



2025 SEASON A SAFETY AWARENESS PLAN (ASAP)

August 25, 2025

"WHERE SAFETY COMES FIRST"

Pahrump Valley Little League is a non-profit organization run by volunteers whose mission is to provide an opportunity for the children of our community to learn the game of baseball in a friendly and safe environment.

League ID: 4280312

Meet the 2025 Board of Directors

League Title	Name	Email
League President	Lou Banuelos	LuisB.PVLL@gmail.com
League Vice President	Steve Davis	Steve.PVLL@gmail.com
League Secretary	Katie Loveless	Katie.PVLL@gmail.com
League Treasurer	Bobbi-Lee Ward	Bobbi.pvll@gmail.com
League Safety Officer	Angelina Curayag	Angelina1.PVLL@gmail.com
League Player Agent	Marcie Tillery	Marcie.PVLL@gmail.com
League Sponsorship	Hayley Redmond	Hayley.PVLL@gmail.com
Snack Bar	Heather Matheny	Brandi.PVLL@gmail.com
League Coaching Coordinator	Steve Davis	Steve.PVLL@gmail.com
League Umpire-in-Chief	Brandi Matheny	Brandi.PVLL@gmail.com
Assistant Player Agent	Sean Havel	Sean.PVLL@gmail.com
Board Member at Large	Ray Wagner	RayW.PVLL@gmail.com

We, as Pahrump Valley Little League Board of Directors, are committed to creating a safe and healthy environment for all our players and volunteers, both on the field and off.

Distribution of Safety Plan:

- Each team will receive a paper copy of the safety manual located in the Coaches/Team Binder.
 - Managers, Coaches, and/or Team Moms will have a copy at all league functions, including all practices and games.
- It will be posted in the clubhouse and concession stand.
- A link will be provided on Pahrump Valley Little League's website:
Pahrumpvalleylittleleague.org





Emergency Phone List



For Pahrump Valley Little League

Emergency:

Police/Fire Emergency.....9-1-1
Non-threat Emergency.....775-751-7000
Poison Control.....800-222-1222

Non-Emergency:

Animal Control.....775-751-7000

Area Hospital:

Desert View Hospital.....775-751-7500
360 Lola Ln Pahrump NV 89048

Pahrump Valley LL Board of Directors/Officers:

League President.....(775)253-4274
League Vice President.....(262)391-3110
League Secretary.....(541)633-0737
League Treasurer..(541)232-8870
League Safety Officer.....(702) 640-7846
League Player Agent.....(775)764-1896
League Marketing/Public Relations.....(702)430-0538
League Information Officer.....(262)391-3110
League Coach Coordinator.....(262)391-3110
League Umpire-in-Chief.....(775)513-6758
Board Member at Large.....(760)221-8125
Board Member at Large.....(702)325-6855

District Staff:

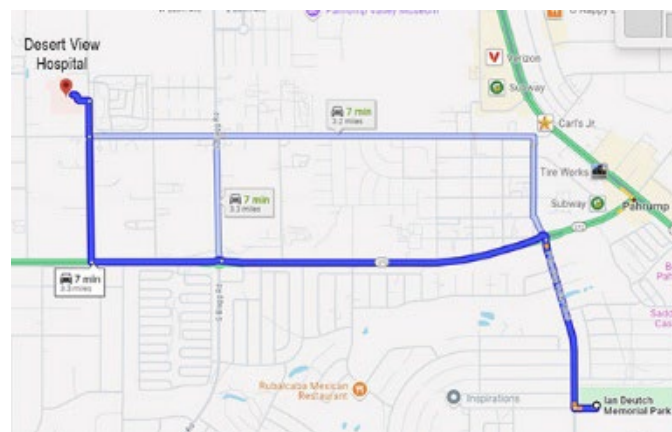
District Administrator, Brian Cripps.....(702)541-5200
District Safety Officer, Joe Gibson.....(805)279-0601

Southern Nevada Health District
Office of Emergency Medical Services and Trauma System

SUBJECT: Receiving Hospital Directory

This directory is subject to change and is provided for informational purposes only.

