

## Palmer Township Basketball (PTB)

### Covid Safety Plan

This document provides for a Covid Safety Plan to help provide the safest environment as possible for all coaches, players, families and volunteers with Palmer Township Basketball.

**Disclaimer: Although PTB will make our best efforts to facilitate a safe and healthy environment conducive to playing youth basketball, there is an inherent risk of a child becoming infected and potentially infecting other individuals, such as household members. This plan is subject to change per the guidance of federal, state, and local authorities. This is an evolving plan for a safe return to basketball league play. This guidance is preliminary; as more public health information is available, PTB may work with impacted entities to release further guidance which could impact the league.**

**Pandemic Response Team:** The Pandemic Response Team will be responsible for preparedness and response planning for COVID-19. The team consists of the Palmer Township Athletic Association Board or Directors and Basketball Commission.

#### **Prior to Participation in Palmer Township Basketball:**

- Protection of Vulnerable Individuals

- o Vulnerable individuals should consider not participating in sports-related activities such as basketball. These individuals, or anyone who might have a concern of being immunocompromised, are recommended to consult with their health care provider prior to participating in sports-related activities.

- o Vulnerable individuals include those with any of the following conditions: ▪ Diabetes ▪ Chronic Lung Disease (Including moderate to severe Asthma) ▪ Severe Obesity (Body Mass Index > 40) ▪ Chronic Kidney Disease ▪ Heart Conditions ▪ Immunocompromised (i.e. any transplant recipient, anyone needing immunosuppressant medications such as steroids or biologics, any patients receiving chemotherapy, etc.) ▪ Age 65 or older

- Participants (Coaches, players and/or parent/guardian) must agree to the Covid-19 waiver digitally/virtually during online registration. The Participation Waiver for Communicable Diseases is also included within (see appendix).

- Any individual returning to physical activity after a COVID-19 diagnosis can only return if the following criteria are all met:

- o At least three days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications)

- o Individual has improvement of respiratory symptoms (i.e. cough, shortness of breath)

- o At least 10 days have passed since symptoms first appeared

#### **Plan Overview:**

1. PTB will distribute the Covid Safety Plan to all participating members and their parents/guardians. Participating members' parents/guardians must have accepted the Covid waiver during the electronic

registration process. No manual registrations will be permitted and all communications from PTA will be done electronically.

2. All CDC and PA Department of Health guidelines on social distancing, sanitization and mask wearing must be followed.

3. Pre-workout/practice/game health self-screenings of all coaches and athletes must occur. Each PTB member will consent to this plan and agree to follow its requirements. Details are provided within this document.

4. Spectators may be allowed at home PTB games and the number of spectators will be based upon the recommendations of State and local government. PTB will be following the PA Department of Health, CDC, and local government health recommendations regarding mass gatherings determining the number of spectators allowed. With the Governor's most recent guidelines, PTB anticipates a limited number of spectators will be allowed inside home gymnasiums based upon each gym's listed capacity.

For any "away" games, PTB teams, coaches, participants and parents will follow and abide by all State of PA guidelines and any requirements placed upon PTB participants by the host organization/facility.

5. PTB will inform organization coaches and parents (who in turn must educate athletes) on health and safety protocols as they are updated. PTB will regularly communicate and monitor developments with local authorities, school districts, and families regarding cases, exposures, and updates to policies and procedures.

#### **Plan Details and Requirements:**

1. Athletes and Coaches must undergo a COVID- 19 health self-screening prior to any practice, event, or team meeting. The purpose is to check for signs and symptoms of COVID-19. Appropriate screening protocols are as directed by the PA Dept of Health and shall include temperature checks (at least two) and the questionnaire (**see Appendix**). Any person who has COVID-19 symptoms shall not be allowed to participate in practices and games and will be advised to contact their primary care physician or another appropriate health-care provider. Anyone who is sick, displays COVID-19 symptoms, or has been in close contact with someone diagnosed with COVID-19 must stay home until cleared by BEB to return to activities.

Prior to arriving at **EVERY** event scheduled, a self-monitoring screening **MUST** take place for all coaches and players.

a. The screening for participants should include an at-home temperature check done by parents and answers to screening questions as outlined in the guidelines within (see appendix). Any person with symptoms WILL NOT be allowed to take part in any practice or event and should contact a primary-care provider.

b. The pre-event screening and temperature checks will be performed by the coach in the lobby of the Chrin Center with a supplied thermometer before entering the gym for practices or games.

