Do not let the person lean back, or blood may flow into the windpipe. Keep the head above the heart, or in other words, don't let the person lie down. If they must lie down, try to keep their head elevated at a 45-degree angle.

3. Apply crushed ice in a bag or cloth to nose and cheeks. Make sure the ice is in a bag or cloth because direct application may cause frostbite to skin.

- Avoid medications which will thin the blood (such as aspirin), but make sure to contact your doctor before stopping taking any prescribed medications.
- Do not smoke.
- Try not to sneeze. If you must sneeze open your mouth to allow the air another way to escape to avoid upsetting the nose.
- Try not to strain. Heavy lifting/pulling/pushing should be avoided!
- Try to keep to a "cool diet" for 24 hours. Avoid hot liquids.
- Your doctor may recommend a lubricant for the inside of your nose if you are prone to recurrent nosebleeds. This is easily applied with a Q- tip or the tip of a finger. Make sure to coat the middle part of the nose especially, as it is the most vulnerable.
- If it does start up again attempt to clear the nose of clots by sniffing in forcefully. Nasal decongestant sprays may also be used, but if they are used for an extended period, they may become addictive.

First Aid & Injury Prevention Resources:

- First Aid Kit Checklist (<https://www.littleleague.org/university/articles/first-aid-kits-an-items-list/>)
- Little League First Aid Awareness Training (<https://www.littleleague.org/university/articles/first-aid-awareness-training-course/>)
- CDC Heads Up – Concussion Resources (<https://www.cdc.gov/heads-up/>)
- State-Specific Concussion Laws (<https://www.littleleague.org/player-safety/concussions-youth-athletes/>)
- State-Specific AED Laws (<https://www.littleleague.org/player-safety/state-laws-on-automated-external-defibrillators/>)
- State-Specific SCA Training Laws (<https://www.littleleague.org/player-safety/state-laws-on-sudden-cardiac-arrest-training/>)

EQUIPMENT SAFETY

Safe, well-maintained equipment helps prevent injuries and supports a positive playing experience. The information below reflects how playing equipment is inspected and monitored throughout the season.

Batting Helmets

All batting helmets must be NOCSAE-certified and free of cracks, dents, or deteriorating padding.

- Helmets are inspected at the start of the season and as needed
- Damaged or ill-fitting helmets are removed from use immediately
- Non-OEM (non-manufacturer) modifications are prohibited
- Properly fitted, undamaged helmets play an important role in preventing head injuries

Catcher's Gear

Catcher's equipment must be complete, well-maintained, and properly fitted for each player. A full set includes:

- Helmet with full face mask
- Dangling throat guard (required)
- Chest protector
- Leg guards

Equipment Inspections

At MARICOPA LL, equipment manager carry out regular equipment inspections throughout the season. These checks help identify items that should be repaired or removed from use.

- Unsafe or excessively worn equipment should be removed immediately
- Routine inspections help ensure players are always using equipment that will keep them safe from injury

Best Practice: Teach players to do quick self-checks of their helmets and gear before practices and games. Helping players look for cracks, loose padding, or missing pieces builds good habits and supports a shared culture of safety.

Additional information provided by your league:

- This Little League requires regular inspection of playing equipment.
- Unsafe equipment should not be given in team equipment bags.
- Managers, Coaches and Umpires are required to inspect equipment prior to each use.
- Bad equipment will be logged and will be removed and destroyed.
- All batters must wear a batting helmet in practices and games.
- Catchers must wear a catcher's helmet, facemask, throat guard, chest protector (long style), shin guards and athletic cup. Throat guards are required even on hockey style catchers' masks.
- Protective cups and mouth guards are encouraged for all players.
- Equipment must be inspected regularly to assure it is in good condition. Umpires will conduct an equipment inspection prior to the start of each game.
- Faulty equipment must be discarded and destroyed immediately. Please notify league equipment manager.
- Safety Officer and Equipment Manager will conduct a Equipment check and inventory prior to the beginning and end of each season.
- An Equipment inspection form will be complete with all equipment inspections and forward to the Safety Officer and Equipment Manager for review and action.