HOSPITAL NAME ADDRESS PHONE	HOSP CODE	TRAUMA LEVEL	BURN CENTER	STROKE DEST	HYPOT- THERMIA	PEDS DEST	L & D	HELPAD	SPECIAL SERVICES
Boulder City Hospital 801 Adams Blvd Boulder City, NV 89005 (702) 253-4111	H-8							X	
Centennial Hills Hospital 7950 North Durango Dr Las Vegas, NV 89149-4409 (702) 365-9040	H-19			X	X		X	X	
Desert Springs Hospital 3075 E. Flamingo Rd Las Vegas, NV 89119 (702) 753-4900	H-2			X	X			X	
Henderson Hospital 1050 Galleria Dr Henderson, NV 89011 (702) 583-3500							X	X	
Meek View Hospital 1259 Bertha Howe Avenue Mesquite, NV 89027 (702) 348-8040	H-25						X	X	
Meek Of Catherine (Fandel) Hospital 4700 Las Vegas Blvd N Reno, NV 89505 (702) 693-2043	H-8						X		
Mountain View Hospital 8150 N. Tropic Way Las Vegas, NV 89120 (702) 255-5025	H-11			X	X		X		
North Vista Hospital 1400 East Lake Mead Blvd North Las Vegas, NV 89030 (702) 498-7711	H-5								
Southern Hills Hospital 8550 W. Sunset Road Las Vegas, NV 89145 (702) 688-2100	H-16			X	X		X	X	
Spring Valley Hospital 9450 South Rainbow Blvd Las Vegas, NV 89118 (702) 653-3000	H-15			X	X		X	X	
St. Rose de Lima 102 E. Lake Mead Pkwy Henderson, NV 89015 (702) 418-0000	H-7			X	X			X	
St. Rose San Martin 8280 Vivid Warm Springs Rd Las Vegas, NV 89133 (702) 493-6000	H-23			X			X	X	
St. Rose Sierra 2001 St. Rose Pkwy Henderson, NV 89052 (702) 618-5000	H-22 (-1/-P)	Level III		X	X	X	X	X	
Summit Medical Center 857 Town Center Dr Las Vegas, NV 89144 (702) 253-4000	H-1 (-P)			X	X	X	X	X	
Summit Hospital 5160 South Maryland Pkwy Las Vegas, NV 89109 (702) 751-8000	H-6 (-1/-P)	Level II		X	X	X	X	X	SA Evaluations (Patients < 38 y/o)
University Medical Center 1800 W. Charleston Blvd Las Vegas, NV 89102 (702) 363-2000	H-4 (-1/-P)	Level I Pediatric Level II	X	X	X	X	X	X	SA Evaluations (Patients > 38 y/o)
Valley Hospital 825 Shadow Lane Las Vegas, NV 89106 (702) 368-4000	H-9			X	X			X	
HOSPITAL NAME ADDRESS PHONE	HOSP CODE	TRAUMA LEVEL	BURN CENTER	STROKE DEST	HYPOT- THERMIA	PEDS DEST	L & D	HELPAD	SPECIAL SERVICES



Emergency Contact Procedures

For Pahrump Valley Little League



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

- 1) **Dial 9-1-1**
- 2) Give the dispatcher all necessary information and answer any questions that they might ask.
 - Ian Deutch Memorial Field Address: 1600 Honeysuckle St, Pahrump, NV 89048
 - Cross Streets: Honeysuckle St. and Dandelion St.
- 3) Stay on the phone with the dispatcher.
- 4) Continue to care for victim until help arrives, and do not leave them.
- 5) Assign someone to go look for an emergency vehicle.