2. Should any player, coach or approved volunteer fall ill to Covid-19, the following procedures will be observed:

a. All parties – parents/guardians, participants, and coaches – will be notified via email notification. PTB will act appropriately to be in accordance with all privacy and confidentiality laws.

b. PTB will immediately inform school district officials and gym facility owners regarding the illness.

c. PTB will immediately inform local health officials and will work collaboratively to facilitate necessary protocols, including contact tracing.

3. PTB will promote healthy hygiene practices such as hand washing (20 seconds with warm water and soap) and wearing a cloth face covering as often as feasible. Face Coverings are not required for athletes while practicing or competing, but may be used at the athlete's discretion during activity, if preferred, and if the face covering does not compromise the safety of the athlete or others participating in the activity. Athletes are required to wear masks or face coverings when they arrive onsite at a facility, as they exit a facility, and when not actively participating in an activity (sidelines, halftime, restrooms, etc.).

**Coaches are required to wear face coverings at all times** unless doing so jeopardizes their health.

Coaching instruction of all players should be done from a distance of 6-feet whenever possible. If there is a specific need to move closer to correct a player's position, coaches should do so as quickly as possible and move back away.

4. Social distancing is required until CDC, state, and local authorities declare otherwise. As such, coaches and athletes shall demonstrate social distancing whenever possible – while sitting on the benches, no huddles, etc. Appropriate social distancing (6' minimum) must be maintained on benches and in the stands during contests and events.

PTB will encourage social distancing through increased spacing, small groups, and limited mixing between groups, when feasible. Teams must avoid any unnecessary physical contact, such as high fives, handshakes, fist bumps or hugs. No team huddles should take place. In addition, behaviors that increase the risk of exposure to saliva must not be allowed: including chewing gum, spitting, licking fingers, and eating sunflower seeds.

5. Intensified disinfecting of equipment, balls, frequently touched surfaces and facilities will occur. It is the responsibility of each Head Coach to make hand sanitizer available to participants during each game, practice or activity. PTB requires that each athlete use hand sanitizer prior to the game's start and prior to "checking in" to each game.

Players should refrain from sharing clothing/towels and those items should be washed after each practice or game, including pinnies. Coaches should assign pinnies to each child and not share pinnies from practice to practice.

Athletic equipment that may be used by multiple individuals (air pump, white board, etc.) should be cleaned intermittently during practice and events as necessary.

6. Athletes and Coaches **MUST** provide their own labeled water bottle for hydration. Water bottles must not be shared. Snacks may not be shared.

7. Athletes will come to workouts or contests already dressed to participate.

8. Post-Practice and Game Procedures

- a. Hand washing and sanitizing should be done after all events (benches, scoring tables, etc...)
- b. All athletes should leave facilities immediately post-event. No high-five lines are permitted.
- c. Clothing should be changed and washed after each practice or game event.
- d. No congregation in groups should occur as players leave the facility.
- e. Coaches should end their practices 5-10 minutes early to allow their group to leave on time and with less interaction/exposure with the team following them in the gym.

#### 9. Sanitizing and Cleaning of Facilities

a. PTB will work with associated gym facilities to implement an adequate cleaning and disinfecting schedule for all athletic facilities to mitigate any communicable diseases and work collaboratively to ensure such schedule is enforced.

b. Ensure all high-touch, high traffic areas are included in cleaning and disinfecting schedules and are cleaned more frequently, or as needed.

c. Equipment should be cleaned before and after each person's use (scoreboard equipment, clipboard/whiteboard, etc.). Each team shall be responsible for wiping down/sanitizing the bench, team equipment and scorer's table area after each event.

10. For children in grades 3 and higher, PTB will only permit players to be dropped off and picked up for practices rather than allowing parents/guardians to stay and watch. Prior to any PTB scheduled games, further communication will occur regarding spectators, but current State of PA guidance allows for a limited number of spectators for games based on gym capacity.

No players should arrive at their designated gymnasium prior to their scheduled time, nor should they remain on site immediately afterwards. Parents should remain in their vehicles at all times while dropping off for practice and not enter the gymnasium or facility. Please understand this mitigation step is to help any possible spread of Covid by restricting the number of individuals within an indoor space as much as possible.

Carpooling is not recommended. If necessary, the same group should always carpool together.

11. Warmup activities or stretching prior to a practice or game should be done with a minimum of 6 feet between players. When available, even larger distances between players when practical.

12. Coaches must take attendance at events to better help contact trace, if needed.

#### **POSITIVE CASES AND COACHES, STAFF, OR ATHLETES SHOWING COVID-19 SYMPTOMS**

##### What are the signs and symptoms of COVID-19?

Symptoms may appear 2-14 days after exposure to the virus. The symptoms may range from mild to severe. Symptoms may include: ● Fever or chills (100.4 or High) ● Cough ● Shortness of breath or difficulty breathing ● Fatigue ● Muscle or body aches ● Headache ● New loss of taste or smell ● Sore Throat ● Congestion or runny nose ● Nausea or vomiting ● Diarrhea

What to do if a participant is sick?

