

Return To Activities Protocol

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Special Olympics



As citizens, communities, and nations around the world resume operations and activities in the time of COVID-19, Special Olympics has developed guidance for its Programs on returning to activities. This guidance is founded on the latest medical information available and guidance from organizations such as the World Health Organization (WHO) and nation-specific health agencies such as the Centers for Disease Control and Prevention (CDC) in the U.S.

Throughout this document “participants” are defined as all athletes, Unified partners, coaches, volunteers, family members, caregivers, staff or others in attendance of an activity.

Guidance on COVID-19 Return to Activities

Information on COVID-19 is changing daily. Transmission rates vary across the countries in which Special Olympics Programs operate. Local and national governments, school districts, and health agencies are developing their own guidance and mandates. It will be incumbent upon leaders at all levels of the Special Olympics movement to continually monitor this ever-changing situation and adjust decision-making accordingly while adhering to the guidance contained herein. **Programs MUST designate a COVID-19 response point-person to keep current with Phases and all compliance requirements, coordinate response and monitor for COVID-19. This may be the National Director/CEO/Executive Director or a designee.** Periodically Regional or Global calls may be convened with these individuals for monitoring.

These are intended as minimum guidelines for Special Olympics Programs as they consider returning to activities. **It is intended to supplement – not replace – any state/provincial, local, territorial/national or tribal health and safety laws, rules and regulations with which similar organizations must comply.**

Additionally, the information in this document is not intended or implied to be a substitute for professional medical advice, diagnosis, or treatment. The knowledge and circumstances around COVID-19 are changing constantly and, as such, Special Olympics makes no representation and assumes no responsibility for the accuracy or completeness of this information. Further, you should seek advice from medical professionals and/or public health officials if you have specific questions about symptoms and/or diagnoses related to COVID-19.

Similarly, Programs should immediately consult with legal and/or insurance counsel regarding any liability or coverage related questions.

Guiding Principles

1. The health and safety of all members of the Special Olympics movement is paramount.
2. Beyond a sports organization, Special Olympics is a movement for and by people with intellectual disabilities (ID), and its guidance must be inclusive and directed at the unique needs and abilities of people with ID.
3. Relevant WHO and country-specific (e.g., U.S. CDC) guidelines should serve as minimum standards. In addition, consideration should be given to local and community authorities in that if there are more conservative/restrictive guidelines, these should be followed.
4. Guidance is based on current medical information available at the time of publication. As knowledge of COVID-19 is changing rapidly, guidance will continue to evolve.
5. Guidance takes a phased approach that is dependent on local transmission rates as well as testing/monitoring/contact tracing/health system capacity.



Phased Approach to Return to Activities

Special Olympics is adopting a three (3) phased approach to return to activities. **It is important to note there may be times a community will revert to an earlier phase if and when the spread of infection rises in the future.**

Participation Risk Awareness and Acknowledgement

Prior to returning to any in-person Special Olympics activities in Phases 1 through 2, all participants are recommended to complete and return a *Participant Risk Acknowledgement Form* which provides information and guidance on assessing risk and acknowledges that participation could increase risk of contracting or spreading COVID-19.

If participants have tested positive and/or been diagnosed with COVID-19, the participant must provide written proof of clearance from their healthcare professional prior to returning to sport or fitness activities. **Special Olympics Programs should ensure that all participants (e.g. athletes, unified partners, coaches, volunteers, staff, and families) are educated about those that are at higher risk of complications from COVID-19 as well as all procedures and expectations for return to activities.**