Background Checks:

Little League International has pre-established criteria for all chartered leagues to perform an investigation into the background of all individuals who volunteer in any capacity (Board members, managers, coaches, concession stand, team mom, etc.). Each volunteer will be required to complete, and successfully pass, a voluntary background check prior to volunteering. The volunteer will complete the volunteer application and provide a copy of their government issued photo identification.

Background investigations are done to verify that volunteers are not registered sex offenders and provides additional protection to the children. Pahrump Valley Little League will submit all volunteers to JD Palantine, Little League International's approved background check provider, that will list any convictions nationwide for all applicants. Upon clearance of individual background investigations all volunteers will be notified by the Board of Directors.

[illegible]

Fundamentals Training

In accordance with Pahrump Valley Little League's commitment to safety, we require a minimum of one manager or coach per Little League Team to attend a Fundamentals Training session. This not only ensures each player gets quality instruction on the game of baseball, but to guarantee our volunteers are conducting practices in a safe manner.

Fundamentals Training will address basic components of the game of baseball including, but not limited to, hitting, pitching, fielding, and sliding taught by experienced baseball coaches. Educating the coaches and managers in a safe manner to teach these essential baseball skills to the players ensure the longevity of our Little League players. Additionally, this training will assist and support our new coach and manager volunteers. During these training sessions, if it is noted, or if a manager/coach requests, that additional training times are needed, one of Pahrump Valley Little League's experienced coaches will create a plan to encourage and strengthen the manager/coach throughout the season.

Fundamentals Training Dates:

- February 14

First Aid Training

Along with our Fundamentals Training, one manager or coach per team is required to attend at least one First Aid Training session. The First Aid Training session is open to all Little League volunteers and is highly encouraged. The training will include the importance of prevention of sports injuries as top priority, followed by the identification and applicable treatment of the most common sports injuries including:

- Strains
- Sprains
- Contusions
- Lacerations
- Concussions
- Fractures
- Heat related illnesses
- Insect bites/bee stings
- Overuse injuries

First Aid, CPR and AED Training

[CPR & First Aid Certification Class \\$14.95 | Online CPR & First Aid Training \(nationalcprfoundation.com\)](#)

Board Members, Managers and coaches are highly encouraged to receive a certificate in these trainings.

Those who take the online training are to pay for it themselves and then when the training is completed, and they have received their certification they will present Pahrump Valley Little League with the certificate and receipt for a full reimbursement.

All players are required to fill out a Little League Baseball® Medical Release Form, and a copy is required to be kept in the Team Binder and available at every Little League team event. This allows the team manager, coach, and/or safety officer to take the injured player to the hospital to be treated in case an approved family member is not available.



**Little League® Baseball and Softball
MEDICAL RELEASE**



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

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

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

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

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

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

PARENT OR LEGAL GUARDIAN AUTHORIZATION: Email: _____

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

Family Physician: _____ Phone: _____

Address: _____ City: _____ State/Country: _____

Hospital Preference: _____

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

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

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

Name	Phone	Relationship to Player

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

Medical Diagnosis	Medication	Dosage	Frequency of Dosage

Date of last Tetanus Toxoid Booster: _____

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

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

FOR LEAGUE USE ONLY:

League Name: _____ League ID: _____

Division: _____ Team: _____ Date: _____

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



COACH, HAVE YOU DONE YOUR SAFETY CHECKS?



Before the season:

- ✓ Familiarize yourself with all safety materials.
- ✓ Appoint a 'safety parent' for your team (can be team mom).
 - Someone who will be at all games and has a reliable cellular phone.

Prior to the start of each game/practice:

- ✓ Complete the field safety checklist and report any problems to League Safety Officer or available Board Member.
- ✓ Check all team equipment for any problems and report any equipment problems to the Equipment Manager or available Board Member.
- ✓ Check the contents in your team's first aid kit.
 - For any items that need to be replaced or have expired, contact the League Safety Officer or available Board Member.
- ✓ Walk the field for debris/holes.
- ✓ Warm up your players!

