**Queen City Rugby – COVID Return to Play Policy**

The COVID-19 pandemic is a global impact that requires diligence and respect. These guidelines are to ensure Queen City athletes display the utmost consideration for the direction of local health officials, and for possible recourse of return to play protocol across the greater Cincinnati community.

This document contains guidelines for establishing a minimal set of standards to assist Queen City Rugby

in resuming participation. Understand that while these recommendations are scientific and have been

constructed by a team of experts at USA Rugby, neither we nor anyone can guarantee prevention of illness or injury during athletic participation. There can be no guarantee of safety in a contact sport. This document does not supersede any state or federal guidelines in place for the COVID-19 pandemic. Appreciate, as the medical and scientific community learns more about COVID-19, these recommendations are subject to change. It remains important to continue to consult and follow the most recent CDC guidelines. Each person is responsible for implementing appropriate safeguards for resumption of play. Queen City Rugby is not liable for anyone who contracts COVID-19 while practicing or playing or participating in any manner.

**Task Force Structure**

* Queen City has created a task force on site to help coordinate an independent response using this document as a foundation for the minimum criteria. This action team includes the following individuals:
  + Athlete
  + Head Coach
  + Team Physician
  + Staff and volunteers

**Social Distancing**

* Social distancing will be encouraged at all times when possible (six feet at a minimum).
* Volunteers/staff will be limited to only essential personnel.
* Large social gatherings in any spaces will be discouraged.
* Virtual team meetings should take place when possible.
* When at practice or in competition, any unnecessary contact will be avoided, such as handshakes, high fives, fist bumps, or elbow bumps.
* Student athletes will sit every other seat on a bench. They will consciously stand six feet apart when not participating in a drill or activity that requires closer contact.

**Minimum Guidelines**

**Sanitization**

* All equipment will be cleaned between each individual use.
* When possible, athletes will not share gear and instead use their own personal equipment.
* Each athlete will have his/her own personal defined hydration container that is never to be shared.
* Hand sanitizer will be made available throughout the facility for use before, during, and after workouts.

**Personal Protective Equipment**

* Athletes, coaches, and staff will be strongly encouraged to use masks when in all spaces.
* Cloth face coverings are adequate (surgical or N95 masks, while also acceptable, are not necessary). The CDC website has complete references for mask specifications and maintenance. The garment should cover both the nose and mouth and allow for continued unlabored breathing.
* At all times, all coaches and staff will be encouraged to be masked 100% of the time.
* Wearing gloves has not been shown to decrease transmission of the virus. Recommendation is for frequent handwashing and avoidance of touching the face.

**Pre-participation Exams**

* Pre-participation exams will be spaced out by teams and limit the number of people in a space to the practitioner and individual getting screened. This can be accomplished by limiting the number of teams that can be screened in one day and doing the screens by appointment time, so you do not have large groups congregating waiting for their turn.
* COVID-19-specific questions will be included in the screen to include:

1. Have you tested positive for COVID-19?

2. Have you had any known exposure to a COVID-19-positive individual?

3. Have you been tested for COVID-19?

4. Have you had any new onset of cough or shortness of breath?

5. Have you experienced any recent febrile illness? (temp > than 99.5º F)

* The most recent medical evidence recommends consideration of cardiac testing if a student athlete has previously tested positive for COVID-19. This should be discussed with the team physician on a case-by-case basis.

**Daily Screening**

* Hand sanitizer will be required for all participants at practice
* Athletes, coaches, and staff should be screened daily with no-touch temperature checks and a questionnaire.
* A positive screen that would warrant further investigation would be a temperature greater than 99.5º F or a “yes” response to any of these three questions:

1. Do you have new onset cough or shortness of breath?

2. Have you had a fever or felt febrile?

3. Have you had known exposure to a COVID-19-positive individual?

**Acclimatization Phases**

As many athletes are deconditioned from the quarantine period, USA Rugby suggests a six-week acclimatization period in preparation for any season. This should occur in a phased and staggered manner to help prevent the potential spread of illness by the asymptomatic carrier.

**Phase One:**

Upon return, there will be a 14-day social isolation period where the athlete is in their dorm or

individual space. Throughout this period, there will be limited contact with any other individuals. If all

parties are in masks, it would be acceptable during this time to complete Physical Performance Evaluation testing and pre-season paperwork, but no workouts. During this time, the team will have virtual meetings.

In the course of phase one, a COVID-19 education module to educate player, coaches, and

staff about disease symptoms, spread, and prevention should be encouraged. We will utilize the CDC and the Hamilton County Health department numerous online resources that are simple and free to access.

**Phase Two:**

After the 14-day social isolation period and community disease load that is not rising, the team will be broken into groups of no more than 10 athletes. These groups will remain constant for the next two weeks. During this period, the players would be permitted to participate in non-contact workouts in their small groups. They should continue to wear masks when indoors and grab and go type meals should be provided. Continue to have all meetings on a virtual platform.

**Phase Three:**

After 14 days of small groups (10 or less) and community disease load that is not rising, the teams of 10

may be merged into groups of no more than 50 athletes who can now practice full contact. Social

distancing will be maintained at all other times such as in the weight rooms and locker

rooms.

**Phase Four:**

After the six-week period is complete and disease load in the community is declining, teams may then

combine to the total group for full practices and competition. Social distancing protocols will remain in place at all other times.

* Should an individual athlete become ill during any of the above periods, they should be immediately removed from the group, masked if not already, and isolated in their individual space.
* Testing for COVID-19 should be done
* If testing is positive, contact tracing should be initiated.
  + This tracing will identify those individuals who would have been within six feet of the sick athlete for more than 15 minutes while the person was symptomatic or within the 48 hours prior to becoming symptomatic.
  + To learn more about contact tracing, visit Centers for Disease Control and Prevention websites.
  + Those identified will need to be put in social isolation for 14 days and closely monitored for the development of symptoms. While testing of the asymptomatic contact may be available, it does not confirm the infection potential of that individual so cannot be relied on for return to play.
* The athlete with the positive COVID-19 test may return to social interaction 72 hours after resolution of symptoms, including but not limited to: fever (without the use of fever reducing medications), cough, shortness of breath, AND at least 10 days have passed since symptoms first appeared according to CDC guidelines. Emerging evidence in the field of cardiology recommends a 14-day convalescent period from the start of symptoms prior to starting back to strenuous activity and consideration of cardiac testing. A COVID-19-positive athlete should not be returned to play without evaluation and clearance documentation by a designated physician.

**Competition and Travel Considerations**

* Competition and travel will be considered and planned prior to the onset of the season.
* There will be global agreement that all ill athletes will be held from participation no matter the circumstances.
* Athletes and clubs will need to be willing to share information regarding potential positive cases and exposures.
* Travel should be limited and when possible done by bus or car.
  + Social distancing should be maintained, including masking.
  + When on a bus, social distancing is needed with no two athletes sitting in the seats next to each other.
  + Preparations should be made for limited stops when en route (such as prepackaged meals).
  + Overnight stays should be avoided when reasonable with game schedule. Games should be scheduled in groups in a geographic area when travel is necessary.
  + If an overnight stay is necessary, recommendation is for no more than two people in a room with their own sleeping space.
  + Out of conference play will be eliminated this season.