



Return to Play Committee Report

JUNE 2020



Table of Contents

<u>Report overview</u>	3
<u>Return to Play Committee Synopsis</u>	4
<u>Subcommittee Synopsis & Recommendations</u>	6
<u>Medical Full Report and Recommendations</u>	8
<u>Recreation/Parks Subcommittee Full Report and Recommendations</u>	17
<u>Competition/Tournaments Subcommittee Full Report and Recommendations</u>	22
<u>Facilities Subcommittee Full Report and Recommendations</u>	28
<u>References & Sources</u>	43



Report Overview:

The Return to Play: Youth and Amateur Sports Report is a general informational resource. This report should be used as a resource and guidance tool when implementing the return to participation in any sports activity. This information is intended to be used as a guiding resource to help you and your organization with making best practices and efforts to getting back to play. Prior to conducting any sports related activity, please consult the most up-to-date recommendations from federal, state and local public health officials, as well as your personal, qualified health providers or other advisors about any specific issues or circumstances you might have.

The information generated in this resource guide, and the accompanying website resource center, were compiled by Maryland residents who are industry leaders from the fields of Sport Tourism, Recreation and Parks, Tournament Operators, Medical Personnel and Facility Ownership and Operations. These individuals are some of the most revered and respected thought leaders both locally and nationally. The core resources within this document were validated, and/or sourced, from preeminent local, national and international organizations to ensure a wide girth of information was presented.

Our entire committee is dedicated to the overarching goal of returning youth and amateur sports back to play in a safe, healthy and mindful way. It is our belief that this resource guide will serve as a starting point for Maryland to Return to Play!

Sincerely,

Terrance Hasseltine, CSEE
Executive Director
Maryland's Sports Commission

MISSION: Enhance Maryland's economy, image & quality of life through the attraction, promotion, retention and development of regional, national & international sporting events.

Return to Play Committee Synopsis

The Committee:

The Executive Director of Maryland's Sports Commission established a work group of sport tourism industry professionals to find and source best practices, guidelines and recommendations for the Return of Play in Youth and Amateur Sports for Maryland, in guidance with the Governor's Road To Recovery Map. The Committee was subdivided into five subcommittees to establish this report; they are Competition/Tournament, Facilities, General Sport Tourism, Medical and Recreation/Parks.

Subcommittee	Name	Organization
Competition/Tournament	Chair James Simmons	Wicomico County Recreation, Parks & Tourism
Competition/Tournament	Lee Corrigan	Corrigan Sports
Competition/Tournament	Matt Hogan	HoganLax
Competition/Tournament	Mike Libber	Elite Tournaments
Competition/Tournament	Krystin Porcella	Top of the Bay Lacrosse
Competition/Tournament	Andy Wisk	USSSA Baseball and Softball
Facilities	Chair Matt Libber	Maryland SoccerPlex
Facilities	Lori Jones	Bowie Hockey Club
Facilities	Steven Miller	Wicomico County Recreation, Parks & Tourism
General Sport Tourism	Chair George A. Cooley, II	Experience Prince George's
General Sport Tourism	Mark Burdett	Major League Lacrosse
General Sport Tourism	Bill Cole	Margraves Strategies
General Sport Tourism	Flo Egan	Maryland State Youth Soccer Association
General Sport Tourism	Olubunmi U. Jinadu	United Soccer Africa, Interglobe Entertainment
General Sport Tourism	Michael Kenney	Ripken Baseball
General Sport Tourism	Cole Lacey	Wicomico County Recreation, Parks & Tourism
General Sport Tourism	Greg Pizzuto	Visit Harford
Medical	Chair Teri McCambridge, MD, CAQSM	University of Maryland St. Joseph; University of Maryland; Medical Advisory Committee for MPSSAA, MIAA schools
Medical	Craig H. Bennett, MD, FFAOS	Lifebridge Health Sports Medicine Institute; Team Physician Loyola University of Maryland; Medical Director of Catholic Athletic Association
Medical	Richard Hinton, MD, MPH, PT, Med	MedStar Sports Medicine; Team Physician US Lacrosse, Baltimore Ravens
Medical	Karen Kotloff, MD	UM Medical System
Medical	Andrew Lincoln, ScD, MS	Medstar Health Research Institute and Georgetown University Medical Center
Medical	Aaron Milstone, MD, MHS	Johns Hopkins Health System; JHU
Medical	Wes Robinson, ATC, MPT	Maryland Athletic Trainers Association

Return to Play Committee Synopsis *continued*

Subcommittee	Name	Organization
Medical	Yvette Rooks, MD, FAAFP	University of Maryland College Park; Board of College Athletic Trainers Association; Medical Advisory Board NFHS
Medical	Steve Stenersen	US Lacrosse; World Lacrosse Board
Medical	Andrew Tucker, MD	MedStar Union Memorial; Head Team Physician Baltimore Ravens; Chairman, Medical Committee NFL
Medical	R. Andrew Warner	Maryland Public Secondary School Athletic Association
Medical	John H. Wilckens, MD	Johns Hopkins School of Medicine; Johns Hopkins Hospital
Recreation/Parks	Chair Chuck Montrie	Maryland Recreation and Parks Association (MRPA)
Recreation/Parks	Kathy Burley	Maryland Association of County Park & Recreation Administrators (MACPRA)
Recreation/Parks	Atuya Cornwell	Department of Parks and Recreations, Prince George's County
Recreation/Parks	Thomas Paolucci	Department of Parks and Recreations, Prince George's County
Recreation/Parks	Susan Petito	Maryland Municipal League
Recreation/Parks	David Smalley	Anne Arundel County Recreation and Parks

Subcommittee Synopsis & Recommendations

Medical Subcommittee

GOAL: To provide recommendations for the resocialization of sport with regard to practice, competition and physical activity while being mindful of the health and safety of youth, high school, coaches/ personnel, parents/caregivers and spectators.

RISK ATTESTATION: Until a cure or vaccine for SARS-CoV-2 (the virus causing COVID-19 illness) is developed, group play will entail some risk of personal infection and potential household transmission.

GUIDING PRINCIPLES: The information regarding SARS-CoV-2 is changing rapidly. Our information and suggestions included in this report include a multitude of strategies and recommendations currently being used both locally and nationally that we believe serve as the appropriate guidance for a return to play of sports in Maryland.

RISK ASSESSMENT CHART: Below is a listing that we have created to assess the risk of various team and individual sports as it pertains to potential transmission of COVID-19. Please see full report for further explanation and references.

Level of Risk	Sports	Definition		
Low Risk	Archery Auto-racing Beach Volleyball Boating Bowling, Cheer (sideline) Cross-Country (staggered start) Cross-Country Skiing Diving Equestrian Field Events (High Jump, Pole Vault, Javelin, Shot-Put)	Fishing Foot Golf Golf Hunting Jousting Mountain Bicycling Orienteering Rodeo Rope Jumping Running Scuba Diving Skate Boarding Shooting Single Skull	Surfing Individual Swimming Skiing Table Tennis Water Skiing Wind Surfing	Sports that can be done with social distancing or individually with no sharing of equipment or the ability to clean the equipment between use by competitors.
Medium Risk	Badminton Baseball Biathlon BMX Boating Broomball Cricket Disc Golf Extreme Sports Gymnastics Rodeo Adventure Racing Curling Dodgeball Fencing	Field Hockey Flag Football Handball Horseback Riding Horse Racing Indoor track Kickball Lacrosse Paintball Polo Roller Sports Skating (Figure) Bodybuilding Shooting Sailing	Soccer Softball Speed Skating Squash Swimming (competitive) Synchronized Swimming Table Tennis Track Triathlon Ultimate Frisbee Volleyball Water Polo Weightlifting	Sports that involve close, sustained contact, but with protective equipment in place that may reduce the likelihood of respiratory particle transmission between participants OR intermittent close contact OR group sports OR sports that use equipment that can't be cleaned between participants.
High Risk	Basketball Boxing Competitive Cheer Canoeing/Kayaking Football Futsal	Ice Hockey Wrestling Martial Arts Rafting Rugby Wrestling		Sports that involve close, sustained contact between participants, lack of significant protective barriers, and high probability that respiratory particles will be transmitted between participants as defined by NFHS Guidance for opening high school athletics and activities.

Recreation/Parks

GOAL: The overall goal was to assess the feasibility and necessary procedures and protocols needed to ensure a safe return to athletics and sports-related camps through the application of guidelines and practices put in place by local and national health and government organizations.

Competition/Tournament

GOAL: The subcommittee discussed and put forth recommendations to be considered by assessing the risk of COVID-19 transmission by individual sport and participants, including but not limited to game officials, workers, and spectators. Our committee was also committed to researching and creating guidelines for a return to sports in Maryland as it pertains to individual athletic facilities, including indoor and outdoor venues.

POLICIES / PROTOCOLS: As part of the implantations we discussed a number of ways in which we could address limiting the potential risk to exposure to COVID-19. These touch on such topics as: particular sports, tournament size/ the number of potential participants and spectators, and the effectiveness of using Personal protective equipment (PPE) at indoor events versus outdoor events.

Facilities

GOAL: The creation of a basic guideline for sports facility owners and operators for the safe reopening of events, with the consideration that said recommendations be tailored to meet the specific needs of each facility.

COMMUNICATIONS AND MESSAGING: Of the suggestions put forth regarding the reopening of facilities for youth and amateur sports, it is our subcommittees belief that communication is of the utmost importance in relaying information regarding individual facilities.

General Sport Tourism

GOAL: The purpose of this subcommittee was to research the financial impact being felt as a result of the cancellation of athletics in the state of Maryland and to brainstorm new ideas for how existing facilities and destinations can create new revenue sources from existing infrastructure, with the overall goal of allowing Maryland to remain competitive against neighboring states.



***Medical
Subcommittee
Full Report and
Recommendations***

Medical Subcommittee Full Report & Recommendations

Resocialization of Sports in the Maryland Region -(Updated 5/31/20)

The following recommendations are the result of a collaboration among sports medicine and pediatric infectious diseases professionals in the Baltimore Metropolitan area. The University of Maryland Medical System, Johns Hopkins Hospital, Medstar Health, and Lifebridge Health have collaborated to provide recommendations as it relates to the resocialization of both youth and high school sports and physical activity during the COVID-19 pandemic in the Maryland region.

Goal

Provide recommendations for the resocialization of sport with regard to practice, competition, and physical activity being mindful of the health and safety of our youth and high school athletes, coaches/personnel, parents/caregivers and spectators. Given the changing, recommendations and guidelines may change at any time. This document has been most recently updated on MAY 26, 2020.

Risk Attestation

Until a cure or vaccine for SARS-CoV-2 is developed group play will entail some risk of personal infection and potential household transmission. However, sports participation even at the youth level has always included some risks; including infections (MRSA, Herpes Gladiatorum) and injury (potentially catastrophic). Our goal is to educate participants to these risks and mitigate their risks in a responsible manner. Children considered at high risk for [infection](#) or who live in a household in which family members are at high risk of infection should consider individual sport training until risk in their specific environment and/or community lessens.

