

Return to Youth Sports After COVID-19 Shutdown: Policy Statement

The last few months have been unprecedented in the challenges we have faced with the COVID-19 epidemic. As we reopen our communities, we have an opportunity to shape our new normal and work together as a community to forge a safe, supportive environment for our children to return to sports.

Although no strategy for youth sports can fully eliminate risk of COVID-19 transmission among children, coaching staff, or families, our intention is to provide some practical strategies that can reduce risk and counter the unintended secondary consequences of the pandemic on our children. This guidance is meant to complement existing recommendations from the Centers for Disease Control and Prevention (CDC) to help families make decisions about their child's participation based on their age, specific sport and the level of play in which they are engaged.

We cannot throw caution to the wind, but we can make careful judgments based on the best scientific evidence available, <u>guidance</u> from youth sports national governing bodies, and expanding recommendations from public health departments on how to cautiously resume physical activity as safely as possible.

GUIDING PRINCIPLES

- Children appear to be less frequently infected and develop severe disease less frequently than adults.
- Risk of transmission will vary based on disease burden within a local community; full sports participation will be safest when disease burden in communities is lowest.
- Outdoor activities appear to be lower risk than prolonged indoor activities.
- Sports with greater and more frequent inter-athlete contact are higher risk than "no- to lower-contact" sports.
- O Longer distance travel for games may increase spread between regions, particularly during periods of higher regional disease burden.
- The risk for individual COVID-19 infection increases with prolonged exposure (at least 10-15 minutes) to an infected person (through close contact) OR direct contact with a COVID-19 contaminated object and subsequent self-inoculation by touching eyes, nose or mouth with contaminated hands.
- A "quaranteam" approach—whereby a group of athletes commits to the same safe principles in daily life to minimize risk of COVID-19 transmission within the team—can reduce risk for transmission within teams and across sports leagues.
- A risk-based approach to resumption of team activities can allow coaches and leagues to adapt activities as needed based on degree of disease burden and risk in communities.

APPROACH TO RETURN TO SPORT (to be based on local transmission levels of COVID-19)

- (a) Use a sign-in sheet prior to practice to monitor exposures and symptoms among athletes and their families and utilize contact tracing (all levels of risk).
- Ramp-up individual conditioning—aerobic, interval, and strength training to decrease risk of injury—before advancing to scrimmages or games (lowest risk).
- Advance to group training and practice (increasing risk).
- ₩ithin-team competition can start earlier for lower-risk outdoor sports (e.g., track and field, tennis, golf), moving sequentially to higher-risk sports (e.g., football, soccer, basketball, ice hockey, field hockey, volleyball) (more risk).
- Competition between teams from the same community can minimize exposure to teams from other areas with different levels of COVID-19 transmission (moderately high risk).
- [Indoor training in gyms will require distancing between stations with diligent equipment cleaning between users (moderately high risk).
- (Decisions regarding regional competition should consider levels of infection across communities (i.e., avoid regions with high rates of infection). Individual travel in cars or reducing group size within buses may decrease risks associated with mode of travel (moderately high risk).
- (A) Risk of full competition between teams from different geographic areas will be lowest when both areas have very low levels of virus transmission and both teams/leagues strictly adhere to "quaranteam" approaches.

I RECOMMENDED SAFE BEHAVIORS

- Avoid sharing personal items such as towels, water bottles and razors.
- Use frequent hand hygiene, including before and after play, during practice and during play as rules allow.
- For athletes with COVID-19-like symptoms or high-risk exposure in their household or who have had close contact with infected individuals (even if asymptomatic), prohibit return to play for at least 10 days, regardless of test result, due to uncertain reliability of PCR testing in children. That athlete should return to play only after completing 10 days of quarantine and at least 3 days without fever.



Mandate a daily self-assessment of symptoms and maintain a strongly enforced sick policy.



Frequently clean and disinfect equipment, locker rooms and game-area facilities, including during game play when possible.



Avoid face touching whenever possible; use hand sanitizer before and after putting on helmets, mouth guards, etc.



Distance whenever possible during practice, while on the sidelines and in the locker room.



Commit to your "quaranteam"—have athletes sign the "Return to Youth Sports COVID-19 Compact."





CONTACT US:

MODERATE



Return to Youth Sports After COVID-19 Shutdown: **Quick Reference Guide**

APPROACH TO RETURN TO SPORT

As a first step, establish monitoring systems that enable contact tracing and exposure testing.

- Designate a COVID Coordinator. Any athletes who are sick or have had exposure to someone with the virus should inform the COVID Coordinator, who will inform the local public health department.
- Set up procedures for notifying athletes, parents, coaches, and contacts if someone on the team becomes ill and support contact tracing efforts.
- Only allow return to sport after infection or known exposure, either confirmed by a positive test or untested, following a 10-day quarantine and no fever or respiratory symptoms for 3 days; if an individual tests negative and symptoms resolve, they may return to play as tolerated.