SPECIAL OLYMPICS RETURN TO ACTIVITIES PHASES			
Phase 0 Prevalence: community transmission occurring Stay at home order in place for all individuals.	Phase 1 Prevalence: clusters of cases occurring Stay at home order is lifted, restriction on size of gatherings (≤10 people).	Phase 2 (Prevalence: sporadic cases reported) Size restrictions on gatherings increased to ≤50 people.	Phase 3 (Prevalence: No reported cases*) No restrictions on size of gatherings and public facilities are open. <i>* In Epidemic or Pandemic stage</i>
No events or activities of any sort to be held in person. Individual sport training sessions in own home using own equipment. Coaching occurs virtually. Fitness and Health programming offered virtually or at home. Meetings, conferences or trainings to be held virtually.	HIGH RISK INDIVIDUALS (see appendix) should continue to remain at home. PRACTICES, HEALTH/FITNESS, LEADERSHIP and LOCAL EVENTS (10 or fewer participants) MAY resume if they adhere to strict physical distancing and sanitation protocols. No direct or indirect contact (e.g. through a ball in the hand) should take place. Virtual programming should be made available for those not able to attend in person. Select disciplines of HEALTHY ATHLETES occur for disciplines where risk mitigation and infection control precautions can be put in place. SCHOOL -based activities led by schools should comply with guidance from schools/districts.	HIGH RISK INDIVIDUALS (see appendix) should continue to remain at home. PRACTICES, HEALTH/FITNESS, LEADERSHIP and LOCAL EVENTS (50 or fewer participants), MAY resume if they adhere to physical distancing and sanitation protocols. Indirect contact (e.g. through a ball in the hand) MAY resume. No direct contact should occur in sports. Virtual programming should be made available for those not able to attend in person. HEALTHY ATHLETES may occur for disciplines where risk mitigation and infection control precautions can be put in place. SCHOOL -based activities led by schools should comply with guidance from schools/districts.	HIGH RISK INDIVIDUALS (see appendix) can resume public interactions, but should practice physical distancing, minimizing exposure to social settings where distancing may not be practical, unless precautionary measures are observed. LARGE COMPETITION and GAMES (with people traveling from multiple geographic areas who are in same phase) MAY potentially occur, if permitted by WHO, country and local standards. Virtual programming should still be made available for those not able to attend in person. HEALTHY ATHLETES may resume activities, with appropriate infection control precautions in place. SCHOOL -based activities led by schools should comply with guidance from schools/districts.



In the following pages, precautions to mitigate risks are outlined for each phase. If these considerations cannot be met, Programs should not proceed to the next phase. It is recommended that Programs take time (at least 2-4 weeks in each phase) to evaluate the success of the mitigation and infection control precautions prior to moving on to the next phase.

SOI expects the timeline to differ for returning to these phases by local Programs. Provided the Program has met the necessary criteria for each phase and has taken the recommended precautions to mitigate risks, the Program may choose to proceed to the next phase in accordance to local/state/provincial/territorial/national guidelines. **However, Special Olympics Programs should consider lagging behind general re-openings within their community by at least two weeks to benefit from lessons learned and to determine if there is a potential resurgence of COVID-19 cases.**

In addition, Programs should be prepared to revert from a later phase to an earlier phase if local or national authorities require and/or if Programs are unable to meet the mitigation and precautions.

Mitigation and Precautions by Phase

PHASE 0 – All Individuals Stay at Home Prevalence: Community transmission occurring. Size: Stay at home orders. No gatherings of any size, public facilities are closed.	
Phase 0 Comply	<ul style="list-style-type: none"> <input type="checkbox"/> Follow local and federal restrictions regarding Stay at Home.
Phase 0 Educate	<ul style="list-style-type: none"> <input type="checkbox"/> Designate a COVID-19 response point person for the Program. <input type="checkbox"/> Educate all participants on: <ul style="list-style-type: none"> ○ Benefits and risk of physical activity after COVID-19 infection. ○ PPE, hygiene, and physical distancing for safety. <input type="checkbox"/> Continue 'at home' activities to maintain fitness and activity levels.
Phase 0 Prepare	<ul style="list-style-type: none"> <input type="checkbox"/> Prepare appropriate resources for safe 'at home' activities. <input type="checkbox"/> Prepare participants for participation in virtual activities or virtual competitions. <input type="checkbox"/> Know how to communicate potential cases to local health authorities for testing and to the Special Olympics Accredited Program, while maintaining and respecting privacy laws.
Phase 0 Activity	<ul style="list-style-type: none"> <input type="checkbox"/> Share resources digitally and activate participants virtually (or via mailings). <input type="checkbox"/> Virtual participants with COVID-19 symptoms should refrain from participating in activities and consult with a healthcare professional for further evaluation.