Teams/Clubs/Organizers must be familiar with recommendations from their national, state and local governing bodies regarding illness (including but not limited to COVID-19). Resuming participation prior to these organizations' recommendations may create increased liability if an athlete becomes ill or is injured at a time when participation in practices or competitions are not recommended.

Guiding Principles

The information regarding SARS-CoV-2, the virus causing the COVID-19 illness, is changing rapidly

Key strategies currently utilized should continue:

- Frequent, effective hand hygiene,
- Social distancing as able (particular caution in athletes regarding spitting, yelling, and high fives),
- Disinfecting high touch areas and avoiding touching the face, nose, and eyes.

[More Info](#)

Medical Subcommittee Full Report & Recommendations

Guiding Principles *continued*

The Centers for Disease Control and Prevention (CDC), White House Guidelines for [Opening Up America Again](#) and Governor Larry Hogan's Maryland Strong: [Roadmap to Recovery](#) form the basis of the recommendations to follow. These guidelines propose state or regional [gating criteria](#) and preparedness responsibilities in an effort to phase back into daily life, business openings, and large gatherings. (Metrics and Data). The nature of how COVID-19 spreads also dictates how there may be regional differences in the phasing in of resocialization. The purpose of this gradual phasing is to minimize disease spread as best as possible. The gating criteria to be used based upon the Opening Up America Again guidelines are:

1. Stable or downward trajectory of influenza-like illness reported within a 14-day period AND a downward trajectory of COVID-like syndrome cases reported within a 14-day period.
2. Stable or downward trajectory of documented cases of COVID-19 within a 14-day period or a downward trajectory of positive tests as a percent of total tests within a 14-day period.
3. Hospitals can treat all patients without crisis care and there is a robust testing program in place for at-risk healthcare workers, including antibody testing.

The recommendations discussed below are meant as general guidelines, in the context of federal, state, and local county recommendations. All federal, state, and local health department orders/recommendations as related to sports must be followed. Additionally, schools and sports teams may place stricter criteria than what is listed.

Sports organizations and schools should review and implement policies and return to play based on national governing body recommendations and local regional gating criteria.

Regional COVID-19 disease rates will direct the utilization of these proposed guidelines, based on local and [state of Maryland Health Departments](#).

Recommendations

- I. Recommendations for all phases in both youth and high school activities
 - i. Athletes, coaches, officials/referees/umpires, and other essential athletic administrators (i.e. athletic trainers, facility managers, grounds crew, etc.) MUST undergo a healthcare screening prior to starting any activity (practice, workout, scrimmage or games). These documents should be saved to document attendance at events for contact tracing if it should become necessary.
 - ii. Designate a Covid-19 Point of Contact for the planning organization or school. Each city/county should designate a youth sports Covid-19 team to implement policies and review gating criteria. The team at a minimum should consist of a representative of the local health department, local school system Superintendent of Schools designee for interscholastic
 - iii. Athletics, city/county recreation and parks, sports medicine or pediatric primary care physician, and a certified athletic trainer. A staff training plan for COVID-19 prevention should be developed.
 - iv. Practice or games times should be spaced out to decrease the number of individuals coming and going at the same time and facilitate social distancing.
 - v. Hand hygiene is essential. Organizations and facilities need to promote frequent and effective, hand hygiene with ample hand sanitizer (>60% ethanol or >70% isopropanol) dispensers and areas with soap and water in many different locations. Families may be asked to provide their own.

Medical Subcommittee Full Report & Recommendations

Recommendations *continued*

- vi.** The use of locker rooms is not recommended during these phases. Proper area for equipment storage and cleaning is recommend as well as appropriately spaced individual areas for athletes to store their personal belongings during activity.
- vii.** Only essential individuals should be present on the field for games. Managers, Student assistants, etc. should limit on-field exposure.
- viii.** Limit spectators allowed at any workouts or practices. Parents/caregivers can remain in their cars during this time. No congregating should be allowed in the parking lot or fields. A drop-off line for practices is recommended to avoid unnecessary exposure. For younger children, one parent/caregiver can accompany the child to the health screening. The parent/caregiver should be wearing a mask/face covering.
- ix.** During competitions, spectators should practice social distancing as permissible and spectators should wear masks/face covering. Children on the sideline over the age of 9 should consider facemask use. Limits on the number of spectators should be determined by organizations and schools based on multiple factors (i.e. gym size, indoor/outdoor) to promote social distancing. The maximum number of spectators should be posted at all gates, along with reminders of 6 ft. social distancing.
- x.** Carpooling should not be allowed unless only members of immediate family
- xi.** Scrimmages should be played only against teams located within your area (Metropolitan region).
- xii.** No sharing of water bottles. An individual athlete may use their own clearly marked bottle.
- xiii.** Coolers should be properly sanitized after each use, and a new cooler should be used for each team or group. [CDC guidance for cleaning and disinfecting should be followed.](#)
- xiv.** Ice towels should be marked for individual use only, then discarded or washed properly.
- xv.** No whirlpool or cold/hot tubs should be used during any of the listed phases. Best practice for emergency uses still applies.
- Have a cold-water immersion tub on-site or within 5 minutes of the field.
 - On field, having ice towels ready in addition to the cold tub is recommended for cooling during breaks and for covering the head in the event that an athlete has an exertional heatstroke and needs to be immersed.
- xvi.** No team huddles.
- xvii.** No handshakes or fist bumps should take place.
- xviii.** No spitting or sunflower seeds
- xix.** Coaches and officials/referees/umpires/scorekeepers/videographers/broadcasters/other essential athletic administration staffing are recommended to wear masks/face coverings. Air horns or other devices can be used in place of whistles.
- xx.** Any equipment used during activities should be disinfected with Environmental Protection Agency (EPA) certified products between each use.
- xxi.** Any jerseys used during these workouts should be washed daily and not switched to different players during workout. No pinnies should be used.

Medical Subcommittee Full Report & Recommendations

Recommendations *continued*

II. Special Considerations for Athletes, Coaches, and Administrators

i. Athletes and coaches who should consider delaying their participation in sports and activities are those with any of the following:

- Age Greater than 65
- Diabetes
- Chronic lung disease including moderate to severe asthma
- Severe obesity (Body Mass Index >40 kg/m²)
- Chronic kidney disease treated with dialysis
- Chronic liver disease (cirrhosis)
- Heart conditions (coronary artery disease, hypertension, heart rhythm problems (arrhythmia), and heart defects you are born with (congenital heart defects)
- Immunocompromised (e.g. any transplant recipient, needing immunosuppressant medications (e.g. steroids, biologics, etc.), patients receiving chemotherapy, etc.)
- Nursing home resident or long-term care resident
- Thalassemia or sickle cell disease

ii. If you think that your child is immunocompromised, please check with your child's healthcare provider (Physician (MD/DO), Nurse Practitioner (NP), Physician Assistant (PA)) before returning them to sports.

iii. Athletes should continue to follow the state recommended completion of an annual pre-participation physical examination

iv. Athletes who have been hospitalized as a result of COVID-19 or multi-system inflammatory syndrome in children (MIS-C) should have a thorough cardiovascular evaluation or cardiology consultation prior to return.

v. Athletes have had a prolonged break from organized sports and conditioning. Although some athletes may have continued independent strength and conditioning and cardiovascular training, some athletes may return deconditioned. Coaches need to reassess physical conditioning status on all athletes on their return and plan for a graduated return in duration, frequency, and intensity of athletics. [Please reference CCCSa and NSCA joint consensus guidelines for transition period.](#)

III. Social Considerations/Assessments

i. Exceptions may be needed for some of these conditions based on circumstances.

- Showers may be needed after practice in some circumstances (ex. working after practice, homeless). Coaches and administrators can make these exceptions. Social distancing should be maximized, and proper cleaning should occur.
- Water bottles that can be clearly marked for individuals should be made available. Daily cleaning should occur after an individual uses them.
- For parents/caregivers that rely on public transportation or walk, an area away from practice should be set aside that allows for social distancing.
- Schools and organizations should attempt to have extra masks/face coverings available. These should be washed after each use if cloth based.
- For athletes not able to wash workout clothes attempts should be made by the school and organizations to help in providing this for them.

ii. Additional situations may arise based on social vulnerabilities. Schools and organizations should attempt to think of these situations and develop solutions that continue to practice the key elements of preventing COVID-19 transmission.

Medical Subcommittee Full Report & Recommendations

Recommendations *continued*

IV. Screening

i. Every coach and athlete are required to be screened when they enter the campus or facility where the sporting activity will occur. Recommend wearing a mask/face covering until screened negative. Screening should include illness amongst family members at home.

ii. If an athletic trainer is employed at the organization or school, they are the ideal person to complete this screening. If no athletic trainer is employed or additional help is needed another medically trained individual should complete the screening:

- If the high school employs a Certified Athletic Trainer or other health care provider, the following items are recommended:
- Personal Protective Equipment including surgical masks.
- Wear masks at all times on campus or facility. Mask may be worn for multiple days unless visibly soiled.
- Athletic Trainer should clean tables used for assessing athletes with hospital grade cleaner after each athlete and wipe down entire AT room twice daily. High touch areas (handles, etc.) every 2-3 hours.
- Limit the number of athletes in the athletic training room, must be able to have 6 feet of social distancing in athletic training room at all times and wear masks/face coverings. Only one athlete per treatment table should be permitted.

iii. The screening should include the following questions:

- Today or in the past 24 hours have you had any of the following symptoms:
 - » Fever (temperature of 100.4°F or above and 100°F or above for adults)
 - » New or worsening cough
 - » Shortness of breath or trouble breathing
 - » Sore throat, different than your seasonal allergies
 - » New loss of smell and/or taste
 - » Diarrhea or vomiting
 - » Do you have a household or close contact who has been diagnosed with COVID-19 in the past 2 weeks?
- Temperature check with a thermometer is not required (temperature of 100.4°F or above for children and 100°F or above for adults is considered a fever).
 - » If temperature screening is performed forehead thermometer/touchless thermometer is preferable
 - » If an athlete/coach/official has a positive COVID-19 screening or has a fever they should be sent home immediately. If an athlete's parents are not present escort them to a designated isolation room or area away from others and have them wear a mask/face covering. They should then be directed to contact their primary care provider for evaluation and potential COVID-19 testing. The athlete should not be allowed back to athletics until they have documentation demonstrating the SARS-CoV-2 test was negative or a note from their healthcare provider indicating they do not need to be tested and their symptoms are not due to COVID-19.
 - » After the athlete/coach/official is screened they should receive an indicator that signifies that they have been screened (i.e. colored wrist band, sticker that changes daily, mark on hand) with the current date and initials of the screener. COVID-19 point person will monitor. Athletes do not need to wear masks/face coverings during play.

