

Public Health Recommendations for Youth Sports

September 20, 2021

Overview

Playing sports has a range of physical, emotional, and interpersonal benefits. Due to increased exhalation that occurs during physical activity, however, some sports can put players, coaches, trainers, and others at increased risk for getting and spreading COVID-19. Close contact sports and indoor sports are particularly risky. Sports activities often require people to be together for extended periods of time while participating in games or practices, socializing before and after games, and when traveling to and from events. Several outbreaks of COVID-19 associated with youth sports were reported in 2020-2021. This document provides public health recommendations for minimizing COVID-19 transmission in youth sports settings.

Sports activities conducted during school hours and/or in the indoor premises of school premises, including those conducted as part of physical education classes, must continue to follow the masking requirements outlined in Executive Order No. 251. Those requirements are not impacted by these recommendations. Additionally, schools should continue to follow guidance in The Road Forward: Health and Safety Guidance for the 2021-2022 School Year for instructional activities, including physical education classes. Additional guidance is available in the NJDOH Public Health Recommendations for Local Health Departments and K-12 Schools.

Prevention Plan

Youth sports organizers/coaches should create an updated written plan that outlines the COVID-19 prevention steps, policies, and procedures that will be followed. Organizers/coaches should educate all staff, athletes, and parents on the plan. Plans should, at minimum, address the following: protocols for when a player/coach/other team member presents with symptoms of COVID-19, protocols for when prevention measures are challenged by players or parents/guardians/visitors, quarantine periods, and coordination with public health authorities on investigation and contact tracing. Youth sports organizers may want to post signage with COVID-19 recommendations at sporting events as a reminder for athletes, staff, and parents.

COVID-19 Prevention Measures

Vaccination

COVID-19 vaccines are safe and highly effective at preventing COVID-19 illness, including severe complications and hospitalization. They are one of the most important tools to ending the COVID-19 pandemic and are free for persons who live, work, or study in New Jersey. Being fully vaccinated¹ provides the highest level of protection against the virus that causes COVID-19 and can minimize disruptions in the sports season resulting from illness and quarantine.

Youth sports organizers should be aware of staff and athlete's vaccination status to assist public health authorities with contact tracing and to minimize unnecessary exclusions if someone on the team tests positive for COVID-19. If all athletes and staff are not fully vaccinated, layering additional preventive measures, such as masking and physical distancing, is even more important to protect those who are not fully vaccinated.

Physical Distancing

Youth sports organizers/coaches should encourage physical distancing of players when not actively engaged in practices and games, particularly when individuals are in an indoor setting where not everyone is fully vaccinated. When possible, cohort coaches, players, volunteers and others to avoid mixing between groups and consider staggering practice schedules to limit contact between players and/or groups. Consider physical distancing around entrances, exits, and other high-traffic areas and limiting shared carpools or van pools for unvaccinated athletes. Coaches should encourage unvaccinated individuals to continue to maintain physical distance (and mask) before and after practices/games as well.

Masking

Wearing masks is an important prevention strategy to help slow the spread of COVID-19 and is particularly important when not everyone is fully vaccinated, when indoors, and when physical distancing cannot be maintained.

¹ People are considered fully vaccinated 2 weeks after their second dose in a 2-dose series, such as the Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine, such as Johnson's Janssen vaccine

Unvaccinated Individuals

- <u>Indoors</u>: Unvaccinated individuals are recommended to wear a mask in indoor settings when not actively engaged in a practice or game. This includes sitting on the bench, standing on the sideline/in a huddle, gathering/setting up sporting equipment, or spectating.
- Outdoors: Masks are generally not necessary but are encouraged when there is high level of <u>COVID-19 transmission</u> and when close contact with other unvaccinated individuals cannot be avoided.

Fully Vaccinated Individuals

- <u>Indoors:</u> It is recommended that fully vaccinated individuals wear a mask in public indoor settings in areas of high <u>COVID-19 transmission</u> or where there is increased risk. This includes crowded settings, close contact with others who may not be vaccinated or whose vaccine status is unknown, and if the individual or household member is immunocompromised or at increased risk for severe disease.
- Outdoors: Masking is not generally recommended for fully vaccinated individuals. Fully
 vaccinated people might choose to wear a mask in crowded outdoor settings if they or
 someone in their household is immunocompromised, at increased risk of severe
 disease, or not fully vaccinated.

Symptom screening

Athletes, coaches, staff, and others should be encouraged to stay home if ill with COVID-19 symptoms (or if they are unvaccinated and live with someone who has COVID-19). Screening for fever and symptoms via temperature check and/or questionnaire should be done at the beginning of each session. Anyone with a fever or any symptoms of COVID-19 should not participate in activities and should separate from others and either go home or seek medical care if needed. If any individual develops symptoms of COVID-19 during an activity, they should promptly inform organizers and must leave the facility/field. A plan for safely transporting ill persons home or for medical care should be in place. Common symptoms of COVID-19 include fever, cough, and tiredness. Other symptoms include loss of taste or smell, aches and pains, headache, sore throat, nasal congestion, red eyes, nausea, vomiting, or diarrhea.

Contact tracing

Coaches should know how to contact their <u>local health department</u> to notify them of persons who test positive and to assist with identifying others who may have been exposed to the ill team member. A team representative should be designated who will be responsible for contacting and coordinating with the local health departments should a COVID-19-positive individual be identified or in the event contact tracing is needed. This representative should be prepared to share the team roster containing contact information of parents/guardians to aid in public health investigation.

