

# 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: