

USADSF Return to Play Guidelines following the COVID-19 pandemic: Resuming Athletic-Related Activities

Created by USADSF Medical Commission

Based upon CDC recommendations and adapted from USOPC Return to Training Considerations Post-COVID19

OVERVIEW – This is the **second** in a series of *Return to Play Guidelines* that the USA Deaf Sports Federation (USADSF) has prepared for National Sport Organization (NSO) leaders, team leaders, coaches, members, and families to provide guidance for athletic-related activities. The following guidelines will **explain the process of resuming athletic-related activities** in the “return to play” process.

These guidelines apply to domestic events only, including but not limited to training camps, tryouts, practices, and scrimmages. The following recommendations are not intended or implied to be mandates. Many of these recommendations are based upon current guidelines set forth by the Centers for Disease Control and Prevention (CDC) and other Federal government agencies. The knowledge surrounding COVID-19 is constantly changing and circumstances are different based on geographic region. Therefore, NSO leaders, team leaders, and coaches should adhere to their state and local guidelines when determining their own reopening policies and procedures.

Until COVID-19 is either eradicated, a vaccine is developed, or a cure is found, there is no way to completely eliminate the risk of infection. As a result, USADSF strongly encourages all participants to follow these recommendations as safety precautions. The information in this document is not intended or implied to be a substitute for professional medical advice, diagnosis, or treatment, nor does USADSF or NSOs assume any liability or responsibility for the recommendations provided herein.

PURPOSE – The purpose of these guidelines is to create a comprehensive “return to play” plan for USADSF activities in the United States that follow CDC, federal, state and local guidelines and regulations. USADSF activities include but are not limited to: travel, lessons, practices, camps involving USA Deaf National Teams. In addition, NSOs are encouraged to adopt these guidelines for activities including but not limited to: tryouts, practices, scrimmages, camps, clinics, combines, showcases, or national, regional, or invitational tournaments.

Each NSO must provide the USADSF Medical Commission with a plan on how they are planning to conduct their tryouts, camps, and clinics per these guidelines. Once a plan is submitted, the Medical Commission will review and give approval or feedback in order to assist with conducting these events safely. A plan must be finalized and approved at the end in order to be allowed to conduct these events.

RETURN TO TRAINING PHASES

Specific sports may return, pending Medical Commission’s approval, to begin the following progression assuming all infection preventative measures are in place: training, tryouts, team practices.

Overview

Phase 1: Virtual training, individual training

Phase 2: Virtual training, individual training, physically distanced training (6 feet apart)

Phase 3: 1 on 1 training, <10 person group training (14-day quarantine required)

Phase 4: Team-only training and scrimmages (14-day quarantine required) - competition is to be determined

Phase 5: Return to competition with preventative measures in place (dependent on state status)

Risk of Contact and Infection

| | | | |
|-----------------|--|---------------------|--|
| Lowest risk | Performing skill-building drills or conditioning at home, alone or with family members | Low contact risk | <ul style="list-style-type: none"> - Orienteering - Badminton - Cycling - Shooting - Skiing - Snowboard - Track - Tennis - Golf |
| Increasing risk | Team-based practice | | |
| More risk | Within-team competition | Medium contact risk | <ul style="list-style-type: none"> - Baseball - Softball - Volleyball/Beach volleyball - Bowling - Chess - Curling - Swimming |
| Even more risk | Full competition between teams from the same local geographic area | | |
| Highest risk | Full competition between teams from different geographic areas. | High contact risk | <ul style="list-style-type: none"> - Football - Hockey - Basketball - Soccer - Wrestling - Combat sports (judo, tae kwon do, karate) |

In Depth

Phase 1: Public health authorities require shelter in place, public training facilities are closed

- ❑ Individual training sessions in your home using your own equipment
- ❑ Coaching occurs virtually. No coaches or other athletes present during training.
- ❑ Rigorous, frequent cleaning protocol of living space and athletic equipment with disinfectant* wearing appropriate personal protective equipment (PPE) (e.g., gloves, face mask, etc.) to prevent contact with contaminated surfaces (particularly when living with people with greater community exposure) and protect against toxicities associated with cleaning products
- ❑ Only leave your home for essential work or errands and follow infection prevention measures when in public (Appendix 1)

Phase 2: Public health authorities lift shelter in place requirements, but continue to prohibit group activities and public training facilities remain closed

- 1) Individual training sessions in your home or outside (maintaining social distancing) using your own equipment
- 2) Coaching occurs virtually. No coaches or other athletes present during training.
- 3) Rigorous, frequent cleaning protocol of living space and athletic equipment with disinfectant* wearing appropriate personal protective equipment (PPE) (i.e., gloves, face mask, etc.) to prevent contact with contaminated surfaces and protect against toxicities associated with cleaning products
- 4) Follow infection prevention measures when in public (Appendix 1)

Phase 3: Public health authorities allow small group activities (< 10 people), but public training facilities remain closed

