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Dear Parent/Guardians,

I hope this letter finds you well during these difficult times.

The Mayor and Town Council along with the Recreation Department have worked hard to get our recreational sports back and running. Our Fall sports, which include Soccer, Football, and Cheerleading will be the first to resume during this upcoming season.

Attached you will find our Return to Play Plan and our Pre-Screening Questionnaire Form. We ask that you please take the time to read these documents carefully. If you have any questions or concerns you may contact the Superintendent of Recreation, Michael Pero at mpero@secaucus.net and/or our Sports Coordinator, Dennis McCaffery at dmccaffery@secaucus.net

On Tuesday, September 1st at 7PM at the Recreation Center located on Koelle Blvd. we will be hosting an open parent forum to discuss these policies and your questions. We are making every effort to keep your children safe. Please bear with us as changes occur daily. We will adjust and advise accordingly.

Our registrations for all Fall sports are still open and you can register through your Community Pass account. If you have any questions, please contact Shannon Waters at swaters@scaucus.net

Thank You

Michael Pero

Superintendent of Recreation



Secaucus Recreation Return to Play Plan

The Secaucus Recreation Program has established the following return to play plan. We understand that several of the guidelines may be difficult as players enjoy interacting with their teammates. However, we need to be diligent at enforcing these protocols for the health and safety of our players, coaches, staff, and their families.

Implementing the protocols will require a collaborative relationship between the programs, Coach, Parent, and Player. While our programs and Coaches must create a safe environment, the Parent must make the decision for their child to return to play. If, as a parent you are not comfortable in your child's returning to play- DON'T. And finally, Players must be responsible to adhere to, and respect the social distancing requirements and no-contact guidelines established.

Role and Responsibilities for each include:

Rec Dept.

- Distribute and post Return to Play protocols
- Be sensitive and accommodating to parents that may be uncomfortable with returning to play
- Train and educate all staff on Return to Play protocols
- Provide adequate field space for social distancing
- Ensure appropriate waste receptacles at fields
- Provide hand sanitizer stations
- COVID-19 reporting and communication

Coach

- Follow all Return to Play protocols
- Inquire how athletes are feeling- If they are not feeling well, send them home
- Ensure all athletes have their individual equipment
- Coach is the only person to place/pick up/touch training equipment
- Ensure drills/exercises provide for adequate social distancing
- Ensure that equipment is disinfected after each use
- Respect players, parents, and families by accommodating those that may not be comfortable with returning

Parent

- If you are not comfortable with returning to play, DON'T – You are the only one who will make the decision when your child returns to play

- Check child's temperature before coming to any training session
- Ensure child's clothing is washed after every training session
- Ensure all equipment are sanitized before and after every training.
- Notify the Director/Coach immediately if your child becomes ill for any reason
- Supply your child with individual sanitizer
- Adhere to social distancing requirement; stay in car
- Ensure your child as plenty of water

Player

- If you are not comfortable with returning to play, DON'T
- Adhere to all Return to Play protocols
- Wash hands thoroughly before and after training
- Wash and sanitize training equipment after every training
- Do not share water, food, or equipment
- Respect and practice social distancing
- Place equipment, bags, etc. at least 10ft apart
- No high 5's, handshakes, knuckles, or group celebrations

1. CHECK FOR SYMPTOMS

- a. If you are sick, feel sick, or may be sick, stay at home!
- b. Check your child's temperature before coming to any practice session. If the temperature is over 100.4 do not bring your child to practice.
- c. Any coach, player, parent/guardian or driver attending a practice or game players and parents attest that to the best of their knowledge that the player is not exhibiting widely established symptoms of COVID-19(not an exhaustive list) Fever, fatigue, dry cough, phlegm, loss of appetite, shortness of breath, nausea, sore throat, body aches or swelling, unusual headache, loss of smell or taste, stuffy nose.
 - i. Have not been tested positive for COVID-19 within the last 14 days
 - ii. Have not been in close contact with someone who has tested positive or someone who is exhibiting the widely established symptoms of the virus (even if they have not been tested) within the last 14 days.
- d. Any attendee that displays any of these symptoms will politely be asked to leave.
- e. A player who is displaying any of these symptoms will be safely isolated until a responsible adult can remove the minor.

2. REPORTING AND COMMUNICATION FOR COVID-19 EXPOSURE

- a. Staff members and coaches are required to report if they test positive for COVID-19, are suspected of being positive for COVID-19 or have been directly exposed to someone who has tested positive for COVID-19.
- b. Any player who has tested positive COVID-19, is suspected of being positive for COVID-19 or has been directly exposed to someone who has tested positive for COVID-19 is required to report to the Recreation Department. Contact Mike Pero (201)-330-2000 ext. 3202 or Dennis McCaffery (201)-330-2000 ext. 3215