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

Equipment Safety Resources:

- Equipment and Facility Check-Ups (<https://www.littleleague.org/university/articles/make-regular-equipment-facility-check-ups-a-year-round-endeavor-for-your-league-or-district/>)

FACILITY SAFETY

Safe, well-maintained facilities help create a positive experience for players, families, and volunteers. Your league has shared the steps it takes to help keep playing conditions safe throughout the season.

Seasonal Facility Inspection

MARICOPA LL completes a thorough review of all fields and facilities at the beginning and end of each season. This inspection helps the league:

- Identify needed repairs
- Document safety concerns
- Plan for maintenance or improvements
- Confirm that fields and common areas are ready for use

Ongoing Facility Checks

MARICOPA LL conducts regular in-season checks to help ensure facilities remain safe and ready for play. These checks typically look for:

- Loose or damaged fencing
- Worn or broken bases
- Slick, uneven, or poorly drained surfaces
- Broken or unstable bleachers
- Lighting or electrical concerns
- Hazards in dugouts, walkways, or spectator areas

Field Safety

Before every game and practice, fields and dugouts should be reviewed to ensure safe playing conditions. These quick checks help volunteers:

- Spot hazards early
- Prevent injuries
- Address small issues before they become larger concerns
- Confirm that field equipment, playing surfaces, and dugout areas are safe and ready for use

At MARICOPA LL, all coaches, umpires, and board members inspect fields before games and/or practices. carry out field and dugout safety checks before games and practices.

Annual Little League Facility Survey

Each year, leagues complete the Little League Annual Facility Survey, which records the condition of each field, identifies maintenance or safety needs, and documents key details about layout, features, and emergency equipment.

A report generated from MARICOPA LL's completed facility survey is included with this SAFE Summary.

Best Practice: Create a simple, shared inspection checklist for coaches and volunteers to use before games and practices. Consistent use of the same checklist helps ensure issues are spotted early and reported quickly.

Additional information provided by your league:

Field Inspections and Storage Procedures

BEFORE THE SEASON STARTS

- Familiarize yourself with the safety materials.
- Appoint a Safety Parent for your team. They need to be at all the games and have a cellular phone. It can be an Assistant Coach.

PRIOR TO EACH GAME

- Complete a field safety checklist. Report any problems to your commissioner. Or to the League Safety Officer.
- Check the team equipment for any problems. Report any equipment problems to the Equipment Manager.
- Check the contents in your team's first aid kit. Contact the League Safety Officer for any items that need to be replaced.

STORAGE SHED

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

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

For more information about facility safety at MARICOPA LL, or to report a concern, please contact: League President

Facility Safety Resources:

- Day to Day Safety Checklist (<https://www.littleleague.org/university/articles/the-safest-little-league-experience-comes-from-doing-common-tasks/>)
- Pre-Season Facility Checkup (<https://www.littleleague.org/university/articles/conduct-a-facilities-safety-check-before-the-season-starts/>)

CONCESSION STAND SAFETY

Concession stands add to the game day experience, but they also involve equipment, heat sources, and food handling, all of which require clear safety procedures. The information below summarizes how MARICOPA LL helps maintain a safe concession operation throughout the season.

MARICOPA LL has confirmed that its concession stand(s):

- Follow all applicable local health and safety regulations
- Provide volunteers with guidance in safe food handling and equipment use
- Maintain a working fire extinguisher that is readily available
- Keep first aid supplies in the concession stand
- Do not allow minors to work in or remain inside the concession stand during operating hours

Best practice: Post simple safety reminders inside the concession stand so volunteers can quickly review expectations before each shift, including:

- Handwashing steps
- Safe food temperatures
- Equipment shut-off procedures
- Location of the fire extinguisher
- Emergency contact information

Additional information provided by your league:

Concession Stand Guidelines

Every worker must be instructed on these guidelines before they can work.

Wash your hands regularly:

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

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

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

Basic Rules:

1. Menu... smaller is better. No salads cut up fruit or vegetables, no food prepared at home.
2. Cook food thoroughly. Use a meat thermometer. Keep hotdogs and burgers at 41 degrees when cold and cook to 155 degrees or above when hot.
3. Rapidly reheat foods to 165 degrees. Slow cooking devices may activate bacteria and never reach killing temperatures.
4. All foods that require refrigeration must be cooled to 41 degrees F. as quickly as possible and held there until ready to use. To cool foods quickly, use the ice water bath (60% ice and 40% water), stir the product frequently, or

place their food in shallow pans no more than 4 inches in depth and refrigerate. Pans should not be stored one a top of the other and lids should be off or afar until the food is completely cooled. Check the temperature periodically to see if the food is cooling properly. DO NOT LEAVE FOOD OUT AT ALL!!

