

Athletics Health & Safety Plan

The AOP Plan for Athletics is firmly grounded in the principles of health and safety. During this pandemic, our foremost priority has been the safety of students, faculty and staff. In our resumption of athletics, we will focus on providing our student-athletes and coaches a safe opportunity and healthy environment for athletic competition, while following requirements for face coverings, increasing cleaning and sanitation, and promoting healthy behaviors.

This document outlines the key components of our plan for Archdiocesan High Schools to resume interscholastic competition in the fall. The plans fully follow school operational guidelines from the Centers for Disease Control (CDC), the Pennsylvania Department of Health and the Pennsylvania Department of Education (PDE). The PIAA has implemented sport-specific Return to Competition Guidelines in the sports of cross country, girls' tennis, field hockey, girls' volleyball, soccer and football, which draw on the expertise of the aforementioned groups, as well as the National Federation of High School Coaches (NFHS) and the PIAA Sports Medicine Advisory Committee.

All high schools have prepared individual health and safety plans and individual athletic plans which were published on each school's website. These plans will be updated to reflect any changing guidance from the state, county, <u>city</u>, or the respective leagues in which the school is located and/or participates. The data from COVID in the five-county Archdiocese is a fluid phenomenon, and we will continue to monitor the metrics closely and carefully. We hope that this document will help serve as a valuable resource.

SISTER MAUREEN L. McDERMOTT	STEPHEN HAUG
I.H.M., PhD	EXECUTIVE DIRECTOR OF ATHLETICS
SUPERINTENDENT FOR SECONDARY SCHOOLS	ARCHDIOCESE OF PHILADELPHIA
ARCHDIOCESE OF PHILADELPHIA	

ATHLETIC PARTICIPATION

The ability for schools to safely participate in athletic practice and games depends on the incidence of COVID-19 within the school and within the county the school is in. If there is a high incidence of COVID-19, the school may be required to cease in person instruction and have only virtual instruction. In these instances, athletic practice and competition will be temporarily halted until instruction resumes.

Participation may also be restricted for any individual required to quarantine as a result of close contact with someone with COVID-19. Close contact occurs when you are within six feet of the infected person for a period of 15 minutes or more. You can reduce your risk substantially by practicing social distancing at all times and wearing a mask.

Participation criteria for individual students requires:

- Selection of the hybrid model of instruction. Students who are attending school virtually only may not participate in any in person activities or athletics;
- Completion of the COVID-19 waiver that was included in the school handbook, and completion of the liability waiver required for activities (See Appendix); and
- Successful completion of regular screening questionnaires and temperature checks on a regular basis. If you are feeling sick or if you have been tested for COVID-19 and are awaiting the results, you should not attend school or participate in any activities.

STAY SAFE ON AND OFF THE FIELD



Stay home if you are sick.



Bring your own equipment and gear (if possible)



Cover your coughs and sneezes with a tissue or your elbow.



Wash your hands or use sanitizer before and after events and sharing equipment.



Tell a coach or staff member if you don't feel well.





cdc.gov/coronavirus

SPECTATOR POLICY

<u>Updated occupancy limits for indoor and outdoor events</u> have been established by the PA Department of Health in accordance with the <u>Process to Reopen Pennsylvania Guidance</u>, with the goal of minimizing public health risks. Maximum occupancy includes all individuals present at the event or gathering, whether they are student-athletes, coaches, staff, or others.

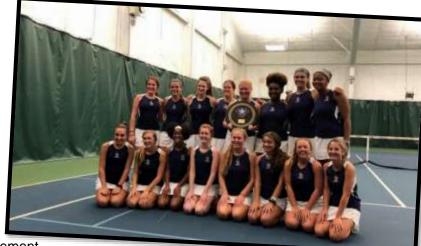
Each school will determine the number of spectators permitted for each sport depending on the venue and the ability for the schools to meet requirements and maintain social distancing.

Spectators should not attend athletic events if they are feeling sick, if they have recently traveled to areas on the PA Department of Health COVID-19 Quarantlne Listing of states, if they are currently quarantined because of COVID-10 or because of close contact with someone with COVID-19. Spectators must wear masks/face coverings, and social distancing is necessary regardless of if your athletic facility has bleachers. Failure to comply with this important health guideline could result in loss of ticket privilege in the future, as well as being asked to leave the facility. Physical distancing is necessary upon entering, moving throughout, and exiting the athletic facility. Attendees will also be asked to abide by a strict physical distance policy of six feet between groups. If the event is indoors, spectators will be required to pass temperature screenings, and schools should ensure that the gym has adequate ventilation.

