

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

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Updated Guidance for the Operation of Interscholastic, Youth and other Amateur Sport Activities during the COVID-19 Pandemic

This guidance has been updated as of January 10, 2022 for the 2021-2022 Winter sports season currently underway. These updated recommendations are made in consideration of the circulation of the highly transmissible Omicron variant of SARS-CoV-2, recent trends in COVID-19 community transmission in the state, and recently updated quarantine and isolation guidance from CDC. DPH will continue to monitor pandemic metrics and will issue updated guidance if/when they are necessary and appropriate.

Introduction

In the interest of prevention of COVID-19 disease, the Connecticut Department of Public Health (DPH) is offering revised guidance for the continued operation of sports activities for private, municipal, and interscholastic youth and adult sports leagues.

COVID-19 Vaccination

Vaccination is currently the most important and effective strategy for preventing COVID-19 infections and transmission during athletic activities. Athletic organizations should strongly encourage all eligible participants to get fully vaccinated against COVID-19 (i.e., 2 weeks after the 2nd dose of Pfizer or Moderna mRNA vaccines or the single dose of Johnson & Johnson vaccine), and to receive a booster dose when eligible, to provide the best available protection for themselves, their families, and their communities. Vaccination can help athletes, coaches, and officials avoid interruptions and/or cancellations of athletic activities because, unlike unvaccinated or partially vaccinated individuals, fully vaccinated athletes, coaches, officials, and other participants:

- no longer need to quarantine after exposure to a known COVID-19 case if they remain asymptomatic
- do not need to be included in regular screening testing programs for COVID-19

Despite the availability of COVID-19 vaccines for individuals as young as 5 years old, and individuals as young as 12 years old being eligible for booster vaccine doses, many vaccine-eligible youth will not be

fully vaccinated during the Winter sports season. The risk of COVID-19 transmission among these participants and any at-risk family members remains significant. Although a previous assessment was made that would have allowed fully vaccinated athletes, coaches, and officials to participate in contests without wearing a mask, due to the rapid emergence and significantly increased transmissibility of the new Omicron variant of SARS-CoV-2, DPH is now advising that **masking during all athletic activities (including competitions) should continue for all participants, regardless of vaccination status**. DPH will continue to evaluate COVID-19 risks throughout our state and region and will make changes to this guidance as necessary and appropriate.

DPH advises that athletic program administrators can help protect their participant families by **hosting vaccination events**. DPH and the Connecticut State Department of Education (CSDE) have developed a useful vaccine toolkit ([#Vax2SchoolCT](#)) to assist with the planning and execution of vaccine clinics for students, staff, and their families in schools, however this toolkit can be similarly useful to athletic organizations if they are considering similar vaccination events at their facilities.

Risk Categorization for Various Sports

DPH has been consistent in the assertion that, by their nature of play, the environment in which activities take place (e.g., indoors vs. outdoors), local, statewide, and regional community rates of COVID-19, the vaccination status of participants, and other factors, certain sports are more likely to promote exposure to the virus that causes COVID-19 (SARS-CoV-2) through aerosol-sized and larger respiratory droplets. The Centers for Disease Control and Prevention (CDC) recommends consideration of several different variables in assessing the potential risks for COVID-19 spread, including:

- Community levels of COVID-19
- Vaccination status of participants
- Level of intensity of activity
- Physical closeness of players
- Length of time that players are close to each other or to staff
- Setting of the sporting event or activity (e.g., indoors vs. outdoors)
- Size of the team
- Ability to engage in physical distancing while not actively engaged in play (e.g., during practice, on the sideline, or in the dugout)

COVID-19 Mitigation Strategies

There are [several strategies](#) that can be implemented to impact the risk considerations listed above. To help facilitate compliance with mitigation strategies and communicate expectations to participants and their families, **Athletic Directors, athletic club organizers, and facility operators** should:

- develop and implement **specific written protocols** for the COVID-19 prevention strategies to be used during practices and contests and provide those protocols, along with a **point-of-contact**, to the appropriate local health department

- **educate coaches, athletes, and parents** about the risks of COVID-19 spread during athletic activities and the need for strict compliance with protocols, including requirements for quarantine/isolation of cases and close contacts and the continuous and correct wearing of a multilayer cloth or disposable mask that completely covers the nose and mouth
- keep **detailed rosters** of participants for all practices and games with appropriate contact information and make that information available to health officials upon request for the purposes of contact tracing
- stress the importance of information-sharing with health authorities performing contact tracing and make it clear to coaches and participant families that **cooperation with contact tracing is a requirement** of participation with their athletic organization
- consider **specific rule changes** designed to **reduce the frequency, intensity, and duration of contact** between participants
- emphasize the need to **limit team-based group activities and gatherings** (e.g., pre-game meals, team parties, etc.) in order to reduce the risk of a team COVID-19 outbreak that will affect the ability to continue to practice and play

Mask Wearing

An appropriate mask is one that completely covers the nose and mouth, is worn directly on the face (i.e., not attached to a helmet or other equipment), and fits closely without significant gaps or openings. DPH currently advises individuals that **the wearing of masks by all individuals, regardless of vaccination status**, when interacting with other individuals in any indoor setting is the best way to prevent COVID-19 transmission in these settings.