Medical Subcommittee Full Report & Recommendations

Recommendations *continued*

V. Positive COVID 19 Athlete or Coach

- i. Notify the local public health authority. The school nurse, athletic trainer, healthcare provider, or member of the organization should create and provide a line list of all close contacts and their contact information to the health department. This will ensure timely and efficient contact tracing which is necessary to mitigate the spread of disease.
- ii. If an athlete or coach not wearing a mask is confirmed to have COVID-19, the following should occur:
 - All participants that have practiced or competed with this individual up to 48 hours prior to symptom onset should be excluded from practice for 14 days. Recommend teams keep documentation of names and contact information of opposing teams/coaches/officials for contact tracing purposes.
- iii. [Returning to sports post COVID-19 diagnosis](#)
 - Athletes/coaches must meet all the following criteria to return to sports
 - No fever (<100.4°F) for 72 hours without fever reducing medications
 - Absence of respiratory symptoms (cough, shortness of breath,)
 - At least 10 days have passed since symptoms first appeared
 - Note for clearance from a medical provider (MD, DO, NP, PA)
 - » Individuals without a medical provider can contact their local public health agency.
 - Gradual conditioning return (similar to concussion return to play protocol).

VI. Sports Risk

- i. The relative “risk of sport is determined by the ability of social distancing to be maintained, indoor vs outdoor, duration of contact, face to face contact, and shared equipment.
- ii. A “high risk” competition sport can still be practiced in early stages if the practice is modified to skill work or individual work in a controlled environment.
- iii. The categorization of risk is based on Competition itself—Practice can be modified to decrease risk of contact and may be safe to begin with modifications prior to full competition.
- iv. The risk of transmission of COVID-19 in youth sports can be reduced by modifying the setting of participation as outlined in the [CDC Considerations for Youth Sports Document](#). Settings are outlined below;
 - Lowest Risk: Performing skill-building drills or conditioning at home, alone or with family members.
 - Increasing risk: Team-based practice
 - More Risk: With-in team competition
 - Even More Risk: Full competition between teams from same geographic area.
 - Highest Risk: Full competition between teams from different geographic areas.
- v. Youth organizations should consult their insurance carriers regarding updates to insurance due to COVID-19. Legal consultation regarding updates to waivers surrounding COVID-19 should also be considered.
- vi. Low risk Sports Low Risk Sports (Sports that can be done with social distancing or individually with no sharing of equipment or the ability to clean the equipment between use by competitors)
 - These sports include: Archery, Auto-racing, Beach Volleyball, Boating, Bowling, Cheer (sideline), Cross-Country (staggered start), Cross-Country Skiing, Diving, Equestrian, Field Events (High Jump, Pole Vault, Javelin, Shot-Put), Fishing, Foot Golf, Golf, Hunting, Jousting, Mountain Bicycling, Orienteering, Rodeo, Rope Jumping, Running, Scuba Diving, Skate Boarding, Shooting, Single Skull, Surfing, Individual Swimming, Skiing, Table Tennis, Water Skiing, Wind Surfing

Medical Subcommittee Full Report & Recommendations

Recommendations > Sports Risk *continued*

vii. Medium-Risk sports (Sports that involve close, sustained contact, but with protective equipment in place that may reduce the likelihood of respiratory particle transmission between participants OR intermittent close contact OR group sports OR sports that use equipment that can't be cleaned between participants.)

- These sports include: Badminton, Baseball, Biathlon, BMX, Boating, Broomball, Cricket, Disc Golf, Extreme Sports, Gymnastics, Rodeo, Adventure Racing, Curling, Dodgeball, Fencing, Field Hockey, Flag Football, Handball, Horseback Riding, Horse Racing, Indoor track, Kickball, Lacrosse, Paintball, Polo, Roller sports, Skating (Figure), Weight Lifting, Bodybuilding, Shooting, Sailing, Soccer, Softball, Speed Skating, Squash, Swimming (competitive), Synchronized Swimming, Table Tennis, Track, Triathlon, Ultimate Frisbee, Volleyball, Water polo, Weightlifting

viii. High-Risk sports (Sports that involve close, sustained contact between participants, lack of significant protective barriers, and high probability that respiratory particles will be transmitted between participants as defined by NFHS Guidance for opening high school athletics and activities.)

- These sports include: Basketball, Boxing, Competitive Cheer, Canoeing/Kayaking, Football, Futsal, Ice Hockey, Wrestling, Martial Arts, Rafting, Rugby, Wrestling.

VII. Stages of Return

i. Stage 1

- Return to Sport in Maryland Stage I: Coincides with Maryland Roadmap to Recovery (MRTR) Phase I, Low Risks Activities and corresponds to CDC parameters of sustained transmission with high likelihood of confirmed exposure within communal settings with potential for rapid increase in suspected cases, Gating criteria have been satisfied for a minimum of 14 days.
- Vulnerable individuals should still shelter in place.
- During this phase, individual workouts are allowed to begin on campus or at the organization's facility. However, groups should include no more than 10 individuals, including coaches, are recommended in a space. The space should be separated by a barrier or large enough distance that individuals can maximize social distancing and no players/coaches should be within 6 feet of each other. There should be no interaction between groups of 10 during this phase. All machines or equipment should be wiped down with approved disinfectant after each use. Gathering limitations and cleaning to be enforced by school administration, not the athletic trainer.
- General concept in all phases Get in, Get out and complete essential training only together
- Athletes should not be interacting with anyone outside the area where their individual workout is located.
- Moving to phase 2 is contingent upon meeting the gating criteria above in the region your organization resides for the previous two weeks, and no outbreak of cases within your school or organization.

ii. Stage 2

- Coincides with MRTR Phase II, Medium Risks Activities and corresponds to CDC parameters of likelihood of transmission and likely confirmed exposures within communal settings and potential for rapid increase in cases
- Vulnerable individuals should remain sheltered in place
- **LOW RISK SPORTS** can begin full team practices and competitions in local area.

Medical Subcommittee Full Report & Recommendations

Recommendations > Stages of Return > Stage 2 *continued*

- During this phase, team workouts and practices are allowed to begin on campus or facility, however this should be done with minimal protective equipment (i.e. helmets only for football). Team drills can occur where players are less than 6 feet apart, but this should be minimized to brief one- on-one drills. Most of the practice should utilize social distancing. Gatherings of up to 50 people allowed unless precautionary measures of physical distancing and sanitization are in place.
- No two teams should be in the same location at one time. If the same field or gym will be used back to back, allow ample time between sessions to clean area between teams. Half field use is permitted. Be sure that there is no interaction between teams.
- Any equipment used should be disinfected between individual uses (i.e. helmets, bat, stick etc.).
- Social distancing should apply as much as possible during these team workouts and practices.
- Moving to phase 3 is contingent upon meeting the gating criteria above in the region your organization resides for the previous two weeks, and no outbreak within your school or organization

iii. Stage 3

- Coincides with MRTR Mid to Late Phase II, **MEDIUM RISKS ACTIVITIES** and corresponds to CDC parameters of likelihood or confirmed exposures within communal settings with potential for increase in cases
- Vulnerable individuals can resume in-person activities.
- During this phase medium risk sports may begin, full team practices, scrimmages, and game competitions. Any scrimmages or games should be played only against team located within the Baltimore Metropolitan region.
- During this phase **HIGH RISK SPORTS**, team practices with full equipment and contact drills is permissible. (Football should be sure to acclimatize with half shells first and then full equipment during this phase, as recommended by [Maryland State Department of Education Model Policy for Pre-Season Heat Acclimatization Guidelines for preseason athletes.](#)
- **HIGH RISK SPORTS** can begin Intra-squad Scrimmages during this phase.
- During competitions, spectators should practice social distancing as permissible and spectators should wear masks/face coverings.
- Individual equipment should be disinfected daily (bats, balls, sticks, etc.) Shared equipment between individual uses (i.e. sleds, weight equipment, etc.).
- Moving to phase 4 is contingent upon meeting the gating criteria above in the region your organization resides for the previous two weeks, and no outbreak of cases at your school or organization.

iv. Stage 4 (High Risk Sports Only recommendations)

- Coincides with MRTR Phase III, High Risks Activities and CDC parameters of isolated cases and limited communal transmission and no evidence of exposure in large communal settings
- During this phase, full team practices, scrimmages, and game competitions are permitted.
- During competitions, spectators should practice social distancing as permissible and spectators should wear masks/face coverings. Number of spectators may be limited based on size of the facility and the promotion of social distancing by organizations and schools.

A photograph of three female soccer players in white uniforms celebrating on a grassy field. They are seen from behind, with their arms around each other. The background is slightly blurred, showing other people and a clear sky. The text is overlaid in the center of the image.

***Recreation/Parks
Subcommittee
Full Report and
Recommendations***

Recreation/Parks Subcommittee Full Report & Recommendations

The Maryland Recreation & Parks Association (MRPA), Maryland Association of County Park & Recreation Administrators (MACPRA) and the Maryland Municipal League (MML) Parks & Recreation Association is pleased to present general recommendations for a phased re-opening of recreation and park facilities as part of Governor Hogan's "Maryland Strong: Roadmap to Recovery" plan. The recommendations listed below were developed in consideration of survey data collected from National and Statewide Recreation & Parks professionals. In providing the suggested framework, the agencies recognize the following realities:

- Information and conditions related to COVID-19 are subject to change; therefore, this a working document which is also subject to change;
- Recommendations listed may be altered as gathering-size restrictions are adjusted from stage-to-stage or within a given stage;
- Since conditions vary within the State & region, local jurisdictions should work closely with their designated health officers to develop detailed plans appropriate to their given situation; Interpretation across jurisdictions may vary based on a variety of factors.
- Many facility and activity types can be modified in order to meet safe conditions as determined by State/local officials. Individual plans for modification of facilities and/or activity types should be vetted with local health officials and may impact the stage in which facilities and activities are re-opened in a given jurisdiction.

