



GUIDELINES AND RECOMMENDATIONS FOR OPENING SPORTS/ACTIVITIES

Missouri State High School Activities Association (MSHSAA)
MSHSAA Sports Medicine Advisory Committee (SMAC)

Purpose: The COVID-19 pandemic presents state high school associations with a myriad of challenges. The MSHSAA Board of Directors and MSHSAA Sports Medicine Advisory Committee (SMAC) offer this document as guidance on how our state association can consider approaching the many components of “opening up” sports and activities in preparation for the fall seasons, and beyond.

Benefit of Sports/Activities: The physical and psychosocial benefits of education-based activity participation are numerous. Students who participate in school activities learn life lessons in an environment that cannot be duplicated. The academic achievements, social and leadership skills, as well as overall mental health are known to be greatly enhanced in students who participate in a school activity compared to those who do not. The coronavirus pandemic has resulted in thousands of Missouri students missing out on these life-shaping educational experiences over the past several months.

Acknowledgement of Infection Risks: The risk of coronavirus transmission may still be present to some degree as school activities begin. Students and their families, along with school personnel must recognize these risks and implement best practices to reasonably mitigate these risks. Participation in school activities is voluntary and every individual will need to evaluate the risk versus the benefits of activity participation. Those immunocompromised students and staff, or those who live with family members with elevated health concerns, should evaluate associated risks of participation and may choose not to participate. The primary means of coronavirus transmission is through respiratory droplets and potentially aerosolized. Risk mitigation strategies should be aimed at reducing the likelihood of a person’s respiratory droplets coming into contact with another person. Every school is different and every activity is different. Certain mitigation strategies may be feasible in one school or for one activity, but not another.

School Point-Person: It is recommended all schools designate a point person to disseminate the constantly changing information and oversee their school’s risk mitigation strategies. School leaders will need to determine how best to **implement ALL reasonable risk mitigation strategies**. Further, schools must appoint an individual(s) who will be responsible for ensuring screening is implemented and any positive screen or test must meet the protocols for return to participation. School leaders should remain in consultation with their local health departments and medical personnel to review and evaluate strategies applicable to their unique facilities and activities. In support of preparing member schools for a return to, and hopefully a continuation of, interscholastic activity participation, the following coronavirus risk mitigation best practices are provided.

Questions and Answers: The following questions/answers serve as guidance for further navigation and deliberation relative to the impact/association of Covid-19 on Sports/Activities.

Q1. *Will MSHSAA conduct sports/activities regular seasons or postseason events if schools are **closed statewide** to in-person learning (apart from regularly scheduled school breaks)?*

A1. If schools statewide are closed to in-person learning due to the corona virus pandemic, MSHSAA will be unable to allow for either a regular season or a post-season series in MSHSAA sports and activities.

Q2. *Will MSHSAA conduct sports/activities regular seasons or postseason events if schools are **closed only in** COVID-19 “hotspots” in our state?*

A2. If a majority of schools are open for in-person learning, efforts will be made to administer a regular season and postseason for those schools/students who are permitted to do so based on the guidelines of the local and state health departments. In this scenario, MSHSAA does not intend to revoke the participation opportunities for students who are able to take part.

Q3. *Might there be restrictions unique to our state – or regions of our state – that need to be taken into consideration when returning to activities and participation?*

A3. Yes. Since it is possible to have different areas of our state following a different set of guidelines/restrictions/allowances, it is quite possible that not all schools in Missouri will return to sports/activities at the same rate or under the same expectations, and some may need to halt participation during the year for a period of time if conditions warrant.

Q4. *Our school has decided to offer only virtual education this fall due to concerns by our health department and/or community/parents regarding the spread of infection. Will we be able to offer sports and activities in conjunction with that educational plan?*

A4. Participation in practices or competitions is a local school decision that must be based on the guidelines of the school’s local health department and/or any statewide health department guidance or restrictions.

Q5. *If a student was tested and found to have Covid19 earlier in the year, before the beginning of practices for the current season, will that student need to get a return to play form from their health care provider?*

A5. Yes, if a student has tested positive at point within 2 months prior to the start of participation they must complete the Return to Play form and protocol. We would recommend they get clearance from their doctor that was treating them for COVID. What we are learning is that COVID can impact the heart, and we want to make sure the student is safe to return. If the student is released using the MSHSAA Return to Play form, they must also complete the five stage return to participation protocol; however, those first four stages do count toward the 14-day conditioning practice requirement.