Although a previous version of this guidance indicated that, based on community case rates and the predominantly circulating variants at that time, fully vaccinated athletes, coaches, and officials could be allowed to participate in contests without wearing a mask after December 23, 2021. However, at this time due to the rapid emergence and significantly increased transmissibility of the new Omicron variant of SARS-CoV-2, DPH is now advising that masking during all athletic activities should continue for all participants, regardless of vaccination status.

Masks should be worn at all times while participating in any athletic activities indoors by all participants, including during competitions, practices, while sitting in bench areas, while spectating, and during entry and exit. In addition, masks continue to be required on buses in accordance with the Federal Order (CDC) requiring mask use on public transportation, including school buses. With the current circulation of a more transmissible variant of SARS-CoV-2, and the large number of children and adults in our state who have not yet received a booster dose of COVID-19 vaccine, the continuous and correct wearing of masks at all times during all athletic activities is more important than ever. Coaches, officials, and athletic organizers should take steps to ensure that masks are not only worn by all participants at all times, but worn correctly (i.e., completely covering the nose and mouth).

Due to the risk of entanglement and choking, athletes participating in certain athletic activities (e.g., a wrestling match, swimming or diving events, indoor track jumping events, cheer/dance/gymnastics stunting) may engage in these contests without a mask regardless of vaccination status.

Table: Guidance for Masking during Youth Athletic Activities for Certain Winter Indoor Sports

Sport	Masking Guidance
Basketball	Masks required in all settings indoors.
Ice Hockey	Masks required in all settings indoors.
Indoor Track (Running)	Masks required in all settings indoors.
Indoor Track (Throwing/ Jumping)	Masks can be removed temporarily during active jumps/throws in competition settings; required at all other times indoors.
Wrestling	Masks should not be worn in-match or during practice while actively grappling; masks required in all other settings (non-grappling practice, sidelines, bench, locker rooms, etc.)
Swimming/Diving	Masks should not be worn in the water; masks required in all other settings (dry land practice, sidelines, bench, locker rooms, etc.)
Cheerleading/ Dance	Masks required during competitive routines and in all other settings (practice, sideline cheer, bench, locker rooms, etc.); masks may be removed temporarily during stunting/tumbling but must be immediately replaced
Gymnastics	Masks should not be used during competition or practice on apparatus or while tumbling; -masks required in all other settings (practice, sideline cheer, bench, locker rooms, etc.)

Athletic league, club, and team organizers are responsible for ensuring that participants (including spectators) **comply with mask wearing** guidelines at all times. Athletic program administrators should also be aware of any **local mandates regulating the use of masks** inside certain facilities within individual towns or jurisdictions, advise participants of existing regulations, and enforce compliance with local rules during their athletic events.

Although current masking Orders allow for exemptions from mask wearing when a healthcare provider attests that an individual currently has a medical condition for which wearing a mask would pose a significant risk, athletic organizations should discuss, in consultation with their medical advisors and general counsel, under what conditions (if any) an individual who is not fully vaccinated would be allowed to continue to participate in activities without a mask.

As athletics are optional activities, can be highly aerobic with increased respiratory droplet generation and spread, and most involve frequent close and/or direct contact, unmasked individuals engaged in athletic activities in indoor settings can pose a significant increased risk for transmission of COVID-19 to other participants. As such, **DPH advises that unmasked individuals should not participate in indoor group athletic activities unless all other mitigation strategies can be reliably and consistently implemented** (e.g., ensuring individuals are fully vaccinated, maintaining increased distancing and controlling the movement of unmasked individuals, screening testing one or more times per week, increased ventilation, daily symptom screening, etc.).

Quarantine, Isolation, and Other Actions after Exposure

With regard to COVID-19 *quarantine* and *isolation*, these terms are used to describe different situations in which a person is separated from interactions with others to prevent the spread of COVID-19. **Quarantine** is a strategy used to prevent transmission of COVID-19 by keeping people who do not have symptoms but have been in [close contact](#) with someone with COVID-19 separated from others because of the possibility that they may have been infected. **Isolation** is the practice of separating people with confirmed or suspected COVID-19 (e.g., people who test positive or have symptoms that are associated with COVID-19) away from those without COVID-19 until they are no longer likely to infect others.