	Stay at Home Order	Stage 1	Stage 2	Stage 3
Recreation & Leisure Facility / Activity Types				
Beaches, Piers	Closed	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Boat Ramps, Marinas (e.g recreational boating / kayaking)	"Closed except for essential/sustenance"	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Campgrounds (e.g. camping)	Closed	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Dog Parks	Closed	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Horseback riding	Closed	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Hunting, Fishing	"Closed except for essential/sustenance"	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Outdoor Basketball Courts	Closed	Closed	Open (with distancing guidelines)	Open (with distancing guidelines)

Recreation/Parks Subcommittee Full Report & Recommendations

	Stay at Home Order	Stage 1	Stage 2	Stage 3
Outdoor Tennis Courts	Closed	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Playgrounds	Closed	Closed	Open (with local health officer approval; use at your own risk; signage with CDC guidelines)	Open (with local health officer approval; use at your own risk; signage with CDC guidelines)
Restrooms: Permanent at Outdoor Facilities	Closed	Closed	Open (with distancing guidelines, health officer approval)	Open (with distancing guidelines, health officer approval)
Restrooms: Temporary	Closed	Closed	Open (with distancing guidelines, health officer approval)	Open (with distancing guidelines, health officer approval)
Skateparks	Closed	"Closed (could open if controls are in place at a staffed facility, health officer approval)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Splash Parks / Spray Parks	Closed	Closed	Closed	Open (with distancing guidelines, lower capacities, health officer approval)
Trails / Open Spaces (e.g. walking / hiking / biking)	Open	Open	Open	Open
Programmed Facility / Activity Types				
Childcare Facilities (e.g. day care, after school programs)	Closed	Closed	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)
Community Centers (e.g. indoor courts/fields)	Closed	Closed	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)
Ice Rinks	Closed	Closed	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)
Golf Courses	Closed	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)

Recreation/Parks Subcommittee Full Report & Recommendations

	Stay at Home Order	Stage 1	Stage 2	Stage 3
Indoor Fitness Studios/ Gym/Group Exercise Facilities	Closed	Closed	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)
Outdoor gym / fitness classes	Closed	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Pools: Indoor	Closed	Closed	Closed	Open (with distancing guidelines, lower capacities, health officer approval)
Pools: Outdoor	Closed	Closed	Open (with distancing guidelines, lower capacities, health officer approval)	Open (with distancing guidelines, lower capacities, health officer approval)
Summer Camps	Closed	Closed	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)	Open (with distancing guidelines, reorganization of space, best cleaning practices, health officer approval)
Medium to Large Congregate Facility / Activity Types				
Community Gardens	Closed	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Farmer's Markets	"Open (with distancing guidelines)"	"Open (with distancing guidelines)"	Open (with distancing guidelines)	Open (with distancing guidelines)
Indoor Large Venues / Mass Gatherings (e.g. concerts / sports / festivals / trade shows / community events)	Closed	Closed	Closed	"Open (with distancing guidelines, lower capacities, health officer approval)"
Outdoor Large Venues / Mass Gatherings (e.g. concerts / sports / festivals / community events)	Closed	Closed	Closed	"Open (with distancing guidelines, lower capacities, health officer approval)"
Senior Centers	Closed	Closed	Closed	"Open (with distancing guidelines, lower capacities, health officer approval)"
Pavilions / Other Outdoor Congregate Settings	Closed	Closed	Open (with distancing guidelines and capacity restrictions)	Open (with distancing guidelines and capacity restrictions)

Recreation/Parks Subcommittee Full Report & Recommendations

	Stay at Home Order	Stage 1	Stage 2	Stage 3
Running & Biking events	Closed	Closed	"Closed (could open with facility/event/spectator safety modifications, health officer approval)"	Open (with distancing guidelines, lower capacities, health officer approval)
Sports: High-Contact (e.g. wrestling, football, boxing, judo, rugby)	Closed	Closed	Closed	"Open indoor/outdoor (with distancing guidelines, health officer approval)"
Sports: Medium-Contact (e.g. basketball, lacrosse, soccer)	Closed	Closed	"Open indoor/outdoor (with distancing guidelines, health officer approval)"	"Open indoor/outdoor (with distancing guidelines, health officer approval)"
Sports: Non-Contact (e.g. golf, tennis, pickleball, archery, softball)	Closed	Open for outdoor activities (with distancing guidelines)	Open indoor/outdoor (with distancing guidelines)	Open indoor/outdoor (with distancing guidelines)
Sports-Related Tournament Events	Closed	Closed	"Closed (could open with facility/event/spectator safety modifications, health officer approval)"	Open (with distancing guidelines, lower capacities, health officer approval)
Theatre / Museum / Indoor Leisure Facilities	Closed	Closed	Closed	Open (with distancing guidelines and capacity restrictions)



***Competition/
Tournaments
Subcommittee Full
Report and
Recommendations***

Competition/Tournaments Subcommittee Full Report & Recommendations

Amateur sports competition/tournaments provide healthy, active options for today's youth and serve as an economic driver in the State of Maryland. A resumption of tournament play would provide a much-needed boost to local businesses, hotels and restaurants who are facing great financial challenges as a result of the COVID-19 pandemic.

Maryland has the opportunity to work through established event organizers and organizations to resume play responsibly rather than individuals taking it upon themselves to initiate competition in a less guided approach.

While there are financial benefits related to hosting sports tournaments, the subcommittee recommends resuming these types of activities in a manner that puts health and safety at the forefront of operations, adapting the environment(s) as necessary to ensure it is safer to play.

Policies / Protocols

RISK EVALUATION

It is possible that events may need to be canceled due to outbreaks of COVID-19, making event planning less predictable. To help determine the viability of a tournament event, initial questions should be asked of organizers and event hosts:

- Is the sport or activity in the approved list of activities in the current stage of recovery?
 - » Refer to committee guidelines on Low/Medium/High risk sports.
- Do local and state guidelines permit the event to occur, considering travel restrictions, group gathering size, etc.? To help evaluate gathering size, special consideration must be given to:
 - » the number of participants anticipated at the site at any given time;
 - » the number of spectators anticipated at the site at any given time;
 - » the number of staff/volunteers anticipated at the site at any given time;
 - » the total number of people in comparison to available square footage / acreage.
 - › For example, a 40-acre athletic facility with sufficient warm up space and room for people to disperse must be evaluated differently than a 4-acre single field site, in terms of the equation for allow people enough space to properly distance themselves.
- Does the venue(s) where the event will occur have the necessary supplies, staffing and infrastructure required to successfully host the event while following local and state guidelines?
 - » If a facility or operator cannot increase safety for participants, spectators and staff/volunteers, the tournament should not be considered.

If the initial questions above can be answered "yes," further planning should be undertaken to consider hosting the event. If not, the event should not take place or modifications to the event should be considered to satisfy the initial questions.

TRAVEL

Interstate travel is allowed provided that all participants follow guidelines in place from both the State of Maryland and the location they are traveling from. While stay at home orders exist in certain states, teams from those states should not be permitted to participate in events in Maryland.

Competition/Tournaments Subcommittee Full Report & Recommendations

Policies / Protocols *continued*

SAFETY MEASURES

Staying Home When Appropriate

- Educate staff and player families about when they should stay home and when they can return to activity following CDC guidelines:
- Actively encourage staff, families, and players who are sick or feeling sick to stay home.
- Individuals, including coaches, players, and families, should stay home if they have tested positive for or are showing COVID-19 symptoms.
 - » People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness.
 - › Symptoms may include:
 - Cough
 - Shortness of breath or difficulty breathing
 - Fever
 - Chills
 - Muscle pain
 - Sore throat
 - New loss of taste or smell
 - Individuals, including coaches, players, and families, who have had a contact with a person with COVID-19 in the 14 days prior to the event should also stay home and monitor their health.

Temperature Checks

- All participants, coaches, and spectators are required to self-check temperatures daily prior to attending the event. If they exhibit a temperature of 100 or more, they are not permitted to attend or participate for a minimum of 14 days.
- Upon arrival on site all staff and officials/umpires need to be temperature screened by Event Organizer.

PPE / Masks

- On the Field/Court of Play
 - » Permit participants/officials/umpires to wear PPE if they choose to so long as it does not create a safety concern for themselves or other participants. This includes both indoor and outdoor events.
- Off the Field/Court of Play
 - » Indoor
 - › All participants, officials, staff, and spectators are mandated to wear masks in line with current state orders in effect for indoor spaces.
- Outdoor
 - » Participants, officials/umpires and spectators are not mandated to wear masks unless they are not able to maintain physical distance in line with current state orders.
 - » All staff and volunteers are recommended to wear masks.

Competition/Tournaments Subcommittee Full Report & Recommendations

Policies / Protocols > Safety Measures *continued*

Cleaning / Disinfecting

- Clean and disinfect frequently touched surfaces on the field, court, or play surface at least daily, or between uses as much as possible. Use of shared objects and equipment (e.g., balls, bats, etc.) should be limited, or cleaned between use by each individual if possible.
- Develop a schedule for increased, routine cleaning and disinfection.
- Ensure safe and correct use and storage of disinfectants, including storing products securely away from children. Use products that meet EPA disinfection criteria.
- Identify an adult staff member or volunteer to ensure proper cleaning and disinfection of objects and equipment, particularly for any shared equipment or frequently touched surfaces.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children or themselves from inhaling toxic fumes.
- Use gloves when removing garbage bags or handling and disposing of trash. Wash hands after removing gloves.

Social Distancing

- All in attendance including spectators, officials/umpires, staff and spectators are required to work to maintain CDC's social distancing of 6 feet apart.
- Consider elimination or reconfiguration of break areas used for tournament staff, officials or umpires to create social distancing.
- No handshakes or high fives before, during or after competition.
- Event Organizers should consider posting signage reinforcing social distancing and illness prevention measures. (The CDC has free posters and handouts available on their website) These messages may include information about:
 - » Staying home if you are sick or do not feel well, and what to do if you're sick or feel ill.
 - » Using social distancing and maintaining at least six feet between individuals in all areas of the park.
 - » Covering coughs and sneezes with a tissue, then throwing the tissue in the trash.
 - » Washing hands often with soap and water for at least 20 seconds, especially after going to the bathroom, before eating, and after blowing your nose, coughing, or sneezing.
 - » Using hand sanitizer that contains at least 60% alcohol if soap and water are not available.
 - » Avoiding touching eyes, nose, and mouth with unwashed hands.

Managing COVID Situations On-Site

- Create a Medical Plan for the event.
 - » Staying home if you are sick or do not feel well, and what to do if you're sick or feel ill.
 - » Using social distancing and maintaining at least six feet between individuals in all areas of the park.
- Designate a separate area such as a first aid office/tent or EMT office/tent to take potentially sick patients in the case they need to be evaluated.
- Prepare contact list of all teams or clubs, and if possible, all participants to have prepared for local health officials in the case that they need to conduct contact tracing.

Competition/Tournaments Subcommittee Full Report & Recommendations

Best Practices

To help facilitate a safe environment for sports competitions/tournaments, the following should be considered by Event Organizers and Event Hosts when planning:

SPECTATORS

- Events should work to limit the overall attendance in all ways possible including asking families to minimize the number of people that attend with the participant to limit interactions and gathering sizes following current state orders. Work with your facility partner to determine what is best for your event and meets all state and local guidelines.
- Limitations on attendance should be decided according to three main factors: indoor or outdoor space, available space (square footage), and number of people utilizing available space.
 - » Indoor events may need to eliminate or significantly limit spectators due to confined spaces and lower ventilation than outdoor events.
 - » Outdoor events may have more available space to allow attendees to spread out and safely adhere to social distancing requirements.
 - › For example, a 40-acre athletic facility with sufficient warm up space and room for people to disperse must be evaluated differently than a 4-acre single field site, in terms of the equation for allow people enough space to properly distance themselves.
- At risk individuals, youth or adult (particularly those over 65 or with preexisting health conditions) should stay home.
- Where possible spectators should be encouraged to livestream as opposed to attending in person.
- Prior to games encourage spectators to arrive as close to scheduled competition as possible to minimize interaction.
- Acceptable spectator areas should be defined and well-marked. Spectators should be encouraged to bring their own seating. Bleachers and shared spectator spaces should be marked off, closed or removed for social distancing practices.
- At the conclusion of games, encourage spectators to return to their cars and ask teams to eliminate post-game meetings to allow everyone to leave the area in a timely fashion.