- 1) Criteria for participation in group training sessions (includes athletes, coaches and staff)
 - a) Required
 - i) No signs or symptoms of COVID-19 (Appendix 2) in the past 14 days
 - (1) If the person has had a case of documented COVID-19 infection, they need a note from their doctor indicating they are cleared to participate in training
 - ii) Live in training location for 14 days prior to beginning group training
 - (1) This requirement reduces the risk of introducing COVID-19 into the training group by someone traveling from a different region
 - iii) No close sustained contact with anyone who is sick within 14 days of beginning group training
 - (1) Since the signs and symptoms of COVID-19 can be fairly non-specific and not just respiratory symptoms, it is recommended that athletes should not be in close sustained contact with anyone who is sick for 14 days prior to beginning group training. This requirement reduces the risk of introducing

COVID-19 into the training group by someone who may have COVID-19 but isn't experiencing any symptoms yet.

- b) Additional or alternative criteria that could be used based upon advancements in scientific knowledge, test availability, and athlete/organizational resources**
 - i) Two negative COVID-19 tests separated by 24 hours
 - (1) The tests must be performed and results available prior to beginning group training. Tests would need to be repeated if the individual:
 - (a) Had close sustained contact with someone with documented COVID-19 infection
 - (b) Developed signs or symptoms of COVID-19 infection
 - ii) Coronavirus serology demonstrating prior infection (i.e., presence of IgG), but no current infection (i.e., lack of IgM)
 - (1) The test must be performed and results must be available prior to beginning group training
- 2) Minimize changes in small group participants
 - a) If a group of individuals live together, consider assigning them to the same small group for training
- 3) All participants must self-monitor for symptoms of COVID-19 twice daily (Appendix 3). If any signs or symptoms of infection are present, the participant should not attend the practice, should notify coaches and staff, and should contact their healthcare provider
 - a) Athletes must record their signs and symptoms (including temperature) on a paper or electronic log that is monitored by coaches or staff
- 4) Upon arrival to train, coaches or staff should ask each athlete if they are experiencing any signs or symptoms of COVID-19 and take their temperature
 - a) If the athlete has any signs or symptoms of COVID-19, they should be sent home and instructed to contact their healthcare provider
- 5) Infection prevention measures should be followed during practice and when in public (Appendix 1)
 - a) Make sure appropriate infection prevention supplies are present in multiple targeted areas (e.g., hand sanitizer, facial tissues, facial coverings, etc.)
- 6) Small group training sessions should take place outside in an area where social distancing can be maintained
- 7) Participants should use their own equipment and avoid touching each other with their hands
 - a) If a ball is being used (e.g., basketball), make sure only one player is using a specific region of the court and/or basket at a time, and the court in that region needs to be cleaned before another player uses the ball in that space to prevent indirect transmission from ball 1 to ground and from ground to ball 2.

- b) Use his/her own water bottle, towel, personal hygiene products (e.g., soap, deodorant, etc.)
- 8) No activities that would require direct (e.g., judo) or indirect (e.g., high jump pit, basketball) contact between athletes
- 9) Rigorous, frequent cleaning schedule/protocol of equipment with disinfectant before, during, and after training* wearing appropriate personal protective equipment (PPE) (e.g., gloves, face mask, etc.) to prevent contact with contaminated surfaces and protect against toxicities associated with cleaning products
- 10) Coaching can occur onsite, but coaches must maintain social distancing from all participants

Phase 4: Public health authorities allow public training facilities to open, no limitations on group size

- 1) Criteria for participation in group training sessions (includes athletes, coaches and staff)
 - a) Required
 - i) No signs or symptoms of COVID-19 (Appendix 2) in the past 14 days
 - (1) If the person has had a case of documented COVID-19 infection, they need a note from their doctor indicating they are cleared to participate in training
 - ii) Live in training location for 14 days prior to beginning group training
 - (1) This requirement reduces the risk of introducing COVID-19 into the training group by someone traveling from a different region
 - iii) No close sustained contact with anyone who is sick within 14 days of beginning group training
 - (1) Since the signs and symptoms of COVID-19 can be fairly non-specific and not just respiratory symptoms, it is recommended that athletes should not be in close sustained contact with anyone who is sick for 14 days prior to beginning group training. This requirement reduces the risk of introducing COVID-19 into the training group by someone who may have COVID-19 but isn't experiencing any symptoms yet.
 - b) Additional or alternative criteria that could be used based upon advancements in scientific knowledge, test availability, and athlete/organizational resources**
 - i) Two negative COVID-19 tests separated by 24 hours
 - (1) The tests must be performed and results must be available prior to beginning group training. The tests would need to be repeated if the individual:
 - (a) Had close sustained contact with someone with documented COVID-19 infection