Storage shed:

- ✓ All Little League board members who possess a key to the storage shed and clubhouse must:
 - Be aware of their responsibility for the orderly and safe storage of all equipment including but not limited to: rakes, shovels, and bases.
 - You must read the written operating procedures for all equipment you intend to use.
- ✓ All chemicals or organic materials stored in the sheds shall be properly marked and labeled.
 - Any witnessed "loose" chemicals/organic materials within these sheds will be cleaned up and disposed immediately by a member of the Little League Board of Directors to ensure no accidental exposure, or injuries occur.



PRE-GAME FIELD INSPECTION CHECK LIST



Manager:

Team:

Field:

Date:

Field Condition	Yes	No	Catchers Equipment	Yes	No
Backstop Intact			Hockey Catchers Helmet		
Home Plate Intact			Dangling Throat Guard		
Bases Secure			Helmet		
Pitchers Mound Safe			Catchers Mitt		
Batter's Box Lined/Level			Chest Protector		
Infield Fence			Shin Guards		
Outfield Fence					
Foul Lines Marked					
Coaches Boxes Lined			Dugout	Yes	No
Free of Foreign Objects			Fence in Good Standing		
Grass Surface Even			Benches in Good Repair		
			Trash Cans Present		
			Trash/Rubbish Needs Removed		
Players and Equipment	Yes	No			
Batting Helmets					
Bats Inspected/Meet Standard			Spectator Area	Yes	No
Face Mask (Minors/Majors)			Bleachers Safe		
Proper Cleats			Bleachers Clean		
Athletic Cups (Males)			Trash Cans Available		
Full Uniform			Parking Lot Safe		
			Protective Screen/Fencing		
Safety Equipment	Yes	No	Safety Equipment	Yes	No
First-Aid Kit 1 per Team			Safety Manual (ASAP)		
Medical Release Forms			Injury Report Forms		
Ice Packs			Drinking Water		

REPORT ANY PROBLEMS TO YOUR SAFETY OFFICER OR LITTLE LEAGUE BOARD MEMBER.

*Turn this form into the concession stand, safety officer, or board member prior to every game.

Concession Stand Guidelines

PVLL's commitment to safety goes beyond just the playing field, and the players. The safety guidelines extend to our concession stand to ensure the highest level of cleanliness and quality for all persons.



***All volunteers will be educated on these guidelines and must adhere to them before being allowed to work in the concession stand.**

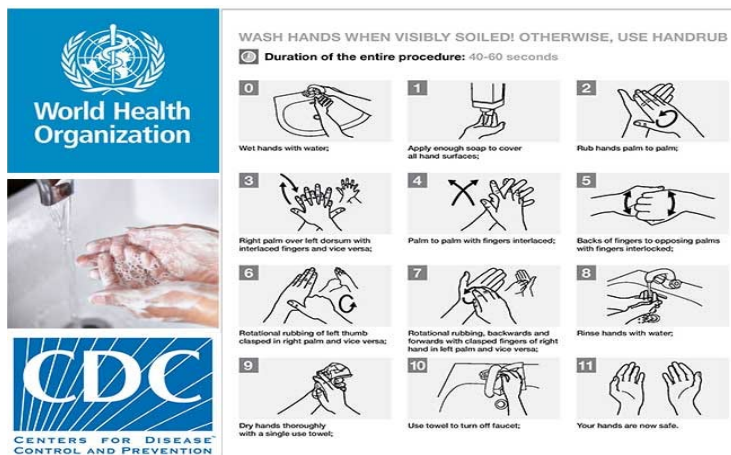


When to wash hands:



- Upon entering concession stand.
- After handling money/payment cards.
- After using the restroom.
- After coughing, sneezing, using a tissue, touching face.
- Before any food preparation.
- When switching from raw foods to ready to eat foods and visa versa.
- After touching any soiled surface.
- After eating, drinking, or using tobacco products.

