



Re-Opening for Live Bridge in the COVID Era

Executive Summary

- Public health regulations seem likely to permit indoor gatherings of more than 50 people in the near future
- That will mean bridge clubs can re-open for live bridge, provided that they can minimise the risk of COVID-19 infection for their attendees
- The CBAI has prepared a generic risk assessment form for clubs to use for this purpose (attached below)
- We are recommending that clubs put in place the following protective measures:
 - Each club should appoint a COVID officer responsible for managing the club's approach, communicating it to members, and dealing with any issues that arise
 - Only club members can play, and all attendees must be fully vaccinated
 - Perspex table screens should be used at all tables
 - Players should wear face masks on entry and exit, and when moving around, but not at the table if screens are being used
 - Playing rooms should be well-ventilated
 - Tables should be spaced out to ensure that players are suitably distanced, and players should avoid congregating
 - Equipment should not be shared amongst the players where possible – sharing cards is unavoidable for most clubs, but players should use one bidding box throughout, and only North should touch the boards and the scoring equipment
 - Players should sanitise their hands regularly, using an alcohol-based sanitiser
 - Any member infected by, or showing symptoms of, COVID-19, or who has been abroad or in close contact with a suspected COVID-19 case, should NOT attend live bridge under any circumstances
- There are a number of other moderately-priced technological aids available that clubs should consider, including non-contact digital thermometers for checking player temperatures, CO2 monitors to ensure air quality, and UVC disinfectant wands for cleaning
- Each club must review these recommendations in light of its own specific circumstances, and the committee must be confident that the club can protect its members appropriately before taking the decision to re-open for live bridge
- Ultimately, it is the club that is responsible for the safety of its members, and failure to adhere to public health regulations, or a negligent approach to member safety, may invalidate the club's insurance cover

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Preamble

In June 2020 when we carried out an initial risk assessment in order to prepare the way for a return to live bridge, the work we did was based on the information we had then from the health authorities:

- COVID-19 is a highly infectious virus, for which there is currently no specific treatment or vaccine.
- COVID-19 spreads readily from person to person: droplets (cough or sneeze) either directly from an infected person or by touching objects or surfaces (like doorknobs or tables) which have droplet contamination from an infected person, and then touching your mouth or face.
- Infected people can spread the virus for up to 48 hours before showing any symptoms themselves, and indeed some infected people remain asymptomatic. Symptoms of COVID-19 can range from very mild illness to pneumonia. Some people will recover easily, while others may get very sick, very quickly.
- Those most at risk of serious illness and death include: all people 70 years & older, all people over 65 with chronic medical conditions especially diabetes and hypertension, all people with compromised immune systems.

Since June 2020 the health authorities have continued to learn much more about COVID-19 and vaccines have been developed; in Ireland as of July 30th 2021 72.4% of the adult population has been vaccinated. We are therefore reviewing our risk assessment accordingly.

The number of people infected by the disease continues to change every day. While people of all ages can be infected, the risk for complications increases with age. COVID-19 also has led to serious illness and even death in younger and middle-aged adults who are otherwise healthy. Vaccination appears to offer substantial (but not complete) protection against the risk of severe illness or hospitalisation, but a lower level of protection against the risk of infection.

Experts have a better idea now about how the virus is transmitted from one person to another.



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COVID-19 is spread in three ways:

- By breathing in air when close to an infected person who is exhaling small droplets and particles that contain the virus;
- Having these droplets and particles land on the eyes, nose, or mouth;
- Or touching the eyes, nose, and mouth with hands that have the virus on them.

In addition, droplets can land on surfaces, and people may get the virus by touching those surfaces; however, this is now considered a lower risk than airborne droplets.

In general, the more closely you interact with others and the longer that interaction, the higher the risk of COVID-19 spread, and indoor spaces are more risky than outdoor spaces.

The roll-out of the vaccination program in Ireland has been a great success with 72.4% of the adult population fully vaccinated by 30th July 2021 and the program is continuing apace.

Experts tell us that if enough people are protected either because they have had the disease or they've been vaccinated, herd immunity will start to protect even those people who have not been infected. While the timeline for herd (or population) immunity is still uncertain, researchers believe we will likely not reach it any time soon. In addition, there is concern that new variants of the virus could affect overall progress.

Every bridge player who intends to go to their club to play bridge must ask themselves the following:

- Do I have symptoms of cough, fever, high temperature, sore throat, runny nose, breathlessness or flu-like symptoms now or in the past 14 days?
- Have I been diagnosed with confirmed or suspected COVID-19 infection in the last 14 days?
- Have I been out of the country in the last 14 days?
- Am I a close contact of a person who is a confirmed or suspected case of COVID-19 in the past 14 days?
- Have I been advised by a doctor to self-isolate at this time?
- Have I been advised by a doctor to cocoon at this time?

