

**ELITE CLUBS NATIONAL LEAGUE**

# **RECOMMENDATIONS FOR RETURN TO COMPETITION**





## PURPOSE:

---

These Recommendations for Returning to Competition (the “Recommendations”) are provided to assist youth soccer clubs in safely and gradually resuming club-to-club soccer competition while reducing infection risk in the setting of the ongoing COVID-19 pandemic.

These Recommendations **do not supersede or replace any applicable local, state, regional or federal health guidelines or requirements**, which should be adhered to by all clubs. Each club should conform to the guidelines and requirements that apply to them and should routinely monitor any changes to these guidelines and requirements.

## CONTEXT:

---

Soccer presents its own inherent risks of disease transmission with respect to SARS-CoV-2, the novel coronavirus responsible for the COVID-19 pandemic, as well as other communicable diseases. Nonetheless, particularly with respect to COVID-19, member organizations will experience widely disparate levels of local infection and disease spread, local public health guidelines, available resources for testing and preventive measures, and training / competition environments, such that it is unrealistic to implement uniform guidelines applicable to all organizations.

These recommendations are intended to provide a return to competition that will be implemented at different times by organizations throughout the country based on local disease burden, local restrictions and gating criteria, local resources and club environmental characteristics.



## GENERAL RECOMMENDATIONS:

---

**General hygiene practices to reduce the risk of spread of infection:** As previously outlined in our “Recommendations on Return to Play in a Training Environment,” the following practices are recommended to mitigate transmission of communicable disease, including COVID-19.

- » Avoid touching your face.
- » Frequently wash hands with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer.
- » Cover mouth and nose (with arm or elbow, not hands) when coughing or sneezing and wash hands afterward.
- » Wear a face mask or covering at any time you are in public and unable to maintain social distancing.
- » Frequently clean commonly used surfaces (doorknobs, for example) with an antiseptic cleanser.
- » Avoid contact with other individuals (shaking hands, for example).
- » Maintain a distance of 6 feet between you and others.
- » Stay home if you feel sick and contact your health care provider.



## MEMBER ORGANIZATION RESPONSIBILITIES:

---

As previously outlined in our “Recommendations on Return to Play in a Training Environment,” each club should consider developing and distributing to their members a specific written plan regarding their practices to reduce risk of transmission within the soccer environment. This plan may include the following information:

- » The specific guidelines and steps that will be taken to reduce the risk of infection among players and staff in accordance with national and local restrictions, as well as the recommendations outlined within this documents.
- » Details regarding the following:
  - a. Identification of lead / contact person(s) for matters relating to COVID-19 in terms of prevention, event planning, case reporting, and dissemination of information;
  - b. Symptom monitoring and plans for medical evaluation of symptomatic staff and players;
  - c. Methods for dissemination of information regarding proper hygiene practices, social distancing requirements, and disinfection measures in all training environments;
  - d. Case reporting to club membership, club staff, and local health authorities.
  - e. Emergency response planning and coordination with local emergency medical services for all medical emergencies, including COVID-19.
- » Commitments to abide by national and local recommendations and restrictions regarding hygiene, social distancing, limits on the size of group gatherings, and any other means of reducing the spread of COVID-19.
- » Clubs should share these guidelines with its membership publicly (on the club website, for example) and post reminders regarding hygiene and social distancing at its facilities and training grounds. Examples of information from the CDC can be found here (<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention-H.pdf>) and here (<https://www.cdc.gov/coronavirus/2019-ncov/downloads/stop-the-spread-ofgerms-11x17-en.pdf>)



## RETURN TO COMPETITION RECOMMENDATIONS:

---

Returning to competition should only occur after the club has followed a progressive return to training process, all with the priority of providing a safe competition environment for players.

As previously outlined in our “Recommendations on Return to Play in a Training Environment,” it is recommended that competition begin at least 6 weeks after the initiation of a phased return to training, even if local guidelines regarding social distancing and group gatherings would otherwise allow for competition sooner.

This is intended to account for the risk of both COVID-19 resurgence as well as the risks of overtraining and injury due to a rapid return to play. This timeline is intended to prioritize athlete health and well-being, including but not limited to the risks presented by COVID-19.

**These Recommendations do not *supersede* national or local laws or requirements. Member clubs should continually abide by all applicable restrictions in their community and should comply with all such guidelines as applicable.**



## PHASE 5: RETURN TO COMPETITION

---

*(\*\* Phases 1-4 are outlined in the Return to Training Recommendations)*

**Environmental Context.** Competition facilities are open, any local restrictions allow for a gathering size that would accommodate all players, coaches, referees, facility staff and spectators in attendance, and there are otherwise no local guidelines or restrictions that would preclude travel to, or participation in, youth soccer competition. (Clubs may consider limiting spectator attendance in one way or another if open attendance may result in numbers above gathering size limitations.)

- » Any individual reporting or demonstrating symptoms of illness at any point should be removed from competition (or restricted from competition) and should seek guidance from his or her healthcare provider before returning to soccer activities.