PHASE 1 Prevalence: Clusters of cases occurring Size: Local gatherings restricted to ≤10 people, individuals at high risk should remain safe at home	
Phase 1 Comply	<ul style="list-style-type: none"> <input type="checkbox"/> Ensure compliance with all local and national regulations, including for participation of individuals at high risk. <input type="checkbox"/> Ensure that the Board (including a medical professional, if possible) approves of the plan to return to activities.
Phase 1 Educate	<ul style="list-style-type: none"> <input type="checkbox"/> Designate a COVID response point person for the activity. <input type="checkbox"/> Prior to attendance, educate all participants on: <ul style="list-style-type: none"> ○ High-risk conditions and the risks of participation. ○ Requirement that anyone who has symptoms must stay home and to contact their own health provider if they are sick for further evaluation. ○ Requirements for in-person gathering, including PPE, hygiene, and physical distancing. <input type="checkbox"/> Following this education (e.g. video or handouts), all participants should acknowledge receiving education and confirm understanding of risks and participation procedures by signing <i>Participant Risk Acknowledgement Form</i> (See Supplemental material).
Phase 1 Prepare	<ul style="list-style-type: none"> <input type="checkbox"/> Have COVID screening protocol in place and coaches/staff/volunteers prepared to implement prior to or upon arrival at event (see additional guidance on screening protocol below). <input type="checkbox"/> Ensure that the venue is disinfected or sanitized, especially bathrooms. <input type="checkbox"/> Highly recommend use of outdoor, well-ventilated facilities. Where possible instruct participants to use single entry point (to allow for screening process) and separate exit. <input type="checkbox"/> No shared supplies such as towels and water/beverage bottles). <input type="checkbox"/> Minimize shared equipment. Equipment should never be used by one participant and then another without disinfection between uses. If equipment is to be used by multiple people during the activity, prepare a cleaning protocol and supplies to disinfect equipment between uses. <input type="checkbox"/> Remind participants to bring PPE and, if used, their own water bottle, towel, and equipment. Have facemasks/PPE available for those who are unable to bring. <input type="checkbox"/> Have reminders/signage posted that reinforces appropriate use of PPE relevant to the activity, hygiene and physical distancing.



<p>Phase 1 Prepare Continued</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Have hand sanitizer or handwashing facilities available at venue. <input type="checkbox"/> Know how to communicate potential cases to the local health authorities for testing and to the Special Olympics Accredited Program (within privacy laws). <input type="checkbox"/> Remind participants that during transport to activities, it is recommended that participants should wear a mask if on public transport, such as a bus, trolley, subway or if carpooling which includes someone not living with them. <input type="checkbox"/> If Special Olympics is providing transportation, participants must wear facemasks during travel.
<p>Phase 1 Activity</p>	<ul style="list-style-type: none"> <input type="checkbox"/> On arrival, conduct screening for ALL PARTICIPANTS (<i>see screening protocol below</i>). All participants with symptoms, a history of recent (last 14 days) COVID exposure, or temperature >100.4F/37.8C must not proceed to the activity <input type="checkbox"/> Continue to provide a safe participation option for those who are at high risk and thus unable to participate in person (e.g. virtual/training at home). <input type="checkbox"/> Activities must comply with distancing guidelines at all times. <ul style="list-style-type: none"> o No activities that involve direct or indirect contact (e.g., through a ball in the hand) can occur. Consider spacing for drills, etc. using visual guides such as tape, chalk, cones, etc. o Maintain physical distancing and avoid close contact (e.g. high fives, hugs, huddles) during and after activity o Wear facemasks throughout the activity, except during exercise, including upon arrival and departure <input type="checkbox"/> Coaches and volunteers should minimize changes in personnel--groups should stay together and not change. <input type="checkbox"/> Program staff must provide reminders to participants on standard infection prevention measures (e.g. frequent handwashing, avoid touching face, cover mouth when sneezing/coughing, etc.) at the start and throughout event. <input type="checkbox"/> No spectators should be allowed to congregate on the sidelines of activities. Individuals providing transportation for participants should remain in vehicles until sessions are over. If participants need assistance, caregivers may remain provided they also maintain distancing, hygiene and use PPE, including masks. <input type="checkbox"/> Maintain a list of all participants with contact details. This will allow for contact tracing should a participant be later diagnosed as having COVID-19 during the activity.



