



San Francisco Little League COVID-19 Health and Safety Plan DATED: JUNE 18, 2021

San Francisco Little League is committed to safely reopening for the sake of our children, and we are thrilled you are joining us! Please read this entire manual to help us keep all Little Leaguers, their families, and our league personnel healthy.

We have developed the following policies in accordance with City and County of San Francisco Department of Public Health, Health Officer Directives No. 2020-14i; Cal/OSHA COVID-19 Prevention Emergency Temporary Standards; the California Department of Public Health (CDPH) Guidance for Use of Face Covering; and the CDPH Guidance for Outdoor and Indoor Youth and Adult Sports.

SPORTS RISK PROFILES

In general, the more people from outside their household with whom a person interacts, the closer the physical interaction is, the greater the physical exertion is, and the longer the interaction lasts, the higher the risk that a person with COVID-19 infection may spread it to others.

Youth and adult sports include varied activities that have different levels of risk for transmission of COVID-19. Outdoor activities present significantly lower risk of transmission relative to comparative indoor activities, based on current scientific evidence. Competition between different teams also increases mixing across groups and outside of communities, which also contributes to the potential for spread of the COVID-19 disease.

FACTORS AFFECTING THE RISK OF TRANSMISSION

- Risk increases when face coverings are not worn, and physical distancing is not maintained.
- Risk increases with increasing levels of contact between participants; closer contact (particularly face-to-face contact), and the frequency and total duration of close contact, increases the risk that respiratory particles will be transmitted between participants.
- Risk increases with greater exertion levels; greater exertion increases the rate of breathing and the quantity of air that is inhaled and exhaled with every breath.
- Risk increases with mixing of cohorts and groups, particularly when from different communities (during or outside of sports play); mixing with more people increases the risk that an infectious person will be present.

VACCINATION OF ELIGIBLE HOUSEHOLDS

Sports participants, including coaches and support staff, are strongly encouraged to be vaccinated once eligible as vaccines will protect residents and reduce the likelihood of transmission from infected persons to others.

GENERAL HEALTH AND SAFETY PROTOCOLS

COVID-19 Liaison

SFLL has designated its Safety Officer, Dan Gerard as our COVID-19 staff liaison. Dan will oversee our field marshals and act as the primary contact for questions or concerns around best practices, protocols, or potential exposures. Dan will also serve as the league's liaison to SFDPH. Dan is available at daniel.gerard@post.harvard.edu and 415-317-0615 to address any questions or concerns.



Field Marshals

Each team will have a designated parent volunteer (“field marshal”) to facilitate health screenings at drop-off and ensure proper health & safety protocols are being followed on and around the field throughout league activities.

Risk Acknowledgement

Parents/Guardians are required to complete a Risk Acknowledgement Release Form for each player at the time of registration. Log into your SportsEngine account to view a copy of your registration agreement: user.sportngin.com/users/sign_in.

Face Coverings

Face coverings/masks are **required for unvaccinated individuals** in the following locations/scenarios:

- Dugouts, where physical distancing is not possible
- Public indoor settings, i.e. Snack Shack, announcer’s booth, public bathrooms etc.

Physical Distancing

- Maintain at least three (3) feet of distance between families when standing in lines/waiting queues.
- When eating, children and youth who are not fully vaccinated for COVID-19 should be six (6) feet apart from others indoors, three (3) feet apart outdoors.
- In shared spaces like bathrooms, Snack Shack and the announcer’s booth, limit the number of people to allow 3 feet of distancing and following indoor masking guidance.
- Mixing with other households prior to and post any practice or competition must strictly adhere to current masking and gathering guidance.
- Indoor activities for the team (e.g., dinners, team meetings) must strictly adhere to current masking and gathering guidance.

Hand Hygiene & Equipment Sanitation

Staff, coaches, and players are required to sanitize their hands upon entering and exiting the field, before and after touching shared equipment, sneezing or coughing into hands, and drinking water. Hand sanitizing stations will be provided on all the fields.

Balls or other objects or equipment can be touched by multiple players during practice and play if the above hand hygiene practices are followed. No sharing of drink bottles and other personal items and equipment.

Carpools and Shared Rides

Since vehicles are small, enclosed spaces that do not allow physical distancing, it is easier for COVID-19 to spread between people in a vehicle, especially if everyone inside does not wear a mask. Biking and walking are lower risk than shared vehicles.

Given the many risks, we are asking players to refrain from this practice outside of their household (stable bubble group) whenever possible. Families that choose to assume the risk of carpooling should follow these safety protocols:



- Only carpool with the same stable group of people.
- Everyone in the vehicle must wear a face covering.
- Open windows and maximize outdoor air circulation when feasible.

Remember that it is not only your family that you are putting at risk, as well as the other families whose players are traveling with you including most especially those who may be more likely to get severely ill from COVID-19.

PLAYER STAFF & VOLUNTEER HEALTH AND SCREENING POLICIES

Coaches, volunteers and families of players should review the following list of symptoms each day before attending league activities.

- Coaches and volunteers: [SFDPH Personnel Screening Form](#)
- Parents or other adult visitors: [SFDPH Screening Form for Non-Personnel](#)
- Children and Youth: [For Parents and Guardians: COVID-19 Symptom and Exposure Check](#), at sfcdcp.org/school

The symptom list for children under 18 years old is shorter than for adults. Some symptoms are so common in children that they are not helpful in determining if a child has COVID-19. Other symptoms are less common in children with COVID-19 than adults.

Coaches, volunteers and players should stay home and get tested if they have symptoms of COVID-19. This will lower the risk of infection spreading to people in the program.

Visual Check

Coaches, volunteers and players will be evaluated for fever and/or signs of illness like flushed cheeks, rash, difficulty breathing, fatigue, or extreme fussiness before entering the program. Parents/Caregivers must stay onsite until the visual check is complete.

RETURNING TO THE PROGRAM AFTER EXPERIENCING SYMPTOMS OF COVID-19

If the player gets tested, they can return after:

- A negative COVID-19 test, AND
- 24 hours with no fever, without taking medicines to lower a fever, like acetaminophen (Tylenol) or ibuprofen (Advil, Motrin), AND
- Symptoms have improved. The symptoms do not have to be completely better.

The parent/guardian is required to show documentation of the player's negative test, for example, a copy of the result or a message from the clinic or test site that the test was negative. This may be in electronic form. A separate doctor's note is not needed. This is usually the fastest way for a player to return.

If the player is not tested, had a positive test result, or is still waiting for their test results, they can return after:

- 10 days since symptoms began
- Symptoms are improving
- No fever for 24 hours, without using fever-reducing medicines such as acetaminophen (Tylenol), ibuprofen (Motrin, Advil) or naproxen (Aleve)
- A note from the clinic or doctor's note is not needed.



If the player had close contact with someone with confirmed COVID-19, they can return after:

- 10 days have passed after the last close contact, even if the child tests negative before 10 days
- No symptoms have developed since the last close contact.
- A doctor's note or negative test is not needed.

If the child has ongoing close contact with the person with COVID-19 (for example, a parent or caregiver), the child must quarantine for 10 days after the person with COVID-19 is no longer infectious. In most cases, this is a total of 20 days after the person with COVID-19 first developed symptoms, or if asymptomatic, had a positive test.

If the player had a positive test but never had symptoms, they can return after:

- 10 days after their positive test was collected (not 10 days after the result was received)

Youth athletes who test positive for COVID-19 must be evaluated by a health care provider for possible cardiac symptoms and cleared in writing by a health care provider before returning to exercise. See <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-interim-guidance-return-to-sports/>.

RETURNING TO THE PROGRAM AFTER INFECTION

- No one with symptoms of COVID-19 or who is in isolation or quarantine for COVID-19 is permitted to attend practices or competitions.
- Anyone with symptoms of COVID-19 should consult their physician for testing and notify their coach, athletic trainer and/or school administrator of their symptoms and test results.
- Youths recovering from COVID-19 will have different paths to return to sports based on the severity of their illness. See the [American Academy of Pediatrics Interim Guidance on Return to Sports](#) for additional guidance for more serious infections.

EQUIPMENT

Each player should bring the following gear for themselves:

- Glove
- Batting glove (if using)
- Water bottle
- Multiple (2+) face masks
- Players who plan to catch should bring a jockstrap protector and are encouraged to bring their own catching gear.

Shared Equipment

No sharing of drink bottles and other personal items and equipment.

When equipment is shared during an activity, Participants must perform hand hygiene (wash hands with soap and water or use an alcohol-based hand sanitizer) before play, during breaks, at half time, and after the conclusion of the activity.

Catchers' masks may not be shared. Only one player per mask per practice/game.

Clean and disinfect masks after use and before returning to the equipment bag.



COMMUNITY AGREEMENT: CONDUCT OFF THE FIELD DURING PANDEMIC

During this time of pandemic, it is even more apparent that every community member can and does impact each other and individual family decisions may have an impact on the entire community. Maintaining the health and safety of the San Francisco Little League community is of the utmost importance and involves collective effort and commitment. As such, we are asking everyone to abide by the following guidelines when participating in our programs.

By enrolling in our program, you agree to follow these best practices on behalf of yourself, your family and specifically, your child(ren) who will be attending in-person instruction.

- Partner with the league in understanding how I and my child(ren) can help reduce the risk of transmission by staying current on information about the virus provided by public health officials and experts, and by following the policies and procedures set forth in the San Francisco Little League Health & Safety Plan.
- Check my health and my child(ren)'s health status on a daily basis, including regularly completing the health checklist based on SFPD guidelines, and provided by the league, and stay at home if any of us experience COVID-19 symptoms or other illnesses.
- Wear an appropriate face covering, and have my child(ren) wear an appropriate face covering in accordance with the CDPH Guidance for the Use of Face Coverings
- My child(ren) will practice good personal hygiene consistent with public health protocols, such as frequent hand washing for twenty seconds, appropriately covering coughs and sneezes, using hand sanitizers before and frequently during practices
- Have my child(ren) follow the direction of coaches and marked directional signs around the field.
- Consider having my child(ren) receive a seasonal influenza shot this fall, if possible.
- Follow instructions if anyone in my family (household) tests positive or comes into contact with someone who tests positive for COVID-19 and I or they are required to isolate from others.
- Participate in the contact tracing as requested and share complete information with contact tracers about others who may be exposed.
- Seek testing for COVID-19, and/or my child(ren) and/or remain in quarantine, as directed by the league.
- Follow all league norms and policies regarding behaviors.
- If I, or anyone in my family who I live with, travels outside of San Francisco county on an airplane or on another mode of transportation with multiple passengers, I or anyone in my family will follow the CDC travel guidance found on <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>.
- Acknowledge that by sending my child to in-person instruction, there is a risk that I and/or my child may become infected with COVID-19 (with possible exposure to everyone in my household).



CONTACT TRACING

When a case of COVID-19 occurs at a school, childcare program, or another program, The San Francisco Department of Public Health (SFPDH) works with the program to identify those people who may have been infected by the person with COVID-19. SFPDH then helps those people get tested and quarantine at home so that they do not infect others. This process, called contact tracing, is crucial to prevent spread of COVID-19 infection.

Helpful Definitions	
Infectious	A person who is able to give the virus that causes COVID-19 to other people. People with COVID-19 are considered infectious from 2 days before their symptoms first start until 10 days after their symptoms started, assuming they are recovered after 10 days. If a person with COVID-19 has no symptoms, they are considered infectious from 2 days before their positive test was collected until 10 days after the positive test.
Exposed	A person who has been in close enough contact with someone who was infectious with COVID-19, that they could also get infected.
Close Contact	Someone who was within 6 feet of someone with COVID-19 for at least 15 minutes, during the time that the person with COVID-19 was infectious. For pods/cohorts of children under 12, SFPDH considers all children and staff in a cohort to be close contacts.
Quarantine	Quarantine is used to keep people who have been exposed to COVID-19 away from others while they may be infected. After someone has been exposed to COVID-19, they must stay home and away from other people for a recommended period, usually 14 days after their last exposure, to see if they become sick or infectious.
Isolation	Isolation is used to keep people with COVID-19 away from others while they are infectious.