If you answer YES to any of these – you MUST NOT attend the club.

What happens on arrival at the club?

- (a) There will be a club member who will act as the 'entry monitor'.
- (b) Players must produce evidence of being fully vaccinated when first returning to the club.
- (c) The club will perform a non-contact temperature check.

- The best way forward is for your club is to have a risk assessment for dealing with the transmission of COVID-19
 - (i) from player to player, and
 - (ii) from players touching surfaces or equipment already touched by an infected person while attending bridge playing sessions.
- A Generic Risk Assessment for CBAI bridge clubs has been prepared (and updated in August 2021) and is presented below for clubs to use. This generic assessment may be adapted to suit your own specific circumstances.
- Your club is responsible for ensuring that all members and visitors understand that COVID-19 is a real and major threat. Your club is strongly advised not to 'water down' any directives or guidelines, and to comply with Government and public health regulations as and when they are issued and updated. If you do choose to deviate from the published directives and guidelines, you do so entirely at your own risk, and doing so may invalidate your insurance cover.



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The following are the primary player protection measures to have in place by clubs for returning to 'live' bridge in your club:

- (a) Sanitiser products and wash facilities.
- (b) Clean and sanitise all surfaces likely to be touched. **(You could use a UVC Wand - see Appendix 1)**
- (c) Clear plastic or perspex table screens. **(See Appendix 2)**
- (d) Face masks. Visors may be worn in exceptional circumstances, e.g. where a player has breathing difficulties with a mask.
- (e) Playing areas to be well ventilated.
- (f) All members to be made aware of the risk assessment and the resulting protection measures.
- (g) Proper signage to aid members' awareness of all measures to be followed while attending bridge sessions.
- (h) The playing room capacity will be reduced, as necessary, so as to observe social distancing.
- (i) Each club will have one nominated individual to act as **COVID Lead**, who will deal with COVID-related issues as they arise.
- (j) Each club will have one nominated individual to act as **Entry Monitor**.

Generic Risk Assessment for Contract Bridge Association of Ireland Bridge Clubs

Bridge Club.....

Assessment carried out by:

Date of next review:

Date assessment was carried out:

What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
Transmission of COVID-19 from Player to Player while attending bridge playing session						
1 Through touching hard surfaces or equipment already touched by infected person.						
1.1 Air Quality	Player acquiring virus by touch.	At present remaining closed. i.e. not running sessions. However, wanting to reopen when government permits.	Ensure that there is good air quality by ensuring sufficient air changes in the playing areas. Air changes can be ensured by opening windows/doors in the building. Windows do not need to be open as wide in windy/colder weather. Consider using a CO2 Monitor to indicate deteriorating air quality/poor ventilation.	Club	On opening During Session	



What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
			Mechanical air conditioning systems will provide adequate ventilation if they are set to maximise fresh air and minimise recirculation.			
1.2 Venue Features: Door Knobs etc	Player acquiring virus by touch.	At present remaining closed. i.e. not running sessions. However, wanting to reopen when government permits.	Ensure hard surfaces at the venue are as likely as possible to be virus free at start of session. Clean surfaces likely to be touched. Prop doors open as far as possible. Consider an external sanitising station at entrance to Clubhouse.	Club Club	Beginning of session	
1.3 Venue Features: Catering Equipment	Player acquiring virus by touch.	At present remaining closed. i.e. not running sessions. However, wanting to reopen when government permits.	Ensure player awareness with appropriate signage displayed. No catering. Players asked to bring and take away any drinks and drinking vessels for their own use.	Club	Before opening	
1.4 Cash Handling	Player acquiring virus by touch.	At present remaining closed. i.e. not running sessions. However, wanting to	No cash handling. Players pay for the session by dropping the table money into a container after entering the club. Other safe collection methods may	Club	During Session	

