

**WEST BROWNSVILLE
LITTLE LEAGUE
RE-OPENING GUIDELINES**

January 2021



West Brownsville Little League

Re-opening Guidelines

1. Creation of a Re-opening Recovery Committee

The West Brownsville Little League Board of Directors formed a committee that has been charged with putting together a plan to eventually resume normal activities and in the interim proceed with caution by taking pro-active steps to help ensure the safety of our players, coaches, and fans. Members of this committee include Dino X Chavez – President, Patricia Silva – VP Softball, Marc Lucio – VP Baseball, Joe Salazar – Treasurer / Past President, Jenny Camacho – Information Officer, Jesus Escamilla – Board Member / Coach, and David Diaz – Board Member / Coach.

The committee has developed this plan by using guidelines already developed by Little League International, and the Centers for Disease Control and Prevention, Brownsville ISD, as well as suggestions that come from Brownsville Parks and Recreation Department (BPARD). Our committee completed a risk assessment of our organization's operations. We analyzed the assessments supported by all available qualitative data from committee members and subject matter experts and identified which factors pose various levels of risk. We will group these factors into the appropriate phase for reopening based on risk and the ability to implement mitigation strategies.

Our recovery team will establish a plan for sourcing critical supplies needed to maintain cleaning and disinfection measures. The plan will include both cleaning supplies as well as personal protective equipment that may be needed by staff.

2. Assessing the Risk of Spaces, Facilities, and Programs

GENERAL RISK ASSESSMENT

- (1) Transmission risk in playing baseball or softball can vary according to the facility's safety practices. However, a more important variable that can affect transmission risk is the number of participants involved, and whether these participants come from the same community. The matrix below helps us understand how these risks can vary.

RISK ASSESSMENT MATRIX			
Category	Contact Intensity	Number of Contacts	Modification Potential
Practice at Home	Low	Low	High
Practice with Squad	Medium-Low	Medium-Low	Medium
Practice with Team	Medium-Low	Medium	Medium
Intraleague Game Play	Medium	Medium-High	Low
Interleague Game Play	Medium	High	Low
Contact Intensity: Rated as low, medium or high, taking into account close contact vs. distant contact and duration of contact. For example, low contact intensity activities are brief and fairly distant, like walking past someone on a trail. High contact intensity involves prolonged close contact, like sharing a dorm room.			
Number of Contacts: Rated as low, medium or high, defined by the approximate number of people in the setting at the same time.			
Modification Potential: Defined as a qualitative assessment of the degree to which activities can be modified to reduce risk. In this case, high modification potential is better. For example, a high modification potential allows for substantial changes to the space or activity to limit contact. This may include implementing physical distancing measures, creating physical barriers between people, using technology to facilitate communication, or having people wear PPE. A low modification potential may only allow for one or two of these measures.			

- (2) Practicing at home involves little to no risk with little to no contact intensity with others other than possibly a parent or sibling helping with the practice. Practicing with a squad, defined as a group of 10 or less, increases contact intensity and risk

of transmission. Practicing with an entire team further increases contact intensity and risk of transmission. However, practicing as a squad or as an entire team allows for potential modifications to help lower risk. Playing games against other teams increases contact intensity and risk transmission as more participants are involved. Playing by normal game rules allows for a few modifications. Playing games against teams from other leagues involves the highest contact intensity and risk of transmission. Playing teams coming from other communities can also bring with it an increased risk of transmission.

3. Protocols to Help Keep Players, and Coaches, and the Public Safe

PHASE 1 – PRACTICE AND GENERAL PROTOCOLS

- (1)** The physical distancing of six (6) feet between each player and between players and coaches is required at all times. Youth sports activities are limited to activities that enable all players and coaches to maintain a physical distance of at least six feet between each other, and an eight feet distance during times of heavy physical exertion. These activities include but are not limited to training, conditioning, and skills-building activities.
- (2)** All players, coaches, family members, and visitors are required to wear an appropriate face covering that covers the nose and the mouth at all times, except while engaging in heavy physical exertion (while maintaining a distance of 8 feet or greater from others), or engaging in solo physical exertion (such as jogging by one's self). This applies to all adults and children 4 years of age and older. Only individuals who have been instructed not to wear a face-covering by their medical provider due to a medical condition, mental health condition, or disability that prevents wearing a face covering are exempt from wearing one. Players should take a break from exercise if any difficulty breathing is noted and should change their mask or face covering if it becomes wet and sticks to the player's face and

obstructs breathing. Masks that restrict airflow under heavy exertion (such as N-95 masks) are not advised for exercise.