**Prior to participation, staff should obtain verbal confirmation from each participating player that:**

- » Each player, coach, and referee should check his/her temperature at home, and refrain from participation if he or she has a fever ( $\geq 100.4$  degrees F).
- » All coaches, players, referees, and other attendees should be able to ensure that:
  - a. He/she has not had any close contact with an individual with COVID-19 (see Appendix C);  
**Exception:** An asymptomatic individual who is fully vaccinated and/or has been diagnosed with COVID-19 in the last 3 months (but not within the last 14 days) does not need to be restricted from participation (see Appendix C).
  - b. He/she has not had a documented case of COVID-19 in the last 14 days;
  - c. He/she is not currently demonstrating or suffering from any ill symptoms (see Appendix A).
  - d. Any individual who is unable to confirm these criteria should be restricted from participation and contact both their club and their healthcare provider.



- » These criteria should be confirmed verbally on arrival as follows:
  - a. Each participating player should confirm that they have met the above requirements of no known symptoms or exposures with the lead coach of their team.
  - b. The lead coach from each participating team should confirm with the lead coach of the opposing team that all participating players and staff have met the above requirements of no known symptoms or exposures.
  - c. All referees should confirm individually with both lead coaches that all referees have met the above requirements of no known symptoms or exposures.
  - d. Any individual who is unable to confirm these criteria should be restricted from participation and contact their healthcare provider.

## **During Competition:**

- » Soccer play can be conducted as normal with the following exceptions:
  - a. Team pre-game and post-game handshakes should be avoided.
  - b. Handshakes or contact in substitution should be avoided.
  - c. Physical contact should be avoided during celebrations and post-game activities.
  - d. Social distancing should be ensured between players and coaches on the sideline during play and during any individual or group conversations throughout the competition (pre-game, half-time, post-game).
  - e. No player, coach, or spectator should violate social distancing guidelines with a referee at any time.
  - f. Player pass cards should be handled only by the coach of the team. (Referees should be shown the player pass cards in check-in, but not handle the cards.) Referees should track player substitutions with their own notes, and should not collect player pass cards.



- g. Staff pass cards should only be handled by the staff member to whom it belongs. (Referees should be shown the staff pass card in check-in, but not handle the cards.) Referees should note the staff passcard was checked on the game report, and add all sideline staff member names to the report.
  - h. Use of masks or cloth facial coverings by staff and players on the sideline should be guided by local or national guidelines regarding public use.
  - i. Players on the sideline or bench should remain socially distanced (6 feet apart) – including during pre-game, half-time, and post-game discussions.
  - j. International walk-outs should not be held.
- » All attendees should always maintain social distancing guidelines during arrival and departure from competition.
  - » Spectators should remain off the field, practice proper social distancing and utilize masks or cloth facial coverings throughout the event in accordance with local and national guidelines.
  - » In the event of an injury, staff may assess and facilitate management of the injured individual in accordance with proper first aid management. Family members and any on-site healthcare providers may participate in injury management as necessary, but others should maintain proper social distance.
  - » It is recommended that participating clubs keep an attendance record of coaches and staff for all competitions to allow for optimized case reporting and contact tracing. (**NOTE:** ECNL rules require all match-reports to be submitted to the ECNL office digitally. Each match report should include all players and staff that were in attendance and on the bench.)

## **Post Competition:**

- » Clubs should have contact information for the lead staff member from each club that they have competed against prior to departure from the facility. Ideally this should be a designated staff member responsible for COVID-19 related matters within each club as outlined above.



- » Clubs should communicate with the referee assignor (or other appropriate individual) to ensure that referees for each game are documented and the referee assignor has contact information for all referees.
- » Any individual with a confirmed case of COVID-19 should notify their respective clubs immediately.
- » Any referee with a confirmed case of COVID-19 should notify any clubs involved in competitions worked by that individual within the 48 hours prior to symptom onset or 48 hours prior to a positive test in an asymptomatic individual.
- » Any club notified of a confirmed case of COVID-19 in a player, staff member, or referee should notify any other organization involved in competition with that individual in the 48 hours prior to symptom onset or 48 hours prior to a positive test in an asymptomatic individual.

### **Equipment:**

- » Team areas should be separated from spectators and each other so that teams and attendees will not touch the same surfaces (benches, for example).
- » Training vests can be shared between team members, but this should be minimized or eliminated if possible.
- » Players and referees should bring their own equipment (hand sanitizer, water bottle, towels, etc.) that should not be shared between individuals.

### **Facilities and Training Grounds:**

- » Member organizations and host facilities should have procedures in place for the management of medical emergencies during any event, including but not limited to COVID-19.
- » Hand sanitizer should be readily available at all training grounds and facilities. Each coach, player and referee should have their own hand sanitizer.
- » All surfaces that individuals may contact when entering and leaving the facility (gates, doorknobs, etc.) should be disinfected prior to, regularly during, and at the end of the event. When possible, gates / doors should remain open to reduce contact with potentially contaminated surfaces.