Q6. *If a student is doing online only classes, as part of the options given to our student body, but we are holding in person classes, would that student be eligible to participate in athletics?*

A6. If a student is enrolled in enough classes to maintain eligibility, and the school is offering in person classes, then it is a local school decision on if they accept Non-traditional 1 students. If they do, the student can play.

Q7. *To go along with the previous question, we have a homeschool student who resides in our district. They are wanting to participate in athletics, but we are unsure if they would be able to meet the requirement by completing the classes through us online. Would this satisfy the requirement of homeschool participation?*

- A7. They would need to enroll at your school and take your online classes that you are offering. They would then be considered a Non-Traditional 1 student, and could participate, provided they meet the requirements listed in answer 2.
- Q8. *If we begin the season competing in competitions, but there is a local outbreak in our district and we are forced to close or cancel activities, could we go back into competitions once we reopen? Would we have to wait until the next season begins? If we don't start a season, but deem it safe to resume, say after winter break, would this prevent us from participating in the second half of those seasons?*
- A8. Any time a school deems that it is necessary to temporarily postpone participation during the season for the safety of the school community they are certainly permitted to do so. Once the school determines that participation in activities may resume then the in season sports and activities are permitted to resume under local school discretion, which includes any required number of days of conditioning practices prior to resuming competition after resuming the season.
- Q9. *If our school is offering in-person school and a student/family chooses to educate virtually - is that student still eligible for athletics/activities? How does their attendance factor in?*
- A9. If a school is offering in-person learning, all of the students at the member school would be eligible to participate given all other requirements are met. That being said, it is always a local school's prerogative to be more restrictive if they choose; therefore, a local school could require an in-person choice to participate.
- Q10. *If our school ends up in a blended learning situation and our kids are going to school 2 days a week - are they able to participate in practices and games on their non-attendance days?*
- A10. Again, offering in-person instruction permits all to participate. As to attendance requirements, the school would have to establish what is "fully attending" on a day in which a student is remote learning. This would be the same if a student was allowed to participate when completely enrolled virtually.
- Q11. *We had our first positive case of an athlete last week, we quarantined the entire team per the guidance from our local health department. The student that was positive will have to meet the requirements for re-entry and then complete the 5 stages of the Return to Play form/process. For my other team members that were exposed and quarantined, but developed no symptoms and were not tested, do they have to participate in the 5 stages of RTP?*
- A11. The player that tested positive MUST follow the Return to Play protocol and have the Return to Play form completed prior to returning to the team. Other team members that were potentially exposed to the positive case must quarantine under the discretion of the local health department. They would not have to follow the Return to Play protocol or complete the Return to Play form unless they also test positive.
- Q12. *Are coaches, officials sideline workers etc. required to wear masks? Is the wearing of masks a choice, recommendation, or a mandate for these personnel?*
- A12. The MSHSAA issued guidelines recommending the schools practice the wearing of masks. This position on masks is coming from our medical experts to help prevent the spreading of the virus for our kids, officials and coaches. While there are no consequences associated with not wearing masks, we would encourage all schools to accept what the medical experts are stating is critical for the protection of our sports/activities seasons. If we desire to have school, sports, and activities this year, we need to model and do everything we can to protect our kids, coaches and officials. If we have outbreaks or positive cases, we will have to work with local health departments on who all is shut down for quarantine. The MSHSAA is

not experts in infectious disease, but our physicians/medical experts on our Sports Medicine Advisory Committee are; therefore, we recommend following their guidance they have provided.