- (3)** Screening is conducted before players and coaches may participate in youth sports activities. Checks must include a check-in concerning fever, cough, shortness of breath, difficulty breathing, and fever or chills, and whether the person has had contact with a person known or suspected to be infected with the Novel Coronavirus (COVID-19) within the last 14 days. These checks can be done in person by coaches or league officials or through signage posted at the entrance to the facility stating that visitors with these symptoms should not enter the premises.

 - (i) If the person has no symptoms and no contact with a known or suspected COVID-19 case in the last 14 days, they can be cleared to participate for that day.
 - (ii) If the person has had contact with a known or suspected COVID-19 case in the last 14 days, they should be sent home immediately and asked to quarantine at home.
 - (iii) If the person is showing any of the symptoms noted above, they should be sent home immediately and asked to isolate at home.
- (4)** All activities must only take place outdoors. Teams may utilize a canopy or other sun shelter, but only if the sides of the canopy or sun shelter are not closed and there is sufficient outdoor air movement.
- (5)** All games or competitions between teams are not permitted at this time. Practice games among players of the same team (intra-squad games, scrimmages, and/or matches) are allowed.
- (6)** Any areas where players are seated off-field or off-court (e.g., bench, dugout, bullpen) will be reconfigured to create additional seating such that players and coaches can maintain a physical distance of 6 feet while in the area.

- (7)** Teams shall not practice or mingle with other teams during this phase.
- (8)** To the maximum extent practicable, players will be encouraged to bring their own equipment (for example - bats, gloves, caps) to practice and not share equipment. Players may engage in limited sharing of equipment, such as throwing a baseball as part of skill-building exercises. However, the sharing of equipment in this manner should only be in designated pairs of players, not as a group activity. If equipment must be shared, it is disinfected between use by different people to reduce the risk of COVID-19 spread.
- (9)** Players, coaches, and employees are discouraged from making unnecessary physical contact with one another (for example, high-fives, handshakes, fist bumps) to limit the potential for the disease to spread. Teams that have access to indoor bathroom facilities may access them to engage in hand hygiene, change, and utilizing the restrooms. Visits to the restrooms will be staggered to allow for physical distancing while indoors.
- (10)** Players and coaches should use hand sanitizer when handwashing is not practicable. The sanitizer must be rubbed into hands until completely dry. Note: frequent handwashing is more effective than the use of hand sanitizers, especially when hands are visibly dirty.
- (11)** Children under age 9 should use hand sanitizer under adult supervision. Call Poison Control if consumed: 1-800-222-1222. Ethyl alcohol-based hand sanitizers are preferred and should be used when there is the potential of unsupervised use by children. Isopropyl hand sanitizers are more toxic and can be absorbed through the skin.
- (12)** Encourage players to bring their own pre-filled reusable or purchased water bottles. Water fountains are available to fill water bottles only. Players should not drink from the same beverage container or share beverages.

- (13)** When choosing cleaning products, use those approved for use against COVID-19 on the Environmental Protection Agency (EPA)-approved list “N” and follow product instructions. These products contain ingredients that are safer for individuals with asthma.
- (14)** Use disinfectants labeled to be effective against emerging viral pathogens, following label directions for appropriate dilution rates and contact times. Provide employees training on the hazards of the chemicals, manufacturer’s directions, and Cal/OSHA requirements for safe use.
- (15)** Custodial staff with the responsibility of cleaning and disinfecting the site must be equipped with proper protective equipment, including gloves, eye protection, respiratory protection, and other appropriate protective equipment as required by the product instructions. All products must be kept out of children’s reach and stored in a space with restricted access.
- (16)** All coaches and volunteers will be told not to come to practice or games if sick, or if they are exposed to a person who has COVID-19. They understand to follow DPH guidance for self-isolation and quarantine, if applicable.
- (17)** Upon being informed that one or more coaches or players of a team tests positive for, or has symptoms consistent with COVID-19 (case), the entire team will be required to self-quarantine by isolating themselves at home for the time period prescribed by the Cameron County Public Health Department. See the public health guidance on responding to COVID-19.
- (18)** The league will report all COVID-19 infections to the Cameron County Department of Public Health by completing the COVID-19 Case and Contact Line List for the Educational Sector within 1 business day of notification of the case. If 3 or more cases are identified among the members of the league within 14 days the league will immediately report this cluster to the Cameron County Department of Public Health by calling (956) 247-3650.