5. FREQUENT AND THOROUGH HANDWASHING IS REQUIRED.

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

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

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

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

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

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

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

THE TOP SIX CAUSES FOR ILLNESS

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

For more information about concession stand safety at MARICOPA LL, or to report a concern, please contact:
Concessions Manager

Concession Stand Safety Resources:

- Concession Stand Safety (<https://www.littleleague.org/university/articles/concession-stand-safety-tips-12-steps-to-safe-sanitary-food-service/>)
- Concession Stand Safety Checklist (<https://www.littleleague.org/university/articles/concession-stand-inspection-checklist/>)

TRAINING & EDUCATION

When volunteers are trained and prepared, it helps to prevent injuries, respond to emergencies, and create a positive experience for everyone involved. This section highlights the volunteer trainings that MARICOPA LL requires and encourages.

Abuse Awareness Training

Little League requires all volunteers who undergo a background check to complete Abuse Awareness Training each year. MARICOPA LL confirms that all required volunteers complete Abuse Awareness Training each season.

Safety Awareness Training (Little League University)

Safety Awareness Training helps volunteers understand common safety risks, recognize unsafe situations, and take proactive steps to prevent injuries.

MARICOPA LL requires Safety Awareness Training for: League Officers/Board Members, Managers and Coaches, Umpires.

First Aid Awareness Training (Little League University)

First Aid Awareness Training helps volunteers recognize injuries, respond appropriately, know when to call 911, and take steps to prevent medical emergencies.

MARICOPA LL requires First Aid Awareness Training for Not Required in our League.

Diamond Leader Training (Little League University)

Diamond Leader Training supports coaches and volunteers in creating a positive team environment focused on player well-being, sportsmanship, communication, and healthy culture.

MARICOPA LL requires Diamond Leader Training for Managers and Coaches.

Additional Trainings Offered or Encouraged

MARICOPA LL has indicated that it offers or requires the following additional trainings:

- Formal First Aid Certification
- CPR Certification

Best practice: Share a simple training plan at the start of the season outlining required courses, who must complete them, and suggested deadlines. Clear expectations help volunteers stay on track.

Training and Education Resources:

- Little League University (LLU) Trainings Overview (<https://www.littleleague.org/university/training/>)
- Little League Abuse Awareness Training (<https://www.littleleague.org/university/articles/abuse-awareness-training-course/>)
- Little League Safety Awareness Training (<https://www.littleleague.org/university/articles/safety-awareness-training-course/>)
- Little League First Aid Awareness Training (<https://www.littleleague.org/university/articles/first-aid-awareness-training-course/>)

ACCIDENT INSURANCE & INCIDENT REPORTING

Accidents can happen at any time, and being prepared helps leagues support families and volunteers when they do. Understanding and documenting injuries ensures everyone gets the help they need and allows the league to strengthen safety practices for future seasons.

How to Submit an Accident Claim

If a player or volunteer requires medical treatment after a league-sanctioned activity, families should follow these steps:

1. Download the Accident Claim Form from LittleLeague.org.
2. Provide the claimant's full information, including parent or guardian details if the claimant is a minor.
3. Complete all sections of the form. Missing information causes delays.
4. Include primary insurance information. If the claimant has no insurance, written employer verification is required.
5. Attach itemized medical bills that include dates of service, procedure codes, diagnosis codes, and charges.
6. For dental injuries, submit bills to the primary medical and dental insurer first, then include the insurer's Explanation of Benefits.
7. Have a league official (President, Safety Officer, etc.) complete and sign the League Statement section.
8. Completed claim forms and supporting documents must be mailed. Email and fax submissions cannot be accepted.

Questions about the claim process may be sent to AccidentClaim@LittleLeague.org.

Incident Tracking

MARICOPA LL documents all injuries and incidents that occur during league activities.

- Reports are completed using the official Little League Incident Tracking Form.
- A designated league officer is responsible for collecting and reviewing each report.
- Reviewing incident information throughout the season helps the league identify trends, address hazards, and strengthen safety practices.