PHASE 2 Prevalence: Sporadic cases occurring Size: Local gatherings restricted to ≤50 people, individuals at high risk should remain safe at home	
Phase 2 Comply	<ul style="list-style-type: none"> <input type="checkbox"/> Ensure compliance with all local and national restrictions, including for participation of high-risk individuals. <input type="checkbox"/> Ensure that the Board (including medical professional, if possible) approves the plan for a return to activities.
Phase 2 Educate	<ul style="list-style-type: none"> <input type="checkbox"/> Designate a COVID response point person for the activity. <input type="checkbox"/> Prior to attendance, educate all participants on: <ul style="list-style-type: none"> ○ High-risk conditions and the risks of participation. ○ Requirement that anyone who has symptoms must stay home and to contact their own health provider if they are sick for further evaluation. ○ Requirements for in-person gathering, including PPE, hygiene, and physical distancing. <input type="checkbox"/> Following this education (e.g. video or handouts), all participants should acknowledge receiving education and confirm understanding of risks and participation procedures by signing <i>Participant Risk Acknowledgement Form</i> (See Supplemental material).
Phase 2 Prepare	<ul style="list-style-type: none"> <input type="checkbox"/> Have COVID screening protocol in place and coaches/staff/volunteers prepared to implement prior to or upon arrival at event (see additional guidance on screening protocol below). <input type="checkbox"/> Ensure that the venue is disinfected or sanitized, especially bathrooms. <input type="checkbox"/> No shared supplies such as towels and water/beverage bottles. <input type="checkbox"/> Minimize shared equipment. If shared equipment must be used, prepare a cleaning protocol and supplies to disinfect shared equipment between uses. <input type="checkbox"/> Remind participants to bring PPE and, if used, their own water bottle, towel, and equipment. Have facemasks/PPE available for those who are unable to bring. <input type="checkbox"/> Have reminders/signage posted that reinforces appropriate use of PPE relevant to the activity, hygiene and physical distancing. <input type="checkbox"/> Have hand sanitizer or handwashing facilities available at venue. <input type="checkbox"/> Know how to communicate potential cases to the local health authorities for testing and to the Special Olympics Accredited Program (within privacy laws). <input type="checkbox"/> Remind participants that during transport to activities, it is recommended that participants should wear a mask if on public transport, such as a bus, trolley, subway or if carpooling which includes someone not living with them. <ul style="list-style-type: none"> ○ If Special Olympics is providing transportation, participants must wear facemasks during travel.