SCHEDULING

- Event Organizers should schedule events such that, to the extent possible, attendance at any given time is minimized. Below are several schedule manipulation strategies that can be implemented:
 - » When possible schedule teams back to back to get them through competition efficiently or ask teams to leave the facility if they have large gaps between games.
 - » Build in breaks to schedule when there is team changeover at any field.
 - » Adjust and minimize the number of guaranteed games to more efficiently schedule teams to minimize time at facility.
 - » Stagger start times to space out attendee's entry and exit of facility.
 - » When possible with limited participation or end of events, spread out field/court assignments to space out attendees even further.
 - » If elimination bracket play is utilized, utilize smaller 4-6 team brackets to minimize the volume of participants/spectators that are waiting at a facility for their next contest.

Competition/Tournaments Subcommittee Full Report & Recommendations

Best Practices *continued*

WARM-UPS/WARM-UP AREAS

- Event Organizers should develop a facility plan that allows for proper warm up space that teams can utilize while also maintaining appropriate distance from other teams and spectators.
- In facilities where enough space is not readily available, directors should schedule appropriate warm up time on the main playing area with enough time consideration given to allow teams to pass each other safely in transitions.

TEAM BENCHES/DUGOUTS

- To the extent possible, restrictions on bench/dugout areas should be suspended to allow participants to appropriately distance themselves on the bench the space to do so.
- Spectators should not be permitted in the bench/dugout areas.

SHARING OF EQUIPMENT

- Sharing of any equipment needs to be strongly discouraged between players.

TEAM TAILGATING

- Team tailgating should not be permitted. Any groupings should be limited to single family units with sufficient space between groups as spectators following social distancing requirements.

VENDORS

- All vendors should follow state, local and CDC guidelines on operating either retail or carry out food establishments.
- Gathering / eating areas should be discouraged. Patrons should take their food away to a location in the facility sufficiently distanced from others to consume.
- Event Organizers and facilities could consider limiting overall number of exhibitors/vendors and require them to submit their safety protocol plan prior to the event for review and approval.

HYDRATION

- Participants should be encouraged to bring their own water.
- Central Hydration Stations are not recommended, however are acceptable given they follow the latest CDC Guidelines and social distancing protocols.

COMMUNICATIONS

Advance of Event

- Event Organizers should communicate with all participant's requirements and expectations in regard to safety measures including temperature checks, PPE/masks, social distancing requirements, cleaning/disinfecting plans, guidelines on when to arrive to facility, spectator limitations and guidelines for attending the event.

During Event

- Schedules and scores should be shared virtually. Physical brackets or score postings are not recommended as they are gathering points.
- Pregame Meetings should be limited to only necessary people and practicing social distancing requirements.
- Event organizers should move in every way possible to digital communication rather than physical communication during event.

A photograph of a soccer field at dusk. A large, bright stadium light is visible in the upper left. The sky is a mix of purple, pink, and blue. In the background, there are trees and a building with some lights. The field is green with white lines, and several players in red and white uniforms are scattered across it. A person in a yellow shirt is standing on the left side of the field.

***Facilities
Subcommittee Full
Report and
Recommendations***

Facilities Subcommittee Full Report & Recommendations

The following recommendations are submitted as a basic guideline for sports facility owners and operators for the safe reopening of sport venues. The recommendations will address the various areas of facility operations and measures that are recommended to provide safe environment for participants, spectators, staff, and officials. These recommendations acknowledge that no procedures and protocols can guarantee the prevention of the transmission of COVID-19. These recommendations should be used in conjunction with all federal, state, and/or local regulations and orders. In addition, facilities should work with, local government officials, health department, user groups, event organizers, renters, vendors, and suppliers to coordinate efforts and align guidelines, procedures, and protocols. Venues should work specifically with event rights holders and suppliers to coordinated protocols for deliveries. These recommendations also should be tailored to meet the specific needs of each facility. We recognize that all facilities have different purposes, design, infrastructure, and levels of controls. However, these recommendations should be considered minimum efforts for all facilities unless such recommendations are unable to be implemented due to design, logistical, or cost restrictions that would make them untenable.

**Please note, these recommendations do not apply to swimming pools which shall be treated separately.*

Phased Approach

Sports facilities should use a phased approach to reopening in the same fashion as the State's reopening plan. The phased approach should be tiered to allowed increasingly more activities after an established trial period to monitor the effectiveness of controls and protocols. The trial period also allows for data regarding increases of cases, hospitalizations, and acute care admissions as a result of potential exposure at the facility through contact tracing from state or local governmental agencies.

PHASE 1

- Phase 1 should consist of facility usage for low risk and individual sports. This phase may also include small group trainings within designated spaces at a facility with precautions. These precautions should utilize elimination of person to person contact and elimination or drastic reduction of contact with equipment amongst multiple persons. Social Distancing protocols should always be followed. Small group trainings should be limited to 10 persons or less within a designated area.

PHASE 2

- Phase 2 shall expand upon Phase 1 restrictions by increasing the number of people with a designated area to 100 persons. All other precautions from Phase 1 shall remain in place. Competitions/Matches will continue to be limited to individual and low risk sports only where person to person contact can be eliminated.

PHASE 3

- Phase 3 shall expand upon Phase 2 restriction and will allow for competition/matches to be conducted by individual, low, and medium risk sports. High risk sports may resume practices and trainings with precautions to limit person to person contact as well as contact with equipment between multiple persons. Capacity shall be increased to 250 persons per designated area. Tournaments and events will continue to be restricted unless they can operate within the capacity limits established for this phase.

Facilities Subcommittee Full Report & Recommendations

Phased Approach *continued*

RETURN TO PRE-COVID STATUS

- Upon determination from local governments and health officials all restrictions can be lifted when safe to do so. This will allow facilities to return to pre-COVID operations but may require additional precautions moving forward based on the environment the community is in upon exiting the pandemic.

ADMISSION AND AMUSEMENT TAX

- The Maryland Admission and Amusement Tax collection should not be used as a basis for determination of which businesses may and may not reopen as this is not an equitable means to determine the businesses ability to safely reopen using these protocols. In addition, this places for-profit businesses at a disadvantage to not-for-profit business that may operate similar facilities but are exempt from collecting the tax.

Facility Types and Considerations

Individual recommendations will vary based on the type of facility. Different approaches, needs, and protocols will need to be established for each facility type. This document provides generalized recommendations for consideration by facility owners and operators. Owners and operators should modify these recommendations based on their specific facility. These recommendations should be considered minimum efforts for all facilities unless such recommendations are unable to be implemented due to design, logistical, or cost restrictions that would make them untenable.

INDOOR VS OUTDOOR FACILITIES

- Indoor and Outdoor facilities will have different needs from a design standpoint as well as end users. These recommendations will, when possible, make distinctions between indoor and outdoor facilities for certain items.

VENUE SIZE

- Venue size will also play a role in these recommendations. Large facilities may be unable to achieve certain recommendations due to logistical issues, staffing requirements, and costs. The recommendations should be tailored to meet the specific needs of the venue. Facility operators may also consider voluntarily closing portions of the facility during early phases to provide for the necessarily protections against the spread of COVID-19

CLOSED VS OPEN VENUES

Closed Venues

- Closed venues are those which have controlled entry of the facility. These facilities are usually gated, fenced, or have some other perimeter security feature that allows the venue to control the number of people who enter the property as well as the points of entry and exit. In practice nearly all indoor facilities should be considered a closed facility

Open Venue

- An open facility is one that the venue operated has limited or no capacity to limit the number of people on property or the inability to control all points of entry and exit. Outdoor facility without a perimeter fence should be considered an open facility event if vehicle traffic can be controlled via roadway entrances.

Facilities Subcommittee Full Report & Recommendations

Facility Types and Considerations *continued*

DESIGNATED SPACES

- Venues will need to establish “Designated Space” for the purposes of capacity limits during the phased approach of reopening. Designated spaces are contiguous space that would be commonly used by a single group, game, competition, or match. These spaces may be subdivided based on their sized and or ability to provide physical barriers to divide the space and separate people. Natural barriers, divisions, and other markers should be incorporated as best as possible when defining Designated Space. Each facility should make a determination of what constitutes their “Designated Space” based on their specific facility design while incorporating the control of the area, ingress and egress, and potential crossover with other designated space and common areas. The Designated Space may be modified when moving between Phases as indicated.
 - » Rectangular fields (soccer, football, lacrosse, field hockey, rugby, etc.) can be subdivided into two half fields each its own designated space during Phase 1 only. After Phase 1 each field should constitute its own Designated Space.
 - » Baseball/Softball Diamonds shall be considered a Designated Space
 - » Outdoor Courts (Volleyball, basketball, tennis, etc.) each court shall be considered its own Designated Space
 - » Rinks shall be considered a single Designated Space
 - » Running tracks shall be considered a single Designated Space
 - » Rooms, studios, miscellaneous indoor spaces shall be defined by their physical boundaries. Rooms that can be divided into smaller partitions can use the smaller partition as the Designated Space.

Capacity of Designated Spaces

Capacity limits will be established for all phases of the reopening recommendations. Capacity limits should include in the count of people all participants, coaches, officials, staff, and spectators that will have to access the Designated Space during its usage.

- Phase 1
 - » Capacity during Phase 1 shall be limited to no more than 10 persons per Designated Space. For Designated Spaces that are subdivisions of a large space or room the cumulative capacity cannot exceed the lessor of 10 persons per Designated Space or 50% of the capacity of the undivided space per fire code for the given jurisdiction.
- Phase 2
 - » Capacity during Phase 2 shall be limited to no more than 100 persons per Designated Space. For Designated Spaces that are subdivisions of a large space or room the cumulative capacity cannot exceed the lessor of 100 persons per Designated Space or 50% of the capacity of the undivided space per fire code for the given jurisdiction.
- Phase 3
 - » Capacity during Phase 3 shall be limited to no more than 250 persons per Designated Space. For Designated Spaces that are subdivisions of a large space or room the cumulative capacity cannot exceed the lessor of 250 persons per Designated Space or 75% of the capacity of the undivided space per fire code for the given jurisdiction.
- Return to Pre-COVID Conditions
 - » Capacity during shall be limited only by fire code regulations.