***These infographics will be placed in concession stand in conspicuous place.**



Basic Concession Stand Rules:

1. No food prepared at home is allowed.
2. All food will be cooked thoroughly and will be checked utilizing a meat thermometer (and sanitized in between uses).
 - a. Cold hotdogs and hamburgers will be stored at 41°F and cooked to 155°F or above when ready to eat.
 - b. All foods will be heated rapidly to 165°F as slow cooking may activate bacteria and not reach bacteria killing temperature.
3. All foods that require refrigeration must be cooled to 41°F as quickly as possible and held there until ready to use.
 - a. To cool foods quickly, an ice water bath (60% ice and 40% water) will be used stirring the product frequently, and/or placing the food in shallow pans of no more than 4-inches in depth then refrigerated.
 - i. Pans will not be stored on top of each other, and lids will be off of food until properly cooled.
 - b. No food will be left out at all!
4. **Frequent and thorough handwashing is required!**
5. Only healthy individuals will prepare and serve food.
 - a. Anyone presenting with any symptoms of disease (cramps, nausea, fever, vomiting, diarrhea, cough, runny nose, etc.), or who has open sores/cuts/wounds will not be allowed into the concession area.
 - b. All individuals in the concession area will have clean clothes, should not smoke, vape, or use tobacco products near the concession area, and hair nets will be recommended.
6. Gloves or utensils will be required when handling raw foods, ready-to-eat foods, or food preparation surface.
7. Disposable utensils will be provided for food services given to patrons.
8. All reusable serving, preparation, and cooking items will be washed using the four-step method: 1- hot soapy water, 2- rinse in clean water, 3- chemical or heat sanitization, 4- air dry.
9. Ice used in cooling cans/bottles will not be used in beverages served in a cup and will be stored separately.
 - a. Ice to be used for cupped beverages will be scooped with scoop and not hands or cup.
10. Cleaning/wiping cloths will be rinsed and stored in a bucket sanitizer that is 1-gallon of water to ½ tsp of chlorine bleach. Sanitizer water will be changed every 2 hours.
11. Foods will be kept covered to protect from insects, and properly stored after close of concession stand.
 - a. All pesticides will be stored away from food.
 - b. Garbage and paper waste will be placed in a refuse container with a tightly fitting lid.
12. Food will be stored off the floor at a minimum of 6 inches. After your event is finished, clean the concession area and discard any unusable food.

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.





Accident Reporting



Any incident that causes a player, Manager, Coach or Umpire to receive medical treatment or first aid must be reported to the Safety Officer within 48 hours of the incident.

Safety Officer:

Name: Angie Curayag

Cell Number: (702)640-7846

Email: Angelina1.PVLL@gmail.com

Reporting incidents can be done by a phone call, email, or Injury Report. The minimum information needed is as follows:

- Name and address of the injured person.
- The date, time, and location of the incident.
- As detailed a description of the incident as possible.
- The preliminary estimation of the extent of the injury.
- The name and phone number of the person making the report.
- Names and phone numbers of any witnesses.

Injury Report forms are in each team's safety packet. Safety Parents can assist in filling out the form and/or calling the Safety Officer within 48 hours.

Little League insurance is a supplemental insurance to the insured's own insurance. Note: there is a small deductible.

LITTLE LEAGUE, BASEBALL AND SOFTBALL
ACCIDENT NOTIFICATION FORM
INSTRUCTIONS

Send Completed Form To:
Little League, Inc., 10000
5500 E. 10th, Suite 100, Las Vegas, NV 89119
Attention: Safety Officer
Phone: (702) 438-1234

Read Instructions Carefully:
1. This form is to be completed by the parent/guardian of the injured player, manager, coach, or umpire.
2. The form is to be completed as soon as possible after the incident, but no later than 48 hours after the incident.
3. The form is to be completed in full, including all sections, and returned to the Little League office.
4. The form is to be completed in full, including all sections, and returned to the Little League office.
5. The form is to be completed in full, including all sections, and returned to the Little League office.
6. The form is to be completed in full, including all sections, and returned to the Little League office.
7. The form is to be completed in full, including all sections, and returned to the Little League office.
8. The form is to be completed in full, including all sections, and returned to the Little League office.
9. The form is to be completed in full, including all sections, and returned to the Little League office.
10. The form is to be completed in full, including all sections, and returned to the Little League office.