What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
		reopen when government permits.	be used, including online pre-payment. Ensure players are aware.		Before opening	
1.5 Coats and Hats	<p>Player acquiring virus by touch.</p> <p>One player's coat and hat may be touched by another player.</p> <p>Contamination may pass between them</p>	<p>At present remaining closed. i.e. not running sessions.</p> <p>However, wanting to reopen when government permits.</p>	<p>Consider leaving hats and coats in your car.</p> <p>Coats and hats to be placed apart from others on hooks and coat rails.</p> <p>Consider providing plastic crates in the playing room. Each will be for use by one player for storage of coats, hats, handbags etc.</p> <p>Marshalling by Entry Monitor will ensure that players arrive in the room at intervals and do not crowd together when using hooks, rails and crates.</p>	Club	<p>Before Session</p> <p>Before Session</p>	
1.6 Toilets Toilets will be available during the session	Areas in toilets may be contaminated by one player and touched by another	<p>At present remaining closed. i.e. not running sessions.</p> <p>However, wanting to reopen when government permits.</p>	<p>Place antiseptic hand wash in each toilet.</p> <p>Place antiseptic wipes in each toilet.</p> <p>Instruct players to wipe surfaces and then use handwash thoroughly after using toilet.</p> <p>Instruct players to avoid queues in contravention of social distancing.</p> <p>Appropriate signage to be placed in toilets.</p>	<p>Venue</p> <p>Club</p> <p>Club</p> <p>Club</p>		



What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
<p>1.7 Players bringing the virus into the club.</p>	<p>Players may contaminate surfaces or equipment.</p>	<p>At present remaining closed. i.e. not running sessions.</p> <p>However, wanting to reopen when government permits.</p>	<p>Restrict attendance to members of the club who have been fully vaccinated.</p> <p>Instruct players not to attend if feeling unwell.</p> <p>Check each player's temperature on entry with non-contact digital thermometer.</p> <p>Provide sanitising station for players entering the building.</p> <p>Ensure player awareness with appropriate signage displayed.</p>	<p>Club</p> <p>Club</p> <p>Entry Monitor</p> <p>Club</p> <p>Club</p>	<p>Start of session</p> <p>Before each session</p>	
<p>1.8 Bridge Club Equipment:</p> <p>Duplicate Boards and Playing Cards Preparation before Session</p>	<p>Player acquiring virus by touch.</p>	<p>At present remaining closed. i.e. not running sessions.</p> <p>However, wanting to reopen when government permits.</p>	<p>Ensuring equipment is virus free at start of session.</p> <p>A set of boards for use in the session is to be pre-dealt either by way of a dealing machine or manually.</p>	<p>Club</p> <p>Club</p>	<p>Before each session</p>	

What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
<p>1.9 Name Sheet</p>	<p>Player acquiring virus by touch</p>	<p>At present remaining closed. i.e. not running sessions.</p> <p>However, wanting to reopen when government permits.</p>	<p>Tournament Director to enter names on Name Sheet/Recap Sheet</p>	<p>Tournament Director</p>	<p>By start of session</p>	
<p>1.10 Bridge Club Equipment:</p> <p>Duplicate Boards and Playing Cards</p> <p>Use During Session</p>	<p>Player acquiring virus by touch.</p>	<p>At present remaining closed. i.e. not running sessions.</p> <p>However, wanting to reopen when government permits.</p>	<p>One set of boards for each session is sufficient, but if a club can provide more sets, this should be considered.</p> <p>All players to have their hands properly sanitised before and after each round.</p> <p>At the beginning of the session the Tournament Director, with hands properly sanitised, will place the relevant boards on each table.</p> <p>North will handle the board by the North end/corner and place it in the centre of the table where the table screen permits.</p> <p>Players will touch the unique side of the board containing their cards but will not touch any other part of it.</p> <p>At the end of each round the Tournament Director, with hands properly sanitised, will move the boards from table to table.</p>	<p>Club</p> <p>Instruct players</p> <p>Instruct players</p> <p>Instruct players</p>	<p>Before each session</p>	



What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
<p>1.11 Bridge Club Equipment:</p> <p>Bidding Boxes</p>	<p>Player acquiring virus by touch.</p>	<p>At present remaining closed. i.e. not running sessions.</p> <p>However, wanting to reopen when government permits.</p>	<p>Ensure bidding boxes are as likely as possible to be virus free at start of session.</p> <p>Bidding boxes will be placed on tables by people with hands properly sanitised.</p> <p>Bidding boxes will only be used by one player during the session.</p> <p>North and South will stay in their seats and use the same bidding boxes throughout the session.</p> <p>East and West will take their bidding boxes with them each time they move.</p> <p>Consider getting players to purchase their own bidding box.</p>	<p>Club</p>	<p>Before each session</p>	



What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
1.14 Bridge Club Equipment: Scoring Laptop	Player acquiring virus by touch.	At present remaining closed. i.e. not running sessions. However, wanting to reopen when government permits.	The scoring laptop and router will be placed in a safe area under the care of the scorer and players will be instructed not to touch them.	Club	Before each session	

