

For Indoor Sports

Ref: E.O. 20-81

Required to wear a mask

- Spectators (Indoor)
- Scorekeepers
- Stationary Officials (e.g., volleyball, figure skating)
- Coaches on Sideline (practice & competition)

Recommended (but not required) to wear a mask

- Athletes during competition
- Athletes during practice
- Athletes while on sideline/bench
- Referees/Officials who actively move on playing surface (e.g., hockey, basketball)
- Coaches actively running/skating in practice settings

E.O. 20-81 Link:

https://mn.gov/governor/assets/EO%2020-81%20Final_tcm1055-441107.pdf

Recreational Entertainment & Meetings Guidance

http://dli.mn.gov/sites/default/files/pdf/COVID_19_preparedness_plan_requirements_guidelines_recreational_entertainment.pdf

Recreational Entertainment Venues, whether indoors or outdoors, **must reduce occupant capacity to no greater than 25%, not to exceed 250 patrons**, and to that which is necessary to allow for the required social distancing.

- Venues must defer to the occupant capacity of the venue, as established by applicable state or local authorities.
- If the occupant capacity for a venue is based upon the entire venue, then the venue must reduce occupant capacity for the entire venue, not to exceed 250 patrons

Limit the number of patrons allowed within the venue at one time, and do not exceed the required percentage of occupant capacity or maximum number of patrons allowed where required.

Ensure proper social distancing is maintained at all times between each household group or “pod”

Ensure patrons respond to the screening-survey questions upon arrival and check-in, and verify that they have read the screening-survey and can respond “no” to all questions.

If a venue does not maintain an occupant capacity (e.g. outdoor field), the venue must establish an occupant capacity by doing the following:

- The calculation of the occupant capacity is only to be used if the venue does not maintain an occupant capacity, as established by applicable state or local authorities. Venues must always ensure that an occupant capacity is not required to be established by applicable state or local authorities. If an occupant capacity has not been established, and is not required to be established, the venue may proceed in accordance with the following.
- First, determine the total area of space within the venue (in square feet) that is accessible to, and may be occupied by, patrons during the venue.
- Second, ensure areas that are not accessible to patrons, such as worker only areas, restricted areas (e.g. performers only, athlete locker-rooms), kitchens and food-prep areas, janitorial areas, facilities areas, stairways, are not included when determining the area of space.
- Third, subsequently divide the area by 113, This is the occupant capacity for the venue.
(i.e. 113 square-feet per person; See US Fire Administration’s “Understanding the Impact of Social Distancing on Occupancy” (https://www.usfa.fema.gov/coronavirus/planning_response/occupancy_social_distancing.html)).
- Finally, the venue must reduce the calculated occupant capacity to 25%

- Decline to allow admittance to any patron if there is any suspicion that they are sick or symptomatic and advise them to leave the business. If a patron is a member of a household group at the venue, the entire household group must also be declined admittance.
- Post signage at the venue entrances outlining established protocols.
- Post instructions for patrons throughout the venue at entrances, and inform patrons:
 - Not to enter if they are experiencing symptoms;
 - About the venue's attendance limits;
 - They are required to adhere to hygiene and social distancing instructions, signage and markings; and
 - The venue's requirements involving the use of face-coverings.

- Do pods affect axillary spaces like batting cages or walking tracks (or visa versa)
 - Pods count towards the total capacity
 - The intent of using pods is to prevent intermingling of groups (limits potential exposures)
- Would people using axillary spaces affect max capacity?
 - Anyone within dome would count toward 25% or 250 limit
- Cleaning. Can you clean turf?
 - All shared equipment needs to be cleaned between users
 - Locker rooms should be cleaned between each user
 - Common spaces should be disinfected at least 2x per day

ATTENTION!

**BY ENTERING THIS FACILITY,
YOU DECLARE THAT YOU DO NOT
HAVE ANY OF THE FOLLOWING
SYMPTOMS:**

- FEVER
- COLD
- FATIGUE
- HEADACHE
- SORE THROAT
- RUNNY NOSE
- COUGH
- SHORTNESS OF BREATH
- BODY ACHES
- LOSS OF TASTE AND
SMELL
- NAUSEA
- DIARRHEA

**IF YOU HAVE ONE OR MORE
OF THESE SYMPTOMS, DO
NOT ENTER THE FACILITY.**

1. Exposure - you had previously mentioned the 15 minute rule within 6 feet to be considered exposure. Does this change if there is physical contact (contact basketball drills) with someone who tested positive?

Contact during sports isn't necessarily clear-cut. With a contact sport like basketball, and given that the athletes are breathing heavily, one could argue that just one bump, or face to face play could cause an exposure. So I would be conservative when assessing contact, and if there is a COVID-19 case who participated in contact drills, and the drills last longer than 15 minutes, I'd consider all who had physical contact with that person to be exposed.

2. If a person has exposure to someone who tested positive, within 48 hours of onset of symptoms, what is the protocol to get them back involved in club activities? Is it a certain number of days without symptoms? Negative test after a certain number of days? Do they just need to monitor for symptoms?

So I understand this scenario, are you wondering about a person who had contact with a case, but the case was asymptomatic at the time of contact? Or the person had contact with a case and you're wondering how long that person needs to be quarantined? For the latter scenario, if the person had close contact (as defined) with the case while the case was infectious, the person needs to be quarantined for 14 days from last contact with the case. Even if that person gets tested during quarantine and they are negative, they still need to wait the 14 days – that's because some people who are exposed may not get symptoms until 10-13 days after they had contact with the case. While the person is in quarantine, they should watch for symptoms, and limit contact with others in their household.

