

## District 39 Return to Play Guidelines/Covid Safety Protocol

### I. GOALS

- To get our kids out playing
- To do so safely– keeping in mind that this is a COMMUNITY activity.

### II. Defining Roles

#### A. Organization

- Distribute and post Return to Play protocols
- Be sensitive and accommodating to parents that may be uncomfortable with returning to play.
- Train and educate all staff on Return to Play protocols
- Provide adequate field space for social distancing
- Provide support and equipment necessary to implement safety protocols.

#### B. Manager/Coach

- Follow all Return to Play protocols
- Inquire how athletes are feeling. If they are not feeling well, send them home.
- Ensure all athletes have their individual equipment (ball, water, helmet, bat, etc.)
- Coach is the only person to place/pickup/touch cones, bases, or training equipment.
- Ensure drills/exercises which allow for adequate social distancing
- Ensure that equipment are disinfected properly after each use.
- Respect players, parents, and families by accommodating those that may not yet be comfortable with returning.

#### C. Parent

- If you are not comfortable with returning to play, DON'T. You are the only one who will make the decision when your child returns to play.
- Adhere to all Return to Play protocols
- Check child's temperature before coming to any training session.
- Ensure child's clothing is washed after every training session.
- Ensure all equipment (cleats, ball, bats, helmets, etc.) are sanitized before and after every event.
- Notify Club/coach immediately if your child becomes ill for any reason.
- Supply your child with individual sanitizer.
- Adhere to social distancing and masking requirements per League protocols for all LL events.
- Ensure you child has plenty of water.

#### D. Player

- If you are not comfortable with returning to play, DON'T.
- Adhere to all Return to Play protocols
- Wash hands thoroughly before and after training.
- Wash and sanitize training equipment (shoes, shin guards, clothing) after every event.
- Do not share water, food, or equipment.
- Respect and practice social distancing.
- Place equipment, bags, etc. at least 6 feet apart
  - Adhere to social distancing and masking requirements per League protocols for all LL events.
- No high 5's, handshakes, knuckles, or group celebrations

**III. Principles: What to do When we have Covid exposure in Little League:**

- Protocols and policies are derived from guidelines from CDC, CDC Considerations for Youth Sports, California Department of Public Health, American Academy of Pediatrics, CIF Guidelines which governs high school sports.
- Policies and Protocols outlined here are derived from most recent guidelines effective on February 9, 2021. If guidelines change during the season, the most recent guidelines will supercede all others.
- For situations involving a COVID exposure or positive test, return to practice protocol will be followed as recommended by the CDC and the [Return to play guidelines of the American Academy of Pediatrics](#). These protocols will define an exposure, best practices to contact trace, isolate and most importantly the protocol to return.
- **There are varying degrees of severity in Covid cases with youth and the return to sport pathway also differs based on the severity. Cases may vary individually.**

#### IV. Screening Guidelines-

- All participants to be screened before each Little League event before entering field.
- Consistent usage is key. Leagues will determine how best to document attendance and use of screening questions at each LL event, so that contact tracing will be facilitated if needed.

- **Screening questionnaire:**

1. Do you or anyone in your household have any of the following signs or symptoms:
  - a. Fever of 100F or 37.8C degrees or higher- (Temperatures checked at home prior to coming to any event)
  - b. Feeling of fever or chills
  - c. Sore throat
  - d. Shortness of breath or difficulty breathing
  - e. Body aches or fatigue
  - f. Cough
  - g. New loss of taste or smell
  - h. Nausea, vomiting or diarrhea
  - i. Runny nose or congestion that is different from pre-existing allergies?
2. Have you had close contact with a person who has Covid-19 in the last 14 days?
3. Are you currently being tested for Covid?
4. Have you had close contact with anyone who is currently being tested for Covid?

**What counts as close contact? ANY of below as defined by CDC.**

- a. You were within 6 feet of someone who has COVID-19 for a total of 15 minutes or more
- b. You provided care at home to someone who is sick with COVID-19
- c. You had direct physical contact with the person (hugged or kissed them)
- d. You shared eating or drinking utensils
- e. They sneezed, coughed, or somehow got respiratory droplets on you.

- Any participant who answers yes to screening questions should be sent home, and coach/manager and Safety Officer should be notified immediately to allow for assessment of situation.

## V. What to do in cases of Covid Exposure

\*\*\* There are varying degrees of severity in Covid cases with youth and the return to sport pathway also differs based on the severity. Cases may vary individually.

### A. Situation 1. Return to play after Participant (Coach or Player) is Covid Positive.

#### 1. What happens to Participant

- a. Participant to notify Manager/Coach and Safety Officer immediately of positive Covid status.
- b. Participant required to ISOLATE per CDC guidelines.  
<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/isolation.html>
- c. Participant may return to play can after Participant provides WRITTEN notice of Clearance by Health Care Provider to specifying, "Participant may return to BASEBALL".

#### 2. What Happens to TEAM

- a. Manager/coach and Safety Officer to be notified immediately of positive Covid case.
- b. Team will be notified of possible Covid exposure being mindful of privacy issues and may be QUARANTINED for 14 days from last Covid exposure to affected individual.
- c. Options to reduce quarantine may be utilized depending on exposure per CDC guidelines. <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

### B. Situation 2. Participant has Covid Exposure

#### 1. What happens to Participant

- a. Participant's situation will be assessed by Health Care Provider and may be QUARANTINED for 14 days after last Covid exposure to affected individual. Options to reduce quarantine may be utilized depending on exposure per CDC guidelines. <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

#### 2. What Happens to TEAM?

- a. Team will be cleared to return as appropriate once situation is assessed, or when exposed participant is cleared by Health Care Provider.
- b. If Covid exposed Participant tests positive, then Team will undergo quarantine per CDC guidelines.

### C. Situation 3- Participant/Coach has Covid symptoms

1. **What happens to Participant-** Ideally- participant has not exposed team due to being stopped with screening questions. Participant may Return to play with written clearance by Health Care Provider, with note specifying, "May return to Baseball".
2. **What happens to Team-** As team was not exposed due to screening at every event, team will continue practice/games as usual.

- VI. Covid modification for Practices
- \*Single team cohorts only
  - \*No multi-team practices or scrimmages
  - \*No parents observing during practices. Parents will drop off and pick up as designated by each League.
- VII. Covid modifications for Schedules
- A. Suggestion to schedule games NOT in customary round robin fashion, but rather in “series” mode. For example, Team A will play Team B 3 consecutive games in a row, and then next games against team C 3x, and then next series against Team D. This facilitates contact tracing and minimizes larger group cancellations
- VIII. Covid modifications for Field/Equipment
- A. Use of bleachers instead of dugout for kids during practice and games.
1. Strongly recommended if at all possible, as social distancing is not possible in dugout for entire team, and this could affect length of quarantine should Covid exposure occur.
  2. Suggest spacing out kids in bleachers, parents in outfield
  3. Suggest Only “on deck” and “in the hole” batters in dugout
- B. Equipment- Suggest limiting shared equipment. Each player brings own bat, helmet, and gloves.
- C. Food- No sharing of food or drink items. Absolutely no seeds, gum, or chewing tobacco.
- D. Bats, helmets, - If these need to be shared, items should be wiped down with appropriate cleaning materials supplied by League, and ample time given for equipment to dry prior to use by next participant.
- E. Catcher’s Masks- Not to be shared on same day by different participants. Each catcher should have their own mask for any given day. Masks may be cleaned with appropriate materials and used by different participant on different day.