● If a player is sick or thinks he/she is sick with the COVID-19 virus, the student needs to STAY AT HOME. It is essential that the participant take steps to help prevent the disease from spreading to people in the player's home or community. If the individual (or their parent/guardian) thinks he/she has been exposed to COVID-19 and develops a fever and symptoms, the student must call his/her healthcare provider for medical advice. ● The player (or their parent/guardian) must notify PTB immediately ● PTB, in conjunction with local health authorities, will determine if others who may have been exposed (players, coaches, volunteers) need to be notified, isolated, and /or monitored for symptoms. ● If a positive case of COVID-19 is confirmed, Diagnosed Contact Tracing will be implemented with the assistance of local health professionals and the CDC/PA DOH.

What to do if a student or staff become ill with COVID-19 symptoms during practice, athletic event, or during transportation to or from an event?

● Every effort will be made to isolate the ill individual from others, until the player or coach can leave the gymnasium or event ● If a child, the parent/guardian will be contacted immediately, and arrangements will be made for the child to be picked up ● Ill individual will be asked to contact their physician or appropriate healthcare professional for direction

Return of staff or student to athletics following a COVID-19 diagnosis.

● Coach or player should have medical clearance from their physician or appropriate healthcare professional, be determined to be non-contagious, fever free (without fever-reducing medicine), improvement in respiratory symptoms (cough, shortness of breath), no vomiting or diarrhea for a period of 72 hours and it's been at least 10 days since symptoms 1<sup>st</sup> appeared.

**APPENDIX:**

**Waiver/Release for Communicable Diseases Including COVID-19  
(Provided for Electronically within BEB Online Registration)**

In consideration of being allowed to participate in Blue Eagles Basketball (“BEB”), the participant acknowledges, appreciates, certifies and agrees that:

1 - My participation includes possible exposure to and illness from infectious diseases, including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness, injury, and death does exist.

2 - If I have a pre-existing health condition, exposure to COVID-19, or any other infectious disease may be more likely to cause serious illness, injury, or death;

3 - BEB cannot ensure that all other participants, including coaches and volunteers, are taking precautionary measures to mitigate risks to ensure the health and safety of other participants, coaches, and volunteers, and therefore, participation in BEB involves risk of exposure to infectious disease; and,

4 - I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

5 - I certify that I have not recently tested positive for, and am not exhibiting symptoms of COVID-19, which include a cough, shortness of breath or difficulty breathing, loss of taste or smell, headache, chills, muscle or body aches and/or sore throat.

6 - I certify that I do not have a household family member/roommate who has recently tested positive for or exhibited the above-referenced symptoms of COVID-19.

7 - I willingly agree to comply with all recommendations provided by BEB to ensure safe play. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest coach, volunteer, or official immediately; and,

8 - I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS BEB, and their officers, officials, agents, and/or employees, other participants, volunteers, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND AGREE TO IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

### **FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

### **Self-Screening Questionnaire**

Please complete this checklist on a daily basis with your child to monitor for symptoms of COVID-19.

**If any responses are "YES", participant shall NOT be allowed to practice or compete, and should remain at home.**

1. In the past 72 hours, has the participant experienced any **ONE** of the following symptoms listed below?
  - Shortness of Breath or Difficulty Breathing

- Cough (new onset or worsening)
- Fever (felt feverish or warm) of 100.4 degrees or higher?
- New Loss of Taste or Smell
- Nausea or Vomiting or Abdominal Pain
- Diarrhea
- Bloodshot eyes

2. In the past 72 hours, has the participant experienced any **TWO** of the following symptoms listed below?

- Chills
- Headache
- Minor Sore Throat
- Muscle Pain
- Congestion or runny nose
- Fatigue

3. Do you have reason to believe that the participant has had close contact with someone who is currently sick with a suspected or confirmed case Covid-19 in the past two weeks? (Note: Close contact is defined as within 6 feet for more than 10 consecutive minutes, without PPE equipment.)

4. Has the participant had a temperature of 100.4 degrees or higher at any point in the last 72 hours. The participant should have their temperature taken shortly before answering this Screening Questionnaire and should take TWO temperature readings.

5. Has your child traveled out of the state to one of the states listed on the PA Travel Advisory Site?

<https://www.health.pa.gov/topics/disease/coronavirus/Pages/Travelers.aspx>