- (b) Developed signs or symptoms of COVID-19 infection
- ii) Coronavirus serology demonstrating prior infection (i.e., presence of IgG), but no current infection (i.e., lack of IgM)
 - (1) The test must be performed and results must be available prior to beginning group training
- 2) All participants must self-monitor for symptoms of COVID-19 twice daily (Appendix 3). If any signs of symptoms of infection are present, the participant should not attend the practice, should notify coaches and staff, and should contact their healthcare provider
 - a) Athletes must record the results of their self-monitoring on a paper or electronic log that can be monitored by coaches or staff
- 3) Upon arrival to train, coaches or staff should ask each athlete if they are experiencing any signs or symptoms of COVID-19 and take their temperature
 - a) If the athlete has any signs or symptoms of COVID-19, they should be sent home and instructed to contact their healthcare provider
- 4) Continue standard infection prevention measures (e.g., frequent handwashing, avoid touching your face, cover your mouth when coughing, etc.), but social distancing is no longer required
 - a) Make sure appropriate infection prevention supplies are present in multiple targeted areas (e.g., hand sanitizer, facial tissues, facial coverings, etc.)
- 5) Normal sized group training sessions outside and/or inside using training facilities
- 6) Participants may use each other's equipment, but equipment should be cleaned between use if possible
- 7) Continue to use his/her own water bottle, towel, personal hygiene products (e.g., soap, deodorant, etc.)
- 8) Activities with direct (e.g., judo) or indirect (e.g., high jump pit, basketball) can resume
- 9) Rigorous, frequent cleaning schedule/protocol of equipment with disinfectant before, during, and after training should continue* including wearing appropriate personal protective equipment (PPE) (e.g., gloves, face mask, etc.) to prevent contact with contaminated surfaces and protect against toxicities associated with cleaning products
- 10) Coaching can occur onsite

Phase 5: A vaccine or cure for COVID-19 is developed

- Incorporate COVID-19 vaccination into the standard vaccinations of athletes, coaches, and staff
- Continue to educate athletes, coaches, and staff on the signs and symptoms of infection. If they develop signs and symptoms of infection, they should not attend practice, should notify their coaches and/or staff, and contact their healthcare provider
- Continue standard infection prevention measures (e.g., frequent handwashing, avoid touching your face, cover your mouth when coughing, etc.)

- ❑ Continue rigorous, frequent cleaning schedule/protocol of equipment with disinfectant before, during, and after training*

ADDITIONAL RESOURCES

United States Olympic and Paralympic Committee (USOPC)

- ❑ <https://www.teamusa.org/coronavirus>

Centers of Disease Control and Prevention (CDC) Guidances

- ❑ <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

US Department of State - Travel

- ❑ <https://travel.state.gov/content/travel.html>

DISCLAIMER – These guidelines are provided for general informational purposes only and are not intended as, or should be relied upon as, specific medical or legal advice. All participants are strongly encouraged to consult with qualified medical personnel and/or public health officials for medical advice. Also, consult with federal, state and local orders and/or laws for legal considerations. If you use any considerations provided herein, you do so at your own risk and specifically release from any and all liability, USADSF, NSOs, and their directors, officers, employees, volunteers and agents in connection with your use of the enclosed guidelines. USADSF and NSOs make no warranties or statements as to the completeness, reliability, and accuracy of the information contained herein.

APPENDIX 1

Infection Prevention Recommendations

- Stay more than 6 feet away from people who appear sick
- Avoid touching your face
- Frequently wash your hands for 20 seconds with soap and water or using alcohol-based hand sanitizer with a minimum of 60% alcohol if your hands aren't soiled
- Cover your mouth and nose with tissue when coughing or sneezing, dispose of tissue in the trash, and wash your hands or use hand sanitizer after coughing or sneezing
- Frequently clean commonly touched surfaces (ie: doorknobs, keyboards) with antiseptic cleanser
- Wear a facemask when you are outside of your home or if you have symptoms of a respiratory illness such as a cough, runny nose, or shortness of breath
- Stay home if you are sick and call your healthcare provider for further recommendations

APPENDIX 2

Signs and Symptoms of COVID-19/COVID-19 Supplemental Questionnaire

1. Have you had any of the following symptoms in the past 2 weeks?
 - a. Fever
 - b. Cough
 - c. Shortness of breath or difficulty breathing
 - d. Shaking chills
 - e. Chest pain, pressure, or tightness
 - f. Fatigue or difficulty with exercise
 - g. Loss of taste or smell
 - h. Persistent muscle aches or pains
 - i. Sore throat
 - j. Nausea, vomiting, or diarrhea
2. Do you have a family or household member with current or past COVID-19?
3. Do you have moderate to severe asthma, a heart condition, diabetes, pre-existing kidney disease, or a weakened immune system?
4. Have you been diagnosed or tested positive for COVID-19 infection?
5. If you had COVID-19:
 - a. During the infection did you suffer from chest pain, pressure, tightness or heaviness, or experience difficulty breathing or unusual shortness of breath?
 - b. Since the infection, have you had new chest pain or pressure with exercise, new shortness of breath with exercise, or decreased exercise tolerance?