- Q13. *Why was the reduction made from 14 days from symptoms first appearing to 10 days on the MSHSAA Return to Play Form?*
- A13. With updated data and recommendations from the CDC (Centers for Disease Control) as well as updated guidance published on October 26, 2020 by Dr. Kim¹ and other prominent sports cardiologists, we wanted to be consistent with the updated guidance as presented. Based on this guidance, our Sports Medicine Advisory Committee COVID Working Group felt the reduction from 14 to 10 days was an appropriate change to make at this time as previous national organizations had recommended the 14-day minimum time period. Future changes and updates to our documents/recommendations will be based on updates from leading organizations and consensus guidance publications.
- Q14. *What is the process for the athlete who was quarantined due to a close contact exposure on the team and never develops symptoms during their quarantine?*
- A14. This athlete does not need to receive return to play clearance by a health care professional (MD, DO, NP, PA) and does not need to complete a return to play progression once released from quarantine.
- Q15. *What if an athlete is quarantined, develops COVID-like symptoms, but the family decides not to have the athlete tested?*
- A15. This athlete would be presumed to have been COVID positive and will need to be cleared by a health care professional, preferably their primary care physician, and be cleared to start the 5 stage return to play process.
- Q16. *I have heard things about athletes' hearts being affected by COVID. Should I be concerned?*
- A16. Many athletes at all levels of participation have tested positive for COVID. Fortunately, it seems that initial concerns of a condition called myocarditis (or inflammation of the heart) are less of a concern than originally thought. However, there is still a concern for the athlete who was hospitalized or has had what is being defined as moderate symptoms. This would include having had significant shortness of breath, chest pains, fevers that have persisted over multiple days, symptoms that last longer than 10 days, episodes of fainting, or consistent chest tightness may be an athlete that stronger consideration for further evaluation of their heart is warranted. This will be determined by the health care professional who sees the athlete to clear them. Athletes who had no symptoms, despite a positive test, and athletes with mild symptoms (loss of taste/smell, brief cough, congestion, short lived fever) that are short lived are felt to be low risk for issues affecting their heart, but are still required to be assessed by their primary care provider to determine that level of risk and for clearance to begin the return to play process.
- Q17. *What if my quarantine period is longer than 10 days?*
- A17. As it stands, local health departments will determine the duration of quarantine for each individual athlete and release from quarantine is a decision ultimately by that department. These recommendations for MSHSAA athletes do not overrule a local health department as to the duration of quarantine. The return to play criteria and allowance for clearance all are based on a MINIMUM duration of time from the onset of symptoms for consideration to be able to start moving forward on this process. MSHSAA does not determine when an athlete can be cleared to return to school.

Recommendations for Return to Sport and Activity Due To COVID-19 Impact

Pre-participation Physical Evaluations (PPE) (Physicals):

There are no exceptions or relief being granted to MSHSAA Bylaws 3.8.1 and 4.5.4 regarding the requirement for students to have a valid physical prior to participating in those sports/activities that require a valid physical. While there were some concerns regarding access to primary care providers during the late spring and early summer, MSHSAA has determined that it is still essential that all students have a valid physical on file prior to participation.

Practices/Rehearsals:

Please consult with your local or state health department regarding the current restrictions/allowances relative to allowable group size and social distancing. Not all areas of the state will have the same criteria, and what is allowable in some geographical areas compared to other areas will vary throughout the state.

Gatherings: Gatherings sizes and/or group restrictions are determined by local and state health departments.

- Upon initial return to participation, gatherings should be limited to no more than the current local recommended gathering size, indoors or outdoors. Increasing or decreasing tolerances for group sizes shall be determined by local and state health department.
- When initiating practices/rehearsals, it may be reasonable to consider having groups that practice/rehearse together in smaller numbers to avoid the potential of large numbers of participants or coaches/directors having to quarantine if anyone tests positive for COVID-19. (Example: Have similar-position players/instrumentalists in different groups; have varsity and lower level teams in separate groups).
- Break into small groups for rest breaks and water breaks during practice. Do not congregate.
- When not directly participating in practices, rehearsals or contests, care should be taken to maintain current social distancing between each individual. Consider using tape or paint as a guide for students and coaches/directors.