- c. If a case of COVID-19 is reported, all staff and players who came in contact with that person will be notified. Due to privacy issues and HIPPA laws, the identity of that person will remain anonymous.
- d. The Recreation Department will notify the local health department in the event of the confirmed COVID-19 case. In addition, the department will cancel all practices associated with the team/coach for up to 14 days.
- e. Once notified that an individual who has tested positive for COVID-19 has been in close proximity (within 6ft) with any staff member or player, those staff members and players must adhere to the following protocol.
 - i. Notify their primary physician.
 - ii. Staff members and players begin in-home isolation for a 14-day period
 - iii. Staff members and players can discontinue in-home isolation if they undergo testing and the test result is negative
- f. Before a staff member or player who has tested positive for COVID-19 can return to practice, the following conditions must be met:
 - i. A minimum of seven days must pass before the original onset of symptoms
 - ii. A minimum of 72 hours must pass without symptoms and without the aid of fever-reducing medications
 - iii. The staff member and player must attain a negative COVID-19 test result.

MINIMUM REQUIREMENTS

3. PLAYER DROP OFF, PICK-UP, AND TEMPERATURE CHECK

- a. We recommend that players do not carpool to and from practice
- b. During drop off and pick up players may be subject to a non-contact temperature check, especially if they are exhibiting common symptoms of COVID. Any player that has temperature over 100.4 will be asked privately to remain in their car and to head home.

Procedure:

- Player exits vehicle and walks to field using designated entrance (15 mins prior to start time)
 - Parent/Guardians will not have access to the field
 - Player returns to vehicle at the end of the practice (Coaches will stagger dismissal of players)
 - Parent/Guardian departs immediately to provide parking space for the next team
- ❖ Players/Coaches must continue to practice social distancing (6ft distance) while walking to and from the fields.
 - ❖ Upon arrival to the field, players will be assigned their own designated area of space to work within.
 - ❖ When practice ends, players will be asked to promptly gather their personal items and walk to their vehicle.

4. SMALL GROUP PRACTICE

- a. Teams will be split into small groups. Each group will have their own coach and practice area

- 5. ZERO TOLERANCE NON-CONTACT BETWEEN PLAYERS AND COACHES**
 - a. Coaches shall ensure all players and coaches avoid “high fives,” handshakes, or other types of physical contact.
- 6. COACHES TO WEAR FACE COVERINGS DURING PRACTICE SESSIONS**
 - a. Coaches are required to wear face coverings during training sessions. Players will also be allowed to wear face coverings while training, but this will be a personal choice of the player’s parent/guardian.
- 7. NO SPECTATORS ALLOWED**
 - a. Spectators must remain off the field unless otherwise needed
- 8. HAND SANITIZER**
 - a. Players should have hand sanitizer for personal use
 - b. Coaches must use hand sanitizer before, during breaks, and after practice.
 - c. Hand Sanitizer stations will be provided at each location
- 9. AVOID “SHARED” EQUIPMENT**
 - a. Players should wear their regular training attire
 - b. Players should bring their own ball, water bottle, towel, etc. No sharing allowed.
- 10. REDUCE PLAYERS TOUCHING PRACTICE EQUIPMENT**
 - a. Coaches will be disinfecting all their equipment before and after use.
 - b. The handling of ALL equipment will be limited to coaches/staff only.
- 11. INCREASED SIGNAGE THROUGHOUT FACILITIES**
 - a. Signage will be posted to remind all players, coaches, and spectators about COVID-19 symptoms and social distancing
- 12. SOCIAL DISTANCING MONITORING**
 - a. Staff members to monitor the facility to politely but firmly ask any groups of parents or players to disperse and maintain appropriate distancing.

COVID-19 Travel Advisory

1. In response to increased rates of COVID-19 transmission in certain states within the United States, and to protect New Jersey’s successful containment of COVID-19, the State has joined with New York and Connecticut in jointly issuing a travel advisory for anyone returning from travel to states that have significant degree of community-wide spread of COVID-19.



**SECAUCUS RECREATION DEPARTMENT
COVID-19 DAILY PRE-SCREENING QUESTIONS**

Name of Player: _____

Date: _____

Parent/Guardian Name: _____

Sport: _____

Parent/Guardian Cell: _____

Are you experiencing any of the following symptoms?

Please Circle One

- | | | |
|---|-----|----|
| 1. Fever ($\geq 100.4^{\circ}\text{F}$) | YES | NO |
| 2. Cough or shortness of breath | YES | NO |
| 3. Sore Throat | YES | NO |
| 4. Chills | YES | NO |
| 5. Muscle aches or rigors | YES | NO |
| 6. Headache | YES | NO |
| 7. New loss of taste or smell | YES | NO |
| 8. Abdominal pain, nausea, vomiting or diarrhea | YES | NO |

Have you had close contact with someone who is currently sick? YES NO

Have you been diagnosed with COVID-19 in the past three weeks or have reason to believe you have COVID-19? YES NO

Have you traveled or had close contact with anyone who has traveled internationally in the last 14 days? YES NO

Have you visited one of the states currently on New Jersey quarantine list? YES NO

If so, which state did you travel to and when did you return from travel? _____

If you took your temperature this morning, what was the reading? _____