(19) Coaches and parents will be reminded to adhere to personal prevention actions including:

- a) Stay home when you are sick.
 - i) Stay home until at least 10 days have passed since your symptoms first appeared AND at least 24 hours after recovery, which means your fever has resolved without the use of fever-reducing medications and there is an improvement in your symptoms (e.g., cough, shortness of breath).
 - ii) If you tested positive for COVID-19 but never had any symptoms, you must stay home until • 10 days after the date of the first positive test, but
 - If you develop symptoms, you need to follow the instructions above.
- b) Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol. Wash your hands before meals, after using the restroom, and after coughing and sneezing.
- c) Cover your coughs and sneezes with a tissue, and then dispose of the tissue and clean your hands immediately. If you do not have a tissue, use your elbow (not your hands).
- d) Do not touch your mouth, eyes, nose with unwashed hands.
- e) Avoid contact with people who are sick.
- f) Avoid sharing items such as phones or other devices. If devices must be shared be sure to wipe them down with a disinfectant wipe before and after sharing.
- g) Constantly observe your distances in relation to other staff and players. Always maintain the recommended minimum of 6 feet separation from others unless specific assignments require less distancing and wear a face cloth covering when working near or with others.
- h) Disinfect frequently touched objects and surfaces.

- (20) Copies of this approved protocol will be distributed to all coaches and player families.

4. Protocols to Help Keep Players, and Coaches, and the Public Safe

PHASE 2 – GAME DAY PROTOCOLS

- (1) All Phase 1 protocols will be used as a basis but will be modified to include additional game day protocols listed below.
- (2) Bathrooms: Bathrooms will be stocked with hand soap and paper towels and at all times. Bathrooms will be sanitized periodically with a mixture of bleach and water.
- (3) Masks: Wearing of masks and physical distancing of six (6) feet between each player and between players and coaches will be adhered to as much as reasonably possible. Players, coaches, and umpires will be asked to wear a mask or neck gaiter while on the field if they are less than six (6) feet from another player before a play begins. Wearing of masks will be required at all other times.
- (4) Arrival / Check-In: Upon arrival at the field, coaches and players with at least one parent present will report to a temperature screening station. Anyone with a temperature above 100 degrees Fahrenheit will be removed from the check-in area. League officials will inform the player/parents or coach to isolate themselves for the minimum time period prescribed by CCDPH before they can rejoin the team for any activity.
- (5) Player / Coach Seating: During gameplay, players and coaches will adhere to six feet of social distancing while in the dugout. Additional seating shall be installed outside the dugout area to allow for additional spacing, as necessary.
- (6) Sanitization: Players will be required to bring hand sanitizer liquid with them to all game day activities. However, coaches shall also be furnished with a supply for players to use in the dugout at all times.
- (7) Post-Game: Post-game handshakes, high fives, or fist bumps will not be allowed. To demonstrate team sportsmanship, the team will line up at opposite baselines

and bow or wave to their opposition and fans. (Japanese style) Post-game meals like pizza will be discouraged. Items that are bagged into individual player portions before reaching the ballpark will be allowed to be distributed to be taken home, such as a hotdog or burger that was bagged by the restaurant vendor.

- (8) Concession Stand: Pre-packaged food and drink items will be allowed to be sold. All workers will have proper personal protective equipment at all times.
- (9) Crowd Management: Under the standards set forth by the governor, all athletic venues will operate at no more than 50% capacity. Fans will be advised and bleachers will be marked to allow six feet of social distancing between members of different households. Fans will be encouraged to social distancing by being asked to bring their lawn chairs and sitting throughout the outfield area as much as possible.
- (10) Signage: Instruction and information signage will be posted throughout the park, our Facebook page, and our website regarding infection control, physical distancing, and the use of face coverings. Signs will be posted that instruct visitors that they should stay home if sick with respiratory symptoms.

5. Protocols to Help Keep Players, and Coaches, and the Public Safe

PHASE 3 – POST SEASON TOURNAMENT PLAY

- (1) Postseason tournament play involves playing teams from other communities. This is done across the world under the supervision of Little League International. Last season's tournament was canceled due to COVID-19. This year's is yet to be determined. If tournament play is approved by Little League International, we will commit to getting the necessary approvals from the COB Parks Department before committing to be involved in this tournament. This will likely require additional protocols that we commit to employing to keep our players, coaches, and the public safe.