Facilities Subcommittee Full Report & Recommendations

Operational Recommendations

INGRESS AND EGRESS

- Facilities should develop a site-specific plan to control the ingress and egress of people at the facility. Closed facilities as defined by this document should limit access points to the property to establish and maintain facility guidelines and protocols during the various phases. Controlling access points and ingress also allows facilities to control the number of people entering the property in order to maintain occupancy levels within the capacity limits for each Phase. Indoor facilities should utilize separate doors for entry and exit of the venue when possible to limit the amount of crossover and contact between people entering and leaving the venue. Controlled access points also provide a means to collect waivers from guests to the property for liability protection
- Open facilities as defined by this document should consider using, if feasible, temporary barriers, fencing, or other means to control the flow of people into and out of the property. These facilities should also utilize various communication channels, including, onsite signage, to direct people to the specific access points you designate for ingress and egress.
- Facilities that are using roadways as their access point to conduct collect waivers, count visitors etc., must account for traffic consequences of such a plan of action. These access points will need to be adequately staffed, have clear signage and directions, as well as a pull off area to deal with any specific issues with a vehicle to minimize delays and backups. Facilities should work with local police on a traffic management plan to accommodate these potential delays and backups.

SCHEDULING

- Facilities should also develop strategies for the movement of people between practices, games, and activities in a Designated Space. When possible, facilities should establish an entry point and separate exit point from each Designated Space. For Designated Spaces where this is not feasible, scheduling for the Designated Space should include sufficient time between activities to mitigate the crossover of people in the Designated Space. It is recommended that during Phase 1 and 2 that thirty (30) minutes between activities be provided. For Phase 3 twenty (20) minutes be provided between activity. The next step shall allow you to return to pre-COVID scheduling practices.
- It is recommended that facilities, when feasible, add additional spaces between Designated Spaces to decrease the density of people the property. This is highly recommended during Phase 1 and 2 and suggested in Phase 3. Facilities should consider using every other court/field when possible to provide for additional space. This additional space can also all facilities to better plan ingress and egress paths for each designated space to limit the crossover of users arriving and leaving for activities.
- For events, facilities should with event organizers to develop schedules that reduces the amount of time individuals are on the property. This would include developing schedules where teams may play one game, rest one game, and play a second game before leaving the property.

SOCIAL DISTANCING

Facilities will need to develop systems that provide people with visual guidance for social distancing rules. In accordance with CDC recommendations, all persons should maintain a distance of six (6) feet between them when possible. Specific measures for social distancing will need to be established based on the specific needs and designs of the facility. Social distancing protocols will need to be a combination of educating visitors, visual systems to assist with visitors, and enforcement.

Facilities Subcommittee Full Report & Recommendations

Operational Recommendations > Social Distancing *continued*

Line Management

- Lines will form at various parts within a facility. Some areas for queuing are at entrances, food service area, restrooms, check-in/registration areas. Facility operators should identify all areas within the venue that there are potential for lines and place visual markers indicating 6 foot spacing. These markers may be tape on the ground, painted lines, signage, or other means to indicate the proper space between people in line.

Spectator Management

- During Phase 1 and 2, venues are recommended to limit the number of spectators or non-participants in the venue. Spectators should be limited to one per participant. Limiting the number of non-participants will allow venues to maximize the capacity limits for participants in the activities. Venues can ease these restrictions during later Phases as needed.
- Where possible seating areas should be removed or closed off to spectators to enable social distancing. Venues should also place markings in designated spectator areas that are 6 feet apart to provide spectators with clearly identifiable areas where they may stand or sit to watch the activities taking place. Spectators should be placed in separate area from participants. Venues with limited space should restrict the ability of spectators from bringing in their own seating. Spectator areas should be located at least 10 feet from the player area to accommodate proper distance for players that leave the field/court of play during the game or activity
- Spectators should be instructed not to touch any ball or playing equipment that leaves the field of play. Spectators should provide temporary adequate distance from any players that leave the playing area during the course of the activity to retrieve a ball, equipment, or just through the course of motion from playing.
- Spectators for indoor events should be required to wear face coverings/masks for the entirety of their time while inside the building per Executive Order from the Governor. It should be recommended for spectators for outdoor activities to wear masks while at the venue.
- It should be communicated to user groups that visitors over the age of 65 or those with underlying medical conditions are recommended not to visit the facility.

Participant Management

- Participants that are not actively participating in the game, practice, training, etc. at any given time should be placed in a designated area away from spectators. Inactive participants should adhere to all social distancing, medical, and hygiene policies established for the venue. Bench areas and dugouts should be expanded to allow for adequate space to allow for 6-foot separation of inactive players. For indoor events, inactive participants will be required to wear face coverings/masks while not active. Active participants will be advised that face coverings or masks are recommended during the activity unless the face covering cannot feasibly be worn due to the activity or if it poses a health risk to individual during the activity.

Safety Officer

- Facilities should designate a Safety Officer during all times which activity is taking place on the property. The Safety Officer, with assistance from staff, shall enforce all policies, procedures, and rules made in accordance with the facility's COVID response. Persons not adhering to the rules, policies, and procedures should be asked to leave the facility. If participants or spectators in each Designated Space refuse to adhere to the rules, policies, and procedures, all activity in the Designated Space for that user group should be terminated immediately.

Facilities Subcommittee Full Report & Recommendations

Operational Recommendations > Social Distancing *continued*

Bathrooms

- Multi-stall bathrooms at venues should be controlled by staff to limit the number of individuals that may enter the bathroom at a given time. Lines for bathrooms should be marked with 6-foot distance markings to maintain social distancing procedures. Restrooms should be closed on a periodic schedule for full cleanings. Periodic closing scheduled will vary between venues based on the volume of use. Low volume use restrooms should be cleaned at least 3 times daily. High volume use bathrooms should be cleaned at least every hour. Venues that utilize temporary bathrooms (spot-a-pots) should coordinate with vendors to increase the normal cleaning schedule for these units, as well as the installation of hand sanitizer in each unit. Temporary hand washing stations should be installed next to all temporary bathroom locations.
- Bathroom areas that include a water fountain should have the water fountain disabled to limit community use water sources. Hand sanitizer stations should be located at all bathroom locations. Where possible no touch flushing, sink, and hand dryer fixtures should be installed to limit high contact surfaces.
- Masks should mandatory for all people entering a bathroom.

Food Service

- Venues should modify food service at the facility. It is recommended to move to allow only prepackaged food sales only. Venues should eliminate, if possible, all contact touch points in food service. This includes the elimination of fountain drinks, community use condiments, napkin, and utensil dispensers, etc. Venues that utilize menus should move to disposable menus. All food service products should be distributed at the point of sale location. When possible, venues should use touchless ordering technology as well as cashless payment technology.
- Water fountains at the venue should be disabled and covered to prevent use. Facility should ban all common water/drink sources such as large dispensing coolers (i.e. Gatorade™ coolers). User groups should be notified in advance that they must bring their own water or drinks to the venue. Personal water bottles should be clearly marked with the owner's name and sharing of water bottles should be highly discouraged.

Merchandise Sales

- Venues should modify merchandise sales at the facility. It is recommended to move to full-service sales system that eliminates pre-sales contact with merchandise. Venues should eliminate, if possible, all contact touch points in merchandise service. It is recommended that all merchandise be moved behind counters or tables and distributed only by venue/merchant staff. Venues should prohibit trying on apparel and make all sales final with no returns or exchanges. When possible, venues should use touchless ordering technology as well as cashless payment technology.

Equipment and Common Areas

- Facilities should evaluate the type and amount of equipment provided by the facilities for activities. Facilities should limit the amount of equipment that is provided to user groups. They should also provide only that equipment that cannot be provided by user groups. Facilities will need to clean all common use equipment more frequently. Increased cleaning needs to be accounted for when scheduling facility use. Common use equipment should be cleaned between use by each user group and thorough sanitizing should be completed every day on common use equipment. Equipment cleaning should not be limited to playing equipment but should also include equipment used by officials such as scoreboard consoles, clipboards, scorer's tables, or other areas used by officials and coaches. It is recommended that facilities no longer let outside user groups store equipment at the venue and require them to take out all of their equipment after each use.

Facilities Subcommittee Full Report & Recommendations

Operational Recommendations > Social Distancing > Equipment and Common Areas

continued

- Common areas of a venue, including waiting areas, any permanent seating areas that cannot be closed off, bathrooms, doors, railings, switches, etc. should be cleaned throughout the day and sanitized at the end of every day. High traffic areas and high touch surfaces should be cleaned more frequently. Areas on and around the playing areas should be cleaned between each use. These areas include doors to enter rinks and courts, glass and doors in bench areas, gates, windows, goal posts, basketball rims, benches, or other areas specific to the venue.
- Venues that use utility vehicles such as golf carts, UTVs, and ATVs should assign vehicles to specific and single users. At the conclusion of each user by the designated user the vehicle should be thoroughly cleaned and sanitized before use by another assigned user. Vehicles should be marked in a manner to avoid mistaken confusion by different users.

Staff

- All venue staff must be trained on all new procedures, protocols, and rules prior to reopening. Staff should also receive training from a medical professional on identifying signs and symptoms of COVID-19. All staff should be required to wear face coverings or masks and gloves while on duty. Prior to the starting of each shift, staff should have their temperature checked using an FDA/CDC approved touchless thermometer. It is recommended that venues increase staff levels to account for additional cleaning requirements as well as enforcement of COVID precautionary policies, procedures, and rules. In recognition of the mental and physical stress that wearing a mask for long periods can cause, venues are recommended to provide more frequent breaks for staff. When feasible, staff should be provided with private outdoor area in order to remove their masks and face coverings in a safe environment.

Medical/Hygiene

- Sports facilities should develop a medical and hygiene plan in accordance with current CDC, Health Department, and medical advice. When possible, these medical plans should be submitted to their local Department of Health for review prior to opening. Medical plans for the venue should include all social distancing rules, cleaning procedures, staff training, and staff protocols. It is recommended that all venues implement a policy that requires masks for all persons in an indoor venue except those participating in the sports activities. Person attending or participating in outdoor sports activities should be advised that it is recommended that they wear a mask, but it is not required. Hand sanitizer dispensers should be located throughout the facility and checked frequently for refills. It should be communicated to user groups that person over the age of 65 and those with underlying medical conditions are advised not to visit the venue.
- Facilities should also establish protocols on how to deal with a visitor that is showing symptoms of COVID. Protocols should include a designated space to isolate the individual from the public, contact protocol with local public health official, and transportation plan to nearest medical facility capable of assisting the individual. A communication plan with local fire and rescue services should be established prior to reopening. Evacuation plans should be updated to allow for the safe evacuation of people from the facility while also limiting contact between people and maintaining social distancing.