<p>Phase 2 Activity</p>	<ul style="list-style-type: none"> □ On arrival, conduct screening for ALL PARTICIPANTS (<i>see screening protocol below</i>). All participants with symptoms, a history of recent (last 14 days) COVID exposure, or temperature > 100.4F/37.8C may not proceed to the activity □ Activities must comply with distancing guidelines at all times. <ul style="list-style-type: none"> ○ Indirect contact (e.g., through a ball in the hand) MAY resume. Direct contact may NOT resume yet. ○ Maintain physical distancing and avoid close contact (e.g. high fives, hugs, huddles). ○ Wear facemasks throughout the activity, except during exercise, including upon arrival and departure □ Coaches and volunteers should minimize changes in personnel---groups should stay together and not switch up if possible. □ Program staff must provide reminders to participants on standard infection prevention measures (e.g. frequent handwashing, avoid touching face, cover mouth when sneezing/coughing, etc.) at the start and throughout event. □ Participants may share equipment when circumstances require it (i.e. soccer ball on the field). If shared equipment must be used, prepare a cleaning protocol and supplies to disinfect shared equipment between uses. □ Maintain a list of all participants with contact details. This will allow for contact tracing should a participant be later diagnosed as having COVID-19 during the activity.
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PHASE 3 Prevalence: No reported cases. Size: No restrictions on size of mass gatherings and public facilities are open.	
Phase 3 Comply	<ul style="list-style-type: none"> <input type="checkbox"/> Ensure that local and federal restrictions allow holding of mass activities. <input type="checkbox"/> Ensure that Board (including medical professional, if possible) approve of plan to return to these activities. <input type="checkbox"/> If participants are traveling from different geographic areas, ensure all communities meet criteria of “no reported cases.” If not, provide virtual opportunities for those communities/individuals to join.
Phase 3 Educate	<ul style="list-style-type: none"> <input type="checkbox"/> Designate a COVID response point person for the activity. <input type="checkbox"/> Educate participants on standard hygiene practices. <input type="checkbox"/> Inform participants showing signs or symptoms of illness to stay home and contact their own health provider for evaluation.
Phase 3 Prepare	<ul style="list-style-type: none"> <input type="checkbox"/> Consider use of <i>Participant Risk Acknowledgement Form</i> (See Supplemental material). <input type="checkbox"/> Have reminders/signage posted and announced that reinforces hygiene practices. <input type="checkbox"/> Know how to communicate potential cases to the local health authorities for testing and to the Special Olympics Accredited Program (as per applicable privacy laws).
Phase 3 Activity	<ul style="list-style-type: none"> <input type="checkbox"/> No pre or onsite screening required.
<p>In Phase 3, it is recommended that Programs consider employing sub-phases that will allow for safe growth back to normal operations. For example, start with size <250 people, larger events that do not require overnight stays and/or are single sport events, rather than larger, or multiple sports occurring within one Games or venue. Additionally, there may be some sports that are returned to in this phase sooner than others.</p> <p>Development of a vaccine may result in further or revised guidance.</p>	



Risk Assessment and Risk Mitigation: Functional Area Considerations

Until COVID-19 is either eradicated, a vaccine is developed, or a cure is found, there is no way of completely eliminating the risk of infection, especially since many within the Special Olympics movement (with and without intellectual disabilities) are at greater risk for complications from COVID-19.



To help assess risk in returning to large-scale, mass gathering activities, consider using the [WHO Risk Assessment Tool](#) to determine the organizational risk of spread.

SPORT

Each sport will present a varying level of risk as well and determination of what modifications are feasible should be considered by the Program. However, if precautions and mitigating criteria (e.g. PPE, physical distancing, no shared equipment and/or disinfection, staggered starts, etc.) can be implemented, then most sports may be offered in some capacity (e.g. individual skills or drills or small internal scrimmage) during all phases of return. Many local, national and international sport associations have begun to offer guidance on how to safely return to play within their sport with mitigation. It is recommended that, in addition to the minimum precautions detailed within this document, Programs adhere to sport-specific precautions and mitigation in determining how to resume sport activities and guidance from sport authorities and associations.

SCHOOLS

With regards to activities in schools, Programs should follow the school's protocols and guidance in terms of when and how activities may resume. If school activities transition into Special Olympics community activities (e.g., the final competition/tournament is hosted by Special Olympics), then proper return to play protocol and necessary precautions for Special Olympics events, as outlined in this document, must be followed.

If the school or community partner's guidelines are less stringent or in conflict with the guidelines of Special Olympics, the following guidance applies:

1. The school/partner leaders/authorities should be informed of the Special Olympics guidelines for determining return to play.
2. The possibility of high-risk conditions in populations within the movement is conveyed to leaders/authorities.
3. Decision-making and options are provided to students with and without ID to provide for equal treatment.
4. Parents, guardians, or other caregivers of youth participants are provided with education on Special Olympics guidelines and relevant acknowledgements (e.g. video)
5. Youth participants involve in Special Olympics branded/sanctioned activities are given the option to opt out without penalty and are provided options for safe at home activities.