Best practice: Monitor incident reports and near-miss situations regularly during the season. Tracking both helps identify emerging patterns, field conditions, equipment problems, or other safety concerns, so the league can take proactive steps to prevent injuries and improve the overall safety of the program.

Additional information provided by your league:

Accident Reporting Procedure

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

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

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

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

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

How to Replace the Injury Report Forms: The forms can be replaced by The Safety Officer or downloaded from www.leagueleague.org found under forms and publications.

To report an incident, or for more information about filing an accident claim, please contact: League Safety Officer

Accident Reporting Resources:

- Little League Incident Tracking Form (<https://www.littleleague.org/downloads/incident-injury-tracking-form/>)
- AIG Accident Claim Form (<https://www.littleleague.org/downloads/accident-claim-form/>)
- How to File an Accident Claim (<https://www.littleleague.org/university/articles/how-to-submit-an-accident-insurance-claim/>)
- Little League Insurance Program Overview (<https://www.littleleague.org/university/articles/little-league-insurance-programs/>)

LITTLE LEAGUE RULES & SAFETY BEST PRACTICES

Creating a safe, enjoyable playing environment begins with following Little League's official safety rules and reinforcing practices that protect players, volunteers, and families. MARICOPA LL has confirmed that it meets all required safety standards.

Little League Safety Rules

Little League's official safety rules are designed to prevent injuries and establish consistent expectations across the program. These rules help ensure safe play during practices and games.

Leagues must enforce the following:

- On-deck batters are not permitted in the Majors Division and below
- Batters, base runners, and player base coaches must wear helmets at all times
- Catcher's gear must include a dangling throat guard
- Metal cleats are prohibited in the Majors Division and below
- Disengageable bases are required on all baseball and softball fields
- Head-first sliding while advancing is not permitted in the Majors Division and below
- Pitch count limits and required rest days must be followed in all baseball divisions
- Bats must meet current Little League standards
- Game balls must meet current Little League standards and be in good condition

Safety Best Practices

In addition to official rules, many leagues adopt extra safety practices that strengthen routines, reinforce expectations, and create a positive environment for players, families, and volunteers.

Common safety best practices include:

- Keeping dugout and field gates closed during play
- Using a double first base on baseball and softball fields
- Reminding players not to throw equipment or swing bats near others
- Reviewing lightning and severe weather procedures with coaches and umpires
- Ensuring each team has emergency contact information available at practices and games
- Leading age-appropriate warm-ups and stretching to reduce injury risk
- Marking spectator areas clearly and keeping them separate from the field
- Encouraging volunteers, parents, and players to model sportsmanlike and respectful behavior
- Sharing safety reminders with families (emails, signage, or meetings)
- Posting safety signage in common areas (e.g., "No Climbing Fences," "Foul Ball Awareness," "AED Located Here")

Additional information provided by your league:

Enforcement of Little League Rules

- All volunteers must have a volunteer application filled out and on file with the League. Our league will provide annual background checks.
- No laminated bat shall be used... (rule 1.10)
- The traditional batting donut is not permissible... (rule 1.10)
- A pitcher shall not wear any items on his/her hands, wrists or arms which may be a distraction to the batter. White long sleeve shirts are not permitted... (rule 1.11)
- Pitcher shall not wear sweat bands on his/her wrists... (rule 1.15)
- Catcher must wear a catcher's mitt... (rule 1.12)
- All batters must wear protective batting helmets, all helmets must bear the NOCAE stamp... (rule 1.16)
- All male players must wear athletic supporters. Male catchers must wear the metal, fiber, or plastic type protective cup.
- A catcher's helmet must have the dangling type of throat protector and catcher's helmet during infield/outfield practice, pitcher warm-up and games.
- Skull caps are not permitted... (rule 1.17)
- Each team is allowed three coaches in the dugout...
- Coaches are encouraged to discourage "horseplay"
- No on deck batters are allowed in the Majors and below... (rule 1.08)

Umpire Safety Responsibilities

Umpires in attendance for games shall:

- Oversee all games according to Official Little League and Maricopa Little League Rules.
- Control players, fans, managers, and coaches to ensure they adhere to League code of conduct policy.
- Attend CPR& First Aid Training as needed to keep a current certification.
- Determining when games should be suspended or postponed. The following are reasons for suspending, postponing, or terminating a game:
 - o Unsuitable weather conditions
 - o Unsafe playing surface or environment (fields must be inspected before every game)
 - o Poor visibility due to darkness or weather conditions

- Be aware of proper equipment usage and watch for faulty, illegal, or ill-fitting equipment. They should bring this to the attention of the Manager.
- Discuss all decisions on game terminations or participant expulsion with the League Official.
- Conduct game in the spirit Little League is intended, with the welfare and better of the children as the primary goal.
- Report all issues to the League Official.
- Complete all necessary documentation required.