Legal

- All organizations and venues should consult with legal counsel regarding liability concerns prior to reopening a venue. It is recommended that venues require waivers from all participants and spectators entering the property. Waivers should be cleared by legal counsel prior to implementation. When feasible, venues should institute procedures to acquire names and contact information of all visitors to the property, through waivers, sign-in, issued credentials, or other means.
- While it is recommended to discourage persons over the age of 65 or with underlying medical conditions not to visit the venue, denying entry on these grounds may be classified as discrimination.

Facilities Subcommittee Full Report & Recommendations

Operational Recommendations > Social Distancing *continued*

Communication

- Regardless of the rules, policies, and procedures adopted by a facility they must be properly communicated to be effective. Venues should develop a comprehensive communication plan in order to disseminate information to visitors and users group to try ensure compliance and understanding of these changes.

Signage

- Signage should be placed throughout the venue with the appropriate information based on the location and purpose. Signage that should be included:
 - » Bathroom doors with information and hygiene, limitations on persons in bathroom, cleaning schedule
 - » Food service area explaining ordering procedure, limitation on items, explanation on limitations of utensils, condiments, etc.
 - » Markings on floor/ground for social distancing space
 - » Rules about face coverings
 - » Rules on limitation on number of spectators
 - » Emergency procedures
 - » How to contact safety officer
 - » Ingress and Egress information

Social Media

- Venues should utilize social media to inform visitors of rules and policies that will affect them that are important to know prior to arrival. This may include a link to fill out or print the waiver, the need to bring their own water bottle, limitation on the number of spectators.

Website Messaging

- The facility website should include all new information, policies, rules, and procedures. The website should include any messaging that was sent via social media, email, and on signage. The website should have a comprehensive list of all information and messaging in an easy to navigate method.

Email Messaging

- Facilities, when possible to distribute via email all information related to COVID responses, rules and procedural changes, or any other information necessary for user groups visiting the property.

Communication to User Groups

- Venues may not have access to all end users of the facility. Facility operators should work with user groups to distribute messaging to their membership, attendees, and staff to communicate changes in policies and procedures.

Re-Opening Operational Checklist

In order to make their staff and their guest experience more comfortable and as safe as possible, focus:

- Establishing social distancing guidelines
- Consistent sanitizing procedures

Each facility has unique elements, and therefore should establish procedures to fit their operation. It is suggested that facilities build these procedures with the recommendations below as a baseline.

Facilities Subcommittee Full Report & Recommendations

Re-Opening Operational Checklist *continued*

- Review federal, state, and local health department recommendations, and integrate them into your plan. taking into account OSHA and CDC recommendations.
- Ensure all licenses, inspections are up to date before opening.
- Identify possible exposures and health risks to employees while following HIPAA guidelines, and report up through management.
- Establish protocols to account for possible exposure in the workplace, including requiring workers to self-disclose to their HR departments if they have tested positive for COVID-19 or been exposed to someone who has tested positive within the last 14 days.
- Establish new training protocols for staff for social distance guidelines, particularly for common staff areas.
- Utilize a capacity calculator to identify maximum humans within each area, as well as diagrams that show proper spacing. Capacity approach:
 - » Install clear markers to queue lines that establish social distancing prior to reopening.
 - » Create a "Guest Flow" plan of reworked queue lines for entry, and post "Guest Flow" chart plan in public and staff areas.
 - » Create social distance information graphic or videos and display throughout for visitors to view easily.
 - » Provide seating area consistent with social distancing by eliminating/closing select tables, seating or spreading them out to allow for significant spacing, at least six feet from the edge of the next edge, and seating no more than six to a table.
 - » Utilize cones, field paint, etc., to physically mark spacing where applicable
 - » Consult venue diagrams created to help manage spacing of guests
- Provide accessible sanitizing/cleaning locations throughout the facility (include restrooms, food service areas, POS stations, welcome areas, screening areas, high traffic areas, and other locations as needed,) taking into consideration tables, buttons, handles and other multi-touch surfaces.
- Post signage throughout, letting visitors know the procedures they should follow. Utilize an FAQ online, to prepare visitors prior to coming.
- Enhance previously available protocols of PPE for staff by requiring mask use where appropriate during guest facing shifts.
- Establish procedures for third party workers that enter the facilities to wear proper PPE while performing their duties. appropriately.
- Encourage cashless payment methods through online payment/gift card pre-purchase/or credit card payment only to be used for ticket purchase or to purchase items while inside the facility.
- Establish procedures for food delivery where applicable
- Identify a "Safety Team" to serve as a communication resource so that employees and customers have access to accurate information throughout the crisis, as well as to be very visible in cleaning and sanitizing duties during times of operation.
 - » Conduct training on cleaning protocols and frequency
 - » Conduct training on the safe use of PPE for staff
 - » Conduct training on situations where guests do not adhere to venue guidelines
- Ensure exits are set to avoid bottlenecks and large gatherings.
- Continue to meet Health Department standards for sanitation practices.

Facilities Subcommittee Full Report & Recommendations

Re-Opening Operational Checklist *continued*

- Provide seating area consistent with social distancing by eliminating/closing select tables, seating or spreading them out to allow for significant spacing.
- Communicate with event owners / user groups about all venue guidelines and procedures related to COVID-19 response.
- Close locker rooms and showers
- Implement screening for each team member to be executed prior to each shift. The screening will consist of the following:
 - » Team members should be sent home if they have a temperature of 100.4 or higher and/or any symptoms of contagious illness such as vomiting, cough, etc.
 - » Team members certify in writing that they are not – to their knowledge – in a high-risk category for illness, or symptomatic.
- Accommodating leave policies are in place, so team members do not feel pressured to come to work if they are sick.
- Remind team members to report any illness to a manager, especially if sick with fever, cough, muscle aches and pains, sudden changes in smell or taste, sore throat, and/or shortness of breath.
- Provide training to staff on proper use of personal protective equipment.
- Provide masks for all team members to wear while at the venue.
- Provide sanitizing stations such as a wash basin with soap and/or bottle of hand sanitizer, accessible to team members.
- Provide gloves for team members to wear at all times when handling food and while cleaning the venue. All team members should have access to gloves to wear for any other duties where they feel more comfortable doing so.
- Stagger shifts, breaks, and meals, in compliance with wage and hour laws and regulations, to encourage social distancing. Provide a private safe break area outdoors where team members can remove PPEs
- **Require all team members to report any illness to a manager and require notification of COVID-19 positive case in team members household.**
- **Prohibit congregating of 10 or more people in break rooms or common areas and limit capacity of such areas to allow for safe social distancing.**
- Incorporate OSHA and local Health Department standards:
 - » Limit customer seating capacity in the food areas to allow:
 - › Tables spaced at least 6 feet apart
 - › Limited seating at tables for no more than 6.
 - › If removing tables is not feasible (i.e. booths), then place a barrier making the space physically unavailable for use
 - » Mark waiting areas so that social distancing standards are met.
 - » Consider options to order and deliver food by telephone or other electronic means
 - › (options can include a text system to alert guests of available seating, an intercom system, or only one member of a party being allowed to wait in the waiting area)
 - » Hand sanitizer available at cashier stations
 - » Menus are digital or single use.
 - » Consider installing plastic barriers to protect cashiers.

Facilities Subcommittee Full Report & Recommendations

Re-Opening Operational Checklist *continued*

- » Frequently sanitize all front-of-house contact surfaces including door handles, screens, phones, pens, keyboards, and other areas of hand contact.
- » Sanitize all chairs and tabletop items, including condiments after each table turns.
- In addition to normal standards, team members in concessions areas are required to wash their hands frequently, not less than every 30 minutes when preparing food. Team members handling prepared food will wear gloves. Face masks will be worn when required by the local Health Department.
- Kitchen are thoroughly cleaned with sanitizing solutions daily.
- Eliminate self-service food areas if possible.
- **Display signage about handwashing and hygiene techniques at strategic locations.**
- Consider providing vending machines where feasible for both food and beverages to accommodate guests who prefer “touchless” food service

Sample Messaging

SAMPLE SOCIAL MEDIA STATEMENTS

- [Facility Name] is proud to be a partner to our community as we all come back stronger than ever. We are preparing to welcome guests back to our facility and want you to know that we are committed to providing a safe and clean venue for you and your family to visit. Our facility is implementing CDC guidelines and industry best practices to encourage safety, including social distancing, wearing masks, and other precautions. Please see our website: www.urlhere.com for more information.
- We're opening soon! In light of the ongoing pandemic, we have implemented new procedures to encourage preventative health and guest safety. Our employees will be wearing masks and gloves, washing their hands regularly, and practicing social distancing. We've also established a rigorous cleaning and sanitizing schedule. As we welcome guests back to [facility name], we ask that visitors also follow guidelines set forth by the CDC, state, and local governments.
- We are preparing to re-open our facility for limited programming and look forward to welcoming players and families back very soon. Please remember that you can help us make our facility safer by taking measures to protect your own help and by being respectful of others. If you are not feeling well, are symptomatic or know that you have any communicable disease or illness, please follow CDC Guidelines and stay home!
- We are OPEN! Our team has been working hard to provide you a safe and clean facility for you and your family to play, eat, and spectate. We have implemented new safety and cleaning procedures in preparation for your arrival and will be encouraging social distancing and following other guidelines as recommended by the CDC and your local and state governments. Please view our website more information.
- We're back in business and ready for action! To prepare for your visit, please see all our enhanced safety and cleaning policies online: www.urlhere.com
- WE'RE OPEN! We have been preparing, cleaning, and working hard to prepare to welcome you to our venue and have implemented many recommendations and guidelines as set forth by the CDC and your state and local governments. Prior to your visit, please take a moment to review on our website www.urlhere.com.

Facilities Subcommittee Full Report & Recommendations

Sample Messaging *continued*

SAMPLE RESPONSES TO FAQ'S ON SOCIAL

- What are you doing to keep guests safe?
 - » Guest safety is our number-one priority. In light of the COVID-19 pandemic, our team has implemented many new policies and procedures to keep our guests safe as we re-open to the public, including additional cleaning services, wearing masks, maintaining social distancing, and others as recommended by the CDC and your state, and local government.
- Do we have to wear a mask? / Why are staff wearing masks?
 - » Facial Coverings are required for all person entering a building including bathrooms. Guests at outdoor fields are recommended to wear facial coverings. Facial Coverings are currently recommended as a safety precaution by the CDC. For guidance as to when to when a facial coverings and what type of covering will best protect you and your family please refer to the most recent CDC guidance <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>
- Will the facility be taking temperatures or testing for COVID?
 - » Our facility may ask you and your family screening questions at the entrance to encourage awareness of CDC recommendations and respect for the health and safety of other facility guests. Facility employees will be undergoing a separate screening process before they begin work each day. Local law enforcement and health care professionals may be engaged to assist any guest that has questions or concerns about the CDC Guidelines and/or adherence to state and local laws.
- Is the venue still selling food?
 - » Yes! As we welcome back our guests, we will also have our standard food and beverage options available. In light of COVID-19, we have implemented enhanced cleaning and safety procedures in our food preparation and service areas. For additional details, see our website www.urlhere.com
- If someone is not respecting social distancing or displays symptoms, what will you do?
 - » We ask all facility to adhere to a Responsibility Code to participate in activities at the facility. Failure to abide by the Facility Responsibility Code could result in your removal from the facility. Local law enforcement will be engaged as needed to explain to guests the potential consequences of not following any applicable CDC or state or local guidelines.
- I can't believe you are open; this is so irresponsible – and other negative comments.
 - » We understand that in this extraordinary time, there are many opinions as to when and how facilities should re-open. We are carefully monitoring this situation and our asking that our guests be respectful of others and the wide range of opinions regarding public health and the Coronavirus. Ultimately, you are the best protector of your own health and if you are concerned about your own health and how attending any public event might impact you, we encourage you to consult with a medical professional and make your own decision as to whether or not to attend.

