

ACBL Club Safety Considerations Update

In May 2020 we communicated with you about club reopenings. At that time, we informed you that (a) the consensus recommendations of health authorities were (and still are) that people should not yet stop sheltering in place at home, let up on social distancing and wearing masks around others when not at home; (b) widespread testing and contact tracing should be in place in your locality before reopening a bridge club is contemplated; and (c) the numbers of new cases and hospitalizations for COVID-19 should be falling for two weeks before any type of group activities should resume – indeed, to be prudent, not until well after these numbers have fallen. Since that time, the situation has not improved. In fact, over the past week in the United States there have been over 400,000 new coronavirus cases, meaning that the predicted fall wave is underway. The Midwestern and Rocky Mountain States are struggling to control major outbreaks and cases are rising in over 30 states (source: New York Times). It is for these reasons that the ACBL continues to believe that it is too soon for resuming activities such as face-to-face duplicate bridge, particularly since people over age 55 continue to have more frequent complications, hospitalizations and a higher death rate than other age groups.

The ACBL is aware that some bridge clubs have resumed operations and others are planning to do so. We are encouraged by the reported safety measures that clubs have implemented. For the most part, clubs appear to be following the ACBL recommended operational guidelines and best practices for the reopening of bridge clubs. Bridge clubs, other than Unit-owned clubs, are private businesses and, accordingly, the guidelines were strongly recommended for such clubs (they were mandatory for Unit-owned clubs).

Established restrictions and mandates that have been set by your local and state government continue to supersede any guidelines distributed by ACBL. If your state or local government has restrictions for mass gatherings (or prohibits gathering over a certain number of people, such as 10 persons), you should **not** resume bridge play at your club. The ACBL continues to strongly recommend that you err on the side of extreme caution in your decision to reopen given that our membership population faces an increased risk from COVID-19.

For those who are considering reopening, we are repeating the guidelines that we previously published. The ACBL believes that the operational guidelines below should be implemented to mitigate the risk of coronavirus transmission should you choose to reopen.

Facility Preparedness

Prior to reopening, each club is recommended to clean and disinfect all of its hard and soft surfaces in accordance with the guidelines published by the Centers for Disease Control and Prevention (CDC) for [Cleaning and Disinfecting Your Facility](#).

Each club should ensure its employees or staff are adequately trained on: (1) how to clean and disinfect as set forth in the CDC's guidance above; and (2) how to prevent the spread of infectious disease, including, without limitation, [social distancing](#).

[handwashing](#), and not [spreading germs at work](#). Signage to educate players regarding best practices is highly recommended.

When implementing their plans, clubs should utilize the [Interim Guidance for Businesses and Employers to Plan and Respond to COVID-19](#), published by the CDC. The ACBL expects clubs to include the following components in its plans:

Facility Operations and Equipment Sanitization

- Make sure that adequate amounts of needed supplies are on hand as recommended by the CDC.
- All rooms should be properly sanitized daily with appropriate disinfectant.
- Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, chairs, and restrooms.
- Rooms should be adequately ventilated, by circulating fresh air, at the end of each session. In the case of environments where air is supplied by air conditioning systems, these must be carefully maintained with special sanitation procedures performed on the filters.
- Capacity should be limited to no more than fifty percent (50%) of the occupancy limit of the playing area of the property by the club's local building or fire codes.
- Place readily visible signage throughout your building(s) to remind everyone of the best hygiene practices.
- Make hand sanitizer, disinfecting wipes, soap and water, and similar disinfectants readily available to those visiting and playing at your facility.
- Make sure that the distance between the centers of each table is at least 12 feet.
- All equipment used for play (for example, boards, club bidding boxes, cards) should be sanitized at the end of each play session and, in any case, prior to any new session. Consider switching to plastic cards which can be individually cleaned.
- It is highly recommended that full sets of boards be prepared for each table to minimize passing boards between players.
- Consider requiring all players to bring and use only their own personal bidding boxes. If that is not feasible, have East/West players take the first bidding box that they use to subsequent tables so that they are using only that one bidding box.

Employee, Club Member and Visitor Policies

- It should be standard practice to ensure that all players (as well as employees, other visitors, contractors, and service providers) wear appropriately fitted face coverings at all times (individual PPE's as recommended by the CDC). At a minimum, if an individual refuses to wear a face covering, they should be prohibited from entering or playing at your facility.
- As an extra precaution, require screenings for all players (as well as employees, other visitors, contractors, and service providers) who enter the facility by measuring their body temperature on the forehead with laser thermal detection equipment (a no-touch thermometer) to indicate individuals are fever-free.
- All employees, other staff and club members should be instructed to stay at home if they are exhibiting any [symptoms associated with COVID-19](#), such as

coughing, shortness of breath, fever, or other flu-like symptoms.

- If an employee or player tests positive for COVID-19, follow the CDC guidelines for [who should get tested](#) and [what is considered close contact](#).
- Emphasize with players minimum contact, sufficient distancing, and the club's gradual and phased return to normal capacity.
- Allow sufficient planned breaks to allow for players to take bathroom breaks that allow time for adequate hand washing.
- Restrict the offering of any communal food or beverage items. Consider single-use food items in individually wrapped packets. It is highly recommended that the club discontinue any food or beverage offerings during club play.
- Prohibit the travel of players between other Unit facilities/other neighboring bridge clubs. It is considered a best practice to require that all members play only in their own usual local club.
- Kibitzing should be strongly discouraged. If a person is not an employee, other staff member or present to play bridge, they should not be at the club.
- If any club owner is informed or alerted to a case of COVID-19 from employees, other staff or club members, it must communicate the case to local health authorities immediately and cooperate with the local health authorities' response.

Club Member Preparedness & Safety

- All players should be required to take their own temperature routinely at home before arriving at the facility and to remain at home if their temperature is elevated. See above.
- Members should verbally self-certify they are symptom and fever-free prior to entering the facility.
- Particularly for larger clubs, it is highly encouraged that club members sign up in advance for sessions of play to ensure that the capacity requirements above are followed.
- Particularly for larger clubs, consider requiring that members play with the same group of players during each event. For example: members 1-6 play on Monday, Wednesday and Friday and members 7-12 play Tuesday and Thursday.
- During times of non-play (such as East/West movement between rounds), have players maintain at least 6 feet of separation from other individuals if the facility space provides adequate room to do so. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced and enforced.

This information is based on the current recommendations of public health experts. We encourage you to research and follow your local health department guidelines for businesses.