

Appendix W

Protocol for Youth Recreational Sports

Last Updated 2-28-22

Below is a summary of requirements and best practices for youth sports leagues (including school sports teams) based in the City of Long Beach to enhance safety for participants, coaches, referees, and communities, and lower the risk of COVID-19 transmission within their teams. These requirements are strongly recommended for teams or players coming to Long Beach from other jurisdictions for competitions.

Routine screening testing is required as described below, presuming adequate COVID-19 diagnostic testing capacity and supplies. The screening testing requirements may be modified, based on the availability of and access to testing. In addition, these requirements remain in effect even as the the Long Beach Department of Health and Human Services reports low rates of community transmission.

In addition to this information, please remember:

- Youth sports leagues must follow the City of Long Beach [Health Officer Order](#) and the City of Long Beach [COVID-19 Exposure Management Plan Guidance for Youth Recreational Sports Programs](#).
- Youth sports leagues that employ coaches, referees, or other support staff must also adhere to the Cal/OSHA [COVID-19 Prevention Emergency Temporary Standards](#) (ETS).
- Mega Events must comply with the requirements in the State Health Officer Order which may be found at <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Beyond-Blueprint-Framework.aspx>.

- Youth sports leagues operating concession stands must have a Health Permit from the Long Beach Department of Health and Human Services, Bureau of Environmental Health (www.longbeach.gov/eh) and should review and follow Los Angeles County Department of Public Health [Best Practice Guidance for Food and Beverage Service](#).
- K-12 extracurricular sports activities are subject to the requirements of the [CDPH K-12 Guidance](#), which may be found at <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/K-12-Guidance-2021-22-School-Year.aspx>, whether they occur on a school site or during school hours.
- Other non-school based youth recreational sports teams must follow CDPH Face Covering Guidance <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/guidance-for-face-coverings.aspx> mask rules for participants, coaches, staff and spectators.

Vaccinate

- It is strongly recommended that all student athletes ages 5 and older, coaches and team staff are fully vaccinated. Vaccination against the virus that causes COVID-19 is available for everyone 5 years of age and older. Vaccination is the primary strategy to reduce the burden of COVID-19 disease and protect all members of the community. Having all athletes and staff in your youth sports league fully vaccinated and receive booster doses as soon as they are eligible will greatly decrease the risk of transmission of the virus among teammates and between teams, and will provide excellent protection against severe illness, hospitalization, and death. It will also decrease disruption in team activities, because fully vaccinated individuals are not required to quarantine if they are close contacts to a case

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of COVID-19, as long as they remain asymptomatic and continue to test negative.

- Youth sports leagues, team organizers, or coaches must maintain records of all athletes' and staff/coaches'/volunteers' vaccination status and weekly COVID-19 testing compliance. They do not need to keep a copy of the proof of full vaccination shown nor copies of test results.

Screen for symptoms and isolate

- Ask participants and families to self-screen for COVID-19 symptoms prior to attending youth sports activities.
- Post [signage](#) to remind everyone who enters your establishment that they should NOT enter if they have symptoms of COVID-19 or if they are under isolation or quarantine orders.
- Youth sports programs must exclude or isolate any participant, coach, or spectator that is showing symptoms of COVID-19.
 - Take action to isolate participants who begin to have COVID-19 symptoms during youth sports activities, from other participants, coaches, and spectators.
 - [Notify LBDHHS officials](#), staff, and families immediately of any confirmed case of COVID-19.
 - A 7-day suspension of all team activities will be required of any youth sports team in which there has been an outbreak of 4 or more epidemiologically linked cases over a 10-day period. Individual conditioning and skill building may continue during the suspension period as long as everyone on the team complies fully with any individual isolation or quarantine orders that apply.

Reduce crowding, especially indoors

- If possible, hold youth sports activities outdoors where the risk of COVID-19 transmission is much lower.
- If youth sports activities must be held indoors, take steps to reduce the number of participants, coaches and spectators in any indoor area.
- Physical distancing is an infection control best practice that may be implemented as an additional safety layer to reduce the spread of COVID-19. During practices, encourage activities that do not involve sustained person-to-person contact between participants and/or coaching staff and limit such activities in indoor settings. Instead, consider focusing on skill- building activities.
- Consider limiting the number of participants who visit the restroom or locker room at any given time.
- Non-athletic team events, such as team dinners or other social activities, should only happen if they can be held outdoors with distancing.

Routine Screening Testing for COVID-19

- The virus that causes COVID-19 may infect any member of the youth sports league, even fully vaccinated members, although it is more likely to infect unvaccinated persons. Any infected person can potentially transmit the virus to others. One strategy to accurately identify infected individuals and then quickly isolate them is routine periodic screening testing for COVID-19 with a Nucleic Acid Amplification Test (NAAT) such as PCR, or an Antigen (Ag) test. The CDC recommends that all unvaccinated participants in any youth sports test at least weekly in communities experiencing high rates of transmission. General information about testing in Long Beach can be found at

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www.longbeach.gov/covid19testing. PCR, Antigen and Serology fact sheets can be found [here](#).

- Persons who show proof that their COVID-19 vaccination status is up-to-date¹ or that they have recovered from/completed isolation for laboratory confirmed COVID-19 within the past 90 days should not be included in periodic COVID-19 screening testing if the person is asymptomatic. Screening for persons not up-to-date who were previously infected with COVID-19² should start 90 days after the first day of symptoms or from the day of collection of first positive test (if they were asymptomatic).
- Whenever a confirmed case is identified on any of your youth sports teams, follow instructions listed in the [Exposure Management Plan for Youth Sports](#) and ensure that all unvaccinated close contacts quarantine along with any symptomatic vaccinated close contacts.
- Youth sports leagues, team organizers, or coaches should maintain records of all athletes' and staff/coaches'/volunteers' vaccination status and weekly COVID-19 testing compliance and any testing done after having exposure to a COVID-19 case. They do not need to keep a copy of the proof of full vaccination shown nor copies of test results.
- At the current time, the following testing requirements apply to all participating athletes and staff/coaches/volunteers. Persons who show proof that their vaccination status is up-to-date against COVID-19 and are not playing unmasked nor with unmasked teammates indoors or that they have recovered from/completed isolation for laboratory confirmed COVID-19 within the past 90 days should not be included in routine COVID-19 screening testing if the person is asymptomatic. Screening for persons whose vaccination status is not up-to-date who were previously infected with COVID-19 should start 90 days after the first day of symptoms or the day of collection of first positive test. See Table below for examples of sports in different risk categories.

Indoor Moderate- or High-Risk Sports

- A weekly negative test result is required for all participants who are not up-to-date¹ with their vaccinations and who are participating in indoor Moderate- or High-Risk sports, including children of all ages who are playing and staff/coaches/volunteers.;** weekly school testing fulfills this obligation.

¹ The following are acceptable as proof of "up-to-date" vaccination status: 1) A photo identification of the attendee and 2) their vaccination card (which includes name of person vaccinated, type of COVID-19 vaccine provided and the date the last dose was administered) OR a photo of the attendee's vaccination card as a separate document OR a photo of the attendee's vaccine card stored on a phone or electronic device OR documentation of full vaccination from a healthcare provider (which includes name of person vaccinated and confirms that the attendee is fully vaccinated against COVID-19). For the purposes of this Protocol, people are considered "up-to-date" against COVID-19:

- 2 weeks or more after their second dose in a 2-dose COVID-19 vaccine series, such as the Pfizer or Moderna, and a booster vaccine if it has been at least 5 months after the primary series, or
- 2 weeks or more after a single-dose COVID-19 vaccine, such as Johnson & Johnson (J&J)/Janssen and a booster vaccine if it has been at least 5 months after the primary series, or
- 2 weeks or more after completion of COVID-19 vaccine series listed for emergency use by the World Health Organization (e.g., AstraZeneca/Oxford) and a booster vaccine if it has been at least 5 months after the primary series. See WHO's [website](#) for more information about WHO-authorized COVID- 19 vaccines.

² The following is acceptable as proof of previous COVID-19 infection (previous positive viral test result) and completion of isolation within the last 90 days: a photo identification and a paper copy or digital copy on their phone or electronic device of their positive COVID-19 antigen or PCR test taken within the last 90 days, but not within the last 10 days. Person must have completed their [isolation requirement](#) prior to participating.

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- If a team participating in Indoor Moderate- or High-Risk Sports determines that requiring all players to remain masked is not practicable, and players elect to participate without their masks as a result, ALL team members, regardless of vaccination status, are required to have screening test for COVID-19 performed at least weekly.

Outdoor Moderate- or High-Risk Sports

- Outdoor Moderate- or High-Risk Sports for youth ages 12 and older and staff/coaches/volunteers. A weekly negative test result is required for all participants whose vaccine status is not up-to-date, including youth ages 12 and older who are playing and staff/coaches/volunteers;** weekly school testing fulfills this obligation.
- No screening testing is required for children under age 12 playing Outdoor Sports.** Where possible, in alignment with the CDC recommendation for communities experiencing high transmission, weekly testing for all unvaccinated participants in sports is recommended; weekly school testing fulfills this recommendation.
 - If team players under age 12 are regularly transported via buses/vans, a weekly negative test result is recommended; weekly school testing fulfills this obligation.
 - If children under age 12 are participating in multi-county, multi-day competitions of Moderate- or High-Risk Outdoor sports, a negative test within a 3-day window period prior to their first game at the competition is recommended.³
- Youth participating in outdoor sports whose vaccination status is up-to-date are not required to test weekly unless there is a positive case among players, coaches and/or staff. If there is a positive case, all players, staff/coaches/volunteers (regardless of vaccination status) are required to have a weekly negative test result for two weeks from exposure to the case and must test negative prior to competitions.