Screening:

- Schools must appoint an individual(s) who will be responsible for ensuring screening is implemented and any positive screen or test must meet the protocols for return to participation.
- Before practices/rehearsals, track body temperatures (100.4 or greater) and symptoms of coaches, directors, staff, players, participants, etc. Temperature screening may be done at home, documented and presented upon arrival to the school. If home temperatures are ≥ 100.4 the participant must stay home and not come to practice/rehearsals/competition. Temperature screening may be done upon arrival to the school, if a temperature is 100.4 or greater (recommend using a no touch thermometer) the individual should be moved to an indoor environment for five minutes prior to having the temperature retaken. If temperature remains at 100.4 or greater it indicates a positive screen.
- Every coach/director and participant is required to wear a mask or face covering until screening is completed, showing no signs or symptoms.
- If a participant, coach/director, or official/adjudicator has a positive finding on their COVID-19 screen, he/she should be sent home immediately. If the participant's parents are not present, escort the participant to a designated isolation room or an area away from others. He/she must wear a mask or face covering. The participant/coach/director is to be referred to a health care provider or a local COVID screening hotline.

- Symptoms Include:
 - Fever (temperature greater than 100.4)
 - cough (new or worsening)
 - shortness of breath or trouble breathing
 - sore throat (different from seasonal allergies)
 - new loss of smell or taste
 - vomiting or diarrhea
- Written clearance by a healthcare provider, or after a 14-day quarantine period (quarantine period starts from first positive **SCREEN**) shall be required prior to return to participation.
- A record should be kept of all individuals present.
- The CDC has identified the following risk factors:
 - Risk increases steadily with age
 - Obesity and body mass index greater than 30
 - Chronic lung disease - including moderate or severe asthma
 - Type 2 diabetes
 - Chronic kidney disease
 - Sickle cell disease
 - Heart conditions
 - Immunocompromised patients – transplant recipient needing immunosuppressant medications (e.g. steroids, biologics, etc.)
 - Patients receiving chemotherapy, etc.
 - Specific ethnic groups have a greater incidence of disease and are at risk of more severe illness include Blacks, Latinos and Pacific Islanders.

Positive Testing

- Schools must appoint an individual(s) who will be responsible for ensuring any positive test must meet the protocols for return to participation.
- What happens when a student/coach/director tests positive?
 - Notify the local public health authority. A school nurse, athletic trainer, healthcare provider, or member of the organization should create and provide a 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 stop the spread of disease.
 - If a participant or coach/director is confirmed to have COVID-19, the following should occur:
 - All participants who have had close contact with this individual, or a direct exposure to secretions (i.e. being coughed on) in the 48 hours prior to the positive individual showing symptoms should be excluded from practice and play until given clearance to return in accordance with local health department guidelines. The local Health Department should be contacted to assist in proper contract tracing and quarantining of individuals. If there was doubt of who the individual came into contact with, then the entire team/group that practices/rehearsed or competed with the positive individual should be quarantined according to local health department guidelines. Teams/Groups should keep documentation of names and contact information of opposing teams/groups, coaches/directors, and officials/adjudicators for contact tracing purposes.
 1. A close contact is defined by the CDC as a person who has had close contact (less than 6 feet) for greater than 15 minutes (sustained or cumulative) with an individual with confirmed or suspected COVID-19 infection during the 48 hours

before the individual became symptomatic or was diagnosed. Additional definitions of close contact would include:

- You provided care at home to someone who is sick with COVID-19
 - You had direct physical contact with the person (hugged or kissed them)
 - You shared eating or drinking utensils
 - They sneezed, coughed, or somehow got respiratory droplets on you
2. Local health departments will determine when close contacts may be released from quarantine in conjunction with guidance from the CDC and other health authorities.
 3. A coach/director or participant in quarantine should stay home, stay separated from others, follow state or local health department guidance, should NOT participate in traditional practices/rehearsals at the school.
- What happens when a participant/coach/director has been exposed to a confirmed positive case of Covid-19?
 - Individuals who have had a significant exposure (i.e. close contact as defined above) to a confirmed positive COVID-19 individual must quarantine in accordance with local health department guidelines starting from the date of the last exposure to the positive COVID-19. If the exposed individual has a negative COVID-19 test, there may be the ability to be released earlier from quarantine as recommended by the local health department.
 - If the exposed individual develops symptoms during the quarantine period, testing is strongly recommended. If the individual tests positive, then guidance should be followed for a confirmed positive individual. If the testing is negative, release from quarantine will be determined by the treating health care professional in conjunction with the local health department.