Schools should adjust the physical environment as needed (team benches, scorer's table, etc.) to remind individuals to remain six feet apart, utilizing cones and physical markers as necessary, and spectators should not enter the field of play or bench areas. Clearly marked capacity guidelines for restroom facilities and arrangements for extra cleaning are essential. If a school is

renting an athletic facility, the rental agreement

be reviewed by the Archdiocese in advance.



REMINDERS & EXPECTATIONS TO CONTAIN THE SPREAD OF COVID-19

- All coaches, school personnel and student-athletes are expected to remain vigilant in monitoring their health
- Coaches and student-athletes must notify the athletic director if they have recently traveled to areas on the PA Department of Health COVID-19 Quarantlne Listing of states
- All coaches, student-athletes, and officials/event workers must wear a <u>mask/facial covering</u> to participate in athletic competitions/practices. Coaches and staff must always be wearing masks indoors and outdoors
- Participants are required to practice physical distancing when not on the field of play
- o Bench areas will be set up in a manner that allows for social distancing
- Student athletes will be instructed not to have any unnecessary contact such as high fives, handshakes and fist bumps
- School transportation of student athletes (buses/vans) will employ social distancing at all times, and students may not carpool with one another to practices and games

BEST PRACTICES FOR MITIGATING RISK

- Minimize equipment sharing, and clean and disinfect shared equipment (weight room machines, batting helmets, etc.) as frequently and thoroughly as possible
- Coaches and student-athletes who may be at higher risk for severe illness or have health conditions such as diabetes, asthma, etc. should assess their level of risk prior to the season
- Decrease the number of players who travel to road contests, limit the amount of travel, and play fewer non-league games if possible
- Stay home when not feeling well, or have recently had close contact with a person with COVID-19
- Practice and promote diligent handwashing. Athletic areas will have extra cleaning and hand sanitizer
- Ensure teams have an adequate supply of equipment to minimize sharing, and clean and disinfect between use
- Student-athletes should never share water bottles, athletic towels, clothing or pinnies
- Do not spit, or touch your mask/facial covering
- No food at athletic contests

BEST PRACTICES FOR MITIGATING RISK (continued)

- Use of home locker rooms should include limited capacity and visible signage, while visiting locker rooms will not be available for teams.
- Encourage students to wait in their cars until practice/warm-ups are set to begin instead of congregating on the playing field
- Provide physical guides such as tape on floors, cones on playing fields and ample signage to remind coaches, student-athletes and staff of physical distancing and healthy habits
- Schools are encouraged to adjust their playing schedules when possible in an effort to reduce travel,
 limit large gatherings, and mitigate risk.
- If athletic facilities are shared, schools should increase the time between practices/games to allow for ample time for dismissals and cleaning/disinfecting

TRANSPORTATION

Temporal screening of coaches and student-athletes will be employed for all contests, as well as the completion of a Daily Health Assessment questionnaire for those students who were not in the building for in-person instruction, as well as for all weekend contests. It is recommended that schools reduce the number of students traveling for road contests. Student-athletes should only ride to practices or games with persons living in the same household, and students should not carpool with teammates to practices or games. All individuals should use hand sanitizer upon boarding a bus/van, adhere social distancing protocols. coaches/athletic directors should post signage in buses and vans prior to departure. Masks/face coverings must be worn by all individuals at the time they board the bus/van and keep them on for the entirety of the trip. The CDC recommends following these general principles for using all types of transportation, and school must follow

the capacity and social distancing rules of the bus company.



MEDIA GUIDELINES

Media members from accredited news outlets (newspapers, television stations, websites, etc.) must provide in writing their intention to cover a home sporting event, preferably by Noon on the day of the contest. Individuals should display their media credentials so they are visible while wearing masks/face coverings at all times. Physical distancing must be observed by photographers throughout the athletic contest, as well as



by reporters conducting postgame interviews with coaches and student-athletes.

GAME DAY CHECKLIST

- ✓ Temporal scans and Daily Health Assessment questionnaires must be completed for all students who were not in the school building for classroom instruction that day
- ✓ Temporal scans for coaches, officials, and game day staff (clock operator, public address announcer, etc.) upon arrival
- ✓ Ample signage is displayed in the bleachers and around the playing facility emphasizing physical distancing, proper hygiene and face coverings
- ✓ Hand sanitizer should be readily available at entrance/exit areas
- ✓ Bench areas and scorer's table should be spread out to reflect proper social distancing.
- ✓ Signage in coaching boxes (football), hand sanitizer available, and the areas should be thoroughly cleaned after the game
- ✓ Have an area for visiting teams to gather pregame or halftime if necessary. Visiting locker rooms are not available
- ✓ Send any reminders to the visiting team Athletic Director the night before the contest (bus parking, water availability, bench seating accommodations, etc.), as well as to home team parents/families
- ✓ Enjoy the game!