CDC has recently published [new guidance](#) for individuals who have either tested positive for COVID-19 or have been identified as a [close contact of a known COVID-19 case](#). In addition, DPH recently updated guidance for PreK-12 schools with a greater focus on more immediate symptom recognition, isolation, and quarantine of close contact who are not fully vaccinated. As such, DPH advises the following for athletic activities:

For individuals who develop ANY symptoms that could be associated with COVID-19

- **Immediately isolate** at home
- **Test** for COVID-19 (either a self-test or at a testing site)
 - If test result is **positive** or if no test is taken,

- continue isolation for **at least 5 days**. Return to team activities on day 6 or later only when fever-free for 24 hours and other symptoms are significantly improved.
- **wear a mask** when around other people for a full 10 days. Do not engage in athletic activities within 6 feet of others during which wearing a mask is not advised due to safety reasons (e.g., competitive wrestling) for a **full 10 days** (see Table above for winter sport-specific masking safety guidance).
- If test result is **negative**,
 - return to team activities when **fever-free for 24 hours** and other symptoms are significantly improved.
 - Continue to **wear a mask** around others until symptoms resolve.

For individuals identified as a close contact of a COVID-19 case and never develop any symptoms

- If **fully vaccinated** (i.e., 14 days after their final vaccine dose, with or without a booster dose), or fully recovered from COVID-19 in the prior 90 days:
 - **Quarantine is not required** away from athletics or other activities as long as a mask is consistently and correctly used.
 - **Test** 5 days after being notified of the close contact (*note: testing is not recommended for individuals who have recovered from COVID-19 within the prior 90 days, as a positive test result may be residual and not reflective of current infection*).
 - Share the test result with the individual responsible for managing COVID-19 protocols for the organization so that contact tracing can occur if needed.
 - **Wear a mask** when around others outside of your household for a full 10 days. Do not engage in athletic activities within 6 feet of others during which wearing a mask is not advised due to safety reasons (e.g., competitive wrestling) for a **full 10 days** (see Table above for winter sport-specific masking safety guidance).
- If **not fully vaccinated**, and have not had COVID-19 in the prior 90 days:
 - **Quarantine** away from athletic activities for a **full 5 days**.
 - **Test** for COVID-19 (either a self-test or at a testing site) on day 5 or later (*note: testing is not recommended for individuals who have recovered from COVID-19 within the prior 90 days, as a positive test result may be residual and not reflective of current infection*).
 - If test result is **negative**, return to team activities on day 6 or later.

- If test result is **positive** or no test is taken, continue isolation through day 10; return to team activities after 10 days assuming symptoms do not develop.
- **Wear a mask** when around others outside of your household for a full 10 days. Do not engage in athletic activities within 6 feet of others during which wearing a mask is not advised due to safety reasons (e.g., competitive wrestling) for a **full 10 days** (see Table above for winter sport-specific masking safety guidance).

Return-to-Play after COVID-19 Infection

Although the symptoms and disease course of COVID-19 in younger people appear on average to be somewhat milder than those of older individuals, there is the potential, and documented cases, of [severe disease complications](#) in people of all ages. In addition, it is not yet known whether the currently circulating Delta and/or Omicron variants, or other SARS-CoV-2 variants will affect children differently than what has been the experience to date. Furthermore, the long-term health effects and impacts on organ systems function resulting from even mild or asymptomatic COVID-19 disease is still unknown, although there have been some studies implicating [blood clotting and cardiac effects](#) as potentially under-recognized longer-term sequelae. As such, DPH recommends that all youth athletes receive health screening and clearance from a healthcare provider prior to resuming athletic activities after recovering from COVID-19. Post-COVID athletic health screening and a phased approach to a return to athletic activities should incorporate the American Academy of Pediatrics’ (AAP) guidance for [Return to Sports and Physical Activity](#).

Out-of-State Competition

Currently, areas of “substantial” or “high” COVID-19 transmission risk ([as defined by CDC](#)) are widespread throughout the country. As such, DPH recommends that athletes, coaches, and other participants **who are not fully vaccinated refrain from travel out-of-state to participate in athletics** at this time. DPH recommends that those teams or individuals choosing to travel outside of Connecticut for the purposes of engaging in athletic activities follow all of the current CDC guidelines for [Travel during COVID-19](#).



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