Hand Hygiene/Personal Hygiene

Youth sport organizers/coaches should encourage regular handwashing (soap and water or hand sanitizer with at least 60% alcohol), upon arrival and departure from the sports event, at minimum. Restrict spitting, handshakes, high-fives, team huddles, and other close-contact activities. Advise athletes to bring their own water and drinks and limit the use of team water coolers.

Cleaning and Disinfection

Encourage players to use their own equipment to the extent possible. Sanitize shared/team equipment (balls, bats, etc.) and ensure sufficient disinfecting wipes or similar products are available. Ensure routine and frequent cleaning and disinfecting with an EPA-registered disinfectant, particularly of high-touch surfaces in accordance with CDC recommendations.

Indoor Air Flow

Youth sports organizers should work with facility management staff to keep doors and windows open where possible and utilize fans to improve ventilation. Facility managers should refer to NJDOH guidance on improving ventilation and indoor air quality.

Testing & Exclusion

Testing is an important tool to identify persons with COVID-19, even if they have no symptoms, which can prevent further transmission and outbreaks. Where feasible, prevention plans should include options for testing². Persons who test positive for COVID-19 should not participate in youth sports activities until they meet the criteria for discontinuing isolation or quarantine.

Persons who are ill: Anyone experiencing fever or other symptoms of COVID-19 should be tested for COVID-19 and be referred to medical care if needed. Persons who test positive (or who don't get tested) should not return to sports until at least 10 days have passed since symptom onset and at least 24 hours have passed since resolution of fever without the use of fever-reducing medications and other symptoms have improved.

Persons who had close contact with someone who has COVID-19: Persons who had close contact (within 6 feet for >15 minutes in a 24-hour period) should be tested for COVID-19.

- Unvaccinated individuals should be tested as soon as possible and if negative, again 5-7 days after the last exposure. When <u>COVID-19 activity</u> is "High," persons who test negative (or if they weren't tested) should stay home and quarantine for 14 days. If COVID-19 activity is not "High," they should quarantine for 10 days if they aren't tested or 7 days if they test negative between 5-7 days after exposure³. If they test positive for COVID-19, they should follow timeframes for "persons who are ill."
- <u>Fully vaccinated individuals</u> should be tested 3-5 days after exposure, but as long as they remain asymptomatic, can continue participation in youth sports.

Routine screening testing: Consider regular screening testing for unvaccinated team members where feasible to identify unknown cases so that measures can be taken to prevent further transmission. Fully vaccinated individuals don't need to participate in routine screening programs. Refer to NJDOH Recommendations for Screening Testing in Schools for additional information and screening testing strategies. Youth sports organizers should consult with their local health department if developing a screening testing program. If screening testing is implemented, all test results must be reported to public health authorities and the confidentiality of testing results must be ensured. When developing a screening testing program, the COVID-19 activity level and the risk level of the sporting activity should be considered.

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² Persons who recently recovered from COVID-19 (in the past 3 months) aren't recommended to be re-tested because they may continue to test positive but no longer be contagious.

³ Refer to NJDOH Minimum Quarantine Timeframes for additional information.

Risk Level of Sport Activity	Examples
High risk - Sports that involve close, sustained contact between participants.	Rugby, boxing, judo, karate, taekwondo, wrestling, pair figure skating, football, group dance, group cheer.
Medium Risk - Sports that involve some close, sustained contact, but with protective equipment in place between participants OR intermittent close contact OR group sports OR sports that use equipment that cannot be cleaned between participants.	Lacrosse, hockey, multi-person rowing, multi-person kayaking, multi-person canoeing, water polo, swimming relays, fencing, cycling in a group, running in a close group, group sailing, volleyball, soccer, basketball, baseball/softball, short track.
Low Risk - Sports that can be done individually, do not involve person- toperson contact, and do not routinely entail individuals interacting within six feet of one another.	Archery, badminton, shooting/clay target, individual running events, individual cycling events, individual swimming, individual rowing, individual diving, equestrian jumping or dressage, golf, individual sailing, weightlifting, skiing, snowboarding, tennis, individual dance, pole vault, high jump, long jump, marathon, triathlon, cross country, track and field.

Travel

Sports teams should follow <u>travel recommendations</u> set by the Centers for Disease Control and Prevention (CDC), including those related to testing, quarantine, vaccination, and masking.

Resources

- COVID-19 Activity Level Reports: https://www.state.nj.us/health/cd/statistics/covid/
- NJDOH Recommendations for Screening Testing in Schools: https://www.nj.gov/health/cd/documents/topics/NCOV/K-12 screening testing guidelines.pdf
- NJDOH Minimum Quarantine Timeframes: https://www.state.nj.us/health/cd/documents/topics/NCOV/COVID_updated_quarantine_timef rames.pdf
- NJDOH guidance on improving ventilation and indoor air quality: https://www.state.nj.us/health/ceohs/
- COVID-19 Testing sites: https://covid19.nj.gov/pages/testing
- COVID-19 Vaccination sites: https://covid19.nj.gov/pages/vaccine
- NJDOH COVID-19 Education Materials (General):
 https://www.state.nj.us/health/cd/topics/covid2019 community.shtml
- NJDOH COVID-19 Vaccine Education Materials: https://www.state.nj.us/health/cd/topics/covid2019 vaccination.shtml