Cleaning:

- CDC guidance for cleaning and disinfecting should be followed. <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>
- Cleaning schedules should be created and implemented for all athletic facilities and music classrooms to mitigate any communicable diseases. **(Note – Refer to Music page at www.mshsaa.org for access to references for suggested cleaning procedures for instruments. The link is titled “NFHS, NAMM and NAFME Instrument Cleaning Guidelines and Information”).**
- Prior to an individual or groups of individuals entering a facility, hard surfaces within that facility should be wiped down and sanitized (door handles, chairs, furniture in meeting rooms, locker rooms, weight room equipment, bathrooms, athletic training room tables, storage rooms, instrumental equipment, etc.).
- Individuals should wash their hands for a minimum of 20 seconds with water and soap before touching any surfaces or participating in workouts or rehearsals.
- Avoid touching eyes, nose and mouth with unwashed hands.
- Hand sanitizer should be plentiful and available to individuals as they transfer from place to place.
- Weight equipment, musical equipment, etc. should be wiped down thoroughly before and after an individual’s use of equipment.
- Any equipment such as weight benches, athletic pads, etc. having holes with exposed foam should be covered.
- Participants must be encouraged to shower and wash their workout clothing immediately upon returning home.

Physical Activity and Athletic/Activities Equipment:

- There should be no shared athletic towels, clothing or shoes between participants.
- Participants should wear their own appropriate workout clothing (do not share clothing), and individual clothing/towels should be washed and cleaned after every workout.
- Refrain from sharing practice/scrimmage jerseys or scrimmage hats/caps.
- Hand sanitizer should be plentiful at all contests and practices/rehearsals.
- Athletic equipment such as bats, batting helmets and catchers gear should be cleaned between each practice or game. Other equipment, such as football helmets/other pads, lacrosse helmets/pads/gloves/eyewear, field hockey helmets/pads/gloves/eyewear, should be worn by only one individual and not shared.
- Masks or face coverings are REQUIRED for participants, coaches/directors and officials/adjudicators any time they are not doing strenuous physical activity. Wearing masks before activities and immediately following activities is REQUIRED, especially prior to screening.
- Maximum lifts should be limited and power cages should be used for squats and bench presses. Spotters should stand at each end of the bar with the use of a mask.

Hydration:

- All participants should be required to bring and fill their own water containers/bottles. Water containers/bottles must not be shared.
- Communal drink stations such as hydration carts should not be used. Participants are encouraged to bring larger than normal water containers to limit the need for refilling. Significant consideration must be given in devising plans for refilling personal water containers, if necessary, without contamination from participants. Extra care should be taken to sanitize any coolers used.
- Managers should not assist with the personal water containers of participants and staff.

Transportation to Events:

- Schools need to consider social distancing requirements when scheduling contests and events for the fall sports/activities season. Social distancing (as required by state or local health department) will need to be maintained on buses/vans.
- Schools are encouraged to schedule more local/regional competition and avoid any competition that might require an overnight stay.

Social Distancing at Events:

- Schools are encouraged to offer live streaming of games/contests/performances to reduce attendance at events so that current gathering size and social distancing can be met.
- Sidelines/benches/performance and participant areas: Social distancing guidelines established by local and/or state health departments will need to be maintained on sidelines/benches/performance and participant areas during contests and events. Consider using tape or paint as a guide for participants and coaches/directors.
- Who should be allowed at events? Group people into tiers from essential to non-essential and decide which tiers will be allowed at an event if local and or state health department guidelines restrict group sizes. Only Tier 1 and 2 personnel will be allowed to attend events until state/local health departments lift restrictions on mass gatherings.
 - Tier 1 (Essential): Participants, Coaches/Directors, Officials/Adjudicators, Event Staff, Medical Staff, Security
 - Tier 2 (Preferred): Media

- Tier 3 (Non-essential): Spectators, vendors

Athletic Training Services:

- Athletic trainers in high schools are positioned to play a vital role as sports and activities return following this pandemic. As health-care professionals, they can take lead roles in developing and implementing infection control policy throughout the school. MSHSAA member schools should promote the importance of athletic trainers in high schools and their role in injury evaluation, treatment and risk minimization as well as being a vital component of any return-to-school and athletics/activities plan.
- Given the financial crisis at the state and local levels, the MSHSAA SMAC fears that athletic trainer positions will be seen as a “luxury” and those positions will be at risk during the budgeting process. It is also assumed that athletic trainers supplied to high schools by hospitals and sports medicine clinics are also at risk as many medical clinics and hospitals have suffered severe revenue loss during the pandemic.