Player Information:
Name: _____
Age: _____
Position: _____
Team: _____
Coach: _____
Manager: _____
Umpire: _____

Incident Information:
Date: _____
Time: _____
Location: _____
Description: _____
Witnesses: _____
First Aid: _____
Medical Attention: _____
Insurance: _____

Signature:
Parent/Guardian: _____
Coach/Manager/Umpire: _____
Date: _____

For Residents of California:
This form is to be completed by the parent/guardian of the injured player, manager, coach, or umpire.
The form is to be completed as soon as possible after the incident, but no later than 48 hours after the incident.
The form is to be completed in full, including all sections, and returned to the Little League office.

For Residents of Other States:
This form is to be completed by the parent/guardian of the injured player, manager, coach, or umpire.
The form is to be completed as soon as possible after the incident, but no later than 48 hours after the incident.
The form is to be completed in full, including all sections, and returned to the Little League office.

Player Information:
Name: _____
Age: _____
Position: _____
Team: _____
Coach: _____
Manager: _____
Umpire: _____

Incident Information:
Date: _____
Time: _____
Location: _____
Description: _____
Witnesses: _____
First Aid: _____
Medical Attention: _____
Insurance: _____

Signature:
Parent/Guardian: _____
Coach/Manager/Umpire: _____
Date: _____

Injury Reports can be replaced by The Safety Officer or downloaded from www.leagueleague.org found under forms and publications if additional copies are needed.



First Aid

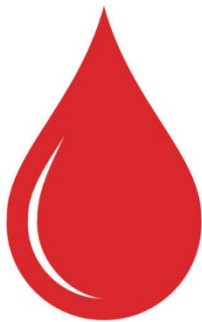
Each team will be provided with a league issued first aid kit.

Each kit includes 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

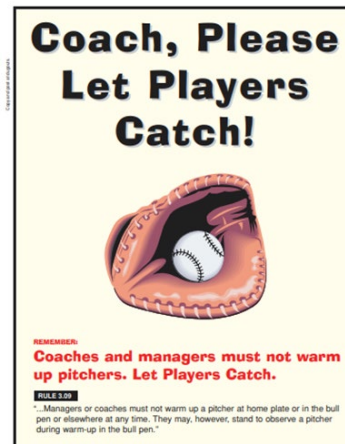


1. Bleeding must be stopped, the open wound covered, and the uniform changed if there is blood on it before the athlete may continue.
2. Routinely use gloves to prevent mucous membrane exposure when contact with blood or other body fluids is anticipated (Provided in the first aid kit).
3. Immediately 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.

- All volunteers must have a volunteer application filled out and on file with the Little League.
 - PVLL will provide annual background checks from Oct. 1 to Sept. 30
 - All Coaches must do the Dimond Leader Training
- The bat must be a baseball bat that meets the USA Baseball Bat standard. (rule 1.00)
- Traditional batting donut is not permissible. (rule 1.10)
- A pitcher shall not wear any items on their hands, wrists, or arms which may be distraction to the batter.
 - White long sleeve shirts are not permitted. (rule 1.11)
 - Pitcher shall not wear sweat bands on their 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.
 - No painting or stickers allowed on helmets. (rule 1.16)
- All male players must wear athletic supporters. Male catchers must wear the metal, fiber, or plastic type protective cup.
- Catching helmet must have the dangling type throat protector and catcher's helmet during infield/outfield practice, pitcher warm-up and games.
- Each team is allowed three coaches in the dugout.
- Coaches are to discourage "horseplay" while in dugout and on the field.
- No on deck batters are allowed in the Majors and below. (rule 1.08)

In accordance with Little League International, PVLL adheres to all rules set by LLI, in addition to our own rules and bylaws. As such, these rules will absolutely, without deviation, be adhered to by all players, Coaches, and Managers during games and practices:

Enforcement of Little League Rules



Lightning Facts and Procedures

Consider the following facts:

- The average lightning stroke 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.