Lightning Procedures

Consider the following facts:

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

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

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

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

First Aid for a Lightning Victim:

- Call 911 immediately.
- Typically, the lightning victim has similar symptoms as that of someone having a heart attack. Consider: will moving cause more injury. If the victim is in a high-risk area, determine if movement is necessary. Lightning does strike twice in the same place. If you are not at risk, and moving is a viable option, you should move the victim.
- If the victim is not breathing, start mouth to mouth resuscitation. If it is decided to move the victim, give a few quick breaths prior to moving the victim.
- Determine if the victim has a pulse. If no pulse is detected, start cardiac compressions as well.

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

2026 FACILITY SURVEY REPORT

This report provides an overview of the information submitted by MARICOPA LL through the Little League Annual Facility Survey. The survey helps document the condition of each field, identify safety or maintenance needs, and track important facility details such as fencing, bleachers, lighting, emergency equipment, and field use.

The information in this summary reflects the league's responses for each field and is intended to support planning, safety awareness, and ongoing facility improvements throughout the season.

COPPER SKY REGIONAL PARK – FIELD #1

44345 W Bowlin Rd
Maricopa, AZ 85138

Facility survey last updated 2/1/2026

Field Dimensions

Left Field	Center Field	Right Field	Backstop	Outfield Fence Height
320 ft.	400 ft.	320 ft.	60 ft.	8 ft.

Left Field Foul Territory

Home Plate	Third Base	Foul Pole
60 ft.	60 ft.	60 ft.

Right Field Foul Territory

Home Plate	First Base	Foul Pole
60 ft.	60 ft.	60 ft.

General Details

Parking Capacity	101 or more
Bleacher Capacity	101-300
Ownership	Municipality
Maintenance Responsibility	Municipality

Emergency Equipment

Safety Features	Outfield warning track, Dugout fencing, Bullpen, Disengageable bases
Emergency Equipment Available	First aid kit

Field and Playing Area

Field is Fenced	Permanent
Fence Material	Chain-link
Basepath Material	Soil
Baseline Marking Material	Lime
Infield Surface	Grass
Playing Features	Permanent pitching mound, Foul poles, Backstop

Lighting

Lights Installed	Yes
Pole Type	Steel
Underground Wiring	<input checked="" type="checkbox"/>
Light Poles Grounded	
Date Electrical System Last Inspected	
Date Light Levels Last Tested	
Light Levels Meet Little League Standards	Yes

Field Usage

Field Used for Tournament Play	Yes
Scheduling Limitations	Limited time allowed for practices, Restrictions on the number of teams or games scheduled, School or municipal policies that impact scheduling

Bleachers

Material	Metal
Annual Inspection	
Safety Railing	
Handrails	
Overhead Screens	

COPPER SKY REGIONAL PARK – FIELD #2

44345 W Bowlin Rd
Maricopa, AZ 85138

Facility survey last updated 2/1/2026

Field Dimensions

Left Field	Center Field	Right Field	Backstop	Outfield Fence Height
310 ft.	310 ft.	310 ft.	25 ft.	8 ft.

Left Field Foul Territory

Home Plate	Third Base	Foul Pole
25 ft.	25 ft.	25 ft.

Right Field Foul Territory

Home Plate	First Base	Foul Pole
25 ft.	25 ft.	25 ft.