What is contact tracing and why is it important?

Contact tracing is important because COVID-19 spreads easily between people. The spread can be slowed down or prevented by separating the people who may be infected from other people.

Contact tracing is a process of:

- Finding out everyone who was in close contact with someone with COVID-19,
- Letting them know they may have been infected with COVID-19, and
- Telling them to quarantine and helping provide them with resources, including how to get tested.
- Contact tracing usually starts by talking to the person with COVID-19 to find out everyone that they were in close contact with during the time that they were infectious.
- Sometimes it is helpful to talk to other people in addition to the infected person, in order to get information about who they were in close contact with.
- When someone in San Francisco has a positive COVID-19 test, the SFPDH Contact Tracing Team reaches out to that person, and others if needed, to find out who they were in contact with. Then the team reaches out to each close contact to make sure they are safely quarantining and can get tested.

What is the League’s contact tracing process if there is a case of COVID-19 in the program?

- SFPDH and SFLL COVID-19 liaison will discuss who may have been exposed.
- SFPDH interviews the person with COVID-19, or their family in the case of a child, to find out who they might have exposed to COVID-19.



- SFLL liaison contacts people at the program who may have been exposed, as directed by SFDPH, to tell them that a Contact Tracer from SFDPH will be calling them soon. This way, nobody is surprised or suspicious when they get a call shortly thereafter.
- SFLL liaison gives the names, phone numbers and other contact information of people who may have been exposed to the SFDPH Contact Tracing Team.
- The SFDPH Contact Tracing Team calls the people who may have been exposed (i.e. staff, children, or their parents). The team helps people understand what to expect and what to do next. They refer people for testing for COVID-19 and to resources to help them quarantine.

How does Contact Tracing protect the identity of the person who tests positive for COVID-19?

- Contact Tracing must protect confidentiality of the person with COVID-19. This is required by the Health Information Portability and Accountability Act (HIPAA).
- SFLL is required to know the identity of the person with COVID-19 in order to take action to protect everyone else.
- Neither SFDPH or SFLL will reveal the identity or personal details of the person with COVID-19 to any other staff or families who are contacted. The families will be told that their child was exposed to someone with COVID-19, but no name will be given.

As a site administrator, what is SFLL's responsibility?

- Work with SFDPH to identify close contacts. SFDPH will ask site administration to submit a list of names and contact information for all close contacts.
- Once close contacts are identified in partnership with SFDPH, send all close contacts the "Close Contacts Advisory" and "Isolation and Quarantine Packet".
- For cohorts, all staff and children in the same cohort as the person with COVID-19 are considered close contacts.
- Close contact also includes people who live with, take care of, or are taken care of by the person with COVID 19. This includes siblings, other family members, and caregivers.

Who will need to quarantine in the event of a positive COVID-19 case?

- Everyone who has been in close contact with the person with COVID-19 must quarantine for 14 days after their last exposure.
- All close contacts should also get tested. The SFDPH Contact Tracing Team will connect close contacts to testing. However, getting a COVID-19 test during the quarantine period does not shorten the 14-day quarantine. This is because a person can have a negative test in the early stages of their infection.
- SFDPH will do a risk assessment, including interviews of the infected person and possibly others. Together with the site administration, SFDPH will determine who is a close contact and who needs to quarantine.
- Note: the person with COVID-19 infection will also need to stay at home and away from others for at least 10 days after their symptoms started (or if they have no symptoms, at least 10 days from the date their positive test was collected).

What does it mean for a child (12 years old and younger) to quarantine?

- Children under quarantine should stay home. They are not allowed to leave the home except for medical care. They can be in private outdoor spaces in their home that are not shared with other households (i.e. private backyards). They cannot go to parks, playground, or other public spaces. They cannot attend schools, childcare, or other programs for children and youth. They cannot have playdates with other children at their home or interact with people outside their immediate household, such as babysitters.



Who is considered at general exposure risk?

- Being a person at general exposure risk is not the same as being a close contact of someone who is infected. People who are at general exposure risk were present at the site on the same day, but not identified by SFPDH as close contacts. These people have a much lower risk of getting infected than the close contacts.
- These people should still be told that someone at the school, childcare or program had confirmed COVID-19, but that they were not identified as a close contact.
- They should monitor for COVID-19 symptoms, but do not need to quarantine or get tested if they do not have symptoms.

ADDITIONAL RESOURCES

San Francisco Department of Public Health (SFPDH)

- SFPDH Schools and Childcare Hub for COVID-19 consultation and guidance (628) 217-7499 or email Cases.schools@sfdph.org
- COVID-19 guidance for the public, including employers: <https://sfcdcp.org/covid19>
- COVID-19 guidance for programs for children and youth: <https://sfcdcp.org/school>
 - “Quick Guide for Suspected or Confirmed COVID-19” <https://www.sfdph.org/dph/files/ig/COVID-19-QuickGuide-Suspected-Confirmed-COVID-Schools-Childcares-Programs.pdf>
 - Outreach Toolkit for Coronavirus. <https://sf.gov/outreach-toolkit-coronavirus-covid-19>

California Department of Public Health (CDPH)

- “Outdoor and Indoor Youth and Recreational Adult Sports Guidance” issued 2/19/21 (Last updated 4/6/2021) <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/outdoor-indoor-recreational-sports.aspx>
- “COVID-19 Update Guidance: Child Care Programs and Providers” issued 7/17/2020 <https://files.covid19.ca.gov/pdf/guidance-childcare--en.pdf>
- “Updated COVID-19 Guidance for Cohorts, Group Size, and Ratios in Licensed and License-Exempt Child Care Settings” issued 3/19/2021 <https://www.cdss.ca.gov/Portals/9/CCLD/PINs/2020/CCP/PIN-20-22-CCP.pdf>

Centers for Disease Control and Prevention (CDC)

- Guidance for Schools and Childcare <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>
- Travel Guidance <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>.
- Cleaning and Disinfection for Community Facilities <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

Health Officer Directive No. 2020-14i (Exhibit B) Health and Safety Plan (issued 6/11/2021)

Every Program for Children and Youth must complete, post onsite, and follow this Health and Safety Plan.

Check off all items below that apply and list other required information.

Business/Entity name: San Francisco Little League

Contact name: Katherine Keicher Gillespie

Entity Address: P.O. Box 193488, San Francisco, CA 94119-3488

Contact telephone: 415-812-7099

(You may contact the person listed above with any questions or comments about this plan.)

- Business is familiar with and complies with all requirements set forth in Health Officer Directive No. 2020-14, available at <http://www.sfdph.org/directives>.
- Designate a COVID-19 staff liaison. *Liaison name:* Daniel Gerard, daniel.gerard@post.harvard.edu, 415-317-0615
- Plan in place to screen Personnel for COVID-19 symptoms or exposure.
- Parents/guardians are instructed to keep children home when ill.
- Sick leave policies support personnel to stay home when ill.
- Non-essential visitors and volunteers who have not been fully vaccinated for COVID-19 are limited.

Physical Distancing

- Physical distancing between unvaccinated adults is maintained as much as feasible.
- When unmasked to eat or nap, children are physically distanced as much as feasible.
- Physical distancing between children is encouraged as appropriate depending on the nature and location of the activity.

Face Coverings

- All employees wear face coverings as required by Cal/OSHA.
- All other adults and children 2 years and older wear face coverings as required by the California Department of Public Health.
- Face coverings are not placed on children under 2 years old or children with documented medical or behavioral contraindications to face coverings.
- Face coverings are never worn during naps.

Ventilation

- Activities are done outdoors to the extent possible.
- Ventilation is maximized to the greatest extent possible through opening windows (when safe to do so), adjusting mechanical ventilation to maximize fresh (outdoor) air ventilation, and/or using portable air purifiers (HEPA filters), as appropriate.

Other

- Hand sanitizer is kept out of reach of young children.
- Protocols have been established in the event a child or staff member has symptoms of COVID-19, has close contact with a person with COVID-19, or is diagnosed with COVID-19.