Ventilate

- If youth sports activities are taking place indoors, make sure your building's Heating, Ventilation, and Air Conditioning (HVAC) system is in good, working order.
- Consider installing portable high-efficiency air cleaners, upgrading the building's air filters to the highest efficiency possible, and making other modifications to increase the quantity of outside air and ventilation in all working areas.
- When weather and playing conditions allow, increase fresh outdoor air by opening windows and doors. Consider using fans to increase the effectiveness of open windows—position window fans to blow air outward, not inward.
- Decrease occupancy in areas where outdoor ventilation cannot be increased.
- If your team or youth sports league utilizes transport vehicles, such as buses or vans, it is recommended to open windows to increase airflow from outside when it is safe to do so.
- See State [Interim guidance for Ventilation, Filtration, and Air Quality in Indoor Environments](#) and CDC [Ventilation in Schools and Child Care Programs](#) page.

Support handwashing

³ The 3-day window period is the 3 days before the inter-team competition. A 3-day timeframe instead of 72 hours provides more flexibility to the athlete or staff member. By using a 3-day window period, test validity does not depend on the time of the competition or the time of day that the test was administered. For example, if the competition is at 1pm on a Friday, the athlete or staff member could participate in the competition with a negative test that was taken any time on the prior Tuesday or after.

- Place handwashing stations or hand sanitizer at entry and outside communal bathrooms with signage promoting use.
- Encourage frequent handwashing.

Communicate

- Post [signage](#) so that visitors who are entering your facility are aware of your policies, including indoor face mask requirements.
- Use your online platforms to communicate your COVID-19 safety policies to the public.

Take additional precautions around team travel and multi-team tournaments

- When traveling in vehicles with other members of the youth sports team not from the same household, wear masks during the entire trip and keep windows open. This includes when carpooling in family vehicles.
- When traveling overnight, it is recommended that team members not from the same household sleep in separate rooms and keep masks on whenever visiting other members' hotel rooms.
- Socializing with other teams is strongly discouraged.

Understanding the Risks Associated with Sports during the Pandemic

Sports and physical activities that allow for 6-8 feet between other competitors, like golf or singles tennis, are going to be less risky than sports that involve frequent close contact, like basketball or wrestling. Those where athletes do not share equipment, like cross country, will likely be less risky than which have shared equipment, such as football. Those limited exposure to other players may be a safer option. A sprint in a track race, for example, may be less risky than sports that put someone in close contact with another player for an extended period of time, like an entire half of a game.

The specific location where athletes train, practice and compete also impacts risk. Choose outdoor venues for sports and classes whenever possible. COVID-19 is more likely to spread in indoor spaces with poor ventilation. Indoor sports and activities will likely present an increased risk of transmission, especially if the sport or physical activity also involves close contact, shared equipment, and more exposure to other players, such as basketball.

The more people someone interacts with, the greater the chance of COVID-19 exposure. So small teams, practice pods or classes that stay together, rather than mixing with other teams, coaches, or teachers, will be a safer option. This will make it easier to contact individuals if there is an exposure of COVID-19.

Staying within your community will be safer than participating on travel teams. Traveling to an area with more COVID-19 cases could increase the chance of transmission and spread. Travel sports also include intermixing of players so athletes are generally exposed to more people.

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Table 1. Examples of Sports Stratified by Risk Level Depending on Degree of Participant Contact

Low Risk	Moderate Risk	High Risk
<ul style="list-style-type: none"> • Archery • Badminton (singles) • Band • Biking • Bocce • Bowling • Corn hole • Cross country • Curling • Dance (no contact) • Disc golf • Drumline • Equestrian events (including rodeos) that involve only a single rider at a time • Golf • Gymnastics • Ice and roller skating (no contact) • Lawn bowling • Martial arts (no contact) • Physical training (e.g., yoga, Zumba, Tai chi) • Pickleball (singles) • Rowing/crew (with 1 person) • Running • Shuffleboard • Skeet shooting • Skiing and snowboarding • Snowshoeing • Swimming and diving • Tennis (singles) • Track and Field • Walking and Hiking 	<ul style="list-style-type: none"> • Badminton (doubles) • Baseball • Cheerleading • Dance (intermittent contact) • Dodgeball • Field hockey • Flag Football • Kickball • Lacrosse (girls/women) • Pickleball (doubles) • Squash • Softball • Tennis (doubles) • Volleyball 	<ul style="list-style-type: none"> • Basketball • Boxing • Football • Ice hockey • Ice Skating (pairs) • Lacrosse (boys/men) • Martial Arts • Roller Derby • Rugby • Rowing/crew (with 2 or more people) • Soccer • Water polo • Wrestling

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