Return to Physical Activity/Strength and Conditioning (Heat Acclimatization):

The 16-day heat acclimatization period for fall sports assumes that athletes have deconditioned over the summer months. The Covid-19 pandemic has resulted in students being deconditioned for four to five months.

https://journals.lww.com/nsca-sci/Fulltext/2019/06000/CSCCa_and_NSCA_Joint_Consensus_Guidelines_for.1.aspx

Return to Play/Activity:

MSHSAA COVID-19 Return To Play Flow Chart – Steps to determine Return to Play Progression

[Return to Play Flow Chart](#)

MSHSAA COVID-19 Return To Play Form – Mandatory form completion prior to Return to Play

[Return to Play Form](#)

Illness Reporting and Notifications:

Create a notification process for all event participants, coaches/directors, event staff, media, spectators and vendors if the organizers/medical personnel learn of suspected or confirmed cases of COVID-19 at the event.

Considerations for Officials/Adjudicators, Coaches/Directors, Other Personnel:

- Vulnerable individuals should not participate in any practices/rehearsals, conditioning activities, contests or events.
- Masks or face coverings, such as a gaiter, are required to be worn when not actively engaged in strenuous physical exertion (running/jogging). Current local and state social distancing guidelines are to be followed and “Hygiene Basics” adhered to in all situations. We also strongly recommend, but do not require, that masks or face coverings are used during strenuous physical exertion (ie running).

Good Hygiene Must Continue:

- Wash your hands with soap and water for a minimum of 20 seconds or use ample amount of hand sanitizer, especially after touching frequently used items or surfaces.
- Avoid touching your face.
- Sneeze or cough into a tissue, or the inside of your elbow.
- Disinfect frequently-used items and surfaces as much as possible.
- Wear a mask or face coverings while in public, and particularly when traveling in a group.

People who feel sick should stay home:

- Do not go to work or school.
- Contact and follow the advice of your medical provider.

Other Considerations:

- Hand sanitizer should be widely available at contests and practices. Participants, coaches/directors and officials/adjudicators should clean hands frequently.
- Wipe equipment down frequently.
- No pre-game and post-game handshakes/high-fives/fist bumps.
- Officials and sideline volunteers are required to wear a mask or face covering.
- There will be sport/activity rules modifications documents to assist further with mitigation of virus transfer during this time. The MSHSAA will notify member schools when these rules modifications have been finalized and where the modifications will be posted for accessing.

References

NFHS Guidance for Opening Up High School Athletics and Activities: https://nfhs.org/media/3812287/2020-nfhs-guidance-for-opening-up-high-school-athletics-and-activities-nfhs-smac-may-15_2020-final.pdf

CDC Resources: <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

St. Louis Sports Medicine COVID-19 Task Force Information:

<https://www.mercy.net/content/dam/mercy/en/pdf/return-to-sports-recommendations.pdf>

Children's Mercy (KC) Information: <https://www.childrensmercy.org/health-and-safety-resources/information-about-covid-19-novel-coronavirus/returning-to-community-activities/recommendations-for-a-safe-return-to-sport-and-physical-activity-after-covid-19/>

MSHSAA Guidelines and Recommendations: These MSHSAA Guidelines and Recommendations are provided to promote public awareness of certain health and safety-related issues. Such information is neither exhaustive nor necessarily applicable to all circumstances or individuals and is no substitute for consultation with appropriate health-care professionals. Statutes, codes or environmental conditions may be relevant. These MSHSAA Guidelines and Recommendations should be considered in conjunction with other pertinent materials when taking action or planning care. Guidance may be rescinded or modified at any time, based on current conditions.

Release Date: July 15, 2020

Update Date: August 7, 2020

Update Date: August 19, 2020

Update Date: November 16, 2020

Update Date: November 20, 2020

Update Date: December 9, 2020

Update Date: July 1, 2021