



June 5, 2020

Getting back in the game: Youth sports and COVID-19

Children's Wisconsin Sports Medicine

Kevin Walter, MD, FAAP

Kat Tase, LAT, OTC, PES

While COVID-19 has changed our everyday lives, those of us with athletes in the house know the anticipation of getting back in the game is high. As a pediatric sports medicine physician, I've been flooded with questions from concerned parents about how and when their kids should safely return to their youth sports teams.

There is understandable confusion and questions on the impact of resuming participation in youth sports. As a result, a team of sports medicine and infection prevention experts at Children's Wisconsin and UW Health have come up with some guidelines and considerations to help navigate the return to youth sports in Wisconsin. Keep reading for an overview of our guidelines and visit childrenswi.org/newshub/stories/return-to-sports for a link to the full text.

Scouting and research (aka background information)

At Children's Wisconsin, we believe that all young people should engage in daily exercise, fitness or sports to support their overall physical and mental well-being. We must return with safety as the number one priority — not only safety of our young athletes, but also for parents, family, coaches and officials.

The following recommendations from our team are intended as a general guide for parents, youth athletic teams and organizations to help transition safely back into sports. Municipality and county regulations must be satisfied before considering resuming athletics, so always consult with the county and/or state health department beforehand.

For return to high school sanctioned sports and training, please refer to the Wisconsin Interscholastic Athletic Association (WIAA). It's important to note that as of May 28, 2020, the Centers for Disease Control and Prevention (CDC) recommends consulting with state and local health officials before resuming participation in youth sports due to the many challenges of containing the virus in group settings.

Coaches and parents

As a parent, coach or youth sports organization, we should ask these questions when determining how to safely allow our kids to return to play:

- Will my organization conduct athletics/activities if schools are closed to in-person learning?
- Will my organization conduct athletics/activities across the state if COVID-19 “hot spot” areas are closed while other regions of the state may be?
- Will my organization conduct “lower-risk” activity such as individual drill practice while canceling activity that is considered “higher-risk” like scrimmaging, games or tournaments?

We can't rely on our kids to enforce the protocols that we determine appropriate. We need to also monitor and instruct them. This includes items like identifying a point person for all health communications, implementing pre-activity screenings, parent drop off and pick up strategies, distribution of beverages and snacks as well as wearing personal protective equipment.

The plays (aka the plan)

Beyond asking the key questions above, our team put together a comprehensive plan that includes considerations to help keep our athletes free from illness and injury, and recommended phases for getting back in the game.

- **Return to physical activity:** In any situation where an athlete is not able to practice or play for an extended amount of time, it's important to keep in mind that being deconditioned puts them at greater risk of injury upon returning to the sport. Appropriate time must be allowed for athletes to progressively work back safely to competition.
- **Transportation to games and events:** In addition to having well-defined strategies for athlete pick up and drop off, certain organizations may need to consider alternative plans for transporting teams to events.
- **The sidelines:** Social distancing should be maintained on the sidelines and benches, as well as by spectators.

Risk assessment

While the risk of transmitting something like COVID-19 during a game is difficult to determine, we have categorized sports based on low, moderate and high in alignment with the United States Olympic and Paralympic Committee (USOPC) and the National Federation of High School Associations (NFHS) stratification. The risk assessments can help inform how youth sports begin again.

- **All Sports:** All sports, no matter the risk assessment, should be doing these things as they begin again.
 - Pre-workout or pre-contest screenings

- Limitations on gathering
 - Facilities cleaning
 - Considerations with equipment
 - Rules around hydration
- **Lower Risk:** Sports that follow social distancing guidelines without the need to share or clean equipment are considered lower risk and can begin the soonest. Along with the above considerations, they should focus on individual practice with no more than 10 people in a training session and not having athletes interact directly.
 - *Examples: Individual running events, throwing events (shot put, discus), individual swimming, golf, skiing, cross country, sideline cheer.*
 - **Moderate Risk:** Sports that have protective equipment in place to decrease respiratory droplet transmission OR intermittent close contact OR sports that use equipment between athletes that can't be cleaned are considered moderate risk. These sports are the second set to begin activities and should be conducted in small groups with the same 5-10 athletes to help limit exposure. All athletic equipment, including balls, should be cleaned before and after each use. They should also be cleaned periodically during training/competition as well.
 - *Examples: Basketball, volleyball, baseball, softball, soccer, water polo, gymnastics, hockey, tennis, swimming relays.*
 - **Higher Risk:** Sports that have a high probability of respiratory droplet transmission or involve close contact thereby making it challenging to maintain appropriate social distancing guidelines have the highest risk and should be the last set of activities to resume. Athletes should return home immediately after activity and take a shower. Clothes should be washed immediately, as well as separately from other clothes in the household.
 - *Examples: Wrestling, football, lacrosse, competitive cheer, dance*

For our full guidelines and more information on risk assessment, visit childrenswi.org/newshub/stories/return-to-sports.

Game time

I've noticed two speeds when it comes to returning to youth sports — zero and 100. And while zero represents the safest option, it may not be realistic for everyone to refrain from sending their kids back to their beloved sports indefinitely. At the same time, full speed ahead can be downright dangerous.

In order for us to safely resume youth sports, we should consider the risk assessment and begin each sport dependent on its risk factors. In order to progress to the next set of sports, we would need to know certain truths including the rate of infection isn't increasing, there hasn't been an

outbreak within the team (including an outbreak in the team's households), maintaining rigorous cleaning practices and more.

Now and always, Children's Wisconsin is available for parents — virtually and in person. If you have any questions or concerns, contact your child's pediatrician by phone, MyChart message, schedule an appointment or talk to a pediatric care provider through our Online Urgent Care video visits.

The full guidelines are a general informational resource current as of June 3, 2020 and should not be considered medical or expert advice for participation in any activity. Readers are urged to consult the most up-to-date recommendations of federal, state and local public health officials and to consult their own qualified health providers about any specific issues or circumstances they may have. Neither the authors of the full guidelines, American Family Children's Hospital/UW Health nor Children's Wisconsin warrant that the information contained in those guidelines is in every respect accurate or complete, and they are nor responsible for any errors in, omissions from, or results obtained from the use of these guidelines.

Contact Children's Wisconsin at ktase@chw.org with additional questions.