COLLABORATION IS KEY

The partnership of all the members of a school community – parents, administrators, coaches and student-athletes is vital in order to help school athletic health and safety plans become successful. In developing athletic plans, many schools instituted student pledges to follow the rules to help keep each other safe. A necessary element for everyone is the need to stay home if you have symptoms or feel sick.

Under new <u>Testing Guidance</u>, anyone who has been in close contact (within 6 feet for about 15 minutes or more) with someone confirmed positive for COVID-19 needs to be tested, even if you were wearing a mask. Individuals should self-isolate pending test results. While resuming its call for increased testing, the CDC cautions "a single negative test does not mean you will remain negative at any time point after that test. Even if you have a negative test, you should still self-isolate for 14 days."

Individuals with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus.

People with these symptoms may have COVID-19:

Fever or chills – CDC norm is a temperature of 100.4 or more

Cough Shortness of breath or difficulty breathing Muscle or body aches

Fatigue New loss of taste or smell Congestion or runny nose

Headache Sore throat Diarrhea

Nausea or vomiting

COVID-19 DO'S & DON'TS

- ☑ Wash hands frequently with soap and water for at least 20 seconds
- ☑ Cover your nose and mouth with a tissue while sneezing and coughing
- ☑ See a doctor if you do not feel well
- Avoid participating in large gatherings
- ☑ Use hand sanitizer before eating
- Do wash your hands before you wear mask and only touch the earloops

- Don't touch your face after touching objects in public contact
- ☑ Do not spit in public
- Do not have close contact with anyone if experiencing a cough or fever
- ☑ Do not sneeze without covering your mouth
- Don't put your shoes on surfaces you may touch
- Do not share utensils or drinking glasses with others, including family members

EXCLUSION & RETURN TO PRACTICE REQUIREMENTS

Exclude Under These Scenarios

Current COVID-19 Symptoms

• <u>One</u> of the following symptoms: cough, shortness of breath, difficulty breathing, or lack of smell or taste (without congestion).

OR

• Two of the following symptoms: fever/elevated temperature, sore throat, chills, muscle pain, fatigue, headache, congestion/runny nose, nausea, vomiting, diarrhea

Return To School Under These Conditions

Individual should be tested for COVID-19; individuals awaiting test results should be excluded from school.

- If test result is negative, return to school following readmission criteria illustrated in PA Code, § 27.73. Readmission of excluded children, and staff having contact with children. If no alternative diagnosis is known, return to school 24 hours after symptoms are improved.
- If test result is positive, follow return to school guidance for Positive COVID-19 PCR Test with symptoms.

If individual is not tested, exclude for:

- 24 hours with no fever without using fever-reducing medicines and
- improvement in symptoms and
- 10 days since symptoms first appeared

If individual is using medication to treat or suppress a fever, he/she should be excluded until medication is no longer needed.

Exclude Under These Scenarios

Return To School Under These Conditions

Positive COVID-19 PCR Test	With Symptoms	Without Symptoms
	24 hours with no fever	 10 days after the PCR test
	without using fever-reducing	was collected
	medicines and	
	 improvement in symptoms 	If symptoms develop during 10
	and	days, follow return to school
	10 days since symptoms	guidance for Positive COVID-19
	first appeared	PCR Test with symptoms.
Close Contact of COVID-19	With Symptoms	Without Symptoms
Positive Individual	Individual should be tested for	14 days after the date of
Individuals within 6 feet distance	COVID-19	last exposure to the person
for ≥15 minutes with the COVID-		with COVID-19
19 positive individual	If test result is negative,	
OR	return to school 14 days	If symptoms develop during 14
Household members of COVID-	after last exposure to the	days, follow return to school
19 positive individual	person with COVID-19 and	guidance for Close Contact with
	symptoms have resolved.	symptoms.
	If test result is positive,	
	follow return to school	
	guidance for Positive	
	COVID-19 PCR Test with	
	symptoms.	
	Individuals awaiting test results	
	should be excluded from school	
	until results are received.	

If individual is not tested, return to school 14 days after last exposure to the person with COVID-19 and

symptoms have resolved.