HEALTHY ATHLETES

Because of the nature of Healthy Athlete screening events which are often conducted indoors, may require close contact with decreased opportunity for physical distancing, and some interactions may be high risk without proper PPE and precautions in place, Programs should not resume Healthy Athlete screenings in person until Phase 1 and only with limited numbers and for select disciplines. Additional guidance will be forthcoming on safety precautions for returning to in-person Healthy Athlete events. Virtual health programming and education should be offered throughout all phases.



LEADERSHIP

Each leadership activity (e.g. Athlete Leadership workshops, Regional or Program leader meetings, Board meetings, Leadership Academy, Athlete Input Councils) will present a varying level of risk, and determination of what modifications are feasible should be considered by the Program. However, if precautions and mitigation for infection control (e.g. PPE, physical distancing, no shared equipment/supplies, and/or disinfection, staggered starts, etc.) can be implemented, then leadership activities may resume following the size limits for each phase (10 or fewer for Phase 1 and 50 or fewer for phase 2). If travel of participants occurs, the participants must be coming from an area in which they are in the same phase as the host site and follow local regulations on travel for both the originating location and the host location. Virtual programming and participation will be encouraged and available through all phases, as is feasible.

Onsite Screening Protocol for COVID-19

Regular education must be provided to all athletes, staff, volunteers, coaches, families and caregivers reminding them stay home if they have a fever or any signs and symptoms (cough, shortness of breath, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea). **Individuals must not participate in any activities if they are sick, for their own health and to reduce transmission of any infections to others. Instruct anyone who is ill to contact their own health provider for further evaluation.**

However, in addition to this education, before or prior to entering an activity, practice, event, or gathering (in phases 1-2), for **all participants, the Program:**

1. Must set-up a space for screening that maintains physical distance (6ft/2m) during screening.
2. Must ask the following questions (reinforced through visuals and verbally, such as a paper with icons):
 - a. In the last 14 days, have you had contact with someone who has been sick with COVID-19?
 - b. Have you had a fever in the last week (temperature of 100.4°F/37.8°C or higher)?
 - c. Do you have a cough and/or difficulty breathing?
 - d. Do you have any other signs or symptoms of COVID-19 (fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea)?
3. Should conduct onsite measurement of temperature using thermometer (preferred non-touch thermal scanning thermometer if possible).
 - Fever equals temperature of 100.4°F/37.8°C or higher.
 - If high, may re-test after 5 minutes to ensure temperature is accurate.
4. Must record all names, results and contact information and keep in case needed for contact tracing or reporting (*Template available in supplemental materials*).
 - a. If yes to any questions, participants **MUST** be isolated from the group (at minimum, kept 2m/6ft apart from others and with mask on), be sent home, and instructed to contact their healthcare provider for evaluation.
 - b. Participants who are found to have COVID-19 symptoms must wait 7 days after symptoms resolve to return to activity OR must provide written proof of physician clearance to Special Olympics to return earlier.
 - c. Participants who test positive for/have COVID-19 must provide written medical clearance before returning to sport and fitness activities.



Questions?

For local volunteers and participants, please contact your Accredited Program office for questions.

For Accredited Programs, please contact your Regional Office or Special Olympics, Inc. for questions.

For general questions to SOI, Regions may email COVID@specialolympics.org or for liability questions, email Legal@specialolympics.org.

ADDITIONAL MATERIALS

Additional materials available in supplemental documentation on the [Special Olympics Resources for COVID-19 website](#):

- a. Factsheet on Who is at Higher Risk
- b. *Participant Risk Assessment and COVID-19 Code of Conduct Form*
- c. *Screening and Tracking Report Form Template*
- d. *Virtual Games Participation Waiver* (for non-registered athletes)
- e. Signage and educational posters on precautions and COVID-19 symptoms
- f. Frequently Asked Questions and Additional Considerations
- g. Links to Sport Specific Recommendations on how to modify components
- h. *Healthy Athletes* Screening Specific Guidance
- i. Training and education materials for participants and coaches

As developed, resources will be added to the Special Olympics Resources website for COVID-19: <https://resources.specialolympics.org/return-to-activities-during-covid-19>