General Details

Parking Capacity	101 or more
Bleacher Capacity	101-300
Ownership	Municipality
Maintenance Responsibility	Municipality

Emergency Equipment

Safety Features	Outfield warning track, Dugout fencing, Bullpen, Disengageable bases
Emergency Equipment Available	First aid kit

Field and Playing Area

Field is Fenced	Permanent
Fence Material	Chain-link
Basepath Material	Soil
Baseline Marking Material	Lime
Infield Surface	All-dirt or clay infield
Playing Features	Portable pitching mound, Foul poles, Backstop

Lighting

Lights Installed	Yes
Pole Type	Steel
Underground Wiring	<input checked="" type="checkbox"/>
Light Poles Grounded	
Date Electrical System Last Inspected	
Date Light Levels Last Tested	
Light Levels Meet Little League Standards	Yes

Field Usage

Field Used for Tournament Play	Yes
Scheduling Limitations	Limited time allowed for practices, Restrictions on the number of teams or games scheduled, School or municipal policies that impact scheduling

Bleachers

Material	Metal
Annual Inspection	
Safety Railing	
Handrails	
Overhead Screens	

COPPER SKY REGIONAL PARK – FIELD #3

44345 W Bowlin Rd
Maricopa, AZ 85138

Facility survey last updated 2/1/2026

Field Dimensions

Left Field	Center Field	Right Field	Backstop	Outfield Fence Height
310 ft.	310 ft.	310 ft.	25 ft.	8 ft.

Left Field Foul Territory

Home Plate	Third Base	Foul Pole
25 ft.	25 ft.	25 ft.

Right Field Foul Territory

Home Plate	First Base	Foul Pole
25 ft.	25 ft.	25 ft.

General Details

Parking Capacity	101 or more
Bleacher Capacity	101-300
Ownership	Municipality
Maintenance Responsibility	Municipality

Emergency Equipment

Safety Features	Outfield warning track, Dugout fencing, Bullpen, Disengageable bases
Emergency Equipment Available	First aid kit

Field and Playing Area

Field is Fenced	Permanent
Fence Material	Chain-link
Basepath Material	Soil
Baseline Marking Material	Lime
Infield Surface	All-dirt or clay infield
Playing Features	Portable pitching mound, Foul poles, Backstop

Lighting

Lights Installed	Yes
Pole Type	Steel
Underground Wiring	<input checked="" type="checkbox"/>
Light Poles Grounded	
Date Electrical System Last Inspected	
Date Light Levels Last Tested	
Light Levels Meet Little League Standards	Yes

Field Usage

Field Used for Tournament Play	Yes
Scheduling Limitations	Limited time allowed for practices, Restrictions on the number of teams or games scheduled, School or municipal policies that impact scheduling

Bleachers

Material	Metal
Annual Inspection	
Safety Railing	<input checked="" type="checkbox"/>
Handrails	
Overhead Screens	

COPPER SKY REGIONAL PARK – FIELD #4

44345 W Bowlin Rd
Maricopa, AZ 85138

Facility survey last updated 2/1/2026

Field Dimensions

Left Field	Center Field	Right Field	Backstop	Outfield Fence Height
310 ft.	310 ft.	310 ft.	25 ft.	8 ft.

Left Field Foul Territory

Home Plate	Third Base	Foul Pole
25 ft.	25 ft.	25 ft.

Right Field Foul Territory

Home Plate	First Base	Foul Pole
25 ft.	25 ft.	25 ft.

General Details

Parking Capacity	101 or more
Bleacher Capacity	101-300
Ownership	Municipality
Maintenance Responsibility	Municipality

Emergency Equipment

Safety Features	Outfield warning track, Dugout fencing, Bullpen, Disengageable bases
Emergency Equipment Available	First aid kit

Field and Playing Area

Field is Fenced	Permanent
Fence Material	Chain-link
Basepath Material	Soil
Baseline Marking Material	Lime
Infield Surface	All-dirt or clay infield
Playing Features	Portable pitching mound, Foul poles, Backstop

Lighting

Lights Installed	Yes
Pole Type	Steel
Underground Wiring	<input checked="" type="checkbox"/>
Light Poles Grounded	
Date Electrical System Last Inspected	
Date Light Levels Last Tested	
Light Levels Meet Little League Standards	Yes

Field Usage

Field Used for Tournament Play	Yes
Scheduling Limitations	Limited time allowed for practices, Restrictions on the number of teams or games scheduled, School or municipal policies that impact scheduling

Bleachers

Material	Metal
Annual Inspection	
Safety Railing	
Handrails	
Overhead Screens	