

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 updated guidance is being released for the 2021 Fall sports season. These recommendations are made in consideration of the circulation of the more transmissible Delta variant of SARS-CoV-2. 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 (i.e., 2 weeks after the 2nd dose of Pfizer or Moderna mRNA vaccines or the single dose of Johnson & Johnson vaccine) against COVID-19 to protect themselves, their families, and their communities. Vaccination can help athletes, coaches, and officials avoid interruptions and/or cancellations of athletic activities because, unlike unvaccinated 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

Currently, no COVID-19 vaccine is approved for use in children younger than 12 years old, and many vaccine-eligible youth will not be fully vaccinated for the start of the Fall sports season. The risk of COVID-19 transmission among these participants and any at-risk family members remains significant.

DPH advises that athletic program administrators can help protect their participant families by **hosting vaccination events**. DPH and the Connecticut State Department of Education 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
- 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

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. Currently, areas of “substantial” or “high” COVID-19 transmission risk ([as defined by CDC](#)) are widespread throughout our state and region. As such, **DPH currently recommends that masks be worn by all individuals, regardless of vaccination status, when interacting with other individuals in any indoor setting, including during any athletic activities indoors.** In addition:

- 1) In accordance with Governor Ned Lamont’s current [Executive Order 13A](#) (issued on August 5, 2021) regarding mask use for the prevention of COVID-19, masks **must be used** during **indoor** athletic activities by **all participants who are not fully vaccinated** (i.e., any coaches, athletes, officials, spectators, etc. who are not at least 14 days past their second dose of Pfizer or Moderna vaccine or their first dose of Johnson & Johnson vaccine) **at all times**. *Of note, organizers of any athletic activity involving children younger than 12 years old should plan for continuous mask wearing by all participants during any indoor athletic activity, as there is currently no COVID-19 vaccine approved for these children.*
- 2) The current [DPH Commissioner’s Order](#) likewise indicates that, for athletic events that take place **inside any public or non-public PreK-12 school facility, masks must be worn indoors by all individuals at all times**, regardless of vaccination status. This includes all athletes, coaches, and officials (even during active play), as well as any spectators or other individuals inside the facility.
- 3) A [Federal CDC Order](#) requiring mask wearing by **all individuals on public transportation** conveyances remains in place. Athletic organizers planning team travel using public or chartered transportation should be aware of this order and enforce masking by all participants, as necessary.
- 4) 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 any existing regulations, and enforce compliance with those local rules during their athletic events.
- 5) In addition to universal mask wearing during indoor athletic activities, DPH recommends that athletic organizers consider continuing mask use during **outdoor athletic activities** by all participants in situations **where participant groups are likely to be unvaccinated** (e.g., during activities involving children less than 12 years old, where a team is known to have a large number of participants remaining unvaccinated, etc.):
 - a. **during active play** for those sports where the level of intensity of activity (highly aerobic), physical closeness of participants (consistent direct contact), and/or length of time of the activity increase the risk of droplet transmission, and/or
 - b. when **appropriate distancing cannot be reliably and consistently maintained** (e.g., inside dugouts, bench areas, during team huddles, etc.).

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 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., 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 and Other Actions after Exposure

CDC has recently published [new guidance](#) for individuals who have been identified as a [close contact of a known COVID-19 case](#):

- If **fully vaccinated** (i.e., 14 days after their final vaccine dose), or fully recovered from COVID-19 in the prior 90 days, and **remain free from symptoms** of COVID-19:
 - **do not need to quarantine** away from athletics or other activities
 - **get tested** 3-5 days after last 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*)
 - **wear a mask** when around other people (indoors or outdoors) until a negative test result is received (or for 14 days if no test is performed)
- If **fully vaccinated** (i.e., 14 days after their final vaccine dose), or fully recovered from COVID-19 in the prior 90 days, and **experiencing symptoms** of COVID-19:
 - **get evaluated by a healthcare provider** as soon as possible
 - **quarantine** away from athletics and other activities **for a full 14 days**, or 10 days with a negative test on day 8 or later, **unless a healthcare provider rules out COVID-19** as the source of symptoms (which will usually include a negative test result)
 - **wear a mask** when around other people (indoors or outdoors) for 14 days, or until COVID-19 is ruled out by a healthcare provider
- If **not fully vaccinated**, or have not had COVID-19 in the prior 90 days:
 - **quarantine** away from athletic activities for a **full 14 days**; or at least 10 days with a negative test at day 8 or later
 - **continue to wear a mask** around other people for a **full 14 days**, regardless of when release from quarantine occurs

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 known whether the currently

circulating Delta variant, 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 in our state, region, and 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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