What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
2 Through inhaling droplets breathed out by infected person (or via airborne aerosols).						
2.1 Air Quality	Player acquiring virus by airborne droplet(s).	At present remaining closed. i.e. not running sessions. However, wanting to reopen when government permits.	Ensure that there is good air quality by ensuring air changes for playing areas. Air changes can be ensured by opening windows/doors in the building. Windows do not need to be open as wide in windy/colder weather. Consider using a CO2 Monitor to indicate deteriorating air quality/poor ventilation. Mechanical air conditioning systems will provide adequate ventilation if they are set to maximise fresh air and minimise recirculation.	Club	On opening During Session	
2.2 Players entering the building. Players clustering as they enter the building.	Player acquiring virus by airborne droplet(s).	At present remaining closed. i.e. not running sessions. However, wanting to reopen when government permits	Restrict attendance to members of the club who have been fully vaccinated. Check each player's temperature on entry with non-contact digital thermometer. Marshalling to ensure that players do not cluster.	Club Club Club	Before each session	



What are the hazards?	Who might be harmed and how?	What are you already doing to control the risks?	What further action do you need to take to control the risks?	Who needs to carry out the action?	When is the action needed by?	Done
			Ensure player awareness with appropriate signage displayed.	Club		
2.3 Players passing each other without distancing as they fill the tables and for East/West players moving at the start of each round.	Player acquiring virus by airborne droplet(s).	At present remaining closed. i.e. not running sessions. However, wanting to reopen when government permits	Players must wear a face mask. Ensure player awareness with appropriate signage displayed.	Club	Before each session	
2.4 Players breathing on each other at the table.	Player acquiring virus by airborne droplet(s).	At present remaining closed. i.e. not running sessions. However, wanting to reopen when government permits.	Perspex/Plastic Screens on the tables from corner to corner form a barrier by containing breath in the area immediately in front of each player. Ensure screens are as likely as possible to be virus free before and after each session.	Club Club	Before each session	
2.5 Players passing each other without distancing as they leave the building.	Player acquiring virus by airborne droplet(s).	At present remaining closed. i.e. not running sessions. However, to reopen when government permits.	Players will be asked to collect outdoor clothing etc. and leave the building socially distanced. Ensure player awareness with appropriate signage displayed.	Club Club	At the end of each session	

Summary of actions and policies required by this Risk Assessment:

The following lists are not exhaustive, and each club will need to consider the risks specific to its own circumstances.

Formal rosters for cleaning of table screens, bidding boxes, chairs etc. should be organised by the club.

Provision of equipment

- Procure **alcohol-based** (non-sticky) hand sanitiser and antiseptic wipes.
- Provide container for collection of table money, if cash payment is being required.
- Use signage to ensure players are aware of the protective measures, and display it prominently where required in the building. CBAI will provide generic signage for clubs. Additional signage may be required depending on individual club circumstances.
- Procure table screens (see Appendix 2 below). Table screens can be purchased from CBAI at reasonable cost.

Layout of the room(s) / limitation of numbers of attendees

- The playing room capacity should be reduced, as necessary, so as to observe social distancing.

Bridge sessions

- Only use Mitchell Movements for your sessions as Howell Movements will lead to excessive movement.
- Records of all persons attending the bridge session(s) must be kept for at least three weeks.

Brief players before the session

- Admission will be available to members only who have been vaccinated.
- Player numbers will be strictly limited to approved capacity.
- Explain provision for handling boards, cards, bidding boxes and scorers etc. East/West to take their bidding boxes when moving.
- When using hand sanitiser players must make sure their hands are dry before handling the playing cards. It is known that hands that are wet from over sanitising and not dry will cause the cards to become sticky and will cause problems when used in a dealing machine.



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- There will be no catering, players should bring with them, and take away afterwards any drinks and drinking vessels they require.
- Explain provision for coats, hats etc.
- Explain provisions for toilet use.
- Instruct players to maintain social distance at all times.
- Note that failure to adhere to public health guidelines may invalidate your insurance cover.

Appendix 1

UVC Wand



Man-made UVC light is effective at ionizing organic molecules and altering their DNA and RNA. For years, scientists and medical professionals have used the invisible light as a natural disinfectant against bacteria and viruses. While scientists are still working to determine the full efficacy of UVC light against SARS-CoV-2, the coronavirus that causes COVID-19, the early indications are promising -- enough so that the FDA issued guidance in March that it "does not plan to object" to any previously cleared sterilization or disinfectant devices updating their marketing to indicate that they combat COVID-19. "Because disinfection kills most recognized pathogenic microorganisms, it can generally be inferred that sterilization and disinfection should minimize the viability of SARS-CoV-2 on surfaces and in the air in confined spaces," the FDA wrote. Several such UVC wands are available on the market.

Appendix 2 Table Screen



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