



COLLEGIATE ATHLETICS: COVID-19 HEALTH & SAFETY POLICY FOR ATHLETICS AND OUTLINE FOR RETURN TO SPORT

Updated: November 30, 2020

COVID-19 HEALTH & SAFETY POLICY FOR ATHLETICS PURPOSE: As the Kentucky High School Athletic Association (KHSAA) releases guidance and policies for return to sports, we are also increasing our athletic activities. The most recent information from the KHSAA can be found on their website (www.khsaa.org).

With the ongoing national concern regarding safe return to athletics in the secondary school setting, it is imperative to utilize all available resources to mitigate transmission risk and ensure the safest possible environment for participation of sport. The following procedures are based on various published guidelines from reliable sources and may be updated as needed to fit current established regulations and rules.

Resources include:

- Center for Disease Control (CDC)
- National Federation of State High School Associations (NFHS)
- National Athletic Trainers' Association (NATA)
- American Academy of Pediatrics
- Rothman Orthopedics COVID-19 Sports Opening Presentation
- Kentucky High School Athletic Association (KHSAA)
- Louisville Collegiate School's Health and Safety Policy
- Kentucky Medical Association (KMA)

On November 19, 2020 the KHSAA Board of Control voted to push back the start of the winter sports competitive season to January 4. Practices and in-person meetings have also been suspended until Monday, December 14.

(<https://khsaa.org/11-19-20-board-of-control-pushes-back-start-of-winter-sports-season-to-january-4/>) The Board of Control has another meeting scheduled for December 10 to reevaluate the situation at that time.

During the August 20, 2020 KHSAA Board of Control meeting, they voted to move forward with official practices beginning on Monday, August 24 and competitions the week of September 7. (<https://khsaa.org/08-20-20-board-of-control-upholds-decision-to-begin-fall-sports-september-7/>)

On July 28, 2020, the KHSAA Board of Control voted to move the start date for official practices for fall sports (other than golf) to Monday, August 24. They also moved the date for first official competitions to the week of September 7. (<https://khsaa.org/07-28-20-board-of-control-approves-fall-sports-to-begin-practice-august-24/>)

On July 12, 2020, KHSAA Commissioner Julian Tackett released the Board of Control's vote to extend the "Segment 3" period of the KHSAA's Return to Play (<https://khsaa.org/07-12-20-segment-3-continued-through-august-2nd-guidance/>). Golf is the only fall sport that may begin official practices on July 15th.

Next steps

- The KHSAA Board of Control has a scheduled meeting for Thursday, December 10.
- These clarifications and allowances are to be continually reviewed for revisions based on health data.
- KHSAA staff has been directed to finalize the development of guidance for formal practice and contests in consultation with the Governor's Office, Department of Public Health, and the Department of Education to allow for the regular season to begin.

Definitions used in KHSAA Guidance (from the Governor's Healthy at Work Document entitled "Guidance for Youth Sports and Athletic Activities) at <https://go.aws/2XfCZy8>

- "No-touch" means no physical contact is permitted. All individuals must avoid physical contact with others including high fives, huddles, or other close contact occurring before, during, or after activities unless the contact is for safety purposes. During "no-touch" periods, scrimmages and games are not permitted
- "Low touch" means only minimal, necessary contact is permitted
- "Low sharing" means minimal, necessary sharing of youth sports and athletic activity equipment between youth athletes (e.g. limiting shared items to groups of ten (10) or fewer). Shared equipment must be sanitized between uses to the greatest extent practicable
- "Medium sharing" means moderate levels of sharing of youth sports and athletic activity equipment between youth athletes (e.g. limiting shared items to groups of fifty (50) or fewer). Shared equipment must be sanitized between uses to the greatest extent practicable

- “Low Touch, Outdoor Sports”- Baseball, Bass Fishing, Cross Country, Golf, Softball, Tennis, Track and Field, Trap Shooting
- “Low Touch, Indoor Sports”- Archery, Bowling, Esports, Swimming & Diving
- “High Touch, Indoor Sports”- Basketball, Competitive Cheer, Dance, Volleyball
- “High Touch, Outdoor Sports”- Field Hockey, Football, Lacrosse, Soccer

Prior to Arriving to Sport Sessions:

Coaches and staff should self-screen for COVID-19 symptoms before arriving at any session. Student-athletes should also self-screen prior to arrival for any new or worsening symptoms or signs of COVID-19:

- Cough
- Shortness of breath, difficulty breathing
- Chills
- Muscle pain
- Headache
- Sore throat
- Loss of taste or smell
- Diarrhea
- Feverish
- Known close contact with a person who is confirmed to have COVID-19

Any person with positive symptoms reported will not participate and is banned from being on-site at the facility. Parents will be called immediately if student-athlete arrives with symptoms to be taken home.