3. If a player tests positive, what is the procedure of their return to activities? I had read something recent saying that a negative test isn't needed, and it might be 5 days after symptoms subside?

A person who tests positive needs to stay home, isolated, for 10 days (and as long as they don't have a fever, or any worsening symptoms, they can go back to their usual routine). No negative test is required for amateur athletes. However, the player should check with their doctor to see if they can return to play.

Athlete discovers they were **exposed*** to a lab-confirmed COVID-19 Case (**within 48 hours of that case becoming symptomatic**)



Notify your coach that you were exposed and do not go to practice/game. Inform them of anyone else on team who may have also been exposed.



Athlete (and anyone else who meet exposure criteria must **self-isolate for 14 days** from last contact with lab-confirmed case



Athlete must stay in isolation for 14 days. **A negative test during isolation does not mean they can get out of isolation.**

*Exposure defined as 15 cumulative minutes of contact of > 6ft

Athlete has
COVID-19
Symptoms*

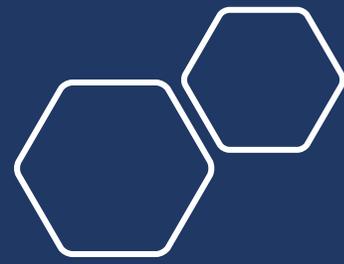
Do not go to practice and/or game. Inform your coach of your symptoms and when you started having them.

If symptoms persist or worsen for 24 hours. Get tested at clinic and self-isolate until results are returned. If negative, return to normal activities. If positive, self-isolate.

Persons with COVID-19 can leave isolation and return to normal activities 10 days after symptom onset, as long as they have not had a fever in the past 24 hrs and symptoms are resolving. Athletes may want to contact their health care provider before they return to sports.

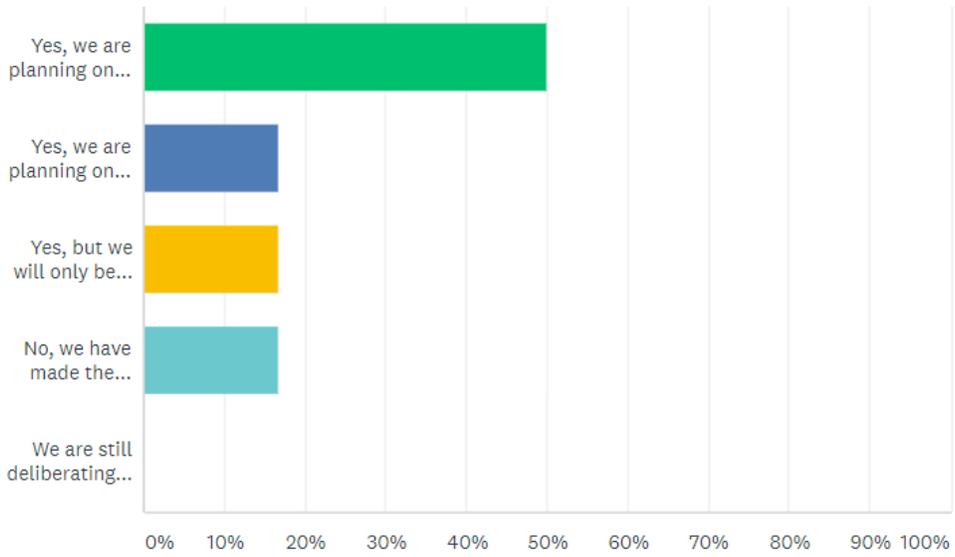
***COVID-19 Symptoms:**

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea



Have you made a decision about your upcoming season?

Answered: 30 Skipped: 0



ANSWER CHOICES	RESPONSES
Yes, we are planning on continuing with our season as planned	50.00% 15
Yes, we are planning on having a season but with modifications (e.g., less games, less practices)	16.67% 5
Yes, but we will only be offering flag football	16.67% 5
No, we have made the decision to cancel and/or postpone our season	16.67% 5
We are still deliberating and/or waiting to vote on our upcoming season	0.00% 0
TOTAL	30

- Going back to school already appears riskier than sport (UNC, Notre Dame outbreaks)
 - Dorms and bars seem to be driving college outbreaks; social gatherings
 - It's possible the Fall respiratory illness season makes COVID worse
 - Potential for exposure at school will affect youth sports
- Sports Organizations are going to need to be prepared for the possibility that Community Education facilities may be off limits to outside renters
 - If an outbreak at a school occurs, facilities will most likely be off-limits
 - If a school is in remote learning, facilities may be off-limits
 - Some schools may not want to introduce any more risk by allowing outside renters
- Parents of athletes appear to be more fluent in COVID-related guidelines and protocols
 - For non-athlete parents' school is their first introduction to institutional protocols and procedures

- Do you have a direct line to officials to distribute your Covid plans and policies? Is this done by local affiliates?
- Have you communicated information to officials on what to do if they get Covid or are exposed to Covid?
- If you work through an assignor, can you confirm your Covid information is making it to all officials?
- Has your assignor communicated information to officials on what to do if they get Covid or are exposed to Covid?

- Are you aware of any organizations that are requiring officials to enforce Covid protocols?
- Have you changed or enhanced your independent contractor waivers to include Covid?

- Are you sensing a reduction in the number of available officials?
- Is there a state level person “in charge” of officials in your sport? Who is it, if there is?