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- (v) Implement a two-week ramp-up period for conditioning—aerobic, interval and strength training to decrease risk of injury-without scrimmages or games.
- Start with individual training and progress to small-group training; consider competition in lower-risk outdoor sports without prolonged, close inter-athlete contact such as track and field, tennis, and golf. Programs may be at this stage of training for a period of time due to prolonged moderate levels of virus transmission within a community.
- (Advance to larger-group training, scrimmages, and inter-program games and competition for higher-risk exposure and indoor sports only when lower rates of virus transmission are achieved in your region.
- (v) Consider level of risk for each sport based on risk factors (e.g., indoor versus outdoor, shorter *versus longer duration of athlete contact)*
 - Higher-risk sports with prolonged, close inter-athlete contact (wrestling, football, ice hockey, *lacrosse*, rugby)
 - Moderate-risk sports with some inter-athlete contact (soccer, field hockey, basketball, volleyball)
 - Lower-risk sports with little inter-athlete contact (golf, tennis, track and field)
- Consider regional levels of infection and transmission in making decisions on competition with other teams.
 - Competition should not occur in communities with high transmission rates. Competition in lower-risk sports may occur in communities with moderate levels of virus transmission. Higher-risk competition may occur when lower levels of transmission are achieved within a commu-
 - Do not travel to regions with high rates of transmission. Regions may have moderate levels of transmission for some time.
 - Consider risks of travel, limiting radius and modes of travel (private car versus buses or airplanes).
 - Limit spectator and parent/family attendance and, when spectators are permitted, always institute masking and social distancing principles.
- (v) Return to training in a gym with distancing between stations and diligent cleaning of equipment between users.
- Return to competition for moderate- and high-risk sports.

RECOMMENDED SAFE BEHAVIORS

- Don't share personal items such as towels or water bottles.
- Frequently practice hand hygiene before and after play, and during play as rules allow.
- Have athletes and family members check temperatures and assess their symptoms daily and maintain a strongly enforced sick policy.
- Players in helmeted sports should consider adding a visor/face shield to their helmet as rules allow. Masks should be worn during group practices and conditions where 12 feet distancing cannot be maintained while COVID-19 community transmission remains high or moderate.
- Sign the Return to Youth Sports COVID-19 Compact.

- Coaches should wear masks at all times when in contact with players and other coaches.
- Frequently clean locker rooms and game-area facilities, including during game-play when possible.
- Distance from others whenever possible on the sidelines and in practice.
- Commit to your "quaranteam," or your "social network bubble" that has committed to practicing the same safe principles in daily life to minimize risk of COVID-19 transmission. Remember, all exposures outside of your "quaranteam" will affect the team, so act accordingly.
- Avoid face touching as much as possible.



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Return to Youth Sports After COVID-19 Shutdown: Guidelines for Coaches

This document is intended to summarize and simplify <u>recommendations from the Centers for Disease Control and Prevention</u> (CDC) and <u>other</u> youth sports <u>guidance</u> for coaches as they prepare for upcoming seasons during the COVID-19 pandemic.

Please note that, while preparation can lower the risk for an outbreak within a team or a league, it is not possible to eliminate transmission entirely. Adherence to these recommendations, however, can help to manage transmission risk and ensure that teams and their athletes return to sports as safely as possible.

I PREPARATION FOR THE SEASON

- Clear with your supporting organization and regional and national governing body, if applicable, that legal concerns, including insurance coverage, are addressed and facility supports, such as equipment, bathroom and portable toilet sanitation, are properly in place.
- Establish a club or school policy for restarting, and develop signs, handouts, and email communications sharing strict expectations for players and families regarding symptom monitoring and adhering to established sick policies. Have athletes and parents sign the "Return to Youth Sports COVID-19 Compact." Athletes with high-risk conditions should consult with their doctor prior to returning to play.
- Establish a monitoring system (e.g., daily sign-in sheet, app- or web-based survey) to confirm that coaches and athletes, or someone in their family, haven't had close-contact or exposure to someone with the virus.
- Designate a team COVID Coordinator who will serve as the point of contact for athletes reporting COVID-19 symptoms or exposure. This may be an athletic trainer, volunteer parent team manager, or volunteer assistant or head coach from a community or club team.
- Limit equipment sharing and disinfect equipment between player use whenever possible (at a minimum, between drills, at timeouts/innings/quarters/etc.), at the start and end of the day and during breaks.