Exclude Under These Scenarios

Return To School Under These Conditions

Travel History

Travel to areas with travel
restrictions, as identified by the
PA Department of Health or the
Centers for Disease Control and
Prevention (CDC)

With Symptoms

Individual should be tested for COVID-19

- If test result is negative, return to school 14 days after last exposure to the person with COVID-19 and symptoms have resolved
- If test result is positive, follow return to school Positive guidance for COVID-19 PCR Test with symptoms. Individuals awaiting test results should be excluded from school until results are received. If individual is not tested, return to school 14 days after last exposure to the person with COVID-19 and symptoms have resolved

Without Symptoms

 14 days since return to PA from travel

If symptoms develop during 14 days, follow return to school guidance for Close Contact with Symptoms.

INSTRUCTIONAL VIDEOS

How To Properly Wear A Face Covering
Tips For Effectively Washing Your Hands
Five Alternatives To The Handshake

APPENDIX

AOP COVID-19 Incident Report
Daily Health Assessment Questions
Student Pledge
Liability Waiver for Activities



REFERENCES/RESOURCES

PA Department of Health Face Coverings Frequently Asked Questions

Commonwealth of Pennsylvania Sports Guidance

PA Department of Health COVID Information for Travelers

PA Department of Health COVID Frequently Asked Questions

PA Department of Education Athletics Health & Safety Planning Guide

City of Philadelphia Reopening Guidance

Process To Reopen Pennsylvania

PIAA Return To Competition Guidelines

PA Department of Health School Sports Guidance

CDC Considerations for Youth Sports

Guidelines on Safe Gathering Limits

Protecting Yourself When Using Transportation (CDC)

COVID-19 Information For Travelers

Chester County Department of Health Public & Private School Guidance

Montgomery County Office of Public Health Sports Guidance

CDC Checklist for Coaches

^{**}All images included in this document were taken prior to the Pandemic

COVID-19 INCIDENT REPORT

Name of School:			
Name of Individual Completing Report:			
Name of Individual (s)		Grade if student:	
Status of Individual: Student	Staff		Teacher
Date Diagnosed:			
Specific Details of the Report:			
Report Made to Local Department of Health:		Date:	
Guidance Received from the DOH:			
Actions Taken by the School:			
Number of Individuals Quarantined: Students:	Staff:		Teacher(s)

DAILY HEALTH ASSESSMENT

Name: Date: Sport: Temperature (Y/N):	
Do you have a new onset of cou Yes No	gh or shortness of breath?
Have you had a fever or felt chil Yes No	ls?
Do you have a headache? Yes No	
Have you experienced loss of ta Yes No	ste or smell?
Have you had a known exposure Yes No	e to a CoVID-19 positive individual?
Have you had a sore throat? Yes No	
Have you had any general musc Yes No	ele soreness or fatigue?
Have you recently traveled outs Yes No	ide the surrounding area?

STUDENT PLEDGE

All members of XX High School Athletic teams have an important role to play in keeping our fellow students and the XX High School community safe by doing our part to stop the spread of COVID-19. As a member of XX High School Athletic team, I know that I must take steps to stay well, to protect others and promote a safe return to campus for students and faculty. Because of this, I pledge to take responsibility for my own health and help stop the spread of the COVID-19.

XX High School's highest priority is the safety of its students, faculty, staff, and visitors. I know that by engaging in campus activities, including attending classes, pursuing my education, eating in dining areas, attending activities, participating in sports and recreation, I may be exposed to COVID-19 and other infections. I also understand that despite all reasonable efforts by the high school, I can still contract COVID-19 and other infections. In order to reduce my risk, I agree to be an active participant in maintaining my own health, wellbeing and safety, as well as the safety of others, by following all the guidelines and expectations outlined by XX High School.

As more information is gathered and known, I understand that XX High School may modify these guidelines and expectations. It is my responsibility to make every effort to keep myself apprised of these changes to protect myself and my school community.

It is my pledge to protect myself, my peers, and the XX High School community by doing the following:

- Agree to testing for COVID-19 and potential subsequent self-quarantining or self-monitoring if I am identified as a contact of anyone who has been determined to be positive for COVID-19.
- If I test positive for COVID-19, I agree to remain off campus until:
 - My symptoms have resolved, and
 - o It has been at least ten days since the start of my symptoms, and
 - o I have a negative COVID-19 test result.
- Complete the student health questionnaire daily
- Monitor for the following:
- A fever of 100.4 or higher
 - o Respiratory symptoms, such as dry cough or shortness of breath
 - Sore throat
 - Headache
 - Body aches
 - Chills
 - o Loss of taste or smell
- If I develop the above symptoms, I will contact my athletic trainer, coach, school nurse and follow instructions which may include being tested for COVID- 19 and self-quarantining while the test results are pending, and/or being evaluated by the athletic trainer or school nurse.
- Stay at home if I am feeling sick.
- Participate fully and honestly with school staff for contact tracing to determine whom I might have potentially exposed to COVID-19.