Facilities Subcommittee Full Report & Recommendations

Sample Messaging *continued*

SAMPLE SIGNAGE

Facility Area	Type	Language	Location(s)
General Facility/ Park	A-Frame/Laminated signage/ Poster	Stop Do Not Enter if you have the following: Fever, Cough, Shortness of Breath and Loss of Taste/Smell are all symptoms of COVID 19	Multiple Views - Outside of all building/Field Gate Entrances/Entrance doors/ Admission lines
General Facility/ Park	Floor Markers	Social Distancing Markers	F&B, Admission, Concession and Restroom lines
Restrooms	Vinyl Lettering	Wash hands for 20 Sec. with Soap and Water	Bathroom Mirrors
Diamond Fields	A-Frame/Laminated signage/ Poster	Dug Out Spacing Guidelines, Bleacher Spacing Guidelines	Dugouts and seating areas
Multipurpose fields	A-Frame/Laminated signage/ Poster	Bench Spacing Guidelines, Sideline Spacing Guidelines,	Team sidelines, spectator areas
Indoor Courts	A-Frame/Laminated signage/ Poster	Bench Spacing Guidelines, Sideline Spacing Guidelines, Capacity Guidelines	Team sidelines, spectator areas
Rinks	A-Frame/Laminated signage/ Poster	Bench Spacing Guidelines, Sideline Spacing Guidelines, Capacity Guidelines	Team sidelines, spectator areas
Party/Meeting Rooms	A-Frame/Laminated signage/ Poster	Spacing Guidelines, Room Capacity	Room entry doors and interior walls
Food and Beverage Areas	A-Frame/Laminated signage/ Poster	Directions for food ordering/pick-up procedures, Spacing guidelines, Instructions not to move tables in eating areas,	Back of House, Delivery Entrance/loading dock, Ordering area, seating area
Kitchen	A-Frame/Laminated signage/ Poster	CDC Food Prep Guidelines, Policy for hand washing & changing gloves, any employee experiencing COVID symptoms should notify and manager and not report to work	Back of house area, employee break room, kitchen area
Retail	A-Frame/Laminated signage/ Poster	Spacing Guidelines, Special cash handling/transaction procedures,	POS location, retail area entrance, various walls inside retail area
Employee Areas	A-Frame/Laminated signage/ Poster	CDC Employee guidelines, COVID training/teaching materials, Spacing and Handwashing Guidelines, State or Community Updates	Time clock location, break rooms, employee locker rooms

Facilities Subcommittee Full Report & Recommendations

Sample Messaging > Sample Signing *continued*

Facility Area	Type	Language	Location(s)
Offices	A-Frame/Laminated signage/ Poster	Spacing Guidelines, Any employee experiencing COVID symptoms....not report to work,	Time clock location, break rooms, employee locker rooms, office space, conference rooms
Website	N/A	Website COVID alerts cohesive with facility signage for easy recognition by guest, Event owner notifications/ graphics cohesive with facility signage, Landing or Splash page or banner link for Facility COVID policies or FAQs	Website
Social Media	N/A	Suggested responses to be provided by Marketing Team, Posts to include link to policies on website	Social Media Platforms



References & Sources

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Medical Subcommittee

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» https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/ReOpening_America_Cleaning_Disinfection_Decision_Tool.pdf. Last reviewed May 7, 2020.
- CDC Handwashing Guidelines. CDC.gov.
» <https://www.cdc.gov/handwashing/when-how-handwashing.html>
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- Criteria for Return to Work for Healthcare Personnel with Suspected or Confirmed COVID-19 (Interim Guidance). CDC.gov.
» <https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>.
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» <https://jamanetwork.com/journals/jamacardiology/fullarticle/2766124>
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» https://journals.lww.com/nsca-scj/Fulltext/2019/06000/CSCCa_and_NSCA_Joint_Consensus_Guidelines_for.1.aspx
- Maryland State Department of Education Model Policy for pre-season heat Acclimatization Guidelines for pre-season athletes.
» http://www.mpssaa.org/assets/1/6/Model_Policy_for_Heat_Acclimatization_Guidelines.pdf
- NATA Pre-return and Return to Campus Preparation and Communication Plan.
» https://www.nata.org/sites/default/files/icsm_return_to_campus_packet_covid19.pdf

GUIDELINES:

Current Guidelines-National/State

- NSCA: <https://www.nasca.com/education/tools-and-resources/covid-19-return-to-training/>
- NATA: https://www.nata.org/sites/default/files/icsm_return_to_campus_packet_covid19.pdf
- Parks and Recreation: <https://www.nrpa.org/our-work/Three-Pillars/health-wellness/coronavirus-disease-2019/slowing-the-spread-of-covid-19/>
- Aspen Institute: <https://www.aspenprojectplay.org/return-to-play>
- NCAA: <https://www.ncaa.org/sport-science-institute/core-principles-resocialization-collegiate-sport>
- USOPC: <https://www.teamusa.org/Coronavirus-Updates>
- CDC: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/youth-sports.html>
- Sports Cardiology: <https://jamanetwork.com/journals/jamacardiology/fullarticle/2766124>

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- Youth Sports-Maryland Commerce: <https://commerce.maryland.gov/Documents/BusinessResource/Youth-Sports-COVID-19-Best-Practices> (pdf)
- Play Sports Coalition- <https://docs.google.com/document/d/1k41ao3fbCDxahMk6oXTyIFeAor1ro0PY-JoRYN0j5oYQ/edit#heading=h.6d72kogstjg1>

CURRENT GUIDELINE-SPORTS SPECIFIC

- Dance-<https://www.danceusa.org/informational-papers>
- Golf: <https://www.pga.org/coronavirus-resources/Best-Practices-for-Golf>
- Gymnastics-<https://usagym.org/PDFs/About%20USA%20Gymnastics/covid/safereopening.pdf>
- Hockey: https://cdn4.sportngin.com/attachments/document/d8b1-2158869/Returning_to_the_Rlnks_05-05-2020_1_.pdf
- Lacrosse: <https://www.uslacrosse.org/blog/safe-return-to-playing-lacrosse-advisory-group-issues-first-weekly-brief>
- Rugby: <https://playerwelfare.worldrugby.org/covid-19>
- Youth Soccer: <https://www.usyouthsoccer.org/resources/return-to-activity-resources/>
- Swimming: <https://www.usaswimming.org/docs/default-source/coaching-resourcesdocuments/covid-19-team-resources/facility-reopening-plan-guidelines.pdf>
- Tennis-https://www.usta.com/content/dam/usta/2020-pdfs/20200421_USTA_COVID19_PlayingTennis-Safely-Players.pdf
- Track and Field- <https://www.usatf.org/covid19>
- Triathlon: https://www.teamusa.org/-/media/USA_Triathlon/PDF/Resources/Return-to-Racing-Recommendations-for-Athletes.pdf

Recreation/Parks Subcommittee

RESOURCES FOR RECREATION & PARKS PROFESSIONALS

State & National Agencies

- NRPA “Path to Recovery” Planning Steps
 - » <https://www.nrpa.org/our-work/Three-Pillars/health-wellness/coronavirus-disease-2019/path-to-recovery/>
- A particularly helpful resource is Part 3 of the Path to Recovery which includes the NRPA Facility & Program Risk Assessment and “Specific Questions that Should be Answered Prior to Reopening”
 - » <https://www.nrpa.org/siteassets/path-to-recovery-framework-assess-risk-nrpa.pdf>
- Maryland Strong: Roadmap to Recovery Plan:
 - » https://governor.maryland.gov/wp-content/uploads/2020/04/MD_Strong.pdf
- National Governors Association: Roadmap to Recovery
 - » <https://www.nga.org/center/publications/health/roadmap-to-recovery/>
 - » <https://www.nga.org/wp-content/uploads/2020/04/NGA-Report.pdf>
- Federal Guidelines: Opening Up America Again
 - » <https://www.whitehouse.gov/openingamerica/#criteria>
- Center for Disease Control (CDC): Support for States, Tribes, Localities and Territories
 - » <https://www.cdc.gov/coronavirus/2019-ncov/php/open-america/index.html>
- World Health Organization (WHO): Coronavirus disease (COVID-19) advice for the public
 - » <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

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Recreation/Parks Subcommittee *continued*

Sports-Related Agencies

- The Aspen Institute Project Play: Coronavirus & Youth Sports – How to Play During the Crisis
» <https://www.aspenprojectplay.org/coronavirus-and-youth-sports/webinars>
- Unites States Olympic & Paralympic Committee: Sports Event Planning Considerations PostCOVID-19
» https://usrowing.org/documents/2020/4/29/USOPC_Sports_Event_Planning_Considerations_V1.pdf
- Sports-United Against COVID-19: Safe at Practice / Safe in June / Safe After
» <http://www.sportsuac.com/>
- US Lacrosse Safe Return to Play Advisory Group
» <https://www.uslacrosse.org/blog/us-lacrosse-establishes-safe-return-to-play-advisory-group>

Summer Camp Related Agencies

- American Camp Association (ACA): Contingency Planning Framework for Camps
» <https://www.acacamps.org/resource-library/coronavirus/camp-business/contingency-planning-framework-camps>

Competition/Tournaments and Facilities Subcommittees

DIAGRAMS

Outdoor

- Diamond Sports
» https://www.triplecrownbaseball.com/uploads/1/0/9/8/109882988/social_distancing_ballfield_guidelines_050320.pdf

SOURCES

- Maryland Strong: Roadmap to Recovery Plan
» https://governor.maryland.gov/wp-content/uploads/2020/04/MD_Strong.pdf
- CDC Considerations for Youth Sports:
» <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/youth-sports.html>
- CDC Symptoms of Coronavirus:
» <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>
- CDC Guidance for Large Community Events and Mass Gatherings:
» <https://www.cdc.gov/coronavirus/2019-ncov/community/large-events/index.html>
- WHO Considerations for Sports
» https://www.sportseta.org/Portals/sportscommissions/WHO-2019-nCoV-Mass_Gatherings_Sports-2020_1-eng.pdf