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. Don't play on an unsafe field or with unsafe equipment. Check the teams' equipment prior to each use.

Hydration

Tips to Prevent Heat Illness:

- 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.



How is it treated?

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.

****All Managers are encouraged to bring water to each practice and game. ****

Players are required to bring bottled water or sports drink.



Submitting Player, Manager and Coach Data

Player, Manager, and Coach information will be submitted through the Little League Data Center at www.littleleague.org no later than April 1, 2024, or two weeks following the draft.

Survey Questions

We will answer the survey questions in the Little League Data Center.

Concussions

All 50 states have laws specific to the management of concussions and head injuries. Some states require not just leagues but DA's, ADA's 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 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.
- Most 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.

CONCUSSION Information Sheet

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

What Is a Concussion?

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

How Can I Help Keep My Children or Teens Safe?

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

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

Talk with your children and teens about concussion.

Tell them to report their concussion symptoms to you and their coach right away. Some children and teens think concussions aren't serious or worry that if they report a concussion they will lose their position on the team or look weak. Be sure to remind them that it's better to miss some time from the whole season.

To learn more, go to www.cdc.gov/HEADSUP



HEADS UP CONCUSSION

Concussions affect each child and teen differently, while most children and teens with a concussion feel better within a couple of weeks, some will have symptoms for months or longer. Talk with your children's or teens' health care provider if their concussion symptoms do not go away or if they get worse after they return to their regular activities.

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

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 911 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

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

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

Revised 2020

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

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

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

Athlete Name Printed: _____ Date: _____

Athlete Signature: _____

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

Parent or Legal Guardian Name Printed: _____ Date: _____

Parent or Legal Guardian Signature: _____

HEADS UP CONCUSSION

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

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

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

Do not try to judge the severity of the injury yourself. Only a health care provider should evaluate a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days. The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.

To learn more, go to www.cdc.gov/HEADSUP

You can also download the CDC HEADS UP app to get concussion information at your fingertips. Just scan the QR code pictured at left with your smartphone.



Completion Certificate

Lindsay Scharf
has successfully completed
Concussion In Sports

01/17/2022
Date of Completion

Nevada
State of Completion

0C97D50899F2
Completion Code

Dr. Kevin T. Henaff
NFHS Executive Director

This certificate is awarded to the participant, not the issuing organization. This is not an approval for the participant to play.



August 25, 2025

16

Pahrump Valley 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, **Pahrump Valley 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/details>
 - c. A copy of the Certificate of Completion for each of the above individuals shall be submitted to the League Safety Officer.
2. 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.
3. The Little League player and his or her parent or legal guardian must sign the statement below acknowledging that they have read and understand the terms and conditions of the policy and agree to be bound by the policy.



Pahrump Valley Little League Concussion Prevention, Management and Treatment Policy Player and Parental Acknowledgement

We, the undersigned, acknowledge that we have been provided with a copy of the **Pahrump Valley** Little League Concussion Prevention, Management and Treatment Policy, and that we have read and understand the policy, or it has been read to us and we understand the same. We hereby agree to follow all procedures set forth in said Policy at all times during which our son or daughter participates in Little League activities and events.

Dated: _____
Player

Dated: _____
Parent/Legal Guardian Parent/Legal Guardian

LEAGUE USE: Division: _____ Team: _____

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.
- SafeSport prompted USA Baseball to create Pure Baseball



USA Baseball Pure Baseball Initiative

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-one-one contact with minors.
- League volunteers are required to complete the Abuse Awareness training provided by USA Baseball and/or SafeSport.

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

<https://www.usabdevelops.com/ItemDetail?iProductCode=OCAA&Category=ONLINE&Webs>