Temperature Check and On-Site Screen:

The ATC or member of the coaching staff will take each student-athlete’s temperature prior to the start of each session. Any temperature greater than 100.0 degrees F will result in dismissal from participation, and parents will have to get the student-athlete (if they are unable to drive yet). They will not be able to participate for the day, and instruction to the student-athlete and the parent will be that they will not be able to return until the student-athlete is 24 hours free from a fever (100.0 or less) without the aid of fever reducing medications. Athlete’s temperatures will only be recorded if their 2 taken temperatures exceeds 100.0 degrees F. All athletes that produce normal temperature readings will not have their temperature recorded.

Student-athletes will also be asked a series of questions, which will be verbally answered and recorded by the ATC or coaching staff. Any answers that indicate positive symptoms or signs of COVID-19 will immediately be removed from possible participation. Parents/guardians will be notified to come immediately to pick up their student. Student-athletes will not be permitted to

“wait it out” at practice, or sit near any other student-athlete while waiting for their parent/guardian to arrive.

Determination of participation status is the role of the ATC, coach, or Athletic Director. All final say is determined by them.

Hydration:

At this time, student-athletes are expected to bring their own water bottles to all conditioning and activities for their sport, including athletic competitions, as well as practices. There will not be access to water coolers. Sharing of water bottles will be prohibited. When student-athletes check-in with the ATC or coach daily, they will have to show that they have brought their own water bottle. Failure to bring one will result in sending the student-athlete home, as it will not be safe for them to participate without being able to hydrate themselves. Coaches and the Athletic Director will notify parents of these rules via email, and verbal reminders will be given at the start of the first session.

Ice for any injury will be provided solely by the athletic trainer or coach. Student-athletes are not permitted to make their own ice bag for any injury.

There is access to a hose at Champions Trace Field, and will only be used in case of an emergency (heat-related illness). The hose will not be used to fill up all student-athlete’s water bottles. If the hose is to be used, it will only be used by the ATC or coaches.

Sanitation:

Cleaning of any item (equipment, surfaces, etc) will be required by the ATC and coaches during this time. This must be done with EPA approved sanitization products. Personnel must also wash hands frequently, especially after contact with student-athletes. For example, after the ATC tapes an ankle, they must sanitize prior to taping the next student-athlete. Student-athletes are responsible for the sanitization of their personal equipment and cleaning their jerseys and practice clothes after each session.

Hand sanitizing stations have been placed throughout Champions Trace. Access to bathrooms will be limited to one person at a time, with the door being propped open to limit touching the handle. Student-athletes will be required to wash their hands with soap for at least 20 seconds before returning to participation and touching any surfaces or equipment.

Protocol for Positive COVID-19 Case, or Persons Showing Positive Symptoms:

When it is confirmed that a student, coach, or any member of an athletic team has tested positive for COVID-19 with a test from a credible source, the athletic department will follow the following protocol:

IF STUDENT-ATHLETE HAS TESTED POSITIVE FOR COVID-19:

- Contact and communicate directly with the family of the positive case
- Communicate to the entire athletic team (students and parents/guardians) that there has been a positive case within the team. HIPAA protocols will be followed
- Suspend all in-person athletic activities for all athletes that are in the same subgroup with the person who has tested positive for a minimum of 14 days
- Per CDC guidelines, we will strongly encourage all members of that athletic team to be tested for COVID-19
- For patients who are asymptomatic (without symptoms) since the positive test:
 - They must quarantine for 14 days after the positive test, and self-monitor for any symptom development, no exercise
 - The student must produce the following-
 - A negative COVID-19 test result
 - An evaluation by a physician (MD or DO)- including a thorough screen for cardiac or systemic illness, with a note of clearance from the physician
 - Consider ECG, echocardiogram, and hsTroponin
 - Return to sport progression should be individualized and shared between the physician, athletic trainer, athlete, and parents
 - At least 14 days have passed since the last day of the athlete experiencing symptoms, without the assistance of medications, before return to the team and the beginning of the return to sport progression
- For patients with mild to moderate illness, managed at home:
 - They must quarantine for 14 days after the positive test, and self-monitor for any symptom development, no exercise
 - They need to be symptom free for at least 14 days without the assistance of medications before beginning the return to sport progression
 - The student must produce the following:
 - A negative COVID-19 test result
 - An evaluation by a physician (MD or DO)- including a thorough screen for cardiac or systemic illness, with a note of clearance from the physician
 - Consider ECG, echocardiogram, and hsTroponin
 - Further work-up/cardiology consult as indicated
 - Return to sport progression should be individualized and shared between the physician, athletic trainer, athlete, and parents
- For patients with severe symptoms (hospitalized, abnormal cardiac testing, multisystem inflammatory syndrome in children, or prolonged symptoms lasting longer than 14 days:

- They must quarantine for 14 days after the positive test, and self-monitor for any symptom development
- They need to be symptom free for at least 14 days without the assistance of medications before beginning the return to sport progression, no exercise
- The student must produce the following:
 - A negative COVID-19 test result
 - An evaluation by a physician (MD or DO)- carefully consider cardiopulmonary effects of COVID-19 infection and readiness for a return to sport
 - Recommend cardiology consultation as part of the evaluation process
 - Cardiac MRI should be considered
 - Return to sport progression should be individualized and shared between
- In the case of an individual having symptoms and does not get evaluated by a medical professional (doctor) or get a test, the individual is assumed to have COVID-19, and will not be able to return until they have completed the above steps

IF A STUDENT- ATHLETE HAS A DIRECT EXPOSURE TO COVID-19:

- An exposure consists of: a student-athlete was in close contact with someone who has tested positive for COVID-19. Close contact includes within 6 feet for 15 minutes or longer, and the exposure/contact with that person was within 48 hours of the onset of symptoms or a positive test
- Contact and communicate directly with the family
- The student athlete will stay home from practices, call their doctor.
 - If they test negative or the doctor advises no test, then the student-athlete will complete a 14 day quarantine. They are able to return to sport activities after their 14 quarantine if they don't have any symptoms, and can get a doctors note of clearance
 - If they test positive for COVID-19- follow the above guidelines based on case severity

IF A STUDENT-ATHLETE HAS NOT BEEN EXPOSED TO COVID BUT IS HAVING COVID-LIKE SYMPTOMS:

- The student-athlete will stay home and contact their doctor and then contact their coach
- If the student-athlete tests negative or the doctor confirms an alternative diagnosis:
 - The patient is to stay home UNTIL they are 72 hours without a fever and without the use of any fever-reducing medicines, and have improving symptoms. They will need to get a doctor's note of clearance before full return
- If the student-athlete tests positive:
 - Follow the above steps based on case severity

In all situations, HIPAA will be followed in all communications. Identities of positive patients, patients being tested, and patients that have been exposed will remain confidential. Parents of the team will ONLY be informed that there has been a positive case on the team.

Return to Sport Protocol After COVID-19 Infection:

Any return to sport should be gradual and a progressive return to physical exertion. Athletes should only begin the progression after physician clearance, and after meeting all the requirements of being symptom free without the use of medications for 14 days. The athletes will be monitored for the development of cardiopulmonary symptoms (chest pain/tightness, palpitations, shortness of breath, excessive fatigue, lightheadedness, pre-syncope, or syncope). If any symptoms develop, the athlete should stop exertion immediately and be referred back to the evaluating physician for consideration of additional evaluation, including cardiology consultation, and clearance before resuming activity.

- Step 1 (step will last at least 2 days): light activity (walking, jogging, stationary bike) for 15 minutes or less at intensity no greater than 70% of max heart rate. No resistance training
- Step 2 (step will last at least 1 day): add simple movement activities (ex- running drills) for 30 minutes or less at intensity no greater than 80% of max heart rate
- Step 3 (step will last at least 1 day): progress to more complex training for 45 minutes or less at intensity no greater than 80% max heart rate. May add light resistance training at this time
- Step 4 (step will last at least 2 days): normal training activity for 60 minutes or less at intensity no greater than 80% max heart rate
- Step 5: full return to activity

Protocol from KMA Committee on Sports Medicine**