Establish a plan to clean facilities and ensure adequate supplies including hand sanitizer with at least 60% alcohol, masks or face shields, and cleaning materials for all sports equipment. You may need to limit access to athletic training rooms and locker rooms/changing areas.



Establish protocols to protect coaching staff from exposure to athletes who may be pre-symptomatic or asymptomatic with COVID-19 infection; protocols should include masking, social distancing on fields, sidelines or in gyms, and frequent hand hygiene.



Establish protocols that limit spectators and establish safe parameters when allowed, including mask wearing, maintaining at least 6 feet between individuals, and cleaning of stadiums prior to and after events.



Establish protocols for return to practice and play for any coach or player who has symptoms of or exposure to COVID-19, including a required 10-day quarantine with no fever or respiratory symptoms for 3 days prior to return to sports.



Establish a plan for the COVID Coordinator to communicate with other teams, as well as local health authorities, for guidance and contact tracing if a player or coach becomes infected with the coronavirus. This should include gathering email addresses, phone numbers, and website contacts that are also available to players and families.



Establish policy for immediate exclusion if ill with any COVID-19 symptoms or illness symptoms in general so that the athlete can seek medical attention.

SCALING UP YOUTH SPORTS ACTIVITIES BASED ON LEVEL OF COVID-19 COMMUNITY TRANSMISSION

- Scale activities up and down based on the disease burden, or amount of circulating COVID-19 cases, in your community. The *pyramid to the right* shows an easy way to adjust activities during periods of high (red) and low (green) circulating infections in a community, as reported by local and state health departments.
- Follow local guidelines for types of permissible activities by level of community virus transmission, as determined by local and state public health departments.



- Limit spectators and parent/family attendance whenever possible and always institute social distancing principles when spectators are present. Coaches and spectators should wear masks.
- Allow athletes to start training by conditioning in small, distanced groups, rather than immediately jumping to scrimmages, full-team workouts and games, both for injury prevention and to permit COVID-19 transmission to decrease to a point when full-team training is permitted.
- Set up practices to encourage social distancing—for example, avoid team huddles and designate specific coaches to train in regular groups (e.g., by position, offensive/defensive subunits) rather than exposing all coaches to all players.

GAME PLAY

- When your community has decreased transmission to moderate or low levels and competition in sports may begin, plan to schedule games within your local region first.
- Expand to regional competition only as regional infections decline to very low levels, as reported by your local and state health departments.
- Competition among low-risk sports (e.g., tennis, track and field, golf, swimming) may occur in communities with moderate levels of COVID-19 transmission. Competition in higher-risk sports (e.g. football, ice hockey, lacrosse, indoor basketball, wrestling, rugby) should not begin until communities have achieved lower rates of transmission. Be aware that many regions will be in the phase of moderate levels of virus transmission for a period of time.



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Return to Youth Sports After COVID-19 Shutdown: Compact to Commit to Your Quaranteam

I will commit to wearing a mask a side of my sport.	nd social distancing in hig	her-risk situations where i	t is recommended out-
I will commit to checking my temp	perature and assessing my	y own symptoms on a daily	basis.
I will disclose any possible COVID COVID-19 to my parents and coac anteam."		-	_
I will encourage my quaranteam-	mates to practice these sa	me healthy behaviors.	
I will not share towels, water bottl	les or other personal item	s.	
I will regularly wash my hands and	d use hand sanitizer befor	e, during and after practice	es/games.
I will avoid touching my face and,	if I have to, use hand sani	tizer afterwards.	
I will wipe down all equipment I u	ıse with a disinfectant wip	e at the end of every practi	ce or game.
Before I leave the facility, or as soo possible exposure.	on as I get home, I will sho	ower or bathe myself to pro	tect my family from
Athlete name:		Date:	
Athlete signature:			
MHAT IF I DON'T FEEL WELL? Athlete presents with one of these symptoms: Fever Muscle aches Chills Headache	Athlete evaluated by medical professional for illness symptoms	Tests positive for COVID-19 or goes untested	Sits out for a minimum of 10 days until recovered
 Rigors Sore throat New loss of smell or taste Cough Shortness of breath Difficulty breathing Congestion or runny nose Diarrhea Nausea or vomiting 	Diagnosed with non-COVID condition (asthma, allergies, strep throat)	Returns to play per medical professional recommendations	Returns to play after 3 days of no symptoms

WHAT CAN I DO TO PREVENT COVID-19?

- Wear a mask when around other people.
- Wash or sanitize my hands frequently.
- Avoid sharing any food, drink or other personal items like towels or water bottles.
- Avoid touching my face.
- (A) Keep distance from other people whenever possible.
- Quarantine myself if I become sick and work with my parents to seek medical care and testing.