## APPENDIX A:

---

### Symptoms of COVID-19 Infection:

Individuals with COVID-19 can exhibit symptoms 2-14 days after exposure, ranging from mild to lifethreatening.

The most common symptoms associated with infection include:

- » Fever (  $\geq 100.4$  degrees F)
- » Cough
- » Shortness of breath
- » Sore throat
- » Congestion
- » Nausea and vomiting
- » Diarrhea
- » Headache
- » Muscle / joint pain
- » Sudden loss of taste or smell
- » Chills



Given the accumulation of evidence over the last several months and updated information from the US Centers for Disease Control and Prevention, we are making the following updates to the Appendices in our Return to Training and Return to Competition Recommendations.

## APPENDIX B:

---

### **Return to Play Following Suspected or Diagnosed COVID-19 Infection**

These recommendations are intended to guide decision-making regarding players or staff with a diagnosed or suspected COVID-19 infection in order to reduce the risk of disease transmission. If local guidelines recommend or require a longer period of restriction, those should be followed.

Symptomatic player/staff with *laboratory-confirmed* COVID-19 infection:

- » Cannot attend club events until:
  - At least 24 hours have passed since resolution of fever (defined as  $\geq 100.4$  degrees F) without the use of fever-reducing medications and other symptoms have resolved (exception is loss of taste or smell which may persist for much longer), AND
  - At least 10 days have passed since symptoms first appeared



## APPENDIX B CONTINUED:

---

Symptomatic player/staff with *suspected* COVID-19 infection:

» Cannot attend club events until:

- At least 24 hours have passed since resolution of fever (defined as  $\geq 100.4$  degrees F) without the use of fever-reducing medications and other symptoms have resolved, AND
- Has had a negative result from a diagnostic COVID-19 RT-PCR or antigen test

**OR:**

- At least 24 hours have passed since resolution of fever (defined as  $\geq 100.4$  degrees F) without the use of fever-reducing medications and other symptoms have resolved, AND
- At least 10 days have passed since symptoms first appeared

Player/staff with laboratory-confirmed COVID-19 who have not had any symptoms:

» Cannot attend club events until:

- 10 days after the date of their first positive diagnostic COVID-19 test AND no symptoms have developed since that time.
- If symptoms develop, then management should be guided as above for symptomatic individuals.



## APPENDIX C:

---

### Return to Play Following Exposure to a Case of COVID-19

These recommendations are intended to guide decision-making regarding players or staff following exposure to an individual diagnosed with COVID-19 in order to reduce the risk of disease transmission. If local guidelines recommend or require longer period of quarantine, those should be followed.

An asymptomatic, fully vaccinated player or staff member who has been exposed to an individual diagnosed with COVID-19 (see definition of exposure below) does not need to be quarantined, but should be monitored closely for the development of any symptoms for the next 14 days, and should consider obtaining a diagnostic test 3-5 days after exposure.

Any asymptomatic, unvaccinated player or staff member who has been exposed to an individual diagnosed with COVID-19 (see definition of exposure below) should be quarantined under one of the following two circumstances:

- » For at least 10 days following the last exposure if no COVID-19 diagnostic test results are available,

**OR**

- » For 7 days if a negative diagnostic COVID RT-PCR or antigen test result is obtained on day 5 or later
- » **EXCEPTION:** *Individuals who have tested positive for COVID-19 within within the 3 months prior to exposure (but not the past 14 days) do not need to quarantine provided they remain asymptomatic. If they develop symptoms at any time they should follow the guidance for symptomatic individuals regardless of prior infection.*



## APPENDIX C CONTINUED:

---

Quarantined individuals should be closely monitoring for symptom development and follow the recommendations for symptomatic individuals if they develop any symptoms at any time. Otherwise, if still asymptomatic at the end of the quarantine period above, they can return to participation.

In general, you need to be in close contact with an individual to contract the disease. In this case, **exposure means being within 6 feet of an individual with COVID-19 for 15 minutes or more within a 24 hour period.** This is irrespective of whether either of the individuals were wearing a mask. This includes exposure at any time during the 48 hours prior to symptom development in the infected individual, or prior to a positive test in an asymptomatic individual with COVID-19. Any period of quarantine should start from the date of last close contact with the infected individual.

# THANK YOU

WE ARE IN THIS FIGHT TOGETHER

---

**THIS IS AN UNPRECEDENTED TIME THAT WE ARE ALL  
MANAGING TOGETHER.**

**SPORTS ARE EXTRAORDINARILY IMPORTANT FOR YOUNG  
ATHLETES FOR MENTAL, PHYSICAL AND  
SOCIAL REASONS.**

**RETURNING TO SPORT WHILE MINIMIZING THE RISK OF  
COVID-19 INFECTION TAKES CAUTION, COOPERATION  
AND INNOVATION.**

**TOGETHER, WE WILL GET THROUGH THIS.**

**WE ARE MORE THAN A LEAGUE.**