- Wear a mask or the appropriate PPE as required.
- Practice physical distancing as much as possible.
- Frequently wash and/or sanitize my hands.
- Keep my personal space, shared common space, and my belongings clean.

I understand COVID-19 is a highly contagious virus and it is possible to develop and contract the COVID-19 disease, even if I follow all of the safety precautions above and those recommended by the CDC, local health department, and others. I understand that although the high school is following the coronavirus guidelines issued by the CDC and other experts to reduce the spread of infection, I can never be completely shielded from all risk of illness caused by COVID-19 or other infections.

I have read, understand, and agree to comply with my pledge above. I also acknowledge that these expectations and pledge are a condition of my participation in XX High School Athletics and that any failure to comply above may lead to immediate removal of athletic participation privileges and/or the inability to use Athletic facilities.

I take my pledge seriously and will do my p	art to protect XX High School.
Signature of Student-Athlete	Date
Signature of Parent/Guardian	Date

Participant Release, Waiver of Liability, and Indemnity Agreement 1

I,, (the "Participant") have voluntarily applied to
participate in the occurring on or during the period (the "Activity") which is sponsored and/or supervised by or taking place at (the "Location") and I agree as follows:
Acknowledgments. (1) I am participating in the Activity of my own free will; (2) I understand the nature of the Activity; and (3) I am qualified, in good health, and in proper physical condition to participate in the Activity.
Assumption of Risk. (1) I am aware that the Activity may present certain risks of injury (including illness, or death or loss of or damage to my property) and I agree to assume those risks and any other unknown risks; and (2) I acknowledge the Location, the Archbishop of Philadelphia, and the Archdiocese of Philadelphia and any lessor of the premises have no obligation to provide me with any insurance or other financial assistance for the costs of any injury, illness, or death or loss of or damage to property resulting, directly or indirectly, from the Activity and I expressly waive any claim for such compensation.
Medical Treatment. In the event of a medical emergency, I consent to receive necessary medical treatment until the following contact can be notified and I agree to be responsible for the payment of such treatment: Name:
Waiver and Release. I, on behalf of myself, my heirs, next of kin, spouse, and legal representatives, hereby release, waive, discharge from, and agree not to sue the Location, the Archbishop of Philadelphia, and the Archdiocese of Philadelphia and any lessor of the premises, along with their respective affiliates, successors, and assigns, and their respective members, directors, officers, employees, volunteers, agents, contractors, and representatives (collectively "Released Parties") for any and all claims, costs, liability, or damages of any injury, illness, death or loss of property resulting, directly or indirectly, from the Activity except if caused by the gross negligence or intentional misconduct of any of the Released Parties which shall not be imputed to the other Released Parties.
Indemnity. If, despite the Waiver and Release above, I or anyone on my behalf makes a claim against any of the Released Parties, I will indemnify, save, and hold harmless each of the Released Parties from any litigation expenses, attorney fees, loss, liability, damage, judgment or cost which may be incurred as the result of such claim.
Promotion. I consent to any photographic images or video or audio recordings taken during the Activity and grant and convey all rights, title, and interest of such images and recordings to the Location.
Severability. This Participant Release, Waiver of Liability, and Indemnity Agreement is intended to be as broad and inclusive as is permitted by applicable law and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
I ACKNOWLEDGE THAT I AM AGE 18 OR OLDER, I HAVE READ THIS PARTICIPANT RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT AND FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS, INCLUDING MY RIGHT TO SUE. I ACKNOWLEDGE THAT I AM SIGNING THIS AGREEMENT FREELY AND VOLUNTARILY, AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.
PARTICIPANT'S SIGNATURE: DATE:
ADDRESS:

MINOR RELEASE: (must be completed by Parent/Guardian for a Participant under the age of 18)

I, THE PARENT OR GUARDIAN OF THE PARTICIPANT, HAVE READ THIS PARTICIPANT RELEASE, WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT AND FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS I AND/OR THE MINOR WOULD OTHERWISE HAVE, INCLUDING THE RIGHT TO SUE. I ACKNOWLEDGE THAT I AM SIGNING THIS AGREEMENT FREELY AND VOLUNTARILY, AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

PRINTED NAME OF PARENT/GUARDIAN:		
PARENT/GUARDIAN SIGNATURE:	DATE:	